

# NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY

England & Wales · Charity number 1183175

## Details

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**Other names** NASS

**Status** Registered

**Legal form** CIO

**Registered** 2019-04-29

**Register** [View on the Charity Commission register](#)

## Contact

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**Website** [www.nass.co.uk](http://www.nass.co.uk)

## Activities

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**Objects:** THE OBJECTS OF THE CIO ARE THE RELIEF OF SICKNESS AND THE PRESERVATION AND PROTECTION OF GOOD HEALTH AMONG PEOPLE IN THE UNITED KINGDOM LIVING WITH THE MEDICAL CONDITION AXIAL SPONDYLOARTHRITIS WHICH INCLUDES ANKYLOSING SPONDYLITIS (TOGETHER KNOWN AS THE 'CONDITION') IN PARTICULAR BUT NOT EXCLUSIVELY BY: A) PROVIDING INFORMATION TO THE GENERAL PUBLIC ABOUT THE CONDITION AND PROVIDING SUPPORT AND ADVICE TO PEOPLE LIVING WITH THE CONDITION, THEIR FAMILIES, CARERS, SERVICE –PROVIDERS AND EMPLOYERS; B) ADVOCATING TO ENSURE THAT EVERY PERSON HAS TIMELY AND EFFECTIVE DIAGNOSIS, TREATMENT AND CARE OF THE CONDITION; C) FUNDING AND DISSEMINATING RESEARCH AND ANALYSIS TO ADVANCE SCIENTIFIC UNDERSTANDING OF THE CONDITION AND ITS EFFECTIVE TREATMENT.

**Activities:** Providing information to the general public about the Condition and providing support and advice to people living with the Condition, their families, carers, service providers and employers. Advocating to ensure that every person has timely and effective diagnosis, treatment and care of the Condition. Funding

and disseminating research into the management and cure of axial SpA and its causes.

## Classification

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- **How:** Makes Grants To Individuals, Makes Grants To Organisations, Provides Services, Provides Advocacy/advice/information, Sponsors Or Undertakes Research
- **What:** The Advancement Of Health Or Saving Of Lives, Disability
- **Who:** People With Disabilities

## Geography

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- Northern Ireland
- Scotland
- Throughout England And Wales

## Finances

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Period end	Income	Expenditure	Assets	Employees
2024-12-31	£1,053,798	£1,090,496	£1,001,775	12
2023-12-31	£1,027,652	£1,158,200	£1,038,473	12
2022-12-31	£1,026,524	£1,518,746	£1,179,453	13
2021-12-31	£1,182,468	£1,138,102	£1,721,675	13
2020-12-31	£829,223	£1,163,513	£1,655,164	14

## Trustees

Name	Role	Appointed
<b>Hannah Bruce</b>	Chair	2025-09-06
Claire Jeffries		2020-06-13
Dr Antoni Tuck Yin Chan		2020-06-13
Dr Lesley Jane Kay		2021-06-12
Dr Raj Amarnani		2024-09-28
Gillian Eames		2019-06-08
Jane Elizabeth Freeston		2025-09-06
Josephine Davies		2024-09-28
MICHAEL ANTHONY FRANKL		2025-09-06
Paul Curry		2019-06-08
RAJEEVENDRA KUMAR MAHAPATRA		2019-06-08
Rachel Davis		2023-09-30

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

England & Wales - Charity number 1183175

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# Accounts

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**Axial SpA  
works silently.  
We don't.**

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**TRUSTEES' REPORT AND FINANCIAL STATEMENTS**

**FOR THE YEAR ENDED 31 DECEMBER 2024**

**CONTENTS**

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	Page
<b>Reference and administrative details of the Charity, its Trustees and advisers</b>	<b>1</b>
<b>Trustees' report</b>	<b>2 - 19</b>
<b>Independent auditors' report on the financial statements</b>	<b>20 - 23</b>
<b>Statement of financial activities</b>	<b>24</b>
<b>Balance sheet</b>	<b>25</b>
<b>Statement of cash flows</b>	<b>26</b>
<b>Notes to the financial statements</b>	<b>27 - 48</b>

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NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY

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**REFERENCE AND ADMINISTRATIVE DETAILS OF THE CHARITY, ITS TRUSTEES AND ADVISERS  
FOR THE YEAR ENDED 31 DECEMBER 2024**

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<b>Trustees</b>	Rajeevendra Kumar Mahapatra, Chair Nicholas Reid, Treasurer Dr Raj Armanani (elected 29 September 2024) Prof Antoni Tuck Yin Chan, Trustee Jo Davies (elected 29 September 2024) Rachel Davis Gillian Eames, Trustee (re-elected 29 September 2024) Paul Curry, Trustee Poppy Hocken, Trustee (retired 29 September 2024) Claire Jeffries, Trustee Dr Lesley Jane Kay, Trustee (re-elected 29 September 2024) Hannah Elizabeth Bruce, Trustee (retired 29 September 2024) Prof Hasan Imam Syed Tahir, Trustee Alexia Katherine Dreese Granatt, Trustee
<b>Charity registered numbers</b>	1183175 and SC049746
<b>Principal office</b>	Unit 6 Cambridge Court 210 Shepherds Bush Road London W6 7NJ
<b>Independent auditors</b>	BKL Audit LLP 35 Ballards Lane London N3 1XW
<b>Bankers</b>	Barclays Bank UK Plc 1 Churchill Place London E14 5HP

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2024

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The Trustees present their annual report together with the audited financial statements of the National Axial Spondyloarthritis Society for the year 1 January 2024 to 31 December 2024.

### Objectives and activities

NASS' vision is as follows:

*"The future we want to create is one where every person with axial spondyloarthritis (axial SpA) has timely and effective diagnosis, treatment and care, is empowered to make informed health choices and feels part of a supportive community."*

NASS seeks to do this by:

- providing information to the general public about axial SpA, and advice to people living with the condition, their families, carers, service-providers and employers
- advocating to ensure that every person with axial SpA has timely and effective diagnosis, treatment and care
- funding and disseminating research and analysis to advance scientific understanding of the condition and its effective treatment.

In setting objectives and planning for activities, the Trustees have given due consideration to general guidance published by the Charity Commission relating to public benefit, including the guidance 'Public benefit: running a charity (PB2)'.

#### a. Strategies for achieving objectives

In accordance with the provisions set out in its Constitution, the Trustees have adopted the following strategy for the period 2020 – 2024 to meet NASS' principal objects:

##### To ensure that people with axial SpA receive timely diagnosis, effective treatment and care

- Maintain pressure at national level to ensure effective and widespread implementation of the NICE Guideline and Quality Standard for axial SpA
- Continue to run an All Party Parliamentary Group on Axial Spondyloarthritis
- Undertake Parliamentary work in the devolved nations
- Develop and publish a Gold Standard time to diagnosis route map
- Commission research on the economic consequences of a delay to diagnosis
- Create impactful ways to engage primary care professionals and those in appropriate secondary care services to ensure that they identify and refer patients who may have axial SpA
- Form an alliance to protect NHS hydrotherapy services
- Develop a primary care clinical champions programme
- Continue to work in partnership with medical bodies
- Support rheumatology and other services to test approaches to improving diagnosis and treatment and spread the learning across the UK
- Expand the *Aspiring to Excellence* healthcare improvement programme
- Ensure that patient values and needs underpin NHS service delivery
- Disseminate learning from *Aspiring to Excellence*
- Raise awareness among those working in emergency care and NHS 111

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2024

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To empower, inform and inspire people affected by axial SpA

- Ensure that everyone affected by axial SpA has access to personalised support and the best information about the condition
- Extend personalised support through NASS' Helpline service, and reliable and user-friendly information resources for everyone affected by axial SpA
- Promote physical activity, and support and motivate people to exercise
- Support and develop the NASS branch network to continue to ensure people can access regular group, physiotherapy led exercise sessions
- Support and motivate people to confidently and safely exercise independently
- Ensure that everyone affected by axial SpA has the skills, confidence and knowledge they need to manage their condition optimally
- Develop a self-management pilot programme and roll it out

To foster a connected and supportive community, raising axial SpA awareness everyday, everywhere

Conduct public awareness campaigns using various methods and channels to try and increase knowledge. Chiefly this activity will include:

- Using case studies of people living with axial SpA to generate media coverage
- Encouraging our members and supporters to become advocates for NASS and campaigners for improvements in axial care
- Online and social media campaigns to create interest and inform the public
- Using related national and international awareness days
- Create an active community of NASS members and supporters who work together
- Make more use of online tools for streaming events, conversations and debates, to encourage participation and engagement
- Increase our online supporter numbers through social media promotion, listening, and outreach to potential supporters
- Encourage members and supporters to take up fundraising activity for NASS, whether largescale challenge events or activity such as raffles and coffee mornings
- Ensure that people know what NASS stands for, the changes that we are seeking to bring about, and how we operate
- Offer thought leadership and op-ed pieces from the CEO, Chair and other key colleagues to professional and trade outlets and to mainstream health outlets
- Use social media listening techniques to reach out to people talking about axial SpA, making them aware of NASS and its resources
- Develop annual membership campaigns to increase the number of members and membership revenue
- Seek outreach opportunities through external events outside of the sector at which NASS can contribute and have visibility.

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2024

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**b. Activities undertaken to achieve objectives and achievements**

The charity fulfils its objectives by:

- Providing information to people living with axial SpA
- Supporting people through a Helpline service and welfare benefits advice
- Providing a wide range of self-management resources, including webinars, videos and on-line meetings
- Supporting our network of local branches which are led by volunteers and provide regular group physiotherapy sessions
- Campaigning amongst policy makers, Parliamentarians and health service leaders
- Providing expert quality improvement support to rheumatology teams and primary care professionals who are working to reduce diagnostic delay and improve the quality of care
- Raising public awareness of the condition and of NASS
- Supporting research studies
- Contributing to public consultations relating to musculoskeletal health and the management of spondyloarthritis.

**c. Volunteers**

NASS is heavily dependent on 250 volunteer members who provide support at branch level. Volunteer members are unpaid and NASS' accounts do not reflect the value to NASS of the many hours work provided free to us. The Trustees are fully conscious of this value and recognise that the work of NASS would be considerably curtailed without the support provided by volunteer members.

Our NASS branches offer regular, physiotherapist-led group exercise for anyone living with axial SpA. They are subcommittees of NASS and are led by a committee usually comprising a Chair, Treasurer and Secretary. We support our branches with a suite of resources, regular promotion of their activities, online meetings and a named member of staff who is available Monday to Friday to help with any problems or issues.

**d. Main activities undertaken to further the charity's purpose for the public benefit**

NASS provides public benefit by:

- working with statutory bodies and others that provide for the treatment and welfare of people affected by axial SpA
- educating people affected by axial SpA, as well as healthcare professionals and the public, on the condition and best management
- helping people reach their potential and live their best lives
- promoting research into the management and cure of axial SpA and its causes
- disseminating the results of research related to axial SpA.

In so doing, NASS improves the lives of those affected by axial SpA, particularly in relation to their ability to contribute positively to the prosperity of their communities and the country as a whole.

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2024

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## Achievements and performance

### a. Summary

2024 was an impactful year for NASS. Despite having a reduced workforce (11.1 whole time equivalents), our activities, visibility and influence continued to be strong:

- We supported 5700 people living with axial SpA through our Helpline
- We helped people to access £1,400,000 of welfare benefits
- Since we launched our self-management programme in 2020, our webinars have had 433,000 views, we have partnered with 53 rheumatology departments to run online sessions and had more than 650 attendees at our online peer support meet ups
- Our awareness campaign has now reached 6 million people since its launch in June 2021, and 35,000 people have completed our online symptom checker
- The data from our ongoing patient survey indicate a reduction in the time to diagnosis at UK level to 7 ½ years
- Our membership increased by 6%
- We held a policy roundtable to explore opportunities to promote axial SpA in the context of the new government's proposed NHS 10-year plan, and supported a Westminster Hall debate on musculoskeletal (MSK) health and work
- In Wales, we worked with the MSK clinical lead, MSK Strategic Network Manager and Rheumatology Lead and are a member of the Low Back Pain Pathway group
- We responded to numerous consultations including the new government's 10-year strategy, NHS Wales MSK Strategy, Personal Independence Payments, the NHS Constitution consultation, and we supported BSR's Homecare Campaign
- We delivered education sessions to a wide range of healthcare professionals and continued to run our quality improvement initiative with rheumatology departments
- We had 68 branches meeting face to face for gym and/or hydrotherapy sessions, and created a NASS Affiliated Group programme.

### b. Key performance indicators

Performance against key indicators was as follows:

- **Fundraising ratio:** every £1 spent on income generation activities raised £5.79 in income
- **% of expenditure on charitable activities:** 70% of our expenditure was directly related to charitable activities
- **total annual value of successful benefit applications for our members.** We helped members to secure £1,400,000 of welfare support payments
- **Numbers of people reached through our self-management programme:** 102,915
- **Helpline requests processed within two working days:** 97% (target is 95%).

### c. Review of activities

#### Reducing diagnostic delay

In 2020, respondents to our national consultation process – healthcare professionals (HCPs), professional bodies and patients – agreed that it should be possible for every person experiencing symptoms of axial spondyloarthritis (axial SpA) to receive a diagnosis within one year of symptom onset. 2021 we published a route map to achieve a Gold Standard time of one year.

**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2024**

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Starting from a current baseline average of 8.5 years, the achievement of this goal will require transformational change. This includes a significant increase in awareness of the condition among HCPs and the general public, a critical mass of clinical leaders who will improve health care performance in axial SpA, the widespread use of technology to ensure that axial SpA is higher within clinical reasoning and to support diagnosis, the routine use of pathways to ensure that patients are referred directly to rheumatology for assessment, and consistent use of agreed national protocols for imaging.

Above all, to attain such a dramatic change in time to diagnosis we must win hearts and minds, build a social movement of people who want to work with us to create change, and demonstrate proof of concept for our ideas.

2024 was the third full year of implementation of our route map.

Making the case for change

We continued to make the case for change through research and audit:

- We submitted journal articles on our economic modelling, work in primary care and the first three phases of the public awareness campaign, and presented our work at UK and international conferences.
- In 2022 we established a UK-wide patient-completed survey of time to diagnosis in axial SpA, which includes patients diagnosed since January 2021. By the end of 2024, 57 NHS Trusts and Health Boards had signed up to the survey (up from 39), submitting data for 600 patients. The data indicate a potential trend of reduced time to diagnosis in 2024
- We supported the trialling of the PRIMIS primary care pop-up alert, and one of our Champions in Primary Care worked with Ardens to refresh the MSK template. Another worked with Fourteen Fish which manages the appraisal process for GP trainees. Our Champions presented at five UK conferences and training events.
- We launched the second round of our Changemaker awards to recognise the work of HCPs who are working alongside NASS to reduce the time to diagnosis. We released four podcast episodes / blogs on the campaign work focused on primary care, uveitis, inflammatory bowel disease and MRI respectively, and ran 12 national and regional HCP peer to peer network events.

We strengthened our educational work with healthcare professionals:

- We continued to run a Peer to Peer HCP Network, providing monthly webinars and an opportunity to share ideas and issues.
- We delivered bespoke education sessions in collaboration with groups such as the Royal College of Chiropractors, Physio First and MIMS. We also delivered locality peer to peer meetings for HCPs.
- We conducted a consultation with our closest HCPs to gauge the level of support they were able to provide to NASS, and also what support they needed from NASS.

We brought these results to the attention of Parliamentarians, policymakers and healthcare professionals:

- We supported a Westminster Hall debate on musculoskeletal (MSK) health and work.
- We convened a Parliamentary roundtable meeting to explore opportunities for axial SpA in the context of the incoming government's 10 NHS Plan for England.
- In Wales, we worked with the MSK clinical lead, MSK Strategic Network Manager and Rheumatology Lead and are a member of the Low Back Pain Pathway group.
- We presented our work at regional SpA Academies, regional rheumatology networks, the British

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2024

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Society for Spondyloarthritis annual scientific meeting, the British Society for Rheumatology conference, the International Congress on Spondyloarthritis and the European Alliance of Associations in Rheumatology (EULAR) conference.

Raising public awareness about early diagnosis

Raising public awareness about axial SpA and inflammatory back pain is key to earlier diagnosis. We continued to run a national social media campaign featuring case studies of people living with axial SpA.

In addition, we launched a six-week public awareness campaign in Belfast, reaching almost 1,000,000 people through our social media campaign including 81% of 18-40 year olds, with almost 400 people completing the symptom checker. We then embedded the new collateral used for Belfast in the next phase of our national awareness campaign, reaching over 1,200,000 people in four months.

Since our awareness raising campaigns began in June 2021, we have reached 5 million people. Crucially, more than 35,000 people have completed our online symptom checker and started their journey to diagnosis.

We are seeing indications of a reductions in the time to diagnosis at UK level

The latest data from our ongoing patient survey indicate that in 2024 the average time to diagnosis from our participating sites has reduced to 7 ½ years. This suggests that our campaign, and the collective efforts of the HCPs working us, is having an impact at national level.

**Improving healthcare quality across the patient pathway**

In 2019 we established the *Aspiring to Excellence* programme. In partnership with the NHS Transformation Unit, we teach rheumatology teams the fundamentals of healthcare quality improvement and, through learning sessions, coaching and webinars, we encourage participating teams to share their experiences and data.

In 2024, cohorts three and four continued with their projects, alongside learning sessions, webinars and coaching from our partners at NHS Transformation Unit. We welcomed the National Clinical Director for MSK with NHS England, and the NHS Executive MSK Lead (Wales) to our Celebration Event which showcased the work of the teams and our Champions in Primary Care. We showcased all of the projects on our website and several of the teams also presented their work at the British Society of Rheumatology conference and at the British Society for Spondyloarthritis Annual Scientific Meeting.

In 2023 we began an ambitious long-term initiative to create a Gold Standard in Treatment and Care for Axial SpA. In 2024, we appointed leads to the workstreams, both lived experience and HCPs. We issued a call for evidence from people with axial SpA and HCPs, encouraging them to share their positive experiences of treatment and care and examples of best practice and novel interventions. This included a targeted campaign for those with lived experience, and a variety of ways to respond for all parts of the community including online surveys and interviews.

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2024

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### Helping people to live well with axial SpA

Axial SpA is a condition that requires a great deal of information, support and guidance for people to manage their symptoms effectively and ensure optimal long-term outcomes. There are few formal patient education programmes for axial SpA and many people report feeling isolated and have never met anyone else with the condition. NHS backlogs and the rheumatology workforce crisis are such that this need is ongoing.

#### Helpline

We supported 5,700 enquiries in 2024, a 14% increase on 2023. This seems to be related in part to NHS staffing shortages and the workload in rheumatology departments, with callers reporting long waits for appointments and calls to department helplines resulting in a lack of response. Additionally, our self-management programme has increased our visibility and encouraged people to be in contact.

The NASS Helpline is often the only place people can turn to for help and support and we responded to 85% of queries within 1 working day and a total of 97% within 2 working days. The worsening economic situation has also led to more people seeking our help with disability benefits. We supported 299 people with claims which we predict will result in people receiving £1.4 million in disability benefits.

#### NASS Branches

We have 68 branches meeting face to face for gym and/or hydrotherapy sessions. We are very pleased to report that 39 of these branches are able to offer hydrotherapy. Nine currently offer online sessions, including our all-UK online branch.

We created a NASS Affiliated Group programme. Our branches are sub-committees of NASS and are structured so that a committee of volunteers run the branch and manage the finances. This structure did not suit everyone and therefore we introduced NASS Affiliated Groups so we could bring in groups who run differently but still offer regular affordable exercises sessions targeted at people with axial SpA. We currently have two affiliated groups and hope to be able to expand this further.

Overall, branches are in a relatively stable situation. Most that were working to return to operation post-COVID are now back and, for the most part, services are running smoothly. While low numbers may be a challenge with some branches, in other areas there are now waiting lists, especially for hydrotherapy.

We supported all branches in logistical conversations with hospitals, health professionals and venues and with promotion of their branch.

#### Supported self-management programme

We support people through education and empowerment, and by creating a supportive community, we aim to reduce the isolation of people with axial SpA.

In developing our self-management work, we held consultations with patients and healthcare professionals, which identified that our supported self-management programme should: empower patients with axial SpA to live well with their condition; be co-designed with people living with axial SpA and healthcare professionals; be easily accessible; reduce isolation; and leave a legacy.

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2024

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Our supported self-management programme comprises:

- Regional online sessions in partnership with local NHS rheumatology teams
- *My AS, My Life* live webinars
- *Your SpAce* videos, downloadable resources, and online peer support meetups

In 2024, we ran eight online sessions in partnership with 26 NHS rheumatology departments, reaching 236 people living with axial SpA. We commenced regional pilots in Northern Ireland, Wales, and England with support from The National Lottery Community Fund.

We ran seven webinar sessions with over 50,000 views. The *My AS, My Life* webpages were visited nearly 18,000 times. We continued to get excellent engagement with the live sessions, and the video library is an excellent resource to signpost people to. Sessions covered: information about the condition; tips for daily life with axial SpA; exercise taster sessions; research into exercise; getting the most out of medical appointments; travelling; university life; work; and medication during pregnancy.

We launched two new *Your SpAce* modules on making medication decisions and navigating appointments. *Your SpAce* is aimed at people at the start of their axial SpA journey, as well as those who are struggling, and people who feel isolated. It was developed in collaboration with people with axial SpA and HCPs. The new modules comprise eight videos and five downloadable resources. In 2024, we sent promotional packs to 99 rheumatology departments containing posters to display in clinics and promotional postcards to hand to patients.

In 2024, the *Your SpAce* videos were watched 11,000 times and webpages visited 23,000 times.

We presented the results of the first three *Your SpAce* modules at EULAR Congress in Vienna and it was awarded best abstract in the People with Arthritis and Rheumatism in Europe Category.

As part of *Your SpAce* we developed a safe space for people to meet and share experiences and ask questions through our online meetups. In 2024, we ran 10 on-line meetups, with 366 attendees. We presented the results at the BSR Conference in an oral abstract presentation.

Since the Self-management Programme started in 2020, to the end of 2024 we:

- Ran 131 live-streamed webinars with over 433,000 views
- Ran 63 online self-management sessions in partnership with 53 rheumatology departments, reaching 1640 people living with axial SpA
- Created 22 *Your SpAce* videos with 22,720 views and 44,973 webpage visits
- Ran 22 *Your SpAce* meetups with 663 attendees.

#### Information provision

193 packs of guidebooks were sent to NHS Hospitals in 2024 (up from 122 in 2023) comprising over 10,500 information guides. Our guides and the additional posters and flyers we provide are an important introduction both to axial SpA and to NASS for people diagnosed with the condition. We continued to update the website information on a rolling basis.

#### **Raising the profile of axial SpA within Government**

In 2019 we worked with Parliamentarians to create an All Party Parliamentary Group (APPG) on axial SpA with the aim of providing national level oversight of the implementation of NICE Guideline 65 concerning the diagnosis and treatment of spondyloarthritis. In 2024 we put the APPG meetings

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2024

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on hold, partly for financial reasons and partly because of the inevitable turbulence created by the General Election.

Nevertheless, we supported a Westminster Hall debate on employment and MSK health and held a policy roundtable to explore opportunities to promote axial SpA in the context of the new government's proposed NHS 10-year plan in England.

In Wales we worked with the MSK clinical lead, MSK Strategic Network Manager and Rheumatology Lead and are a member of the Low Back Pain Pathway group.

### Social media

We continued to reach and engage broader audiences on social media, creating a sense of community and sharing stories about people's experiences of life with axial SpA. We supported World AS Day, World Arthritis Day, Bone and Joint week and Pride Month.

Following cost reduction measures in 2023, we operated without any communications staff in 2024. Consequently, we lost followers on some channels, although we were able to grow our followers on Facebook and YouTube, as follows:

- **Facebook:** Our reach was 4.9 million, covering organic and paid for social activity (up from 4.1 million in 2023). There were 55,000 visits to our page (a 33% increase on 2023).
- **Instagram:** we reached 209,000 profiles with our content (down from 588,800 in 2023), which led to 6,900 visits to our profile and 715 new followers.
- **YouTube:** the NASS YouTube channel increased subscribers by 1397, and our videos received 106,100 views (down from 127,000 in 2023)
- **LinkedIn:** the NASS LinkedIn page had a reach 60,000 (similar to 2023) and 480 new followers (down from 565 people in 2023)
- **Twitter (X):** changes to X resulted in us losing access to channel analytics.
- **Website performance:** The NASS website had 473,000 views and 113,000 users (down from 124,400 in 2023).

### Membership

Our members are the lifeblood of NASS. Membership increased by 6% in 2024 from 4,100 to 4,324 with re-engagement with lapsed members and the implementation of a membership retention plan. We improved the welcome pack and offered exclusive content including two new members only webinars, with 400 attendees in total.

#### d. Factors relevant to achieve objectives

Our income was higher in 2024 than 2023 (despite one pharmaceutical partner ending their support) and our expenditure reduced, reflecting the impact of the cost reduction measures put in place in 2023. As a consequence, our overall financial position stabilised.

We continue to have excellent relationships with a wide range of healthcare professionals, professional bodies, health consortia and other charities, all of which has enriched our work and strengthened its impact.

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2024

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**e. Fundraising activities and income generation**

**Raising funds for NASS**

Thank you to everyone who supported us in 2024 by donating or fundraising. We don't receive public funding and couldn't do our work without the generosity of our supporters. The money we raise ensures that we're here to transform axial SpA diagnosis and care, and offer practical support and advice to anyone affected by the condition.

At the national level we met 92.7% of our total income budgeted target and our income in 2024 amounted to £874,158 (£873,253 in 2023). Income at branch levels amounted to £179,640 in 2024 (£154,399 in 2023)

In 2024 our income generation activities included:

- **Community and events fundraising:** In 2024, 44 people raised money for NASS by organising an event in their community or through birthday fundraising, 72 fundraisers took on challenge events (running, swimming, walking etc.), and 42 people joined one of our fundraising events (Stretch-tember, Walk Your AS Off and Winter Walks). Collectively, these activities raised £98,811 including Gift Aid. We would like to express our sincere gratitude to each individual fundraiser who dedicated their time and effort to support our cause. We would also like to thank the corporate companies who took part in our first ever Football Tournament that raised £13,000.
- **Donations and individual giving:** In 2024 we had 174 regular donors, 326 people supported us through our Winter Appeal. 215 people donated to NASS for the first time.
- **Corporate Donations:** We extend our thanks to the corporate companies that have generously supported us through direct donations and matched donations. Your support is invaluable in helping us continue our mission.
  - Barclays PLC
  - BioScript Sterling Limited
  - Deutsche Bank AG
  - Google LLC
  - Microsoft Corporation
  - Reed Exhibitions Limited
  - RELX PLC
  - Robert W. Baird & Co. Incorporated
  - Sipped Coffee Ltd
  - Sony Interactive Entertainment
  - The Capital Group Companies, Inc.
  - The Estée Lauder Companies Inc.
- **Trust fundraising:** We would like to thank the following grant-making organisations that supported us, collectively giving £82,760:
  - The Bernadette Charitable Trust
  - The Charity of Stella Symons
  - The Joan Ainslie Charitable Trust
  - Marsh Christian Trust
  - The Simon Gibson Charitable Trust
  - Masonic Charitable Foundation
  - The G C Gibson Charitable Trust
  - The Mary Homfray Charitable Trust
  - The Chamifealion Charitable Trust
  - The Hospital Saturday Fund
  - Souter Charitable Trust
  - The National Lottery Wales
  - The National Lottery England
  - The National Lottery Northern Ireland

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2024

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- **Legacies:** In 2024, we received 12 legacies totalling £102,838, for which we are deeply grateful. These generous gifts make a lasting difference to people affected by axial SpA.
- **Investments:** Our residential properties generated £34,450 of rental income, and cash savings generated £6,904 of interest income.
- **Funding from pharmaceutical companies:**  
We would also like to thank the following companies that supported us in 2024:
  - AbbVie Ltd £30,637
  - Biogen Idec Ltd £30,000
  - Eli Lilly and Company £30,000
  - UCB Pharma Ltd £243,646.

Any relationship NASS has with a pharmaceutical company is underpinned by the following principles:

- **Independence** – The independence of NASS must not be compromised by the relationship with an external organisation or by the agreed working arrangements. The financial benefit must be made available for the support of our charitable activities without restriction. We will not allow funders to influence our campaigning, policymaking, research or fundraising for their own purposes. We will ensure our editorial independence is maintained and all information produced by NASS will be based on the latest evidence, informed by our Medical Advisory Board.
- **Transparency** – Any relationship with an external organisation is not an endorsement of their product or organisation and will be made transparent to our members, supporters, staff and the general public including in our annual Report and Accounts. All partnerships will be governed by a written agreement which will detail requirements and expectations from each party.
- **Benefit for those living with axial SpA** – Any relationship formed with an external organisation must be positive for NASS members and people living with axial SpA and in furtherance of our charitable aims.
- **Regulation and good practice** – All funders must comply with all relevant laws and regulations, as well as good practice. This includes full compliance with the Association of the British Pharmaceutical Industry's Code of Practice.
- **Use of NASS logo** - our logo may only be used following written approval from NASS. We may use a funder's mark where relevant to the relationship including in webinars, event banners, on our website or on press releases where appropriate. The use of a funder's trademark will have no impact on the independence of the charity.
- **Sharing expertise and knowledge** - We will work with funders to share non-product expertise and knowledge. This may include participation in networking events and meetings
- **Privacy policy** - In line with our privacy policy NASS will not, under any circumstances, share the personal data of any of our service users or supporters with a pharmaceutical company.
- **Alignment with our strategy and values** - Any collaboration or cooperation with pharmaceutical companies will be assessed against the ethics, desirability and practicality in relation to the overall plans and work of NASS.

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2024

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### **Fundraising responsibly**

We rely on the generosity of our donors and fundraisers to do our life-changing work and have processes and policies in place to ensure that we fundraise responsibly.

- We are a member of the Fundraising Regulator and pay an annual levy
- We are transparent about our fundraising and treat donors and fundraisers respectfully and fairly
- We provide personal stewardship to anyone who is taking part in a fundraising activity for us; this includes ensuring people are aware of the risks of taking part in activities
- We explain how to opt out of communications and people are easily able to unsubscribe from emails
- We adhere to data-protection legislation and provide information on our website about our data-privacy policy, and how to opt-out of communications
- We take all reasonable steps to opt-people out of communications if they request to no longer hear from us
- We respond quickly and efficiently to any complaints about fundraising. We received no complaints in 2024
- We mitigate the risk of not reaching our fundraising targets by reviewing management accounts monthly, monitoring income levels, and reforecasting. We take appropriate actions if fundraising income falls below anticipated levels.
- We are registered with Hammersmith and Fulham Council as a Small Society Lottery under Paragraph 42 of Part 5 of Schedule 11 to the Gambling Act 2005. During the year, we ran three fundraising raffles (Valentine's, Summer and Festive), which collectively raised £6,198.50, of which £3,733.50 was retained as unrestricted income to fund our charitable activities. The remainder covered prizes and administrative costs associated with running the lottery.

### **f. Investment policy and performance**

To minimise the risk of potential loss of funds and maintain financial security, a portion of our funds is held in cash within a reputable bank.

Additionally, the charity has made strategic investments in two properties we own which provide a consistent and reliable source of income for our charitable initiatives.

All investments are carried at market value.

### **Financial review**

The year saw a modest increase in total income to £1,053,798 (2023: £1,027,652) and a reduction in total expenditure to £1,090,496 (2023: £1,158,200), narrowing the deficit to £36,698 (2023: £140,980). This improvement reflects the continued impact of the cost control measures introduced in 2023 and demonstrates a more sustainable trajectory as we head into the 2025–2029 strategic period.

### **a. Going concern**

After making appropriate enquiries, the Trustees have a reasonable expectation that the Charity has adequate resources to continue in operational existence for the foreseeable future. For this

**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2024**

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reason, they continue to adopt the going concern basis in preparing the financial statements. Further details regarding the adoption of the going concern basis can be found in the accounting policies.

The charity's trustees closely monitor its reserves. To ensure adequate cash reserves, the Board of Trustees decided to take out a loan against the properties owned by NASS. The loan increased the charity's liquidity and its free cash reserves.

**b. Reserves policy**

The charity's funds at the end of the reporting period are as follows:

Unrestricted funds: £691,070

Restricted grants: £78,832

Branch funds: £231,873

NASS holds two investment properties valued at £655,000 which are not used for direct charitable purposes but from which NASS derives rental income. These properties have an associated bank loan with total outstanding balance of £295,395 (45% LTV), of which £27,950 is due within 12 months.

Our readily available unrestricted reserves ("free reserves") amount to £331,465 (2023: £372,950), which represented seven months of actual operating costs.

This is calculated by taking our unrestricted funds (£691,070) and deducting the net book value of our investment properties after accounting for associated loans (£655,000 - £295,395 = £359,605). NASS must raise income each year from voluntary sources and total income is likely to fluctuate from year to year. As a general policy, we aim to hold 6-9 months of free reserves. This working capital protects the continuity of our core work, that is, work not funded through restricted income. Core work includes our information and support service, awareness raising, campaigning and policy influencing, and the work of our branches across the UK. We have chosen a reserves level of 6-9 months having considered the level of predictability in our income sources and the extent to which our cost base is flexible or committed. Our largest income sources (legacies and grant funding from pharmaceutical companies) come at irregular intervals, and the majority of our costs are committed, principally in the form of the staff who deliver our charitable objectives.

**c. Material investments policy**

The Charity holds two properties that are rented out to private tenants. Properties were chosen as a reliable source of income for the Charity and the expected income is set at £34,000 per annum. Both properties are let to private tenants.

**d. Principal risks and uncertainties**

The Trustees have adopted appropriate policies necessary to limit or mitigate the risks faced by NASS. The principal risks are:

- Loss of income: NASS seeks to broaden and expand its income from all sources. Nevertheless, NASS is dependent upon voluntary income, both at branch level and at national level, and aims to increase its membership locally and nationally
- Loss of reputation: NASS seeks at all times to maintain its independent viewpoint. Grants from

**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2024**

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pharmaceutical companies are strictly controlled so as to ensure that our independence is not compromised

- Loss of staff: NASS has a reward strategy to ensure that the charity is able to recruit and retain high quality staff. It also has a set of HR policies to provide the appropriate framing for all HR matters.

In the course of 2024, one pharmaceutical partner discontinued their funding. All remaining relationships were reviewed to ensure continued alignment with NASS's policy on independence, transparency and public benefit. The Trustees are satisfied that editorial oversight, campaigning priorities and policy engagement activities remained wholly independent and were not influenced by any external funding arrangement

NASS has a safeguarding policy and set of procedures applicable to beneficiaries, staff, trustees and volunteers. Staff are trained in safeguarding and NASS branches have a training resource. The safeguarding policy and procedures are reviewed on an annual basis.

**e. Financial risk management objectives and policies**

Effective management of financial risk is a high priority. Given the importance of accurate financial projections and reporting, we have taken a comprehensive approach to ensure that we consistently maintain a high standard in all aspects of financial management. It includes implementing robust budgeting and costing methods, adhering to donor imposed restrictions, maintaining strong financial systems and controls, regular reporting and ensuring adequate reserves and cash flow management. We also conduct regular audits and financial reviews to maintain transparency and accountability. We have a range of policies and procedures to achieve these objectives. We employ processes and controls to guarantee accurate financial forecasting and reporting. We follow a well-defined procedure for expenditure approval, ensuring that any spending is fully authorised, and documented accordingly. Furthermore, we take great care to keep detailed records of all restricted funds, which helps to ensure complete transparency and accountability in their utilisation.

Collaborative budgeting methods are also used to ensure our financial management practices are practical and efficient. These policies and practices reflect our commitment to sound financial management, compliance, transparency, and accountability.

**f. Principal funding**

In 2024 NASS received its funding from various sources, with a notable distinction between income generated at the national level (83%) and that at the branch level and designated for their specific use (17%). 89% of branch income came from subscriptions, 3% from donations and legacies and 7% from fundraising activities.

At the national level, our income for 2024 was diversified across various categories. The majority of our funding originated from grants provided by pharmaceutical companies (38%), designated for specific projects (restricted), along with a contribution towards general operational expenses. Other sources of income were as follows:

- Donations: 22%
- Fundraising: 14%
- Membership subscriptions: 10%
- Legacies: 12%
- Investments 5%

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2024

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**Structure, governance and management**

**a. Constitution**

The charity is a Charitable Incorporated Organisation and was registered with the Charity Commission in April 2019. The rules and regulations of the CIO are set out in its Constitution, adopted by the Board of Trustees on 14 September 2019.

**b. Methods of appointment or election of Trustees**

The governing body of NASS is a Board of Trustees consisting of elected Trustees. Only members of NASS may be appointed as Trustees and the maximum number is twelve.

At every annual general meeting of the members of NASS, one third of the charity trustees shall retire from office. The charity trustees to retire by rotation shall be those who have been longest in office since their last appointment or reappointment. If any trustees were last appointed or reappointed on the same day those to retire shall (unless they otherwise agree among themselves) be determined by lot. The vacancies so arising may be filled by the decision of the members at the annual general meeting; any vacancies not filled at the annual general meeting may be filled by the charity trustees. Such persons shall retire at the conclusion of the next annual general meeting after the date of their appointment, and shall not be counted for the purpose of determining which of the charity trustees is to retire by rotation at that meeting.

The members or the charity trustees may at any time decide to appoint a new charity trustee, whether in place of a charity trustee who has retired or been removed in accordance with clause 15 (Retirement and removal of charity trustees), or as an additional charity trustee, provided that the limit specified on the number of charity trustees would not as a result be exceeded.

The Chair and Treasurer are approved by the Board and selected from among the trustee group. Their term of office as Chair and Treasurer is consistent with their term of office as a trustee. In advance of each AGM members of NASS are widely encouraged to nominate a fellow member as Trustee.

On appointment, new trustees are asked to spend a half day in the NASS central office for a briefing with the Chief Executive and staff to understand how the society works. Formal training is provided when required.

**c. Organisational structure and decision-making policies**

The Trustees meet quarterly to review matters of policy and to make appropriate judgements, directions and decisions on CIO issues. Trustees delegate authority on some matters to a Finance and General Purposes Committee consisting of the Chair, the Treasurer, up to three appointed Trustees and the Chief Executive and Head of Finance and Administration. This Committee meets four times per year. NASS also has a Medical Advisory Board which acts in advisory capacity only. Day to day management of NASS is undertaken by the Chief Executive and their staff. The trustees consider the Chief Executive and management team as comprising the key management personnel of the charity in charge of directing and running and operating the charity on a day to day basis.

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2024

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**d. Policies adopted for the induction and training of Trustees**

All new trustees receive an induction programme which includes the organisation's structure, scheme of delegation, NASS constitution, strategic plan, business plan and budget, trustee code of conduct and CC3, *The Essential Trustee*. Periodic training is provided (e.g. how to read management accounts).

**e. Pay policy for key management personnel**

Every three years we commission external HR consultants to undertake independent benchmarking of all roles. The last review was in November 2022. Our medium term aim is to pay at the midpoint. The pay of the Chief Executive is reviewed annually by the trustees.

**f. Related party relationships**

There are no related party relationships. NASS is a member of various umbrella groups, including the Arthritis and Musculoskeletal Alliance, The Axial SpA International Federation, National Voices, the National Council for Voluntary Organisations, the Disability Benefits Consortium and the Prescription Charge Coalition and The Alliance (Scotland). Our membership of these bodies does not impact on the operating policies adopted by the charity.

**g. Financial risk management**

Further to the risks identified above, in 2025 trustees will be asked to approve an updated risk management strategy.

**h. Trustees' indemnities**

NASS holds Trustee Indemnity insurance through Markel UK, providing cover with a limit of 1 million pounds against any wrongful act claim made against a Trustee.

**Plans for future periods**

In November 2024 the Board approved a strategy covering 2025 – 2029 with five long-term goals:

- ***To ensure that people with axial SpA are diagnosed within twelve months of symptom onset***
- ***To create and embed a gold standard approach to treatment and care, integrating patient and clinical perspectives***
- ***To support and empower people to live well with axial SpA and feel part of a supportive community***
- ***To influence, advocate and educate for axial SpA***
- ***To ensure that NASS is able to deliver its ambitious programmes***

**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2024**

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Our priority areas for 2025 are:

- Hold a Parliamentary event to launch two national improvement goals on the time to diagnosis, announce the recipients of the second round of Changemakers and launch the Faces of Axial SpA campaign
- Publish a time to diagnosis 'playbook' and launch a call for expressions of interest to develop a place-based intervention in 2025 – 2026
- Publish four scientific manuscripts
- Design and begin implementation of a research study to track the journeys to diagnosis of a sample of the 36,000 people who have completed the symptom checker
- Continue to recruit to the time to diagnosis audit
- Support the rollout of the PRIMIS pop-up tool.
- Complete cohorts three and four of Aspiring to Excellence
- Design and deliver a consensus development process to develop a set of proposed statements that describe a gold standard approach to treatment and care, and run a consultation process on the draft standard
- Publish a gold standard that covers the treatment pathway.
- Extend our self-management work through three projects and build an academic partnership to strengthen our evaluation approach and data
- Sustain our Helpline and Information Service at current levels
- Grow our membership by 6%, improve the members area of the website and offer more exclusive member webinars
- Support NASS branches including information sharing across the network.
- Support primary care education, continue to run a peer to peer network and deliver education sessions to a range of HCPs
- Consider creating an alumni programme for HCPs involved our work
- Support the work of the Wales MSK Strategic Network
- Deliver a programme of parliamentary influencing in England on diagnosis times and the wider issues around MSK programmes
- Make preparations for the 50th anniversary of NASS in 2026.
- Strengthen fundraising capability and capacity by investing in the Dataro machine learning fundraising software and recruiting a digital fundraising marketeer
- Pilot work to identify the growth potential in corporate fundraising
- Pilot a corporate membership scheme
- Undertake a governance review at Board level.

**Statement of Trustees' responsibilities**

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

The law applicable to charities in England & Wales and Scotland requires the Trustees to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the Charity and of its incoming resources and application of resources, including its income and expenditure, for that period. In preparing these financial statements, the Trustees are required to:

- select suitable accounting policies and then apply them consistently
- observe the methods and principles of the Charities SORP (FRS 102)
- make judgments and accounting estimates that are reasonable and prudent
- state whether applicable UK Accounting Standards (FRS 102) have been followed, subject to any material departures disclosed and explained in the financial statements
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the Charity will continue in business.

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2024

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The Trustees are responsible for keeping adequate accounting records that are sufficient to show and explain the Charity's transactions and disclose with reasonable accuracy at any time the financial position of the Charity and enable them to ensure that the financial statements comply with the Charities Act 2011, the Charity (Accounts and Reports) Regulations 2008, the Charities and Trustee Investment (Scotland) Act 2005, the Charities Accounts (Scotland) Regulations 2006 (as amended) and the provisions of the Memorandum of Association. They are also responsible for safeguarding the assets of the Charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

**Disclosure of information to auditors**

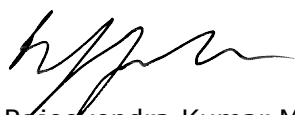
Each of the persons who are Trustees at the time when this Trustees' report is approved has confirmed that:

- so far as that Trustee is aware, there is no relevant audit information of which the charity's auditors are unaware, and
- that Trustee has taken all the steps that ought to have been taken as a Trustee in order to be aware of any relevant audit information and to establish that the charity's auditors are aware of that information.

**Auditors**

The auditors, BKL Audit LLP, have indicated their willingness to continue in office. The designated Trustees will propose a motion reappointing the auditors at a meeting of the Trustees.

Approved by order of the members of the board of Trustees and signed on their behalf by:



Rajeevendra Kumar Mahapatra

Date: 18/07/2025

INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF  
NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY

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## Opinion

We have audited the financial statements of National Axial Spondyloarthritis Society (the 'Charity') for the year ended 31 December 2024 which comprise the Statement of financial activities, the Balance sheet, the Statement of cash flows and the related notes, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the Charity's affairs as at 31 December 2024 and of its incoming resources and application of resources, including its income and expenditure for the year then ended
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice, and
- have been prepared in accordance with 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) and in other respects the requirements of the Charities Act 2011.

## Basis for opinion

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

## Conclusions relating to going concern

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

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

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

**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF  
NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY (CONTINUED)**

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**Other information**

The other information comprises the information included in the Annual report other than the financial statements and our Auditors' report thereon. The Trustees are responsible for the other information contained within the Annual report. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon. Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the course of the audit, or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

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

We have nothing to report in respect of the following matters where the Charities (Accounts and Reports) Regulations 2008 and the Charities Accounts (Scotland) Regulations 2006 (as amended) require us to report to you if in our opinion:

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

**Responsibilities of trustees**

As explained more fully in the Trustees' responsibilities statement, the Trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for such internal control as the Trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

**Auditors' responsibilities for the audit of the financial statements**

We have been appointed as auditor under section 144 of the Charities Act 2011 and section 44(1)(c) of the Charities and Trustee Investment (Scotland) Act 2005 and under the Companies Act 2006 and report in accordance with the Acts and relevant regulations made or having effect thereunder.

**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF  
NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY (CONTINUED)**

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

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud is detailed below:

- Enquiring of management around actual and potential litigation and claims
- Reviewing board meeting minutes of meetings of those charged with governance
- Reviewing financial statement disclosures and testing to supporting documentation to assess compliance with applicable laws and regulations
- Performing audit work over the risk of management override of controls, including testing of journal entries and other adjustments for appropriateness, evaluating the business rationale of significant transactions outside the normal course of business and reviewing accounting estimates for bias.

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

As part of an audit in accordance with ISAs (UK), we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion of the effectiveness of the charity's internal control
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the Trustees
- Conclude on the appropriateness of the Trustees' use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the charity's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our Auditors' Report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our Auditors' Report. However, future events or conditions may cause the charity to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation

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**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

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**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF  
NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY (CONTINUED)**

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We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at: [www.frc.org.uk/auditorsresponsibilities](http://www.frc.org.uk/auditorsresponsibilities). This description forms part of our Auditors' report.

**Use of our report**

This report is made solely to the Charity's trustees, as a body, in accordance with Part 4 of the Charities (Accounts and Reports) Regulations 2008 and in accordance with 10 of the Charities Accounts (Scotland) Regulations 2006. Our audit work has been undertaken so that we might state to the Charity's trustees those matters we are required to state to them in an Auditors' report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the Charity and its trustees, as a body, for our audit work, for this report, or for the opinions we have formed.

*BKL Audit LLP*

**BKL Audit LLP**

35 Ballards Lane

London

N3 1XW

Date:

BKL Audit LLP are eligible to act as auditors in terms of section 1212 of the Companies Act 2006.

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**STATEMENT OF FINANCIAL ACTIVITIES  
FOR THE YEAR ENDED 31 DECEMBER 2024**

	Note	Restricted funds - Branches 2024 £	Restricted funds - All other 2024 £	Unrestricted funds 2024 £	Total funds 2024 £	Total funds 2023 £
<b>Income from:</b>						
Donations and legacies	3	166,681	356,992	350,642	874,315	868,724
Other trading activities	4	12,165	-	125,170	137,335	99,270
Investments	5	-	-	41,354	41,354	35,625
Other income	6	794	-	-	794	24,033
<b>Total income</b>		<b>179,640</b>	<b>356,992</b>	<b>517,166</b>	<b>1,053,798</b>	<b>1,027,652</b>
<b>Expenditure on:</b>						
Raising funds	7	315	-	150,867	151,182	123,807
Charitable activities	9	187,752	341,021	410,541	939,314	1,034,393
<b>Total expenditure</b>		<b>188,067</b>	<b>341,021</b>	<b>561,408</b>	<b>1,090,496</b>	<b>1,158,200</b>
<b>Net (expenditure)/income before net losses on investments</b>		<b>(8,427)</b>	<b>15,971</b>	<b>(44,242)</b>	<b>(36,698)</b>	<b>(130,548)</b>
Net losses on investments		-	-	-	-	(10,432)
<b>Net (expenditure)/income</b>		<b>(8,427)</b>	<b>15,971</b>	<b>(44,242)</b>	<b>(36,698)</b>	<b>(140,980)</b>
Transfers between funds	19	(2,890)	99	2,791	-	-
<b>Net movement in funds</b>		<b>(11,317)</b>	<b>16,070</b>	<b>(41,451)</b>	<b>(36,698)</b>	<b>(140,980)</b>
<b>Reconciliation of funds:</b>						
Total funds brought forward		243,190	62,762	732,521	1,038,473	1,179,453
Net movement in funds		(11,317)	16,070	(41,451)	(36,698)	(140,980)
<b>Total funds carried forward</b>		<b>231,873</b>	<b>78,832</b>	<b>691,070</b>	<b>1,001,775</b>	<b>1,038,473</b>

The Statement of Financial Activities includes all gains and losses recognised in the year.

