

# Annual Review & Financial Statements

1 Apr 2024 – 31 Mar 2025

**Cancer52** is registered as  
a charity in England and Wales,  
**Charity No. 1174569** and as a  
company limited by guarantee  
in England and Wales,  
**Company No. 07994413**

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# Let's make some noise:



Trustees Annual Report and Directors Report  
for the year ended 31st March 2025

## Foreword

**It has been a year of transition and growth for Cancer52. In October we welcomed our new CEO, Chris Walden, who has seamlessly stepped into the role, bringing clarity, and a deep commitment to our mission. His ability to connect not only with members, but with policymakers and stakeholders has ensured that Cancer52's voice not only continues to be heard but is increasingly influential. Under his leadership, our organisation has been widely consulted in the development of the National Cancer Plan for England**

I would like to extend heartfelt thanks to Jane Lyons MBE, our former CEO, and Sasha Daly, who served as Interim CEO, for their dedication and leadership. Their achievements, alongside the skills and dedication of the wider team, laid the foundation for a smooth and successful transition.

I'd also like to congratulate Jane on her recent MBE, in recognition of everything she accomplished during her tenure, to bring the profile of rare and less common cancers to the fore.

I am deeply grateful to our trustees, whose expertise and support continue to guide **Cancer52** with wisdom and integrity. Special thanks go to those involved in the CEO recruitment process, who undertook the challenging task of selecting Chris from a very strong field of candidates. We said goodbye to two long-standing trustees, Rebecca Porta, CEO of *The Urology Foundation* and Helen Morement, CEO of *AMMF – The Cholangiocarcinoma Charity*, whose many years of service have been invaluable. At the same time, we are thrilled to welcome new trustees who bring a rich diversity of skills and experience. Chosen from a large pool of applicants, they enhance the strength and expertise of our governance.

Finally, I want to acknowledge the fantastic expertise and dedication of our member charities. Their collaboration with Chris and the team ensures that the needs of people with rare and less common cancers remain front and centre of everything we do.



Anne MacDowell,  
Chair of the Board

**Anne MacDowell**



Chris Walden, CEO

## Welcome to our Annual Review 2024–2025

It's a pleasure to welcome you to our first Annual Review since I had the absolute honour of succeeding the incredible Jane Lyons. Jane developed and grew Cancer52 over the past 10 years and was recently awarded a well-deserved MBE. I am thrilled to build on what she has already created. I'm also grateful to Sasha Daly, who stepped into the role of Interim CEO following Jane's departure and led the organisation with skill and dedication during a critical period of transition.

In 2024–2025, thanks to funding from our members, the National Lottery Community Fund and other partners, we've made significant strides in shaping policy to better support those affected by rare and less common cancers. We're now poised to make even greater progress, with exciting opportunities emerging for our member charities, especially around the much-anticipated National Cancer Plan for England.

We are proud of the collective work we've undertaken this year to ensure the patient voice is heard at the highest levels of policy making. Our commitment to improving equality in cancer care remains central to everything we do.

**Cancer52** members' work inspires us every day to champion those with rare and less common cancers. Our members' dedication, expertise and passion drive dynamic and collaborative action, and we are deeply grateful for their commitment to **Cancer52's** shared aims.

*Chris Walden*

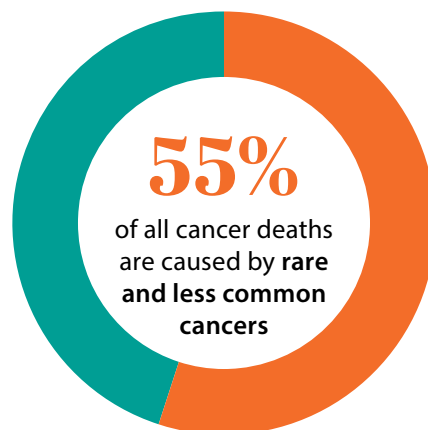
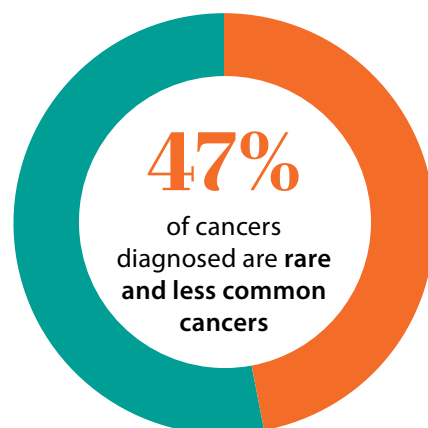
# Strength in unity: our principles

**Cancer52** is a national organisation, created in 2007 and registered as a charity in England and Wales in September 2017.

We are the unifying body for charitable and not-for-profit organisations working in the field of rare and less common cancers. We represent over 100, predominantly small, patient-support and research-focused cancer charities and organisations.

**Cancer52** gets its name from when rare and less common cancers accounted for 52% of all cancer deaths in the UK, when only 47% of cancers diagnosed in England are of this type.<sup>1</sup> In 2020, this shifted to 47% of diagnoses and 55% of cancer deaths.<sup>2</sup>

Our member charities and organisations are united in seeking a better future for everyone affected by rare and less common cancers. We provide a collective voice to champion earlier diagnosis, better treatment, better representation, funding and support for people with all cancers other than the four most common cancers (breast, lung, bowel, and prostate). **Cancer52** ensures the voices of people with rare and less common cancers do not go unheard.



## Our core principles

### Our aim

**Cancer52's primary aim is to promote improved diagnosis, treatment and support for those affected by rare and less common cancers.**

### Our mission

**Cancer52's mission is to provide a strong, unified voice for rare and less common cancer organisations by representing, informing, sharing and involving our members in achieving our vision.**

### Our vision

**Cancer52's vision is to end inequalities in diagnosis, treatment and patient outcomes experienced by those with rare and less common cancers compared with the four most common cancers.**

### Our values

Everything **Cancer52** does is underpinned by the aim to be:

**ambitious | outcome-focused |  
collaborative | evidence-based | influential  
and to behave with honesty and integrity.**

# Uniting with one voice: who we are

**Cancer52 aims to better represent people with rare and less common cancers at a senior policy and decision-making level. Sourcing and bringing together the knowledge and expertise of our many members makes this possible.**

## The Cancer52 team

Jane Lyons stepped down as CEO of **Cancer52** in July 2024 to be succeeded by our interim CEO Sasha Daly, until Chris Walden took up post in October 2024.

### **Chris Walden, CEO:**

Has responsibility for the overall running of the charity. Chris was supported by an excellent team of part-time contractual staff, who each provide expertise in their area:

### **Ainsley Taylor, Operations Consultant:**

Responsible for overseeing all operational aspects of the charity. Supporting the CEO in managing financial reporting, fundraising, policy and governance work, operational tasks and administration duties, including overseeing membership administration and the co-ordination of membership donations, recruitment and supporting the Board of Trustees.

### **Sasha Daly, Policy Lead:**

Working with members and external stakeholders to direct the policy work of **Cancer52**.

### **Jen Harrison, Health Inequalities Lead:**

Driving health inequalities work and other policy-related activities.

### **Stephanie Judycki, Communications Executive:**

Leading on internal and external communications including member e-bulletins, **Cancer52** website and social media.

### **Ambika Chadda, Executive Assistant:**

Providing administrative support to the team and co-ordinating our membership, meetings and events administration.

Our Board of Trustees is listed on **page 40**.

### **Jason Dennis, of J & H Accounting Services Limited:**

Coordinated our financial agreements and obligations.

Thank you to the team for their hard work and dedication.

## Our charity members

**Cancer52's** members are united in their determination to improve treatment and outcomes for their individual patient groups.

Most **Cancer52** member organisations are small, with 74% taking in an annual income of less than £1 million, 62% of the total membership have an income less than £500,000 and 33% an income of less than £100,000. Almost all of our members offer patient support and more than two-thirds invest in research.<sup>3</sup>

The full list of **Cancer52's** members at time of going to press can be seen on **page 29**.

**Cancer52's** active membership continues to grow. During the 2024-25 financial year, we happily welcomed newly registered charities, The Ella Dawson Foundation and The Sophie Fitzpatrick Charitable Foundation.

We hugely value and appreciate our members' ongoing dedication and commitment to **Cancer52**.

# Making the Cancer52 voice heard

**Cancer52 works tirelessly to support people with rare and less common cancers and to ensure a strong presence in this community.**

- We are represented at the highest level on boards and taskforces.
- We value close teamwork and collaboration.
- We use a range of skills and methods, within a flexible structure, to help members support patients.

## Informing, advising and supporting our members

### Meeting with our members

Virtual meetings continue to play an important part in our work as they allow our member charities and organisations from across the country to voice their concerns, connect with each other, easily share information and hear from relevant thought leaders in the field. We also recognise the huge value in meeting face-to-face. In 2024 we hosted two in-person London events, in June and November, each attended by over 100 people. In March 2025 we also hosted a smaller in-person event in Manchester.



# 482

**individuals attended  
All Member Meetings.**



# Over 100

**people attended each in-person  
event in June and November 2024**



# 202

**people attended  
our CEO meetings.**

### Sharing

We want everyone with rare and less common cancers to have the chance to be effectively supported so that they are able to make informed choices. We consistently encourage our members to exchange knowledge so that even those working with limited resources have access to a continuing flow of useful information.

People with cancer benefit most when charities collaborate to make the most of available resources and not duplicate efforts. We know that a collaborative voice is a stronger voice.

### Regular members' e-bulletin

Throughout this financial year, our weekly e-bulletin updated our members on:

- Developments in Government and NHS policy pertinent to cancer
- Cancer52 responses to official consultations
- Charity member or national organisation meetings
- Information for patients
- Opportunities to get involved with projects that support people with rare and less common cancers
- Patient surveys
- Shared learning or awareness-raising projects
- Member job opportunities
- Training courses
- NHS and other cancer charity webinars
- Funding opportunities



The average open rate for our e-bulletin maintained a high of 65% in 2024–2025. This rate is well over double the market open rate average (27%) for newsletter emails,<sup>4</sup> making clear that our members consider our bulletins as a useful and efficient way of keeping up to date.

### Cancer52 All Member Meetings

Fortnightly virtual meetings continued throughout the financial year. They offered crucial networking opportunities and the chance to help participants learn from interesting and thought-provoking speakers. Meetings were well attended and warmly welcomed.

*‘Cancer 52 provides a very powerful voice in the space, bringing people together really effectively.’*

Dr Michele Afif, The Brain Tumour Charity

### CEO Calls

Monthly virtual meetings provide member CEOs direct access to their peers. Started during the COVID-19 pandemic, these meetings have continued to offer incredibly valuable opportunities to raise problems, talk through ideas, share best practice and offer peer support.

