

METUPUK

England & Wales · Charity number 1196494

Details

Status Registered

Legal form CIO

Registered 2021-11-09

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

Contact

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Activities

Objects: THE RELIEF OF PATIENTS IN THE UK WHO HAVE OR ARE AT RISK OF METASTATIC BREAST CANCER (MBC); IN PARTICULAR (BUT NOT EXCLUSIVELY) THROUGH RAISING AWARENESS ABOUT MBC BY THE PROVISION OF INFORMATION AND EDUCATION, WORKING WITH STAKEHOLDERS TO INCREASE MBC RESEARCH AND ACCESS TO DRUGS AND ENSURING FOR THE PUBLIC BENEFIT THAT MBC PATIENT TREATMENT AND CARE REMAINS A NATIONAL PRIORITY.

Activities: METUPUK is a UK wide patient advocacy charity for people with metastatic breast cancer (MBC) campaigning to increase public awareness and education about MBC. We work to see better care, access to drugs and trials as well as representation of MBC patients within NHS UK, the national regulators and drug companies.

Classification

- **How:** Provides Advocacy/advice/information
- **What:** General Charitable Purposes, The Advancement Of Health Or Saving Of Lives
- **Who:** The General Public/mankind

Geography

- Northern Ireland
- Scotland
- Throughout England And Wales

Finances

Period end	Income	Expenditure	Assets	Employees
2025-03-31	£58,203	£36,221	-	-
2024-03-31	£77,711	£61,012	-	-
2023-04-05	£86,883	£24,731	-	-

Trustees

Name	Role	Appointed
Dr Helen Steele		2021-11-09
Emma Smith		2023-07-31
Katherine Southwell		2025-12-02
LAURA ASHURST		2025-03-24
Philip Southwell		2023-11-20
Sue Thomas		2025-10-29

METUPOK

England & Wales - Charity number 1196494

Accounts

METUPOK ANNUAL REPORT

1 APRIL 2024-31 MARCH 2025



Third Annual Report (1 April 2024 – 31 March 2025)

METUPUK (Metastatic Exchange to Unleash Power UK)

METUPUK is a UK-wide patient advocacy charity for people with metastatic breast cancer (MBC) campaigning to increase public awareness and education about MBC. We work to see better care, access to drugs and trials as well as representation of MBC patients within NHS UK, the national regulators and drug companies.

Structure

METUPUK is a Foundation Charitable Incorporated Organisation registered with the Charity Commission of England and Wales (1196494), registration date 9 November 2021, and with the Office of the Scottish Charity Regulator (SCO55472), registration date 27 June 2024.

Charitable objects (excerpt from the Charity's Governing Document dated 9 November 2021)

The relief of patients in the UK who have or are at risk of metastatic breast cancer (MBC); in particular (but not exclusively) through raising awareness about MBC by the provision of information and education, working with stakeholders to increase MBC research and access to drugs and ensuring for the public benefit that MBC patient treatment and care remains a national priority.

What the charity does:

General Charitable Purposes
The Advancement of Health or Saving of Lives

Who the charity helps:

The General Public/mankind

How the charity helps:

Provides advocacy, advice and information

Where the charity operates:

Throughout England and Wales, Northern Ireland and Scotland

Registered office 4 West End Barns, West End, Northwold, Thetford, Norfolk IP26 5NE
email: contact@metupuk.org.uk

“We need everyone’s voice to promote and create change for MBC patients. Otherwise, we will just continue to die.”



Jo Taylor BEM
January 1969 -
November 2025

METUPUK were in the process of finalising this Annual Report when we heard the news that our Founder and Chair, Jo Taylor, had died.

Jo was a tireless advocate, a fearless campaigner and a beacon of hope for all those living with MBC.

Diagnosed with primary breast cancer in 2007 and MBC in 2014, Jo dedicated her life to changing the narrative around MBC. She founded METUPUK in 2016 to show the world that people with MBC are living, thriving and worth investing in.

From her advocacy and public speaking, to the creation of the red flag signs and symptoms infographics, her work has touched countless lives both here in the UK and around the world. She undoubtedly paved the way in empowering others to find their voice.

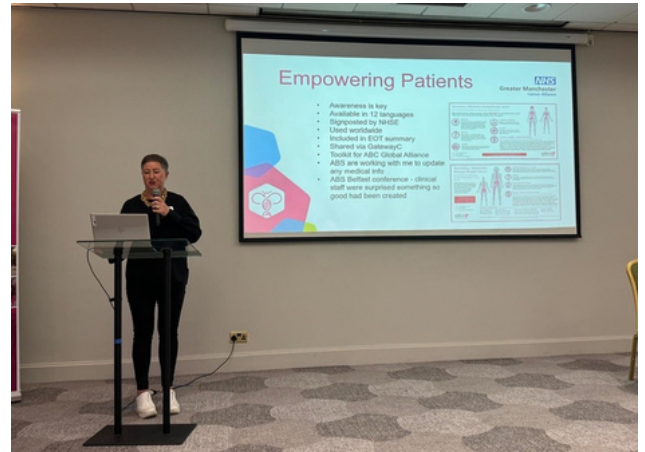
Jo championed change with unwavering resolve and spoke with unflinching honesty. Her voice lives on: her messages echo louder than ever. We demand to be counted and we demand change.

The thoughts of our Trustees and all our volunteers are with Jo’s family, friends and the entire MBC community. She will be deeply missed, but absolutely never forgotten.

She had the heart of a lioness. Rest in power Jo.

“We’re proud of what METUPUK has achieved in such a short time as a charity. Our rapid progress is down to one thing: passionate patient experts.”

Jo Taylor, METUPUK Founder and Chair



Jo Taylor speaking at the Greater Manchester Cancer Alliance Metastatic Breast Cancer conference November 2024

As we ended our second year as a Charity, we were devastated by the news that Tassia Haines, who led METUPUK’s work in Wales, had died. Most organisations would be shaken by the death of a team member but for METUPUK, this is our reality with many of our volunteers, supporters and trustees living with and dying of MBC. Spurred on with determination, May 2024 saw the launch of the Charity’s Metastatic May campaign, focussing on the “Cost of Living” (see page 12). This was set against the backdrop of the severity modifier changes facing new drug approvals, a topic that has consumed METUPUK’s drug approvals team this year.