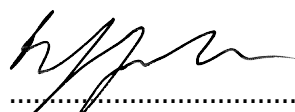
The notes on pages 27 to 48 form part of these financial statements.

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**BALANCE SHEET  
AS AT 31 DECEMBER 2024**

	Note	2024 £	2023 £
<b>Fixed assets</b>			
Investment property	15	655,000	655,000
		<u>655,000</u>	<u>655,000</u>
<b>Current assets</b>			
Debtors	16	39,832	38,565
Cash at bank and in hand		640,653	802,951
		<u>680,485</u>	<u>841,516</u>
Creditors: amounts falling due within one year	17	(66,265)	(162,614)
<b>Net current assets</b>		<u>614,220</u>	<u>678,902</u>
<b>Total assets less current liabilities</b>		<u>1,269,220</u>	<u>1,333,902</u>
Creditors: amounts falling due after more than one year	18	(267,445)	(295,429)
<b>Total net assets</b>		<u><u>1,001,775</u></u>	<u><u>1,038,473</u></u>
<b>Charity funds</b>			
Restricted funds - Branches	19	231,873	243,190
Restricted funds - All other	19	78,832	62,762
Unrestricted funds	19	691,070	732,521
<b>Total funds</b>		<u><u>1,001,775</u></u>	<u><u>1,038,473</u></u>

The financial statements were approved and authorised for issue by the Trustees and signed on their behalf by:



.....  
**Rajeevendra Kumar Mahapatra**  
(Chair of Trustees)  
Date: 18/07/2025

The notes on pages 27 to 48 form part of these financial statements.

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**STATEMENT OF CASH FLOWS  
FOR THE YEAR ENDED 31 DECEMBER 2024**

	<b>2024</b>	<b>2023</b>
	<b>£</b>	<b>£</b>
<b>Cash flows from operating activities</b>		
Net cash used in operating activities	<b>(203,652)</b>	99,248
	<hr/>	<hr/>
<b>Cash flows from investing activities</b>		
Dividends, interests and rents from investments	<b>41,354</b>	35,625
Proceeds from sale of investments	-	11,568
	<hr/>	<hr/>
<b>Net cash provided by investing activities</b>	<b>41,354</b>	<b>47,193</b>
	<hr/>	<hr/>
<b>Change in cash and cash equivalents in the year</b>	<b>(162,298)</b>	<b>146,441</b>
Cash and cash equivalents at the beginning of the year	<b>802,951</b>	656,510
	<hr/>	<hr/>
<b>Cash and cash equivalents at the end of the year</b>	<b>640,653</b>	<b>802,951</b>
	<hr/> <hr/>	<hr/> <hr/>

The notes on pages 27 to 48 form part of these financial statements

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2024**

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**1. General information**

The National Axial Spondyloarthritis Society is a CIO incorporated under articles of association dated 29th April 2019 in England & Wales with charity registration number 1183175. It was subsequently registered with the Scottish Charity Regulator on 19th November 2019 with Scottish charity registration number SC049746.

**2. Accounting policies**

**2.1 Basis of preparation of financial statements**

The financial statements have been prepared in accordance with the Charities SORP (FRS 102) - Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Charities Act 2011, the Charities and Trustee Investment (Scotland) Act 2005 and the Charities Accounts (Scotland) Regulations 2006 (as amended).

National Axial Spondyloarthritis Society meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy.

**2.2 Income**

All income is recognised once the Charity has entitlement to the income, it is probable that the income will be received and the amount of income receivable can be measured reliably.

The recognition of income from legacies is dependent on establishing entitlement, the probability of receipt and the ability to estimate with sufficient accuracy the amount receivable. Evidence of entitlement to a legacy exists when the Charity has sufficient evidence that a gift has been left to them (through knowledge of the existence of a valid will and the death of the benefactor) and the executor is satisfied that the property in question will not be required to satisfy claims in the estate. Receipt of a legacy must be recognised when it is probable that it will be received and the fair value of the amount receivable, which will generally be the expected cash amount to be distributed to the Charity, can be reliably measured.

Grants are included in the Statement of financial activities on a receivable basis. The balance of income received for specific purposes but not expended during the period is shown in the relevant funds on the Balance sheet. Where income is received in advance of entitlement of receipt, its recognition is deferred and included in creditors as deferred income. Where entitlement occurs before income is received, the income is accrued.

Income tax recoverable in relation to investment income is recognised at the time the investment income is receivable.

Other income is recognised in the period in which it is receivable and to the extent the goods have been provided or on completion of the service.

NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2024

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**2. Accounting policies (continued)**

**2.3 Expenditure**

Expenditure is recognised once there is a legal or constructive obligation to transfer economic benefit to a third party, it is probable that a transfer of economic benefits will be required in settlement and the amount of the obligation can be measured reliably. Expenditure is classified by activity. The costs of each activity are made up of the total of direct costs and shared costs, including support costs involved in undertaking each activity. Direct costs attributable to a single activity are allocated directly to that activity. Shared costs which contribute to more than one activity and support costs which are not attributable to a single activity are apportioned between those activities on a basis consistent with the use of resources. Central staff costs are allocated on the basis of time spent, and depreciation charges allocated on the portion of the asset's use.

Expenditure on raising funds includes all expenditure incurred by the Charity to raise funds for its charitable purposes and includes costs of all fundraising activities events and non-charitable trading.

Expenditure on charitable activities is incurred on directly undertaking the activities which further the Charity's objectives, as well as any associated support costs.

Grants payable are charged in the year when the offer is made except in those cases where the offer is conditional, such grants being recognised as expenditure when the conditions attaching are fulfilled. Grants offered subject to conditions which have not been met at the year end are noted as a commitment, but not accrued as expenditure.

All expenditure is inclusive of irrecoverable VAT.

**2.4 Interest receivable**

Interest on funds held on deposit is included when receivable and the amount can be measured reliably by the Charity; this is normally upon notification of the interest paid or payable by the institution with whom the funds are deposited.

**2.5 Debtors**

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

**2.6 Cash at bank and in hand**

Cash at bank and in hand includes cash and short-term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2024**

**2. Accounting policies (continued)**

**2.7 Liabilities and provisions**

Liabilities are recognised when there is an obligation at the Balance sheet date as a result of a past event, it is probable that a transfer of economic benefit will be required in settlement, and the amount of the settlement can be estimated reliably.

Liabilities are recognised at the amount that the Charity anticipates it will pay to settle the debt or the amount it has received as advanced payments for the goods or services it must provide.

Provisions are measured at the best estimate of the amounts required to settle the obligation. Where the effect of the time value of money is material, the provision is based on the present value of those amounts, discounted at the pre-tax discount rate that reflects the risks specific to the liability. The unwinding of the discount is recognised in the Statement of financial activities as a finance cost.

**2.8 Financial instruments**

The Charity only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value with the exception of bank loans which are subsequently measured at amortised cost using the effective interest method.

**2.9 Fund accounting**

General funds are unrestricted funds which are available for use at the discretion of the Trustees in furtherance of the general objectives of the Charity and which have not been designated for other purposes.

Restricted funds are funds which are to be used in accordance with specific restrictions imposed by donors or which have been raised by the Charity for particular purposes. The costs of raising and administering such funds are charged against the specific fund. The aim and use of each restricted fund is set out in the notes to the financial statements. Due to the significant nature of branches on the accounts, the Restricted branch fund is displayed separately throughout the accounts.

Investment income, gains and losses are allocated to the appropriate fund.

**3. Income from donations and legacies**

	<b>Restricted Funds - Branches 2024 £</b>	<b>Restricted funds - All other 2024 £</b>	<b>Unrestricted funds 2024 £</b>	<b>Total funds 2024 £</b>
Donations	6,016	48,992	139,920	<b>194,928</b>
Legacies	-	-	102,838	<b>102,838</b>
Charity grants	-	308,000	24,000	<b>332,000</b>
Subscriptions	160,665	-	83,884	<b>244,549</b>
	<u>166,681</u>	<u>356,992</u>	<u>350,642</u>	<u><b>874,315</b></u>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2024**

**3. Income from donations and legacies (continued)**

	<i>Restricted Funds - Branches 2023 £</i>	<i>Restricted funds - All other 2023 £</i>	<i>Unrestricted funds 2023 £</i>	<i>Total funds 2023 £</i>
Donations	12,393	9,500	137,086	158,979
Legacies	1,000	100	78,343	79,443
Charity grants	-	356,456	63,288	419,744
Subscriptions	129,551	-	81,007	210,558
	<u>142,944</u>	<u>366,056</u>	<u>359,724</u>	<u>868,724</u>

Charity grants includes Pharmaceutical Industry grants of £334,000 (2023: £419,744).

**4. Income from other trading activities**

**Income from fundraising events**

	<b>Restricted Funds - Branches 2024 £</b>	<b>Unrestricted funds 2024 £</b>	<b>Total funds 2024 £</b>
Fundraising events	12,165	125,170	<b>137,335</b>

	<i>Restricted Funds - Branches 2023 £</i>	<i>Unrestricted funds 2023 £</i>	<i>Total funds 2023 £</i>
Fundraising events	9,767	89,503	99,270

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2024**

**5. Investment income**

	<b>Unrestricted funds 2024 £</b>	<b>Total funds 2024 £</b>
Rental income	34,450	<b>34,450</b>
Bank Interest	6,904	<b>6,904</b>
	<b>41,354</b>	<b>41,354</b>
	<b>41,354</b>	<b>41,354</b>

	<i>Restricted funds - Branches 2023 £</i>	<i>Unrestricted funds 2023 £</i>	<i>Total funds 2023 £</i>
Rental income	-	31,985	31,985
Bank Interest	156	3,484	3,640
	<b>156</b>	<b>35,469</b>	<b>35,625</b>
	<b>156</b>	<b>35,469</b>	<b>35,625</b>

**6. Other incoming resources**

	<b>Restricted Funds - Branches 2024 £</b>	<b>Total funds 2024 £</b>
Other Income	794	<b>794</b>
	<b>794</b>	<b>794</b>

	<i>Restricted Funds - Branches 2023 £</i>	<i>Unrestricted funds 2023 £</i>	<i>Total funds 2023 £</i>
Other Income	1,532	22,501	24,033
	<b>1,532</b>	<b>22,501</b>	<b>24,033</b>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2024**

**7. Expenditure on raising funds**

**Fundraising trading expenses**

	<b>Restricted funds - Branches 2024 £</b>	<b>Unrestricted funds 2024 £</b>	<b>Total funds 2024 £</b>
Expenditure on raising donations and legacies	-	4,024	<b>4,024</b>
Staging fundraising events	315	8,606	<b>8,921</b>
Fundraising for membership	-	956	<b>956</b>
Staff remuneration	-	71,460	<b>71,460</b>
General fundraising expenditure	-	38,726	<b>38,726</b>
Allocated centrally incurred fundraising and governance costs	-	27,095	<b>27,095</b>
	<u>315</u>	<u>150,867</u>	<u><b>151,182</b></u>

	<i>Restricted funds - Branches 2023 £</i>	<i>Unrestricted funds 2023 £</i>	<i>Total funds 2023 £</i>
Expenditure on raising donations and legacies	-	7,444	7,444
Staging fundraising events	718	2,235	2,953
Fundraising for membership	-	936	936
Staff remuneration	-	66,281	66,281
General fundraising expenditure	-	21,964	21,964
Allocated centrally incurred fundraising and governance costs	-	24,229	24,229
	<u>718</u>	<u>123,089</u>	<u>123,807</u>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2024**

**8. Analysis of grants**

	<b>Grants to Institutions 2024 £</b>	<b>Grants to Individuals 2024 £</b>	<b>Total funds 2024 £</b>
Grants, Empower, Inform and Inspire	-	250	<b>250</b>
	<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/>
	<i>Grants to Institutions 2023 £</i>	<i>Grants to Individuals 2023 £</i>	<i>Total funds 2023 £</i>
Grants, A Connected and Supportive Community	1,003	179	1,182
Grants, Empower, Inform and Inspire	-	300	300
	<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/>
	1,003	479	1,482

**9. Analysis of expenditure on charitable activities**

**Summary by fund type**

	<b>Restricted funds - Branches 2024 £</b>	<b>Restricted funds - All other 2024 £</b>	<b>Unrestricted funds 2024 £</b>	<b>Total 2024 £</b>
Every Patient Every Time	-	293,178	158,474	<b>451,652</b>
A Connected and Supportive Community	187,752	-	56,643	<b>244,395</b>
Empower, Inform and Inspire	-	47,843	195,424	<b>243,267</b>
	<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/>
	187,752	341,021	410,541	<b>939,314</b>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2024**

**9. Analysis of expenditure on charitable activities (continued)**

**Summary by fund type (continued)**

	<i>Restricted Funds - Branches 2023 £</i>	<i>Restricted funds - All other 2023 £</i>	<i>Unrestricted funds 2023 £</i>	<i>Total 2023 £</i>
Every Patient Every Time	-	345,248	189,381	534,629
A Connected and Supportive Community	151,884	64,676	63,291	279,851
Empower, Inform and Inspire	-	45,590	174,323	219,913
	<u>151,884</u>	<u>455,514</u>	<u>426,995</u>	<u>1,034,393</u>

**10. Analysis of expenditure by activities**

	<b>Activities undertaken directly 2024 £</b>	<b>Grant funding of activities 2024 £</b>	<b>Support costs 2024 £</b>	<b>Total funds 2024 £</b>
Every Patient Every Time	351,814	-	99,838	<b>451,652</b>
A Connected and Supportive Community	229,288	-	15,107	<b>244,395</b>
Empower, Inform and Inspire	181,724	250	61,293	<b>243,267</b>
	<u>762,826</u>	<u>250</u>	<u>176,238</u>	<u><b>939,314</b></u>

	<i>Activities undertaken directly 2023 £</i>	<i>Grant funding of activities 2023 £</i>	<i>Support costs 2023 £</i>	<i>Total funds 2023 £</i>
Every Patient Every Time	445,170	-	89,459	534,629
A Connected and Supportive Community	263,757	1,182	14,912	279,851
Empower, Inform and Inspire	161,836	300	57,777	219,913
	<u>870,763</u>	<u>1,482</u>	<u>162,148</u>	<u>1,034,393</u>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2024**

**10. Analysis of expenditure by activities (continued)**

**Analysis of direct costs**

	<b>Every Patient Every Time 2024 £</b>	<b>A Connected and Supportive Community 2024 £</b>	<b>Empower, Inform and Inspire 2024 £</b>	<b>Total funds 2024 £</b>
Staff costs	262,810	33,780	164,094	<b>460,684</b>
Other staff costs	7,387	978	420	<b>8,785</b>
Courier & distribution of materials	2,518	4,155	1,808	<b>8,481</b>
Literature, brochures and information	4,738	4,184	14,356	<b>23,278</b>
Promotion of activities and materials	5,957	-	562	<b>6,519</b>
Organising professional events	23,503	-	484	<b>23,987</b>
External technical providers	28,721	-	-	<b>28,721</b>
Attending professional events	16,180	-	-	<b>16,180</b>
Branch network expenditure	-	186,191	-	<b>186,191</b>
	<u>351,814</u>	<u>229,288</u>	<u>181,724</u>	<u><b>762,826</b></u>

	<i>Every Patient Every Time 2023 £</i>	<i>A Connected and Supportive Community 2023 £</i>	<i>Empower, Inform and Inspire 2023 £</i>	<i>Total funds 2023 £</i>
Staff costs	235,262	40,892	152,275	428,429
Other staff costs	10,045	1,264	804	12,113
Courier & distribution of materials	1,835	3,791	2,841	8,467
Literature, brochures & information	7,494	4,500	4,590	16,584
Promotion of activities and materials	2,348	54,797	808	57,953
Organising professional events	99,275	6,219	343	105,837
External technical providers	87,237	2,391	175	89,803
Attending professional events	1,674	-	-	1,674
Branch network expenditure	-	149,903	-	149,903
	<u>445,170</u>	<u>263,757</u>	<u>161,836</u>	<u>870,763</u>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2024**

**10. Analysis of expenditure by activities (continued)**

**Analysis of support costs**

	<b>Every Patient Every Time 2024 £</b>	<b>A Connected and Supportive Community 2024 £</b>	<b>Empower, Inform and Inspire 2024 £</b>	<b>Total funds 2024 £</b>
Staff costs	35,738	4,594	22,314	<b>62,646</b>
Other staff costs	5,055	1,385	2,231	<b>8,671</b>
Premises costs	13,474	1,733	8,413	<b>23,620</b>
Travel & accomodation expenses	1,389	178	867	<b>2,434</b>
IT and Communications	12,124	1,558	7,570	<b>21,252</b>
Office costs	2,179	280	1,360	<b>3,819</b>
Insurance, legal & professional	10,043	1,291	6,270	<b>17,604</b>
Other support costs	545	1,631	341	<b>2,517</b>
Bank charges & interest	12,998	1,672	8,116	<b>22,786</b>
Governance costs	6,293	785	3,811	<b>10,889</b>
	<u>99,838</u>	<u>15,107</u>	<u>61,293</u>	<u><b>176,238</b></u>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2024**

**10. Analysis of expenditure by activities (continued)**

**Analysis of support costs (continued)**

	<i>Every Patient Every Time</i> 2023 £	<i>A Connected and Supportive Community</i> 2023 £	<i>Empower, Inform and Inspire</i> 2023 £	<i>Total funds</i> 2023 £
Staff costs	38,666	6,444	24,972	70,082
Depreciation	159	27	103	289
Other staff costs	1,996	333	1,290	3,619
Premises costs	7,239	1,206	4,674	13,119
Travel & accommodation expenses	796	133	514	1,443
IT and communications	12,425	2,071	8,025	22,521
Office costs	2,409	402	1,556	4,367
Insurance, legal & professional	11,910	1,985	7,692	21,587
Other support costs	669	112	432	1,213
Bank charges & interest	7,427	1,238	4,797	13,462
Governance costs	5,763	961	3,722	10,446
	<u>89,459</u>	<u>14,912</u>	<u>57,777</u>	<u>162,148</u>

**11. Auditors' remuneration**

	<b>2024</b> £	2023 £
Fees payable to the Charity's auditor for the audit of the Charity's annual accounts	<b>10,500</b>	9,000
Fees payable to the Charity's auditor in respect of: All non-audit services not included above	<b>3,500</b>	3,000

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2024**

**12. Staff costs**

	<b>2024</b>	<i>2023</i>
	<b>£</b>	<b>£</b>
Wages and salaries	<b>432,110</b>	<i>409,135</i>
Social security costs	<b>42,183</b>	<i>39,509</i>
Contribution to defined contribution pension schemes	<b>58,754</b>	<i>60,339</i>
	<b>533,047</b>	<i>508,983</i>

The average number of persons employed by the Charity during the year was as follows:

	<b>2024</b>	<i>2023</i>
	<b>No.</b>	<b>No.</b>
Employees	<b>12</b>	<i>12</i>

The number of employees whose employee benefits (excluding employer pension costs) exceeded £60,000 was:

	<b>2024</b>	<i>2023</i>
	<b>No.</b>	<b>No.</b>
In the band £100,001 - £110,000	<b>1</b>	<i>1</i>

Key management personnel consists of the CEO, Head of Information and Support Services, Head of Policy and Health Services and the Head of Finance and Administration. The total employee remuneration and benefits of the key management personnel of the Charity were £288,381 (2023: £259,185).

**13. Trustees' remuneration and expenses**

During the year, no Trustees received any remuneration or other benefits (2023 - £NIL).

During the year ended 31 December 2024, expenses totalling £58.95 were reimbursed or paid directly to 1 Trustee (2023 - £103.99 to 1 Trustee). Expenses in both years related to travel expenses.

NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2024

14. Tangible fixed assets

	Office equipment £
<b>Cost or valuation</b>	
At 1 January 2024	18,073
At 31 December 2024	<u>18,073</u>
<b>Depreciation</b>	
At 1 January 2024	18,073
At 31 December 2024	<u>18,073</u>
<b>Net book value</b>	
At 31 December 2024	<u><u>-</u></u>
At 31 December 2023	<u><u>-</u></u>

15. Investment property

	Freehold investment property £
<b>Valuation</b>	
At 1 January 2024	655,000
At 31 December 2024	<u><u>655,000</u></u>

Investment property comprises residential flats let. The fair value of the investment property has been arrived at on the basis of a valuation carried out by an independent valuer with reference to market evidence of transaction prices for similar properties and a formal valuation made post the year end. The valuation was made on an open market value basis.

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2024**

**16. Debtors**

	2024 £	2023 £
<b>Due within one year</b>		
Trade debtors	13,404	21,057
Other debtors	13,129	6,410
Prepayments and accrued income	13,299	11,098
	<b>39,832</b>	<b>38,565</b>
	<b>39,832</b>	<b>38,565</b>

**17. Creditors: Amounts falling due within one year**

	2024 £	2023 £
Bank loans	27,950	3,532
Trade creditors	19,876	97,757
Other taxation and social security	4,659	5,557
Accruals and deferred income	13,780	55,768
	<b>66,265</b>	<b>162,614</b>
	<b>66,265</b>	<b>162,614</b>

**18. Creditors: Amounts falling due after more than one year**

	2024 £	2023 £
Bank loans	267,445	295,429
	<b>267,445</b>	<b>295,429</b>

**19. Statement of funds**

**Statement of funds - current year**

	Balance at 1 January 2024 £	Income £	Expenditure £	Transfers in/out £	Balance at 31 December 2024 £
<b>Unrestricted funds</b>					
General Funds - all funds	732,521	517,166	(561,408)	2,791	691,070
	<b>732,521</b>	<b>517,166</b>	<b>(561,408)</b>	<b>2,791</b>	<b>691,070</b>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2024**

**19. Statement of funds (continued)**

**Restricted Funds - Branches**

Branches	243,190	179,640	(188,067)	(2,890)	231,873
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	Balance at 1 January 2024 £	Income £	Expenditure £	Transfers in/out £	Balance at 31 December 2024 £
<b>Restricted funds - All other</b>					
Branch Development Fund	10,740	-	(842)	111	10,009
Fergus Rogers Fund	1,752	-	(250)	-	1,502
Aspiring to Excellence	8,611	96,000	(96,670)	-	7,941
Cimzia Select Programme	150	-	-	(60)	90
Ophthalmology / Gastroenterology project	18	-	-	-	18
Self Management Programme	18,072	48,992	(46,750)	-	20,314
Gold Standard Delay to Diagnosis	13,271	212,000	(188,440)	-	36,831
APPG	688	-	(736)	48	-
Round Table	7,110	-	(7,110)	-	-
Health Inequalities	2,350	-	(223)	-	2,127
	62,762	356,992	(341,021)	99	78,832
<b>Total of funds</b>	<b>1,038,473</b>	<b>1,053,798</b>	<b>(1,090,496)</b>	<b>-</b>	<b>1,001,775</b>

NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2024

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**19. Statement of funds (continued)**

Branch Network Funds

The Branch Network Funds support the local activities of NASS Branches, which offer regular physiotherapy or hydrotherapy sessions led by qualified instructors. Each Branch raises its funds and decides how to utilise them for specific activities. In the event of a branch ceasing operations, any remaining funds will be reclassified as unrestricted funds. A portion of these funds may be directed into the Branch Development Fund, to support our branches' continuous growth and development.

Branch Development Fund

The Branch Development Fund is created through donations from local NASS Branches. It aims to ensure the establishment and promotion of all Branches, and it provides start-up grants to new Branches and funds for ordering promotional materials such as posters and leaflets.

Fergus Rogers Fund

The Fergus Rogers Fund was established in memory of Fergus Rogers to assist people with axial SpA in purchasing specific items that can improve their quality of life. It is used to provide support for those in financial need to obtain essential items recommended by their healthcare professionals.

Aspiring to Excellence Fund

The Aspiring to Excellence Fund supports a multi-year quality improvement program to transform healthcare for people with axial SpA. The fund facilitates strategic partnerships between NASS, BRITSpA, and the NHS transformation unit, bringing together rheumatology teams and service improvement experts. It is utilised for various activities, including recruitment to the program, learning sessions, online coaching, podcasts, and the development of an audit tool to track the time to diagnosis.

Ophthalmology / Gastroenterology Project Fund

The Ophthalmology/Gastroenterology Project Fund supports the Gold Standard time to diagnosis program and its efforts to improve the identification and referral of suspected axial SpA in Ophthalmology and Gastroenterology. It finances the involvement of clinical associates from both specialities in gathering intelligence and understanding the current landscape. Additionally, the fund covers the development of educational materials, audits, posters, surveys, and policy reports.

The Self-Management Programme

The Self-Management Fund covers the costs of NASS's Supported Self-Management Program, which equips people with axial SpA with the skills and tools to manage their symptoms confidently. It supports various aspects of the program, including online resources, self-management sessions, and regional events held in conjunction with local NHS rheumatology departments.

Delay to Diagnosis - Gold Standard Fund

The Delay to Diagnosis - Gold Standard Fund is utilised to implement The Gold Standard Time to Diagnosis program for axial SpA. It supports various activities such as producing campaign impact reports, conducting economic analysis, delivering landscape reports, reviewing the use of MRI in diagnosis, and running public awareness campaigns.

NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2024

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19. Statement of funds (continued)

APPG (All Party Parliamentary Group) for Axial Spondyloarthritis Fund

The APPG Fund is established to oversee the implementation of the National Institute for Health and Care Excellence (NICE) guidelines for Spondyloarthritis and its Quality Standard. It supports the functioning of the parliamentary group. It is used to conduct meetings, national inquiries, and parliamentary receptions to engage with MPs on axial SpA NHS services.

NASS Voices

The NASS Voices Fund supported regional events to facilitate interactions between local people with axial SpA and their rheumatology healthcare professionals. It helped cover the costs of venue payments and other expenses for organising these events. This fund was closed in 2023.

Round Table

The Round Table Fund supported wider policy work and national discussions on axial SpA in the UK. Although there was no activity in 2022, the fund was carried forward to continue its purpose in 2023. The Round Table meeting took place in 2024 and the fund has since been closed.

Health Inequalities Fund

The Health Inequalities Fund finances a qualitative study focusing on people's experiences with axial SpA through the lens of sex, gender, and gender identity. It covers expenses related to recruitment for focus groups and data collection.

Cimzia

The fund's purpose is to provide one-year free NASS membership for eligible patients living with axial spondyloarthritis.

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2024**

**19. Statement of funds (continued)**

**Statement of funds - prior year**

	<i>Balance at 1 January 2023 £</i>	<i>Income £</i>	<i>Expenditure £</i>	<i>Transfers in/out £</i>	<i>Gains/ (Losses) £</i>	<i>Balance at 31 December 2023 £</i>
<b>Unrestricted funds</b>						
General Funds - all funds	770,477	507,197	(550,084)	15,363	(10,432)	732,521
<b>Restricted Funds - Branches</b>						
Branches	265,269	154,399	(152,602)	(23,876)	-	243,190

	<i>Balance at 1 January 2023 £</i>	<i>Income £</i>	<i>Expenditure £</i>	<i>Transfers in/out £</i>	<i>Gains/ (Losses) £</i>	<i>Balance at 31 December 2023 £</i>
<b>Restricted funds - All other</b>						
Branch Development Fund	7,992	-	(1,335)	4,083	-	10,740
Fergus Rogers Fund	2,052	-	(300)	-	-	1,752
Aspiring to Excellence	42,234	121,000	(154,623)	-	-	8,611
Cimzia Select Programme	150	-	-	-	-	150
Ophthalmology / Gastroenterology project	855	-	(837)	-	-	18
Self Management Programme	21,067	40,962	(43,957)	-	-	18,072
Gold Standard Delay to Diagnosis	35,316	177,694	(199,739)	-	-	13,271
APPG	517	26,400	(26,229)	-	-	688
NASS Voices	3,493	-	(9,113)	5,620	-	-

NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY

NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2024

19. Statement of funds (continued)

Statement of funds - prior year (continued)

	<i>Balance at 1 January 2023 £</i>	<i>Income £</i>	<i>Expenditure £</i>	<i>Transfers in/out £</i>	<i>Gains/ (Losses) £</i>	<i>Balance at 31 December 2023 £</i>
Round Table	11,900	-	(3,600)	(1,190)	-	7,110
Health Inequalities	18,131	-	(15,781)	-	-	2,350
	<u>143,707</u>	<u>366,056</u>	<u>(455,514)</u>	<u>8,513</u>	<u>-</u>	<u>62,762</u>
<b>Total of funds</b>	<u><u>1,179,453</u></u>	<u><u>1,027,652</u></u>	<u><u>(1,158,200)</u></u>	<u><u>-</u></u>	<u><u>(10,432)</u></u>	<u><u>1,038,473</u></u>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2024**

**20. Summary of funds**

**Summary of funds - current year**

	Balance at 1 January 2024 £	Income £	Expenditure £	Transfers in/out £	Balance at 31 December 2024 £
General funds	732,521	517,166	(561,408)	2,791	691,070
Restricted funds-Branches	243,190	179,640	(188,067)	(2,890)	231,873
Restricted funds	62,762	356,992	(341,021)	99	78,832
	<u>1,038,473</u>	<u>1,053,798</u>	<u>(1,090,496)</u>	<u>-</u>	<u>1,001,775</u>

**Summary of funds - prior year**

	<i>Balance at 1 January 2023 £</i>	<i>Income £</i>	<i>Expenditure £</i>	<i>Transfers in/out £</i>	<i>Gains/ (Losses) £</i>	<i>Balance at 31 December 2023 £</i>
General funds	770,477	507,197	(550,084)	15,363	(10,432)	732,521
Restricted Funds- Branches	265,269	154,399	(152,602)	(23,876)	-	243,190
Restricted funds	143,707	366,056	(455,514)	8,513	-	62,762
	<u>1,179,453</u>	<u>1,027,652</u>	<u>(1,158,200)</u>	<u>-</u>	<u>(10,432)</u>	<u>1,038,473</u>

**21. Analysis of net assets between funds**

**Analysis of net assets between funds - current period**

	Restricted Funds - Branches 2024 £	Restricted funds - All other 2024 £	Unrestricted funds 2024 £	Total funds 2024 £
Investment property	-	-	655,000	655,000
Current assets	231,873	78,832	369,780	680,485
Creditors due within one year	-	-	(66,265)	(66,265)
Creditors due in more than one year	-	-	(267,445)	(267,445)
<b>Total</b>	<u>231,873</u>	<u>78,832</u>	<u>691,070</u>	<u>1,001,775</u>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2024**

**21. Analysis of net assets between funds (continued)**

**Analysis of net assets between funds - prior period**

	<i>Restricted funds - Branches 2023 £</i>	<i>Restricted funds - All other 2023 £</i>	<i>Unrestricted funds 2023 £</i>	<i>Total funds 2023 £</i>
Investment property	-	-	655,000	655,000
Current assets	243,190	62,762	535,564	841,516
Creditors due within one year	-	-	(162,614)	(162,614)
Creditors due in more than one year	-	-	(295,429)	(295,429)
<b>Total</b>	<b>243,190</b>	<b>62,762</b>	<b>732,521</b>	<b>1,038,473</b>

**22. Reconciliation of net movement in funds to net cash flow from operating activities**

	<b>2024 £</b>	<b>2023 £</b>
Net expenditure for the period (as per Statement of Financial Activities)	<b>(36,698)</b>	<b>(140,980)</b>
<b>Adjustments for:</b>		
Depreciation charges	-	332
(Gains)/losses on investments	-	10,432
Dividends, interests and rents from investments	<b>(41,354)</b>	<b>(35,625)</b>
Decrease/(increase) in debtors	<b>(1,267)</b>	3,899
Increase/(decrease) in creditors	<b>(124,333)</b>	261,190
<b>Net cash provided by/(used in) operating activities</b>	<b>(203,652)</b>	<b>99,248</b>

**23. Analysis of cash and cash equivalents**

	<b>2024 £</b>	<b>2023 £</b>
Cash in hand	<b>640,653</b>	802,951
<b>Total cash and cash equivalents</b>	<b>640,653</b>	802,951

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NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY

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NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2024

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24. Analysis of changes in net debt

	At 1 January 2024 £	Cash flows £	At 31 December 2024 £
Cash at bank and in hand	802,951	(162,298)	640,653
Debt due within 1 year	(3,532)	(24,418)	(27,950)
Debt due after 1 year	(295,429)	27,984	(267,445)
	<u>503,990</u>	<u>(158,732)</u>	<u>345,258</u>







# NASS Annual Report and Accounts YE2024

Final Audit Report

2025-07-25

Created:	2025-07-21
By:	Jessica Eades (Jessica.Eades@bkl.co.uk)
Status:	Signed
Transaction ID:	CBJCHBCAABAAI4OYFnCwwxiNNwPqvVD6Ty-N7YRUw0Bb

## "NASS Annual Report and Accounts YE2024" History

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**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

England & Wales - Charity number 1183175

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# Accounts

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**Axial SpA  
works silently.  
We don't.**

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**TRUSTEES' REPORT AND FINANCIAL STATEMENTS**

**FOR THE YEAR ENDED 31 DECEMBER 2023**

**CONTENTS**

	Page
<b>Reference and administrative details of the Charity, its Trustees and advisers</b>	<b>1</b>
<b>Trustees' report</b>	<b>2 - 22</b>
<b>Independent auditors' report on the financial statements</b>	<b>23 - 27</b>
<b>Statement of financial activities</b>	<b>28</b>
<b>Balance sheet</b>	<b>29</b>
<b>Statement of cash flows</b>	<b>30</b>
<b>Notes to the financial statements</b>	<b>31 - 53</b>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**REFERENCE AND ADMINISTRATIVE DETAILS OF THE CHARITY, ITS TRUSTEES AND ADVISERS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

<b>Trustees</b>	Rajeevendra Kumar Mahapatra, Chair (re-elected 30 September 2023) Nicholas Reid, Treasurer Dr Antoni Tuck Yin Chan, Trustee (re-elected 30 September 2023) Rachel Davis (elected 30 September 2023) Gillian Eames, Trustee Paul Curry, Trustee Dr Jacqueline Harris, Trustee (retired 30 September 2023) Poppy Hocken, Trustee Claire Jeffries, Trustee (re-elected 30 September 2023) Dr Lesley Jane Kay, Trustee Hannah Elizabeth Bruce, Trustee Prof Hasan Imam Syed Tahir, Trustee Alexia Katherine Dreese Granatt, Trustee
<b>Charity registered numbers</b>	1183175 and SC049746
<b>Principal office</b>	Unit 6 Cambridge Court 210 Shepherds Bush Road London W6 7NJ
<b>Independent auditors</b>	BKL Audit LLP 35 Ballards Lane London N3 1XW
<b>Bankers</b>	Barclays Bank UK Plc 1 Churchill Place London E14 5HP

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023

The Trustees present their annual report together with the audited financial statements of the National Axial Spondyloarthritis Society for the year 1 January 2023 to 31 December 2023.

## Objectives and activities

NASS' vision is as follows:

*"The future we want to create is one where every person with axial spondyloarthritis (axial SpA) has timely and effective diagnosis, treatment and care, is empowered to make informed health choices and feels part of a supportive community."*

The Charity seeks to do this by:

- providing information to the general public about axial SpA, and advice to people living with the condition, their families, carers, service-providers and employers
- advocating to ensure that every person with axial SpA has timely and effective diagnosis, treatment and care
- funding and disseminating research and analysis to advance scientific understanding of the condition and its effective treatment.

In setting objectives and planning for activities, the Trustees have given due consideration to general guidance published by the Charity Commission relating to public benefit, including the guidance 'Public benefit: running a charity (PB2)'.

### a. Strategies for achieving objectives

In accordance with the provisions set out in its Constitution, the Trustees have adopted the following strategy for the period 2020 – 2024 to meet NASS' principal objects:

To ensure that people with axial SpA receive timely diagnosis, effective treatment and care

- Maintain pressure at national level to ensure effective and widespread implementation of the NICE Guideline and Quality Standard for axial SpA
  - Continue to run an All Party Parliamentary Group on Axial Spondyloarthritis
  - Undertake Parliamentary work in the devolved nations
  - Develop and publish a Gold Standard time to diagnosis route map
  - Commission research on the economic consequences of a delay to diagnosis
  - Create impactful ways to engage primary care professionals and those in appropriate secondary care services to ensure that they identify and refer patients who may have axial SpA
  - Form an alliance to protect NHS hydrotherapy services
  - Develop a primary care clinical champions programme
  - Continue to work in partnership with professional bodies
  - Support rheumatology and other services to test approaches to improving diagnosis and treatment and spread the learning across the UK
  - Expand the *Aspiring to Excellence* healthcare improvement programme
  - Ensure that patient values and needs underpin NHS service delivery
  - Disseminate learning from *Aspiring to Excellence*
  - Raise awareness among those working in emergency care and NHS 111

**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023**

To empower, inform and inspire people affected by axial SpA

- Ensure that everyone affected by axial SpA has access to personalised support and the best information about the condition
- Extend personalised support through our Helpline service, and reliable and user-friendly information resources for everyone affected by axial SpA
- Promote physical activity, and support and motivate people to exercise
- Support and develop the NASS branch network to continue to ensure people can access regular group, physiotherapy led exercise sessions
- Support and motivate people to confidently and safely exercise independently
- Ensure that everyone affected by axial SpA has the skills, confidence and knowledge they need to manage their condition optimally
- Develop a self-management pilot programme and roll out if successful

To foster a connected and supportive community, raising axial SpA awareness everyday, everywhere

Conduct public awareness campaigns using various methods and channels to try and increase knowledge. Chiefly this activity will include:

- Using case studies of people living with axial SpA to generate media coverage
- Encouraging our members and supporters to become advocates for NASS and campaigners for improvements in axial care
- Online and social media campaigns to create interest and inform the public
- Using related national and international awareness days
- Create an active community of NASS members and supporters who work together
- Make more use of online tools for streaming events, conversations and debates, to encourage participation and engagement
- Increase our online supporter numbers through social media promotion, listening, and outreach to potential supporters
- Encourage members and supporters to take up fundraising activity for NASS, whether largescale challenge events or activity such as raffles and coffee mornings
- Ensure that people know what NASS stands for, the changes that we are seeking to bring about, and how we operate
- Offer thought leadership and op-ed pieces from the CEO, Chair and other key colleagues to professional and trade outlets and to mainstream health outlets
- Use social media listening techniques to reach out to people talking about axial SpA, making them aware of NASS and its resources
- Develop annual membership campaigns to increase the number of members and membership revenue
- Seek opportunities to outreach through external events outside of the sector at which NASS can contribute and have visibility.

**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**b. Activities undertaken to achieve objectives and achievements**

The charity fulfils its objectives by:

- Providing information to people living with axial SpA
- Supporting people through a Helpline service and welfare benefits advice
- Providing a wide range of self-management resources, including webinars, videos and on-line meetings
- Campaigning policy makers, Parliamentarians and health service leaders
- Providing expert quality improvement support to rheumatology teams and primary care professionals who are working to reduce diagnostic delay and improve the quality of care
- Raising public awareness of the condition and of NASS
- Supporting research studies
- Contributing to public consultations relating to musculoskeletal health and the management of spondyloarthritis.

**c. Volunteers**

NASS is heavily dependent on 250 volunteer members who provide support at branch level. Volunteer members are unpaid and NASS' accounts do not reflect the value to NASS of the many hours work provided free to NASS. The Trustees are fully conscious of this value and recognise that the work of NASS would be considerably curtailed without the support provided by volunteer members.

Our NASS branches offer regular, physiotherapist led group exercise for anyone living with axial SpA. They are subcommittees of NASS and are led by a committee usually comprising a Chair, Treasurer and Secretary. We support our branches with a suite of resources, regular promotion of their activities, online meetings and a named member of staff who is available Monday to Friday to help with any problems or issues.

**d. Main activities undertaken to further the charity's purpose for the public benefit**

NASS provides public benefit by:

- working with statutory bodies and others that provide for the treatment and welfare of people affected by axial SpA
- educating people affected by axial SpA, as well as healthcare professionals and the public, on the problems related to it
- putting people affected by axial SpA in contact with expert advisers
- promoting research into the management and cure of axial SpA and its causes
- disseminating the results of research related to axial SpA.

In so doing, NASS improves the lives of those affected by axial SpA, particularly in relation to their ability to contribute positively to the prosperity of their communities and the country as a whole.

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023

## Achievements and performance

### a. Summary

2023 was a very challenging year for NASS, for healthcare charities and for the sector overall. The continued impact of Covid-19 on rheumatology departments, the ongoing workforce shortage in the NHS and the cost-of-living crisis impacted significantly on our work. Demand for our services remained exceptionally high, whilst the fundraised income needed to deliver them reduced considerably.

We put in place numerous cost reduction measures, and adapted our ways of working to ensure that, as best as possible, we were able to deliver on our core objectives.

Our staff responded with an incredibly positive and collegiate approach to the financial circumstances in which we found ourselves, demonstrating tenacity, flexibility and absolute loyalty to our mission and vision.

Despite the challenges we have faced, our activities, visibility and influence have been greater than ever:

- We continued to support 5000 people living with axial SpA through our Helpline and helped people to access £1.3m of welfare benefits
- We continued to build the case for change in diagnosis and care of axial SpA through publication of our first 'Time to Diagnosis' patient survey, patient quality standards, a survey of MSK radiology and MRI, and a study of awareness of axial SpA and referral practice in gastroenterology
- We contributed to the Department of Health and Social Care's draft Major Conditions strategy, the MSK Quality Standards in Wales and the British Society of Rheumatology's (BSR) axial SpA guideline development group. We supported BSR's Workforce campaign, we became members of the national MSK Partnership, and we continued to provide the secretariat to the Aquatic Physiotherapy and Hydrotherapy Alliance
- We continued to build a social movement for change, with *Aspiring to Excellence* growing to 23 rheumatology departments, and more than 100 healthcare professionals joining our new Peer to Peer Network
- We held many of our own events - *Aspiring to Excellence* network days, *Champions in Primary Care* network days, in person meetings of the All Party Parliamentary Group on Axial SpA, a Parliamentary reception, weekly physiotherapy and / or hydrotherapy sessions meetings of 68 branches, NASS Voices conferences, 12 *Your SpAce* online meetups, 12 online self-management sessions across the regions and 20 Facebook live sessions
- We launched three new initiatives: *Your SpAce*, the peer to peer network and the Change Maker awards. We undertook preparatory work for two others: Gold Standard treatment, care and self-management; and an integrated early diagnosis pilot in Belfast
- We presented our work at key scientific conferences, including BritSpA, BSR, SpA Academy, National Therapy Expo, Kings Fund conference on Women's Health, Pulse conference and EULAR PARE
- We reached more people than ever on all our social media channels
- We introduced new working of working in fundraising to improve stewardship and efficiency and created a Fundraising Board.

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023

**b. Key performance indicators**

Performance against key indicators was as follows:

- **Fundraising ratio:** every £1 spent on income generation activities raised £7.10 in income
- **% of expenditure on charitable activities:** 75% of our expenditure was directly related to charitable activities
- **total annual value of successful benefit applications for our members.** We helped members to secure £1,300,000 of welfare support payments
- **Numbers of people accessing our Facebook Live sessions:** 91,000
- **Helpline requests processed within two working days:** 97% (target is 95%).

**c. Review of activities**

**Reducing diagnostic delay**

In 2020, respondents to our national consultation process – healthcare professionals (HCPs), professional bodies and patients – agreed that it should be possible for every person experiencing symptoms of axial spondyloarthritis (axial SpA) to receive a diagnosis within one year of symptom onset this ambition. In June 2021 NASS published a route map which set out how to achieve a Gold Standard time of one year.

Starting from a current baseline average of 8.5 years, the achievement of this goal will require transformational change. This includes a significant increase in awareness of the condition among HCPs and the general public, a critical mass of clinical leaders who will improve health care performance in axial SpA, the widespread use of technology to ensure that axial SpA is higher within clinical reasoning and to support diagnosis, the routine use of pathways to ensure that patients are referred directly to rheumatology for assessment, and consistent use of agreed national protocols for imaging.

Above all, to attain such a dramatic change in time to diagnosis we must win hearts and minds, build a social movement of people who want to work with us to create change, and demonstrate proof of concept for our ideas.

2023 was the second full year of implementation of our route map.

Making the case for change

We continued to make the case for change through research and audit:

- We established a UK-wide patient-completed of audit of time to diagnosis in axial SpA. 39 NHS Trusts and Health Boards signed up to the audit, submitting data for 500 patients. We published our first report in September. It showed that the mean time to diagnosis of patients diagnosed since January 2021 was 8.2 years. Crucially, it provided robust empirical data that, on average, 56% of the delay occurs within primary care. It found that only 1 in 20 people is currently diagnosed within the Gold Standard time. This provides a critical UK baseline position from which to measure the future impact of work in this area.
- We used a Freedom of Information (FoI) request to understand the use of magnetic resonance imaging (MRI) in the diagnostic process for axial SpA. It found that there has been significant

**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023**

progress in raising awareness of axial SpA among radiology teams and of the importance of spinal MRI in the diagnostic process. It also highlighted a concern in the emergence of the reliance on non-musculoskeletal outsourcing for the interpretation of images and the lack of associated quality control. The reliance on non-musculoskeletal radiologists is of concern as the survey showed that non-MSK radiologists generally are less familiar with the term axial SpA and with the 2019 BRITSpA imaging guidance, which may result in poorer patient outcomes. Finally, the study highlighted that collaboration between rheumatology and radiology makes an important contribution to the quality of care that patients receive.

- We surveyed UK gastroenterologists to study awareness of axial SpA and referral practice in gastroenterology. It identified that education and joint working with rheumatology is key to help ensure swift recognition, identification, and referral of suspected axial SpA. Despite there being positive detection of inflammatory symptoms and high confidence to refer, the survey highlights the need for regular educational sessions and resources on axial SpA that are accessible to all clinicians. Also, the use of standardised screening tools and formal referral pathways in secondary care could support clinicians in identification and onward referral.

We brought these results to the attention of Ministers, other Parliamentarians, policymakers and healthcare professionals:

- In October, the Chair of the All Party Parliamentary Group (APPG) on Axial Spondyloarthritis led a Westminster Debate in which he cited the results of our economic research on the full economic costs of delayed diagnosis. In his response, Minister Will Quince also cited our research
- In October, the APPG explored issues for women living with axial SpA and examined evidence of the delay to diagnosis
- We presented our work at regional SpA Academies, the British Society of Spondyloarthritis conference, Hi-5 conference and regional rheumatology networks
- We presented the work in conference poster abstract exhibitions such as British Society for Rheumatology, British Society for Gastroenterologists and EULAR PARE.

#### Raising public awareness about early diagnosis

Raising public awareness about axial SpA and inflammatory back pain is key to earlier diagnosis. We continued to run a national social media campaign featuring case studies of people living with axial SpA. 33,058 people visited our campaign website. Our social media adverts reached 842,546 people which drove 172,112 engagements (likes, comments) and led to 9,883 views of our campaign videos. We also helped people start their diagnosis journey with 8,042 people completing the NASS symptom checker. We also made preparations for a second phase of our public awareness campaign to be delivered in Belfast in early 2024.

#### Raising clinical visibility for axial SpA in primary care

The lengthiest part of the delay in diagnosis is in primary care. In 2022 we sought to address this by creating a cadre of clinical champions in primary care and community services whose work would ensure that axial SpA is higher within the clinical reasoning of primary care professionals so that patients who present with suspected axial SpA are identified at the first presentation and urgently referred to rheumatology.