*‘Thank you also for everything Cancer52 is doing. Your efforts in bringing organisations together in this way are truly invaluable.’*

Dr Jen Kelly, The Grace Kelly Childhood Cancer Trust

Our All Member Meetings are great relationship builders and boost the profile of organisations that represent people diagnosed with rare and less common cancers.

*‘We are delighted to be part of this brilliant group of charities under the Cancer52 umbrella, and look forward to our continued involvement.’*

Ines Thiru, The Ruth Strauss Foundation



## Big Cancer52 Conversation

**Cancer52** has held two **Big Cancer52 Conversation** London events, in June and November 2024, and one in Manchester in March 2025. Our **Big Cancer52 Conversation** series brings together our member charities alongside senior leaders from industry, health and research, to share learning and spark collaboration to improve outcomes for rare and less common cancers.

Our event on 19th June 2024 in Canary Wharf, London, was supported by the Cancer Platform, and enabled a range of valuable discussions around health inequalities. The event took a 'marketplace' format, and member charities Young Lives vs Cancer, OUTpatients and Ovacom hosted a marketplace stall exploring the theme of health inequalities. The conversation continued on other marketplace stalls, including those focused on improving access to data, improving outcomes for children and young people with cancer and improving access to clinical trials.

Our second event on 13th November 2024 in London focused specifically on health inequalities. Event attendees heard from keynote speakers and panellists including

Professor Bola Owolabi, Director of NHS England's Healthcare Inequalities Improvement Programme, Professor Frank Chinégwundoh MBE, Chair of Cancer Black Care, Ian Vousden, Director at Kent & Medway Cancer Alliance and Yvonne Adebola, Executive Group Member at use MY data and expert by experience. They also learnt about good practice in tackling health inequalities from several **Cancer52** members.

**Cancer52** also hosted a **Big Cancer52 Conversation** in Manchester on 26th March 2025, our first major event outside of London. The event explored place-based approaches to tackling health inequalities faced by people with rare and less common cancers, and was opened by Ali Jones, Director of Cancer Commissioning and Early Diagnosis at Greater Manchester Cancer Alliance. The event hosted presentations from 10GM, who deliver the Greater Manchester Cancer and Inequalities Network, as well as from our members including North West Cancer Research, Oracle Head and Neck Cancer UK, Myeloma UK, and Yorkshire Cancer Research. Our **Big Cancer52 Conversation** in Manchester received very positive feedback, which helped forge connections with new stakeholders in the area.





Our Big Cancer52 Conversation events initiated the following key workstreams:

**Charities and industry working better together**, focused on helping our member charities to develop best practice on engagement with industry to benefit patients. This has included exploring opportunities to draw on ABPI's support to develop tools and resources for members.

**Improving access to clinical trials**, focused on addressing barriers faced by people affected by rare and less common cancers. This theme was explored in the Cancer52 patient survey.

**Proxy staging measures for blood and brain cancers**, focused on ensuring that data is inclusive of all cancers, including those that cannot be staged or are difficult to stage. This includes work that informed the subsequent Cancer52 report, Improving Diagnosis (see page 13).

**Health inequalities**, focused on sharing and developing best practice and working together to address inequalities in diagnosis, treatment, care and outcomes for people living with rare and less common cancers.

From January 2025 these Working Groups evolved and adapted to **Health Inequalities, Access to Treatments, Data and Research (including genomics and clinical trials)**.



# Partnership: Representation and advocacy in policy

Cancer52 represents its members at the highest policy and decision-making levels, acting as a conduit to organisations that need to hear the voices of those with rare and less common cancers. As a strong and determined alliance, we amplify calls for improvements in cancer services, including those supported by our member charities.

Central to Cancer52's policy work is the Policy and Public Affairs Steering Group (PPASG), which meets frequently to exchange information and help formulate Cancer52's

policy asks and responses to calls for evidence.

During 2024–2025, the group was chaired by Rachel Downing, Head of Policy and Campaigns at Target Ovarian Cancer from Summer 2024. She took over after Chris Walden, previously Deputy Director of Policy, Campaigns and Engagement at Blood Cancer UK, stepped down as Chair. Our policy lead, Sasha Daly, manages relationships with the Chair and members of the group, agrees agendas, and facilitates the functioning, outputs and reporting.

## A Manifesto for Rare and Less Common Cancers Launch Event



**During 2024–2025, Cancer52 officially launched The Other Half, a manifesto aimed at transforming outcomes for people with rare and less common cancers with an event in Parliament on 16 April.<sup>5</sup>**

The date coincided with the second reading of the Tobacco and Vapes Bill which gave a high profile to issues around cancer on the day. In total, 26 member charities attended with 11 patient representatives. All constituency MPs for the patient representatives were invited to join the reception and four attended in person, meeting their patient representatives and our Cancer52 team. Of the other constituency MPs who could not attend, many had contact and follow up with the related charity member organisation. Other MPs from the Health and Social Care Select Committee and those invited by Cancer52 Board members attended too.



**Cancer52** also took the manifesto to the Liberal Democrat, Labour, and Conservative Party Conferences, building strong relationships with influential figures including Clive Jones MP and members of the Labour Government Ministerial team. These efforts contributed to the Government's announcement of a new National Cancer Plan for England in Autumn 2024.



## National Strategies on Health and Cancer

The year 2024–2025 proved to be a time of rapid political and policy change but **Cancer52** and its membership remained agile and responsive and continued to lobby for national and local leadership on rare and less common cancers. This included regular engagement with the NHS Cancer Programme, the NHS National Cancer Board and DHSC, as well as responses to consultations on the **Darzi Review**, **10 Year Health Plan** and request for a **National Cancer Plan**.<sup>6</sup>

## National Cancer Plan

Cancer52 prepared a **briefing** for a **Westminster Hall Debate** on the '**Potential merits of a cancer strategy for England**' (nominated by **Clive Jones MP**) that took place on **31st October 2024**.<sup>7</sup> In the briefing Cancer52 outlined its support for a cancer strategy to provide the direction and focus to bring the required system improvements in cancer services. This focus is especially important for rare and less common cancers; without the direction and focus a strategy brings to the system, improvements in cancer services will not be delivered and rare and less common cancers will be disproportionately affected. The debate was successful and a National Cancer Plan was announced and is scheduled for release late 2025. The consultation for the National Cancer Plan opened on 4th February 2025 and ran until 29th April 2025.

The Call for Evidence, Shaping the National Cancer Plan specifically mentioned rare and less common cancers:<sup>8</sup>

### Improving outcomes for rarer cancers

Finally, the National Cancer Plan will seek to improve outcomes for those diagnosed with rarer and less common cancers and for cancer in children and young people. It will foster opportunities for UK researchers to collaborate on international cancer research. This is particularly important for areas where affected populations are small, such as with rare cancers.

**Cancer52** worked with its members to build a response to the consultation.

## Raising the voice of rare and less common cancer patients

To underpin its policy work with robust evidence, in summer 2024, **Cancer52** conducted a major patient survey, capturing the experiences of 1,371 individuals. In partnership with IQVIA, insights were analysed and findings published in the ***State of the Nation report on Rare and Less Common Cancers. Learnings from patients and partners***, launched on World Cancer Day, 4th February 2025.<sup>9</sup> The anonymised findings were also shared with member charities to support their own advocacy and service development.

**Cancer52** responded to a number of consultations from DHSC on GP Incentive Schemes and DHSC Statistical Outputs; from NICE on People and Communities Strategy, Methods and Process for including technology appraisal recommendations in guidelines, and Topic Prioritisation; and from the ABPI on the PMCPA code of conduct.

**Cancer52** also supported campaigns, and shared with members, work on sick pay for people living with cancer and the Tobacco and Vapes Bill.

### Improving Diagnosis Report

**Cancer52** worked with its members, biotech company GRAIL, and consultancy Incisive Health to take a deep dive led by patients, carers and clinicians to gain insights around what matters most in early diagnosis.

The resulting report ***Improving diagnosis: Patient and clinician perspectives on increasing early diagnosis in rare and less common cancers*** offers a constructive contribution on how to measure early diagnosis, including for non-stageable cancers such as blood and brain, that have previously been outside of NHS targets.<sup>10</sup> These policy recommendations for the next National Cancer Plan for England suggest how to measure early diagnosis at an early and actionable point where interventions will be most effective and best improve outcomes and quality of life.



## Roundtable in Westminster

Cancer52 held a roundtable event in Westminster, hosted by Clive Jones MP, on 24th February. MPs across several parties joined 12 of our member charities, and three patients spoke powerfully about their cancer journey.



*Patients, member charities, and MPs at the Parliamentary roundtable event.*

## Rare Cancers Bill

Cancer52, alongside our member charities, supported the **Rare Cancers Bill**, a Private Members Bill initiated by Dr Scott Arthur MP.<sup>11</sup> The Bill received cross-party support when it was debated on 14th March 2025. This legislation has the potential to improve survival for rare cancers by encouraging a greater focus and drive in research in these areas. The law would:

- 1 Ensure a named governmental lead has responsibility to support research and innovation for these cancers.
- 2 Ensure patients can get better access and information about relevant research and clinical trials.
- 3 Place a duty on the Government to review, and potentially strengthen, Orphan Drug Regulations. (Medicines that pharmaceutical companies may be unwilling to invest in if it is for diseases that only affect a very small number of people).

*Cancer52, alongside members and Dr Scott Arthur MP outside House of Commons.*





# Partnership: Collaboration on behalf of patients

## Working collaboratively across the NHS

### WORKING WITH THE NHS CANCER PROGRAMME

#### NHSE National Cancer Board

Alongside Cancer Research UK and Macmillan Cancer Support, **Cancer52** has a place on the NHS England (NHSE) National Cancer Board. Together we provide strategic leadership across the healthcare sector in delivering the cancer ambitions inside the **NHS Long Term Plan**.<sup>12</sup>

During 2024–2025, **Cancer52** participated in several NHSE boards and groups, where its influence was used to oversee, advise on and implement changes for those affected by cancer, including:

- Cancer Campaigns and Oversight Group
- Early Detection and Screening Task and Finish Group
- The Cancer Patient Experience Survey Advisory Group
- NHSE Quarterly Cancer Charity Forum (chair)
- Cancer Data and Analytics Advisory Group (CDAAG)

#### Working collaboratively to improve health inequalities in cancer

Over the past financial year, **Cancer52**'s commitment to tackling health inequalities affecting people with rare and less common cancers has deepened. **Cancer52** actively engaged members through a comprehensive survey to map existing resources and relationships with key stakeholders, including cancer alliances and Integrated Care Boards (ICBs).

Collaborating with NHS England's Core20PLUS5 Community Connectors programme marked a significant milestone. In February 2025, **Cancer52** participated in a national learning event and contributed to the development of resources hosted on the Future NHS Collaboration Platform, enhancing knowledge-sharing across the sector.

