PAIN RELIEF FOUNDATION

England & Wales · Charity number 1156227

Details

Other names	PRF, PAIN RESEARCH INSTITUTE
Status	Registered
Legal form	CIO
Registered	2014-03-17
Register	View on the Charity Commission register

Contact

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Activities

Objects: THE OBJECTS OF THE CIO ARE THE ADVANCEMENT AND PROMOTION OF ALL TYPES OF MEDICAL RESEARCH AND IN PARTICULAR THE RELIEF OF PAIN AND ALL PAINFUL CONDITIONS OF EVERY TYPE WHATSOEVER AND HOWSOEVER CAUSED AND TO DISSEMINATE THE RESULTS OF ANY SUCH RESEARCH THROUGHOUT THE WORLD.

Activities: SEEKING TO FIND THE CAUSES OF HUMAN CHRONIC AND OTHER PAINSEEKING TO UNDERSTAND THE MECHANISMS OF HUMAN CHRONIC AND OTHER PAINCONDUCTING RESEARCH INTO HUMAN CHRONIC AND OTHER PAINPROVIDING GRANTS FOR RESEARCH INTO HUMAN CHRONIC AND OTHER PAINSEEKING TO FIND IMPROVED METHODS OF TREATING HUMAN CHRONIC PAINEDUCATING HEALTH PROFESSIONALS AT ALL LEVELS INTO THE TREATMENT OF HUMAN CHRONIC PAIN

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Classification

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

Geography

- Throughout England And Wales

Finances

Period end	Income	Expenditure	Assets	Employees
2025-04-05	£246,234	£372,097	-	-
2024-04-05	£350,863	£499,194	-	-
2023-04-05	£511,078	£496,536	£2,890,201	4
2022-04-05	£278,121	£445,993	-	-
2021-04-05	£198,255	£395,102	-	-

Trustees

Name	Role	Appointed
DAVID CAIN	Chair	2014-02-17
Dr CHRIS WELLS		2015-12-15
Dr MANOHAR SHARMA		2014-06-03
Dr TIMOTHY PAUL NASH		2014-02-17
Geraldine Thompson		2023-09-12
JUDITH MARY DALEY		2015-12-15
PETER FELL		2016-03-17
PROFESSOR MICHELLE BRIGGS		2018-10-10
Professor Francis McGlone		2020-03-10
Professor Paul Richard Eldridge		2014-03-17

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PAIN RELIEF FOUNDATION

England & Wales - Charity number 1156227

Accounts

BAMM RELIEF FOUNDATION



Clinical Sciences Centre

University Hospital Aintree

Lower Lane

Liverpool

L9 7AL

Established as a Charitable Incorporated Organisation on 17th March 2014

Originally Established under a Deed of Trust
Dated 30th March 1979

Annual Report and Accounts

For year ended 5th April 2025

Registered Charity No.1156227

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PATRONS

Professor Sir Michael Bond, FRSA, FRSE, FRCPsych, FRCPGlas, FRCSE
Dame Lorna EF Muirhead, DCVO, DBE, CStJ, FROG
Mr. R. N. S. Bigland

TRUSTEES

Mr. D. Cain, FRSA, FIoD, MHSM, DipHSM, (Chairman)
Professor Michelle Briggs PhD RGN
Miss J Daley, LLB (Hons)
Professor P. Eldridge, MA, MChir, FRCS
Mr. P. Fell, MA *(Cantab), FRSA (Deputy Chairman/Treasurer)*
Professor Francis McGlone BsC (Hons), PhD
Dr. T Nash, MB, BS, Dobst RCOG, FRCA, FFPMRCA
Mr. M. Sharma, MBBS, MD, FRCA, MSc, FFPMRCA
Ms G Thompson MSc Dip AHCS MIMI
Dr. J. C. Wells, MB, *ChB, LRCP, MRCS, LMCC, SRCA, SIPP*
Dr. J. R. Wiles, MBBS, FRCA, FFPMRCA

CHARITY MANAGER

Mrs J Williams

SCIENTIFIC SUB-COMMITTEE

Dr U Allam, BSc, MPHe, MRCP(UK)(London), PhD
Dr Jamie Burgess , PhD
Miss. A. Bradshaw
Prof J Campbell PhD MSc BSc CStat CPhys FRCOT FRSB
Dr. N. Goodson, FRCP, PhD
Dr K Heron, MSc, PhD, DClinPsych
Dr A Marshall MB ChB, BSc, FRCP, PhD
Nr H Neiland
Dr. H. Poole, PhD, CPsychol
Miss. C. Staunton (Chair)

EDUCATION SUB-COMMITTEE

Ms Alison Bradshaw
Dr M Gupta MBBS, FRCA, FFPMRCA
Dr K Matthews, Consultant Clinical Psychologist
Dr K. Pushparaj MBBS, MD, FFPMRCA
Dr. M. Sharma, MBBS, FRCA, MD, FFPMRCA, MSc
Mr. John Tetlow
Dr. J. R. Wiles, MB, BS(Lond), FRCA (Chair)
Dr. J. C. Wells, MB, ChB, LMCC, FRCA

REGISTERED OFFICE

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University Hospital Aintree
Lower Lane
Liverpool
L9 7AL

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M3 2DF

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Abensons Solicitors
102 Allerton Road,
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Merseyside.
L18 2DG

INVESTMENT ADVISORS

Rathbone Investment Management Ltd.,
Port of Liverpool Building,
Pier Head,
Liverpool,
Merseyside.
L3 1NW

TRUSTEES' REPORT 2025

It is my pleasure as Chairman of the Pain Relief Committee on behalf of the Trustee Committee to introduce to you our Annual Report for the year ended 5th April, 2025.We are proud to have gained a reputation as Academic leaders in chronic pain research and provide facilitated support to Pain Specialists, General Practitioners, Patients and those who support them as Carers and friends.

The past year has been busy with yet more achievements with our research portfolio work, and we thank our Partners in the Liverpool University particularly Professor Pete Clegg for his help and support. We are as always so engaged with our Clinical and Academic Colleagues at the Walton Centre NHS Trust and as the founder Chief Executive of that Trust I am pleased that 34 years later we continue to have excellent collaboration. Our activities extend to numerous research publications, grant applications and the ever more popular specialist conference and education activities attracting interest in Globally and particularly in Europe.

As always i want to put on record the appreciation of the Trustee Committee to Professor Andreas Goebel and Dr Andy Marshall our designated Senior Research Fellows who are leading experts and academics for the Pain Relief Foundation.

The Charity is led by Julie Williams our Charity Manager who has prepared the detail of this report and continues with her small team to manage our resources and promote our interests especially promoting much needed donations, legacies and grant applications. We are particularly pleased with our profile in our social media and communications engagements.

Please read this report and do not hesitate to contact us if you are able to assist, promote or otherwise help us on our journey to advance chronic pain research

We Remain strong in our Fight Against Chronic Pain Despite Economic Woes

Recognising the difficult economic landscape, the Pain Relief Foundation has proactively adopted a strategic approach rooted in flexibility and fiscal prudence. These strategies are crucial in ensuring the charity can optimize its resources, maintain long-term financial stability, and continue to make a tangible impact in the field of chronic pain research.

At the heart of the Pain Relief Foundation's mission lies a firm commitment to funding vital research. Recognising that scientific breakthroughs are the key to developing effective treatments and ultimately improving the quality of life for chronic pain sufferers, the Foundation has prioritised research support even amidst adversity. This dedication has already contributed to groundbreaking discoveries and the advancement of promising research programs, offering hope for the future of pain management.

Beyond simply providing funding, the Pain Relief Foundation understands the importance of nurturing talent and fostering collaboration within the pain management community. The organisation actively supports pain researchers and healthcare professionals, emerging talent, promoting collaborative projects, and facilitating the dissemination of knowledge that can directly lead to improved patient care and treatment strategies.

Despite the myriad challenges facing the healthcare system and the economic uncertainties, the Pain Relief Foundation remains resolute in its determination to confront chronic pain head-on. The organisation firmly believes that continued investment in research holds the key to reducing the pain, suffering, and isolation associated with this often-overlooked condition. The Pain Relief Foundation's is entirely funded by the generosity of its supporters. The charity relies on public donations to fuel groundbreaking research and ultimately creating a world where no one has to endure the burden of chronic pain. Your support can directly contribute to finding effective treatments and improving the lives of countless individuals.

With continued support and dedication, the Pain Relief Foundation is filled with optimism and determination. By embracing inclusivity, diversity, and innovation, the organisation aims to work to create a future where people with chronic pain can live fulfilling and empowered lives, free from the limitations imposed by their condition.

What is Chronic Pain: More Than Just a Bad Day?

Pain is a universal human experience. It's a vital signal, alerting us to potential harm and prompting us to take action to protect ourselves. But what happens when pain lingers long after the initial injury has healed or when there's no clear cause at all? This is where chronic pain comes in, transforming from a protective mechanism into a debilitating and persistent condition.

Chronic pain is defined as pain that persists for more than three months. This timeframe is crucial because it generally exceeds the expected healing time for most injuries or illnesses. Unlike acute pain, which serves as a warning sign and typically resolves with treatment, chronic pain becomes a complex and often frustrating condition that can profoundly impact a person's life.

Chronic pain is more than just a prolonged case of acute pain. It's often considered a disease in itself, involving complex interactions between the nervous system, brain, and psychological factors. The initial cause of the pain might be a specific injury or illness, but over time, the nervous system can become hypersensitive, leading to persistent pain even when the original injury has healed.

The causes of chronic pain are varied and often difficult to pinpoint. Some common contributing factors include underlying Medical Conditions: Arthritis, fibromyalgia, neuropathy, and back problems are frequently associated with chronic pain. Injuries, while most injuries heal, some can lead to chronic pain conditions, particularly if nerves are damaged. Surgery, while surgery can alleviate pain in some cases, it can also lead to chronic pain, especially if nerves are severed or irritated during the procedure. Nerve Damage: Conditions like diabetes or shingles can damage nerves, leading to chronic pain syndromes. Unknown Causes, in some instances, the cause of chronic pain remains a mystery, adding to the frustration and complexity of the condition.

The Impact of Chronic Pain: More Than Just Physical Suffering

Chronic pain has a far-reaching impact, extending beyond physical discomfort. Common consequences include reduced quality of life. It can significantly limit a person's ability to perform everyday tasks, participate in social activities, and enjoy life.

Chronic pain is often accompanied by anxiety, depression, and feelings of helplessness. It can interfere with sleep, leading to fatigue and further exacerbating pain. It can put a strain on relationships with family and friends, as it can be difficult for others to understand the constant struggle of living with persistent pain, and it can be a financial burden due to medical expenses, lost wages, and disability.

Seeking Help and Managing Chronic Pain

Living with chronic pain can be incredibly challenging, but it's essential to remember that help is available. A comprehensive treatment approach often involves a combination of medications such as pain relievers, antidepressants, and anticonvulsants can help manage pain and related symptoms.

Exercises and other therapies can improve strength, flexibility, and range of motion, helping to reduce pain and improve function. Cognitive behavioural therapy (CBT) and other therapies can help individuals develop coping skills to manage pain and related emotional distress. Alternative Therapies including acupuncture, massage, and yoga are some alternative therapies that may provide pain relief. Interventional Procedures such as nerve blocks, injections, and other procedures can help target specific pain sources.

The Importance of a Multidisciplinary Approach

Effective chronic pain management requires a multidisciplinary approach, involving a team of healthcare professionals, including physicians, physical therapists, psychologists, and other specialists. Working with a team ensures that all aspects of the condition are addressed, leading to a more comprehensive and personalized treatment plan.

Living Well with Chronic Pain

While chronic pain can be a daunting challenge, it is possible to live a fulfilling life despite the pain. By seeking appropriate medical care, developing coping strategies, and maintaining a positive outlook, individuals can learn to manage their pain and improve their quality of life. Remember, you're not alone, and support is available to help you navigate the journey of living with chronic pain.

Chronic pain affects millions worldwide, impacting quality of life, productivity, and overall well-being. Recognizing the profound burden of this condition, our organisations the Pain Relief Foundation and the Pain Research Institute are committed to driving change through research, education, and proactive collaboration. Our mission: to improve the lives of those living with chronic pain, not just today, but for generations to come.

The cornerstone of this mission is a dedication to advanced research. By investing in the most promising scientific endeavors, the Pain Relief Foundation and Pain Research Institute aim to attract, fund, and support researchers who are focused on developing truly transformative treatments. Their approach is patient-centric, ensuring that research efforts are directly responsive to the needs of individuals struggling with chronic pain. This means focusing on science that has the potential to alleviate suffering, improve functionality, and ultimately, offer a pathway to a pain-free life.

However, research alone is not enough. We recognise that pain education is equally crucial in achieving better treatment outcomes. By sharing knowledge and insights with healthcare professionals, researchers, politicians, decision-makers, and the general public, we hope to spark a ripple effect of positive change throughout society. Education empowers not only healthcare providers to deliver more effective care but also individuals to better understand and manage their own pain.

The urgency of this work is undeniable. The burden of pain on our society is significant, and the need for innovative solutions is more pressing than ever. This requires a concerted effort, a collective commitment to work together, implementing new strategies and addressing the challenges head-on.

The Pain Relief Foundation and Pain Research Institute are actively building bridges to facilitate this collaboration. We are working to reach more healthcare professionals than ever before, both in the UK and across the globe, providing them with essential training and information. This empowers them to offer the best possible care to individuals living with chronic pain. Furthermore, the Foundation is dedicated to building upon the work of the Pain Research Institute, advocating for the needs of people with chronic pain to be at the forefront of policy and research agendas.

The Pain Relief Foundation understands that tackling human chronic pain requires not only dedicated research and compassionate care, but also a foundation built on ethical fundraising and responsible financial management. Recognising that our vital work hinges on the generosity of voluntary donations, the Foundation is deeply committed to upholding the highest standards of financial integrity and transparency. At the heart of their approach lies a deep respect for donors. The Pain Relief Foundation carefully considers its fundraising methods, ensuring they align with ethical principles and do not place undue financial strain on contributors. Requests for donations are made respectfully, emphasising the tangible impact contributions will have on furthering the Foundation's mission to alleviate chronic pain. Donors are provided with clear and concise information outlining how their funds will be utilised and the positive outcomes achieved.

This commitment extends beyond simply asking for support. Here at the Foundation, we exercise prudent financial management at every level to maximize the impact of every pound received. Expenses are meticulously reviewed and justified, ensuring they are directly related to the organisation's core mission. Investment decisions are made with a long-term perspective, prioritising the Foundation's sustainable growth and continued ability to serve those suffering from chronic pain.

Transparency is paramount. We at the Foundation maintain open and accessible financial records to foster trust and accountability among donors and the public. Regular financial reports are published and readily available, providing a clear picture of the Foundation's financial standing. Furthermore, the Foundation submits to regular external audits, guaranteeing the accuracy and integrity of its financial

reporting. This unwavering commitment to transparency builds confidence and reinforces the Foundation's dedication to responsible stewardship.

The Pain Relief Foundation recognises that its success is inextricably linked to the invaluable contributions of its donors. Their financial support is the lifeblood of the organisation, making its vital work possible. The Foundation expresses its profound gratitude for their unwavering loyalty and commitment.

In conclusion, the Foundation is steadfast in its dedication to being a responsible and accountable organisation, driven by ethical fundraising practices and prudent financial management. By adhering to these core principles, we ensure that our resources are utilised effectively to advance its mission of alleviating human chronic pain. We remain committed to upholding these standards, building trust, and inspiring continued support for its crucial work in improving the lives of those suffering from chronic pain.

This commitment is made possible thanks to the dedication and expertise of our Board of Trustees. This skilled and capable group volunteers their time to diligently supervise and direct the Foundation, guiding our strategic direction and ensuring financial accountability. We are immensely grateful for their unwavering commitment and invaluable contributions.

The strength of our Board lies in its diverse composition. We are fortunate to have individuals representing a wide array of fields, each bringing their unique perspective and in-depth knowledge to the table. This includes:

- **Medical Professionals:** Providing invaluable expertise in pain management and research, ensuring our initiatives are grounded in the latest scientific advancements and best practices.
- **Administrative Experts:** Guiding our operational efficiency and ensuring resources are allocated effectively to achieve our strategic goals.
- **Legal Professionals:** Ensuring compliance and providing guidance on ethical considerations, safeguarding the integrity of our operations.
- **Business Leaders:** Bringing strategic business acumen to the table, helping us develop sustainable funding models and maximize the impact of our programs.

Together, this collaborative Board provides a comprehensive oversight of the Charity, ensuring that every decision is made with careful consideration and a focus on achieving tangible results.

The Trustees uphold the system of continual review in all areas of importance in the scientific and administrative conduct of the affairs of the Foundation. In these difficult times, our reserves can be measured as crucial and therefore, the *Reserves Policy* is repeatedly monitored so that we are able to optimise the deployment of our resources, maximise their impact and ensuring we can effectively utilize our resources to their fullest potential.

A key component of our financial strategy is the Investment Policy that governs the management of our reserves. The Trustees actively collaborate with the Investment Management team at Rathbones, regularly reviewing and refining the Investment Policy to achieve optimal performance while adhering to ethical and responsible investment principles.

Beyond financial considerations, we recognise the critical importance of risk management. Our Risk Assessment Policy is under constant scrutiny, ensuring that we proactively identify, understand, and mitigate potential risks to the charity. We are committed to implementing procedural changes as needed. This proactive approach allows us to protect our assets, safeguard our operations, and maintain the trust of our stakeholders.

We believe this commitment to rigorous review and responsible stewardship is essential to ensuring the long-term sustainability and impact of our foundation, allowing us to continue supporting critical initiatives for years to come.

Each year, our Trustees carefully determine the budget available for research grants for the upcoming year. This decision sets the stage for our annual call for applications, which we widely disseminate

through various channels. We advertise in specialist journals, on our website, on the dedicated research platform ResearchResearch.com, and within the University and NHS press. This multi-pronged approach aims to attract applications from the most suitably qualified researchers eager to contribute to chronic pain research.

Once applications are received, they undergo a thorough initial assessment by our dedicated Scientific Advisory Sub-Committee. Chaired by Dr. Caroline Staunton, this sub-committee plays a pivotal role in the entire grant allocation process. Dr. Staunton and her team are entrusted with the vital task of overseeing our research work, meticulously analysing the significant volume of scientific information submitted by applicants. The Scientific Advisory Sub-Committee provides invaluable guidance to the Trustees; in identifying the most deserving applications for research grants, their expertise is essential in prioritising projects with the highest potential impact. The sub-committee ensures that each application undergoes rigorous peer review of other researchers in the field to critically evaluate the scientific merit, feasibility, and potential impact of each proposal. This process guarantees that only the most deserving projects are considered for funding.

We are profoundly grateful for the extensive work carried out by the Scientific Advisory Sub-Committee throughout this lengthy and demanding process. Their expertise, commitment to rigorous evaluation, and dedication to advancing chronic pain research are invaluable to the Foundation. Through their efforts, we are confident that we are funding the most promising research and ultimately contributing to a better quality of life for those living with chronic pain.

A selection of research reports from grants awarded by the Pain Relief Foundation can be found on our website www.painrelieffoundation.org.uk.

Of equal importance is our programme concerned with the dissemination of information, equipping healthcare professionals with the latest knowledge and techniques to improve patient outcomes.

This work is significantly bolstered by the Walton Centre NHS Foundation Trust for Neurology and Neurosurgery, and its associated Pain Clinic. This support enables numerous educational activities and research programs that would otherwise be impossible. We extend our sincere gratitude to the Walton Centre for their unwavering commitment. The Walton Centre Pain Clinic, one of the largest pain centres in Europe, provides us with a resource of substantial patient population willing to participate in trials. These volunteers are essential to advancing our understanding of pain and developing innovative treatments.

We are deeply indebted to all the patients who volunteer for the various research projects, both at the Walton Centre and other units supported by the Foundation. Their willingness to participate in clinical trials and studies is a testament to their hope for a better future, not just for themselves but for all those struggling with chronic pain.

The Pain Relief Foundation is making significant strides in advancing the knowledge and skills of healthcare professionals in the treatment and management of chronic pain. Driven by the dedicated "Education Sub Committee," chaired by Dr. Manohar Sharma, the Foundation has successfully broadened its educational activities and increased the availability of high-quality courses throughout the year.

Building on the success of recent conferences, the Foundation continues to solidify its reputation for delivering exceptional educational opportunities. The "Education Sub Committee" diligently works to curate and deliver courses known for their excellence. These courses are consistently well-supported by committee members, who enthusiastically embrace the responsibility of organising and overseeing them. By providing accessible and high-quality training, the Foundation is empowering healthcare professionals to deliver more effective and compassionate care.

In June we facilitated the North **England Pain Group** (NEPG) meeting which was attended by pain specialists from all over the north of England. Under the organisation of Dr Hemkumar Pusharaj and Dr Manohar Sharma we will run our annual workshop **Clinical Management of Chronic Pain Course** in November. Other workshops are currently being drafted to run throughout the year.

An update on these events can be found later in the report.

For the final time before retirement Dr John Wiles is responsible for arranging the Annual Lecture and the Student Essay competition. The 2025 Annual Lecture '*Lost in Translation: Enhancing quality of research to improve its use. Clinicians really need to know how dodgy basic science data are as a cause of translation failure*'' was given to will honour the life and work of Ulf Lindblom who was Professor of Neurology at the Karolinska Institute, Stockholm, Sweden.

The lecture was delivered by Professor Andrew Rice, a clinical academic who for more than 35 years has been intrigued by the conundrum of neuropathic pain. He is Professor of Pain Research at Imperial College and the current President of the International Association for the Study of Pain (IASP).

The student essay competition was again opened up to Medical, Nursing, Occupational Therapists, Psychology and Physiotherapy students. With the winners of each category presenting their essay at one of our educational meetings.

Our sincere thanks go to Dr John Wiles for his active role over many years in coordinating both the Lecture and Essay Competition.

The work of the Foundation is a collaborative endeavour, including volunteers, staff, and external partners. This report serves as an opportunity to shine a light on these individuals and recognise the integral role they play. First and foremost, we extend our heartfelt gratitude to our volunteers. Their selfless donation of time and energy is invaluable. Without their dedication, we simply wouldn't be able to impact as many lives as we do.

Our deepest gratitude also goes to our Charity Manager, Julie Williams, and her dedicated team: Lorraine Roberts, Hayley McCullough, and Jo Stephens. They are the driving force behind our daily operations, working conscientiously throughout the year to ensure the smooth and effective execution of our projects.

Financial integrity and transparency are paramount, and we are fortunate to have the expertise of Kath Johns and Emma Shepherd of BTMR Ltd, our Statutory Auditors. Their meticulous preparation and auditing of our accounts guarantee accountability and allow us to maintain the trust of our donors and beneficiaries. We appreciate their diligent work and commitment to upholding the highest standards.

Finally, we extend our thanks to Joseph McLoughlin of Rathbones Investments. His expertise in managing our investment portfolio is crucial to ensuring the long-term financial stability of the Foundation, allowing us to continue supporting our programs and fulfilling our mission for years to come.

The success of our foundation is a testament to the dedication and hard work of these individuals.

Aims & Objectives

The aims and objects of the Pain Relief Foundation, as set out in the Constitution, are the advancement and promotion of all forms of medical research and in particular the relief of human pain and all painful conditions of every type whatsoever and howsoever caused and to disseminate the results of any such research throughout the world.

Policies to further Aims & Objectives

In pursuance of these aims and objectives, the continued policy of the Trustees is to:

- Fund and enable research into the causes and optimal treatment of human chronic pain.
- Provide and maintain a Pain Research Institute, headed by a Professor of Pain Science, in which research and education is conducted in pursuance of the charity's objectives.

- Undertake the support of the Pain Research Institute as a priority in the Pain Relief Foundation's funding programme. However, research grants will also be made available and awarded by open competition, for qualitative research projects carried out in other institutions.
- Support partnerships with higher education and the N.H.S directed to the understanding and treatment of human chronic pain. In particular, to provide long-term funds for the support of a Chair in Pain Science at the University of Liverpool.
- Support the dissemination of the results of such research throughout the world.
- Promote and enable education and training for doctors and other health. professionals on human chronic pain and its treatments.
- Provide doctors and other health professionals with an information service on chronic pain and its treatments, in order to improve patient care.
- Provide an information service to human chronic pain sufferers and patients on chronic pain conditions.

This policy has remained unchanged since the last annual report.

Chronic Pain Statistics

Millions of adults are living with 'Great Pain Shame'.

A study found that those with an ailment that affects their day-to-day existence rarely tell others about the pain they're in. "The prevalence of pain is huge. It dwarfs most other conditions.

PAIN AFFECTS US ALL

The Department of Health recognises chronic pain both as a long-term condition in its own right and as a component of other long-term conditions.

Across the UK there are currently 14 million people living with chronic pain.

HEALTH AND SOCIAL CARE

- 66% of people attending A & E seeking help with pain had made 3 visits to a health care professional in the preceding weeks.
- 16% of chronic pain patients feel that their chronic pain is so bad that they sometimes want to die.

WELFARE AND BENEFITS

- Of the 14 million people living with chronic pain, 3.5 million said their pain had kept them from their usual activities, including work, on at least 14 days in the last 3 months.

EMPLOYMENT

- The CMO report states that 25% of chronic pain patients lose their jobs, this contributes to 42% in the lowest income households being more likely to report chronic pain, compared with 27% in the highest.
- 41% of people who attended pain clinics report that their pain has prevented them from working and 13% have had to reduce their hours.

SOCIETAL IMPACT

- Low back pain is ranked highest out of 291 conditions examined by the Global Burden of Disease study, ranking number 1 for years lost to disability worldwide.

- In fact, 5 of the top 12 disabling conditions globally are persistent chronic pain conditions: low back and neck pain, migraine, arthritis, and other musculoskeletal conditions.

This situation highlights just how much research and associated work still needs to be carried out if we are to tower above chronic pain and to ease the difficulty which it causes. The staff at the Pain Research Institute and in the other Laboratories which are funded by the Foundation, recognise that much remains to be done, and they are relentless in their efforts to solve the many problems and unexplained factors.

The Pain Relief Foundation's funding has helped the Research Institute secure a firm base for an exciting and forceful academic structure which is necessary if the Institute is to continue moving forward with a rigorous programme of research into human chronic pain.

The Pain Research Institute (PRI)

The Pain Research Institute based within the Clinical Science Centre at University Hospital Aintree houses patient examination laboratories, research laboratories, work and study areas, a specialist pain library with several study areas and general workstations which provide researchers with access to all of the relevant pain databases and research offices, through a fast link computer hub.

We are located directly adjacent to the Walton Centre NHS Foundation Trust, Liverpool. The dominating factor for our location here is because pain-related research projects often need access to a large number of patients. The Pain Clinic has a through-put of over 4500 new patients each year and access to this patient base is paramount for the Pain Research Institute to continue with their work. The symbiotic work that is carried out in liaison between the two units, and the expertise that has emerged over the years, has led to the *'Walton Pain Clinic'* becoming, and remaining, the largest and most successful in Europe. All patients recruited are fully informed volunteers.

Patient and Public Involvement (PPI) has always been important to the PRI. We have been holding regular PPI groups for over ten years. The PPI team consults with patients to shape all stages of research projects concerning chronic pain (with a particular focus on Complex Regional Pain Syndrome and Fibromyalgia) within the Pain Research Institute.

The Pain research Institute remains a hive of activity with many current ongoing our research spans multiple fields within pain medicine, in order to determine and therefore treat the underlying cause of chronic pain. The avenues of current chronic pain research are below, showcasing the promising directions being explored to alleviate suffering and improve quality of life for those affected.

- **Pain Immunology** - We focus on the contribution of immunoglobulin G autoantibodies in causing chronic pain.
- **Pain Management Programmes** - The Pain Research Institute works with the PMP Department at The Walton Centre to ensure that we continually research PMPs to help make them as effective as possible.
- **Pain Imaging**- Chronic pain leads to changes in the central nervous system that are often maladaptive – they make pain worse rather than lessen it. We have used functional MRI to explore these changes in several groups of pain patients
- **Clinical Trials** - Most researchers in the Pain Research Institute conduct clinical trials. We are engaged in both investigator-led and industry-sponsored trials that assess analgesic drugs and interventions

The Pain Research Institute boasts a rich history of contribution to the field of human chronic pain, evidenced by numerous publications in prestigious medical and scientific journals, as well as comprehensive books authored by their team of expert consultants. These publications serve as a testament to their commitment to advancing the understanding of pain mechanisms and exploring effective treatment strategies. The teams of doctors and scientists have ambitious plans for future research which, if funding can be obtained, bid fair to make substantial advances in understanding,

and the relief, of chronic pain which presents many psychological problems and physical conditions for the sufferer.

Research Accommodation

The Trustees of the Pain Relief Foundation have continued with the agreed policy that whilst continuing to retain the leasehold and ownership of the Pain Research Building in the Clinical Sciences Centre, together with the fixtures, fittings and equipment therein, they will provide the facility of the Institute, together with the fixtures and fittings, to the Department of Neurological Science, University of Liverpool, and to other such parties who are researching chronic pain, or who wish to enter into collaborative research on human chronic pain.

This arrangement will ensure that research personnel supported by the Pain Relief Foundation, the University of Liverpool, the Liverpool John Moores University, and those others who are employed by another party but are working on chronic pain research under the auspices of the 'Pain Relief Foundation' Professor of Pain Science, shall be contained in the same premises and work collaboratively. This arrangement offers a more structured and controlled working area and is conducive to good working practices. The use of the premises does not create a lease but shall be treated as a Licence at Will.

All of the overhead and operating costs of the Pain Research Institute premises are borne by the Pain Relief Foundation and are allocated as part of the research grants. The following *'modus operandi'* was pursued during the year as in previous years:

- The Pain Relief Foundation provided administration and research accommodation for the research personnel, within the Pain Research Institute.
- The Pain Relief Foundation provided research secretariat, and clinical research support facilities for the researcher posts from its own staff resources.
- The Pain Relief Foundation provided secretariat assistance to the associated research personnel, from its own employed staff.
- The Pain Relief Foundation discharged all costs connected with the accommodation of the Pain Research Institute and its operational facilities, including overheads, heat, light, repairs, and purchase of new equipment etc.
- The Pain Relief Foundation discharged all costs connected with the provision of all consumables and computer hardware for the Professor of Pain Science and all other grant aided Researchers working in the Pain Research Institute.
- The Pain Relief Foundation discharged all costs connected with the provision of lecture theatre and associated facilities.
- Under the present structure, the Head of the Pain Research Institute is charged with reporting to the Scientific Advisory Sub-Committee in respect of all research work carried out under the Pain Relief Foundation grant arrangements, and also on the additional research that has been made possible through the Foundation's funding and provision of accommodation. The Chair of the committee is then able to submit a concise report to the Committee of Trustees.

This established procedure is an essential method to evaluate and measure the success and effectiveness of the research work being conducted and to ensure that it is achieving its aims. Additionally, the head of the Pain Research Institute is invited to attend meetings of the Trustees at six monthly intervals, to answer questions on matters raised regarding current and on-going research projects and future planned developments. He also maintains a liaison with the Education Sub-Committee, attending their meetings in an Ex-Officio capacity.

RESEARCH CO-ORDINATION & EDUCATION

The research co-ordination accommodation is located in the administrative area and fulfills a range of functions in its operational role. It supports the Pain Research Institute in a number of fields, providing accurate sources of scientific and medical information to assist the researchers in many projects.

Under the direction of the Education Sub-Committee, the Education Section also undertakes the operational factors in the conduct of all postgraduate courses that are organised throughout the year, arranging the teaching seminars, overseeing the Pain Relief Foundation Annual Lecture, collating and ensuring the correct and timely marking of Student essays and organising external conferences.

STRUCTURE GOVERNANCE AND MANAGEMENT

Governing Document On 6th April 2014, the Pain Relief Foundation was incorporated as a Charitable Incorporated Organisation under charity number 1156227.

Structure, Governance & Management

The Pain Relief Foundation is controlled by its Constitution as a Charitable Incorporated Organisation managed by a Committee of Trustees and at their meetings the Committee regularly conducts an assessment and review of their number, taking into account the skill requirements of the members in conducting the affairs of the Trust, and any potential retirements in the forthcoming 12 months. From this review, consideration is given to the need, if any, to recruit further Trustees. In the event that further recruitment is deemed necessary, the Committee of Trustees will seek suitable candidates through a process of personal contact across the Universities, the Health Service and other appropriate professional bodies associated with the charity. Details of the Trustees are shown on page two of this report.

The power to appoint a new Trustee or additional Trustees of the charity is vested in the Committee of Trustees and new appointments may be made by a resolution of a meeting of that Committee. A Trustee may retire upon giving two months' notice in writing of intention to do so to each of the other Trustees. The Trust Constitution requires that the number of Trustees should not be less than three at any time, but there is no limit on the maximum number and Trustees are not required to retire and stand for re-election.

No expenses of any type will be paid to any Trustee, nor will any Trustee be paid any remuneration or payment of any kind from the Foundation in their capacity as a Trustee. All of the Trustees will give freely of their time and act in an honorary capacity. This is confirmed in each year's Annual report & Accounts.

In the period 6th April 2024 to 5th April 2025, there were no expenses of any type paid to any Trustee nor were there any Trustee in receipt of any remuneration or payment of any kind from the Foundation in their capacity as a Trustee. All of the Trustees gave freely of their time and acted in an honorary capacity.

The Committee of Trustees conducts four quarterly meetings each year at which they receive reports on the activities and achievements that have occurred since the previous meeting. The meeting agendas encompass reports on the full range of activities and situations including day-to-day administration, investments and reserves, cash flow and risk management.

The Committee of Trustees continues to review several areas of importance in the effective management of the Foundation. The prepared '*Risk Assessment*' policy is subject to regular review to ensure that potential risks to which the charity may be exposed are adequately identified, assessed and mitigating steps taken. This operational area is considered to be of the greatest importance and procedural changes will be implemented if deemed appropriate.

Related Parties

For the purposes of preparing accounts in accordance with the Statement of Recommended Practice for charities, in the opinion of the Trustees, the following are related parties to the Pain Relief Foundation:

- The Trustees and their immediate family
- The National Health Service
- The University of Liverpool

Risk Management

The trustees have a duty to identify and review the risks to which the charity is exposed and to ensure appropriate controls are in place to provide reasonable assurance against fraud and error.

Risk Assessment

The Trustees have prepared a risk assessment register in which they have recorded the details and results of an extensive study regarding the potential risks to which the charity may be exposed in the conduct of its affairs. The Trustees have satisfied themselves that through the actions they have taken, the identified risks have been reduced or eliminated, and that appropriate procedures and controls to deal with the risks are in place, so that any resulting or potential impact that the charity may experience is minimised.

The risk assessment register is subject to at least an annual review and in general it is an ongoing review. Such reviews ensure that all of the procedures in place continue to be appropriate to the conduct of the charity and that it is adequate in the light of experience. Where appropriate, systems or procedures have been established and put into place so as to mitigate any risks which may arise or develop

Trustee Indemnity Insurance

The Trustees do not contract a Trustee Group Indemnity Insurance policy.

Recruitment, Appointment, and Induction of New Trustees

In selecting people to be appointed as trustees, nominations are submitted to a meeting of the Committee of Trustees, so that they each have the opportunity of evaluating the strengths of the candidate(s). In considering each nominee, the trustees take into account that person's professional qualifications or personal qualities, their commitment to promoting and furthering the aims of the Foundation, and their ability to make a contribution to the effective management of the Foundation. If the nominee is deemed acceptable, then the appointment is conducted in accordance with the established procedure of induction and training.

The Chair of the committee will extend an invitation to the candidate(s) to attend an early meeting to discuss the appointment in more detail. This is followed by a further meeting with the committee of trustees at which the new trustee is introduced, and a formal appointment confirmed. On appointment, the new trustee is required to sign a declaration stating that they comply with the formal conditions required of a Trustee and are therefore able to legally serve as a trustee. It is a requirement that a declaration of interest be made so that any conflicting interest is noted and registered accordingly. Should any interest be registered, then at any meeting where there is such a conflict, the Trustee will be required to withdraw and not vote on the matter. It is also declared that none of the Trustees have an interest in the pharmaceutical industry. However, any such interest would be registered.

An induction meeting is then held with the Administrator who will inform the new Trustee of their powers and responsibilities, the operational policy, the management arrangements for the charity's investment funds and the procedure of receiving applications for research grants and how the

applications are processed through selection. Other meetings are then held with the Sub-Committees at which their operational roles and powers are discussed.

An induction welcome pack is provided to the new Trustee, which contains as a minimum a copy of the Constitution, a synopsis of the Foundation since its inception showing its achievements and further research targets in human chronic pain. Copies of the Trustee Committee's meeting minutes and the meeting minutes of the Advisory Sub-Committees, each covering the past 24 months, cash flow reports for the same periods, and copies of the previous two years' Annual Report and Accounts. A presentation folder is prepared containing copies of the Reserves Policy and Annual Review, Risk Assessment, Management Flow Chart, Mission Statement and Equal Opportunities Policy. In addition, a copy of the Charity Commission's publications,

Education Advisory Sub-Committee

Appointed by the Committee of Trustees, this sub-committee is the driving force behind the Foundation's educational and informational outreach, ensuring that knowledge is not only generated but effectively disseminated to those who need it most.

Chaired by Dr. Manohar Sharma, a distinguished Senior Pain Consultant within the N.H.S. and a dedicated Trustee of the Foundation, the sub-committee exemplifies a unique blend of clinical insight and strategic vision. Its composition speaks volumes about the depth of expertise at its disposal, including leading Neurosurgeons, Senior Pain Clinicians, and a Clinical Lecturer with a Special Interest in Pain.

The primary mandate of this sub-committee is to advise the Trustees on all educational issues and to robustly develop the Pain Relief Foundation's educational footprint. This is achieved through a multi-faceted approach, encompassing:

- **Publications:** Developing and endorsing high-quality written materials.
- **Courses & Lectures:** Designing and delivering educational programmes for health professionals.
- **Literature & Conferences:** Organising and participating in forums that foster knowledge exchange and collaboration.

Beyond direct educational programmes, the committee plays an equally crucial role in the dissemination of vital information. They are specifically tasked with identifying the most appropriate methods for publishing and sharing:

- **Successful Research Results:** Translating complex findings into accessible formats.
- **New and Improved Treatment Methods:** Providing updates on the latest advancements in pain care.
- **Information Leaflets for Pain Sufferers:** Empowering patients by directing them to the best treatment resources and centres.

This information is distributed through the medical press and, both the Foundation's website and the Institute's website. All of the members act in an honorary capacity.

Scientific Advisory Sub-Committee

Tasked with advising and directing the Trustees on the sensible allocation of funds for selected research projects and additional applications. Leading this distinguished panel is **Dr. Caroline Staunton**, a well-respected and formidable research associate whose leadership provides insightful direction to the committee's crucial work. Dr. Staunton's firm but fair approach ensures that every funding decision is considered through a lens of scientific merit, potential impact, and strategic alignment with the Foundation's mission.

Her fellow committee members are meticulously recruited for their profound and in-depth knowledge of chronic pain conditions. Drawn from both local and external treatment centres, they represent the myriad disciplines involved in the comprehensive study and treatment of human pain. This diverse expertise ensures a holistic and nuanced evaluation of research proposals, encompassing the many

facets of pain science – from neurobiology to psychological interventions and clinical treatment modalities. Crucially, all members dedicate their time and expertise in an honorary capacity

The Committee serves as an indispensable source of information, advice, and expert opinion, particularly in its role of evaluating and prioritising the numerous funding applications for scientific research deemed worthy of support. Their rigorous assessment process is vital in identifying projects with the highest potential to yield significant breakthroughs. The Committee continues to be the source of invaluable information, advice and opinion when reporting on, and prioritising, the numerous funding applications for scientific research which were considered to be worthy of support. It also continued with the vital task of overseeing the results from the many facets of research work, assisting the Trustees in interpreting, and analysing the large volume of scientific information submitted by Research Fellows, Grant Holders.

The purpose in receiving and analysing these reports is to satisfy the Trustees that:

- the research being funded is achieving the projected results to satisfactory and accepted scientific, medical and research standards.
- the research is likely to reach its stated aims.
- ethical approvals remain in place and are being followed scrupulously.
- research Governance is being observed at all times.
- quality standards are being maintained.
- the costs of the research are maintained within the grant limits.
- the research is being managed and monitored effectively.

The head of the Pain Research Institute is called to attend each of the Trustee meetings to provide the Trustees with an insight into the advances and the strategic development of the research opportunities being pursued. Reports are also received from the appointed Education Advisory Sub-Committee, which is principally involved in directing the Educational Meetings, Lectures, Student Essays and Patient Information issues and the Scientific Advisory Sub-Committees which undertakes the task of advising the Trustees on all aspects of Research and Research Grant applications.

Grant Making Policy

In November each year, the Pain Relief Foundation advertises in the national medical press, to invite well established researchers and scientists to submit applications for Pain Relief Foundation grants, to carry out research projects on human chronic pain or to purchase special laboratory equipment to conduct clinical trials. The notice to apply for grants is advertised in the selected medical journals, on the Pain Relief Foundation Website, on the NHS grant website and through other appropriate media; there is a closing date for the receipt of such applications. The advertisement states the upper (monetary) limit of grants, which may vary from year to year.

On receipt of applications, the Foundation's Charity Manager ensures that all appropriate sections of the application forms which have been received are correctly completed and then arranges a meeting of the Scientific Sub-Committee to present the Abstracts of the applications to the members. At this meeting, the members jointly select and nominate independent and best qualified, learned medical persons who will be asked to peer review each application and to give their expert opinions.

After the meeting the Charity Manager writes to the selected peer reviewers, submitting a copy of the application asking if they will provide an assessment of the proposed research, the likelihood of the work succeeding and the cost effectiveness of the requested budget. In addition, references are sought regarding the applicants and the outcome of previous research projects for which they have received funding from all sources. When all applications are complete with the peer reviews and references received, a full set of each application is submitted to each member of the Scientific Advisory Sub-Committee, for consideration and prioritisation in preparation for a selection meeting of the members.
At the grant meeting, the Chairman calls the attention of the members to the received Peer Reviews and References which are referred to throughout the process of considering the most appropriate and worthy applications deserving of a grant. Each committee member delivers an opinion on the applications

received and scores each application between 1 and 3 with (1) being the lowest score and (3) being the highest score. These scores are then brought together with the Peer Review scores and the applications listed in order of achievement, at which point the Chairman and the committee draw recommendations to place before the next meeting of the Trustee Committee. When the Trustee Committee receives the advice of the Scientific Advisory Sub-Committee, they decide which applications, if any, will be funded in accordance with advice received, and in the light of funds available.

The Trustees may recommend that an application not be funded, be funded in full, or be funded at a reduced level. In the event that the Trustees are considering a number of competing recommended applications for which the Foundation's funds are inadequate to fund them all, the Trustees may invite the Chairman of the Scientific Advisory Sub-Committee, together with those members of the Sub-Committee who are also Trustees, to help them prioritise the applications. Each grant is specific to the holder and ceases should the grant holder terminate their post.

New grants approved since the last report.

1. An application is for a 3-year prize PhD Student for a total of £**74,982** submitted by **Dr Fiona Watt of Imperial College London** and is titled: *'Investigation of the hormonal factors underlying excess female risk for painful osteoarthritus'*

2. An application for an 12-month grant for a total of **£16,625** submitted by **Dr Andrew Marshall** of **University of Liverpool** and is titled: *'Underpinning Mechanisms of Developing Neuropathic Versus Non-Neuropathic Pain After Stroke*

3. An application for a 12-month grant for a total of **£29,969** submitted by **Dr Quasim Aziz** of **Queen Mary University, London** and is titled '*Proof of concept assessment of the feasibility of artificial intelligence-driven transcutaneous Vagal Nerve Stimulation (tVNS) algorithm for somatic pain'.*

Public Benefit

In the foregoing section, the aims and objectives of the Foundation are plainly stated, and the policies adopted to deliver these aims and objectives are clearly stated. The objectives are supported by clear explanations regarding the policy of the Foundation to support the preparation and development of good quality research projects which are peer reviewed and expertly selected to develop the provision of improved treatment for the benefit of patients, easing and reducing their pain. In addition to the research conducted, the Foundation provides educational activities and the training of health professionals to achieve the stated aims. All of these activities are a continual matter of ongoing review by the Committee of Trustees and the Members of the Advisory Sub-Committees, so that in the light of experience, adjustments which are considered appropriate are implemented quickly, to ensure that the highest quality results continue to be delivered.

The development of improved patient services and treatment, as previously stated, is considered to be a priority issue by the Foundation, and it works symbiotically and in co-operation with the NHS and Universities to provide post-graduate scientific education in chronic pain relief. A number of postgraduate training courses have been conducted each year, for the continuing education of nurses, GPs, and for clinical pain specialists.

The information service provided by the Foundation serves to inform General Practitioners and all Pain Clinicians and Consultants with up-to-date information regarding available treatments for various pain conditions. In addition, the Foundation provides an information service for patients, their support carers and family members through the provision of leaflets on most chronic pain conditions. The Foundation's website also provides a vast range of guidance and support for patients and Health Professionals, and much of the advice section contents can be downloaded for further ease of access. This enables patients and carers to be empowered about their individual problems.

Pain sufferers who make telephone contact with the Foundation are connected to experienced, friendly staff who are trained to sympathetically and professionally direct enquirers through to available services and advice centres. They are also able to guide sufferers into how they can avail themselves of these services and what action they can take to be referred to clinical services for pain treatment.

Patients also receive direct benefit through research results which lead to the development of new and improved treatments for chronic pain conditions. These results are delivered to pain treatment clinics nationally, and indeed internationally, through the dissemination of research information by the Foundation either electronically, from our website, in medical publications and by way of educational meetings for health professionals.

With living with chronic pain affecting approximately 40% of the British population, it can be seen that the work of the Foundation provides a benefit for a huge number of people. Reports on the research work supported by the Foundation are included in later pages and give a vast amount of information on the progress that is being made with human chronic pain and you are encouraged to read this section.

Volunteers

The Pain Relief Foundation does not receive any funding from central or local government, the health service, or other official bodies. Instead, the Foundation depends entirely on donations, gift aid, legacies, appeals and contributions from supportive members of the public, from generous companies and from several small trusts. There is a small level of direct fundraising activity organised and conducted by the Foundation's own staff, supported by one or two volunteers, an area in which we would like to grow our support. Additionally, it seeks to secure grants from trusts and the commercial sector to fund specific research projects.

The Foundation is not in receipt of benefits in kind, either by way of services, facilities, or donations-in-kind. It does, however, receive some limited benefit from the very small number of volunteers who support the fundraising section in the organisation and conduct of small events. The Trustees recognize the intangible value of the contribution of volunteers to the charity and the Trustees are of the opinion that such income cannot be reliably ascertained. However, it is considered that such intangible income is unlikely to be material.

Powers of Investment

The Constitution provides the Committee of Trustees with the following powers:

1. To administer a bank account in the name of the Foundation at such bank as the Trustees shall decide.

2. To invest in the name of the Trustees, any monies not required for the immediate purpose of the Foundation, in such securities as they may from time to time decide as if they were beneficially entitled and whether such securities shall be Trustee investments or not and shall have power from time to time to transpose such investments.

3. That any property purchased by the Foundation shall be vested in the Trustees appointed for that purpose and the Trustees shall enter into a Deed of Trust setting forth the purposes and conditions under which they hold the said property in trust for the Foundation and shall with such consent as is by law required deal with the property so vested in them by way of sale, mortgage, charge, lease or otherwise howsoever directed by the Foundation.

Investment Policy

The Trustees have developed an investment policy which it believes will respond to the needs of the on-going activities of the Foundation. Sufficient funds are retained in investment that will ensure we can respond to all contingencies as they may arise. Equally important is the strategy of investing in low to medium risk funds that will also provide an operational income. The objective is that this investment policy will produce improved values and income, whilst at the same time safeguarding the short-term and long-term financial needs of the Foundation. The Trustees seek the advice of its Investment Advisors, Rathbone Investment Management Limited and at regular meetings with the Advisors, in-depth reviews are held into the investment portfolio that makes up the reserve fund.

The investment decisions taken by the Trustees throughout this financial year have proved to help preserve the portfolio as much as possible in the current climate. Supported by the Advisors and

making several minor adjustments, for the best possible outcome the fund has this year seen an increase compared with the end of the last financial year. At a joint meeting with their Advisors, the Trustees set an investment policy of 60% of the funds invested into 'Equity Investments' with a view of maximising the Securities and to invest 40% of the funds into 'Fixed Interest Securities'. The decision to ease the approach with fixed interest investments was a very positive decision at the commencement of the year.

Mindful of the continuing uncertainty in the markets, during the year under review the Trustees gave instructions to the Portfolio Manager that the portfolio investment should be organized at 65% of its value being in Equities and 35% of the value being in Fixed Interest stock and the investments were so arranged at the beginning of the year.

Reserves Policy

The strategy developed by the Trustees is to hold a level of reserves that is deemed to be appropriate from time to time, to ensure that:

- The committed and planned research projects undertaken in the short, medium, and long term are sustainable.
- The Trustees can address any problems that arise, including the loss of any significant source of income, which might restrict the ability of the charity in carrying out its objectives.
- Sufficient funds are available to respond to new and important projects that are identified.
- The Trustees can respond to a shortfall of income in any financial year, that may occur for whatever reason, and which shall enable the research that is already authorised, to continue without a break.
- The cost of funding the Chair at the University of Liverpool for the 'Pain Relief Foundation Professor of Pain Science' shall be protected for a minimum forward period of 10 years from any date, by ensuring that such sums as shall be required to continue the funding for such period are kept on reserve.

In setting the level of reserves, a conservative management style has been adopted that is consistent with the Trustee's responsibilities who have agreed a broad spread sector exposure to increase diversity and to regulate risk. The Trustees have established a position that the level of unrestricted reserves and investments should be adequately sufficient to respond to the above operational policy and needs. Therefore, the Trustees have agreed the following:

- To provide reserves to cover the estimated costs of funding existing research, research coming on-line, overheads, research administration support, charity administration and fundraising over three years. Based on an average annual expenditure, this need is £1,270,245
- To retain in investments, an amount that will enable the Trustees to respond to new and important projects that may arise. In arriving at a level of retention, consideration has been given to the fact that such projects may require funding for at least two years and possibly three years.

It is considered that in view of the ongoing investment market volatility and the continuing and uncertain slow rate of recovery, together with the unsteady present uncertainties worldwide, the present level of reserves is adequate to meet these criteria.

Trading

Changes in the 2000 Finance Act, Chapter 17, allowed exemption to tax on charitable income from trading activities up to predetermined levels. The charity continues to carry out a very small level of incidental trading within the prescribed limits.

FUNDRAISING REGULATOR

Registered with FUNDRAISING REGULATOR

The Pain Relief Foundation is a Member of the Fundraising Regulator (FR) and has been since its inception in 2016, The FR is the independent regulator of charitable fundraising and was set up following the Etherington review of fundraising self-regulation (2015) to strengthen the system of regulation and restore public trust in fundraising.

The FR is open to all fundraising organisations, suppliers, and associates. Members agree to adhere to the highest standards of good practice with their fundraising, and their stated Fundraising Promise. As a Member of the FR we demonstrate Membership of the scheme by using the scheme logo on all fundraising materials. By participating in the scheme charities are advertising commitment to best fundraising practices and to giving the public the comfort of a 'safety net' provided by a robust complaints system.

It is a requirement that a charity submits an annual report to the FR, advising the Board of the number of complaints received by the Charity, in relation to its Fundraising activity, by category. The report requires the charity to notify the Board of action taken to resolve any such complaints and what the outcome results are.

Pain Relief Foundation is pleased to report that in the year ending 5th April 2025, no complaints had been received by the charity in the preceding 12-month period. A report to this effect was submitted to the Board of the FR as required.

The Pain Relief Foundation Fundraising Promise

We are always committed to working to the highest standards of practice.

We promise donors that we will comply with the FR Codes of Fundraising Practice and do all that we can to ensure that fundraisers and volunteers will at all times comply with the Codes and with this Promise.

We comply with the law, health and safety and the environment. We will not put unfair pressure on anyone to donate. If you do not want to donate, we will respect your decision. We require anyone fundraising on our behalf to clearly identify themselves as one of our representatives.

We are honest and open and do not make false or exaggerated claims. We do what we say we are going to do and do not pretend to do things that we cannot. We will answer any reasonable questions you have about our fundraising activities and costs. Please contact us for information, visit our website or see our Annual Report.

We are clear and give clear details about how you can make a gift. If you make a regular gift and you want to cancel it, we will carry out your cancellation instructions as soon as possible. We are clear about what we do and how your gift is used for the effective support of our beneficiaries.

We are fair and respect the rights, privacy, and dignity of each of our supporters and beneficiaries and conform to the Data Protection Act. We will only use your personal information for the purposes stated and for which you have given your consent. If you tell us that you do not want us to contact, you in a particular way (e.g., by telephone) we will not do it.

We are reasonable and responsible and will be careful not to use any images or words that cause distress or offence. We make sure that our events are well run and meet health and safety and

environmental requirements, and we avoid causing any nuisance, damage, or disruption. We will not use excessive emotional arguments to make you feel guilty about not giving to us.

We are accountable and should you be unhappy about anything we have done while fundraising, you can write to us and complain. We have a complaints procedure, and we will acknowledge your complaint within 7 days and commit to dealing with the matter within 30 days. A copy of our procedure is available on request and if we are unable to resolve your complaint, we accept the authority of the FR to make a final adjudication.

FUNDRAISING COMMITTEE

Effective fundraising committees are vital to the life and financial well-being of organisations, and this is no different at the Pain Relief Foundation our fundraising committee remain committed to help raise awareness and funds. The functions of the group vary but centres around information, building relationships and raising money to meet the specific organisation's special or ongoing needs.

The Committee is made up of Board members with special skills and contacts to serve the role and non- members made up of nurses, ex patients and people with an interest in the Foundation whom without we could not fulfil this role. The Chair of the '***Fundraising Committee'*** Judith Daley, who is also a Trustee will in future advise the Board of Trustees in all facets of fundraising.

DONATION POLICY

This policy has been set out by the Trustees of the Pain Relief Foundation. It is a public guide to how the Pain Relief Foundation makes decisions on accepting donations and the procedures they follow. The policy is aligned with the codes of Fundraising Practice published by the Institute of Fundraising.

This document makes clear the Trustees' legal obligations with the regards to the acceptance and refusal of donations. It outlines the day-to-day procedures that need to be adhered to and ensures decisions are not taken on an ad-hoc basis but are in support of Pain Relief Foundations strategies and objectives.

Trustees' legal obligations

The Trustees take overall legal responsibility for decisions relating to whether a donation can be accepted or refused.

The Trustees must be able to demonstrate that they have acted in the best interest of the Charity.

The Trustees have a duty to carefully, based on evidence made available to them, whether the Charities interests will be better served by accepting or refusing the donation and to act accordingly.

These judgements must not promote any Trustee or employee's personal moral agenda, or interest and the Trustees must not allow individual or collective personal, political or ethical issues, which are not directly related to interests of the Charity, to affect their judgment.

Trustees must not derive any personal benefit (individually or collectively) from donations, offered to the Charity.

Policy

On a day-to-day basis, the Charity's board of Trustees delegates the responsibility to accept or refuse donations as follows, providing the Charity Manager is sure that any potential individual or corporate donor are supporting the charity in accordance with this policy.

- A donation must be clearly evaluated to establish whether it would be in the best interest of the Pain Relief Foundation to accept or refuse it.
- The donation should contribute towards the Charity's overall strategy and plans.
- The Charity will not accept donations from individuals or companies whose wealth are known to result from illegal activities or where there are indications of corruption and related crime.
- The donor's objectives or activities must not appear to be incompatible with the Charity's vision, mission, and values, particularly if this risk is causing significant damage to the Charity's integrity, public image, or professional reputation.

The Pain Relief Foundation will refuse donations in the following circumstances:

- Where the activities of a donor are directly contrary to the objectives or agreed policies of the Charity or the Charity suspects the gift has been donated to facilitate money laundering or other criminal activity.
- Where it can be clearly shown that the cost to the Charity of accepting the donation will be greater than the donation itself, and that the acceptance of the donation will directly lead to a net decline in assets of the Charity.
- Where the offer of support is dependent on the fulfilment of certain conditions placed upon the Charity and any condition,

  A) Is in itself contrary to the objectives of the Charity

  B) Is regarded as needing an unreasonable level of support from the Charity especially in relation to the size or impact the donation will have on the Charity's charitable activities.