**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023**

In 2023, our Champions:

- Raised the profile of axial SpA nationally through presentations at the Primary Care Rheumatology and Musculoskeletal Medicine Society conference; the GP conference Pulse Live London 2023, the APPG on Axial SpA, the Therapy Expo and at a range of regional rheumatology / MSK sessions
- Embedded the NASS Symptom Checker in First Contact Practitioner (FCP) routine practice: for example, in Stoke they created a new appointment text messaging service leading to a significant uplift in people from the area completing the symptom checker and taking this to their next appointment for assessment and potential referral
- Created training resources and running local sessions across the UK within local Primary Care Networks and Integrated Care Networks to raise awareness of axial SpA amongst GPs, FCPs and the wider primary care team
- Implemented direct FCP referrals that enable the ordering of required tests and direct referral (without additional GP input) into local rheumatology services and clinics for assessment
- Used technology to streamline referrals by embedding UK and international triage and assessment criteria into clinical templates used by GPs and FCPs to ensure a thorough clinical assessment is done for suspected inflammatory back pain and axial SpA and attached to the rheumatology referral.

Engaging healthcare professionals (HCPs)

We launched an online peer to peer network in April to provide a space for HCPs to share their experiences, knowledge and skills in aiming to reduce diagnostic delay. BY December, a total of 124 HCPs had signed up, with members either working in the NHS or Private Practice, including Physios, Chiropractors and Osteopaths. We ran nine monthly sessions with members reporting to gain benefit from connecting with others and learning from their experiences.

We created an online toolkit which aims to have all the necessary resources for HCPs to reduce the delay to diagnosis all in one place. In collaboration with the *Champions in Primary Care* we compiled a 15minute education presentation specifically for use in Primary Care. We created a larger presentation that contained the background of the *Act on Axial SpA* campaign as well as our NASS resources which HCPs can tailor to their audience.

We created the *Change Maker* award to acknowledge the work of those who have demonstrated significant progress in implementing the gold standard time to diagnosis and made 23 awards at a Parliamentary reception.

We are seeing reductions in the time to diagnosis in some parts of the UK

Through our time to diagnosis audit and our *Aspiring to Excellence* programme (see below) we can see localised improvements in time to diagnosis. For example, since joining *Aspiring to Excellence* two years ago, the rheumatology team at the Royal Free NHS Foundation Trust has achieved a reduction in time to diagnosis from a median of six years to five years by implementing the recommendations in *Act on Axial SpA*. Since joining, Bedfordshire Hospitals NHS Foundation Trust has reduced the delay by 2.7 years. The Royal Berkshire NHS Trust has shown with a recent sample of patients that it has achieved the Gold Standard of diagnosis within one year of symptom onset. We will use this new evidence to encourage and support the improvement activities of others and continue to press the case for support at national level.

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023

**Improving healthcare quality across the patient pathway**

In 2019 we established the *Aspiring to Excellence* programme. In partnership with the NHS Transformation Unit, we teach rheumatology teams the fundamentals of healthcare quality improvement and, through learning sessions, coaching and webinars, we encourage participating teams to share their experiences and data.

In 2023 the programme continued to grow and generate new data and momentum. We welcomed four more rheumatology departments into the programme. We held a celebration day to reflect on progress from the first and second cohorts and to share data from the teams from their improvement work. We continued to promote the existing podcast series and launched a blog series asking teams to reflect on their experiences and learning.

We drew on the results of research we commissioned to look at the values and needs of people with axial SpA from which we created a long list of values-based quality standards in the diagnosis, treatment and care of axial SpA. Our supporters voted on their top ten which we developed into a poster. We created a toolkit to support HCPs in applying these standards to their services.

We began work on a programme to develop a gold standard approach to treatment, long-term care. We shared our proposal with a group of stakeholders and invited HCPs and people living with axial SpA to contribute. In partnership, we created a shared vision of the project, and agreed the workstreams, the review methodology and stakeholder agreement strategy.

**Helping people to live well with axial SpA**

Axial SpA is a condition that requires a great deal of information, support and guidance for people to manage their symptoms effectively and ensure optimal long-term outcomes. There are few formal patient education programmes for axial SpA and many people report feeling isolated and have never met anyone else with the condition. NHS backlogs and the rheumatology workforce crisis are such that this need is ongoing.

Helpline

Numbers contacting the NASS Helpline reduced since the unprecedented levels seen during COVID-19. We supported 5,000 enquiries in 2023. The trend towards more complex problems and longer calls continued. This seems to be related in part to staffing shortages and the workload in rheumatology departments, with callers reporting long waits for appointments and calls to department helplines resulting in a lack of response. The NASS Helpline is often the only place people can turn to for help and support and we responded to 80% of queries within 1 working day. The worsening economic situation has also led to more people seeking help with benefits as Welfare Rights organisations become overwhelmed. We supported 324 people with claims for disability benefits which we predict will result in people receiving £1.3 million in disability benefits.

NASS Branches

2023 saw branches make a strong return to pre-COVID activity. We had 58 branches meeting face to face for group physiotherapy sessions, of which 36 were able to offer hydrotherapy. This includes our two new branches, NASS Nottingham, and NASS Coventry. We also had 10 branches operating online, including our new NASS online branch. Some of these are in the final stages of negotiation to return to face-to-face sessions. We supported all branches in logistical conversations with hospitals, health professionals and venues and with promotion of their branch. This is despite of being unable to recruit a much-needed Branch Development Officer in 2023 due to funding.

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023

Information provision

We sent guidebooks to 122 rheumatology and physiotherapy departments, GP practices, osteopath and chiropractor clinics. We updated the website information on a rolling basis, added new information pages, and kept our Covid-19 information page updated.

Supported self-management programme

We support people through education and empowerment, and by creating a supportive community, we aim to reduce the isolation people with axial SpA experience.

In developing our self-management work, we held consultations with patients and healthcare professionals, which identified that our supported self-management programme should: empower patients with axial SpA to live well with their condition; be co-designed with people living with axial SpA and healthcare professionals; be easily accessible; reduce isolation; and leave a legacy.

Our supported self-management programme comprises:

- Regional online sessions in partnership with local NHS rheumatology teams
- *My AS, My Life* live webinars
- *Your SpAce* videos, downloadable resources, and online peer support meetups

We ran 12 online sessions in partnership with 26 NHS rheumatology departments, reaching nearly 450 people living with axial SpA.

We ran 20 Facebook Live sessions with over 91,000 views. The *My AS, My Life* webpages were visited nearly 20,000 times. We continued to get excellent engagement with the live sessions and the video library is an excellent resource to signpost people to. Sessions were run on: information about the condition; tips for daily life with axial SpA; exercise taster sessions; emotional wellbeing; and managing pain.

We launched *Your SpAce* which is aimed at people at the start of their axial SpA journey, as well as those who are struggling, and people who feel isolated. It was developed in collaboration with people with axial SpA and HCPs and focussed initially on pain, fatigue and flares. We made a series of videos and resources focusing on these topics and promoted them through *AS News*, social media and via rheumatology departments. We sent promotional packs to over 120 rheumatology department containing posters to display in clinics and promotional postcards to hand to patients. In the nine months since launch, the 14 videos had nearly 12,000 views and the webpages had over 22,000 views. We received excellent feedback:

- 88% felt the videos had helped them understand more about their axial SpA
- 81% now felt more confident managing their condition
- 97% found the information in the videos easy to digest
- 80% felt less alone after watching the lived experience videos
- 88% found that the downloadable resource sheets helped them build practical skills in managing their condition.

As part of *Your SpAce* we wanted to provide a safe space for people to meet and share experiences and ask questions. We ran 12 on-line meetups, with 300 attendees. These have also been very positively evaluated:

- 84% felt the meetup helped them understand more about axial SpA
- 96% felt less alone after hearing from other people with the condition
- 57% had never met someone else with axial SpA prior to joining a meetup.

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023

### **Raising the profile of axial SpA within Government**

In 2019 we worked with Parliamentarians to create an All Party Parliamentary Group (APPG) on axial SpA with the aim of providing national level oversight of the implementation of NICE Guideline 65 concerning the diagnosis and treatment of spondyloarthritis.

The APPG met twice in 2023. In April, women and axial SpA was discussed, whilst a second meeting in October reflected on the formation of Integrated Care Systems (ICS) one year on, and the opportunities to ensure that axial SpA is a local priority.

We responded to a call for evidence for the Major Conditions Strategy and subsequently met with the team developing the document and the Musculoskeletal Policy Team at the Department of Health and Social Care. We met with the Secretary of State for Health and Social Care representing the wider musculoskeletal community to discuss this. In Wales we continued to develop our relationship with the Musculoskeletal Clinical Leads within Welsh Government and contributed to the development of the MSK Quality Standards.

### **Health inequalities**

Our work in health inequalities focused on sex, gender and gender identity. We secured funding for a research study and commissioned Headstrong Thinking to conduct a series of focus groups and interviews.

### **Media engagement**

NASS CEO was quoted by *The Guardian* newspaper on the impact that missing a medicines delivery has on people with axial SpA. He was also quoted by *The Pharmaceutical Journal* in a news story about a Care Quality Commission investigation into this area.

We launched the findings from our patient values research which uncovered large disparities in the experience of men and women with axial SpA as they navigate diagnosis and care. The research was covered by The Times (print and online), with a combined reach of 43 million.

### **Social media**

We continued to reach and engage broader audiences on social media, creating a sense of community and sharing stories about people's experiences of life with axial SpA. For example:

- We launched a video featuring women who faced a long delay to diagnosis, shared posts with quotes from women commenting about the misconceptions of women and axial SpA and how this affected their journey to diagnosis. We also had a blog story from a woman sharing her journey to diagnosis.
- On World AS Day we ran a series of blogs to highlight different aspects of life with axial SpA reaching more than 17,000 people.
- In Pride Month, we shared three blog posts: Disability and Pride intersectionality; how Pride relates to NASS; barriers to healthcare. The blogs received over 300 views and were shared across social media.

**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023**

We had to scale back our plans in the second half of the year as interim management arrangements were put in place for communications as a consequence of the need to make cost reductions. Nevertheless, we were able to grow our followship.

- **Facebook:** our paid advertising led to 1.8million impressions with an average of around 150,000 a month. Our organic activity via the NASS Facebook page reached 2.3 million people and led to 41,230 visits to our page.
- **Instagram:** our Instagram activity / posts reached 588,800 profiles with our content, led to 7,735 visits to our profile and resulted in 919 new followers.
- **YouTube:** the NASS YouTube channel increased subscribers by 1397, our videos received 127,269 views and had 1.4m impressions.
- **LinkedIn:** the NASS LinkedIn page had a reach 62,306 with our content with an engagement rate of 23%. We have had 565 people follow us and 1,900 clicks on our content.
- **Twitter (X):** the NASS Twitter (X) page had 453,568 total reach across our tweets, leading to 12,900 engagements and an engagement rate of 7.5%.
- **Website performance:** The NASS website had 124,416 users.

### **Alliances**

We continued to provide the secretariat for the newly formed Aquatic Physiotherapy and Hydrotherapy Alliance. It worked on key areas - policy and parliamentary, rapid response, research and supporting NHS services. The alliance developed a document outlining the benefits of hydrotherapy to help departments maintain and retain services and a suite of materials to help develop services further.

We became key members of the MSK Partnership, a multi-professional partnership inclusive of all MSK professions, MSK sub-specialties, professional bodies, arms-length organisations, the third sector, public and patients. This gave us the opportunity to be partners at the MSK Conference, part of Therapy Expo.

We continued to build our relationship with the MSK Clinical Leads in Wales and had an exhibition stand at the launch of the Wales MSK Quality Standards.

### **Membership**

Our members are the lifeblood of the society. Due to the need for cost reduction, we were without a Membership Officer for 18 months, until the end of July 2023. Membership numbers remained constant at around 4,100 which was encouraging in light of the macro-economic environment and its impact on people's disposable income. We held another successful Members Day, but did so online only due to budget constraints, and held NASS Voices events in Glasgow and Cardiff.

### **d. Factors relevant to achieve objectives**

The challenging macro-economic environment has impacted negatively on our fundraised income affecting the achievement of some of our communications objectives. Conversely, the strength of our long-term funding relationships with pharmaceutical companies has provided the stability necessary to deliver our larger multi-year projects. We have excellent relationships with a wide range of healthcare professionals, professional bodies, health consortia and other charities, all of which has enriched our work and strengthened its impact.

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023

**e. Fundraising activities and income generation**

**Raising funds for NASS**

Thank you to everyone who supported us in 2023 by donating or fundraising. We don't receive public funding and couldn't do our work without the generosity of our supporters. The money we raise ensures that we're here to transform axial SpA diagnosis and care, and offer practical support and advice to anyone affected by the condition.

At the national level we exceeded our target by £8,741 and our income in 2023 amounted to £873,253 (£908,425 in 2022).

Income at branch levels amounted to £154,399 in 2023 (£118,099 in 2022)

In 2023 our fundraising activities included:

**Community and events fundraising:** 38 people took on a running, trekking, swimming, cycling or rowing challenge, and 55 people joined Gaming for AS, Walk Your AS Off, Stretch-Tember or the Winter Walks Challenge.

**Donations and individual giving:** Despite the cost-of-living crisis, 246 people gave a one-off cash gift, 122 people gave a regular donation, 96 people donated in memory of someone, and 230 people - including 14 branches - donated to the Winter Appeal. Whether you gave a one-off cash gift, a regular donation, a gift in memory of someone, or gave to our Winter Appeal, we want to thank you for your generosity.

**Corporate Donations:** We extend our thanks to the corporate companies that have generously supported us through direct donations and matched donations. Your support is invaluable in helping us continue our mission.

Capital Group  
David Lloyd Leisure  
Dot Origin Ltd  
Estee Lauder  
Google  
Lloyds TSB Foundation  
Microsoft  
Morrisons Foundation  
Palo Alto Networks  
Paul Berg and Taylor  
Robert W Baird Group  
Sony Interactive Entertainment Europe  
The Generation Foundation  
Working at Height Limited

**Legacy fundraising:** We are extremely grateful to everyone who leaves a gift in their Will. In 2023 we received income from five legacies totalling £79,443.

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023

**Funding from pharmaceutical companies:** We would also like to thank the following companies that supported us in 2023:

AbbVie Ltd	£30,850
Biogen Idec Ltd	£30,000
Eli Lilly and Company	£30,000
Janssen-Claig Limited	£5,000
Novartis Pharmaceuticals UK Ltd	£77,862
UCB Pharma Ltd	£247,582

Any relationship NASS has with a pharmaceutical company is underpinned by the following principles:

- **Independence** – The independence of NASS must not be compromised by the relationship with an external organisation or by the agreed working arrangements. The financial benefit must be made available for the support of our charitable activities without restriction. We will not allow funders to influence our campaigning, policymaking, research or fundraising for their own purposes. We will ensure our editorial independence is maintained and all information produced by NASS will be based on the latest evidence, informed by our Medical Advisory Board
- **Transparency** – Any relationship with an external organisation is not an endorsement of their product or organisation and will be made transparent to our members, supporters, staff and the general public including in our annual Report and Accounts. All partnerships will be governed by a written agreement which will detail requirements and expectations from each party
- **Benefit for those living with axial SpA** – Any relationship formed with an external organisation must be positive for NASS members and people living with axial SpA and in furtherance of our charitable aims
- **Regulation and good practice** – All funders must comply with all relevant laws and regulations, as well as good practice. This includes full compliance with the Association of the British Pharmaceutical Industry's Code of Practice
- **Use of NASS logo** - our logo may only be used following written approval from NASS. We may use a funder's mark where relevant to the relationship including in webinars, event banners, on our website or on press releases where appropriate. The use of a funder's trademark will have no impact on the independence of the charity
- **Sharing expertise and knowledge** - We will work with funders to share non-product expertise and knowledge. This may include participation in networking events and meetings
- **Privacy policy** - In line with our privacy policy NASS will not, under any circumstances, share the personal data of any of our service users or supporters with a pharmaceutical company
- **Alignment with our strategy and values** - Any collaboration or cooperation with pharmaceutical companies will be assessed against the ethics, desirability and practicality in relation to the overall plans and work of NASS.

**Trading:** 450 people took part in a raffle, 46 people made a bid in the online Christmas auction and 19 people bought a card from Making a Difference Cards. We want to thank everyone for taking part and supporting our work.

**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**Trust fundraising:** We would like to thank the following charitable Trusts that supported us, collectively giving £63,200.

Clifford Chance UK Foundation  
Forest Trust  
Garfield Weston Foundation  
Help for Health  
John Coates Charitable Trust  
Oakdale Trust  
Pentwyn Trust  
Pilkington Charities Fund  
Souter Charitable Trust  
The Bernadette Charitable Trust  
The February Foundation  
The Hamilton Wallace Trust  
The Joan Ainslie Charitable Trust  
The Mary Homfray Charitable Trust  
The Medicash Foundation  
The Michael and Anna Wix Charitable Trust  
The Simon Gibson Charitable Trust  
The Weinstock Fund

**Enhancing Fundraising Efficiency and Stakeholder Engagement**

We re-wrote and re-structured the Fundraise for NASS section of the website. We recruited a Fundraising Assistant to lead the day-to-day delivery of fundraising tasks and release more time for the Senior Fundraising Officer to spend on development and strategy. We improved Google Ads for each income stream. We started to develop higher quality stewardship journey. Staff were upskilled through training courses in Fundraising Regulations, Gift Aid, GDPR, Legacy fundraising, Individual Giving, Direct Mail and Fundraising Tech.

We partnered with People's Fundraising to deliver online, paperless and fully branded auctions and raffles with improved stewardship, as well as the option for supporters to create their own raffles and auctions. Finally, we have been actively engaging with the Information and Support team to increase the awareness of service users that NASS depends on public support to deliver their frontline information and support services.

**Fundraising responsibly**

We rely on the generosity of our donors and fundraisers to do our life-changing work and have processes and policies in place to ensure that we fundraise responsibly.

- We are a member of the Fundraising Regulator and pay an annual levy
- We are transparent about our fundraising and treat donors and fundraisers respectfully and fairly
- We provide personal stewardship to anyone who is taking part in a fundraising activity for us; this includes ensuring people are aware of the risks of taking part in activities
- We explain how to opt out of communications and people are easily able to unsubscribe from emails
- We adhere to data-protection legislation and provide information on our website about our data-privacy policy, and how to opt-out of communications

**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023**

- We take all reasonable steps to opt-people out of communications if they request to no longer hear from us
- We respond quickly and efficiently to any complaints about fundraising. We received no official complaints in 2023
- We mitigate against the risk of not reaching our fundraising targets by reviewing our management accounts monthly to monitor income levels, reforecasting and taking appropriate actions if fundraising income is below the levels we forecast. We have also introduced a quarterly analysis of our fundraising income by ROI
- We are registered with Hammersmith and Fulham Council as a Small Society Lottery under Paragraph 42 of Part 5 of Schedule 11 to the Gambling Act 2005
- Our Summer Raffle raised £3,557. £1,651.13 of the proceeds were retained as unrestricted income to fund our work, the remaining income covered prizes and the administrative cost of running the lottery
- Our Festive Raffle raised £2,385. £2,285.32 of the proceeds were retained as unrestricted income and used to fund our work, the remaining income covered prizes and the administrative cost of running the lottery. £100 of a £500 prize was donated back to NASS as a cash gift.

**f. Investment policy and performance**

To minimise the risk of potential loss of funds and maintain financial security, a portion of our funds is held in cash within a reputable bank.

Additionally, the charity has made strategic investments in two properties we own which provide a consistent and reliable source of income for our charitable initiatives.

NASS' investments also included one statuette gifted by Dame Elisabeth Frink which was sold at auction in 2023. All investments are carried at market value.

**Financial review**

**a. Going concern**

After making appropriate enquiries, the Trustees have a reasonable expectation that the Charity has adequate resources to continue in operational existence for the foreseeable future. For this reason, they continue to adopt the going concern basis in preparing the financial statements. Further details regarding the adoption of the going concern basis can be found in the accounting policies.

The charity's trustees closely monitor its reserves. To ensure adequate cash reserves, the Board of Trustees decided to take out a loan against the properties owned by NASS. The loan increased the charity's free cash reserves.

Trustees approved a plan for cost reductions measures proposed by the CEO.

**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**b. Reserves policy**

Free reserves, defined as the balance of unrestricted funds less fixed assets, at the end of reporting period amount to £77,521 (2022 - £93,145).

The remaining funds are comprised of two investment properties (valued at £655,000) from which NASS derives rental income, branch funds of £243,190 and other restricted grants totalling £62,762.

NASS must raise income each year from voluntary sources and total income is likely to fluctuate from year to year.

We aim to hold 6-9 months free cash reserves. This working capital protects the continuity of our core work, that is, work not funded through restricted income. Core work includes our information and support service, awareness raising, campaigning and policy influencing, and the work of our branches across the UK. We have chosen a reserves level of 6-9 months having considered the level of predictability/unreliability in our income sources and the extent to which our cost base is flexible or committed. Our largest income sources (legacies and grant funding from pharmaceutical companies) come at irregular intervals, and the majority of our costs are committed, principally in the form of the staff who deliver our charitable objectives.

In 2022 our unrestricted cash reserves fell below our policy target. This was a consequence of two factors: the impact of the COVID pandemic on community and events fundraising and a lower than average legacy income. To ensure continued delivery of our charitable objectives, the Board decided to use some of the reserves below the reserves policy level. The reserves continued to decrease in 2023. Recognising the importance of strengthening our liquid reserves, in August 2023, we took a long-term bank loan. As a result, our long-term liabilities have increased. However, it has also positively impacted our cash position, and our free cash reserves at the end of the reporting period stood at £372,950, which represented 8.14 months of actual operating costs.

**c. Material investments policy**

The Charity holds two properties that are rented out to private tenants. Properties were chosen as a reliable source of income for the Charity and the expected income is set at £34,000 per annum given both properties are fully let.

**d. Principal risks and uncertainties**

The Trustees have adopted appropriate policies necessary to limit or mitigate the risks faced by NASS. The principal risks are:

- Loss of income: NASS seeks to broaden and expand its income from all sources. Nevertheless, NASS is dependent upon voluntary income, both at branch level and at national level, and aims to increase its membership locally and nationally
- Loss of reputation: NASS seeks at all times to maintain its independent viewpoint. Grants from pharmaceutical companies are strictly controlled so as to ensure that our independence is not compromised
- Loss of staff: NASS has a reward strategy to ensure that the charity is able to recruit and retain high quality staff. It also has a set of HR policies to provide the appropriate framing for all HR matters.

**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023**

NASS has a safeguarding policy and set of procedures applicable to beneficiaries, staff, trustees and volunteers. Staff are trained in safeguarding and NASS branches have a training resource. The safeguarding policy and procedures are reviewed on an annual basis.

**e. Financial risk management objectives and policies**

Effective management of financial risk is a high priority. Given the importance of accurate financial projections and reporting, we have taken a comprehensive approach to ensure that we consistently maintain a high standard in all aspects of financial management. It includes implementing robust budgeting and costing methods, adhering to donor-imposed restrictions, maintaining strong financial systems and controls, regular reporting and ensuring adequate reserves and cash flow management. We also conduct regular audits and financial reviews to maintain transparency and accountability. We have a range of policies and procedures to achieve these objectives. We employ processes and controls to guarantee accurate financial forecasting and reporting. We follow a well-defined procedure for expenditure approval, ensuring that any spending is fully authorised, and documented accordingly. Furthermore, we take great care to keep detailed records of all restricted funds, which helps to ensure complete transparency and accountability in their utilisation.

Collaborative budgeting methods are also used to ensure our financial management practices are practical and efficient. These policies and practices reflect our commitment to sound financial management, compliance, transparency, and accountability.

**f. Principal funding**

In 2023, NASS received its funding from various sources, with a notable distinction between income generated at the national level and that at the branch level. 85% of our total income was raised at the national level, while 15% was generated through the efforts of our branch network, designated for their specific use (84 % of branch income came from Subscriptions, 9% from donations and legacies, 6% from fundraising activities and 1% from other income)

At the national level, our income for 2023 was diversified across various categories. Majority of our funding originated from grants provided by pharmaceutical companies (48%), designated for specific projects (restricted), along with a contribution towards general operational expenses.

Other sources of income were as follows:

Donations: 17%

Fundraising: 10%

Membership subscriptions: 9%

Legacies: 9%

Investments 4%

Other income 3%

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023

## Structure, governance and management

### a. Constitution

The charity is a Charitable Incorporated Organisation and was registered with the Charity Commission in April 2019. The rules and regulations of the CIO are set out in its Constitution, adopted by the Board of Trustees on 14 September 2019.

### b. Methods of appointment or election of Trustees

The governing body of NASS is a Board of Trustees consisting of elected Trustees. Only members of NASS may be appointed as Trustees and the maximum number is twelve.

At every annual general meeting of the members of NASS, one third of the charity trustees shall retire from office. The charity trustees to retire by rotation shall be those who have been longest in office since their last appointment or reappointment. If any trustees were last appointed or reappointed on the same day those to retire shall (unless they otherwise agree among themselves) be determined by lot. The vacancies so arising may be filled by the decision of the members at the annual general meeting; any vacancies not filled at the annual general meeting may be filled by the charity trustees. Such persons shall retire at the conclusion of the next annual general meeting after the date of their appointment, and shall not be counted for the purpose of determining which of the charity trustees is to retire by rotation at that meeting.

The members or the charity trustees may at any time decide to appoint a new charity trustee, whether in place of a charity trustee who has retired or been removed in accordance with clause 15 (Retirement and removal of charity trustees), or as an additional charity trustee, provided that the limit specified on the number of charity trustees would not as a result be exceeded.

The Chair and Treasurer are approved by the Board and selected from among the trustee group. Their term of office as Chair and Treasurer is consistent with their term of office as a trustee. In advance of each AGM members of NASS are widely encouraged to nominate a fellow member as Trustee.

On appointment, new trustees are asked to spend a half day in the NASS central office for a briefing with the Chief Executive and staff to understand how the society works. Formal training is provided when required.

### c. Organisational structure and decision-making policies

The Trustees meet quarterly to review matters of policy and to make appropriate judgements, directions and decisions on CIO issues. Trustees delegate authority on some matters to a Finance and General Purposes Committee consisting of the Chair, the Treasurer, up to three appointed Trustees and the Chief Executive and Head of Finance and Administration. This Committee meets four times per year. NASS also has a Medical Advisory Board which acts in advisory capacity only. Day to day management of NASS is undertaken by the Chief Executive and their staff. The trustees consider the Chief Executive and management team as comprising the key management personnel of the charity in charge of directing and running and operating the charity on a day to day basis.

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023

**d. Policies adopted for the induction and training of Trustees**

All new trustees receive an induction programme which includes the organisation's structure, scheme of delegation, NASS constitution, strategic plan, business plan and budget, trustee code of conduct and CC3, *The Essential Trustee*. Periodic training is provided (e.g. how to read management accounts).

**e. Pay policy for key management personnel**

Every three years we commission external HR consultants to undertake independent benchmarking of all roles. The last review was in November 2022. Our medium term aim is to pay at the midpoint. The pay of the Chief Executive is reviewed annually by the trustees.

**f. Related party relationships**

There are no related party relationships. NASS is a member of various umbrella groups, including the Arthritis and Musculoskeletal Alliance, The Axial SpA International Federation, National Voices, the National Council for Voluntary Organisations, the Disability Benefits Consortium and the Prescription Charge Coalition and The Alliance (Scotland). Our membership of these bodies does not impact on the operating policies adopted by the charity.

**g. Financial risk management**

Further to the risks identified above, in 2024 trustees will be asked to approve an updated risk management strategy.

**h. Trustees' indemnities**

NASS holds Trustee Indemnity insurance through Markel UK, providing cover with a limit of 1 million pounds against any wrongful act claim made against a Trustee.

**Plans for future periods**

Our priority areas for 2024 are:

**Reducing diagnostic delay:** we will

- Continue to build the case for change with three scientific journal publications
- Continue delivery of *Champions in Primary Care*
- Continue to build and support our peer-to-peer network
- Implement an integrated pilot in Belfast that supports people in their journey from symptom onset to diagnosis in rheumatology
- Hold a parliamentary event to present our key campaign learning to policy makers and Parliamentarians, and focus even more on spreading our campaign messages, data and collateral at HC and other events
- Undertake Parliamentary activity to continue to raise the profile of axial SpA in Westminster
- Further roll out our audit tool on time to diagnosis and publish our second report

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023

***Supporting the NHS to improve axial SpA care:*** we will

- Continue delivery of *Aspiring to Excellence* primarily with cohorts three and four but also including cohorts one and two
- Publish the scope of our proposed gold standard approach to treatment, long-term care and self-management and issue a call for evidence
- Continue to grow our regular programme of communications which will include a second series of improvement podcasts, the continuation of a blog series and social media content
- Make preparations to hold the first national quality improvement conference in axial SpA in 2025
- Promote our work at BSR, BRITSpA and SpA academy conferences
- Publish a set of patient quality standards
- Publish commissioned work on sex, gender and gender identity
- Further build our alliance of organisations that want to work together to promote the role of aquatic physiotherapy and hydrotherapy across condition areas

***Supporting people affected by axial SpA (including self-management):*** we will

- Continue to run online self-management sessions
- Create a resource library which will be available to all HCPs to set up and run their own sessions independently
- Continue to run *My AS, My Life* sessions streamed live simultaneously across multiple social media channels
- Launch Phase Two of *Your SpAce* modules and continue with regular online meetups
- Seek to maintain our information and support service at current levels
- Continue to support our branch network, promote their services and bring branches closer to NASS and to each other
- Update our biologics guide

***Ensuring that NASS is an effective organisation:*** we will

- Strengthen member stewardship including the potential for a new IT system to improve member experience
- Increase the average value of our pool of regular givers through a new stewardship journey
- Consolidate the support of repeat and long-term funders and improve their stewardship by developing video content featuring beneficiaries of our support services to include in impact reports
- Promote a wider range of fundraising events and improve stewardship
- Support the work of the Fundraising Board
- Secure grant funding from pharmaceutical companies at current levels
- Develop a new corporate strategic plan
- Review governance at Board level, introduce a programme of trustee appraisal and identify a programme of core minimum training for each trustee
- Hold one staff away day and ensure that staff development is well supported.

**Statement of Trustees' responsibilities**

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

The law applicable to charities in England & Wales and Scotland requires the Trustees to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the Charity and of its incoming resources and application of resources, including its income and

**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023**

expenditure, for that period. In preparing these financial statements, the Trustees are required to:

- select suitable accounting policies and then apply them consistently
- observe the methods and principles of the Charities SORP (FRS 102)
- make judgments and accounting estimates that are reasonable and prudent
- state whether applicable UK Accounting Standards (FRS 102) have been followed, subject to any material departures disclosed and explained in the financial statements
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the Charity will continue in business.

The Trustees are responsible for keeping adequate accounting records that are sufficient to show and explain the Charity's transactions and disclose with reasonable accuracy at any time the financial position of the Charity and enable them to ensure that the financial statements comply with the Charities Act 2011, the Charity (Accounts and Reports) Regulations 2008, the Charities and Trustee Investment (Scotland) Act 2005, the Charities Accounts (Scotland) Regulations 2006 (as amended) and the provisions of the Memorandum of Association. They are also responsible for safeguarding the assets of the Charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

**Disclosure of information to auditors**

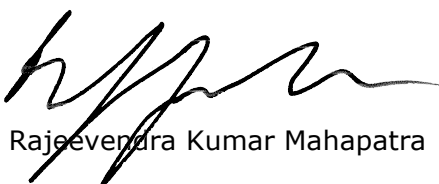
Each of the persons who are Trustees at the time when this Trustees' report is approved has confirmed that:

- so far as that Trustee is aware, there is no relevant audit information of which the charity's auditors are unaware, and
- that Trustee has taken all the steps that ought to have been taken as a Trustee in order to be aware of any relevant audit information and to establish that the charity's auditors are aware of that information.

**Auditors**

The auditors, BKL Audit LLP, have indicated their willingness to continue in office. The designated Trustees will propose a motion reappointing the auditors at a meeting of the Trustees.

Approved by order of the members of the board of Trustees and signed on their behalf by:



Rajeevendra Kumar Mahapatra

Date: 12 July 2024

**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF  
NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**Opinion**

We have audited the financial statements of National Axial Spondyloarthritis Society (the 'Charity') for the year ended 31 December 2023 which comprise the Statement of financial activities, the Balance sheet, the Statement of cash flows and the related notes, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the Charity's affairs as at 31 December 2023 and of its incoming resources and application of resources, including its income and expenditure for the year then ended
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice, and
- have been prepared in accordance with 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) and in other respects the requirements of the Charities Act 2011.

**Basis for opinion**

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

**Conclusions relating to going concern**

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

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

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

**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF  
NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY (CONTINUED)**

**Other information**

The other information comprises the information included in the Annual report other than the financial statements and our Auditors' report thereon. The Trustees are responsible for the other information contained within the Annual report. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon. Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the course of the audit, or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

**Opinion on other matters prescribed by the Companies Act 2006**

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

- the information given in the Trustees' Report for the financial year for which the financial statements are prepared is consistent with the financial statements
- the Trustees' Report has been prepared in accordance with applicable legal requirements.

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

In the light of our knowledge and understanding of the Charity and its environment obtained in the course of the audit, we have not identified material misstatements in the Trustees' Report.

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

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

**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF  
NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY (CONTINUED)**

**Responsibilities of trustees**

As explained more fully in the Trustees' responsibilities statement, the Trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for such internal control as the Trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

**Auditors' responsibilities for the audit of the financial statements**

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

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

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud is detailed below:

- Enquiring of management around actual and potential litigation and claims
- Reviewing board meeting minutes of meetings of those charged with governance
- Reviewing financial statement disclosures and testing to supporting documentation to assess compliance with applicable laws and regulations
- Performing audit work over the risk of management override of controls, including testing of journal entries and other adjustments for appropriateness, evaluating the business rationale of significant transactions outside the normal course of business and reviewing accounting estimates for bias.

As part of an audit in accordance with ISAs (UK), we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control

**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF  
NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY (CONTINUED)**

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion of the effectiveness of the charity's internal control
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the Trustees
- Conclude on the appropriateness of the Trustees' use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the charity's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our Auditors' Report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our Auditors' Report. However, future events or conditions may cause the charity to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at: [www.frc.org.uk/auditorsresponsibilities](http://www.frc.org.uk/auditorsresponsibilities). This description forms part of our Auditors' report.

**Use of our report**

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

NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY

INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF  
NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY (CONTINUED)

*BKL Audit LLP*

**BKL Audit LLP**

35 Ballards Lane

London

N3 1XW

Date: 12/07/2024

BKL Audit LLP are eligible to act as auditors in terms of section 1212 of the Companies Act 2006.

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**STATEMENT OF FINANCIAL ACTIVITIES  
FOR THE YEAR ENDED 31 DECEMBER 2023**

	Note	Restricted funds - Branches 2023 £	Restricted funds - All other 2023 £	Unrestricted funds 2023 £	Total funds 2023 £	Total funds 2022 £
<b>Income from:</b>						
Donations and legacies	3	142,944	366,056	359,724	868,724	879,665
Other trading activities	4	9,767	-	89,503	99,270	112,513
Investments	5	156	-	35,469	35,625	29,116
Other income	6	1,532	-	22,501	24,033	5,230
<b>Total income</b>		<b>154,399</b>	<b>366,056</b>	<b>507,197</b>	<b>1,027,652</b>	<b>1,026,524</b>
<b>Expenditure on:</b>						
Raising funds	7	718	-	123,089	123,807	197,412
Charitable activities	9	151,884	455,514	426,995	1,034,393	1,321,334
<b>Total expenditure</b>		<b>152,602</b>	<b>455,514</b>	<b>550,084</b>	<b>1,158,200</b>	<b>1,518,746</b>
<b>Net income/(expenditure) before net losses on investments</b>		<b>1,797</b>	<b>(89,458)</b>	<b>(42,887)</b>	<b>(130,548)</b>	<b>(492,222)</b>
Net losses on investments		-	-	(10,432)	(10,432)	(50,000)
<b>Net income/(expenditure)</b>		<b>1,797</b>	<b>(89,458)</b>	<b>(53,319)</b>	<b>(140,980)</b>	<b>(542,222)</b>
Transfers between funds	20	(23,876)	8,513	15,363	-	-
<b>Net movement in funds</b>		<b>(22,079)</b>	<b>(80,945)</b>	<b>(37,956)</b>	<b>(140,980)</b>	<b>(542,222)</b>
<b>Reconciliation of funds:</b>						
Total funds brought forward		265,269	143,707	770,477	1,179,453	1,721,675
Net movement in funds		(22,079)	(80,945)	(37,956)	(140,980)	(542,222)
<b>Total funds carried forward</b>		<b>243,190</b>	<b>62,762</b>	<b>732,521</b>	<b>1,038,473</b>	<b>1,179,453</b>

The Statement of Financial Activities includes all gains and losses recognised in the year.

The notes on pages 31 to 53 form part of these financial statements.

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**BALANCE SHEET  
AS AT 31 DECEMBER 2023**

	Note	2023 £	2022 £
<b>Fixed assets</b>			
Tangible assets	14	-	332
Investments	16	-	27,000
Investment property	15	<b>655,000</b>	650,000
		<b>655,000</b>	<b>677,332</b>
<b>Current assets</b>			
Debtors	17	<b>38,565</b>	42,464
Cash at bank and in hand		<b>802,951</b>	656,510
		<b>841,516</b>	698,974
Creditors: amounts falling due within one year	18	<b>(162,614)</b>	(196,853)
<b>Net current assets</b>		<b>678,902</b>	502,121
<b>Total assets less current liabilities</b>		<b>1,333,902</b>	1,179,453
Creditors: amounts falling due after more than one year	19	<b>(295,429)</b>	-
<b>Total net assets</b>		<b>1,038,473</b>	1,179,453
<b>Charity funds</b>			
Restricted funds - Branches	20	<b>243,190</b>	265,269
Restricted funds - All other	20	<b>62,762</b>	143,707
Unrestricted funds	20	<b>732,521</b>	770,477
<b>Total funds</b>		<b>1,038,473</b>	1,179,453

The financial statements were approved and authorised for issue by the Trustees and signed on their behalf by:

  
**Rajeevendra Kumar Mahapatra**  
 (Chair of Trustees)

Date: 12 July 2024

The notes on pages 31 to 53 form part of these financial statements.

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**STATEMENT OF CASH FLOWS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

	<b>2023</b>	<b>2022</b>
	<b>£</b>	<b>£</b>
<b>Cash flows from operating activities</b>		
Net cash used in operating activities	<b>99,248</b>	<b>(267,350)</b>
<b>Cash flows from investing activities</b>		
Dividends, interests and rents from investments	<b>35,625</b>	<b>28,209</b>
Proceeds from the sale of tangible fixed assets	<b>-</b>	<b>885</b>
Proceeds from sale of investments	<b>11,568</b>	<b>-</b>
<b>Net cash provided by investing activities</b>	<b>47,193</b>	<b>29,094</b>
<b>Change in cash and cash equivalents in the year</b>	<b>146,441</b>	<b>(238,256)</b>
Cash and cash equivalents at the beginning of the year	<b>656,510</b>	<b>894,766</b>
<b>Cash and cash equivalents at the end of the year</b>	<b>802,951</b>	<b>656,510</b>

The notes on pages 31 to 53 form part of these financial statements

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

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**1. General information**

The National Axial Spondyloarthritis Society is a CIO incorporated under articles of association dated 29th April 2019 in England & Wales with charity registration number 1183175. It was subsequently registered with the Scottish Charity Regulator on 19th November 2019 with Scottish charity registration number SC049746.

**2. Accounting policies**

**2.1 Basis of preparation of financial statements**

The financial statements have been prepared in accordance with the Charities SORP (FRS 102) - Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Charities Act 2011, the Charities and Trustee Investment (Scotland) Act 2005 and the Charities Accounts (Scotland) Regulations 2006 (as amended).

National Axial Spondyloarthritis Society meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy.

**2.2 Income**

All income is recognised once the Charity has entitlement to the income, it is probable that the income will be received and the amount of income receivable can be measured reliably.

The recognition of income from legacies is dependent on establishing entitlement, the probability of receipt and the ability to estimate with sufficient accuracy the amount receivable. Evidence of entitlement to a legacy exists when the Charity has sufficient evidence that a gift has been left to them (through knowledge of the existence of a valid will and the death of the benefactor) and the executor is satisfied that the property in question will not be required to satisfy claims in the estate. Receipt of a legacy must be recognised when it is probable that it will be received and the fair value of the amount receivable, which will generally be the expected cash amount to be distributed to the Charity, can be reliably measured.

Grants are included in the Statement of financial activities on a receivable basis. The balance of income received for specific purposes but not expended during the period is shown in the relevant funds on the Balance sheet. Where income is received in advance of entitlement of receipt, its recognition is deferred and included in creditors as deferred income. Where entitlement occurs before income is received, the income is accrued.

Income tax recoverable in relation to investment income is recognised at the time the investment income is receivable.

Other income is recognised in the period in which it is receivable and to the extent the goods have been provided or on completion of the service.

NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023

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2. Accounting policies (continued)

2.3 Expenditure

Expenditure is recognised once there is a legal or constructive obligation to transfer economic benefit to a third party, it is probable that a transfer of economic benefits will be required in settlement and the amount of the obligation can be measured reliably. Expenditure is classified by activity. The costs of each activity are made up of the total of direct costs and shared costs, including support costs involved in undertaking each activity. Direct costs attributable to a single activity are allocated directly to that activity. Shared costs which contribute to more than one activity and support costs which are not attributable to a single activity are apportioned between those activities on a basis consistent with the use of resources. Central staff costs are allocated on the basis of time spent, and depreciation charges allocated on the portion of the asset's use.

Expenditure on raising funds includes all expenditure incurred by the Charity to raise funds for its charitable purposes and includes costs of all fundraising activities events and non-charitable trading.

Expenditure on charitable activities is incurred on directly undertaking the activities which further the Charity's objectives, as well as any associated support costs.

Grants payable are charged in the year when the offer is made except in those cases where the offer is conditional, such grants being recognised as expenditure when the conditions attaching are fulfilled. Grants offered subject to conditions which have not been met at the year end are noted as a commitment, but not accrued as expenditure.

All expenditure is inclusive of irrecoverable VAT.

2.4 Interest receivable

Interest on funds held on deposit is included when receivable and the amount can be measured reliably by the Charity; this is normally upon notification of the interest paid or payable by the institution with whom the funds are deposited.

2.5 Tangible fixed assets and depreciation

Tangible fixed assets costing £1,000 or more are capitalised and recognised when future economic benefits are probable and the cost or value of the asset can be measured reliably.

Tangible fixed assets are initially recognised at cost. After recognition, under the cost model, tangible fixed assets are measured at cost less accumulated depreciation and any accumulated impairment losses. All costs incurred to bring a tangible fixed asset into its intended working condition should be included in the measurement of cost.

Depreciation is charged so as to allocate the cost of tangible fixed assets less their residual value over their estimated useful lives, using the straight-line method.

Depreciation is provided on the following basis:

Office equipment	-	25% Straight Line
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NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023

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**2. Accounting policies (continued)**

**2.6 Investments**

Fixed asset investments are a form of financial instrument and are initially recognised at their transaction cost and subsequently measured at fair value at the Balance sheet date, unless the value cannot be measured reliably in which case it is measured at cost less impairment. Investment gains and losses, whether realised or unrealised, are combined and presented as 'Gains/(Losses) on investments' in the Statement of financial activities.

Investments held as fixed assets are shown at cost less provision for impairment.

**2.7 Debtors**

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

**2.8 Cash at bank and in hand**

Cash at bank and in hand includes cash and short-term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

**2.9 Liabilities and provisions**

Liabilities are recognised when there is an obligation at the Balance sheet date as a result of a past event, it is probable that a transfer of economic benefit will be required in settlement, and the amount of the settlement can be estimated reliably.

Liabilities are recognised at the amount that the Charity anticipates it will pay to settle the debt or the amount it has received as advanced payments for the goods or services it must provide.

Provisions are measured at the best estimate of the amounts required to settle the obligation. Where the effect of the time value of money is material, the provision is based on the present value of those amounts, discounted at the pre-tax discount rate that reflects the risks specific to the liability. The unwinding of the discount is recognised in the Statement of financial activities as a finance cost.

**2.10 Financial instruments**

The Charity only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value with the exception of bank loans which are subsequently measured at amortised cost using the effective interest method.

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**2. Accounting policies (continued)**

**2.11 Fund accounting**

General funds are unrestricted funds which are available for use at the discretion of the Trustees in furtherance of the general objectives of the Charity and which have not been designated for other purposes.

Restricted funds are funds which are to be used in accordance with specific restrictions imposed by donors or which have been raised by the Charity for particular purposes. The costs of raising and administering such funds are charged against the specific fund. The aim and use of each restricted fund is set out in the notes to the financial statements. Due to the significant nature of branches on the accounts, the Restricted branch fund is displayed separately throughout the accounts.

Investment income, gains and losses are allocated to the appropriate fund.

**3. Income from donations and legacies**

	<b>Restricted Funds - Branches 2023 £</b>	<b>Restricted funds - All other 2023 £</b>	<b>Unrestricted funds 2023 £</b>	<b>Total funds 2023 £</b>
Donations	12,393	9,500	137,086	<b>158,979</b>
Legacies	1,000	100	78,343	<b>79,443</b>
Charity grants	-	356,456	63,288	<b>419,744</b>
Subscriptions	129,551	-	81,007	<b>210,558</b>
	<u>142,944</u>	<u>366,056</u>	<u>359,724</u>	<u><b>868,724</b></u>

	<i>Restricted Funds - Branches 2022 £</i>	<i>Restricted funds - All other 2022 £</i>	<i>Unrestricted funds 2022 £</i>	<i>Total funds 2022 £</i>
Donations	6,822	37,241	112,084	156,147
Legacies	-	-	72,657	72,657
Charity grants	-	413,583	54,346	467,929
Subscriptions	102,899	-	80,033	182,932
	<u>109,721</u>	<u>450,824</u>	<u>319,120</u>	<u>879,665</u>

Charity grants includes Pharmaceutical Industry grants of £419,744 (2022: £466,536) and other grants of £Nil (2022: £1,393).

