

Delivering against the odds

Annual Report and Accounts 2020-21

**BREAST
CANCER
NOW** The research
& care charity

‘The hardest time of day is always when the kids go to bed and I’m on my own, or when I’m asked to “cook that dish that mum used to make” but I don’t know the recipe. That’s when I miss her most.’

John lost his wife Julie to incurable secondary breast cancer when she was just 41.

Julie passed away on Mother’s Day, leaving behind a daughter of 10 and a son aged seven. We’re working to ensure that by the time Julie’s children have grown up to have families of their own, everyone who is diagnosed with breast cancer not only lives but is supported to live well.

Our vision is to achieve this by 2050. This report sets out the progress we have made along that pathway in the period from 1 August 2020 to 31 July 2021.



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DETERMINED NOT DAUNTED

How we have turned a year of unprecedented challenge into a year of unquestionable progress.

A message from our Chief Executive, Delyth Morgan and our Chair of Trustees, Jill Thompson...



Delyth Morgan,
Chief Executive



Jill Thompson,
Chair of Trustees

Last year, we titled our annual report 'A year of resilience' having recently weathered those first few months of the COVID-19 pandemic, when everything was so uncertain.

Resilience is a quality we've continued to draw on over the past 12 months, but this has also been a year of determination and delivering against the odds. Because for us, not delivering for people with breast cancer is simply not an option.

We're the biggest charity focussing on the biggest cancer in women and creating the biggest impact through our work. Our role is vital. And as you'll see from this report, we've continued to make important progress - despite daunting challenges.

For example, when the pandemic and repeated lockdowns made it difficult for cancer patients to access essential support, we immediately developed new online services to meet their needs, whilst also keeping our phone lines open and upweighting our presence on social media. This swift scaling up couldn't have contrasted more with the experience of our researchers. Many were forced to leave their labs and to put projects on hold through

repeated lockdowns. And of course, strict social distancing rules also scuppered many of the fundraising routes we rely on. Earlier this year, we were anticipating a drop in fundraised income of more than one third. However, thanks to the hard work of our colleagues and the fantastic generosity and kindness of our supporters, our fundraised income exceeded our expectations by a considerable margin. For example, our virtual funding reaped impressive real-life results and we raised £6.3 million through Facebook fundraising alone – a huge increase from the £1.4 million we had raised in the previous year.

This meant we could continue to provide a wealth of information to people at all stages of diagnosis and treatment as well as making our printed information available to breast cancer clinics up and down the country.

Overall, we finished the financial year with a surplus of around £10.3 million including investment gains. This is terrific news - and a big step towards the £86 million we plan to invest in Research, Services and Influencing over the next four years.

You'll see more detail on specific funding allocations in the financial review on page 62. Plus our recently launched strategy for 2020 to 2025 - Turning the Tide - sets out our five strategic objectives, which we also

report on here. We know that we must see measurable progress in each of these areas to achieve our overall vision and ensure that by 2050, everyone diagnosed with breast cancer will not only live but be supported to live well.

We know what's at stake. And we know that with your continued support, and the commitment of our staff and volunteers, we can make this happen.

'Breast Cancer Now is a fantastic charity. We're great at bringing everyone together; we're funding the most amazing researchers and delivering on what we set out to achieve, which is to be very effective at providing help and support today, while also creating a better and more hopeful future' – Delyth

We're looking forward to another year of hard work and progress. And we very much hope you'll continue with us on this journey.



Delyth Morgan
Chief Executive



Jill Thompson
Chair of Trustees

The Trustees are aware of the Charity Commission's guidance on public benefit and confirm that they have complied with the duty in section 17 of the Charities Act 2011.

We are at a unique point in the history of breast cancer. Survival rates have doubled in the UK in the last forty years, but more people than ever are now being diagnosed with breast cancer.

If we don't want to go backwards and see more lives being lost, we need to push forward and make progress towards fewer cases, better treatments and an improved quality of life for everyone affected by breast cancer.

In this report, you can see how we are beginning to turn that tide and the difference this will make for everyone affected by breast cancer.

HOW WE'RE TURNING THE TIDE ON BREAST CANCER

We're already funding world-class research, providing essential support and care, and campaigning to improve NHS services (and more). But to ensure that by 2050, everyone diagnosed with breast cancer lives and is supported to live well, we need to make more progress against the disease in the next 30 years than at any previous time in our history.

That means making immediate, measurable progress in the areas set out below. Our five strategic objectives are:

- To work to improve treatments, care and services for those affected by secondary breast cancer**
 So that fewer lives are lost to secondary breast cancer – and fewer people feel forgotten by a system focused on 'cure'. *See how we're doing on page 10.*
- To improve support for the physical and mental health, and the emotional wellbeing of people affected by breast cancer**
 So that no one has to face breast cancer alone and unsupported. *See how we're doing on page 18.*
- To develop kinder, smarter treatments for people with breast cancer and to improve access to them for all who could benefit**
 So that people with breast cancer can benefit from more effective treatments that don't rob them of their quality of life. *See how we're doing on page 24.*
- To improve detection and diagnosis of breast cancer**
 So that everyone with breast cancer has the very best chance of survival. *See how we're doing on page 30.*
- To further our understanding of why breast cancer occurs and spreads**
 So that fewer people develop breast cancer in the first place. *See how we're doing on page 36.*

Strategic objective

TO WORK TO IMPROVE TREATMENTS, CARE AND SERVICES FOR THOSE AFFECTED BY SECONDARY BREAST CANCER



In the UK, an estimated 35,000 people are living with secondary breast cancer. Whilst it can be controlled, it can't be cured and every month, around 1,000 more women will run out of options and die of the disease.

For decades, scientists have been trying to understand why breast cancer spreads to other parts of the body, where it becomes incurable secondary breast cancer.

For those affected, there's often little choice but to commit to a gruelling treatment regime for the rest of their lives. Often, they will experience horrendous side effects, from sickness and difficulty sleeping to streaming eyes and intense nerve pain, as well as the anxiety of constant appointments and scans. And even then, there's no guarantee that the treatment will carry on working.

Also, breast cancer services are typically designed to meet the needs of people with primary breast cancer where the focus is on 'cure'. As a result, many people with secondary breast cancer express how forgotten and alone they feel - and how little their experiences are understood.

We want everyone diagnosed with secondary breast cancer to have the tailored support they need. And we want them to know that new and potentially game-changing treatments and approaches are being actively pursued, so that their hope for the future is firmly grounded.

To this end, we have been working hard in the following areas:

'Most people just don't understand what secondary breast cancer is and that there is no "getting better". The treatment I'm on is the last targeted treatment available on the NHS. My best hope is to live long enough for the science to come up with something else to keep me going... But I am running out of options.'

Claire, who was diagnosed with breast cancer that had spread to her bones in 2015



IN CAMPAIGNING...

...to build understanding and improve access to drugs and other forms of support. We have been:

SECURING FUNDING FOR A NATIONAL SECONDARY BREAST CANCER AUDIT

In May 2021, NHS England announced that it would fund the first ever secondary breast cancer audit, something we and our supporters had long campaigned for.

We need this audit to provide much-needed information about the number of people living with secondary breast cancer, as well as their experiences and outcomes, so we can make targeted and effective improvements.

To achieve this breakthrough, we worked closely with the All-Party Parliamentary Group on Breast Cancer and the Cancer Minister, Jo Churchill, as well as other MPs who came together with clinicians and patient representatives at a roundtable in Parliament to discuss the potential benefits.

We also collaborated with NHS England to develop a detailed proposal setting out what the audit should focus on in order to improve outcomes, and this was championed by clinicians in the field.

We're now working to ensure that the other UK nations follow suit and fund their own audits. Subsequent to the period covered by this report, the Welsh Government has stepped up to make this commitment, which we hope will encourage further take up.

DEVELOPING NEW TOOLS AND RESOURCES TO SUPPORT EARLY DIAGNOSIS

Our work has shown that many people living with secondary breast cancer have experienced avoidable delays in diagnosis, and therefore been prevented from swiftly accessing appropriate treatment and care.

This highlighted a need for new tools and resources for GPs and other primary care professionals to help them recognise cases of secondary breast cancer.

We have therefore been working with GatewayC, a free online cancer education platform, to develop a new course, which supports them in recognising the symptoms as an aid to their decision-making.

This course is now being rolled out in England, and we are working with GatewayC to promote it and encourage take up by as many GPs as possible. We're also keen to see similar resources available for all GPs across the UK and we will continue to call for this as part of our campaigning.

SHARING THE SIGNS AND SYMPTOMS

To coincide with the start of the new course on the GatewayC platform, we distributed a 'Secondary signs and symptoms' information pack - including a poster, a leaflet detailing the signs and symptoms of recurrence, helpful links to our website, information on our support services and information on the breast cancer recurrence training course offered through GatewayC in England - to 1,000 GP surgeries and 53 hospitals across the UK.

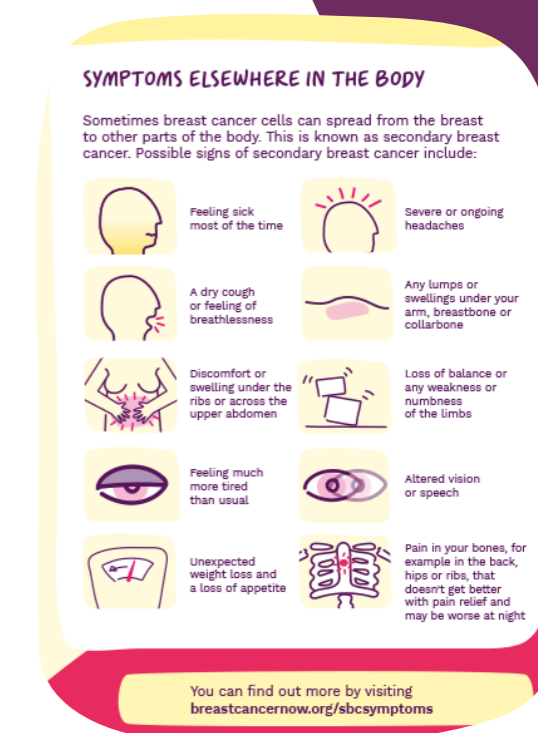
We also produced advertorials discussing how to tackle delays in diagnosing metastatic breast cancer, which featured in key GP and primary care publications such as Pulse and the British Journal of GPs.

And in July 2021, the secondary signs and symptoms information page was among our top ten most visited webpages, while the leaflet was in our top ten for information downloads.

SECURING NICE AND SMC APPROVAL FOR CANCER DRUGS ON THE NHS

In February 2021, NICE announced it was provisionally unable to approve the drug combination abemaciclib (Verzenio) with fulvestrant (Faslodex) for routine use on the NHS following its time on the Cancer Drugs Fund. This innovative treatment could help people with a certain type of secondary breast cancer to live well for longer (specifically those with hormone receptor positive, HER2 negative secondary breast cancer after prior hormone therapy).

We immediately submitted a consultation response, with over 60 quotes from women who shared their experience of this treatment and why they believed it was so important that it remain an option on the NHS. We were invited to the second NICE committee meeting, where we put forward our case and also met with the



Signs and symptoms of secondary breast cancer sent to GP surgeries across the UK

drug company to ensure they were doing everything they could, including considering additional discounts.

In addition, we issued a statement to the media calling for NICE, NHS England and the manufacturer Lilly UK to work together to explore all possible solutions to see this decision reversed. Our comment was included in several national newspapers, including the Daily Mail, The Times and Times Scotland, and the Daily Telegraph, as well as Pharma Times and online media. Following our work, NICE has now decided to recommend abemaciclib with fulvestrant for routine use on the NHS.

In April, we also welcomed the fantastic news that the drug trastuzumab deruxtecan (Enhertu) has been approved for use on the NHS in England via the Cancer Drugs Fund. Having worked closely

IN PLATFORM BUILDING...

...to ensure people with secondary breast cancer have their voices heard. We have been:

ENSURING OUR CAMPAIGNERS HAVE A SEAT AT THE TABLE

On World Cancer Day (4 February 2021), supporter and patient advocate, Claire Myerson took part in a roundtable hosted by the All-Party Parliamentary Group on Breast Cancer (APPGBC), for which Breast Cancer Now is secretariat. The APPGBC exists to raise the profile of breast cancer issues within parliament, and the discussion focused on the need for and how best to improve data collection on secondary breast cancer. In her final remarks, Claire noted how she was tired of waiting for progress, using Voltaire's famous quote 'Perfect is the enemy of good' and adding 'We just need to start'.

This preceded the announcement in May 2021 that NHS England would now fund the first-ever secondary breast cancer audit.

KEEPING SECONDARY BREAST CANCER ON THE GOVERNMENT'S AGENDA

Following May's elections, we held webinars with newly elected politicians in Scotland and Wales.

In Scotland, the subject was secondary breast cancer. Our campaigners, Ally, Jane, Jen, and Lesley all presented to MSPs, along with our CEO Delyth. They shared their own experiences of diagnosis and talked about the need for an audit in Scotland and the importance of clinical trials and specialist nursing support. In Wales, the subject was secondary

breast cancer and breast reconstruction. Supporters Tassia and Janet shared their experience of diagnosis and the delays women face in trying to access breast reconstruction surgery.

While this work focused directly on informing politicians, we also worked with supporters to create a series of personal stories for our website, which shine a light on the different experiences of people with secondary breast cancer, helping to grow understanding more widely.

IN RESEARCH...

...to develop more effective treatments and quality of life approaches. We have been:

INVESTIGATING NEW WAYS TO TREAT BREAST CANCER THAT HAS SPREAD TO THE BRAIN

In July 2021, we committed to fund a new research project under the Breast Cancer Now Catalyst Programme, which is testing to see if drugs called PARP inhibitors, such as talazoparib (Talzenna), could be used to treat secondary breast cancers that have spread to the brain.

Professor Leonie Young from the Royal College of Surgeons in Ireland will use tumours and breast cancer cells donated by people with breast cancer to investigate this in a lab.



Professor Leonie Young

The hope is that this work will lead to a clinical trial evaluating the use of talazoparib to treat such cancers. It could also reveal a group of patients who would benefit from PARP inhibitors such as talazoparib, and a new way to select the treatments that would most help this group.

IDENTIFYING POTENTIAL NEW TARGETS FOR BREAST CANCER TREATMENTS

In June 2021, researchers from the Breast Cancer Now Toby Robins Research Centre at The Institute of Cancer Research, London, found that when cells surrounding a tumour can't make a molecule called Endo180, breast cancer's ability to grow and spread to other parts of the body is extremely limited.

The next step is to understand whether Endo180 would be a suitable target for new breast cancer treatments.

An approach like this would block breast cancer's ability to spread and become incurable. It could potentially work for all types of breast cancer as well as other cancers.

with one of our supporters to input into the NICE appraisal of this new drug, it marks a huge step forward for hundreds of patients with HER2 positive incurable secondary breast cancer, as this treatment can delay the use of chemotherapy and potentially offer patients more time. We are now working to ensure this treatment is also made available for women in Scotland.

In addition, we helped to secure access to the secondary breast cancer drug ribociclib (Kisqali) with fulvestrant for routine use after its time on the Cancer Drugs Fund. And after we contributed to the SMC appraisal process, the drug combination atezolizumab (Tecentriq) with nab-paclitaxel (Abraxane) was approved by the SMC for use on the NHS in Scotland for certain patients with triple negative secondary breast cancer.

IN TAILORED SUPPORT...

...to ensure that people with secondary breast cancer receive the information and services they need. We have been:

IMPROVING THE SUPPORT ON OFFER THROUGH OUR OWN AND OTHER SERVICES

We recorded new video content for our Living with Secondary Breast Cancer Online programme and ran live information sessions with expert speakers. These included a two-part session on creativity for self-care and one on pain management. We also provided UK-wide and regional online group meetings facilitated by therapists.

Overall, 466 people accessed this service with a number attending multiple sessions. One participant observed:

'It took me many months to pluck up courage to join the virtual meetings, but they are now so important to me. I have learnt so much, feel so connected to the different women and the support you have given me has really helped me make the most of my life.'

We also developed our first virtual Younger Women Together with Secondaries event which supported 17 women with incurable secondary breast cancer, all under the age of 45. The programme included a Q&A with oncologists, as well as sessions on dealing with a life-limiting illness and connecting with others. One participant said:

'I haven't found any other specific support out there for younger women with secondaries. This group is desperately needed, which is evident by all the women's participation and comments, and how we relate to each other.'

This event resulted in the development of a monthly online meet-up for this group; a vital point of connection given that some of the women diagnosed during the COVID-19 pandemic had never met another woman of the same age with incurable breast cancer.

In addition, our Patient Experience Team delivered the Breast Cancer Now Service Pledge in partnership with five NHS secondary breast cancer services in the East of England Cancer Alliance. This identified over 40 improvements across their services for both primary and secondary breast cancer patients and could therefore benefit over 3,000 people every year. Improvements include recruitment of dedicated secondary breast cancer nurses and speaking with patients after surgery to identify their support needs.

Gini Melesi, Head of Transformation, East of England (South) Cancer Alliance, said: 'The Breast Cancer Now Service Pledge provided our breast cancer nurses with an opportunity to turn what their patients tell them into direct actions'.

MAKING TAILORED INFORMATION MORE WIDELY AVAILABLE

As well as updating our existing materials, we continued to produce health information on the ever-growing number of treatments now available to patients with secondary breast cancer, including new information on the drug trastuzumab deruxtecan (Enhertu).

In addition, our website continues to be a vital source of information. The pages on secondary breast cancer were viewed over 430,000 times in the period covered by this report and our 'What is secondary breast cancer?' video continues to be the most popular of our health information downloads, with 9,894 views in the same period.

IMPROVING NURSING CARE IN THE NHS

Our Clinical Nurse Specialist for Secondary Breast Cancer has been working with nurses and cancer support workers, via our Secondary Breast Cancer Nursing Group. In May, the group met at a virtual event on the theme of 'Wellbeing', which was attended by 49 people. Sessions addressed topics such as exercise and physical activity and the importance of diet and nutritional care. Crucially, it also covered the practicalities of encouraging patients to not just think about it, but to actually adopt the behaviours that are known to improve wellbeing.



Catherine, our Clinical Nurse Specialist for Secondary Breast Cancer

Strategic objective

TO IMPROVE SUPPORT FOR THE PHYSICAL AND MENTAL HEALTH, AND THE EMOTIONAL WELLBEING OF PEOPLE AFFECTED BY BREAST CANCER



Currently, around 600,000 people in the UK are living with a breast cancer diagnosis. By 2030, this number is expected to have risen to 1.2 million

When people receive a breast cancer diagnosis, their first thought is often 'am I going to die?'. Then come wave after wave of concerns, including worries about hair loss, body image, work, finances, relationships, caring responsibilities, fertility... it's relentless. Many also struggle with anxiety at the end of their treatment. In fact, in our own survey, more than one quarter (26%) of women taking part in our Moving Forward course said having their hospital treatment come to an end was harder than having a breast removed or going through treatment such as chemotherapy or radiotherapy. That's how alone and lost some people feel.

Having access to the right support alongside people who understand what you're going through is therefore invaluable.

We want everyone affected by breast cancer to be able to access the support they need and to know what their options are, so that they can feel more in control. And we also want to find new and innovative ways for people who've experienced breast cancer to support one another.

To this end, we have been working hard in the following areas:



'I simply wasn't prepared to be told I had breast cancer. It was a bombshell in my life... I had so many questions swirling around in my mind about the treatment, what type of cancer I had, whether it would spread and what this would mean for my work... I felt lost.'

Lurline, who was diagnosed with breast cancer aged 54, after a routine mammogram.

IN TAILORED SUPPORT...

...to better meet the needs of breast cancer patients, both on and offline. We have been:

PROVIDING DEDICATED SERVICES FOR YOUNGER WOMEN WITH BREAST CANCER

We continued to develop our Younger Women Together services with live Q&A sessions with specialists delivered via Zoom. During the period of this report, we supported 189 women under the age of 45, covering topics such as triple negative breast cancer in younger women.

ENHANCING SUPPORT FOR PEOPLE WHO ARE COMING TO THE END OF THEIR TREATMENT

When face-to-face services were suspended due to COVID-19, we acted swiftly to add new dimensions to the digital version of our award-winning four-week Moving Forward course, including a live 'meet the facilitator' session to introduce the course to participants and a live Ask Our Nurses session with a member of our nursing team. Courses now start every week and in the period covered by this report, they supported 1,077 people who are coming to the end of their treatment for primary breast cancer.

PROVIDING ONE-TO-ONE SUPPORT FOR PEOPLE DIAGNOSED WITH PRIMARY BREAST CANCER

We've continued to connect people affected by a primary breast cancer diagnosis with a trained volunteer who has been through a similar experience via our peer support service, Someone Like Me. During the period of this report, we succeeded in making 1,389 matches; our highest ever number. This included support for people suffering from anxiety and loneliness during repeated lockdowns; a new area of focus for us that has proved to be highly beneficial.

PRODUCING TARGETED INFORMATION LEAFLETS TO PROMOTE OUR ONLINE SERVICES

In the spring of 2021, 330 breast care units across the UK received key information about our new online support services – Moving Forward Online, Younger Women Together Online and Living with Secondary Breast Cancer Online – as well as our existing life-changing services on offer for their patients.

Through an integrated marketing approach across direct mail, social media and PR we highlighted the impacts of COVID-19 on people living with breast cancer and made it clear and easy to understand what our services offered and the benefits they could bring.

We are now seeing around 1,000 requests every month from breast care units for information about our support services for their patients – and our activity secured 293 new registrations for our three new online support services.

IN IMPROVING ACCESS...

...to make our services and information more widely available. We have been:

MAKING IT EASIER TO ACCESS SUPPORT FROM OUR SPECIALIST NURSES

Between 1 August 2020 and 31 July 2021, we recruited three more Helpline nurses and were able to exceed our target for the number of Ask Our Nurse questions answered from the 2,128 predicted to 2,225. We also exceeded the target answer rate for our busy Helpline.