  C) Will divert the Charity from pursuing its current objectives, policies, or work priorities as a necessary fulfilment of the conditions alone.

The Trustees will take great care and consideration in deciding whether to accept or refuse a donation.

Donation Recognition

Gift Acknowledgment & Accountability

- All donors will receive a personal thank you letter and receipt, regardless of gift amount.
- All gifts will be formally acknowledged as quickly as possible, and in any event within 5 working days.
- The reporting requirements of all Grant Makers will be fulfilled thoroughly, accurately and within their required timeframe.
- Major donors for specific projects will receive where required and appropriate regular updates on the progress of the project.
- Where appropriate and required the families of legacy donors will receive a report on the use of the bequeathed funds.

Recognition

- Any donors expressed desire for anonymity will be strictly adhered to
- Any public recognition will only be undertaken with the Donors express permission and in compliance with data protection legislation and best practice.

- Recognition may be tangible by way of a physical acknowledgment such as a plaque and would be placed within the Pain Relief Foundation. This type of recognition would be decided by the Trustees.
- In general costs of recognition shall not exceed 5% of the gift amount.
- In all cases the cost of recognition shall be both reasonable and proportional.

The Charity reserves the right to refuse, discontinue or remove public recognition whether tangible or intangible, at any time if for any reason it considers the association to be damaging to its reputation. This course of action will be decided by the Trustees.

STATEMENT OF TRUSTEES RESPONSIBILITIES

The Trustees are responsible for preparing the Report of the Trustees and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

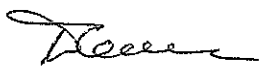
The law applicable to charities in England and Wales, the Charities Act 2011, Charity (Accounts and Reports) Regulations 2008 and the provision of the Constitution requires the Trustees to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the charity and of the incoming resources and application of resources, including the income and expenditure, of the charity for that period. In preparing those financial statements, the trustees are required to:-

- select suitable accounting policies and then apply them consistently.
- observe the methods and principles in the Charity SORP.
- make judgments and estimates that are reasonable and prudent.
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charity will continue in business.

The Trustees are responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the charity and to enable them to ensure that the financial statements comply with the Charities Act 2011, the Charity (Accounts and Reports) Regulations 2008 and the provisions of the constitution. They are also responsible for safeguarding the assets of the charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

The Trustees present their report with the financial statements of the charity for the year ending 5th April 2025. The Trustees have adopted the provisions of 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).

Approved by order of the Committee of Trustees on 2September 2025 and signed on its behalf by:



.....

Mr D Cain - Chair

Date 12th September 2025

CLINICAL SECTION

Patient & Public Information

The Pain Relief Foundation (PRF) is dedicated to providing valuable resources and support to those suffering from chronic pain. Through our website and informative leaflets, the PRF offers a wide range of information and guidance to help individuals understand their pain condition and available treatments.

Online Help and Advice

Our website, www.painrelieffoundation.org.uk, is a comprehensive online resource for chronic pain sufferers. It offers a wealth of information on various aspects of chronic pain, including its causes, symptoms, and available treatments. The website also features an online help and advice service, which allows users to submit their queries and receive expert guidance from the PRF's team of medical professionals.

Informative Leaflets

In addition to the online help and advice service, the Pain Relief Foundation provides a wide range of informative leaflets, each of which deals with a specific chronic pain condition. These leaflets have proven to be an invaluable resource for thousands of chronic pain sufferers, helping them to better understand their pain problem and the available treatment options.

The leaflets are continually updated and re-written using the guidelines issued by the Centre for Health Information Quality, ensuring that the information is accurate, up-to-date, and easy to read and understand. These are also available to download via the website and are also made available to GP surgeries.

CD's

The ***Coping with Pain*** CD was one of the early self-help aids for chronic pain sufferers. With an introduction by Magnus Magnusson, it soon became part of the pain patient's medicine cupboard. Each section of the CD has been specifically designed to focus the minds of pain sufferers on ways of easing their pain through relaxation and gentle exercise. As many as 2 out of 3 people who have used it report that they have been able to improve their quality of life and find that their chronic pain problem is eased.

Over 65,000 copies of the ***Coping with Pain*** CD have now been distributed through a range of outlets covering the medical field and the retail sector. Additional CD's dealing with specific pain conditions are also available and they include: ***Coping with Headaches & Migraine, Feeling Good, Coping with Back Pain*** and ***Relaxation*** and ***Coping with Anxiety.*** Each of the CDs contains relaxation programmes that help so many sufferers to find relief.

PAIN RELIEF FOUNDATION INFORMATION SCIENCES, RESEARCH CO-ORDINATION & EDUCATION

Introduction

The work of this department draws on the expertise of Pain Clinicians and is closely aligned with the work of the Foundation Education Sub-committee. The work of the Committee encompasses all educational courses, conferences and meetings for health care professionals and the department provides the administrative support for those developed courses and conferences plus the provision of information about chronic pain to both patients and the general public, including an online resource about chronic pain. This fulfills the remit of the Foundation to provide such education.

EDUCATION

Meetings and Courses

Meetings and courses which are developed and structured are aimed at all health care professionals with the sole purpose being to educate participants about all aspects of chronic pain management the courses are initially aimed at a national level but such as the interest has grown in the treatment of chronic pain, we now attract participants from all over the globe.

Foundation courses & lectures

Organisiation is well under way for the annual ***Clinical Management of Chronic Pain*** course, the course has a change of date this year and will run in November. This is a vibrant and participative clinical, hands-on course. It is a 2.5 day course aimed at Consultants, Specialist Registrars, Anesthetists, Advanced Specialist Nurses, GP's, and Physiotherapists with some experience of pain management. This year the course is under the lead of Dr Hemkumar Pusharaj, Specialist in Pain medicine and Neuromodulation at the Walton Centre NHS Foundation Trust, and Dr Manohar Sharma, Consultant in Pain Medicine, The Walton Centre NHS Foundation Trust, Liverpool with support from Dr Kerry Matthews, Consultant Clinical Psychologist, The Walton Centre NHS Foundation Trust, Liverpool.

Each year feedback is given by the participants attended; this is read by the organisers, who take on board any suggestions and ideas to keep on improving the course so that the best education possible is provided. The course consists of a mixture of lectures, seminars, clinics, theatre sessions and a grand round. It will remain participative clinical, hands-on with the most up to date information and techniques of treating chronic pain available. The participants will also spend a day in the Pain Management Programme at Walton Centre where they see firsthand the multidisciplinary assessments and treatments that patients receive.

The Foundation continued in its role of facilitating the **North England Pain Group (NEPG)** one-day meeting in Leeds. This year's programme was organised by Dr Angela Deeley, Consultant in Anaesthesia and Pain management at Mid Cheshire Hospitals supported by Dr Sara Siew, Walton Centre, Liverpool. The meeting covers many topical and highly relevant areas in the current practice of Pain Medicine.

The 24th ***Pain Relief Foundation Annual Lecture*** took place in June and was Chaired by Dr. Chris Wells & Professor Roger Knaggs, the lecture was delivered by Professor Andrew Rice a r of Pain Research at Imperial College and the current President of the International Association for the Study of Pain (IASP); the title of the lecture was "*Lost in translation'.*" The evening's proceedings were to honour the life and work of Prof Ulf Lindblom, Professor of Neurology at the Karolinska Institute, Stockholm, Sweden He was a founding
member and president of IASP and pioneered quantitative sensory testing

We also be facilitating the 2nd Unravelling Pain meeting: "Management of Persistent Pain. The 'Unravelling Pain' Team is a group of pain specialists who are passionate about improving understanding of pain with the aim of changing the way people think about, talk about, and respond to persistent pain. This is a free event for people who experience persistent pain, health care professionals working with people who have persistent pain or people who know someone who has persistent pain. The aim of the meeting was to improve that understanding pain is key to living well with pain.

The Foundation was approached by Dr G Baranidharan, Consultant in Anaesthesia and Pain Medicine, Leeds Teaching Hospitals NHS to facilitate the Leeds Cadaver Course, a prestigious 2-day meeting which has been running over the past 10 years. The Foundation agreed and the first meeting went with great success, and we will continue to facilitate going forward

The Foundation Essay Competition

The competition is run annually. The aim of this competition is to raise awareness nationally among medical undergraduates about chronic pain and the Pain Research Institute.

The competition is open to multiple discipline entries Medicine and all health profession Undergraduates including occupational therapists, physiotherapist, nurses, and psychologists.

The winning entries for 2024 are below:

Luke Solomi, University of Plymouth – *Medition in motion: Tai Chi for chronic pain*

Samual Adler, University of Edinburgh– *The Potential Use of Electroconvulsive Therapy (ECT) in the Management of Chronic Pain*

Rikata Devadas, University of Edinburgh – *The Role of Lifestyle Medicine in the Management of Fibromyalgia*

Each winner received the winning prize of £500, their essays can be viewed on our website.

Pain Relief Foundation Website

The Pain Relief Foundation website, **www.painrelieffoundation.org.uk**, serves as a premier online resource designed for the general public, providing vital information about chronic pain. Crucially, it acts as a trusted gateway, directing users to other specialist websites that offer good, current, medically correct, and easily understood details on specific chronic pain conditions. A key differentiator is that all recommended external sites undergo rigorous assessment by experts, ensuring the reliability and accuracy of the information presented. Furthermore, the website offers practical support through its downloadable "Dealing with Pain Series" leaflets, covering various chronic pain conditions and associated medications. Visitors can also find regularly updated, topical, and informative articles penned by staff from the Foundation, Institute, and the Walton Centre Pain team. Beyond informational resources, the site keeps users abreast of current news and fundraising events and uniquely provides an online portal for Health Professionals to register and attend relevant events or courses.

WORK & STUDY AREAS

The Institute continued to provide accommodation for research personnel to study their research developments and prepare research reports and applications. The accommodation is furnished and serviced, fully set out with computers workstations, and associated equipment.

RESEARCH

Below is a snapshot selection and brief description of research that is currently being undertaken with the support of the Pain Relief Foundation. An in-depth progress report of the research can be found on our website. **www. painreleiffoundation.org.uk** under the tab marked research.

Grant title:' Biopsychological Prediction Models of Pain Management Programme (PMP) Outcomes for Chronic Pain.

Awarded to : *Dr Christopher Brown, Dr Jennie Day, Dr Katie Herron, Dr Selina Johnson, Dr Laura Bonnett – University Liverpool.*

PhD student: *Andrew Palmer*

Overall project summary

This PhD project is exploring why some people with long-term (chronic) pain benefit more than others from taking part in pain management programmes (PMPs). PMPs are the main recommended treatment for people with moderate to severe chronic pain in the UK. They can be very helpful, but they are also time-consuming, expensive, and don't work equally well for everyone. Some patients improve a lot, others see little change, and a few even get worse.
This project aims to understand what helps people get the most out of these programmes – what we call "enabling factors." It involves three studies:

1. A review of previous research to identify what factors predict good PMP outcomes.
2. A statistical analysis using NHS patient data to build a model that could help predict who is most likely to benefit.
3. A qualitative study involving interviews and surveys to uncover personal views on what makes PMPs work well, including ideas that might not show up in quantitative data.

Together, these studies aim to support future efforts to personalise PMP delivery – making sure patients get the support that's right for them at the right time.

Study 1 – Review of previous research on PMP outcomes

We looked at past research studies to find biological, psychological, and social factors that seem to predict how well people do emotionally after completing a PMP. Emotional well-being is a key part of recovery but often gets less attention than physical symptoms in research.

Study 2 – Building a prediction model using NHS data

We are developing a prediction model using real data from patients who attended PMPs at the Walton Centre in Liverpool. The model uses information collected before treatment (like age, health status and mood) to try to predict who is likely to improve afterwards.

Study 3 – Exploring new "enabling factors" through personal experiences

This study looks at personal views and experiences of PMPs from patients and professionals. Using a method called Q-methodology, we aim to uncover which beliefs, traits or behaviours people think help someone make the most of a PMP.
We first interviewed a range of people – including patients, staff and a GP – to gather their thoughts. We then turned their ideas into a set of short statements about what might make PMPs work better. A different group of people is now ranking these statements in order of agreement, so we can see where there is common ground.

Grant title;'Inhibition of metalloproteinases: a novel approach for the treatment of post-stroke pain.'

Awarded to : *Dr Milena De Felice, University of Sheffield*

Stroke is a leading global health burden; it is the second leading cause of death and ranks third for combined death and disability. In the United Kingdom alone, there are approximately 100,000 strokes each year, with only 10% of survivors making a near-full recovery, leaving the vast majority with persistent neurological deficits (i.e., weakness, difficulty speaking or thinking) and, in approximately 30%, debilitating chronic pain often in their arms and legs. The developed post-stroke pain makes it harder to take part in rehabilitation, disrupts sleep, contributes to low mood and anxiety, and even increases the risk of thoughts of suicide. Unfortunately, existing pain medicines often fail to provide relief or cause unwanted side effects like drowsiness, dizziness, and nausea.

There is therefore an urgent need for treatments that safely and effectively alleviate post-stroke pain and improve the quality of life of stroke survivors.

We have established and characterised two murine models of focal cerebral ischaemia, the transient and the permanent middle cerebral artery occlusion (MCAO), which together recapitulate most presentations of human large-vessel stroke. We have established that in both model, male and female develop robust thermal hyperalgesia and mechanical allodynia in the affected limbs beginning around four days post-ischaemia and persisting beyond 28 days. This mirrors the time course and sensory profile observed clinically in post stroke pain.
Building on evidence that the enzymes known as matrix metalloproteinases (MMP-2, -9 and -12 in particular), contribute to tissue damage after stroke (including blood-brain barrier disruption, oedema formation and neuronal injury) and to chronic pain in other conditions, we evaluated the efficacy on MMPs inhibition in our post stroke models, independently of any neuroprotective effects.

We hypothesise that ischaemic stroke induces activation of MMP-9 and MMP-12 within central nociceptive circuits, driving recruitment of key pain mediators and the emergence of chronic post stroke pain. The overall aim of this project is to define the time after the onset of stroke at which inhibition of MMP-9 and MMP-12 is still effective in providing pain relief (therapeutic window), and uncover the mechanisms by which MMP-9 and MMP-12 inhibition alleviates post stroke pain, thereby laying the groundwork for rapid clinical translation. We will achieve simultaneous inhibition of MMP-9 and MMP-12 by repurposing an existing, selective MMP-9 and MMP-12 inhibitor that is already clinically available.

We will achieve this through two specific aims:

Aim 1: Role of MMP-9 and -12 in initiation and maintenance of post stroke pain
We will determine the effect of MMP-9 and MMP-12 inhibition at different intervals post stroke, by measuring its efficacy on the onset and persistence of mechanical hypersensitivity.

Aim 2: Mechanisms Underlying MMP-Mediated Nociceptive Plasticity
We will examine brain and spinal tissues at key times to track MMP-9 and MMP-12 activity, neuronal activity markers and pain-signaling molecules, and see how inhibition of MMP-9 and MMP-12 affects these changes.

Grant Title; Perceived social threat in chronic pain

Awarded to; *Dr Charlotte Krahé, Liverpool John Moores University*
Co-I: Dr David Moore, Liverpool John Moores University

1. Background and Aims

The aim of this grant is to conduct two studies investigating the relationship between chronic pain and the perception of social threat.

People with chronic pain often report feeling socially isolated and disconnected from others. We currently do not fully understand the processes that cause this heightened social distress and that may keep it going. In this grant, we test whether being sensitive to social threat plays a key role. Social threat includes worrying about threats to our body (e.g., someone harming us or worsening our pain directly) or threats to how socially connected and safe we feel around others. People with chronic pain are generally more aware of threats around them, but we do not know if this also applies to social threats.

Study 1: The relationship between chronic pain and perceived social threat

In Study 1, we investigate social threat related to physical safety. We focus on personal space, specifically the point at which approaching footsteps are felt as uncomfortably close. We expect that

people with chronic pain will feel uncomfortable at an earlier point than people without pain, and we also consider whether the identity of the approaching person plays a role.

Study 2: Does social exclusion exacerbate social threat and ongoing pain in chronic pain?

In Study 2, we examine the impact of threats to social connectedness. We will make people feel briefly socially excluded by using a virtual ball tossing game. People with and without chronic pain will play this game with virtual players. First, they are included in the game, but then virtual players pass them the ball less and less. We study whether this brief exclusion leads to greater social threat in chronic-pain than pain-free participants, and whether it worsens in-the-moment pain (in people with chronic pain) compared to being included.

Together, the two studies can help us understand processes involved in social distress in chronic pain and allow us to develop ways to help people with chronic pain feel safer in their social interactions. Ultimately, the findings may provide an evidence-based approach for creating safer, more supportive environments for people with chronic pain.

BTMR Limited
Statutory Auditor
Century Buildings
14 St Mary's Parsonage
Manchester
M3 2DF

Opinion
We have audited the financial statements of The Pain Relief Foundation (the 'charity') for the year ended 5 April 2025 which comprise the Statement of Financial Activities, the Balance Sheet, the Cash Flow Statement and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards (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 5 April 2025 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 Auditors' 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 trustees are responsible for the other information. The other information comprises the information included in the Annual Report, other than the financial statements and our Report of the Independent Auditors thereon.

Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether 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 where the Charities (Accounts and Reports) Regulations 2008 requires us to report to you if, in our opinion:
- the information given in the Report of the Trustees is inconsistent in any material respect with the financial statements; or
- the charity has not kept adequate accounting records; or
- the financial statements are not in agreement with the accounting records and returns; or
- we have not received all the information and explanations we require for our audit.

Responsibilities of trustees
As explained more fully in the Statement of Trustees' Responsibilities, the trustees 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.

Our responsibilities for the audit of the financial statements
We have been appointed as auditors 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 a Report of the Independent Auditors that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

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

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

- we identified the significant laws and regulations applicable to the charity which we considered could have a direct material effect on the financial statements or the operations of the charity. Said laws and regulations include but are not limited to the Charities Act 2011, taxation legislation and data protection, anti-bribery and employment legislation;
- the identified laws and regulations were communicated within the audit team regularly and the team remained alert to instances of non-compliance throughout the audit.

We assessed the susceptibility of the charity's financial statements to material misstatement, including obtaining an understanding of how fraud might occur. We also addressed the risk of fraud through management bias and override of controls by;

- updating and reviewing our knowledge of the charity, its trustees and internal financial function, together with their systems and internal controls. This included making enquiries of management as to their knowledge of actual, suspected and alleged fraud; and
- considering the internal controls in place to mitigate risks of fraud and non-compliance with laws and regulations. We concluded that whilst the charity had controls in place that were appropriate to its size and the nature of its activities, we could not rely on those systems and internal controls exclusively for the purposes of our audit work. We therefore adopted a substantive and transactional approach to our audit, seeking to verify figures in the balance sheet to third party evidence and transactions within the Statement of Financial Activities to external independent documentation;
- We did not review every transaction. However, we adopted an approach based on testing a sample of transactions. In choosing our sample, we tested transactions that were material in nature and in addition a random sample of other transaction. By choosing transactions of a material nature, our audit work is designed to detect material misstatements. The use of random testing on other transactions is designed to detect other irregularities and the operation of the charity's internal control systems generally. If exceptions were noted, our audit work was expanded to test more transactions with a view to determining whether the exception was of an isolated nature;
- We performed analytical procedures to identify any unusual or unexpected relationships;
- We tested journal entries to identify unusual transactions and investigated the rationale behind significant or unusual transactions.

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

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

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

Use of our report

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

BTMR

BTMR Limited
Statutory Auditor
Eligible for appointment as auditor of the Charity by virtue of its eligibility for appointment as an auditor under of Section 1212 of the Companies Act 2006
Century Buildings
14 St Mary's Parsonage
Manchester
M3 2DF

Date: 12th September 2025

Statement of Financial Activities
for the Year Ended 5 April 2025

	Notes	Unrestricted funds £	Restricted fund £	**5.4.25 Total funds £**	5.4.24 Total funds £
INCOME AND ENDOWMENTS FROM					
Donations and legacies	3	**116,590**	-	**116,590**	244,998
Other trading activities	4	**33,180**	**12,006**	**45,186**	23,443
Investment income	5	**84,458**	-	**84,458**	82,422
Total		**234,228**	**12,006**	**246,234**	350,863
EXPENDITURE ON					
Raising funds					
Other trading activities	6	**18,064**	-	**18,064**	15,977
Investment management costs	7	**11,794**	-	**11,794**	11,716
		29,858	-	**29,858**	27,693
Charitable activities	8				
Research		**324,957**	**11,841**	**336,798**	471,501
Education		**5,441**	-	**5,441**	-
Total		**360,256**	**11,841**	**372,097**	499,194
Net gains on investments		**45,638**	-	**45,638**	50,770
NET INCOME/(EXPENDITURE)		**(80,390)**	**165**	**(80,225)**	(97,561)
RECONCILIATION OF FUNDS					
Total funds brought forward		**2,790,162**	**2,478**	**2,792,640**	2,890,201
TOTAL FUNDS CARRIED FORWARD		**2,709,772**	**2,643**	**2,712,415**	2,792,640

The notes form part of these financial statements

Balance Sheet
5 April 2025

	Notes	Unrestricted funds £	Restricted fund £	5.4.25 Total funds £	5.4.24 Total funds £
FIXED ASSETS					
Tangible assets	14	**47,046**	**507**	**47,553**	53,713
Investments	15	**2,647,838**	**-**	**2,647,838**	2,769,293
		2,694,884	**507**	**2,695,391**	2,823,006
CURRENT ASSETS					
Stocks	16	**653**	**-**	**653**	662
Debtors	17	**2,276**	**-**	**2,276**	1,693
Cash at bank and in hand		**35,450**	**22,136**	**57,586**	39,598
		38,379	**22,136**	**60,515**	41,953
CREDITORS					
Amounts falling due within one year	18	**(23,491)**	**(20,000)**	**(43,491)**	(72,319)
NET CURRENT ASSETS		**14,888**	**2,136**	**17,024**	(30,366)
TOTAL ASSETS LESS CURRENT LIABILITIES		**2,709,772**	**2,643**	**2,712,415**	2,792,640
NET ASSETS		**2,709,772**	**2,643**	**2,712,415**	2,792,640
FUNDS	19				
Unrestricted funds:					
General fund				**35,142**	11,824
Designated unrestricted				**2,674,630**	2,778,338
				2,709,772	2,790,162
Restricted funds:					
Restricted fund				**2,643**	2,478
TOTAL FUNDS				**2,712,415**	2,792,640

These financial statements have been audited under the requirements of Section 145 of the Charities Act 2011.

The financial statements were approved by the Board of Trustees and authorised for issue on ..... and were signed on its behalf by:

.....
D Cain - Chairman - Trustee

The notes form part of these financial statements

continued...

Cash Flow Statement
for the Year Ended 5 April 2025

	Notes	5.4.25 £	5.4.24 £
Cash flows from operating activities			
Cash generated from operations	1	(230,831)	(216,930)
Finance costs paid		(297)	(281)
Tax paid		(472)	(5,555)
Net cash used in operating activities		(231,600)	(222,766)
Cash flows from investing activities			
Purchase of tangible fixed assets		(1,963)	(533)
Purchase of fixed asset investments		(61,289)	(570,003)
Sale of fixed asset investments		228,382	546,722
Interest received		10	9
Dividends received		84,448	82,413
Net cash provided by investing activities		249,588	58,608
Change in cash and cash equivalents in the reporting period		17,988	(164,158)
Cash and cash equivalents at the beginning of the reporting period		39,598	203,756
Cash and cash equivalents at the end of the reporting period		57,586	39,598

The notes form part of these financial statements

Notes to the Cash Flow Statement
for the Year Ended 5 April 2025

1. RECONCILIATION OF NET EXPENDITURE TO NET CASH FLOW FROM OPERATING ACTIVITIES

	5.4.25 £	5.4.24 £
Net expenditure for the reporting period (as per the Statement of Financial Activities)	**(80,225)**	(97,561)
Adjustments for:		
Depreciation charges	**8,123**	9,087
Gain on investments	**(45,638)**	(50,770)
Interest received	**(10)**	(9)
Finance costs	**297**	281
Dividends received	**(84,448)**	(82,413)
Decrease in stocks	**9**	-
(Increase)/decrease in debtors	**(111)**	138
(Decrease)/increase in creditors	**(28,828)**	4,317
Net cash used in operations	**(230,831)**	(216,930)

2. ANALYSIS OF CHANGES IN NET FUNDS

	At 6.4.24 £	Cash flow £	**At 5.4.25 £**
Net cash			
Cash at bank and in hand	**39,598**	**17,988**	**57,586**
	39,598	**17,988**	**57,586**
Total	**39,598**	**17,988**	**57,586**

The notes form part of these financial statements

1. DESIGNATED FUND

The designated fund represents sums set aside, out of unrestricted funds, to meet the ongoing costs of the chair of Professor of Pain.

	2025	2024
Investment income:	£	£
Interest received	4,036	907
Dividends	80,412	81,506
Realised gains on investments sold	71,207	202,159
Unrealised gain on revaluing investments to market value	-	-
Total designated income	155,655	284,572
Less:		
Realised loss on sale of investments	-	-
Unrealised profit/(loss) on revaluing investments to market value	(25,569)	(151,389)
	(11,794)	(11,716)
Expenditure out of designated funds	-	-
Transfer of net expenditure to General Fund	(222,000)	(66,000)
Net designated (expenditure)/income	**(103,708)**	**55,467**

2. ACCOUNTING POLICIES

Basis of preparing the financial statements
The financial statements of the charity, which is a public benefit entity under FRS102, have been prepared in accordance with the 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) (effective 1 January 2019)', and the Charities Act 2011. The financial statements have been prepared under the historical cost convention with the exception of investments which are included at market value.

Income
All income is recognised in the Statement of Financial Activities once the charity has entitlement to the funds and it is probable that the income will be received and the amount can be measured reliably. The charity's income is made up of gifts, donations, legacies, fundraising, sponsorship and investment income.

Expenditure
Liabilities are recognised as expenditure as soon as there is a legal or constructive obligation committing the charity to that expenditure, it is probable that a transfer of economic benefits will be required in settlement and the amount of the obligation can be measured reliably. Expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all costs related to the category. Where costs cannot be directly attributed to particular headings they have been allocated to activities on a basis consistent with the use of resources.

Grants offered subject to conditions, such as duration of the grant, which have not been met at the year end date are noted as a commitment but not accrued as expenditure.

Allocation and apportionment of costs
Certain expenditure is directly attributable to specific activities and has been included in those cost categories. Certain other costs, which are attributable to more than one activity, are apportioned across categories on the basis of an estimate of the proportion of time spent by staff on those activities.

Tangible fixed assets
Depreciation is provided at the following annual rates in order to write off each asset over its estimated useful life.

Long leasehold	- Over the period of the lease
Plant and machinery	- 25% on reducing balance and 15% on cost
Fixtures and fittings	- 25% on cost

Expenditure on individual assets which is less than £500 is not capitalised.

continued...

2. ACCOUNTING POLICIES - continued

Stocks
Stocks are valued at the lower of cost and net realisable value, after making due allowance for obsolete and slow moving items.

Taxation
The charity is exempt from corporation tax on its charitable activities.

Fund accounting
Unrestricted funds can be used in accordance with the charitable objectives at the discretion of the trustees.

Restricted funds can only be used for particular restricted purposes within the objects of the charity. Restrictions arise when specified by the donor or when funds are raised for particular restricted purposes.

Designated fund

The Designated fund represents the investment and related income which the trustees have designated to be used specifically for funding the chair of the Professor of Pain.

Restricted fund

The Restricted fund represents the income which was made available for the purposes of acquiring a Transcranial Magnetic Scanner and sponsorships received. The related expenditure represent money spent in relation to restricted income.

Hire purchase and leasing commitments
Rentals paid under operating leases are charged to the Statement of Financial Activities on a straight line basis over the period of the lease.

Pension costs and other post-retirement benefits
The charity operates a defined contribution pension scheme. Contributions payable to the charity's pension scheme are charged to the Statement of Financial Activities in the period to which they relate.

Financial instruments
Financial instruments are classified and accounted for according to the substance of the contractual arrangement, as either financial assets, financial liabilities or equity instruments. An equity instrument is any contract that evidences a residual interest in the assets of the charity after deducting all of its liabilities.

Investments
Investments are made by the trustees acting through and on advice of professional investment managers. The investment strategy focuses on low to medium risk investments.

Investment gains and losses
Gains and losses which arise on the sale of investments during the year are termed "Realised gains and losses". Those gains and losses that arise from the disclosure of investments at market value as at 5th April each year are termed "Unrealised gains and losses".

Governance costs
Governance costs relate to the general running of the charity, as opposed to fundraising or charitable activities expenditure. They include audit and legal fees, accountancy and related support costs.

Costs of generating funds
The costs of fundraising events include the costs incurred by the Charity in arranging golf days, appeals and sponsorships and are included in the SOFA on an accruals basis.

Charitable activities - Grants payable
Expenditure on charitable activities includes grants payable to individuals to conduct research into pain, its causes and relief, and to disseminate research information together with related direct costs and support costs, all of which are accounted for on an accruals basis.

continued...

3. DONATIONS AND LEGACIES

	5.4.25	5.4.24
	£	£
Gifts	65,259	69,343
Gift aided donations	4,951	3,064
Tax recovered on gift aided donations	1,245	766
Legacies	44,938	171,425
Sundry income	197	400
	116,590	244,998

4. OTHER TRADING ACTIVITIES

	5.4.25	5.4.24
	£	£
Fundraising events	1,205	1,804
Sponsorships	5,535	6,200
Meeting fees	26,440	15,439
Leeds Cadaver	12,006	-
	45,186	23,443

5. INVESTMENT INCOME

	5.4.25	5.4.24
	£	£
Listed investments	84,448	82,413
Deposit account interest	10	9
	84,458	82,422

6. OTHER TRADING ACTIVITIES

	5.4.25	5.4.24
	£	£
Purchases	-	125
Staff costs	18,064	15,852
	18,064	15,977

7. INVESTMENT MANAGEMENT COSTS

	5.4.25	5.4.24
	£	£
Portfolio management	11,794	11,716

continued...

8. CHARITABLE ACTIVITIES COSTS

	Direct Costs	Grant funding of activities (see note 9)	Support costs (see note 10)	Totals
	£	£	£	£
Research	89,263	184,381	63,154	336,798
Education	555	-	4,886	5,441
	89,818	184,381	68,040	342,239

9. GRANTS PAYABLE

	5.4.25	5.4.24
	£	£
Research	184,381	304,043

10. SUPPORT COSTS

	Management	Finance	Information technology	Governance costs	Totals
	£	£	£	£	£
Research	28,880	192	4,443	29,639	63,154
Education	4,115	-	771	-	4,886
	32,995	192	5,214	29,639	68,040

11. NET INCOME/(EXPENDITURE)

Net income/(expenditure) is stated after charging/(crediting):

	5.4.25	5.4.24
	£	£
Auditors' remuneration	5,000	5,000
Auditors' remuneration for non audit work	3,340	3,340
Depreciation - owned assets	8,123	9,087
Other operating leases	-	5,722

12. TRUSTEES' REMUNERATION AND BENEFITS

No trustees' remuneration or other benefits were paid for the year ended 5 April 2025 nor for the year ended 5 April 2024.

Trustees' expenses

There were no trustees' expenses paid for the year ended 5 April 2025 nor for the year ended 5 April 2024.

continued...

13. STAFF COSTS

The average number of employees for the year was 4 (2024: 4).

14. TANGIBLE FIXED ASSETS

	Long leasehold £	Plant and machinery £	Fixtures and fittings £	Totals £
COST				
At 6 April 2024	**114,302**	**204,403**	**325,020**	**643,725**
Additions	**-**	**-**	**1,963**	**1,963**
At 5 April 2025	**114,302**	**204,403**	**326,983**	**645,688**
DEPRECIATION				
At 6 April 2024	**78,053**	**188,671**	**323,288**	**590,012**
Charge for year	**3,266**	**3,933**	**924**	**8,123**
At 5 April 2025	**81,319**	**192,604**	**324,212**	**598,135**
NET BOOK VALUE				
At 5 April 2025	**32,983**	**11,799**	**2,771**	**47,553**
At 5 April 2024	36,249	15,732	1,732	53,713

15. FIXED ASSET INVESTMENTS

	Listed investments £
MARKET VALUE	
At 6 April 2024	**2,769,293**
Additions at cost	**61,289**
Disposals at book cost	**(157,175)**
Revaluations	**(25,569)**
At 5 April 2025	**2,647,838**
NET BOOK VALUE	
At 5 April 2025	**2,647,838**
At 5 April 2024	2,769,293

Overseas investment assets amounted to £731,204 (2024: £1,508,161).

Cost or valuation at 5 April 2025 is represented by:

	Listed investments £
Valuation in 2025	**(25,569)**
Cost	**2,673,407**
	2,647,838

continued...

16. STOCKS

	5.4.25	5.4.24
	£	£
Finished goods	653	662

17. DEBTORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	5.4.25	5.4.24
	£	£
Tax	1,238	766
Prepayments and accrued income	1,038	927
	2,276	1,693

18. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	5.4.25	5.4.24
	£	£
Accruals and deferred income	43,491	72,319

19. MOVEMENT IN FUNDS

	At 6.4.24	Net movement in funds	Transfers between funds	At 5.4.25
	£	£	£	£
Unrestricted funds				
General fund	11,824	(198,682)	222,000	35,142
Designated unrestricted	2,778,338	118,292	(222,000)	2,674,630
	2,790,162	(80,390)	-	2,709,772
Restricted funds				
Restricted fund	2,478	165	-	2,643
TOTAL FUNDS	2,792,640	(80,225)	-	2,712,415

Net movement in funds, included in the above are as follows:

	Incoming resources	Resources expended	Gains and losses	Movement in funds
	£	£	£	£
Unrestricted funds				
General fund	149,780	(348,462)	-	(198,682)
Designated unrestricted	84,448	(11,794)	45,638	118,292
	234,228	(360,256)	45,638	(80,390)
Restricted funds				
Restricted fund	12,006	(11,841)	-	165
TOTAL FUNDS	246,234	(372,097)	45,638	(80,225)

continued...

19. MOVEMENT IN FUNDS - continued

Comparatives for movement in funds

	At 6.4.23 £	Net movement in funds £	Transfers between funds £	At 5.4.24 £
Unrestricted funds				
General fund	141,987	(196,163)	66,000	11,824
Designated unrestricted	2,722,871	121,467	(66,000)	2,778,338
	2,864,858	(74,696)	-	2,790,162
Restricted funds				
Restricted fund	25,343	(22,865)	-	2,478
TOTAL FUNDS	2,890,201	(97,561)	-	2,792,640

Comparative net movement in funds, included in the above are as follows:

	Incoming resources £	Resources expended £	Gains and losses £	Movement in funds £
Unrestricted funds				
General fund	268,450	(464,613)	-	(196,163)
Designated unrestricted	82,413	(11,716)	50,770	121,467
	350,863	(476,329)	50,770	(74,696)
Restricted funds				
Restricted fund	-	(22,865)	-	(22,865)
TOTAL FUNDS	350,863	(499,194)	50,770	(97,561)

A current year 12 months and prior year 12 months combined position is as follows:

	At 6.4.23 £	Net movement in funds £	Transfers between funds £	At 5.4.25 £
Unrestricted funds				
General fund	141,987	(394,845)	288,000	35,142
Designated unrestricted	2,722,871	239,759	(288,000)	2,674,630
	2,864,858	(155,086)	-	2,709,772
Restricted funds				
Restricted fund	25,343	(22,700)	-	2,643
TOTAL FUNDS	2,890,201	(177,786)	-	2,712,415

continued...

19. MOVEMENT IN FUNDS - continued

A current year 12 months and prior year 12 months combined net movement in funds, included in the above are as follows:

	Incoming resources £	Resources expended £	Gains and losses £	Movement in funds £
Unrestricted funds				
General fund	418,230	(813,075)	-	(394,845)
Designated unrestricted	166,861	(23,510)	96,408	239,759
	585,091	(836,585)	96,408	(155,086)
Restricted funds				
Restricted fund	12,006	(34,706)	-	(22,700)
TOTAL FUNDS	597,097	(871,291)	96,408	(177,786)

20. RELATED PARTY DISCLOSURES

There were no related party transactions for the year ended 5 April 2025.

21. FINANCIAL COMMITMENTS

During the year grants payable to researchers were approved in the total amount of £791,415 of which £564,407 remains payable in respect of future periods.

Detailed Statement of Financial Activities
for the Year Ended 5 April 2025

	5.4.25 £	5.4.24 £
INCOME AND ENDOWMENTS		
Donations and legacies		
Gifts	**65,259**	69,343
Gift aided donations	**4,951**	3,064
Tax recovered on gift aided donations	**1,245**	766
Legacies	**44,938**	171,425
Sundry income	**197**	400
	116,590	244,998
Other trading activities		
Fundraising events	**1,205**	1,804
Sponsorships	**5,535**	6,200
Meeting fees	**26,440**	15,439
Leeds Cadaver	**12,006**	-
	45,186	23,443
Investment income		
Listed investments	**84,448**	82,413
Deposit account interest	**10**	9
	84,458	82,422
Total incoming resources	**246,234**	350,863
EXPENDITURE		
Other trading activities		
Purchases	**-**	125
Wages	**17,272**	15,250
Social security	**585**	411
Pensions	**207**	191
	18,064	15,977
Investment management costs		
Portfolio management	**11,794**	11,716
Charitable activities		
Wages	**55,351**	49,181
Social security	**1,966**	1,507
Pensions	**2,083**	1,916
Venue & meeting costs	**11,812**	8,184
Sundry	**285**	818
FMS study costs	**-**	22,640
Leeds Cadaver	**10,198**	-
Depreciation of tangible fixed assets	**8,123**	9,087
Grants to individuals	**184,381**	304,043
	274,199	397,376

This page does not form part of the statutory financial statements

Detailed Statement of Financial Activities
for the Year Ended 5 April 2025

	5.4.25 £	5.4.24 £
Support costs		
Management		
Other operating leases	-	5,722
Rates and water	18,427	18,228
Insurance	3,546	3,517
Telephone	753	1,304
Postage and stationery	2,308	2,108
Advertising	4,442	5,066
Sundries	1,457	1,883
Travel	-	132
Computer software	1,765	1,751
Credit card charges	297	281
	32,995	39,992
Finance		
Bank charges	192	266
Information technology		
Repairs and renewals	5,214	5,833
Governance costs		
Wages	19,850	18,500
Social security	612	425
Pensions	837	769
Auditors' remuneration	5,000	5,000
Auditors' remuneration for non audit work	3,340	3,340
	29,639	28,034
Total resources expended	372,097	499,194
Net expenditure before gains and losses	(125,863)	(148,331)
Realised recognised gains and losses		
Net investment gains/ (losses)	71,207	202,159
Net (expenditure)/income	(54,656)	53,828



Pain Relief Foundation

PAIN RELIEF FOUNDATION

England & Wales - Charity number 1156227

Accounts

BAAM RELIEF FOUNDATION



Clinical Sciences Centre

University Hospital Aintree

Lower Lane

Liverpool

L9 7AL

Established as a Charitable Incorporated Organisation
on 17th March 2014

Originally Established under a Deed of Trust
Dated 30th March 1979

Annual Report and Accounts

For year ended 5th April 2024

Registered Charity No.1156227

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PATRONS

Professor Sir Michael Bond, FRSA, FRSE, FRCPsych, FRCPGlas, FRCSE
Dame Lorna EF Muirhead, DCVO, DBE, CStJ, FROG
Mr. R. N. S. Bigland

TRUSTEES

Mr. D. Cain, FRSA, FIoD, MHSM, DipHSM, (Chairman)
Professor Michelle Briggs PhD RGN
Miss J Daley, LLB (Hons)
Professor P. Eldridge, MA, MChir, FRCS
Mr. P. Fell, MA (Cantab), FRSA
Professor Francis McGlone BsC (Hons), PhD
Dr. T Nash, MB, BS, Dobst RCOG, FRCA, FFPMRCA
Mr. M. Sharma, MBBS, MD, FRCA, MSc, FFPMRCA
Geraldine Thompson MSc Dip AHCS MIMI ***(Added 2nd October 2023)***
Dr. J. C. Wells, MB, ChB, LRCP, MRCS, LMCC, SRCA, SIPP
Dr. J. R. Wiles, MBBS, FRCA, FFPMRCA

CHARITY MANAGER

Mrs J Williams

SCIENTIFIC SUB-COMMITTEE

Dr U Allam, BSc, MPHe, MRCP(UK)(London), PhD
Dr Jamie Burgess , PhD
Miss. A. Bradshaw
Prof J Campbell PhD MSc BSc CStat CPhys FRCOT FRSB
Dr. N. Goodson, FRCP, PhD
Dr K Heron, MSc, PhD, DClinPsych
Dr A Marshall MB ChB, BSc, FRCP, PhD
Nr H Neiland
Dr. H. Poole, PhD, CPsychol
Miss. C. Staunton (Chair)

EDUCATION SUB-COMMITTEE

Ms Alison Bradshaw
Dr M Gupta MBBS, FRCA, FFPMRCA
Dr K Matthews, Consultant Clinical Psychologist
Dr K. Pushparaj MBBS, MD, FFPMRCA
Dr. M. Sharma, MBBS, FRCA, MD, FFPMRCA, MSc
Mr. John Tetlow
Dr. J. R. Wiles, MB, BS(Lond), FRCA (Chair)
Dr. J. C. Wells, MB, ChB, LMCC, FRCA

REGISTERED OFFICE

Clinical Sciences Centre
University Hospital Aintree
Lower Lane
Liverpool
L9 7AL

BANKERS

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99 -101 Lord Street,
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Merseyside.
L2 6PG

AUDITOR

BTMR Limited,
Statutory Auditor
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Manchester.
M3 2DF

SOLICITORS

John Roberts,
Abensons Solicitors
102 Allerton Road,
Liverpool,
Merseyside.
L18 2DG

INVESTMENT ADVISORS

Rathbone Investment Management Ltd.,
Port of Liverpool Building,
Pier Head,
Liverpool,
Merseyside.
L3 1NW

TRUSTEES' REPORT 2024

I am delighted to have the opportunity as Chairman of the Pain Relief Foundation and on behalf of our Trustee Committee to provide an introduction to our most recent Annual Report for the year ended 5th April,2024. We remain Academic leaders in the field of chronic pain research and have significant influence with Specialists, General Practitioners, Patients and their families.

The year has been a really productive time and we have regained momentum, and you will note from the report significant engagement with our research portfolio, work particularly with our Partnership with the University of Liverpool and the Walton Centre NHS Trust. Our programme of activities includes our research publications, grant applications and the delivery of our unique specialist conference and educational programmes attracting attention both in the UK and Globally.

I would wish to record our appreciation to our 2 lead Clinical Academics, Professor Andreas Goebel and Dr Andy Marshall who have now also been designated by the Charity as Senior Research Fellows in Recognition of the commitment and excellence of their work.

Our Charity Manager Julie Williams has again delivered an excellent programme with the support of the Charity Team. We are so fortunate to have such a team in place to ensure we are supported with donations without which we would not be able to be in a position to advance our pain research programme and to award grants.

The Report is a good read please enjoy and do not hesitate to contact us if you can help further our support in this important work

Amidst Backlog and Economic Challenges, UK Charity Remains Committed to Advancing Chronic Pain Research*

The UK's healthcare system is facing a significant backlog, with hundreds of thousands of individuals awaiting treatment, underscoring the urgent need for research that can alleviate the debilitating effects of chronic pain. The Pain Relief Foundation, a vital charity in this field, has navigated economic headwinds and remained steadfast in its mission to support research and improve the lives of those affected by chronic pain.

Flexibility and Fiscal Prudence Enable Maximization of Resources*

Despite the challenging economic environment, the Foundation has maintained its commitment to fiscal prudence and adaptability. These strategies have allowed it to optimise its resources and ensure long-term financial security.

Continued Research Funding Amidst Adversity*

The Foundation has prioritised research funding, recognising that scientific breakthroughs are essential for developing effective treatments and improving the lives of patients with chronic pain. This continued support has resulted in groundbreaking discoveries and the advancement of promising research programs.

Supporting Researchers and Healthcare Professionals*

The Foundation also provides support to pain researchers and healthcare professionals. It nurtures emerging talent, promotes collaboration, and fosters the dissemination of knowledge that can lead to improved patient care.

Ambition and Determination Despite Challenges*

Despite the ongoing challenges, the Foundation remains determined to confront chronic pain head-on. It believes that research can make a tangible difference in reducing the pain, suffering, and isolation associated with this condition.

Call to Invest in Research*

The Foundation emphasises the importance of continued investment in research, particularly in bold and innovative projects. It believes that through ongoing support, it can create a brighter future for millions of people living with chronic pain.

Solely Dependent on Public Support

The Foundation's research endeavors are entirely funded by the generosity of its supporters. It appeals for continued support to fuel groundbreaking research and ultimately create a world where no one has to endure the burden of chronic pain.

A Bright Future for Chronic Pain Management

As we embark on the next chapter of the Pain Relief Foundation, we are filled with optimism and determination. By embracing inclusivity, diversity, and innovation, we aim to create a future where people with chronic pain can live fulfilling and empowered lives.

What is Chronic Pain?

Sometimes referred to as persistent pain.

Persistent pain affects the muscles, joints and bones and has lasted for more than 3 months. It is a common problem effecting as many as 30-50% of people in the UK and is the leading cause of disability in the world. Persistent pain can affect any part of the body and can be felt in one or more body areas at the same time.

Pain can start following an accident or injury but often onsets gradually, without an obvious cause. Scientific research shows that pain that lasts longer than 3 months is likely to be due to changes in the nervous system rather than as a result of ongoing damage or injury. Therefore, tests such as x-rays and MRI scans that look at the state of tissue are often negative or inconclusive and therefore are not often needed. This means that pain is a result of a sensitised nervous system, which x-rays and scans are unable to detect.

Medication may be necessary for some people in order to keep them well and manage health problems. Painkillers, however, do not 'cure' pain. In fact, although it might not feel like it, painkillers are optional. For a variety of reasons, not everybody takes or wants to take painkillers. Some people can't take painkillers because of other health problems. Some have tried them and found the side effects weren't worth it. Others have never found anything that helped, and some people find that even though painkillers helped to begin with they later stopped working and so chose to stop taking them. So the amount of painkillers someone is on doesn't necessarily reflect the amount of pain they are in, and vice versa.

Some painkillers are based on opium (codeine, morphine, fentanyl) and whilst opioid-based medications can be effective for short-term pain (such as after surgery or breaking a bone) there is little evidence that they are helpful for the majority of people with persistent pain. Long-term and regular use of opioid medication can cause significant harm. Surprisingly, they can also actually lead to increased pain.

The fight to get timely and effective treatment for chronic pain is often long and difficult. It is incredible to think that despite the clear evidence provided by the above figures treatment for chronic pain is still one of the most under-funded services within the NHS. By being denied early access to such services, which have been shown to provide real support for many people with chronic pain, it is clear that far too many people experience a devastating long-term impact on their life. Financial hardship caused by the inability to work can and does put severe social and emotional strain on a family.

The Pain Relief Foundation and Pain Research Institute want to change this as we continue to build on what we already know and share this knowledge through research and education. By sharing such information as this with not only other healthcare professionals, researchers, politicians and decision makers, and the general public we hope to continue to push changes across our society that will make lifelong differences. Along with additional research, pain education is critical to improved treatments and outcomes so now, more than ever, we need to work together to implement new solutions and address the burden of pain on our society.

We believe we can succeed as we continue to invest in advanced research which is most significant and receptive to the needs of people with chronic pain our aim is to attract, fund and support the best researchers to ensure they focus on the science that will transform the lives of people with Chronic pain. We aim to continue to reach more healthcare professionals than ever with essential training and information designed to help them offer the best possible care to people with chronic pain not only in the UK but across the globe and to build on education and the work of the Pain research Institute to push the needs of people in chronic pain to the forefront. Our continued commitment to tackling pain, finding new treatments and hopefully one day a cure will not only change lives now but have a huge bearing in the future.

The Pain Relief Foundation believes that responsible financial practices are essential to its mission of addressing human chronic pain. The organisation recognises that its work is primarily supported by voluntary donations and is committed to respectful and responsible fundraising practices.

The Foundation carefully considers its fundraising methods to ensure that they align with ethical standards and do not cause undue financial burden to donors. Requests for donations are made respectfully and with a focus on the impact that donations will have on the Foundation's mission. Donors are provided with clear information about how their contributions will be used and the results achieved.

The Pain Relief Foundation exercises prudent financial management to maximize the impact of its resources. Expenses are carefully reviewed and justified to ensure they are necessary and directly related to the organization's mission. Investment decisions are made with a focus on long-term sustainability. The Foundation maintains open and transparent financial records to foster trust among donors and the public. Regular financial reports are published and made available. The Foundation is subject to external audits to ensure the accuracy and integrity of its financial reporting.

The Pain Relief Foundation recognises the invaluable contributions of its donors and volunteers. Their time, energy, and financial support make the organisation's work possible. The Foundation is deeply grateful for their loyalty and commitment. The Pain Relief Foundation strives to be a responsible and accountable organization, dedicated to ethical fundraising and prudent financial management. By adhering to these principles, the Foundation ensures that its resources are used effectively to advance its mission of alleviating human chronic pain. The organization is committed to continuing these practices to build trust and inspire continued support for its important work.

Your board ensures that we get the greatest impact from your donations, whether through developing our clinical excellence network or focusing considerable investment in finding a cure. Every pound that is raised for us deserves to be put to the best possible use and we take that responsibility very seriously.
This would not be possible without the skillful and capable Board of Trustees, who meet regularly to supervise and direct the Foundation and to whom we are forever grateful for giving up their time. The Committee comprises of people from many fields, each with in-depth and valuable skills from medicine as well as from administrative, legal, business, and commercial interests, each contributing to the effective management of the Charity. In carrying out these tasks, the Trustees are very ably supported by committees of specialists who have expertise and specialist interest in chronic pain.

The Trustees uphold the system of continual review in all areas of importance in the scientific and administrative conduct of the affairs of the Foundation. In these difficult times, our reserves can be measured as crucial and therefore, the *Reserves Policy* is repeatedly monitored so that we are able to use our resources to the maximum effect. The *Investment Policy* dealing with the *Reserves* is also regularly reviewed by the Trustees and the Investment Management team at Rathbones, to maximise the generation of both income and capital growth. The *Risk Assessment* policy has also been frequently reviewed and is under constant consideration to ensure that risks to which the charity may be exposed are understood, and steps taken to mitigate them have been identified. This is an area of prime importance, and procedural changes will be implemented from time to time as appropriate.

Each year the Trustees of the Foundation decide how much money is available for research budgets in the forthcoming year we then advertise in specialist journals, on our website, on the specialist internet site ResearchResearch.com and in the University and NHS press, for applications from suitably qualified researchers for grants to conduct projects on chronic pain.

All applications received are initially assessed by our *'Scientific Advisory Sub-Committee'* under its Chair, Dr Caroline Staunton. This committee has continued the vigorous task of overseeing our research work and assisting the Trustees in interpreting and analysing the large volume of scientific information submitted by the Research Fellows. The sub-committee also advises the Trustees on which of the many applications for research grants are most deserving, and which projects should be the recipients of the limited funds which the Foundation has available. The committee ensures that each application is Peer Reviewed, so that only the most deserving projects are considered, and recommendations are made to the Trustees. We are most grateful for the expertise and extensive work carried out by the Scientific Sub-Committee during this lengthy process.

A selection of research reports from grants awarded by the Pain Relief Foundation can be found on our website www.painrelieffoundation.org.uk.

Of equal importance is our programme concerned with the dissemination of information and of the education of practitioners, to improve the cause of pain relief. A major involvement of this work comes from the Walton Centre NHS Foundation Trust for Neurology and Neurosurgery and its associated Pain Clinic who fervently supports the educational activities of the Foundation, which could not take place without their commitment, again we thank you. Walton Pain Clinicians are also active researchers, adding to the portfolio of research supported by the Foundation. The Walton Centre Pain Clinic is one of the largest pain centers in Europe and provides a large potential source of patients for research. We are indebted to those who volunteer for the various research projects, here and in other units where research is ongoing, supported by the Foundation.

During the year, the *'Education Sub Committee'* under the temporary Chair of Dr. John Wiles, has through the success of recent conferences continued to deliver and widen the scope of the educational activity and increase the number of excellent educational courses on the Treatment and Management of chronic pain. The Pain Relief Foundation is noted for the level of excellence which these courses provide, and they are always well supported by all members of this committee and each year they welcome the opportunity to take the responsibility of organising and being responsible for the educational courses provided for doctors and other health professionals and are now encouraging other Pain professionals to follow suit.

We are constantly planning and proceeding ahead with our full timetable of events and with the enhancement of new technologies we are able to run these meetings as hybrid meetings allowing both in person and online attendance.

In June we facilitated the North **England Pain Group** (NEPG) meeting which was attended by pain specialists from all over the north of England. Under the organisation of Dr Hemkumar Pusharaj and Dr Manohar Sharma we ran our annual workshop **Clinical Management of Chronic Pain Course** July. Other workshops are currently being drafted to run throughout the year.

An update on these events can be found later in the report.

Dr John Wiles is responsible for arranging the Annual Lecture and the Student Essay competition. The 2024 Annual Lecture followed the same pattern as last year, rather than honour one person we honoured two eminent figures. The tile this year is '*The Placebo Effect' and* was given to honour the life and work of Dr Keith Budd who was a member of council of the Royal College of Anaesthetists and an examiner for the Fellowship examination. and Dr Ken Hardy was appointed consultant anaesthetist at Bangor hospital in 1962 and set up the first pain clinic in Wales. He was elected to the presidency of the British Pain Society. The lecture was delivered by Professor Fabrizio Benedetti a professor of physiology and neuroscience at the University of Turin Medical School in Turin, Italy, and a researcher in the field of placebo studies.

The student essay competition was again opened up to Medical, Nursing, Occupational Therapists, Psychology and Physiotherapy students. With the winners of each category presenting their essay at one of our educational meetings.

Our sincere thanks go to Dr John Wiles for his active role in coordinating.

Writing this report also gives us the opportunity to express our sincere appreciation to the committed people who each year continue to contribute to the work and achievements of the Foundation; the volunteers who support us, the Charity Manager Julie Williams, her staff Lorraine Roberts, and Brenda Hall and Jo Stephens who work so conscientiously throughout the year. I would also like to acknowledge Kath Johns and Emma Shepherd of BTMR Ltd, Statutory Auditor, who meticulously prepare and audit the accounts.and Joseph McLoughlin of Rathbones Investments for retaining our investment portfolio.

Aims & Objectives

The aims and objects of the Pain Relief Foundation, as set out in the Constitution, are the advancement and promotion of all forms of medical research and in particular the relief of human pain and all painful conditions of every type whatsoever and howsoever caused and to disseminate the results of any such research throughout the world.

Policies to further Aims & Objectives

In pursuance of these aims and objectives, the continued policy of the Trustees is to:

- Fund and enable research into the causes and optimal treatment of human chronic pain.
- Provide and maintain a Pain Research Institute, headed by a Professor of Pain Science, in which research and education is conducted in pursuance of the charity's objectives.
- Undertake the support of the Pain Research Institute as a priority in the Pain Relief Foundation's funding programme. However, research grants will also be made available and awarded by open competition, for qualitative research projects carried out in other institutions.
- Support partnerships with higher education and the N.H.S directed to the understanding and treatment of human chronic pain. In particular, to provide long-term funds for the support of a Chair in Pain Science at the University of Liverpool.
- Support the dissemination of the results of such research throughout the world.
- Promote and enable education and training for doctors and other health. professionals on human chronic pain and its treatments.
- Provide doctors and other health professionals with an information service on chronic pain and its treatments, in order to improve patient care.
- Provide an information service to human chronic pain sufferers and patients on chronic pain conditions.

This policy has remained unchanged since the last annual report.

Chronic Pain

Millions of adults are living with 'Great Pain Shame'.

A study found that those with an ailment that affects their day-to-day existence rarely tell others about the pain they're in. "The prevalence of pain is huge. It dwarfs most other conditions.

Chronic pain is persistent pain that lasts more than three months, despite medication or other forms of treatment.

Secondary chronic pain is a pain which tends to be caused by another condition, for example, arthritis, endometriosis, cancer pain.

Primary chronic pain is a condition in its own right - there is no known condition other than the pain itself - this can include conditions such as fibromyalgia or complex regional pain syndrome.

Chronic pain is often confused with acute pain - a short-term pain such as a broken bone or a torn muscle.