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**4. Income from other trading activities**

**Income from fundraising events**

	<b>Restricted Funds - Branches 2023 £</b>	<b>Unrestricted funds 2023 £</b>	<b>Total funds 2023 £</b>
Fundraising events	9,767	89,503	<b>99,270</b>

	<i>Restricted Funds - Branches 2022 £</i>	<i>Restricted funds 2022 £</i>	<i>Unrestricted funds 2022 £</i>	<i>Total funds 2022 £</i>
Fundraising events	5,296	221	106,996	112,513

**5. Investment income**

	<b>Restricted funds - Branches 2023 £</b>	<b>Unrestricted funds 2023 £</b>	<b>Total funds 2023 £</b>
Rental income	-	31,985	<b>31,985</b>
Bank Interest	156	3,484	<b>3,640</b>
	<u>156</u>	<u>35,469</u>	<u><b>35,625</b></u>

	<i>Unrestricted funds 2022 £</i>	<i>Total funds 2022 £</i>
Rental income	28,023	28,023
Bank Interest	186	186
Profit on disposal of fixed assets	907	907
	<u>29,116</u>	<u>29,116</u>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**5. Investment income (continued)**

**6. Other incoming resources**

	<b>Restricted Funds - Branches 2023 £</b>	<b>Unrestricted funds 2023 £</b>	<b>Total funds 2023 £</b>
Other Income	1,532	22,501	<b>24,033</b>
	1,532	22,501	<b>24,033</b>

	<i>Restricted Funds - Branches 2022 £</i>	<i>Unrestricted funds 2022 £</i>	<i>Total funds 2022 £</i>
Other Income	3,082	2,148	5,230
	3,082	2,148	5,230

**7. Expenditure on raising funds**

**Fundraising trading expenses**

	<b>Restricted funds - Branches 2023 £</b>	<b>Unrestricted funds 2023 £</b>	<b>Total funds 2023 £</b>
Expenditure on raising donations and legacies	-	7,444	<b>7,444</b>
Staging fundraising events	718	2,235	<b>2,953</b>
Fundraising for membership	-	936	<b>936</b>
Staff remuneration	-	66,281	<b>66,281</b>
General fundraising expenditure	-	21,964	<b>21,964</b>
Allocated centrally incurred fundraising and governance costs	-	24,229	<b>24,229</b>
	718	123,089	<b>123,807</b>
	718	123,089	<b>123,807</b>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**7. Expenditure on raising funds (continued)**

**Fundraising trading expenses (continued)**

	<i>Restricted funds - Branches 2022 £</i>	<i>Unrestricted funds 2022 £</i>	<i>Total funds 2022 £</i>
Expenditure on raising donations and legacies	-	15,292	15,292
Staging fundraising events	355	7,936	8,291
Fundraising for membership	-	1,529	1,529
Staff remuneration	-	118,368	118,368
General fundraising expenditure	-	26,442	26,442
Allocated centrally incurred fundraising and governance costs	-	27,490	27,490
	<u>355</u>	<u>197,057</u>	<u>197,412</u>

**8. Analysis of grants**

	<b>Grants to Institutions 2023 £</b>	<b>Grants to Individuals 2023 £</b>	<b>Total funds 2023 £</b>	<i>Total funds 2022 £</i>
Grants, A Connected and Supportive Community	1,003	179	<b>1,182</b>	-
Grants, Empower, Inform and Inspire	-	300	<b>300</b>	-
	<u>1,003</u>	<u>479</u>	<u><b>1,482</b></u>	<u>-</u>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**9. Analysis of expenditure on charitable activities**

**Summary by fund type**

	<b>Restricted funds - Branches 2023 £</b>	<b>Restricted funds - All other 2023 £</b>	<b>Unrestricted funds 2023 £</b>	<b>Total 2023 £</b>
Every Patient Every Time	-	345,248	189,381	<b>534,629</b>
A Connected and Supportive Community	151,884	64,676	63,291	<b>279,851</b>
Empower, Inform and Inspire	-	45,590	174,323	<b>219,913</b>
	<u>151,884</u>	<u>455,514</u>	<u>426,995</u>	<u><b>1,034,393</b></u>

	<i>Restricted Funds - Branches 2022 £</i>	<i>Restricted funds - All other 2022 £</i>	<i>Unrestricted funds 2022 £</i>	<i>Total 2022 £</i>
Every Patient Every Time	-	492,734	180,078	672,812
A Connected and Supportive Community	126,688	87,018	209,034	422,740
Empower, Inform and Inspire	-	53,979	171,803	225,782
	<u>126,688</u>	<u>633,731</u>	<u>560,915</u>	<u>1,321,334</u>

**10. Analysis of expenditure by activities**

	<b>Activities undertaken directly 2023 £</b>	<b>Grant funding of activities 2023 £</b>	<b>Support costs 2023 £</b>	<b>Total funds 2023 £</b>
Every Patient Every Time	445,170	-	89,459	<b>534,629</b>
A Connected and Supportive Community	263,757	1,182	14,912	<b>279,851</b>
Empower, Inform and Inspire	161,836	300	57,777	<b>219,913</b>
	<u>870,763</u>	<u>1,482</u>	<u>162,148</u>	<u><b>1,034,393</b></u>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**10. Analysis of expenditure by activities (continued)**

	<i>Activities undertaken directly 2022 £</i>	<i>Support costs 2022 £</i>	<i>Total funds 2022 £</i>
Every Patient Every Time	603,911	68,901	672,812
A Connected and Supportive Community	362,638	60,102	422,740
Empower, Inform and Inspire	166,683	59,099	225,782
	<u>1,133,232</u>	<u>188,102</u>	<u>1,321,334</u>

**Analysis of direct costs**

	<b>Every Patient Every Time 2023 £</b>	<b>A Connected and Supportive Community 2023 £</b>	<b>Empower, Inform and Inspire 2023 £</b>	<b>Total funds 2023 £</b>
Staff costs	235,262	40,892	152,275	<b>428,429</b>
Other staff costs	10,045	1,264	804	<b>12,113</b>
Courier & distribution of materials	1,835	3,791	2,841	<b>8,467</b>
Literature, brochures and information	7,494	4,500	4,590	<b>16,584</b>
Promotion of activities and materials	2,348	54,797	808	<b>57,953</b>
Organising professional events	99,275	6,219	343	<b>105,837</b>
External technical providers	87,237	2,391	175	<b>89,803</b>
Attending professional events	1,674	-	-	<b>1,674</b>
Branch network expenditure	-	149,903	-	<b>149,903</b>
	<u>445,170</u>	<u>263,757</u>	<u>161,836</u>	<u><b>870,763</b></u>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**10. Analysis of expenditure by activities (continued)**

**Analysis of direct costs (continued)**

	<i>Every Patient Every Time 2022 £</i>	<i>A Connected and Supportive Community 2022 £</i>	<i>Empower, Inform and Inspire 2022 £</i>	<i>Total funds 2022 £</i>
Staff costs	212,784	162,848	135,682	511,314
Other staff costs	5,301	1,000	268	6,569
Courier & distribution of materials	928	4,123	1,389	6,440
Literature, brochures & information	36,750	25,432	16,073	78,255
Promotion of activities and materials	8,855	21,472	2,364	32,691
Organising professional events	62,057	21,075	-	83,132
External technical providers	247,874	-	10,907	258,781
Attending professional events	29,362	-	-	29,362
Branch network expenditure	-	126,688	-	126,688
	<u>603,911</u>	<u>362,638</u>	<u>166,683</u>	<u>1,133,232</u>

**Analysis of support costs**

	<i>Every Patient Every Time 2023 £</i>	<i>A Connected and Supportive Community 2023 £</i>	<i>Empower, Inform and Inspire 2023 £</i>	<i>Total funds 2023 £</i>
Staff costs	38,666	6,444	24,972	70,082
Depreciation	159	27	103	289
Other staff costs	1,996	333	1,290	3,619
Premises costs	7,239	1,206	4,674	13,119
Travel & accommodation expenses	796	133	514	1,443
IT and Communications	12,425	2,071	8,025	22,521
Office costs	2,409	402	1,556	4,367
Insurance, legal & professional	11,910	1,985	7,692	21,587
Other support costs	669	112	432	1,213
Bank charges & interest	7,427	1,238	4,797	13,462
Governance costs	5,763	961	3,722	10,446
	<u>89,459</u>	<u>14,912</u>	<u>57,777</u>	<u>162,148</u>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**10. Analysis of expenditure by activities (continued)**

**Analysis of support costs (continued)**

	<i>Every Patient Every Time</i> 2022 £	<i>A Connected and Supportive Community</i> 2022 £	<i>Empower, Inform and Inspire</i> 2022 £	<i>Total funds</i> 2022 £
Staff costs	16,970	19,484	26,398	62,852
Depreciation	1,837	1,405	1,188	4,430
Other staff costs	1,428	1,091	924	3,443
Premises costs	21,956	16,791	14,207	52,954
Travel & accommodation expenses	586	450	379	1,415
IT and communications	8,442	7,357	4,562	20,361
Office costs	2,690	2,058	1,740	6,488
Conference costs	660	504	427	1,591
Insurance, legal & professional	8,844	6,763	5,723	21,330
Other support costs	146	113	94	353
Bank charges & interest	303	232	196	731
Governance costs	5,039	3,854	3,261	12,154
	<u>68,901</u>	<u>60,102</u>	<u>59,099</u>	<u>188,102</u>

**11. Auditors' remuneration**

	<b>2023</b> £	2022 £
Fees payable to the Charity's auditor for the audit of the Charity's annual accounts	<b>9,000</b>	9,000
Fees payable to the Charity's auditor in respect of: All non-audit services not included above	<b>3,000</b>	3,000
	<u><u>3,000</u></u>	<u><u>3,000</u></u>

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**12. Staff costs**

	<b>2023</b>	2022
	£	£
Wages and salaries	409,135	462,676
Social security costs	39,509	46,171
Contribution to defined contribution pension schemes	60,339	65,319
	<b>508,983</b>	<b>574,166</b>
	<b>508,983</b>	<b>574,166</b>

The average number of persons employed by the Charity during the year was as follows:

	<b>2023</b>	2022
	No.	No.
Employees	12	13
	<b>12</b>	<b>13</b>
	<b>12</b>	<b>13</b>

The number of employees whose employee benefits (excluding employer pension costs) exceeded £60,000 was:

	<b>2023</b>	2022
	No.	No.
In the band £100,001 - £110,000	1	1

Key management personnel consists of the CEO, Head of Communications and Fundraising, Head of Information and Support Services, Head of Policy and Health Services and the Head of Finance and Administration. The total employee remuneration and benefits of the key management personnel of the Charity were £259,185 (2022: £332,882). Please note that the Head of Communications and Fundraising left the organisation in June 2023.

**13. Trustees' remuneration and expenses**

During the year, no Trustees received any remuneration or other benefits (2022 - £NIL).

During the year ended 31 December 2023, expenses totalling £103.99 were reimbursed or paid directly to 1 Trustee (2022 - £67.50 to 2 Trustees). These expenses were in relation to travel expenses.

NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023

14. Tangible fixed assets

	Office equipment £
<b>Cost or valuation</b>	
At 1 January 2023	18,073
At 31 December 2023	<u>18,073</u>
<b>Depreciation</b>	
At 1 January 2023	17,741
Charge for the year	332
At 31 December 2023	<u>18,073</u>
<b>Net book value</b>	
At 31 December 2023	<u>-</u>
<i>At 31 December 2022</i>	<u>332</u>

15. Investment property

	Freehold investment property £
<b>Valuation</b>	
At 1 January 2023	650,000
Gain / (loss) on revaluation	5,000
At 31 December 2023	<u>655,000</u>

Investment property comprises residential flats let. The fair value of the investment property has been arrived at on the basis of a valuation carried out by an independent valuer with reference to market evidence of transaction prices for similar properties and a formal valuation made post the year end.. The valuation was made on an open market value basis.

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**16. Fixed asset investments**

	<b>Other fixed asset investments £</b>
At 1 January 2023	27,000
Disposals	(27,000)
<b>Net book value</b>	
At 31 December 2023	-
<i>At 31 December 2022</i>	<u>27,000</u>

**17. Debtors**

	<b>2023 £</b>	<b>2022 £</b>
<b>Due within one year</b>		
Trade debtors	21,057	8,840
Other debtors	6,410	24,655
Prepayments and accrued income	11,098	8,969
	<u>38,565</u>	<u>42,464</u>

**18. Creditors: Amounts falling due within one year**

	<b>2023 £</b>	<b>2022 £</b>
Bank loans	3,532	-
Trade creditors	97,757	116,434
Other taxation and social security	5,557	6,181
Other creditors	-	26,475
Accruals and deferred income	55,768	47,763
	<u>162,614</u>	<u>196,853</u>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**19. Creditors: Amounts falling due after more than one year**

	2023 £	2022 £
Bank loans	<u>295,429</u>	<u>-</u>

**20. Statement of funds**

**Statement of funds - current year**

	Balance at 1 January 2023 £	Income £	Expenditure £	Transfers in/out £	Gains/ (Losses) £	Balance at 31 December 2023 £
<b>Unrestricted funds</b>						
General Funds - all funds	<u>770,477</u>	<u>507,197</u>	<u>(550,084)</u>	<u>15,363</u>	<u>(10,432)</u>	<u>732,521</u>
<b>Restricted Funds - Branches</b>						
Branches	<u>265,269</u>	<u>154,399</u>	<u>(152,602)</u>	<u>(23,876)</u>	<u>-</u>	<u>243,190</u>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**20. Statement of funds (continued)**

	Balance at 1 January 2023 £	Income £	Expenditure £	Transfers in/out £	Gains/ (Losses) £	Balance at 31 December 2023 £
<b>Restricted funds - All other</b>						
Branch Development Fund	7,992	-	(1,335)	4,083	-	10,740
Fergus Rogers Fund	2,052	-	(300)	-	-	1,752
Aspiring to Excellence	42,234	121,000	(154,623)	-	-	8,611
Cimzia Select Programme	150	-	-	-	-	150
Ophthalmology / Gastroenterology project	855	-	(837)	-	-	18
Self Management Programme	21,067	40,962	(43,957)	-	-	18,072
Gold Standard Delay to Diagnosis	35,316	177,694	(199,739)	-	-	13,271
APPG	517	26,400	(26,229)	-	-	688
NASS Voices	3,493	-	(9,113)	5,620	-	-
Round Table	11,900	-	(3,600)	(1,190)	-	7,110
Health Inequalities	18,131	-	(15,781)	-	-	2,350
	<u>143,707</u>	<u>366,056</u>	<u>(455,514)</u>	<u>8,513</u>	<u>-</u>	<u>62,762</u>
<b>Total of funds</b>	<u><u>1,179,453</u></u>	<u><u>1,027,652</u></u>	<u><u>(1,158,200)</u></u>	<u><u>-</u></u>	<u><u>(10,432)</u></u>	<u><u>1,038,473</u></u>

NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023

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20. **Statement of funds (continued)**

Branch Network Funds

The Branch Network Funds support the local activities of NASS Branches, which offer regular physiotherapy or hydrotherapy sessions led by qualified instructors. Each Branch raises its funds and decides how to utilise them for specific activities. In the event of a branch ceasing operations, any remaining funds will be reclassified as unrestricted funds. A portion of these funds may be directed into the Branch Development Fund, to support our branches' continuous growth and development.

Branch Development Fund

The Branch Development Fund is created through donations from local NASS Branches. It aims to ensure the establishment and promotion of all Branches, and it provides start-up grants to new Branches and funds for ordering promotional materials such as posters and leaflets.

Fergus Rogers Fund

The Fergus Rogers Fund was established in memory of Fergus Rogers to assist people with axial SpA in purchasing specific items that can improve their quality of life. It is used to provide support for those in financial need to obtain essential items recommended by their healthcare professionals.

Aspiring to Excellence Fund

The Aspiring to Excellence Fund supports a multi-year quality improvement program to transform healthcare for people with axial SpA. The fund facilitates strategic partnerships between NASS, BRITSpA, and the NHS transformation unit, bringing together rheumatology teams and service improvement experts. It is utilised for various activities, including recruitment to the program, learning sessions, online coaching, podcasts, and the development of an audit tool to track the time to diagnosis.

Ophthalmology / Gastroenterology Project Fund

The Ophthalmology/Gastroenterology Project Fund supports the Gold Standard time to diagnosis program and its efforts to improve the identification and referral of suspected axial SpA in Ophthalmology and Gastroenterology. It finances the involvement of clinical associates from both specialities in gathering intelligence and understanding the current landscape. Additionally, the fund covers the development of educational materials, audits, posters, surveys, and policy reports.

The Self-Management Programme

The Self-Management Fund covers the costs of NASS's Supported Self-Management Program, which equips people with axial SpA with the skills and tools to manage their symptoms confidently. It supports various aspects of the program, including online resources, self-management sessions, and regional events held in conjunction with local NHS rheumatology departments.

Delay to Diagnosis - Gold Standard Fund

The Delay to Diagnosis - Gold Standard Fund is utilised to implement The Gold Standard Time to Diagnosis program for axial SpA. It supports various activities such as producing campaign impact reports, conducting economic analysis, delivering landscape reports, reviewing the use of MRI in diagnosis, and running public awareness campaigns.

NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023

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20. Statement of funds (continued)

Good Boost Fund

The Good Boost Fund was received from Innovate UK for the project 'Transforming older adult disability through virtual, peer-led community rehabilitation.' It finances the development of an online community for older adults with axial SpA. It covers staff salaries, platform development, and volunteer recruitment to lead virtual groups.

APPG (All Party Parliamentary Group) for Axial Spondyloarthritis Fund

The APPG Fund is established to oversee the implementation of the National Institute for Health and Care Excellence (NICE) guidelines for Spondyloarthritis and its Quality Standard. It supports the functioning of the parliamentary group. It is used to conduct meetings, national inquiries, and parliamentary receptions to engage with MPs on axial SpA NHS services.

NASS Voices

The NASS Voices Fund supports regional events to facilitate interactions between local people with axial SpA and their rheumatology healthcare professionals. It helps cover the costs of venue payments and other expenses for organising these events.

Round Table

The Round Table Fund supports wider policy work and national discussions on axial SpA in the UK. Although there was no activity in 2022, the fund is carried forward to continue its purpose in 2023.

Health Inequalities Fund

The Health Inequalities Fund finances a qualitative study focusing on people's experiences with axial SpA through the lens of sex, gender, and gender identity. It covers expenses related to recruitment for focus groups and data collection.

Members Day Fund

The Members Day Fund facilitates the annual Members Day and AGM events held in different towns/cities across the UK. It covers the costs of organising these events, including venue arrangements, speaker fees, workshops, and other activities for attendees.

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**20. Statement of funds (continued)**

**Statement of funds - prior year**

	<i>Balance at 1 January 2022 £</i>	<i>Income £</i>	<i>Expenditure £</i>	<i>Transfers in/out £</i>	<i>Gains/ (Losses) £</i>	<i>Balance at 31 December 2022 £</i>
<b>Unrestricted funds</b>						
General Funds - all funds	1,103,462	457,380	(757,972)	17,607	(50,000)	770,477
<b>Restricted Funds - Branches</b>						
Branches	298,771	118,099	(127,043)	(24,558)	-	265,269

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**20. Statement of funds (continued)**

**Statement of funds - prior year (continued)**

	<i>Balance at 1 January 2022 £</i>	<i>Income £</i>	<i>Expenditure £</i>	<i>Transfers in/out £</i>	<i>Gains/ (Losses) £</i>	<i>Balance at 31 December 2022 £</i>
<b>Restricted funds - All other</b>						
Branch Development Fund	4,592	-	(600)	4,000	-	7,992
Fergus Rogers Fund	2,052	-	-	-	-	2,052
Aspiring to Excellence	149,638	115,938	(223,342)	-	-	42,234
Cimzia Select Programme	150	-	-	-	-	150
Ophthalmology / Gastroenterology project	9,205	-	(8,350)	-	-	855
Self Management Programme	15,241	49,972	(44,146)	-	-	21,067
Gold Standard Delay to Diagnosis	120,584	200,838	(286,106)	-	-	35,316
Good Boost	165	9,752	(9,917)	-	-	-
APPG	3,922	27,600	(31,005)	-	-	517
NASS Voices	1,993	2,000	(500)	-	-	3,493
Round Table	11,900	-	-	-	-	11,900
Health Inequalities	-	18,459	(328)	-	-	18,131
Members Day	-	26,486	(29,437)	2,951	-	-
	<u>319,442</u>	<u>451,045</u>	<u>(633,731)</u>	<u>6,951</u>	<u>-</u>	<u>143,707</u>
<b>Total of funds</b>	<u><u>1,721,675</u></u>	<u><u>1,026,524</u></u>	<u><u>(1,518,746)</u></u>	<u><u>-</u></u>	<u><u>(50,000)</u></u>	<u><u>1,179,453</u></u>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**21. Summary of funds**

**Summary of funds - current year**

	<b>Balance at 1 January 2023 £</b>	<b>Income £</b>	<b>Expenditure £</b>	<b>Transfers in/out £</b>	<b>Gains/ (Losses) £</b>	<b>Balance at 31 December 2023 £</b>
General funds	770,477	507,197	(550,084)	15,363	(10,432)	732,521
Restricted funds- Branches	265,269	154,399	(152,602)	(23,876)	-	243,190
Restricted funds	143,707	366,056	(455,514)	8,513	-	62,762
	<u>1,179,453</u>	<u>1,027,652</u>	<u>(1,158,200)</u>	<u>-</u>	<u>(10,432)</u>	<u>1,038,473</u>

**Summary of funds - prior year**

	<i>Balance at 1 January 2022 £</i>	<i>Income £</i>	<i>Expenditure £</i>	<i>Transfers in/out £</i>	<i>Gains/ (Losses) £</i>	<i>Balance at 31 December 2022 £</i>
General funds	1,103,462	457,380	(757,972)	17,607	(50,000)	770,477
Restricted Funds- Branches	298,771	118,099	(127,043)	(24,558)	-	265,269
Restricted funds	319,442	451,045	(633,731)	6,951	-	143,707
	<u>1,721,675</u>	<u>1,026,524</u>	<u>(1,518,746)</u>	<u>-</u>	<u>(50,000)</u>	<u>1,179,453</u>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**22. Analysis of net assets between funds**

**Analysis of net assets between funds - current year**

	<b>Restricted Funds - Branches 2023 £</b>	<b>Restricted funds - All other 2023 £</b>	<b>Unrestricted funds 2023 £</b>	<b>Total funds 2023 £</b>
Investment property	-	-	655,000	<b>655,000</b>
Current assets	243,190	62,762	535,564	<b>841,516</b>
Creditors due within one year	-	-	(162,614)	<b>(162,614)</b>
Creditors due in more than one year	-	-	(295,429)	<b>(295,429)</b>
<b>Total</b>	<b>243,190</b>	<b>62,762</b>	<b>732,521</b>	<b>1,038,473</b>

**Analysis of net assets between funds - prior year**

	<i>Restricted funds - Branches 2022 £</i>	<i>Restricted funds - All other 2022 £</i>	<i>Unrestricted funds 2022 £</i>	<i>Total funds 2022 £</i>
Tangible fixed assets	-	-	332	332
Fixed asset investments	-	-	27,000	27,000
Investment property	-	-	650,000	650,000
Current assets	265,269	143,707	289,998	698,974
Creditors due within one year	-	-	(196,853)	(196,853)
<b>Total</b>	<b>265,269</b>	<b>143,707</b>	<b>770,477</b>	<b>1,179,453</b>

NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY

NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023

**23. Reconciliation of net movement in funds to net cash flow from operating activities**

	2023 £	2022 £
Net expenditure for the year (as per Statement of Financial Activities)	<b>(140,980)</b>	(542,222)
<b>Adjustments for:</b>		
Depreciation charges	<b>332</b>	5,402
(Gains)/losses on investments	<b>10,432</b>	77,000
Dividends, interests and rents from investments	<b>(35,625)</b>	(28,209)
Decrease in debtors	<b>3,899</b>	72,597
Increase in creditors	<b>261,190</b>	148,082
<b>Net cash provided by/(used in) operating activities</b>	<b>99,248</b>	(267,350)

**24. Analysis of cash and cash equivalents**

	2023 £	2022 £
Cash in hand	<b>802,951</b>	656,510
<b>Total cash and cash equivalents</b>	<b>802,951</b>	656,510







**25. Analysis of changes in net debt**

	At 1 January 2023 £	Cash flows £	At 31 December 2023 £
Cash at bank and in hand	<b>656,510</b>	<b>146,441</b>	<b>802,951</b>
Debt due within 1 year	-	<b>(3,532)</b>	<b>(3,532)</b>
Debt due after 1 year	-	<b>(295,429)</b>	<b>(295,429)</b>
	<b>656,510</b>	<b>(152,520)</b>	<b>503,990</b>



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By:	External Accounts BKL (externalaccounts@bkl.co.uk)
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**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

England & Wales - Charity number 1183175

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# Accounts

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**Axial SpA  
works silently.  
We don't.**

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**TRUSTEES' REPORT AND FINANCIAL STATEMENTS**

**FOR THE YEAR ENDED 31 DECEMBER 2022**

CONTENTS

	Page
<b>Reference and administrative details of the Charity, its Trustees and advisers</b>	1
<b>Trustees' report</b>	2 - 19
<b>Independent auditors' report on the financial statements</b>	20 - 24
<b>Statement of financial activities</b>	25 - 26
<b>Balance sheet</b>	27
<b>Statement of cash flows</b>	28
<b>Notes to the financial statements</b>	29 - 50

## NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY

### REFERENCE AND ADMINISTRATIVE DETAILS OF THE CHARITY, ITS TRUSTEES AND ADVISERS FOR THE YEAR ENDED 31 DECEMBER 2022

<b>Trustees</b>	Rajeevendra Kumar Mahapatra, Chair Nicholas Reid, Treasurer (elected 25 September 2022) Dr Antoni Tuck Yin Chan, Trustee Gillian Eames, Trustee Nicholas Clarke, Trustee (retired 25 September, 2022) Paul Curry, Trustee (re-elected 25 September 2022) Poppy Hocken, Trustee Claire Jeffries, Trustee Dr Jacqueline Harris, Trustee Dr Lesley Jane Kay, Trustee Patricia O-Callaghan, Trustee (retired 28 June, 2022) Danny McFarlane, Trustee (retired 25 September, 2022) Hannah Elizabeth Murphy, Trustee Prof Hasan Imam Syed Tahir, Trustee (elected 25 September 2022) Alexia Katherine Dreese Granatt, Trustee (elected 25 September 2022)
<b>Charity registered numbers</b>	1183175 and SC049746
<b>Principal office</b>	Unit 6 Cambridge Court 210 Shepherds Bush Road London W6 7NJ
<b>Independent auditors</b>	BKL Audit LLP 35 Ballards Lane London N3 1XW
<b>Bankers</b>	Barclays Bank UK Plc 1 Churchill Place London E14 5HP

TRUSTEES' REPORT  
FOR THE YEAR ENDED 31 DECEMBER 2022

The Trustees present their annual report together with the audited financial statements of the National Axial Spondyloarthritis Society for the year 1 January 2022 to 31 December 2022.

## Objectives and activities

NASS' vision is as follows:

*"The future we want to create is one where every person with axial spondyloarthritis (axial SpA) has timely and effective diagnosis, treatment and care, is empowered to make informed health choices and feels part of a supportive community."*

The Charity seeks to do this by:

- providing information to the general public about axial SpA, and advice to people living with the condition, their families, carers, service-providers and employers
- advocating to ensure that every person with axial SpA has timely and effective diagnosis, treatment and care
- funding and disseminating research and analysis to advance scientific understanding of the condition and its effective treatment.

### a. Policies and objectives

In setting objectives and planning for activities, the Trustees have given due consideration to general guidance published by the Charity Commission relating to public benefit, including the guidance 'Public benefit: running a charity (PB2)'. NASS provides public benefit by:

- working with statutory bodies and others that provide for the treatment and welfare of people affected by axial SpA
- educating people affected by axial SpA, as well as healthcare professionals and the public, on the problems related to it
- putting people affected by axial SpA in contact with expert advisers
- promoting research into the management and cure of axial SpA and its causes
- disseminating the results of research related to axial SpA.

In so doing, NASS improves the lives of those affected by axial SpA, particularly in relation to their ability to contribute positively to the prosperity of their communities and the country as a whole.

### b. Strategies for achieving objectives

In accordance with the provisions set out in its Constitution, the Trustees have adopted the following strategy for the period 2020 – 2024 to meet NASS' principal objects:

#### To ensure that people with axial SpA receive timely diagnosis, effective treatment and care

- Maintain pressure at national level to ensure effective and widespread implementation of the NICE Guideline and Quality Standard for axial SpA
  - Continue to run an All Party Parliamentary Group for axial spondyloarthritis
  - Undertake Parliamentary work in the devolved nations
  - Develop and publish a Gold Standard time to diagnosis route map
  - Commission research on the economic consequences of a delay to diagnosis
  - Create impactful ways to engage primary care professionals and those in appropriate secondary care services to ensure that they identify and refer patients who may have axial SpA

**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2022**

- Form an alliance to protect NHS hydrotherapy services
- Develop a primary care clinical champions programme
- Continue to work in partnership with professional bodies
- Support rheumatology and other services to test approaches to improving diagnosis and treatment and spread the learning across the UK
  - Expand the *Aspiring to Excellence* healthcare improvement programme
  - Ensure that patient values and needs underpin NHS service delivery
  - Disseminate learning from *Aspiring to Excellence*
  - Raise awareness among those working in emergency care and NHS 111

To empower, inform and inspire people affected by axial SpA

- Ensure that everyone affected by axial SpA has access to personalised support and the best information about the condition
  - Extend personalised support through our Helpline service, and reliable and user-friendly information resources for everyone affected by axial SpA
- Promote physical activity, and support and motivate people to exercise
  - Support and develop the NASS branch network to continue to ensure people can access regular group, physiotherapy led exercise sessions
  - Support and motivate people to confidently and safely exercise independently
- Ensure that everyone affected by axial SpA has the skills, confidence and knowledge they need to manage their condition optimally
- Develop a face-to-face self-management pilot programme and roll out if successful
- Consider an online version of a self-management programme for NASS members

To foster a connected and supportive community, raising axial SpA awareness everyday, everywhere

- Conduct public awareness campaigns using various methods and channels to try and increase knowledge. Chiefly this activity will include:
  - Using case studies of people living with axial SpA to generate media coverage
  - Encouraging our members and supporters to become advocates for NASS and campaigners for improvements in axial care
  - Online and social media campaigns to create interest and inform the public
  - Using related national and international awareness days
  - Create an active community of NASS members and supporters who work together
  - Make more use of online tools such as Facebook Live for streaming events, conversations and debates, to encourage participation and engagement
  - Increase our online supporter numbers through social media promotion, listening, and outreach to potential supporters
  - Encourage members and supporters to take up fundraising activity for NASS, whether large-scale challenge events or activity such as raffles and coffee mornings
- Ensure that people know what NASS stands for, the changes that we are seeking to bring about, and how we operate
  - Offer thought leadership and op-ed pieces from the CEO, Chair and other key colleagues to professional and trade outlets, and also for mainstream health outlets.
  - Use social media listening techniques to reach out to people talking about axial SpA, making them aware of NASS and its resources
  - Develop annual membership campaigns to increase the number of members and membership revenue
  - Seek opportunities to outreach through external events outside of the sector at which NASS can contribute and have visibility.

**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2022**

**c. Activities undertaken to achieve objectives and achievements**

**Introduction**

2022 was a very successful year for NASS. Our large programmes – reducing diagnostic delay, improving the quality of care, and supporting self-management – made significant progress and extended their reach. Our Helpline and Information service continued to meet very high levels of demand and our national network of branches started to return to some sense of normality following the pandemic. Our profile – within Government, the NHS, the media and social media – was extended.

COVID-19 continued to impact significantly on our work. Although total numbers of enquiries to the helpline and information service dropped from their peak in 2021, demand was still higher than pre-COVID. This situation is likely to continue in the short term, so in 2023 we will seek to maintain our self-management programme as well as our extended helpline opening hours and benefits advice support.

There are chronic workforce shortages in hospital rheumatology departments across the UK. The severe understaffing has led to long waiting times and delays in care. Our helpline regularly speaks to patients who find calls to rheumatology department helplines go unreturned, whose appointments are cancelled after months of waiting and who find referrals to physiotherapy or occupational therapy are never followed up. This puts more pressure on NASS services and makes it even more critical that we work to help inform people about axial SpA and how they can self-manage their condition.

The economic climate has deteriorated, with a cost of living crisis and high inflation. This is likely to impact negatively on our fundraised income, increase our costs and increase the volume of callers to our information and support service. A recent YouGov poll found that 21% of people are donating less than usual to charities because of the economic situation. However, in the same poll, 20% also report that they are more likely to donate their time and 21% said that they are more likely to campaign for a charitable cause. In 2023 we will strengthen our volunteer base wherever possible and tap into the other non-cash assets of our supporters.

We were able to maintain and extend the visibility of our work on improving diagnosis and care at a time when the NHS is under enormous pressures and there is a general sense of fragility in rheumatology services. As a patient organisation we have an important role in holding up a mirror to the NHS. Our challenge is to frame our work in such a way that it will engage rather than alienate healthcare professionals (HCPs).

**Reducing diagnostic delay**

It should be possible for every person experiencing symptoms of axial spondyloarthritis (axial SpA) to receive a diagnosis within one year of symptom onset. In 2020, respondents to our national consultation process – HCPs, professional bodies and patients – all agreed that this ambition could be realised, and in June 2021 NASS published a route map to achieve a Gold Standard time of one year.

Starting from a current baseline average of 8.5 years, the achievement of this goal will require transformational change. This includes a significant increase in awareness of the condition among HCPs and the general public, a critical mass of clinical leaders who will drive up health care performance in axial SpA, the widespread use of technology to ensure that axial SpA is higher within clinical reasoning and to support diagnosis, the routine use of pathways to ensure that patients are referred directly to rheumatology for assessment, and consistent use of agreed national protocols for imaging.

Above all, to attain such a dramatic change in time to diagnosis we must win hearts and minds, build a social movement of people who want to work with us to create change, and demonstrate proof of concept for our ideas.

2022 was the first full year of implementation of our route map.

**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2022**

Making the case for change

We have been successful in making the case for change through national inquiries, Freedom of Information (FOI) requests and research studies:

- We commissioned and published the first economic model of the economic costs of delayed diagnosis. It estimated that the cost to the UK economy is £18.7 billion per year, and the total average cumulative cost per person of an 8.5 year wait is £193,512, most of which is borne by the individual.
- We used a FOI request to assess the current provision across the UK in direct internal referrals to rheumatology from the key specialities of Dermatology, Gastroenterology and Ophthalmology, including the methods used, screening tools and the ability of providers to track internal referral volumes and an estimation of current frequency of referrals. We proposed four recommendations aimed at ensuring delays to direct referrals are reduced.
- We undertook an analysis via a FOI of the UK wide use of MRI in the diagnosis of axial SpA, comparing the changes since an initial review in 2017 and the publication of consensus guidance in 2019.
- We collaborated with the British Society of Gastroenterology and Chron's and Colitis UK on a landscape review to help us understand awareness of axial SpA in the speciality, the practise and confidence in referring into rheumatology and the tools in place to help this.
- We partnered with Moorfields Eye Hospital and the Royal College of Ophthalmologists and began work on a landscape review to help us understand the awareness of axial SpA in the speciality, the practise and confidence in referring into rheumatology and the tools in place to help this.

We brought these results to the attention of Government Ministers, other parliamentarians, policymakers and HCPs:

- In June, we shared the economic modelling results with the relevant Minister in the Department of Health and Social Care and discussed the importance of raising public awareness in reducing time to diagnosis.
- We influenced the funder of the National Early Inflammatory Arthritis Audit to include new datapoints on time to diagnosis so that, for the first time, we will have comprehensive national audit data to track changes in performance in axial SpA.
- We supported the best MSK/GIRFT programme to embed our approach in a new national axial SpA patient pathway.
- We presented our findings on the impact of the programme to the All Party Parliamentary Group for axial SpA.
- We presented our burning platform to British and European health conferences and regional SpA academies.

Raising public awareness about early diagnosis

Raising public awareness about axial SpA and inflammatory back pain is key to earlier diagnosis. We demonstrated proof of concept in our public awareness campaign which since its launch has reached almost 2,000,000 people through social media. In addition, 1,000,000 people watched our campaign videos. There were 106,000 visits to our bespoke diagnosis website, over 20,000 visited our online symptom checker and 9,000 completed the symptom checker. Key campaign content included:

- A set of campaign videos, including three comedy hero videos to motivate a cold audience aged 40 under who are on social media to find out more about axial SpA. People who watch the videos were retargeted with case study videos and digital ads that feature SPINE acronym.
- A set of digital ads that use the SPINE acronym, to increase recognition of the five key symptoms of axial SpA. The ads drive people to the symptoms checker on [www.actonaxialspa.com](http://www.actonaxialspa.com)
- A series of videos telling stories about life with axial SpA.
- Two videos featuring case studies of people who faced financial insecurity, while they waited for a diagnosis, one of which was a finalist in the Charity Film Awards.

**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2022**

Raising clinical visibility for axial SpA in primary care

The lengthiest part of the delay in diagnosis is in primary care. We sought to address this by creating a cadre of clinical champions in primary care and community services whose work would ensure that axial SpA is higher within the clinical reasoning of primary care professionals, so that patients who present with suspected axial SpA are identified at the first presentation and urgently referred to rheumatology.

We appointed the NHS Transformation Unit as our technical provider to design and deliver *Champions in Primary Care* and, following a competitive process, we offered places to twelve primary care professionals to be Champions. At the end of September our 12 *Champions in Primary Care* started their journey. Over the next two years they will:

- Receive leadership development support, training in the theory and methods of quality improvement and assistance with identifying and implement improvement projects which they will test and refine
- Work together in a national network to foster community-building, the exchange of ideas and good practise and act as catalysts for change
- Co-create a body of knowledge, methods, tools and experience, and work to share their learning with primary and community services.

We also secured an agreement with the University of Nottingham for the *Champions in Primary Care* to act as pilot sites for an axial SpA pop up tool in the medical records system which alerts the GP to suspected axial SpA. A webinar was held in late November to introduce the tool to them and agree how it can be adopted.

At the end of 2022, the All Party Parliamentary Group on axial SpA published the results of a new Inquiry into the implementation of NICE Guideline 65 (NG65).

Engaging healthcare professionals (HCPs)

We carried out focus group work with HCPs about the drivers and barriers in relation to the delay to diagnosis, what tools they feel would assist them and how they would like to engage in a peer-to-peer support network. From those discussions, we will develop a campaign that includes rheumatology department visits, the development of a toolkit of resources for HCPs, the creation of a peer to peer network to provide support, and the creation of a Change Maker award to acknowledge the work of those who have demonstrated significant progress in implementing the gold standard time to diagnosis.

Creating national level data to measure the time to diagnosis

Without large scale UK data on the time to diagnosis we will be unable to monitor with accuracy any changes. England and Wales have the National Early Inflammatory Arthritis Audit, but it contains very little information about axial SpA. However, we were successful in influencing the funder of the audit to contain new data points about diagnostic delay which will be implemented from mid 2023.

In addition, we developed a new audit tool to understand how we are influencing and catalysing change to drive down diagnosis with the 19 departments involved in our *Aspiring to Excellence* programme (see later). A group of participating clinicians worked with us to create the audit tool which went live in October. We will provide a first report in September 2023.

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2022

**Helping people to live well with axial SpA**

Helpline and information services

The COVID-19 pandemic placed unprecedented stress on the NHS. With many patients unable to access rheumatology services, the demand for our services was greater than ever. Helpline contacts for 2021 (7434) were a third higher than for 2020 (5632), and 50% higher than 2019. In 2022, we supported 6,945 people, a drop of only 9% from the previous year. It demonstrated the continued backlog facing rheumatology coming out of the pandemic. There was also a noticeable number of calls on the NASS helpline relating to people who are having economic difficulties and have turned to NASS for help and advice.

*"Honestly thank you so much for all of this information and thank you for understanding. I know it's hard for people without this to quite comprehend what an AS sufferer deals with on a daily basis. I am truly amazed at all the help you guys are giving."*

In 2022 we wrote 229 letters in support of disability benefit claims which resulted in approximately £1,000,000 of benefits being awarded.

*"I am very relieved to have finally got the award as it's been a stressful time for me. I doubt I would have got that if it wasn't for your letter. Thank you so much. They said the evidence submitted was excellent so that there was no need for an assessment in person."*

Our national network of NASS branches

As life began to return to normal after COVID-19, our branches returned to normality, providing vital physiotherapy and hydrotherapy support to thousands of people living with axial SpA. By December 2022, 65 branches were active again. The return to physical sessions has represented a great deal of hard work by the volunteers involved in NASS branches. Few have simply been able to return to sessions as they were pre-COVID. Instead, they have had to find new ways of working and, in a number of cases, find new venues. Five branches sadly closed, but three new branches opened. Our new branches cover Cheltenham and Gloucester, Nottingham and Cornwall.

Helping people to self-manage effectively

Our self-management programme aims to help people build the skills and confidence they need to take control of their axial SpA and their life. On average, someone with axial SpA might spend two hours each year with a healthcare professional discussing their axial SpA. That leaves 8,758 hours where they have to manage their condition on their own.

In 2022 we ran 34 My AS, My Life Facebook Live sessions. There were over 77,500 views of our sessions on Facebook and YouTube. Since April 2020, we have run 102 sessions with over 263,000 views. Evaluation shows that 90% of users feel more connected to other people with the condition, 88% understand more about axial SpA after watching the sessions and 80% feel more confident managing the condition as a consequence.

*I want to say a huge thank you. My anti-TNF stopped working, leading to a rather rough year. I can't express how much your videos have helped and been a real comfort.*

In addition, we established a regional self-management programme in collaboration with local rheumatology departments. We ran 28 online sessions with 11 rheumatology departments, reaching 649 people with axial SpA. We presented the evaluation results at the British Society of Rheumatology conference and won a prize for best conference poster. We also published an article on the programme in *OT News*, the member magazine for the Royal College of Occupational Therapists.

We acquired funding for an online learning programme (*Your SpAce*). Over the summer- we ran an online consultation with people living with axial SpA along with rheumatology consultants, physiotherapists, occupational therapists, researchers and nurses. It was agreed that *Your SpAce* should be aimed at people at

**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2022**

any stage of their axial SpA journey, but particularly those at the start of their journey. Additionally, we wanted to bring in people who are less motivated and those feeling isolated.

The consensus was that *Your SpAce* should be bite sized, sharp and easily digestible. It should be active, engaging and upbeat. Most importantly, it should not be linear – people should choose their own route through the resources. In early 2023 we will launch a series of short videos with signposting to longer videos and downloadable resources for those who want to learn more. As part of *Your SpAce* there will be monthly meetups so people can meet others and share experiences.

Self-management podcast

NASS was one of six patient organisations invited to be involved in the One Immune Voice podcast series. The focus was on supporting people living with autoimmune and immune-mediated conditions, and their carers.

Ensuring access to hydrotherapy

Hydrotherapy, also known as aquatic physiotherapy, provides vital support to people with axial SpA, particularly to those unable to tolerate land-based therapy. However, hydrotherapy services are often a target for NHS budget cuts. In 2021 we created the Aquatic Physiotherapy and Hydrotherapy Alliance. Members include the Chartered Society of Physiotherapy, the Aquatic Therapy Association of Chartered Physiotherapists (ATACP), Arthritis Action, Muscular Dystrophy UK, Good Boost, Swim England and Versus Arthritis. In 2022 it:

- Undertook a Freedom of Information (FOI) request to all NHS Trusts and Health Boards in the UK to determine current hydrotherapy in the NHS
- Surveyed all ATACP members to glean their intelligence about the provision of hydrotherapy in the NHS
- Published a report containing a compilation of the current research as well as FOI results
- Created resources to promote and save pools, as well as template letters and press releases
- Made a research application for a qualitative study.

**Supporting healthcare professionals to improve the quality of care**

In 2019 we established a quality improvement programme called *Aspiring to Excellence*. Delivered by our partner the NHS Transformation Unit, the programme provides education, team coaching and a national learning network to those participating. In 2022 we welcomed a further eight rheumatology departments – giving a total of 19.

We continued to disseminate learning from the programme. This included the launch of a set of six new CPD accredited podcasts called *Rheum for Improvement*. The podcasts share service improvement innovations from HCPs who work with axial SpA patients. We also launched a series of blogs showing how the teams are using quality improvement methods.

It's important to ensure that rheumatology care is underpinned by a clear patient perspective. To this end, we commissioned Headstrong Thinking Limited to survey more than 900 people living with axial SpA about their values and needs from axial SpA care and launched the report at a Parliamentary reception in November.

We created a service improvement video involving NASS CEO and one of our rheumatologists in a discussion of issues being faced by primary and secondary care in the diagnosis and treatment of axial SpA, and the action NASS is taking to work together with healthcare professionals to change this. This was the most watched video at the British Society of Rheumatology conference in April 2022.

**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2022**

**Raising the profile of axial SpA within Government**

In 2019 we worked with Parliamentarians to create an All Party Parliamentary Group on axial SpA with the aim of providing national level oversight of the implementation of NICE Guideline 65 concerning the diagnosis and treatment of spondyloarthritis.

The eighth meeting of the APPG was held in May, with a focus on the role of rheumatology physiotherapy and the current work force crisis in rheumatology. The ninth meeting occurred in May and took the form of a landscape review.

The APPG commissioned a second FOI Request to all NHS Trusts and Health Boards regarding the implementation of the NICE Guideline on the diagnosis and management of spondyloarthritis. We published the report at a Parliamentary reception in November.

In June, NASS CEO Dale Webb met with the then Minister for State for Care and Mental Health Gillian Keegan to discuss the possibility of government support for an awareness campaign on axial SpA.

We also worked with the new musculoskeletal clinical leads in the Welsh Government, and continued to support Scotland's Cross Party Group on Arthritis and Musculoskeletal Conditions.

**Women and axial SpA – tackling inequalities**

Women and axial SpA has long been an issue that needs to be addressed. Women have a longer time to diagnosis than men (prompted in part by a lack of awareness in primary care). We secured funding to commission research from Headstrong Thinking on gender and gender identity in axial SpA which we will publish in 2023. We are also supporting a research application on pregnancy led by University College London Hospitals.

**Ensuring effective switching to biosimilars**

In 2018 Humira lost its patent and biosimilars entered the UK market. Due to the available cost savings, this meant that people taking Humira for a range of conditions were switched across to the new biosimilar medications. During this process NASS was part of an NHS England steering group with other patient organisations including the National Rheumatoid Arthritis Society, Crohn's and Colitis UK and the Psoriasis Association. The four patient associations ran a joint survey asking people for their experience of the switch process. We were particularly keen to learn whether patient consent was obtained before switching. Over 900 people took part, and a paper was published in the *British Medical Journal*.

**Supporting good emotional wellbeing research**

In summer 2019, NASS funded King's College London to carry our research into the emotional impact of living with axial SpA. Over the past three years they have carried out a diary study, depth interviews and focus groups. The researchers produced a narrative report for NASS along with a short animation and gave presentations at scientific conferences.

**Media engagement**

We were successful in securing articles in the broadcast and print media about axial SpA:

- *The Times* (in-print and online) ran a story on our research which shows women wait longer for a diagnosis of axial SpA than men
- Our report about the economic cost of delayed diagnosis received coverage on *Sky News Radio* and in *The Daily Express* and *The Limbic*
- *Women* magazine published a feature article about the struggles NASS community member Amy Fisher experienced as she waited for a diagnosis
- *ITV Tonight* featured a story of NASS community member Rowan Lutton. Rowan faced a five-year delay to

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2022

- diagnosis and believes her gender played a part in this
- NASS trustee Gillian Eames was interviewed for the *Grumpy Gits* podcast about her life with axial SpA. It is the world's most listened to podcast on disability issues.

### Social media

We continued to reach and engage broader audiences on social media, creating a sense of community and sharing stories about people's experiences of life with axial SpA. We grew our followership, with over 42,000 followers across social media:

- 25,158 followers on Facebook
- 3,665 followers on Instagram
- 7,414 followers on Twitter
- 792 followers on LinkedIn
- 6,200 subscribers on YouTube.

### Membership

Our members are the lifeblood of the society. In 2022, our membership grew by 2.5% to 4,164. We held another successful Members Day and scheduled in NASS Voices events in Glasgow and Cardiff for early 2023.

#### d. Key performance indicators

Performance against key indicators was as follows:

- **Return on Investment (ROI) by fundraising channel.** We want to ensure that our income generation activities are optimizing income in an efficient way. We achieved ROI ratios as follows (target ratios are in parenthesis): subscriptions 9:1 (9:1), donations 6:1 (6:1), Trust Fundraising 6:1 (10:1), Community 2:1 (5:1), Events 6:1 (5:1), Trading 8:1 (8:1). In 2023 we will strengthen data segmentation, to understand donor behaviour and be more targeted in our communications. We will also focus on building relationships with people with a higher net worth to increase their engagement in giving and fundraising
- **% of expenditure on charitable activities.** In 2022 75% of our expenditure was charitable, with a target of 70-80%
- **Total annual value of successful benefit applications for our members.** We again helped members to secure £1,000,000 of welfare support payments
- **Number of people accessing our website information pages:** 294,000
- **Numbers of people accessing our Facebook Live sessions:** 77,500
- **Helpline requests processed within two working days:** 97% (target is 95%).

#### e. Volunteers

NASS is heavily dependent on 250 volunteer members who provide support at branch level. Volunteer members are unpaid and NASS' accounts do not reflect the value to NASS of the many hours work provided free to NASS. The Trustees are fully conscious of this value and recognise that the work of NASS would be considerably curtailed without the support provided by volunteer members.

Our 80 NASS branches offer regular, physiotherapist-led group exercise for anyone living with axial SpA. They are sub-committees of NASS and are led by a committee usually comprising a Chair, Treasurer and Secretary. We support our branches with a suite of resources, regular promotion of their activities, online meetings and a named member of staff who is available Monday to Friday to help with any problems or issues.

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2022

**f. Fundraising activities and income generation**

**Raising funds for NASS**

Thank you to everyone who supported us in 2022 by donating or fundraising. We don't receive public funding and couldn't do our work without the generosity of our supporters. The money we raise ensures that we're here to transform axial SpA diagnosis and care, and offer practical support and advice to anyone affected by the condition. In 2022 our fundraising activities included:

**Community and events fundraising:** 294 people took part in a fundraising event. Thank you to everyone who took part in Walk Your AS Off, Stretch-tember, took on a challenge event, or organised their own fundraising.