Our specialist nurses also recorded content for our Moving Forward courses, covering topics such as menopausal symptoms, breast cancer in men, recurrence, family history, and post-surgery lingerie. And the nursing team contributed to the broadcast of 35 live sessions across Facebook and Instagram (up significantly on last year's 26 sessions). These sessions resulted in a combined 686,640 views. Similarly, our specialist nurses featured in several Instagram Reels – delivering important information about breast cancer in yet another format – resulting in a combined 98,100 views.

KEEPING PEOPLE INFORMED AND UP TO DATE VIA OUR WEBSITE

In the year covered by this report, we received almost 200,000 unique visits to the COVID-19 pages of our website and it quickly became the top-ranking content on Google for multiple queries and search terms. Vaccination safety and accessibility has also been a big concern and up to the end of July 2021, a total of 99,784 unique visitors had accessed our Q&A blog with Dr Sheeba Irshad, Clinical Deputy Head of our Research Unit at Kings College London.



Many people affected by breast cancer found information about the COVID-19 vaccination through the Breast Cancer Now website

There were also over 109,000 visits to our Life after breast cancer information pages, which cover a wide range of topics from coping with anxiety and worries about cancer coming back, to diet, exercise, work and finances. We're currently sending out nearly 50,000 copies a year of our popular Exercises after breast cancer surgery leaflet – the most in-demand of our breast cancer titles.

ENHANCING OUR 24/7 DIGITAL SUPPORT

We have vastly improved the new member welcome journey for users of Becca, the breast cancer support app, to make it a safer and more welcoming experience for all users.

The app offers tips and personal stories to help people move forward after a breast cancer diagnosis and treatment. In the period of this report, it was installed 5,500 times and our information 'cards' were opened more than 60,000 times. The top



five cards were blogs, practical issues, concerns, inspiration and body image. Also among the top ten were those on side effects and menopausal symptoms, showing that Becca users are seeking advice and support in many different areas.

We also tightened up security on the Breast Cancer Now Forum to reduce the risk of spam and malicious messages slipping past the moderation team and recruited new volunteer community champions to support Forum members.

PIONEERING A NEW PERSONALISED SERVICE TO SPEED UP REFERRALS

This year, we have pioneered a new personalised referral service - Here for You - to introduce patients to our support services much earlier in their breast cancer experience; something many people tell us would have proved invaluable.

In partnership with healthcare professionals in 20 hospitals, Here for You connects each patient to one of our trained volunteers, who introduces Breast Cancer Now and explains the support we can provide. Onward direct referrals can then be made to services such as our Helpline and our Someone Like Me one-to-one support service. The volunteer then checks in again three and six months later to suggest additional relevant services throughout the treatment pathway, all of which saves our nurses valuable time.

- In this first year, the service received 211 referrals
- 96% of service users surveyed say they strongly agreed or agreed that my 'needs were understood by the Here for You volunteer'
- 100% of service users strongly agreed or agreed that 'as a result of speaking to a Here for You volunteer, I feel reassured that there is support available to help me'

IN SHARING KNOWLEDGE...

...to drive improvements in treatment, care and patient experience. We have been:

WORKING TO GET BREAST CANCER SERVICES BACK ON TRACK

In October 2020, we published our 'Press Play' report for Breast Cancer Awareness Month, setting out the impact of the first wave of the pandemic on diagnosis, treatment and care for breast cancer patients. This was based on a survey of over 2,000 people affected by breast cancer, discussions with a range of healthcare professionals and analysis of published data.

The report drew attention to the dramatic decline in GPs referring patients to see a specialist during the first wave of the pandemic, the fact that almost 1 million women across the UK had missed vital breast screening due to COVID-19 and that around 8,600 of those caught up in this backlog could have been living with undetected breast cancer.

We called on Governments and NHS bodies across the UK to - as a matter of urgency - set out how the anticipated increase in demand for imaging and diagnostics would be met.

We also worked with the Association of Breast Surgery (ABS) and the British Association of Plastic, Reconstructive and Aesthetic Surgeons (BAPRAS) to produce estimates of the number of women who had missed out on reconstruction surgery during the first wave of the pandemic, the impact on emotional wellbeing and the need for a comprehensive plan to clear the backlog.

HIGHLIGHTING THE ISSUES AND SUPPORT NEEDS OF PEOPLE AFFECTED BY BREAST CANCER

We were also part of the NHS England Task Force that fed into and monitored the cancer recovery plan. This enabled us to bring the needs of people affected by breast cancer to the fore so that they could be addressed. We're also a member of the subsequent Task and Finish groups set up by NHS England to evaluate and recommend treatment changes resulting from the pandemic and to look at psychosocial support needs moving forward.

WORKING IN PARTNERSHIP TO IMPROVE PUBLIC HEALTH AND WELLBEING

We are a member of the Richmond Group of Charities, a collaboration of 15 leading health and social care charities that acts as a collective voice to influence health and care policy and improve care and support for people living with longterm conditions. This year, we once again supported the group's We Are Undeatable campaign, which supports and encourages people with long-term conditions to find ways of being active.

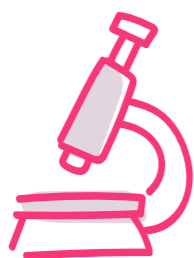
In February 2021, the activity we generated for the campaign on Twitter was displayed 39,430 times. There were also 3,018 website views and 779 physical activity downloads. The campaign resources were also disseminated to 46 women through our Younger Women Together and Living with Secondary Breast Cancer groups.

Additional activity over the summer has so far resulted in the campaign being displayed a further 24,000 on Twitter and over 4,500 times on Instagram. In addition, the We Are Undeatable 'Home Games' initiative provided us with an excellent opportunity to tie in content around the importance of physical activity and healthy lifestyle to manage breast cancer risk.

We also worked with City University to develop patient-led training for trainee radiographers to help ensure that patients receive appropriate information, care and support before their diagnosis of breast cancer.

Strategic objective

TO DEVELOP KINDER, SMARTER TREATMENTS FOR PEOPLE WITH BREAST CANCER AND IMPROVE ACCESS TO TREATMENTS FOR THOSE AFFECTED



Breast Cancer Now is funding over **£11 million worth of research** which is happening right now to drive forward progress in developing kinder, smarter treatments. In July 2021, the charity committed to funding **four new world-class research projects** into discovering new treatment options.

While advances in science and technology are transforming how we think about breast cancer and bringing the promise of new and better treatments, many of those in current use have wide-ranging side effects. These can take a physical toll on people's bodies and also affect their sense of self and their relationships with others.

Women who have a breast removed or who lose their hair can feel that their femininity has been undermined. Sex and intimacy may become difficult, and relationships can suffer terribly. Breast cancer treatment can also bring on an early or extreme menopause and affect fertility in younger women. While men who are diagnosed may feel shocked and embarrassed at having 'a woman's disease' and find their only option is to take a treatment designed

around women's hormones. This can be immensely challenging; not just for those who are having the treatment, but for their loved ones too. And it's simply not acceptable that people should have to endure such a gruelling regime and all that comes with it.

We want to unlock the potential of new highly targeted approaches and deliver new treatments that are not only more effective, but also kinder to patients. And we want policy makers to take all actions necessary to ensure that living well with breast cancer becomes a reality, not just an aspiration.

To this end, we have been working hard in the following areas:

'I underwent surgery, chemotherapy, radiotherapy, reconstruction, IV infusions and daily pills for five years. Treatment is traumatic, painful, and emotional. And while I wish I could say that I came out of the other side with the all-clear, four years ago, I was told that my breast cancer had spread - and it's currently incurable.'

Anna, a mum of two, diagnosed with breast cancer in 2012 and secondary breast cancer in 2017



IN FUNDAMENTAL RESEARCH...

...to build understanding of what causes breast cancer and how best to treat it. We have been:

EXPLORING WAYS OF MAKING IMMUNOTHERAPIES MORE EFFECTIVE

In July 2021, we committed to fund a new Translational Research Fellowship (the Dame Vera Lynn Fellowship) based at our Research Centre. The Fellowship was awarded to Dr Crescens Tiu, who is working to develop treatments that can overcome breast cancer's ability to 'hide' from the immune system.

Dr Tiu hopes that this research will help to develop new combination therapies that make breast cancer visible to the immune system and thus make immunotherapies more effective for secondary breast cancer. Success in this area could mean that people with breast cancer are able to live longer and enjoy a better quality of life.

WORKING TO DEVELOP A BETTER TREATMENT FOR TRIPLE NEGATIVE BREAST CANCER

In July 2021, we committed to fund three research projects through the Catalyst programme.

The first of these projects is being run by Dr Helfrid Hochegger at the University of Sussex. He and his team are working to understand if using a new drug together with palbociclib (Ibrance) could help more people with triple negative breast cancer survive.

The hope is that this research could lead to clinical trials and eventually a new treatment to help improve the survival of people with triple negative breast cancer.

FINDING BETTER WAYS TO TREAT PEOPLE WITH OESTROGEN RECEPTOR POSITIVE (ER+) BREAST CANCER

At our Research Centre, Dr Rachael Natrajan is working to understand the role of a protein called SF3B1 in oestrogen receptor positive (ER+) breast cancer. She wants to find better ways to treat people whose breast cancer has changes to this protein.

With our funding, researchers have previously found that ER+ breast cancer cells that have changes to SF3B1 grow more aggressively and are also more likely to become resistant to standard treatments such as hormone therapy.

They will now test whether talazoparib could be an effective treatment for this aggressive type of ER+ breast cancer when used in combination with standard treatments. Ultimately, this could lead to new and better treatments that stop more people from dying from breast cancer.

MAKING BREAKTHROUGHS FOR PEOPLE WITH ELEVATED RISK DUE TO THE BRCA GENES

In June 2021, a team of international researchers, including researchers based at our Research Centre, reported their findings that the drug olaparib can help reduce the risk of breast cancer recurrence for those with changes in the BRCA genes.

Led by Professor Andrew Tutt, the OlympiA trial recruited people aged between 36 and 50 with HER2 negative primary breast cancer, who were born with a change to the BRCA gene that is known to increase the likelihood of developing breast cancer. 1,836 people (including six men) took part and were randomly split into two groups. One group received olaparib, whereas the other group received a placebo, taken twice daily for one year.

Those who received olaparib had a 42% reduction in risk of breast cancer recurrence, with 85.9% of those given olaparib for a year after treatment, seeing no return, relapse, or spread of their breast cancer three years later, compared with 77.1% who were taking a placebo tablet.

This research breakthrough is testament to the tireless efforts of world-class researchers, over the last 20 years - including many in the UK funded by Breast Cancer Now - who have uncovered weaknesses in breast cancer cells and laid the foundations for this exciting discovery.

DISCOVERING NEW WAYS FOR SLOWING DOWN THE GROWTH OF TUMOURS

In March 2021, we announced that a Breast Cancer Now-funded study had discovered that a protein called MCL-1 is critical for breast tumours to grow and survive. This paves the way for scientists to develop new ways of slowing down the growth of tumours by targeting the MCL-1 protein.



Professor Andrew Tutt

IN DRUG DEVELOPMENT...

...to accelerate the delivery of more targeted and personalised treatments. We have been:

LOOKING TO TARGET INDIVIDUAL CANCER CELLS INSIDE TUMOURS

Thanks to funding awarded in July 2021, Professor Greg Hannon and his team at the University of Cambridge will investigate the difference between breast cancer cells that are resistant to certain drugs and those that are not.

Scientists think that the main reason why drugs stop working is the diversity of cancer cells in the tumour. Professor Hannon hopes that this project will pave the way for people with breast cancer to receive a combination of specially selected

Clinical trials are now being planned to test the new drug. If they are successful, POLQ inhibitors could be used to treat cancers with changes to the BRCA genes, including breast, ovarian, pancreatic and prostate cancers.

IN CAMPAIGNING...

...to ensure that people can access the most effective treatments. We have been:

HIGHLIGHTING THE NEED FOR GOVERNMENT TO INVEST IN MEDICAL RESEARCH

As a member of the Association of Medical Research Charities (AMRC), we backed their Research at Risk campaign, which drew attention to the impact of the pandemic on charity funding for medical research.

More than 7,000 people wrote to the Prime Minister calling for financial support to help medical research charities continue with their investments. And in response to this campaign, the Government announced £20 million to support charity-funded early career researchers, which will go some way towards upskilling and advancing the next generation of scientists.

FIGHTING FOR PATIENTS TO HAVE SWIFT ACCESS TO THE DRUGS THEY NEED

We've continued to contribute to all breast cancer drug appraisals by the National Institute for Health and Care Excellence (NICE) and the Scottish Medicines Consortium (SMC) and helped to ensure that clinically effective drugs continued to reach patients quickly, at a price the NHS could afford – even during the pandemic. In all instances, we made sure that patients' voices were heard loud and clear by decision-makers.



Professor Greg Hannon and his team

drugs that will each target different types of cancer cells within their tumours. This could make treatments more effective so that more people with breast cancer can live and live well.

CO-DEVELOPING A NEW CLASS OF CANCER DRUGS

In June 2021, researchers from our Research Centre and pharmaceutical company Artios announced that they have found a new class of cancer drug, called POLQ inhibitors, which work by blocking a protein called POLQ.

These drugs can specifically kill cancer cells with changes to the BRCA genes while leaving healthy cells unharmed. They also show promise in treating some cancers that have become resistant to other drugs called PARP inhibitors.

WORKING TO IMPROVE THE PHYSICAL HEALTH OF PEOPLE LIVING WITH BREAST CANCER

In September 2020, Breast Cancer Now joined 17 of Scotland's leading health charities to form a new coalition with the aim of increasing physical activity levels in people living with long term conditions.



The coalition officially launched in October 2020 under the banner of Movement for Health. It's led by the charity Paths for All and chaired by Dr Emma Lunan. In May 2021, in the lead up to the Scottish elections, the coalition published a call to action, endorsed by the Chief Medical Officer, urging the Scottish Government to improve policy and practice for people living with long term conditions to enable them to become more physically active.

WELCOMING KINDER TREATMENTS WITH FEWER SIDE EFFECTS

The period of this report also saw the introduction of Phesgo, a quicker and kinder treatment method of trastuzumab and pertuzumab, now available on the NHS across the UK for certain patients with HER2 positive breast cancer. This new method reduces the length of hospital stays and frees up precious time for healthcare professionals – and we worked with NHS England and other stakeholders to ensure this news was widely shared.

Strategic objective

TO IMPROVE DETECTION AND DIAGNOSIS OF BREAST CANCER



99% of women diagnosed with Stage 1 breast cancer will survive for five years or more. At Stage 4, this figure drops to just 27%.

While prevention strategies are important, they cannot eliminate all cases of breast cancer.

Early detection therefore remains the cornerstone of improving patient outcomes, but many people still face barriers in seeking help. Currently, around 5% of women will find that by the time their breast cancer is diagnosed, it has already spread. And the problem is further compounded by inequalities that result in black women in the UK being almost twice as likely as white women to be diagnosed with advanced (stage 3 or stage 4) breast cancer; an important factor in their chances of survival being significantly worse.

In addition, many people are still reluctant to share their concerns about breast cancer. For example, if they're part of a community where talking freely about breast

health is taboo or where social deprivation excludes them from frontline healthcare services. And misapprehensions are also rife, such as 'I'm too young to get breast cancer', or 'my healthy lifestyle will keep me safe'.

However, while being young and fit may minimise a person's risk, breast cancer can happen to anyone, men as well as women.

We want everyone to understand the early signs and symptoms of breast cancer and to feel empowered to come forward with any concerns. And we want healthcare professionals to be able to spot breast cancer in its earliest stages when treatment is most likely to be successful.

To this end, we have been working hard in the following areas:

'I had a healthy diet, exercised, and I just assumed I was too young to be diagnosed... Then I found a lump in my right breast... and when the test results revealed I had breast cancer I couldn't believe it... My first thought was of my three beautiful babies; would I get to see them grow up?'

Amaya, who is now working hard to raise awareness of breast cancer and breast checking among young black women in particular



IN RAISING AWARENESS...

...to ensure that people are empowered to seek help as soon as possible. We have been:

WORKING WITH PARTNERS TO REACH NEW AND WIDER AUDIENCES

Our 'Keep in touch with your boobs' initiative with Asda during Breast Cancer Awareness Month coincided with the news that breast cancer referrals had dropped by 57% at the height of the pandemic. We reminded Asda's 14 million weekly shoppers about the importance of self-checking and offered guidance and signposting to our Helpline. This reminder is also now included on Asda receipts throughout the year.

We also worked with Asda as they collaborated with the website Tyla on creating a video designed to educate 16 to 34-year-olds on the importance of regularly checking their breasts. The video, which featured playdough breasts as a way to share the signs and symptoms, was displayed 5.9 million times across Tyla's social media channels, with the numbers of people watching the video all the way through 20% higher than Tyla's average.

During Breast Cancer Awareness Month, we also had the opportunity to partner with Facebook through their women's network. We took part in a panel discussion - viewed over 1.2 million times - about myths and misconceptions and barriers to talking about breast cancer. We also raised awareness of the signs and symptoms to look out for, and what to do in the event of new and unusual changes.

PLACING THE IMPORTANCE OF REGULAR SELF-CHECKING FRONT AND CENTRE STAGE

In October 2020, we launched our 'check them' campaign to promote the importance of regular breast checking as 'a habit of a lifetime', to raise awareness of the signs and symptoms of breast cancer and to encourage visits to a GP if changes are noticed. This was in response not only to our YouGov survey (that revealed that 47% of UK women don't check their breasts regularly for signs of breast cancer) but also to a significant drop in referrals during the pandemic.

Our 'check them' animation explored the varying and unique journeys women take with their breasts throughout their lives. It reached 1/4 million people on social media and also won us award nominations. We also produced a series of stills and GIFs, which reached just under 9 million people on Facebook and Instagram and more than 100,000 people clicked to learn more about our campaign. And we created a series of Spotify ads which reached 314,950 people, with an average 'full listen' rate of 91.58%.

FURTHER DRAWING ATTENTION TO THE SIGNS AND SYMPTOMS

For Breast Cancer Awareness Month 2020, we developed new imagery and materials to support our Touch Look Check campaign. This included a wider variety of signs and symptoms infographics, covering

a broader range of skin tones. We also created a male-specific version of our Touch Look Check message, to be more inclusive of men. We also distributed:

- 55,413 copies of 'Know your breasts: A guide to breast awareness and screening' - with another 747 copies downloaded from our website
- 27,103 copies of 'Know your breasts: a quick guide' - with another 534 copies downloaded from our website
- 3,149 copies of 'Know your breasts: a quick guide' translated into languages other than English - with another 545 copies downloaded from our website

In the period covered by this report, we also recorded over 200,000 unique visitors to our 'Signs and symptoms of breast cancer' webpage.

IN DISMANTLING BARRIERS...

...to help everyone access appropriate information and support, and timely referrals and treatment. We have been:

EXTENDING THE REACH OF OUR PUBLIC HEALTH VOLUNTEERS

In April 2020, 28 'Speaker Volunteers' joined our Public Health and Wellbeing team, taking on the role of Public Health volunteers. They are responsible for delivering our key public health messages on early detection to workplaces and community groups across the UK.

During the pandemic, we moved swiftly to an online model, ensuring our volunteers had the skills and training they needed to effectively deliver the talks in a virtual setting and that the booking process was appropriately streamlined Between Oct

TOUCH YOUR BREASTS Can you feel anything new or unusual?
LOOK FOR CHANGES Does anything look different?
CHECK ANY CHANGES WITH YOUR GP



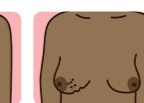
Check all parts of your breasts, your armpits and up to your collarbone (upper chest) for changes.

No matter what size or shape your breasts are, check them regularly.

COMMON SIGNS OF BREAST CANCER INCLUDE...



A lump or swelling in the breast, upper chest or armpit



A change to the skin, such as puckering or dimpling



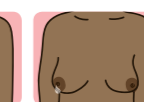
A change in the colour of the breast - the breast may look red or inflamed



A nipple change, for example it has become pulled in (inverted)



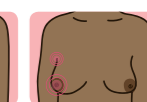
Rash or crusting around the nipple



Unusual liquid (discharge) from either nipple



Changes in size or shape of the breast



Pain in your breast or armpit that's there all or almost all the time



Breast Cancer Now's Touch Look Check infographic highlights the signs and symptoms of primary breast cancer

2020 and July 2021, volunteers and staff delivered 20 online talks reaching 729 people. Feedback from these public health talks has been encouraging, for example:

- 'Absolutely excellent talk; learned a lot - clear images and descriptions thank you for sharing with us'
- 'The volunteer speaker was amazing and made me feel confident about signs and symptoms when it comes to breast cancer. She had a passion about raising awareness'
- 'Fantastic and valuable presentation, thank you for sharing this. Raising awareness in women and men is part of the fight against this terrible disease'



Dame Vera Lynn Translational
Research Fellow, Dr Sidlauskas

treatment designed to prevent it developing into invasive breast cancer. In this project, Dr Sidlauskas is seeking to develop a more accurate method to assess the likelihood of DCIS becoming invasive using AI tools and samples from clinical trials.

In the future, this approach could be used in clinics to determine who needs immediate treatment to prevent DCIS coming back as invasive breast cancer. And who could safely skip it and be monitored instead.

IN RESEARCH...

...to improve the detection and diagnosis of breast cancer at the earliest stage. We have been:

IMPROVING DIAGNOSIS SO THAT PEOPLE NEEDN'T SUFFER UNNECESSARY TREATMENT

In July 21 we committed to fund a new Dame Vera Lynn Translational Research Fellowship, which will use artificial intelligence (AI) to help women with an early form of breast cancer called ductal carcinoma in situ (DCIS) to safely skip unnecessary treatment.

As we don't yet know which cases will progress and which will not, everyone diagnosed with DCIS receives the same

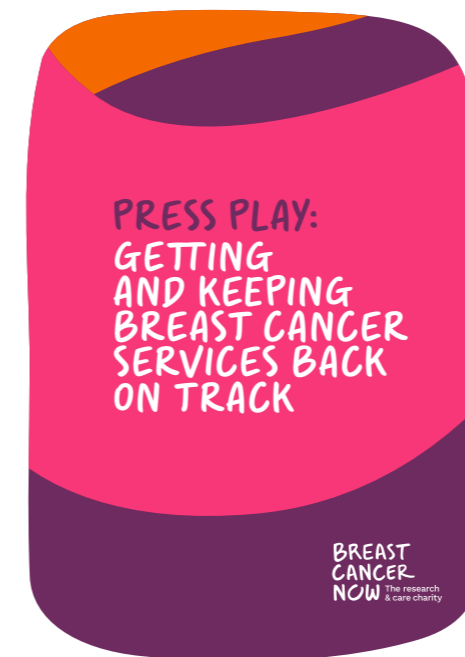
IN CAMPAIGNING...