Data has been a significant part of our focus in 2024-2025 with METUPUK on the National Audit of Metastatic Breast Cancer Advisory Group and the Patient Involvement Audit Group, ensuring the patient voice is heard. The audit has been a long time coming since it has been 12 years since data collection for MBC was made “mandatory” in England, with little data actually collected. Read more about the exceptional data progress in Northern Ireland on page 21.

Awareness is a huge issue for MBC and seeing the Charity getting the message out to the devolved nations this year has been incredible. November 2024 saw the first MBC Conference for England’s Cancer Alliances, hosted by Greater Manchester Cancer Alliance. In Wales, infographics for GPs and primary care clinicians, who play a vital role in identifying the signs and symptoms of MBC, were promoted in January 2025 at an educational event for primary care (see page 19). In Northern Ireland, METUPUK is represented on the Department of Health’s Breast Services Review.

This year, we mourn a number of volunteers and supporters who died of MBC. Their spirit and drive remain at the heart of our mission.



**EMMA LAWRENCE
(NEE FISHER)**

Volunteer
Died July 2024



LESLEY EATON

Darker Side of Pink
Died June 2024



SARAH MARSHALL

Volunteer
Died October 2024



JACQUI CREWE

Darker Side of Pink
Died January 2025

At the end of our 2024-25 financial year, our net profit was £21k. Our heartfelt thanks to all the fundraisers who keep change moving. Turn to pages 22 and 23 to see some of their amazing efforts, from skydiving to running to cycling to fun evenings, all coming together for METUPUK.

We rely on the work of our Trustees, our patient advocate volunteers and all of our supporters. None of us draw a salary from the Charity and METUPUK would not function without all the people who freely give their time and expertise. I thank everyone who has helped us become the organisation that we are today.

JO TAYLOR
Founder/Chair METUPUK

OUR PEOPLE



Trustees during the financial period April 2024 - March 2025 were Jo Taylor (Chair), Nicky Goldthorpe, Emma Smith, Dr Helen Steele, Laura Ashurst (appointed March 2025), Phil Southwell, Madeleine Meynell (resigned November 2024) and Andy Figgins (resigned December 2024). Current Trustees are listed on page 26.

The constitution requires at least one trustee to have MBC. New Trustees are elected by the Board where a skill shortage has been identified. Dr Helen Steele has the responsibility for the induction of new trustees, and each Trustee is provided with a copy of The Essential Trustee.



JO TAYLOR
Founder/Chair
METUPUK



NICKY GOLDTHORPE
Trustee -
Secretary



EMMA SMITH
Trustee -
Fundraising



DR HELEN STEELE
Trustee - Volunteers
and People



LAURA ASHURST
Trustee -
Darker Pink Exhibition



PHIL SOUTHWELL
Trustee -
Finance and Technology



MADELEINE MEYNELL

Trustee -

Access to Drugs

(resigned November 2024)



ANDY FIGGINS

Trustee -

Friends and Family

(resigned December 2024)

We are grateful for the outstanding impact Madeleine made during her three year tenure, advancing METUPUK’s work with the National Institute for Health and Care Excellence (NICE) and the Scottish Medicines Consortium (SMC). She now continues as our Access to Medicines Lead – see updates on page 14.

JO TAYLOR AWARDED THE BRITISH EMPIRE MEDAL

Everyone involved in METUPUK was bursting with pride at the news in late December 2024 that our founder Jo was being awarded the British Empire Medal (BEM) in the King’s 2025 New Year Honours List, for her outstanding services to breast cancer patients. Jo’s diagnosis of Metastatic Breast Cancer had propelled her into advocacy and in 2016 she founded METUPUK, inspired by the American group MET UP, to raise awareness and campaign for better support and visibility for people living with metastatic breast cancer.

The BEM is awarded to individuals who have made significant contributions to their community or public life, often through sustained and hands-on service. Jo’s work has had a profound impact on the lives of others.



Jo Taylor BEM announced in the King’s 2025 New Year Honours List.

“I’m honoured and grateful to receive the British Empire Medal. I started campaigning to make a difference so that breast cancer patients know the signs of metastatic disease, and GPs can recognise symptoms in those previously treated. My goal is simple: no one should feel uninformed or unsupported the way I once did.”

VOLUNTEERS

All METUPUK's charitable activities rely on the hard work and dedication of a team of volunteers. As of 31 March 2025, 34 active volunteers from across all regions of the UK were working with METUPUK, alongside a wider network of supporters who support METUPUK by fundraising or providing campaign content or patient stories. Volunteers bring the patient voice, which is at the heart of everything that METUPUK achieves. We are extremely grateful for the passionate and tireless work of METUPUK's team of volunteers, the majority of whom are also living with metastatic breast cancer. All volunteers have been personally affected by metastatic breast cancer, either themselves or their family or friends. One of the hardest things for all involved in METUPUK is that our volunteers frequently die from MBC, reflecting the harsh reality of this disease. This year METUPUK mourned the loss of Emma Lawrence (née Fisher) and Sarah Marshall from the volunteers team.

METUPUK brings volunteers together once a year at a Strategy Weekend. It includes a review of the year as well as forward planning for campaigns and events falling in the next 12 months.

All trustees and volunteers give time freely to METUPUK. There are no paid staff, although external suppliers are used on an ad-hoc basis for policy work, website maintenance and campaigns.

A proportion of funds are spent on enabling volunteers and trustees to be efficient advocates. This includes providing all volunteers and trustees with e-mail addresses and data storage and funding patient advocates to represent METUPUK at meetings, conferences and events. See page 25 for our financial spending breakdown.



OUR AIMS AND OBJECTIVES

Our Strategy is summarised across three main areas; **Awareness and Education, Research and Access to Drugs and Patient Treatment and Care.** These were formulated with the intention of providing benefit to the public and to patients with MBC.

AWARENESS AND EDUCATION

METUPOK Aims and Objectives:

MBC is currently incurable. We highlight the harsh reality of MBC which is not well reflected in the 'pink' celebratory campaigns. Alongside increasing public awareness, we challenge and educate policy makers, charities and government bodies to ensure that MBC is a priority for funding, research and innovation. We work to ensure that MBC is represented on all Trusts or Boards of breast cancer organisations, ideally by patient advocates being included as Trustees or Board Members. We work with Cancer Alliances and Health Boards to ensure primary breast cancer patients are provided with the tools and information to understand and recognise the symptoms of MBC. This encourages earlier MBC diagnosis and earlier treatment, thereby improving quality of life and survival prospects.