Living in isolation is not a new phenomenon for those who live with chronic pain. Pain prevents you from doing the things you love to do, going to the places where you want to go, and meeting with those you love. It prevents you from going to work, going out to shops, restaurants, and entertainment venues, seeing your family and friends. As your pain enforced isolation continues, you lose your routine, your sense of time, your ability to interact with others, and your ability to participate in the world outside your home.

Staying indoors as much as possible (14 per cent), turning down social invitations (13 per cent) and avoiding going outdoors in the heat (11 per cent), are among the top ways sufferers choose to hide their pain.

Nearly six in 10 (56 per cent) would rather not talk to anyone about what they are going through - with 45 per cent preferring to try and forget as much as possible.

And 41 per cent don't want to be rendered incapable of doing everyday things.

PAIN AFFECTS US ALL

The Department of Health recognises chronic pain both as a long-term condition in its own right and as a component of other long-term conditions.

Across the UK there are currently 14 million people living with chronic pain.

HEALTH AND SOCIAL CARE

- 66% of people attending A & E seeking help with pain had made 3 visits to a health care professional in the preceding weeks.
- 16% of chronic pain patients feel that their chronic pain is so bad that they sometimes want to die.

WELFARE AND BENEFITS

- Of the 14 million people living with chronic pain, 3.5 million said their pain had kept them from their usual activities, including work, on at least 14 days in the last 3 months.

EMPLOYMENT

- The CMO report states that 25% of chronic pain patients lose their jobs, this contributes to 42% in the lowest income households being more likely to report chronic pain, compared with 27% in the highest.
- 41% of people who attended pain clinics report that their pain has prevented them from working and 13% have had to reduce their hours.

SOCIETAL IMPACT

- Low back pain is ranked highest out of 291 conditions examined by the Global Burden of Disease study, ranking number 1 for years lost to disability worldwide.
- In fact, 5 of the top 12 disabling conditions globally are persistent chronic pain conditions: low back and neck pain, migraine, arthritis, and other musculoskeletal conditions.

This situation highlights just how much research and associated work still needs to be carried out if we are to tower above chronic pain and to ease the difficulty which it causes. The staff at the Pain Research Institute and in the other Laboratories which are funded by the Foundation, recognise that much remains to be done, and they are relentless in their efforts to solve the many problems and unexplained factors.

The Pain Relief Foundation's funding has helped the Research Institute secure a firm base for an exciting and forceful academic structure which is necessary if the Institute is to continue moving forward with a rigorous programme of research into human chronic pain.

It has also helped the Foundation to co-ordinate and further develop the extensive teaching of undergraduates, postgraduates, nurses, and other medical professionals that is essential to the further improvement in the treatment and relief of chronic pain.

The Pain Research Institute (PRI)

The Pain Research Institute based within the Clinical Science Centre at University Hospital Aintree houses patient examination laboratories, research laboratories, work and study areas, a specialist pain library with several study areas and general workstations which provide researchers with access to all of the relevant pain databases and research offices, through a fast link computer hub.

We are located directly adjacent to the Walton Centre NHS Foundation Trust, Liverpool. The dominating factor for our location here is because pain-related research projects often need access to a large number of patients. The Pain Clinic has a throughput of over 4500 new patients each year and access to this patient base is paramount for the Pain Research Institute to continue with their work. The symbiotic work that is carried out in liaison between the two units, and the expertise that has emerged over the years, has led to the *'Walton Pain Clinic'* becoming, and remaining, the largest and most successful in Europe. All patients recruited are fully informed volunteers.

Welcome to another fantastic member of the pain team.

This year has seen the addition of Prof Michelle Briggs to the Pain Research Institute. Prof Briggs is the Clinical Professor of Nursing, University of Liverpool, Director of Nursing (Research & Academic Development), Liverpool University Hospitals NHS Foundation Trust and Trustee of the Pain Relief Foundation. Her research is contributing to a greater understanding of the difference nurses, midwives and AHPs can make for people in pain.

Also congratulations go to Dr Bernhard Frank for his promotion to Honorary Clinical Associate Professor at the University of Liverpool

Patient and Public Involvement (PPI) has always been important to the PRI. We have been holding regular PPI groups for over ten years. The PPI team consults with patients to shape all stages of research projects concerning chronic pain (with a particular focus on Complex Regional Pain Syndrome and Fibromyalgia) within the Pain Research Institute.

The Pain research Institute remains a hive of activity with many current ongoing studies some of which are listed below.

- Fibromyalgia and Refractory Pain in Rheumatic Diseases
- The use of anakinra in treating complex regional pain syndrome by blocking interleukin-1
- Peripheral Microneurography and Pain Mechanisms

To date, there have been numerous publications in medical and scientific journals together with books written by Consultants from the Pain Research Institute. The teams of doctors and scientists have ambitious plans for future research which, if funding can be obtained, bid fair to make substantial advances in the understanding, and the relief, of chronic pain which presents many psychological problems and physical conditions for the sufferer.

Research Accommodation

The Trustees of the Pain Relief Foundation have continued with the agreed policy that whilst continuing to retain the leasehold and ownership of the Pain Research Building in the Clinical Sciences Centre, together with the fixtures, fittings and equipment therein, they will provide the facility of the Institute, together with the fixtures and fittings, to the Department of Neurological Science, University of Liverpool, and to other such parties who are researching chronic pain, or who wish to enter into collaborative research on human chronic pain.

This arrangement will ensure that research personnel supported by the Pain Relief Foundation, the University of Liverpool, the Liverpool John Moores University, and those others who are employed by another party but are working on chronic pain research under the auspices of the 'Pain Relief Foundation' Professor of Pain Science, shall be contained in the same premises and work collaboratively. This arrangement offers a more structured and controlled working area and is conducive to good working practices. The use of the premises does not create a lease but shall be treated as a Licence at Will.

All of the overhead and operating costs of the Pain Research Institute premises are borne by the Pain Relief Foundation and are allocated as part of the research grants. The following *'modus operandi'* was pursued during the year as in previous years:

- The Pain Relief Foundation provided administration and research accommodation for the research personnel, within the Pain Research Institute.
- The Pain Relief Foundation provided research secretariat, and clinical research support facilities for the researcher posts from its own staff resources.
- The Pain Relief Foundation provided secretariat assistance to the associated research personnel, from its own employed staff.
- The Pain Relief Foundation discharged all costs connected with the accommodation of the Pain Research Institute and its operational facilities, including overheads, heat, light, repairs, and purchase of new equipment etc.
- The Pain Relief Foundation discharged all costs connected with the provision of all consumables and computer hardware for the Professor of Pain Science and all other grant aided Researchers working in the Pain Research Institute.
- The Pain Relief Foundation discharged all costs connected with the provision of lecture theatre and associated facilities.
- Under the present structure, the Head of the Pain Research Institute is charged with reporting to the Scientific Advisory Sub-Committee in respect of all research work carried out under the Pain Relief Foundation grant arrangements, and also on the additional research that has been made possible through the Foundation's funding and provision of accommodation. The Chair of the committee is then able to submit a concise report to the Committee of Trustees.

This established procedure is an essential method to evaluate and measure the success and effectiveness of the research work being conducted and to ensure that it is achieving its aims. Additionally, the head of the Pain Research Institute is invited to attend meetings of the Trustees at six monthly intervals, to answer questions on matters raised regarding current and on-going research projects and future planned developments. He also maintains a liaison with the Education Sub-Committee, attending their meetings in an Ex-Officio capacity.

RESEARCH CO-ORDINATION & EDUCATION

The research co-ordination accommodation is located in the administrative area and fulfills a range of functions in its operational role. It supports the Pain Research Institute in a number of fields, providing accurate sources of scientific and medical information to assist the researchers in many projects.

Under the direction of the Education Sub-Committee, the Education Section also undertakes the operational factors in the conduct of all postgraduate courses that are organised throughout the year, arranging the teaching seminars, overseeing the Pain Relief Foundation Annual Lecture, collating and ensuring the correct and timely marking of Student essays and organising external conferences.

STRUCTURE GOVERNANCE AND MANAGEMENT

Governing Document On 6th April 2014, the Pain Relief Foundation was incorporated as a Charitable Incorporated Organisation under charity number 1156227.

Structure, Governance & Management

The Pain Relief Foundation is controlled by its Constitution as a Charitable Incorporated Organisation managed by a Committee of Trustees and at their meetings the Committee regularly conducts an assessment and review of their number, taking into account the skill requirements of the members in conducting the affairs of the Trust, and any potential retirements in the forthcoming 12 months. From this review, consideration is given to the need, if any, to recruit further Trustees. In the event that further recruitment is deemed necessary, the Committee of Trustees will seek suitable candidates through a process of personal contact across the Universities, the Health Service and other appropriate professional bodies associated with the charity. Details of the Trustees are shown on page two of this report.

The power to appoint a new Trustee or additional Trustees of the charity is vested in the Committee of Trustees and new appointments may be made by a resolution of a meeting of that Committee. A Trustee may retire upon giving two months' notice in writing of intention to do so to each of the other Trustees. The Trust Constitution requires that the number of Trustees should not be less than three at any time, but there is no limit on the maximum number and Trustees are not required to retire and stand for re-election.

No expenses of any type will be paid to any Trustee, nor will any Trustee be paid any remuneration or payment of any kind from the Foundation in their capacity as a Trustee. All of the Trustees will give freely of their time and act in an honorary capacity. This is confirmed in each year's Annual report & Accounts.

In the period 6th April 2023 to 5th April 2024, there were no expenses of any type paid to any Trustee nor was any Trustee in receipt of any remuneration or payment of any kind from the Foundation in their capacity as a Trustee. All of the Trustees gave freely of their time and acted in an honorary capacity.

The Committee of Trustees conducts at least four quarterly meetings each year at which they receive reports on the activities and achievements that have occurred since the previous meeting. The meeting agendas encompass reports on the full range of activities and situations including the day-to-day administration, investments and reserves, cash flow and risk management.

The Committee of Trustees continues to review several areas of importance in the effective management of the Foundation. The prepared '*Risk Assessment*' policy is subject to regular review to ensure that potential risks to which the charity may be exposed, are adequately identified, assessed and mitigating steps taken. This operational area is considered to be of the greatest importance and procedural changes will be implemented if deemed appropriate.

Related Parties

For the purposes of preparing accounts in accordance with the Statement of Recommended Practice for charities, in the opinion of the Trustees, the following are related parties to the Pain Relief Foundation:

- The Trustees and their immediate family
- The National Health Service
- The University of Liverpool

Risk Management

The trustees have a duty to identify and review the risks to which the charity is exposed and to ensure appropriate controls are in place to provide reasonable assurance against fraud and error.

Risk Assessment

The Trustees have prepared a risk assessment register in which they have recorded the details and results of an extensive study regarding the potential risks to which the charity may be exposed in the conduct of its affairs. The Trustees have satisfied themselves that through the actions they have taken, the identified risks have been reduced or eliminated, and that appropriate procedures and controls to deal with the risks are in place, so that any resulting or potential impact that the charity may experience is minimised.

The risk assessment register is subject to at least an annual review and in general it is an ongoing review. Such reviews ensure that all of the procedures in place continue to be appropriate to the conduct of the charity and that it is adequate in the light of experience. Where appropriate, systems or procedures have been established and put into place so as to mitigate any risks which may arise or develop

Trustee Indemnity Insurance

The Trustees do not contract a Trustee Group Indemnity Insurance policy.

Recruitment, Appointment, and Induction of New Trustees

In selecting persons to be appointed as trustees, nominations are submitted to a meeting of the Committee of Trustees, so that they each have the opportunity of evaluating the strengths of the candidate(s). In considering each nominee, the trustees take into account that person's professional qualifications or personal qualities, their commitment to promoting and furthering the aims of the Foundation, and their ability to make a contribution to the effective management of the Foundation. If the nominee is deemed acceptable, then the appointment is conducted in accordance with the established procedure of induction and training.

The Chair of the committee will extend an invitation to the candidate(s) to attend an early meeting to discuss the appointment in more detail. This is followed by a further meeting with the committee of trustees at which the new trustee is introduced, and a formal appointment confirmed. On appointment, the new trustee is required to sign a declaration stating that they comply with the formal conditions required of a Trustee and are therefore able to legally serve as a trustee. It is a requirement that a declaration of interest be made so that any conflicting interest is noted and registered accordingly. Should any interest be registered, then at any meeting where there is such a conflict, the Trustee will be required to withdraw and not vote on the matter. It is also declared that none of the Trustees have an interest in the pharmaceutical industry. However, any such interest would be registered.

An induction meeting is then held with the Administrator who will inform the new Trustee of their powers and responsibilities, the operational policy, the management arrangements for the charity's

investment funds and the procedure of receiving applications for research grants and how the applications are processed through to selection. Other meetings are then held with the Sub-Committees at which their operational roles and powers are discussed.

An induction welcome pack is provided to the new Trustee, which contains as a minimum a copy of the Constitution, a synopsis of the Foundation since its inception showing its achievements and further research targets in human chronic pain. Copies of the Trustee Committee's meeting minutes and the meeting minutes of the Advisory Sub-Committees, each covering the past 24 months, cash flow reports for the same periods, and copies of the previous two years' Annual Report and Accounts. A presentation folder is prepared containing copies of the Reserves Policy and Annual Review, Risk Assessment, Management Flow Chart, Mission Statement and Equal Opportunities Policy. In addition, a copy of the Charity Commission's publications *'The Essential Trustee: What you need to know'* and *'Charities and Public Benefit'* are provided.

Education Advisory Sub-Committee

The Committee of Trustees is advised on all aspects of education and information by an appointed ***'Education Advisory Sub-Committee'***, chaired Dr John Wiles, a Senior Pain Consultant, working in the N.H.S., and also a Trustee of the Foundation. During the year under report, the committee consisted of Neurosurgeons, Senior Pain Clinicians, and a Clinical Lecturer with Special Interest in Pain. This committee, whose members have a wide-ranging knowledge of the treatment of chronic pain and medical education strategies, were delegated and directed to advise the Trustees on educational issues and to further develop the Pain Relief Foundation's educational role through publications, courses, lectures, literature and conferences and in this respect, it fulfilled the role of maintaining a well-balanced delivery of up to date educational programmes to health professionals., many of whom traveled from all parts of the country to attend.

This committee is also charged with identifying the most appropriate methods of disseminating in printed format, details of successful research results, information on new and improved treatment methods that have been devised for pain patients, and information leaflets to aid pain sufferers in finding the best treatment resources centers. This information is distributed through the medical press and, both the Foundation's website and the Institute's website. All of the members act in an honorary capacity.

Scientific Advisory Sub-Committee

To assist the Trustees in making balanced policy decisions regarding the funding of selected research projects and additional applications for funding, they are advised and directed by an appointed ***Scientific Advisory Sub-Committee***, which is chaired by Dr Caroline Staunton, a well-respected and formidable research associate. The other members of this committee are recruited for their in-depth knowledge and understanding of chronic pain conditions and are drawn from both local and external treatment centres covering the many disciplines involved in the study and treatment of human pain. All of the members act in an honorary capacity and the committee is supported by the Foundation's Charity Manager.

The Committee continues to be the source of invaluable information, advice and opinion when reporting on, and prioritising, the numerous funding applications for scientific research which were considered to be worthy of support. It also continued with the vital task of overseeing the results from the many facets of research work, assisting the Trustees in interpreting, and analysing the large volume of scientific information submitted by Research Fellows, Grant Holders.

The purpose in receiving and analysing these reports is to satisfy the Trustees that:

- the research being funded is achieving the projected results to satisfactory and accepted scientific, medical and research standards.
- the research is likely to reach its stated aims.
- ethical approvals remain in place and are being followed scrupulously.

- research Governance is being observed at all times.
- quality standards are being maintained.
- the costs of the research are maintained within the grant limits.
- the research is being managed and monitored effectively.

The head of the Pain Research Institute is called to attend each of the Trustee meetings to provide the Trustees with an insight into the advances and the strategic development of the research opportunities being pursued. Reports are also received from the appointed Education Advisory Sub-Committee, which is principally involved in directing the Educational Meetings, Lectures, Student Essays and Patient Information issues and the Scientific Advisory Sub-Committees which undertakes the task of advising the Trustees on all aspects of Research and Research Grant applications.

Grant Making Policy

In November each year, the Pain Relief Foundation advertises in the national medical press, to invite well established researchers and scientists to submit applications for Pain Relief Foundation grants, to carry out research projects on human chronic pain or to purchase special laboratory equipment to conduct clinical trials. The notice to apply for grants is advertised in the selected medical journals, on the Pain Relief Foundation Website, on the NHS grant website and through other appropriate media; there is a closing date for the receipt of such applications. The advertisement states the upper (monetary) limit of grants, which may vary from year to year.

On receipt of applications, the Foundation's Charity Manager ensures that all appropriate sections of the application forms which have been received are correctly completed and then arranges a meeting of the Scientific Sub-Committee to present the Abstracts of the applications to the members. At this meeting, the members jointly select and nominate independent and best qualified, learned medical persons who will be asked to peer review each application and to give their expert opinions.

After the meeting the Charity Manager writes to the selected peer reviewers, submitting a copy of the application asking if they will provide an assessment of the proposed research, the likelihood of the work succeeding and the cost effectiveness of the requested budget. In addition, references are sought regarding the applicants and the outcome of previous research projects for which they have received funding from all sources. When all applications are complete with the peer reviews and references received, a full set of each application is submitted to each member of the Scientific Advisory Sub-Committee, for consideration and prioritisation in preparation for a selection meeting of the members.
At the grant meeting, the Chairman calls the attention of the members to the received Peer Reviews and References which are referred to throughout the process of considering the most appropriate and worthy applications deserving of a grant. Each committee member delivers an opinion on the applications received and scores each application between 1 and 3 with (1) being the lowest score and (3) being the highest score. These scores are then brought together with the Peer Review scores and the applications listed in order of achievement, at which point the Chairman and the committee draw recommendations to place before the next meeting of the Trustee Committee. When the Trustee Committee receives the advice of the Scientific Advisory Sub-Committee, they decide which applications, if any, will be funded in accordance with advice received, and in the light of funds available.

The Trustees may recommend that an application not be funded, be funded in full, or be funded at a reduced level. In the event that the Trustees are considering a number of competing recommended applications for which the Foundation's funds are inadequate to fund them all, the Trustees may invite the Chairman of the Scientific Advisory Sub-Committee, together with those members of the Sub-Committee who are also Trustees, to help them prioritise the applications. Each grant is specific to the holder and ceases should the grant holder terminate their post.

New grants approved since the last report.

1. An application is for a 3-year prize PhD Student for a total of **£74,997** submitted by **Dr David Bulmer** of **University of Cambridge** and is titled: *'Targeting the microbiome to treat chronic pain.'*

2. An application for an 18-month grant for a total of **£29,664** submitted by **Dr Melina Del Felice** of **University of Sheffiled** and is titled: *'Inhibition of metalloproteinases: a novel approach for the treatment of post-stroke pain.*

3. An application for a 12-month grant for a total of **£10,097** submitted by **Dr Charlotte Khraè** of **Liverpool John Moores University** and is titled 'Perceived social threat in chronic pain'.

4. An application for a 12-month grant for a total of £**29,975** submitted by **Dr Olivia Grech** *of* **University of Birmingham** *and is titled 'The role of glucagon-like peptide 1 in migraine.*

5. An application for a 12-month grant for a total of £29,975 submitted by **Dr Maria Maiarú** of **University of Reading** and is titled '*Novel botulinum-based construct for the treatment of chronic pain'*

**As from April 2024 Professor in Pain Science Costs for 50% of the Chair in Pain Science no longer required.*

Public Benefit

In the foregoing section, the aims and objectives of the Foundation are plainly stated, and the policies adopted to deliver these aims and objectives are clearly stated. The objectives are supported by clear explanations regarding the policy of the Foundation to support the preparation and development of good quality research projects which are peer reviewed and expertly selected to develop the provision of improved treatment for the benefit of patients, easing and reducing their pain. In addition to the research conducted, the Foundation provides educational activities and the training of health professionals to achieve the stated aims. All of these activities are a continual matter of ongoing review by the Committee of Trustees and the Members of the Advisory Sub-Committees, so that in the light of experience, adjustments which are considered appropriate are implemented quickly, to ensure that the highest quality results continue to be delivered.

The development of improved patient services and treatment, as previously stated, is considered to be a priority issue by the Foundation, and it works symbiotically and in co-operation with the NHS and Universities to provide post-graduate scientific education in chronic pain relief. A number of postgraduate training courses have been conducted each year, for the continuing education of nurses, GPs, and for clinical pain specialists.

The information service provided by the Foundation serves to inform General Practitioners and all Pain Clinicians and Consultants with up-to-date information regarding available treatments for various pain conditions. In addition, the Foundation provides an information service for patients, their support carers and family members through the provision of leaflets on most chronic pain conditions. The Foundation's website also provides a vast range of guidance and support for patients and Health Professionals, and much of the advice section contents can be downloaded for further ease of access. This enables patients and carers to be empowered about their individual problems.

Pain sufferers who make telephone contact with the Foundation are connected to experienced, friendly staff who are trained to sympathetically and professionally direct enquirers through to available services and advice centres. They are also able to guide sufferers into how they can avail themselves of these services and what action they can take to be referred to clinical services for pain treatment.

Patients also receive direct benefit through research results which lead to the development of new and improved treatments for chronic pain conditions. These results are delivered to pain treatment clinics nationally, and indeed internationally, through the dissemination of research information by the Foundation either electronically, from our website, in medical publications and by way of educational meetings for health professionals.

With living with chronic pain affecting approximately 40% of the British population, it can be seen that the work of the Foundation provides a benefit for a huge number of people. Reports on the research work supported by the Foundation are included in later pages and give a vast amount of information on the progress that is being made with human chronic pain and you are encouraged to read this section.

Volunteers

The Pain Relief Foundation does not receive any funding from central or local government, the health service, or other official bodies. Instead, the Foundation depends entirely on donations, gift aid, legacies, appeals and contributions from supportive members of the public, from generous companies and from several small trusts. There is a small level of direct fundraising activity organised and conducted by the Foundation's own staff, supported by one or two volunteers, an area in which we would like to grow our support. Additionally, it seeks to secure grants from trusts and the commercial sector to fund specific research projects.

The Foundation is not in receipt of benefits in kind, either by way of services, facilities, or donations-in-kind. It does, however, receive some limited benefit from the very small number of volunteers who support the fundraising section in the organisation and conduct of small events. The Trustees recognize the intangible value of the contribution of volunteers to the charity and the Trustees are of the opinion that such income cannot be reliably ascertained. However, it is considered that such intangible income is unlikely to be material.

Powers of Investment

The Constitution provides the Committee of Trustees with the following powers:

1. To administer a bank account in the name of the Foundation at such bank as the Trustees shall decide.

2. To invest in the name of the Trustees, any monies not required for the immediate purpose of the Foundation, in such securities as they may from time to time decide as if they were beneficially entitled and whether such securities shall be Trustee investments or not and shall have power from time to time to transpose such investments.

3. That any property purchased by the Foundation shall be vested in the Trustees appointed for that purpose and the Trustees shall enter into a Deed of Trust setting forth the purposes and conditions under which they hold the said property in trust for the Foundation and shall with such consent as is by law required deal with the property so vested in them by way of sale, mortgage, charge, lease or otherwise howsoever directed by the Foundation.

Investment Policy

The Trustees have developed an investment policy which it believes will respond to the needs of the on-going activities of the Foundation. Sufficient funds are retained in investment that will ensure we can respond to all contingencies as they may arise. Equally important is the strategy of investing in low to medium risk funds that will also provide an operational income. The objective is that this investment policy will produce improved values and income, whilst at the same time safeguarding the short-term and long-term financial needs of the Foundation. The Trustees seek the advice of its Investment Advisors, Rathbone Investment Management Limited and at regular meetings with the Advisors, in-depth reviews are held into the investment portfolio that makes up the reserve fund.

The investment decisions taken by the Trustees throughout this financial year have proved to help preserve the portfolio as much as possible in the current climate. Supported by the Advisors and making several minor adjustments, for the best possible outcome the fund has this year seen an increase compared with the end of the last financial year. At a joint meeting with their Advisors, the Trustees set an investment policy of 60% of the funds invested into 'Equity Investments' with a view of maximising the Securities and to invest 40% of the funds into 'Fixed Interest Securities'. The decision to ease the approach with fixed interest investments was a very positive decision at the commencement of the year.

Mindful of the continuing uncertainty in the markets, during the year under review the Trustees gave instructions to the Portfolio Manager that the portfolio investment should be organized at

65% of its value being in Equities and 35% of the value being in Fixed Interest stock and the investments were so arranged at the beginning of the year.

Reserves Policy

The strategy developed by the Trustees is to hold a level of reserves that is deemed to be appropriate from time to time, to ensure that:

- The committed and planned research projects undertaken in the short, medium, and long term are sustainable.
- The annual costs of the new 'Pain Relief Foundation Senior Lecturer of Pain Science promoting to Professor' appointment at the Pain Research Institute, is now into its first year, may be supportable from the income generated by the investments, so as not to detract from the distribution of the annual general income if this is required by the Trustees to balance its annual income
- The Trustees can address any problems that arise, including the loss of any significant source of income, which might restrict the ability of the charity in carrying out its objectives.
- Sufficient funds are available to respond to new and important projects that are identified.
- The Trustees can respond to a shortfall of income in any financial year, that may occur for whatever reason, and which shall enable the research that is already authorised, to continue without a break.
- The cost of funding the Chair at the University of Liverpool for the 'Pain Relief Foundation Professor of Pain Science' shall be protected for a minimum forward period of 10 years from any date, by ensuring that such sums as shall be required to continue the funding for such period are kept on reserve.

In setting the level of reserves, a conservative management style has been adopted that is consistent with the Trustee's responsibilities who have agreed a broad spread sector exposure to increase diversity and to regulate risk. The Trustees have established a position that the level of unrestricted reserves and investments should be adequately sufficient to respond to the above operational policy and needs. Therefore, the Trustees have agreed the following:

- To provide reserves to cover the estimated costs of funding existing research, research coming on-line, overheads, research administration support, charity administration and fundraising over three years. Based on an average annual expenditure, this need is £1,270,245
- To retain in investments, an amount that will enable the Trustees to respond to new and important projects that may arise. In arriving at a level of retention, consideration has been given to the fact that such projects may require funding for at least two years and possibly three years.

It is considered that in view of the ongoing investment market volatility and the continuing and uncertain slow rate of recovery, together with the unsteady present uncertainties worldwide, the present level of reserves is adequate to meet these criteria.

Trading

Changes in the 2000 Finance Act, Chapter 17, allowed exemption to tax on charitable income from trading activities up to predetermined levels. The charity continues to carry out a very small level of incidental trading within the prescribed limits.

FUNDRAISING REGULATOR

The Pain Relief Foundation is a Member of the Fundraising Regulator (FR) and has been since its inception in 2016, The FR is the independent regulator of charitable fundraising and was set up following the Etherington review of fundraising self-regulation (2015) to strengthen the system of regulation and restore public trust in fundraising.

The FR is open to all fundraising organisations, suppliers, and associates. Members agree to adhere to the highest standards of good practice with their fundraising, and their stated Fundraising Promise. As a Member of the FR we demonstrate Membership of the scheme by using the scheme logo on all fundraising materials. By participating in the scheme charities are advertising commitment to best fundraising practices and to giving the public the comfort of a 'safety net' provided by a robust complaints system.

It is a requirement that a charity submits an annual report to the FR, advising the Board of the number of complaints received by the Charity, in relation to its Fundraising activity, by category. The report requires the charity to notify the Board of action taken to resolve any such complaints and what the outcome results are.

Pain Relief Foundation is pleased to report that in the year ended 5th April 2024, no complaints had been received by the charity in the preceding 12-month period. A report to this effect was submitted to the Board of the FR as required.

The Pain Relief Foundation Fundraising Promise

We are always committed to working to the highest standards of practice.

We promise donors that we will comply with the FR Codes of Fundraising Practice and do all that we can to ensure that fundraisers and volunteers will at all times comply with the Codes and with this Promise.

We comply with the law, health and safety and the environment. We will not put unfair pressure on anyone to donate. If you do not want to donate, we will respect your decision. We require anyone fundraising on our behalf to clearly identify themselves as one of our representatives.

We are honest and open and do not make false or exaggerated claims. We do what we say we are going to do and do not pretend to do things that we cannot. We will answer any reasonable questions you have about our fundraising activities and costs. Please contact us for information, visit our website or see our Annual Report.

We are clear and give clear details about how you can make a gift. If you make a regular gift and you want to cancel it, we will carry out your cancellation instructions as soon as possible. We are clear about what we do and how your gift is used for the effective support of our beneficiaries.

We are fair and respect the rights, privacy, and dignity of each of our supporters and beneficiaries and conform to the Data Protection Act. We will only use your personal information for the purposes stated and for which you have given your consent. If you tell us that you do not want us to contact, you in a particular way (e.g., by telephone) we will not do it.

We are reasonable and responsible and will be careful not to use any images or words that cause distress or offence. We make sure that our events are well run and meet health and safety and environmental requirements, and we avoid causing any nuisance, damage, or disruption. We will not use excessive emotional arguments to make you feel guilty about not giving to us.

We are accountable and should you be unhappy about anything we have done while fundraising, you can write to us and complain. We have a complaints procedure, and we will acknowledge your complaint within 7 days and commit to dealing with the matter within 30 days. A copy of our

procedure is available on request and if we are unable to resolve your complaint, we accept the authority of the FR to make a final adjudication.

FUNDRAISING COMMITTEE

Effective fundraising committees are vital to the life and financial well-being of organisations, and this is no different at the Pain Relief Foundation our fundraising committee remain committed to help raise awareness and funds. The functions of the group vary but centres around information, building relationships and raising money to meet the specific organisation's special or ongoing needs.

The Committee is made up of Board members with special skills and contacts to serve the role and non- members made up of nurses, ex patients and people with an interest in the Foundation whom without we could not fulfil this role. The Chair of the '***Fundraising Committee'*** Judith Daley, who is also a Trustee will in future advise the Board of Trustees in all facets of fundraising.

DONATION POLICY

This policy has been set out by the Trustees of the Pain Relief Foundation. It is a public guide to how the Pain Relief Foundation makes decisions on accepting donations and the procedures they follow. The policy is aligned with the codes of Fundraising Practice published by the Institute of Fundraising.

This document makes clear the Trustees' legal obligations with the regards to the acceptance and refusal of donations. It outlines the day-to-day procedures that need to be adhered to and ensures decisions are not taken on an ad-hoc basis but are in support of Pain Relief Foundations strategies and objectives.

Trustees' legal obligations

The Trustees take overall legal responsibility for decisions relating to whether a donation can be accepted or refused.

The Trustees must be able to demonstrate that they have acted in the best interest of the Charity.

The Trustees have a duty to carefully, based on evidence made available to them, whether the Charities interests will be better served by accepting or refusing the donation and to act accordingly.

These judgements must not promote any Trustee or employee's personal moral agenda, or interest and the Trustees must not allow individual or collective personal, political or ethical issues, which are not directly related to interests of the Charity, to affect their judgment.

Trustees must not derive any personal benefit (individually or collectively) from donations, offered to the Charity.

Policy

On a day-to-day basis, the Charity's board of Trustees delegates the responsibility to accept or refuse donations as follows, providing the Charity Manager is sure that any potential individual or corporate donor are supporting the charity in accordance with this policy.

- A donation must be clearly evaluated to establish whether it would be in the best interest of the Pain Relief Foundation to accept or refuse it.
- The donation should contribute towards the Charity's overall strategy and plans.

- The Charity will not accept donations from individuals or companies whose wealth are known to result from illegal activities or where there are indications of corruption and related crime.
- The donor's objectives or activities must not appear to be incompatible with the Charity's vision, mission, and values, particularly if this risk is causing significant damage to the Charity's integrity, public image, or professional reputation.

The Pain Relief Foundation will refuse donations in the following circumstances:

- Where the activities of a donor are directly contrary to the objectives or agreed policies of the Charity or the Charity suspects the gift has been donated to facilitate money laundering or other criminal activity.
- Where it can be clearly shown that the cost to the Charity of accepting the donation will be greater than the donation itself, and that the acceptance of the donation will directly lead to a net decline in assets of the Charity.
- Where the offer of support is dependent on the fulfilment of certain conditions placed upon the Charity and any condition,
  A) Is in itself contrary to the objectives of the Charity
  B) Is regarded as needing an unreasonable level of support from the Charity especially in relation to the size or impact the donation will have on the Charity's charitable activities.
  C) Will divert the Charity from pursuing its current objectives, policies, or work priorities as a necessary fulfilment of the conditions alone.

The Trustees will take great care and consideration in deciding whether to accept or refuse a donation.

Donation Recognition

Gift Acknowledgment & Accountability

- All donors will receive a personal thank you letter and receipt, regardless of gift amount.
- All gifts will be formally acknowledged as quickly as possible, and in any event within 5 working days.
- The reporting requirements of all Grant Makers will be fulfilled thoroughly, accurately and within their required timeframe.
- Major donors for specific projects will receive where required and appropriate regular updates on the progress of the project.
- Where appropriate and required the families of legacy donors will receive a report on the use of the bequeathed funds.

Recognition

- Any donors expressed desire for anonymity will be strictly adhered to
- Any public recognition will only be undertaken with the Donors express permission and in compliance with data protection legislation and best practice.
- Recognition may be tangible by way of a physical acknowledgment such as a plaque and would be placed within the Pain Relief Foundation. This type of recognition would be decided by the Trustees.
- In general costs of recognition shall not exceed 5% of the gift amount.

- In all cases the cost of recognition shall be both reasonable and proportional.

The Charity reserves the right to refuse, discontinue or remove public recognition whether tangible or intangible, at any time if for any reason it considers the association to be damaging to its reputation. This course of action will be decided by the Trustees.

The final authority for resolution of any issues related to donor recognition policies rests with the Trustees; they may also amend or modify these policies as appropriate

STATEMENT OF TRUSTEES RESPONSIBILITIES

The Trustees are responsible for preparing the Report of the Trustees and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

The law applicable to charities in England and Wales, the Charities Act 2011, Charity (Accounts and Reports) Regulations 2008 and the provision of the Constitution requires the Trustees to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the charity and of the incoming resources and application of resources, including the income and expenditure, of the charity for that period. In preparing those financial statements, the trustees are required to:-

- select suitable accounting policies and then apply them consistently.
- observe the methods and principles in the Charity SORP.
- make judgments and estimates that are reasonable and prudent.
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charity will continue in business.

The Trustees are responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the charity and to enable them to ensure that the financial statements comply with the Charities Act 2011, the Charity (Accounts and Reports) Regulations 2008 and the provisions of the constitution. They are also responsible for safeguarding the assets of the charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

The Trustees present their report with the financial statements of the charity for the year ending 5th April 2024. The Trustees have adopted the provisions of 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).

Approved by order of the Committee of Trustees on 10th September 2024 and signed on its behalf by:



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D Cain - Chairman

Date 10th September 2024

CLINICAL SECTION

Patient & Public Information

The Pain Relief Foundation provides an online help and advice service through their website www.painrelieffoundation.org.uk and also provides a wide range of information leaflets, each of which deals with a specific chronic pain condition. The leaflets have proved to be a source of help to many thousands of chronic pain sufferers in understanding their pain problem and they give advice on the available treatments and additional sources of valuable information. Packs of leaflets are also made available to General Practitioners where they have been shown to be a useful way of guiding the patient into self-help opportunities in support of their treatment. All leaflets are now downloadable from our website.

The full range of leaflets is concise and gives fairly in-depth information about a range of chronic pain conditions and are continually re-written as information and advice is updated, using the guidelines issued by the Centre for Health Information Quality, which seeks to make the use of the leaflets more 'patient friendly' and easier to read and understand. Each of the medical staff working at the Institute contribute their skills in making the leaflets a prime source of useful information.

Letters and advice columns, written or supported by our doctors, are often seen as features in local and national newspapers, working with feature writers from magazines and newspapers they provide accurate and up-to-date information for the readers. Information disseminated in this way brings many benefits to chronic pain sufferers in particular, and the population in general.

CD's

The ***Coping with Pain*** CD was one of the early self-help aids for chronic pain sufferers. With an introduction by Magnus Magnusson, it soon became part of the pain patient's medicine cupboard. Each section of the CD has been specifically designed to focus the minds of pain sufferers on ways of easing their pain through relaxation and gentle exercise. As many as 2 out of 3 people who have used it report that they have been able to improve their quality of life and find that their chronic pain problem is eased.

Over 65,000 copies of the ***Coping with Pain*** CD have now been distributed through a range of outlets covering the medical field and the retail sector. Additional CD's dealing with specific pain conditions are also available and they include: ***Coping with Headaches & Migraine, Feeling Good, Coping with Back Pain*** and ***Relaxation*** and ***Coping with Anxiety.*** Each of the CDs contains relaxation programmes that help so many sufferers to find relief.

PAIN RELIEF FOUNDATION INFORMATION SCIENCES, RESEARCH CO-ORDINATION & EDUCATION

Introduction

The work of this department draws on the expertise of Pain Clinicians and is closely aligned with the work of the Foundation Education Sub-committee. The work of the Committee encompasses all educational courses, conferences and meetings for health care professionals and the department provides the administrative support for those developed courses and conferences plus the provision of information about chronic pain to both patients and the general public, including an online resource about chronic pain. This fulfills the remit of the Foundation to provide such education.

EDUCATION

Meetings and Courses

Meetings and courses which are developed and structured are aimed at all health care professionals with the sole purpose being to educate participants about all aspects of chronic pain management the

courses are initially aimed at a national level but such as the interest has grown in the treatment of chronic pain, we now attract participants from all over the globe.

Foundation courses & lectures

Organisiation is well under way for the annual ***Clinical Management of Chronic Pain*** course, the course will run again in July. This is a vibrant and participative clinical, hands-on course. It is a 2.5 day course aimed at Consultants, Specialist Registrars, Anesthetists, Advanced Specialist Nurses, GP's, and Physiotherapists with some experience of pain management.

This year the course is under the new lead of Dr Hemkumar Pusharaj, Specialist in Pain medicine and Neuromodulation at the Walton Centre NHS Foundation Trust, and Dr Manohar Sharma, Consultant in Pain Medicine, The Walton Centre NHS Foundation Trust, Liverpool with support from Dr Kerry Matthews, Consultant Clinical Psychologist, The Walton Centre NHS Foundation Trust, Liverpool.

Each year feedback is given by the participants attended; this is read by the organisers, who take on board any suggestions and ideas to keep on improving the course so that the best education possible is provided. The course consists of a mixture of lectures, seminars, clinics, theatre sessions and a grand round. It will remain participative clinical, hands-on with the most up to date information and techniques of treating chronic pain available. The participants will also spend a day in the Pain Management Programme at Walton Centre where they see firsthand the multidisciplinary assessments and treatments that patients receive.

We hope to continue with the success of this course in 2024.

This year we also saw a new format from the European Pain Federation (EFIC), in how they will now fund any cancer pain schools. This affected the biannual ***European Pain Federation EFIC Liverpool Winter Cancer Pain School*** due to be held in 2024 resulting in this being moved to 2025.This event will be continued to be organised by Dr Manohar Sharma as an educational conference with an emphasis on clinical work, The Pain Schools are courses aimed at young European medical doctors and allied health professionals who are interested in further developing their knowledge and expertise in the field of cancer pain management.

The Foundation has this year taken on the role of facilitating the **North England Pain Group (NEPG)** one-day meeting in Leeds. This year's programme was organised by Dr Mahindra Chincholkar, Consultant in Anaesthesia and Pain management at Salford Royal. The meeting covers many topical and highly relevant areas in the current practice of Pain Medicine.

The 23rd ***Pain Relief Foundation Annual Lecture*** took place in April and was Chaired by Mr. David Cain, the lecture was delivered by Professor Fabrizio Benedetti a professor of physiology and neuroscience at the University of Turin Medical School in Italy; the title of the lecture was "*The Placebo Effect.*"

The evening's proceedings were to honour the life and work of Dr Keith Budd, a member of council of the Royal College of Anaesthetists and an examiner for the Fellowship examination. & Dr Ken Hardy was appointed consultant anaesthetist at Bangor hospital in 1962 and set up the first pain clinic in Wales.

We also facilitated the first Unravelling Pain: "A Modern Understanding of Persistent Pain" event. The 'Unravelling Pain' Team is a group of pain specialists who are passionate about improving understanding of pain with the aim of changing the way people think about, talk about, and respond to persistent pain.

This was a free event for people who experience persistent pain, health care professionals working with people who have persistent pain or people who know someone who has persistent pain. The aim of the meeting was to improve that understanding pain is key to living well with pain.

The Foundation Essay Competition

The competition is run annually. The aim of this competition is to raise awareness nationally among medical undergraduates about chronic pain and the Pain Research Institute.

The competition is open to multiple discipline entries Medicine and all health profession Undergraduates including occupational therapists, physiotherapist, nurses, and psychologists.

The winning entries for 2023 are below:

Esther Perry, University of Leeds
"Intrinsically Linked: The Importance of Managing Mental Health Alongside Chronic Pain"

Rosemary Dale, University of Leeds
"Chronic pelvic pain: how effective are current diagnostic and treatment guidelines in the field of chronic pelvic pain?"

Jessica Dudley, University of Leeds
"Traditional Chinese Medicine and its Role in Chronic Pain Management

Each winner received the winning prize of £500, their essays can be viewed on our website.

Pain Relief Foundation Website

The Pain Relief Foundation website www.painrelieffoundation.org.uk is a premier online resource for the general public where they can find information about chronic pain and importantly be directed to other specialist websites which offer good, current, medically correct, and easily understood information about specific chronic pain conditions.

All recommended sites have been assessed before being included on the site by the Walton Centre pain team. All the leaflets in the "Dealing with Pain Series" on chronic pain conditions and drugs for pain are available to download from the website. Topical and informative articles written by staff of the Foundation and Institute and Walton Centre Pain team are regularly featured on the website. The website also features any current news, fundraising events and gives online access to Health Professionals to register and attend any events or course that we may be running.

WORK & STUDY AREAS

The Institute continued to provide accommodation for research personnel to study their research developments and prepare research reports and applications. The accommodation is furnished and serviced, fully set out with computers workstations, and associated equipment.

RESEARCH

Below is a snapshot selection and brief description of research that is currently being undertaken with the support of the Pain Relief Foundation. An in-depth progress report of the research can be found on our website. **www. painreleiffoundation.org.uk** under the tab marked research.

Grant title:' *Targeting ion channels to combat pathophysiology of chemotherapy-induced peripheral neuropathy*.'

Awarded to: - *Dr Maria Maiaru -University of Reading*

Of the many different types of clinical pain, pain caused by the medicine taken to combat an existing disease is particularly devastating; it typically worsens the existing condition and leads to poorer clinical outcomes. A prevalent example is pain caused by the strong drugs

used to treat cancer. In particular, many common anti-cancer drugs can cause nerve damage, often felt as tingling, numbness or burning-shooting pain. Due to such serious symptoms, it is often necessary to reduce or even stop drug treatment. Additionally, amongst the analgesic drugs currently used, there is no preventative or treatment for the nerve damage pain caused by anti-cancer drugs.

Nerve cells, including those that signal pain, can talk to each other via proteins on the cell surface called 'ion channels'. This study will focuses on ion channels that regulate the flow of calcium into nerve cells; in particular, the 'T-type' calcium channel. Calcium channel function is further controlled by other proteins called auxiliary subunits. One of these auxiliary subunits is the target for 'gabapentinoid' pain drugs. We have recently identified a new protein, called CACHD1, that has similar properties to the subunit targeted by gabapentinoid drugs. This protein is found in high levels in pain pathways.Thus, we have proposed a potential new drug target.

We will investigate if T-type calcium channels and the CACHD1 protein represent new drug targets to prevent pain caused by anti-cancer drugs. We will use a preclinical animal model to study these effects and determine if there are any differences between male and female animals. We will also study the biological processes that may lead to pain associated with anti-cancer drugs. It is hoped that this fundamental research will eventually lead to much-needed new treatments for pain caused by anti-cancer drugs.

Project aims:

AIM 1: To fully characterise the model of chemotherapy-induced neuropathic pain (CIPN) in male and female model.
AIM 2: To examine the role of CaV3 T-type calcium channels and CACHD1 subunits in CIPN using pharmacology, genetic manipulation and patch clamp electrophysiology methodologies
AIM 3: To deduce whether central and peripheral nervous system changes to autophagy contribute to the initiation and/or maintenance of CIPN and potential involvement of CaV3 T-type calcium channels and CACHD1 subunits.

Grant title: ***" REliability of HRDD as a biomarker in Painful diabetic nEuropathy - a vaLidation study (REPEL)."***

Awarded to: - Dr Anne Marshall – University Liverpool

Damage to the nerves caused by diabetes, diabetic neuropathy, is the most common complication of diabetes, affecting up to half of all patients. It primarily affects the feet and can cause severe pain and distressing sensations which are difficult to treat. Gaps in our understanding of the mechanisms involved in the development of pain in diabetic neuropathy have led to inadequate treatment.

Damage to the ends of the nerve fibres in diabetes is thought to lead to an increase of pain signals to the spinal cord. Normally the nerve circuits in the spinal cord would attempt to suppress these pain signals. However, in animal studies of diabetes, it has been shown that changes within the spinal cord inappropriately amplify these pain signals rather than suppressing them – a process called spinal disinhibition.

A biomarker (measure) of spinal disinhibition is H-reflex rate dependent depression (HRDD), which can be tested non-invasively in humans. We have demonstrated that HRDD is impaired in people with painful diabetic neuropathy and believe that HRDD could be used to identify patients who may benefit from targeted therapies that reverse spinal disinhibition. However, before we can test this in large numbers of patients in clinical trials, we need to know whether HRDD readings are reliable

when tested on multiple occasions (repeatability) and when tested by different individuals (reproducibility).

In this prospective study we will determine the reliability of HRDD in the target clinical population by testing whether the measurements are repeatable and reproducible. We will also generate preliminary data to determine if HRDD may predict pain relief in patients with painful diabetic neuropathy in response to treatment with an anti-neuropathic pain drug that is thought to target spinal cord circuits involved in spinal disinhibition.

Project aims: -

The aims of this study are to determine the repeatability and reproducibility of Hoffmann reflex rate dependent depression (HRDD), a biomarker of spinal in a clinical population – patients with painful diabetic neuropathy (pDPN) - and to generate indicative data as to whether HRDD or a change in HRDD predicts the therapeutic response to duloxetine. The findings will determine whether HRDD represents a reliable and robust biomarker for detecting spinal disinhibition and in predicting treatment responses in patients with pDPN.
Aim 1a – To determine the repeatability of HRDD – we will evaluate this by testing HRDD on two occasions separated by ~ 1 week using identical testing conditions (operator, equipment etc).
Aim 1b – To determine the reproducibility of HRDD – we will evaluate this by testing HRDD twice on one visit using different operators and testing equipment.
Aim 2 – To generate preliminary data to indicate whether baseline HRDD, or a change in HRDD between baseline and two weeks after treatment initiation, may predict the therapeutic response to duloxetine.

Grant title:- *"Mechanisms of inflammatory joint pain: The role of TRPM3 in knee nociceptors and its interaction with fibroblast-like synoviocytes."*

Awarded to: - *Dr Javier Aguilera-Lizarraga – University Cambridge*

Rheumatoid arthritis is a debilitating inflammatory condition affecting over 400,000 people in the UK. In rheumatoid arthritis, joint damage and swelling occur that produce chronic pain, which in turn decreases an individual's quality of life. Rheumatoid arthritis is a complex condition, but it is becoming increasingly clear that fibroblast-like synoviocytes, a type of cell that lines synovial joints, such as the knee, play an important role in disease progression. Recent research in our laboratory showed that molecules produced by these cells during inflammation can increase the sensitivity of sensory neurons that transmit pain signals. This process results in stronger and/or longer-lasting neuronal signals and can lead to the development of chronic pain. Therefore, the interaction between fibroblast-like synoviocytes and sensory neurons might be a crucial factor in the development of inflammatory joint pain.

We previously showed that TRPV1, an important receptor for the transmission of pain signals in sensory neurons, plays a key role in inflammatory joint pain and that its function is modulated by fibroblast-like synoviocytes. However, clinical trials have shown that drugs targeting this receptor may cause undesired adverse effects. In this study, we aim to establish new mechanisms in inflammatory joint pain. Thus, we will investigate the role of TRPM3, another receptor involved in transmitting pain signals. To this end, we will use pharmacological tools to assess if the TRPM3 receptor is involved in inflammatory joint pain using a mouse model of knee joint inflammation. Furthermore, we will study the impact of molecules produced by fibroblast-like synoviocytes on the function of this receptor. For this purpose, we will use cell cultures, live-cell imaging techniques and electrophysiology to characterise the role of TRPM3 in sensory neuron function in joint pain. Ultimately, this project will provide new insights into the mechanisms underlying inflammatory joint pain..

Project aims: -

We aim to characterise the role of the transient receptor potential (TRP) cation channel subfamily melastatin member 3 (TRPM3) in inflammation-associated joint pain and study its interaction in sensory neurons with activated fibroblast-like synoviocytes

Grant title:- "Experience of autistic adults of pain and pain management: Barriers to effective treatment"

Awarded to: - *Dr David Moores- Liverpool John Moores University*

Autistic people are at greater risk of a range of painful conditions. In addition to the greater risk of pain there is a lack of understanding and poor pain management for autistic people. It is perhaps therefore unsurprising that autistic people are more likely to develop chronic pain which requires complex management within tertiary services. What is currently unknown about pain management for autistic people is how individuals respond to and experience these services. Within wider health services there is evidence that autistic people might respond to speaking therapies such as Cognitive Behavioural Therapy. It also appears however that autistic people might experience challenges with engaging with such treatment and that therapy between autistic patients and non-autistic healthcare providers might present a particular challenge.

There is some evidence that there are modifications to these treatments that might be more suitable for autistic people, however this work is limited and has only so far focused on depression or anxiety and has not been examined in pain management. In the present study we propose to interview approximately 12 autistic people who have co-occurring chronic pain and have either undertaken or are presently undertaking the pain management program at Walton Centre NHS Foundation Trust (WCFT). We will ask about the persons experiences of pain prior to referral, what support was offered and how this was experienced and how they sought help. We will also interview participants about their experiences of the chronic pain management program to consider where they might have gained benefit from this process but also the barriers experienced to successful pain management.

Project aims: -

Understand the experiences of autistic adults of chronic pain and treatment pathways
Understand the experiences of autistic adult of tertiary chronic pain management

Opinion

We have audited the financial statements of The Pain Relief Foundation (the 'charitable company') for the year ended 5 April 2024 which comprise the Statement of Financial Activities, the Balance Sheet, the Cash Flow Statement and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 5 April 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 Companies Act 2006.

Basis for opinion

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

Conclusions relating to going concern

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

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

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

Other information

The trustees are responsible for the other information. The other information comprises the information included in the Annual Report, other than the financial statements and our Report of the Independent Auditors thereon.

Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether 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 where the Charities (Accounts and Reports) Regulations 2008 requires us to report to you if, in our opinion:

- the information given in the Report of the Trustees is inconsistent in any material respect with the financial statements; or
- the charitable company has not kept adequate accounting records; or
- the financial statements are not in agreement with the accounting records and returns; or
- we have not received all the information and explanations we require for our audit.

Responsibilities of trustees

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

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

Our responsibilities for the audit of the financial statements
We have been appointed as auditors 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 a Report of the Independent Auditors that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

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

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

- we identified the significant laws and regulations applicable to the company which we considered could have a direct material effect on the financial statements or the operations of the company. Said laws and regulations include but are not limited to, the Companies Act 2006, taxation legislation and data protection, anti-bribery and employment legislation;
- the identified laws and regulations were communicated within the audit team regularly and the team remained alert to instances of non-compliance throughout the audit.

We assessed the susceptibility of the company's financial statements to material misstatement, including obtaining an understanding of how fraud might occur. We also addressed the risk of fraud through management bias and override of controls by;

- updating and reviewing our knowledge of the company, its officers and internal financial function, together with their systems and internal controls. This included making enquiries of management as to their knowledge of actual, suspected and alleged fraud; and
- considering the internal controls in place to mitigate risks of fraud and non-compliance with laws and regulations. We concluded that whilst the company had controls in place that were appropriate to its size and the nature of its activities, we could not rely on those systems and internal controls exclusively for the purposes of our audit work. We therefore adopted a substantive and transactional approach to our audit, seeking to verify figures in the balance sheet to third party evidence and transactions within the Income Statement to external independent documentation;
- We did not review every transaction. However, we adopted an approach based on testing a sample of transactions. In choosing our sample, we tested transactions that were material in nature and in addition a random sample of other transaction. By choosing transactions of a material nature, our audit work is designed to detect material misstatements. The use of random testing on other transactions is designed to detect other irregularities and the operation of the charity's internal control systems generally. If exceptions were noted, our audit work was expanded to test more transactions with a view to determining whether the exception was of an isolated nature;
- We performed analytical procedures to identify any unusual or unexpected relationships;
- We tested journal entries to identify unusual transactions and investigated the rationale behind significant or unusual transactions.

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

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

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

Report of the Independent Auditors to the Trustees of The Pain Relief Foundation

Use of our report

This report is made solely to the charitable company'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 charitable company's trustees those matters we are required to state to them in an auditors' report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and the charitable company's trustees as a body, for our audit work, for this report, or for the opinions we have formed.

BTMR Limited

BTMR Limited
Statutory Auditor
Eligible to act as an auditor in terms of Section 1212 of the Companies Act 2006
Century Buildings
14 St Mary's Parsonage
Manchester
M3 2DF

Date: 10 September 2024.

THE PAIN RELIEF FOUNDATION

Statement of Financial Activities
for the Year Ended 5 April 2024

	Notes	Unrestricted funds £	Restricted fund £	**5.4.24 Total funds £**	5.4.23 Total funds £
INCOME AND ENDOWMENTS FROM					
Donations and legacies	3	**244,998**	-	**244,998**	373,501
Other trading activities	4	**23,443**	-	**23,443**	42,523
Investment income	5	**82,422**	-	**82,422**	95,054
Total		**350,863**	-	**350,863**	511,078
EXPENDITURE ON					
Raising funds					
Other trading activities	6	**15,977**	-	**15,977**	14,837
Investment management costs	7	**11,716**	-	**11,716**	12,017
		27,693	-	**27,693**	26,854
Charitable activities	8				
Research		**448,636**	**22,865**	**471,501**	469,682
Total		**476,329**	**22,865**	**499,194**	496,536
Net gains/(losses) on investments		**50,770**	-	**50,770**	(151,442)
NET INCOME/(EXPENDITURE)		**(74,696)**	**(22,865)**	**(97,561)**	(136,900)
RECONCILIATION OF FUNDS					
Total funds brought forward		**2,864,858**	**25,343**	**2,890,201**	3,027,101
TOTAL FUNDS CARRIED FORWARD		**2,790,162**	**2,478**	**2,792,640**	2,890,201

The notes form part of these financial statements

THE PAIN RELIEF FOUNDATION

Balance Sheet
5 April 2024

	Notes	Unrestricted funds £	Restricted fund £	5.4.24 Total funds £	5.4.23 Total funds £
FIXED ASSETS					
Tangible assets	14	**53,037**	**676**	**53,713**	62,267
Investments	15	**2,769,293**	**-**	**2,769,293**	2,695,242
		2,822,330	**676**	**2,823,006**	2,757,509
CURRENT ASSETS					
Stocks	16	**662**	**-**	**662**	662
Debtors	17	**1,693**	**-**	**1,693**	(3,724)
Cash at bank and in hand		**37,796**	**1,802**	**39,598**	203,756
		40,151	**1,802**	**41,953**	200,694
CREDITORS					
Amounts falling due within one year	18	**(72,319)**	**-**	**(72,319)**	(68,002)
NET CURRENT ASSETS		**(32,168)**	**1,802**	**(30,366)**	132,692
TOTAL ASSETS LESS CURRENT LIABILITIES		**2,790,162**	**2,478**	**2,792,640**	2,890,201
NET ASSETS		**2,790,162**	**2,478**	**2,792,640**	2,890,201
FUNDS	19				
Unrestricted funds:					
General fund				**11,824**	141,987
Designated unrestricted				**2,778,338**	2,722,871
				2,790,162	2,864,858
Restricted funds:					
Restricted fund				**2,478**	25,343
TOTAL FUNDS				**2,792,640**	2,890,201

The charitable company is entitled to exemption from audit under Section 477 of the Companies Act 2006 for the year ended 5 April 2024.