...to improve breast cancer screening and promote early detection. We have been:

MAKING SURE OUR CONCERNS ARE WIDELY HEARD

On the same day that our 'Press Play' report revealed the impact of COVID-19 on breast cancer referrals and treatment, we launched an accompanying news story, securing over 200 pieces of coverage in print and online media (both national and regional). This included a first for the charity with three national front-page stories in England and two in Scotland, along with over 600 items of broadcast

coverage. In addition, the statistics from this story - notably, that around 8,600 of those caught up in the screening backlog could be living with undiagnosed breast cancer - have continued to be featured in articles around the wider impacts of COVID-19, keeping breast cancer (and Breast Cancer Now) at the heart of this narrative.



Breast Cancer Now's 'Press Play' report

We also worked hard to produce accurate estimates of the number of women who may have been affected by missing out on referrals to specialists as well as screenings between March and December 2020, determining that by the end of 2020, as many as 11,000 women may have been living with undiagnosed breast cancer. We revealed our findings in March 2021, also stating that in the worst cases, people could die as a result.

We launched this news story just before the release of the latest Cancer Waiting Times and the one-year anniversary of the World Health Organisation declaring

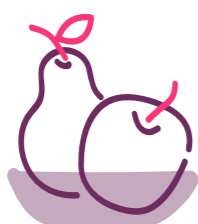
the COVID-19 outbreak a pandemic, warning of a perfect storm with an already overstretched workforce facing a huge task as women once again started to come forward for screening, to share their concerns, and for referrals and treatment.

Our urgent calls to action reiterated the need for the UK Governments to invest in a long-term strategic approach, to give everyone the best possible chance of early diagnosis. Our story featured voices of women directly impacted, alongside those of our CEO and clinical nurse specialists. And we also used the opportunity to call on women to continue attending their breast screening appointments when invited, and to go to the GP with any new or unusual breast changes.

700 pieces of media coverage were secured across broadcast, print and online media, in national and regional titles and across the spectrum of news, health and consumer interests.

Strategic objective

TO FURTHER OUR UNDERSTANDING OF WHY BREAST CANCER OCCURS AND SPREADS, AND USE OUR KNOWLEDGE TO PREVENT BREAST CANCER DEVELOPING



Breast cancer is the world's most common cancer. And every year in the UK, around 55,000 people are diagnosed with the disease. However, we believe that 23% of UK breast cancer cases could be preventable through lifestyle changes

While nothing can be done to change the biggest risk factors for breast cancer, namely being a woman and getting older, there are steps that individuals can take to reduce their chances of developing the disease, such as drinking less alcohol, regular exercise, and maintaining a healthy weight.

However 'doing the right thing' isn't always easy. So as well as building understanding of breast cancer and how to prevent it, we also want to know more about which interventions do and don't work for people, so they can help them take effective action to reduce their risk.

We want to understand why breast cancer develops and spreads, who is most at risk, and what we can do to prevent the disease from occurring and spreading. And we want to empower people to take proactive steps to reduce their own risk.

To this end, we have been working hard in the following areas:

'As well as being physically active, I take care in what I eat and my alcohol consumption is minimal, as drinking is known to be associated with breast cancer. Being proactive goes a long way to dissipating my anxiety of this disease, which took my mother far too soon.'

Sarah, a 58-year-old opera singer living in Cardiff

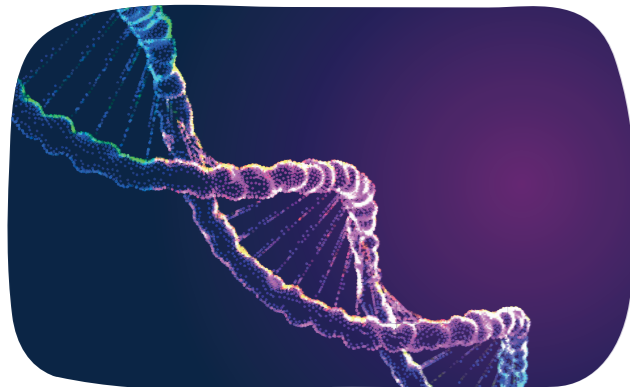


IN RESEARCH...

...to build understanding of the causes of breast cancer and why it spreads. We have been:

MAKING BREAKTHROUGHS IN OUR UNDERSTANDING OF BREAST CANCER RISK IN MEN

In August 2020, scientists from The Institute of Cancer Research, London, and Queen's University Belfast reported that they had found three new common changes in DNA that can increase a man's chance of developing breast cancer by 47%, 45% and 61% respectively.



The research, largely funded by Breast Cancer Now, brings the total number of known common genetic changes linked to male breast cancer to five.

Researchers also observed that the disease has a similar genetic basis in men and women, which means that advances in prevention and treatment for the disease may be of benefit to all patients, irrespective of their gender.

Breast cancer in men is very rare, which makes it difficult to investigate, but around 370 men are diagnosed with the disease every year in the UK, and around 80 men die. In the future, these findings could help identify men who are at higher risk of developing breast cancer and lead to new preventive treatments for both men and women.

IN EMPOWERING PEOPLE...

...to adopt healthier lifestyles and reduce their risk. We have been:

HELPING TO DELIVER BEHAVIOUR CHANGE IN THE AREA OF WEIGHT MANAGEMENT

Having supported researchers at the University of Aberdeen as they carried out the ActWELL trial (a study about lowering breast cancer risk through weight loss and lifestyle changes in women aged 50+), we were keen to make public some significant findings. These included the fact that women taking part lost more weight than those who didn't, that approaching women with information on weight management programmes while they were attending for routine breast screening was viable, and that it's possible for volunteers to successfully deliver interventions in a community setting.

Our Public Health and Wellbeing team then developed a 'How to' resource, called A Guide to delivering behaviour change

projects in community settings through volunteers. We also co-delivered three online dissemination events with the ActWELL trial team, attended by 89 trial participants, ActWELL volunteers and other key stakeholders, such as NHS breast screening centre staff and representatives from the Scottish Government. The final results were published in the Journal of Behavioural Nutrition and Physical Activity, which means the learning can be picked up and shared by the most relevant audiences.

ACCELERATORS THAT WILL DRIVE OUR PROGRESS

To achieve the transformation we are striving for, we must continue to increase our impact. And not only through what we do ourselves, but in how we work and how we influence, empower, and inspire others to act alongside us.

To this end, we've considered what we can do to hasten progress and have agreed the following four accelerators:

- **Amplifying the voice of experience**
See how we're doing on page 42.
- **Unlocking the power of our community**
See how we're doing on page 48.
- **Evolving and adapting our practices**
See how we're doing on page 54.
- **Generating further funding**
See how we're doing on page 58.

AMPLIFYING THE VOICE OF EXPERIENCE

Our aims in this area are:

- Raising our profile so that everyone affected by breast cancer knows both how we can support them, the whole way through – and how they can support us in driving the change they want to see
- Identifying and championing the issues that matter most to people affected by breast cancer
- Fearlessly leading conversations with governments and other policymakers, the NHS, and fellow health charities to boldly challenge and push for change
- Extending our reach through our own activity and in bold and innovative ways with our trusted partners

Here are some examples of how we delivered against these aims in 2020-21:

RAISING AWARENESS BY SHOWING WE ARE THERE TO HELP...

...THROUGH THE DISRUPTION CAUSED BY COVID-19

We have worked with our clinical nurse specialists to provide information and quotes to the media on the impacts of the pandemic and the support we can provide for people with breast cancer. This expert content appeared in consumer magazines such as The People's Friend, in national papers including the Sun on Sunday's Fabulous magazine, the Daily Mirror, and the Daily Express, and in nursing trade publications, including Nursing in Practice.

We also secured exclusive features in the i paper, the Daily Telegraph, the Sun on Sunday, and the Mail on Sunday's You magazine, with interviews from our supporters that highlighted the disruption to breast cancer surgery and treatments that they had experienced due to COVID-19.

These stories allowed us to reiterate the importance of continuing to get any new and unusual breast changes checked out by a GP and to showcase the support the charity can offer during challenging times, with signposts to our Helpline and other life-changing support services.

CHAMPIONING THE ISSUES THAT MATTER MOST TO PEOPLE AFFECTED BY BREAST CANCER...

...ON ACCESS TO DRUGS

In July 2021, we launched our 'It's Time for Trodelvy' campaign with a feature in the Mail on Sunday.

Trodelvy (also known as sacituzumab govitecan) is an exciting new drug that could give women living with triple negative incurable secondary breast cancer the hope of more time. However, despite a licensing announcement being expected in August 2021, a decision on whether the drug would be available routinely on the NHS was not due until 2022. Hence our campaign and petition calling on the drug company, Gilead, to come to an agreement with NHS England to provide the drug free of charge for all eligible women pending this decision.

The Mail on Sunday article featured Breast Cancer Now and METUP UK (a patient advocacy group) and included a comment from our Chief Executive, Delyth Morgan, on the agonising wait many women could have to endure between licensing and the treatment being approved for routine use on the NHS. Delyth was also interviewed on BBC South East Today, and Philippa, one of the women spearheading the campaign shared her personal experience

for MyLondon. And the campaign was also included in the trade publications, Pharmafile and Charity Today.

Over 200,000 people have so far signed this petition and the campaign is ongoing.

...ON THE IMPACTS OF THE PANDEMIC

Over the last year, we have provided expert commentary and first-person accounts of the impacts of the COVID-19 pandemic on breast cancer services and patients, to ensure the issues remain on the health agenda.

For example, we secured almost 80 regional pieces of coverage following our response to the monthly NHS England Cancer Waiting Times announcement. This included a prime-time mention for our charity on BBC News along with a contribution from one of our supporters who spoke about their diagnosis and how it had been disrupted.

The letter was reproduced in over 100 regional newspapers across print and online, reaching over 1.5 million readers. We also secured real life features in magazines, promoting each of our online services, including a double page feature in both Pick Me Up and Chat magazines, reaching a total of over 150,000 readers.

In addition, as a member of the Breast Screening Programme Boards in both England and Scotland, and the Independent Breast Screening Review Group in Scotland, we've been working to raise a number of concerns relating to screening, including the temporary pause to women aged 71+ being able to self-refer for breast screening, and the temporary move to 'open invitations' in England, where women are invited make their own screening appointment, rather than being sent a specific time.

We have also been highlighting the impact of COVID-19 on medical research and raising concerns about the continued severe pressures affecting the breast cancer workforce.

For example, as members of the NHS England and Public Health England Breast Screening Workforce and Education Group, we have been working alongside other charities to highlight the issue of understaffing to politicians, to help ensure that the professionals that people with breast cancer rely on are appropriately resourced and supported. In addition, when the Royal College of Radiologists workforce census revealed worrying gaps, we secured commentary in four national newspapers, calling on all UK Governments to put funding in place to tackle the crisis.

Our Chief Executive Delyth also spoke about impacts of the pandemic on the cancer workforce on a Spectator podcast and a Health Service Journal webinar.

...ON GETTING INTO THE HABIT OF BREAST CHECKING

When our YouGov survey (see page 24) on breast checking revealed that the main reason women give for not checking regularly is that they 'forget', we knew we had to redouble our efforts on the importance of looking for signs and symptoms.

We immediately launched a news story that appeared in nearly all UK national titles, on the front page of The Scotsman, and in publications such as Vogue, HuffPost and The Week (150 pieces of coverage in total).

We further raised the issue of breast checking with broadcast coverage across radio news bulletins. And Sky News conducted a live interview on our story with our Chief Executive, Delyth Morgan. In addition, Dr Mark Porter used his column in

The Times to discuss the survey findings, while the Daily Telegraph online used them to explore the latest 'collateral damage' to women's health to emerge from the COVID-19 pandemic.

LEADING CONVERSATIONS THAT PLACE LIVED EXPERIENCE CENTRE STAGE

...RIGHT UP TO GOVERNMENT LEVEL

We've worked closely with people affected by breast cancer across a number of different issues, providing opportunities for them to talk directly with decision makers, to input into drug appraisals, and to share experiences across our channels.

For example, we organised a number of virtual parliamentary events to provide a platform for people with a direct experience of breast cancer to talk to decisionmakers across the UK about the change they want to see. This included a 'roundtable' with the Shadow Health Team as well as webinars with Scottish MSPs and Welsh MSs.

EXTENDING OUR REACH THROUGH PARTNERSHIPS

...WITH ASDA

Our Tickled Pink campaign secured 40 articles in national, consumer and online media, with 72 regional articles, reaching 27% of UK adult population. The coverage started with an engaging piece in the Daily Star on (Gogglebox's) Tom Malone fronting a social media TikTok dance as an interactive way to encourage breast checking.

Tickled Pink products were also included in our Breast Cancer Awareness Month Lookbook for regional press and our Ambassador, Michelle Heaton, fronted the Tickled Pink activewear range. Both the products and Michelle's shoot proved

especially popular and led to print and online articles in OK! magazine.

...WITH RIVER ISLAND

In May 2021 we launched our refreshed Fashion Targets Breast Cancer campaign, with long standing partner River Island. This campaign was successful in raising both funds and awareness, through the sale of bespoke products and significant PR coverage.

The campaign featured four inspirational women from a variety of backgrounds, who shared their own experiences of how breast cancer had impacted their identity, including in relation to clothing and fashion. It also involved our first ever remote FaceTime photo shoot, to capture the collection, which featured our wear something important message.

Powerful assets helped us to secure 52 pieces of coverage during the four-week campaign, across national and regional media, for example in Mail Online, Tyla, The Sun Online and Metro. In addition, the products appeared in a wide range of consumer and regional media including Marie Claire, The Manchester Evening News and The Western Mail.

River Island reported that 83% of the product line sold within 10 weeks, compared to 63% during the same period in 2019, showing how strongly the campaign resonated with the target audience.

...WITH GHD

In summer 2021, we also worked with hair brand ghd to launch their Take Control Now initiative, which aimed to drive behaviour change by empowering and encouraging younger women to regularly check their breasts. This powerful initiative focused on the loved ones of younger women with breast cancer sharing their experiences with women who do not self-check.

As part of the campaign, ghd created a bespoke hairdryer and two hair straighteners embossed with the words ‘Take Control Now’ to help keep the message front of mind. As a result of press and influencer virtual launch events, 117 posts appeared on social media with a total reach of 35 million.

FURTHER EXTENDING OUR REACH THROUGH PR

...TO FOREGROUND OUR RESEARCH ACHIEVEMENTS

In May 2021, our Royal Patron, HRH The Prince of Wales, visited the Breast Cancer Now Toby Robins Research Centre at The Institute of Cancer Research, London, to hear about current projects and the advances made since he first opened the Research Centre back in 1999.

His Royal Highness met with researchers who are currently developing a treatment for lobular breast cancer, as well as some of our 2020-21 £1,000 Challenge fundraisers and Christine Sturgess from the Breast Cancer Now Show Committee. This recognised their experiences of cancer, their efforts as fundraisers and the fact that the centre was funded in part by the original group of £1,000 Challengers, some 21 years ago.

We used this visit as an opportunity to highlight the impact of the COVID-19 pandemic on medical research and the need for support to continue progress. Working with the Clarence House PR team, we secured prominent coverage for this message in titles such as the London Evening Standard, the Daily Mail and The Independent, and across over 150 national and regional publications in total. In particular, the Daily Telegraph included a large image of His Royal Highness in a Breast Cancer Now branded lab coat in their coverage.

...TO HIGHLIGHT NEW AND SUCCESSFUL INTERVENTIONS

Having funded research which discovered that cognitive behavioural therapy (CBT) delivered in groups by a breast care nurse can reduce the impact of menopausal side effects caused by treatment, we were eager to share the results.

We secured a broadcast exclusive package with BBC Radio 4 Woman's Hour featuring our Chief Executive Delyth Morgan along with Natalie Richards, a 39-yearold mum-of-two who was diagnosed with triple negative breast cancer in 2019 and experienced intense hot flushes and night sweats during chemotherapy. We also secured national print features in the Daily Telegraph, the i and Good Housekeeping magazine.

All coverage positioned Breast Cancer Now as funders of world-class research while highlighting the benefits of this research to patients.

UNLOCKING THE POWER OF OUR COMMUNITY

Our aims in this area are:

- Improving how we engage, listen, and learn from people affected by breast cancer, including previously unheard groups and individuals, whose perspectives are vital
- Collaborating creatively with our wider network of volunteers, healthcare professionals, supporters and partners and using our collective voices, experiences, time, skills and networks to accelerate positive change
- Building a diverse workforce made up of people committed to delivering and advancing those goals
- Creating and embedding a high-performance culture powered by trust, and with a clear vision and mutual goals to guide us

Here are some examples of how we delivered against these aims in 2020-21:

IMPROVING HOW WE ENGAGE WITH ALL PEOPLE AFFECTED BY BREAST CANCER...

...BY LISTENING TO A RANGE OF PERSPECTIVES

Our Public Health and Wellbeing team has a key role to play in tackling health inequalities and this includes raising awareness of the experiences and challenges faced by certain communities when affected by breast cancer.

In July 2021, we supported Ethnic Minority Cancer Awareness Month, setting up working groups with both staff and volunteers who collaborated with us to plan a range of activities – both in-house and across our social media platforms.

The in-house event, ‘Time to talk – Breast cancer in diverse communities’, was held as a live panel event for our volunteers, staff and supporters. It looked at the experiences of three volunteers from different backgrounds, including challenges, barriers and taboos.

70% found the event ‘Excellent’ and 30% ‘Good’ with many requesting more such events.

External activity saw the launch of two blogs and a podcast to highlight the experiences and challenges faced by people from Black and South Asian communities in relation to breast cancer. The total posts across Facebook, Twitter and Instagram had a combined reach of 210,972 with 4,819 reactions (likes), 193 comments, and 138 shares.

...BY WORKING TO BUILD UNDERSTANDING

We have also commissioned research to build our understanding of different communities, the varying perceptions and levels of awareness that exists in regard to breast cancer, and the specific knowledge and information needs we must meet in order to break down barriers. For example, how and where people want to receive information – and who they want to receive it from.

The research will be published in early 2022 and will be invaluable in supporting teams across the organisation in our ongoing drive for equality, diversity and inclusion.

COLLABORATING WITH OUR WIDER NETWORK TO ACCELERATE POSITIVE CHANGE

...WITH HEALTHCARE PROFESSIONALS

During Breast Cancer Awareness Month 2020, we reintroduced our monthly email to our healthcare professional audience and members of our Nursing Network to keep them updated on what we are doing and to highlight relevant opportunities. We have since seen a steady rate of engagement, month on month.

We also undertook work on the Healthcare Professionals area of our website, refreshing both the look and the content. From last year, we have seen a 34% increase in unique views to this area of the site.

...WITH NURSES IN PRACTICE

In April 2021, we were able to reinstate our six-weekly webinars for nurses in practice who have joined the Nursing Network, around 1,600 individuals who spend the majority of their time working with people affected by breast cancer.

These sessions are delivered by experts in practice and have cover topics such as managing menopausal symptoms, family history, sex and intimacy, and Brave Conversations – discussing symptoms of recurrence or metastatic disease.

...WITH SUPPORTERS IN THE COMMUNITY

Supporters with an experience of breast cancer are at the heart of both our Afternoon Tea and wear it pink fundraising campaigns.

Individuals volunteer to tell their story, on our website and through our media, to raise awareness of breast cancer itself and Breast Cancer Now, so that more people know who we are and how they can help us

achieve our goals. We then amplify these stories through our campaigns, so they are at the heart of both how we communicate and why we continue to raise money.

In 2020, our wear it pink paid digital marketing achieved a reach of over 5 million, with information on taking part and how it can help to drive change. Our wear it pink homepage was visited over 34,000 times and more than 12,500 people registered. And 331 pieces of national and regional media coverage extended the reach of the campaign to around 47% of all UK adults.

BUILDING UP A DIVERSE AND COMMITTED WORKFORCE

...THROUGH THE MAKE-UP OF OUR BOARD

Having recognised the need for a wider variety of perspectives and experiences to be represented at board level, we succeeded in recruiting six brilliant new trustees to our board – three of whom have already taken up their roles.

We recognise that having a more representative board should allow us to remain and become more relevant to each of the communities and groups that we serve.

...THROUGH OUR AMAZING VOLUNTEERS

The overall number of volunteers is difficult to measure for 2020-21 as many roles were paused as a result of the pandemic and not all of our volunteers were able to be redeployed to online services.

However, we do know that over the period of this report around 1,400 people supported us on a longer-term basis, including our scientific advisors, and those who support our services and public health initiatives. We were able to increase our

pool of volunteers to cover a much broader range of life experience. For example, we recruited 45 volunteers to the Someone Like Me service and now have volunteers who have had children since finishing treatment, who have been diagnosed with the CHEK2 genetic mutation, and who speak a variety of languages including French, Spanish, Italian, Punjabi and Hindi.

This is vital as it means can match people who are seeking support to a volunteer who more directly shares their own experience, which helps to break down barriers and fast-track people to the answers they need.

We also began to involve volunteers in our online services, primarily Moving Forward Online and Younger Women Together Online, to assist with facilitation and provide a listening ear for anyone who might need extra support. It is all part of making a virtual or remote service a lot more human.

Our Patient Experience Team also developed a volunteer post to lead on patient involvement, which helps to ensure that people with breast cancer are involved in every aspect of our work. We also introduced a new telephone thanking volunteer role to recognise the amazing support of our event participants and see what we can learn from them to further improve the support we provide.

In 2021, we launched our first ever virtual Volunteer Conference. Nearly 200 people attended and shared their wide-ranging experiences with us, providing us with valuable insights. We are delighted to say that the conference had a 99% satisfaction rate.