During this financial year there have been three major awareness campaigns; **Darker Pink, Metastatic May “Cost of Living”** and **“Who Really Cares”** for Breast Cancer Awareness Month. In addition, in late December 2024, Jo Taylor was interviewed Radio 5 to mark her New Year Honours BEM. She talked about MBC and METUPOK's campaign priorities.

DARKER PINK

The interactive and powerful experience of the Darker Side of Pink installation continued its journey throughout the UK. The disease continues to be the biggest killer of women in England aged 35-64*. The installation features 31, dark pink life-size Perspex figurines representing the 31 women who die of metastatic breast cancer every day in the UK. Each figurine has a QR code linking to a video of that woman speaking about the issues she faces living with a diagnosis of metastatic breast cancer.



Treadmills, Northallerton Yorkshire

With amazing support from North Yorkshire Council, the installation appeared at the Treadmills for an extended stay of three months. Councillor Michael Harrison, executive member for health and adult services, was delighted to see the exhibition featuring prominently for the North Yorkshire community to visit.

From Northallerton, the installation moved south to Brighton, appearing in the Jubilee Library from December to early January. It gained coverage in the local Argus

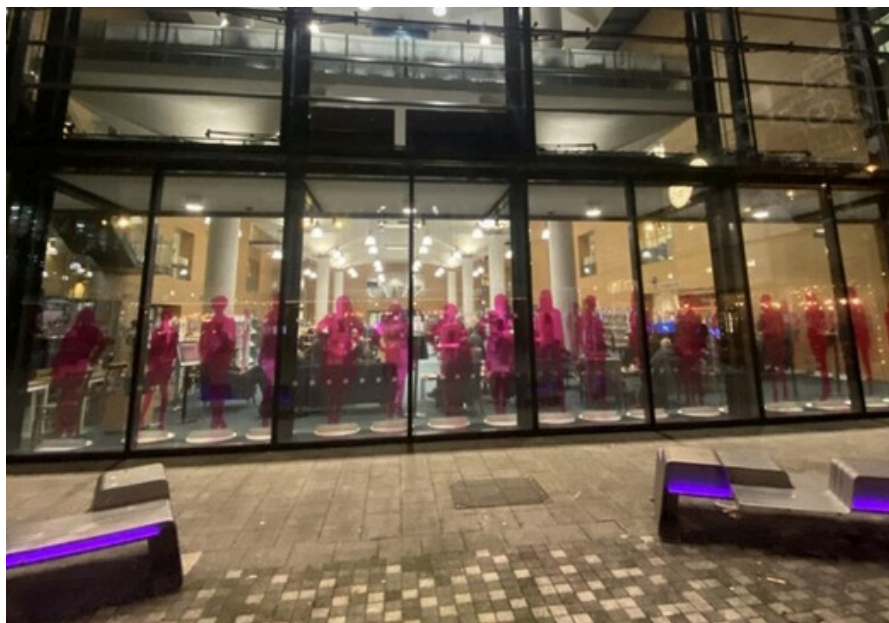
“It is sending out vital messages to everyone and we urge people to go along and listen to what these women are saying.”

Councillor Michael Harrison.

In May, the installation appeared at the original site of the oldest prison in the UK which sits in the Richmond (Yorkshire) constituency, home to Laura Ashurst, trustee, and one of the 31 Darker Pink figurines.

Leading causes of death by age group, England, 2020 Source: Office for National Statistics Nomis.

newspaper and was supported by TV actress Elizabeth Carling whose twin sister, Laura Ashurst is one of the 31 women represented within campaign.



Jubilee Library, Brighton

“Knowledge is power.”
Elizabeth Carling.



Jubilee Library L-R Vic Reville-Whelan, Elizabeth Carling, Sophie Blake, Laura Ashurst, Kat Southwell, Jessie Lynch and Allison James.

February saw the installation move to the University of Reading, hosted by the School of Psychology and Clinical Language Sciences and Professor Nazanin Derakhshan, a long-term supporter and friend of METUPUK. From Reading the installation moved to Oxford, the home of Kat Southwell, METUPUK patient advocate. It appeared in Oxford Westgate Library for the month of March.

A selection of the Darker Pink figurines also made it to the Cancer Alliances Metastatic Breast Cancer conference, hosted by Greater Manchester Cancer Alliance. Looking forward to 2025 -2026, the touring exhibition will pause for a short period while the materials of the figures are refreshed.



The figures will then kick off new destinations starting with Newcastle.

Volunteers (L) Kirstin Spencer and (R) Kat Southwell at Greater Manchester Cancer Alliance MBC Conference



Westgate Central Library, Oxford

METASTATIC MAY 2024

Since May 2021, Metastatic May has given a dedicated month to spotlight metastatic disease, driving awareness and making clear that MBC patients are worth investing in. Set apart from Breast Cancer Awareness Month in October, it keeps focus sharp and isn't drowned out by pink-washed narratives.