**Donations and individual giving:** Despite a cost-of-living crisis 728 people gave a cash gift. Whether you gave a one-off cash gift, a regular donation, a gift in celebration or gave to our Spring or Winter Appeal, we want to thank you for your generosity.

**Legacy fundraising:** We are extremely grateful to everyone who leaves a gift in their Will. We received income from five legacies in 2022.

**Trading:**

We want to thank everyone who took part in a raffle, made a bid in one of our online auctions or bought one of our Christmas Cards in 2022.

**Trust fundraising:** we would like to thank the following charitable Trusts that supported us in 2022 collectively giving £64,000.

Douglas Heath Eves Charitable Trust  
John Coates Charitable Trust  
Lord Leverhulme's Charitable Trust  
Margaret Jeannie Hindley Trust  
Marsh Christian Trust  
Miss M E Swinton Paterson's Charitable Trust  
Souter Charitable Trust  
Stoke-on-Trent and North Staffordshire CCGs Long Term Condition Support Fund  
The Bernadette Charitable Trust  
The February Foundation  
The Forrester Family Trust  
The G C Gibson Charitable Trust  
The Garfield Weston Foundation  
The Hamilton Wallace Trust  
The Hospital Saturday Fund  
The Mary Homfray Charitable Trust  
The Michael Cornish Charitable Trust  
The Purey Cust Trust CIO  
The Shanly Foundation  
The Simon Gibson Charitable Trust  
The Walter Guinness Charitable Trust  
The William Webster Charitable Trust

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2022

We would also like to thank the following companies that supported us in 2022:

AbbVie Ltd	£30,400
Biogen Idec Ltd	£30,000
Eli Lilly and Company	£30,000
Innovate UK	£11,145
Janssen-Claig Limited	£6,320
Novartis Pharmaceuticals UK Ltd	£115,688
UCB Pharma Ltd	£265,789

Any relationship NASS has with a pharmaceutical company is underpinned by the following principles:

- **Independence** – The independence of NASS must not be compromised by the relationship with an external organisation or by the agreed working arrangements. The financial benefit must be made available for the support of our charitable activities without restriction. We will not allow funders to influence our campaigning, policymaking, research or fundraising for their own purposes. We will ensure our editorial independence is maintained and all information produced by NASS will be based on the latest evidence, informed by our Medical Advisory Board
- **Transparency** – Any relationship with an external organisation is not an endorsement of their product or organisation and will be made transparent to our members, supporters, staff and the general public including in our annual Report and Accounts. All partnerships will be governed by a written agreement which will detail requirements and expectations from each party
- **Benefit for those living with axial SpA** – Any relationship formed with an external organisation must be positive for NASS members and people living with axial SpA and in furtherance of our charitable aims
- **Regulation and good practice** – All funders must comply with all relevant laws and regulations, as well as good practice. This includes full compliance with the Association of the British Pharmaceutical Industry's Code of Practice
- **Use of NASS logo** - our logo may only be used following written approval from NASS. We may use a funder's mark where relevant to the relationship including in webinars, event banners, on our website or on press releases where appropriate. The use of a funder's trademark will have no impact on the independence of the charity
- **Sharing expertise and knowledge** - We will work with funders to share non-product expertise and knowledge. This may include participation in networking events and meetings
- **Privacy policy** - In line with our privacy policy NASS will not, under any circumstances, share the personal data of any of our service users or supporters with a pharmaceutical company
- **Alignment with our strategy and values** - Any collaboration or cooperation with pharmaceutical companies will be assessed against the ethics, desirability and practicality in relation to the overall plans and work of NASS.

**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2022**

**Fundraising responsibly**

We rely on the generosity of our donors and fundraisers to do our life changing work and have processes and policies in place to ensure we fundraise responsibly.

- We are a member of the Fundraising Regulator and pay an annual levy
- We are transparent about our fundraising and treat donors and fundraisers respectfully and fairly
- We provide personal stewardship to anyone who is taking part in a fundraising activity for us; this includes ensuring people are aware of the risks of taking part in activities
- We explain how to opt out of communications and people are easily able to unsubscribe from emails
- We adhere to data-protection legislation and provide information on our website about our data-privacy policy, and how to opt-out of communications
- We take all reasonable steps to opt-people out of communications if they request to no longer hear from us
- We respond quickly and efficiently to any complaints about fundraising. We received no official complaints in 2022
- We mitigate against the risk of not reaching our fundraising targets by reviewing our management accounts monthly to monitor income levels, reforecasting and taking appropriate actions if fundraising income is below the levels we forecast. We have also introduced a quarterly analysis of our fundraising income by ROI
- We are registered with Hammersmith and Fulham Council as a Small Society Lottery under Paragraph 42 of Part 5 of Schedule 11 to the Gambling Act 2005
- Our Summer Raffle in 2022 raised, £5,445. 57.6% of the proceeds were retained as unrestricted income to fund our work, the remaining income covered prizes and the administrative cost of running the lottery
- Our Winter Raffle in 2022 raised £4,225. 57% of the proceeds were retained an unrestricted income and used to fund our work, the remaining income covered prizes and the administrative cost of running the lottery. A £50 prize was donated back to NASS as a cash gift.

**g. Investment policy and performance**

To minimise the risk of potential loss of funds and maintain financial security, a portion of our funds is held in cash within a reputable bank.

Additionally, the charity has made strategic investments in two properties we own which provide a consistent and reliable source of income for our charitable initiatives.

NASS' investments also include one statuette gifted by Dame Elisabeth Frink. All investments are carried at market value.

**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2022**

**Financial review**

**a. Going concern**

After making appropriate enquiries, the Trustees have a reasonable expectation that the Charity has adequate resources to continue in operational existence for the foreseeable future. For this reason, they continue to adopt the going concern basis in preparing the financial statements. Further details regarding the adoption of the going concern basis can be found in the accounting policies.

Trustees closely monitored the charity's reserves as a consequence of the deteriorating economic environment. The Board of Trustees approved in principle taking out a loan against the properties that NASS owns should reserves deteriorate further. Trustees approved a plan for cost reductions measures proposed by the CEO.

**b. Reserves policy**

Free reserves, defined as the balance of unrestricted funds less fixed assets, at the end of reporting period amount to £93,145 (2021 - £342,843).

The remaining funds are comprised of two properties (valued at £650,000) from which NASS derives rental income, other tangible assets of £332, branch funds of £265,269, other restricted grants totalling £143,707, and one statue gifted by Dame Elisabeth Frink valued at £27,000.

Unrestricted cash reserves represent 1.3 months operating costs.

At present NASS does not have an endowment fund and therefore income must be raised each year from voluntary sources and total income is likely to fluctuate from year to year.

We aim to hold 6-9 months' free reserves. This working capital protects the continuity of our core work, that is, work not funded through restricted income. Core work includes our information and support service, awareness raising, campaigning and policy influencing, and the work of our branches across the UK. We have chosen a reserves level of 6-9 months' having considered the level of predictability/unreliability in our income sources and the extent to which our cost base is flexible or committed. Our largest income sources (legacies and grant funding from pharmaceutical companies) come at irregular intervals, and the majority of our costs are committed, principally in the form of the staff who deliver our charitable objectives.

In 2022 our unrestricted cash reserves fell below our policy target. This was a consequence of two factors: the impact of the COVID pandemic on community and events fundraising and a lower than average legacy income. We will continue to monitor this in 2023 and take action if necessary. To ensure continued delivery of our charitable objectives, the Board decided to use some of the reserves below the reserves policy level. We remain committed to ensuring the long-term sustainability of our organisation and its mission.

**c. Material investments policy**

The Charity holds two properties that are rented out to private tenants. Properties were chosen as a reliable source of income for the Charity and the expected income is set at £28,000 per annum given both properties are fully let.

**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2022**

**d. Principal risks and uncertainties**

The Trustees have adopted appropriate policies necessary to limit or mitigate the risks faced by NASS. The principal risks are:

- Loss of income: NASS seeks to broaden and expand its income from all sources. Nevertheless, NASS is dependent upon voluntary income, both at branch level and at national level, and aims to increase its membership locally and nationally
- Loss of reputation: NASS seeks at all times to maintain its independent viewpoint. Grants from pharmaceutical companies are strictly controlled so as to ensure that our independence is not compromised
- Loss of staff: NASS has a reward strategy to ensure that the charity is able to recruit and retain high quality staff. It also has a set of HR policies to provide the appropriate framing for all HR matters.

NASS has a safeguarding policy and set of procedures applicable to beneficiaries, staff, trustees and volunteers. Staff are trained in safeguarding and NASS branches have a training resource. The safeguarding policy and procedures are reviewed on an annual basis.

**e. Financial risk management objectives and policies**

Effective management of financial risk is a high priority. Given the importance of accurate financial projections and reporting, we have taken a comprehensive approach to ensure that we consistently maintain a high standard in all aspects of financial management. It includes implementing robust budgeting and costing methods, adhering to donor-imposed restrictions, maintaining strong financial systems and controls, regular reporting and ensuring adequate reserves and cash flow management. We also conduct regular audits and financial reviews to maintain transparency and accountability. We have a range of policies and procedures to achieve these objectives. We employ processes and controls to guarantee accurate financial forecasting and reporting. We follow a well-defined procedure for expenditure approval, ensuring that any spending is fully authorised, and documented accordingly. Furthermore, we take great care to keep detailed records of all restricted funds, which helps to ensure complete transparency and accountability in their utilisation.

Collaborative budgeting methods are also used to ensure our financial management practices are practical and efficient. These policies and practices reflect our commitment to sound financial management, compliance, transparency, and accountability.

**f. Principal funding**

45% of our funding in 2022 came from grants from pharmaceutical companies for specific projects (restricted) and a contribution to general running costs.

Other income was as follows:

- Membership subscriptions: 18% (being 10% at branch level and 8% at national level)
- Donations: 16%
- Legacies: 7%
- Fundraising: 11%
- Investments: 3%

**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2022**

## **Structure, governance and management**

### **a. Constitution**

The charity is a Charitable Incorporated Organisation and was registered with the Charity Commission in April 2019. The rules and regulations of the CIO are set out in its Constitution, adopted by the Board of Trustees on 14 September 2019.

### **b. Methods of appointment or election of Trustees**

The governing body of NASS is a Board of Trustees consisting of elected Trustees. Only members of NASS may be appointed as Trustees and the maximum number is twelve.

At every annual general meeting of the members of NASS, one third of the charity trustees shall retire from office. The charity trustees to retire by rotation shall be those who have been longest in office since their last appointment or reappointment. If any trustees were last appointed or reappointed on the same day those to retire shall (unless they otherwise agree among themselves) be determined by lot. The vacancies so arising may be filled by the decision of the members at the annual general meeting; any vacancies not filled at the annual general meeting may be filled by the charity trustees. Such persons shall retire at the conclusion of the next annual general meeting after the date of their appointment, and shall not be counted for the purpose of determining which of the charity trustees is to retire by rotation at that meeting.

The members or the charity trustees may at any time decide to appoint a new charity trustee, whether in place of a charity trustee who has retired or been removed in accordance with clause 15 (Retirement and removal of charity trustees), or as an additional charity trustee, provided that the limit specified on the number of charity trustees would not as a result be exceeded.

The Chair and Treasurer are approved by the Board and selected from among the trustee group. Their term of office as Chair and Treasurer is consistent with their term of office as a trustee. In advance of each AGM members of NASS are widely encouraged to nominate a fellow member as Trustee.

On appointment, new trustees are asked to spend a half day in the NASS central office for a briefing with the Chief Executive and staff to understand how the society works. Formal training is provided when required.

### **c. Organisational structure and decision-making policies**

The Trustees meet quarterly to review matters of policy and to make appropriate judgements, directions and decisions on CIO issues. Trustees delegate authority on some matters to a Finance and General Purposes Committee consisting of the Chair, the Treasurer, up to three appointed Trustees and the Chief Executive and Finance and Administration Manager. This Committee meets four times per year. NASS also has a Medical Advisory Board which acts in advisory capacity only. Day to day management of NASS is undertaken by the Chief Executive and their staff. The trustees consider the Chief Executive and management team as comprising the key management personnel of the charity in charge of directing and running and operating the charity on a day to day basis.

### **d. Policies adopted for the induction and training of Trustees**

All new trustees receive an induction programme which includes the organisation's structure, scheme of delegation, NASS constitution, strategic plan, business plan and budget, trustee code of conduct and CC3, *The Essential Trustee*. Periodic training is provided (e.g. how to read management accounts).

**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2022**

**e. Pay policy for key management personnel**

Every three years we commission Croner HR to undertake independent benchmarking of all roles. The last review was in November 2022. Our medium term aim is to pay at the midpoint. The pay of the Chief Executive is reviewed annually by the trustees.

**f. Related party relationships**

There are no related party relationships. NASS is a member of various umbrella groups, including the Arthritis and Musculoskeletal Alliance, The Axial SpA International Federation, National Voices, the National Council for Voluntary Organisations and The Disability Benefits Consortium. Our membership of these bodies does not impact on the operating policies adopted by the charity.

**g. Financial risk management**

Further to the risks identified above, in 2023 trustees will be asked to approve a revised risk management strategy.

**h. Trustees' indemnities**

NASS holds Trustee Indemnity insurance through Markel UK, providing cover with a limit of 1 million pounds against any wrongful act claim made against a Trustee.

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2022

## Plans for future periods

Our priority areas for 2023 are:

### ***Reducing diagnostic delay***

- Embed *Champions in Primary Care*
- Publish landscaping reviews on axial SpA in dermatology, gastroenterology, ophthalmology and radiology and develop educational tools for these specialities
- Publish reports on the work of the 19 *Aspiring to Excellence* sites in reducing time to diagnosis
- Promote an endorsement campaign to encourage NHS organisations to support the implementation of *Act on Axial SpA*
- Continue to implement the *Act on Axial SpA* public awareness raising campaign across online media and PR including the use of out of home advertising
- Embed a new audit tool on time to diagnosis and publish our first report

### ***Supporting the NHS to improve axial SpA care***

- Support the three cohorts of *Aspiring to Excellence*
- Begin work to develop a gold standard approach to treatment, long-term care and self-management
- Continue to capacitate rheumatology departments to provide supported self-management through co-designed sessions and an e-library of resources
- Make preparations to hold the first national quality improvement conference in axial SpA in 2024
- Publish a set of patient quality standards

### ***Supporting people affected by axial SpA (including self-management)***

- Seek to maintain our information and support our services at the current level
- Continue developing free-to-access self-management resources
- Launch the first phase of an E-learning programme
- Publish new research into issues faced in relation to sex, gender and gender identity
- Continue to support our branch network and promote their services.

**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2022**

**Statement of Trustees' responsibilities**

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

The law applicable to charities in England & Wales and Scotland requires the Trustees to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the Charity and of its incoming resources and application of resources, including its income and expenditure, for that period. In preparing these financial statements, the Trustees are required to:

- select suitable accounting policies and then apply them consistently
- observe the methods and principles of the Charities SORP (FRS 102)
- make judgements and accounting estimates that are reasonable and prudent
- state whether applicable UK Accounting Standards (FRS 102) have been followed, subject to any material departures disclosed and explained in the financial statements
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the Charity will continue in business.

The Trustees are responsible for keeping adequate accounting records that are sufficient to show and explain the Charity's transactions and disclose with reasonable accuracy at any time the financial position of the Charity and enable them to ensure that the financial statements comply with the Charities Act 2011, the Charity (Accounts and Reports) Regulations 2008, the Charities and Trustee Investment (Scotland) Act 2005, the Charities Accounts (Scotland) Regulations 2006 (as amended) and the provisions of the Memorandum of Association. They are also responsible for safeguarding the assets of the Charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

**Disclosure of information to auditors**

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

- so far as that Trustee is aware, there is no relevant audit information of which the charity's auditors are unaware, and
- that Trustee has taken all the steps that ought to have been taken as a Trustee in order to be aware of any relevant audit information and to establish that the charity's auditors are aware of that information.

**Auditors**

The auditors, BKL Audit LLP, have indicated their willingness to continue in office. The designated Trustees will propose a motion reappointing the auditors at a meeting of the Trustees.

Approved by order of the members of the board of Trustees and signed on their behalf by:



Rajeevendra Kumar Mahapatra

Date: 07/08/2023

**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF  
NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**Opinion**

We have audited the financial statements of National Axial Spondyloarthritis Society (the 'Charity') for the year ended 31 December 2022 which comprise the Statement of financial activities, the Balance sheet, the Statement of cash flows and the related notes, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the Charity's affairs as at 31 December 2022 and of its incoming resources and application of resources, including its income and expenditure for the year then ended
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice, and
- have been prepared in accordance with 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) and in other respects the requirements of the Charities Act 2011.

**Basis for opinion**

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

**Conclusions relating to going concern**

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

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

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

**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF  
NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY (CONTINUED)**

**Other information**

The other information comprises the information included in the Annual report other than the financial statements and our Auditors' report thereon. The Trustees are responsible for the other information contained within the Annual report. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon. Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the course of the audit, or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

**Opinion on other matters prescribed by the Companies Act 2006**

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

- the information given in the Trustees' Report for the financial year for which the financial statements are prepared is consistent with the financial statements
- the Trustees' Report has been prepared in accordance with applicable legal requirements.

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

In the light of our knowledge and understanding of the Charity and its environment obtained in the course of the audit, we have not identified material misstatements in the Trustees' Report.

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

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

**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF  
NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY (CONTINUED)**

**Responsibilities of trustees**

As explained more fully in the Trustees' responsibilities statement, the Trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for such internal control as the Trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

**Auditors' responsibilities for the audit of the financial statements**

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

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

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud is detailed below:

- Enquiring of management around actual and potential litigation and claims
- Reviewing board meeting minutes of meetings of those charged with governance
- Reviewing financial statement disclosures and testing to supporting documentation to assess compliance with applicable laws and regulations
- Performing audit work over the risk of management override of controls, including testing of journal entries and other adjustments for appropriateness, evaluating the business rationale of significant transactions outside the normal course of business and reviewing accounting estimates for bias.

As part of an audit in accordance with ISAs (UK), we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion of the effectiveness of the charity's internal control
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the Trustees
- Conclude on the appropriateness of the Trustees' use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that

**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF  
NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY (CONTINUED)**

may cast significant doubt on the charity's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our Auditors' Report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our Auditors' Report. However, future events or conditions may cause the charity to cease to continue as a going concern.

- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at: [www.frc.org.uk/auditorsresponsibilities](http://www.frc.org.uk/auditorsresponsibilities). This description forms part of our Auditors' report.

**Use of our report**

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

NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY

INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF  
NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY (CONTINUED)

*BKL Audit LLP*

**BKL Audit LLP**

35 Ballards Lane

London

N3 1XW

Date: 08/08/2023

BKL Audit LLP are eligible to act as auditors in terms of section 1212 of the Companies Act 2006.

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**STATEMENT OF FINANCIAL ACTIVITIES  
FOR THE YEAR ENDED 31 DECEMBER 2022**

	Note	Restricted funds - Branches 2022 £	Restricted funds - All other 2022 £	Unrestricted funds 2022 £	Total funds 2022 £	Total funds 2021 £
<b>Income from:</b>						
Donations and legacies	3	109,721	450,824	319,120	879,665	1,030,334
Other trading activities	4	5,296	221	106,996	112,513	116,088
Investments	5	-	-	29,116	29,116	25,029
Other income	6	3,082	-	2,148	5,230	11,017
<b>Total income</b>		<b>118,099</b>	<b>451,045</b>	<b>457,380</b>	<b>1,026,524</b>	<b>1,182,468</b>
<b>Expenditure on:</b>						
Raising funds	7	355	-	197,057	197,412	128,771
Charitable activities	9	126,688	633,731	560,915	1,321,334	1,009,331
<b>Total expenditure</b>		<b>127,043</b>	<b>633,731</b>	<b>757,972</b>	<b>1,518,746</b>	<b>1,138,102</b>
<b>Net (expenditure)/income before net (losses)/gains on investments</b>						
		(8,944)	(182,686)	(300,592)	(492,222)	44,366
Net (losses)/gains on investments		-	-	(50,000)	(50,000)	24,900
<b>Net (expenditure)/income</b>		<b>(8,944)</b>	<b>(182,686)</b>	<b>(350,592)</b>	<b>(542,222)</b>	<b>69,266</b>
Transfers between funds	19	(24,558)	6,951	17,607	-	-
<b>Net movement in funds</b>		<b>(33,502)</b>	<b>(175,735)</b>	<b>(332,985)</b>	<b>(542,222)</b>	<b>69,266</b>
<b>Reconciliation of funds:</b>						
Total funds brought forward		298,771	319,442	1,103,462	1,721,675	1,652,409
Net movement in funds		(33,502)	(175,735)	(332,985)	(542,222)	69,266
<b>Total funds carried forward</b>		<b>265,269</b>	<b>143,707</b>	<b>770,477</b>	<b>1,179,453</b>	<b>1,721,675</b>

The Statement of Financial Activities includes all gains and losses recognised in the year.

The notes on pages 28 to 50 form part of these financial statements.

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**BALANCE SHEET  
AS AT 31 DECEMBER 2022**

	Note	2022 £	2021 £
<b>Fixed assets</b>			
Tangible assets	14	332	6,619
Investments	16	27,000	54,000
Investment property	15	650,000	700,000
		<u>677,332</u>	<u>760,619</u>
<b>Current assets</b>			
Debtors	17	42,464	115,061
Cash at bank and in hand		656,510	894,766
		<u>698,974</u>	<u>1,009,827</u>
Creditors: amounts falling due within one year	18	(196,853)	(48,771)
		<u>502,121</u>	<u>961,056</u>
<b>Net current assets</b>		<u>502,121</u>	<u>961,056</u>
<b>Total assets less current liabilities</b>		<u>1,179,453</u>	<u>1,721,675</u>
<b>Total net assets</b>		<u>1,179,453</u>	<u>1,721,675</u>
<b>Charity funds</b>			
Restricted funds - Branches	19	265,269	298,771
Restricted funds - All other	19	143,707	319,442
Unrestricted funds	19	770,477	1,103,462
		<u>1,179,453</u>	<u>1,721,675</u>
<b>Total funds</b>		<u>1,179,453</u>	<u>1,721,675</u>

The financial statements were approved and authorised for issue by the Trustees on 8 August 2023 and signed on their behalf by:



**Rajeevendra Kumar Mahapatra**  
(Chair of Trustees)

The notes on pages 28 to 50 form part of these financial statements.

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**STATEMENT OF CASH FLOWS  
FOR THE YEAR ENDED 31 DECEMBER 2022**

	<b>2022</b>	<b>2021</b>
	<b>£</b>	<b>£</b>
<b>Cash flows from operating activities</b>		
Net cash used in operating activities	<b>(267,350)</b>	<b>(117,374)</b>
<b>Cash flows from investing activities</b>		
Dividends, interests and rents from investments	<b>28,209</b>	25,029
Proceeds from the sale of tangible fixed assets	<b>885</b>	-
Purchase of tangible fixed assets	-	<b>(1,318)</b>
<b>Net cash provided by investing activities</b>	<b>29,094</b>	<b>23,711</b>
<b>Change in cash and cash equivalents in the year</b>	<b>(238,256)</b>	<b>(93,663)</b>
Cash and cash equivalents at the beginning of the year	<b>894,766</b>	988,429
<b>Cash and cash equivalents at the end of the year</b>	<b>656,510</b>	<b>894,766</b>

The notes on pages 28 to 50 form part of these financial statements

NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2022

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**1. General information**

The National Axial Spondyloarthritis Society is a CIO incorporated under articles of association dated 29th April 2019 in England & Wales with charity registration number 1183175. It was subsequently registered with the Scottish Charity Regulator on 19th November 2019 with Scottish charity registration number SC049746.

**2. Accounting policies**

**2.1 Basis of preparation of financial statements**

The financial statements have been prepared in accordance with the Charities SORP (FRS 102) - Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Charities Act 2011, the Charities and Trustee Investment (Scotland) Act 2005 and the Charities Accounts (Scotland) Regulations 2006 (as amended).

National Axial Spondyloarthritis Society meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy.

**2.2 Income**

All income is recognised once the Charity has entitlement to the income, it is probable that the income will be received and the amount of income receivable can be measured reliably.

The recognition of income from legacies is dependent on establishing entitlement, the probability of receipt and the ability to estimate with sufficient accuracy the amount receivable. Evidence of entitlement to a legacy exists when the Charity has sufficient evidence that a gift has been left to them (through knowledge of the existence of a valid will and the death of the benefactor) and the executor is satisfied that the property in question will not be required to satisfy claims in the estate. Receipt of a legacy must be recognised when it is probable that it will be received and the fair value of the amount receivable, which will generally be the expected cash amount to be distributed to the Charity, can be reliably measured.

Grants are included in the Statement of financial activities on a receivable basis. The balance of income received for specific purposes but not expended during the period is shown in the relevant funds on the Balance sheet. Where income is received in advance of entitlement of receipt, its recognition is deferred and included in creditors as deferred income. Where entitlement occurs before income is received, the income is accrued.

Income tax recoverable in relation to investment income is recognised at the time the investment income is receivable.

Other income is recognised in the period in which it is receivable and to the extent the goods have been provided or on completion of the service.

NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2022

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**2. Accounting policies (continued)**

**2.3 Expenditure**

Expenditure is recognised once there is a legal or constructive obligation to transfer economic benefit to a third party, it is probable that a transfer of economic benefits will be required in settlement and the amount of the obligation can be measured reliably. Expenditure is classified by activity. The costs of each activity are made up of the total of direct costs and shared costs, including support costs involved in undertaking each activity. Direct costs attributable to a single activity are allocated directly to that activity. Shared costs which contribute to more than one activity and support costs which are not attributable to a single activity are apportioned between those activities on a basis consistent with the use of resources. Central staff costs are allocated on the basis of time spent, and depreciation charges allocated on the portion of the asset's use.

Expenditure on raising funds includes all expenditure incurred by the Charity to raise funds for its charitable purposes and includes costs of all fundraising activities events and non-charitable trading.

Expenditure on charitable activities is incurred on directly undertaking the activities which further the Charity's objectives, as well as any associated support costs.

Grants payable are charged in the year when the offer is made except in those cases where the offer is conditional, such grants being recognised as expenditure when the conditions attaching are fulfilled. Grants offered subject to conditions which have not been met at the year end are noted as a commitment, but not accrued as expenditure.

All expenditure is inclusive of irrecoverable VAT.

**2.4 Government grants**

Government grants relating to tangible fixed assets are treated as deferred income and released to the Statement of financial activities over the expected useful lives of the assets concerned. Other grants are credited to the Statement of financial activities as the related expenditure is incurred.

**2.5 Interest receivable**

Interest on funds held on deposit is included when receivable and the amount can be measured reliably by the Charity; this is normally upon notification of the interest paid or payable by the institution with whom the funds are deposited.

**2.6 Tangible fixed assets and depreciation**

Tangible fixed assets costing £1,000 or more are capitalised and recognised when future economic benefits are probable and the cost or value of the asset can be measured reliably.

Tangible fixed assets are initially recognised at cost. After recognition, under the cost model, tangible fixed assets are measured at cost less accumulated depreciation and any accumulated impairment losses. All costs incurred to bring a tangible fixed asset into its intended working condition should be included in the measurement of cost.

NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2022

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**2. Accounting policies (continued)**

**2.6 Tangible fixed assets and depreciation (continued)**

Depreciation is charged so as to allocate the cost of tangible fixed assets less their residual value over their estimated useful lives, using the straight-line method.

Depreciation is provided on the following basis:

Office equipment	-	25% Straight Line
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**2.7 Investments**

Fixed asset investments are a form of financial instrument and are initially recognised at their transaction cost and subsequently measured at fair value at the Balance sheet date, unless the value cannot be measured reliably in which case it is measured at cost less impairment. Investment gains and losses, whether realised or unrealised, are combined and presented as 'Gains/(Losses) on investments' in the Statement of financial activities.

Investments held as fixed assets are shown at cost less provision for impairment.

**2.8 Debtors**

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

**2.9 Cash at bank and in hand**

Cash at bank and in hand includes cash and short-term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

**2.10 Liabilities and provisions**

Liabilities are recognised when there is an obligation at the Balance sheet date as a result of a past event, it is probable that a transfer of economic benefit will be required in settlement, and the amount of the settlement can be estimated reliably.

Liabilities are recognised at the amount that the Charity anticipates it will pay to settle the debt or the amount it has received as advanced payments for the goods or services it must provide.

Provisions are measured at the best estimate of the amounts required to settle the obligation. Where the effect of the time value of money is material, the provision is based on the present value of those amounts, discounted at the pre-tax discount rate that reflects the risks specific to the liability. The unwinding of the discount is recognised in the Statement of financial activities as a finance cost.

**2.11 Financial instruments**

The Charity only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value with the exception of bank loans which are subsequently measured at amortised cost using the effective interest method.

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2022**

**2. Accounting policies (continued)**

**2.12 Fund accounting**

General funds are unrestricted funds which are available for use at the discretion of the Trustees in furtherance of the general objectives of the Charity and which have not been designated for other purposes.

Restricted funds are funds which are to be used in accordance with specific restrictions imposed by donors or which have been raised by the Charity for particular purposes. The costs of raising and administering such funds are charged against the specific fund. The aim and use of each restricted fund is set out in the notes to the financial statements. Due to the significant nature of branches on the accounts, the Restricted branch fund is displayed separately throughout the accounts.

Investment income, gains and losses are allocated to the appropriate fund.

**3. Income from donations and legacies**

	<b>Restricted Funds - Branches 2022 £</b>	<b>Restricted funds - All other 2022 £</b>	<b>Unrestricted funds 2022 £</b>	<b>Total funds 2022 £</b>
Donations	6,822	37,241	112,084	<b>156,147</b>
Legacies	-	-	72,657	<b>72,657</b>
Charity grants	-	413,583	54,346	<b>467,929</b>
Subscriptions	102,899	-	80,033	<b>182,932</b>
	<u>109,721</u>	<u>450,824</u>	<u>319,120</u>	<u><b>879,665</b></u>

	<i>Restricted Funds - Branches 2021 £</i>	<i>Restricted funds - All other 2021 £</i>	<i>Unrestricted funds 2021 £</i>	<i>Total funds 2021 £</i>
Donations	2,887	51,074	172,534	226,495
Legacies	-	-	154,563	154,563
Charity grants	-	424,381	65,950	490,331
Subscriptions	74,860	-	84,085	158,945
	<u>77,747</u>	<u>475,455</u>	<u>477,132</u>	<u>1,030,334</u>

Charity grants includes Pharmaceutical Industry grants of £466,536 (2021: £485,331) and other grants of £1,393 (2021: £5,000).

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2022**

**4. Income from other trading activities**

**Income from fundraising events**

	<b>Restricted Funds - Branches 2022 £</b>	<b>Restricted funds 2022 £</b>	<b>Unrestricted funds 2022 £</b>	<b>Total funds 2022 £</b>
Fundraising events	5,296	221	106,996	<b>112,513</b>

	<i>Restricted Funds - Branches 2021 £</i>	<i>Unrestricted funds 2021 £</i>	<i>Total funds 2021 £</i>
Fundraising events	2,876	113,212	116,088

**5. Investment income**

	<b>Unrestricted funds 2022 £</b>	<b>Total funds 2022 £</b>
Rental income	28,023	<b>28,023</b>
Bank Interest	186	<b>186</b>
Profit on disposal of fixed assets	907	<b>907</b>
	<b>29,116</b>	<b>29,116</b>

	<i>Unrestricted funds 2021 £</i>	<i>Total funds 2021 £</i>
Rental income	24,793	24,793
Bank Interest	236	236
	<b>25,029</b>	<b>25,029</b>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2022**

**6. Other incoming resources**

	<b>Restricted Funds - Branches 2022 £</b>	<b>Unrestricted funds 2022 £</b>	<b>Total funds 2022 £</b>
Other Income	3,082	2,148	<b>5,230</b>
<i>Restricted Funds - Branches 2021 £</i>			
	<i>2021 £</i>	<i>Unrestricted funds 2021 £</i>	<i>Total funds 2021 £</i>
Other Income	2,884	8,133	11,017

**7. Expenditure on raising funds**

**Fundraising trading expenses**

	<b>Restricted funds - Branches 2022 £</b>	<b>Unrestricted funds 2022 £</b>	<b>Total funds 2022 £</b>
Expenditure on raising donations and legacies	-	15,292	<b>15,292</b>
Staging fundraising events	355	7,936	<b>8,291</b>
Fundraising for membership	-	1,529	<b>1,529</b>
Staff remuneration	-	118,368	<b>118,368</b>
General fundraising expenditure	-	26,442	<b>26,442</b>
Allocated centrally incurred fundraising and governance costs	-	27,490	<b>27,490</b>
	355	197,057	<b>197,412</b>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2022**

**7. Expenditure on raising funds (continued)**

**Fundraising trading expenses (continued)**

	<i>Unrestricted funds 2021 £</i>	<i>Total funds 2021 £</i>
Expenditure on raising donations and legacies	8,571	8,571
Staging fundraising events	7,567	7,567
Fundraising for membership	2,164	2,164
Staff remuneration	71,372	71,372
General fundraising expenditure	16,682	16,682
Allocated centrally incurred fundraising and governance costs	22,415	22,415
	128,771	128,771

**8. Analysis of grants**

	<b>Grants to Institutions 2022 £</b>	<b>Total funds 2022 £</b>
	<i>Grants to Institutions 2021 £</i>	<i>Total funds 2021 £</i>
Grants, Every Patient Every Time	45,358	45,358
Grants, A Connected and Supportive Community	250	250
	45,608	45,608

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2022**

**9. Analysis of expenditure on charitable activities**

**Summary by fund type**

	<b>Restricted funds - Branches 2022 £</b>	<b>Restricted funds - All other 2022 £</b>	<b>Unrestricted funds 2022 £</b>	<b>Total 2022 £</b>
Every Patient Every Time	-	492,734	180,078	<b>672,812</b>
A Connected and Supportive Community	126,688	87,018	209,034	<b>422,740</b>
Empower, Inform and Inspire	-	53,979	171,803	<b>225,782</b>
	<u>126,688</u>	<u>633,731</u>	<u>560,915</u>	<u><b>1,321,334</b></u>

	<i>Restricted Funds - Branches 2021 £</i>	<i>Restricted funds - All other 2021 £</i>	<i>Unrestricted funds 2021 £</i>	<i>Total 2021 £</i>
Every Patient Every Time	-	282,658	187,465	470,123
A Connected and Supportive Community	67,052	49,069	163,430	279,551
Empower, Inform and Inspire	-	10,406	249,251	259,657
	<u>67,052</u>	<u>342,133</u>	<u>600,146</u>	<u>1,009,331</u>

**10. Analysis of expenditure by activities**

	<b>Activities undertaken directly 2022 £</b>	<b>Support costs 2022 £</b>	<b>Total funds 2022 £</b>
Every Patient Every Time	603,911	68,901	<b>672,812</b>
A Connected and Supportive Community	362,638	60,102	<b>422,740</b>
Empower, Inform and Inspire	166,683	59,099	<b>225,782</b>
	<u>1,133,232</u>	<u>188,102</u>	<u><b>1,321,334</b></u>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2022**

**10. Analysis of expenditure by activities (continued)**

	<i>Activities undertaken directly 2021 £</i>	<i>Grant funding of activities 2021 £</i>	<i>Support costs 2021 £</i>	<i>Total funds 2021 £</i>
Every Patient Every Time	369,045	45,358	55,720	470,123
A Connected and Supportive Community	211,304	250	67,997	279,551
Empower, Inform and Inspire	199,015	-	60,642	259,657
	<u>779,364</u>	<u>45,608</u>	<u>184,359</u>	<u>1,009,331</u>

**Analysis of direct costs**

	<b>Every Patient Every Time 2022 £</b>	<b>A Connected and Supportive Community 2022 £</b>	<b>Empower, Inform and Inspire 2022 £</b>	<b>Total funds 2022 £</b>
Staff costs	212,784	162,848	135,682	<b>511,314</b>
Other staff costs	5,301	1,000	268	<b>6,569</b>
Courier & distribution of materials	928	4,123	1,389	<b>6,440</b>
Literature, brochures and information	36,750	25,432	16,073	<b>78,255</b>
Promotion of activities and materials	8,855	21,472	2,364	<b>32,691</b>
Organising professional events	62,057	21,075	-	<b>83,132</b>
External technical providers	247,874	-	10,907	<b>258,781</b>
Attending professional events	29,362	-	-	<b>29,362</b>
Branch network expenditure	-	126,688	-	<b>126,688</b>
	<u>603,911</u>	<u>362,638</u>	<u>166,683</u>	<u><b>1,133,232</b></u>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2022**

**10. Analysis of expenditure by activities (continued)**

**Analysis of direct costs (continued)**

	<i>Every Patient Every Time 2021 £</i>	<i>A Connected and Supportive Community 2021 £</i>	<i>Empower, Inform and Inspire 2021 £</i>	<i>Total funds 2021 £</i>
Staff remuneration	249,721	137,553	123,638	510,912
Travel Expenses	5,696	104	1,057	6,857
Office costs	339	897	931	2,167
Courier & distribution of materials	92	477	15	584
Literature, brochures & information	36,605	1,703	39,498	77,806
Hire of venues & facilities	22,838	35	15,377	38,250
Third party technical providers	53,754	3,483	18,499	75,736
Branches	-	67,052	-	67,052
	<u>369,045</u>	<u>211,304</u>	<u>199,015</u>	<u>779,364</u>

**Analysis of support costs**

	<b>Every Patient Every Time 2022 £</b>	<b>A Connected and Supportive Community 2022 £</b>	<b>Empower, Inform and Inspire 2022 £</b>	<b>Total funds 2022 £</b>
Staff costs	16,970	19,484	26,398	<b>62,852</b>
Depreciation	1,837	1,405	1,188	<b>4,430</b>
Other staff costs	1,428	1,091	924	<b>3,443</b>
Premises costs	21,956	16,791	14,207	<b>52,954</b>
Travel & accommodation expenses	586	450	379	<b>1,415</b>
IT and Communications	8,442	7,357	4,562	<b>20,361</b>
Office costs	2,690	2,058	1,740	<b>6,488</b>
Conference costs	660	504	427	<b>1,591</b>
Insurance, legal & professional	8,844	6,763	5,723	<b>21,330</b>
Other support costs	146	113	94	<b>353</b>
Bank charges	303	232	196	<b>731</b>
Governance costs	5,039	3,854	3,261	<b>12,154</b>
	<u>68,901</u>	<u>60,102</u>	<u>59,099</u>	<u><b>188,102</b></u>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2022**

**10. Analysis of expenditure by activities (continued)**

**Analysis of support costs (continued)**

	<i>Every Patient Every Time</i> 2021 £	<i>A Connected and Supportive Community</i> 2021 £	<i>Empower, Inform and Inspire</i> 2021 £	<i>Total funds</i> 2021 £
Staff costs	5,825	5,825	7,489	19,139
Depreciation	1,905	1,429	1,389	4,723
Other staff costs	12,122	9,092	8,839	30,053
Premises costs	21,483	16,201	15,751	53,435
Travel expenses	767	575	559	1,901
IT and communications	8,320	6,241	6,068	20,629
Office costs	2,568	1,926	1,872	6,366
Conference costs	(3,754)	1,801	1,751	(202)
Accountancy	1,820	1,365	1,327	4,512
Insurance, legal & professional	1,501	3,378	3,284	8,163
Other support costs	-	13,858	-	13,858
Bank charges	388	291	283	962
Governance costs	2,775	6,015	12,030	20,820
	<u>55,720</u>	<u>67,997</u>	<u>60,642</u>	<u>184,359</u>

**11. Auditors' remuneration**

	<b>2022</b> £	2021 £
Fees payable to the Charity's auditor for the audit of the Charity's annual accounts	<b>9,000</b>	7,200
Fees payable to the Charity's auditor in respect of: All non-audit services not included above	<b>3,000</b>	2,400
	<u><b>3,000</b></u>	<u>2,400</u>

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2022**

**12. Staff costs**

	<b>2022</b>	<i>2021</i>
	<b>£</b>	<b>£</b>
Wages and salaries	<b>462,676</b>	401,585
Social security costs	<b>46,171</b>	39,451
Contribution to defined contribution pension schemes	<b>65,319</b>	95,673
	<b>574,166</b>	536,709
	<b>574,166</b>	536,709

The average number of persons employed by the Charity during the year was as follows:

	<b>2022</b>	<i>2021</i>
	<b>No.</b>	<i>No.</i>
Employees	<b>13</b>	13
	<b>13</b>	13
	<b>13</b>	13

The number of employees whose employee benefits (excluding employer pension costs) exceeded £60,000 was:

	<b>2022</b>	<i>2021</i>
	<b>No.</b>	<i>No.</i>
In the band £100,001 - £110,000	<b>1</b>	1

Key management personnel consists of the CEO, Head of Communications and Fundraising, Head of Information and Support Services, Head of Policy and Health Services and the Finance and Administration Manager. The total employee remuneration and benefits of the key management personnel of the Charity were £332,882 (2021: £290,325).

**13. Trustees' remuneration and expenses**

During the year, no Trustees received any remuneration or other benefits (2021 - £NIL).

During the year ended 31 December 2022, expenses totalling £67.50 were reimbursed or paid directly to 2 Trustees (2021 - £353 to 3 Trustees). These expenses were in relation to travel expenses.

NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2022

14. Tangible fixed assets

	Office equipment £
<b>Cost or valuation</b>	
At 1 January 2022	21,609
Disposals	(3,536)
At 31 December 2022	<u>18,073</u>
<b>Depreciation</b>	
At 1 January 2022	14,990
Charge for the year	5,402
On disposals	(2,651)
At 31 December 2022	<u>17,741</u>
<b>Net book value</b>	
At 31 December 2022	<u>332</u>
<i>At 31 December 2021</i>	<u>6,619</u>

15. Investment property

	Freehold investment property £
<b>Valuation</b>	
At 1 January 2022	700,000
Gain / (loss) on revaluation	(50,000)
At 31 December 2022	<u>650,000</u>

Investment property comprises residential flats let. The fair value of the investment property has been arrived at by reference to market evidence of transaction prices for similar properties and informal valuations by a number of local estate agents. A formal valuation was made post the year end on an open market value basis.

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2022**

**16. Fixed asset investments**

	<b>Other fixed asset investments £</b>
<b>Cost or valuation</b>	
At 1 January 2022	54,000
Disposals	(27,000)
	27,000
At 31 December 2022	27,000
 <b>Net book value</b>	
At 31 December 2022	27,000
At 31 December 2021	54,000
	54,000

**17. Debtors**

	<b>2022 £</b>	<b>2021 £</b>
<b>Due within one year</b>		
Trade debtors	8,840	23,622
Other debtors	24,655	85,361
Prepayments and accrued income	8,969	6,078
	42,464	115,061
	42,464	115,061

**18. Creditors: Amounts falling due within one year**

	<b>2022 £</b>	<b>2021 £</b>
Trade creditors	116,434	12,985
Other taxation and social security	6,181	18,510
Other creditors	26,475	1,249
Accruals and deferred income	47,763	16,027
	196,853	48,771
	196,853	48,771

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2022**

**19. Statement of funds**

**Statement of funds - current year**

	Balance at 1 January 2022 £	Income £	Expenditure £	Transfers in/out £	Gains/ (Losses) £	Balance at 31 December 2022 £
<b>Unrestricted funds</b>						
General Funds - all funds	<u>1,103,462</u>	<u>457,380</u>	<u>(757,972)</u>	<u>17,607</u>	<u>(50,000)</u>	<u>770,477</u>
<b>Restricted Funds - Branches</b>						
Branches	<u>298,771</u>	<u>118,099</u>	<u>(127,043)</u>	<u>(24,558)</u>	<u>-</u>	<u>265,269</u>

NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY

NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2022

19. Statement of funds (continued)

	Balance at 1 January 2022 £	Income £	Expenditure £	Transfers in/out £	Gains/ (Losses) £	Balance at 31 December 2022 £
<b>Restricted funds - All other</b>						
Branch Development Fund	4,592	-	(600)	4,000	-	7,992
Fergus Rogers Fund	2,052	-	-	-	-	2,052
Aspiring to Excellence	149,638	115,938	(223,342)	-	-	42,234
Cimzia Select Programme	150	-	-	-	-	150
Ophthalmology / Gastroenterology project	9,205	-	(8,350)	-	-	855
Self Management Programme	15,241	49,972	(44,146)	-	-	21,067
COVID-19	-	-	-	-	-	-
Gold Standard Delay to Diagnosis	120,584	200,838	(286,106)	-	-	35,316
Good Boost	165	9,752	(9,917)	-	-	-
APPG	3,922	27,600	(31,005)	-	-	517
NASS Voices	1,993	2,000	(500)	-	-	3,493
Round Table	11,900	-	-	-	-	11,900
Health Inequalities	-	18,459	(328)	-	-	18,131
Members Day	-	26,486	(29,437)	2,951	-	-
	<u>319,442</u>	<u>451,045</u>	<u>(633,731)</u>	<u>6,951</u>	<u>-</u>	<u>143,707</u>
<b>Total of funds</b>	<u><u>1,721,675</u></u>	<u><u>1,026,524</u></u>	<u><u>(1,518,746)</u></u>	<u><u>-</u></u>	<u><u>(50,000)</u></u>	<u><u>1,179,453</u></u>

NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2022

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**19. Statement of funds (continued)**

Branch Network Funds

The Branch Network Funds support the local activities of NASS Branches, which offer regular physiotherapy or hydrotherapy sessions led by qualified instructors. Each Branch raises its funds and decides how to utilise them for specific activities.

Branch Development Fund

The Branch Development Fund is created through donations from local NASS Branches. It aims to ensure the establishment and promotion of all Branches, and it provides start-up grants to new Branches and funds for ordering promotional materials such as posters and leaflets.

Fergus Rogers Fund

The Fergus Rogers Fund was established in memory of Fergus Rogers to assist people with axial SpA in purchasing specific items that can improve their quality of life. It is used to provide support for those in financial need to obtain essential items recommended by their healthcare professionals.

Aspiring to Excellence Fund

The Aspiring to Excellence Fund supports a multi-year quality improvement program to transform healthcare for people with axial SpA. The fund facilitates strategic partnerships between NASS, BRITSpA, and the NHS transformation unit, bringing together rheumatology teams and service improvement experts. It is utilised for various activities, including recruitment to the program, learning sessions, online coaching, podcasts, and the development of an audit tool to track the time to diagnosis.

Ophthalmology / Gastroenterology Project Fund

The Ophthalmology/Gastroenterology Project Fund supports the Gold Standard time to diagnosis program and its efforts to improve the identification and referral of suspected axial SpA in Ophthalmology and Gastroenterology. It finances the involvement of clinical associates from both specialities in gathering intelligence and understanding the current landscape. Additionally, the fund covers the development of educational materials, audits, posters, surveys, and policy reports.

The Self-Management Programme

The Self-Management Fund covers the costs of NASS's Supported Self-Management Program, which equips people with axial SpA with the skills and tools to manage their symptoms confidently. It supports various aspects of the program, including online resources, self-management sessions, and regional events held in conjunction with local NHS rheumatology departments.

Delay to Diagnosis - Gold Standard Fund

The Delay to Diagnosis - Gold Standard Fund is utilised to implement The Gold Standard Time to Diagnosis program for axial SpA. It supports various activities such as producing campaign impact reports, conducting economic analysis, delivering landscape reports, reviewing the use of MRI in diagnosis, and running public awareness campaigns.

NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2022

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**19. Statement of funds (continued)**

Good Boost Fund

The Good Boost Fund was received from Innovate UK for the project 'Transforming older adult disability through virtual, peer-led community rehabilitation.' It finances the development of an online community for older adults with axial SpA. It covers staff salaries, platform development, and volunteer recruitment to lead virtual groups.