The members have not deposited notice, pursuant to Section 476 of the Companies Act 2006 requiring an audit of these financial statements.

The trustees acknowledge their responsibilities for
(a) ensuring that the charitable company keeps accounting records that comply with Sections 386 and 387 of the Companies Act 2006 and
(b) preparing financial statements which give a true and fair view of the state of affairs of the charitable company as at the end of each financial year and of its surplus or deficit for each financial year in accordance with the requirements of Sections 394 and 395 and which otherwise comply with the requirements of the Companies Act 2006 relating to financial statements, so far as applicable to the charitable company.

These financial statements have been audited under the requirements of Section 145 of the Charities Act 2011.

The financial statements were approved by the Board of Trustees and authorised for issue on ...10 September 2024... and were signed on its behalf by:

.....
D Cain - Chairman - Trustee

The notes form part of these financial statements

THE PAIN RELIEF FOUNDATION

Cash Flow Statement
for the Year Ended 5 April 2024

	Notes	5.4.24 £	5.4.23 £
Cash flows from operating activities			
Cash generated from operations	1	(216,930)	(39,406)
Finance costs paid		(281)	(340)
Tax paid		(5,555)	12,051
Net cash used in operating activities		(222,766)	(27,695)
Cash flows from investing activities			
Purchase of tangible fixed assets		(533)	-
Purchase of fixed asset investments		(570,003)	(71,543)
Sale of fixed asset investments		546,722	174,142
Interest received		9	2
Dividends received		82,413	95,052
Net cash provided by investing activities		58,608	197,653
Change in cash and cash equivalents in the reporting period		(164,158)	169,958
Cash and cash equivalents at the beginning of the reporting period		203,756	33,798
Cash and cash equivalents at the end of the reporting period		39,598	203,756

The notes form part of these financial statements

Notes to the Cash Flow Statement
for the Year Ended 5 April 2024

1. RECONCILIATION OF NET EXPENDITURE TO NET CASH FLOW FROM OPERATING ACTIVITIES

	5.4.24 £	5.4.23 £
Net expenditure for the reporting period (as per the Statement of Financial Activities)	**(97,561)**	(136,900)
Adjustments for:		
Depreciation charges	**9,087**	10,850
(Gain)/losses on investments	**(50,770)**	151,442
Interest received	**(9)**	(2)
Finance costs	**281**	340
Dividends received	**(82,413)**	(95,052)
Decrease in stocks	**-**	38
Decrease in debtors	**138**	1,231
Increase in creditors	**4,317**	28,647
Net cash used in operations	**(216,930)**	(39,406)

2. ANALYSIS OF CHANGES IN NET FUNDS

	At 6.4.23 £	Cash flow £	At 5.4.24 £
Net cash			
Cash at bank and in hand	203,756	(164,158)	39,598
	203,756	(164,158)	39,598
Total	203,756	(164,158)	39,598

The notes form part of these financial statements

1. DESIGNATED FUND

The designated fund represents sums set aside, out of unrestricted funds, to meet the ongoing costs of the chair of Professor of Pain.

	2024	2023
Investment income:	£	£
Interest received	907	1,709
Dividends	81,506	93,342
Realised gains on investments sold	202,159	(3,267)
Unrealised gain on revaluing investments to market value	-	-
Total designated income	284,572	91,784
Less:		
Realised loss on sale of investments	-	-
Unrealised profit/(loss) on revaluing investments to market value	(151,389)	(148,175)
	(11,716)	(12,017)
Expenditure out of designated funds	-	-
Transfer of net expenditure to General Fund	(66,000)	(178,800)
Net designated (expenditure)/income	**55,467**	**(247,207)**

2. ACCOUNTING POLICIES

Basis of preparing the financial statements
The financial statements of the charity, which is a public benefit entity under FRS102, have been prepared in accordance with the 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) (effective 1 January 2015)', and the Charities Act 2011. The financial statements have been prepared under the historical cost convention with the exception of investments which are included at market value.

Income
All income is recognised in the Statement of Financial Activities once the charity has entitlement to the funds and it is probable that the income will be received and the amount can be measured reliably.

Expenditure
Liabilities are recognised as expenditure as soon as there is a legal or constructive obligation committing the charity to that expenditure, it is probable that a transfer of economic benefits will be required in settlement and the amount of the obligation can be measured reliably. Expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all costs related to the category. Where costs cannot be directly attributed to particular headings they have been allocated to activities on a basis consistent with the use of resources.

Grants offered subject to conditions, such as duration of the grant, which have not been met at the year end date are noted as a commitment but not accrued as expenditure.

Allocation and apportionment of costs
Certain expenditure is directly attributable to specific activities and has been included in those cost categories. Certain other costs, which are attributable to more than one activity, are apportioned across categories on the basis of an estimate of the proportion of time spent by staff on those activities.

Tangible fixed assets
Depreciation is provided at the following annual rates in order to write off each asset over its estimated useful life.

Long leasehold	- Over the period of the lease
Plant and machinery	- 25% on reducing balance and 15% on cost
Fixtures and fittings	- 25% on cost

Expenditure on individual assets which is less than £500 is not capitalised.

Stocks
Stocks are valued at the lower of cost and net realisable value, after making due allowance for obsolete and slow moving items.

continued...

2. ACCOUNTING POLICIES - continued

Taxation
The charity is exempt from corporation tax on its charitable activities.

Fund accounting
Unrestricted funds can be used in accordance with the charitable objectives at the discretion of the trustees.

Restricted funds can only be used for particular restricted purposes within the objects of the charity. Restrictions arise when specified by the donor or when funds are raised for particular restricted purposes.

Designated fund

The Designated fund represents the investment and related income which the trustees have designated to be used specifically for funding the chair of the Professor of Pain.

Restricted fund

The Restricted fund represents the income which was made available for the purposes of acquiring a Transcranial Magnetic Scanner and sponsorships received. The related expenditure represent money spent in relation to restricted income.

Hire purchase and leasing commitments
Rentals paid under operating leases are charged to the Statement of Financial Activities on a straight line basis over the period of the lease.

Pension costs and other post-retirement benefits
The charitable company operates a defined contribution pension scheme. Contributions payable to the charitable company's pension scheme are charged to the Statement of Financial Activities in the period to which they relate.

Financial instruments
Financial instruments are classified and accounted for according to the substance of the contractual arrangement, as either financial assets, financial liabilities or equity instruments. An equity instrument is any contract that evidences a residual interest in the assets of the company after deducting all of its liabilities.

Investments
Investments are made by the trustees acting through and on advice of professional investment managers. The investment strategy focuses on low to medium risk investments.

Investment gains and losses
Gains and losses which arise on the sale of investments during the year are termed "Realised gains and losses". Those gains and losses that arise from the disclosure of investments at market value as at 5th April each year are termed "Unrealised gains and losses".

Governance costs
Governance costs relate to the general running of the charity, as opposed to fundraising or charitable activities expenditure. They include audit and legal fees, accountancy and related support costs.

Costs of generating funds
The costs of fundraising events include the costs incurred by the Charity in arranging golf days, appeals and sponsorships and are included in the SOFA on an accruals basis.

Charitable activities - Grants payable
Expenditure on charitable activities includes grants payable to individuals to conduct research into pain, its causes and relief, and to disseminate research information together with related direct costs and support costs, all of which are accounted for on an accruals basis.

continued...

3. DONATIONS AND LEGACIES

	5.4.24	5.4.23
	£	£
Gifts	69,343	68,197
Gift aided donations	3,064	5,846
Tax recovered on gift aided donations	766	(4,789)
Legacies	171,425	303,436
Sundry income	400	811
	244,998	373,501

4. OTHER TRADING ACTIVITIES

	5.4.24	5.4.23
	£	£
Fundraising events	1,804	950
Books leaflets tapes	-	133
Sponsorships	6,200	6,217
EFIC Cancer School	-	31,173
Meeting fees	15,439	4,050
	23,443	42,523

5. INVESTMENT INCOME

	5.4.24	5.4.23
	£	£
Listed investments	82,413	95,052
Deposit account interest	9	2
	82,422	95,054

6. OTHER TRADING ACTIVITIES

	5.4.24	5.4.23
	£	£
Purchases	125	63
Staff costs	15,852	14,774
	15,977	14,837

7. INVESTMENT MANAGEMENT COSTS

	5.4.24	5.4.23
	£	£
Portfolio management	11,716	12,017

continued...

8. CHARITABLE ACTIVITIES COSTS

	Direct Costs	Grant funding of activities (see note 9)	Support costs (see note 10)	Totals
	£	£	£	£
Research	**93,333**	**304,043**	**74,125**	**471,501**

9. GRANTS PAYABLE

	5.4.24	5.4.23
	£	£
Research	**304,043**	291,932

10. SUPPORT COSTS

	Management	Finance	Information technology	Governance costs	Totals
	£	£	£	£	£
Research	**39,992**	**266**	**5,833**	**28,034**	**74,125**

11. NET INCOME/(EXPENDITURE)

Net income/(expenditure) is stated after charging/(crediting):

	5.4.24	5.4.23
	£	£
Auditors' remuneration	**5,000**	5,000
Auditors' remuneration for non-audit work	**3,340**	3,340
Depreciation - owned assets	**9,087**	10,850
Other operating leases	**5,722**	6,426

12. TRUSTEES' REMUNERATION AND BENEFITS

No trustees' remuneration or other benefits were paid for the year ended 5 April 2024 nor for the year ended 5 April 2023.

Trustees' expenses

There were no trustees' expenses paid for the year ended 5 April 2024 nor for the year ended 5 April 2023.

13. STAFF COSTS

The average number of employees for the year was 4 (2020: 4).

continued...

14. TANGIBLE FIXED ASSETS

	Long leasehold £	Plant and machinery £	Fixtures and fittings £	Totals £
COST				
At 6 April 2023	**114,302**	**204,403**	**324,487**	**643,192**
Additions	**-**	**-**	**533**	**533**
At 5 April 2024	**114,302**	**204,403**	**325,020**	**643,725**
DEPRECIATION				
At 6 April 2023	**74,787**	**183,427**	**322,711**	**580,925**
Charge for year	**3,266**	**5,244**	**577**	**9,087**
At 5 April 2024	**78,053**	**188,671**	**323,288**	**590,012**
NET BOOK VALUE				
At 5 April 2024	**36,249**	**15,732**	**1,732**	**53,713**
At 5 April 2023	39,515	20,976	1,776	62,267

15. FIXED ASSET INVESTMENTS

	Listed investments £
MARKET VALUE	
At 6 April 2023	**2,695,242**
Additions at cost	**570,003**
Disposals at book cost	**(344,563)**
Revaluations	**(151,389)**
At 5 April 2024	**2,769,293**
NET BOOK VALUE	
At 5 April 2024	**2,769,293**
At 5 April 2023	2,695,242

Overseas investment assets amounted to £1,508,161 (2023: £1,474,947).

Cost or valuation at 5 April 2024 is represented by:

	Listed investments £
Valuation in 2024	**(151,389)**
Cost	**2,920,682**
	2,769,293

continued...

16. STOCKS

	5.4.24	5.4.23
	£	£
Finished goods	662	662

17. DEBTORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	5.4.24	5.4.23
	£	£
Tax	766	(4,789)
Prepayments and accrued income	927	1,065
	1,693	(3,724)

18. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	5.4.24	5.4.23
	£	£
Accruals and deferred income	72,319	68,002

19. MOVEMENT IN FUNDS

	At 6.4.23	Net movement in funds	Transfers between funds	At 5.4.24
	£	£	£	£
Unrestricted funds				
General fund	141,987	(196,163)	66,000	11,824
Designated unrestricted	2,722,871	121,467	(66,000)	2,778,338
	2,864,858	(74,696)	-	2,790,162
Restricted funds				
Restricted fund	25,343	(22,865)	-	2,478
TOTAL FUNDS	2,890,201	(97,561)	-	2,792,640

Net movement in funds, included in the above are as follows:

	Incoming resources	Resources expended	Gains and losses	Movement in funds
	£	£	£	£
Unrestricted funds				
General fund	268,450	(464,613)	-	(196,163)
Designated unrestricted	82,413	(11,716)	50,770	121,467
	350,863	(476,329)	50,770	(74,696)
Restricted funds				
Restricted fund	-	(22,865)	-	(22,865)
TOTAL FUNDS	350,863	(499,194)	50,770	(97,561)

continued...

19. MOVEMENT IN FUNDS - continued

Comparatives for movement in funds

	At 6.4.22 £	Net movement in funds £	Transfers between funds £	At 5.4.23 £
Unrestricted funds				
General fund	31,380	(68,193)	178,800	141,987
Designated unrestricted	2,970,078	(68,407)	(178,800)	2,722,871
	3,001,458	(136,600)	-	2,864,858
Restricted funds				
Restricted fund	25,643	(300)	-	25,343
TOTAL FUNDS	3,027,101	(136,900)	-	2,890,201

Comparative net movement in funds, included in the above are as follows:

	Incoming resources £	Resources expended £	Gains and losses £	Movement in funds £
Unrestricted funds				
General fund	416,026	(484,219)	-	(68,193)
Designated unrestricted	95,052	(12,017)	(151,442)	(68,407)
	511,078	(496,236)	(151,442)	(136,600)
Restricted funds				
Restricted fund	-	(300)	-	(300)
TOTAL FUNDS	511,078	(496,536)	(151,442)	(136,900)

A current year 12 months and prior year 12 months combined position is as follows:

	At 6.4.22 £	Net movement in funds £	Transfers between funds £	At 5.4.24 £
Unrestricted funds				
General fund	31,380	(264,356)	244,800	11,824
Designated unrestricted	2,970,078	53,060	(244,800)	2,778,338
	3,001,458	(211,296)	-	2,790,162
Restricted funds				
Restricted fund	25,643	(23,165)	-	2,478
TOTAL FUNDS	3,027,101	(234,461)	-	2,792,640

continued...

19. MOVEMENT IN FUNDS - continued

A current year 12 months and prior year 12 months combined net movement in funds, included in the above are as follows:

	Incoming resources £	Resources expended £	Gains and losses £	Movement in funds £
Unrestricted funds				
General fund	684,476	(948,832)	-	(264,356)
Designated unrestricted	177,465	(23,733)	(100,672)	53,060
	861,941	(972,565)	(100,672)	(211,296)
Restricted funds				
Restricted fund	-	(23,165)	-	(23,165)
TOTAL FUNDS	861,941	(995,730)	(100,672)	(234,461)

20. RELATED PARTY DISCLOSURES

There were no related party transactions for the year ended 5 April 2024.

21. FINANCIAL COMMITMENTS

During the year grants payable to researchers were approved in the total amount of £884,566 of which £590,331 remains payable in respect of future periods.

Detailed Statement of Financial Activities
for the Year Ended 5 April 2024

	5.4.24 £	5.4.23 £
INCOME AND ENDOWMENTS		
Donations and legacies		
Gifts	**69,343**	68,197
Gift aided donations	**3,064**	5,846
Tax recovered on gift aided donations	**766**	(4,789)
Legacies	**171,425**	303,436
Sundry income	**400**	811
	244,998	373,501
Other trading activities		
Fundraising events	**1,804**	950
Books leaflets tapes	**-**	133
Sponsorships	**6,200**	6,217
EFIC Cancer School	**-**	31,173
Meeting fees	**15,439**	4,050
	23,443	42,523
Investment income		
Listed investments	**82,413**	95,052
Deposit account interest	**9**	2
	82,422	95,054
Total incoming resources	**350,863**	511,078
EXPENDITURE		
Other trading activities		
Purchases	**125**	63
Wages	**15,250**	14,300
Social security	**411**	306
Pensions	**191**	168
	15,977	14,837
Investment management costs		
Portfolio management	**11,716**	12,017
Charitable activities		
Wages	**49,181**	54,393
Social security	**1,507**	1,057
Pensions	**1,916**	1,684
Venue & meeting costs	**8,184**	37,473
Sundry	**818**	1,189
FMS study costs	**22,640**	-
Depreciation of tangible fixed assets	**9,087**	10,850
Grants to individuals	**304,043**	291,932
	397,376	398,578

THE PAIN RELIEF FOUNDATION

Detailed Statement of Financial Activities
for the Year Ended 5 April 2024

	5.4.24 £	5.4.23 £
Support costs		
Management		
Other operating leases	**5,722**	6,426
Rates and water	**18,228**	17,505
Insurance	**3,517**	2,974
Telephone	**1,304**	1,117
Postage and stationery	**2,108**	2,936
Advertising	**5,066**	5,252
Sundries	**1,883**	1,002
Travel	**132**	852
Computer software	**1,751**	1,267
Credit card charges	**281**	340
	39,992	39,671
Finance		
Bank charges	**266**	329
Information technology		
Repairs and renewals	**5,833**	5,251
Governance costs		
Wages	**18,500**	16,600
Social security	**425**	239
Pensions	**769**	674
Auditors' remuneration	**5,000**	5,000
Auditors' remuneration for non audit work	**3,340**	3,340
	28,034	25,853
Total resources expended	**499,194**	496,536
Net (expenditure)/income before gains and losses	**(148,331)**	14,542
Realised recognised gains and losses		
Net investment gains/ (losses)	**202,159**	(3,267)
Net income	**53,828**	11,275



Pain Relief Foundation

PAIN RELIEF FOUNDATION

England & Wales - Charity number 1156227

Accounts

BAAM RELIEF FOUNDATION



Clinical Sciences Centre

University Hospital Aintree

Lower Lane

Liverpool

L9 7AL

Established as a Charitable Incorporated Organisation
on 17th March 2014

Originally Established under a Deed of Trust
Dated 30th March 1979

Annual Report and Accounts

For year ended 5th April 2023

Registered Charity No.1156227

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PATRONS

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Dame Lorna EF Muirhead, DCVO, DBE, CStJ, FROG
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CHARITY MANAGER

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TRUSTEES' REPORT 2023

It is once again my pleasure as Chairman of the Pain Relief Foundation and on behalf of the Trustee Committee to introduce our Annual Report for the year ended 5th April 2023. Our reputation as leaders in the field of chronic pain research continues to attract wide interest from specialists in chronic pain, general practitioners and most importantly patients and families.

This year has been one of recovery following a difficult period for all Charities, we have managed to come out of the post COVID lock down and credit goes to our staff who have maintained out strong focus on promoting chronic pain research. Our work with our partner organisations particularly the University of Liverpool and the Walton Centre NHS Foundation Trust have allowed us to continue our efforts to deliver outstanding research, grant applications and the delivery of our specialist conferences and educational courses that are now established in our annual programme.

I would as always like to thank our two lead clinicians Prof Andreas Goebel and Dr Andy Marshall for their clinical expertise and Julie Williams our Charity Manager and her team for all the hard work to promote the charity in a whole variety of ways to encourage support and donations without which we would not be able to advance pain research. The many highlights of the year are referenced in the report, and I do hope you enjoy reading our success.

Changes and challenges have come to be the hallmarks of our charity. This last year has demonstrated, without doubt, that our continued policy of flexibility and fiscal prudence has enabled us to maximise our resources and remain secure. These ongoing challenges require us to be ever more flexible, creative, and determined in everything we do with and for people with chronic pain. This year our community of staff, supporters, partners, and researchers responded, once again, with resilience and agility. At this point we would like to congratulate our patron Dame Lorna Muirhead on receiving the Freedom of the City of Liverpool, the highest honour Liverpool can bestow upon an individual. This is fantastic news for the Foundation, not only does the Foundation itself have Freedom of the City but we now have two members with the honour, with Dr Chris Wells being the other recipient.

We no longer accept the impact that chronic pain has on people's lives. In the toughest of times we've protected our research funding, made amazing discoveries and been there to support the millions of people affected by chronic pain. The Foundation, researchers, healthcare professionals, fundraisers and friends are all united in our goal of confronting chronic pain. The progress we've made this year means we enter the next with renewed ambition, despite the challenges we face. Together, we're making real headway, and we'll never stop until no one has to endure chronic pain. We continued to fund research to make chronic pain manageable and treatable, supported established and emerging talent in the UK pain research community. We know that research needs to be making a bigger and faster difference to people's lives, so they don't have to live with the pain, fatigue, isolation, and depression that come with chronic pain. These great leaps won't happen unless we are unrelenting in our pursuit of the science and inspire the support to fund it. Now is the time to continue to invest in the big, bold ambitions to create a brighter future for the millions of people affected by chronic pain. Our research is funded solely by the generosity of our supporters, which has enabled us to again commit to new grant funding, with in excess of £150,000 of new grants issued in the last year.

Turning to 2024, there is a real sense of hope and anticipation that we can continue these positive steps the Foundation remain determined that we use opportunities to re-establish the importance of putting people with Chronic Pain at the heart of what we do. This requires us to make sure that Pain Relief Foundation is inclusive, diverse, and open to learning. It has been fantastic to see the gradual return of our face-to-face services and events this year and taking the best of everything we learnt during the pandemic, we have strengthened our virtual offer, continuing to give people the opportunity to connect with the Foundation and bringing our community together.

What is Chronic Pain?

Sometimes referred to as persistent pain.

Persistent pain affects the muscles, joints and bones and has lasted for more than 3 months. It is a common problem effecting as many as 30-50% of people in the UK and is the leading cause of disability in the world. Persistent pain can affect any part of the body and can be felt in one or more body areas at the same time.

Pain can start following an accident or injury but often onsets gradually, without an obvious cause. Scientific research shows that pain that lasts longer than 3 months is likely to be due to changes in the nervous system rather than as a result of ongoing damage or injury. Therefore, tests such as x-rays and MRI scans that look at the state of tissue are often negative or inconclusive and therefore are not often needed. This means that pain is a result of a sensitised nervous system, which x-rays and scans are unable to detect.

Medication may be necessary for some people in order to keep them well and manage health problems. Painkillers, however, do not 'cure' pain. In fact, although it might not feel like it, painkillers are optional. For a variety of reasons, not everybody takes or wants to take painkillers. Some people can't take painkillers because of other health problems. Some have tried them and found the side effects weren't worth it. Others have never found anything that helped, and some people find that even though painkillers helped to begin with they later stopped working and so chose to stop taking them. So the amount of painkillers someone is on doesn't necessarily reflect the amount of pain they are in, and vice versa.

Some painkillers are based on opium (codeine, morphine, fentanyl) and whilst opioid-based medications can be effective for short-term pain (such as after surgery or breaking a bone) there is little evidence that they are helpful for the majority of people with persistent pain. Long-term and regular use of opioid medication can cause significant harm. Surprisingly, they can also actually lead to increased pain.

The fight to get timely and effective treatment for chronic pain is often long and difficult. It is incredible to think that despite the clear evidence provided by the above figures treatment for chronic pain is still one of the most under-funded services within the NHS. By being denied early access to such services, which have been shown to provide real support for many people with chronic pain, it is clear that far too many people experience a devastating long-term impact on their life. Financial hardship caused by the inability to work can and does put severe social and emotional strain on a family.

The Pain Relief Foundation and Pain Research Institute want to change this as we continue to build on what we already know and share this knowledge through research and education. By sharing such information as this with not only other healthcare professionals, researchers, politicians and decision makers, and the general public we hope to continue to push changes across our society that will make lifelong differences. Along with additional research, pain education is critical to improved treatments and outcomes so now, more than ever, we need to work together to implement new solutions and address the burden of pain on our society.

We believe we can succeed as we continue to invest in advanced research which is most significant and receptive to the needs of people with chronic pain our aim is to attract, fund and support the best researchers to ensure they focus on the science that will transform the lives of people with Chronic pain. We aim to continue to reach more healthcare professionals than ever with essential training and information designed to help them offer the best possible care to people with chronic pain not only in the UK but across the globe and to build on education and the work of the Pain research Institute to push the needs of people in chronic pain to the forefront. Our continued commitment to tackling pain, finding new treatments and hopefully one day a cure will not only change lives now but have a huge bearing in the future.

Going forward, it is our job to guarantee that we keep doing the right things in the right way from responsible fundraising to responsible spending and investing. Our work depends almost entirely on voluntary donations, so we do have to ask for money, when we do, we ask responsibly and respectfully. The Pain Relief Foundation continues to make every effort to be open, transparent and remain responsible for the decisions that we make so that we can continue with the efforts to make

further headway in enabling the unravelling of the many and varied complications associated with human chronic pain.

The Charity's achievements are greatly reliant on the support of our donors and volunteers. They continue to give their time, energy, and vital funds, they volunteer and support us in so many different and varying ways we couldn't make our ambitious goals a reality without them, many of whom have loyally supported our work over numerous years, and we are therefore thankful for their support.

Your board ensures that we get the greatest impact from your donations, whether through developing our clinical excellence network or focusing considerable investment in finding a cure. Every pound that is raised for us deserves to be put to the best possible use and we take that responsibility very seriously.
This would not be possible without the skillful and capable Board of Trustees, who meet regularly to supervise and direct the Foundation and to whom we are forever grateful for giving up their time. The Committee comprises of people from many fields, each with in-depth and valuable skills from medicine as well as from administrative, legal, business, and commercial interests, each contributing to the effective management of the Charity. In carrying out these tasks, the Trustees are very ably supported by committees of specialists who have expertise and specialist interest in chronic pain.

The Trustees uphold the system of continual review in all areas of importance in the scientific and administrative conduct of the affairs of the Foundation. In these difficult times, our reserves can be measured as crucial and therefore, the *Reserves Policy* is repeatedly monitored so that we are able to use our resources to the maximum effect. The *Investment Policy* dealing with the *Reserves* is also regularly reviewed by the Trustees and the Investment Management team at Rathbones, to maximise the generation of both income and capital growth. The *Risk Assessment* policy has also been frequently reviewed and is under constant consideration to ensure that risks to which the charity may be exposed are understood, and steps taken to mitigate them have been identified. This is an area of prime importance and procedural changes will be implemented from time to time as appropriate.

Each year the Trustees of the Foundation decide how much money is available for research budgets in the forthcoming year we then advertise in specialist journals, on our website, on the specialist internet site ResearchResearch.com and in the University and NHS press, for applications from suitably qualified researchers for grants to conduct projects on chronic pain.

All applications received are initially assessed by our *'Scientific Advisory Sub-Committee'* under its Chairman, Dr Caroline Staunton. This committee has continued the vigorous task of overseeing our research work and assisting the Trustees in interpreting and analysing the large volume of scientific information submitted by the Research Fellows. The sub-committee also advises the Trustees on which of the many applications for research grants are most deserving, and which projects should be the recipients of the limited funds which the Foundation has available. The committee ensures that each application is Peer Reviewed, so that only the most deserving projects are considered, and recommendations are made to the Trustees. We are most grateful for the expertise and extensive work carried out by the Scientific Sub-Committee during this lengthy process.

A selection of research reports from grants awarded by the Pain Relief Foundation can be found on our website www.painrelieffoundation.org.uk.

Of equal importance is our programme concerned with the dissemination of information and of the education of practitioners, to improve the cause of pain relief. A major involvement of this work comes from the Walton Centre NHS Foundation Trust for Neurology and Neurosurgery and its associated Pain Clinic who fervently supports the educational activities of the Foundation, which could not take place without their commitment, again we thank you. Walton Pain Clinicians are also active researchers, adding to the portfolio of research supported by the Foundation. The Walton Centre Pain Clinic is one of the largest pain centers in Europe and provides a large potential source of patients for research. We are indebted to those who volunteer for the various research projects, here and in other units where research is ongoing, supported by the Foundation.

During the year, the *'Education Sub Committee'* under the temporary Chairmanship of Dr. Manohar Sharma, has through the success of recent conferences continued to deliver and widen the scope of the educational activity and increase the number of excellent educational courses on the Treatment and Management of chronic pain. The Pain Relief Foundation is noted for the level of excellence which these

courses provide, and they are always well supported by all members of this committee and each year they welcome the opportunity to take the responsibility of organising and being responsible for the educational courses provided for doctors and other health professionals and are now encouraging other Pain professionals to follow suit.

With Covid now behind us we are able to return to planning and proceeding ahead with our full-time timetable of events and with the enhancement of new technologies we are able to run these meetings as hybrid meetings allowing both in person and online attendance. We were once again invited by the European Pain Federation (EFIC) to develop a winter cancer pain school and In October under the leadership off Dr Manohar Sharma we held our 4th successive **'EFIC Winter cancer Pain School'** attended by both national and international delegates.

in September we facilitated the North **England Pain Group** (NEPG) meeting which was attended by pain specialists from all over the north of England. Under the organisation of Dr Hemkumar Pusharaj and Dr Manohar Sharma we are currently in the process of organising our annual **Clinical Management of Chronic Pain Course** to take place in July. Other workshops are currently being drafted to run throughout the year.

An update on these events can be found later in the report.

Dr John Wiles is responsible for arranging the Annual Lecture and the Student Essay competition. This year saw our first hybrid Annual Lecture, which proved to be a huge success. The 2023 Annual Lecture was a little different this year, rather than honour one person we honoured two eminent figures. The tile this year titled *'Using a stratified medicine approach to improve understanding, diagnosis and treatment of Neuropathic Pain' and* was given to honour the life and work of Prof Stephen McMahon, Sherrington Professor of Physiology in Wolfson CARD and Prof William Ian Campbell from Northern Ireland, who was Secretary and then a President of the British Pain Society. The lecture was delivered by Professor David Bennett a Professor of Neurology and Neurobiology at the University of Oxford

The student essay competition was again opened up to Medical, Nursing, Occupational Therapists, Psychology and Physiotherapy students. With the winners of each category presenting their essay at one of our educational meetings.

Our sincere thanks go to Dr John Wiles for his active role in coordinating.

Writing this report also gives us the opportunity to express our sincere appreciation to the committed people who each year continue to contribute to the work and achievements of the Foundation; the volunteers who support us, the Charity Manager Julie Williams, her staff Lorraine Roberts, and Brenda Hall and Jo Stephens who work so conscientiously throughout the year. I would also like to acknowledge Kath Johns and Emma Shepherd of BTMR Ltd, Statutory Auditor, who meticulously prepare and audit the accounts.and Joseph McLoughlin of Rathbones Investments for retaining our investment portfolio.

Aims & Objectives

The aims and objects of the Pain Relief Foundation, as set out in the Constitution, are the advancement and promotion of all forms of medical research and in particular the relief of human pain and all painful conditions of every type whatsoever and howsoever caused and to disseminate the results of any such research throughout the world.

Policies to further Aims & Objectives

In pursuance of these aims and objectives, the continued policy of the Trustees is to:

- Fund and enable research into the causes and optimal treatment of human chronic pain.
- Provide and maintain a Pain Research Institute, headed by a Professor of Pain Science, in which research and education is conducted in pursuance of the charity's objectives.

- Undertake the support of the Pain Research Institute as a priority in the Pain Relief Foundation's funding programme. However, research grants will also be made available and awarded by open competition, for qualitative research projects carried out in other institutions.
- Support partnerships with higher education and the N.H.S directed to the understanding and treatment of human chronic pain. In particular, to provide long-term funds for the support of a Chair in Pain Science at the University of Liverpool.
- Support the dissemination of the results of such research throughout the world.
- Promote and enable education and training for doctors and other health. professionals on human chronic pain and its treatments.
- Provide doctors and other health professionals with an information service on chronic pain and its treatments, in order to improve patient care.
- Provide an information service to human chronic pain sufferers and patients on chronic pain conditions.

This policy has remained unchanged since the last annual report.

Chronic Pain

Millions of adults are living with 'Great Pain Shame'.

A study found that those with an ailment that affects their day-to-day existence rarely tell others about the pain they're in. "The prevalence of pain is huge. It dwarfs most other conditions.

Chronic pain is persistent pain that lasts more than three months, despite medication or other forms of treatment.

Secondary chronic pain is a pain which tends to be caused by another condition, for example, arthritis, endometriosis, cancer pain.

Primary chronic pain is a condition in its own right - there is no known condition other than the pain itself - this can include conditions such as fibromyalgia or complex regional pain syndrome.

Chronic pain is often confused with acute pain - a short-term pain such as a broken bone or a torn muscle.

Living in isolation is not a new phenomenon for those who live with chronic pain. Pain prevents you from doing the things you love to do, going to the places where you want to go, and meeting with those you love. It prevents you from going to work, going out to shops, restaurants, and entertainment venues, seeing your family and friends. As your pain enforced isolation continues, you lose your routine, your sense of time, your ability to interact with others, and your ability to participate in the world outside your home.

Staying indoors as much as possible (14 per cent), turning down social invitations (13 per cent) and avoiding going outdoors in the heat (11 per cent), are among the top ways sufferers choose to hide their pain.

Nearly six in 10 (56 per cent) would rather not talk to anyone about what they are going through - with 45 per cent preferring to try and forget as much as possible.

And 41 per cent don't want to be rendered incapable of doing everyday things.

PAIN AFFECTS US ALL

The Department of Health recognises chronic pain both as a long-term condition in its own right and as a component of other long-term conditions.

Across the UK there are currently 14 million people living with chronic pain.

HEALTH AND SOCIAL CARE

- 66% of people attending A & E seeking help with pain had made 3 visits to a health care professional in the preceding weeks.
- 16% of chronic pain patients feel that their chronic pain is so bad that they sometimes want to die.

WELFARE AND BENEFITS

- Of the 14 million people living with chronic pain, 3.5 million said their pain had kept them from their usual activities, including work, on at least 14 days in the last 3 months.

EMPLOYMENT

- The CMO report states that 25% of chronic pain patients lose their jobs, this contributes to 42% in the lowest income households being more likely to report chronic pain, compared with 27% in the highest.
- 41% of people who attended pain clinics report that their pain has prevented them from working and 13% have had to reduce their hours.

SOCIETAL IMPACT

- Low back pain is ranked highest out of 291 conditions examined by the Global Burden of Disease study, ranking number 1 for years lost to disability worldwide.
- In fact, 5 of the top 12 disabling conditions globally are persistent chronic pain conditions: low back and neck pain, migraine, arthritis, and other musculoskeletal conditions.

This situation highlights just how much research and associated work still needs to be carried out if we are to tower above chronic pain and to ease the difficulty which it causes. The staff at the Pain Research Institute and in the other Laboratories which are funded by the Foundation, recognise that much remains to be done, and they are relentless in their efforts to solve the many problems and unexplained factors.

The Pain Relief Foundation's funding has helped the Research Institute secure a firm base for an exciting and forceful academic structure which is necessary if the Institute is to continue moving forward with a rigorous programme of research into human chronic pain.

It has also helped the Foundation to co-ordinate and further develop the extensive teaching of undergraduates, postgraduates, nurses, and other medical professionals that is essential to the further improvement in the treatment and relief of chronic pain.

The Pain Research Institute (PRI)

The Pain Research Institute based within the Clinical Science Centre at University Hospital Aintree houses patient examination laboratories, research laboratories, work and study areas, a specialist pain library with several study areas and general workstations which provide researchers with access to all of the relevant pain databases and research offices, through a fast link computer hub.

We are located directly adjacent to the Walton Centre NHS Foundation Trust, Liverpool. The dominating factor for our location here is because pain-related research projects often need access to a large number of patients. The Pain Clinic has a throughput of over 4500 new patients each year and access to this patient base is paramount for the Pain Research Institute to continue with their work. The symbiotic work that is carried out in liaison between the two units, and the expertise that has emerged over the years, has led to the *'Walton Pain Clinic'* becoming, and remaining, the largest and most successful in Europe. All patients recruited are fully informed volunteers.

A proud moment this year has seen Dr Andreas Goebel, Director of the Pain Research Institute and Pain Consultant attain a professorship – an incredible academic achievement. If his research leads clinicians to better treatments and be involved more in diagnostic work, then it will be an advancement for not just for chronic pain patients and local clinicians, but clinicians from across the country, and the world! 'Congratulations Andreas'.

Patient and Public Involvement (PPI) has always been important to the PRI. We have been holding regular PPI groups for over ten years and have recently won a University of Liverpool award for our PPI involvement. The PPI team consults with patients to shape all stages of research projects concerning chronic pain (with a particular focus on Complex Regional Pain Syndrome and Fibromyalgia) within the Pain Research Institute. The PPI days have substantially contributed to the creation of 2 publications.

The Pain research Institute remains a hive of activity with many current ongoing studies some of which are listed below.

- Autoimmunity-informed Phenotyping In patients with Fibromyalgia Syndrome (APIF)

- MRI & QST Analysis in Trigeminal Neuralgia and Persistent Idiopathic Facial Pain
- 'Sense of self, social functioning and response to multidisciplinary treatment for chronic pain'

- Determining the accuracy of changes in the nerves in the cornea using a method called corneal confocal microscopy to identify small nerve fibre damage in patients with fibromyalgia

- Fibromyalgia symptoms and the immune system

- The use of anakinra in treating complex regional pain syndrome by blocking interleukin-1

- Peripheral Microneurography and Pain Mechanisms

To date, there have been numerous publications in medical and scientific journals together with books written by Consultants from the Pain Research Institute. The teams of doctors and scientists have ambitious plans for future research which, if funding can be obtained, bid fair to make substantial advances in the understanding, and the relief, of chronic pain which presents many psychological problems and physical conditions for the sufferer.

Research Accommodation

The Trustees of the Pain Relief Foundation have continued with the agreed policy that whilst continuing to retain the leasehold and ownership of the Pain Research Building in the Clinical Sciences Centre, together with the fixtures, fittings and equipment therein, they will provide the facility of the Institute, together with the fixtures and fittings, to the Department of Neurological Science, University of Liverpool, and to other such parties who are researching chronic pain, or who wish to enter into collaborative research on human chronic pain.

This arrangement will ensure that research personnel supported by the Pain Relief Foundation, the University of Liverpool, the Liverpool John Moores University, and those others who are employed by another party but are working on chronic pain research under the auspices of the 'Pain Relief Foundation' Professor of Pain Science, shall be contained in the same premises and work collaboratively. This arrangement offers a more structured and controlled working area and is

conducive to good working practices. The use of the premises does not create a lease but shall be treated as a Licence at Will.

All of the overhead and operating costs of the Pain Research Institute premises are borne by the Pain Relief Foundation and are allocated as part of the research grants. The following *'modus operandi'* was pursued during the year as in previous years:

- The Pain Relief Foundation provided administration and research accommodation for the research personnel, within the Pain Research Institute.
- The Pain Relief Foundation provided research secretariat, and clinical research support facilities for the researcher posts from its own staff resources.
- The Pain Relief Foundation provided secretariat assistance to the associated research personnel, from its own employed staff.
- The Pain Relief Foundation discharged all costs connected with the accommodation of the Pain Research Institute and its operational facilities, including overheads, heat, light, repairs, and purchase of new equipment etc.
- The Pain Relief Foundation discharged all costs connected with the provision of all consumables and computer hardware for the Professor of Pain Science and all other grant aided Researchers working in the Pain Research Institute.
- The Pain Relief Foundation discharged all costs connected with the provision of lecture theatre and associated facilities.
- Under the present structure, the Head of the Pain Research Institute is charged with reporting to the Scientific Advisory Sub-Committee in respect of all research work carried out under the Pain Relief Foundation grant arrangements, and also on the additional research that has been made possible through the Foundation's funding and provision of accommodation. The Chair of the committee is then able to submit a concise report to the Committee of Trustees.

This established procedure is an essential method to evaluate and measure the success and effectiveness of the research work being conducted and to ensure that it is achieving its aims. Additionally, the head of the Pain Research Institute is invited to attend meetings of the Trustees at six monthly intervals, to answer questions on matters raised regarding current and on-going research projects and future planned developments. He also maintains a liaison with the Education Sub-Committee, attending their meetings in an Ex-Officio capacity.

RESEARCH CO-ORDINATION & EDUCATION

The research co-ordination accommodation is located in the administrative area and fulfills a range of functions in its operational role. It supports the Pain Research Institute in a number of fields, providing accurate sources of scientific and medical information to assist the researchers in many projects.

Under the direction of the Education Sub-Committee, the Education Section also undertakes the operational factors in the conduct of all postgraduate courses that are organised throughout the year, arranging the teaching seminars, overseeing the Pain Relief Foundation Annual Lecture, collating and ensuring the correct and timely marking of Student essays and organising external conferences.

STRUCTURE GOVERNANCE AND MANAGEMENT

Governing Document On 6th April 2014, the Pain Relief Foundation was incorporated as a Charitable Incorporated Organisation under charity number 1156227.

Structure, Governance & Management

The Pain Relief Foundation is controlled by its Constitution as a Charitable Incorporated Organisation managed by a Committee of Trustees and at their meetings the Committee regularly conducts an assessment and review of their number, taking into account the skill requirements of the members in conducting the affairs of the Trust, and any potential retirements in the forthcoming 12 months. From this review, consideration is given to the need, if any, to recruit further Trustees. In the event that further recruitment is deemed necessary, the Committee of Trustees will seek suitable candidates through a process of personal contact across the Universities, the Health Service and other appropriate professional bodies associated with the charity. Details of the Trustees are shown on page two of this report.

The power to appoint a new Trustee or additional Trustees of the charity is vested in the Committee of Trustees and new appointments may be made by a resolution of a meeting of that Committee. A Trustee may retire upon giving two months' notice in writing of intention to do so to each of the other Trustees. The Trust Constitution requires that the number of Trustees should not be less than three at any time, but there is no limit on the maximum number and Trustees are not required to retire and stand for re-election.

No expenses of any type will be paid to any Trustee, nor will any Trustee be paid any remuneration or payment of any kind from the Foundation in their capacity as a Trustee. All of the Trustees will give freely of their time and act in an honorary capacity. This is confirmed in each year's Annual report & Accounts.

In the period 6th April 2022 to 5th April 2023, there were no expenses of any type paid to any Trustee nor was any Trustee in receipt of any remuneration or payment of any kind from the Foundation in their capacity as a Trustee. All of the Trustees gave freely of their time and acted in an honorary capacity.

The Committee of Trustees conducts at least four quarterly meetings each year at which they receive reports on the activities and achievements that have occurred since the previous meeting. The meeting agendas encompass reports on the full range of activities and situations including the day-to-day administration, investments and reserves, cash flow and risk management.

The Committee of Trustees continues to review several areas of importance in the effective management of the Foundation. The prepared '*Risk Assessment*' policy is subject to regular review to ensure that potential risks to which the charity may be exposed, are adequately identified, assessed and mitigating steps taken. This operational area is considered to be of the greatest importance and procedural changes will be implemented if deemed appropriate.

Related Parties

For the purposes of preparing accounts in accordance with the Statement of Recommended Practice for charities, in the opinion of the Trustees, the following are related parties to the Pain Relief Foundation:

- The Trustees and their immediate family
- The National Health Service
- The University of Liverpool

Risk Management

The trustees have a duty to identify and review the risks to which the charity is exposed and to ensure appropriate controls are in place to provide reasonable assurance against fraud and error.

Risk Assessment

The Trustees have prepared a risk assessment register in which they have recorded the details and results of an extensive study regarding the potential risks to which the charity may be exposed in the conduct of its affairs. The Trustees have satisfied themselves that through the actions they have taken, the identified risks have been reduced or eliminated, and that appropriate procedures and controls to deal with the risks are in place, so that any resulting or potential impact that the charity may experience is minimised.

The risk assessment register is subject to at least an annual review and in general it is an ongoing review. Such reviews ensure that all of the procedures in place continue to be appropriate to the conduct of the charity and that it is adequate in the light of experience. Where appropriate, systems or procedures have been established and put into place so as to mitigate any risks which may arise or develop

Trustee Indemnity Insurance

The Trustees do not contract a Trustee Group Indemnity Insurance policy.

Recruitment, Appointment, and Induction of New Trustees

In selecting persons to be appointed as trustees, nominations are submitted to a meeting of the Committee of Trustees, so that they each have the opportunity of evaluating the strengths of the candidate(s). In considering each nominee, the trustees take into account that person's professional qualifications or personal qualities, their commitment to promoting and furthering the aims of the Foundation, and their ability to make a contribution to the effective management of the Foundation. If the nominee is deemed acceptable, then the appointment is conducted in accordance with the established procedure of induction and training.

The Chair of the committee will extend an invitation to the candidate(s) to attend an early meeting to discuss the appointment in more detail. This is followed by a further meeting with the committee of trustees at which the new trustee is introduced, and a formal appointment confirmed. On appointment, the new trustee is required to sign a declaration stating that they comply with the formal conditions required of a Trustee and are therefore able to legally serve as a trustee. It is a requirement that a declaration of interest be made so that any conflicting interest is noted and registered accordingly. Should any interest be registered, then at any meeting where there is such a conflict, the Trustee will be required to withdraw and not vote on the matter. It is also declared that none of the Trustees have an interest in the pharmaceutical industry. However, any such interest would be registered.

An induction meeting is then held with the Administrator who will inform the new Trustee of their powers and responsibilities, the operational policy, the management arrangements for the charity's investment funds and the procedure of receiving applications for research grants and how the applications are processed through to selection. Other meetings are then held with the Sub-Committees at which their operational roles and powers are discussed.

An induction welcome pack is provided to the new Trustee, which contains as a minimum a copy of the Constitution, a synopsis of the Foundation since its inception showing its achievements and further research targets in human chronic pain. Copies of the Trustee Committee's meeting minutes and the meeting minutes of the Advisory Sub-Committees, each covering the past 24 months, cash

flow reports for the same periods, and copies of the previous two years' Annual Report and Accounts. A presentation folder is prepared containing copies of the Reserves Policy and Annual Review, Risk Assessment, Management Flow Chart, Mission Statement and Equal Opportunities Policy. In addition, a copy of the Charity Commission's publications *'The Essential Trustee: What you need to know'* and *'Charities and Public Benefit'* are provided.

Education Advisory Sub-Committee

The Committee of Trustees is advised on all aspects of education and information by an appointed ***'Education Advisory Sub-Committee'***, chaired Dr John Wiles, a Senior Pain Consultant, working in the N.H.S., and also a Trustee of the Foundation. During the year under report, the committee consisted of Neurosurgeons, Senior Pain Clinicians, and a Clinical Lecturer with Special Interest in Pain. This committee, whose members have a wide-ranging knowledge of the treatment of chronic pain and medical education strategies, were delegated and directed to advise the Trustees on educational issues and to further develop the Pain Relief Foundation's educational role through publications, courses, lectures, literature and conferences and in this respect, it fulfilled the role of maintaining a well-balanced delivery of up to date educational programmes to health professionals, many of whom traveled from all parts of the country to attend.

This committee is also charged with identifying the most appropriate methods of disseminating in printed format, details of successful research results, information on new and improved treatment methods that have been devised for pain patients, and information leaflets to aid pain sufferers in finding the best treatment resources centers. This information is distributed through the medical press and, both the Foundation's website and the Institute's website. All of the members act in an honorary capacity.

Scientific Advisory Sub-Committee

To assist the Trustees in making balanced policy decisions regarding the funding of selected research projects and additional applications for funding, they are advised and directed by an appointed ***Scientific Advisory Sub-Committee***, which is chaired by Dr Caroline Staunton, a well-respected and formidable research associate. The other members of this committee are recruited for their in-depth knowledge and understanding of chronic pain conditions and are drawn from both local and external treatment centres covering the many disciplines involved in the study and treatment of human pain. All of the members act in an honorary capacity and the committee is supported by the Foundation's Charity Manager.

The Committee continues to be the source of invaluable information, advice and opinion when reporting on, and prioritising, the numerous funding applications for scientific research which were considered to be worthy of support. It also continued with the vital task of overseeing the results from the many facets of research work, assisting the Trustees in interpreting, and analysing the large volume of scientific information submitted by Research Fellows, Grant Holders.

The purpose in receiving and analysing these reports is to satisfy the Trustees that:

- the research being funded is achieving the projected results to satisfactory and accepted scientific, medical and research standards.
- the research is likely to reach its stated aims.
- ethical approvals remain in place and are being followed scrupulously.
- research Governance is being observed at all times.
- quality standards are being maintained.
- the costs of the research are maintained within the grant limits.
- the research is being managed and monitored effectively.

The head of the Pain Research Institute is called to attend each of the Trustee meetings to provide the Trustees with an insight into the advances and the strategic development of the research opportunities being pursued. Reports are also received from the appointed Education Advisory Sub-Committee, which

is principally involved in directing the Educational Meetings, Lectures, Student Essays and Patient Information issues and the Scientific Advisory Sub-Committees which undertakes the task of advising the Trustees on all aspects of Research and Research Grant applications.

Grant Making Policy

In November each year, the Pain Relief Foundation advertises in the national medical press, to invite well established researchers and scientists to submit applications for Pain Relief Foundation grants, to carry out research projects on human chronic pain or to purchase special laboratory equipment to conduct clinical trials. The notice to apply for grants is advertised in the selected medical journals, on the Pain Relief Foundation Website, on the NHS grant website and through other appropriate media; there is a closing date for the receipt of such applications. The advertisement states the upper (monetary) limit of grants, which may vary from year to year.

On receipt of applications, the Foundation's Charity Manager ensures that all appropriate sections of the application forms which have been received are correctly completed and then arranges a meeting of the Scientific Sub-Committee to present the Abstracts of the applications to the members. At this meeting, the members jointly select and nominate independent and best qualified, learned medical persons who will be asked to peer review each application and to give their expert opinions.

After the meeting the Charity Manager writes to the selected peer reviewers, submitting a copy of the application asking if they will provide an assessment of the proposed research, the likelihood of the work succeeding and the cost effectiveness of the requested budget. In addition, references are sought regarding the applicants and the outcome of previous research projects for which they have received funding from all sources. When all applications are complete with the peer reviews and references received, a full set of each application is submitted to each member of the Scientific Advisory Sub-Committee, for consideration and prioritisation in preparation for a selection meeting of the members.
At the grant meeting, the Chairman calls the attention of the members to the received Peer Reviews and References which are referred to throughout the process of considering the most appropriate and worthy applications deserving of a grant. Each committee member delivers an opinion on the applications received and scores each application between 1 and 3 with (1) being the lowest score and (3) being the highest score. These scores are then brought together with the Peer Review scores and the applications listed in order of achievement, at which point the Chairman and the committee draw recommendations to place before the next meeting of the Trustee Committee. When the Trustee Committee receives the advice of the Scientific Advisory Sub-Committee, they decide which applications, if any, will be funded in accordance with advice received, and in the light of funds available.

The Trustees may recommend that an application not be funded, be funded in full, or be funded at a reduced level. In the event that the Trustees are considering a number of competing recommended applications for which the Foundation's funds are inadequate to fund them all, the Trustees may invite the Chairman of the Scientific Advisory Sub-Committee, together with those members of the Sub-Committee who are also Trustees, to help them prioritise the applications. Each grant is specific to the holder and ceases should the grant holder terminate their post.

New grants approved since the last report.

Professor in Pain Science (Approved for the next 12 months) *Costs for 50% of the Chair in Pain Science, University of Liverpool.*		**£80,000**
Dr Maria Maiarú **Reading**	'Targeting ion channels to combat pathophysiology of chemotherapy-induced peripheral neuropathy *(over 3 years)*	**£63,140**
Dr Anne Marshall **Liverpool**	*'REliability of HRDD as a biomarker in Painful diabeti c nEuropathy - a validation study (REPEL) (Over 8 months)*	**£25,763**

Dr Javier Aguilera London	'Mechanisms of inflammatory joint pain: The role of TRPM3 in knee nociceptors and its interaction with fibroblast-like synoviocytes' *(Over 12 Months)*	**£20,556**
Dr David Moore Liverpool	*'Experience of autistic adults of pain and pain management : Barriers to effective treatment.'*	***£12,992***

Public Benefit

In the foregoing section, the aims and objectives of the Foundation are plainly stated, and the policies adopted to deliver these aims and objectives are clearly stated. The objectives are supported by clear explanations regarding the policy of the Foundation to support the preparation and development of good quality research projects which are peer reviewed and expertly selected to develop the provision of improved treatment for the benefit of patients, easing and reducing their pain. In addition to the research conducted, the Foundation provides educational activities and the training of health professionals to achieve the stated aims. All of these activities are a continual matter of ongoing review by the Committee of Trustees and the Members of the Advisory Sub-Committees, so that in the light of experience, adjustments which are considered appropriate are implemented quickly, to ensure that the highest quality results continue to be delivered.

The development of improved patient services and treatment, as previously stated, is considered to be a priority issue by the Foundation, and it works symbiotically and in co-operation with the NHS and Universities to provide post-graduate scientific education in chronic pain relief. A number of postgraduate training courses have been conducted each year, for the continuing education of nurses, GPs, and for clinical pain specialists.

The information service provided by the Foundation serves to inform General Practitioners and all Pain Clinicians and Consultants with up-to-date information regarding available treatments for various pain conditions. In addition, the Foundation provides an information service for patients, their support carers and family members through the provision of leaflets on most chronic pain conditions. The Foundation's website also provides a vast range of guidance and support for patients and Health Professionals, and much of the advice section contents can be downloaded for further ease of access. This enables patients and carers to be empowered about their individual problems.

Pain sufferers who make telephone contact with the Foundation are connected to experienced, friendly staff who are trained to sympathetically and professionally direct enquirers through to available services and advice centres. They are also able to guide sufferers into how they can avail themselves of these services and what action they can take to be referred to clinical services for pain treatment.

Patients also receive direct benefit through research results which lead to the development of new and improved treatments for chronic pain conditions. These results are delivered to pain treatment clinics nationally, and indeed internationally, through the dissemination of research information by the Foundation either electronically, from our website, in medical publications and by way of educational meetings for health professionals.

With living with chronic pain affecting 40% of the British population, it can be seen that the work of the Foundation provides a benefit for a huge number of people. Reports on the research work supported by the Foundation are included in later pages and give a vast amount of information on the progress that is being made with human chronic pain and you are encouraged to read this section.

Volunteers

The Pain Relief Foundation does not receive any funding from central or local government, the health service, or other official bodies. Instead, the Foundation depends entirely on donations, gift aid, legacies, appeals and contributions from supportive members of the public, from generous companies and from several small trusts. There is a small level of direct fundraising activity organised and conducted by the Foundation's own staff, supported by one or two volunteers, an area in which we would like to grow our support. Additionally, it seeks to secure grants from trusts and the commercial sector to fund specific research projects.

The Foundation is not in receipt of benefits in kind, either by way of services, facilities, or donations-in-kind. It does, however, receive some limited benefit from the very small number of volunteers who support the fundraising section in the organisation and conduct of small events. The Trustees recognize the intangible value of the contribution of volunteers to the charity and the Trustees are of the opinion that such income cannot be reliably ascertained. However, it is considered that such intangible income is unlikely to be material.

Powers of Investment

The Constitution provides the Committee of Trustees with the following powers:

1. To administer a bank account in the name of the Foundation at such bank as the Trustees shall decide.

2. To invest in the name of the Trustees, any monies not required for the immediate purpose of the Foundation, in such securities as they may from time to time decide as if they were beneficially entitled and whether such securities shall be Trustee investments or not and shall have power from time to time to transpose such investments.

3. That any property purchased by the Foundation shall be vested in the Trustees appointed for that purpose and the Trustees shall enter into a Deed of Trust setting forth the purposes and conditions under which they hold the said property in trust for the Foundation and shall with such consent as is by law required deal with the property so vested in them by way of sale, mortgage, charge, lease or otherwise howsoever directed by the Foundation.

Investment Policy

The Trustees have developed an investment policy which it believes will respond to the needs of the on-going activities of the Foundation. Sufficient funds are retained in investment that will ensure we can respond to all contingencies as they may arise. Equally important is the strategy of investing in low to medium risk funds that will also provide an operational income. The objective is that this investment policy will produce improved values and income, whilst at the same time safeguarding the short-term and long-term financial needs of the Foundation. The Trustees seek the advice of its Investment Advisors, Rathbone Investment Management Limited and at regular meetings with the Advisors, in-depth reviews are held into the investment portfolio that makes up the reserve fund.

The investment decisions taken by the Trustees throughout this financial year have proved to help preserve the portfolio as much as possible in the current climate. Supported by the Advisors and making several minor adjustments, for the best possible outcome the fund has this year seen a decrease compared with the end of the last financial year that without prudence could have fared far worse. At a joint meeting with their Advisors, the Trustees set an investment policy of 60% of the funds invested into 'Equity Investments' with a view of maximising the Securities and to invest 40% of the funds into 'Fixed Interest Securities'. The decision to ease the approach with fixed interest investments was a very positive decision at the commencement of the year.

Mindful of the continuing uncertainty in the markets, during the year under review the Trustees gave instructions to the Portfolio Manager that the portfolio investment should be organized at 65% of its value being in Equities and 35% of the value being in Fixed Interest stock and the investments were so arranged at the beginning of the year.