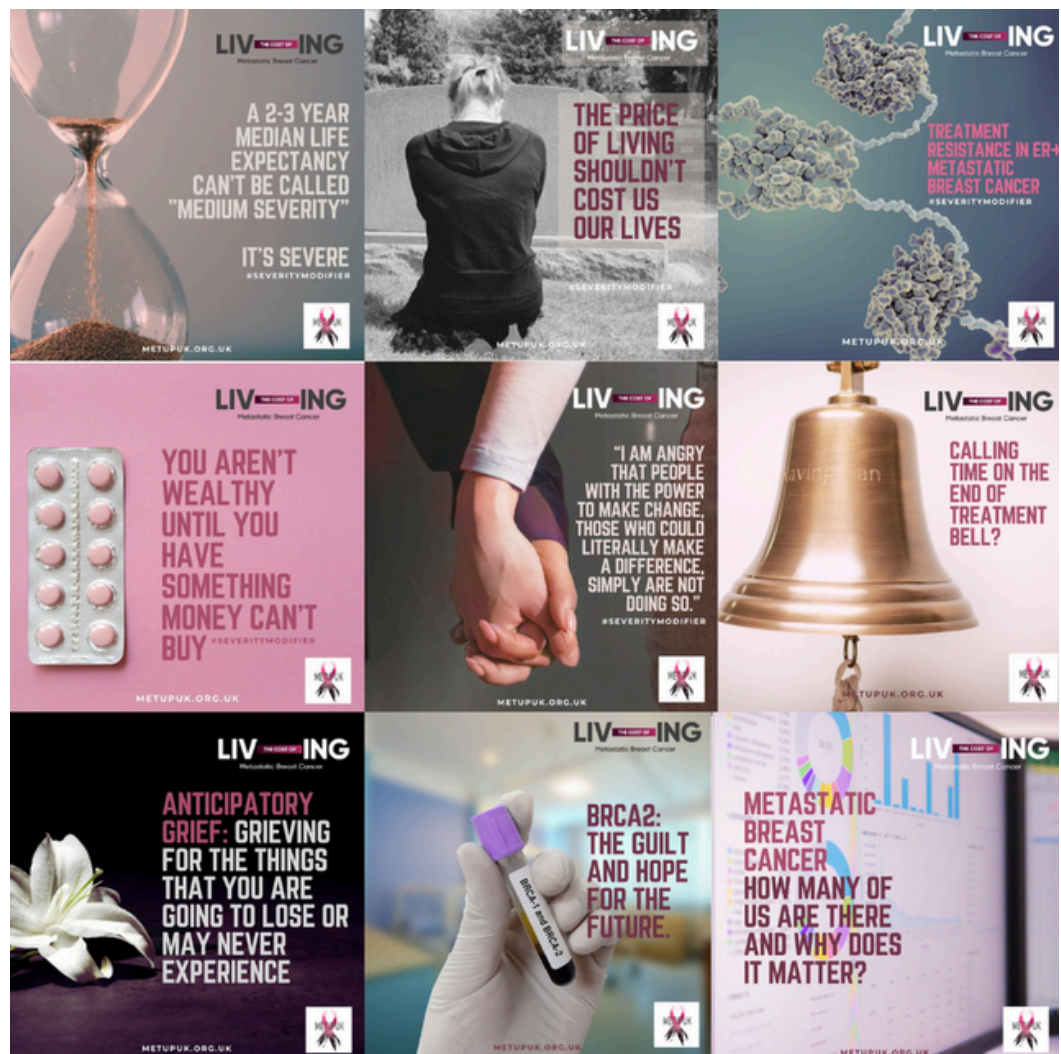
For METUPUK's 2024 Metastatic May, focus centred around the "Cost of Living", set against the backdrop of a year and a half drug campaign for Enhertu for HER2-low

MBC, which resulted in scrutiny on the severity modifier calculation used by NICE.

Metastatic May covered a wide breadth of topics, with volunteers writing both educational and supportive blogs for the wider MBC community. It also showcases the Chrity's many volunteers whose work underpins technical appraisals for NICE and SMC.

LIV THE COST OF ING

Metastatic Breast Cancer



"It is illegal to help someone die in this country...isn't denying MBC patients drugs that could add years to their lives the same thing? How can the maze and obstacles of red tape, out of date sequencing, bartering with pharmaceuticals etc not be seen as guiding the patient to an unnecessary early death?"
@lifeislike_that

Built to expand which drugs get extra funding, the two-tier severity modifier system with medium and high has fallen short for MBC. Despite its serious nature and shorter life expectancy, all assessed MBC treatments have been placed in the medium tier under the new methods.

WHO REALLY CARES 2024

For Breast Cancer Awareness Month (BCAM) 2024, the Charity's campaign focussed around a call to action on the issues impacting those with MBC and the criticality of issues faced.

Volunteers wrote blog posts highlighting the issues key to them.



Volunteer Helen Crawford wrote about the time stolen by MBC while living with it trying to prolong our lives.

The campaign was successful across all of the Charity's social media platforms, with comments around our stories resonating with other MBC patients. Focus on de novo patients, where diagnosis is stage 4 from the start also attracted a lot of support from readers.

Thank you to the families who were happy for us to re-share stories from those who have sadly died. We appreciate both the heartbreak and pride that campaigns bring to loved ones.

"WHO REALLY CARES" was both a digital and social campaign designed to raise awareness about the devastating impact of MBC. By using a seemingly apathetic question, the campaign aimed to jolt the audience out of complacency and force them to confront the lack of attention this critical issue receives. It serves as a call to action. Implicit in the question is the answer: We should all care!

Around the UK, the campaign was across digital boards in bus shelters and impactful high-traffic roadside locations across the major cities in the UK including London, Bristol, Cardiff, Swansea, Birmingham, Nottingham, Manchester, Liverpool, Leeds, Newcastle, Edinburgh and Glasgow.



Volunteer Helen Thomas wrote about the challenges of getting onto a clinical trial, both in terms of finding suitable trials and the distance required to take part.

RESEARCH AND ACCESS TO DRUGS



METUPUK Aims and Objectives:

- Work with life science companies to increase the number of MBC trials in line with the MBC number of patients, recognising the real potential to extend and save their lives.
- Work to make breast cancer trials more accessible to patients with MBC.
- Submit evidence to the National Institute for Health and Care Excellence (NICE) and the Scottish Medicines Consortium (SMC) to speed up the drug approval process for new drug treatments for MBC.
- Maximise technological advances to improve collation and analysis of data and statistics for MBC.
- Encourage decision makers to use information to better inform treatment decisions.

IMPROVING ACCESS TO DRUGS

Drug access is one of the key objectives of METUPUK because new drugs are needed to increase survival outcomes for patients with MBC. To achieve this we work as stakeholders with NICE and the SMC, who are responsible for ensuring that drugs and medical devices are value for money for the NHS. We bring the patient voice into the drug approvals process. All our written submissions are compiled in collaboration with patients who have the subtype of metastatic breast cancer being reviewed in relation to the proposed drug. We also send patient advocates to speak directly to the committees. The committees are dominated by health economists, scientists and drug companies, and so it is important for these decision-makers to hear from the patients who will benefit from the technology being appraised.