A major highlight was the publication of ***A Fair Chance: reducing health inequalities for people with rare and less common cancers***, a report exploring the health inequalities faced by those with rare and less common cancers. This report brought together insights from patients, charities, and stakeholders, offering a unified call to action. The report was disseminated widely, reaching the Department of Health and Social Care (DHSC), NHS England, cancer alliances and ICBs.<sup>13</sup>

Three flagship Big **Cancer52** Conversation events brought together a diverse group of stakeholders, including representatives from charities, healthcare and industry to drive collaborative action addressing inequalities outlined in the A Fair Chance report.

**Cancer52** also launched a new initiative in partnership with NHS England and the Charities Aid Foundation, aimed at uniting the charity sector around the issue of health inequalities. Our contribution to cross-charity commissioned research, led by the University of Oxford, further advanced efforts to improve the data landscape. **Cancer52** also strengthened ties with academic institutions such as King's College London and the London School of Hygiene and Tropical Medicine.



Throughout the year, work was shared with a broad range of stakeholders, including corporate supporters, voluntary sector partners and NHS England's data and campaigns teams. Health inequalities were a key focus in the patient survey, ensuring that lived experiences continue to inform our approach.

**Cancer52** contributed to initiatives led by National Voices and engaged with health inequalities work spearheaded by several of our corporate supporters. Notably, **Cancer52** influenced the Association of the British Pharmaceutical Industry (ABPI) to expand the scope of their professional exam to include health inequalities, marking a step forward in embedding equity into industry standards.

### Working collaboratively across the wider cancer community

Strategic partnerships were a key feature of 2024–2025. **Cancer52** secured funded partnerships with **IQVIA** and **GRAIL** to support data analysis and explore early diagnosis in rare and less common cancers. To maximise impact for people living with cancer, **Cancer52** also collaborated with the following organisations, and charities outside its direct membership:

### Charities Medicines Access Coalition

**Cancer52** is a member of the Charities Medicines Access Coalition (CMAC), which works to find long-term solutions to the challenges that can delay or prevent patient access to new and innovative medicines. This coalition has established relationships with decision-makers including NHS England, the National Institute for Health and Care Excellence (NICE) and the Association of the British Pharmaceutical Industry (ABPI). **Cancer52** engaged with NHSE, the ABPI, Blood Cancer Alliance and pharmaceutical companies on the NHS Commercial Framework consultation.

### Genomics England

Genomics England have collaborated with **Cancer52** throughout 2024 and 2025, attending a Big **Cancer52** Conversation and All Member Meeting, and hosting a roundtable event attended by 16 member charities to discuss genomics and rare and less common cancers.



*Genomics England Roundtable*

A survey of **Cancer52** members and the patients they represent, conducted prior to the roundtable, demonstrated a low level of awareness of whole genomics sequencing (WGS) and potential benefits for patients with rare and less common cancers. The roundtable raised the pressing need for collaboration between organisations, patient involvement and awareness in genomics research and testing, particularly for rare and less common cancers. Other topics discussed on the day included leveraging genomic advances and identifying key challenges and using WGS data to maximise the impact of genomics.

## NICE VCSE Forum Steering Group

**Cancer52** sits on NICE Voluntary and Community Sector (VCSE) Forum's to help engage its members in NICE updates. The NICE VCSE forum ensures that the people affected by NICE's work can be heard in the decision making process.

## The Cancer Data Collaborative

**Cancer52** collaborated with Cancer Research UK and Macmillan Cancer Support in data sharing. Data collaboratives are an emerging form of collaboration in which data held by an entity can be leveraged in partnership with another entity (from the public sector, civil society and/or academia) for public good.

## One Cancer Voice

One Cancer Voice (OCV) consists of cancer charities working together on fundamental policy asks, such as a governmental cancer plan. This alliance was increasingly active following the General Election and subsequent calls for evidence for health and cancer policies. **Cancer52** played a key role on the OCV steering group to shape the agenda and calls to action as well as to engage our members in OCV's public facing activities.

## Fair Market Value for patients' and charities' time and expertise

**Cancer52** finalised and launched guidance on Fair Market Value working in partnership with the Charities Research Involvement Group, Health Research Charities Ireland (HRCI), the National Rheumatoid Arthritis Society (NRAS) and the Patient Information Forum (PIF). This guidance makes five key recommendations to bring consistency to reimbursement for cross-sector partnership work.<sup>14</sup>

These recommendations have already been endorsed by Asthma + Lung UK, Breakthrough Cancer Research, Cleft Lip and Palate Association (CLAPA), Debra Ireland, Irish Heart Foundation, Irish Lung Fibrosis Association, Maynooth University and the National Institute for Health and Care Research (NIHR).

## Signposting across patient information

**Cancer52** has led work that helps patients and their loved ones to access patient information and patient support relevant to their cancer type. **Cancer52** has worked with Macmillan Cancer Support to initiate new links with their online patient information to signpost to smaller charities focused on rare and less common cancers.



*One Cancer Voice Summit*

## Healthcare charities

National Voices is a wide-ranging coalition of healthcare charities that helps **Cancer52** engage in topics particularly relevant to people with rare and less common cancers.

## ABPI Patient Advisory Council

**Cancer52**'s CEO sat on the Association of the British Pharmaceutical Industry (ABPI) Patient Advisory Council while **Cancer52** also took part in the Patient Organisation Forum briefings - alongside other larger, well-known charities and contributed to the steering group responsible for planning meetings and organising speakers. **Cancer52** also continued to partner with the ABPI on an Anti-Microbial Resistance campaign specific to people living with rare and less common cancers called Together for Antibiotics.<sup>15,16</sup>

## Travel insurance for cancer patients

**Cancer52** has been supporting member charity, Planets, in their work to improve travel insurance options for people whose cancer diagnosis means they often face prohibitive costs that do not necessarily reflect the risk. **Cancer52** collaborated with Verisk, a company that provides health risk data (including for rare and less common cancers) for up to 90% of the UK Insurance industry, on reviewing risk assessments for individual rare and less common cancers.

## Keeping our stakeholders informed

As an organisation, and also as our members' representative, **Cancer52** is in ongoing communication with members of other charities, NHS professionals and others with influence in the rare and less common cancer field.

## Website

The **Cancer52** website links to all member organisations, plus the sponsors and groups **Cancer52** collaborates with, offering a useful portal for sharing information between members, patients and the general public. It includes a webpage listing all rare and less common cancers with links to relevant patient support and research organisations. **Cancer52** posted reports on its activities during the year and featured a news stream of prominent issues. A password protected webpage for members was introduced with a range of helpful links and information. Website users can access reports together with informative videos, contact and donation opportunities.

## Social media

This year, LinkedIn has emerged as **Cancer52**'s primary social channel, followed by X (formally Twitter) and Facebook. **Cancer52** has increased its following, especially on LinkedIn, reaching nearly 1,000 followers. **Cancer52** uses social media to communicate with members and the wider public; to raise awareness of the work of the organisation, distribute new information and react to events that impact the rare and less common cancer community.





# Making the voice of people with rare and less common cancers heard: our headline achievements for 2024–2025

## Partnership

### Informing, sharing with, and empowering our members

**Cancer52** membership and engagement levels increased in 2024–2025, confirming that continuing to invest and expand our Big **Cancer52** Conversation events successfully facilitates partnerships. **Cancer52** also forged new and productive partnerships, enabling us to strengthen research and data on the impact of rare and less common cancers. We are grateful for our member's significant positive engagement and feedback.

## Policy

### Responding collectively to the changing political cancer priorities

**Cancer52** achieved significant policy and advocacy successes in 2024–2025, driving national attention to rare and less common cancers. By engaging with key political figures and contributing to consultations on national health strategies, **Cancer52** formed part of the sector influencing the Government to announce its new National Cancer Plan. **Cancer52's** impactful briefings, responses and collaborative reports provided robust evidence to shape policy, ensuring the voices of those affected by rare cancers were heard at the highest levels of policy.

## People

### Advocating for those affected by rare and less common cancers through collaboration

**Cancer52** created several opportunities for patients and policymakers to engage, including the manifesto launch, and roundtable in Parliament. **Cancer52** conducted a comprehensive patient survey, the findings of which underpinned several reports and policy asks. Furthermore, patient interview findings shaped the Improving Diagnosis Report and key recommendations. **Cancer52** has hosted several in-person events to enable members to collaborate to tackle health inequalities and create greater equity in cancer care.





# Funding



## The National Lottery Community Fund

During the financial year 2023–2024, Cancer52 successfully secured substantial three-year funding from The National Lottery Community Fund (TNLCF), the largest community funder in the UK. In 2024–2025 Cancer52 received its second year of funding which was used on staffing resources to work on the three key target outcomes:

**Outcome 1:**  
Policy advances for rare  
and less common cancer

**Outcome 2:**  
Addressing patient  
health inequalities

**Outcome 3:**  
Increasing member  
engagement

Cancer52's work means the impact of this funding has, and will continue to benefit people affected by rare and less common cancers, the wider rare and less common cancer community, Cancer52 itself and charity members.

From TNLCF, Cancer52 also received a grant uplift on the original fund, to accommodate the additional expenses incurred from the recruitment of a new CEO when Jane Lyons MBE retired from the organisation in July 2024. These additional funds were invaluable in recruiting a CEO of the highest

## The value of support

**Cancer52** also continued to receive funding via donations from members, individual donations and support from pharmaceutical companies. These funds are vital in order to help the rare and less common cancer community via our ongoing delivery of core work and relevant projects.

**Cancer52** greatly appreciates the valuable time, expertise and energy generously donated by its members.

**Cancer52** is incredibly grateful to every donor and supporter for their financial support which helps propel us towards achieving our objectives. The financial benefaction of charity members represents a very significant contribution in terms of the number and variety of organisations that support **Cancer52**.

## Voluntary member donations

A considerable amount of **Cancer52**'s financial support comes from member charities who make a voluntary donation aligned to their income.

We maintained the strong income from member charities this financial year. **Cancer52** asked members with an annual income over £100,000 to pay a donation where possible but, as always, were considerate of those smaller charities encountering the rising cost of living. Membership donations, which are based on charity income level, increased by almost 4% in 2024/25.

## Individual donations

Donations are welcome and gratefully received from any individuals or organisations who recognise the value of **Cancer52**'s contribution in supporting people with rare and less common cancers.

During the financial year 2024-25, **Cancer52** received over £9,000 from a variety of platforms and individuals. Of particular note, thanks go to the families and friends of Mike Martin, who

ran the Hastings Half Marathon in his memory, as well as the family and friends of Anthony Cox who raised a significant amount to support the work of **Cancer52**.