We also successfully launched Volunteer Now, an online training portal for volunteers, along with a series of events to introduce the various ways to get involved

with the charity. In addition, Claire Myerson received our first ever Tracey Williams Outstanding Volunteer Award for her exceptional contribution to our secondary breast cancer campaign. Claire said:

‘I was very honoured to receive this award and it felt lovely to be recognised in this way, along with so many amazing fellow nominees. It has really inspired me to keep going – living life, raising awareness and funds, and campaigning for much needed improvements in patient services.’

Overall, 89% of volunteers in our 2021 volunteer experience survey say their experience has been impactful and that they feel well supported.

CREATING AND EMBEDDING A HIGH-PERFORMANCE CULTURE

...BY KEEPING EVERYONE INFORMED AND INVOLVED

We provide staff with ongoing information and updates on important news, achievements and upcoming events via our intranet, newsletters, team briefings, and informal monthly face-to-face meetings, led by our Chief Executive and Directors.

Over the past year, we have taken time to listen to staff perspectives on our organisation surveys, focus groups and workshops. This has helped us to shape our approach in many areas, such as learning and policy development, and to make Breast Cancer Now a great place to work for all employees.

Employee feedback was instrumental in how we supported staff on furlough and their return to work, as well as in formulating our wider plans for all staff to return to the office after the pandemic. Our Staff Forum group actively seeks the opinions, ideas and experiences of

colleagues and shares them with our Senior Management Team, our Organisational Management Team and our Trustees through the People & Culture Committee. During the last year, we have used the Staff Forum to consult with staff on our HR policy portfolio, our office environment and working at home. Their insight and constructive feedback were invaluable.

We also modified our induction process for new staff members who are initially working remotely to further support our high-performance culture through the specific experience of the pandemic and lockdown, and the increasing move to hybrid working.

...BY PROVIDING RELEVANT COACHING SESSIONS

We have also delivered a series of manager coaching sessions to support line managers at Head, Senior Manager and Manager levels. This was important given the unprecedented pressure of rebuilding teams after our significant organisational change and the more general demands of returning to the workplace post lockdown and furlough.

Around 60 people attended these group sessions. Areas covered included managing remotely, values and behaviours as managers and building resilience.

EVOLVING AND ADAPTING OUR PRACTICES

Our aims in this area are:

- Putting our supporters at the heart of how we communicate so we can have more informed, timely and effective conversations with them and continue to build positive and mutually beneficial relationships
- Bringing transformational insight to our decision-making and actions through improved use of data
- Having the courage to change course and adapt to evolving circumstances, drawing on valuable experience gained during the COVID-19 crisis and with an unfaltering commitment to always doing what's best for people affected by breast cancer
- Identifying and implementing new technologies to support and enhance team working, inclusion, creativity, and innovation

Here are some examples of how we delivered against these aims in 2020-21:

PUTTING OUR SUPPORTERS AT THE HEART OF HOW WE COMMUNICATE...

...BY SHOWING EMPATHY AND UNDERSTANDING

As Christmas can be an especially difficult time for those who have lost someone, we wanted to offer our supporters a meaningful way to honour their loved ones and keep their memories alive, despite social distancing restrictions.

We therefore adapted our annual in memory Christmas campaign to create a 'Remembering our Loved Ones' online dedication wall. Supporters were asked to share a photograph and to leave a dedication as a way of remembering their loved one. It was incredibly poignant to see so many people taking part and to read their dedications.

...BY LISTENING TO THEIR PRIORITIES

This year, we recreated Breast Cancer Voices, by merging Breast Cancer Now and Breast Cancer Care's two insight and involvement networks, made up of people who have been affected by breast cancer, into one united group.

This decision followed three focus groups, a survey with 176 people, and a cocreation workshop with members, which determined how the group should be structured, and how best it might communicate with and involve its members.

This new, united group have various opportunities to shape what we do – across the spectrum from services to research, campaigns to fundraising.

...BY PROVIDING ADDITIONAL SUPPORT WHEN NEEDED

Throughout the year, our Services Support Team has been on hand to guide people through the process of accessing online services. Our moderating team has also been helping users to navigate the programmes and to get the most from them.

We are now planning more in-depth focus groups of service users to highlight any further changes we can make.

USING DATA TO ENHANCE OUR DECISION-MAKING

...TO BETTER SERVE OUR SUPPORTERS

In July 2021, we successfully launched our new 'Unity' database, which merged our two legacy databases to create a single view of our service users and supporters and records all aspects of their relationship with us to aid better decision making.

This was a complex project delivered as planned by a dedicated team with support from colleagues across the charity. The expected benefits of the new integrated database are as follows:

- A better experience for our supporters and deeper understanding for us about who they are so we can serve them better
- Greater efficiencies and smoother processes for fundraising, services, and volunteering activities
- Improved compliance and reporting capabilities and opportunities to deliver transformational insight

...TO BE MORE RESPONSIVE TO IMMEDIATE NEED

During the pandemic, our Health Information and Nursing teams massively stepped up the work they do to collaboratively update content on our website. They also began to collect data on how people were using the site and what questions they were asking.

This allowed us to continually evolve and improve the content to meet user need and ensure it remained relevant. On occasion, information was changed daily to address specific concerns that were being raised either through our Helpline or Ask Our Nurses service or in response to Forum or search queries.

IMPLEMENTING NEW TECHNOLOGIES TO ENHANCE HOW WE WORK

...THROUGH OUR NURSES

We have a new Ask our Nurses email database, which allows us to be more efficient.

And we have been piloting a new platform called Hotjar to help make it easier for people visiting our website to access support from our nurses. This offers visitors our Helpline details, and options such as a call from a nurse or the chance to send a message for more information.

Long-term, this could allow us to reach many more people in need of help.

GENERATING FURTHER FUNDING

Our aims in this area are:

- Testing to find the most successful new routes for securing long-term sustainable support, reaching new audiences and inspiring more people to engage with us
- Initiating, connecting and growing our network by inspiring our supporters and partners to engage their contacts and communities, bringing additional funding, skills and expertise to the task of transforming breast cancer research and care
- Building on our success and commitment to innovation in digital to spark curiosity, fire ambition and find new routes for driving income, engagement and community action

Here are some examples of how we delivered against these aims in 2020-21:

FINDING NEW ROUTES FOR PEOPLE TO ENGAGE WITH AND SUPPORT US LONGER TERM...

...THAT REFLECT SUPPORTER PRIORITIES

Over the past year, we developed a new giving club initiative, the Progress Fund, which aims to unite 50 philanthropists, who will each donate £20,000 over three years, to support the next generation of breast cancer researchers.

These scientists will build on the discoveries made over the past 40 years, ensuring we maintain momentum and achieve our goals.

...THAT RESPOND TO EXTRAORDINARY CIRCUMSTANCES

With workplaces in lockdown, our annual static bike challenge for law firms - Tour de Law - went from the office to the road, with committed colleagues riding a total of 84,000 miles and raising an amazing £231,936. We also brought together three regional static bike challenges to create one virtual bike ride, which raised an incredible £172,222 from the companies who took part.

During the last year, we also formed new partnerships with two companies from the manufacturing industry, Covex and CMT, to

raise vital funds through the sale of hand sanitiser and face masks respectively. Additionally, Covex donated £12,000 worth of hand sanitiser to Breast Cancer Now, allowing us to keep people living with breast cancer and our colleagues safe, as we began to open our offices and resume our face-to-face services.

Our long-standing partner, Dorothy Perkins raised £60,000 for us through the sale of reusable fabric facemasks. We are particularly grateful that they have continued to support us despite turbulent times in the retail industry and their own change in ownership.

...THAT WIDEN OUR REACH AND IMPACT

Our Asda Tickled Pink campaign was awarded the 2020 Business Charity Award: Fashion and Retail partnership and we received a high recommendation at the Third Sector Charity awards.

The vital funds raised through this partnership continue to be channelled into world-class research, life-changing care and breast awareness education. The partnership aim is to make a tangible and long-term difference to early diagnosis rates, and we anticipate that their funding will enable an additional 1.6 million women in the UK to be regularly checking their breasts by 2026, complementing their own innovative breast awareness campaigns.

In October 2020, we celebrated a landmark moment of our partnership with M&S, achieving our joint goal of raising £13 million in five years. Through their generous donations, M&S is the biggest contributor in the UK to breast cancer prevention research, having enabled over 330,000 hours of vital research and contributed towards more than 50 world-class scientific discoveries about the causes of breast cancer – a true accelerator of change.

Additionally, we are delighted that this year, as a result of our strategic and impactful activity, our partnership has been recognised by the prestigious Business Charity Awards, winning the category for best Long-Term Partnership.

In March 2021, we welcomed a new partnership with make-up brand, Trinny London. Together we launched our first International Women's Day campaign to inspire, support and empower women affected by breast cancer to feel their best.

In the latter part of 2020, we also secured a new partnership with Liv Cycling UK, the sister brand of Giant. This partnership will launch during Breast Cancer Awareness Month 2021, to help to raise awareness of the benefits of physical activity in reducing the risk of breast cancer.

Our partner Ann Summers also continues to raise awareness of and shine a spotlight on the issues around sex and intimacy after breast cancer, a topic we know is of vital importance for people living with breast cancer, and to raise money for us through product sales and customer donations.

BUILDING ON OUR SUCCESS AND COMMITMENT TO INNOVATION IN DIGITAL...

...BY DEVELOPING NEW ONLINE EVENTS

In February 2021, we had to make the difficult decision to cancel our Pink Ribbon Walks for the second year running, but we quickly pivoted and launched a portfolio of nine new virtual challenge events – delivered entirely through Facebook. You can read more them on page 62 of this report.

By understanding our participants needs, working collaboratively across the organisation and continually evolving and improving our supporter experience, we were able to recruit over 41,000 Facebook group members across our virtual challenges and went on to raise over £7 million through Facebook in total in the period covered by this report.

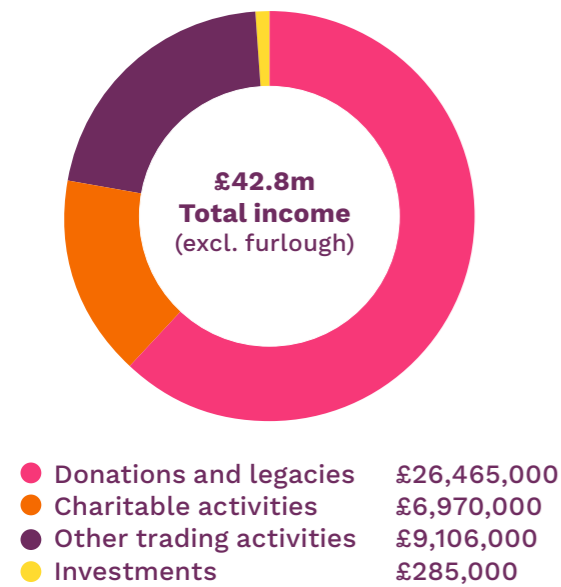
In October 2020, 82% of participants in these challenges were new to the organisation, which shows how successful we were in extending our reach.

FINANCIAL REVIEW

This report covers the period from 1 August 2020 to 31 July 2021.

Income

During the year, total income, excluding furlough income rose to £42.8 million from £38.4 million – a 11.5% increase. The increase of £4.4 million was achieved through the significant increase in online giving. The Facebook platform delivered total income for 2020-21 of £7.1 million compared to £1.4 million in 2019-20 and this increase offset the decline in income from live events.



The main sources of income continued to be individual giving and corporate partnerships. Income from charitable activities increased due to royalties generated from the intellectual property from Breast Cancer Now-funded research activities.

On 15 December 2021, we agreed to receive a settlement of \$28.3m in relation to rights to royalty income.

Below are some key highlights of our financial performance in those – and other – fundraising areas.

Individual Giving

Our supporters were very generous during this financial year, despite difficult times. Over 154,000 individuals generously supported Breast Cancer Now through our weekly lottery, a regular direct debit or gave generous support to our fundraising appeals and raffles.

The continued kindness of people who choose to leave us a gift in their Will is always appreciated and this year we raised £1.5 million from legacy gifts.

Corporate partnerships

2021 marks the 25th year of our flagship Asda Tickled Pink partnership, with an incredible £71 million raised to date. The partnership grew fundraising this year, which included a generous corporate donation of £400,000 linked to the Asda Mother’s Day campaign and the tremendous support of suppliers making bespoke pink products for sale.

This year, our partnership with pen manufacturers and suppliers, Pentel, reached the amazing £1.5 million milestone. Partners since 2006, they have now sold nearly 7 million pens to date in support of Breast Cancer Now.

You can also find out more about the financial performance of some of our other partnerships with Covex, CMT Group and Dorothy Perkins on page 59.

Events and community fundraising

In 2020-21, our amazing supporters continued to take on challenges, such as running the virtual London Marathon, hiking

in their local countryside and jumping out of aeroplanes in support of Breast Cancer Now. Thousands of people also took on one of our new virtual events:

- 5,900 people took on our Walk 400,000 steps or Run 100k challenges in October 2020, raising £930,530
- In January 2021, we challenged people to do 1,000 squats, with 3,764 participants raising a total of £78,083
- In February, we tested how to create a non-sporting virtual event to do in your own home, with 811 people flipping their Pink Pancakes to raise £4,595
- 8,919 runners took on Run 100k and 2,939 riders took on Cycle 300k in March, raising a phenomenal combined total of £2.4 million
- In May, with the cancellation of our Pink Ribbon Walks, 14,000 participants signed up to our Walk 100 Miles virtual challenge and raised £1.34 million
- And 6,000 people signed up to Cycle 300k or Swim 10 Miles in July and raised over £665,000 between them

Despite lockdowns and social distancing restrictions, communities across the UK were full of unstoppable individuals who took on everything from creating their own sponsored walks and fitness challenges to making and selling crafts or holding tabletop sales. Between them they raised over £900,000 for Breast Cancer Now.

Our community fundraising groups raised a total of £196,531 and local companies also showed their generosity and creativity, including:

- Our long-term partners, Fairfax and Favor raised an incredible £125,465 by donating 100% of the sales of their pink boots
- West Ham Women’s Football team raised £27,334 by donating 31.5% from the sale of their pink football shirts
- Wild Cosmetics raised £5,000 by selling

deodorant and donating 10% of the sale price

Other fundraising, including mass participation events, and major gifts and trusts

In the period covered by this report, we raised an impressive £1.83 million through Facebook birthday fundraising, personally thanking 33,500 Facebook fundraisers.

Over 7,200 amazing individuals took part in wear it pink 2020, raising over £1.3 million in total. Supporters wore pink at work, hosted virtual quizzes and socially distanced gatherings, and even created fantastic pink face masks.

376 supporters went above and beyond to support our Afternoon Tea event in 2020, by creating afternoon tea delivery boxes for family and friends, or by hosting socially distanced events in their garden. Against all odds, they went on to raise over £95,000. So far, over 7,500 supporters have signed up to have an Afternoon Tea in 2021.

In 2020, we also relaunched the £1,000 Challenge, asking new and existing supporters to raise £1,000 for secondary breast cancer research by 31 July 2021. Successful fundraisers will each have the opportunity to nominate a name for the Challengers’ Wall at Breast Cancer Now’s Toby Robins Research Centre. Despite lockdowns and social distancing restrictions, participants raised over £100,000 in all sorts of inventive ways, from walking challenges and raffles to head shaves. This will help us to fund more breakthroughs and find the answers we need to stop secondary breast cancer in its tracks.

We would like to share our heartfelt thanks with the players of the People’s Postcode Lottery for their wonderful support this year, by raising £666,228.

We are enormously grateful to the Garfield Weston Foundation for awarding a generous grant of £200,000 to our vital core costs in this challenging year, in addition to the Foundation's existing three-year grant to the Breast Cancer Now Tissue Bank.

Our sincere thanks to the Mary-Jean Mitchell Green Foundation for their longstanding support and renewed commitment to Professor Nick Turner's world-leading work at our Research Centre.

We are incredibly grateful for the vital grant we received from the Coronavirus Community Support Fund as provided by HM Government and administered by The National Lottery Community Fund. The Pink Ribbon Ball Committee and The Show London Committee have been tremendously supportive, helping us to produce 'REUNIGHT' – our first ever virtual gala event in November 2020. The evening raised over £127,000, allowing supporters to reconnect with Breast Cancer Now and share who they were most looking forward to reuniting with, after the lockdown. A huge thank you to both committees for their flexibility and dedication.

Thank you to Breast Cancer Now's Board of Trustees for their invaluable advice, which has helped shape our new high value giving club initiative, the Progress Fund. We aim to unite 50 philanthropists, donating £20,000 over 3 years, to support the next generation of breast cancer researchers and change the future for anyone affected by breast cancer. Most of all, thank you to the founding members of the Progress Fund for coming on board and inspiring others to join.

Fundraising expenditure

Expenditure declined from £17.0 million to £15.7 million (7.6%), which reflected the fact that many of the planned challenge events were cancelled or deferred due to COVID-19 restrictions. We were able

to switch many of these to virtual events where the cost base is significantly lower.

Charitable expenditure

Charitable expenditure, which includes all activities relating to research, provision of clinical and support services, policy and campaigning, and public health and information, decreased from £22.6 million to £18.1 million (19.9%). This decrease reflects the impact of COVID-19, which resulted in the continued suspension of community (face-to-face) support services and lower research activity.

Reserves

The net movement in funds was a surplus of £10.3 million (2020: £255,000 deficit), which includes realised investment gains of £0.8 million (2020: £8,000) and unrealised investment gains of £1.0 million (2020: 649,000 unrealised loss). The 2021-22 budget has been set to ensure that the charity is within the reserves policy set out below.

The charity holds reserves to provide funding for long-term financial commitments and a contingency against unforeseen operational cost pressures or reduction in income. Each year, the Trustees review reserves levels in light of the year ahead to ensure there are adequate funds to support the organisation. Reserves are held in three types:

- Restricted funds arise as a result of the donor making a specific stipulation as to how the funds may be used. This is often relating to a specific activity or grant that may fall over a number of years and therefore the balance carried forward at the year-end is committed for those activities. Restricted funds stood at £0.7 million at the year-end (2020: £2.3 million).
- Unrestricted funds arise when no stipulation is made by the donor. The

Trustees are responsible for ensuring these funds are spent in line with the charity's objectives in a timely fashion. Unrestricted free reserves, excluding those held in intangible and tangible assets of £1.7 million, stood at £10.4 million (2020: £12.2 million) at the year-end following the transfer of £13.5 million to designated funds.

- Designated funds arise when no stipulation is made by the donor but which have been set aside by Trustees for an essential spend or future purpose. Trustees are responsible for ensuring these funds are spent in line with the charity's objectives in a timely fashion. The charity's commitment to fund research is on a long-term basis but is funded through annual net fundraising income, which is subject to fluctuations. To mitigate this, in 2020-21 a Designated Fund of £13.5 million has been established to fund future long-term research commitments. It is expected this will be utilised within the next four years.

The minimum reserves level has been calculated taking into account the different risk factors that the organisation faces. During the year, the Trustees considered that a sufficient level of reserves for the organisation would be a minimum of £10.4 million.

The current free reserves position is in line with this policy. Total funds at the year end were £26.4 million.

Financial Statements

The charity's consolidated financial statements are set out on pages 84 to 87, including the results of the charity's subsidiaries. The financial results of the charity's regional groups are included within the consolidated results, as they operate within the same charity registration and are governed by the charity's regional group constitution.

Subsidiary Trading Companies

The charity had six subsidiaries that are detailed in note 25 of the financial statements along with their results for the year. The companies are all wholly-owned subsidiaries. These subsidiaries carry out activities such as sub-licensing the charity's logo and the Fashion Targets Breast Cancer logo to commercial partners and delivering certain charitable partnerships. BCN Research Ltd delivers the Breast Cancer Now Catalyst Programme.

The trading subsidiaries transfer any profits to the charity under the Gift Aid scheme and their financial statements are consolidated into those of the charity.

Going concern

Clearly the future continues to be dominated by the economic impact and repercussions of the COVID-19 pandemic. We continue to monitor the potential wider impact of the pandemic on the UK economy and the associated generosity or ability of future fundraising activities and donations. The financial impact of COVID-19 was a key element to these assessments. A review of a range of scenarios assessing the impact of COVID-19 on income projections has confirmed that appropriate actions can be implemented to maintain financial reserves within the policy range and it is reasonable to expect the charity to have adequate resources to continue in operation in the foreseeable future. Accordingly, the Trustees consider it appropriate for the financial statements to be prepared on a going concern basis of accounting.

During 2020-21, income exceeded levels achieved in both the previous year and those in our 2020-21 budget. The continued resilience of the income streams from individual donors and corporate partners was supplemented with additional income from online giving and virtual events.

Additionally, the cost savings we achieved in the four months to 31 July 2020 ensured that we began 2020-21 with a lower cost base, which helped to deliver a surplus which can be utilised for our beneficiaries in the medium term. Given this very satisfactory closing position and a balanced budget for 2021-22, the Trustees consider it appropriate for the financial statements to be prepared on a going concern basis as outlined in the Statement of Trustees' Responsibilities.

Grants

The charity funds research of the highest quality. We support the scientific community across the UK and Europe through multiple funding mechanisms, through our Tissue Bank and by supporting conferences and training courses. Some of our funding supports centres of excellence, as we have taken a strategic decision to build a critical mass of research in a small number of locations. These are based in higher education institutions and close to hospitals and breast units, working under one roof in integrated, multidisciplinary programmes of research.

Investments

The charity holds investments in accordance with the Investment Strategy approved by the Trustees. The Finance and Investment Committee reviews this Investment Strategy on an annual basis. The charity's investment objective is to maximise the return on its investments in a manner consistent with the charity's overall strategy and values while meeting two requirements:

1. Investing to cover certain short-term spending with adequate liquidity and a shorter-term risk averse profile
2. Investing longer-term reserves consistent with their use for longer-term commitments or as contingency assets

The investments, following an investment management tender process during the year is now consolidated with CCLA. In May 2021, the balance of the investment portfolio held at BlackRock was transferred to CCLA. The Finance and Investment Committee consider which are the most appropriate investment managers and as part of this, they consider their mandates, targets for performance and their ability to provide the appropriate support, diversification and performance required to achieve the investment strategy.