Reserves Policy

The strategy developed by the Trustees is to hold a level of reserves that is deemed to be appropriate from time to time, to ensure that:

- The committed and planned research projects undertaken in the short, medium, and long term are sustainable.

- The annual costs of the new 'Pain Relief Foundation Senior Lecturer of Pain Science promoting to Professor' appointment at the Pain Research Institute, is now into its first year, may be supportable from the income generated by the investments, so as not to detract from the distribution of the annual general income if this is required by the Trustees to balance its annual income

- The Trustees can address any problems that arise, including the loss of any significant source of income, which might restrict the ability of the charity in carrying out its objectives.

- Sufficient funds are available to respond to new and important projects that are identified.

- The Trustees can respond to a shortfall of income in any financial year, that may occur for whatever reason, and which shall enable the research that is already authorised, to continue without a break.

- The cost of funding the Chair at the University of Liverpool for the 'Pain Relief Foundation Professor of Pain Science' shall be protected for a minimum forward period of 10 years from any date, by ensuring that such sums as shall be required to continue the funding for such period are kept on reserve.

In setting the level of reserves, a conservative management style has been adopted that is consistent with the Trustee's responsibilities who have agreed a broad spread sector exposure to increase diversity and to regulate risk. The Trustees have established a position that the level of unrestricted reserves and investments should be adequately sufficient to respond to the above operational policy and needs. Therefore, the Trustees have agreed the following:

- Funding for the post of Senior Lecturer/Professor of Pain Science continues to be identified as a long-term commitment and therefore, a minimum of 10 years costs supported by projected increases of a minimum say 7% per annum to cover inflation should be set aside for this purpose. It has been estimated that £826,000 of the investments should ensure that the income will be adequate to cover this requirement for that forthcoming period.

- To provide reserves to cover the estimated costs of funding existing research, research coming on-line, overheads, research administration support, charity administration and fundraising over three years. Based on an average annual expenditure, this need is £950,000.

- To retain in investments, an amount that will enable the Trustees to respond to new and important projects that may arise. In arriving at a level of retention, consideration has been given to the fact that such projects may require funding for at least two years and possibly three years.

It is considered that in view of the ongoing investment market volatility and the continuing and uncertain slow rate of recovery, together with the unsteady present uncertainties worldwide, the present level of reserves is adequate to meet these criteria.

Trading

Changes in the 2000 Finance Act, Chapter 17, allowed exemption to tax on charitable income from trading activities up to predetermined levels. The charity continues to carry out a very small level of incidental trading within the prescribed limits.

FUNDRAISING REGULATOR

The Pain Relief Foundation is a Member of the Fundraising Regulator (FR) and has been since its inception in 2016, The FR is the independent regulator of charitable fundraising and was set up following the Etherington review of fundraising self-regulation (2015) to strengthen the system of regulation and restore public trust in fundraising.

The FR is open to all fundraising organisations, suppliers, and associates. Members agree to adhere to the highest standards of good practice with their fundraising, and their stated Fundraising Promise. As a Member of the FR we demonstrate Membership of the scheme
by using the scheme logo on all fundraising materials. By participating in the scheme charities are advertising commitment to best fundraising practices and to giving the public the comfort of a 'safety net' provided by a robust complaints system.

It is a requirement that a charity submits an annual report to the FR, advising the Board of the number of complaints received by the Charity, in relation to its Fundraising activity, by category. The report requires the charity to notify the Board of action taken to resolve any such complaints and what the outcome results are.

Pain Relief Foundation is pleased to report that in the year ended 5th April 2023, no complaints had been received by the charity in the preceding 12-month period. A report to this effect was submitted to the Board of the FR as required.

The Pain Relief Foundation Fundraising Promise

We are always committed to working to the highest standards of practice.

We promise donors that we will comply with the FR Codes of Fundraising Practice and do all that we can to ensure that fundraisers and volunteers will at all times comply with the Codes and with this Promise.

We comply with the law, health and safety and the environment. We will not put unfair pressure on anyone to donate. If you do not want to donate, we will respect your decision. We require anyone fundraising on our behalf to clearly identify themselves as one of our representatives.

We are honest and open and do not make false or exaggerated claims. We do what we say we are going to do and do not pretend to do things that we cannot. We will answer any reasonable questions you have about our fundraising activities and costs. Please contact us for information, visit our website or see our Annual Report.

We are clear and give clear details about how you can make a gift. If you make a regular gift and you want to cancel it, we will carry out your cancellation instructions as soon as possible. We are clear about what we do and how your gift is used for the effective support of our beneficiaries.

We are fair and respect the rights, privacy, and dignity of each of our supporters and beneficiaries and conform to the Data Protection Act. We will only use your personal information for the purposes stated and for which you have given your consent. If you tell us that you do not want us to contact, you in a particular way (e.g., by telephone) we will not do it.

We are reasonable and responsible and will be careful not to use any images or words that cause distress or offence. We make sure that our events are well run and meet health and safety and environmental requirements, and we avoid causing any nuisance, damage, or disruption. We will not use excessive emotional arguments to make you feel guilty about not giving to us.

We are accountable and should you be unhappy about anything we have done while fundraising, you can write to us and complain. We have a complaints procedure, and we will acknowledge your

complaint within 7 days and commit to dealing with the matter within 30 days. A copy of our procedure is available on request and if we are unable to resolve your complaint, we accept the authority of the FR to make a final adjudication.

FUNDRAISING COMMITTEE

Effective fundraising committees are vital to the life and financial well-being of organisations, and this is no different at the Pain Relief Foundation our fundraising committee remain committed to help raise awareness and funds. The functions of the group vary but centres around information, building relationships and raising money to meet the specific organisation's special or ongoing needs.

The Committee is made up of Board members with special skills and contacts to serve the role and non- members made up of nurses, ex patients and people with an interest in the Foundation whom without we could not fulfil this role. The Chair of the '***Fundraising Committee'*** Judith Daley, who is also a Trustee will in future advise the Board of Trustees in all facets of fundraising.

DONATION POLICY

This policy has been set out by the Trustees of the Pain Relief Foundation. It is a public guide to how the Pain Relief Foundation makes decisions on accepting donations and the procedures they follow. The policy is aligned with the codes of Fundraising Practice published by the Institute of Fundraising.

This document makes clear the Trustees' legal obligations with the regards to the acceptance and refusal of donations. It outlines the day-to-day procedures that need to be adhered to and ensures decisions are not taken on an ad-hoc basis but are in support of Pain Relief Foundations strategies and objectives.

Trustees' legal obligations

The Trustees take overall legal responsibility for decisions relating to whether a donation can be accepted or refused.

The Trustees must be able to demonstrate that they have acted in the best interest of the Charity.

The Trustees have a duty to carefully, based on evidence made available to them, whether the Charities interests will be better served by accepting or refusing the donation and to act accordingly.

These judgements must not promote any Trustee or employee's personal moral agenda, or interest and the Trustees must not allow individual or collective personal, political or ethical issues, which are not directly related to interests of the Charity, to affect their judgment.

Trustees must not derive any personal benefit (individually or collectively) from donations, offered to the Charity.

Policy

On a day-to-day basis, the Charity's board of Trustees delegates the responsibility to accept or refuse donations as follows, providing the Charity Manager is sure that any potential individual or corporate donor are supporting the charity in accordance with this policy.

- A donation must be clearly evaluated to establish whether it would be in the best interest of the Pain Relief Foundation to accept or refuse it.
- The donation should contribute towards the Charity's overall strategy and plans.

- The Charity will not accept donations from individuals or companies whose wealth are known to result from illegal activities or where there are indications of corruption and related crime.
- The donor's objectives or activities must not appear to be incompatible with the Charity's vision, mission, and values, particularly if this risk is causing significant damage to the Charity's integrity, public image, or professional reputation.

The Pain Relief Foundation will refuse donations in the following circumstances:

- Where the activities of a donor are directly contrary to the objectives or agreed policies of the Charity or the Charity suspects the gift has been donated to facilitate money laundering or other criminal activity.
- Where it can be clearly shown that the cost to the Charity of accepting the donation will be greater than the donation itself, and that the acceptance of the donation will directly lead to a net decline in assets of the Charity.
- Where the offer of support is dependent on the fulfilment of certain conditions placed upon the Charity and any condition,
  - A) Is in itself contrary to the objectives of the Charity
  - B) Is regarded as needing an unreasonable level of support from the Charity especially in relation to the size or impact the donation will have on the Charity's charitable activities.
  - C) Will divert the Charity from pursuing its current objectives, policies, or work priorities as a necessary fulfilment of the conditions alone.

The Trustees will take great care and consideration in deciding whether to accept or refuse a donation.

Donation Recognition

Gift Acknowledgment & Accountability

- All donors will receive a personal thank you letter and receipt, regardless of gift amount.
- All gifts will be formally acknowledged as quickly as possible, and in any event within 5 working days.
- The reporting requirements of all Grant Makers will be fulfilled thoroughly, accurately and within their required timeframe.
- Major donors for specific projects will receive where required and appropriate regular updates on the progress of the project.
- Where appropriate and required the families of legacy donors will receive a report on the use of the bequeathed funds.

Recognition

- Any donors expressed desire for anonymity will be strictly adhered to
- Any public recognition will only be undertaken with the Donors express permission and in compliance with data protection legislation and best practice.
- Recognition may be tangible by way of a physical acknowledgment such as a plaque and would be placed within the Pain Relief Foundation. This type of recognition would be decided by the Trustees.

- In general costs of recognition shall not exceed 5% of the gift amount.
- In all cases the cost of recognition shall be both reasonable and proportional.

The Charity reserves the right to refuse, discontinue or remove public recognition whether tangible or intangible, at any time if for any reason it considers the association to be damaging to its reputation. This course of action will be decided by the Trustees.

The final authority for resolution of any issues related to donor recognition policies rests with the Trustees; they may also amend or modify these policies as appropriate

STATEMENT OF TRUSTEES RESPONSIBILITIES

The Trustees are responsible for preparing the Report of the Trustees and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

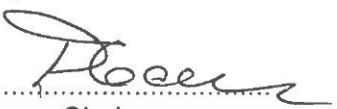
The law applicable to charities in England and Wales, the Charities Act 2011, Charity (Accounts and Reports) Regulations 2008 and the provision of the Constitution requires the Trustees to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the charity and of the incoming resources and application of resources, including the income and expenditure, of the charity for that period. In preparing those financial statements, the trustees are required to:-

- select suitable accounting policies and then apply them consistently.
- observe the methods and principles in the Charity SORP.
- make judgments and estimates that are reasonable and prudent.
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charity will continue in business.

The Trustees are responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the charity and to enable them to ensure that the financial statements comply with the Charities Act 2011, the Charity (Accounts and Reports) Regulations 2008 and the provisions of the constitution. They are also responsible for safeguarding the assets of the charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

The Trustees present their report with the financial statements of the charity for the year ending 5th April 2023. The Trustees have adopted the provisions of 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).

Approved by order of the Committee of Trustees on 12 September 2023 and signed on its behalf by:



D Cain - Chairman

Date 12 September 2023

CLINICAL SECTION

Patient & Public Information

The Pain Relief Foundation provides an online help and advice service through their website www.painrelieffoundation.org.uk and also provides a wide range of information leaflets, each of which deals with a specific chronic pain condition. The leaflets have proved to be a source of help to many thousands of chronic pain sufferers in understanding their pain problem and they give advice on the available treatments and additional sources of valuable information. Packs of leaflets are also made available to General Practitioners where they have been shown to be a useful way of guiding the patient into self-help opportunities in support of their treatment. All leaflets are now downloadable from our website.

The full range of leaflets is concise and gives fairly in-depth information about a range of chronic pain conditions and are continually re-written as information and advice is updated, using the guidelines issued by the Centre for Health Information Quality, which seeks to make the use of the leaflets more 'patient friendly' and easier to read and understand. Each of the medical staff working at the Institute contribute their skills in making the leaflets a prime source of useful information.

Letters and advice columns, written or supported by our doctors, are often seen as features in local and national newspapers, working with feature writers from magazines and newspapers they provide accurate and up-to-date information for the readers. Information disseminated in this way brings many benefits to chronic pain sufferers in particular, and the population in general.

CD's

The ***Coping with Pain*** CD was one of the early self-help aids for chronic pain sufferers. With an introduction by Magnus Magnusson, it soon became part of the pain patient's medicine cupboard. Each section of the CD has been specifically designed to focus the minds of pain sufferers on ways of easing their pain through relaxation and gentle exercise. As many as 2 out of 3 people who have used it report that they have been able to improve their quality of life and find that their chronic pain problem is eased.

Over 65,000 copies of the ***Coping with Pain*** CD have now been distributed through a range of outlets covering the medical field and the retail sector. Additional CD's dealing with specific pain conditions are also available and they include: ***Coping with Headaches & Migraine, Feeling Good, Coping with Back Pain*** and ***Relaxation*** and ***Coping with Anxiety.*** Each of the CDs contains relaxation programmes that help so many sufferers to find relief.

PAIN RELIEF FOUNDATION INFORMATION SCIENCES, RESEARCH CO-ORDINATION & EDUCATION

Introduction

The work of this department draws on the expertise of Pain Clinicians and is closely aligned with the work of the Foundation Education Sub-committee. The work of the Committee encompasses all educational courses, conferences and meetings for health care professionals and the department provides the administrative support for those developed courses and conferences plus the provision of information about chronic pain to both patients and the general public, including an online resource about chronic pain. This fulfills the remit of the Foundation to provide such education.

EDUCATION

Meetings and Courses

Meetings and courses which are developed and structured are aimed at all health care professionals with the sole purpose being to educate participants about all aspects of chronic pain management the courses are initially aimed at a national level but such as the interest has grown in the treatment of chronic pain, we now attract participants from all over the globe.

Foundation courses & lectures

After a couple of years break due to COVID this year will see the much-anticipated return of our flagship course, the annual ***Clinical Management of Chronic Pain.*** Organisiation is well under way and the course will run again in July. This is a vibrant and participative clinical, hands-on course. It is a 2-day course aimed at Consultants, Specialist Registrars, Anesthetists, Advanced Specialist Nurses, GP's, and Physiotherapists with some experience of pain management.

This year the course is under the new lead of Dr Hemkumar Pusharaj, Specialist in Pain medicine and Neuromodulation at the Walton Centre NHS Foundation Trust, and Dr Manohar Sharma, Consultant in Pain Medicine, The Walton Centre NHS Foundation Trust, Liverpool with support from Dr Kerry Matthews, Consultant Clinical Psychologist, The Walton Centre NHS Foundation Trust, Liverpool.

Each year feedback is given by the participants attended; this is read by the organisers, who take on board any suggestions and ideas to keep on improving the course so that the best education possible is provided. 2019 saw our last successful year, so we have taken their thoughts and ideas into consideration. The course consists of a mixture of lectures, seminars, clinics, theatre sessions and a grand round. It will remain participative clinical, hands-on with the most up to date information and techniques of treating chronic pain available. The participants will also spend a day in the Pain Management Programme at Walton Centre where they see firsthand the multidisciplinary assessments and treatments that patients receive.

We hope to continue with the success of this course in 2023.

This year we also saw the return of another of our major events, the biannual ***European Pain Federation EFIC Liverpool Winter Cancer Pain School,*** again organised by Dr Manohar Sharma. The event was a fully subscribed educational conference with an emphasis on clinical work, The Pain Schools are courses aimed at young European medical doctors and allied health professionals who are interested in further developing their knowledge and expertise in the field of cancer pain management. The courses ran for 4-5 days and included an evidence-based approach to the assessment, diagnosis, and comprehensive management of patients with cancer pain. 15 places are given to young European doctors who are funded by a grant from EFIC to attend and 15 further spaces are made available to delegates from the UK or across the globe.

There was excellent interaction between all participants with a great passion and enthusiasm to learn from each other on this course and to find ways to improve cancer pain management in Europe. It was an excellent group with faculty from Europe and the UK which provided a very balanced flavour throughout this interactive meeting.

It is a rare and unique opportunity to share knowledge and experience in this field in such detail (lectures, case discussions, live case presentations on recently treated cases, pain in cancer survivors, group work etc). I am sure this will have a positive impact on those who attended, to further help patients with cancer-related pain in the UK and Europe.

The Foundation also supported the running of the **North England Pain Group (NEPG)** to deliver their annual one-day meeting in Leeds. This year's meeting was organised by Dr Lisa Molus, Consultant in Pain Medicine South Tees Hospitals NHS Foundation Trust. The meeting covers many topical and highly relevant areas in the current practice of Pain Medicine.

The 22nd ***Pain Relief Foundation Annual Lecture*** took place in March and was delivered by Professor David Bennett, Professor of Neurology and Neurobiology at the University of Oxford., the title of the lecture was "*Using a stratified medicine approach to improve understanding, diagnosis and treatment of Neuropathic Pain.*" This lecture was conducted as our first hybrid Annual Lecture which proved to be a very popular choice enabling us to attract a larger audience, this may become the normal for this event.

The evening's proceedings were to honour the life and work of Professor Stephen McMahon, Sherrington Professor of Physiology in Wolfson CARD & Professor William Campbell President of the British Pain Society. He was one of few people who worked in anaesthesia, intensive care medicine, and especially in chronic pain management.

There are also further educational courses in the early planning stages, Therapy Perspectives in Pain Management, QST Training Day, MSK Spine Pain and Pain Neuromodulation awareness day.

The Foundation Essay Competition

The competition is run annually. The aim of this competition is to raise awareness nationally among medical undergraduates about chronic pain and the Pain Research Institute.

It was agreed to run the Essay Competition this year with multiple discipline entries Medicine and all health profession Undergraduates including occupational therapists, physiotherapist, nurses, and psychologists as a trial.

The winning entries for 2022 are below:

Daniel Cooke, 4th Year Medical Student University of Liverpool: "How *can the Utilisation of Exercise Programmes for Chronic Pain Management be Improved within the NHS?"*

Rosie Solomon, final year Medical Student from University of Leeds: "*The Chronic Pain Pandemic: How similar is Long Covid Chronic Pain to Fibromyalgia?*

Emma Carville, Medical Student at the University of Dundee: "*Pain Management Programmes: are they worth it?"*

Each winner received the winning prize of £500, their essays can be viewed on our website.

Pain Relief Foundation Website

The Pain Relief Foundation website www.painrelieffoundation.org.uk is a premier online resource for the general public where they can find information about chronic pain and importantly be directed to other specialist websites which offer good, current, medically correct, and easily understood information about specific chronic pain conditions.

All recommended sites have been assessed before being included on the site by the Walton Centre pain team. All the leaflets in the "Dealing with Pain Series" on chronic pain conditions and drugs for pain are available to download from the website. Topical and informative articles written by staff of the Foundation and Institute and Walton Centre Pain team are regularly featured on the website. The website also features any current news, fundraising events and gives online access to Health Professionals to register and attend any events or course that we may be running.

WORK & STUDY AREAS

The Institute continued to provide accommodation for research personnel to study their research developments and prepare research reports and applications. The accommodation is furnished and serviced, fully set out with computers workstations, and associated equipment.

RESEARCH

Below is a snapshot selection and brief description of research that is currently being undertaken with the support of the Pain Relief Foundation. An in-depth progress report of the research can be found on our website. **www. painreleiffoundation.org.uk** under the tab marked research.

Grant title:' ***Biopsychosocial Prediction Models of Pain Management Programme (PMP) Outcomes for Chronic Pain.'***

Awarded to: - *Dr Chris Brown -University of Liverpool*

Chronic pain is moderately or severely disabling in an estimated 8-12% of the UK population. Those struggling to cope are often referred to multidisciplinary Pain Management Programmes (PMPs), currently considered best practice for intractable chronic pain. PMPs are resource-intensive and expensive, yet outcomes are highly variable depending on the patient, despite multidisciplinary assessment to determine suitability. We need to be able to better identify patients who are likely to benefit and/or to refine the content of PMPs to individuals, to improve overall outcomes.

There have been recent advances in the use of statistical prediction models (mathematical equations that make predictions of treatment outcome based on patient characteristics), to find out if a treatment programme is suitable for an individual patient. We outline a number of limitations of previous research into prediction models for PMPs, and how we will overcome these. Importantly, there has been little research on the impact of "enabling factors" that promote PMP engagement and long-term benefit. This project would be the first of its kind to identify positive biological, psychological, and social factors that are unique in enabling individuals to benefit from PMPs (in contrast to previous studies focusing on negative traits predicting poor outcomes).

Project aims:

We aim to 1. Systematically review the available literature to assess the quality of evidence supporting certain predictors of outcome from PMPs; 2. Develop and test an initial statistical prediction model of PMP outcomes using an existing clinical database (the Pain Management Registry (PMR) at the Walton Centre); 3. Identify new "enabling factors" using qualitative and quantitative methods; 4. Establish the feasibility and patient acceptability of the clinical measurement of these enabling factors. The project will eventually enable clinicians to better select patients for specific PMPs (whilst maximising access and avoiding discrimination) and to tailor treatment to individual needs.

Grant title: ***"A novel approach for the treatment of migraine."***

Awarded to: - Dr Sandrine Géranton – University College London

Chronic migraine is a complex neurological disorder characterised by recurrent unilateral headaches and sensory deficits. One third of migraineurs also suffer from migraine aura, which often precedes the headache and presents as further sensory disturbances such as dizziness, numbness and blindness. Chronic migraine is a significant burden to society. In the UK alone, it affects 6 million people and remains a major clinical challenge.

Stress is the major trigger of migraine attacks, and we have evidence that inhibiting the stress regulator FKBP51 would be a suitable approach for the treatment of migraine. However, we still do not know why blocking the protein FKBP1 reduces the symptoms of migraine and whether it also reduces symptoms particularly associated with the migraine aura.

Project aims: -

Our aim is to use models to provide a better understanding of the impact of blocking FKBP51 on migraine and therefore to further promote FKBP51 as a novel target for migraine relief. Reducing high attrition rates in drug development continues to be a key challenge for the pharmaceutical industry which can only be overcome by a better understanding of the treatment targets. Ultimately, this project will provide evidence that blocking FKBP51 can result in the clinical management of migraine.

Grant title:- *"A feasibility study of a Behavioral Intervention for Opioid Reduction (BIOR) in primary care."*

Awarded to: - *Dr Helen Poole – Liverpool John Moores University*

About 30-50% of adults suffer from moderate or severe chronic pain not caused by cancer. Some are treated with opioids (e.g. morphine, codeine, tramadol). It is not unusual for this medication to be ineffective or to stop working over time, and produce unpleasant side effects (e.g. nausea, drowsiness, and constipation). Stopping taking opioid drugs is not easy because doing this abruptly can cause unpleasant effects (withdrawal). Tapering the opioid drug in small steps is much easier, though some patients might struggle and need support. Experience from treating patients with substance dependence tells us that interventions offering education and psychosocial support can help.

Project aims: -

This pilot study will investigate the effectiveness and feasibility of reducing inappropriate use of opioids through a tapering protocol, education, and support in primary care. Working with Knowsley CCG we will identify eligible patients to be allocated to either the tapering group or the tapering with support group. Both groups will have their opioid dose reduced by 10% per week. The taper with support group will have access to additional support during the process, including motivational counselling, realistic goal setting and a toolkit of resources to promote self-management. Some patients will successfully reduce their dose each week. For others, this may be more difficult, and the tapering reduction will be adjusted to 10% per fortnight. We assess opioid use, pain and quality of life in both groups at the start and end of the study to determine what works best to support people with chronic pain who wish to stop taking opioids.

Grant title:- "Using live sensory neurons to assess the pathogenicity of autoantibodies from pain patients."

Awarded to: - *Prof John Dawes- University of Oxford*

Chronic pain affects around 1 in 5 adults despite the use of current analgesics. Therefore, there is a need to better understand the underlying mechanisms in an effort to develop more effective and targeted therapies. The immune system has a role in chronic pain, and it is increasingly recognised that this includes autoimmune mechanisms and the action of autoantibodies which target proteins within the nervous system. Excessive activity of pain sensing neurons is a key driver of many chronic pain conditions. Recent work has shown that autoantibodies can cause pain by targeting these neurons, disrupting ion channel function and causing them to become overactive.

These studies support the idea that autoantibodies are a mechanism to cause pain and preclinical work in conditions such as FMS, suggest that this mechanism may be represented more widely among pain conditions.

Project aims: -

The aim of this study is to use samples from a range of pain patients (FMS, CRPS, diabetic neuropathy and sciatica) and assess autoantibody binding using both model (primary) and human (IPSC-derived) sensory neurons as an indication of their pathogenicity. Pathogenic autoantibodies have been established in FMS and CRPS, but only a small number of samples have been tested and the exact cellular targets remain unclear. Here we will use larger sample cohorts, compared to age and sex matched healthy controls, and quantify antibody binding in model and human sensory neurons.

In addition, we will use this platform to screen for pathogenic autoantibodies in pain conditions where this mechanism has not previously been implicated (e.g., diabetic neuropathy, sciatica). The work conducted in this study will give insight into the prevalence of autoantibodies as a mechanism to cause pain, help to facilitate the identification of target proteins and ultimately help steer future treatment strategies for chronic pain patients.

Opinion

We have audited the financial statements of The Pain Relief Foundation (the 'charitable company') for the year ended 5 April 2023 which comprise the Statement of Financial Activities, the Balance Sheet, the Cash Flow Statement and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 5 April 2023 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 Companies Act 2006.

Basis for opinion

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

Conclusions relating to going concern

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

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

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

Other information

The trustees are responsible for the other information. The other information comprises the information included in the Annual Report, other than the financial statements and our Report of the Independent Auditors thereon.

Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether 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 where the Charities (Accounts and Reports) Regulations 2008 requires us to report to you if, in our opinion:

- the information given in the Report of the Trustees is inconsistent in any material respect with the financial statements; or

- the charitable company has not kept adequate accounting records; or
- the financial statements are not in agreement with the accounting records and returns; or
- we have not received all the information and explanations we require for our audit.

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

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

Our responsibilities for the audit of the financial statements
We have been appointed as auditors 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 a Report of the Independent Auditors that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

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

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

- we identified the significant laws and regulations applicable to the company which we considered could have a direct material effect on the financial statements or the operations of the company. Said laws and regulations include but are not limited to, the Companies Act 2006, taxation legislation and data protection, anti-bribery and employment legislation;
- the identified laws and regulations were communicated within the audit team regularly and the team remained alert to instances of non-compliance throughout the audit.

We assessed the susceptibility of the company's financial statements to material misstatement, including obtaining an understanding of how fraud might occur. We also addressed the risk of fraud through management bias and override of controls by;

- updating and reviewing our knowledge of the company, its officers and internal financial function, together with their systems and internal controls. This included making enquiries of management as to their knowledge of actual, suspected and alleged fraud; and
- considering the internal controls in place to mitigate risks of fraud and non-compliance with laws and regulations. We concluded that whilst the company had controls in place that were appropriate to its size

and the nature of its activities, we could not rely on those systems and internal controls exclusively for the purposes of our audit work. We therefore adopted a substantive and transactional approach to our audit, seeking to verify figures in the balance sheet to third party evidence and transactions within the Income Statement to external independent documentation;
- We did not review every transaction. However, we adopted an approach based on testing a sample of transactions. In choosing our sample, we tested transactions that were material in nature and in addition a random sample of other transaction. By choosing transactions of a material nature, our audit work is designed to detect material misstatements. The use of random testing on other transactions is designed to detect other irregularities and the operation of the charity's internal control systems generally. If exceptions were noted, our audit work was expanded to test more transactions with a view to determining whether the exception was of an isolated nature;
- We performed analytical procedures to identify any unusual or unexpected relationships;
- We tested journal entries to identify unusual transactions and investigated the rationale behind significant or unusual transactions.

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

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

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

Use of our report
This report is made solely to the charitable company'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 charitable company's trustees those matters we are required to state to them in an auditors' report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and the charitable company's trustees as a body, for our audit work, for this report, or for the opinions we have formed.

BTMR Limited.

BTMR Limited
Statutory Auditor
Eligible to act as an auditor in terms of Section 1212 of the Companies Act 2006
Century Buildings
14 St Mary's Parsonage
Manchester
M3 2DF

Date: 12th September 2023

THE PAIN RELIEF FOUNDATION

Statement of Financial Activities
for the Year Ended 5 April 2023

	Notes	Unrestricted funds £	Restricted fund £	**5.4.23 Total funds £**	5.4.22 Total funds £
INCOME AND ENDOWMENTS FROM					
Donations and legacies	3	**373,501**	-	**373,501**	184,392
Other trading activities	4	**42,523**	-	**42,523**	4,254
Investment income	5	**95,054**	-	**95,054**	89,475
Total		**511,078**	-	**511,078**	278,121
EXPENDITURE ON					
Raising funds					
Other trading activities	6	**14,837**	-	**14,837**	14,677
Investment management costs	7	**12,017**	-	**12,017**	12,469
		26,854	-	**26,854**	27,146
Charitable activities	8				
Research		**469,382**	**300**	**469,682**	413,088
Education		-	-	-	5,759
Total		**496,236**	**300**	**496,536**	445,993
Net gains/(losses) on investments		**(151,442)**	-	**(151,442)**	254,619
NET INCOME/(EXPENDITURE)		**(136,600)**	**(300)**	**(136,900)**	86,747
RECONCILIATION OF FUNDS					
Total funds brought forward		**3,001,458**	**25,643**	**3,027,101**	2,940,354
TOTAL FUNDS CARRIED FORWARD		**2,864,858**	**25,343**	**2,890,201**	3,027,101

THE PAIN RELIEF FOUNDATION

Balance Sheet
5 April 2023

	Notes	Unrestricted funds £	Restricted fund £	**5.4.23 Total funds £**	5.4.22 Total funds £
FIXED ASSETS					
Tangible assets	14	**61,366**	**901**	**62,267**	73,117
Investments	15	**2,695,242**	**-**	**2,695,242**	2,949,283
		2,756,608	**901**	**2,757,509**	3,022,400
CURRENT ASSETS					
Stocks	16	**662**	**-**	**662**	700
Debtors	17	**(3,724)**	**-**	**(3,724)**	9,558
Cash at bank and in hand		**179,314**	**24,442**	**203,756**	45,291
		176,252	**24,442**	**200,694**	55,549
CREDITORS					
Amounts falling due within one year	18	**(68,002)**	**-**	**(68,002)**	(50,848)
NET CURRENT ASSETS		**108,250**	**24,442**	**132,692**	4,701
TOTAL ASSETS LESS CURRENT LIABILITIES		**2,864,858**	**25,343**	**2,890,201**	3,027,101
NET ASSETS		**2,864,858**	**25,343**	**2,890,201**	3,027,101
FUNDS	20				
Unrestricted funds:					
General fund				**141,987**	31,380
Designated unrestricted				**2,722,871**	2,970,078
				2,864,858	3,001,458
Restricted funds:					
Restricted fund				**25,343**	25,643
TOTAL FUNDS				**2,890,201**	3,027,101

The charitable company is entitled to exemption from audit under Section 477 of the Companies Act 2006 for the year ended 5 April 2023.

The members have not deposited notice, pursuant to Section 476 of the Companies Act 2006 requiring an audit of these financial statements.

The trustees acknowledge their responsibilities for

(a) ensuring that the charitable company keeps accounting records that comply with Sections 386 and 387 of the Companies Act 2006 and

(b) preparing financial statements which give a true and fair view of the state of affairs of the charitable company as at the end of each financial year and of its surplus or deficit for each financial year in accordance with the requirements of Sections 394 and 395 and which otherwise comply with the requirements of the Companies Act 2006 relating to financial statements, so far as applicable to the charitable company.

These financial statements have been audited under the requirements of Section 145 of the Charities Act 2011.

The financial statements were approved by the Board of Trustees and authorised for issue on 12 September 2023 and were signed on its behalf by:



D Cain - Chairman - Trustee

THE PAIN RELIEF FOUNDATION

Cash Flow Statement
for the Year Ended 5 April 2023

	Notes	5.4.23 £	5.4.22 £
Cash flows from operating activities			
Cash generated from operations	1	**(39,406)**	(243,957)
Finance costs paid		**(340)**	(261)
Tax paid		**12,051**	(6,163)
Net cash used in operating activities		**(27,695)**	(250,381)
Cash flows from investing activities			
Purchase of fixed asset investments		**(71,543)**	(222,186)
Sale of tangible fixed assets		**-**	1,186
Sale of fixed asset investments		**174,142**	332,787
Interest received		**2**	-
Dividends received		**95,052**	89,473
Net cash provided by investing activities		**197,653**	201,260
Change in cash and cash equivalents in the reporting period		**169,958**	(49,121)
Cash and cash equivalents at the beginning of the reporting period	2	**33,798**	82,919
Cash and cash equivalents at the end of the reporting period	2	**203,756**	33,798

Notes to the Cash Flow Statement
for the Year Ended 5 April 2023

1. RECONCILIATION OF NET (EXPENDITURE)/INCOME TO NET CASH FLOW FROM OPERATING ACTIVITIES

	5.4.23 £	5.4.22 £
Net (expenditure)/income for the reporting period (as per the Statement of Financial Activities)	**(136,900)**	86,747
Adjustments for:		
Depreciation charges	**10,850**	13,380
Losses/(gain) on investments	**151,442**	(254,619)
Profit on disposal of fixed assets	**-**	(1,186)
Interest received	**(2)**	-
Finance costs	**340**	261
Dividends received	**(95,052)**	(89,473)
Decrease in stocks	**38**	76
Decrease in debtors	**1,231**	8,038
Increase/(decrease) in creditors	**28,647**	(7,181)
Net cash used in operations	**(39,406)**	(243,957)

2. ANALYSIS OF CASH AND CASH EQUIVALENTS

	5.4.23 £	5.4.22 £
Cash in hand	**4**	4
Notice deposits (less than 3 months)	**203,752**	45,287
Overdrafts included in bank loans and overdrafts falling due within one year	**-**	(11,493)
Total cash and cash equivalents	**203,756**	33,798

3. ANALYSIS OF CHANGES IN NET FUNDS

	At 6.4.22 £	Cash flow £	At 5.4.23 £
Net cash			
Cash at bank and in hand	**45,291**	**158,465**	**203,756**
Bank overdraft	**(11,493)**	**11,493**	**-**
	33,798	**169,958**	**203,756**
Total	**33,798**	**169,958**	**203,756**

Notes to the Financial Statements
for the Year Ended 5 April 2023

1. DESIGNATED FUND

The designated fund represents sums set aside, out of unrestricted funds, to meet the ongoing costs of the chair of Professor of Pain.

	2023	2022
Investment income:	£	£
Interest received	**1,709**	2,908
Dividends	**93,342**	86,564
Realised gains on investments sold	**(3,267)**	100,175
Unrealised gain on revaluing investments to market value	**-**	-
Total designated income	**91,784**	189,647
Less:		
Realised loss on sale of investments	**-**	-
Unrealised profit/(loss) on revaluing investments to market value	**(148,175)**	154,444
	(12,017)	(12,469)
Expenditure out of designated funds	**-**	-
Transfer of net expenditure to General Fund	**(178,800)**	(227,000)
Net designated (expenditure)/income	**(247,207)**	**104,622**

2. ACCOUNTING POLICIES

Basis of preparing the financial statements
The financial statements of the charity, which is a public benefit entity under FRS102, have been prepared in accordance with the 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) (effective 1 January 2015)', and the Charities Act 2011. The financial statements have been prepared under the historical cost convention with the exception of investments which are included at market value.

Income
All income is recognised in the Statement of Financial Activities once the charity has entitlement to the funds and it is probable that the income will be received and the amount can be measured reliably.

Expenditure
Liabilities are recognised as expenditure as soon as there is a legal or constructive obligation committing the charity to that expenditure, it is probable that a transfer of economic benefits will be required in settlement and the amount of the obligation can be measured reliably. Expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all costs related to the category. Where costs cannot be directly attributed to particular headings they have been allocated to activities on a basis consistent with the use of resources.

Grants offered subject to conditions, such as duration of the grant, which have not been met at the year end date are noted as a commitment but not accrued as expenditure.

Allocation and apportionment of costs
Certain expenditure is directly attributable to specific activities and has been included in those cost categories. Certain other costs, which are attributable to more than one activity, are apportioned across categories on the basis of an estimate of the proportion of time spent by staff on those activities.

Continued....

2. ACCOUNTING POLICIES - continued

Tangible fixed assets
Depreciation is provided at the following annual rates in order to write off each asset over its estimated useful life.

Long leasehold	- Over the period of the lease
Plant and machinery	- 25% on reducing balance and 15% on cost
Fixtures and fittings	- 25% on cost

Expenditure on individual assets which is less than £500 is not capitalised.

Stocks
Stocks are valued at the lower of cost and net realisable value, after making due allowance for obsolete and slow moving items.

Taxation
The charity is exempt from corporation tax on its charitable activities.

Fund accounting
Unrestricted funds can be used in accordance with the charitable objectives at the discretion of the trustees.

Restricted funds can only be used for particular restricted purposes within the objects of the charity. Restrictions arise when specified by the donor or when funds are raised for particular restricted purposes.

Designated fund

The Designated fund represents the investment and related income which the trustees have designated to be used specifically for funding the chair of the Professor of Pain.

Restricted fund

The Restricted fund represents the income which was made available for the purposes of acquiring a Transcranial Magnetic Scanner and sponsorships received. The related expenditure represent money spent in relation to restricted income.

Hire purchase and leasing commitments
Rentals paid under operating leases are charged to the Statement of Financial Activities on a straight line basis over the period of the lease.

Pension costs and other post-retirement benefits
The charitable company operates a defined contribution pension scheme. Contributions payable to the charitable company's pension scheme are charged to the Statement of Financial Activities in the period to which they relate.

Financial instruments
Financial instruments are classified and accounted for according to the substance of the contractual arrangement, as either financial assets, financial liabilities or equity instruments. An equity instrument is any contract that evidences a residual interest in the assets of the company after deducting all of its liabilities.

Continued....

2. ACCOUNTING POLICIES - continued

Investments
Investments are made by the trustees acting through and on advice of professional investment managers. The investment strategy focuses on low to medium risk investments.

Investment gains and losses
Gains and losses which arise on the sale of investments during the year are termed "Realised gains and losses". Those gains and losses that arise from the disclosure of investments at market value as at 5th April each year are termed "Unrealised gains and losses".

Governance costs
Governance costs relate to the general running of the charity, as opposed to fundraising or charitable activities expenditure. They include audit and legal fees, accountancy and related support costs.

Costs of generating funds
The costs of fundraising events include the costs incurred by the Charity in arranging golf days, appeals and sponsorships and are included in the SOFA on an accruals basis.

Charitable activities - Grants payable
Expenditure on charitable activities includes grants payable to individuals to conduct research into pain, its causes and relief, and to disseminate research information together with related direct costs and support costs, all of which are accounted for on an accruals basis.

Continued....

3. DONATIONS AND LEGACIES

	5.4.23	5.4.22
	£	£
Gifts	68,197	89,086
Gift aided donations	5,846	29,047
Tax recovered on gift aided donations	(4,789)	7,262
Legacies	303,436	58,530
Sundry income	811	467
	373,501	184,392

4. OTHER TRADING ACTIVITIES

	5.4.23	5.4.22
	£	£
Fundraising events	950	-
Books leaflets tapes	133	145
Sponsorships	6,217	100
EFIC Cancer School	31,173	-
Meeting fees	4,050	4,009
	42,523	4,254

5. INVESTMENT INCOME

	5.4.23	5.4.22
	£	£
Rents received	-	2
Listed investments	95,052	89,473
Deposit account interest	2	-
	95,054	89,475

6. OTHER TRADING ACTIVITIES

	5.4.23	5.4.22
	£	£
Purchases	63	76
Staff costs	14,774	14,601
	14,837	14,677

7. INVESTMENT MANAGEMENT COSTS

	5.4.23	5.4.22
	£	£
Portfolio management	12,017	12,469

Continued.....

8. CHARITABLE ACTIVITIES COSTS

	Direct Costs	Grant funding of activities (see note 9)	Support costs (see note 10)	Totals
	£	£	£	£
Research	**106,646**	**291,932**	**71,104**	**469,682**

9. GRANTS PAYABLE

	5.4.23	5.4.22
	£	£
Research	**291,932**	282,658

10. SUPPORT COSTS

	Management	Totals	Finance	Information technology	Governance costs
	£	£	£	£	£
Research	**39,671**	**329**	**5,251**	**25,853**	**71,104**

11. NET INCOME/(EXPENDITURE)

Net income/(expenditure) is stated after charging/(crediting):

	5.4.23	5.4.22
	£	£
Auditors' remuneration	**5,000**	5,000
Auditors' remuneration for non audit work	**3,340**	3,340
Depreciation - owned assets	**10,850**	13,379
Other operating leases	**6,426**	3,975
Surplus on disposal of fixed assets	**-**	(1,186)

12. TRUSTEES' REMUNERATION AND BENEFITS

No trustees' remuneration or other benefits were paid for the year ended 5 April 2023 nor for the year ended 5 April 2022.

Trustees' expenses

There were no trustees' expenses paid for the year ended 5 April 2023 nor for the year ended 5 April 2022.

13. STAFF COSTS

The average number of employees for the year was 4 (2020: 4).

Continued...

14. TANGIBLE FIXED ASSETS

	Long leasehold £	Plant and machinery £	Fixtures and fittings £	Totals £
COST				
At 6 April 2022 and 5 April 2023	**114,302**	**204,403**	**324,487**	**643,192**
DEPRECIATION				
At 6 April 2022	**71,521**	**176,435**	**322,119**	**570,075**
Charge for year	**3,266**	**6,992**	**592**	**10,850**
At 5 April 2023	**74,787**	**183,427**	**322,711**	**580,925**
NET BOOK VALUE				
At 5 April 2023	**39,515**	**20,976**	**1,776**	**62,267**
At 5 April 2022	42,781	27,968	2,368	73,117

15. FIXED ASSET INVESTMENTS

	Listed investments £
MARKET VALUE	
At 6 April 2022	**2,949,283**
Additions at cost	**71,543**
Disposals at book cost	**(177,409)**
Revaluations	**(148,175)**
At 5 April 2023	**2,695,242**
NET BOOK VALUE	
At 5 April 2023	**2,695,242**
At 5 April 2022	2,949,283

Overseas investment assets amounted to £1,474,947 (2022: £1,233,485).

Cost or valuation at 5 April 2023 is represented by:

	Listed investments £
Valuation in 2023	**(148,175)**
Cost	**2,843,417**
	2,695,242

Continued...

16. STOCKS

	5.4.23	5.4.22
	£	£
Finished goods	662	700

17. DEBTORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	5.4.23	5.4.22
	£	£
Tax	(4,789)	7,262
Prepayments and accrued income	1,065	2,296
	(3,724)	9,558

18. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	5.4.23	5.4.22
	£	£
Bank loans and overdrafts (see note 19)	-	11,493
Social security and other taxes	-	123
Accruals and deferred income	68,002	39,232
	68,002	50,848

19. LOANS

An analysis of the maturity of loans is given below:

	5.4.23	5.4.22
	£	£
Amounts falling due within one year on demand:		
Bank overdrafts	-	11,493

20. MOVEMENT IN FUNDS

	At 6.4.22	Net movement in funds	Transfers between funds	At 5.4.23
	£	£	£	£
Unrestricted funds				
General fund	31,380	(68,193)	178,800	141,987
Designated unrestricted	2,970,078	(68,407)	(178,800)	2,722,871
	3,001,458	(136,600)	-	2,864,858
Restricted funds				
Restricted fund	25,643	(300)	-	25,343
TOTAL FUNDS	3,027,101	(136,900)	-	2,890,201

Continued...

20. MOVEMENT IN FUNDS - continued

Net movement in funds, included in the above are as follows:

	Incoming resources £	Resources expended £	Gains and losses £	Movement in funds £
Unrestricted funds				
General fund	**416,026**	**(484,219)**	**-**	**(68,193)**
Designated unrestricted	**95,052**	**(12,017)**	**(151,442)**	**(68,407)**
	511,078	**(496,236)**	**(151,442)**	**(136,600)**
Restricted funds				
Restricted fund	**-**	**(300)**	**-**	**(300)**
TOTAL FUNDS	**511,078**	**(496,536)**	**(151,442)**	**(136,900)**

Comparatives for movement in funds

	At 6.4.21 £	Net movement in funds £	Transfers between funds £	At 5.4.22 £
Unrestricted funds				
General fund	73,854	(269,474)	227,000	31,380
Designated unrestricted	2,865,456	331,622	(227,000)	2,970,078
	2,939,310	62,148	-	3,001,458
Restricted funds				
Restricted fund	1,044	24,599	-	25,643
TOTAL FUNDS	2,940,354	86,747	-	3,027,101

Comparative net movement in funds, included in the above are as follows:

	Incoming resources £	Resources expended £	Gains and losses £	Movement in funds £
Unrestricted funds				
General fund	163,649	(433,123)	-	(269,474)
Designated unrestricted	89,472	(12,469)	254,619	331,622
	253,121	(445,592)	254,619	62,148
Restricted funds				
Restricted fund	25,000	(401)	-	24,599
TOTAL FUNDS	278,121	(445,993)	254,619	86,747

Continued...

20. MOVEMENT IN FUNDS - continued

A current year 12 months and prior year 12 months combined position is as follows:

	At 6.4.21 £	Net movement in funds £	Transfers between funds £	At 5.4.23 £
Unrestricted funds				
General fund	73,854	(337,667)	405,800	141,987
Designated unrestricted	2,865,456	263,215	(405,800)	2,722,871
	2,939,310	(74,452)	-	2,864,858
Restricted funds				
Restricted fund	1,044	24,299	-	25,343
TOTAL FUNDS	2,940,354	(50,153)	-	2,890,201

A current year 12 months and prior year 12 months combined net movement in funds, included in the above are as follows:

	Incoming resources £	Resources expended £	Gains and losses £	Movement in funds £
Unrestricted funds				
General fund	579,675	(917,342)	-	(337,667)
Designated unrestricted	184,524	(24,486)	103,177	263,215
	764,199	(941,828)	103,177	(74,452)
Restricted funds				
Restricted fund	25,000	(701)	-	24,299
TOTAL FUNDS	789,199	(942,529)	103,177	(50,153)

21. RELATED PARTY DISCLOSURES

There were no related party transactions for the year ended 5 April 2023.

22. FINANCIAL COMMITMENTS

During the year grants payable to researchers were approved in the total amount of £902,576 of which £635,633 remains payable in respect of future periods.

Continued...

Detailed Statement of Financial Activities for the Year Ended 5 April 2023

	5.4.23 £	5.4.22 £
INCOME AND ENDOWMENTS		
Donations and legacies		
Gifts	**68,197**	89,086
Gift aided donations	**5,846**	29,047
Tax recovered on gift aided donations	**(4,789)**	7,262
Legacies	**303,436**	58,530
Sundry income	**811**	467
	373,501	184,392
Other trading activities		
Fundraising events	**950**	-
Books leaflets tapes	**133**	145
Sponsorships	**6,217**	100
EFIC Cancer School	**31,173**	-
Meeting fees	**4,050**	4,009
	42,523	4,254
Investment income		
Rents received	**-**	2
Listed investments	**95,052**	89,473
Deposit account interest	**2**	-
	95,054	89,475
Total incoming resources	**511,078**	278,121
EXPENDITURE		
Other trading activities		
Purchases	**63**	76
Wages	**14,300**	14,100
Social security	**306**	343
Pensions	**168**	158
	14,837	14,677
Investment management costs		
Portfolio management	**12,017**	12,469
Charitable activities		
Wages	**54,393**	50,675
Social security	**1,057**	1,543
Pensions	**1,684**	1,584
Venue & meeting costs	**37,473**	2,468
Sundry	**1,189**	278
Depreciation of tangible fixed assets	**10,850**	13,380
Loss on sale of tangible fixed assets	**-**	(1,186)
Grants to individuals	**291,932**	282,658
	398,578	351,400

Continued...

Detailed Statement of Financial Activities for the Year Ended 5 April 2023

	5.4.23 £	5.4.22 £
Support costs		
Management		
Other operating leases	**6,426**	3,975
Rates and water	**17,505**	17,548
Insurance	**2,974**	2,571
Telephone	**1,117**	1,047
Postage and stationery	**2,936**	1,791
Advertising	**5,252**	7,611
Sundries	**1,002**	235
Travel	**852**	501
Computer software	**1,267**	1,352
Credit card charges	**340**	261
	39,671	36,892
Finance		
Bank charges	**329**	150
Information technology		
Repairs and renewals	**5,251**	5,056
Governance costs		
Wages	**16,600**	15,800
Social security	**239**	370
Pensions	**674**	634
Auditors' remuneration	**5,000**	5,000
Auditors' remuneration for non audit work	**3,340**	3,340
Postage and stationery	**-**	205
	25,853	25,349
Total resources expended	**496,536**	445,993
Net income/(expenditure) before gains and losses	**14,542**	(167,872)
Realised recognised gains and losses		
Net investment gains/ (losses)	**(3,267)**	100,175
Net income/(expenditure)	**11,275**	(67,697)

Continued...



Pain Relief Foundation

PAIN RELIEF FOUNDATION

England & Wales - Charity number 1156227

Accounts

BAAM RELIEF FOUNDATION



Clinical Sciences Centre

University Hospital Aintree

Lower Lane

Liverpool

L9 7AL

Established as a Charitable Incorporated Organisation
on 17th March 2014

Originally Established under a Deed of Trust
Dated 30th March 1979

Annual Report and Accounts

For year ended 5th April 2022

Registered Charity No.1156227

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PATRONS

Professor Sir Michael Bond, FRSA, FRSE, FRCPsych, FRCPGlas, FRCSE
Dame Lorna EF Muirhead, DCVO, DBE, CStJ, FROG
Mr. R. N. S. Bigland

TRUSTEES

Mr. D. Cain, FRSA, FIoD, MHSM, DipHSM, (Chairman)
Professor Michelle Briggs PhD RGN (appointed 4.12.2018)
Miss J Daley, LLB (Hons)
Professor P. Eldridge, MA, MChir, FRCS
Mr. P. Fell, MA (Cantab), FRSA
Professor Francis McGlone BsC (Hons), PhD (appointed 10.3.2020)
Dr. T Nash, MB, BS, Dobst RCOG, FRCA, FFPMRCA
Mr. M. Sharma, MBBS, MD, FRCA, MSc, FFPMRCA
Dr. J. C. Wells, MB, ChB, LRCP, MRCS, LMCC, SRCA, SIPP
Dr. J. R. Wiles, MBBS, FRCA, FFPMRCA

CHARITY MANAGER

Mrs J Williams

SCIENTIFIC SUB-COMMITTEE

Dr U Allam, BSc, MPHe, MRCP(UK)(London), PhD
Dr. R. Barret Jolley, FBPhS
Miss. A. Bradshaw
Prof Jackie Campbell PhD MSc BSc CStat CPhys FRCOT FRSB
Dr. N. Goodson, FRCP, PhD
Dr. S Gulati, FRCA, FFPMRCA, EDRA
Dr Katie Heron, MSc, PhD, DClinPsych
Dr A Marshall MB ChB, BSc, FRCP, PhD
Dr. H. Poole, PhD, CPsychol
Miss. C. Staunton (Chairman)

EDUCATION SUB-COMMITTEE

Dr R Chawla, FRCA, FFPMRCA, FCARSCI
Miss. Alison Cox
Dr Bernard Frank, MD, FCARCSI, FFPMCAI
Dr. A. Goebel, FRCA, MSc, PhD
Dr S Gulati, FRCA, FFPMRCA, EDRA
Dr K Matthews, Consultant Clinical Psychologist
Dr. M. Sharma, MBBS, FRCA, MD, FFPMRCA, MSc
Mr. John Tetlow
Dr. J. R. Wiles, MB, BS(Lond), FRCA (Chairman)
Dr. J. C. Wells, MB, ChB, LMCC, FRCA

REGISTERED OFFICE

Clinical Sciences Centre
University Hospital Aintree
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Liverpool
L9 7AL

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Merseyside.
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AUDITOR

BTMR Limited,
Statutory Auditor
Century Buildings
14 St Mary's Parsonage
Manchester.
M3 2DF

SOLICITORS

John Roberts,
Abensons Solicitors
102 Allerton Road,
Liverpool,
Merseyside.
L18 2DG

INVESTMENT ADVISORS

Rathbone Investment Management Ltd.,
Port of Liverpool Building,
Pier Head,
Liverpool,
Merseyside.
L3 1NW

TRUSTEES' REPORT 2022

It is once again my pleasure as Chairman of the Pain Relief Foundation and on behalf of the Trustee Committee to introduce our Annual Report for the year ended 5th April 2022. Our reputation as leaders in the field of chronic pain research continues to attract wide interest from specialists in chronic pain, general practitioners and most importantly patients and families.

The year has been difficult for all charities, but we have remained resilient and steadfast and alongside our partner organisations noticeably the University of Liverpool and the Walton Centre NHS Foundation Trust have maintained our efforts to deliver first class research and support our grant applications and the promotion of our work at conferences and educational courses.

I would as always like to thank our two lead clinicians Dr Andreas Goebel and Dr Andy Marshall for their clinical expertise and Julie Williams our Charity Manager and her team for all the hard work to promote the charity in a whole variety of ways to encourage support and donations without which we would not be able to advance pain research. The many highlights of the year are referenced in the report, and I do hope you enjoy reading our success.

In the last year we continued to face our biggest challenges. As grim headlines dominated around the world, the pandemic still having a considerable impact on our organisation, all our face to face fundraising activities and education courses remained cancelled. We had to respond quickly, making some difficult decisions to manage our costs whilst protecting as much of our crucial research as we could and ensuring we were there for chronic pain patients who needed us more than ever. Despite these challenges, we honoured all existing research commitments, supported our researchers to respond to the crisis and continued to grant new funding, with almost £150,000 of new grants issued in the last year. Our response to the crisis, supported by our strong reserves position and robust digital fundraising performance, has put us in a solid position as we move into our recovery year, and we are once again feeling optimistic.

Now that we are entering the endemic stage and learning to live with Covid we look back and we are immensely proud of how we responded to the pandemic. We attribute our resilience to the dedication of our people, and the single-minded clarity of our mission. Another key factor has been our prudent management before the pandemic; our cash reserves ensured we could meet our financial obligations and continue essential research.

Covid-19 has caused us all to rely on science for solutions. And science has delivered in abundance, including developing, testing, and producing effective vaccines and therapeutics in record time. It's important to recognise how much we have all lost over the past 2 years, but we can also appreciate just how much we achieved and recognise how important is the vital role of science and research in all of our futures

Pain is the most common reason that people attend their GP and affects 1 in 4 people.

Persistent pain can be a major source of suffering for many and can present in many ways, for example after an accident, after a burn or through war injuries. Pain also occurs with illnesses such as cancer, arthritis, fibromyalgia, Parkinson's, multiple sclerosis, and back problems and now long covid to name but a few.

Pain is not visible and outwardly people may look 'normal' but are left with life-long severe pain that can affect their mood, relationships with family and friends and their ability to work or relax. We endeavour to do all we can to help these people who suffer in silence by making pain visible and to learn to treat it better. Everyone with chronic pain experiences pain differently, continuing valuable research will open the door to more options available to help people effectively manage their pain.

The climate in which we work is changing. Our health service is under increasing pressure and our collaboration with health and social care professionals is more vital than ever in meeting the needs of an ever-growing number of people living with chronic pain. We at Pain Relief Foundation and Pain Research

Institute remain driven by the scale of the need and we are completely committed to reaching the millions of people we know could benefit from cures, new treatments, better information, advice, and support

Our ambition is as focused as ever and although the task ahead may be daunting, we believe we can achieve it through inspirational scientists and outstanding expertise. We have a desirable reputation which gives us opportunities to collaborate and lead from the front. Every day these amazing people go to extraordinary lengths to help us improve the lives of those affected by Chronic Pain.

Chronic pain being one of the last great challenges facing medical science, it needs every support to make sure it is a fight we at Pain Relief Foundation can win. Duty bound to do our best we will persist in filling the gap between discovering new scientific advances and how these can translate into the best prevention and treatment options for people affected by pain and hopefully one day find a cure. We hope to continue to push changes across our society that will make lifelong differences. Along with additional research, pain education is critical to improved treatments and outcomes so now, more than ever, we need to work together to implement new solutions and address the burden of pain on our society.

The Pain Relief Foundation continues to make every effort to be open, transparent and remain responsible for the decisions that we make. We adhere to regulation of fundraising practices and her scrutiny of the charity sector and remain committed to respond any regulatory changes by continually reviewing our approach to fundraising to make sure we keep pace with the requirements of the law maintaining best practice in how we communicate with our donors and manage their data effectively. It is our job to ensure that we keep doing the right things in the right way from responsible fundraising to responsible spending and investing.