APPG (All Party Parliamentary Group) for Axial Spondyloarthritis Fund

The APPG Fund is established to oversee the implementation of the National Institute for Health and Care Excellence (NICE) guidelines for Spondyloarthritis and its Quality Standard. It supports the functioning of the parliamentary group. It is used to conduct meetings, national inquiries, and parliamentary receptions to engage with MPs on axial SpA NHS services.

NASS Voices

The NASS Voices Fund supports regional events to facilitate interactions between local people with axial SpA and their rheumatology healthcare professionals. It helps cover the costs of venue payments and other expenses for organising these events.

Round Table

The Round Table Fund supports wider policy work and national discussions on axial SpA in the UK. Although there was no activity in 2022, the fund is carried forward to continue its purpose in 2023.

Health Inequalities Fund

The Health Inequalities Fund finances a qualitative study focusing on people's experiences with axial SpA through the lens of sex, gender, and gender identity. It covers expenses related to recruitment for focus groups and data collection.

Members Day Fund

The Members Day Fund facilitates the annual Members Day and AGM events held in different towns/cities across the UK. It covers the costs of organising these events, including venue arrangements, speaker fees, workshops, and other activities for attendees.

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2022**

**19. Statement of funds (continued)**

**Statement of funds - prior year**

	<i>Balance at 1 January 2021 £</i>	<i>Income £</i>	<i>Expenditure £</i>	<i>Transfers in/out £</i>	<i>Gains/ (Losses) £</i>	<i>Balance at 31 December 2021 £</i>
<b>Unrestricted funds</b>						
General Funds - all funds	1,172,015	623,506	(725,272)	8,313	24,900	1,103,462
<b>Restricted Funds - Branches</b>						
Branches	304,487	83,507	(80,910)	(8,313)	-	298,771

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2022**

**19. Statement of funds (continued)**

	<i>Balance at 1 January 2021 £</i>	<i>Income £</i>	<i>Expenditure £</i>	<i>Transfers in/out £</i>	<i>Gains/ (Losses) £</i>	<i>Balance at 31 December 2021 £</i>
<b>Restricted funds - All other</b>						
Branch Development Fund	5,127	-	(535)	-	-	4,592
Fergus Rogers Fund	2,052	-	-	-	-	2,052
Aspiring to Excellence	123,620	134,531	(108,513)	-	-	149,638
Cimzia Select Programme	150	-	-	-	-	150
Ophthalmology / Gastroenterology project	9,205	-	-	-	-	9,205
Self Management Programme	13,962	32,240	(30,961)	-	-	15,241
COVID-19	3,541	-	(3,541)	-	-	-
Gold Standard Delay to Diagnosis	1,458	251,722	(132,596)	-	-	120,584
Good Boost	11,755	4,662	(16,252)	-	-	165
APPG	-	28,000	(24,078)	-	-	3,922
NASS Voices	-	12,400	(10,407)	-	-	1,993
Round Table	-	11,900	-	-	-	11,900
Health Inequalities	-	-	-	-	-	-
Members Day	-	-	-	-	-	-
	<u>170,870</u>	<u>475,455</u>	<u>(326,883)</u>	<u>-</u>	<u>-</u>	<u>319,442</u>
<b>Total of funds</b>	<u><u>1,647,372</u></u>	<u><u>1,182,468</u></u>	<u><u>(1,133,065)</u></u>	<u><u>-</u></u>	<u><u>24,900</u></u>	<u><u>1,721,675</u></u>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2022**

**20. Summary of funds**

**Summary of funds - current year**

	<b>Balance at 1 January 2022 £</b>	<b>Income £</b>	<b>Expenditure £</b>	<b>Transfers in/out £</b>	<b>Gains/ (Losses) £</b>	<b>Balance at 31 December 2022 £</b>
General funds	1,103,462	457,380	(757,972)	17,607	(50,000)	770,477
Restricted funds - Branches	298,771	118,099	(127,043)	(24,558)	-	265,269
Restricted funds - All other	319,442	451,045	(633,731)	6,951	-	143,707
	<u>1,721,675</u>	<u>1,026,524</u>	<u>(1,518,746)</u>	<u>-</u>	<u>(50,000)</u>	<u>1,179,453</u>

**Summary of funds - prior year**

	<i>Balance at 1 January 2021 £</i>	<i>Income £</i>	<i>Expenditure £</i>	<i>Transfers in/out £</i>	<i>Gains/ (Losses) £</i>	<i>Balance at 31 December 2021 £</i>
General funds	1,172,015	623,506	(725,272)	8,313	24,900	1,103,462
Restricted funds - Branches	304,487	83,507	(80,910)	(8,313)	-	298,771
Restricted funds - All other	170,870	475,455	(326,883)	-	-	319,442
	<u>1,647,372</u>	<u>1,182,468</u>	<u>(1,133,065)</u>	<u>-</u>	<u>24,900</u>	<u>1,721,675</u>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2022**

**21. Analysis of net assets between funds**

**Analysis of net assets between funds - current year**

	<b>Restricted Funds - Branches 2022 £</b>	<b>Restricted funds - All other 2022 £</b>	<b>Unrestricted funds 2022 £</b>	<b>Total funds 2022 £</b>
Tangible fixed assets	-	-	332	<b>332</b>
Fixed asset investments	-	-	27,000	<b>27,000</b>
Investment property	-	-	650,000	<b>650,000</b>
Current assets	265,269	143,707	289,998	<b>698,974</b>
Creditors due within one year	-	-	(196,853)	<b>(196,853)</b>
<b>Total</b>	<b>265,269</b>	<b>143,707</b>	<b>770,477</b>	<b>1,179,453</b>

**Analysis of net assets between funds - prior year**

	<i>Restricted funds - Branches 2021 £</i>	<i>Restricted funds - All other 2021 £</i>	<i>Unrestricted funds 2021 £</i>	<i>Total funds 2021 £</i>
Tangible fixed assets	-	-	6,619	6,619
Fixed asset investments	-	-	54,000	54,000
Investment property	-	-	700,000	700,000
Current assets	298,771	319,442	391,614	1,009,827
Creditors due within one year	-	-	(48,771)	(48,771)
<b>Total</b>	<b>298,771</b>	<b>319,442</b>	<b>1,103,462</b>	<b>1,721,675</b>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2022**

**22. Reconciliation of net movement in funds to net cash flow from operating activities**

	<b>2022</b>	<b>2021</b>
	<b>£</b>	<b>£</b>
Net income/expenditure for the year (as per Statement of Financial Activities)	<b>(542,222)</b>	69,266
<b>Adjustments for:</b>		
Depreciation charges	<b>5,402</b>	5,402
(Gains)/losses on investments	<b>77,000</b>	(24,900)
Dividends, interests and rents from investments	<b>(28,209)</b>	(25,029)
Decrease in debtors	<b>72,597</b>	13,018
Increase/(decrease) in creditors	<b>148,082</b>	(155,131)
<b>Net cash used in operating activities</b>	<b>(267,350)</b>	<b>(117,374)</b>

**23. Analysis of cash and cash equivalents**

	<b>2022</b>	<b>2021</b>
	<b>£</b>	<b>£</b>
Cash in hand	<b>656,510</b>	894,766
<b>Total cash and cash equivalents</b>	<b>656,510</b>	<b>894,766</b>

**24. Analysis of changes in net debt**

	<b>At 1 January 2022</b>	<b>Cash flows</b>	<b>At 31 December 2022</b>
	<b>£</b>	<b>£</b>	<b>£</b>
Cash at bank and in hand	<b>894,766</b>	<b>(238,256)</b>	<b>656,510</b>
	<b>894,766</b>	<b>(238,256)</b>	<b>656,510</b>

**25. Subsequent Events**

Subsequent to the Financial Year End the Charity took out a £300,000 mortgage from Charity Bank secured on the investment properties owned by the charity. The loan has a term of 25 years.

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

England & Wales - Charity number 1183175

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# Accounts

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Axial SpA  
works silently.  
We don't.

# Improving Care, Transforming Diagnosis and Influencing Change.

Our Impact in 2021



# Our story

Axial SpA is an inflammatory disease of the spine and joints. Inflammation, where muscles attach to the bones, causes extreme pain. If left untreated, it can permanently fuse bones together.

[www.nass.co.uk](http://www.nass.co.uk)

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# Axial SpA works silently. We don't.

We are the National Axial Spondyloarthritis Society (NASS) and we transform the diagnosis and care of people living with axial SpA.

It's an invisible and misdiagnosed condition, often leaving people feeling powerless, in increasing pain and extreme exhaustion. So, we campaign policy makers for early diagnosis, treatment and better services.

We work with the NHS to get axial SpA identified and diagnosed quickly, and are determined that everyone receives effective care.

We make sure people with axial SpA can access the latest information and the support they need to tackle living with this condition. And we build active communities, online and through our local branches across the UK. We're with you all the way.

**Join us. Help us raise our voices and raise funds. Axial SpA works silently. We don't.**



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# Raising our voices, changing lives

## The COVID19 pandemic continued to cast a shadow over us all in 2021 and we began to face a new challenge, a cost-of-living crisis.

The NHS remained under pressure and people found getting access to their rheumatology team increasingly challenging.

We were determined to ensure that people received the support they needed to understand how to live well with axial spondyloarthritis. We were also determined to lead change to end the unacceptable 8.5 year delay to diagnosis and drive improvements in care.

With demand for support from our Helpline remaining at unprecedented levels, we provided clarity in a confusing world and ensured that people got timely and accurate information about the vaccine roll-out.

We innovated, piloting our first supported self-management programme in partnership with rheumatology teams. We showed that online patient education sessions give people the skills and knowledge they need to live with the daily challenges of axial SpA. We will continue to develop the programme and are confident that we'll get funding to launch in full during the coming year.

We also launched our ground-breaking *Act on Axial SpA* programme in June 2021, aiming to establish a Gold Standard time to diagnosis of just one year. Our public awareness campaign reached people with unexplained back pain and encouraged them to take steps towards a diagnosis. Our priority over the next few years is to continue to work with health care professionals to ensure that the right patient pathways, diagnostic support and education is in place to ensure early diagnosis.

Our campaigning work continued to gain momentum. We are particularly grateful to the All-Party Parliamentary Group (APPG) on Axial Spondyloarthritis for shining a light on the importance of mental health support and the role of primary care in the diagnosis of axial SpA.

We successfully lobbied to ensure that time to diagnosis of axial spondyloarthritis has a much stronger focus in the National Early Inflammatory Arthritis Audit. This will give us invaluable data and a deeper understanding of the causes of diagnostic delay.

We're proud of our achievements in 2021 but we couldn't have done it without our committed networks of branches volunteers, healthcare professionals, donors and funders, Parliamentarians and policy-makers, who were unfailing in their support.

We want to thank everyone for helping us to deliver more than ever for people with axial SpA during an unprecedented time.



**Raj Mahapatra**  
Chair

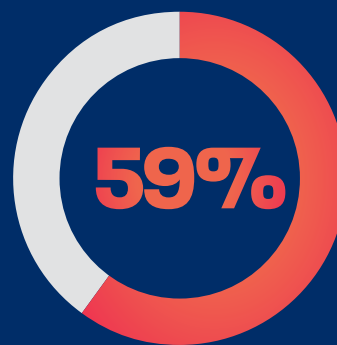


**Dr Dale Webb**  
CEO

# Life with axial spondyloarthritis



**1 in 200**  
people live  
with axial  
SpA in  
the UK



of people suffer  
with depression

Average number of years  
to diagnosis of axial SpA



**8.5**



The average age of onset

**26**

# Our impact



**7,524**

Responses to requests for advice and support



Estimated value of disability benefits we helped people claim



**349m**

Total reach of our media coverage

Total number of axial SpA online symptom checker completions

**2,249**



**82,000+**  
views of My AS  
My Life, Facebook  
Live sessions



Number of NASS members  
**4,089**

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# Our influence



Launched a ground-breaking campaign to end the 8.5 year delay to diagnosis



Called for improvements in mental health support for people with axial SpA



Built political pressure for improved diagnosis in primary care



Ensured axial SpA is a larger part of the National Early Inflammatory Arthritis Audit



Campaigned to get hydrotherapy the attention it deserves



Continued to deliver the largest UK programme to improve the quality of care for axial SpA patients

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# By your side in 2021

The COVID19 pandemic continued to overshadow us in 2021 and the need for our support was greater than ever. When lockdowns ended, people remained concerned about stepping outside. And with the NHS under increasing pressure, many people experienced longer waiting times for vital healthcare appointments.

**“I get loads of support both emotionally and physically from NASS, I don’t know what I would do without it. Instead of scrolling through social media in the long lockdown evenings, I have been watching live sessions (or recordings) on so many AS bits and pieces, Yoga, self-care, relaxation, AS and psoriasis (biggie for me!)”**

**NASS Supporter**

## Providing clarity in a changing world

As the COVID19 vaccine was rolled out and the UK was under lockdown for the early part of the year, we provided up-to-date information when people needed it most.

We worked hard to understand the impact of the virus, the vaccines and the treatments for people living with axial SpA. We ensured our website was kept up-to-date and provided vital information at a time when official information could be confusing.

The COVID19 vaccine pages of our website were visited 27,542 times.

We also continued to provide our guides to rheumatology departments and to individuals with more than 16,000 guides being sent out over the year.

## Our Helpline providing a lifeline

Our Helpline team are here to listen, understand and provide advice and practical support to anyone affected by axial SpA. With people struggling to get in contact with their rheumatology department and the COVID19 pandemic still causing disruption, people needed our help and support more than ever.

Calls to our Helpline rose to an all-time high and we responded to over 7,500 requests for advice and support, a third more than in 2020. To do so, we sustained the extended Helpline opening hours that we established in 2020. Along with information and advice on COVID19, we worked to support people who had questions about how to best manage their axial SpA.

As more people started to experience greater financial pressure because of the pandemic, we were there helping them get the benefits they are entitled to.

We wrote over 200 letters in support of disability benefits claims, resulting in benefits awards totalling more than an estimated £1,000,000. We also wrote letters to employers, to housing departments and to support Blue Badge parking applications.

## Helping people live well with axial SpA, wherever they are

In 2021, we continued our innovative *My AS, My Life* programme which empowers people to overcome the challenges of living with axial SpA. We ran 33 sessions through Facebook Live, which were designed to help people understand how to live well and self-manage their condition. These sessions were viewed over 82,000 times.

Our *My AS, My Life* website pages continued to be popular, with 10,376 visitors using resources including videos, blogs and exercise sheets.

## Enabling people to overcome daily challenges

We're determined to enable people to thrive with axial SpA and developed an online supported self-management programme to help people develop the skills and knowledge they need to manage daily challenges.

We piloted the programme during the first five months of 2021. Thanks to a grant from the Postcode Neighbourhood Trust, we ran 10 online sessions and established a case for running a full programme in the future.

The results from the pilot showed the programme gives people with axial SpA the information and support they need to manage their condition, helps them build connections in their local area and feel less isolated. It also helps rheumatology departments provide more patient education for people who are struggling to access routine appointments.

We will continue to develop the programme in 2022.

**“Thank you so much! It was a really enjoyable session. I haven't been prioritising my health recently and it has spurred me on to get back on track with exercising.”**

Session participant,  
November 2021



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# Campaigning to transform care and diagnosis

With people finding it harder to access NHS services and the pandemic causing significant disruption, we did more than ever to ensure that parliamentarians and policy makers heard the voice of people with axial SpA.

## Calling for improvements in mental health services

Axial SpA has a significant impact on people's mental health, as well as physical health. Indeed, up to 59% of people with the condition report having poor mental health.

We were acutely aware that the pandemic and lockdown had put more pressure on people's mental health and in April, the All-Party Parliamentary Group (APPG) on Axial Spondyloarthritis met to look at the issue.

We were grateful to NASS Trustee, Paul Curry, for sharing a very emotional and personal story about the impact living with axial SpA has on his own mental health.

The meeting shone a light on research that shows the emotional impact of living with axial SpA, steps that have been taken in Newcastle to ensure people have access to mental health services and approaches to improving the management of long-term conditions. Sue Brown from the Arthritis and Musculoskeletal Alliance shared its view on how mental health services could be improved for people with MSK conditions.

## Improving diagnosis and referral in primary care

Lack of awareness of axial SpA in primary care is one barrier to the faster diagnosis of the condition. The seventh meeting of the APPG explored this area and highlighted the main challenges faced by GPs and secondary care professionals in recognising and diagnosing axial SpA, the role of first contact practitioners and the NHS England Best MSK Health programme and how it's supporting improved outcomes for those affected by axial SpA.

Dr Dale Webb, our CEO, also talked about the *Act on the Axial SpA* campaign and our programme to introduce a Gold Standard time to diagnosis of just one year.

## Ensuring hydrotherapy gets the recognition it deserves

We are determined that hydrotherapy is recognised as a vital treatment for people with axial SpA. In 2021, we established a new alliance to promote aquatic physiotherapy and hydrotherapy for a range of conditions.

Standing together gives us a strong voice. The group includes professional bodies for physiotherapy and aquatic therapy, Swim England, as well as our fellow patient organisations.

## Campaigning for hydrotherapy services to re-open

Too many people are missing out on vital hydrotherapy because pools in some parts of the country have remained closed.

To help keep up the pressure for pools to reopen following the COVID19 pandemic, Tom Randall MP asked a question in the House of Commons. This led to Dale Webb meeting with Health Minister Ed Agar and the Department of Health to discuss the issue in more detail.

## Influencing change

We worked hard to influence policy to ensure that axial SpA gets the attention it deserves.

We helped shape the new axial SpA patient pathway, which is being developed as part of NHS England's Best MSK Health Programme. The pathway will be shared with the new Integrated Care Systems in England and will influence how they develop their local pathways.

Our work with the National Early Inflammatory Arthritis Audit ensured that axial spondyloarthritis has a stronger focus in the audit. Data will be collected on people's journey to diagnosis, giving us invaluable evidence on the causes of diagnostic delays that will influence our *Act on Axial SpA campaign*.

We helped improve treatment options for people with axial SpA by providing evidence for two National Institute for Health and Care Excellence (NICE) technology appraisals which led to two new treatments being approved for non-radiographic axial SpA and ankylosing spondylitis.



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# Ending the delay to diagnosis

In June 2021 we launched our ground-breaking *Act on Axial SpA programme* to tackle the unacceptable 8.5 year delay to diagnosis of axial spondyloarthritis and introduce the world's first Gold Standard time to diagnosis of one year.

## Building consensus

Over the next four years, we will work closely with people living with axial SpA, primary and community care, secondary care, professional bodies, commissioners, Parliamentarians and policy-makers, to reduce the time to diagnosis.

Our first step was to build strong foundations for the programme by developing it in consultation with people with axial SpA and healthcare professionals. We used the insights we gathered to refine the campaign strategy and develop a new language and visual identity for the campaign.

## Increasing public awareness

Lack of public awareness of axial SpA and its symptoms contributes to the delay to diagnosis. According to our research, 91% of people say they haven't heard of the condition and eight out of 10 people are unable to identify the three main symptoms.

Our first step was to launch a public awareness campaign and a new website, [www.actonaxialspa.com](http://www.actonaxialspa.com). It provides the most comprehensive hub of information for healthcare professionals and people who think they may have the condition, and hosts an easy-to-use symptom checker.

The campaign targets people aged 40 and under who are experiencing lower-back pain. In the first year, we showed that by telling emotionally compelling and relatable stories about axial SpA, we can motivate people to find out more about the condition and use our online symptoms checker.

## Making progress in 2021

Our focus for the first year was testing the public awareness campaign. By the end of the year, social media content had touched people 1.2m times, we secured 14 pieces of media coverage, 16,000 people visited our campaign website and 2,249 people had completed the symptom checker.


## Stepping into 2022

During 2022 we will work closely with primary and secondary care professionals, including launching a *Champions in Primary Care* programme and developing a local pilot to test data-led innovative approaches to driving up referrals to rheumatology.

We will also launch ground-breaking research on the full economic cost of the 8.5 year delay to diagnosis, to support our influencing work.

We are grateful to UCB for fully funding the programme and to Norfolk & Norwich NHS Foundation Trust and Royal United Hospital Bath NHS Foundation Trust for their support.





“More than eight years is too long to wait for a diagnosis but we can only tackle this delay by working together. NASS is not only increasing public awareness but leading a community of healthcare professionals who are committed to this movement for change. A movement that will make a life changing difference to thousands of people.”

**Raj Sengupta**

Consultant Rheumatologist

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# Improving axial SpA care

We're determined to improve axial SpA care. Established in 2019, *Aspiring to Excellence* encourages and recognises service improvement in axial SpA care. The programme is a strategic partnership between NASS, BRITSpA, the NHS Transformation Unit, and sponsors AbbVie, Biogen, Lilly, Novartis and UCB.

## Driving improvement

The programme provides tailored support that helps rheumatology teams drive improvements in their departments. Teams from across the UK are taking part and exploring novel approaches to care to inform, encourage and support national changes in axial SpA services.

Six rheumatology departments joined the programme in 2019 and five more in 2021.

## Resilience in the face of Covid19

Against a backdrop of increasing pressures on the NHS, the teams demonstrated an impressive ability to stay engaged and implement many of their planned improvement initiatives.

They have shown significant adaptability, resilience and teamwork and, turned adversity into opportunity – harnessing digital solutions and innovative new ways of working – in rapid response to the pandemic.

- The Newcastle rheumatology team trained community-based physiotherapists, leading to improved rheumatology referrals in order to reduce the time to diagnosis.
- The Southampton team implemented an inflammatory back pain (IBP) pathway from primary care in order to reduce time to presentation in rheumatology. They also introduced an MRI spine inflammatory back pain protocol to reduce variation in imaging.

- The Leeds team established a tertiary referral service which has significantly improved time to diagnosis.
- The Berkshire team implemented mental health interventions for patients which have reduced the percentage of patients with abnormal Hospital Anxiety and Depression Scale scores.
- The Fife team established a pathway for physiotherapy self-referral and reduced physiotherapy 'Did Not Attend' rates.
- The Sheffield team used audit data to make the business case for an extended scope practitioner.

**“The Aspiring to Excellence programme has given us structure and focus to build on our work to achieve the best standard of care in axial SpA. We have embedded new practices into our axial SpA patient pathway that have both spread and are sustainable. This will ensure there is continuous improvement in our service long after we have completed the programme for the benefit of our patients.”**

**Dr Antoni Chan**

Consultant Rheumatologist

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# Building a community

People tell us that living with axial SpA can be isolating, so through branches and NASS membership we build connected communities that help people feel less alone.

## Branches are our lifeblood

During 2021, there were 85 NASS branches run entirely by volunteers. Against a backdrop of Covid lockdowns, many continued to meet online, giving hundreds of people a much needed opportunity to take part in essential physiotherapy-led exercise and connect with friends.

As things started to open up, our branches worked tirelessly to get back to in-person sessions. We are grateful for the resilience they showed during an unprecedented time.

## Connecting through membership

Our members tell us that by joining NASS they feel less alone and isolated with axial SpA, and part of a community that understands life with the condition.

We have seen a steady growth in the number of NASS members, and by the end of 2021 we had 4089 members.

We also held our first hybrid Members' Day, which was attended by 60 people in person and 200 online. Attendees spent a day diving into sessions on the latest treatments for axial SpA and also new ideas on how to manage the condition at home.

**“NASS has been invaluable and enabled me to connect with other people with axial SpA.”**

**Richard Shire**

NASS Member

## NASS Voices

**[It was] a very informative day with lots of new information on issues I need to address. Great venue. It was lovely to meet new people.”**

In 2021, over eighty people attended events in Chester and Newcastle to learn more about axial SpA from NASS, rheumatologists, physiotherapists and occupational therapists, and to meet others affected by the condition.

Over 90% of attendees came away from NASS Voices events, feeling more confident about managing their condition.

NASS Voices Newcastle was funded by the National Lottery Community Fund, which is funded by National Lottery players while NASS Voices Chester was funded by The Ursula Keyes Trust.

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# Raising funds, raising voices

We want to say a special thank you to everyone who helped us raise vital funds and stepped forward to tell their story to increase awareness of axial SpA. You helped us raise our voices and change lives.

## Raising essential funds in a tough year

We receive no statutory funding and rely on the generosity of our fundraisers to do our amazing work.

Thank you to everyone who donated or took part in fundraising, despite the pandemic. Thanks to you, we continued to run our helpline, support people with benefits applications, provide free resources such as guides and videos and run Facebook Live sessions. You helped power us through the pandemic and we couldn't have made a life changing difference to so many people without your help.

**“I decided that I wanted to combine my love of swimming to raise awareness about axial SpA, and raise money to support NASS, who have been such amazing support for me over the years.”**

**Darren Fletcher swam 10 miles**  
and raised £1,459 for NASS.



## Raising our voices in the media

We are doing more work than ever to ensure axial SpA gets the attention it deserves and to tell the story of life with the condition in the media and on social media

During 2021, our media relations work led to nearly 349 million opportunities to see or hear our campaign messages. Coverage included BBC Radio 2 Jeremy Vine Show, The Dundee Courier, The Daily Express, The Daily Mirror, The Daily Mail, Men's Fitness Magazine, The Sun Online, Chat Magazine and Irish News.

We have also changed our approach to social media and seen a significant growth in the number of followers. During 2021, the total reach of our Facebook page was 1,148,046, a growth of 469% compared to 2020. Our Facebook followers grew by 59%.

We're grateful to everyone who stepped forward to tell their story, but particularly grateful to Singer-Songwriter, Talia Dean, and DJ and Entrepreneur, Mark Wilkinson.

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## We would like to thank the Charitable Trusts that supported us in 2021

- The Alice Ellen Cooper Dean Charitable Foundation
- The Baker Charitable Trust
- The David Gibbons Foundation
- The Eveson Charitable Trust
- The Edward Cadbury Charitable Trust
- The Edward Gostling Foundation
- The G C Gibson Charitable Trust
- The Ganzoni Charitable Trust
- The Hospital Saturday Fund
- The Hugh Fraser Foundation
- The Hamilton Wallace Trust
- John Coates Charitable Trust
- The James Weir Foundation
- James Tudor Foundation
- The Khayami Foundation
- Lord Leverhulme's Charitable Trust
- Lottery Awards for All
- The Mary Homfray Charitable Trust
- Masonic Charitable Foundation
- The Norman Family Charitable Trust
- Northern Pharmacies Limited Trust Fund
- Summers & May Charitable Settlement
- Sir Jules Thorn Charitable Trust
- The Simon Gibson Charitable Trust
- The Thousandth Man-Richard Burns Charitable Trust
- The Ursula Keyes Trust
- The Weinstock Fund
- Postcode Neighbourhood Trust

## We would like to thank the companies that supported us in 2021

abbvie



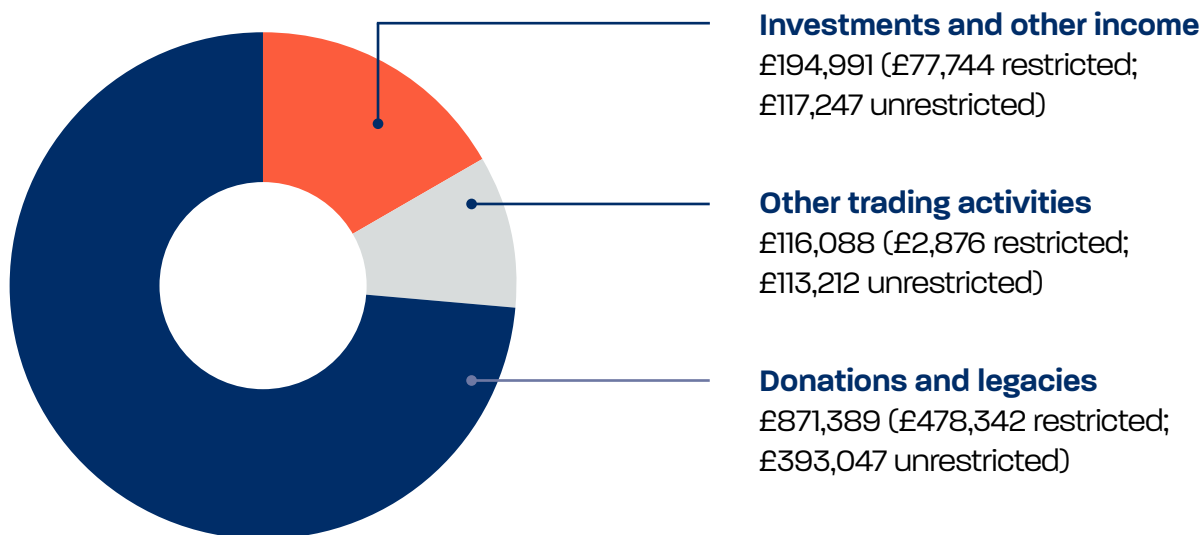
Lilly

janssen 

 NOVARTIS

 Inspired by patients.  
Driven by science.

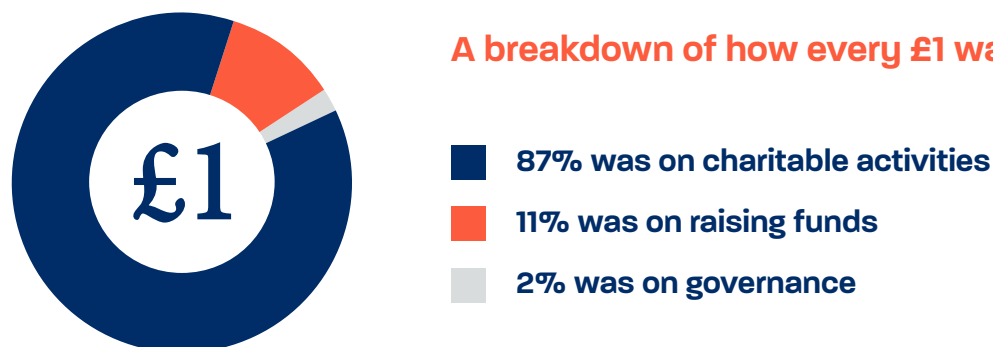
# Our year in numbers



## Our expenditure



## A breakdown of how every £1 was spent in 2021



**Axial SpA  
works silently.  
We don't.**



**National Axial  
Spondyloarthritis  
Society**

Ground Floor  
Unit 6  
Cambridge Court  
210 Shepherds Bush Road  
London  
W6 7NJ

**Helpline & General Enquiries** 020 8741 1515

**Membership & Events** 020 3011 5133

**Email:** [admin@nass.co.uk](mailto:admin@nass.co.uk)

**Website:** [www.nass.co.uk](http://www.nass.co.uk)

Twitter: [@NASSexercise](https://twitter.com/NASSexercise)

Facebook: [@NationalAxialSpondyloarthritisSociety](https://www.facebook.com/NationalAxialSpondyloarthritisSociety)

Instagram: [@NASS\\_exercise](https://www.instagram.com/NASS_exercise)

NASS is a registered charity in England and Wales (1183175) and Scotland (SC049746)

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**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

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**TRUSTEES' REPORT AND FINANCIAL STATEMENTS**

**FOR THE YEAR ENDED 31 DECEMBER 2021**

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NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY

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CONTENTS

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	Page
<b>Reference and Administrative Details of the Charity, its Trustees and Advisers</b>	1
<b>Trustees' Report</b>	2 - 13
<b>Independent Auditors' Report on the Financial Statements</b>	14 - 17
<b>Statement of Financial Activities</b>	18
<b>Balance Sheet</b>	19
<b>Statement of Cash Flows</b>	20
<b>Notes to the Financial Statements</b>	21 - 40

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## NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY

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### REFERENCE AND ADMINISTRATIVE DETAILS OF THE CHARITY, ITS TRUSTEES AND ADVISERS FOR THE YEAR ENDED 31 DECEMBER 2021

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<b>Trustees</b>	Rajeevendra Kumar Mahapatra, Chair Daniel McFarlane, Trustee Dr Antoni Tuck Yin Chan, Trustee Nicholas Clarke, Trustee Paul Curry, Trustee Gillian Eames, Trustee (Re-elected 12 June 2021) Poppy Hocken, Trustee (Re-elected 12 June 2021) Claire Jeffries, Trustee Dr Jaqueline Harris, Trustee Dr Lesley Kay, Trustee (Elected 12 June 2021) Monika Mayhew, Trustee (Retired 12 June 2021) Hannah Murphy, Trustee (Elected 12 June 2021) Patricia O'Callaghan Peter Ernest Proctor Townsend (Retired 12 June 2021)
<b>Charity registered number</b>	1183175
<b>Principal office</b>	172 King street London W6 0QU
<b>Independent auditors</b>	BKL Audit LLP Chartered Accountants 35 Ballards Lane London N3 1XW

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## NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY

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### TRUSTEES' REPORT FOR THE YEAR ENDED 31 DECEMBER 2021

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The Trustees present their annual report together with the audited financial statements of the Charity (NASS) for the year 1 January 2021 to 31 December 2021. NASS is a Charitable Incorporated Organisation.

The financial statements have been prepared in accordance with the accounting policies set out in note 1 to the financial statements and comply with the Charity's [governing document], the Charities Act 2011, the Charities and Trustee Investment (Scotland) Act 2005, the Charities Accounts (Scotland) Regulations 2006 (as amended) and "Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019)".

#### **1. Structure, governance and management**

##### **a. Constitution**

NASS is a Charitable Incorporated Organisation and was registered as a charity in April 2019. The rules and regulations of the CIO are set out in its Constitution, adopted by the Board of Trustees on 14 September 2019 and approved by the Charity Commission.

##### **b. Methods of appointment or election of Trustees**

The governing body of NASS is a Board of Trustees consisting of elected Trustees. Only members of NASS may be appointed as Trustees. The maximum number of charity trustees that may be appointed to NASS in its first year of incorporation is thirteen. Thereafter the maximum number of charity trustees that may be appointed to NASS is twelve.

At every annual general meeting of the members of NASS, one third of the charity trustees shall retire from office. The charity trustees to retire by rotation shall be those who have been longest in office since their last appointment or reappointment. If any trustees were last appointed or reappointed on the same day those to retire shall (unless they otherwise agree among themselves) be determined by lot. The vacancies so arising may be filled by the decision of the members at the annual general meeting; any vacancies not filled at the annual general meeting may be filled by the charity trustees. Such persons shall retire at the conclusion of the next annual general meeting after the date of his or her appointment, and shall not be counted for the purpose of determining which of the charity trustees is to retire by rotation at that meeting.

The members or the charity trustees may at any time decide to appoint a new charity trustee, whether in place of a charity trustee who has retired or been removed in accordance with clause 15 (Retirement and removal of charity trustees), or as an additional charity trustee, provided that the limit specified on the number of charity trustees would not as a result be exceeded.

The Chair and Treasurer are approved by the Board and selected from among the trustee group. Their term of office as Chair and Treasurer is consistent with their term of office as a trustee. In advance of each AGM members of NASS are widely encouraged to nominate a fellow member as Trustee.

On appointment, new trustees are asked to spend a half day in the NASS central office for a briefing with the Chief Executive and staff to understand how the society works. Formal training is provided when required.

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## NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY

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### TRUSTEES' REPORT (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2021

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#### 1. Structure, governance and management (continued)

##### c. Organisational structure and decision-making policies

The Trustees meet quarterly to review matters of policy and to make appropriate judgements, directions and decisions on CIO issues. Trustees delegate authority some matters to a Finance and General Purposes Committee consisting of the Chair, the Treasurer, up to three appointed Trustees and the Chief Executive. This Committee meets four times per year. NASS also has a Medical Advisory Board which acts in advisory capacity only. Day to day management of NASS is undertaken by the Chief Executive and his / her staff. The trustees consider the Chief Executive as comprising the key management personnel of the charity in charge of directing and controlling the charity and running and operating the charity on a day to day basis. The pay of the Chief Executive is reviewed annually by the trustees.

##### d. Principal risks and uncertainties

The Trustees have adopted appropriate policies necessary to limit or mitigate the risks faced by NASS.

The principal risks are:

- Loss of funds: Funds are held with various first tier banks on a short term basis and as a result there is little risk of loss in the short to medium term.
- Loss of income: NASS seeks to broaden and expand its income from all sources. Nevertheless, NASS is dependent upon voluntary income, both at branch level and at national level, and aims to increase its membership locally and nationally.
- Loss of reputation: NASS seeks at all times to maintain its independent viewpoint. Assistance received from external bodies, such as members of the pharmaceutical industry, is strictly controlled so as to ensure that independence is not compromised.
- Loss of staff: NASS has a Reward Strategy to ensure that the charity is able to recruit and retain high quality staff. It also has a set of HR policies to provide the appropriate framing for all HR matters.

NASS has a safeguarding policy and set of procedures which is applicable to beneficiaries, staff, trustees and volunteers. Staff are trained and NASS branches have a training resource. The safeguarding policy and procedures is reviewed on an annual basis

##### e. Pay policy for key management personnel

The pay of the staff and Chief Executive is reviewed annually by the trustees.

##### f. Volunteers

NASS is heavily dependent on 250 volunteer members who provide support at branch level. Volunteer members are unpaid and NASS's accounts do not reflect the value to NASS of the many hours work provided free to NASS. The Trustees are fully conscious of this value and recognise that the work of NASS would be considerably curtailed without the support provided by volunteer members.

Our 85 NASS branches work to offer regular, physiotherapist-led group exercise for anyone living with axial SpA. Our NASS branches are sub-committees of NASS and are led by a committee usually comprising a Chair, Treasurer and Secretary. We support our branches with a suite of resources, regular promotion of their activities, online meetings and having a named member of staff who is available Monday to Friday to help with any problems or issues.

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# NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY

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## TRUSTEES' REPORT (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2021

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### 1. Structure, governance and management (continued)

#### g. Organisational relationships

NASS is a member of the following organisations:

- Arthritis and Musculoskeletal Alliance (ARMA)
- Axial Spondyloarthritis International Federation (ASIF)
- Association of Chief Executives of Voluntary Organisations (ACEVO)
- Charity Finance Group
- Charity Comms
- Fundraising Regulator
- National Voices
- National Council for Voluntary Organization (NCVO)
- Helpline Partnership

NASS also works in close partnerships with other charities and organisations as part of the Disability Benefits Consortium and Prescription Charge Coalition.

### 2. Objectives and strategy

#### a. Objectives

NASS's vision is as follows:

"The future we want to create is one where every person with axial spondyloarthritis (axial SpA) has timely and effective diagnosis, treatment and care, is empowered to make informed health choices and feels part of a supportive community."

It seeks to do this by:

- providing information to the general public about axial SpA, and advice to people living with the condition, their families, carers, service-providers and employers
- advocating to ensure that every person has timely and effective diagnosis, treatment and care of the condition
- funding and disseminating research and analysis to advance scientific understanding of the condition and its effective treatment.

In setting objectives and planning for activities, the Trustees have given due consideration to general guidance published by the Charity Commission relating to public benefit, including the guidance 'Public benefit: running a charity (PB2)'. NASS provides public benefit by:

- working with statutory bodies and others that provide for the treatment and welfare of people affected by axial SpA
- educating people affected by axial SpA, as well as healthcare professionals and the public, on the problems related to it
- putting people affected by axial SpA in contact with expert advisers
- promoting research into the management and cure of axial SpA and its causes
- disseminating the results of research related to axial SpA.

In so doing NASS improves the lives of those affected by axial SpA, particularly in relation to their ability to contribute positively to the prosperity of their communities and the country as a whole.

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2021

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## 2. Objectives and strategy (continued)

### b. Strategy for achieving objectives

In accordance with the provisions set out in its Constitution, the Trustees have adopted the following strategy for the period 2020 – 2024 to meet NASS's principal objects:

#### **To ensure that people with axial SpA receive timely diagnosis, effective treatment and care**

- Maintain pressure at national level to ensure effective and widespread implementation of the NICE Guideline and Quality Standard for axial SpA
  - Continue to run an All Party Parliamentary Group for axial spondyloarthritis
  - Undertake Parliamentary work in the devolved nations
  - Develop and publish a Gold Standard time to diagnosis route map
  - Commission research on the economic consequences of a delay to diagnosis
  - Create impactful ways to engage primary care professionals and those in appropriate secondary care services to ensure that they identify and refer patients who may have axial SpA
  - Form an alliance to protect NHS hydrotherapy services
  - Develop a primary care clinical champions programme
  - Continue to work in partnership with professional bodies
- Support rheumatology and other services to test approaches to improving diagnosis and treatment and spread the learning across the UK
  - Expand the Aspiring to Excellence healthcare improvement programme
  - Ensure that patient values and needs underpin NHS service delivery
  - Disseminate learning from Aspiring to Excellence
  - Raise awareness among those working in emergency care and NHS 111

#### **To empower, inform and inspire people affected by axial SpA**

- Ensure that everyone affected by axial SpA has access to personalised support and the best information about the condition
  - Extend personalised support through our Helpline service, and reliable and user-friendly information resources for everyone affected by axial SpA
- Promote physical activity, and support and motivate people to exercise
  - Support and develop the NASS branch network to continue to ensure people can access regular group, physiotherapy led exercise sessions
  - Support and motivate people to confidently and safely exercise independently
- Ensure that everyone affected by axial SpA (AS) has the skills, confidence and knowledge they need to manage their condition optimally
- Develop a face-to-face self-management pilot programme and roll out if successful
- Consider an online version of a self-management programme for NASS members

#### **To foster a connected and supportive community, raising axial SpA awareness everyday, everywhere**

- Conduct public awareness campaigns using various methods and channels to try and increase knowledge. Chiefly this activity will include:
  - Using case studies of people living with axial SpA to generate media coverage
  - Encouraging our members and supporters to become advocates for NASS and campaigners for improvements in axial care
  - Online and social media campaigns to create interest and inform the public
  - Using related national and international awareness days
  - Create an active community of NASS members and supporters who work together
  - Make more use of online tools such as Facebook Live for streaming events, conversations and debates, to encourage participation and engagement

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## NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY

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### TRUSTEES' REPORT (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2021

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#### 2. Objectives and strategy (continued)

- Increase our online supporter numbers through social media promotion, listening, and 'surprise and delight' outreach to potential supporters
- Encourage members and supporters to take up fundraising activity for NASS, whether large-scale challenge events or activity such as raffles and coffee mornings
- Ensure that people know what NASS stands for, the changes that are seeking to bring about and how we operate
- Offer thought leadership and op-ed pieces from the CEO, Chair and other key colleagues to professional and trade outlets, and also for mainstream health outlets
- Use social media listening techniques to reach out to people talking about axial SpA, making them aware of NASS and its resources
- Develop annual membership campaigns to increase the number of members and membership revenue
- Seek opportunities to outreach through external events outside of the sector at which NASS can contribute and have visibility.

#### 3. Achievements and performance

##### a. Activities undertaken to achieve objectives

##### **Ensure people with axial SpA receive timely diagnosis, effective treatment and care**

- We continued to work with Parliamentarians through our All Party Parliamentary Group (APPG) on axial SpA to provide national oversight of the implementation of the NICE Guideline on the diagnosis and management of spondyloarthritis. We held two meetings to explore the importance of mental health support and the role of primary care in the diagnosis of axial SpA
- Following a national consultation process, we launched a route map to achieve a Gold Standard time to diagnosis of one year. We call it *Act on Axial SpA*
- We launched a new website, [www.actonaxialspa.com](http://www.actonaxialspa.com) which provides the most comprehensive hub of information for healthcare professionals and people who think they may have the condition, and hosts an easy-to-use symptom checker
- We established a new alliance to promote aquatic physiotherapy and hydrotherapy for a range of conditions
- We commissioned research to identify the full economic costs of delayed diagnosis and another study to identify the needs and values of people with axial SpA about their diagnosis, treatment and care
- Our service improvement programme *Aspiring to Excellence* welcomed a second cohort of rheumatology departments. All 11 departments undertook planned projects, supported by our partner the NHS Transformation Unit.

##### **Empower, inform and inspire people affected by axial SpA**

- We continued to run extended Helpline opening hours to deal with unprecedented demand as a consequence of the COVID19 pandemic
- We wrote over 200 letters in support of disability benefits claims, as well as letters to employers, to housing departments and to support Blue Badge parking applications
- We continued our innovative *My AS My Life* programme and ran 33 sessions through Facebook Live, to help people understand how to live well with axial SpA and self-manage their condition
- We piloted a self-management programme with 10 rheumatology departments
- We provided COVID19 information through our website and Helpline service
- We sent 16,000 of our Guides to rheumatology departments and individuals
- We continued to support NASS branches to maintain appropriate activities during the pandemic.

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## NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY

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### TRUSTEES' REPORT (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2021

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#### **Foster a connected and supportive community, raising axial SpA awareness every day, everywhere**

- We launched the first phase of a national awareness raising campaign about the condition, its symptoms and the need for early presentation at primary care
- We developed the Act on Axial SpA campaign website and a symptom checker.
- We held our annual Members Day which was in hybrid form
- We held two NASS Voices regional events for people in Newcastle and Chester
- We developed a new and distinctive NASS brand, based on research with our community
- We partnered with singer-songwriter Talia Dean and DJ and Entrepreneur Mark Wilkinson, as part of our awareness campaign.
- We continued to test new approaches to help grow our social media audience, such as a myth busting campaign and quiz and a Christmas campaign.
- We continued to test paid for social media advertising, which enabled us to reach people outside our current audience.

#### **b. Achievements and performance**

- We supported 50% more people in 2021 through our Helpline and Information Service than in 2019: 7,524 in total
- We helped people claim in excess of £1,000,000 of disability benefits
- Our self-management videos were watched 82,000 times and there were 10,000 visitors to our *My AS My Life* website pages
- The Covid-19 vaccine pages of our website were visited 27,542 times
- The evaluation of our self-management programme showed that it gives people with axial SpA the information and support they need to manage their condition and helps them build connections in their local area and feel less isolated. It also helps rheumatology departments provide more patient education for people who are struggling to access routine appointments
- The total reach of our media coverage was 349 million
- The total reach of our Facebook page was 1,148,046, a growth of 469% compared to 2020. Our Facebook followers grew by 59%
- 2,000 people completed our new axial SpA online symptom checker
- Our membership numbers rose by 11% from 3,685 to 4089
- The Chair of the APPG asked a question on hydrotherapy pools in the House of Commons. This led to a meeting with Health Minister Ed Agar and the Department of Health to discuss the issue in more detail
- We helped shape the new axial SpA patient pathway, developed as part of NHS England's Best MSK Health Programme
- We successfully lobbied to ensure that axial SpA is a larger part of the National Early Inflammatory Arthritis Audit
- A review of *Aspiring to Excellence* showed that all of the first cohort of rheumatology departments had achieved service improvements:
  - The Newcastle rheumatology team trained community-based physiotherapists, leading to improved rheumatology referrals in order to reduce the time to diagnosis
  - The Southampton team implemented an inflammatory back pain pathway from primary care in order to reduce time to presentation in rheumatology. They also introduced an MRI spine inflammatory back pain protocol to reduce variation in imaging
  - The Leeds team established a tertiary referral service which has significantly improved time to diagnosis
  - The Berkshire team implemented mental health interventions for patients which have reduced the percentage of patients with abnormal Hospital Anxiety and Depression Scale scores
  - The Fife team established a pathway for physiotherapy self-referral and reduced physiotherapy Did Not Attend rates
  - The Sheffield team used audit to make the business case for an extended scope practitioner.

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## NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY

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### TRUSTEES' REPORT (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2021

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#### c. Fundraising activities and income generation

NASS receives no statutory funding and relies on income from charitable trusts, voluntary fundraising and donations and pharmaceutical companies to do its life-changing work. In 2021, we updated our fundraising strategy to diversify our income streams and reviewed our approach to marketing fundraising and stewardship. This included the development of a new community fundraising product, Go Orange for AS, to integrate with the new NASS brand.

NASS is grateful to everyone who donated money or undertook a fundraising activity on our behalf in 2021:

- 55 people took part in third-party events such as the London Marathon and Royal Parks Half marathon
- 185 people took part in community fundraising or organised their own fundraising activity
- 106 people gave a regular donation via direct debit

We are hugely grateful to everyone who gave a cash gift in 2021. We ran two fundraising appeals, continued to ask people to support us by giving a one-off cash donation and sign-up to give monthly by direct debit.

Gifts in Wills provide sustainable future income for NASS and are a wonderful way for people to help the next generation live well with axial SpA. In 2021 we developed a new legacy marketing brochure. By the end of the year our total number of legacy pledgers had grown to 59.

NASS also receives grants from charitable trusts and from the pharmaceutical industry. Developing the Trust pipeline and increasing the number of applications was a priority for us in 2021.