GOVERNANCE, STRUCTURE AND MANAGEMENT

The Board of Trustees of Breast Cancer Now presents its Annual Report and Accounts for the year ended 31 July 2021. These comply with the Companies Act 2006, Breast Cancer Now's governing document the Memorandum and Articles of Association, and Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standards applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2015).

Status

Breast Cancer Now is a company limited by guarantee, governed by Articles of Association, registered in England and Wales (number 9347608) and registered as a charity in England and Wales (number 1160558), Scotland (SC045584) and Isle of Man (number 1200). The Trustees listed on pages 54-55 are also the Charity's Directors and have overall responsibility for the strategic direction and effective governance of the Charity. The Trustees met regularly during the year. The legal and administrative details are listed on page 107.

Objects

The Charity's objects are to:

- Advance health, including the health of individuals suffering from cancer, patients receiving treatment, those convalescing following treatment by:
 - promoting activities which will assist with awareness, identification and prevention of cancer;
 - assisting those individuals who are disabled, infirm or in need of assistance;

- Advance the health of individuals by undertaking research into the causes and treatment of cancer on terms that the results of such research are published
- Advance public education in and understanding of the nature of cancer and its treatments, particularly (without prejudice to that generality) among sufferers of cancer and the families, friends and carers of such persons
- Promote such charitable objects concerned with medical research or the relief of sickness as the Directors shall in their absolute discretion determine

Trustee recruitment, appointment, induction and training

Trustees are appointed, by the Board, for an initial period of three years that can be extended for a further three-year term. A further one, two or three-year term can be agreed between the individual and the chairperson, or three other directors if deemed to be in the Charity's best interest.

Trustees contribute their services voluntarily. Prior to their appointment as a Trustee, they are appointed as a Trustee Designate, an honorary position in accordance with the charity's governing documents, for a period of six months. This is designed to enable potential Trustees and the Charity to evaluate if the role is right for them and includes a formal induction programme and attendance at Board and Committee meetings where they are able to contribute but not formally vote. This arrangement was introduced in February 2021.

A skills audit of the Board is performed periodically to ensure the appropriate range of skills and expertise, including in areas of scientific knowledge, organisational strategy and management. Trustees undertake mandatory in-house training, covering topics such as cyber security and data protection. Additional training is available in line with their needs.

The Board supports the principles of good governance set out in the Charity Governance Code and uses the Code to review governance on an annual basis. During the year we undertook a comprehensive review of our governance practices in response to changes in the Code and to regulatory alerts. We have reported back to trustees on the findings of those reviews, and identified appropriate follow up actions. We continue to implement those recommendations, some of which are referred to elsewhere in this report, and to report back to trustees on progress.

Board of Trustees

Members of the Board during the year were:

- Jill Thompson ^{†+~} **Chair**
- Professor Trevor J Powles ⁺ **Vice Chair**
(resigned 28 July 2021)
- Pascale Alvanitakis-Guely ^{†*}
- Mark Astaire ^{*}
- Barbara Brown ⁺
- Christopher Copeland [~]
- Professor Mitch Dowsett ^{*}
(appointed 28 July 2021)
- Susan Gallone ^{†*}
- Sonia Gayle ^{†*}
- Professor Adrian L Harris [~]
- Professor Ingunn Holen [†]
(appointed 28 July 2021)
- Dr Marion Lewis ⁺⁺
(resigned 28 July 2021)

Andrew Moore ^{~†*} **Vice Chair**
(from 28 July 2021)

Ann Pickering ⁺

Dr Nisha Sharma ⁺⁺
(appointed 28 July 2021)

[†]member of the finance and investment committee

^{*}member of the risk and governance committee

⁺member of the people and culture committee

[~]member of the science strategy committee

[~]member of the strategy committee

The Trustees have the benefit of a qualifying third-party indemnity provision as defined by section 234 Companies Act 2006. The Charity purchase and maintained throughout the year Trustees’ and Officers; liability insurance in respect of itself and its Trustees.

Senior Leadership Team (at 31 July 2020)

Delyth Morgan (Chief Executive)

Rachael Franklin (Director of Fundraising, Communications and Engagement)

Simon Vincent (Director of Research, Support and Influencing)

Chay Champness (Chief Operating Officer)

Emma Pennery (Clinical Director)
(in office until 31 October 2020)

During the year, the Senior Leadership Team (SLT) were regarded as the charity’s key management personnel per FRS102. Total earnings, including pension contributions, received by members of the SLT during the year were £548,520 (2019-20 £979,920). In 2020-21, the Chief Executive, the highest paid member of staff, received remuneration of £136,706.

Staff employee reward

From August 2020 to July 2021, Breast Cancer Now employed an average of 269 (2020: 311) staff across the year. Our

staff are fundamental to the work we do and we rely on them, our supporters, volunteers and trustees, and their amazing commitment, dedication and support they give to the charity.

Our People and Culture Committee monitors Breast Cancer Now’s people plan, our organisational and cultural development and reward strategy. This includes our pay and benefits policies, our pay structure and annual pay review process, all of which determine how pay levels are decided. We are committed to equality in our pay and benefits policy and aim to ensure that our levels of pay and range of benefits reflect the knowledge, skills, experience and competencies of our staff.

We aim to pay salaries at the median level of the voluntary sector, and we regularly use salary survey data to check that our pay remains in line with the market we operate in. The Committee approves the annual pay review process, which is determined partly by average pay awards across the sector, and partly by the charity’s financial performance and affordability to fund an annual cost of living increase.

Executive pay is governed by the same rules and review processes as for all other staff, and we offer the same level of benefits to the executive team as to the rest of our staff. Jobs are evaluated and graded into a framework with pay bands that are transparent and published to all staff. Our Trustees freely give their time and do not receive payment for the work they do, other than travel expenses.

Pension Provider and Bulk Transfer Update

Following Aviva’s appointment on 1 February 2020 to provide a Qualifying Workplace Pension Scheme for all Breast Cancer Now employees it was agreed in September 2020 for Aviva to offer a ‘bulk

transfer’ to members of the previous Standard Life and Aegon pension schemes who wished to move their pension funds to Aviva. The ‘bulk transfer’ process was completed in February 2021 with reasonable ‘opt-in’ percentages for this type of transfer exercise.

Aviva confirmed that 115 Standard Life pension members were approached of whom 71 applied to transfer (62%). The bulk transfer was completed in one day (normally up to five days) and £2.27 million of funds with monies disinvested by Standard Life on 9 December 2020 and invested with Aviva on 10 December 2020.

Aviva confirmed that 98 Aegon pension members were approached of whom 50 applied to transfer (51%). The bulk transfer was completed in five days and £1.14 million of funds with monies disinvested by Aegon on 15 January 2021 and invested with Aviva on 20 January 2021.

Equality, Diversity & Inclusion

Breast Cancer Now acknowledges that everyone is unique with individual skills, knowledge and life experiences and everyone can make a valuable and positive contribution to the aims, values and strategic goals of the charity. We recognise the benefits of employing and engaging with individuals from all backgrounds and community groups as this helps build a workforce and business where creativity and valuing difference in others thrives.

We are committed to a policy that ensures all current and potential staff members and volunteers are offered the same opportunities regardless of their sex, sexual orientation, age, disability, gender status (in cases of gender re-assignment), pregnancy and maternity status, marital status, race and religion and belief (protected characteristics) and membership of or activities as part of a trade union, or social or economic status.

An Equality, Diversity and Inclusion (EDI) Group has been formed to steer the development, implementation and monitoring of an organisation wide approach to EDI, which will enable us to better reach and meet the needs of both internal and external stakeholders.

The Group is using management information, external expertise and insight from lived experiences, to enable us to work towards our strategic objectives. It will ensure diverse voices are listened to, foster an inclusive environment for all colleagues and ensure we are reaching and supporting diverse beneficiaries through our charitable work. Since the group’s creation we have been laying the foundation for real change.

We have made significant progress including recognising that there were some identities, perspectives, and experiences not represented at board level and undertaken a successful planned and targeted recruitment drive. As a result we have increased the diversity of our board meaning more balanced decision-making helping us stay relevant to the communities and groups that we serve. We have also increased the representation of younger clinicians and researchers earlier on in their careers, and in doing so gained specific expertise from different areas of the breast cancer pathway.

We have created an EDI Policy and Glossary which sets out our commitment and approach to EDI, covering our legal obligations and reflecting our organisational strategy and vision, and how everyone who acts on behalf of Breast Cancer Now is expected to act and to put EDI into practice in their day-to-day work and interaction with others. We have also created a glossary which defines the language used in the policy and to help everyone’s understanding of it. We hope this will help everyone in our organisation to feel more

confident knowing what terminology to use and to help us achieve consistency across the charity in the way we communicate with all our key stakeholders.

EDI is absolutely everyone’s responsibility at Breast Cancer Now, but we recognise that leadership has a significant role to play in starting the EDI conversation, make it a high priority for the organisation, ensuring accountability, and role-modelling behaviours we want to see in our inclusive culture. That is why we invested in Senior Leadership Team EDI training this year where one of objectives of the day was ‘to get uncomfortable’ as that’s where opportunities for learning present themselves.

We have updated our social media community guidelines to make it explicit to people of what to expect when you post on our social platforms. This means that in future our teams are better equipped to handle racism, hate-speech or discrimination of any kind.

But it won’t stop there. We recognise that we are learning, and where we make mistakes, we will take ownership, reflect, learn, adapt our practices and move forward. Some of our recent EDI progress has in fact come from not quite getting it right. Next year we will focus on three strategic priority areas in line with our organisational strategy:

1. We will gather clear EDI data to guide us
2. We will build our collective confidence around EDI
3. We will strengthen the networks that are vital to driving our EDI progress

Approach to fundraising

We aim to build strong, meaningful, and long-lasting relationships with those who donate, fundraise and volunteer for Breast Cancer Now. We rely on the generosity of individuals and partners to help us reach

our ambitious 2050 goal and we take great pride in how we raise funds towards that. Our supporters are essential to what we do and we will always strive to provide exciting opportunities accompanied by excellent experience and high standards of service that are continuously improving.

Our fundraising portfolio is diverse ranging from volunteer-led fundraising to lottery to corporate to gifts in Wills, TV advertising and more. In the last year we have continued to be flexible with our fundraising practices and adapted in line with the changing environment and additional regulations required as a result of the COVID-19 pandemic.

To meet the expectations of our supporters, Breast Cancer Now continues to have a cross-organisational focus on ensuring that we are working in a way which is compliant with law and regulations governing charity fundraising, including being registered with the Fundraising Regulator and adhering to the GDPR. This focus enables us to adapt to any changes in the law or in best practice and continuously consider what is important to our supporters with regards to their privacy and data.

Fundraising on our behalf

Engaging with new and existing supporters is a privilege and an important part of our fundraising effort. We work with carefully selected professional fundraising agencies to conduct face to face activity and outbound calling as well as to manage our lottery, raffle and gift administration. We closely monitor those who work on our behalf through mystery shopping, call monitoring, training, and regular account management to ensure they adhere to our high standards and those of the Fundraising Code of Practice.

Safeguarding and vulnerable supporters

We recognise our responsibility to

safeguard our supporters and members of the public across all areas of our fundraising and services. Our Safeguarding Policy and annual safeguarding report is reviewed each year by the Risk and Governance Committee. In the year, the Charity has nominated a safeguarding Trustee and has introduced mandatory safeguarding training for all staff. We have also updated our Vulnerable Supporters Policy and now have guidance in place for staff working with children who fundraise for us.

Complaint handling

From August 2020 to July 2021 we received and responded to 210 complaints, which is a 82% decrease on the number of complaints compared to last year. The most common source of complaints was around our face-to-face fundraising activity with a large proportion of those concerning the COVID-19 pandemic. Other complaints across the year covered our direct marketing, fundraising from business and volunteer-led fundraising. Whilst the number of complaints we received is small compared to the overall reach, each complaint has been thoroughly investigated and corrective action and feedback to improve the work that we do has been taken as appropriate. We continue to review our policies and procedures to ensure that are robust and serve our supporters how they need.

Our Fundraising Promise

We rely on the generosity of our supporters, partners, and volunteers to make what we do possible. Through donations and fundraised income, we can work towards our vision that by 2050 people with breast cancer will live and be supported to live well.

We are committed to showing the individuals, companies, and organisations who support us how much they are valued and the difference their support makes.

The following principles guide our ways of working:

Honesty and Accountability

We ask for and listen to your feedback and complaints and make improvements based on what you say.

We closely monitor agencies working on our behalf and ensure they keep to our high standards.

We work in way that is compliant with relevant statutory bodies and the Fundraising Code of Practice.

Kindness and Respect

We inspire people to give or raise money for Breast Cancer Now without making them feel pressured to give.

We have a procedure for working with people in vulnerable circumstances, including children.

We only communicate with you in the ways that you prefer and always with a friendly and approachable manner.

We treat all donors and the members of the public fairly and with respect.

We value and acknowledge the contributions made by our supporters and thank accordingly.

Trust and Transparency

We keep supporter's data secure and do not sell or share it for marketing purposes.

We use donations wisely and always with an unrelenting focus on our beneficiaries and we do what we say we will do with the donations we receive.

Learning and Developing

We listen and learn and always strive to improve the experience of being a supporter of Breast Cancer Now.

We constantly monitor how fundraising activities are received and perform to

understand how they are experienced by our supporters.

We invest time and energy in developing our own skills and knowledge so we can deliver effective fundraising and supporter experience.

Advisory boards and committees

Finance and Investment Committee

The Finance and Investment Committee is responsible for advising the Board on short and long-term financial planning, including review of financial plans, budgets and proposals, as well as playing a governance role with the review of financial policies, processes and controls and advising on the appointment of external auditors. The committee is responsible for appointing the charity's investment managers and also sets and recommends the investment strategy to the Board for approval and oversees the management and performance of investments. The Finance and Investment Committee met five times during the year.

Risk and Governance Committee

The Risk and Governance Committee set the risk management process and ensure that strategic risks are identified, reported to the Board and, where necessary, highlighted to other committees, such as the finance and investment committee.

The Committee ensures that risk priorities and relevant actions are highlighted to the Senior Leadership Team for further action by their directorates. The Committee also oversees any material internal controls change programme and ensures recommendations are implemented. The Committee recommends the charity's risk management appetite and policy to the Board for approval and reviews policies which may result in significant reputational risk. The Risk and Governance Committee met twice during the year.

People and Culture Committee

The People and Culture Committee has delegated responsibility from the board for the remuneration and reward framework across the organisation and appointment of Trustees, and Senior Leadership including the Chief Executive. The Committee also has strategic oversight of the charity's people plan. The People and Culture Committee met three times during the year.

Science Strategy Committee

The Science Strategy Committee is responsible for overseeing Breast Cancer Now's research portfolio and making recommendations to the Board as to the distribution of our research funding. The committee plays a key role in ensuring that our research supports our strategic aims and met twice during the year.

Strategy Committee

The Strategy Committee is a temporary committee assisting the Board in developing the charity's strategy and framework to accurately measure the impact of the charity. The Committee also reviews strategic changes to the charity's activities prior to consideration by the Board or its committees. The Strategy Committee did not meet during the year and was formally closed down in February 2021, given the temporary nature of its work.

Chairs' Committee

The Chairs' Committee enables decisions to be made between Board meetings where they are of sufficient urgency that it would be detrimental to wait until the next Board meeting. The Chairs' Committee did not meet during the year.

Risk

Risk is inherent within all of our activities and therefore must be understood and managed. Accepting a certain level of risk allows us to innovate and strive to achieve more for people affected by breast cancer.

It is important, however, to balance risk across the organisation to ensure that it remains within our current level of appetite and tolerance.

We operate a process of risk identification and management that is embedded into the governance of the organisation. Central to this are our risk registers, which are regularly reviewed and updated by the Senior Leadership and Operational Leadership Teams, the Trustees and considered by the Risk and Governance Committee which normally meets twice a year.

We also regularly adapt the content to ensure we capture our understanding of our biggest risks and what we need to do to manage them. The registers are a living document that continues to change over time in response to internal and external stimuli.

Risks are scored in terms of likelihood and impact. This allows us to quickly identify the most pressing risks and any changes in their profile. For each risk the registers set out the possible causes, current controls in place to manage it and any actions ongoing to provide further mitigation. These actions are assigned an owner, and progress is tracked by the Senior Leadership Team and the Trustees.

The Trustees reviewed Breast Cancer Now's key risks and are satisfied that risk management has been undertaken appropriately and that adequate systems were in place to manage risk. The Senior Leadership Team are responsible for the day-to-day risk management and ensuring that each directorate is aware of, and appropriately manages, their risks. We have considered the key risks facing the charity in the year ahead. These strategic risks and mitigations to manage them are:

Coronavirus (COVID19) pandemic	
Risk	Mitigation
Inability to deliver our mission to those affected by breast cancer due to the coronavirus pandemic.	<ul style="list-style-type: none"> • Business continuity focus by Trustees, Senior Leadership team, led and coordinated by Chief Operating Officer • Agile governance arrangement, enabling quick and effective decision-making • Robust IT infrastructure enabling staff to work remotely • Agile implementation of digital solutions
Fundraising income	
Risk	Mitigation
Significantly reduced income from fundraising activities as a result of the coronavirus pandemic. This includes the cancellation and postponement of fundraising events, the challenging economic environment, increased competition from other charities and any other social, political or economic event, (eg. impact of Brexit).	<ul style="list-style-type: none"> • Continued use of online fundraising products including both pivoting existing events to virtual (Tour de Law) and initiating new Facebook based virtual events (eg. Walk 400,000, Run 100,000) • Accessing opportunities for coronavirus emergency funding from major funders • Ensuring close relationships with major partners and funders to align strategic priorities and focus on opportunity for fundraising in challenging environment • Strong and powerful external communications about the impact of the coronavirus on Breast Cancer Now and people affected by breast cancer to build the case for giving • Continued monthly financial monitoring focusing on cash collection, measures to reduce costs and maximising existing income streams • Ongoing review of performance to allow flex to activity to build on strong performance • Focus on development of new and additional sources of income.
Failure to anticipate or respond to significant changes in beneficiaries/ supporter behaviour and preferences arising from the coronavirus pandemic and other social and economic trends.	<ul style="list-style-type: none"> • Continued delivery of fundraising, supporter care, and services via online technology and re-opening of face-to-face delivery in line with government guidelines • Dedicated staff in team to develop centralised Strategic Insight function to increase focus on supporter insight and performance • External horizon scanning to understand and respond to short and longer trends and attitudinal changes.
Research activities	
Risk	Mitigation
Inability to maintain our commitments to our long-term research activities or to fund future research, because of lower levels of income due to the coronavirus pandemic and other economic factors.	<ul style="list-style-type: none"> • Close communication with those researchers to whom we provide long-term support, to discuss ways of mitigating the impact of reductions in budgets • Provision of supplements to grants funded in previous years to support them during coronavirus disruption and ensure that research we have already committed to can be completed • Establishment of designated fund to support long-term research commitment.

Inability of existing research to continue due to disruption at research host institutions or loss of key researchers.	<ul style="list-style-type: none"> • Close communication with researchers and senior administrative staff at key host institutions to monitor their ability to support the research we fund • Long-term commitment to key strategic research activities to ensure stability for research staff and support for research training.
Governance and compliance	
Risk	Mitigation
Inability to deliver our strategic objectives and respond to a number of risks which are heightened during the coronavirus pandemic: <ul style="list-style-type: none"> • Serious data security breach (from a cyberattack or non-compliance with GDPR) • Lack of compliance with regulations in relation to our fundraising practices • Failure to comply with legal or regulatory requirements. 	<ul style="list-style-type: none"> • Comprehensive governance structure with Board Committees specifically in place to review governance and compliance • Dedicated Compliance Officer and Governance team • Regular training for staff • Enhanced performance management programme for staff • External peer review of research • IT policies and procedures including vulnerability scanning and penetration testing and anti-virus software.
Staff and volunteers	
Risk	Mitigation
Failure to address the health and wellbeing of employees and volunteers and support their ability to perform their roles during the coronavirus pandemic and beyond.	<ul style="list-style-type: none"> • Regular staff updates via virtual platforms including a staff conference • Additional guidance and support for staff around remote working • Ongoing engagement with volunteers • Temporary closure of offices in accordance with Government guidance • Re-opening of some offices for a pool of staff to ensure continued wellbeing and risk assessment of permanent re-opening of offices for all staff, including development of hybrid working approach informed by staff feedback • Expansion and re-focus of diversity initiatives across the charity • Continued development of online learning and development platform.
Financial sustainability	
Risk	Mitigation
Failure to effectively manage our financial resources to ensure we can continue to support those affected by breast cancer during the coronavirus pandemic and beyond.	<ul style="list-style-type: none"> • Prudent 2021-22 budget and reserves policy • Continued enhanced cashflow forecasting throughout the year • Agile fundraising strategy with quarterly reviews around performance to date and future pipeline • Ongoing monthly updates to year end forecast

S172(1) STATEMENT

The Trustees are required to outline how they have met the requirements of S172(1) of the Companies Act 2006 in acting to promote the success of the charity to achieve its charitable purposes. This includes having regard to the interests of its stakeholders, volunteers, employees and the wider community. The charity recognises it cannot achieve its mission on its own. Collaboration and working in partnership with its stakeholders are essential in ensuring that by 2050 everyone diagnosed with breast cancer will live and be supported to live well.

Our supporters, including members of the public, donors, trusts and corporate partners enable us to raise funds we need to fund research and provide care services. We work closely with our suppliers and our dedicated staff who are vital in us progressing towards our goal. We set out below how the charity engages with its different stakeholders and listens to their views in order to better achieve its charitable objectives.

Employees

Our success as a charity is underpinned by the wellbeing and performance of staff. How we engage with staff:

- Performance review process which focuses on the performance and development of our staff.
- Development of an online learning and development platform to enhance face-to-face learning, and meet the extensive and diverse training needs across the staff group.
- Monthly organisational updates to staff providing information around the charity's development, and an opportunity for staff to provide

feedback and raise questions to the Senior Leadership Team.