We need every support to make sure that the Pain Relief Foundation can continue with the efforts to make further headway in enabling the unravelling of the many and varied complications associated with human chronic pain and we are therefore thankful for the support from donors and volunteers who come from all sectors of the community who very often suffer chronic pain themselves; without your donations we would not be where we are, which brings me to add we are indebted to those who volunteer for the various research projects, here and in other units where research is ongoing supported by the Foundation without them we could not make the advancements we already have.

Another major involvement to the work of the Foundation comes from the Walton Centre NHS Foundation Trust for Neurology and Neurosurgery and its associated Pain Clinic who passionately supports the educational activities of the Foundation, none of which would take place without the commitment of all the Pain Clinic staff. The Pain Clinicians are also active researchers, adding to the portfolio of research supported by the Foundation.

The continuing work of the Pain Relief Foundation would not be possible without the skillful and capable Board of Trustees, to whom we are forever grateful for giving up their time. Our Trustees meet regularly to supervise and direct the Foundations activities with each member contributing to the effective management of the Charity; together they ensure that we get the greatest effect from your donations a responsibility we take very seriously. The Committee comprises of persons from many fields, each with in-depth and valuable skills from medicine as well as from administrative, legal, business, and commercial interests, each contributing their own dynamic. The Trustees are very ably supported by committees of specialists who have expertise and specialist interest in chronic pain.

It is at this point we would like to thank each and every one you for everything you do, we are beyond grateful.

The Trustees maintain the system of repeated review in all areas of importance in the scientific and administrative conduct of the affairs of the Foundation. In these difficult times, our reserves can be measured as crucial and therefore, the *Reserves Policy* is regularly monitored so that we are able to use our resources to the maximum effect. The *Investment Policy* dealing with the *Reserves* is also regularly reviewed by the Trustees and the Investment Management team at Rathbones, to maximise the generation of both income and capital growth. The *Risk Assessment* policy has also been frequently reviewed and is under constant consideration to ensure that risks to which the charity may be exposed

are understood, and steps taken to mitigate them have been identified. This is an area of prime importance and procedural changes will be implemented from time to time as appropriate.

During the year the Trustees decide on how much money is available for research budgets in the forth-coming year; we then advertise in specialist journals, on our website, on the specialist internet site ResearchResearch.com and in the University and NHS press, for applications.

The upmost importance is placed on the selection process; all applications received are initially assessed by our 'Scientific Advisory Sub-Committee' under its Chairman, Dr Caroline Staunton. This committee has the vital task of overseeing our research work. All applications received are initially assessed by the committee to ensure they fit the remit of the Foundation. The committee then ensures that each application is then independently Peer Reviewed by external reviewers. With all this taken into consideration the sub-committee will advise the Trustees on which of the many applications received for research grants are most deserving, and which projects should be the recipients of the funds available. As always, we are most grateful for the expertise and extensive work of our Scientific Sub-Committee.

A selection of research reports from grants awarded by the Pain Relief Foundation can be found on our website www.painrelieffoundation.org.uk.

During the year, the *'Education Sub Committee'* under the able Chairmanship of Dr. John Wiles, set out to develop and deliver or enhance the number of excellent educational courses on the Treatment and Management of chronic pain that the Pain Relief Foundation provide. The Pain Relief Foundation is noted for the level of excellence which these courses provide, and they are always well supported by all members of this committee and each year they welcome the opportunity to take the responsibility of organising and being responsible for the educational courses provided for doctors and other health professionals and are now encouraging other Pain professionals to follow suit.

Now that we are learning to live with Covid we are able to resume the planning of courses for 2022, these will hopefully not only take place face to face but with new technology will also allow us to have the opportunity to provide online attendance. Along with Dr Manohar Sharma we have already arranged for the commencement of the **'EFIC Winter cancer Pain School'** in October and we are in talks to prepare the **North England Pain Group** (NEPG) meeting in September. Other workshops are currently being drafted to run throughout the year.

The Chairman of the Education Committee Dr John Wiles is responsible for arranging the Annual Lecture and the Student Essay competition. This year saw our first virtual Annual Lecture which proved to be a huge success. The 2021 Annual Lecture titled '*56 Years On – Are We Nearer to Closing the Pain Gate?* was given to honour the life and work of Ronald Melzack, Professor of Psychology at McGill University, Montreal. The lecture was delivered by Claudia Sommer, Professor of Neurology at the University of Wurzburg, Germany, and the current President of the International Association for the Study of Pain.

It was agreed the new format of the student essay competition should continue and was again opened up to Medical, Nursing, Occupational Therapists, Psychology and Physiotherapy students. With the winners of each category presenting their essay at one of our educational meetings.

Our sincere thanks go to Dr John Wiles for his active role in coordinating.

Writing this report also gives me the opportunity is to express my heartfelt appreciation to the dedicated people who each year continue to contribute to the work and achievements of the Foundation; the volunteers who support us, the Administrator Julie Williams, her staff Lorraine Roberts, and Brenda Hall and Jo Stephens who work so conscientiously throughout the year. I would also like to acknowledge Kath Johns and Emma Shepherd of BTMR Ltd, Statutory Auditor, who meticulously prepare and audit the accounts.and Joseph McLoughlin of Rathbones Investments for retaining our investment portfolio.

Aims & Objectives

The aims and objects of the Pain Relief Foundation, as set out in the Constitution, are the advancement and promotion of all forms of medical research and in particular the relief of human pain and all painful conditions of every type whatsoever and howsoever caused and to disseminate the results of any such research throughout the world.

Policies to further Aims & Objectives

In pursuance of these aims and objectives, the continued policy of the Trustees is to:

- Fund and enable research into the causes and optimal treatment of human chronic pain.
- Provide and maintain a Pain Research Institute, headed by a Professor of Pain Science, in which research and education is conducted in pursuance of the charity's objectives.
- Undertake the support of the Pain Research Institute as a priority in the Pain Relief Foundation's funding programme. However, research grants will also be made available and awarded by open competition, for qualitative research projects carried out in other institutions.
- Support partnerships with higher education and the N.H.S directed to the understanding and treatment of human chronic pain. In particular, to provide long-term funds for the support of a Chair in Pain Science at the University of Liverpool.
- Support the dissemination of the results of such research throughout the world.
- Promote and enable education and training for doctors and other health professionals on human chronic pain and its treatments.
- Provide doctors and other health professionals with an information service on chronic pain and its treatments, in order to improve patient care.
- Provide an information service to human chronic pain sufferers and patients on chronic pain conditions.

This policy has remained unchanged since the last annual report

Chronic Pain

Invisible, unequal, and unfair.

We are often asked what chronic pain is. Chronic pain usually refers to persistent or recurrent pain that has gone on for more than three months. Some chronic pain is caused by underlying inflammation or damage to the body's tissues such as arthritis there is inflammation or damage in the joints and neuropathic pain can be caused by damage or inflammation in the nerves. Other conditions, such as fibromyalgia, are a type of chronic primary pain. These are conditions in their own right where the chronic pain is complex and associated with many other symptoms, rather than being due to underlying disease or damage in the joints or nerves.

Having chronic pain is a subjective experience which cannot be seen or measured directly. The causes are many and various and often the underlying clinical condition or injury may seem to bear little relation to the experience described by people in pain. Pain is one of the main reasons that people see their GP.

At its worst, chronic pain reduces, and ruins lives it can be exhausting, life-limiting and feel inescapable. People with chronic pain too often face a daily struggle in which every activity - from getting moving in the morning, to washing, dressing, working, exercising, being with family and friends and even trying to sleep. Chronic pain can limit not just what people are able to do, but also how they feel and think. It can

prevent people from fully participating in society, slowly wearing away their connection to community, until they feel isolated even with a large network of family and friends around them. Unsurprisingly, having chronic pain can also lead to poor mental health. Depression is four times more common among people living with chronic pain than among those without pain. Chronic pain and mental health problems have a complex and reciprocal relationship, with each one exacerbating the other.

Recent data published on chronic pain in different groups, highlights concerning health inequalities and trends. These include an increased burden of chronic pain on people living in deprived areas and people from some minority ethnic backgrounds, and a recent increase in chronic pain among young adults. Upsettingly, severe chronic pain is now associated with an increased risk of mortality.

This Is not good enough, we can and must do better. We need to break the vicious cycle where being deprived and excluded means you're more likely to have chronic pain, which in itself may lead to further poverty and exclusion. Chronic pain must not be ignored, by increasing society's awareness and investing in research, services, and the fairer treatment of people with chronic pain and we believe we can help these people to live active and fulfilling lives.

This situation highlights just how much research and associated work still needs to be carried out if we are to dominate chronic pain and to ease the distress which it causes. The staff at the Pain Research Institute and in the other Laboratories which are funded by the Foundation, acknowledge that much remains to be done, and they are relentless in their efforts to solve the many problems and unexplained factors.

The Pain Relief Foundation's funding has helped the Research Institute secure a firm base for an exciting and robust academic structure which is necessary if the Institute is to continue moving forward with a rigorous programme of research into human chronic pain. It has helped the Foundation to co-ordinate and further develop the extensive teaching of undergraduates, postgraduates, nurses, and other medical professionals that is essential to the further improvement in the treatment and relief of chronic pain.

The Pain Research Institute (PRI)

The Pain Research Institute based within the Clinical Science Centre at University Hospital Aintree houses patient examination laboratories, research laboratories, work and study areas, a specialist pain library with several study areas and general workstations which provide researchers with access to all of the relevant pain databases and research offices, through a fast link computer hub.

We are located directly adjacent to the Walton Centre NHS Foundation Trust, Liverpool. The dominating factor for our location here is because pain-related research projects often need access to a large number of patients. The Pain Clinic has a throughput of over 4500 new patients each year and the access to this patient base is paramount for the Pain Research Institute to continue with their work. The symbiotic work that is carried out in liaison between the two units, and the expertise that has emerged over the years, has led to the *'Walton Pain Clinic'* becoming, and remaining, the largest and most successful in Europe. All patients recruited are fully informed volunteers.

The Pain Research Institute is integrated into the University of Liverpool, which has the benefit of access to additional study facilities and research laboratories, without the additional cost factors. The Institute has become a focal point for pain research, the sharing of information and training in pain relieving techniques, while the wide scope of its projects and its thorough investigative work have brought real relief to patients in this country and overseas.

The Institute welcome collaborations amongst others which can enhance research. Research collaborators may, for example provide serum samples from another population, or conduct investigations of pain-questionnaires in their own patient group or refer patients with rare pain conditions to the Institute for dedicated projects. They also collaborate with other laboratories which employ methods not established here, and with researchers who have a project idea and wish to progress it by working with us here at the Institute.

The Pain Research Institute made up of a multi-disciplinary group researching ways to understand and relieve Pain, the mission of the Institute is to encourage researchers in developing their own research ideas, by helping them to transform their excellent ideas into projects. The research conducted by the Pain Research Institute encompasses a wide range of areas within Pain Medicine. It includes:

- assessment and treatment of the immune system
- psychological treatments
- the development of questionnaires to assess chronic pain
- the assessment and treatment of abnormal brain and peripheral nerve activities.

We are pleased to announce that one of Pain Research Institution publications 'Fibromyalgia: new understanding could lead to treatments for chronic pain' has been chosen by top scientists as one of the top 10 science stories for an article in The Guardian. The King's College led study, in collaboration with us here at the Pain Research Institute University of Liverpool and the Karolinska Institute.

This year also saw the launch of the of the guidelines for Fibromyalgia syndromes: UK guidelines for diagnosis, referral, and management in primary and secondary care. These guidelines where developed by the multi professional Guideline Development Group (GDG), led by Dr Andreas Goebel, Guideline lead and co-chair of the GDG and Director of the Pain Research Institute and supported by the Pain Relief Foundation. The Foundation was invited to the launch event organised by the GDG and the Royal College of Physicians. The event was held at the Royal College of Physicians new headquarters at the Spine in Liverpool to celebrate their publication. The Chairman of the Foundation Mr. David Cain was able to attend alongside Julie Williams, Charity Manager, Jo Stephens, Fundraiser and Dr Andreas Goebel. The event was also attended by other representatives of the professional organisations, patient charities and sponsors who were involved in the development of the guidelines.

The Pain research Institute remains a hive of activity with many current ongoing studies some of which are listed below.

- Autoimmunity-informed Phenotyping In patients with Fibromyalgia Syndrome (APIF)
- A qualitative study into the experiences of patients being assessed for, and attending, an online Pain Management Programme during the covid-19 Pandemic'
- 'Sense of self, social functioning and response to multidisciplinary treatment for chronic pain'
- 'MoNoPly: Models of Nociceptive Plasticity'
- LTP/LTD Study in Peripheral Neuropathic pain
- Defining Small Fibre Neuropathy & Neuropathic Pain in Idiopathic Small Fibre Neuropathy & Chemotherapy-Induced Peripheral Neuropathy
- Opioid Weaning in Primary Care
- The Neurophysiology predictor study
- Cordotomy Study
- Patient and health care professions perception of opioid treatment and weaning.
- Nerves Trial.

To date, there have been numerous publications in medical and scientific journals together with books written by Consultants from the Pain Research Institute. The teams of doctors and scientists have ambitious plans for future research which, if funding can be obtained, bid fair to make substantial advances in the understanding, and the relief, of chronic pain which presents many psychological problems and physical conditions for the sufferer.

Research Accommodation

The Trustees of the Pain Relief Foundation have continued with the agreed policy that whilst continuing to retain the leasehold and ownership of the Pain Research Building in the Clinical Sciences Centre, together with the fixtures, fittings and equipment therein, they will provide the facility of the Institute, together with the fixtures and fittings, to the Department of Neurological Science, University of Liverpool, and to other such parties who are researching chronic pain, or who wish to enter into collaborative research on human chronic pain.

This arrangement will ensure that research personnel supported by the Pain Relief Foundation, the University of Liverpool, the Liverpool John Moores University, and those others who are employed by another party but are working on chronic pain research under the auspices of the 'Pain Relief Foundation' Professor of Pain Science, shall be contained in the same premises and work collaboratively. This arrangement offers a more structured and controlled working area and is conducive to good working practices. The use of the premises does not create a lease but shall be treated as a Licence at Will.

All of the overhead and operating costs of the Pain Research Institute premises are borne by the Pain Relief Foundation and are allocated as part of the research grants. The following *'modus operandi'* was pursued during the year as in previous years:

- The Pain Relief Foundation provided administration and research accommodation for the research personnel, within the Pain Research Institute.

- The Pain Relief Foundation provided research secretariat, and clinical research support facilities for the researcher posts from its own staff resources.

- The Pain Relief Foundation provided secretariat assistance to the associated research personnel, from its own employed staff.

- The Pain Relief Foundation discharged all costs connected with the accommodation of the Pain Research Institute and its operational facilities, including overheads, heat, light, repairs, and purchase of new equipment etc.

- The Pain Relief Foundation discharged all costs connected with the provision of all consumables and computer hardware for the Professor of Pain Science and all other grant aided Researchers working in the Pain Research Institute.

- The Pain Relief Foundation discharged all costs connected with the provision of lecture theatre and associated facilities.

- Under the present structure, the Head of the Pain Research Institute is charged with reporting to the Scientific Advisory Sub-Committee in respect of all research work carried out under the Pain Relief Foundation grant arrangements, and also on the additional research that has been made possible through the Foundation's funding and provision of accommodation. The Chair of the committee is then able to submit a concise report to the Committee of Trustees.

This established procedure is an essential method to evaluate and measure the success and effectiveness of the research work being conducted and to ensure that it is achieving its aims. Additionally, the head of the Pain Research Institute is invited to attend meetings of the Trustees at six monthly intervals, to answer questions on matters raised regarding current and on-going research projects and future planned developments. He also maintains a liaison with the Education Sub-Committee, attending their meetings in an Ex-Officio capacity.

RESEARCH CO-ORDINATION & EDUCATION

The research co-ordination accommodation is located in the administrative area and fulfills a range of functions in its operational role. It supports the Pain Research Institute in a number of fields, providing accurate sources of scientific and medical information to assist the researchers in many projects.

Under the direction of the Education Sub-Committee, the Education Section also undertakes the operational factors in the conduct of all postgraduate courses that are organised throughout the year, arranging the teaching seminars, overseeing the Pain Relief Foundation Annual Lecture, collating and ensuring the correct and timely marking of Student essays and organising external conferences.

STRUCTURE GOVERNANCE AND MANAGEMENT

Governing Document On 6th April 2014, the Pain Relief Foundation was incorporated as a Charitable Incorporated Organisation under charity number 1156227.

Structure, Governance & Management

The Pain Relief Foundation is controlled by its Constitution as a Charitable Incorporated Organisation managed by a Committee of Trustees and at their meetings the Committee regularly conducts an assessment and review of their number, taking into account the skill requirements of the members in conducting the affairs of the Trust, and any potential retirements in the forthcoming 12 months. From this review, consideration is given to the need, if any, to recruit further Trustees. In the event that further recruitment is deemed necessary, the Committee of Trustees will seek suitable candidates through a process of personal contact across the Universities, the Health Service and other appropriate professional bodies associated with the charity. Details of the Trustees are shown on page two of this report.

The power to appoint a new Trustee or additional Trustees of the charity is vested in the Committee of Trustees and new appointments may be made by a resolution of a meeting of that Committee. A Trustee may retire upon giving two months' notice in writing of intention to do so, to each of the other Trustees. The Trust Constitution require that the number of Trustees shall not be less than three at any time, but there is no limit on the maximum number and Trustees are not required to retire and stand for re-election.

No expenses of any type will be paid to any trustee, nor will any trustee be paid any remuneration or payment of any kind from the Foundation in their capacity as a trustee. All of the trustees will give freely of their time and act in an honorary capacity. This is confirmed in each year's Annual report & Accounts.

In the period 6th April 2019 to 5th April 2022, there were no expenses of any type paid to any Trustee nor was any Trustee in receipt of any remuneration or payment of any kind from the Foundation in their capacity as a Trustee. All of the Trustees gave freely of their time and acted in an honorary capacity.

The Committee of Trustees conducts at least four quarterly meetings each year at which they receive reports on the activities, and achievements that have occurred since the previous meeting. The meeting agendas encompass reports on the full range of activities and situations including the day-to-day administration, investments and reserves, cash flow and risk management.

The Committee of Trustees continues to review several areas of importance in the effective management of the Foundation. The prepared '*Risk Assessment*' policy is subject to regular review to ensure that potential risks to which the charity may be exposed, are adequately identified, assessed and mitigating steps taken. This operational area is considered to be of the greatest importance and procedural changes will be implemented if deemed appropriate

Related Parties

For the purposes of preparing accounts in accordance with the Statement of Recommended Practice for charities, in the opinion of the Trustees, the following are related parties to the Pain Relief Foundation:

- The Trustees and their immediate family
- The National Health Service
- The University of Liverpool

Risk Management

The trustees have a duty to identify and review the risks to which the charity is exposed and to ensure appropriate controls are in place to provide reasonable assurance against fraud and error.

Risk Assessment

The Trustees have prepared a risk assessment register in which they have recorded the details and results of an extensive study, regarding the potential risks to which the charity may be exposed in the conduct of its affairs. The Trustees have satisfied themselves that through the actions they have taken, the identified risks have been reduced or eliminated, and that appropriate procedures and controls to deal with the risks are in place, so that any resulting or potential impact that the charity may experience is minimised.

The risk assessment register is subject to at least an annual review and in general it is an ongoing review. Such reviews ensure that all of the procedures in place continue to be appropriate to the conduct of the charity and that it is adequate in the light of experience. Where appropriate, systems or procedures have been established and put into place so as to mitigate any risks which may arise or develop

Trustee Indemnity Insurance

The Trustees do not contract a Trustee Group Indemnity Insurance policy.

Recruitment, Appointment, and Induction of New Trustees

In selecting persons to be appointed as trustees, nominations are submitted to a meeting of the Committee of Trustees, so that they each have the opportunity of evaluating the strengths of the candidate(s). In considering each nominee, the trustees take into account that person's professional qualifications or personal qualities, their commitment to promoting and furthering the aims of the Foundation, and their ability to make a contribution to the effective management of the Foundation. If the nominee is deemed acceptable, then the appointment is conducted in accordance with the established procedure of induction and training.

The Chair of the committee will extend an invitation to the candidate(s) to attend an early meeting to discuss the appointment in more detail. This is followed by a further meeting with the committee of trustees at which the new trustee is introduced, and a formal appointment confirmed. On appointment, the new trustee is required to sign a declaration stating that they comply with the formal conditions required of a Trustee and are therefore able to legally serve as a trustee. It is a requirement that a declaration of interest be made that any conflicting interest is noted and registered accordingly. Should any interest be registered, then at any meeting where there is such a conflict, the trustee will be required to withdraw and not vote on the matter. It is also declared that none of the trustees have an interest in the pharmaceutical industry. However, any such interest would be registered.

An induction meeting is then held with the Administrator who will inform the new trustee of their powers and responsibilities, the operational policy, the management arrangements for the charity's investment funds and the procedure of receiving applications for research grants and how the applications are processed through to selection. Other meetings are then held with the Sub-Committees at which their operational roles and powers are discussed.

An induction welcome pack is provided to the new Trustee, which contains as a minimum, a copy of the Constitution, a synopsis of the Foundation since its inception showing its achievements and further research targets in human chronic pain. Copies of the Trustee Committee's meeting minutes and the meeting minutes of the Advisory Sub-Committees, each covering the past 24 months, cash flow reports for the same periods, and copies of the previous two years' Annual Report and Accounts. A presentation folder is prepared containing copies of the Reserves Policy and Annual Review, Risk Assessment, Management Flow Chart, Mission Statement and Equal Opportunities Policy. In addition, a copy of the Charity Commission's publications *'The Essential Trustee: What you need to know'* and *'Charities and Public Benefit'* are provided.

Education Advisory Sub-Committee

The Committee of Trustees is advised on all aspects of education and information by an appointed ***'Education Advisory Sub-Committee'***, chaired Dr John Wiles, a Senior Pain Consultant, working in the N.H.S., and also a Trustee of the Foundation. During the year under report, the committee consisted of Neurosurgeons, Senior Pain Clinicians, and a Clinical Lecturer with Special Interest in Pain. This committee, whose members have a wide-ranging knowledge of the treatment of chronic pain and medical education strategies, were delegated and directed to advise the Trustees on educational issues and to further develop the Pain Relief Foundation's educational role through publications, courses, lectures, literature and conferences and in this respect, it fulfilled the role of maintaining a well-balanced delivery of up to date educational programmes to health professionals, many of whom traveled from all parts of the country to attend.

This committee is also charged with identifying the most appropriate methods of disseminating in printed format, details of successful research results, information on new and improved treatment methods that have been devised for pain patients, and information leaflets to aid pain sufferers in finding the best treatment resources centers. This information is distributed through the medical press and, both the Foundation's website and the Institute's website. All of the members act in an honorary capacity.

Scientific Advisory Sub-Committee

To assist the Trustees in making balanced policy decisions regarding the funding of selected research projects and additional applications for funding, they are advised and directed by an appointed ***Scientific Advisory Sub-Committee***, which is chaired by Dr Caroline Staunton, a well-respected and formidable research associate. The other members of this committee are recruited for their in-depth knowledge and understanding of chronic pain conditions and are drawn from both local and external treatment centres covering the many disciplines involved in the study and

treatment of human pain. All of the members act in an honorary capacity and the committee is supported by the Foundation's Charity Manager.

The Committee continues to be the source of invaluable information, advice and opinion when reporting on, and prioritising, the numerous funding applications for scientific research which were considered to be worthy of support. It also continued with the vital task of overseeing the results from the many facets of research work, assisting the Trustees in interpreting, and analysing the large volume of scientific information submitted by Research Fellows, Grant Holders.

The purpose in receiving and analysing these reports is to satisfy the Trustees that:

- the research being funded is achieving the projected results to satisfactory and accepted scientific, medical and research standards.
- the research is likely to reach its stated aims.
- ethical approvals remain in place and are being followed scrupulously.
- research Governance is being observed at all times.
- quality standards are being maintained.
- the costs of the research are maintained within the grant limits.
- the research is being managed and monitored effectively.

The head of the Pain Research Institute is called to attend each of the Trustee meetings to provide the Trustees with an insight into the advances and the strategic development of the research opportunities being pursued. Reports are also received from the appointed Education Advisory Sub-Committee, which is principally involved in directing the Educational Meetings, Lectures, Student Essays and Patient Information issues and the Scientific Advisory Sub-Committees which undertakes the task of advising the Trustees on all aspects of Research and Research Grant applications.

Grant Making Policy

In November each year, the Pain Relief Foundation advertises in the national medical press, to invite well established researchers and scientists to submit applications for Pain Relief Foundation grants, to carry out research projects on human chronic pain or to purchase special laboratory equipment to conduct clinical trials. The notice to apply for grants is advertised in the selected medical journals, on the Pain Relief Foundation Website, on the NHS grant website and through other appropriate media; there is a closing date for the receipt of such applications. The advertisement states the upper (monetary) limit of grants, which may vary from year to year.

On receipt of applications, the Foundation's Charity Manager ensures that all appropriate sections of the application forms which have been received are correctly completed and then arranges a meeting of the Scientific Sub-Committee to present the Abstracts of the applications to the members. At this meeting, the members jointly select and nominate independent and best qualified, learned medical persons who will be asked to peer review each application and to give their expert opinions.

After the meeting the Charity Manager writes to the selected peer reviewers, submitting a copy of the application asking if they will provide an assessment of the proposed research, the likelihood of the work succeeding and the cost effectiveness of the requested budget. In addition, references are sought regarding the applicants and the outcome of previous research projects for which they have received funding from all sources. When all applications are complete with the peer reviews and references received, a full set of each application is submitted to each member of the Scientific Advisory Sub-Committee, for consideration and prioritisation in preparation for a selection meeting of the members.
At the grant meeting, the Chairman calls the attention of the members to the received Peer Reviews and References which are referred to throughout the process of considering the most appropriate and worthy applications deserving of a grant. Each committee member delivers an opinion on the applications received and scores each application between 1 and 3 with (1) being the lowest score and (3) being the highest score. These scores are then brought together with the Peer Review scores and the applications listed in order of achievement, at which point the Chairman and the committee draw recommendations

to place before the next meeting of the Trustee Committee. When the Trustee Committee receives the advice of the Scientific Advisory Sub-Committee, they decide which applications, if any, will be funded in accordance with advice received, and in the light of funds available.

The Trustees may recommend that an application not be funded, be funded in full, or be funded at a reduced level. In the event that the Trustees are considering a number of competing recommended applications for which the Foundation's funds are inadequate to fund them all, the Trustees may invite the Chairman of the Scientific Advisory Sub-Committee, together with those members of the Sub-Committee who are also Trustees, to help them prioritise the applications. Each grant is specific to the holder and ceases should the grant holder terminate their post.

New grants approved since the last report

Professor in Pain Science (Approved for the next 12 months) *Costs for 50% of the Chair in Pain Science, University of Liverpool.*		**£78,000**
Dr Chris Brown **Liverpool**	*''Biopsychosocial Prediction Models of Pain Management Programme (PMP) Outcomes for Chronic Pain (over 3 years)*	***£64,837***
Dr John Dawes **Oxford**	*'Using live sensory neurons to assess the pathogenicity autoantibodies from pain patients.' (Over 12 months)*	**£30,000**
Dr Sandrine Géranton **London**	'A novel approach for the treatment of migraine. *(Over 12 Months)*	**£29,884**
Dr Andy Marshall ***Liverpool***	*Joint PhD collaboration with Sweden, Linkoping University Mapping the Role of Ultrafast Pain Nerves in Pain Perception (over 3 years)*	**£30,000**
Dr Andrew Marshall ***Liverpool*** ***Prof John Riddell*** ***Glasgow***	*John & Enyd Miles PhD Defining the potential for neuromodulation of nociresponsive somatosensory cortex to treat pain (over 3 years)*	***£62,237***

Public Benefit

In the foregoing section, the aims and objectives of the Foundation are plainly stated, and the policies adopted to deliver these aims and objectives are clearly stated. The objectives are supported by clear explanations regarding the policy of the Foundation to support the preparation and development of good quality research projects which are peer reviewed and expertly selected to develop the provision of improved treatment for the benefit of patients, easing and reducing their pain. In addition to the research conducted, the Foundation provides educational activities and the training of health professionals to achieve the stated aims. All of these activities are a continual matter of ongoing review by the Committee of Trustees and the Members of the Advisory Sub-Committees, so that in the light of experience, adjustments which are considered appropriate are implemented quickly, to ensure that the highest quality results continue to be delivered.

The development of improved patient services and treatment, as previously stated, is considered to be a priority issue by the Foundation, and it works symbiotically and in co-operation with the NHS and

Universities to provide post-graduate scientific education in chronic pain relief. A number of postgraduate training courses have been conducted each year, for the continuing education of nurses, GPs, and for clinical pain specialists.

The information service provided by the Foundation serves to inform General Practitioners and all Pain Clinicians and Consultants with up-to-date information regarding available treatments for various pain conditions. In addition, the Foundation provides an information service for patients, their support carers and family members through the provision of leaflets on most chronic pain conditions. The Foundation's website also provides a vast range of guidance and support for patients and Health Professionals, and much of the advice section contents can be downloaded for further ease of access. This enables patients and carers to be empowered about their individual problem.

Pain sufferers who make telephone contact with the Foundation are connected to experienced, friendly staff who are trained to sympathetically and professionally direct enquirers through to available services and advice centres. They are also able to guide sufferers into how they can avail themselves of these services and what action they can take to be referred to clinical services for pain treatment.

Patients also receive direct benefit through research results which lead to the development of new and improved treatments for chronic pain conditions. These results are delivered to pain treatment clinics nationally, and indeed internationally, through the dissemination of research information by the Foundation either electronically, from our website, in medical publications and by way of educational meetings for health professionals.

With living with chronic pain affecting 40% of the British population, it can be seen that the work of the Foundation provides a benefit for a huge number of people. Reports on the research work supported by the Foundation are included in later pages and give a vast amount of information on the progress that is being made with human chronic pain and you are encouraged to read this section.

Volunteers

The Pain Relief Foundation does not receive any funding from central or local government, the health service or other official body. Instead, the Foundation depends entirely on donations, gift aid, legacies, appeals and contributions from supportive members of the public, from generous companies and from several small trusts. There is a small level of direct fundraising activity organised and conducted by the Foundation's own staff, supported by one or two volunteers an area in which we would like to grow our support. Additionally, it seeks to secure grants from trusts and the commercial sector to fund specific research projects.

The Foundation is not in receipt of benefits in kind, either by way of services, facilities, or donations-in-kind. It does, however, receive some limited benefit from the very small number of volunteers who support the fundraising section in the organisation and conduct of small events. The Trustees recognize the intangible value of the contribution of volunteers to the charity and the Trustees are of the opinion that such income cannot be reliably ascertained. However, it is considered that such intangible income is unlikely to be material.

Powers of Investment

The Constitution provides the Committee of Trustees with the following powers:

1. To administer a bank account in the name of the Foundation at such bank as the Trustees shall decide.

2. To invest in the name of the Trustees, any monies not required for the immediate purpose of the Foundation, in such securities as they may from time to time decide as if they were beneficially entitled and whether such securities shall be trustee investments or not and shall have power from time to time to transpose such investments.

3. That any property purchased by the Foundation shall be vested in the Trustees appointed for that purpose and the Trustees shall enter into a Deed of Trust setting forth the purposes

and conditions under which they hold the said property in trust for the Foundation and shall with such consent as is by law required deal with the property so vested in them by way of sale, mortgage, charge, lease or otherwise howsoever directed by the Foundation.

Investment Policy

The Trustees have developed an investment policy which it believes will respond to the needs of the on-going activities of the Foundation. Sufficient funds are retained in investment that will ensure we can respond to all contingencies as they may arise. Equally important is the strategy of investing in low to medium risk funds that will also provide an operational income. The objective is that this investment policy will produce improved values and income, whilst at the same time safeguarding the short-term and long-term financial needs of the Foundation. The Trustees seek the advice of its Investment Advisors, Rathbone Investment Management Limited and at regular meetings with the Advisors, in-depth reviews are held into the investment portfolio that makes up the reserve fund.

The investment decisions taken by the Trustees throughout this financial year have proved to serve the portfolio well. Supported by the Advisors and making several minor adjustments, the fund has this year seen a slight increase compared with the end of the last financial year. Fortuitously, at a joint meeting with their Advisors, the Trustees set an investment policy of 60% of the funds invested into 'Equity Investments' with a view of maximising the Securities and to invest 40% of the funds into 'Fixed Interest Securities'. The decision to ease the approach with fixed interest investments was a very positive decision at the commencement of the year, thus maintaining forward growth.

Mindful of the continuing uncertainty in the markets, during the year under review the trustees gave instructions to the Portfolio Manager that the portfolio investment should be organized at 65% of its value being in Equities and 35% of the value being in Fixed Interest stock and the investments were so arranged at the beginning of the year.

Reserves Policy

The strategy developed by the Trustees is to hold a level of reserves that is deemed to be appropriate from time to time, to ensure that:

- The committed and planned research projects undertaken in the short, medium, and long term are sustainable.
- The annual costs of the new 'Pain Relief Foundation Senior Lecturer of Pain Science promoting to Professor' appointment at the Pain Research Institute, is now into its first year, may be supportable from the income generated by the investments, so as not to detract from the distribution of the annual general income if this is required by the Trustees to balance its annual income
- The Trustees can address any problems that arise, including the loss of any significant source of income, which might restrict the ability of the charity in carrying out its objectives.
- Sufficient funds are available to respond to new and important projects that are identified.
- The Trustees can respond to a shortfall of income in any financial year, that may occur for whatever reason, and which shall enable the research that is already authorised, to continue without a break.
- The cost of funding the Chair at the University of Liverpool for the 'Pain Relief Foundation Professor of Pain Science' shall be protected for a minimum forward period of 10 years

from any date, by ensuring that such sums as shall be required to continue the funding for such period are kept on reserve.

In setting the level of reserves, a conservative management style has been adopted that is consistent with the Trustee's responsibilities who have agreed a broad spread sector exposure to increase diversity and to regulate risk. The Trustees have established a position that the level of unrestricted reserves and investments should be adequately sufficient to respond to the above operational policy and needs. Therefore, the Trustees have agreed the following:

- Funding for the post of Senior Lecturer/Professor of Pain Science continues to be identified as a long-term commitment and therefore, a minimum of 10 years costs supported by projected increases of a minimum say 2% per annum to cover inflation should be set aside for this purpose. It has been estimated that £826,000 of the investments should ensure that the income will be adequate to cover this requirement for that forthcoming period.

- To provide reserves to cover the estimated costs of funding existing research, research coming on-line, overheads, research administration support, charity administration and fundraising over three years. Based on an average annual expenditure, this need is £950,000.

- To retain in investments, an amount that will enable the Trustees to respond to new and important projects that may arise. In arriving at a level of retention, consideration has been given to the fact that such projects may require funding for at least two years and possibly three years.

It is considered that in view of the ongoing investment market volatility and the continuing and uncertain slow rate of recovery, together with the unsteady present uncertainties worldwide, the present level of reserves is adequate to meet these criteria.

Trading

Changes in the 2000 Finance Act, Chapter 17, allowed exemption to tax on charitable income from trading activities up to predetermined levels. The charity continues to carry out a very small level of incidental trading within the prescribed limits.

FUNDRAISING REGULATOR

The Pain Relief Foundation is a Member of the Fundraising Regulator (FR) and has been since its inception in 2016, The FR is the independent regulator of charitable fundraising and was set up following the Etherington review of fundraising self-regulation (2015) to strengthen the system of regulation and restore public trust in fundraising.

The FR is open to all fundraising organisations, suppliers, and associates. Members agree to adhere to the highest standards of good practice with their fundraising, and their stated Fundraising Promise. As a Member of the FR we demonstrate Membership of the scheme
by using the scheme logo on all fundraising materials. By participating in the scheme charities are advertising commitment to best fundraising practices and to giving the public the comfort of a 'safety net' provided by a robust complaints system.

It is a requirement that a charity submits an annual report to the FR, advising the Board of the number of complaints received by the Charity, in relation to its Fundraising activity, by category. The report requires the charity to notify the Board of action taken to resolve any such complaints and what the outcome results are.

Pain Relief Foundation is pleased to report that in the year ended 5th April 2022, no complaints had been received by the charity in the preceding 12-month period. A report to this effect was submitted to the Board of the FR as required.

The Pain Relief Foundation Fundraising Promise

We are always committed to working to the highest standards of practice.

We promise donors that we will comply with the FR Codes of Fundraising Practice and do all that we can to ensure that fundraisers and volunteers will at all times comply with the Codes and with this Promise.

We comply with the law, health and safety and the environment. We will not put unfair pressure on anyone to donate. If you do not want to donate, we will respect your decision. We require anyone fundraising on our behalf to clearly identify themselves as one of our representatives.

We are honest and open and do not make false or exaggerated claims. We do what we say we are going to do and do not pretend to do things that we cannot. We will answer any reasonable questions you have about our fundraising activities and costs. Please contact us for information, visit our website or see our Annual Report.

We are clear and give clear details about how you can make a gift. If you make a regular gift and you want to cancel it, we will carry out your cancellation instructions as soon as possible. We are clear about what we do and how your gift is used for the effective support of our beneficiaries.

We are fair and respect the rights, privacy, and dignity of each of our supporters and beneficiaries and conform to the Data Protection Act. We will only use your personal information for the purposes stated and for which you have given your consent. If you tell us that you do not want us to contact, you in a particular way (e.g., by telephone) we will not do it.

We are reasonable and responsible and will be careful not to use any images or words that cause distress or offence. We make sure that our events are well run and meet health and safety and environmental requirements, and we avoid causing any nuisance, damage, or disruption. We will not use excessive emotional arguments to make you feel guilty about not giving to us.

We are accountable and should you be unhappy about anything we have done while fundraising, you can write to us and complain. We have a complaints procedure, and we will acknowledge your complaint within 7 days and commit to dealing with the matter within 30 days. A copy of our procedure is available on request and if we are unable to resolve your complaint, we accept the authority of the FR to make a final adjudication.

FUNDRAISING COMMITTEE

Effective fundraising committees are vital to the life and financial well-being of organisations, and this is no different at the Pain Relief Foundation so this year we decided to put together our first fundraising committee to help raise awareness and funds. The functions of the group vary but centres around information, building relationships and raising money to meet the specific organisation's special or ongoing needs.

The Committee is made up from Board members with special skills and contacts to serve the role and non- members made up from nurses, ex patients and people with an interest in the Foundation whom without we could not fulfil this role. The Chair of the ***'Fundraising Committee'*** Judith Daley who is also a trustee will in future advise the Board of Trustees in all facets of fundraising

DONATION POLICY

This policy has been set out by the Trustees of the Pain Relief Foundation. It is a public guide to how the Pain Relief Foundation makes decisions on accepting donations and the procedures they follow. The policy is aligned with the codes of Fundraising Practice published by the Institute of Fundraising.

This document makes clear the Trustees' legal obligations with the regards to the acceptance and refusal of donations. It outlines the day-to-day procedures that need to be adhered to and ensures decisions are not taken on an ad-hoc basis but are in support of Pain Relief Foundations strategies and objectives.

Trustees' legal obligations

The Trustees take overall legal responsibility for decisions relating to whether a donation can be accepted or refused.

The Trustees must be able to demonstrate that they have acted in the best interest of the Charity.

The Trustees have a duty to carefully, based on evidence made available to them, whether the Charities interests will be better served by accepting or refusing the donation and to act accordingly.

These judgements must not promote any Trustee or employee's personal moral agenda, or interest and the Trustees must not allow individual or collective personal, political or ethical issues, which are not directly related to interests of the Charity, to affect their judgment.

Trustees must not derive any personal benefit (individually or collectively) from donations, offered to the Charity.

Policy

On a day-to-day basis, the Charity's board of Trustees delegates the responsibility to accept or refuse donations as follows, providing the Charity Manager is sure that any potential individual or corporate donor are supporting the charity in accordance with this policy.

- A donation must be clearly evaluated to establish whether it would be in the best interest of the Pain Relief Foundation to accept or refuse it.
- The donation should contribute towards the Charity's overall strategy and plans.
- The Charity will not accept donations from individuals or companies whose wealth are known to result from illegal activities or where there are indications of corruption and related crime.
- The donor's objectives or activities must not appear to be incompatible with the Charity's vision, mission, and values, particularly if this risk is causing significant damage to the Charity's integrity, public image, or professional reputation.

The Pain Relief Foundation will refuse donations in the following circumstances:

- Where the activities of a donor are directly contrary to the objectives or agreed policies of the Charity or the Charity suspects the gift has been donated to facilitate money laundering or other criminal activity.

- Where it can be clearly shown that the cost to the Charity of accepting the donation will be greater than the donation itself, and that the acceptance of the donation will directly lead to a net decline in assets of the Charity.
- Where the offer of support is dependent on the fulfilment of certain conditions placed upon the Charity and any condition,
  - A) Is in itself contrary to the objectives of the Charity
  - B) Is regarded as needing an unreasonable level of support from the Charity especially in relation to the size or impact the donation will have on the Charity's charitable activities.
  - C) Will divert the Charity from pursuing its current objectives, policies, or work priorities as a necessary fulfilment of the conditions alone.

The Trustees will take great care and consideration in deciding whether to accept or refuse a donation.

Donation Recognition

Gift Acknowledgment & Accountability

- All donors will receive a personal thank you letter and receipt, regardless of gift amount.
- All gifts will be formally acknowledged as quickly as possible, and in any event within 5 working days.
- The reporting requirements of all Grant Makers will be fulfilled thoroughly, accurately and within their required timeframe.
- Major donors for specific projects will receive where required and appropriate regular updates on the progress of the project.
- Where appropriate and required the families of legacy donors will receive a report on the use of the bequeathed funds.

Recognition

- Any donors expressed desire for anonymity will be strictly adhered to
- Any public recognition will only be undertaken with the Donors express permission and in compliance with data protection legislation and best practice.
- Recognition may be tangible by way of a physical acknowledgment such as a plaque and would be placed within the Pain Relief Foundation. This type of recognition would be decided by the Trustees.
- In general costs of recognition shall not exceed 5% of the gift amount.
- In all cases the cost of recognition shall be both reasonable and proportional.

The Charity reserves the right to refuse, discontinue or remove public recognition whether tangible or intangible, at any time if for any reason it considers the association to be damaging to its reputation. This course of action will be decided by the Trustees.

The final authority for resolution of any issues related to donor recognition policies rests with the Trustees; they may also amend or modify these policies as appropriate

STATEMENT OF TRUSTEES RESPONSIBILITIES

The trustees are responsible for preparing the Report of the Trustees and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

The law applicable to charities in England and Wales, the Charities Act 2011, Charity (Accounts and Reports) Regulations 2008 and the provision of the Constitution requires the trustees to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the charity and of the incoming resources and application of resources, including the income and expenditure, of the charity for that period. In preparing those financial statements, the trustees are required to

- select suitable accounting policies and then apply them consistently.
- observe the methods and principles in the Charity SORP.
- make judgments and estimates that are reasonable and prudent.
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charity will continue in business.

The trustees are responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the charity and to enable them to ensure that the financial statements comply with the Charities Act 2011, the Charity (Accounts and Reports) Regulations 2008 and the provisions of the constitution. They are also responsible for safeguarding the assets of the charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

The trustees present their report with the financial statements of the charity for the year ended 5 April 2022. The trustees have adopted the provisions of 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).

Approved by order of the Committee of Trustees on ..... and signed on its behalf by:

.....

D Cain - Chairman

Date September 2022

CLINICAL SECTION

Patient & Public Information

The Pain Relief Foundation provides an online help and advice service through their website www.painrelieffoundation.org.uk and also provides a wide range of information leaflets, each of which deals with a specific chronic pain condition. The leaflets have proved to be a source of help to many thousands of chronic pain sufferers in understanding their pain problem and they give advice on the available treatments and additional sources of valuable information. Packs of leaflets are also made available to General Practitioners where they have been shown to be a useful way of guiding the patient into self-help opportunities in support of their treatment. All leaflets are now downloadable from our website.

The full range of leaflets is concise and gives fairly in-depth information about a range of chronic pain conditions and are continually re-written as information and advice is updated, using the guidelines issued by the Centre for Health Information Quality, which seeks to make the use of the leaflets more 'patient friendly' and easier to read and understand. Each of the medical staff working at the Institute, contribute their skills in making the leaflets a prime source of useful information.

Letters and advice columns, written or supported by our doctors, are often seen as features in local and national newspapers, working with feature writers from magazines and newspapers they provide accurate and up-to-date information for the readers. Information disseminated in this way brings many benefits to chronic pain sufferers in particular, and the population in general.

CD's

The ***Coping with Pain*** CD was one of the early self-help aids for chronic pain sufferers. With an introduction by Magnus Magnusson, it soon became part of the pain patient's medicine cupboard. Each section of the CD has been specifically designed to focus the minds of pain sufferers on ways of easing their pain through relaxation and gentle exercise. As many as 2 out of 3 people who have used it report that they have been able to improve their quality of life and find that their chronic pain problem is eased.

Over 65,000 copies of the ***Coping with Pain*** CD have now been distributed through a range of outlets covering the medical field and the retail sector. Additional CD's dealing with specific pain conditions are also available and they include: ***Coping with Headaches & Migraine, Feeling Good, Coping with Back Pain*** and ***Relaxation*** and ***Coping with Anxiety.*** Each of the CDs contains relaxation programmes that help so many sufferers to find relief.

PAIN RELIEF FOUNDATION INFORMATION SCIENCES, RESEARCH CO-ORDINATION & EDUCATION

Introduction

The work of this department draws on the expertise of Pain Clinicians and is closely aligned with the work of the Foundation Education Sub-committee. The work of the Committee encompasses all educational courses, conferences and meetings for health care professionals and the department provides the administrative support for those developed courses and conferences plus the provision of information about chronic pain to both patients and the general public, including an online resource about chronic pain. This fulfills the remit of the Foundation to provide such education.

EDUCATION

Meetings and Courses

Meetings and courses which are developed and structured are aimed at all health care professionals with the sole purpose being to educate participants about all aspects of chronic pain management the courses are initially aimed at a national level but such as the interest has grown in the treatment of chronic pain, we now attract participants from all over the globe.

Foundation courses & lectures

Each July we normally hold our annual ***Clinical Management of Chronic Pain*** course but unfortunately due to the pandemic we have been unable to proceed this year 2022 with the organising, however we fully intend on resuming in 2023. The courses will remain participative clinical, hands-on with the most up to date information and techniques of treating chronic pain available. The course or courses will still be aimed at Consultants, Specialist Registrars, Anesthetists, Advanced Specialist Nurses, GP's, and Physiotherapists with some experience of pain management. The format will still consist of a mixture of lectures, seminars, clinics, theatre sessions and the grand round. The participants also spend a day in the Pain Management Programme at Walton Centre where they see firsthand the multidisciplinary assessments and treatments that patients receive.

However, being masters of our own destiny and the forced requirement to learn how to use virtual platforms such as zoom we have cultivated a series of online lectures titled '**Virtual Pain Series: Clinical updates in Pain Medicine, Walton Centre and Pain Relief Foundation, Liverpool** which were delivered monthly until we are able to resume our normal events. Pain Education on the go! Topics covered where: - Cancer Pain, Musculoskeletal and joint Pain, Complex Regional Pain Syndrome (CRPS), Peripheral nerve pain, Pelvic Pain: Female & Male, Spinal Pain, Pharmacological/Opioid/genetics, Headache, Trigeminal, and Facial Pain.

The Foundation also supported the running the **North England Pain Group (NEPG)** to deliver their first virtual meeting in 2021. This year's meeting was organised by Dr John Titterington, Consultant in Anaesthesia and Pain Medicine, Leeds Teaching Hospitals was very different for two reasons; the first being it was held virtually and secondly it was opened up to an international audience which saw delegates attending from India and Canada which has proved to be a resounding success and could shape the format of a hybrid meeting in 2022.

Another first for the Foundation this year was a study day set up for therapists only '**Practical Pain Management for Therapists'** a series of sessions to provide knowledge and skills to support therapists in the management of chronic pain patients in a non-specialist setting. The Course Organisers were Alison Bradshaw - Specialist Occupational Therapist in Pain Management, John Tetlow, Lead Occupational Therapist in Pain Management and Graham Derbyshire, Specialist Physiotherapist in Pain Management. Such was the demand for the course it was soon oversubscribed. The feedback was excellent and has prompted the organiser to plan another study day for 2022.

All courses run at the Foundation are accredited in the form of Continuing Medical Education points awarded from the Royal College of Anesthetists of Great Britain or such relevant body and are eligible for CPD points.

We also hold biannually the ***European Pain Federation EFIC Liverpool Winter Cancer Pain School,*** with the next one due in October 2022 which will be organised by Dr Manohar Sharma, Consultant in Pain Medicine and Trustee of the Foundation.

The 21st Pain ***Relief Foundation Annual Lecture*** took place in November 2021, and was delivered by Professor Claudia Summer, Professor of Neurology at the University of University of

Würzburg, Germany, the title of the lecture is *"55 years on. Are we any nearer to closing the gate?"* Again, this lecture was conducted online with the audience reaching globally and has gone down as one of our most successful Annual lectures

The evening's proceedings are to honour the life and work of Professor Ronald Melmac a Canadian psychologist and professor of psychology.

The Foundation Essay Competition

The competition is run annually the aim of this competition is to raise awareness nationally among medical undergraduates about chronic pain and the Pain Research Institute.

It was agreed to run the Essay Competition this year with multiple discipline entries Medicine and all health profession Undergraduates including occupational therapists, physiotherapist, nurses and psychologists as a trial.

This year's winners were: -

Emily Graepel (University of Cardiff) - "The Mindbody Syndrome".

Imogen Tuke (University of Essex) - "Managing Chronic Pain in the Community, the invisible epidemic".

Ellen Clarke (Queen Mary University) - "The Effect of Pain Neuroscience Education on Fear Avoidance Behaviours in Chronic Pain Populations".

Each winner received the winning prize of £500.00 their essays can be viewed on our website.

Pain Relief Foundation Website

The Pain Relief Foundation website www.painrelieffoundation.org.uk is a premier online resource for the general public where they can find information about chronic pain and importantly be directed to other specialist websites which offer good, current, medically correct, and easily understood information about specific chronic pain conditions.

All recommended sites have been assessed before being included on the site by the Walton Centre pain team. All the leaflets in the "Dealing with Pain Series" on chronic pain conditions and drugs for pain are available to download from the website. Topical and informative articles written by staff of the Foundation and Institute and Walton Centre Pain team are regularly featured on the website. The website also features any current news, fundraising events and gives online access to Health Professionals to register and attend any events or course that we may be running.

WORK & STUDY AREAS

The Institute continued to provide accommodation for research personnel to study their research developments and prepare research reports and applications. The accommodation is furnished and serviced, fully set out with computers workstations, and associated equipment.

RESEARCH

Below is a snapshot selection and brief description of research that is currently being undertaken with the support of the Pain Relief Foundation. An in-depth progress report of the research can be found on our website. **www. painreleiffoundation.org.uk** under the tab marked research.

Grant title: A double burden? A multi-method investigation into the experience of paediatric chronic pain and mental health symptoms

Award holders: *Dr Abbie Jordan (University of Bath; PI), Dr Line Caes (University of Stirling), Professor Christopher Eccleston (University of Bath) & Dr Melanie Noel (University of Calgary)*

Project aims:
This PhD studentship aims to provide a detailed account of the challenges that youth who experience chronic pain and mental health symptoms face and how these challenges form barriers to their treatment. The first study will include a review of the current literature to better understand the evidence concerning the relationship between chronic pain in youth and psychopathology. The second study will involve collecting questionnaire and interview data over two-time points from 100 youth aged 11-19 years and their parents/caregivers regarding their pain-related disability, mental health symptoms and social relationships. The final study will use interviews and an online survey to explore how 50 clinicians think about treating youth with chronic pain and mental health symptoms and associated challenges faced in this treatment process.

Grant title: Identifying spinal circuits in chronic widespread pain

Award holders *Dr Stephanie. C. Koch, (University College London)*

Background

Chronic pain affects more than two fifths of the UK population, with one third of pain sufferers experiencing pain that impedes their lifestyle. This pain is often difficult to treat, making pain-related diseases the leading cause of disability worldwide. One form of chronic pain is known as chronic widespread pain (CWP), where pain spreads unpredictably across all regions of the body. The lack of understanding of how pain can spread far outside areas of original harm is a barrier to the discovery of new pain therapies. Importantly, there is evidence that CWP may be the result of changes in the connections in the areas of the brain and spinal cord that normally process pain. Understanding how pain circuits are shaped will help us understand what is wrong with the circuits underlying CWP and reveal new pain treatments.

In the healthy adult specialised pain circuits in the spinal cord act as spatial indicators of harm. These allow localisation of a harmful stimulus and direct pain behaviour ensuring that the appropriate body area moves away from danger. In animal models of CWP however, reflex pain behaviour is spread across widespread body regions. In previous work I have identified specialised spinal subpopulations are involved in controlling responses to touch and itch. Others have identified specialised interneurons involved in pain but to date no known spinal population has been associated with the spatial distribution of pain across the body, a key feature of CWP. A good candidate is a subset of substance P (SP)-expressing propriospinal neurons whose long axons span multiple segments of the spinal cord and thus can relay information between body areas. These neurons are innervated by CGRP-expressing primary afferents, and the neuropeptide SP is thought to be involved in chronic pain development and maintenance. We therefore hypothesise that SP-expressing propriospinal neurons are involved in the spread of pain across the body in CWP.

Aims

By combining cutting-edge technology and molecular biology in models, this programme aims to determine how the nervous system learns to control pain and how these controls are disrupted in chronic widespread pain. In order to characterise the process by which spinal pain circuits learn to

spatially restrict pain signals and so how they can become dysregulated in CWP, the following objectives were proposed:

- to map the SP propriospinal circuit.
- to determine how SP propriospinal circuits are affected in a modified model of CWP
- to determine the role of CGRP afferent activity in the maintenance of CWP

Grant title: Reversal of EEG theta band rhythm as an objective measure of efficacy of spinal cord stimulation in chronic neuropathic pain – A pilot study

Award holders *Dr Andrew Marshall, Mr Jibril Osman Farah, Dr Manohar Sharma, Dr Andrej Stancak*

Summary of the project

There is convincing evidence in the literature that chronic neuropathic pain results from abnormal brain processing of pain. Thalamocortical dysrhythmia is one of the main mechanisms resulting in abnormal firing of thalamic neurones in the brain as bursts within the theta frequency range (4-8 Hz). QEEG and SSEPs have been used to visualise the effects of thalamocortical dysrhythmia on the brain cortex in neuropathic pain patients. In chronic neuropathic pain an increase in theta QEEG frequency power (4-8 Hz) is observed with neighbouring areas showing increases in beta (13-25 Hz) QEEG power. Similarly, SSEPs show an increase in amplitude in chronic neuropathic pain in keeping with somatosensory cortical excitation. Spinal cord stimulation (SCS) is offered to patients with medically refractory neuropathic pain of more than 6 months duration and a subjective pain score >5. In the clinical setting the three most frequently used spinal cord stimulator settings are low, high, and burst frequency stimulation. There is debate in the literature on which of these three is the best however it is recognised that after a failed trial of one type of stimulation a second trial of another type of stimulation is effective in another 10-15% patients. After a successful trial of at least 50% pain reduction only 50-70% of true responders maintain sustained benefit after implantation. Therefore, to personalise the treatment for an individual patient there is an argument to trial all three types of stimulation prior to decision making regarding the implant. The ability to predict on an individual level both the therapeutic response to spinal cord stimulation and the best method of stimulation would have significant impact on patient suffering and health economics. Currently there are no objective measures to predict true responders or which method of stimulation is the best for a given patient.

Hypothesis:

An increase in QEEG theta power and augmentation of SSEP amplitudes can be used as biomarkers of chronic neuropathic pain and that theta QEEG power and SSEP amplitudes are reduced by effective spinal cord stimulation using either low, high, or burst stimulation.