## Support from industry

In 2024–2025 we received support from Abbvie, Astra Zeneca, Daiichi Sankyo, GSK, Incyte, Johnson & Johnson, Merck, Novartis, Pfizer, Roche and Takeda, who all benefited from membership to **Cancer52**'s Corporate Supporter Programme. Gilead and MSD also benefitted from membership to the programme although these income figures will be shown in the 2025-2026 financial report.

In addition to membership to the Corporate Supporter Programme, AstraZeneca and Gilead kindly sponsored our Big **Cancer52** Conversation event in November 2024, and AstraZeneca supported the March 2025 event. Roche also supported **Cancer52** by providing a ticket to the Labour Party Conference in 2024.

**Cancer52** has a clearly written policy to guide its work with the pharmaceutical industry and follows industry guidelines.<sup>17</sup> Some 36.5% of our funding comes from pharmaceutical companies and comprises support for specific projects as well as unrestricted support.

**Cancer52** believes all its industry partners recognise the value of working with an umbrella organisation that channels one voice for rare and less common cancers.



# Future plans

Cancer52 is proud to provide a strong, unified voice to promote improved diagnosis, treatment and support for those affected by rare and less common cancers so that we see an end to inequalities in diagnosis, treatment and patient outcomes experienced by those with these challenging diseases.

**As part of its three-year strategy, Cancer52 has made progress in its plans to:**

Be a well-resourced organisation making the voice of rare and less common cancers heard through securing TNLCF funding over three years

Retain its market leadership position

Build its thought leadership and collective policy steer to shape national cancer and health policy

Work collaboratively with members and the wider rare and less common cancer community

Carry forward aims, mission and values

Place reducing inequalities at the heart of everything it does and making this a key workstream of the **Big Cancer52 Conversation**.

**In the next year, Cancer52 will build upon these successes to evolve and pivot to a new strategy, scheduled for development and implementation from summer 2025.**



# Structure and Constitution



## Structure and Governance

**Cancer52** is incorporated as a charitable company limited by guarantee and is a registered charity in England and Wales. It is governed by its Memorandum and Articles of Association, and its work, management, finances and strategy are overseen by a Board of trustees, who are also the company directors. The trustees who held office during the financial year and at the date of the report are set out on page 40.

Under the Articles of Association, a minimum of three trustees and a maximum of twelve trustees {directors} can be in office. New directors may only be appointed where the notice and approval requirements set out in the Articles of Association have been satisfied.

The Board has agreed that trustees are appointed for an initial 3-year term of office followed by the opportunity for renewals for a further three years per term. In most cases, trustees will serve for a maximum of nine years, but the term may go beyond this period if both parties agree it is beneficial to the organisation, with review and approval by the Board at the end of each term of tenure. Trustees do not receive remuneration for their duties.

## Public benefit

**Cancer52** encourages and facilitates interaction and collaboration between members and other stakeholders. This support in turn aids members' provision of information and support to people diagnosed with, treated for or living with a rare or less common cancer. Outcomes for people with rare or less common cancers also improve when we drive change and enhancements in the cancer system.



## Purpose

The charity's purposes are set out in its Memorandum and Articles of Association as follows:

To promote and protect the health of people with rare and less common cancers by:

1. Advancing and promoting understanding, awareness, research and learning about rare and less common cancers;
2. Acting as a collective voice and advocating for the needs of individuals affected by a rare or less common cancer in order to improve diagnosis, treatment and long-term support outcomes
3. Supporting, representing and empowering not-for-profit organisations working in the field of rare and less common cancers.

As part of the business planning processes, **Cancer52's** aims and objectives are reviewed each year. This includes looking at how those groups of people we were set up to help have benefited and what has been achieved in previous years. The Charity Commission's general guidance on public benefit was referred to when reviewing **Cancer52's** aims and objectives and also in the planning work for the future.

## Board and management operations and structure

### Board of Trustees

The Board of Trustees meets at least four times a year to review **Cancer52's** work, finances and services, and to agree strategic goals for the charity. In-person board meetings resumed in 2024-25 with a virtual option, and meetings invited the Chief Executive and the Operations Consultant, and others as appropriate.

The Finance Committee also meet separately with the Chief Executive, Operations Consultant, and **Cancer52's** accountant on a quarterly basis to monitor and scrutinise the financial strategy and operations and make any necessary recommendations to the full Board of Trustees.

### Recruitment and appointment of new Trustees

Moving into the role of CEO, Chris Walden stepped down from the Board of Trustees in August 2024. The Board also said goodbye to Rebecca Porta, a Board member for over seven years, who stepped down in September 2024.

Four new trustees were appointed to the Board in February 2025. **Cancer52** welcomed Amanda Boughey, Clare Clifton, Dagmar Droogsma and Yasmin Sheikh to bring their vast experience and expertise.

### Related parties

Related parties are considered to be the trustees and those connected with the trustees, including their close families, business and other charity interests. There have been no transactions with related parties, other than the reimbursement of reasonable travel expenses for the purposes of attendance at board meetings and other relevant organisational activities.

## Risk assessment and management

The Board of Trustees and the Chief Executive maintain a risk register and assess risk on an annual basis. The trustees are satisfied that major risks to the organisation have been accurately identified and that appropriate systems and procedures for managing those risks are in place.

### Safeguarding

**Cancer52** has a strong commitment to protecting and promoting the health, wellbeing and safety of all engaged in its work. While not a patient representative charity, **Cancer52** still adheres to good safeguarding practice. The Safeguarding Policy is reviewed each year and is accessible on the Governance section of **Cancer52's** website. Each year, all staff and volunteers are required to participate in a full-day safeguarding training course, provided by an external organisation to ensure everyone is up to date with the latest safeguarding requirements.

**Cancer52** has sought to strengthen its risk management training this year and all employees are required to take General Data Protection Regulation (GDPR) training.

## Annual review

The Annual Review 2024–2025 was completed and disseminated, with thanks to the Board nominees Nic Puntis and Clare Clifton.

# Money talks: financial review 2024–2025

## Financial statement

As shown in the statement of financial activities on the following pages, in the year 2024–2025

- Reserves brought forward from 2023–2024 were £50,913.
- Income for the financial year was £363,420.
- Expenditure for the current financial year was £348,601, resulting in a surplus of £14,819.
- Reserves of £65,732 were available at the end of the 2024–2025 financial year.

### Reserves policy

The Board of Trustees' strategy on reserves is to maintain sufficient funds to cover the operational running costs in the event of a major setback. This means that we aim to hold between five and seven months' unrestricted annual expenditure in reserve.

At the end of the 2024–2025 financial year, **Cancer52's** reserves stood at £65,732 which covers five months running expenses not covered directly by the National Lottery and any other restricted income.

The Company has taken advantage of the small companies' exemption in preparing this report. The trustees declare that they have approved the trustees' report (including directors' report) above.

#### Signed on behalf of the charity's trustees/directors

Signature \_\_\_\_\_

Anne MacDowell

*Trustee / Director*

Date \_\_\_\_\_

Signature \_\_\_\_\_

Nic Puntis

*Trustee / Director*

Date \_\_\_\_\_



Section A

Independent Examiner's Report

Report to the  
trustees/directors/  
members of

Cancer 52

On accounts for the year  
ended

31<sup>st</sup> March 2025

Charity no.:

1174569

Company no.:

07994413

Set out on pages

28

To

40

Responsibilities and  
basis of report

I report to the charity trustees on my examination of the accounts of the Company for the year ended **31<sup>st</sup> March 2025**.

As the charity's trustees of the Company (who are also the directors of the company for the purposes of company law), you are responsible for the preparation of the accounts in accordance with the requirements of the Companies Act 2006 ("the 2006 Act").

Having satisfied myself that the accounts of the Company are not required to be audited for this year under Part 16 of the 2006 Act and are eligible for independent examination, I report in respect of my examination of your charity's accounts as carried out under section 145 of the Charities Act 2011 ("the 2011 Act"). In carrying out my examination, I have followed the Directions given by the Charity Commission (under section 145(5)(b) of the 2011 Act.

Independent  
examiner's statement

I have completed my examination. I confirm that no material matters have come to my attention (other than that disclosed below \*) which gives me cause to believe that:

- accounting records were not kept in accordance with section 386 of the Companies Act 2006; or
- the accounts do not accord with such records; or
- the accounts do not comply with relevant accounting requirements under section 396 of the Companies Act 2006 other than any requirement that the accounts give a 'true and fair' view which is not a matter considered as part of an independent examination; or
- the accounts have not been prepared in accordance with the Charities SORP (FRS102).

**Name:** Jason Dennis

**Relevant professional qualification(s) or body (if any):** AAT - Association of Accounting Technicians  
ATT – Association of Taxation Technicians

**Address:** 31 Clover Way, Paddock Wood, Tonbridge, Kent TN12 6BQ

## Section B

## Disclosure

Only complete if the examiner needs to highlight material matters of concern (see CC32, Independent examination of charity accounts: directions and guidance for examiners).

**Give here brief details of any items that the examiner wishes to disclose.**

# Section A

## Statement of financial activities

(including summary income and expenditure account)

### Recommended categories by activity

#### Income (Note 3)

##### Income and endowments from:

Donations and legacies

##### **Total**

#### Expenditure (Notes 4)

##### Expenditure on:

Raising funds

Charitable activities

Other

##### **Total**

#### Net income/(expenditure) before tax for the reporting period

Tax payable

#### Net income/(expenditure) after tax before investment gains/(losses)

Net gains/(losses) on investments

#### Net income/(expenditure)

#### Extraordinary items

#### Transfers between funds

#### Other recognised gains/(losses):

Gains and losses on revaluation of fixed assets for the charity's own use

Other gains/(losses)

#### Net movement in funds

#### Reconciliation of funds:

Total funds brought forward

#### **Total funds carried forward**

Guidance Note

	Unrestricted funds £ F01	Restricted income funds £ F02	Endowment funds £ F03	Total funds £ F04	Prior year funds £ F05
S01	191,378	172,042	-	363,420	230,779
S07	191,378	172,042	-	363,420	230,779
S08	4,284	-	-	4,284	20,493
S09	129,488	208,829	-	338,317	242,208
S11	6,000	-	-	6,000	6,000
S12	139,772	208,829	-	348,601	268,701
S13	51,606	(36,787)	-	14,819	(37,922)
S14	-	-	-	-	-
S15	51,606	(36,787)	-	14,819	(37,922)
S16	-	-	-	-	-
S17	51,606	(36,787)	-	14,819	(37,922)
S18	-	-	-	-	-
S19	(36,000)	36,000	-	-	-
S20	-	-	-	-	-
S21	-	-	-	-	-
S22	15,606	(787)	-	14,819	(37,922)
S23	50,017	896	-	50,913	88,835
S24	65,623	109	-	65,732	50,913

# Section B

## Balance sheet (as at 31st March 2025)

	Guidance Note	Unrestricted funds £	Restricted income funds £	Endowment funds £	Total this year £	Total last year £
<b>Current assets</b>						
Debtors (Note 8)	B07	3,230	-	-	3,230	-
Cash at bank and in hand (Note 10)	B09	124,626	109	-	124,735	111,651
<b>Total current assets</b>	B10	127,856	109	-	127,965	111,651
<b>Creditors and deferred income : amounts falling due within one year (Note 9)</b>						
	B11	62,233	-	-	62,233	60,738
<b>Net current assets/(liabilities)</b>	B12	65,623	109	-	65,732	50,913
<b>Total assets less current liabilities</b>	B13	65,623	109	-	65,732	50,913
<b>Total net assets or liabilities</b>	B16	65,623	109	-	65,732	50,913
<b>Funds of the Charity</b>						
Endowment funds	B17	-	-	-	-	-
Restricted income funds (Note 12)	B18	-	109	-	109	896
Unrestricted funds	B19	65,623	-	-	65,623	50,017
Revaluation reserve	B20	-	-	-	-	-
Fair value reserve	B21	-	-	-	-	-
<b>Total funds</b>	B22	65,623	109	-	65,732	50,913

The company was entitled to exemption from audit under s477 of the Companies Act 2006 relating to small companies.