- Monthly directorate meetings providing an opportunity for senior leadership to speak to their directorate, share updates across teams, and an open forum for staff members to update their peers, ask questions or flag concerns.
- The Organisational Management Team meet monthly and act as both a forum to cascade organisational information and to raise staff concerns.
- Weekly newsletters are distributed, which provide staff with updates from across the organisation, including operational news, campaigns and staff blogs.
- Active staff forum with regular online 'drop-ins' for staff to raise questions, and dedicated representatives to gather staff feedback or field concerns.
- Our intranet provides a centralised space for staff to find and post information. During the COVID-19 pandemic it became an integral hub for connecting staff working from home, and has since become a useful resource for hybrid working.
- We have around 24 'Now Sessions' per year, which are voluntary, peer-to-peer informal sessions hosted by teams across the organisation to share knowledge, learnings and success stories.
- Staff surveys, particularly around developing the plans to formally return to our offices in September 2021 following the lifting of COVID-19 restrictions.
- Equality, Diversity and Inclusion (EDI) group has been established, which includes staff representatives, to help steer our development, implementation and monitoring of our organisational

approach to EDI.

- We have an annual staff conference and awards ceremony to celebrate the achievements of staff and the organisation, of which staff members contribute to the content, and vote for their award nominations.

Volunteers

Our volunteers give credence and authenticity to our charity's vision. Our volunteers are intrinsic to what we do and as a group supplement our staff team to create real change. How we engage with volunteers:

- Established a Volunteer Hub to provide help and support across the volunteer group.
- Development of specific policies relevant to volunteer roles.
- Volunteer surveys used to obtain feedback on training and support provided.
- In February 2021, we held a virtual Volunteer Conference, which was attended by 190 volunteers. The conference focused on reconnecting with volunteers after the COVID-19 pandemic halted face-to-face services and forced many Breast Cancer Now staff onto furlough. This included talks from the Senior Leadership Team, as well as workshops to gain feedback and shape the volunteering experience.
- We have an annual outstanding volunteer award, as well as providing reward and recognition guidance for staff to better recognise volunteers across the organisation.
- Monthly volunteer email communications to keep informed of organisational developments, of new volunteering opportunities and with updates from their specific teams
- Monthly drop-in sessions for volunteers to connect with the central Volunteer Hub and other volunteers in an informal space.

- Established a dedicated volunteer learning platform - Volunteer Now - providing a single place for volunteers to access training specific to their role, engage with resources and information about the charity, so that they may be ambassadors for the charity, and access opportunities for personal development.
- Acted on feedback from volunteers to develop an ongoing series of online events and talks. In 2021, these have included: talks from research teams; how to engage with campaigning at Breast Cancer Now; challenges faced by people from marginalised communities after a diagnosis; and, raising awareness of breast cancer in men.
- Regularly monitoring and holding one-to-one phone calls with volunteers who haven't heard from Breast Cancer Now recently or may have paused their volunteering.
- Provide opportunities for volunteers to use their experiences to directly influence Breast Cancer Now's work - as well as get involved in external activity - through our Breast Cancer Voices community.

Donors, trusts and corporate partners

Our partnerships with our donors, trusts and corporate partners are fundamental to our charitable work. How we engage with donors, trusts and corporate partners:

- Collaborating regularly with our corporate partners through virtual and face-to-face meetings.
- Working with our corporate partners as we developed our new strategy to cocreate campaigns and actions.
- Regularly undertaking partnership reviews to understand levels of performance, impact and satisfaction.
- Major events and milestones at Breast Cancer Now are communicated to our donors and supporters.
- Reporting on the impact we have as a charity thanks to their support via

- impact reports, email communications and our Annual Report and Accounts.
- Opportunities for supporters to see the impact of their support in action, through research laboratory tours and talks from researchers and scientists.
 - Cultivation events such as our annual Carol Service, providing an opportunity to meet key members of Breast Cancer Now staff, Trustees and other supporters.
 - Donor specific thank you events - such as for events, community, philanthropic, and legator supporters - to show the impact of their support, to meet staff and other supporters and to engage further in our work.
 - Clear thanking process and plan for all supporters based on the type and level of support and their relationship with Breast Cancer Now.
 - Our Fundraising Promise, which guarantees what donors of all types can expect from Breast Cancer Now in their relationship with us.
 - Clear and quick escalation and resolution process if any of our donors, partners or trusts are dissatisfied with their relationship with Breast Cancer Now.

Suppliers
Our ability to fund dedicated research and to provide the necessary support and care to those impacted the charity relies on good liaison with research institutions and suppliers. How we engage with suppliers:

- A dedicated research team providing the administrative support to ensure effective collaboration with those institutions undertaking research on behalf of the charity.
- Continued development of the dedicated breast cancer Research Centre at the Institute of Cancer Research.
- Contributions to/involvement with/ partnership with associations that bring

- us together with other organisations in the sector to amplify our voice. This includes our membership to Association of Medical Research Charities (AMRC), the Richmond Group and the National Cancer Research Institute (NCRI).
- Development of links with external scientists through the Science Strategy Committee and various conferences, including the charity’s leading role in the UK Interdisciplinary Breast Cancer Symposium.
 - Use of experienced trainers, facilitators and nurses to connect and support those affected by breast cancer. Those benefitting from these sessions are encouraged to provide feedback on the content and delivery.

ENERGY AND EMISSIONS

The following figures make up the baseline reporting for Breast Cancer Now as 2020-21 is the first year that we are required to report this information. Scope 2 consumption and emissions relate to indirect emissions relating to the consumption of purchased electricity in day-to-day operations.

Scope 2	20-21
Grid supplied electricity - kWh-	242,064
Associated Greenhouse gas emissions tonnes CO2 equivalent (tCO2e)	53
Intensity ratio Emissions per headcount, based on average staff numbers of 269	0.09

Scope 2 consumption and CO2e emission data have been calculated in line with the 2019 UK Government environmental reporting guidance. The following Emission Factor Databases consistent with the 2019 UK Government environment reporting guidance have been used, utilising the current published kgCO2e relevant for the appropriate periods of 2020 and 2021 reporting year. For 2020 (1 August 2020 to 31 December 2020) used Database 2020, Version 1.0. For 2021(1 January 2021 to 31 July 2021) used Database 2021, Version 1.0.

STATEMENT OF TRUSTEES' RESPONSIBILITIES

The Trustees (who are also directors of Breast Cancer Now for the purposes of company law) are responsible for preparing the Trustees’ Annual Report (including the Strategic Report) and the financial statements in accordance with applicable law and regulation.

Company law requires the trustees to prepare financial statements for each financial year. Under that law the Trustees have prepared the financial statements in accordance with United Kingdom Accounting Standards, comprising FRS 102 “The Financial Reporting Standard applicable in the UK and Republic of Ireland”, and applicable law (United Kingdom Generally Accepted Accounting Practice).

Under company law the Trustees must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of the affairs of the charitable company and the group and of the incoming resources and application of resources, including the income and expenditure, of the charitable company for that period. In preparing these financial statements, the trustees are required to:

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles in the Statement of Recommended Practice: Accounting and Reporting by Charities (2015);
- make judgments and estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards, comprising FRS 102, have been followed, subject to any material

- departures disclosed and explained in the financial statements; and
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in business.

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

The Trustees are responsible for the maintenance and integrity of the charitable company’s website. Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions. In the case of each Trustee in office at the date the Trustees’ Report is approved:

- a. so far as the Trustee is aware, there is no relevant audit information of which the company’s auditors are unaware; and
- b. they have taken all the steps that they ought to have taken as a Trustee in order to make themselves aware of any relevant audit information and to establish that the company’s auditors are aware of that information.

 Jill Thompson,
Trustee
24 March 2022

INDEPENDENT AUDITORS' REPORT TO THE MEMBERS AND TRUSTEES OF BREAST CANCER NOW

Opinion

We have audited the financial statements of Breast Cancer Now ('the charitable company') and its subsidiaries ('the group') for the year ended 31 July 2021 which comprise the Consolidated Statement of Financial Activities, the Group and Charity Balance Sheets, the Consolidated Cash Flow Statement and notes to the financial statements, including significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the group's and the charitable company's affairs as at 31 July 2021 and of the group's income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006 and the Charities and Trustee Investment (Scotland) Act 2005 and Regulations 6 and 8 of the Charities Accounts (Scotland) Regulations 2006 (amended).

Basis for opinion

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

Conclusions relating to going concern

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

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

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

Other information

The trustees are responsible for the other information contained within the annual report. The other information comprises the information included in the annual report, other than the financial statements and our auditor's report 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.

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.

Opinions on other matters prescribed by the Companies Act 2006

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

- the information given in the trustees' report, which includes the directors' report and the strategic report prepared for the purposes of company law, for the financial year for which the financial statements are prepared is consistent with the financial statements; and

- the strategic report and the directors' report included within the trustees' report have been prepared in accordance with applicable legal requirements.

Matters on which we are required to report by exception

In light of the knowledge and understanding of the group and charitable company and their environment obtained in the course of the audit, we have not identified material misstatements in the strategic report or the directors' report included within the trustees' report.

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

- adequate and proper accounting records have not been kept or returns adequate for our audit have not been received from branches not visited by us; or
- the financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit.

Responsibilities of trustees

As explained more fully in the trustees' responsibilities statement set out on page 79, the trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

Auditor’s responsibilities for the audit of the financial statements

We have been appointed as auditor under section 44(1)(c) of the Charities and Trustee Investment (Scotland) Act 2005 and under the Companies Act 2006 and report in accordance with the Acts and relevant regulations made or having effect thereunder.

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

Details of the extent to which the audit was considered capable of detecting irregularities, including fraud and non-compliance with laws and regulations are set out below.

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 auditor’s report.

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

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We identified and assessed the risks of material misstatement of the financial statements from irregularities, whether due to fraud or error, and discussed these between our audit team members. We then designed and performed audit procedures responsive to those risks, including obtaining audit evidence sufficient and appropriate to provide a basis for our opinion.

We obtained an understanding of the legal and regulatory frameworks within which the charitable company and group operates, focusing on those laws and regulations that have a direct effect on the determination of material amounts and disclosures in the financial statements. The laws and regulations we considered in this context were the Companies Act 2006, the Charities Act 2011 and The Charities and Trustee Investment (Scotland) Act 2005, together with the Charities SORP (FRS 102). We assessed the required compliance with these laws and regulations as part of our audit procedures on the related financial statement items.

In addition, we considered provisions of other laws and regulations that do not have a direct effect on the financial statements but compliance with which might be fundamental to the charitable company’s and the group’s ability to operate or to avoid a material penalty. We also considered the opportunities and incentives that may exist within the charitable company and the group for fraud. The laws and regulations we considered in this context for the UK operations were General Data Protection

Regulation, employment legislation and health and safety legislation.

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

We identified the greatest risk of material impact on the financial statements from irregularities, including fraud, to be within the timing of recognition of income and the override of controls by management. Our audit procedures to respond to these risks included enquiries of management and the Finance and Investment Committee about their own identification and assessment of the risks of irregularities, sample testing on the posting of journals, reviewing accounting estimates for biases, reviewing regulatory correspondence with the Charity Commission and reading minutes of meetings of those charged with governance.

Owing to the inherent limitations of an audit, there is an unavoidable risk that we may not have detected some material misstatements in the financial statements, even though we have properly planned and performed our audit in accordance with auditing standards. For example, the further removed non-compliance with laws and regulations (irregularities) is from the events and transactions reflected in the financial statements, the less likely the inherently limited procedures required by auditing standards would identify it. In addition, as with any audit, there remained a higher risk of non-detection of irregularities, as these may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal controls. We are not responsible for preventing non-compliance and cannot be expected to detect non-compliance with all laws and regulations.

Use of our report
This report is made solely to the charitable company’s members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006, and to the charitable company’s trustees, as a body, in accordance with Regulation 10 of the Charities Accounts (Scotland) Regulations 2006. Our audit work has been undertaken so that we might state to the charitable company’s members those matters we are required to state to them in an auditor’s report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and the charitable company’s members as a body and the charitable company’s trustees as a body, for our audit work, for this report, or for the opinions we have formed.



Nicola May
Senior Statutory Auditor
For and on behalf of
Crowe U.K. LLP
Statutory Auditor

London
27 April 2022

CONSOLIDATED STATEMENT OF FINANCIAL ACTIVITIES

(incorporating an income and expenditure account)
For the year ended 31 July 2021

	Note	Unrestricted Funds £000	Designated Funds £000	Restricted Funds £000	Total 2021 £000	Unrestricted Funds £000	Designated Funds £000	Restricted Funds £000	Total 2020 £000
Income from:									
Donations and legacies	2	22,250	-	4,215	26,465	19,186	-	3,186	23,002
Charitable activities		6,970	-	-	6,970	5,579	-	-	5,579
Other trading activities	3	8,742	-	364	9,106	9,013	-	481	9,494
Investments		285	-	-	285	276	-	-	276
Furlough income	24	196	-	-	196	1,686	-	-	1,686
Total income		38,443	-	4,579	43,022	35,740	-	4,297	40,037
Expenditure on raising funds									
	4	15,732	-	-	15,732	17,032	-	-	17,032
Expenditure on charitable activities	5	12,632	-	6,137	18,769	19,344	-	3,275	22,619
Total expenditure		28,364	-	6,137	34,501	36,376	-	3,275	39,651
Net investment gain/(loss)									
Net realised investment gain	11	804	-	-	804	8	-	-	8
Net unrealised investment gain/(loss)	11	1,009	-	-	1,009	(649)	-	-	(649)
Total net investment gain/(loss)		1,813	-	-	1,813	(641)	-	-	(641)
Net income/(expenditure)		11,892	-	(1,558)	10,334	(1,277)	-	1,022	(255)
Transfers between funds	19	(13,500)	13,500	-	-	-	-	-	-
Net movement in funds		(1,608)	13,500	(1,558)	10,334	(1,277)	-	1,022	(255)
Funds brought forward	19	13,817	-	2,283	16,100	15,094	-	1,261	16,355
Funds carried forward	19	12,209	13,500	725	26,434	13,817	-	2,283	16,100

The Consolidated Statement of Financial Activities is for the group as a whole. Total income for the year for the parent charity was £40,684,000 (2020: £40,473,000). All amounts relate to continuing operations. All gains and losses recognised in the year are included in the Consolidated Statement of Financial Activities. There are no material differences between the net income for the financial year and the historical cost equivalents.

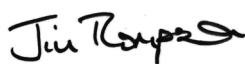
BALANCE SHEETS

As at 31 July 2021

	Note	Group 2021 £000	Group 2020 £000	Charity 2021 £000	Charity 2020 £000
Fixed assets					
Intangible assets	9	1,117	643	1,117	643
Tangible assets	10	624	1,000	624	1,000
Investments	11	10,413	8,522	10,413	8,522
		12,154	10,165	12,154	10,165
Current assets					
Current investments	12	-	-	-	-
Stock		-	14	-	-
Debtors	14	12,068	7,312	15,386	9,791
Cash at bank and in hand		24,071	22,086	14,282	11,666
		36,139	29,412	29,668	21,457
Creditors: amounts falling due within one year	15	(17,466)	(15,921)	(13,243)	(10,891)
Net current assets		18,673	13,491	16,425	10,566
Total assets less current liabilities		30,827	23,656	28,579	20,731
Creditors: amounts falling due after more than one year	16	(3,992)	(7,039)	(1,757)	(4,127)
Provisions for liabilities	18	(401)	(517)	(401)	(517)
Net assets		26,434	16,100	26,421	16,087
Unrestricted Funds	19	12,209	13,817	12,196	13,804
Designated Funds	19	13,500	-	13,500	-
Restricted Funds	19	725	2,283	725	2,283
Total Funds		26,434	16,100	26,421	16,087

The notes on pages 88 to 106 form part of these financial statements. The charity's net movement in funds for the year was an increase of £10.3m (2020:increase of £0.3m).

The financial statements of Breast Cancer Now (Company No: 9347608) were approved by the Board of Trustees and authorised for issue on 24 March 2022 and were signed on its behalf.



Jill Thompson
Trustee

CONSOLIDATED CASH FLOW STATEMENT

For the year ended 31 July 2021

	Note	£000	Group 2021 £000	Group 2020 £000
Cash flows from from operating activities:				
Net cash generated in operating activities	a		2,438	4,226
Cash flows from investing activities				
Dividends, interest and rents from investments		148		146
Purchase of tangible fixed assets	10	(58)		(48)
Purchase of intangible fixed assets	9	(543)		(467)
Proceeds from sale of investments	11	-		6,198
Net cash generated investing activities			(453)	5,829
Change in cash in the reporting period			1,985	10,055
Cash at the beginning of the reporting period			22,086	12,031
Cash at the end of the reporting period	b		24,071	22,086
(a) reconciliation of net incoming resources to net cash flow from operating activities				
			Group 2021 £000	Group 2020 £000
Net income/(deficit) for the reporting period (as per the Statement of Financial Activities)			10,334	(255)
Depreciation and amortisation	9,10		469	615
Loss on disposal of fixed assets			34	48
Increase in provisions			(116)	(136)
Realised gain on investments	11		(804)	(8)
Unrealised (gain)/loss on investments	11		(1,009)	649
Dividends, interest and rents from investments			(285)	(276)
Investment fees deducted from portfolio	11		58	48
Decrease in stock			14	11
(Increase)/decrease in debtors			(4,756)	5,235
Decrease in creditors			(1,501)	(1,705)
Net cash generated from operating activities			2,438	4,226
(b) Analysis of cash and cash equivalents				
			Group 2021 £000	Group 2020 £000
Cash in hand			22,042	20,062
Notice deposits (less than 3 months)			2,029	2,024
Total cash and cash equivalents			24,071	22,086

NOTES TO THE FINANCIAL STATEMENTS

For the year ended 31 July 2020

1. ACCOUNTING POLICIES

Charity information

Breast Cancer Now ('the charity') is a Public Benefit Entity which was incorporated on 9 December 2014, and is registered in England and Wales (company number 09347608) and in the Isle of Man (company number 6021F). It was registered as a charity on 18 February 2015 with the Charity Commission in England and Wales (charity number 1160558), in Scotland (charity number SC045584) and the Isle of Man (charity number 1200). The charity was established following the merger of Breakthrough Breast Cancer and Breast Cancer Campaign on 1 April 2015. On 29 April 2019 the charity, following approval by the Trustees, acquired Breast Cancer Care.

On 30 April 2020, the charity became the sole Corporate Trustee of Second Hope (Registered Charity No:1163205) a charity committed to supporting research in secondary breast cancer. Second Hope has been consolidated in the financial statements as a subsidiary.

Basis of preparation

These financial statements are prepared under the historical cost convention, as modified by the inclusion of investments at fair value and in accordance with Financial Reporting Standard 102 ('FRS 102') 'The Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland' and with the Statement of Recommended Practice 'Accounting and Reporting by Charities' FRS 102 as revised in 2019 ('the SORP 2019'), together with the Companies Act 2006, the Charities Act 2011, the Charities and Trustee Investment

(Scotland) Act 2005 and the Charities Accounts (Scotland) Regulations 2006. The functional currency of the group and charity is considered to be GBP because that is the currency of the primary economic environment in which the charity operates.

Going concern

The Board has reviewed the charity's activities and financial position together with factors likely to affect the future development, including the impact of economic uncertainty on voluntary income. The financial impact of COVID-19 was a key element to these assessments. A review of a range of scenarios assessing the potential continued impact of COVID-19 on income projections has confirmed that appropriate actions can be implemented to maintain financial reserves within the policy range and it is reasonable to expect the charity to have adequate resources to continue in operation in the foreseeable future. Accordingly, the Trustees consider it appropriate for the financial statements to be prepared on a going concern basis of accounting.

During 2020-21 our income from online giving and virtual events along with income from regular donors and our corporate partners have contributed to the overall increase in income. The continued restrictions of COVID-19 during 2020-21 meant that some of the planned activity around research and support services could not be undertaken in the year. This has resulted in an overall surplus of £10.5 million. Unrestricted free reserves of £10.4 million and cash and cash equivalents of £24 million. Given this very satisfactory

closing position and a balanced budget for 2021-22, the Trustees consider it appropriate for the financial statements to be prepared on a going concern basis as outlined in the Statement of Trustees' Responsibilities.

Consolidation

The financial statements consolidate the charity and its trading subsidiaries ("group"). The income and expenditure from the date of acquisition has been incorporated in these financial statements.

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

Exemptions

The charity has taken advantage of the exemption in section 408 of the Companies Act from disclosing its individual Statement of Financial Activities.

Business Combinations

Business combinations are accounted for by applying the purchase method. The cost of a business combination is the fair value of the consideration given, liabilities incurred or assumed and of equity instruments issued plus the costs directly attributable to the business combination. For combinations at nil or nominal consideration which are in substance a gift, any excess of the fair value of the assets received over the fair value of the liabilities assumed is recognised as a gain in the Statement of Financial Activities ("SOFA"). On acquisition, the fair values are attributed to the identifiable assets, liabilities and contingent assets.

Since the charity is a charitable company, it is subject to the restriction in the Companies Act Accounts Regulations that prohibits the recognition of unrealised gains in the profit and loss account. In circumstances where the fair value of the

assets received exceeds the fair value of the liabilities assumed, only the element of the gain which relates to the realised profits is recognised as 'Other income' in the SOFA. The element of the gain which relates to unrealised profits is recognised as 'Other recognised gains' in the SOFA.

Funds

The following funds are held by the charity:

*Unrestricted funds are donations and other income receivable or generated from the objects of the charity without further specified purpose and are available as general funds.

*Restricted funds arise when conditions are imposed by the donor, or by the specific terms of the appeal, and can only be spent on the activities specified.

*Designated funds arise when no stipulation is made by the donor but which have been set aside by Trustees for an essential spend or future purpose. Trustees are responsible for ensuring these funds are spent in line with the charity's objectives in a timely fashion. The charity's commitment to fund research is on a long-term basis but is funded through annual net fundraising income, which is subject to fluctuations. To mitigate this, in 2020-21, a Designated Reserve of £13.5 million has been established to fund future long-term research commitments. It is expected that this will be utilised within the next four years.

The charity relies heavily on donations and legacies, which fluctuate year on year. In order to continue day-to-day operations the Trustees have identified that a minimum level of unrestricted funds should be maintained. This minimum level of funds is kept under annual review by the Trustees in line with the reserves policy as described in the Trustees report (page 64).