Recommendations made by NICE apply to NHS patients in England and are adopted in Northern Ireland and Wales. Acceptances by the SMC apply in Scotland. On our website we publish treatment line infographics for the three main subtypes of metastatic breast cancer and indicate if there are any differences in NHS access across the UK. Clear information on treatment availability, treatment line restrictions and differences in access across the devolved nations provides a valuable resource for patients to refer to in discussions with their oncologist.

The following drugs for MBC were approved during the financial year 1 April 2024 to 31 March 2025:

- **Elacestrant for Hormone receptor-positive HER2-negative MBC with an ESR1 mutation (NICE)**
- **Olaparib BRCA1/2-positive HER2-negative MBC (NICE and SMC)**

Additionally, Enhertu for HER2-low MBC received the final rejection from NICE in July 2024 after a 21 month long process which culminated in an unsuccessful appeal by Breast Cancer Now and the UK Breast Cancer Group. They appealed on the grounds that the recommendation is unreasonable in the light of the evidence submitted to NICE concerning overall survival extrapolation. We were supportive of the appeal and were very disappointed that it was not successful. With Enhertu for HER2-low available in Scotland and over 20 other countries, this is an example of a divisive postcode lottery.

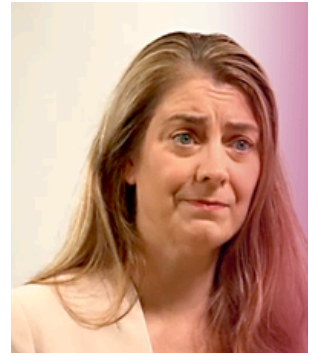
Only two new drugs were recommended by NICE and one accepted by the SMC in this financial year. The drug appraisals for olaparib were carried out by NICE using a cost comparison approach and by the SMC using a streamlined process. This shortened process was possible because the PARP inhibitor talazoparib, a similar medicine, is already available on the NHS.

ELACESTRANT

The NICE drug appraisal for elacestrant is an example of how patients can provide evidence to a committee which makes real a difference. Elacestrant is recommended by NICE for patients with a mutation in the ESR1 gene who have received at least 12 months of endocrine therapy. It is a selective oestrogen receptor degrader which has been shown in trials to be effective in patients with an ESR1 mutation.

The gene ESR1 encodes part of the oestrogen receptor, and ESR1 mutations change its molecular structure enabling cancer to develop resistance to endocrine therapy. Changes in the ESR1 receptor are unusual in untreated breast cancer but occur in about 30% of hormone receptor positive MBC after treatment with an aromatase inhibitor. Cancer treatments can drive changes in disease, and this is one mechanism in which cancer can evade treatments which initially worked well.

Our patient expert Kirstin Spencer has a scientific background and explained to the committee how there are several different ESR1 mutations. She described how current standard of care at second line is particularly ineffective for patients with certain ESR1 mutations and how elacestrant would fulfil an unmet need. She was complimented afterwards on her confident delivery by independent advocates who viewed the committee.



Kirstin Spencer

The drug elacestrant has also brought ctDNA testing into the breast cancer pathway. ctDNA (circulating tumour DNA) are tiny fragments of genetic material shed into the bloodstream by dying cancer cells. These fragments can be identified in a blood biopsy, a simple blood test for the patient. Scientists can distinguish tumour DNA from normal host DNA by comparing differences in the sequence. This is technically not easy because ctDNA is present at very low levels compared to host DNA, and only a few labs in the UK are able to do this test at volume.

METUPUK patient advocates Jo Taylor and Madeleine Meynell are both involved with their local NHS Genomics Medicines Services, and Jo is also involved with Genomics England. Once elacestrant was recommended by NICE, both worked behind the scenes to emphasise how important it was for ctDNA testing to roll out without delay. We are pleased to report that testing for ESR1 variants has been made available through two Genomic Laboratory Hubs (GLH), North Thames (Royal Marsden Hospital) and the North West (Manchester University Hospital). These labs process all samples in England, and further labs are expected to be announced in the future. Wales and Northern Ireland also have ctDNA testing available for patients via the All Wales Medical Genomics Service and Belfast Clinical Genetics Service.

At METUPUK we have been campaigning for years for the introduction of ctDNA into the metastatic breast cancer pathway. Tissue biopsies are often painful and can only test the cells in the sample. For patients with widespread mets, ctDNA is particularly useful. Different clones of cancer cells can carry different mutations causing them to respond differently to treatment. A blood biopsy can capture ctDNA from all parts of the body enabling scientists to evaluate genomic changes in all cancer cell clones.

Our hope is that as ctDNA technology improves and reduces in cost that it will be rolled out further to other parts of the breast cancer pathway. This is the first step in the right direction.

There is much work still to be done to ensure equitable access to therapeutics within the whole of the UK and between the patients treated in the private sector and the NHS.



Top L-R Madeleine Meynell, Mary Huckle and Kirstin Spencer
Bottom L-R Asha Umrawsingh, Jo Taylor and Helen Stewart.

Access to medicines is a group effort at METUPUK, with many people working tirelessly behind the scenes. Particular thanks to the following patient advocates for their work in NICE and SMC submissions and drug access campaigning; some of these patients are no longer alive but their legacy lives on in their work and their advocacy:

Mary Huckle, Kirstin Spencer and Asha Umrawsingh for work on Enhertu for HER2-low, Kirstin Spencer and Helen Stewart for work on olaparib and Kirstin Spencer, Madeleine Meynell and Jo Taylor for work on elacestrant.

PATIENT TREATMENT AND CARE

CONTINUING THE LEGACY OF CHANGE IN WALES

METUPOUK is proudly continuing the legacy of the late Tassia Haines, whose tireless campaigning shaped key priorities for metastatic breast cancer in Wales. In June 2024, Tassia received a Moondance Cancer Award for Patient and Public Participation and Involvement. The award was accepted posthumously by her husband, Nick, alongside the secondary breast cancer community who celebrated her determination to improve equity of care for people with MBC in Wales.



Moondance Cancer Award L-R Ann Baker, Mags Holloway, Nick Brayley, Zoe Barber and Sue Thomas.