The members have not required the company to obtain an audit in accordance with section 476 of the Companies Act 2006.

The directors acknowledge their responsibilities for complying with the requirements of the Companies Act with respect to accounting records and the preparation of accounts.

These accounts have been prepared in accordance with the provisions applicable to small companies subject to the small companies regime and in accordance with FRS102 SORP.

Signed by one or two trustee/directors on behalf of all the trustees/directors

Name	Signature	Date of approval dd/mm/yyyy
Anne MacDowell		
Nic Puntis		

Signature of Chair authenticating accounts being sent to Companies House

Name	Signature	Date of approval dd/mm/yyyy
Anne MacDowell		



# Section C

## Notes to the accounts

### NOTE 1: Basis of preparation

#### Note 1 Basis of preparation

***This section should be completed by all charities.***

##### 1.1 Basis of accounting

These accounts have been prepared under the historical cost convention with items recognised at cost or transaction value unless otherwise stated in the relevant note(s) to these accounts.

The accounts have been prepared in accordance with:

- and with\* 

✓
---

 the Statement of Recommended Practice: Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) issued on 16 July 2014
- and with\* 

✓
---

 the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102)
- and with the Charities Act 2011.

The charity constitutes a public benefit entity as defined by FRS 102.\*

✓
---

\* -Tick as appropriate

##### 1.2 Going concern

***If there are material uncertainties related to events or conditions that cast significant doubt on the charity's ability to continue as a going concern, please provide the following details or state "Not applicable", if appropriate:***

An explanation as to those factors that support the conclusion that the charity is a going concern;

***Not applicable***

Disclosure of any uncertainties that make the going concern assumption doubtful;

***Not applicable***

Where accounts are not prepared on a going concern basis, please disclose this fact together with the basis on which the trustees prepared the accounts and the reason why the charity is not regarded as a going concern.

***Not applicable***

### 1.3 Change of accounting policy

The accounts present a true and fair view and no changes have been made to the accounting policies adopted in note { 1.1 }.

Yes*	<input checked="checked" type="checkbox"/>	* -Tick as appropriate
No*	<input type="checkbox"/>	

**Please disclose:**

<i>(i) the nature of the change in accounting policy;</i>	<i>Not applicable</i>
<i>(ii) the reasons why applying the new accounting policy provides more reliable and more relevant information; and</i>	<i>Not applicable</i>
<i>(iii) the amount of the adjustment for each line affected in the current period, each prior period presented and the aggregate amount of the adjustment relating to periods before those presented, 3.44 FRS102 SORP.</i>	<i>Not applicable</i>

### 1.4 Changes to accounting estimates

No changes to accounting estimates have occurred in the reporting period (3.46 FRS102 SORP).

Yes*	<input checked="checked" type="checkbox"/>	* -Tick as appropriate
No*	<input type="checkbox"/>	

**Please disclose:**

<i>(i) the nature of any changes;</i>	<i>Not applicable</i>
<i>(ii) the effect of the change on income and expense or assets and liabilities for the current period; and</i>	<i>Not applicable</i>
<i>(iii) where practicable, the effect of the change in one or more future periods.</i>	<i>Not applicable</i>

### 1.5 Material prior year errors

No material prior year error have been identified in the reporting period (3.47 FRS102 SORP).

Yes*	<input checked="checked" type="checkbox"/>	* -Tick as appropriate
No*	<input type="checkbox"/>	

**Please disclose:**

<i>(i) the nature of the prior period error;</i>	<i>Not applicable</i>
<i>(ii) for each prior period presented in the accounts, the amount of the correction for each account line item affected; and</i>	<i>Not applicable</i>
<i>(iii) the amount of the correction at the beginning of the earliest prior period presented in the accounts.</i>	<i>Not applicable</i>

## NOTE 2: Accounting policies

### 2.1 INCOME

#### Recognition of income

These are included in the Statement of Financial Activities (SoFA) when:

- the charity becomes entitled to the resources;
- it is more likely than not that the trustees will receive the resources;
- the monetary value can be measured with sufficient reliability.

Yes*	No*	N/a*
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Offsetting

There has been no offsetting of assets and liabilities, or income and expenses, unless required or permitted by the FRS 102 SORP or FRS 102.

Yes*	No*	N/a*
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Grants and donations

Grants and donations are only included in the SoFA when the general income recognition criteria are met (5.10 to 5.12 FRS102 SORP).

Yes*	No*	N/a*
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

In the case of performance related grants, income must only be recognised to the extent that the charity has provided the specified goods or services as entitlement to the grant only occurs when the performance related conditions are met (5.16 FRS 102 SORP).

Yes*	No*	N/a*
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

#### Legacies

Legacies are included in the SoFA when receipt is probable, that is, when there has been grant of probate, the executors have established that there are sufficient assets in the estate and any conditions attached to the legacy are either within the control of the charity or have been met.

Yes*	No*	N/a*
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Government grants

The charity has received government grants in the reporting period

Yes*	No*	N/a*
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Tax reclaims on donations and gifts

Gift Aid receivable is included in income when there is a valid declaration from the donor. Any Gift Aid amount recovered on a donation is considered to be part of that gift and is treated as an addition to the same fund as the initial donation unless the donor or the terms of the appeal have specified otherwise.

Yes*	No*	N/a*
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Contractual income and performance related grants

This is only included in the SoFA once the charity has provided the related goods or services or met the performance related conditions.

Yes*	No*	N/a*
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

#### Donated goods

Donated goods are measured at fair value (the amount for which the asset could be exchanged) unless impractical to do so.

Yes*	No*	N/a*
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

The cost of any stock of goods donated for distribution to beneficiaries is deemed to be the fair value of those gifts at the time of their receipt and they are recognised on receipt. In the reporting period in which the stocks are distributed, they are recognised as an expense at the carrying amount of the stocks at distribution.

Yes*	No*	N/a*
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Donated goods for resale are measured at fair value on initial recognition, which is the expected proceeds from sale less the expected costs of sale, and recognised in 'Income from other trading activities' with the corresponding stock recognised in the balance sheet. On its sale the value of stock is charged against 'Income from other trading activities' and the proceeds from sale are also recognised as 'Income from other trading activities'.

Yes*	No*	N/a*
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Goods donated for on-going use by the charity are recognised as tangible fixed assets and included in the SoFA as incoming resources when receivable.

Yes*	No*	N/a*
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Gifts in kind for use by the charity are included in the SoFA as income from donations when receivable.

Yes*	No*	N/a*
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Donated services and facilities

Donated services and facilities are included in the SoFA when received at the value of the gift to the charity provided the value of the gift can be measured reliably.

Yes*	No*	N/a*
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Donated services and facilities that are consumed immediately are recognised as income with an equivalent amount recognised as an expense under the appropriate heading in the SoFA.

Yes*	No*	N/a*
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

<b>Support costs</b>	The charity has incurred expenditure on support costs.
<b>Volunteer help</b>	The value of any voluntary help received is not included in the accounts but is described in the trustees' annual report.

Yes*	No*	N/a*
	✓	

Yes*	No*	N/a*
✓		

## 2.2 EXPENDITURE AND LIABILITIES

<b>Liability recognition</b>	Liabilities are recognised where it is more likely than not that there is a legal or constructive obligation committing the charity to pay out resources and the amount of the obligation can be measured with reasonable certainty.
<b>Governance and support costs</b>	Support costs have been allocated between governance costs and other support. Governance costs comprise all costs involving public accountability of the charity and its compliance with regulation and good practice.  Support costs include central functions and have been allocated to activity cost categories on a basis consistent with the use of resources, eg allocating property costs by floor areas, or per capita, staff costs by the time spent and other costs by their usage.
<b>Grants with performance conditions</b>	Where the charity gives a grant with conditions for its payment being a specific level of service or output to be provided, such grants are only recognised in the SoFA once the recipient of the grant has provided the specified service or output.
<b>Grants payable without performance conditions</b>	Where there are no conditions attaching to the grant that enables the donor charity to realistically avoid the commitment, a liability for the full funding obligation must be recognised.
<b>Redundancy cost</b>	The charity made no redundancy payments during the reporting period.
<b>Deferred income</b>	No material item of deferred income has been included in the accounts.
<b>Creditors</b>	The charity has creditors which are measured at settlement amounts less any trade discounts
<b>Provisions for liabilities</b>	A liability is measured on recognition at its historical cost and then subsequently measured at the best estimate of the amount required to settle the obligation at the reporting date
<b>Basic financial instruments</b>	The charity accounts for basic financial instruments on initial recognition as per paragraph 10.7 FRS102 SORP. Subsequent measurement is as per paragraphs 11.17 to 11.19, FRS102 SORP.

Yes*	No*	N/a*
✓	✓	✓

Yes*	No*	N/a*
		✓

Yes*	No*	N/a*
		✓

Yes*	No*	N/a*
		✓

Yes*	No*	N/a*
		✓

Yes*	No*	N/a*
✓		

Yes*	No*	N/a*
	✓	

Yes*	No*	N/a*
		✓

Yes*	No*	N/a*
		✓

Yes*	No*	N/a*
		✓

## 2.3 ASSETS

### Tangible fixed assets for use by charity

These are capitalised if they can be used for more than one year, and cost at least

They are valued at cost.

The depreciation rates and methods used are disclosed in note 14.

£2,500		
Yes*	No*	N/a*
		✓

### Intangible fixed assets

The charity has intangible fixed assets, that is, non-monetary assets that do not have physical substance but are identifiable and are controlled by the charity through custody or legal rights. The amortisation rates and methods used are disclosed in note 15.

They are valued at cost.