During the year NASS received:

- Unrestricted grants from charitable trusts totalling £44,700

With special thanks to:

*The Edward Gostling Foundation*  
*The John Coates Charitable Trust*  
*The Simon Gibson Charitable Trust*  
*The Khayami Foundation*  
*Lord Leverhulme's Charitable Trust*  
*Hamilton Wallace Trust*  
*The Hospital Saturday Fund*  
*The Mary Homfray Charitable Trust*  
*Miss Summers and Miss May's Charitable Settlement*  
*The Weinstock Fund*  
*Sir Jules Thorn Charitable Trust*  
*The Baker Charitable Trust*  
*The Edward Gostling Foundation*  
*The Thousandth Man- Richard Burns Charitable Trust*  
*The G C Gibson Charitable Trust*

- Restricted grants from charitable trusts totalling £37,240

With special thanks to:

*The Norman Family Charitable Trust*  
*The Ganzoni Charitable Trust*  
*The David Gibbons Foundation*  
*Northern Pharmacies Limited Trust Fund*  
*The Edward Cadbury Charitable Trust*  
*The James Tudor Foundation*  
*The James Weir Foundation*  
*The Alice Ellen Cooper Dean Charitable Foundation*

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## NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY

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### TRUSTEES' REPORT (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2021

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*The Eveson Charitable Trust*  
*The Ursula Keyes Trust*  
*The Hugh Fraser Foundation*

- Restricted grants from other organisations totalling £13,834  
With special thanks to:

<i>Innovate UK for Good Boost Project</i>	<i>£4,662</i>
<i>Lottery Awards for All for NASS Voices Newcastle</i>	<i>£9,172</i>

- Restricted Grants from pharmaceutical companies for specific projects totalling £485,331  
With special thanks to:

<u>Abbvie Ltd</u>	
<i>Aspiring to Excellence</i>	<i>£30,000</i>

<u>UCB Pharma</u>	
<i>NASS APPG</i>	<i>£16,000</i>
<i>NASS Gold Standard Time to Diagnosis</i>	<i>£287,681</i>
<i>Aspiring to Excellence</i>	<i>£33,750</i>

<u>Biogen Idec Ltd</u>	
<i>Aspiring to Excellence</i>	<i>£30,000</i>

<u>Novartis Pharmaceuticals UK Ltd</u>	
<i>NASS All Party Parliamentary Group</i>	<i>£16,000</i>
<i>Policy Round Table meeting</i>	<i>£11,900</i>
<i>Aspiring to Excellence</i>	<i>£30,000</i>

<u>Eli Lilly and Company</u>	
<i>Aspiring to Excellence</i>	<i>£30,000</i>

- Unrestricted Grants from pharmaceutical companies  
With special thanks to:

<u>Janssen-Cilag Ltd</u>	
<i>Core funding</i>	<i>£5,000</i>

#### **d. Subscriptions**

The charity charges subscriptions to its members at national level, and those attending NASS branches pay a local subscription fee which funds branch activities. At national level this income (£158,945) covers the benefits members receive (Forum, access to Members Area, free attendance at Members Day) and the support and administration of Subscriptions. The charity has approximately 4,100 members at national level and around 1000 attendees per week at branches. The Trustees actively encourage all those with axial SpA to join the society.

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## NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY

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### TRUSTEES' REPORT (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2021

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#### 4. Financial review

##### a. Going concern

After making appropriate enquiries, the Trustees have a reasonable expectation that the Charity has adequate resources to continue in operational existence for the foreseeable future. For this reason, they continue to adopt the going concern basis in preparing the financial statements. Further details regarding the adoption of the going concern basis can be found in the accounting policies.

##### b. Reserves policy

Free reserves, defined as the balance of unrestricted funds less tangible fixed assets, at the end of reporting period amount to £342,843 (2020 - £432,212).

The remaining funds are comprised of two properties (valued at £700,000) from which NASS derives rental income, other tangible assets of £6,619, investments of £54,000, branch funds of £298,771, other restricted grants totalling £319,442, and one statue gifted by Dame Elisabeth Frink.

Unrestricted cash reserves represent six months operating costs.

At present NASS does not have an endowment fund and therefore income must be raised each year from voluntary sources and total income is likely to fluctuate from year to year.

We aim to hold 6-9 months free reserves. This working capital protects the continuity of our core work, that is, work not funded through restricted income. Core work includes our information and support service, awareness raising, campaigning and policy influencing, and the work of our branches across the UK. We have chosen a reserves level of 6-9 months having considered the level of predictability/unreliability in our income sources and the extent to which our cost base is flexible or committed. Our largest income sources (legacies and grant funding from pharmaceutical companies) come at irregular intervals, and the majority of our costs are committed, principally in the form of the staff who deliver our charitable objectives.

In 2021 our unrestricted cash reserves fell below our policy minimum. This was a consequence of two factors: the impact of the Covid pandemic on community and events fundraising and a lower than average legacy income. We will continue to monitor this in 2022 and take action if necessary.

##### c. Investment policy and performance

NASS has adopted a policy of maximising liquidity and therefore funds available have been held in interest bearing bank accounts or equivalent short-term deposits at varying rates of interest placed with first tier banks. NASS's property investments comprise two residential apartments which are rented out on shorthold assured tenancies to generate income for NASS. NASS's investments also include one statuette gifted by Dame Elisabeth Frink. All investments are carried at market value.

##### d. Expenditure on: Ensure people with axial SpA receive timely diagnosis, effective treatment and care

The charity incurred total costs of £467,348 (2020 - £443,953) (on education activities with healthcare professionals, research, campaigning and running the Secretariat for the All Party Parliamentary Group on axial SpA. This included support costs of £52,945 (2020 - £76,004). This reflects the continuing emphasis placed by the Trustees on campaigning for wider recognition of the condition, speedier diagnosis and better

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## NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY

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### TRUSTEES' REPORT (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2021

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#### 4. Financial review (continued)

##### e. Expenditure on: Empower, inform and inspire people affected by axial SpA

The Charity incurred total costs of £247,627 (2020 - £172,208) on education and support activities which included support costs of £48,612 (2020 - £44,151).

##### f. Expenditure on: Foster a connected and supportive community, raising axial SpA awareness every day, everywhere

The Charity incurred total central costs of £273,536 (2020 - £334,172) on awareness raising and community building activities which included support costs of £61,982 (2020 - £58,070).

##### g. Summary of financial performance

As a whole, the Society reported an excess of income over expenditure of £44,366 (2020 - deficit of £293,905), mainly as a result of grants totalling £499,165 received in the year. A surplus of £41,769 (2020 - deficit of £329,530) arose centrally, a surplus of £2,597 (2020 - surplus of £35,625) arose at branch level and a surplus/deficit of £143,535 (2020 - £82,242) arose on other restricted funds.

#### 5. Plans for future periods

Our four priority areas for 2022 are:

##### **Reducing diagnostic delay:** we will

- Introduce a primary care clinical champions programme
- Introduce a secondary care education programme
- Publish research on the full economic costs of diagnostic delay
- Publish a report on the work of the 11 *Aspiring to Excellence* sites to reduce delay
- Launch an integrated pilot in one area of the UK to test the impact of all four solutions in consort
- Introduce a third cohort of *Aspiring to Excellence* that will focus on delay and all three cohorts will work together, framed around the Gold Standard solutions
- Launch a new series of publications called *Spotlight* that draws attention to new peer reviewed journal articles about delay and best practice examples of work to improve time to diagnosis
- Review the current provision of axial SpA training to radiologists
- Create new collateral to promote the BRITSpA MRI guidelines.

##### **Supporting the NHS to improve axial SpA care:** we will

- Launch a third cohort of *Aspiring to Excellence*
- Capacitate rheumatology departments to provide supported self-management through co-designed sessions and an e-library of resources
- Launch a podcast series aimed at healthcare professionals showing how the use of quality improvement tools can improve patient care
- Continue to support the NHS Best MSK Health Collaborative; and work with BSR to encourage clinicians to enter axial SpA patients into the National Early Inflammatory Arthritis Audit
- Establish a programme of outreach to rheumatology departments to engage with our work and share our learning resources.

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## NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY

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### TRUSTEES' REPORT (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2021

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#### 5. Plans for future periods (continued)

**Supporting people affected by axial SpA (including self-management):** we will

- Seek to maintain our information and support service at current levels
- Continue developing free to access self-management resources
- Develop an online self-management education programme for patients with hospitals across the UK
- Develop an e-learning platform to support independent learning

**Increasing awareness of axial SpA and of NASS:** we will

- Continue to implement the *Act on Axial SpA* public awareness raising campaign across online media and PR but more sharply focused on communicating axial SpA symptoms, using the SPINE acronym
- Launch the findings of the research into the full economic costs of diagnostic delay, making this our major 'news' moment in 2022
- Test a local awareness campaign, to understand whether using a mix of marketing, communications and PR and corporate partnership can increase appropriate consultations at primary care and referrals from primary care through to rheumatology.
- Plan an integrated campaign – *Unseen* – for delivery in 2023.

#### Statement of Trustees' responsibilities

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

The law applicable to charities in England & Wales requires the Trustees to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the Charity and of its incoming resources and application of resources, including its income and expenditure, for that period. In preparing these financial statements, the Trustees are required to:

- Select suitable accounting policies and then apply them consistently;
- Observe the methods and principles of the Charities SORP (FRS 102);
- Make judgments and accounting estimates that are reasonable and prudent;
- State whether applicable UK Accounting Standards (FRS 102) have been followed, subject to any material departures disclosed and explained in the financial statements;
- Prepare the financial statements on the going concern basis unless it is inappropriate to presume that the Charity will continue in business.

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

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**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

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**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2021**

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**Disclosure of information to auditors**

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


- So far as that Trustee is aware, there is no relevant audit information of which the charity's auditors are unaware, and
- That Trustee has taken all the steps that ought to have been taken as a Trustee in order to be aware of any relevant audit information and to establish that the charity's auditors are aware of that information.

**Auditors**

During the year, Berg Kaprow Lewis LLP acted as auditor to the charity until 31 March 2022. On 31 March 2022, Berg Kaprow Lewis LLP transferred its audit business to a new LLP, BKL Audit LLP. The trustees consented to treating the appointment of Berg Kaprow Lewis LLP as extending to BKL Audit LLP with effect from 1 April 2022.

The auditors, BKL Audit LLP, have indicated their willingness to continue in office. The designated Trustees will propose a motion reappointing the auditors at a meeting of the Trustees.

Approved by order of the members of the board of Trustees and signed on their behalf by:



**Rajeevendra Kumar Mahapatra**

Date: 24 September 2022

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## NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY

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### INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY

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#### Opinion

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

The financial statements have been prepared in accordance with Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standards applicable in the UK and Republic of Ireland (FRS 102) in preference to the Accounting and Reporting by Charities: Statement of Recommended Practice issued on 1 April 2005 which is referred to in the extant regulations but has been withdrawn.

This has been done in order for the accounts to provide a true and fair view in accordance with the Generally Accepted Accounting Practice effective for reporting periods beginning on or after 1 January 2015.

In our opinion the financial statements:

- give a true and fair view of the state of the charity's affairs as at 31 December 2021 and of its incoming resources and application of resources for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Charities Act 2011.

#### Basis for opinion

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

#### Conclusions relating to going concern

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

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

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

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## NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY

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### INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY (CONTINUED)

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#### Other information

The other information comprises the information included in the Annual Report other than the financial statements and our Auditors' Report thereon. The Trustees are responsible for the other information contained within the Annual Report. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon. Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the course of the audit, or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

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

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

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

#### Responsibilities of trustees

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

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

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## NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY

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### INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY (CONTINUED)

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#### **Auditors' responsibilities for the audit of the financial statements**

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

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

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud is detailed below:

Enquiring of management around actual and potential litigation and claims;

Reviewing board meeting minutes of meetings of those charged with governance;

- Reviewing financial statement disclosures and testing to supporting documentation to assess compliance with applicable laws and regulations;
- Performing audit work over the risk of management override of controls, including testing of journal entries and other adjustments for appropriateness, evaluating the business rationale of significant transactions outside the normal course of business and reviewing accounting estimates for bias.

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

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

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**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

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**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY (CONTINUED)**

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**Use of our report**

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

*BKL Audit LLP*

**BKL Audit LLP**

Chartered Accountants  
Statutory Auditor

35 Ballards Lane

London

N3 1XW

Date: 30/09/2022

BKL Audit LLP are eligible to act as auditors in terms of section 1212 of the Companies Act 2006.

NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY

STATEMENT OF FINANCIAL ACTIVITIES  
FOR THE YEAR ENDED 31 DECEMBER 2021

	Note	Restricted funds 2021 £	Unrestricted funds 2021 £	Total funds 2021 £	<i>Total funds 2020 £</i>
<b>Income from:</b>					
Donations and legacies	3	478,342	393,047	871,389	573,744
Other trading activities	4	2,876	113,212	116,088	62,696
Other income	5	77,744	117,247	194,991	193,123
<b>Total income</b>		<b>558,962</b>	<b>623,506</b>	<b>1,182,468</b>	<b>829,563</b>
<b>Expenditure on:</b>					
Raising funds	6	-	126,457	126,457	151,114
Charitable activities	8	412,830	598,815	1,011,645	972,354
<b>Total expenditure</b>		<b>412,830</b>	<b>725,272</b>	<b>1,138,102</b>	<b>1,123,468</b>
<b>Net income/(expenditure) before net gains/(losses) on investments</b>		<b>146,132</b>	<b>(101,766)</b>	<b>44,366</b>	<b>(293,905)</b>
Net gains/(losses) on investments		-	24,900	24,900	(43,140)
<b>Net income/(expenditure)</b>		<b>146,132</b>	<b>(76,866)</b>	<b>69,266</b>	<b>(337,045)</b>
Transfers between funds	18	(8,313)	8,313	-	-
<b>Net movement in funds</b>		<b>137,819</b>	<b>(68,553)</b>	<b>69,266</b>	<b>(337,045)</b>
<b>Reconciliation of funds:</b>					
Total funds brought forward		480,394	1,172,015	1,652,409	1,989,454
Net movement in funds		137,819	(68,553)	69,266	(337,045)
<b>Total funds carried forward</b>		<b>618,213</b>	<b>1,103,462</b>	<b>1,721,675</b>	<b>1,652,409</b>

The Statement of Financial Activities includes all gains and losses recognised in the year.

The notes on pages 21 to 40 form part of these financial statements.

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**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

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**BALANCE SHEET  
AS AT 31 DECEMBER 2021**

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	Note	2021 £	2020 £
<b>Fixed assets</b>			
Tangible assets	13	6,619	10,703
Investments	15	54,000	29,100
Investment property	14	700,000	700,000
		760,619	739,803
<b>Current assets</b>			
Debtors	16	115,061	128,079
Cash at bank and in hand		894,766	988,429
		1,009,827	1,116,508
Creditors: amounts falling due within one year	17	(48,771)	(203,902)
		1,721,675	1,652,409
<b>Net current assets</b>		1,721,675	1,652,409
<b>Total assets less current liabilities</b>		1,721,675	1,652,409
<b>Total net assets</b>		1,721,675	1,652,409
<b>Charity funds</b>			
Restricted funds	18	618,213	480,394
Unrestricted funds	18	1,103,462	1,172,015
		1,721,675	1,652,409
<b>Total funds</b>		1,721,675	1,652,409

The financial statements were approved and authorised for issue by the Trustees and signed on their behalf by:



**Rajeevendra Kumar Mahapatra**

Date: 24 September 2022

The notes on pages 21 to 40 form part of these financial statements.

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NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY

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STATEMENT OF CASH FLOWS  
FOR THE YEAR ENDED 31 DECEMBER 2021

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	2021 £	2020 £
<b>Cash flows from operating activities</b>		
Net cash used in operating activities	<b>(117,374)</b>	<i>(216,151)</i>
<b>Cash flows from investing activities</b>		
Dividends, interests and rents from investments	<b>25,029</b>	<i>26,434</i>
Proceeds from the sale of tangible fixed assets	-	<i>14,300</i>
Purchase of tangible fixed assets	<b>(1,318)</b>	<i>(2,230)</i>
Proceeds from sale of investments	-	<i>28,900</i>
<b>Net cash provided by investing activities</b>	<b>23,711</b>	<b>67,404</b>
<b>Cash flows from financing activities</b>		
<b>Net cash provided by financing activities</b>	-	-
<b>Change in cash and cash equivalents in the year</b>	<b>(93,663)</b>	<b>(148,747)</b>
Cash and cash equivalents at the beginning of the year	<b>988,429</b>	<i>1,137,176</i>
<b>Cash and cash equivalents at the end of the year</b>	<b>894,766</b>	<i>988,429</i>

The notes on pages 21 to 40 form part of these financial statements

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## NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY

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### NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2021

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#### 1. General information

National Axial Spondyloarthritis Society is an organisation incorporated in the United Kingdom under the Charities Act 2011. The organisation is a Charitable Incorporated Organisation, registered in England and Wales and in Scotland. The address of the registered office is 172 King Street, London, W6 0QU.

#### 2. Accounting policies

##### 2.1 Basis of preparation of financial statements

The financial statements have been prepared in accordance with the Charities SORP (FRS 102) - Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Charities Act 2011.

The financial statements have been prepared to give a 'true and fair' view and have departed from the Charities (Accounts and Reports) Regulations 2008 only to the extent required to provide a 'true and fair' view. This departure has involved following the Charities SORP (FRS 102) published in October 2019 rather than the Accounting and Reporting by Charities: Statement of Recommended Practice effective from 1 April 2005 which has since been withdrawn.

National Axial Spondyloarthritis Society meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy.

##### 2.2 Going concern

After making appropriate enquiries, the Trustees have a reasonable expectation that the Charity has adequate resources to continue in operational existence for the foreseeable future. For this reason, they continue to adopt the going concern basis in preparing the financial statements.

##### 2.3 Income

All income is recognised once the Charity has entitlement to the income, it is probable that the income will be received and the amount of income receivable can be measured reliably.

The recognition of income from legacies is dependent on establishing entitlement, the probability of receipt and the ability to estimate with sufficient accuracy the amount receivable. Evidence of entitlement to a legacy exists when the Charity has sufficient evidence that a gift has been left to them (through knowledge of the existence of a valid will and the death of the benefactor) and the executor is satisfied that the property in question will not be required to satisfy claims in the estate. Receipt of a legacy must be recognised when it is probable that it will be received and the fair value of the amount receivable, which will generally be the expected cash amount to be distributed to the Charity, can be reliably measured.

Grants are included in the Statement of Financial Activities on a receivable basis. The balance of income received for specific purposes but not expended during the period is shown in the relevant funds on the Balance Sheet. Where income is received in advance of entitlement of receipt, its recognition is deferred and included in creditors as deferred income. Where entitlement occurs before income is received, the income is accrued.

Other income is recognised in the period in which it is receivable and to the extent the goods have been provided or on completion of the service.

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## NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY

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### NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2021

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#### 2. Accounting policies (continued)

##### 2.4 Expenditure

Expenditure is recognised once there is a legal or constructive obligation to transfer economic benefit to a third party, it is probable that a transfer of economic benefits will be required in settlement and the amount of the obligation can be measured reliably. Expenditure is classified by activity. The costs of each activity are made up of the total of direct costs and shared costs, including support costs involved in undertaking each activity. Direct costs attributable to a single activity are allocated directly to that activity. Shared costs which contribute to more than one activity and support costs which are not attributable to a single activity are apportioned between those activities on a basis consistent with the use of resources. Central staff remuneration is allocated on the basis of time spent, and depreciation charges allocated on the portion of the asset's use.

Expenditure on raising funds includes all expenditure incurred by the Charity to raise funds for its charitable purposes and includes costs of all fundraising activities events and non-charitable trading.

Expenditure on charitable activities is incurred on directly undertaking the activities which further the Charity's objectives, as well as any associated support costs.

Grants payable are charged in the year when the offer is made except in those cases where the offer is conditional, such grants being recognised as expenditure when the conditions attaching are fulfilled. Grants offered subject to conditions which have not been met at the year end are noted as a commitment, but not accrued as expenditure.

All expenditure is inclusive of irrecoverable VAT.

##### 2.5 Tangible fixed assets and depreciation

Tangible fixed assets costing £NIL or more are capitalised and recognised when future economic benefits are probable and the cost or value of the asset can be measured reliably.

Tangible fixed assets are initially recognised at cost. After recognition, under the cost model, tangible fixed assets are measured at cost less accumulated depreciation and any accumulated impairment losses. All costs incurred to bring a tangible fixed asset into its intended working condition should be included in the measurement of cost.

Depreciation is charged so as to allocate the cost of tangible fixed assets less their residual value over their estimated useful lives, .

Depreciation is provided on the following basis:

Office equipment	-	25% Straight line basis
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##### 2.6 Investments

Fixed asset investments are a form of financial instrument and are initially recognised at their transaction cost and subsequently measured at fair value at the Balance Sheet date, unless the value cannot be measured reliably in which case it is measured at cost less impairment. Investment gains and losses, whether realised or unrealised, are combined and presented as 'Gains/(Losses) on investments' in the Statement of Financial Activities.

Investments held as fixed assets are shown at cost less provision for impairment.

NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2021

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**2. Accounting policies (continued)**

**2.7 Debtors**

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

**2.8 Cash at bank and in hand**

Cash at bank and in hand includes cash and short-term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

**2.9 Liabilities and provisions**

Liabilities are recognised when there is an obligation at the Balance Sheet date as a result of a past event, it is probable that a transfer of economic benefit will be required in settlement, and the amount of the settlement can be estimated reliably.

Liabilities are recognised at the amount that the Charity anticipates it will pay to settle the debt or the amount it has received as advanced payments for the goods or services it must provide.

Provisions are measured at the best estimate of the amounts required to settle the obligation. Where the effect of the time value of money is material, the provision is based on the present value of those amounts, discounted at the pre-tax discount rate that reflects the risks specific to the liability. The unwinding of the discount is recognised in the Statement of Financial Activities as a finance cost.

**2.10 Financial instruments**

The Charity only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value with the exception of bank loans which are subsequently measured at amortised cost using the effective interest method.

**2.11 Pensions**

**Defined contribution pension plan**

The Charity operates a defined contribution plan for its employees. A defined contribution plan is a pension plan under which the Charity pays fixed contributions into a separate entity. Once the contributions have been paid the Charity has no further payment obligations.

The contributions are recognised as an expense in profit or loss when they fall due. Amounts not paid are shown in accruals as a liability in the Statement of Financial Position. The assets of the plan are held separately from the Charity in independently administered funds.

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**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

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**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2021**

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**2. Accounting policies (continued)**

**2.12 Fund accounting**

General funds are unrestricted funds which are available for use at the discretion of the Trustees in furtherance of the general objectives of the Charity and which have not been designated for other purposes.

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

**3. Income from donations and legacies**

	<b>Restricted funds 2021 £</b>	<b>Unrestricted funds 2021 £</b>	<b>Total funds 2021 £</b>
Donations	40,127	177,534	<b>217,661</b>
Legacies	-	154,563	<b>154,563</b>
Charity grants	438,215	60,950	<b>499,165</b>
	<b>478,342</b>	<b>393,047</b>	<b>871,389</b>
	<b>478,342</b>	<b>393,047</b>	<b>871,389</b>
	<i>Restricted funds 2020 £</i>	<i>Unrestricted funds 2020 £</i>	<i>Total funds 2020 £</i>
Donations	37,019	148,431	185,450
Legacies	-	120,567	120,567
Charity grants	267,727	-	267,727
	<b>304,746</b>	<b>268,998</b>	<b>573,744</b>
	<b>304,746</b>	<b>268,998</b>	<b>573,744</b>

Included with donations are donated services totalling £nil (2020: £17,240).

The charity grants include Pharmaceutical Industry grants of £485,331 (2020: £251,450) and other grants of £13,834 (2020: £16,277).

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**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

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**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2021**

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**4. Income from other trading activities**

**Income from fundraising events**

	<b>Restricted funds 2021 £</b>	<b>Unrestricted funds 2021 £</b>	<b>Total funds 2021 £</b>
Fundraising events	2,876	113,212	<b>116,088</b>
	<u>2,876</u>	<u>113,212</u>	<u><b>116,088</b></u>
	<i>Restricted funds 2020 £</i>	<i>Unrestricted funds 2020 £</i>	<i>Total funds 2020 £</i>
Fundraising events	3,715	58,981	62,696
	<u>3,715</u>	<u>58,981</u>	<u>62,696</u>

**5. Other incoming resources**

	<b>Restricted funds 2021 £</b>	<b>Unrestricted funds 2021 £</b>	<b>Total funds 2021 £</b>
Other income	2,884	8,133	<b>11,017</b>
Investment income	-	25,029	<b>25,029</b>
Membership subscriptions	74,860	84,085	<b>158,945</b>
	<u>77,744</u>	<u>117,247</u>	<u><b>194,991</b></u>
	<i>Restricted funds 2020 £</i>	<i>Unrestricted funds 2020 £</i>	<i>Total funds 2020 £</i>
Other income	4,237	8,448	12,685
Investment income	-	26,434	26,434
Membership subscriptions	103,790	50,214	154,004
	<u>108,027</u>	<u>85,096</u>	<u>193,123</u>

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NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY

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NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2021

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6. Expenditure on raising funds

	<b>Unrestricted funds 2021 £</b>	<b>Total funds 2021 £</b>
<b>Raising funds</b>		
Expenditure on raising donations and legacies	8,571	<b>8,571</b>
Staging fundraising events	7,567	<b>7,567</b>
Fundraising for membership	2,164	<b>2,164</b>
General fundraising expenditure	16,682	<b>16,682</b>
Staff remuneration	71,372	<b>71,372</b>
<b>Support costs</b>		
Depreciation	679	<b>679</b>
Other staff costs	4,321	<b>4,321</b>
Premises costs	7,700	<b>7,700</b>
Travel expenses	273	<b>273</b>
IT and communications office costs	2,966	<b>2,966</b>
Conference costs	855	<b>855</b>
Accountancy	649	<b>649</b>
Insurance, legal & professional	1,606	<b>1,606</b>
Bank charges	137	<b>137</b>
Sundry expenses	915	<b>915</b>
	<hr/> <b>126,457</b> <hr/>	<hr/> <b>126,457</b> <hr/>

Included within expenditure on raising funds for the year are costs allocated to raising funds of £106,356 and supports costs of £20,101.

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**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

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**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2021**

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**6. Expenditure on raising funds (continued)**

**(continued)**

	<i>Unrestricted funds 2020 £</i>	<i>Total funds 2020 £</i>
<b>Raising funds</b>		
General fundraising expenditure	34,391	34,391
Staff remuneration	83,035	83,035
<b>Support costs</b>		
Depreciation	806	806
Other staff costs	12,035	12,035
Premises costs	10,026	10,026
Travel expenses	32	32
IT and communications office costs	4,831	4,831
Conference costs	535	535
Accountancy	477	477
Insurance, legal & professional	4,071	4,071
Sundry expenses	875	875
	151,114	151,114
	151,114	151,114

Included within expenditure on raising funds for 2020 were costs allocated to raising funds of £117,426 and supports costs of £33,688.

**7. Analysis of grants**

	<b>Grants to Institutions 2021 £</b>	<b>Total funds 2021 £</b>
Grants, Every Patient Every Time	45,358	<b>45,358</b>
Grants, A Connected and Supportive Community	250	<b>250</b>
	45,608	<b>45,608</b>
	45,608	<b>45,608</b>

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**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

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**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2021**

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**7. Analysis of grants (continued)**

	<i>Grants to Institutions 2020 £</i>	<i>Total funds 2020 £</i>
Grants, Every Patient Every Time	20,192	20,192
Grants, A Connected and Supportive Community	2,008	2,008
	22,200	22,200
	22,200	22,200

**8. Analysis of expenditure on charitable activities**

**Summary by fund type**

	<b>Restricted funds 2021 £</b>	<b>Unrestricted funds 2021 £</b>	<b>Total funds 2021 £</b>
Every Patient, Every Time	281,505	185,843	<b>467,348</b>
A Connected and Supportive Community	120,919	152,617	<b>273,536</b>
Empower, Inform and Inspire	10,406	237,221	<b>247,627</b>
Governance costs	-	23,134	<b>23,134</b>
	412,830	598,815	<b>1,011,645</b>
	412,830	598,815	<b>1,011,645</b>

	<i>Restricted funds 2020 £</i>	<i>Unrestricted funds 2020 £</i>	<i>Total funds 2020 £</i>
Every Patient, Every Time	214,418	229,535	443,953
A Connected and Supportive Community	80,219	253,953	334,172
Empower, Inform and Inspire	3,984	168,224	172,208
Governance costs	-	22,020	22,020
	298,621	673,732	972,353
	298,621	673,732	972,353

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**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

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**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2021**

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**9. Analysis of expenditure by activities**

	<b>Activities undertaken directly 2021 £</b>	<b>Grant funding of activities 2021 £</b>	<b>Support costs 2021 £</b>	<b>Total funds 2021 £</b>
Every Patient Every Time	369,045	45,358	52,945	<b>467,348</b>
A Connected and Supportive Community	211,304	250	61,982	<b>273,536</b>
Empower, Inform and Inspire	199,015	-	48,612	<b>247,627</b>
Governance costs	-	-	23,134	<b>23,134</b>
	<u>779,364</u>	<u>45,608</u>	<u>186,673</u>	<u><b>1,011,645</b></u>

	<i>Activities undertaken directly 2020 £</i>	<i>Grant funding of activities 2020 £</i>	<i>Support costs 2020 £</i>	<i>Total funds 2020 £</i>
Every Patient Every Time	347,757	20,192	76,004	443,953
A Connected and Supportive Community	274,094	2,008	58,070	334,172
Empower, Inform and Inspire	128,057	-	44,151	172,208
Governance costs	-	-	22,020	22,020
	<u>749,908</u>	<u>22,200</u>	<u>200,245</u>	<u>972,353</u>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2021**

**9. Analysis of expenditure by activities (continued)**

**Analysis of direct costs**

	Every Patient Every Time 2021 £	A Connected and Supportive Community 2021 £	Empower, Inform and Inspire 2021 £	Total funds 2021 £
Staff remuneration	249,721	137,553	123,638	<b>510,912</b>
Travel expenses	5,696	104	1,057	<b>6,857</b>
Office costs	339	897	931	<b>2,167</b>
Courier & distribution of materials	92	477	15	<b>584</b>
Literature, brochures & information	36,605	1,703	39,498	<b>77,806</b>
Hire of venue & facilities	22,838	35	15,377	<b>38,250</b>
Third party technical providers	53,754	3,483	18,499	<b>75,736</b>
Branches	-	67,052	-	<b>67,052</b>
	<u>369,045</u>	<u>211,304</u>	<u>199,015</u>	<u><b>779,364</b></u>
	<u>369,045</u>	<u>211,304</u>	<u>199,015</u>	<u><b>779,364</b></u>
	Every Patient Every Time 2020 £	A Connected and Supportive Community 2020 £	Empower, Inform and Inspire 2020 £	Total funds 2020 £
Staff remuneration	187,336	143,132	108,821	439,289
Travel expenses	5,940	155	356	6,451
Office costs	-	1,603	268	1,871
Courier & distribution of materials	32	6,518	694	7,244
Literature, brochures & information	57,944	26,080	6,561	90,585
Treatment by healthcare professionals	-	56,378	-	56,378
Hire of venue & facilities	4,924	16,255	52	21,231
Other branch payments	-	8,742	-	8,742
Third party technical providers	91,581	15,231	11,305	118,117
	<u>347,757</u>	<u>274,094</u>	<u>128,057</u>	<u>749,908</u>
	<u>347,757</u>	<u>274,094</u>	<u>128,057</u>	<u>749,908</u>

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**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

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**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2021**

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**9. Analysis of expenditure by activities (continued)**

**Analysis of support costs**

	<b>Every Patient Every Time 2021 £</b>	<b>A Connected and Supportive Community 2021 £</b>	<b>Empower, Inform and Inspire 2021 £</b>	<b>Governance costs 2021 £</b>	<b>Total funds 2021 £</b>
Staff remuneration	5,825	5,825	7,489	6,658	<b>25,797</b>
Depreciation	1,905	1,429	1,389	-	<b>4,723</b>
Other staff costs	12,122	9,092	8,839	-	<b>30,053</b>
Premises costs	21,483	16,201	15,751	-	<b>53,435</b>
Travel expenses	767	575	559	118	<b>2,019</b>
IT and Communications	8,320	6,241	6,068	-	<b>20,629</b>
Office costs	2,568	1,926	1,872	-	<b>6,366</b>
Conference costs	(3,754)	1,801	1,751	-	<b>(202)</b>
Audit fees	-	-	-	7,200	<b>7,200</b>
Accountancy	1,820	1,365	1,327	-	<b>4,512</b>
Insurance, legal & professional	1,501	3,378	3,284	-	<b>8,163</b>
Other support costs	-	13,858	-	9,158	<b>23,016</b>
Bank charges	388	291	283	-	<b>962</b>
	<u>52,945</u>	<u>61,982</u>	<u>48,612</u>	<u>23,134</u>	<u><b>186,673</b></u>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2021**

**9. Analysis of expenditure by activities (continued)**

**Analysis of support costs (continued)**

	<i>Every Patient Every Time</i> 2020 £	<i>A Connected and Supportive Community</i> 2020 £	<i>Empower, Inform and Inspire</i> 2020 £	<i>Governance costs</i> 2020 £	<i>Total funds</i> 2020 £
Staff remuneration	21,426	16,370	12,446	3,093	53,335
Depreciation	1,819	1,390	1,057	-	4,266
Other staff costs	5,723	4,373	3,324	-	13,420
Premises costs	22,620	17,282	13,140	-	53,042
Travel expenses	73	56	43	-	172
IT and communications	10,900	8,328	6,332	-	25,560
Office costs	1,974	1,509	1,147	-	4,630
Conference costs	1,207	922	701	-	2,830
Audit fees	-	-	-	6,540	6,540
Accountancy	1,076	822	625	-	2,523
Insurance, legal & professional	9,186	7,018	5,336	2,660	24,200
Other governance costs	-	-	-	9,727	9,727
	<u>76,004</u>	<u>58,070</u>	<u>44,151</u>	<u>22,020</u>	<u>200,245</u>

**10. Auditors' remuneration**

The auditors' remuneration amounts to an auditor fee of £7,200 (2020 - £7,200), and a fee for the preparation of the accounts of £2,400 (2020 - £ -).

**11. Staff remuneration**

	<b>2021</b> £	2020 £
Wages and salaries	<b>401,585</b>	371,831
Social security costs	<b>39,451</b>	44,586
Contribution to defined contribution pension schemes	<b>95,673</b>	76,206
	<u><b>536,709</b></u>	<u>492,623</u>

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**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

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**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2021**

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**11. Staff remuneration (continued)**

The average number of persons employed by the Charity during the year was as follows:

	<b>2021</b>	<i>2020</i>
	<b>No.</b>	<i>No.</i>
Employees	<b>13</b>	<i>12</i>

The number of employees whose employee benefits (excluding employer pension costs) exceeded £60,000 was:

	<b>2021</b>	<i>2020</i>
	<b>No.</b>	<i>No.</i>
In the band £90,001 - £100,000	<b>1</b>	<i>-</i>
In the band £100,001 - £110,000	<b>-</b>	<i>1</i>

In 2021, the gross salary of the CEO was £100,000 (2020: £100,431).

**12. Trustees' remuneration and expenses**

During the year, no Trustees received any remuneration or other benefits (2020 - £NIL).

During the year ended 31 December 2021, expenses totalling £353 were reimbursed or paid directly to 3 Trustees (2020 - £NIL). These expenses were in relation to travel expenses.

**13. Tangible fixed assets**

	<b>Office equipment £</b>
<b>Cost or valuation</b>	
At 1 January 2021	<b>20,291</b>
Additions	<b>1,318</b>
At 31 December 2021	<b>21,609</b>
<b>Depreciation</b>	
At 1 January 2021	<b>9,588</b>
Charge for the year	<b>5,402</b>
At 31 December 2021	<b>14,990</b>

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NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY

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NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2021

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13. Tangible fixed assets (continued)

	Office equipment £
<b>Net book value</b>	
At 31 December 2021	6,619
<i>At 31 December 2020</i>	<i>10,703</i>

14. Investment property

	Long term leasehold investment property £
<b>Valuation</b>	
At 1 January 2021	700,000
At 31 December 2021	700,000

Investment property comprises residential flats let. The fair value of the investment property has been arrived at on the basis of a valuation carried out by the trustees. The valuation was made on an open market value basis by reference to market evidence of transaction prices for similar properties.

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**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

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**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2021**

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**15. Fixed asset investments**

	<b>Other fixed asset investments £</b>
<b>Cost or valuation</b>	
At 1 January 2021	29,100
Revaluations	24,900
	54,000
At 31 December 2021	54,000
 <b>Net book value</b>	
At 31 December 2021	54,000
<i>At 31 December 2020</i>	29,100

**16. Debtors**

	<b>2021 £</b>	<b>2020 £</b>
<b>Due within one year</b>		
Trade debtors	23,622	6,458
Other debtors	85,361	116,500
Prepayments and accrued income	6,078	5,121
	115,061	128,079
	115,061	128,079

**17. Creditors: Amounts falling due within one year**

	<b>2021 £</b>	<b>2020 £</b>
Trade creditors	12,985	76,929
Other taxation and social security	18,510	22,242
Other creditors	1,249	29,224
Accruals and deferred income	16,027	75,507
	48,771	203,902
	48,771	203,902

NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY

NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2021

18. Statement of funds

Statement of funds - current year

	Balance at 1 January 2021 £	Income £	Expenditure £	Transfers in/out £	Gains/ (Losses) £	Balance at 31 December 2021 £
<b>Unrestricted funds</b>						
General Funds - all funds	1,172,015	623,506	(725,272)	8,313	24,900	1,103,462
<b>Restricted funds</b>						
Branch funds	304,487	83,507	(80,910)	(8,313)	-	298,771
Branch Development Fund	5,127	-	(535)	-	-	4,592
Fergus Rogers Fund	2,052	-	-	-	-	2,052
Aspiring to Excellence	123,620	134,531	(108,513)	-	-	149,638
Cimzia Select Programme	150	-	-	-	-	150
National Lottery Fund	5,037	-	(5,037)	-	-	-
Ophthalmology/Gastroenterology project	9,205	-	-	-	-	9,205
Self management programme	13,962	32,240	(30,961)	-	-	15,241
COVID-19	3,541	-	(3,541)	-	-	-
Gold Standard	1,458	251,722	(132,596)	-	-	120,584
Good Boost	11,755	4,662	(16,252)	-	-	165
APPG	-	28,000	(24,078)	-	-	3,922
NASS Voices	-	12,400	(10,407)	-	-	1,993
Round Table	-	11,900	-	-	-	11,900
	<u>480,394</u>	<u>558,962</u>	<u>(412,830)</u>	<u>(8,313)</u>	<u>-</u>	<u>618,213</u>
<b>Total of funds</b>	<u><u>1,652,409</u></u>	<u><u>1,182,468</u></u>	<u><u>(1,138,102)</u></u>	<u><u>-</u></u>	<u><u>24,900</u></u>	<u><u>1,721,675</u></u>

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**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

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**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2021**

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**18. Statement of funds (continued)**

**Statement of funds - prior year**

	<i>Balance at 1 January 2020 £</i>	<i>Income £</i>	<i>Expenditure £</i>	<i>Balance at 31 December 2020 £</i>
<b>Unrestricted funds</b>				
General Funds - all funds	1,626,927	413,075	(867,987)	1,172,015
<b>Restricted funds</b>				
Branch Funds	268,862	115,844	(80,219)	304,487
Branch development fund	5,211	-	(84)	5,127
Fergus Rogers Fund	2,416	-	(364)	2,052
Aspiring to Excellence	86,038	122,500	(84,918)	123,620
APPG	-	12,272	(12,272)	-
Cimzia Select Programme	-	150	-	150
National Lottery Fund	-	9,750	(4,713)	5,037
Ophthalmology/ Gastroenterology project	-	9,205	-	9,205
Self Management Programme	-	13,962	-	13,962
COVID-19	-	17,828	(14,287)	3,541
Gold Standard	-	98,700	(97,242)	1,458
Good Boost	-	16,277	(4,522)	11,755
	<u>362,527</u>	<u>416,488</u>	<u>(298,621)</u>	<u>480,394</u>
<b>Total of funds</b>	<u><u>1,989,454</u></u>	<u><u>829,563</u></u>	<u><u>(1,166,608)</u></u>	<u><u>1,652,409</u></u>

NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY

NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2021

19. Summary of funds

Summary of funds - current year

	Balance at 1 January 2021 £	Income £	Expenditure £	Transfers in/out £	Gains/ (Losses) £	Balance at 31 December 2021 £
General funds	1,172,015	623,506	(725,272)	8,313	24,900	1,103,462
Restricted funds	480,394	558,962	(412,830)	(8,313)	-	618,213
	<u>1,652,409</u>	<u>1,182,468</u>	<u>(1,138,102)</u>	<u>-</u>	<u>24,900</u>	<u>1,721,675</u>

Summary of funds - prior year

	<i>Balance at 1 January 2020 £</i>	<i>Income £</i>	<i>Expenditure £</i>	<i>Balance at 31 December 2020 £</i>
General funds	1,626,927	413,075	(867,987)	1,172,015
Restricted funds	362,527	416,488	(298,621)	480,394
	<u>1,989,454</u>	<u>829,563</u>	<u>(1,166,608)</u>	<u>1,652,409</u>

20. Analysis of net assets between funds

Analysis of net assets between funds - current year

	Restricted funds 2021 £	Unrestricted funds 2021 £	Total funds 2021 £
Tangible fixed assets	-	6,619	6,619
Fixed asset investments	-	54,000	54,000
Investment property	-	700,000	700,000
Current assets	618,213	391,614	1,009,827
Creditors due within one year	-	(48,771)	(48,771)
<b>Total</b>	<u>618,213</u>	<u>1,103,462</u>	<u>1,721,675</u>

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**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

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**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2021**

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**20. Analysis of net assets between funds (continued)**

**Analysis of net assets between funds - prior year**

	<i>Restricted funds 2020 £</i>	<i>Unrestricted funds 2020 £</i>	<i>Total funds 2020 £</i>
Tangible fixed assets	-	10,703	10,703
Fixed asset investments	-	29,100	29,100
Investment property	-	700,000	700,000
Current assets	480,394	636,115	1,116,509
Creditors due within one year	-	(203,901)	(203,901)
<b>Total</b>	<u>480,394</u>	<u>1,172,017</u>	<u>1,652,411</u>

**21. Reconciliation of net movement in funds to net cash flow from operating activities**

	<b>2021 £</b>	<b>2020 £</b>
Net income/expenditure for the year (as per Statement of Financial Activities)	<b>69,266</b>	<b>(337,045)</b>
<b>Adjustments for:</b>		
Depreciation charges	<b>5,402</b>	5,073
(Gains)/Losses on investments	<b>(24,900)</b>	28,700
Dividends, interests and rents from investments	<b>(25,029)</b>	(26,434)
Loss on the sale of fixed assets	-	14,440
(Increase)/Decrease in debtors	<b>13,018</b>	17,878
Increase/(Decrease) in creditors	<b>(155,131)</b>	109,977
<b>Net cash used in operating activities</b>	<u><b>(117,374)</b></u>	<u><b>(187,411)</b></u>

**22. Analysis of cash and cash equivalents**

	<b>2021 £</b>	<b>2020 £</b>
Cash in hand	<b>894,766</b>	988,429
<b>Total cash and cash equivalents</b>	<u><b>894,766</b></u>	<u>988,429</u>

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**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

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**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2021**

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**23. Analysis of changes in net debt**

	At 1 January 2021 £	Cash flows £	At 31 December 2021 £
Cash at bank and in hand	988,429	(93,663)	894,766
	<u>988,429</u>	<u>(93,663)</u>	<u>894,766</u>

**24. Pension commitments**

The Charity operates a defined contribution pension scheme. The assets of the scheme are held separately from those of the Charity in an independently administered fund. The pension cost charge represents contributions payable by the Charity to the fund and amounted to £6,488 (2020 - £8,937) payable to the fund at the balance sheet date and is included in creditors.

**25. Related party transactions**

There were no related party transactions during the year (2020: £Nil).

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

England & Wales - Charity number 1183175

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# Accounts

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Axial SpA  
works silently.  
We don't.

# Twenty twenty- done

Annual Report & Accounts 2020



# About National Axial Spondyloarthritis Society

## Our purpose:

To transform the diagnosis, treatment and care of people with axial SpA (including AS) so everyone can live well with it.

## Our cause:

Axial SpA (including AS), is an inflammatory condition of the spine and joints. It's an invisible and misdiagnosed condition. Often leaving people feeling powerless, in increasing pain and extreme exhaustion.

## What we do:

We campaign policy makers for early diagnosis and better services. We work with the NHS to get axial SpA identified and diagnosed quickly. We're determined that everyone receives effective care.

We make sure people with axial SpA get the latest information and the support they need to tackle living with this condition. And we build an active community, online and through our local branches across the UK.

Axial SpA works silently. We don't.

# Contents

**Our impact in 2020** P4

**Administrative information** P11

**Trustees' report** P13

**Independent Auditors' Report** P18

**Statement of financial activities** P21

**Balance sheet** P22

**Statement of cash flows** P23

**Notes to the financial statements** P24

# Our Impact in 2020

## Report from the Chair and CEO

The Covid-19 pandemic may have over-shadowed 2020, but our work to deliver our new five-year strategy didn't stop.

Despite significant challenges, we campaigned policy makers for better services, worked with the NHS to improve care and made sure people got the latest information and support they needed to tackle the challenges of life with axial SpA.

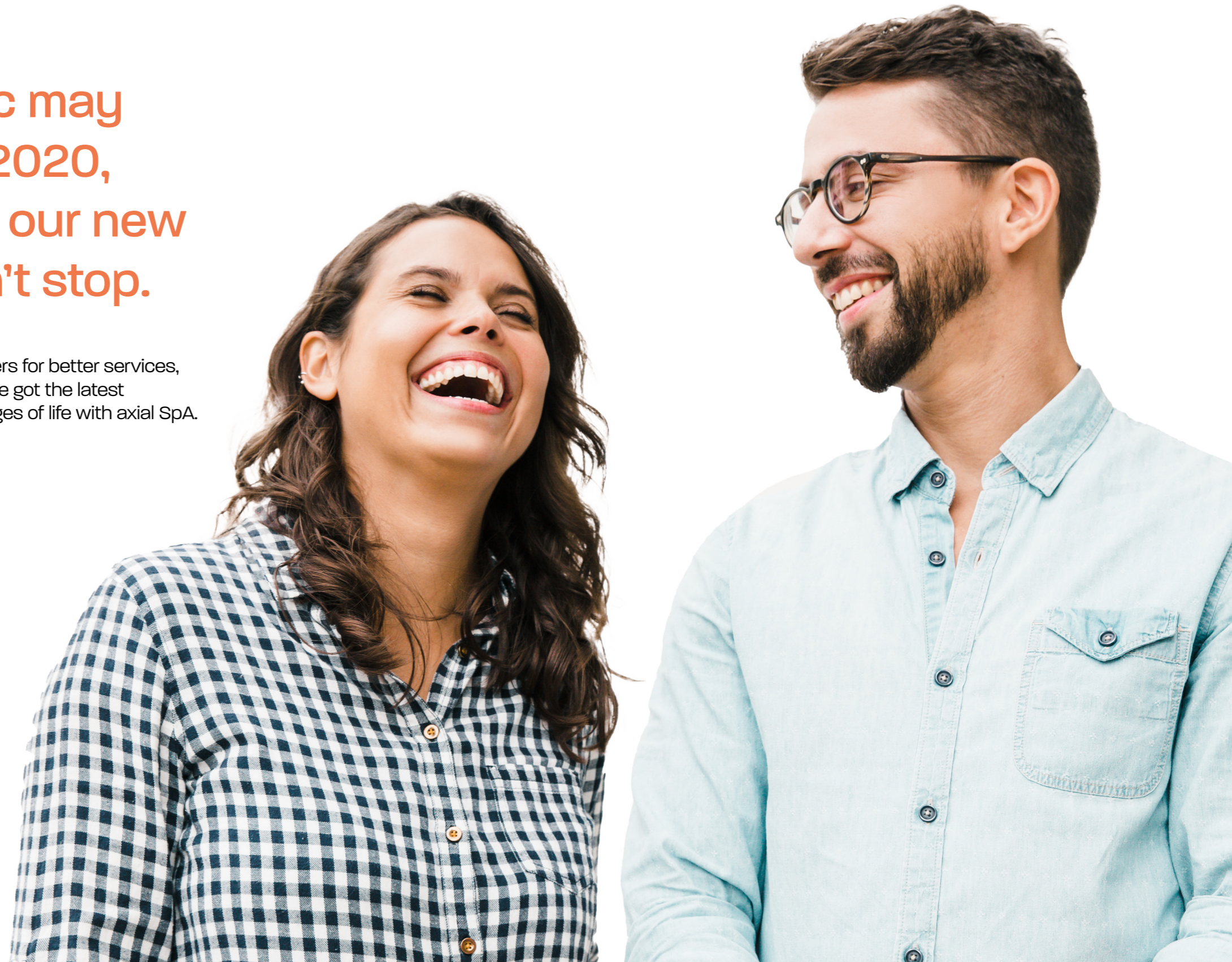
**Axial SpA  
works silently.  
We don't.**



**Raj Mahapatra,**  
Chair



**Dr Dale Webb,**  
CEO



# By the side of people with axial SpA (AS) in 2020

As the Covid-19 pandemic hit, people needed our support more than ever. We responded by redesigning our frontline services, so people living with axial SpA had the support they needed to tackle the challenges of living with the condition through extraordinary times.