KEY ACHIEVEMENTS AND PROGRESS

MBC Pathway Implementation Across Wales

The NHS Wales Executive and individual Health Boards have continued work to implement the Metastatic Breast Cancer Pathway, developed with clinician and patient input, to standardise care and improve outcomes for patients with MBC in Wales. The pathway includes the 'red flag' infographics developed by Jo Taylor's ABCDiagnosis, an invaluable tool to raise awareness of MBC in both primary and secondary care settings and support earlier diagnosis and treatment.



Secondary Breast Cancer Nurse Coverage

Currently, with the exception of one Health Board, Secondary Breast Cancer Clinical Nurse Specialists (SBC CNS) are now in post across Wales, offering invaluable care and support to their patients. However, large patient caseloads have recently highlighted the urgent need for increased nursing capacity to meet demand.

Addressing the MBC Data Gap

METUPOUK continues to highlight the lack of robust MBC data in Wales. The NAO Me audit and State of the Nation report have brought this issue to the fore and the

collaborative work with clinicians, Welsh Cancer Network, NAO ME, allied charities and patients is continuing to strive for improved data collection. We remain committed to ensuring that meaningful data collection informs service design and accurately reflects the needs of those living with MBC in Wales.

Primary Care Education & Awareness

Recognising the gaps in primary care knowledge around MBC, METUPUK has increased its focus on educational engagement with GPs and primary care clinicians, who should play a vital role in identifying the signs and symptoms of metastatic breast cancer. In January 2025, the Charity took part in its first educational event for primary care at the Cwm Taf Morgannwg University Health Board, Educational Academy, held at the University of South Wales. The awareness stand engaged with over 100 GPs and primary healthcare clinicians, sharing the ABCDiagnosis red flag infographics and raising awareness of the MBC pathway. Several further educational events are planned for the coming year, aiming to expand understanding of MBC presentations in the primary care setting, and encourage timely referral and diagnosis.



Cwm Taf Morgannwg University Health Board, Educational Academy, L-R Sue Thomas and Sarah Brown

Collaborative Approach

The volunteer team in Wales continues to work collaboratively with; The Welsh Government, NHS Wales Executive and Welsh Cancer Network, Welsh Health Boards, Wales Cancer Alliance, Cancer charities and clinical networks. These partnerships are vital to drive forward our shared goals of improved patient outcomes and equity of care across Wales.

Priorities for 2025–2026

- Full implementation of the MBC Pathway across all Welsh Health Boards.
- Further increase in dedicated SBC nurse numbers, ensuring sustainable workloads and quality patient support.
- Continued advocacy for national data collection through NaoME and wider cancer data strategies.
- Ongoing roll-out of primary care educational initiatives, targeting GPs, nurse practitioners, and allied healthcare professionals.
- Launch of “Tass’ Legacy” project, funded from a restricted donation (see page 25).

NORTHERN IRELAND

METUPUK membership of Northern Ireland Cancer Charities Coalition (NICCC)

METUPUK joined the Northern Ireland Coalition (NICCC) in early 2024 and showcased its work at the official launch at Stormont Parliament Buildings in June 2024.

Throughout the year, Ann McBrien, METUPUK's Northern Ireland representative, has worked collaboratively with NICCC partner charities to address issues and improve outcomes for cancer patients. This work has included publicly highlighting poor cancer waiting times and the impacts of the Department of Health's 2024/25 draft budget assessment and projected cost saving measures.

Breast Services Review

Ann McBrien has increased awareness of metastatic breast cancer and pushed for the implementation of the recommendations relating to it in the Northern Ireland Cancer Strategy 2022-2032. METUPUK has had a strong voice at the Regional Breast Services Review established by the Health Minister in 2024, ensuring that stage 4 cancer patients are not overlooked in the improvement plans.



Northern Ireland Cancer Charities Coalition (NICCC)



Northern Ireland Cancer Charities Coalition (NICCC)

Metastatic Breast Cancer Data

METUPOK has campaigned tirelessly for over a decade for improvements in cancer statistics and the inclusion of cancer recurrences in metastatic breast cancer data across the UK.

In 2024, Ann McBrien was part of a groundbreaking research study which produced statistics on new and existing cases of metastatic breast cancer in Northern Ireland. Publication of this research, which was carried out by the Northern Ireland Cancer Registry, placed Northern Ireland amongst one of the first countries in the world to count all metastatic breast cancer patients. The research, funded by Cancer Focus Northern Ireland, linked population based cancer registry data with hospital data and detailed death record information. It estimated that approximately 1,000 people are living with the disease in Northern Ireland, with around 250 new cases diagnosed annually.



L-R Mike Nesbitt, Northern Ireland Health Minister, Ann McBrien



Ann McBrien at launch of MBC Data Research

Ann who was a coauthor of this research, along with the Director and staff from the Northern Ireland Cancer Registry, presented the findings to the Minister at Stormont Parliament Buildings. The Health Minister has committed to the development of a metastatic breast cancer pathway as part of the Regional Breast Review.

SUPPORT FOR FRIENDS AND FAMILY



Whilst METUPUK does not offer direct support services for patients with metastatic breast cancer, we actively signpost individuals to trusted groups run by other registered charities. Our focus is on complementing existing services rather than duplicating them.

Recognising the limited support available for friends and family of those affected by MBC, METUPUK has been running a confidential Facebook support group since 2021. This group is moderated by Emma Smith, a METUPUK Trustee with personal experience through her sister Helen, who lives with MBC.

The group offers a safe and compassionate space for peer support. Members are encouraged to share their thoughts, emotions, memories and experience, whatever they feel comfortable expressing. Whether someone is supporting a loved one undergoing treatment, providing end-of-life care, or grieving someone who has passed, the group fosters connection and understanding.

Key moments, such as Christmas and New Year, can be especially challenging. During these times, members are invited to share stories and memories of their loved ones, offering comfort and solidarity to others who may be struggling to find support outside of the group.

This community helps ensure that no one feels alone, whatever stage they are at in supporting someone with MBC.

In order to help keep conversations frequent and provide a positive outlet for support, the group also shares fundraising efforts for METUPUK. The amazing achievements from our fundraising community are shared on pages 22 and 23.