Yes*	No*	N/a*
		✓
Yes*	No*	N/a*
		✓

### Heritage assets

The charity has heritage assets, that is, non-monetary assets with historic, artistic, scientific, technological, geophysical or environmental qualities that are held and maintained principally for their contribution to knowledge and culture. The depreciation rates and methods used as disclosed in note 16.

They are valued at cost.

Yes*	No*	N/a*
		✓
Yes*	No*	N/a*
		✓

### Investments

Fixed asset investments in quoted shares, traded bonds and similar investments are valued at initially at cost and subsequently at fair value (their market value) at the year end. The same treatment is applied to unlisted investments unless fair value cannot be measured reliably in which case it is measured at cost less impairment.

Investments held for resale or pending their sale and cash and cash equivalents with a maturity date of less than 1 year are treated as current asset investments

Yes*	No*	N/a*
		✓

### Stocks and work in progress

Stocks held for sale as part of non-charitable trade are measured at the lower or cost or net realisable value.

Goods or services provided as part of a charitable activity are measured at net realisable value based on the service potential provided by items of stock.

Work in progress is valued at cost less any foreseeable loss that is likely to occur on the contract.

Yes*	No*	N/a*
		✓

Yes*	No*	N/a*
		✓

Yes*	No*	N/a*
		✓

Yes*	No*	N/a*
		✓

### Debtors

Debtors (including trade debtors and loans receivable) are measured on initial recognition at settlement amount after any trade discounts or amount advanced by the charity. Subsequently, they are measured at the cash or other consideration expected to be received.

### Current asset investments

The charity has investments which it holds for resale or pending their sale and cash and cash equivalents with a maturity date less than one year. These include cash on deposit and cash equivalents with a maturity of less than one year held for investment purposes rather than to meet short-term cash commitments as they fall due.

They are valued at fair value except where they qualify as basic financial instruments.

Yes*	No*	N/a*
✓		

Yes*	No*	N/a*
✓		

Yes*	No*	N/a*
✓		

### POLICIES ADOPTED ADDITIONAL TO OR DIFFERENT FROM THOSE ABOVE

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## NOTE 3: Income

Analysis of income		Unrestricted funds	income funds	Endowment funds	Total funds £	Prior year £
Donations	Donations and gifts	134,928	10,000	-	144,928	146,179
	General grants provided by government - TNLCF (National Lottery Community Fund)	-	162,042	-	162,042	36,943
	Membership subscriptions and sponsorships which are in substance donations	56,450	-	-	56,450	47,657
	<b>Total</b>	<b>191,378</b>	<b>172,042</b>	<b>-</b>	<b>363,420</b>	<b>230,779</b>
<b>TOTAL INCOME</b>		<b>191,378</b>	<b>172,042</b>	<b>-</b>	<b>363,420</b>	<b>230,779</b>

## NOTE 4: Analysis of receipts of government grants

	Description	This year £
Government grant 1	The National Lottery Community Fund - Funding for Core expenditure	162,042
	<b>Total</b>	<b>162,042</b>

## NOTE 5: Expenditure

Analysis	This year				Last year			
	Unrestricted funds	Restricted income funds	Endowment funds	Total funds	Unrestricted funds	Restricted income funds	Endowment funds	Total funds
<b>Expenditure on raising funds</b>	£				£			
Fundraising consultant services	4,284	-	-	4,284	20,493	-	-	20,493
<b>Total expenditure on raising funds</b>	<b>4,284</b>	<b>-</b>	<b>-</b>	<b>4,284</b>	<b>20,493</b>	<b>-</b>	<b>-</b>	<b>20,493</b>
<b>Expenditure on charitable activities:</b>								
All Member Meetings, Steering Group Meetings, Room Hire, Venue Costs, Conference expenses	3,453	-	-	3,453	4,716	-	-	4,716
Manifesto	106	-	-	106	-	-	-	-
Branding Design	1,688	-	-	1,688	-	-	-	-
Merchandise	-	-	-	-	121	-	-	121
Recovery Costs Project	2,400	-	-	2,400	-	-	-	-
Cancer Awareness Project	2,399	-	-	2,399	-	-	-	-
Inequalities report	-	-	-	-	11,565	-	-	11,565
TNLCF - National Lottery funded expenditure	-	198,829	-	198,829	-	36,047	-	36,047
NCRI Project	-	-	-	-	401	-	-	401
Big Cancer Conversation 52 Events	7,507	10,000	-	17,507	17,089	-	-	17,089
Pfizer Project Support	-	-	-	-	186	-	-	186
Impact Reporting and Annual Review	1,566	-	-	1,566	1,805	-	-	1,805
Telephone	320	-	-	320	302	-	-	302
Registered Office Change	-	-	-	-	119	-	-	119
Contract Review	300	-	-	300	-	-	-	-
IT and Computer running expenses and Website mtce	2,089	-	-	2,089	1,380	-	-	1,380
Policy consultants - Policy Support and Report	17,419	-	-	17,419	33,441	-	-	33,441
Policy Workshop	6,000	-	-	6,000	15,000	-	-	15,000
Subscriptions	2,376	-	-	2,376	2,632	-	-	2,632
Operations Management Services	35,500	-	-	35,500	33,146	-	-	33,146
Other Administration Support Services	21,204	-	-	21,204	14,348	-	-	14,348
Insurance	741	-	-	741	574	-	-	574
Parliamentary Event	1,858	-	-	1,858	2,261	-	-	2,261
Salaries and Ers NI and Pensions (Non-TNLCF Funded)	-	-	-	-	47,518	-	-	47,518
Training	2,786	-	-	2,786	866	-	-	866
Communications and PR Services	14,577	-	-	14,577	15,767	-	-	15,767
Bank and credit fees	216	-	-	216	216	-	-	216
Trustees/Directors Travel	257	-	-	257	608	-	-	608
Other Travel and Contractor Expenses	4,502	-	-	4,502	563	-	-	563
Trustee Recruitment costs and expenses	224	-	-	224	491	-	-	491
Other Recruitment costs	-	-	-	-	1,046	-	-	1,046
<b>Total expenditure on charitable activities</b>	<b>129,488</b>	<b>208,829</b>	<b>-</b>	<b>338,317</b>	<b>206,161</b>	<b>36,047</b>	<b>-</b>	<b>242,208</b>
<b>Other</b>								
Independent Examiner	6,000	-	-	6,000	6,000	-	-	6,000
<b>Total other expenditure</b>	<b>6,000</b>	<b>-</b>	<b>-</b>	<b>6,000</b>	<b>6,000</b>	<b>-</b>	<b>-</b>	<b>6,000</b>
<b>TOTAL EXPENDITURE</b>	<b>139,772</b>	<b>208,829</b>	<b>-</b>	<b>348,601</b>	<b>232,654</b>	<b>36,047</b>	<b>-</b>	<b>268,701</b>

## NOTE 6: Details of certain types of expenditure

### Note 6.1 Fees for examination of the accounts

Please provide details of the amount paid for any statutory external scrutiny of accounts and other services provided by your independent examiner. If nothing was paid please enter '0' in the appropriate box(es).

Independent examiner's fees

This year £	Last year £
6,000	6,000

## NOTE 7: Paid Employees

### 7.1 Staff Costs

	This year £	Last year £
Salaries and wages	48,840	60,000
Social security costs	694	2,029
Pension costs (defined contribution scheme)	2,442	3,000
Other employee benefits	-	-
<b>Total staff costs</b>	<b>51,976</b>	<b>65,029</b>

Please note £48,840 Salaries and Wages ; £694 Social security costs and £2442 Pension costs were funded by the The National Lottery Community Fund and are included in the TNLCF - National Lottery Funded Expenditure line in Note 4 instead of Salaries, Employers NI and Pensions.

Please give details of the number of employees whose total employee benefits (excluding employer pension costs) fell within each band of £10,000 from £60,000 upwards. If there are no such transactions, please enter 'true' in the box provided.

No employees received employee benefits (excluding employer pension costs) for the reporting period of more than £60,000

**TRUE**

Band	Number of employees	
	This year	Last year
£60,000 to £69,999	-	1

Please provide the total amount paid to key management

This year £	Last year £
48,840	60,000

### 6.2 Average head count in the year

The parts of the charity in which the employees work

	This year Number	Last year Number
Fundraising	-	-
Charitable Activities	-	-
Governance	1	1
Other	-	-
<b>Total</b>	<b>1</b>	<b>1</b>



## NOTE 8: Debtors and prepayments

Please complete this note if the charity has any debtors or prepayments.

### 8.1 Analysis of debtors

	This year £	Last year £
Prepayments and Deferred expenditure deferred	3,230	-
<b>Total</b>	<b>3,230</b>	<b>-</b>

## NOTE 9: Creditors, deferred income and accruals

### 9.1 Analysis of creditors, deferred income and accruals

	Amounts falling due within one year		Amounts falling due after more than one year	
	This year £	Last year £	This year £	Last year £
Accruals	21,612	23,425	-	-
Deferred income	40,189	36,943	-	-
Other creditors	432	370	-	-
<b>Total</b>	<b>62,233</b>	<b>60,738</b>	<b>-</b>	<b>-</b>

## NOTE 10: Cash at bank and in hand

Cash at bank and on hand  
Total

This year £	Last year £
124,735	111,651
<b>124,735</b>	<b>111,651</b>

## NOTE 11: Fair value of assets and liabilities

10.1 Please provide details of the charity's exposure to credit risk (the risk of incurring a loss due to a debtor not paying what is owed), liquidity risk (the risk of not being able to meet short term financial demands) and market risk (the risk that the value of an investment will fall due to changes in the market) arising from financial instruments to which the charity is exposed at the end of the reporting period and explain how the charity manages those risks.

This year	Last year
Credit risk is low due to income being in the form of donations. Cash is the only investment so market risk is low on investment values falling. Liquidity risk is low as costs are managed in relation to income received.	Credit risk is low due to income being in the form of donations. Cash is the only investment so market risk is low on investment values falling. Liquidity risk is low as costs are managed in relation to income received.

10.2 Please give details of the amount of change in the fair value of basic financial instruments (debtors, creditors, investments (see section 11, FRS 102 SORP)) measured at fair value through the SoFA that is attributable to changes in credit risk.

Not applicable	Not applicable
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## NOTE 12: Charity funds

### 12.1 Details of material funds held and movements during the CURRENT reporting period

Please give details of the movements of material individual funds in the reporting period together with a balancing figure for 'Other funds' (which should include revaluation reserve and fair value reserve, if applicable). The 'Total funds' figure below should reconcile to 'Total funds' in the balance sheet.