Specific aims of the study

To determine if reversal in QEEG theta power and/or SSEP amplitude during the stimulator trial period can predict a sustained response 6 months post implantation

Grant title: **"One and the same?": An in-depth investigation into the complexities of pain experiences of children and young people with inflammatory and non-inflammatory conditions**

Award holders: *Dr Lis Cordingley, Dr Rebecca Lee, Dr Janet McDonagh, Dr Daniela Ghio, University of Manchester.*

Background and aims of project:
Musculoskeletal pain affects approximately 40% of children and young people, although causes vary. There is some evidence suggesting that pain is managed differently depending upon whether children and young people are believed of either having inflammatory or non-inflammatory conditions. For example, those with inflammatory conditions may be more likely to receive pharmacologically focused treatment and those with non-inflammatory conditions are predominantly provided with psychological management techniques. Currently, however, rationale for the different approaches is unclear. Little is known about the similarities and differences of pain experiences between these groups and whether the apparent differences in approaches to pain management is warranted or not.
This PhD will explore and characterise chronic pain experiences in children and young people with musculoskeletal conditions with different underlying pathologies/diagnoses and will begin to identify their management pathways.

BTMR Limited
Statutory Auditor
Century Buildings
14 St Mary's Parsonage
Manchester
M3 2DF

Opinion
We have audited the financial statements of The Pain Relief Foundation (the 'charitable company') for the year ended 5 April 2022 which comprise the Statement of Financial Activities, the Balance Sheet and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:
- give a true and fair view of the state of the charitable company's affairs as at 5 April 2022 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 Companies Act 2006.

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

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

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

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

Other information
The trustees are responsible for the other information. The other information comprises the information included in the Annual Report, other than the financial statements and our Report of the Independent Auditors thereon.

Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether 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 where the Charities (Accounts and Reports) Regulations 2008 requires us to report to you if, in our opinion:
- the information given in the Report of the Trustees is inconsistent in any material respect with the financial statements; or
- the charitable company has not kept adequate accounting records; or
- the financial statements are not in agreement with the accounting records and returns; or
- we have not received all the information and explanations we require for our audit.

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

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

Our responsibilities for the audit of the financial statements
We have been appointed as auditors 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 a Report of the Independent Auditors that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

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

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

- we identified the significant laws and regulations applicable to the company which we considered could have a direct material effect on the financial statements or the operations of the company. Said laws and regulations include but are not limited to, the Companies Act 2006, taxation legislation and data protection, anti-bribery and employment legislation;
- the identified laws and regulations were communicated within the audit team regularly and the team remained alert to instances of non-compliance throughout the audit.

We assessed the susceptibility of the company's financial statements to material misstatement, including obtaining an understanding of how fraud might occur. We also addressed the risk of fraud through management bias and override of controls by;

- updating and reviewing our knowledge of the company, its officers and internal financial function, together with their systems and internal controls. This included making enquiries of management as to their knowledge of actual, suspected and alleged fraud; and
- considering the internal controls in place to mitigate risks of fraud and non-compliance with laws and regulations. We concluded that whilst the company had controls in place that were appropriate to its size and the nature of its activities, we could not rely on those systems and internal controls exclusively for the purposes of our audit work. We therefore adopted a substantive and transactional approach to our audit, seeking to verify figures in the balance sheet to third party evidence and transactions within the Income Statement to external independent documentation;
- We did not review every transaction. However, we adopted an approach based on testing a sample of transactions. In choosing our sample, we tested transactions that were material in nature and in addition a random sample of other transaction. By choosing transactions of a material nature, our audit work is designed to detect material misstatements. The use of random testing on other transactions is designed to detect other irregularities and the operation of the charity's internal control systems generally. If exceptions were noted, our audit work was expanded to test more transactions with a view to determining whether the exception was of an isolated nature;
- We performed analytical procedures to identify any unusual or unexpected relationships;
- We tested journal entries to identify unusual transactions and investigated the rationale behind significant or unusual transactions.

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

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

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

Report of the Independent Auditors to the Trustees of
The Pain Relief Foundation

Use of our report

This report is made solely to the charitable company'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 charitable company's trustees those matters we are required to state to them in an auditors' report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and the charitable company's trustees as a body, for our audit work, for this report, or for the opinions we have formed.

BTMR Limited

BTMR Limited
Statutory Auditor
Eligible to act as an auditor in terms of Section 1212 of the Companies Act 2006
Century Buildings
14 St Mary's Parsonage
Manchester
M3 2DF

Date: 15 September 2022

THE PAIN RELIEF FOUNDATION

Statement of Financial Activities
for the Year Ended 5 April 2022

	Notes	Unrestricted funds £	Restricted fund £	5.4.22 Total funds £	5.4.21 Total funds £
INCOME AND ENDOWMENTS FROM					
Donations and legacies	3	**159,392**	**25,000**	**184,392**	113,694
Other trading activities	4	**4,254**	-	**4,254**	5,674
Investment income	5	**89,475**	-	**89,475**	78,887
Total		**253,121**	**25,000**	**278,121**	198,255
EXPENDITURE ON					
Raising funds					
Other trading activities	6	**14,677**	-	**14,677**	14,398
Investment management costs	7	**12,469**	-	**12,469**	11,476
		27,146	-	**27,146**	25,874
Charitable activities	8				
Research		**412,687**	**401**	**413,088**	360,831
Education		**5,759**	-	**5,759**	8,397
Total		**445,592**	**401**	**445,993**	395,102
Net gains on investments		**254,619**	-	**254,619**	415,190
NET INCOME		**62,148**	**24,599**	**86,747**	218,343
RECONCILIATION OF FUNDS					
Total funds brought forward		**2,939,310**	**1,044**	**2,940,354**	2,722,011
TOTAL FUNDS CARRIED FORWARD		**3,001,458**	**25,643**	**3,027,101**	2,940,354

The notes form part of these financial statements

Balance Sheet
5 April 2022

	Notes	Unrestricted funds £	Restricted fund £	5.4.22 Total funds £	5.4.21 Total funds £
FIXED ASSETS					
Tangible assets	11	**71,916**	**1,201**	**73,117**	86,496
Investments	12	**2,949,283**	**-**	**2,949,283**	2,805,265
		3,021,199	**1,201**	**3,022,400**	2,891,761
CURRENT ASSETS					
Stocks	13	**700**	**-**	**700**	776
Debtors	14	**9,558**	**-**	**9,558**	11,433
Cash at bank and in hand		**20,799**	**24,492**	**45,291**	83,428
		31,057	**24,492**	**55,549**	95,637
CREDITORS					
Amounts falling due within one year	15	**(50,798)**	**(50)**	**(50,848)**	(47,044)
NET CURRENT ASSETS		**(19,741)**	**24,442**	**4,701**	48,593
TOTAL ASSETS LESS CURRENT LIABILITIES		**3,001,458**	**25,643**	**3,027,101**	2,940,354
NET ASSETS		**3,001,458**	**25,643**	**3,027,101**	2,940,354
FUNDS	17				
Unrestricted funds:					
General fund				**31,380**	73,854
Designated unrestricted				**2,970,078**	2,865,456
				3,001,458	2,939,310
Restricted funds:					
Restricted fund				**25,643**	1,044
TOTAL FUNDS				**3,027,101**	2,940,354

The notes form part of these financial statements

Balance Sheet - continued
5 April 2022

The charitable company is entitled to exemption from audit under Section 477 of the Companies Act 2006 for the year ended 5 April 2022.

The members have not deposited notice, pursuant to Section 476 of the Companies Act 2006 requiring an audit of these financial statements.

The trustees acknowledge their responsibilities for

(a) ensuring that the charitable company keeps accounting records that comply with Sections 386 and 387 of the Companies Act 2006 and

(b) preparing financial statements which give a true and fair view of the state of affairs of the charitable company as at the end of each financial year and of its surplus or deficit for each financial year in accordance with the requirements of Sections 394 and 395 and which otherwise comply with the requirements of the Companies Act 2006 relating to financial statements, so far as applicable to the charitable company.

These financial statements have been audited under the requirements of Section 145 of the Charities Act 2011.

The financial statements were approved by the Board of Trustees and authorised for issue on ..... and were signed on its behalf by:



.....
D Cain - Chairman - Trustee

1. DESIGNATED FUND

The designated fund represents sums set aside, out of unrestricted funds, to meet the ongoing costs of the chair of Professor of Pain.

	2022	2021
Investment income:	£	£
Interest received	2,908	2,849
Dividends	86,564	76,039
Realised gains on investments sold	100,175	2,683
Unrealised gain on revaluing investments to market value	-	-
Total designated income	189,647	81,571
Less:		
Realised loss on sale of investments	-	-
Unrealised profit/(loss) on revaluing investments to market value	154,444	412,507
	(12,469)	(11,475)
Expenditure out of designated funds	-	-
Transfer of net expenditure to General Fund	(227,000)	(23,000)
Net designated (expenditure)/income	**104,622**	**459,602**

2. ACCOUNTING POLICIES

Basis of preparing the financial statements
The financial statements of the charity, which is a public benefit entity under FRS102, have been prepared in accordance with the 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) (effective 1 January 2015)', and the Charities Act 2011. The financial statements have been prepared under the historical cost convention with the exception of investments which are included at market value.

Income
All income is recognised in the Statement of Financial Activities once the charity has entitlement to the funds and it is probable that the income will be received and the amount can be measured reliably.

Expenditure
Liabilities are recognised as expenditure as soon as there is a legal or constructive obligation committing the charity to that expenditure, it is probable that a transfer of economic benefits will be required in settlement and the amount of the obligation can be measured reliably. Expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all costs related to the category. Where costs cannot be directly attributed to particular headings they have been allocated to activities on a basis consistent with the use of resources.

Grants offered subject to conditions, such as duration of the grant, which have not been met at the year end date are noted as a commitment but not accrued as expenditure.

Allocation and apportionment of costs
Certain expenditure is directly attributable to specific activities and has been included in those cost categories. Certain other costs, which are attributable to more than one activity, are apportioned across categories on the basis of an estimate of the proportion of time spent by staff on those activities.

Tangible fixed assets
Depreciation is provided at the following annual rates in order to write off each asset over its estimated useful life.

Long leasehold	- Over the period of the lease
Plant and machinery	- 25% on reducing balance and 15% on cost
Fixtures and fittings	- 25% on cost

Expenditure on individual assets which is less than £500 is not capitalised.

Stocks
Stocks are valued at the lower of cost and net realisable value, after making due allowance for obsolete and slow moving items.

2. ACCOUNTING POLICIES - continued

Taxation
The charity is exempt from corporation tax on its charitable activities.

Fund accounting
Unrestricted funds can be used in accordance with the charitable objectives at the discretion of the trustees.

Restricted funds can only be used for particular restricted purposes within the objects of the charity. Restrictions arise when specified by the donor or when funds are raised for particular restricted purposes.

Designated fund

The Designated fund represents the investment and related income which the trustees have designated to be used specifically for funding the chair of the Professor of Pain.

Restricted fund

The Restricted fund represents the income which was made available for the purposes of acquiring a Transcranial Magnetic Scanner and sponsorships received. The related expenditure represent money spent in relation to restricted income.

Hire purchase and leasing commitments
Rentals paid under operating leases are charged to the Statement of Financial Activities on a straight line basis over the period of the lease.

Pension costs and other post-retirement benefits
The charitable company operates a defined contribution pension scheme. Contributions payable to the charitable company's pension scheme are charged to the Statement of Financial Activities in the period to which they relate.

Financial instruments
Financial instruments are classified and accounted for according to the substance of the contractual arrangement, as either financial assets, financial liabilities or equity instruments. An equity instrument is any contract that evidences a residual interest in the assets of the company after deducting all of its liabilities.

Investments
Investments are made by the trustees acting through and on advice of professional investment managers. The investment strategy focuses on low to medium risk investments.

Investment gains and losses
Gains and losses which arise on the sale of investments during the year are termed "Realised gains and losses". Those gains and losses that arise from the disclosure of investments at market value as at 5th April each year are termed "Unrealised gains and losses".

Governance costs
Governance costs relate to the general running of the charity, as opposed to fundraising or charitable activities expenditure. They include audit and legal fees, accountancy and related support costs.

Costs of generating funds
The costs of fundraising events include the costs incurred by the Charity in arranging golf days, appeals and sponsorships and are included in the SOFA on an accruals basis.

Charitable activities - Grants payable
Expenditure on charitable activities includes grants payable to individuals to conduct research into pain, its causes and relief, and to disseminate research information together with related direct costs and support costs, all of which are accounted for on an accruals basis.

3. DONATIONS AND LEGACIES

	5.4.22	5.4.21
	£	£
Gifts	89,086	43,172
Gift aided donations	29,047	4,446
Tax recovered on gift aided donations	7,262	1,099
Legacies	58,530	64,977
Sundry income	467	-
	184,392	113,694

4. OTHER TRADING ACTIVITIES

	5.4.22	5.4.21
	£	£
Books leaflets tapes	145	-
Sponsorships	100	60
Meeting fees	4,009	5,614
	4,254	5,674

5. INVESTMENT INCOME

	5.4.22	5.4.21
	£	£
Rents received	2	(1)
Listed investments	89,473	78,888
	89,475	78,887

6. OTHER TRADING ACTIVITIES

	5.4.22	5.4.21
	£	£
Purchases	76	-
Staff costs	14,601	14,398
	14,677	14,398

7. INVESTMENT MANAGEMENT COSTS

	5.4.22	5.4.21
	£	£
Portfolio management	12,469	11,476

8. CHARITABLE ACTIVITIES COSTS

	Direct Costs	Grant funding of activities	Support costs	Totals
	£	£	£	£
Research	**68,255**	**282,658**	**62,175**	**413,088**
Education	**487**	**-**	**5,272**	**5,759**
	68,742	**282,658**	**67,447**	**418,847**

9. NET INCOME/(EXPENDITURE)

Net income/(expenditure) is stated after charging/(crediting):

	5.4.22	5.4.21
	£	£
Auditors' remuneration	**5,000**	5,000
Auditors' remuneration for non audit work	**3,340**	3,840
Depreciation - owned assets	**13,379**	16,749
Other operating leases	**3,975**	6,475
Surplus on disposal of fixed assets	**(1,186)**	-

10. TRUSTEES' REMUNERATION AND BENEFITS

No trustees' remuneration or other benefits were paid for the year ended 5 April 2022 nor for the year ended 5 April 2021.

Trustees' expenses

There were no trustees' expenses paid for the year ended 5 April 2022 nor for the year ended 5 April 2021.

11. TANGIBLE FIXED ASSETS

	Long leasehold	Plant and machinery	Fixtures and fittings	Totals
	£	£	£	£
COST				
At 6 April 2021 and 5 April 2022	**114,302**	**204,403**	**324,487**	**643,192**
DEPRECIATION				
At 6 April 2021	**68,256**	**167,111**	**321,329**	**556,696**
Charge for year	**3,265**	**9,324**	**790**	**13,379**
At 5 April 2022	**71,521**	**176,435**	**322,119**	**570,075**
NET BOOK VALUE				
At 5 April 2022	**42,781**	**27,968**	**2,368**	**73,117**
At 5 April 2021	46,046	37,292	3,158	86,496

12. FIXED ASSET INVESTMENTS

	Listed investments £
MARKET VALUE	
At 6 April 2021	**2,805,265**
Additions at cost	**222,186**
Disposals at book cost	**(232,612)**
Revaluations	**154,444**
At 5 April 2022	**2,949,283**
NET BOOK VALUE	
At 5 April 2022	**2,949,283**
At 5 April 2021	2,805,265

Overseas investment assets amounted to £1,233,485 (2021: £1,188,671).

Cost or valuation at 5 April 2022 is represented by:

	Listed investments £
Valuation in 2022	**154,444**
Cost	**2,794,839**
	2,949,283

13. STOCKS

	5.4.22	5.4.21
	£	£
Finished goods	**700**	776

14. DEBTORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	5.4.22	5.4.21
	£	£
Tax	**7,262**	1,099
Prepayments and accrued income	**2,296**	10,334
	9,558	11,433

15. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	5.4.22	5.4.21
	£	£
Bank loans and overdrafts (see note 16)	11,493	508
Social security and other taxes	123	159
Accruals and deferred income	39,232	46,377
	50,848	47,044

16. LOANS

An analysis of the maturity of loans is given below:

	5.4.22	5.4.21
	£	£
Amounts falling due within one year on demand:		
Bank overdrafts	11,493	508

17. MOVEMENT IN FUNDS

	At 6.4.21	Net movement in funds	Transfers between funds	At 5.4.22
	£	£	£	£
Unrestricted funds				
General fund	73,854	(269,474)	227,000	31,380
Designated unrestricted	2,865,456	331,622	(227,000)	2,970,078
	2,939,310	62,148	-	3,001,458
Restricted funds				
Restricted fund	1,044	24,599	-	25,643
TOTAL FUNDS	2,940,354	86,747	-	3,027,101

Net movement in funds, included in the above are as follows:

	Incoming resources	Resources expended	Gains and losses	Movement in funds
	£	£	£	£
Unrestricted funds				
General fund	163,649	(433,123)	-	(269,474)
Designated unrestricted	89,472	(12,469)	254,619	331,622
	253,121	(445,592)	254,619	62,148
Restricted funds				
Restricted fund	25,000	(401)	-	24,599
TOTAL FUNDS	278,121	(445,993)	254,619	86,747

17. MOVEMENT IN FUNDS - continued

Comparatives for movement in funds

	At 6.4.20 £	Net movement in funds £	Transfers between funds £	At 5.4.21 £
Unrestricted funds				
General fund	314,579	(263,725)	23,000	73,854
Designated unrestricted	2,405,854	482,602	(23,000)	2,865,456
	2,720,433	218,877	-	2,939,310
Restricted funds				
Restricted fund	1,578	(534)	-	1,044
TOTAL FUNDS	2,722,011	218,343	-	2,940,354

Comparative net movement in funds, included in the above are as follows:

	Incoming resources £	Resources expended £	Gains and losses £	Movement in funds £
Unrestricted funds				
General fund	119,367	(383,092)	-	(263,725)
Designated unrestricted	78,888	(11,476)	415,190	482,602
	198,255	(394,568)	415,190	218,877
Restricted funds				
Restricted fund	-	(534)	-	(534)
TOTAL FUNDS	198,255	(395,102)	415,190	218,343

A current year 12 months and prior year 12 months combined position is as follows:

	At 6.4.20 £	Net movement in funds £	Transfers between funds £	At 5.4.22 £
Unrestricted funds				
General fund	314,579	(533,199)	250,000	31,380
Designated unrestricted	2,405,854	814,224	(250,000)	2,970,078
	2,720,433	281,025	-	3,001,458
Restricted funds				
Restricted fund	1,578	24,065	-	25,643
TOTAL FUNDS	2,722,011	305,090	-	3,027,101

17. MOVEMENT IN FUNDS - continued

A current year 12 months and prior year 12 months combined net movement in funds, included in the above are as follows:

	Incoming resources £	Resources expended £	Gains and losses £	Movement in funds £
Unrestricted funds				
General fund	283,016	(816,215)	-	(533,199)
Designated unrestricted	168,360	(23,945)	669,809	814,224
	451,376	(840,160)	669,809	281,025
Restricted funds				
Restricted fund	25,000	(935)	-	24,065
TOTAL FUNDS	476,376	(841,095)	669,809	305,090

18. RELATED PARTY DISCLOSURES

There were no related party transactions for the year ended 5 April 2022.

19. FINANCIAL COMMITMENTS

During the year grants payable to researchers were approved in the total amount of £866,574 of which £576,572 remains payable in respect of future periods.

Detailed Statement of Financial Activities
for the Year Ended 5 April 2022

	5.4.22 £	5.4.21 £
INCOME AND ENDOWMENTS		
Donations and legacies		
Gifts	**89,086**	43,172
Gift aided donations	**29,047**	4,446
Tax recovered on gift aided donations	**7,262**	1,099
Legacies	**58,530**	64,977
Sundry income	**467**	-
	184,392	113,694
Other trading activities		
Books leaflets tapes	**145**	-
Sponsorships	**100**	60
Meeting fees	**4,009**	5,614
	4,254	5,674
Investment income		
Rents received	**2**	(1)
Listed investments	**89,473**	78,888
	89,475	78,887
Total incoming resources	**278,121**	198,255
EXPENDITURE		
Other trading activities		
Purchases	**76**	-
Wages	**14,100**	13,900
Social security	**343**	350
Pensions	**158**	148
	14,677	14,398
Investment management costs		
Portfolio management	**12,469**	11,476
Charitable activities		
Wages	**50,675**	48,980
Social security	**1,543**	1,631
Pensions	**1,584**	1,484
Student essay costs	-	75
Venue & meeting costs	**2,468**	4,353
Sundry	**278**	661
Depreciation of tangible fixed assets	**13,380**	16,750
Loss on sale of tangible fixed assets	**(1,186)**	-
Grants to individuals	**282,658**	228,920
	351,400	302,854
Support costs		

Detailed Statement of Financial Activities
for the Year Ended 5 April 2022

	5.4.22 £	5.4.21 £
Support costs		
Management		
Other operating leases	**3,975**	6,475
Rates and water	**17,548**	17,505
Insurance	**2,571**	2,422
Telephone	**1,047**	959
Postage and stationery	**1,791**	1,559
Advertising	**7,611**	4,094
Sundries	**235**	577
Travel	**501**	-
Computer software	**1,352**	955
Credit card charges	**261**	309
	36,892	34,855
Finance		
Bank charges	**150**	188
Information technology		
Repairs and renewals	**5,056**	6,134
Governance costs		
Wages	**15,800**	15,000
Social security	**370**	412
Pensions	**634**	594
Auditors' remuneration	**5,000**	5,000
Auditors' remuneration for non audit work	**3,340**	3,840
Postage and stationery	**205**	196
Legal fees	**-**	155
	25,349	25,197
Total resources expended	**445,993**	395,102
Net expenditure before gains and losses	**(167,872)**	(196,847)
Realised recognised gains and losses		
Net investment gains/ (losses)	**100,175**	2,683
Net expenditure	**(67,697)**	(194,164)

This page does not form part of the statutory financial statements



Pain Relief Foundation

PAIN RELIEF FOUNDATION

England & Wales - Charity number 1156227

Accounts

BAAM RELIEF FOUNDATION



Clinical Sciences Centre

University Hospital Aintree

Lower Lane

Liverpool

L9 7AL

Established as a Charitable Incorporated Organisation
on 17th March 2014

Originally Established under a Deed of Trust
Dated 30th March 1979

Annual Report and Accounts

For year ended 5th April 2021

Registered Charity No.1156227

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PATRONS

Professor Sir Michael Bond, FRSA, FRSE, FRCPsych, FRCPGlas, FRCSE
Dame Lorna EF Muirhead, DCVO, DBE, CStJ, FROG
Mr. R. N. S. Bigland

TRUSTEES

Mr. D. Cain, FRSA, FIoD, MHSM, DipHSM, (Chairman)
Professor Michelle Briggs PhD RGN (appointed 4.12.2018)
Miss J Daley, LLB (Hons)
Professor P. Eldridge, MA, MChir, FRCS
Mr. P. Fell, MA (Cantab), FRSA
*Mr Steven Kaye FIoD (**Retired September 2020**)*
Professor Francis McGlone BsC (Hons), PhD (appointed 10.3.2020)
Dr. T Nash, MB, BS, Dobst RCOG, FRCA, FFPMRCA
Mr. M. Sharma, MBBS, MD, FRCA, MSc, FFPMRCA
Dr. J. C. Wells, MB, ChB, LRCP, MRCS, LMCC, SRCA, SIPP
Dr. J. R. Wiles, MBBS, FRCA, FFPMRCA

CHARITY MANAGER

Mrs J Williams

SCIENTIFIC SUB-COMMITTEE

Dr U Allam
Dr. R. Barret Jolley
Miss. A. Bradshaw
Dr. A. Goebel, FRCA, MSc, PhD
Dr. N. Goodson, FRCP, PhD
Dr. S Gulati, FRCA, FFPMRCA, EDRA
Dr A Marshall
Dr. H. Poole, PhD, CPsychol
Miss. C. Staunton (Chairman)
Dr. H. Twiddy

EDUCATION SUB-COMMITTEE

Dr R Chawla, FRCA, FFPMRCA, FCARSCI
Miss. Alison Cox
Dr Bernard Frank, MD, FCARCSI, FFPMCAI
Dr. A. Goebel, FRCA, MSc, PhD
Dr S Gulati, FRCA, FFPMRCA, EDRA
Dr K Matthews, Consultant Clinical Psychologist
Dr. M. Sharma, MBBS, FRCA, MD, FFPMRCA, MSc
Mr. John Tetlow
Dr. J. R. Wiles, MB, BS(Lond), FRCA (Chairman)
Dr. J. C. Wells, MB, ChB, LMCC, FRCA

REGISTERED OFFICE

Clinical Sciences Centre
University Hospital Aintree
Lower Lane
Liverpool
L9 7AL

BANKERS

H.S.B.C. p.l.c.,
99 -101 Lord Street,
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L2 6PG

AUDITOR

BTMR Limited,
Statutory Auditor
Century Buildings
14 St Mary's Parsonage
Manchester.
M3 2DF

SOLICITORS

John Roberts,
Abensons Solicitors
102 Allerton Road,
Liverpool,
Merseyside.
L18 2DG

INVESTMENT ADVISORS

Rathbone Investment Management Ltd.,
Port of Liverpool Building,
Pier Head,
Liverpool,
Merseyside.
L3 1NW

TRUSTEES' REPORT 2021

I am once again delighted as Chairman of the Pain Relief Foundation and on behalf of the Trustee Committee to present our Annual Report for the year ended 5th April 2021.We continue to have a strong focus on the Strategic aims of the Foundation and to promote active research in the field of chronic pain which impacts on so many patients and families. We have been busy working with our Clinicians and Research teams over a wide range of activities that are covered in this detailed report. The year has been challenging and we have worked alongside partner organisations to help cope with the COVID pandemic, indeed some staff have been redeployed and support provided where we can. we have maintained our focus on our key aims and objectives, supported grant applications and promoted the Foundation at Conferences and Courses.

I would wish to thank our two lead Clinicians Dr Andreas Goebel and Dr Andy Marshall for their sterling work throughout the year and Julie Williams our Charity Manager and her team for the promotion our Charity particularly around our use of social media. I do hope that you enjoy reading our report and if you wish to help in our work and promote research in chronic pain, please do get in touch with us.

Turning our attention to the past year, I think we can all agree it has been like no other with restrictions to social contact meaning that many charities, ourselves included have had to cancel their foreseeable fundraising events with a huge loss of revenue as a consequence. The integral role of medical research charities in UK research and development remains under threat from the financial impact of the COVID-19 pandemic. Such a threat exists because of the contribution medical research charities make to UK life sciences. Medical research charities are a vital part of the UK's research ecosystem. Every £1 of public research expenditure is associated with between £0·83 and £1·07 of private sector UK investment in research and development. It is estimated that medical research charities lost 38% of their fundraising income between March and May 2020. Like others we had to adapt to digital fundraising for the first time but with so much competition this has brought limited success. It would be thoughtless to underestimate the scale of the challenge's charities are facing today, the grim reality is that the pandemic is continuing to bite, and charities are under pressure like never before, but this has not dampened our spirits as we strive to continue to do our best to endorse our charity aims to promote advancements and education in the treatment of chronic pain.

Simple Facts We Know About Chronic Pain.

- The Departments of Health for England and Scotland recognises chronic pain as a long-term condition in its own right and as a component of other long-term conditions.
- Approximately 8 million adults report chronic pain that is moderate to severely disabling. It is estimated that 43% of adults (just under 28 million people) currently live with a degree of chronic pain in the United Kingdom. The prevalence in older age groups is even higher, with up to 62% of those aged 75 and over reporting chronic pain symptoms.
- A person living with pain will have a very poor quality of life - much worse than other conditions, and as bad as significant neurological diseases such as Parkinson's.
- Low back pain is ranked highest out of 291 conditions studied by the Global Burden of Disease study, ranking number one for years lost to disability worldwide. In fact, four of the top 12 disabling conditions globally are persistent pain conditions (low-back and neck pain, migraine, arthritis, other musculoskeletal conditions).
- 41% of people who attended pain clinics report that their pain has prevented them from working, and 13% have had to reduce their hours. Chronic pain may affect up to 30% of young adults of working age (18–39-year-olds)
- 66% of people attending A&E seeking help with pain had more than three visits to a healthcare professional in the preceding six months.

- The Chief Medical Officer report states that 25% of pain sufferers lose their jobs; 16% of sufferers feel their chronic pain is so bad that they sometimes want to die.
- Men and women in the lowest income households are more likely to report chronic pain (42%), compared to those in the highest quintile (27%).
- Severe chronic pain is associated with increased risk of mortality, independent of socio-demographic factors.
- Attending specialist pain services improves quality of life (in total, 56% of providers reported post-treatment improvement and 76% reported improvement specifically in pain-related quality of life).
- The annual indirect (productivity) cost of back pain in the UK was estimated to be between £5 billion and £10.7 billion

Most of us have experience of everyday pain including headaches, pain from minor injuries and muscular pain, for example following exercise. These pains are self-limiting and often do not need treatment. Chronic pain sometimes begins with an acute injury, but the pain does not resolve as expected; often it is not clear how a chronic pain has started. Common types of chronic pain include low back pain, pain related to arthritis and pain related to injury to a nerve or other part of the nervous system (neuropathic pain). Both types of pain can range from mild or severe with the difference being the duration of symptoms. Chronic pain is usually not a sign of on-going tissue damage but may relate to changes in the peripheral and central nervous system that occur over time so that the pain signalling becomes self-sustaining over a prolonged period. Chronic pain is often difficult to treat, and it is not a well-defined disease entity with a predictable prognosis and response to treatment. People often expect a clear diagnosis and effective treatment, but these are rarely available with most types of treatment helping less than a third of patients.

Chronic pain drastically affects individual's way of life, their families, and their carer, pain is not just a physical sensation – it can have emotional effects too, your mood can in turn make the pain seem worse or better. it also affects, sleep, mobility, role within the family and ability to work as well as other aspects of life. Anxiety about pain, and previous experience of pain, along with unpleasant life events not associated with pain can influence how pain is perceived. Almost half of people with chronic pain have a diagnosis of depression and two-thirds of people are unable to work outside the home. New guidelines emphasise the need for shared decision making, putting patients at the centre of their care, and fostering a collaborative, supportive relationship between patients and healthcare professionals. It highlights the importance of healthcare professionals gaining an understanding of how a person's life affects their pain and how pain affects their life.

We at the Pain Relief Foundation and Pain Research Institute remain compelled to do our best to enhance this as we persist in filling the gap between discovering new scientific advances and how these can translate into the best prevention and treatment options for people affected by pain, we want to share this knowledge the best way we know how through research and education. We believe with the strength of our researchers we can achieve this goal. Being one of the last great challenges facing medical science, it needs every support to make sure it is a fight we at Pain Relief Foundation can win and the efforts to make further headway will continue unabated. Our continued commitment to tackling pain, finding new treatments and hopefully one day a cure will not only change lives now but have a huge bearing in the future.

Going forward, it is our job to ensure that we keep doing the right things in the right way from responsible fundraising to responsible spending and investing. Our work relies almost entirely on voluntary donations, so we do have to ask for money, when we do, we ask responsibly and respectfully. The Pain Relief Foundation continues to make every effort to be open, transparent and remain responsible for the decisions that we make. We welcome tighter regulation of fundraising practices and further scrutiny of the charity sector and remain committed to respond any regulatory changes by continually reviewing our approach to fundraising to make sure we keep pace with the requirements of the law. We aim to maintain best practice in how we communicate with our donors and manage their data effectively as our supporters

are at the heart of everything we do. Providing excellent customer service is a priority as we strive to make every interaction with our charity a positive one where our supporters can see how we raise money and how we spend it. We continue to implement and uphold regulatory rules and compliance, and we work hard to develop the relationships supporters have with us. That way, Pain Relief Foundation can continue to flourish, long term.

The Charity's achievements are heavily reliant on the support of our donors and volunteers They continue to give their time, energy, and vital funds. They volunteer and support us in so many different and varying ways we couldn't make our ambitious goals a reality without them, many of whom have loyally supported our work over numerous years. Although support comes from all sectors of the community, a major contribution to the work of the Foundation comes from the Walton Centre NHS Foundation Trust for Neurology and Neurosurgery and its associated Pain Clinic. The Walton Centre supports the educational activities of the Foundation, which could not take place without the dedication of all the Pain Clinic staff, who provide education to all areas of health care staff nationally and internationally on behalf of the Foundation. Walton Pain Clinicians are also active researchers, adding to the portfolio of research supported by the Foundation. The Walton Centre Pain Clinic is one of the largest pain centres in Europe and provides a large potential source of patients for research. We are indebted to those who volunteer for the various research projects, here and in other units where research is ongoing supported by the Foundation.

So, thank you for everything you do, we are extremely grateful

The continuing work of the Pain Relief Foundation would not be possible without the skillful and capable Board of Trustees. Your board ensures that we get the greatest impact from your donations, whether through developing our clinical excellence network or focusing considerable investment in finding a cure. Every pound that is raised for us deserves to be put to the best possible use and we take that responsibility very seriously. Our Trustees meet regularly to supervise and direct the Foundation and for this we are forever grateful for giving up their time. The Committee comprises of persons from many fields, each with in-depth and valuable skills from medicine as well as from administrative, legal, business, and commercial interests, each contributing to the effective management of the Charity. In carrying out these tasks, the Trustees are very ably supported by committees of specialists who have expertise and specialist interest in chronic pain.

The Trustees maintain the system of repeated review in all areas of importance in the scientific and administrative conduct of the affairs of the Foundation. In these difficult times, our reserves can be measured as crucial and therefore, the *Reserves Policy* is regularly monitored so that we are able to use our resources to the maximum effect. The *Investment Policy* dealing with the *Reserves* is also regularly reviewed by the Trustees and the Investment Management team at Rathbones, to maximise the generation of both income and capital growth. The *Risk Assessment* policy has also been frequently reviewed and is under constant consideration to ensure that risks to which the charity may be exposed are understood, and steps taken to mitigate them have been identified. This is an area of prime importance and procedural changes will be implemented from time to time as appropriate.

We need every support to make sure that the Pain Relief Foundation continue with the efforts to make further progress in enabling the unraveling of the many and varied complications associated with human chronic pain. and we are therefore thankful for the support from donors and volunteers who come from all sectors of the community who very often suffer chronic pain themselves; without your donations we couldn't make our ambitious goals become a reality ; many of you have loyally supported our work over numerous years and continue to do so in times of financial hardship and fierce competition especially over the past 12 months of the pandemic as we faced the most difficult times, you continued to support us in so many different and varying ways. We are therefore thankful for the support from donors and volunteers.

After this very testing year, it is time to reflect on the value which Pain Relief Foundation has brought to the treatment of chronic pain, and to take the opportunity to remind our readers that although the Pain Relief Foundation and its own Pain Research Institute is based in Liverpool, it is not just a local charity. Its

work and influence stretch nationally and internationally in the treatment of chronic pain, through every Pain Clinic, and the Pain Research Institute is recognised as a Centre of Excellence with world-wide significance in new and developing treatments. We aim to continue to support the extensive training and education of health practitioners at all levels, to ensure that patients receive the best care. We also remain committed not only to the need for the research into the causes, treatment, and searches for cures for chronic pain conditions of equal importance is our programme concerned with the dissemination of information and of the education of practitioners, to improve the cause of pain relief. A major involvement of this work comes from the Walton Centre NHS Foundation Trust for Neurology and Neurosurgery and its associated Pain Clinic who passionately supports the educational activities of the Foundation, which could not take place without their commitment, again we thank you. The Pain Clinicians are also active researchers, adding to the portfolio of research supported by the Foundation. This brings me to add we are indebted to those who volunteer for the various research projects, here and in other units where research is ongoing supported by the Foundation without them, we could not make the advancements we already have.

During the year, the Trustees decide on how much money is available for research budgets in the fourth coming year; we then advertise in specialist journals, on our website, on the specialist internet site ResearchResearch.com and in the University and NHS press, for applications.

Great care is taken in the distribution of our available funds in the form of grants to ensure that they are distributed to those best able to fulfill the research needs of the Foundation, working in collaborative functions to produce the objectives we are seeking. We are acutely aware of the need to ensure that in promoting and supporting research, we are mindful of where the work can be best carried out, and who the most appropriate and leading researchers are for the type of work embodied in the project content. Utmost importance is placed on the selection process, in that the most appropriate and effective research opportunities are selected for support and in this respect, we are most grateful for the expertise and extensive work of our Scientific Sub-Committee, chaired by Dr Caroline Staunton.

All applications received are initially assessed by the committee to ensure they fit the remit of the Foundation. The committee ensures that each application is then independently Peer Reviewed by external reviewers. With all this taken into consideration the sub-committee will advise the Trustees on which of the many applications for research and academic grants are most deserving, and which projects should be the recipients of the funds which the Foundation has available. We are most grateful for the expertise and extensive work carried out by the Scientific Sub-Committee during this lengthy process.

A selection of research reports from grants awarded by the Pain Relief Foundation can be found on our website www.painrelieffoundation.org.uk.

Each year, the *'Education Sub Committee'* under the able Chairmanship of Dr. John Wiles, develop and deliver several excellent educational courses on the Treatment and Management of chronic pain. The Pain Relief Foundation is noted for the level of excellence which these courses provide, and our courses are always well supported. All members of this committee meet on a regular basis and each year they welcome the opportunity to take on the responsibility of organising and being responsible for the educational courses provided for doctors and other health professionals and actively encourage other pain professionals to follow suit.

Whilst the courses for this year had already been formulated, unfortunately, due to the pandemic, enduring lockdowns and strict adherence to social distancing, all face-to-face courses have been cancelled until 2022. However, being masters of our own destiny and the forced requirement to learn how to use virtual platforms such as zoom we have cultivated a series of online lectures titled '**Virtual Pain Series: Clinical updates in Pain Medicine, Walton Centre and Pain Relief Foundation, Liverpool** which will be delivered monthly until we are able to resume our normal events. The Foundation is also supporting the **North England Pain Group *(NEPG)*** to deliver their first virtual meeting in 2021

The responsibility of the Annual Lecture and the Student Essay competition remains with Dr John Wiles. This year's lecture was also cancelled due to the pandemic, and it has been agreed to be held virtually in October 2021 in tribute to Ronald Melzac, the lecture will be given by Claudia

Sommer. Professor of Neurology and President of IASP. The title " 55 years on. Are we any nearer to closing the gate?",

The Student essay competition has been enhanced and has been opened up to Medical, Nursing, Occupational Therapists, Psychology and Physiotherapy students. With the winners of each category presenting their essay at one of our educational meetings. Our sincere thanks go to Dr John Wiles for his active role in coordinating.

One other pleasure that I have in writing this annual message is to express my sincere thanks to the dedicated people who have contributed to the work and success of the Foundation; the volunteers who support us. I would also like to acknowledge Kath Johns and Naomi McKnight of BTMR Ltd, Statutory Auditor, who fastidiously prepare and audit the accounts and Joseph McLoughlin of Rathbones Investments for retaining our investment portfolio.

Aims & Objectives

The aims and objects of the Pain Relief Foundation, as set out in the Constitution, are the advancement and promotion of all forms of medical research and in particular the relief of human pain and all painful conditions of every type whatsoever and howsoever caused and to disseminate the results of any such research throughout the world.

Policies to further Aims & Objectives

In pursuance of these aims and objectives, the continued policy of the Trustees is to:

- Fund and enable research into the causes and optimal treatment of human chronic pain.
- Provide and maintain a Pain Research Institute, headed by a Professor of Pain Science, in which research and education is conducted in pursuance of the charity's objectives.
- Undertake the support of the Pain Research Institute as a priority in the Pain Relief Foundation's funding programme. However, research grants will also be made available and awarded by open competition, for qualitative research projects carried out in other institutions.
- Support partnerships with higher education and the N.H.S directed to the understanding and treatment of human chronic pain. In particular, to provide long-term funds for the support of a Chair in Pain Science at the University of Liverpool.
- Support the dissemination of the results of such research throughout the world.
- Promote and enable education and training for doctors and other health professionals on human chronic pain and its treatments.
- Provide doctors and other health professionals with an information service on chronic pain and its treatments, in order to improve patient care.
- Provide an information service to human chronic pain sufferers and patients on chronic pain conditions.

This policy has remained unchanged since the last annual report

Chronic Pain

Living in isolation is not a new phenomenon for those who live with chronic pain. Living with chronic pain means you often live your life in various forms and degree of isolation every day, this pandemic has bought nothing new to pain sufferers. Pain prevents you from doing the things you love to do, going to the places where you want to go, and meeting with those you love. It prevents you from going to work, going out to shops, restaurants, and entertainment venues, seeing your family and friends. As your pain enforced

isolation continues, you lose your routine, your sense of time, your ability to interact with others, and your ability to participate in the world outside your home. This may sound familiar to us all during this pandemic the difference being we have a light at the end of the tunnel and our isolation is nearly over but for Chronic pain sufferer's isolation will continue with no end in sight.

Pain inhibits you from being the person you want to be, and it takes away your identity. Your identity is replaced with a new identity: the identity of being in pain. The identity of a person who can't do this or that because it causes them too much pain. The identity of a person who becomes dependent – dependent on treatments, aids, assistance, and help. The identity of a person who suffers. And all too often those who do suffer, suffer in silence, and eventually lose sense of self and self- worth, then pain takes away their hope.

Those who have never had chronic pain, pain that may fluctuate in degree and intensity, but which never really goes away – will struggle to understand what it is like, how difficult and draining it is, what obstacles and barriers the world will put in your way, and how hard our society and systems will make your life. However, living with pain, gives those that suffer new experiences, skills, and rewards. You learn you have more resilience and how adaptable you can become; how creative you can be; and you learn the gift of empathy. The ability to empathise with people when they find themselves in difficult circumstances or positions; the ability to understand that someone's position and place in the world may not be of their own doing; At that point, you come to realise that your pain gives you that special insight into the world, which you can share with others in pain and even with those who don't suffer so they can understand and help. And, for everyone who has lived through this pandemic, hopefully, you will now be able to share some compassion with those who are less fortunate or able than themselves

Troublingly pain is under-represented in terms of the public awareness of it. Everyone experiences occasional aches and pains, but chronic pain is different with its own definition and is defined as pain that lasts for at least 12 weeks. The pain may feel sharp or dull, causing a burning or aching sensation in the affected areas. It may be steady or intermittent, coming and going without any apparent reason. Chronic pain can occur in nearly any part of your body. The pain can feel different in the various affected areas. Pain therefore is a frequently presenting complaint across a wide range of health care settings. persistent pain does not go away but develops and accelerates over time through well recognised neurophysiological processes. Upsettingly, severe chronic pain is now associated with an increased risk of mortality.

This situation highlights just how much research and associated work still needs to be carried out if we are to dominate chronic pain and to ease the distress which it causes. The staff at the Pain Research Institute and in the other Laboratories which are funded by the Foundation, acknowledge that much remains to be done, and they are relentless in their efforts to solve the many problems and unexplained factors.

The Pain Relief Foundation's funding has helped the Research Institute secure a firm base for an exciting and robust academic structure which is necessary if the Institute is to continue moving forward with a rigorous programme of research into human chronic pain. It has helped the Foundation to co-ordinate and further develop the extensive teaching of undergraduates, postgraduates, nurses, and other medical professionals that is essential to the further improvement in the treatment and relief of chronic pain.

The Pain Research Institute (PRI)

The Pain Research Institute based within the Clinical Science Centre at University Hospital Aintree houses patient examination laboratories, research laboratories, work and study areas, a specialist pain library with several study areas and general workstations which provide researchers with access to all of the relevant pain databases and research offices, through a fast link computer hub.

We are located directly adjacent to the Walton Centre NHS Foundation Trust, Liverpool. The dominating factor for our location here is because pain-related research projects often need access to a large number of patients. The Pain Clinic has a throughput of over 4500 new patients each year and the access to this patient base is paramount for the Pain Research Institute to continue with their work. The symbiotic work that is carried out in liaison between the two units, and the expertise that has emerged over the years, has led to the *'Walton Pain Clinic'* becoming, and remaining, the largest and most successful in Europe. All patients recruited are fully informed volunteers.

The Pain Research Institute is integrated into the University of Liverpool, which has the benefit of access to additional study facilities and research laboratories, without the additional cost factors. The Institute has become a focal point for pain research, the sharing of information and training in pain relieving techniques, while the wide scope of its projects and its thorough investigative work have brought real relief to patients in this country and overseas.

The Institute welcome collaborations amongst others which can enhance research. Research collaborators may, for example provide serum samples from another population, or conduct investigations of pain-questionnaires in their own patient group or refer patients with rare pain conditions to the Institute for dedicated projects. They also collaborate with other laboratories which employ methods not established here, and with researchers who have a project idea and wish to progress it by working with us here at the Institute.

The Pain Research Institute made up of a multi-disciplinary group researching ways to understand and relieve Pain, the mission of the Institute is to encourage researchers in developing their own research ideas, by helping them to transform their excellent ideas into projects. The research conducted by the Pain Research Institute encompasses a wide range of areas within Pain Medicine. It includes:

- assessment and treatment of the immune system
- psychological treatments
- the development of questionnaires to assess chronic pain
- the assessment and treatment of abnormal brain and peripheral nerve activities.

As Countries across the world-imposed lockdown restrictions during the COVID-19 pandemic. It was proposed that lockdown conditions, including social and physical distancing measures, may disproportionately impact those living with chronic pain and require rapid adaptation to treatment and care strategies. Members of the PRI, led by Dr Nick Fallon set up the following project (to our knowledge 1st in the world) Adverse effects of COVID-19-related lockdown on pain, physical activity and psychological well-being in people with chronic pain as until now, no data existed to demonstrate whether people with chronic pain are adversely affected by lockdown conditions. Research was urgently needed so that evidence-based decisions could be made about adapting clinical provision for such patients to tailor and target interventions and minimise suffering.

The findings of the institute indicate that chronic pain patients suffer increased adverse effects of lockdown compared with pain-free individuals. They are more impacted in terms of depressed mood; greater perceived loneliness and they report that their pain feels more severe compared to before lockdown. In the paper, we point to some mechanisms by which these increased adverse effects could occur in people with chronic pain. Specifically, psychological constructs (Pain Catastrophizing) and levels of physical exercise – both of which are known to impact on chronic pain experience - could play an important role in generating the negative outcomes associated with lockdown in this vulnerable group.

The data from the study can be used to justify the need for further remote management of people living with chronic pain. Specifically, we can utilise these findings to consider the type of remote

therapeutic approaches required, or even to target the mechanisms leading to adverse effects in this vulnerable population.

Full publication can be found in the British Journal of Pain

https://journals.sagepub.com/doi/10.1177/2049463720973703

There are also current ongoing studies listed below.

- EN-PENS-trial - Patients with chronic neuropathic pain following peripheral nerve injury.
- EMPHENE -A double blind, placebo-controlled, randomised dose ranging trial to determine the safety and efficiency of three dose levels of EMA401, a new angiotensin receptor 2 antagonist in patients with post herpetic neuralgia,

- Investigating Diabetic Neuropathy During Initiation of Intensive Glycaemic Control
- The Utility of Non-Invasive Ocular Imaging in Diabetic Foot Disease.
- A Multicentre, double-blind, centre-stratified multi-period crossover trial to evaluate the efficacy of the Optimal Pathway for Treating neuropathic pain in Diabetes Mellitus (OPTION-DM) Dr Uazman Alam
- Serum IgG autoantibodies in patients with Fibromyalgia- 100 patients of the Walton Centre with a diagnosis of FMS (>1year), collecting blood to be used in laboratory experiments. Principal Investigator Dr Andreas Goebel
- Doctorate Clinical Psychology trainee project- Participants who are post PMP who may not have shown significant change will be studied to see if they respond better to therapy such as PIT. Principal Investigator Dr Hannah Twiddy

To date, there have been numerous publications in medical and scientific journals together with books written by Consultants from the Pain Research Institute. The teams of doctors and scientists have ambitious plans for future research which, if funding can be obtained, bid fair to make substantial advances in the understanding, and the relief, of chronic pain which presents many psychological problems and physical conditions for the sufferer.

Research Accommodation

The Trustees of the Pain Relief Foundation have continued with the agreed policy that whilst continuing to retain the leasehold and ownership of the Pain Research Building in the Clinical Sciences Centre, together with the fixtures, fittings and equipment therein, they will provide the facility of the Institute, together with the fixtures and fittings, to the Department of Neurological Science, University of Liverpool, and to other such parties who are researching chronic pain, or who wish to enter into collaborative research on human chronic pain.

This arrangement will ensure that research personnel supported by the Pain Relief Foundation, the University of Liverpool, the Liverpool John Moores University and those others who are employed

by another party but are working on chronic pain research under the auspices of the 'Pain Relief Foundation' Professor of Pain Science, shall be contained in the same premises and work collaboratively. This arrangement offers a more structured and controlled working area and is conducive to good working practices. The use of the premises does not create a lease but shall be treated as a Licence at Will.

All of the overhead and operating costs of the Pain Research Institute premises are borne by the Pain Relief Foundation and are allocated as part of the research grants. The following *'modus operandi'* was pursued during the year as in previous years:

- The Pain Relief Foundation provided administration and research accommodation for the research personnel, within the Pain Research Institute.

- The Pain Relief Foundation provided research secretariat, and clinical research support facilities for the researcher posts from its own staff resources.

- The Pain Relief Foundation provided secretariat assistance to the associated research personnel, from its own employed staff.

- The Pain Relief Foundation discharged all costs connected with the accommodation of the Pain Research Institute and its operational facilities, including overheads, heat, light, repairs, and purchase of new equipment etc.

- The Pain Relief Foundation discharged all costs connected with the provision of all consumables and computer hardware for the Professor of Pain Science and all other grant aided Researchers working in the Pain Research Institute.

- The Pain Relief Foundation discharged all costs connected with the provision of lecture theatre and associated facilities.

- Under the present structure, the Head of the Pain Research Institute is charged with reporting to the Scientific Advisory Sub-Committee in respect of all research work carried out under the Pain Relief Foundation grant arrangements, and also on the additional research that has been made possible through the Foundation's funding and provision of accommodation. The Chair of the committee is then able to submit a concise report to the Committee of Trustees.

This established procedure is an essential method to evaluate and measure the success and effectiveness of the research work being conducted and to ensure that it is achieving its aims. Additionally, the head of the Pain Research Institute is invited to attend meetings of the Trustees at six monthly intervals, to answer questions on matters raised regarding current and on-going research projects and future planned developments. He also maintains a liaison with the Education Sub-Committee, attending their meetings in an Ex-Officio capacity.

RESEARCH CO-ORDINATION & EDUCATION

The research co-ordination accommodation is located in the administrative area and fulfills a range of functions in its operational role. It supports the Pain Research Institute in a number of fields, providing accurate sources of scientific and medical information to assist the researchers in many projects.

Under the direction of the Education Sub-Committee, the Education Section also undertakes the operational factors in the conduct of all postgraduate courses that are organised throughout the year, arranging the teaching seminars, overseeing the Pain Relief Foundation Annual Lecture, collating and ensuring the correct and timely marking of Student essays and organising external conferences.

STRUCTURE GOVERNANCE AND MANAGEMENT

Governing Document On 6th April 2014, the Pain Relief Foundation was incorporated as a Charitable Incorporated Organisation under charity number 1156227.

Structure, Governance & Management

The Pain Relief Foundation is controlled by its Constitution as a Charitable Incorporated Organisation managed by a Committee of Trustees and at their meetings the Committee regularly conducts an assessment and review of their number, taking into account the skill requirements of the members in conducting the affairs of the Trust, and any potential retirements in the forthcoming 12 months. From this review, consideration is given to the need, if any, to recruit further Trustees. In the event that further recruitment is deemed necessary, the Committee of Trustees will seek suitable candidates through a process of personal contact across the Universities, the Health Service and other appropriate professional bodies associated with the charity. Details of the Trustees are shown on page two of this report.

The power to appoint a new Trustee or additional Trustees of the charity is vested in the Committee of Trustees and new appointments may be made by a resolution of a meeting of that Committee. A Trustee may retire upon giving two months' notice in writing of intention to do so, to each of the other Trustees. The Trust Constitution require that the number of Trustees shall not be less than three at any time, but there is no limit on the maximum number and Trustees are not required to retire and stand for re-election.

No expenses of any type will be paid to any trustee, nor will any trustee be paid any remuneration or payment of any kind from the Foundation in their capacity as a trustee. All of the trustees will give freely of their time and act in an honorary capacity. This is confirmed in each year's Annual report & Accounts.

In the period 6th April 2019 to 5th April 2020, there were no expenses of any type paid to any Trustee nor was any Trustee in receipt of any remuneration or payment of any kind from the Foundation in their capacity as a Trustee. All of the Trustees gave freely of their time and acted in an honorary capacity.

The Committee of Trustees conducts at least four quarterly meetings each year at which they receive reports on the activities, and achievements that have occurred since the previous meeting. The meeting agendas encompass reports on the full range of activities and situations including the day-to-day administration, investments and reserves, cash flow and risk management.

The Committee of Trustees continues to review several areas of importance in the effective management of the Foundation. The prepared '*Risk Assessment*' policy is subject to regular review to ensure that potential risks to which the charity may be exposed, are adequately identified, assessed and mitigating steps taken. This operational area is considered to be of the greatest importance and procedural changes will be implemented if deemed appropriate

Related Parties

For the purposes of preparing accounts in accordance with the Statement of Recommended Practice for charities, in the opinion of the Trustees, the following are related parties to the Pain Relief Foundation:

- The Trustees and their immediate family
- The National Health Service

- The University of Liverpool

Risk Management

The trustees have a duty to identify and review the risks to which the charity is exposed and to ensure appropriate controls are in place to provide reasonable assurance against fraud and error.

Risk Assessment

The Trustees have prepared a risk assessment register in which they have recorded the details and results of an extensive study, regarding the potential risks to which the charity may be exposed in the conduct of its affairs. The Trustees have satisfied themselves that through the actions they have taken, the identified risks have been reduced or eliminated, and that appropriate procedures and controls to deal with the risks are in place, so that any resulting or potential impact that the charity may experience is minimised.

The risk assessment register is subject to at least an annual review and in general it is an ongoing review. Such reviews ensure that all of the procedures in place continue to be appropriate to the conduct of the charity and that it is adequate in the light of experience. Where appropriate, systems or procedures have been established and put into place so as to mitigate any risks which may arise or develop

Trustee Indemnity Insurance

The Trustees do not contract a Trustee Group Indemnity Insurance policy.

Recruitment, Appointment, and Induction of New Trustees

In selecting persons to be appointed as trustees, nominations are submitted to a meeting of the Committee of Trustees, so that they each have the opportunity of evaluating the strengths of the candidate(s). In considering each nominee, the trustees take into account that person's professional qualifications or personal qualities, their commitment to promoting and furthering the aims of the Foundation, and their ability to make a contribution to the effective management of the Foundation. If the nominee is deemed acceptable, then the appointment is conducted in accordance with the established procedure of induction and training.

The Chair of the committee will extend an invitation to the candidate(s) to attend an early meeting to discuss the appointment in more detail. This is followed by a further meeting with the committee of trustees at which the new trustee is introduced, and a formal appointment confirmed. On appointment, the new trustee is required to sign a declaration stating that they comply with the formal conditions required of a Trustee and are therefore able to legally serve as a trustee. It is a requirement that a declaration of interest be made that any conflicting interest is noted and registered accordingly. Should any interest be registered, then at any meeting where there is such a conflict, the trustee will be required to withdraw and not vote on the matter. It is also declared that none of the trustees have an interest in the pharmaceutical industry. However, any such interest would be registered.

An induction meeting is then held with the Administrator who will inform the new trustee of their powers and responsibilities, the operational policy, the management arrangements for the charity's investment funds and the procedure of receiving applications for research grants and how the applications are processed through to selection. Other meetings are then held with the Sub-Committees at which their operational roles and powers are discussed.

An induction welcome pack is provided to the new Trustee, which contains as a minimum, a copy of the Constitution, a synopsis of the Foundation since its inception showing its achievements and further research targets in human chronic pain. Copies of the Trustee Committee's meeting minutes and the meeting minutes of the Advisory Sub-Committees, each covering the past 24 months, cash flow reports for the same periods, and copies of the previous two years' Annual Report and Accounts. A presentation folder is prepared containing copies of the Reserves Policy and Annual Review, Risk Assessment, Management Flow Chart, Mission Statement and Equal Opportunities Policy. In addition, a copy of the Charity Commission's publications *'The Essential Trustee: What you need to know'* and *'Charities and Public Benefit'* are provided.