## Our helpline was a lifeline

We doubled our helpline opening hours and increased the number of staff on the helpline.

The number of enquiries that we responded to rose by 300% in the first six months and over 12 months we helped 5,600 people who were struggling with issues related to axial SpA. More people than ever faced financial difficulties and we helped people obtain more than £800,000 in disability benefits that they were entitled to.

## Keeping people moving and connected, even when we couldn't go outside

Exercise is crucial for people living with axial SpA. To help keep people moving, we ran 33 innovative Facebook live sessions and produced videos that were viewed 135,000 times. We also created a new section of our website, *My AS My Life*, with advice, blogs, guides and videos to empower people to tackle the challenges of living with axial SpA.

Thanks to funding from the National Lottery, we offered 65 people three online physiotherapy sessions.

## Providing clarity, in a confusing and changing world

A new Covid-19 section on our website provided clarity when official information could be confusing. The page was visited almost 50,000 times.

# 300%

Increase in enquiries responded to

# 135,000

Views of our Facebook Live sessions

# 50,000

Covid-19 website page views online

# Campaigning in Parliament to transform diagnosis and treatment

Our work to ensure that policy makers and politicians hear the voice of people with axial SpA didn't stop. The All-Party Parliamentary Group (APPG) on Axial Spondyloarthritis continued to share our commitment to drive change.

## Calling for faster diagnosis and improvements in care

We worked with the APPG to launch a landmark report, *Assessing Variation in Axial Spondyloarthritis Services in England*, in January. Based on data from a freedom of information request, it revealed worrying gaps in the care and diagnosis of people living with axial SpA and called for urgent improvements.

## Ensuring people got access to services during the pandemic and beyond

A special virtual meeting of the APPG found that thousands of people were struggling to access appointments with healthcare teams. The results were published in a report, *Minimum Services Specification Recommendation Paper*, which called for axial SpA services to be maintained during the pandemic and beyond.

The findings were published in an editorial in *Lancet Rheumatology* and discussed with the National Clinical Director for Musculoskeletal Conditions for NHS England.

## Campaigning for Ministers to support measures to end the delay to diagnosis

In September, Tom Randall MP hosted a landmark parliamentary debate on the delay to diagnosis of axial SpA and we were immensely grateful to him for sharing his story of life with the condition.

During the debate, the Minister of State for Care, Helen Whatley, gave her commitment to supporting greater public awareness of axial SpA.

## Keeping hydrotherapy alive

Our November APPG meeting took the first steps towards developing a campaign so that hydrotherapy gets the attention it deserves.

In 2021, we will continue to work with other organisations to publish a *Hydrotherapy Manifesto* to ensure this sometimes overlooked form of treatment is recognised as a legitimate option for people with axial SpA.

# Transforming care. Transforming diagnosis

**We continued to work with the NHS and healthcare professionals to ensure that everyone with axial SpA received effective care and diagnosis.**

## **We're acting on the delay to diagnosis**

In 2020, we established a ground-breaking five-year programme that aims to end the unacceptable average time to diagnosis of axial SpA of more than eight years.

NASS is the first organisation in the world to call for a *Gold Standard Time to Diagnosis* of one year and is leading the largest programme ever undertaken to act on the delay. The programme will be launched in full in June 2021.

## **Rheumatology teams working with us to drive quality improvement**

*Aspiring to Excellence* helps rheumatology departments to improve their care of axial SpA patients, with the support of our external quality improvement experts at the NHS Transformation Unit.

During 2020 the first six teams faced considerable disruption, with many staff redeployed to the frontline to care for Covid-19 patients. This didn't deter them and the 31 people taking part made commendable strides in their Quality Improvement (QI) learning journey and the design of 13 projects.

With five more rheumatology departments joining in 2021, this is the largest quality improvement initiative in axial SpA anywhere in the world.

## **Building communities and embracing new technologies**

During 2020, it was more important than ever that NASS was here to make sure that no one with axial SpA felt alone. Despite the challenges of Covid-19, our community remained active and everyone's determination to join together and combat isolation shone through.

## **Our branches adapted and kept people positive**

We have 90 volunteer-led branches around the UK, and over half ran virtual sessions, giving people a much-needed opportunity to exercise with a trained physiotherapist and connect with friends.

## **Membership connected people, even when we couldn't meet in person**

By the end of 2020, our membership had risen to 3,685.

Our members told us that during the pandemic, when people felt alone and isolated, NASS membership was more important than ever.

## **Our events went online**

In June, we held our Members Day online which was attended by over 150 people. It provided a great opportunity for people to reconnect and find out about new approaches to living well with axial SpA.

In November, we hosted Physio in Focus, in partnership with physiotherapist association AStretch. The event helped keep more than 100 people moving, at a time when they were struggling to access much needed physiotherapy appointments.

# Fundraising in 2020

**Despite challenging times, our fundraising didn't stop.**

We are grateful to our corporate sponsors, including UCB with whom we secured a five-year funding agreement that enabled us to bring the *Gold Standard Time to Diagnosis* programme to life. We also secured emergency Covid-19 funding from industry sponsors.

Collectively, our generous donors gave over £40,000, which made a significant difference during a very challenging year. Our growing number of regular

givers, who collectively gave over £9,000 in 2020, are helping to ensure that our income is sustainable for the future.

We want to say a big thank you to all our fundraisers who walked, ran and stretched their way to raising £58,000 for NASS.

## **In 2020 we received a total of £251,450 in grant funding.**

Thank you to AbbVie, Biogen, Eli Lilly, Janssen, Novartis and UCB for supporting our vital work.



# National Axial Spondyloarthritis Society Annual Report and Financial Statements for the year ended 31 December 2020

## Administrative information

<b>Trustees</b>	Raj Mahapatra, Chair	(Re-elected 13 June 2020)
	Danny McFarlane, Treasurer	
	Paul Curry	
	Peter Townsend	
	Poppy Hocken	
	Gillian Eames	
	Patricia O'Callaghan	
	Nick Clarke	
	Monika Mayhew	
	Ben Hoare	(Retired 13 June 2020)
	Grant Poiner	(Retired 13 June 2020)
	Claire Jeffries	(Elected 13 June 2020)
Dr Jacqueline Harris	(Elected 13 June 2020)	
Dr Antoni Chan	(Elected 13 June 2020)	
<b>Chief Executive</b>	Dr Dale Webb	
<b>Charity number (England and Wales)</b>	1183175	
<b>Charity number (Scotland)</b>	SC049746	
<b>Auditor</b>	Berg Kaprow Lewis LLP 35 Ballards Lane London N3 1XW	

# The Trustees present their report and financial statements for the year ended 31 December 2020.

## Trustees' Report

The financial statements have been prepared in accordance with the accounting policies set out in note 1 to the financial statements and comply with the Charity's [governing document], the Charities Act 2011, the Charities and Trustee Investment (Scotland) Act 2005, the Charities Accounts (Scotland) Regulations 2006 (as amended) and "Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019)".

### Objectives and activities

#### NASS's vision is as follows:

*"The future we want to create is one where every person with axial spondyloarthritis (axial SpA) has timely and effective diagnosis, treatment and care, is empowered to make informed health choices and feels part of a supportive community."*

#### It seeks to do this by:

- **providing** information to the general public about axial SpA, and advice to people living with the condition, their families, carers, service-providers and employers
- **advocating** to ensure that every person has timely and effective diagnosis, treatment and care of the condition
- **funding** and disseminating research and analysis to advance scientific understanding of the condition and its effective treatment.

### Public Benefit

The Trustees have paid due regard to the Charity Commission's guidance on public benefit in deciding on the activities NASS should undertake.

#### NASS provides public benefit by:

- **working** with statutory bodies and others that provide for the treatment and welfare of people affected by axial SpA
- **educating** people affected by axial SpA, as well as healthcare professionals and the public, on the problems related to it
- **putting** people affected by axial SpA in contact with expert advisers
- **promoting** research into the management and cure of axial SpA and its causes
- **disseminating** the results of research related to axial SpA.

In so doing NASS improves the lives of those affected by axial SpA, particularly in relation to their ability to contribute positively to the prosperity of their communities and the country as a whole.

NASS achieves these aims by developing and adopting relevant strategies and through establishing the necessary resources and an appropriate structure to deliver these strategies.

# Trustees' Report (Continued)

## Achievements and performance

### Reserves

Free reserves, defined as the balance of unrestricted funds less tangible fixed assets, currently amount to £434,967.

The remaining funds are comprised of two properties (valued at £700,000) from which NASS derives rental income, other tangible assets of £10,703, branch funds of £304,487, other restricted grants totalling £175,907, and two statues gifted by Dame Elisabeth Frink.

Unrestricted cash reserves represent six months operating costs.

At present NASS does not have an endowment fund and therefore income must be raised each year from voluntary sources and total income is likely to fluctuate from year to year.

We aim to hold 6-9 months free reserves. This working capital protects the continuity of our core work, that is, work not funded through restricted income. Core work includes our information and support service, awareness raising, campaigning and policy influencing, and the work of our branches across the UK. We have chosen a reserves level of 6-9 months having considered the level of predictability/unreliability in our income sources and the extent to which our cost base is flexible or committed. Our largest income sources (legacies and grant funding from pharmaceutical companies) come at irregular intervals, and the majority of our costs are committed, principally in the form of the staff who deliver our charitable objectives.

### Investments

NASS has an investments strategy and statement of investment principles. We have adopted a policy of maximising liquidity and therefore funds available have been held in interest bearing bank accounts or equivalent short-term deposits at varying rates of interest placed with first tier banks. NASS's property investments comprise two residential apartments which are rented out on shorthold assured tenancies to generate income for NASS. NASS's investments also include two Frink statues. All investments are carried at market value.

## Summary of financial performance

NASS reported a deficit of expenditure over income of £334,290.

In the financial year ending 31 December 2020 the charity received £829,223 of income (£412,735 unrestricted funds, £416,488 restricted funds).

£115,844 of the income was generated at the branch level.

Total resources expended in the year amounted to £1,163,513 (£864,892 unrestricted, £298,621 restricted).

£80,219 of expenditure was spent at the branch level.

The Covid-19 pandemic negatively impacted on our financial performance. We were unable to undertake the normal volume of community and events fundraising due to the social restrictions put in place by Government.

We were, however, successful in securing emergency Covid-19 funding from charitable trusts and pharmaceutical companies to help fund enhanced information and support services. These enhanced services were needed to meet the unprecedented demand that occurred as a consequence of the pandemic.

Overall, we were able to achieve 91% of our income budget for 2020.

## The Trustees have adopted appropriate policies necessary to limit or mitigate the risks faced by NASS.

### The principal risks are:

- **Loss of funds:** Funds are held with various first tier banks on a short term basis and as a result there is little risk of loss in the short to medium term.
- **Loss of income:** NASS seeks to broaden and expand its income from all sources. Nevertheless, NASS is dependent upon voluntary income, both at branch level and at national level, and aims to increase its membership locally and nationally.
- **Loss of reputation:** NASS seeks at all times to maintain its independent viewpoint. Assistance received from external bodies, such as members of the pharmaceutical industry, is strictly controlled so as to ensure that independence is not compromised.
- **Loss of staff:** NASS has a Reward Strategy to ensure that the charity is able to recruit and retain high quality staff. It also has a set of HR policies to provide the appropriate framing for all HR matters.

NASS has a safeguarding policy and set of procedures which is applicable to beneficiaries, staff, trustees and volunteers. Staff are trained and NASS branches have a training resource. The safeguarding policy and procedures will be reviewed on an annual basis by the Finance and General Purposes Committee.

## Structure, governance and management

NASS is a Charitable Incorporated Organisation (CIO) and was registered as a charity in April 2019. It was formed by the National Ankylosing Spondylitis Society, an unincorporated society, whose assets were transferred to the CIO in October 2019. The rules and regulations of the CIO are set out in its Constitution, adopted by the Board of Trustees on 14 September 2019 and approved by the Charity Commission.

The governing body of NASS are an elected Board of Trustees. Only members of NASS may be appointed as Trustees. The maximum number of charity trustees that may be appointed to NASS is twelve. At every annual general meeting of the members of NASS, one third of the charity trustees will be retired from office. The charity trustees to retire by rotation will be those who

have been longest in office since their last appointment or reappointment. If any trustees were last appointed or reappointed on the same day those to retire shall (unless they otherwise agree among themselves) be determined by lot. The vacancies so arising may be filled by the decision of the members at the annual general meeting; any vacancies not filled at the annual general meeting may be filled by the charity trustees. Such persons shall retire at the conclusion of the next annual general meeting after the date of his or her appointment, and shall not be counted for the purpose of determining which of the charity trustees is to retire by rotation at that meeting. The members or the charity trustees may at any time decide to appoint a new charity trustee, whether in place of a charity trustee who has retired or been removed in accordance with clause 15 (Retirement and removal of charity trustees), or as an additional charity trustee, provided that the limit specified on the number of charity trustees would not as a result be exceeded. The Chair and Treasurer are approved by the Board and selected from among the trustee group. Their term of office as Chair and Treasurer is consistent with their term of office as a trustee.

In advance of each AGM, members of NASS are widely encouraged to nominate a fellow member as Trustee. On appointment, new trustees are asked to spend a half day in the NASS central office for a briefing with the Chief Executive and staff to understand how the society works. Formal training is provided when required.

The Trustees meet quarterly to review matters of policy and to make appropriate judgments, directions and decisions on CIO issues. Trustees delegate authority on some matters to a Finance and General Purposes Committee consisting of the Chair, the Treasurer, up to three appointed Trustees and the Chief Executive. This Committee meets four times per year. NASS also has a Medical Advisory Board which acts in advisory capacity only. NASS has more than 90 volunteer-led branches across the UK, each run by a committee in accordance with guidance and policies set by NASS centrally. Day to day management of NASS is undertaken by the Chief Executive and his / her staff. The trustees consider the Chief Executive as comprising the key management personnel of the charity in charge of directing and controlling the charity and running and operating the charity on a day to day basis. The pay of the Chief Executive is reviewed annually by the trustees.

# Trustees' Report (Continued)

The Trustees who served during the year and up to the date of signature of the financial statements were:

<b>Raj Mahapatra, Chair</b>	(Retired by rotation 13 June 2020 and re-elected 13 June 2020)
<b>Danny McFarlane, Treasurer</b>	
<b>Paul Curry</b>	
<b>Peter Townsend</b>	
<b>Poppy Hocken</b>	
<b>Gillian Eames</b>	
<b>Patricia O'Callaghan</b>	
<b>Nick Clarke</b>	
<b>Monika Mayhew</b>	
<b>Ben Hoare</b>	(Retired 13 June 2020)
<b>Grant Poiner</b>	(Retired 13 June 2020)
<b>Claire Jeffries</b>	(Appointed 13 June 2020)
<b>Dr Jacqueline Harris</b>	(Appointed 13 June 2020)
<b>Dr Antoni Chan</b>	(Appointed 13 June 2020)

The charity's current policy concerning the payment of trade creditors is to:

- **settle** the terms of payment with suppliers when agreeing the terms of each transaction;
- **ensure** that suppliers are made aware of the terms of payment by inclusion of the relevant terms in contracts; and
- **pay in accordance** with the company's contractual and other legal obligations.

Trade creditors of the company at the year end were equivalent to 25 days purchases, based on the average daily amount invoiced by suppliers during the year.

## Statement of trustees' responsibilities

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

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

- **select** suitable accounting policies and then apply them consistently;
- **observe** the methods and principles in the Charities SORP;
- **make judgements** and estimates that are reasonable and prudent;
- **state** whether applicable accounting standards have been followed, subject to any material departures disclosed and explained in the financial statements; and
- **prepare** the financial statements on the going concern basis unless it is inappropriate to presume that the charity will continue in operation.

The Trustees are responsible for keeping sufficient accounting records that disclose with reasonable accuracy at any time the financial position of the Charity and enable them to ensure that the financial statements comply with the Charities Act 2011, the Charity (Accounts and Reports) Regulations 2008, the Charities and Trustee Investment (Scotland) Act 2005, the Charities Accounts (Scotland) Regulations 2006 (as amended) and the provisions of the trust deed. They are also responsible for safeguarding the assets of the Charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

## The trustees' report was approved by the Board of Trustees.

Please note: The National Axial Spondyloarthritis Society is a Charitable Incorporated Society (CIO). It was formed by the National Ankylosing Spondylitis Society, an unincorporated Society. The Charity Commission approved the CIO on 29 April 2019 and entered it onto the Register of Charities with the Registered Charity Number 1183175. The Office of the Scottish Charity Regulator approved the CIO on 20 November, registration number SC049746.

At an Annual General Meeting of the National Ankylosing Spondylitis Society held on 13 June 2019, members present voted unanimously in favour of establishing the CIO and authorising trustees of the Society to transfer all assets of the Society after the satisfaction of any proper debts and liabilities of the Society to the new CIO being a charitable organisation having objects similar to the objects of the Society. The CIO became operational on 1 November 2019.

Therefore, the 2019 data contained in the tables in this Report and Accounts only include two months of financial performance. In order to provide full comparative financial performance for 2019 we have supplemented relevant tables with additional narrative which combines the 2019 income and expenditure of the National Ankylosing Spondylitis Society (January – October) with that of the National Axial Spondyloarthritis Society (November – December).



**Raj Mahapatra, Chair**  
Trustee  
Dated: 4 October 2021

# Independent Auditors' Report

## Opinion

We have audited the financial statements of National Axial Spondyloarthritis Society (the 'charity') for the year ended 31 December 2020 which comprise the Statement of Financial Activities, the Balance Sheet, the Statement of Cash Flows and the related notes, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' (United Kingdom Generally Accepted Accounting Practice).

### In our opinion the financial statements:

- **give a true and fair view** of the Charitable Incorporated Organisation's affairs as at 31 December 2020 and of its incoming resources and application of resources, including its income and expenditure for the year then ended;
- **have been properly prepared** in accordance with United Kingdom Generally Accepted Accounting Practice; and
- **have been prepared in accordance** with the requirements of the Charities Act 2011, the Charities and Trustee Investment (Scotland) Act 2005 and regulation 8 of the Charities Accounts (Scotland) Regulations 2006.

## Basis for opinion

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

## Conclusions relating to going concern

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

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

## Other information

The other information comprises the information included in the Annual report other than the financial statements and our Auditors' report thereon. The Trustees are responsible for the other information contained within the Annual report. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon. Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the course of the audit, or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

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

We have nothing to report in respect of the following matters where the Charities (Accounts and Reports) Regulations 2008 and the Charities Accounts (Scotland) Regulations 2006 (as amended) requires us to report to you if, in our opinion:

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

## Responsibilities of trustees

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

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

## Auditors' responsibilities for the audit of the financial statements

We have been appointed as auditor under section 145 of the Charities Act 2011 and report in accordance with the Act and relevant regulations made or having effect thereunder.

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

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud is detailed below:

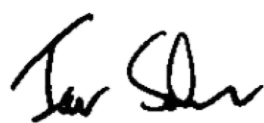
- **Enquiring of management** around actual and potential litigation and claims;
- **Reviewing board meeting minutes** of meetings of those charged with governance;
- **Reviewing financial statement disclosures** and testing to supporting documentation to assess compliance with applicable laws and regulations;
- **Performing audit work** over the risk of management override of controls, including testing of journal entries and other adjustments for appropriateness, evaluating the business rationale of significant transactions outside the normal course of business and reviewing accounting estimates for bias.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at: [www.frc.org.uk/auditors-responsibilities](http://www.frc.org.uk/auditors-responsibilities). This description forms part of our Auditors' report.

# Independent Auditors' Report (Continued)

## Use of our report

This report is made solely to the charitable company's members, as a body, in accordance with Part 4 of the Charities (Accounts and Reports) Regulations 2008 and regulation 10 of the Charities Accounts (Scotland) Regulations 2006. Our audit work has been undertaken so that we might state to the charity's members those matters we are required to state to them in an Auditors' report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and its members, as a body, for our audit work, for this report, or for the opinions we have formed.



## Berg Kaprow Lewis LLP

Chartered Accountants & Statutory Auditor  
35 Ballards Lane  
London  
N3 1XW

Date:

4 October 2021

Berg Kaprow Lewis LLP are eligible to act as auditors in terms of section 1212 of the Companies Act 2006.

# Statement of Financial Activities Including Income and Expenditure Account

For the year ended 31 December 2020

		Unrestricted funds 2020	Restricted funds 2020	Total 2020	Unrestricted funds 2019	Restricted funds 2019	Total 2019
	Notes	£	£	£	£	£	£
<b>Income and endowments from:</b>							
Donations and legacies	3	319,212	157,086	476,298	1,787,661	398,175	2,185,836
Charitable activities	4	-	251,450	251,450	-	14,500	14,500
Other trading activities	5	58,981	3,715	62,696	10,678	3,025	13,703
Investments	6	26,094	-	26,094	5,207	-	5,207
Other income	7	8,448	4,237	12,685	-	6,414	6,414
<b>Total income</b>		412,735	416,488	829,223	1,803,546	422,114	2,225,660
<b>Expenditure on:</b>							
Raising funds	8	151,114	-	151,114	31,467	1,372	32,839
Charitable activities	9	670,638	298,621	969,259	145,152	58,215	203,367
Other	14	43,140	-	43,140	-	-	-
<b>Total resources expended</b>		864,892	298,621	1,163,513	176,619	59,587	236,206
<b>Net (expenditure)/income for the year/</b>							
<b>Net movement in funds</b>		(452,157)	117,867	(334,290)	1,626,927	362,527	1,989,454
Fund balances at 1 January 2020		1,626,927	362,527	1,989,454	-	-	-
<b>Fund balances at 31 December 2020</b>		1,174,770	480,394	1,655,164	1,626,927	362,527	1,989,454

The statement of financial activities includes all gains and losses recognised in the year. All income and expenditure derive from continuing activities.

# Balance Sheet

As at 31 December 2020

	Notes	2020		2019	
		£	£	£	£
<b>Fixed assets</b>					
Tangible assets	15		10,703		13,546
Investment properties	16		700,000		700,000
Investments	17		29,100		86,700
			739,803		800,246
<b>Current assets</b>					
Debtors	18	128,079		145,957	
Cash at bank and in hand		988,429		1,137,176	
		1,116,508		1,283,133	
<b>Creditors: amounts falling due within one year</b>	19	(201,147)		(93,925)	
Net current assets			915,361		1,189,208
<b>Total assets less current liabilities</b>			1,655,164		1,989,454
<b>Income funds</b>					
Restricted funds	22	480,394		362,527	
General unrestricted funds	22	1,174,770		1,591,927	
			1,174,770		1,626,927
			1,655,164		1,989,454

Note: The 2019 income of the National Ankylosing Spondylitis Society and National Axial Spondyloarthritis Society combined was £1,003,246, and expenditure was £1,201,274.

The financial statements were approved by the Trustees on 4 October 2021.



**Raj Mahapatra, Chair**  
Trustee

# Statement of Cash flows

For the year ended 31 December 2020

	Notes	2020		2019	
		£	£	£	£
<b>Cash flows from operating activities</b>					
Cash (absorbed by)/generated from operations	25	(187,071)			1,936,730
<b>Investing activities</b>					
Purchase of tangible fixed assets		(2,230)		(18,061)	
Proceeds on disposal of tangible fixed assets		(14,440)		-	
Purchase of investment property		-		(700,000)	
Proceeds on disposal of other investments		28,900		(86,700)	
Investment income received		26,094		5,207	
<b>Net cash generated from/(used in) investing activities</b>			38,324		(799,554)
<b>Net cash used in financing activities</b>			-		-
<b>Net (decrease)/increase in cash and cash equivalents</b>		(148,747)			1,137,176
Cash and cash equivalents at beginning of year		1,137,176			-
<b>Cash and cash equivalents at end of year</b>		988,429			1,137,176

# Notes to Financial Statements

As at 31 December 2020

## 1. Accounting policies

Charity information

National Axial Spondyloarthritis Society is an organisation incorporated in the United Kingdom under the Charities Act 2011. The organisation is a Charitable Incorporated Organisation, registered in England and Wales and in Scotland. The address of the registered office is 172 King Street, London, W6 0QU.

### 1.1 Accounting convention

The financial statements have been prepared in accordance with the Charities Act 2011, the Charities and Trustee Investment (Scotland) Act 2005, the Charities Accounts (Scotland) Regulations 2006 (as amended) and "Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019)". The Charity is a Public Benefit Entity as defined by FRS 102.

The financial statements have departed from the Charities (Accounts and Reports) Regulations 2008 only to the extent required to provide a true and fair view. This departure has involved following the Statement of Recommended Practice for charities applying FRS 102 rather than the version of the Statement of Recommended Practice which is referred to in the Regulations but which has since been withdrawn.

The financial statements are prepared in sterling, which is the functional currency of the Charity. Monetary amounts in these financial statements are rounded to the nearest £.

The financial statements have been prepared under the historical cost convention, modified to include the revaluation of freehold properties and to include investment properties and certain financial instruments at fair value. The principal accounting policies adopted are set out below.

### 1.2 Going concern

At the time of approving the financial statements, the Trustees have a reasonable expectation that the Charity has adequate resources to continue in operational existence for the foreseeable future. Thus, the Trustees continue to adopt the going concern basis of accounting in preparing the financial statements.

### 1.3 Charitable funds

Unrestricted funds are available for use at the discretion of the Trustees in furtherance of their charitable objectives.

Restricted funds are subject to specific conditions by donors as to how they may be used. The purposes and uses of the restricted funds are set out in the notes to the financial statements.

Endowment funds are subject to specific conditions by donors that the capital must be maintained by the Charity.

### 1.4 Income

Income is recognised when the Charity is legally entitled to it after any performance conditions have been met, the amounts can be measured reliably, and it is probable that income will be received.

Cash donations are recognised on receipt. Other donations are recognised once the Charity has been notified of the donation, unless performance conditions require deferral of the amount. Income tax recoverable in relation to donations received under Gift Aid or deeds of covenant is recognised at the time of the donation.

Legacies are recognised on receipt or otherwise if the Charity has been notified of an impending distribution, the amount is known, and receipt is expected. If the amount is not known, the legacy is treated as a contingent asset.

# Notes to Financial Statements (Continued)

As at 31 December 2020

## 1 Accounting policies

Grants are included in the Statement of financial activities on a receivable basis. The balance of income received for specific purposes but not expended during the period is shown in the relevant funds on the Balance sheet. Where income is received in advance of entitlement of receipt, its recognition is deferred and included in creditors as deferred income. Where entitlement occurs before income is received, the income is accrued.

Income tax recoverable in relation to donations received under Gift Aid or deeds of covenant is recognised at the time of the donation. Income tax recoverable in relation to investment income is recognised at the time the investment income is receivable.

### 1.5 Expenditure

Expenditure is recognised once there is a legal or constructive obligation to transfer economic benefit to a third party, it is probable that a transfer of economic benefits will be required in settlement and the amount of the obligation can be measured reliably. Expenditure is classified by activity. The costs of each activity are made up of the total of direct costs and shared costs, including support costs involved in undertaking each activity. Direct costs attributable to a single activity are allocated directly to that activity. Shared costs which contribute to more than one activity and support costs which are not attributable to a single activity are apportioned between those activities on a basis consistent with the use of resources. Central staff costs are allocated on the basis of time spent, and depreciation charges allocated on the portion of the asset's use.

Expenditure on charitable activities is incurred on directly undertaking the activities which further the charity's objectives, as well as any associated support costs.

Grants payable are charged in the year when the offer is made except in those cases where the offer is conditional, such grants being recognised as expenditure when the conditions attaching are fulfilled. Grants offered subject to conditions which have not been met at the year-end are noted as a commitment, but not accrued as expenditure.

All expenditure is inclusive of irrecoverable VAT.

### 1.6 Tangible fixed assets

Tangible fixed assets are initially measured at cost and subsequently measured at cost or valuation, net of depreciation and any impairment losses.

Depreciation is recognised so as to write off the cost or valuation of assets less their residual values over their useful lives on the following bases:

Office equipment                      25% on a straight line basis

The gain or loss arising on the disposal of an asset is determined as the difference between the sale proceeds and the carrying value of the asset, and is recognised in net income/(expenditure) for the year.

### 1.7 Investment properties

Investment property, which is property held to earn rentals and/or for capital appreciation, is initially recognised at cost, which includes the purchase cost and any directly attributable expenditure. Subsequently it is measured at fair value at the reporting end date. The surplus or deficit on revaluation is recognised in profit or loss.

### 1.8 Fixed asset investments

Fixed asset investments are initially measured at transaction price excluding transaction costs, and are subsequently measured at fair value at each reporting date. Changes in fair value are recognised in net income/(expenditure) for the year. Transaction costs are expensed as incurred.

### 1.9 Impairment of fixed assets

At each reporting end date, the Charity reviews the carrying amounts of its tangible assets to determine whether there is any indication that those assets have suffered an impairment loss. If any such indication exists, the recoverable amount of the asset is estimated in order to determine the extent of the impairment loss (if any).

# Notes to Financial Statements (Continued)

As at 31 December 2020

## 1.10 Cash and cash equivalents

Cash and cash equivalents include cash in hand, deposits held at call with banks, other short-term liquid investments with original maturities of three months or less, and bank overdrafts. Bank overdrafts are shown within borrowings in current liabilities.

## 1.11 Financial instruments

The Charity has elected to apply the provisions of Section 11 'Basic Financial Instruments' and Section 12 'Other Financial Instruments Issues' of FRS 102 to all of its financial instruments.

Financial instruments are recognised in the Charity's balance sheet when the Charity becomes party to the contractual provisions of the instrument.

Financial assets and liabilities are offset, with the net amounts presented in the financial statements, when there is a legally enforceable right to set off the recognised amounts and there is an intention to settle on a net basis or to realise the asset and settle the liability simultaneously.

## Basic financial assets

Basic financial assets, which include debtors and cash and bank balances, are initially measured at transaction price including transaction costs and are subsequently carried at amortised cost using the effective interest method unless the arrangement constitutes a financing transaction, where the transaction is measured at the present value of the future receipts discounted at a market rate of interest. Financial assets classified as receivable within one year are not amortised.

## Basic financial liabilities

Basic financial liabilities, including creditors and bank loans are initially recognised at transaction price unless the arrangement constitutes a financing transaction, where the debt instrument is measured at the present value of the future payments discounted at a market rate of interest. Financial liabilities classified as payable within one year are not amortised.

Debt instruments are subsequently carried at amortised cost, using the effective interest rate method.

Trade creditors are obligations to pay for goods or services that have been acquired in the ordinary course of operations from suppliers. Amounts payable are classified as current liabilities if payment is due within one year or less. If not, they are presented as non-current liabilities. Trade creditors are recognised initially at transaction price and subsequently measured at amortised cost using the effective interest method.

## Derecognition of financial liabilities

Financial liabilities are derecognised when the Charity's contractual obligations expire or are discharged or cancelled.

## 1.12 Employee benefits

The cost of any unused holiday entitlement is recognised in the period in which the employee's services are received.

Termination benefits are recognised immediately as an expense when the Charity is demonstrably committed to terminate the employment of an employee or to provide termination benefits.

## 1.13 Retirement benefits

Payments to defined contribution retirement benefit schemes are charged as an expense as they fall due.

## 1.14 Leases

Rentals payable under operating leases, including any lease incentives received, are charged as an expense on a straight line basis over the term of the relevant lease.

## 2 Critical accounting estimates and judgements

In the application of the Charity's accounting policies, the Trustees are required to make judgements, estimates and assumptions about the carrying amount of assets and liabilities that are not readily apparent from other sources. The estimates and associated assumptions are based on historical experience and other factors that are considered to be relevant. Actual results may differ from these estimates.

The estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognised in the period in which the estimate is revised where the revision affects only that period, or in the period of the revision and future periods where the revision affects both current and future periods.

## 3 Donations and legacies

	Unrestricted funds	Restricted funds	Total	Unrestricted funds	Restricted funds	Total
	2020 £	2020 £	2020 £	2019 £	2019 £	2019 £
Donations and gifts	131,011	37,019	168,030	1,660,706	369,240	2,029,946
Legacies receivable	120,567	-	120,567	106,500	-	106,500
Grants receivable	-	16,277	16,277	6,629	-	6,629
Membership fees	50,214	103,790	154,004	13,826	28,935	42,761
Donated services	17,420	-	17,420	-	-	-
	319,212	157,086	476,298	1,787,661	398,175	2,185,836

Income from donations and legacies in 2019 for the National Ankylosing Spondylitis Society and National Axial Spondyloarthritis Society combined was £619,462. The figure of £2,029,946 in the table above includes the transfer of assets from the unincorporated Society to the Charitable Incorporated Organisation, which totalled £2,014,801, of which £367,276 is for restricted purposes.

# Notes to Financial Statements (Continued)

As at 31 December 2020

## 4 Charitable activities

	Restricted funds 2020 £	Restricted funds 2019 £
Pharmaceutical industry funded grants	251,450	14,500

Income from charitable activities in 2019 for the National Ankylosing Spondylitis Society and National Axial Spondyloarthritis Society combined was £243,052.

## 5 Other trading activities

	Unrestricted funds 2020 £	Restricted funds 2020 £	Total funds 2020 £	Unrestricted funds 2019 £	Restricted funds 2019 £	Total funds 2019 £
Fundraising events	58,981	3,715	62,696	10,687	3,025	13,703

Income from other trading activities in 2019 for the National Ankylosing Spondylitis Society and National Axial Spondyloarthritis Society combined was £100,707.

## 6 Investments

	Unrestricted funds 2020 £	Unrestricted funds 2019 £
Rental income	25,450	14,500
Interest receivable	984	515
	26,094	5,207

Income from investments in 2019 for the National Ankylosing Spondylitis Society and National Axial Spondyloarthritis Society combined was £29,427.

## 7 Other income

	Unrestricted funds 2020 £	Restricted funds 2020 £	Total 2020 £	Unrestricted funds 2019 £	Restricted funds 2019 £	Total 2019 £
Job retention scheme	8,048	-	8,048	-	-	-
Branches other Income	-	4,237	4,237	-	6,414	6,414
Other Income	400	-	400	-	-	-
	8,448	4,237	12,685	-	6,414	6,414

## 8 Raising funds

	Unrestricted funds 2020 £	Unrestricted funds 2019 £	Restricted funds 2019 £	Total 2019 £
Staging fundraising events	34,391	4,651	1,372	6,023
Staff costs	83,035	7,840	-	7,840
Total fundraising and publicity	117,426	12,491	1,372	13,863
Support costs	33,688	18,976	12,491	18,976
	£151,114	31,467	1,372	32,839

Expenditure on raising funds in 2019 for the National Ankylosing Spondylitis Society and National Axial Spondyloarthritis Society combined was £129,196.

# Notes to Financial Statements (Continued)

As at 31 December 2020

## 9 Charitable activities

	Governance costs	Every Patient Every Time	Connected & Supportive	Informed and Empowered	Total
	2020 £	2020 £	2020 £	2020 £	2020 £
Staff costs	-	187,336	143,132	108,821	439,289
Travel expenses	-	5,940	155	356	6,451
IT and communications	-	-	-	-	-
Office costs	-	-	1,603	268	1,871
Courier and distribution of materials	-	32	6,518	694	7,244
Literature, brochures and information	-	57,944	26,080	6,561	90,585
Treatment by healthcare professionals	-	-	56,378	-	56,378
Hire of venue and facilities	-	4,924	16,255	52	21,231
Other branch payments	-	-	8,742	-	8,742
Third party technical providers	-	91,581	15,231	11,305	118,117
Total direct costs	-	347,757	274,094	128,057	749,908
Support costs	18,927	76,004	58,070	44,150	197,151
Grant funding of activities (see note 10)	-	20,192	2,008	-	22,200
Total charitable activities	18,927	443,953	334,172	172,207	969,259
<b>Analysis by fund</b>					
Unrestricted funds	18,927	229,535	253,953	168,223	670,638
Restricted funds	-	214,418	80,219	3,984	298,621
Total	18,927	443,953	334,172	172,207	969,259

Governance costs	Every Patient Every Time	Connected & Supportive	Informed and Empowered	Total
2019 £	2019 £	2019 £	2019 £	2019 £
-	35,539	22,636	16,394	71,559
-	7,743	474	427	8,644
-	694	5,280	134	6,108
-	8	108	(60)	56
-	28	2,779	620	3,427
-	317	-	34	351
-	-	-	28,841	28,841
-	3,483	3,453	70	7,006
-	2,645	-	-	2,645
-	5,993	812	85	6,890
-	53,440	35,542	46,545	135,527
27,525	16,076	8,721	6,800	59,122
-	8,613	-	105	8,718
27,525	78,129	44,263	53,450	203,367
27,525	48,755	44,263	24,609	145,152
-	29,374	-	28,841	58,215
27,525	78,129	44,263	53,450	203,367

# Notes to Financial Statements (Continued)

As at 31 December 2020

## 10 Grants payable

	Grants paid to individuals	Grants paid to institutions	Total	Grants paid to individuals	Grants paid to institutions	Total
	2020 £	2020 £	2020 £	2019 £	2019 £	2019 £
Every Patient Every Time	-	20,192	20,192	250	8,363	8,613
Connected & Supportive	-	1,644	1,644	-	-	-
Informed & Empowered	364	-	364	105	-	105
Total	364	21,836	22,200	355	8,363	8,718

## 11 Analysis of support costs

	Every Patient Every Time	A Connected and Supportive Community	Empower, Inform and Inspire	Total charitable Expenditure	Governance costs	Fundraising costs	Total	Total
	2020 £	2020 £	2020 £	2020 £	2020 £	2020 £	2020 £	2019 £
Staff costs	21,426	16,370	12,446	50,241	3,093	9,497	59,738	8,345
Depreciation	1,819	1,390	1,057	4,267	-	806	5,073	3,788
Other staff costs	5,723	4,373	3,324	13,420	-	2,537	15,957	3,093
Premises costs	22,620	17,282	13,140	53,042	-	10,026	63,068	10,967
Travel expenses	73	56	43	172	-	32	204	1,632
IT and communications	10,900	8,328	6,332	25,561	-	4,831	30,392	2,132
Office costs	1,974	1,509	1,147	4,630	-	875	5,505	4,673
Conference costs	1,207	922	701	2,829	-	535	3,364	0
Audit fees	-	-	-	-	6,540	-	6,540	5,280
Accountancy	1,076	822	625	2,523	-	477	3,000	10,080
Insurance, legal and professional	9,186	7,018	5,336	21,540	2,660	4,071	28,271	60
Other Governance costs	-	-	-	-	9,727	-	9,727	9,072
Total	76,004	58,070	44,150	178,224	18,927	33,688	230,839	59,122
Total 2019	16,076	8,721	6,800	31,597	9,072	18,453	59,122	

Governance costs includes payments to the auditors of £6,540 (2019- £5,280) for audit fees. Governance and support costs in 2019 for the National Ankylosing Spondylitis Society and National Axial Spondyloarthritis Society combined was £271,330.

# Notes to Financial Statements (Continued)

As at 31 December 2020

## 12 Trustees

None of the Trustees (or any persons connected with them) received any remuneration or benefits from the Charity during the year. In 2020 there were expenses claimed by one trustee.

## 13 Employees

The average monthly number of employees during the year was:

	2020 Number	2019 Number
	12	11
<b>Employment costs</b>	<b>2020 £</b>	<b>2019 £</b>
Wages and salaries	461,270	79,477
Social security costs	44,586	7,991
Other pension costs	76,206	12,077
	582,062	99,545

Employment costs in 2019 for the National Ankylosing Spondylitis Society and National Axial Spondyloarthritis Society combined was £537,872.

The following numbers of staff had emoluments above £60,000.

Gross annual salary	No. of staff 2020	No. of staff 2019
Between £100,001 - £110,000	1	0*

\*In 2019, as the National Axial Spondyloarthritis Society was only operational for two months, no staff had an emolument in excess of £60,000. In 2019, the gross salary of the CEO for the National Ankylosing Spondylitis (January – October) and then National Axial Spondyloarthritis Society (November – December) was £100,000.

In 2020, the gross salary of the CEO was £100,431.

## 14 Other

	Unrestricted funds £	Restricted funds £	Total £	Unrestricted funds £
	2020	2020	2020	2019
Net loss on disposal of tangible fixed assets	14,440	-	14,440	-
Revaluation loss on investment	28,700	-	28,700	-
	43,140	-	43,140	-

## 15 Tangible fixed assets

	Office equipment £
<b>Cost</b>	
At 1 January 2020	18,061
Additions	2,230
At 31 December 2020	20,291
<b>Depreciation and impairment</b>	
At 1 January 2020	4,515
Depreciation charged in the year	5,073
At 31 December 2020	9,588
<b>Carrying amount</b>	
At 31 December 2020	10,703
At 31 December 2019	13,546

# Notes to Financial Statements (Continued)

As at 31 December 2020

## 16 Investment property

	2020 £
<b>Fair value</b>	
At 1 January 2020 and 31 December 2020	700,000

Investment property comprises residential flats let. The fair value of the investment property has been arrived at on the basis of a valuation carried out by the trustees. The valuation was made on an open market value basis by reference to market evidence of transaction prices for similar properties.

	2020 £	2019 £
Freehold	-	-
Long leasehold	700,000	700,000
Short leasehold	-	-

## 17 Fixed asset investments

	Unlisted investments £
<b>Cost or valuation</b>	
At 1 January 2020	86,700
Revaluation	(28,700)
Disposals	(28,900)
At 31 December 2020	29,100
<b>Carrying amount</b>	
At 31 December 2020	29,100
At 31 December 2019	86,700

The fixed assets investment are two statuettes gifted by Dame Elisabeth Frink.

## 18 Debtors

	2020 £	2019 £
<b>Amounts falling due within one year:</b>		
Trade debtors	6,458	114,236
Other debtors	116,500	15,052
Prepayments and accrued income	5,121	16,669
	128,079	145,957

## 19 Creditors: amounts falling due within one year

	Notes	2020 £	2019 £
Other taxation and social security		22,241	13,396
Deferred income		34,925	30,000
Trade creditors		76,930	14,159
Other creditors		26,469	11,710
Accruals		40,582	24,660
		201,147	93,925

# Notes to Financial Statements (Continued)

As at 31 December 2020

## 20 Deferred income

	2020	2019
	£	£
Arising from grants	33,750	30,000
Other deferred income	1,175	-
	34,925	30,000

## 21 Retirement benefit schemes

### Defined contribution schemes

The charity operates a defined contribution pension scheme. The assets of the scheme are held separately from those of the charity in an independently administered fund. The pension cost charge represents contributions payable by the charity to the fund and amounted to £76,206 (2019: £12,077). An amount of £8,937 (£6,136 in 2019) was payable to the fund at the balance sheet date and is included in creditors.

## 22 Statement of funds

The income funds of the charity include restricted funds comprising the following unexpended balances of donations and grants held on trust for specific purposes:

Statement of funds				
	Balance at 1 January 2020 £	Incoming resources £	Resources expended £	Balance at 31 December 2020 £
<b>Unrestricted Funds</b>				
General funds-all funds	1,626,927	412,735	(864,892)	1,174,770
<b>Restricted Funds</b>				
Branch funds	268,862	115,844	(80,219)	304,487
Branch Development Fund	5,211	-	(84)	5,127
Fergus Rogers Fund	2,416	-	(364)	2,052
Aspiring to Excellence	86,038	122,500	(84,918)	123,620
APPG	-	12,272	(12,272)	-
Cimzia Select Programme	-	150	-	150
National Lottery Fund	-	9,750	(4,713)	5,037
Ophthalmology/Gastroenterology project	-	9,205	-	9,205
Self management programme	-	13,962	-	13,962
COVID-19	-	17,828	(14,287)	3,541
Gold Standard	-	98,700	(97,242)	1,458
Good Boost	-	16,277	(4,522)	11,755
	362,527	416,488	(298,621)	480,394
<b>Total of funds</b>	<b>1,989,454</b>	<b>829,223</b>	<b>(1,163,513)</b>	<b>1,655,164</b>

# Notes to Financial Statements (Continued)

As at 31 December 2020

Statement of funds prior year			
	Incoming resources £	Resources expended £	Balance at 31 December 2019 £
<b>Unrestricted Funds</b>			
General funds-all funds	1,803,546	(176,619)	1,626,927
<b>Restricted Funds</b>			
Branch funds	301,720	(32,858)	268,862
Branch Development fund	5,211	-	5,211
Fergus Rogers fund	2,416	-	2,416
Pharma industry funded	112,767	(26,729)	86,038
	422,114	(59,587)	362,527
<b>Total of funds</b>	<b>2,225,660</b>	<b>(236,206)</b>	<b>1,989,454</b>

NASS has 12 restricted income streams, the largest of which represents the funds of our national network of branches. We also have funds to support branch development and funds to provide small welfare grants. We received grant funding from pharmaceutical companies and charitable trusts which support our larger programmes. In 2020 we also received grants to support COVID-19 support work.

## 23 Analysis of net assets between funds

	Unrestricted funds 2020 £	Restricted funds 2020 £	Total 2020 £	Unrestricted funds 2019 £	Restricted funds 2019 £	Total 2019 £
Fund balances at 31 December 2020 are represented by:						
Tangible assets	10,703	-	10,703	13,546	-	13,546
Investment properties	700,000	-	700,000	700,000	-	700,000
Investments	29,100	-	29,100	86,700	-	86,700
Current assets/(liabilities)	434,967	480,394	915,361	826,681	362,527	1,189,208
	1,174,770	480,394	1,655,164	1,626,837	362,527	1,989,454

## 24 Related party transactions

There were no disclosable related party transactions during the year (2019 - none).

# Notes to Financial Statements (Continued)

As at 31 December 2020

## 25 Cash generated from operations

	2020 £	2019 £
(Deficit)/surplus for the year	(316,400)	1,989,454
Adjustments for:		
Investment income recognised in statement of financial activities	(26,094)	(5,207)
Loss on disposal of tangible fixed assets	14,440	-
Revaluation loss on investment	28,700	-
Depreciation and impairment of tangible fixed assets	5,073	4,515
Movements in working capital:		
Decrease/(increase) in debtors	17,878	(145,956)
Increase in creditors	102,297	63,924
Increase in deferred income	4,925	30,000
<b>Cash (absorbed by)/generated from operations</b>	<b>(187,071)</b>	<b>1,936,730</b>

## 26 Analysis of changes in net funds

The Charity had no debt during the year.

## 27 Operating lease commitments

At 31st December 2020 the charity had commitments to make future minimum lease payments under non-cancellable operating leases as follows:

	2020 £	2019 £
Not later than 1 year	22,750	22,750
Later than 1 year and not later than 5 years	17,062	39,812

# Axial SpA works silently. We don't.





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We don't.

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Society**

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