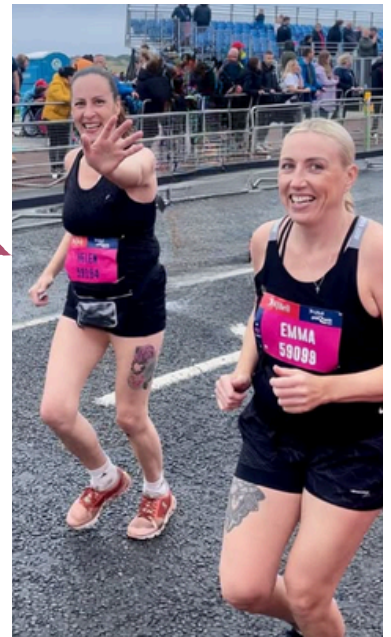
FUNDRAISING AND DONATIONS



METUPOK is funded almost entirely by fundraising and donations (see page 24). The Charity is incredibly grateful to all the donors who have supported our work this year and the time taken to undertake challenges and events in our honour. The Charity has a dedicated fundraising Trustee, Emma Smith, to help provide support, merchandise requests and promote events on social media.

Paul Green, a member of the local Cotswolds band “Wolds”, wrote “Sarah’s Song” for his friend Sarah Brown. Released on 12 August 2024, all monies from streaming and song purchases are donated to METUPOK.

Ever-popular running challenges made a significant difference for the Charity this year with volunteer and MBC patient Helen Crawford running the Great North Run, alongside her sister Emma (our Fundraising Trustee) and their younger brother Kenny.



In October 2024, Zoe Barber, a consultant breast surgeon based in Wales, ran the Cardiff Half Marathon and also achieved a Guinness World Record for the “fastest runner dressed as a cartoon character (female)”.

Callum Day, a family friend of METUPOK’s Founder Jo Taylor, did a skydive on 14 September 2024.

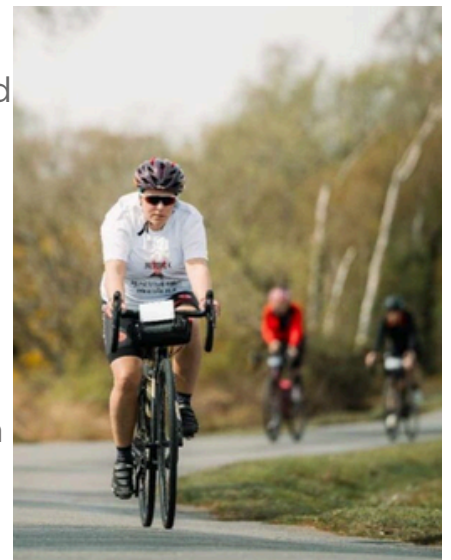


In March 2025, METUPUK were pleased to be invited by Elle Egar from the TV show “The Real Housewives of Cheshire”, to participate in the filming of an episode. Elle’s mum, Lisa, is living with metastatic breast cancer and Elle organised “Ell’s Par-Tea for a Good Cause”, to raise awareness of MBC and to raise funds for METUPUK and The Pink Ribbon Foundation. Laura Ashurst, METUPUK Trustee, was invited to the event and spoke to the attendees about METUPUK and living with MBC. Huge thanks to Elle for the invitation and to all the cast and crew from the show. The TV episode was broadcast in May 2025.



IN MEMORY

Donors also continue to raise funds in support of trustees and volunteers of METUPUK, as well as their own friends and family, who have been diagnosed with, or have died from MBC. Lauren and Marianne, friends of Connie Johncock (who was a founding trustee of METUPUK), cycled the New Forest Sportive 92km Cycle Route in April 2024, in Connie’s memory.



Louise Kettle and friends took part in the Derby 5k Mud Run in June 2024, in memory of their old school friend Philippa Hetherington.

Sara Percy completed the Saddleworth Three Peaks in July 2024, in memory of her, and our Founder Jo Taylor’s, friend Sara Giddens.

Hilary Turnbull hosted “Laura’s Do” (an evening of music, food, raffles and celebration) in January 2025 in memory of her daughter Laura.



In March 2025, Emily Laverick, daughter of Rebecca Laverick, ran the Rome Marathon.



OUR FINANCES

Financial Review

The Charity was registered on 9th November 2021 and has now completed a third financial year (running from 1st April 2024 to 31st March 2025). The Charity's income for this period exceeded expenditure by £21k, leaving the Charity in a stable position at the end of the financial year.

Expenditure summary 2024-2025

The Charity's funds have been used effectively and have been spent in line with our objectives. The largest item of expenditure continues to be for attendance at events to further awareness of, and to provide education about, MBC and also to fund our annual campaigns for Metastatic May and, in October, for Breast Cancer Awareness Month (BCAM).

Income summary 2024 - 2025

For the financial period, the Charity's main source of income was donations, comprising 60% of the total funding. The remaining income was generated through a number of Charity-led fundraising activities and restricted grant funding from Nick Brayley on behalf of his wife Tassia Haines. (see page 18 for more details).

STATEMENT OF FINANCIAL ACTIVITIES

N4

Client:	METUPUK	Prepared By:	DH
Year Ended:	31 March 2025	Date:	20/10/2025
		Reviewed By:	
		Date:	

RECEIPTS AND PAYMENTS ACCOUNTS

	Unrestricted	Restricted	2025	2024
Receipts				
Fundraising	17,306.44	-	17,306.44	3,082.59
Donations	33,635.67	-	33,635.67	50,760.96
Grant income	-	6,278.44	6,278.44	20,000.00
Other income	-	-	-	3,809.20
Investment income	982.12	-	982.12	58.27
	<u>51,924.23</u>	<u>6,278.44</u>	<u>58,202.67</u>	<u>77,711.02</u>
Payments				
MBC awareness / Education events	29,141.65	-	29,141.65	54,076.39
Education/ Communications	750.00	-	750.00	327.44
Other costs	4,520.95	-	4,520.95	2,409.19
	<u>34,412.60</u>	<u>-</u>	<u>34,412.60</u>	<u>56,813.02</u>
Governance costs				
IT/ Website/ SM/ Telecoms	145.20	-	145.20	1,027.80
Insurance	156.49	-	156.49	171.55
Legal and governance costs	1,506.00	-	1,506.00	3,000.00
	<u>1,807.69</u>	<u>-</u>	<u>1,807.69</u>	<u>4,199.35</u>
Receipts less payments	15,703.94	6,278.44	21,982.38	16,698.65
Funds transfer	4,856.43	- 4,856.43	-	-
Total funds				
Balance brought forward	73,994.39	4,856.43	78,850.82	62,152.17
Balance carried forward	<u>94,554.76</u>	<u>6,278.44</u>	<u>100,833.20</u>	<u>78,850.82</u>