Education Advisory Sub-Committee

The Committee of Trustees is advised on all aspects of education and information by an appointed ***'Education Advisory Sub-Committee'***, chaired Dr John Wiles, a Senior Pain Consultant, working in the N.H.S., and also a Trustee of the Foundation. During the year under report, the committee consisted of Neurosurgeons, Senior Pain Clinicians, and a Clinical Lecturer with Special Interest in Pain. This committee, whose members have a wide-ranging knowledge of the treatment of chronic pain and medical education strategies, were delegated and directed to advise the Trustees on educational issues and to further develop the Pain Relief Foundation's educational role through publications, courses, lectures, literature and conferences and in this respect, it fulfilled the role of maintaining a well-balanced delivery of up to date educational programmes to health professionals, many of whom traveled from all parts of the country to attend.

This committee is also charged with identifying the most appropriate methods of disseminating in printed format, details of successful research results, information on new and improved treatment methods that have been devised for pain patients, and information leaflets to aid pain sufferers in finding the best treatment resources centers. This information is distributed through the medical press and, both the Foundation's website and the Institute's website. All of the members act in an honorary capacity.

Scientific Advisory Sub-Committee

To assist the Trustees in making balanced policy decisions regarding the funding of selected research projects and additional applications for funding, they are advised and directed by an appointed ***Scientific Advisory Sub-Committee***, which is chaired by Dr Caroline Staunton, a well-respected and formidable research associate. The other members of this committee are recruited for their in-depth knowledge and understanding of chronic pain conditions and are drawn from both local and external treatment centres covering the many disciplines involved in the study and treatment of human pain. All of the members act in an honorary capacity and the committee is supported by the Foundation's Charity Manager.

The Committee continues to be the source of invaluable information, advice and opinion when reporting on, and prioritising, the numerous funding applications for scientific research which were considered to be worthy of support. It also continued with the vital task of overseeing the results from the many facets of research work, assisting the Trustees in interpreting, and analysing the large volume of scientific information submitted by Research Fellows, Grant Holders.

The purpose in receiving and analysing these reports is to satisfy the Trustees that:

- the research being funded is achieving the projected results to satisfactory and accepted scientific, medical and research standards.
- the research is likely to reach its stated aims.
- ethical approvals remain in place and are being followed scrupulously.
- research Governance is being observed at all times.
- quality standards are being maintained.

- the costs of the research are maintained within the grant limits.
- the research is being managed and monitored effectively.

The head of the Pain Research Institute is called to attend each of the Trustee meetings to provide the Trustees with an insight into the advances and the strategic development of the research opportunities being pursued. Reports are also received from the appointed Education Advisory Sub-Committee, which is principally involved in directing the Educational Meetings, Lectures, Student Essays and Patient Information issues and the Scientific Advisory Sub-Committees which undertakes the task of advising the Trustees on all aspects of Research and Research Grant applications.

Grant Making Policy

In October each year, the Pain Relief Foundation advertises in the national medical press, to invite well established researchers and scientists to submit applications for Pain Relief Foundation grants, to carry out research projects on human chronic pain or to purchase special laboratory equipment to conduct clinical trials. The notice to apply for grants is advertised in the selected medical journals, on the Pain Relief Foundation Website, on the NHS grant website and through other appropriate media; there is a closing date for the receipt of such applications. The advertisement states the upper (monetary) limit of grants, which may vary from year to year.

On receipt of applications, the Foundation's Charity Manager ensures that all appropriate sections of the application forms which have been received are correctly completed and then arranges a meeting of the Scientific Sub-Committee to present the Abstracts of the applications to the members. At this meeting, the members jointly select and nominate independent and best qualified, learned medical persons who will be asked to peer review each application and to give their expert opinions.

After the meeting the Charity Manager writes to the selected peer reviewers, submitting a copy of the application asking if they will provide an assessment of the proposed research, the likelihood of the work succeeding and the cost effectiveness of the requested budget. In addition, references are sought regarding the applicants and the outcome of previous research projects for which they have received funding from all sources. When all applications are complete with the peer reviews and references received, a full set of each application is submitted to each member of the Scientific Advisory Sub-Committee, for consideration and prioritisation in preparation for a selection meeting of the members.
At the grant meeting, the Chairman calls the attention of the members to the received Peer Reviews and References which are referred to throughout the process of considering the most appropriate and worthy applications deserving of a grant. Each committee member delivers an opinion on the applications received and scores each application between 1 and 3 with (1) being the lowest score and (3) being the highest score. These scores are then brought together with the Peer Review scores and the applications listed in order of achievement, at which point the Chairman and the committee draw recommendations to place before the next meeting of the Trustee Committee. When the Trustee Committee receives the advice of the Scientific Advisory Sub-Committee, they decide which applications, if any, will be funded in accordance with advice received, and in the light of funds available.

The Trustees may recommend that an application not be funded, be funded in full, or be funded at a reduced level. In the event that the Trustees are considering a number of competing recommended applications for which the Foundation's funds are inadequate to fund them all, the Trustees may invite the Chairman of the Scientific Advisory Sub-Committee, together with those members of the Sub-Committee who are also Trustees, to help them prioritise the applications. Each grant is specific to the holder and ceases should the grant holder terminate their post.

New grants approved since the last report

Professor in Pain Science (Approved for the next 12 months) **£70,000**
Costs for 50% of the Chair in Pain Science, University of Liverpool.

Dr Catherine Preston *York*	*'Visual body illusion for treatment of chronic osteoarthritis pain (over 3 years)*	***£59,997***
Dr Andy Marshall *Liverpool*	*'Defining nociresponsive BA3a as a target to treat chronic pain (Over 12 months)*	***£28,269***
Dr Helen Poole *Liverpool John Moores*	*'A feasibility study of a Behavioural Intervention for Opioid Reduction (BIOR) in primary care.' (Over 12 Months)*	***£29,430***
Dr Steven Zhao *Liverpool*	*'Identifying causal risk factors and health consequences of chronic widespread pain using genetic epidemiology.' (Over 12 months)*	***£24,200***
Dr Vsevolod Telezhkin *Newcastle*	*'Development of novel in vitro human induced pluripotent stem cell (hiPSC)-derived sensory-like neuronal model of orofacial neuropathic pain.'*	***£7,585***
Dr Nick Fallon	*Adverse effects of COVID-19-related lockdown on pain, physical activity and psychological well-being in people with chronic pain (over 6 months)*	***£3,000***
Dr Andy Marshall	*Employment of an Post Doc to the Pain Research Institute for 3 years- cost for per year as position reviewed each year*	***£51,000***
Dr Andreas Goebel	*Employment of Research assistant to the Pain Institute for 3 years*	***£55,800***

Public Benefit

In the foregoing section, the aims and objectives of the Foundation are plainly stated, and the policies adopted to deliver these aims and objectives are clearly stated. The objectives are supported by clear explanations regarding the policy of the Foundation to support the preparation and development of good quality research projects which are peer reviewed and expertly selected to develop the provision of improved treatment for the benefit of patients, easing and reducing their pain. In addition to the research conducted, the Foundation provides educational activities and the training of health professionals to achieve the stated aims. All of these activities are a continual matter of ongoing review by the Committee of Trustees and the Members of the Advisory Sub-Committees, so that in the light of experience, adjustments which are considered appropriate are implemented quickly, to ensure that the highest quality results continue to be delivered.

The development of improved patient services and treatment, as previously stated, is considered to be a priority issue by the Foundation, and it works symbiotically and in co-operation with the NHS and Universities to provide post-graduate scientific education in chronic pain relief. A number of postgraduate training courses have been conducted each year, for the continuing education of nurses, GPs, and for clinical pain specialists.

The information service provided by the Foundation serves to inform General Practitioners and all Pain Clinicians and Consultants with up-to-date information regarding available treatments for various pain conditions. In addition, the Foundation provides an information service for patients, their support carers and family members through the provision of leaflets on most chronic pain conditions. The Foundation's

website also provides a vast range of guidance and support for patients and Health Professionals, and much of the advice section contents can be downloaded for further ease of access. This enables patients and carers to be empowered about their individual problem.

Pain sufferers who make telephone contact with the Foundation are connected to experienced, friendly staff who are trained to sympathetically and professionally direct enquirers through to available services and advice centres. They are also able to guide sufferers into how they can avail themselves of these services and what action they can take to be referred to clinical services for pain treatment.

Patients also receive direct benefit through research results which lead to the development of new and improved treatments for chronic pain conditions. These results are delivered to pain treatment clinics nationally, and indeed internationally, through the dissemination of research information by the Foundation either electronically, from our website, in medical publications and by way of educational meetings for health professionals.

With living with chronic pain affecting 40% of the British population, it can be seen that the work of the Foundation provides a benefit for a huge number of people. Reports on the research work supported by the Foundation are included in later pages and give a vast amount of information on the progress that is being made with human chronic pain and you are encouraged to read this section.

Volunteers

The Pain Relief Foundation does not receive any funding from central or local government, the health service or other official body. Instead, the Foundation depends entirely on donations, gift aid, legacies, appeals and contributions from supportive members of the public, from generous companies and from several small trusts. There is a small level of direct fundraising activity organised and conducted by the Foundation's own staff, supported by one or two volunteers an area in which we would like to grow our support. Additionally, it seeks to secure grants from trusts and the commercial sector to fund specific research projects.

The Foundation is not in receipt of benefits in kind, either by way of services, facilities, or donations-in-kind. It does, however, receive some limited benefit from the very small number of volunteers who support the fundraising section in the organisation and conduct of small events. The Trustees recognize the intangible value of the contribution of volunteers to the charity and the Trustees are of the opinion that such income cannot be reliably ascertained. However, it is considered that such intangible income is unlikely to be material.

Powers of Investment

The Constitution provides the Committee of Trustees with the following powers:

1. To administer a bank account in the name of the Foundation at such bank as the Trustees shall decide.

2. To invest in the name of the Trustees, any monies not required for the immediate purpose of the Foundation, in such securities as they may from time to time decide as if they were beneficially entitled and whether such securities shall be trustee investments or not and shall have power from time to time to transpose such investments.

3. That any property purchased by the Foundation shall be vested in the Trustees appointed for that purpose and the Trustees shall enter into a Deed of Trust setting forth the purposes and conditions under which they hold the said property in trust for the Foundation and shall with such consent as is by law required deal with the property so vested in them by way of sale, mortgage, charge, lease or otherwise howsoever directed by the Foundation.

Investment Policy

The Trustees have developed an investment policy which it believes will respond to the needs of the on-going activities of the Foundation. Sufficient funds are retained in investment that will ensure we can respond to all contingencies as they may arise. Equally important is the strategy of investing in low to medium risk funds that will also provide an operational income. The objective is that this investment policy will produce improved values and income, whilst at the same time safeguarding the short-term and long-term financial needs of the Foundation. The Trustees seek the advice of its Investment Advisors, Rathbone Investment Management Limited and at regular meetings with the Advisors, in-depth reviews are held into the investment portfolio that makes up the reserve fund.

The investment decisions taken by the Trustees throughout this financial year have proved to serve the portfolio well. Supported by the Advisors and making several minor adjustments, the fund has this year seen a slight increase compared with the end of the last financial year. Fortuitously, at a joint meeting with their Advisors, the Trustees set an investment policy of 60% of the funds invested into 'Equity Investments' with a view of maximising the Securities and to invest 40% of the funds into 'Fixed Interest Securities'. The decision to ease the approach with fixed interest investments was a very positive decision at the commencement of the year, thus maintaining forward growth.

Mindful of the continuing uncertainty in the markets, during the year under review the trustees gave instructions to the Portfolio Manager that the portfolio investment should be organized at 65% of its value being in Equities and 35% of the value being in Fixed Interest stock and the investments were so arranged at the beginning of the year.

Reserves Policy

The strategy developed by the Trustees is to hold a level of reserves that is deemed to be appropriate from time to time, to ensure that:

- The committed and planned research projects undertaken in the short, medium, and long term are sustainable.
- The annual costs of the new 'Pain Relief Foundation Senior Lecturer of Pain Science promoting to Professor' appointment at the Pain Research Institute, is now into its first year, may be supportable from the income generated by the investments, so as not to detract from the distribution of the annual general income if this is required by the Trustees to balance its annual income
- The Trustees can address any problems that arise, including the loss of any significant source of income, which might restrict the ability of the charity in carrying out its objectives.
- Sufficient funds are available to respond to new and important projects that are identified.
- The Trustees can respond to a shortfall of income in any financial year, that may occur for whatever reason, and which shall enable the research that is already authorised, to continue without a break.
- The cost of funding the Chair at the University of Liverpool for the 'Pain Relief Foundation Professor of Pain Science' shall be protected for a minimum forward period of 10 years from any date, by ensuring that such sums as shall be required to continue the funding for such period are kept on reserve.

In setting the level of reserves, a conservative management style has been adopted that is consistent with the Trustee's responsibilities who have agreed a broad spread sector exposure to increase diversity and to regulate risk. The Trustees have established a position that the level of

unrestricted reserves and investments should be adequately sufficient to respond to the above operational policy and needs. Therefore, the Trustees have agreed the following:

- Funding for the post of Senior Lecturer/Professor of Pain Science continues to be identified as a long-term commitment and therefore, a minimum of 10 years costs supported by projected increases of a minimum say 2% per annum to cover inflation should be set aside for this purpose. It has been estimated that £826,000 of the investments should ensure that the income will be adequate to cover this requirement for that forthcoming period.

- To provide reserves to cover the estimated costs of funding existing research, research coming on-line, overheads, research administration support, charity administration and fundraising over three years. Based on an average annual expenditure, this need is £950,000.

- To retain in investments, an amount that will enable the Trustees to respond to new and important projects that may arise. In arriving at a level of retention, consideration has been given to the fact that such projects may require funding for at least two years and possibly three years.

It is considered that in view of the ongoing investment market volatility and the continuing and uncertain slow rate of recovery, together with the unsteady present uncertainties worldwide, the present level of reserves is adequate to meet these criteria.

Trading

Changes in the 2000 Finance Act, Chapter 17, allowed exemption to tax on charitable income from trading activities up to predetermined levels. The charity continues to carry out a very small level of incidental trading within the prescribed limits.

FUNDRAISING REGULATOR

The Pain Relief Foundation is a Member of the Fundraising Regulator (FR) and has been since its inception in 2016, The FR is the independent regulator of charitable fundraising and was set up following the Etherington review of fundraising self-regulation (2015) to strengthen the system of regulation and restore public trust in fundraising.

The FR is open to all fundraising organisations, suppliers and associates. Members agree to adhere to the highest standards of good practice with their fundraising, and their stated Fundraising Promise. As a Member of the FR we demonstrate Membership of the scheme
by using the scheme logo on all fundraising materials. By participating in the scheme charities are advertising commitment to best fundraising practices and to giving the public the comfort of a 'safety net' provided by a robust complaints system.

It is a requirement that a charity submits an annual report to the FR, number of complaints received by the Charity, in relation to its Fundraisir report requires the charity to notify the Board of action taken to resolve complaints and what the outcome results are.

Registered with FUNDRAISING REGULATOR

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Pain Relief Foundation is pleased to report that in the year ended 5th April 2019, no complaints had been received by the charity in the preceding 12-month period. A report to this effect was submitted to the Board of the FR as required.

The Pain Relief Foundation Fundraising Promise

We are always committed to working to the highest standards of practice.

We promise donors that we will comply with the FR Codes of Fundraising Practice and do all that we can to ensure that fundraisers and volunteers will at all times comply with the Codes and with this Promise.

We comply with the law, health and safety and the environment. We will not put unfair pressure on anyone to donate. If you do not want to donate, we will respect your decision. We require anyone fundraising on our behalf to clearly identify themselves as one of our representatives.

We are honest and open and do not make false or exaggerated claims. We do what we say we are going to do and do not pretend to do things that we cannot. We will answer any reasonable questions you have about our fundraising activities and costs. Please contact us for information, visit our website or see our Annual Report.

We are clear and give clear details about how you can make a gift. If you make a regular gift and you want to cancel it, we will carry out your cancellation instructions as soon as possible. We are clear about what we do and how your gift is used for the effective support of our beneficiaries.

We are fair and respect the rights, privacy, and dignity of each of our supporters and beneficiaries and conform to the Data Protection Act. We will only use your personal information for the purposes stated and for which you have given your consent. If you tell us that you do not want us to contact, you in a particular way (e.g. by telephone) we will not do it.

We are reasonable and responsible and will be careful not to use any images or words that cause distress or offence. We make sure that our events are well run and meet health and safety and environmental requirements, and we avoid causing any nuisance, damage, or disruption. We will not use excessive emotional arguments to make you feel guilty about not giving to us.

We are accountable and should you be unhappy about anything we have done while fundraising, you can write to us and complain. We have a complaints procedure, and we will acknowledge your complaint within 7 days and commit to dealing with the matter within 30 days. A copy of our procedure is available on request and if we are unable to resolve your complaint, we accept the authority of the FR to make a final adjudication.

FUNDRAISING COMMITTEE

Effective fundraising committees are vital to the life and financial well-being of organisations, and this is no different at the Pain Relief Foundation so this year we decided to put together our first fundraising committee to help raise awareness and funds. The functions of the group vary but centres around information, building relationships and raising money to meet the specific organisation's special or ongoing needs.

The Committee is made up from Board members with special skills and contacts to serve the role and non- members made up from nurses, ex patients and people with an interest in the Foundation whom without we could not fulfil this role. The Chair of the '***Fundraising Committee'*** Judith Daley who is also a trustee will in future advise the Board of Trustees in all facets of fundraising

DONATION POLICY

This policy has been set out by the Trustees of the Pain Relief Foundation. It is a public guide to how the Pain Relief Foundation makes decisions on accepting donations and the procedures they

follow. The policy is aligned with the codes of Fundraising Practice published by the Institute of Fundraising.

This document makes clear the Trustees' legal obligations with the regards to the acceptance and refusal of donations. It outlines the day-to-day procedures that need to be adhered to and ensures decisions are not taken on an ad-hoc basis but are in support of Pain Relief Foundations strategies and objectives.

Trustees' legal obligations

The Trustees take overall legal responsibility for decisions relating to whether a donation can be accepted or refused.

The Trustees must be able to demonstrate that they have acted in the best interest of the Charity.

The Trustees have a duty to carefully, based on evidence made available to them, whether the Charities interests will be better served by accepting or refusing the donation and to act accordingly.

These judgements must not promote any Trustee or employee's personal moral agenda, or interest and the Trustees must not allow individual or collective personal, political or ethical issues, which are not directly related to interests of the Charity, to affect their judgment.

Trustees must not derive any personal benefit (individually or collectively) from donations, offered to the Charity.

Policy

On a day-to-day basis, the Charity's board of Trustees delegates the responsibility to accept or refuse donations as follows, providing the Charity Manager is sure that any potential individual or corporate donor are supporting the charity in accordance with this policy.

- A donation must be clearly evaluated to establish whether it would be in the best interest of the Pain Relief Foundation to accept or refuse it.
- The donation should contribute towards the Charity's overall strategy and plans.
- The Charity will not accept donations from individuals or companies whose wealth are known to result from illegal activities or were there are indications of corruption and related crime.
- The donor's objectives or activities must not appear to be incompatible with the with the Charity's vision, mission, and values, particularly if this risk causing significant damage to the Charity's integrity, public image, or professional reputation.

The Pain Relief Foundation will refuse donations in the following circumstances:

- Where the activities of a donor are directly contrary to the objectives or agreed policies of the Charity or the Charity suspects the gift has been donated to facilitate money laundering or other criminal activity.
- Where it can be clearly shown that the cost to the Charity of accepting the donation will be greater than the donation itself, and that the acceptance of the donation will directly lead to a net decline in assets of the Charity.

- Where the offer of support is dependent on the fulfilment of certain conditions placed upon the Charity and any condition,

  A) Is in itself contrary to the objectives of the Charity

  B) Is regarded as needing an unreasonable level of support from the Charity especially in relation to the size or impact the donation will have on the Charity's charitable activities.

  C) Will divert the Charity from pursuing its current objectives, policies, or work priorities as a necessary fulfilment of the conditions alone.

The Trustees will take great care and consideration in deciding whether to accept or refuse a donation.

Donation Recognition

Gift Acknowledgment & Accountability

- All donors will receive a personal thank you letter and receipt, regardless of gift amount.
- All gifts will be formally acknowledged as quickly as possible, and in any event within 5 working days.
- The reporting requirements of all Grant Makers will be fulfilled thoroughly, accurately and within their required timeframe.
- Major donors for specific projects will receive were required and appropriate regular updates on the progress of the project.
- Where appropriate and required the families of legacy donors will receive a report on the use of the bequeathed funds.

Recognition

- Any donors expressed desire for anonymity will be strictly adhered to
- Any public recognition will only be undertaken with the Donors express permission and in compliance with data protection legislation and best practice.
- Recognition may be tangible by way of a physical acknowledgment such as a plaque and would be placed within the Pain Relief Foundation. This type of recognition would be decided by the Trustees.
- In general costs of recognition shall not exceed 5% of the gift amount.
- In all cases the cost of recognition shall be both reasonable and proportional.

The Charity reserves the right to refuse, discontinue or remove public recognition whether tangible or intangible, at any time if for any reason it considers the association to be damaging to its reputation. This course of action will be decided by the Trustees.

The final authority for resolution of any issues related to donor recognition policies rests with the Trustees; they may also amend or modify these policies as appropriate

STATEMENT OF TRUSTEES RESPONSIBILITIES

The trustees are responsible for preparing the Report of the Trustees and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

The law applicable to charities in England and Wales, the Charities Act 2011, Charity (Accounts and Reports) Regulations 2008 and the provision of the Constitution requires the trustees to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the charity and of the incoming resources and application of resources, including the income and expenditure, of the charity for that period. In preparing those financial statements, the trustees are required to

- select suitable accounting policies and then apply them consistently.
- observe the methods and principles in the Charity SORP.
- make judgments and estimates that are reasonable and prudent.
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charity will continue in business.

The trustees are responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the charity and to enable them to ensure that the financial statements comply with the Charities Act 2011, the Charity (Accounts and Reports) Regulations 2008 and the provisions of the constitution. They are also responsible for safeguarding the assets of the charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

The trustees present their report with the financial statements of the charity for the year ended 5 April 2021. The trustees have adopted the provisions of 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).

Approved by order of the Committee of Trustees on 21st September 2021 and signed on its behalf by:

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D Cain - Chairman

Date September 2021

CLINICAL SECTION

Patient & Public Information

The Pain Relief Foundation provides an online help and advice service through their website www.painrelieffoundation.org.uk and also provides a wide range of information leaflets, each of which deals with a specific chronic pain condition. The leaflets have proved to be a source of help to many thousands of chronic pain sufferers in understanding their pain problem and they give advice on the available treatments and additional sources of valuable information. Packs of leaflets are also made available to General Practitioners where they have been shown to be a useful way of guiding the patient into self-help opportunities in support of their treatment. All leaflets are now downloadable from our website.

The full range of leaflets is concise and gives fairly in-depth information about a range of chronic pain conditions and are continually re-written as information and advice is updated, using the guidelines

issued by the Centre for Health Information Quality, which seeks to make the use of the leaflets more 'patient friendly' and easier to read and understand. Each of the medical staff working at the Institute, contribute their skills in making the leaflets a prime source of useful information.

Letters and advice columns, written or supported by our doctors, are often seen as features in local and national newspapers, working with feature writers from magazines and newspapers they provide accurate and up-to-date information for the readers. Information disseminated in this way brings many benefits to chronic pain sufferers in particular, and the population in general.

CD's

The ***Coping with Pain*** CD was one of the early self-help aids for chronic pain sufferers. With an introduction by Magnus Magnusson, it soon became part of the pain patient's medicine cupboard. Each section of the CD has been specifically designed to focus the minds of pain sufferers on ways of easing their pain through relaxation and gentle exercise. As many as 2 out of 3 people who have used it report that they have been able to improve their quality of life and find that their chronic pain problem is eased.

Over 65,000 copies of the ***Coping with Pain*** CD have now been distributed through a range of outlets covering the medical field and the retail sector. Additional CD's dealing with specific pain conditions are also available and they include: ***Coping with Headaches & Migraine, Feeling Good, Coping with Back Pain*** and ***Relaxation*** and ***Coping with Anxiety.*** Each of the CDs contains relaxation programmes that help so many sufferers to find relief.

PAIN RELIEF FOUNDATION INFORMATION SCIENCES, RESEARCH CO-ORDINATION & EDUCATION

Introduction

The work of this department draws on the expertise of Pain Clinicians and is closely aligned with the work of the Foundation Education Sub-committee. The work of the Committee encompasses all educational courses, conferences and meetings for health care professionals and the department provides the administrative support for those developed courses and conferences plus the provision of information about chronic pain to both patients and the general public, including an online resource about chronic pain. This fulfills the remit of the Foundation to provide such education.

EDUCATION

Meetings and Courses

Meetings and courses which are developed and structured are aimed at all health care professionals with the sole purpose being to educate participants about all aspects of chronic pain management the courses are initially aimed at a national level but such as the interest has grown in the treatment of chronic pain, we now attract participants from all over the globe.

Foundation courses & lectures

Each July we normally hold our annual ***Clinical Management of Chronic Pain*** course but unfortunately due to the pandemic we have been unable to proceed this year, however we fully intend on resuming this as soon as it is safe to do so. The course is a participative clinical, hands-on course with its finger on the pulse with the most up to date information and techniques of treating chronic pain available. It is a 3-day course aimed at Consultants, Specialist Registrars, Anesthetists, Advanced Specialist Nurses, GP's, and Physiotherapists with some experience of pain management. The course consists of a mixture of lectures, seminars, clinics, theatre sessions and the grand round. The participants also spend a day in the Pain Management Programme at Walton Centre where they see firsthand the multidisciplinary assessments and treatments that patients receive.

This year we have replaced the course with a series of free online lectures given by the faculty who would normally take part in the July Course. These are held the 3rd Thursday of each month and are made up1 hour lecture including case studies and 30 minutes for and discussions.

Usually over the year further one day courses have also been organised through the Pain Relief Foundation Education Committee however again due to the pandemic this has been impossible to achieve but we do have courses being developed in the pipeline to set up as soon as possible; when we are able to run the courses face to face as many of the courses tend to be interactive with the delegates for optimum learning opportunity.

All courses run at the Foundation are accredited in the form of Continuing Medical Education points awarded from the Royal College of Anesthetists of Great Britain or such relevant body and are eligible for CPD points.

We also hold biannually the ***European Pain Federation EFIC Liverpool Winter Cancer Pain School,*** with the next one due in October 2022 which will be organised by Dr Manohar Sharma, Consultant in Pain Medicine and Trustee of the Foundation.

The 21st Pain ***Relief Foundation Annual Lecture*** will take place in November 2021, and will be delivered by Professor Claudia Summer, Professor of Neurology at the University of University of Würzburg, Germany, the title of the lecture is *"55 years on. Are we any nearer to closing the gate?",*

The evening's proceedings are to honour the life and work the life and work of Professor Ronald Melmac a Canadian psychologist and professor of psychology.

The Foundation Essay Competition

The competition is run annually the aim of this competition is to raise awareness nationally among medical undergraduates about chronic pain and the Pain Research Institute.

It was agreed to run the Essay Competition this year with multiple discipline entries Medicine and all health profession Undergraduates including occupational therapists, physiotherapist, nurses and psychologists as a trial.

This year with the change we saw 75 essays being submitted. All of the essays were of a very high standard from various medical schools around the country, both long established and newer schools. There were 3 winners.

This year's winners are: -

Akiko Fukui, St George's, University of London Medical School
'Chronic Pain in Older Adults; Do we know when they are in pain?'

Sofia Miettinen, Barts and The London School of Medicine and Dentistry Medical School
'Pharmacological management of chronic pain in pregnancy – difficulties women suffer'

Darica Au,University College London Medical School
'Chronic Intensive-Care Related Pain: A call for action'

Each winner received the winning prize of £400.00 their essays can be viewed on our website.

Pain Relief Foundation Website

The Pain Relief Foundation website www.painrelieffoundation.org.uk is a premier online resource for the general public where they can find information about chronic pain and importantly be directed to other

specialist websites which offer good, current, medically correct and easily understood information about specific chronic pain conditions.

All recommended sites have been assessed before being included on the site by the Walton Centre pain team. All the leaflets in the "Dealing with Pain Series" on chronic pain conditions and drugs for pain are available to download from the website. Topical and informative articles written by staff of the Foundation and Institute and Walton Centre Pain team are regularly featured on the website. The website also features any current news, fundraising events and gives online access to Health Professionals to register and attend any events or course that we may be running.

WORK & STUDY AREAS

The Institute continued to provide accommodation for research personnel to study their research developments and prepare research reports and applications. The accommodation is furnished and serviced, fully set out with computers workstations, and associated equipment.

RESEARCH

Below is a snapshot selection and brief description of research that is currently being undertaken with the support of the Pain Relief Foundation. An in-depth progress report of the research can be found on our website. **www. painreleiffoundation.org.uk** under the tab marked research.

Grant title: *"One and the same?": An in-depth investigation into the complexities of pain experiences of children and young people with inflammatory and non-inflammatory conditions*

Award holders: *Dr Lis Cordingley, Dr Rebecca Lee, Professor Wendy Thomson, University of Manchester*

Background and aims of project:

Musculoskeletal pain affects approximately 40% of children and young people, although causes vary. There is some evidence suggesting that pain is managed differently depending upon whether children and young people are categorised as either having inflammatory or non-inflammatory conditions. For example, those with inflammatory conditions may be more likely to receive pharmacologically focused treatment and those with non-inflammatory pain are predominantly provided with psychological management techniques. Currently, however, rationale for the different approaches is unclear. We know very little about the similarities and differences of pain experiences between these groups and whether the apparent differences in approaches to pain management is warranted or not.

This PhD will explore and characterise chronic pain experiences in children and young people with musculoskeletal conditions with different underlying pathologies/diagnoses and will begin to identify the management pathways for these groups.

We recruited a very high calibre PhD candidate with excellent qualifications including a first-class degree from the University of Liverpool, and a distinction level MSc in Neuroscience from the University of Manchester. She has a longstanding interest in pain and pain research and chose these topics for both her undergraduate and postgraduate degrees.

Grant Title: *Sub-Optimal Learning Of Tactile-Spatial Predictions In Patients With Complex Regional Pain Syndrome*

Award Holders: *Dr Christopher Brown, Dr Michael Lee, Dr Nicholas Shenker*
University Division of Anaesthesia,Addenbrookes' Hospital Cambridge

This project is now completed- Published paper: Brown CA, Scholtes I, Shenker N, Lee MC. PAIN 2020, 161 (2), 369-378.

SUB-OPTIMAL LEARNING OF TACTILE-SPATIAL PREDICTIONS IN PATIENTS WITH COMPLEX REGIONAL PAIN SYNDROME

Christopher A. Brown1*, Ingrid Scholtes2, Nicholas Shenker3, Michael C. Lee2
1. Department of Psychological Sciences, University of Liverpool, Bedford Street South, Liverpool L69 7ZA, UK
2. University Division of Anaesthesia, University of Cambridge, Addenbrooke's Hospital, Hills Road, Cambridge CB2 0QQ, UK
3. Department of Rheumatology, Addenbrooke's Hospital, Hills Road, Cambridge CB2 0QQ, UK
*Corresponding author

ABSTRACT
In Complex Regional Pain Syndrome (CRPS), tactile sensory deficits have motivated the therapeutic use of sensory discrimination training. However, the hierarchical organisation of the brain is such that low-level sensory processing can be dynamically influenced by higher-level knowledge, e.g. knowledge learnt from statistical regularities in the environment. It is unknown whether the learning of such statistical regularities is impaired in CRPS. Here, we employed a hierarchical Bayesian model of predictive coding to investigate statistical learning of tactile-spatial predictions in CRPS. Using a sensory change-detection task, we manipulated bottom-up (spatial displacement of a tactile stimulus) and top-down (probabilistic structure of occurrence) factors to estimate hierarchies of prediction and prediction error signals, as well as their respective precisions or reliability. Behavioural responses to spatial changes were influenced by both the magnitude of spatial displacement (bottom-up) and learnt probabilities of change (top-down).

The Bayesian model revealed that patients' predictions (of spatial displacements) were found to be less precise, deviating further from the ideal (statistical optimality) compared to healthy controls. This imprecision was less context-dependent, i.e. more enduring across changes in probabilistic context and less finely-tuned to statistics of the environment. This caused greater precision on prediction errors, resulting in predictions that were driven more by momentary spatial changes and less by the history of spatial changes. These results suggest inefficiencies in higher-order statistical learning in CRPS. This may have implications for therapies based on sensory re-training whose effects may be more short-lived if success depends on higher-order learning.

Grant title: ***Keeping on track: Exploring socio-developmental challenges faced by young people with ongoing pain and their families***

Award holders: *Dr Abbie Jordan (University of Bath; PI), Dr Line Caes (University of Stirling) & Professor Christopher Eccleston (University of Bath)*

Project aims:
We know that young people who experience ongoing pain report difficulties with engaging in everyday teenage activities, such as visiting friends and becoming more independent from parents. We also know that young people report a sense of being developmentally 'behind' their friends, yet we know nothing about what this sense of being 'behind' looks like. This PhD studentship will involve conducting a series of studies to provide a detailed account of the challenges young people and their families face when young people with pain engage in everyday teenage activities. Specifically, the studies will provide a comprehensive review of existing evidence; momentary recordings over one year on young people's thoughts and experiences of engaging with social activities despite having pain; interviews with family members to gain a familial perspective and will also include obtaining the perspective of both young people with and without pain on having to cancel or alter plans with friends due to pain.

Grant Title: *Novel long-acting analgesic for chronic pain*

Award Holders: *Prof Bazbek Davletov, University of Sheffield*

Project Aims:

Botulinum neurotoxin type A (BoNT/A) can induce analgesia in several chronic pain conditions in addition to its more well-known paralytic action at the neuromuscular junction. The long-lasting nerve blocking effect can last up to 6 months in humans (4) and therefore BoNT/A represents an attractive candidate to develop a new approach to treatment of chronic pain.

Our lab is currently investigating new technologies in order to re-engineer BoNT so that the long-lasting nerve-blocking actions remain, but the molecule is re-targeted away from the neuromuscular junction toward sensory and nociceptive neuronal populations. In collaboration with colleagues at Leeds University, we engineered a novel molecule combining the enzymatic part of the native BoNT/A with a neurone-targeting Cholera toxin subunit B termed **ChoBot**. The cholera toxin B subunit binds to cellular surfaces via its receptor monosialoanglioside (GM1), where it is internalised and transported into neurons. In normal conditions, the GM1 ganglioside is present in a subpopulation of myelinated sensory neurones. However, following nerve injury it has been reported that a phenotypic switch can result in more nociceptive afferents taking up the cholera toxin (5,6). Therefore, by utilising our unique technologies and targeting nerve blocking botulinum molecules towards more specifically pain-sensing neurones rather than motor neurones, we hope to retain the long-lasting effects of native BoNT catalytic action but reduce their associated highly paralytic effects and therefore produce a more desirable and safer novel analgesic.

Grant Title: Cerebrospinal fluid- a window into how our central nervous system processes pain?

Award Holder: *Dr Franziska Denk, King's College London*

Project Aims

This study aims to find out whether we can use cerebrospinal fluid (which bathes our brain and spinal cord) to better understand chronic pain.

Research suggests that immune cells in the spinal cord play an important role in maintaining painful conditions, especially when they are caused by direct damage to nerves. Yet, for obvious reasons, studying these cells directly is impossible in people.

Our team want to investigate whether we can instead assess the state of these cells by looking at the cerebrospinal fluid (CSF). It is known that substances released in spinal cord can leak into the fluid. Also, there are immune cells swimming about in the CSF – just across from spinal cord immune cells, and it is possible that these cell types are talking to each other.

To test whether this is the case, we are analysing CSF generously donated by individuals who are undergoing neuromodulation surgery to treat their pain. We look at the substances in the fluid, as well as the immune cells, with a technique called RNA sequencing.

BTMR Limited
Statutory Auditor
Century Buildings
14 St Mary's Parsonage
Manchester
M3 2DF

Opinion
We have audited the financial statements of The Pain Relief Foundation (the 'charitable company') for the year ended 5 April 2021 which comprise the Statement of Financial Activities, the Balance Sheet, and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:
- give a true and fair view of the state of the charitable company's affairs as at 5 April 2021 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 Companies Act 2006.

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

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

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

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

Other information
The trustees are responsible for the other information. The other information comprises the information included in the Annual Report, other than the financial statements and our Report of the Independent Auditors thereon.

Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements, or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether 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 where the Charities (Accounts and Reports) Regulations 2008 requires us to report to you if, in our opinion:
- the information given in the Report of the Trustees is inconsistent in any material respect with the financial statements; or
- the charitable company has not kept adequate accounting records; or
- the financial statements are not in agreement with the accounting records and returns; or
- we have not received all the information and explanations we require for our audit.

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

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

Our responsibilities for the audit of the financial statements
We have been appointed as auditors 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 a Report of the Independent Auditors 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 approach to identifying and assessing the risks of material misstatement in respect of irregularities, including fraud and non-compliance with laws and regulations, was as follows:

- we identified the significant laws and regulations applicable to the charitable company which we considered could have a direct material effect on the financial statements or the operations of the charitable company. Said laws and regulations include but are not limited to, the Companies Act 2006, taxation legislation and data protection, anti-bribery and employment legislation;
- the identified laws and regulations were communicated within the audit team regularly and the team remained alert to instances of non-compliance throughout the audit.

We assessed the susceptibility of the charitable company's financial statements to material misstatement, including obtaining an understanding of how fraud might occur. We also addressed the risk of fraud through management bias and override of controls by;

- updating and reviewing our knowledge of the charitable company, its officers and internal financial function, together with their systems and internal controls. This included making enquiries of management as to their knowledge of actual, suspected, and alleged fraud; and
- considering the internal controls in place to mitigate risks of fraud and non-compliance with laws and regulations. We concluded that whilst the charitable company had controls in place that were appropriate to its size and the nature of its activities, we could not rely on those systems and internal controls exclusively for the purposes of our audit work. We therefore adopted a substantive and transactional approach to our audit, seeking to verify figures in the balance sheet to third party evidence and transactions within the Income Statement to external independent documentation.
- We did not review every transaction. However, we adopted an approach based on testing a sample of transactions. In choosing our sample, we tested transactions that were material in nature and in addition a random sample of other transaction. By choosing transactions of a material nature, our audit work is designed to detect material misstatements. The use of random testing on other transactions is designed to detect other irregularities and the operation of the charitable company's internal control systems generally. If exceptions were noted, our audit work was expanded to test more transactions with a view to determining whether the exception was of an isolated nature;
- We performed analytical procedures to identify any unusual or unexpected relationships;
- We tested journal entries to identify unusual transactions and investigated the rationale behind significant or unusual transactions.

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

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

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

Use of our report

This report is made solely to the charitable company'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 charitable company's trustees those matters we are required to state to them in an auditors' report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and the charitable company's trustees as a body, for our audit work, for this report, or for the opinions we have formed.

BTMR Limited.

BTMR Limited
Statutory Auditor
Eligible to act as an auditor in terms of Section 1212 of the Companies Act 2006
Century Buildings
14 St Mary's Parsonage
Manchester
M3 2DF

Date: 21 September 2021.

Statement of Financial Activities
for the Year Ended 5 April 2021

	Notes	Unrestricted funds £	Restricted fund £	5.4.21 Total funds £	5.4.20 Total funds £
INCOME AND ENDOWMENTS FROM					
Donations and legacies	3	**113,694**	-	**113,694**	445,186
Other trading activities	4	**5,673**	-	**5,673**	50,306
Investment income	5	**78,888**	-	**78,888**	92,171
Total		**198,255**	-	**198,255**	587,663
EXPENDITURE ON					
Raising funds					
Other trading activities	6	**14,398**	-	**14,398**	14,574
Investment management costs	7	**11,476**	-	**11,476**	12,063
		25,874	-	**25,874**	26,637
Charitable activities	8				
Research		**360,297**	**534**	**360,831**	429,989
Education		**8,397**	-	**8,397**	6,298
Total		**394,568**	**534**	**395,102**	462,924
Net gains/(losses) on investments		**415,190**	-	**415,190**	(207,304)
NET INCOME/(EXPENDITURE)		**218,877**	**(534)**	**218,343**	(82,565)
RECONCILIATION OF FUNDS					
Total funds brought forward		**2,720,433**	**1,578**	**2,722,011**	2,804,576
TOTAL FUNDS CARRIED FORWARD		**2,939,310**	**1,044**	**2,940,354**	2,722,011

The notes form part of these financial statements

Balance Sheet
5 April 2021

	Notes	Unrestricted funds £	Restricted fund £	5.4.21 Total funds £	5.4.20 Total funds £
FIXED ASSETS					
Tangible assets	11	**84,894**	**1,602**	**86,496**	59,408
Investments	12	**2,805,265**	**-**	**2,805,265**	2,371,459
		2,890,159	**1,602**	**2,891,761**	2,430,867
CURRENT ASSETS					
Stocks	13	**776**	**-**	**776**	486
Debtors	14	**11,433**	**-**	**11,433**	9,872
Cash at bank and in hand		**83,428**	**-**	**83,428**	314,711
		95,637	**-**	**95,637**	325,069
CREDITORS					
Amounts falling due within one year	15	**(46,486)**	**(558)**	**(47,044)**	(33,925)
NET CURRENT ASSETS		**49,151**	**(558)**	**48,593**	291,144
TOTAL ASSETS LESS CURRENT LIABILITIES		**2,939,310**	**1,044**	**2,940,354**	2,722,011
NET ASSETS		**2,939,310**	**1,044**	**2,940,354**	2,722,011
FUNDS	17				
Unrestricted funds:					
General fund				**73,854**	314,579
Designated unrestricted				**2,865,456**	2,405,854
				2,939,310	2,720,433
Restricted funds:					
Restricted fund				**1,044**	1,578
TOTAL FUNDS				**2,940,354**	2,722,011

The notes form part of these financial statements

continued...

Balance Sheet - continued
5 April 2021

The charitable company is entitled to exemption from audit under Section 477 of the Companies Act 2006 for the year ended 5 April 2021.

The members have not deposited notice, pursuant to Section 476 of the Companies Act 2006 requiring an audit of these financial statements.

The trustees acknowledge their responsibilities for

(a) ensuring that the charitable company keeps accounting records that comply with Sections 386 and 387 of the Companies Act 2006 and

(b) preparing financial statements which give a true and fair view of the state of affairs of the charitable company as at the end of each financial year and of its surplus or deficit for each financial year in accordance with the requirements of Sections 394 and 395 and which otherwise comply with the requirements of the Companies Act 2006 relating to financial statements, so far as applicable to the charitable company.

These financial statements have been audited under the requirements of Section 145 of the Charities Act 2011.

The financial statements were approved by the Board of Trustees and authorised for issue on 21st September 2021 and were signed on its behalf by:

D Cain - Chairman - Trustee

The notes form part of these financial statements

1. DESIGNATED FUND

The designated fund represents sums set aside, out of unrestricted funds, to meet the ongoing costs of the chair of Professor of Pain.

	2021	2020
Investment income:	£	£
Interest received	2,849	3,150
Dividends	76,039	89,019
Realised gains on investments sold	2,683	40,372
Unrealised gain on revaluing investments to market value	-	-
Total designated income	81,571	132,541
Less:		
Realised loss on sale of investments	-	-
Unrealised profit/(loss) on revaluing investments to market value	412,507	(247,676)
Investment manager's fees	(11,476)	(12,063)
Expenditure out of designated funds	-	-
Transfer of net expenditure to General Fund	(23,000)	(231,500)
Net designated (expenditure)/income	**459,602**	**(358,698)**

2. ACCOUNTING POLICIES

Basis of preparing the financial statements
The financial statements of the charity, which is a public benefit entity under FRS102, have been prepared in accordance with the 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) (effective 1 January 2015)', and the Charities Act 2011. The financial statements have been prepared under the historical cost convention with the exception of investments which are included at market value.

Income
All income is recognised in the Statement of Financial Activities once the charity has entitlement to the funds and it is probable that the income will be received, and the amount can be measured reliably.

Expenditure
Liabilities are recognised as expenditure as soon as there is a legal or constructive obligation committing the charity to that expenditure, it is probable that a transfer of economic benefits will be required in settlement and the amount of the obligation can be measured reliably. Expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all costs related to the category. Where costs cannot be directly attributed to particular headings, they have been allocated to activities on a basis consistent with the use of resources.

Grants offered subject to conditions, such as duration of the grant, which have not been met at the year end date are noted as a commitment but not accrued as expenditure.

Allocation and apportionment of costs
Certain expenditure is directly attributable to specific activities and has been included in those cost categories. Certain other costs, which are attributable to more than one activity, are apportioned across categories on the basis of an estimate of the proportion of time spent by staff on those activities.

Tangible fixed assets
Depreciation is provided at the following annual rates in order to write off each asset over its estimated useful life.

Long leasehold	- Over the period of the lease
Plant and machinery	- 25% on reducing balance and 15% on cost
Fixtures and fittings	- 25% on cost

Expenditure on individual assets which is less than £500 is not capitalised.

Stocks
Stocks are valued at the lower of cost and net realisable value, after making due allowance for obsolete and slow moving items.

continued...

2. ACCOUNTING POLICIES - continued

Taxation
The charity is exempt from corporation tax on its charitable activities.

Fund accounting
Unrestricted funds can be used in accordance with the charitable objectives at the discretion of the trustees.

Restricted funds can only be used for particular restricted purposes within the objects of the charity. Restrictions arise when specified by the donor or when funds are raised for particular restricted purposes.

Designated fund

The Designated fund represents the investment and related income which the trustees have designated to be used specifically for funding the chair of the Professor of Pain.

Restricted fund

The Restricted fund represents the income which was made available for the purposes of acquiring a Transcranial Magnetic Scanner and sponsorships received. The related expenditure represent money spent in relation to restricted income.

Hire purchase and leasing commitments
Rentals paid under operating leases are charged to the Statement of Financial Activities on a straight line basis over the period of the lease.

Pension costs and other post-retirement benefits
The charitable company operates a defined contribution pension scheme. Contributions payable to the charitable company's pension scheme are charged to the Statement of Financial Activities in the period to which they relate.

Financial instruments
Financial instruments are classified and accounted for according to the substance of the contractual arrangement, as either financial assets, financial liabilities, or equity instruments. An equity instrument is any contract that evidences a residual interest in the assets of the company after deducting all of its liabilities.

Investments

Investments are made by the trustees acting through and on advice of professional investment managers. The investment strategy focuses on low to medium risk investments.

Investment gains and losses

Gains and losses which arise on the sale of investments during the year are termed "Realised gains and losses". Those gains and losses that arise from the disclosure of investments at market value as at 5th April each year are termed "Unrealised gains and losses".

Governance costs

Governance costs relate to the general running of the charity, as opposed to fundraising or charitable activities expenditure. They include audit and legal fees, accountancy, and related support costs.

Costs of generating funds

The costs of fundraising events include the costs incurred by the Charity in arranging golf days, appeals and sponsorships and are included in the SOFA on an accruals basis.

Charitable activities - Grants payable

Expenditure on charitable activities includes grants payable to individuals to conduct research into pain, its causes and relief, and to disseminate research information together with related direct costs and support costs, all of which are accounted for on an accruals basis.

continued...

3. DONATIONS AND LEGACIES

	5.4.21	5.4.20
	£	£
Gifts	**43,172**	77,165
Gift aided donations	**4,446**	5,839
Tax recovered on gift aided donations	**1,099**	1,465
Legacies	**64,977**	358,888
Grants	**-**	1,700
Sundry income	**-**	129
	113,694	445,186

Grants received, included in the above, are as follows:

	5.4.21	5.4.20
	£	£
Travel	**-**	1,700

4. OTHER TRADING ACTIVITIES

	5.4.21	5.4.20
	£	£
Books leaflets tapes	**-**	52
Sponsorships	**59**	30,455
Meeting fees	**5,614**	19,799
	5,673	50,306

5. INVESTMENT INCOME

	5.4.21	5.4.20
	£	£
Listed investments	**78,888**	92,170
Deposit account interest	**-**	1
	78,888	92,171

6. OTHER TRADING ACTIVITIES

	5.4.21	5.4.20
	£	£
Purchases	**-**	363
Staff costs	**14,398**	14,211
	14,398	14,574

continued...

7. INVESTMENT MANAGEMENT COSTS

	5.4.21	5.4.20
	£	£
Portfolio management	11,476	12,063

8. CHARITABLE ACTIVITIES COSTS

	Direct Costs	Grant funding of activities	Support costs	Totals
	£	£	£	£
Research	73,416	228,920	58,495	360,831
Education	518	-	7,879	8,397
	73,934	228,920	66,374	369,228

9. NET INCOME/(EXPENDITURE)

Net income/(expenditure) is stated after charging/(crediting):

	5.4.21	5.4.20
	£	£
Auditors' remuneration	5,000	5,000
Auditors' remuneration for non-audit work	3,840	3,340
Depreciation - owned assets	16,749	6,630
Other operating leases	6,475	10,000

10. TRUSTEES' REMUNERATION AND BENEFITS

No trustees' remuneration or other benefits were paid for the year ended 5 April 2021 nor for the year ended 5 April 2020.

Trustees' expenses

There were no trustees' expenses paid for the year ended 5 April 2021 nor for the year ended 5 April 2020.

11. TANGIBLE FIXED ASSETS

	Long leasehold	Plant and machinery	Fixtures and fittings	Totals
	£	£	£	£
COST				
At 6 April 2020	114,302	160,566	324,487	599,355
Additions	-	43,837	-	43,837
At 5 April 2021	114,302	204,403	324,487	643,192
DEPRECIATION				
At 6 April 2020	64,990	154,681	320,276	539,947
Charge for year	3,266	12,430	1,053	16,749
At 5 April 2021	68,256	167,111	321,329	556,696
NET BOOK VALUE				
At 5 April 2021	46,046	37,292	3,158	86,496
At 5 April 2020	49,312	5,885	4,211	59,408

continued...

12. FIXED ASSET INVESTMENTS

	Listed investments £
MARKET VALUE	
At 6 April 2020	**2,371,459**
Additions at cost	**78,502**
Disposals at book cost	**(57,203)**
Change in Market Value	**412,507**
At 5 April 2021	**2,805,265**
NET BOOK VALUE	
At 5 April 2021	**2,805,265**
At 5 April 2020	2,371,459

Overseas investment assets amounted to £1,188,671 (2020: £880,907).

13. STOCKS

	5.4.21 £	5.4.20 £
Finished goods	**776**	486

14. DEBTORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	5.4.21 £	5.4.20 £
Tax	**1,099**	1,465
Prepayments and accrued income	**10,334**	8,407
	11,433	9,872

continued...

15. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	5.4.21	5.4.20
	£	£
Bank loans and overdrafts (see note 16)	508	508
Social security and other taxes	159	159
Accruals and deferred income	46,377	33,258
	47,044	33,925

16. MOVEMENT IN FUNDS

	At 6.4.20	Net movement in funds	Transfers between funds	At 5.4.21
	£	£	£	£
Unrestricted funds				
General fund	314,579	(263,725)	23,000	73,854
Designated unrestricted	2,405,854	482,602	(23,000)	2,865,456
	2,720,433	218,877	-	2,939,310
Restricted funds				
Restricted fund	1,578	(534)	-	1,044
TOTAL FUNDS	2,722,011	218,343	-	2,940,354

Net movement in funds, included in the above are as follows:

	Incoming resources	Resources expended	Gains and losses	Movement in funds
	£	£	£	£
Unrestricted funds				
General fund	119,367	(383,092)	-	(263,725)
Designated unrestricted	78,888	(11,476)	415,190	482,602
	198,255	(394,568)	415,190	218,877
Restricted funds				
Restricted fund	-	(534)	-	(534)
TOTAL FUNDS	198,255	(395,102)	415,190	218,343

continued...

16. MOVEMENT IN FUNDS - continued

Comparatives for movement in funds

	At 6.4.19 £	Net movement in funds £	Transfers between funds £	At 5.4.20 £
Unrestricted funds				
General fund	40,409	42,670	231,500	314,579
Designated unrestricted	2,764,551	(127,197)	(231,500)	2,405,854
	2,804,960	(84,527)	-	2,720,433
Restricted funds				
Restricted fund	(384)	1,962	-	1,578
TOTAL FUNDS	2,804,576	(82,565)	-	2,722,011

Comparative net movement in funds, included in the above are as follows:

	Incoming resources £	Resources expended £	Gains and losses £	Movement in funds £
Unrestricted funds				
General fund	492,793	(450,123)	-	42,670
Designated unrestricted	92,170	(12,063)	(207,304)	(127,197)
	584,963	(462,186)	(207,304)	(84,527)
Restricted funds				
Restricted fund	2,700	(738)	-	1,962
TOTAL FUNDS	587,663	(462,924)	(207,304)	(82,565)

A current year 12 months and prior year 12 months combined position is as follows:

	At 6.4.19 £	Net movement in funds £	Transfers between funds £	At 5.4.21 £
Unrestricted funds				
General fund	40,409	(221,055)	254,500	73,854
Designated unrestricted	2,764,551	355,405	(254,500)	2,865,456
	2,804,960	134,350	-	2,939,310
Restricted funds				
Restricted fund	(384)	1,428	-	1,044
TOTAL FUNDS	2,804,576	135,778	-	2,940,354

continued...

16. MOVEMENT IN FUNDS - continued

A current year 12 months and prior year 12 months combined net movement in funds, included in the above are as follows:

	Incoming resources £	Resources expended £	Gains and losses £	Movement in funds £
Unrestricted funds				
General fund	612,160	(833,215)	-	(221,055)
Designated unrestricted	171,058	(23,539)	207,886	355,405
	783,218	(856,754)	207,886	134,350
Restricted funds				
Restricted fund	2,700	(1,272)	-	1,428
TOTAL FUNDS	785,918	(858,026)	207,886	135,778

17. RELATED PARTY DISCLOSURES

There were no related party transactions for the year ended 5 April 2021.

18. FINANCIAL COMMITMENTS

During the year grants payable to researchers were approved in the total amount of £667,789 of which £451,818 remains payable in respect of future periods.

Detailed Statement of Financial Activities
for the Year Ended 5 April 2021

	5.4.21 £	5.4.20 £
INCOME AND ENDOWMENTS		
Donations and legacies		
Gifts	**43,172**	77,165
Gift aided donations	**4,446**	5,839
Tax recovered on gift aided donations	**1,099**	1,465
Legacies	**64,977**	358,888
Grants	**-**	1,700
Sundry income	**-**	129
	113,694	445,186
Other trading activities		
Books leaflets tapes	**-**	52
Sponsorships	**59**	30,455
Meeting fees	**5,614**	19,799
	5,673	50,306
Investment income		
Listed investments	**78,888**	92,170
Deposit account interest	**-**	1
	78,888	92,171
Total incoming resources	**198,255**	587,663
EXPENDITURE		
Other trading activities		
Purchases	**-**	363
Wages	**13,900**	13,700
Social security	**350**	372
Pensions	**148**	139
	14,398	14,574
Investment management costs		
Portfolio management	**11,476**	12,063
Charitable activities		
Wages	**48,980**	47,474
Social security	**1,631**	1,803
Pensions	**1,484**	1,390
Student essay costs	**75**	1,157
Venue & meeting costs	**4,353**	15,993
Food costs	**-**	9,358
Sundry	**661**	4,762
Depreciation of tangible fixed assets	**16,750**	6,632
Grants to individuals	**228,920**	277,154
	302,854	365,723

This page does not form part of the statutory financial statements

THE PAIN RELIEF FOUNDATION

Detailed Statement of Financial Activities
for the Year Ended 5 April 2021

	5.4.21 £	5.4.20 £
Support costs		
Management		
Other operating leases	**6,475**	10,000
Rates and water	**17,505**	17,505
Insurance	**2,422**	2,334
Telephone	**959**	209
Postage and stationery	**1,559**	3,118
Advertising	**4,094**	3,549
Sundries	**577**	577
Travel	**-**	2,139
Computer software	**955**	705
Credit card charges	**309**	315
	34,855	40,451
Finance		
Bank charges	**188**	54
Information technology		
Repairs and renewals	**6,134**	4,655
Governance costs		
Wages	**15,000**	14,200
Social security	**412**	464
Pensions	**594**	556
Auditors' remuneration	**5,000**	5,000
Auditors' remuneration for non audit work	**3,840**	3,340
Postage and stationery	**196**	360
Legal fees	**155**	1,484
	25,197	25,404
Total resources expended	**395,102**	462,924
Net (expenditure)/income before gains and losses	**(196,847)**	124,739
Realised recognised gains and losses		
Net investment gains/ (losses)	**2,683**	40,372
Net (expenditure)/income	**(194,164)**	165,111



Pain Relief Foundation