\* Key: PE - permanent endowment funds; EE - expendable endowment funds; R - restricted income funds, including special trusts, of the charity; and U - unrestricted funds

Fund names	Type PE, EE R or UR *	Purpose and Restrictions	Fund balances brought forward £	Income £	Expenditure £	Transfers £	Gains and losses £	Fund balances carried forward £
General Fund	UR	General all purpose no restrictions	50,017	191,378	(139,772)	(36,000)	-	65,623
Restricted Fund	R	TNLCF - National Lottery Community Fund. Funding for Core Expenditure	896	162,042	(198,829)	36,000	-	109
Restricted Fund	R	Restricted for Big Cancer Conversation Events	-	10,000	(10,000)	-	-	-
<b>Total Funds as per balance sheet</b>			<b>50,913</b>	<b>363,420</b>	<b>(348,601)</b>	<b>-</b>	<b>-</b>	<b>65,732</b>

Yes\* ☐ No\* ☒

Fund balances carried forward include assets and liabilities denominated in a foreign currency

If yes, please state the basis on which the assets and/or liabilities have been translated into sterling (or the currency in which the accounts are drawn up).	
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### 12.2 Details of material funds held and movements during the PREVIOUS reporting period

Please give details of the movements of material individual funds in the reporting period together with a balancing figure for 'Other funds' (which should include revaluation reserve and fair value reserve, if applicable). The 'Total funds' figure below should reconcile to 'Total funds' in the balance sheet.

\* Key: PE - permanent endowment funds; EE - expendable endowment funds; R - restricted income funds, including special trusts, of the charity; and U - unrestricted funds

Fund names	Type PE, EE R or UR *	Purpose and Restrictions	Fund balances brought forward £	Income £	Expenditure £	Transfers £	Gains and losses £	Fund balances carried forward £
General Fund	UR	General all purpose no restrictions	76,252	193,836	(232,654)	12,583	-	50,017
Restricted Fund	R	TNLCF - National Lottery Community Fund. Funding for Core Expenditure	-	36,943	(36,047)	-	-	896
Restricted Fund	R	Restricted for Showcase Project	12,583	-	-	(12,583)	-	-
<b>Total Funds as per balance sheet</b>			<b>88,835</b>	<b>230,779</b>	<b>(268,701)</b>	<b>-</b>	<b>-</b>	<b>50,913</b>

Yes\* ☐ No\* ☒

Fund balances carried forward include assets and liabilities denominated in a foreign currency

## NOTE 13: Transactions with trustees and relates parties

### Note 13 Transactions with trustees and related parties

*If the charity has any transactions with related parties (other than the trustee expenses explained in guidance notes) details of such transactions should be provided in this note. If there are no transactions to report, please enter "True" in the box or "False" if there are transactions to report.*

#### 13.1 Trustee remuneration and benefits

This year

None of the trustees have been paid any remuneration or received any other benefits from an employment with their charity or a related entity (True or False)

TRUE

#### 13.2 Trustees' expenses

*If the charity has paid trustees expenses for fulfilling their duties, details of such transactions should be provided in this note. If there are no transactions to report, please enter "True" in the box below. If there are transactions to report, please enter "False".*

No trustee expenses have been incurred (True or False)

TRUE

Type of expenses reimbursed	This year	Last year
	£	£
Travel	257	608
<b>TOTAL</b>	<b>257</b>	<b>608</b>

Please provide the number of trustees reimbursed for expenses or who had expenses paid by the charity

2

1

#### 13.3 Transaction(s) with related parties

*Please give details of any transaction undertaken by (or on behalf of) the charity in which a related party has a material interest, including where funds have been held as agent for related parties. If there are no such transactions, please enter 'true' in the box provided.*

This year

There have been no related party transactions in the reporting period (True or False)

TRUE

Last year

There have been no related party transactions in the reporting period (True or False)

TRUE

# Administrative details

## TRUSTEES

Anne MacDowell  
Helen Morement  
Nic Puntis  
Anna Evans  
Dr Max Brodermann  
Michael Draeger  
Sophie Davies  
Amanda Boughey (From 26th February 2025)  
Clare Clifton (From 26th February 2025)  
Dagmar Droogsma (From 26th February 2025)  
Yasmin Sheikh (From 26th February 2025)  
Rebecca Porta (Until 25th September 2025)

Chair

## EXECUTIVE OFFICERS

Baroness Delyth Morgan  
Chris Walden  
Anne MacDowell  
President  
Chief Executive  
Company Secretary

## REGISTERED OFFICE

Cancer52, 124 City Road, London,  
EC1V 2NX

## WEBSITE

[www.cancer52.org.uk](http://www.cancer52.org.uk)

## BANKERS

Co-operative Bank

# References

- <sup>1</sup> National Cancer Registration and Analysis Service (NCRAS) by Public Health England figures. May 2019.
- <sup>2</sup> Cancer Statistics for the UK. Cancer Research UK. Available: <https://www.cancerresearchuk.org/health-professional/cancer-statistics-for-the-uk#heading-Zero>.
- <sup>3</sup> Internal membership research. Cancer52. August 2025.
- <sup>4</sup> 2024 Email marketing statistics compilation including open rates, clickthrough rates and click-to-open rates. Smart Insights. Available: <https://www.smartinsights.com/email-marketing/email-communications-strategy/statistics-sources-for-email-marketing/#q4>
- <sup>5</sup> The Other Half. A manifesto to transform outcomes for people with rare and less common cancers. Cancer52. Available: [https://e2236186-a9de-45db-b8f6-3f2d6db40cb4.usrfiles.com/ugd/e22361\\_754a20aff7d14b7bab33be31fdb06b3b.pdf](https://e2236186-a9de-45db-b8f6-3f2d6db40cb4.usrfiles.com/ugd/e22361_754a20aff7d14b7bab33be31fdb06b3b.pdf)
- <sup>6</sup> Response to 10 Year Health Plan Consultation. Cancer52. December 2024. Available: [https://e2236186-a9de-45db-b8f6-3f2d6db40cb4.usrfiles.com/ugd/e22361\\_46ec1b110dc9448ca43d87598b6176b2.pdf](https://e2236186-a9de-45db-b8f6-3f2d6db40cb4.usrfiles.com/ugd/e22361_46ec1b110dc9448ca43d87598b6176b2.pdf)
- <sup>7</sup> Briefing on Westminster Hall Debate on 'Potential merits of a cancer strategy for England.' Cancer52. October 2024. Available: [https://e2236186-a9de-45db-b8f6-3f2d6db40cb4.usrfiles.com/ugd/e22361\\_5b964fd137d041c1b64a9a15c63f1b07.pdf](https://e2236186-a9de-45db-b8f6-3f2d6db40cb4.usrfiles.com/ugd/e22361_5b964fd137d041c1b64a9a15c63f1b07.pdf)
- <sup>8</sup> Shaping the National Plan: Call for Evidence. Dept. of Health and Social Care. April 2025. Available: <https://www.gov.uk/government/calls-for-evidence/shaping-the-national-cancer-plan/shaping-the-national-cancer-plan>
- <sup>9</sup> State of the Nation report on Rare and Less Common Cancers. Learnings from patients and partners. Cancer52. February 2025. Available: [e22361\\_9bceb3fbb6724611b7dd4ac8fa465164.pdf](https://e22361_9bceb3fbb6724611b7dd4ac8fa465164.pdf)
- <sup>10</sup> Improving diagnosis: Patient and clinician perspectives on increasing early diagnosis in rare and less common cancers. Cancer52. March 2025. Available: [e22361\\_3894b4ec9952401d8e080e7ae78ee91f.pdf](https://e22361_3894b4ec9952401d8e080e7ae78ee91f.pdf)
- <sup>11</sup> Rare Cancers Bill. UK Government. Available: <https://bills.parliament.uk/bills/3779/news>
- <sup>12</sup> NHS Long Term Plan. August 2019. Available: [ARCHIVED CONTENT] NHS Long Term Plan » The NHS Long Term Plan
- <sup>13</sup> A Fair Chance: reducing health inequalities for people with rare and less common cancers. Cancer52. November 2024. Available: [e22361\\_bddb514c019456c898f5403672d66ad.pdf](https://e22361_bddb514c019456c898f5403672d66ad.pdf)
- <sup>14</sup> Fair Market Value for Charities in Partnership Work. Cancer52, Charities Research Involvement Group, HRCI - Health Research Charities Ireland, the National Rheumatoid Arthritis Society (NRAS) and the Patient Information Forum (PIF). September 2024. Available: [https://e2236186-a9de-45db-b8f6-3f2d6db40cb4.usrfiles.com/ugd/e22361\\_259ec3eb912d4c35a2dbe31664816248.pdf](https://e2236186-a9de-45db-b8f6-3f2d6db40cb4.usrfiles.com/ugd/e22361_259ec3eb912d4c35a2dbe31664816248.pdf)
- <sup>15</sup> Together for Antibiotics. ABPI. Available: [https://www.togetherforantibiotics.org.uk/resources/?3b293f58a0d649e6a204d1476bc6a631\\_cat=Cancer52&3b293f58a0d649e6a204d1476bc6a631\\_page=1](https://www.togetherforantibiotics.org.uk/resources/?3b293f58a0d649e6a204d1476bc6a631_cat=Cancer52&3b293f58a0d649e6a204d1476bc6a631_page=1)
- <sup>16</sup> ABPI AMR: Resources (togetherforantibiotics.org.uk). ABPI. Available: <https://www.togetherforantibiotics.org.uk/>
- <sup>17</sup> Cancer52 Policy on Working with the Pharmaceutical & Healthcare Industry. Cancer52. April 2024. Available: [https://www.cancer52.org.uk/\\_files/ugd/e22361\\_b5e75296a92547b9b9ebde37b998a762.pdf](https://www.cancer52.org.uk/_files/ugd/e22361_b5e75296a92547b9b9ebde37b998a762.pdf)

# List of charity members 2024/25

ACLT (African Caribbean Leukaemia Trust)  
[www.aclt.org](http://www.aclt.org)

Action Against Heartburn  
[www.actionagaintheartburn.org.uk](http://www.actionagaintheartburn.org.uk)

Action Bladder Cancer UK  
[www.actionbladdercanceruk.org](http://www.actionbladdercanceruk.org)

Action Kidney Cancer  
[www.actionkidneycancer.org](http://www.actionkidneycancer.org)

Action on Womb Cancer  
[www.actiononwombcancer.org.uk](http://www.actiononwombcancer.org.uk)

Alike  
[www.alike.org.uk](http://www.alike.org.uk)

ALK Positive UK  
[www.alkpositive.org.uk](http://www.alkpositive.org.uk)

AMMF – The Cholangiocarcinoma Charity  
[www.ammf.org.uk](http://www.ammf.org.uk)

Anthony Nolan  
[www.anthonynolan.org](http://www.anthonynolan.org)

Association for Multiple Endocrine Neoplasia Disorders (AMEND)  
[www.amend.org.uk](http://www.amend.org.uk)

Baggy Trousers UK  
[www.baggytrousersuk.org](http://www.baggytrousersuk.org)

Balls to Cancer  
[www.ballstocancer.co.uk](http://www.ballstocancer.co.uk)