Income

Income is accounted for and included in the SOFA when the group is entitled to the income, receipt can be quantified and receipt is probable. Income is deferred when it relates to future accounting periods.

Donations

Donations are recognised upon receipt along with any related gift aid. Donations which have been collected by a third party but not yet passed to the charity are accrued based on the date of collection.

Legacies

Legacies are recognised when capable of financial measurement, receipt is probable and where there are no conditions that still need to be fulfilled. Pecuniary legacies are recognised once notification has been received and probate has been granted. Residuary legacies are recognised once notification has been received, probate has been granted and they can be reliably measured, usually on receipt of estate accounts.

Corporate sponsorship and products

Income from corporate sponsorship and products is measured at the fair value of consideration received or receivable and represents the amounts receivable, net of value added taxes. The group recognises revenue when it has an entitlement to the revenue, it is probable that it will be received and the amount can be reliably measured. Revenue from corporate sponsorship is recognised over the period of the sponsorship arrangement. Revenue for the sale of goods is recognised at the point of sale.

Lotteries

Income received in respect of lotteries is recognised when the draw is made. Income received in advance for future lottery draws is deferred until the draw takes place.

The charity receives proceeds of lotteries held by the People's Postcode Lottery ('PPL'). The charity has no ability to alter the price of tickets, determine the prizes or reduce the management fee. As such, PPL is treated as acting as principal. Net proceeds due to the charity are recognised under trading income in the SOFA.

Donated goods and services

Donated goods and services are recognised in the accounts when the benefit to the charity is reasonably quantifiable and measurable. The value is the price the charity estimates it would pay should it purchase equivalent goods or services.

Investment income

Investment income is recognised on a receivable basis.

Regional groups

The income of regional fundraising groups includes all transactions cleared on the regional group bank statements up to the year-end.

Fundraising events

The company recognises revenue for events at the date of event. Where revenue is received in advance, recognition is deferred and included in creditors and where entitlement arises before income is received, the income is accrued.

Grants

Grant income is recognised when the funding offer is communicated in writing to the charity or when performance related conditions are met.

Furlough income

Government grant income received from the Coronavirus Job Retention Scheme ('Furlough income') has been recognised on a receivable basis in the Statement of Financial Activities over the same period as the costs to which it relates. The government grant income is classified as unrestricted.

Expenditure

Expenditure is accounted for on an accruals basis and attributed to the appropriate activities within the SOFA.

Expenditure on raising funds includes direct staff costs and expenditure relating to all fundraising activities. Support costs are apportioned on a headcount basis. Additionally, it includes marketing costs and management support.

Expenditure on charitable activities includes direct staff costs and expenditure relating to charitable activities provision of services, clinical support, health information and policy and campaign costs and research grant expenditure.

Research grants in furtherance of the charity's objectives are the total amounts granted to external bodies for charitable work. The grants made by the Trustees are recognised in the SOFA in the year the grant is awarded and notified to the recipient, provided a legal or constructive commitment exists and any conditions attaching to the grant have been fulfilled by the recipient. The liability is measured as the total of expected payments for the period to the next scientific review.

Costs relating to the sale of goods include the direct costs of purchasing and distributing goods for sale.

Communication and support costs are reviewed and any costs directly relating to our charitable activities have been allocated to the appropriate strategic charitable priority with the remainder being apportioned to charitable activities and raising funds based on a combination of headcount and staff time. Governance costs are the costs incurred to manage the charity in compliance with constitutional and statutory requirements and are included in support costs.

Operating leases

Rentals under operating leases are charged on a straight-line basis over the lease term, even if the payments are not made on such a basis. Benefits received and receivable as an incentive to sign an operating lease are similarly spread on a straight-line basis over the lease term.

Taxation

Breast Cancer Now has charitable status and therefore any income and gains are exempt from corporation tax under Section 202 of the Corporation Act 2010 to the extent that they are applied for their charitable objects.

Value Added Tax is only partially recoverable by the charity and therefore the nonrecoverable element is included with the expenditure on which the VAT was charged in the SOFA.

The charity's subsidiaries do not generally pay UK Corporation Tax because their policy is to pay taxable profits to the charity as gift aid.

Pensions

Employees are entitled to join the pension scheme provided by Aviva. These are defined contribution schemes administered by an independent scheme administrators. Scheme funds are independent to the charity and invested with Aviva. The charity contributes by matching employee contributions to their personal pension to a maximum of 8% of salary. The cost of providing this pension scheme is charged to the SOFA when it is incurred.

Investments

Fixed asset investments are stated at fair value at the balance sheet date. Any realised or unrealised gains and losses are shown in the SOFA. Gains and losses are calculated with reference to market values as at the beginning of the year or cost if purchased during the year.

Current investments are shown at cost less any provision for expected losses.

Financial investments

Basic financial instruments are initially recognised at transaction value and subsequently measured at amortised cost with the exception of investments which are held at fair value.

Financial assets held at amortised cost comprise cash at bank and in hand, together with trade and other debtors excluding prepayments. A specific provision is made for debts for which recoverability is in doubt. Cash at bank and in hand is defined as all cash held in instant access bank accounts and used as working capital.

Financial liabilities held at amortised cost comprise all creditors excluding deferred income, social security and other taxes and provisions.

Assets and liabilities held in foreign currency are translated to GBP at the balance sheet date at an appropriate year-end exchange rate.

No discounting has been applied to these financial instruments on the basis that the periods over which amounts will be settled are such that any discounting would be immaterial.

Listed investments are included in the balance sheet at fair value which is their closing bid price. Unlisted investments are included in the balance sheet at their fair value. Investments in subsidiary undertakings are held at cost less impairment. All investment gains and losses are included within the SOFA.

At the balance sheet date, the group held financial assets at amortised cost of £34,994k (2020: £28,439k), financial assets at fair value through income or expenditure of £10,413k (2020: £8,522k) and financial

liabilities at amortised cost of £19,123k (2020: £19,093k).

Tangible assets

Tangible fixed assets are stated at cost, less depreciation. Assets of under £1,000 in value are not capitalised but are taken fully as expenditure in the year of purchase.

Disposed assets are removed from the fixed asset register on the date of their sale or disposal. Any gain or loss on disposal is included within the SOFA. Depreciation is provided by the straight-line method, calculated to write off assets over their estimated useful lives at the following rates:

Fixtures and fittings: over 4 years
Leasehold improvements: over lease period
IT hardware: over 4 years

Tangible assets are subject to an annual impairment review, and any impairment identified is recognised in the SOFA in the year of the review.

Intangible assets

Intangible assets are stated at cost less accumulated amortisation. Intangible assets of under £1,000 in value are not capitalised but are expensed fully in the year of purchase.

Amortisation is calculated using the straight-line method at the following rate, calculated to write off assets over their estimated useful lives at the following rate:

IT software and website: over 4 years

Critical accounting judgements and key sources of estimation uncertainty

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

underlying assumptions are based on historical experience and other factors that are considered to be relevant. Actual results may differ from these estimates.

Critical accounting estimates:

*Legacies inherently contain a degree of uncertainty and are recognised in line with the income accounting policy.

*KSF provision is calculated based on the most recent progress report from the Administrators. At 1 August 2008 the charity held £4,370,000 of short-term cash deposits with Kaupthing Singer and Friedlander (KSF). A further £44,000 was due in interest as at that date. On 8 October 2008 the FSA applied to the High Court for KSF to be put into administration, as they concluded that it no longer met the FSA's threshold conditions. The charity recovered £10,000 during the period, taking the total recovery to 31 July 2021 to £3,835,000. This represents 86.9% of the original sum invested.

As at 7 April 2021, the administrator's estimate was updated to state that between 87.0% and 87.1% will ultimately be recovered by the charity. The Trustees have reduced the provision to reflect the recovery in the year with a carrying value of £Nil. The non-recovery of the original sum invested is 13.1% or £578,000 (2020: 13.33% or £583,000).

In the view of the Trustees, no assumptions concerning the future or estimation uncertainty affecting assets and liabilities at the balance sheet date are likely to result in a material adjustment to their carrying amounts in the next financial year.

Critical accounting judgements:

*Donated goods and services are not recognised where the incremental benefit to the charity cannot be reliably

measured. This will primarily relate to services which are gifted on a pro-bono basis and there is no comparable expenditure incurred by the charity. Please see note 2.

2. DONATIONS AND LEGACIES

	Unrestricted £000	Restricted £000	2021 £000	Unrestricted £000	Restricted £000	2020 £000
Trusts and appeals	662	422	1,084	499	630	1,129
Donations and legacies from individuals	18,400	2,810	21,210	15,046	3,018	18,064
Corporate donations	3,169	983	4,152	3,037	168	3,205
Other income	19	-	19	604	-	604
Total	12,250	4,215	26,465	19,186	3,816	23,002

The charity benefits from the services of unpaid volunteers. The value of this has not been recognised in the financial statements. Donations and legacies from individuals includes £13,195 (2020: £129,144) of donated goods for auction prizes. Legal advice was provided on a pro-bono basis the value of which totalled £10,000 (2020: £94,000) and has been recognised in the SOFA. During the year, the charity was donated advertising space, the value of which was £81,000 (2020: £97,000) which has also been recognised in the SOFA. The net amounts for pecuniary and residuary cases not included in legacy income as at 31 July 2021, but which are classed as a contingent asset total £25,000 (2020: £29,000).

3. INCOME FROM OTHER TRADING ACTIVITIES

	Unrestricted £000	Restricted £000	2021 £000	Unrestricted £000	Restricted £000	2020 £000
Events	176	-	176	699	-	699
Corporate products and sponsorship	3,371	364	3,735	2,816	481	3,297
Lottery income (note 26)	5,166	-	5,166	5,027	-	5,027
Other income	29	-	29	471	-	471
Total	8,742	364	9,106	9,013	481	9,494

4. EXPENDITURE ON RAISING FUNDS

	Direct costs £000	Support costs £000	Total 2021 £000	Direct costs £000	Support costs £000	Total 2020 £000
Cost of raising funds from donations and legacies	13,249	1,964	15,213	13,209	2,980	16,189
Cost of other trading activities	401	60	461	647	148	795
Cost of managing investments	58	-	58	48	-	48
Total	13,708	2,024	15,732	13,904	3,128	17,032

5. EXPENDITURE ON CHARITABLE ACTIVITIES

	Grants £000	Direct costs £000	Support costs £000	Total 2021 £000	Grants £000	Direct costs £000	Support costs £000	Total 2020 £000
5a. Charitable activities								
Research	10,933	1,345	851	13,129	11,469	1,948	1,194	14,611
Clinical	-	754	265	1,019	-	879	372	1,251
Services	-	1,687	639	2,326	-	2,906	898	3,804
Health Information & Policy	-	1,805	490	2,295	-	2,265	688	2,953
Total	10,933	5,591	2,245	18,769	11,469	7,998	3,152	22,619

5b. Grants

Grants were made to the following institutions during the year:

	2021 £000	2020 £000
Institute of Cancer Research	8,317	6,656
Queen Mary University of London	733	1,015
King’s College London	700	847
University of Sussex	400	-
CRUK Cambridge Institute	385	-
Royal College of Surgeons in Ireland	366	664
Beatson Institute of Cancer Research	-	600
University of Manchester	-	330
University of Birmingham	-	230
University of Cardiff	-	230
University of Leeds	-	219
Other Institutions	32	678
Total	10,933	11,469

6. SUPPORT COSTS

	2021 £000	2020 £000
IT, Finance & HR	1,983	2,904
Office	1,582	2,131
Management	235	712
Governance	469	533
Total	4,269	6,280

Total support costs of £4,269,000 (2020: £6,280,000) comprise of charitable support costs of £2,150,000 (2020: £3,152,000) and expenditure on raising funds of £1,939,000 (2020: £3,182,000). All support costs have been allocated entirely on a headcount basis.

7. NET EXPENDITURE FOR THE YEAR

	2021 £000	2020 £000
This is stated after charging:		
Depreciation and amortisation	469	615
Loss on disposal of fixed assets	34	-
Auditors' remuneration:		
Audit work	53	76
Audit work relating to prior year	34	-
Other services – taxation	4	6
Operating leases rentals:		
Property	886	1,141
Equipment	11	23

8. EMPLOYEES

	2021 £000	2020 £000
Wages and salaries	9,032	12,181
Social security costs	923	1,148
Pension costs	727	856
Other employee benefits	82	26
Total	10,764	14,211

Termination payments during the year totalled £71,000 (2020: £589,000). Termination payments are recognised on an accruals basis and are included within staff costs. At 31 July £Nil termination payments were unpaid (2020: £420,304).

	2021 no.	2020 no.
The average number of employees during the year were:		
Charitable activities	124	139
Fundraising	112	138
Support Services and governance	33	34
Total	269	311

	2021 Total no.	2020 Total no.
The number of employees receiving remuneration over £60,000 (excluding employer pension contributions) during the year was as follows:		
£60,001 – £70,000	6	6
£70,001 – £80,000	3	5
£80,001 – £90,000	-	1
£90,001 – £100,000	2	1
£100,001 – £110,000	1	1
£110,001 – £120,000	-	-
£120,001 – £130,000	-	1
£130,001 – £140,000	1	2
Total	13	17

8. EMPLOYEES (CONTINUED)

Pension costs for these higher paid employees amounted to £95,113 (2020: £132,016).

The key management personnel of the charity comprise the Trustees, the Chief Executive, the Chief Operating Officer, the Director of Fundraising, Communication and Engagement, the Director of Research, Influencing and Services and the Clinical Director who left the charity on 31 October 2020. The total earnings, including pension contributions, received by the key management personnel of the charity during the year were £548,520 (2020: £979,920). In 2020-21, the Chief Executive was the highest paid member of staff and received remuneration of £136,706.

Trustees have not received remuneration (2019: £Nil). Trustees did not incur any expenses which have been reimbursed in undertaking their duties.

9. INTANGIBLE ASSETS (GROUP AND CHARITY)

	IT Software & Website £000
Cost	
At 1 August 2020	879
Additions	543
Disposals	(238)
Transfers	457
At 31 July 2021	1,641
Accumulated amortisation	
At 1 August 2020	236
Charge for the year	110
Disposals	(233)
Transfers	411
At 31 July 2021	524
Net book value	
Carried forward at 31 July 2020	643
Carried forward at 31 July 2021	1,117

10. TANGIBLE ASSETS
(GROUP AND CHARITY)

	Leasehold Improvements £000	Fixtures and Fittings £000	IT Hardware £000	Total £000
Cost				
At 1 August 2020	1,110	336	812	2,258
Additions	24	1	33	58
Disposals	(93)	(6)	(746)	(845)
Transfers	-	-	324	324
At 31 July 2021	1,041	331	423	1,795
Accumulated depreciation				
At 1 August 2020	506	211	541	1,258
Charge for the year	144	89	126	359
Disposals	(73)	(5)	(738)	(816)
Transfers	-	-	370	370
At 31 July 2021	577	295	299	1,171
Net book value				
Carried forward at 31 July 2020	604	125	271	1,000
Carried forward at 31 July 2021	464	36	124	624

There were no assets held under finance leases in either year.

11. INVESTMENTS
(GROUP AND CHARITY)

	2021 £000	2020 £000
Market value at 1 August	8,522	15,279
Realised gains	804	8
Unrealised gains/(losses)	1,009	(649)
Income reinvested	136	130
Investment fees	(58)	(48)
Withdrawals	-	(6,198)
Market value at 31 July	10,413	8,522

All investment assets are held in the UK and are unrestricted. The total historic cost of these investments is £3,176,000. The holdings by fund on a market value basis are as follows:

			2021 £000	2020 £000
Fund	Asset class	Fund manager		
Charishare	Equities	BlackRock	-	3,946
CCLA	Equities, fixed interest and cash	CCLA	10,413	4,576
Total market value			10,413	8,522

On 5 May 2021, the value of the funds held at BlackRock were transferred to CCLA. The value of the funds was £4,828,103 which resulted in a realised gains of £804,000.

12. CURRENT INVESTMENTS
(GROUP AND CHARITY)

	2021 £000	2020 £000
Balance as at 1 August	-	4
Write back of provision	10	19
Transfer to cash at bank and in hand	(10)	(23)
Balance as at 31 July	-	-

The provision has been reduced to reflect a carrying value of £Nil given the dividends received in the year. An assessment of the provision is set out in the critical accounting estimates in note 1.

13. SUBSIDIARY
UNDERTAKINGS

Breast Cancer Now has two active subsidiaries; BCN Trading Ltd (03090884 and BCN Research Ltd (05047652). The charity also has 4 dormant subsidiaries and 1 non-trading subsidiary. All of the subsidiaries are incorporated in the United Kingdom and have a year end of 31 July, with the exception of Pink Ribbon Ltd. The investment in subsidiary undertakings held by the charity at 31 July 2021 was £245 (2020: £245).

	Breast Cancer Care Trading Ltd £000	Second Hope £000	BCN Research Ltd £000	BCN Trading Ltd £000	2021 Total £000	2020 Total £000
Turnover	-	-	1,660	3,764	5,424	3,807
Cost of sales	-	-	(1,563)	(16)	(1,579)	(68)
Interest receivable	-	-	4	-	4	35
Administrative expenses	-	-	(7)	(486)	(493)	(632)
Profit before gift aid and taxation	-	-	94	3,262	3,356	3,142
Gift Aid payable to the Charity	-	-	(94)	(3,262)	(3,356)	(3,142)
Profit before taxation	-	-	-	-	-	-
Tax expense	-	-	-	-	-	-
Profit after taxation	-	-	-	-	-	-
Assets	160	163	6,658	5,047	12,028	8,064
Liabilities	(160)	-	(6,658)	(5,040)	(11,858)	(7,885)
Net assets	-	163	-	7	170	179

Breast Cancer Campaign (05074725) and Breakthrough Breast Cancer (02848982). Pink Ribbon Ltd (04690589) and Breast Cancer Now Support and Care Lotteries Ltd (12397737) were dissolved during the year. On 30 April, the charity became the Sole Trustee of Second Hope, a registered charity (1163205).

The taxable profit from the subsidiaries each year is transferred to the parent charity as a Gift Aid payment. For 2020-21, a total payable of £3,356,000 to the parent charity has been recognised. For a full listing of the subsidiary undertakings please see note 25.

14. DEBTORS

	Group 2021 £000	Group 2020 £000	Charity 2021 £000	Charity 2020 £000
Trade debtors	6,106	672	4,261	379
Amount owed by subsidiary undertakings	-	-	5,394	3,625
Other debtors	315	107	313	107
Prepayments & accrued income	5,647	6,533	5,418	5,680
Total	12,068	7,312	15,386	9,791

Trade debtors includes £Nil (2020: £Nil) falling due after more than one year. Trade debtors are stated after provisions for impairment of £7,567 (2020: £6,000). Amounts owed by group undertakings are unsecured, interest free, have no fixed date of repayment and are repayable on demand.

15. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	Group 2021 £000	Group 2020 £000	Charity 2021 £000	Charity 2020 £000
Trade creditors	1,708	218	1,708	210
Grants payable	10,710	10,442	7,051	7,635
Taxes and social security	1,630	1,425	1,630	1,425
Accruals and deferred income	1,622	3,707	1,063	1,499
Other creditors	1,796	129	1,791	122
Total	17,466	15,921	13,243	10,891

Deferred income comprises sponsorship income received in advance of fundraising events taking place in 2021-22, as well as income received in advance for entries to our weekly lottery. Deferred income also includes income received relating to the Catalyst Programme which is run through BCN Research Ltd, a wholly owned subsidiary of Breast Cancer Now. Income is recognised at the point research spend is committed.

Deferred income	Group 2021 £000	Group 2020 £000	Charity 2021 £000	Charity 2020 £000
Balance as at 1 August	2,442	1,849	240	784
Amount released to income	(2,442)	(1,849)	(240)	(784)
Amount deferred in year	1,004	2,442	461	240
Balance as at 31 July	1,004	2,442	461	240

16. CREDITORS: AMOUNTS FALLING DUE AFTER MORE THAN ONE YEAR

	Group 2021 £000	Group 2020 £000	Charity 2021 £000	Charity 2020 £000
Grants payable	3,992	7,039	1,757	4,127

17. GRANTS PAYABLE

	2021 £000	2020 £000
At 1 August	17,481	18,828
Awarded during the year	12,545	13,141
Paid during the year	(13,917)	(12,816)
Adjustments during the year	(2,050)	(1,672)
As at 31 July	14,059	17,481
Due within one year (note 15)	10,067	10,442
Due after one year (note 16)	3,992	7,039
As at 31 July	14,059	17,481

A list of all grants awarded in year is included under Note 5b which represents grants awarded during the year of £12,545,000 (2020: £13,141,000) and adjustments during the year of a credit of £2,050,000 (2020: credit of £1,672,000), totalling £10,299,000 (2020: £11,469,000). Adjustments during the year of £2,050,000 (2020: £1,672,000) reflect underspend of research expenditure which has increased due to continued COVID-19 restrictions in the year. At 31 July 2021, the charity had unrecognised commitments of £33.6m (2020: £54.8m) for grant awards which are conditional upon the favourable outcome of both scientific and financial reviews. The decrease reflects the impact of the grants awarded in the year. The contingent liability relates to grants which are expected to be awarded until the next grant process in 2024-25. These commitments will be funded from income in the relevant period.

18. PROVISIONS FOR LIABILITIES (GROUP AND CHARITY)

	Onerous lease 2021 £000	Dilapidations 2021 £000	Total 2021 £000	Onerous lease 2020 £000	Dilapidations 2020 £000	Total 2020 £000
Balance as at 1 August	176	341	517	395	258	653
Additional provision	-	-	-	262	83	345
Utilised	(116)	-	(116)	(481)	-	(481)
Release	-	-	-	-	-	-
Balance as at 31 July	60	341	401	176	341	517

The onerous lease is expected to be utilised by November 2021 and the dilapidations provision is expected to be utilised by January 2025.