Blood Cancer UK  
[www.bloodcancer.org.uk](http://www.bloodcancer.org.uk)

Bone Cancer Research Trust  
[www.bcrtr.org.uk](http://www.bcrtr.org.uk)

Bowel Research UK  
[www.bowelresearchuk.org](http://www.bowelresearchuk.org)

Brain Tumour Research  
[www.braintumourresearch.org](http://www.braintumourresearch.org)

Brain Tumour Research Campaign  
[www.btrc-charity.org](http://www.btrc-charity.org)

Brainstrust  
[www.brainstrust.org.uk](http://www.brainstrust.org.uk)

British Lymphology Society (BLS)  
[www.thebls.com](http://www.thebls.com)

British Thyroid Foundation (BTF-thyroid)  
[www.btf-thyroid.org](http://www.btf-thyroid.org)

Butterfly Thyroid Cancer Trust (BTCT)  
[www.butterfly.org.uk](http://www.butterfly.org.uk)

Cancer Laryngectomy Trust  
[www.cancerlt.org](http://www.cancerlt.org)

Cancer of Unknown Primary (CUP) Foundation - Jo's friends  
[www.cupfoundjo.org](http://www.cupfoundjo.org)

Cancer Support UK  
[www.cancersupportuk.org](http://www.cancersupportuk.org)

Childhood Eye Cancer Trust (CHECT)  
[www.checht.org.uk](http://www.checht.org.uk)

Children's Cancer and Leukaemia Group (CCLG)  
[www.cclg.org.uk](http://www.cclg.org.uk)

Chordoma UK  
[www.chordoma-uk.org](http://www.chordoma-uk.org)

Chris Lucas Trust  
[www.chrislucustrust.com](http://www.chrislucustrust.com)

Chronic Myeloid Leukaemia (CML) Support Group UK  
[www.cmlsupport.org.uk](http://www.cmlsupport.org.uk)

CLL Support Association  
[www.clisupport.org.uk](http://www.clisupport.org.uk)

Debbie Fund  
[www.debbiefund.org](http://www.debbiefund.org)

EHE Rare Cancer Charity (UK)  
[www.ehercc.org.uk](http://www.ehercc.org.uk)

Ellen MacArthur Cancer Trust  
[www.ellenmacarthurcancertrust.org](http://www.ellenmacarthurcancertrust.org)

Fight Bladder Cancer  
[www.fightbladdercancer.co.uk](http://www.fightbladdercancer.co.uk)

GIST Cancer UK  
[www.gistcancer.org.uk](http://www.gistcancer.org.uk)

Grace Kelly Childhood Cancer Trust  
[www.gkcct.org](http://www.gkcct.org)

GUTS Charity  
[www.gutscharity.org.uk](http://www.gutscharity.org.uk)

Heartburn Cancer UK  
[www.heartburncanceruk.org](http://www.heartburncanceruk.org)

HLRCC Foundation  
[www.hlrccinfo.org](http://www.hlrccinfo.org)

ICPV Independent Cancer Patients' Voice  
[www.icpv.org.uk](http://www.icpv.org.uk)

International Brain Tumour Alliance (IBTA)  
[www.theibta.org](http://www.theibta.org)

It's In The Bag Cancer Support Ltd  
[www.itsinthebag.org.uk](http://www.itsinthebag.org.uk)

It's on the Ball  
[www.itsontheball.org](http://www.itsontheball.org)

Kidney Cancer UK  
[www.kcuk.org.uk](http://www.kcuk.org.uk)

Leukaemia CARE  
[www.leukaemiacare.org.uk](http://www.leukaemiacare.org.uk)

Leukaemia UK  
[www.leukaemiauk.org.uk](http://www.leukaemiauk.org.uk)

London Asbestos Support Awareness Group  
[www.lasag.org.uk](http://www.lasag.org.uk)

Lymphoedema Support Network  
[www.lymphoedema.org](http://www.lymphoedema.org)

Lymphoma Action  
[www.lymphoma-action.org.uk](http://www.lymphoma-action.org.uk)

Maggie's Cancer Caring Centres -  
Maggie's Centres  
[www.maggiescentres.org](http://www.maggiescentres.org)

MDS (Myelodysplastic Syndromes) UK  
Patient Support Group  
[www.mdspatientsupport.org.uk](http://www.mdspatientsupport.org.uk)

Melanoma Focus  
[www.melanomafocus.com](http://www.melanomafocus.com)

Melanoma UK  
[www.melanomauk.org.uk](http://www.melanomauk.org.uk)

Mesothelioma UK  
[www.mesothelioma.uk.com](http://www.mesothelioma.uk.com)

Mind Over Cancer  
[www.mindovercancer.org.uk](http://www.mindovercancer.org.uk)

MPN Voice  
[www.mpnvoice.org.uk](http://www.mpnvoice.org.uk)

Mummy's Star  
[www.mummysstar.org](http://www.mummysstar.org)

Myeloma UK  
[www.myeloma.org.uk](http://www.myeloma.org.uk)

Neuroblastoma UK  
[www.neuroblastoma.org.uk](http://www.neuroblastoma.org.uk)

Neuroendocrine Cancer UK (NCUK)  
[www.neuroendocrinecancer.org.uk](http://www.neuroendocrinecancer.org.uk)

North West Cancer Research  
[www.nwcr.org](http://www.nwcr.org)

OcuMel UK  
[www.ocumeluk.org](http://www.ocumeluk.org)

Odyssey  
[www.odyssey.org.uk](http://www.odyssey.org.uk)

Oracle Cancer Trust  
[www.oraclecancertrust.org](http://www.oraclecancertrust.org)

Orchid Cancer Appeal  
[www.orchid-cancer.org.uk](http://www.orchid-cancer.org.uk)

OUTpatients  
[www.outpatients.org.uk](http://www.outpatients.org.uk)

Ovacome, The Ovarian Cancer Support Network  
[www.ovacome.org.uk](http://www.ovacome.org.uk)

Ovarian Cancer Action  
[www.ovarian.org.uk](http://www.ovarian.org.uk)

Pancreatic Cancer Action  
[www.pancreaticcanceraction.org](http://www.pancreaticcanceraction.org)

Pancreatic Cancer UK (PCUK)  
[www.pancreaticcancer.org.uk](http://www.pancreaticcancer.org.uk)

Peaches Womb cancer Trust  
[www.peachestrust.org](http://www.peachestrust.org)

Pelvic Radiation Disease Association PRDA  
[www.prda.org.uk](http://www.prda.org.uk)



Penny Brohn UK  
[www.pennybrohn.org.uk](http://www.pennybrohn.org.uk)

PLANETS  
[www.planetscharity.org](http://www.planetscharity.org)

Pseudomyxoma Survivor  
[www.pseudomyxomasurvivor.org](http://www.pseudomyxomasurvivor.org)

Ruth Strauss Foundation  
[www.ruthstraussfoundation.com](http://www.ruthstraussfoundation.com)

Salivary Gland Cancer UK  
[www.salivaryglandcancer.uk](http://www.salivaryglandcancer.uk)

Sarcoma UK  
[www.sarcoma.org.uk](http://www.sarcoma.org.uk)

Shine Cancer Support  
[www.shinecancersupport.org](http://www.shinecancersupport.org)

Solving Kids' Cancer  
[www.solvingkidscancer.org.uk](http://www.solvingkidscancer.org.uk)

Swallows Head & Neck Cancer Charity  
[www.theswallows.org.uk](http://www.theswallows.org.uk)

Target Ovarian Cancer  
[www.targetovariancancer.org.uk](http://www.targetovariancancer.org.uk)

Team Margot Foundation  
[www.teammargot.com](http://www.teammargot.com)

Teenage Cancer Trust (TCT)  
[www.teenagecancertrust.org](http://www.teenagecancertrust.org)

The Bottom Line  
[www.bottomlinecharity.com](http://www.bottomlinecharity.com)

The Brain Tumour Charity  
[www.thebraintumourcharity.org](http://www.thebraintumourcharity.org)

The Charley Ashton Foundation

The Ella Dawson Foundation  
[www.elladawsonfoundation.org.uk](http://www.elladawsonfoundation.org.uk)

The Eve Appeal  
[www.eveappeal.org.uk](http://www.eveappeal.org.uk)

The Leanne Pero Foundation  
[www.theleanneperofoundation.com](http://www.theleanneperofoundation.com)

The Myrovlytis Trust  
[www.myrovlytistrust.org](http://www.myrovlytistrust.org)

The Northern Ireland Rare Disease Partnership  
[www.nirdp.org.uk](http://www.nirdp.org.uk)

The Robin Cancer Trust  
[www.therobincancertrust.org](http://www.therobincancertrust.org)

The Sophie Fitzpatrick Charitable Foundation  
[sophiefitzpatrickcharitablefoundationforrarecancers.com](http://sophiefitzpatrickcharitablefoundationforrarecancers.com)

The Urology Foundation  
[www.theurologyfoundation.org](http://www.theurologyfoundation.org)

ThymicUK  
[www.thymicuk.org](http://www.thymicuk.org)

Thyroid Cancer Support Group Wales  
[www.thyroidsupportwales.co.uk](http://www.thyroidsupportwales.co.uk)

Tom Bowdidge Youth Cancer Foundation  
[www.tombowdidgefoundation.org](http://www.tombowdidgefoundation.org)

Trekstock  
[www.trekstock.com](http://www.trekstock.com)

UCARE  
[www.ucare-cancer.org.uk](http://www.ucare-cancer.org.uk)

UK Masto  
[www.ukmasto.org](http://www.ukmasto.org)

Urostomy Association  
[www.urostomyassociation.org.uk](http://www.urostomyassociation.org.uk)

VHL UK/Ireland  
[www.vhl-uk-ireland.org](http://www.vhl-uk-ireland.org)

Wellbeing of Women  
[www.wellbeingofwomen.org.uk](http://www.wellbeingofwomen.org.uk)

WMUK  
[www.wmuk.org.uk](http://www.wmuk.org.uk)

Womb Cancer Info  
[www.wombcancerinfo.wixsite.com/home](http://www.wombcancerinfo.wixsite.com/home)

Womb Cancer Support UK  
[www.wombcancersupportuk.weebly.com](http://www.wombcancersupportuk.weebly.com)

Worldwide Cancer Research  
[www.worldwidecancerresearch.org](http://www.worldwidecancerresearch.org)

Yorkshire Cancer Community  
[www.yorkshirecancercommunity.co.uk](http://www.yorkshirecancercommunity.co.uk)

Young Lives Vs. Cancer  
[www.younglivesvscancer.org.uk](http://www.younglivesvscancer.org.uk)

Young Tongues  
[www.youngtonguesglobal.com](http://www.youngtonguesglobal.com)



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If we **work together**  
we can make as much noise as the big four