19. RECONCILIATION OF FUNDS

	Balance at 1 August 2020 £000	Transfers £000	Income £000	Expenditure £000	Investment gains £000	Balance at 31 July 2021 £000
Unrestricted funds	13,817	(13,500)	38,443	(28,364)	1,813	12,209
Designated funds	-	13,500	-	-	-	-
Restricted:						
General Research (1)	-	115	1,808	(1,905)	-	18
Prevention Research (2)	375	-	979	(1,354)	-	-
Secondary Research (3)	948	-	183	(1,131)	-	-
Support Services (4)	-	436	994	(1,114)	-	316
Other restricted funds (5)	960	(551)	615	(633)	-	391
Total restricted funds	2,283	-	4,579	(6,137)	-	725
Total Group funds	16,100	-	43,022	(34,501)	1,813	26,434
Unrestricted Charity funds	13,804	-	37,940	(41,361)	1,813	12,196
Designated Charity funds	-	13,500	-	-	-	13,500
Restricted Charity funds	2,283	-	4,579	(6,137)	-	725
Total charity funds	16,087	13,500	42,519	(47,498)	1,813	26,421

Notes

(1) Donations specifically given to fund general research

(2) Donations specifically given to fund the research area of prevention

(3) Donations specifically to support the research area of secondary breast cancer

(4) Donations specifically to support the area of support services

(5) This includes a variety of funds, where donations are restricted to specific areas of research and other charitable activity

Designated funds

The charity's commitment to fund research is on a long-term objective which has been funded through annual net fundraising income which is subject to fluctuations. To mitigate this, in 2020-21 a Designated Fund of £13.5 million has been established to fund future long-term research commitments.

The prior year reconciliation of funds is shown on the next page.

19. RECONCILIATION OF FUNDS (CONTINUED)

	Balance at 1 August 2019 £000	Transfers £000	Income £000	Expenditure £000	Investment gains £000	Balance at 31 July 2020 £000
Unrestricted funds	15,094	-	35,740	(36,376)	(641)	13,817
Restricted:						
Tissue Bank	-	-	31	31	-	-
Prevention Research	669	-	912	(1,206)	-	375
Kings College London	-	-	43	(43)	-	-
Molecular Cell Biology	-	-	450	(450)	-	-
Gene Function Analysis	-	-	30	(30)	-	-
Secondary Research	550	-	498	(100)	-	948
Other restricted funds	42	-	2,333	(1,415)	-	960
Total restricted funds	1,261	-	4,297	(3,275)	-	2,283
Total Group funds	16,355	-	43,037	(39,651)	(641)	16,100
Unrestricted Charity funds	14,517	-	35,985	(36,057)	(641)	13,804
Restricted Charity funds	1,261	-	4,297	(3,275)	-	2,283
Total charity funds	15,778	-	40,282	(39,332)	(641)	16,087

20. ANALYSIS OF NET ASSETS BETWEEN FUNDS

	Group Unrestricted 2021 £000	Group Designated 2021 £000	Group Restricted 2021 £000	Group Total 2021 £000	Group Unrestricted 2020 £000	Group Designated 2020 £000	Group Restricted 2020 £000	Group Total 2020 £000
Tangible & intangible assets	1,741	-	-	1,741	1,643	-	-	1,643
Investments	10,413	-	-	10,413	8,522	-	-	8,522
Net current assets	4,448	13,500	725	18,673	11,208	-	2,283	13,491
Long term liabilities	(4,393)	-	-	(4,393)	(7,556)	-	-	(7,556)
Total net assets	12,209	13,500	725	26,434	13,817	-	2,283	16,100
	Charity Unrestricted 2021 £000	Charity Designated 2021 £000	Charity Restricted 2021 £000	Charity Total 2021 £000	Charity Unrestricted 2020 £000	Charity Designated 2020 £000	Charity Restricted 2020 £000	Charity Total 2020 £000
Tangible & intangible assets	1,741	-	-	1,741	1,643	-	-	1,643
Investments	10,413	-	-	10,413	8,522	-	-	8,522
Net current assets	2,200	13,500	725	16,425	8,283	-	2,283	10,566
Long term liabilities	(2,158)	-	-	(2,158)	(4,644)	-	-	(4,644)
Total net assets	12,196	13,500	725	26,421	13,804	-	2,283	16,087

21. FINANCIAL AND OTHER COMMITMENTS

Operating lease commitments

The group and charity have the following future minimum lease payments under non-cancellable operating leases for each of the following periods:

	2021 £000	2020 £000
Property leases expiring:		
Within one year	1,056	953
Within two to five years	2,344	3,216
In over five years	-	-
Equipment leases expiring:		
Within one year	-	2
Within two to five years	-	-
In over five years	-	-

Lease payments expensed in the year are disclosed in note 7.

22. TRUSTEE EXPENSES

The Trustees received no remuneration in the year. No Trustees received reimbursement expenses totalling during the year (2020: £1,709). The charity has in place insurance to indemnify the Trustees for actions brought against them for wrongful acts committed. A Trustee indemnity insurance policy was held during the year as follows:

From 1 April 2019 to 31 March 2021 – Hiscox Ltd. Indemnity cover of £2,000,000. The cost of this specific policy is £1,159.
From 1 April 2020 to 31 March 2022 – Hiscox Ltd. Indemnity cover of £2,000,000. The cost of this specific policy is £960.

23. RELATED PARTY DISCLOSURES

In accordance with FRS 102, the charity discloses related party transactions that were recognised in the SOFA. Expenses reimbursed to Trustees are disclosed in Note 22 of the financial statements. Remuneration of key management personnel is disclosed under Note 8 of the financial statements.

However, some Trustees, members of the charity’s Board and directors of its subsidiary undertakings are Trustees or directors of organisations that are in receipt of funds from the group or enter into commercial transactions with the group. The following transactions are disclosed as the individuals concerned are regarded as holding a position of influence in both parties to the transactions concerned at the time they were entered into:

- BCN Group received income of £4,171,000 (2020: £3,814,000) from Asda Tickled Pink during the year and had an outstanding debtor of £2,124,000 at year end (2020: £Nil). The Chief Executive, Baroness Delyth Morgan, holds the position of Trustee at Asda Tickled Pink.
- During the year, the charity awarded grants of £Nil (2020: £199,000) and processed a grant adjustment of £8,000 (2020: £Nil) to the University of Oxford. At 31 July, there was an outstanding creditor of £208,000 (2020: £358,000). The charity made a payment of £142,000 during the year (2020: £105,000). Trustee Professor Adrian Harris is Professor of Medical Oncology at the University of Oxford.
- During the year, the charity awarded grants of £Nil (2020: £Nil) and grant adjustments of £6,000 (2020: £6,000) to the University of Edinburgh and had an outstanding creditor of £295,000 at year end (2020: £328,000). The charity made a payment of £39,000 during the year (2020: £99,000). Trustee Mark Astaire is a member of the International Advisory Board of the University of Edinburgh.
- The charity paid for membership and other related costs to the National Cancer Research Institute (NCRI) totalling £48,000 (2020: £40,000) during the year. In addition, the charity awarded a grant to NCRI of £Nil (2020: £Nil) and had an outstanding creditor of £2,500 at year end (2020: £2,500). The charity made a payment of no payments during the year (2020: £2,500). The Chief Executive, Baroness Delyth Morgan, holds the position of Director at the NCRI.
- The charity paid a levy to the Fundraising Regulator of £8,000 (2020: £8,000) during during the year. The charity had an outstanding creditor of £Nil at year end (2020: £Nil). The Chair, Jill Thompson, holds the position of Director at the Fundraising Regulator.

During the year, the charity had the following transactions with its subsidiary companies:

- Payable under Gift Aid from BCN Trading Ltd of £3,262,000 (2020: £2,658,000) and management charge of £468,100 (2020: £523,000).
- Payable under Gift Aid from BCN Research Ltd of £94,000 (2020: £Nil).
- Payable under Gift Aid from Breast Cancer Care Trading of £Nil (2020: £1,046,000) and management charge of £Nil (2020: £49,000).

At the year end, the charity had an outstanding debtor balance due from BCN Trading Limited of £3,770,000 (2020: £2,202,000), an outstanding debtor balance due from BCN Research Limited of £213,000 (2020: £9,000), and an outstanding debtor balance from Breast Cancer Care Trading Limited of £1,446,000 (2020: £1,414,000).

24. FURLOUGH INCOME

During the year the charity accounted for a receivable under the Government’s Job Retention Scheme of £196,000 (2020: £1,686,000).

25. SUBSIDIARY ENTITIES

Name	%	Registration	Registered office	Status
BCN Trading Limited	100	England & Wales	Fifth Floor, Ibex House, 42-47 Minories, London EC3N 1DY	Trading
BCN Research Limited	100	England & Wales	Fifth Floor, Ibex House, 42-47 Minories, London EC3N 1DY	Trading
Breast Cancer Care Trading Limited	100	England & Wales	Fifth Floor, Ibex House, 42-47 Minories, London EC3N 1DY	Non-trading
Breast Cancer Campaign	100	England & Wales	Fifth Floor, Ibex House, 42-47 Minories, London EC3N 1DY	Dormant
Breakthrough Breast Cancer	100	England & Wales	Fifth Floor, Ibex House, 42-47 Minories, London EC3N 1DY	Dormant
Charitable Incorporated Organisation	Ownership	Regulator	Registered Office	Status
Second Hope	Sole Trustee	Charity Commission	Fifth Floor, Ibex House, 42-47 Minories, London EC3N 1DY	Active

26. PEOPLES POSTCODE LOTTERY (PPL) INCOME

Lottery income includes income from PPL.
The charity received £666,228 of net proceeds from PPL during the year (2020: £639,126).

	2021 £000	2020 £000
Ticket value	2,082	1,997
Prize fund	(833)	(799)
Management fee	(583)	(559)
Net proceeds	666	639

27. POST BALANCE SHEET EVENT

On 15 December 2021, we agreed to receive a settlement of \$28.3m in relation to rights to royalty income.

LEGAL AND ADMINISTRATIVE DETAILS

Patron
HRH The Prince of Wales

Independent Auditors
Crowe U.K. LLP
55 Ludgate Hill
London
EC4M 7JW

Bankers
Barclays Bank plc
1 Churchill Place
London
E14 5HP

Solicitors
Russell Cooke
2 Putney Hill
London
SW15 6AB

Investment Managers
BlackRock Investment Managers
(until April 2021)
12 Throgmorton Avenue
London
EC2N 2DL

CCLA
Senator House
85 Queen Victoria Street
London
EC4V 4ET

Registered Office
5th Floor
Ibex House
42-47 Minories
London
EC3N 1DY

Glasgow
Robertson House
Ground Floor
152 Bath Street,
Glasgow
G2 4TB

Sheffield
St James House
Vicar Lane
Sheffield
S1 2EX

Cardiff
1st Floor
14 Cathedral Road
Cardiff
CF11 9LJ

info@breastcancernow.org
breastcancernow.org

THANK YOU

We thank our Royal Patron, His Royal Highness The Prince of Wales.

We thank our Vice Patrons, Baroness Joan Bakewell DBE, Cherie Blair CBE QC, Geri Horner, Allan Leighton, Dame Jenni Murray DBE and Professor Ian Smith.

We thank our Ambassadors, Kaye Adams, Jonathan Ansell, Alexandra Burke, Vanessa Feltz, Donna Fraser OBE, Leigh Halfpenny, Michelle Heaton, Denise Lewis OBE, Amanda Mealing, Diana Moran BEM, Linda Nolan, Mike Phillips, Lisa Riley, Gaby Roslin, Lisa Snowdon, Michaela Strachan, Meera Syal CBE and Denise Van Outen.

We thank our celebrity and influencer supporters, and everyone affected by breast cancer who told their story in support of our work.

We thank everyone who shared their experiences and insights in support of our campaigning and influencing work, with particular thanks to: Alison Tait, Anna Sarphie, Beth Coppin (passed away), Claire Myerson, Emma Metcalfe, Flora Sheringham (passed away), Gillian Mercer, Jane O'Neill, Janet Harris, Jen Hardy, Joanne Myatt (passed away), Jo Ballarin, Lesley Stephen, Lorna Whiston, Miranda Johnson, Natasha Tidmarsh, Nicola Tracey, Philippa Hetherington, Sophie Abbott, Tassia Haines and Vicki McGinn.

We would also like to thank the 60+ women who shared their experience of using abemaciclib with fulvestrant, a treatment for certain people with secondary breast cancer, and helped us successfully make a powerful case about why this treatment should remain as an option to new NHS patients.

We thank our Breast Cancer Now Ambassadors and the officers and members of the All Party Parliamentary Group on Breast Cancer, especially current Chair Craig Tracey and former Co-Chair Bambos Charalambous.

We thank all the MPs, MSPs and MSs who have supported our work, tabled questions, met with their constituents and continue to help us highlight the issues faced by people affected by breast cancer.

We thank the healthcare professionals that shared their experiences of the impact of COVID-19 on breast cancer services for our 'Press Play' report, including: Andreas Makris (consultant clinical oncologist), Dr Caroline Rubin (clinical radiologist), Dr Imogen Locke (consultant clinical oncologist), Dr Julie Doughty (President of ABS), Mark Beresford (clinical oncologist), Mary Wilson (consultant breast radiologist), Nicky Roche (consultant breast surgeon) and Ruth Waters (President of BAPRAS).

We thank all the breast cancer patients who have kindly donated tissue and blood samples to the Breast Cancer Now Tissue Bank.

We thank the members of the Dame Vera Lynn Translational Fellowships Review Committee, the Grants Committee, the Science Strategy Committee, Tissue Bank Advisory Council, Tissue Access Committee, the Catalyst Committee and expert peer reviewers from all over the globe who helped us evaluate grant applications.

We thank the staff and scientists in the laboratories we fund who have supported us in promoting the world-class research Breast Cancer Now is funding.

We thank the organisations and individuals who have supported our public health and wellbeing work, including Sport England, the Richmond Group of Charities and Professor Annie Anderson of the ActWELL trial.

We thank all the facilitators, therapists, expert speakers and healthcare professionals across the UK who have contributed their time, expertise and energy to our support services.

We thank all the healthcare professionals, patients and volunteers who have supported the Breast Cancer Now Service Pledge.

We thank all the healthcare professionals and people affected by breast cancer who volunteered their time to review our health information.

We thank all our volunteers who give their time freely to support our work.

We thank everyone who has donated or raised money for us in the past year or remembered us in their Will.

We thank all the colleagues and customers of our corporate partners, including: Ann Summers, Asda, Careys Foundation, Cath Kidston, CMT Group, Covex, Damart, Dorothy Perkins, ELEMIS, ghd, Hallmark, M&S, Palmers, Pentel, River Island, Skechers, Sofology, and Trinny London.

We would like to share our heartfelt thanks with the players of the People's Postcode Lottery for their wonderful support this year.

We thank the founding members and volunteer patient advocates of the Breast Cancer Now Progress Fund.

We also thank the following organisations, groups, charitable trusts and foundations, and individuals for their generous support:

- 3Ts Charitable Trust
- 12 KBW
- ...
- ACCA
- Addleshaw Goddard LLP
- Airth Castle
- AHC
- Alison Metcalfe (passed away)
- Allen & Overy LLP
- Alex Lloyd
- Amanda Jones
- Armaghan Fatemi
- Amgen
- AND Digital
- Angela Quinn
- Anglian Water
- Ann Coxon
- Anytime Fitness
- AstraZeneca
- Avril Gilchrist
- ...
- Asda suppliers taking part in Tickled Pink:
- Unilever
- Mondelez
- Weetabix
- Kellogg's
- The Coca-Cola Company
- Proctor & Gamble
- Bel UK
- McCain

Finsbury Food Group
Premier Foods
Birds Eye
Lucozade Ribena Suntory
McVitie’s
Histon Sweet Spreads
SC Johnson
Hugworld Cristalinas UK Ltd
Universal
Just Love Food Company Ltd
...

Batley Bulldogs RLFC

Barclays Bank

BDO

Beccles Breast Cancer Now Group

Belinda Gray and Art For Cure

BFT MastClimbing Ltd

Bishop's Stortford Breast Cancer Now Group

Blenheim Palace

BlueSky Cosmetics

Bognor Regis Golf Club

BondMoran

Breastmates Stowmarket Breast Cancer Now Group

Brendan Gallen

Bromley & Beckenham Breast Cancer Now Group

Bruckhaus Deringer

BT

Burgess Hill Breast Cancer Now Group
...

Carolyn Lindsay

Carys Crittenden (passed away)
Chantele Rashbrook and the Clifftop Challengers

Chatham Financial

Cheshire Breast Cancer Now Group

Chiswick House

Christine and Bob Sturgess

Claire and Mark Urquhart

Claire Seedhouse

Clifford Chance LLP

Cloisters Chambers

Cotswold Breast Cancer Now Group

Covington & Burling LLP

Cravath, Swaine & Moore LLP

CrossFit Kirkintilloch
...

Daiichi Sanyko

Danni Starley (passed away) and Oscar Coulson-Starley

Dawson Group

Dean Cope

Derby County FC

DCW Group

DHL Air

Dominic James

Doris Field Charitable Trust

Dream Challenges for their continued support as part of Women v Cancer

DS Smith Group
...

eActiv

East Dunbartonshire & Glasgow Breast Cancer Now Group

Edinburgh Breast Cancer Now Group

Elaine Mitchell

Eleanor Moffat

Eli Lilly

Emma and Tom Barker

Essex Fundraising Group

Europanel

Eversheds Sutherland LLP

Exact Sciences
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Fairfax & Favor

Fighting Breast Cancer Committee Herts

Farrer & Co LLP

Fichtner Consulting Engineers

Fluxx

Fragomen LLP
...

Garfield Weston Foundation

George Darby

Gilead

Gillian Stewart

Glasgow Fundraising Group

Gourock Golf Club

Grant Simpson Trust

Greenberg Traurig LLP
...

Hasan Hejazi Ltd

Hayley Carpenter-Priest

Hedwig Hegtermans

Hempsons LLP

Henton & Chattel

Howden Group Holdings
...

Ian Barraclough

Ineos Grenadiers

Isle of Man Breast Cancer Now Group

Isle of Wight Breast Cancer Now Group
...

Jamie Godin

Jan Hulme and the Tuesday Mini Club

Jane Brooks

Jason Guy

Jeanette Horlock

Jill Thompson

JJX Logistics

Joanne and Chris Thomson

John Lewis and Partners Glasgow

Jones Day LLP

Journey Further

Judith Taylor
...

Kennedys LLP

Kerry Banks

Kings Chambers

Kilspindie Golf Club

Kirkland & Ellis LLP
...

Latham & Watkins LLP

Leigh Jenkins

Lesley Seville (passed away)

Letham Golf Club

Linda Dye

Linda Lacey

Linda Lee

Linklaters LLP
Liz Mackay
London Wembley Breast Cancer Now Group
Lorraine Hathorn
Lucy Lacey
...
MacRoberts LLP
Mad March Hare
Maltin PR
Mark and Liz Astaire
Mary Carmichael
Mary-Jean Mitchell Green Foundation
Matthew Parsons
Mayer Brown LLP
Memery Crystal LLP
Michaela Franklin
Milk_Shake Haircare
Morrison Foerster LLP
...
Nan McDonald
Natalie Johnson
Nelsons LLP
New Law Solicitors
Network Rail
Nick Payne
Nina Caplin
Notre Dame High School
North Hants Golf Club
Nottinghamshire and Leicestershire Fundraising Group
Novartis
...
Oldmeldrum Fundraising Group
...

Pam Penfold
Perth Racecourse
Peterulter Golf Club
Pfizer
Philippa Lovering
Pink Ribbon Ball Committee
Plexus LLP
...
QBE
Quadrant Chambers
...
Rayleigh Golf Club
Rebecca Cochrane
Redlibbets Golf Club
Roche
Ropes & Gray LLP
Rosemary Walker
RPC LLP
Rugby Against Cancer
Ruth and Paul Willmott
...
Saffron Seats
Salisbury and New Forest Breast Cancer Now Group
Santander
Scottish Building Society
Scottish Student Sport
Scottish Fire and Rescue Service
Seagen
Secondary1st and Jeffrey and Maralyn Kalman
Sheila McNicol
Sheila Wilson
Shelley Dobson

Shropshire Breast Cancer Now Group
Sidemen Clothing
Sidley Austin LLP
Simon Halden & the Sarah Greene Tribute Fund
Simpson Builders
Simpson Thacher LLP
Somerset Breast Cancer Now Group
South Herts Breast Cancer Now Group
South Wales Fire Service
South Wales Police
Squire Patton Boggs LLP
Sue Facey
Sue Owen Williams
Surrey County Cricket Club
Souter Charitable Trust
Starwood Capital
Steph Harrison
Stewarts Law LLP
Stowe Family Law
Strathclyde University
...
Sweet Causes
SweetSpot for their continued partnership for The Women's Tour
...
Takeda
Technip FMC
The National Lottery Community Fund and HM Government's Coronavirus Community Support Fund
The Show London Committee
Thermo Fisher Scientific
Tikiboo
Transport for Wales

Trendsetter Home Furnishings
Trisha Davidson
Turnhouse Golf Club
...
Valerie McGavin
Valerie Stephenson
Vinson & Elkins LLP
Volvo Truck and Bus Centre Scotland
...
Wales Fundraising Committee & Nick Young
Western Power
West Ham United Women's Football Team
West Lancashire Fundraising Group
West Midlands Sutton Coldfield Fundraising group
White & Case LLP
Wild Cosmetics Limited
Willmores
...
Zoe Varnava
...
Finally, thank you to all those who supported us with generous donations that wish to remain anonymous.

Breast Cancer Now is a powerful charity with a single focus on breast cancer.

We work solely on bringing together research and care to tackle breast cancer more effectively, to reduce the risk and to better support all those affected by the disease, whether directly or indirectly.

We're a force to be reckoned with and every supporter makes us stronger.

Our vision is that by 2050, everyone diagnosed with breast cancer will live and be supported to live well.

Our mission is to be recognised as the place to turn for information and support on all aspects of breast cancer and the driving force for breakthroughs in prevention, detection, and treatment of the disease in all its forms.

This report sets out our progress during the specific period 1 August 2020 to 31 July 2021.

Registered with



Breast Cancer Now is a company limited by guarantee registered in England (9347608) and a charity registered in England and Wales (1160558), Scotland (SC045584) and Isle of Man (1200). Registered Office: Fifth Floor, Ibex House, 42-47 Minories, London EC3N 1DY.