STATEMENT OF ASSETS AND LIABILITIES

	Details	Unrestricted	Restricted	2025	2024
Cash funds	Lloyds bank	94,554.76	6,278.44	100,833.20	78,850.82
Liabilities	Independent Examiner's fee	960.00	-	960.00	900.00

Signed by one of the trustees on behalf of all the trustees

Signature	Print name	Date
	Philip Southwell	30/11/2025

Reserves Policy

METUPUK holds a minimum of 12 months running costs in reserve from unrestricted funds. These running costs include IT/telephone costs including Microsoft accounts, website hosting and support, virtual assistant fees and the cost of running ongoing campaigns such as the Darker Pink exhibition. We also need to set aside provision for professional fees such as accountancy and legal advice should the charity be closed. The funding of METUPUK relies mainly on donations via funding platforms, which varies between month to month. Any funding via grants are generally restricted funds which cannot form part of the reserves policy. The running costs vary according the number of active volunteers who require IT access and the cost of campaigns. The reserve set for this year is £25,000, and this figure will be reviewed by the Trustees on an annual basis.

ADMINISTRATION

List of Trustees as at 30 November 2025

Emma Smith – Fundraising (appointed July 2023)

Dr Helen Steele – Research and Clinical Trials (Founding Trustee)

Laura Ashurst – Darker Side of Pink (appointed March 2025)

Phil Southwell – Finance and Technology (appointed November 2023)

Sue Thomas – Wales Executive Lead (appointed October 2025)

Madeleine Meynell stepped down in November 2024

Andy Figgins stepped down in December 2024

Nicky Goldthorpe stepped down in October 2025

Jo Taylor (Founder/Chair) died on 3 November 2025

The Charity's Registered Office is:

4 West End Barns, West End, Northwold, Thetford, Norfolk IP26 5NE

The Charity's Independent Examiners are:

KM Chartered Accountants, 1st Floor, Block C, The Wharf, Manchester Road, Burnley BB11 1JG

The Charity's bankers are:

Lloyds Bank plc, 25 Gresham Street, London EC2V 7HN

Risk Management

METUPUK is committed to ensuring practices which will ensure consistent risk management approaches are in place across the organisation. Managing risk is seen as a key organisational responsibility and is integral to the management and governance of the Charity. We recognise that effective risk management is achieved by ensuring that Trustees and the whole volunteer team is engaged with managing and mitigating risk.

We are proactive in identifying all potential risks and in analysing and managing risks. During the year, a risk register was developed and is now being reviewed by Trustees on a regular basis. We will ensure good communications across the organisation to support learning and increasing good practice. We recognise that it is not possible to eliminate risk but aim to manage, mitigate and minimise risks across the Charity wherever possible.

INDEPENDENT EXAMINERS REPORT

Independent Examiner's Report to the trustees of METUPOK

I report to the trustees on my examination of the accounts of METUPOK for the year ended 31 March 2025.

Responsibilities and basis of report

As the Trustees of the Charity, you are responsible for the preparation of the financial statements in accordance with the requirements of the Section 145 of the Charities Act 2011 ('the 2011 Act'), the Charities and Trustee Investment (Scotland) Act 2005 ('the 2005 Act') and the Charities Accounts (Scotland) Regulations 2006 (as amended) ('the 2006 Accounts Regulations').

I report in respect of my examination of the METUPOK financial statements carried out under section 145 of the 2011 Act. In carrying out my examination I have followed the requirements of Regulation 11 of the Charities Accounts (Scotland) Regulations 2006 (as amended) and all the applicable directions given by the Charity Commission under section 145(5)(b) of the 2011 Act.

Independent examiner's statement

I have completed my examination. I confirm that no material matters have come to my attention in connection with the examination giving me cause to believe that in any material respect:

1. accounting records were not kept in respect of the Charity as required by section 130 of the 2011 Act and Regulation 4 of the 2006 Accounts Regulations; or
2. the financial statements do not accord with those records; or
3. the financial statements do not comply with the accounting requirements of the Charities (Accounts and Reports) Regulations 2008 or Regulation 8 of the Accounts Regulations 2006 other than any requirement that the financial statements give a 'true and fair' view which is not a matter considered as part of an independent examination; or
4. the financial statements have not been prepared in accordance with the methods and principles of the Statement of Recommended Practice for accounting and reporting by charities [applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102)].

I have no concerns and have come across no other matters in connection with the examination to which attention should be drawn in this report in order to enable a proper understanding of the accounts to be reached.

M R Heaton FCCA FCIE DChA
KM Chartered Accountants
1st Floor, Block C
The Wharf
Manchester Road
Burnley
Lancashire BB11 1JG

Date: 27 November 2025




It's not fun knowing that we feel invisible and that no one is listening to us.

Jo Taylor

Metastatic Breast Cancer

#DarkerPink

THE DARKER SIDE OF **Pink**




It's not fun knowing that so many of us are unaware of the red flags symptoms.

Mary Huckle

Metastatic Breast Cancer

#DarkerPink

THE DARKER SIDE OF **Pink**




It's not fun knowing that it's a struggle to access any ongoing NHS mental support.

Laura Ashurst

Metastatic Breast Cancer

#DarkerPink

THE DARKER SIDE OF **Pink**




It's not fun knowing that there doesn't seem to be a test to show who is or potentially who isn't going to be cured.

Kirstin Spencer

Metastatic Breast Cancer

#DarkerPink

THE DARKER SIDE OF **Pink**




It's not fun knowing that I'm planning my funeral. It's not something that someone at 39 years old should be doing.

Carole Pollard

Metastatic Breast Cancer

#DarkerPink

THE DARKER SIDE OF **Pink**




It's not fun knowing that I'm less likely to access clinical trials because I take other medication.

Madeline Meynell

Metastatic Breast Cancer

#DarkerPink

THE DARKER SIDE OF **Pink**




It's not fun knowing that I had to self fund treatments as there was nothing else approved on the NHS available to me.

Philippa Hetherington

Metastatic Breast Cancer

#DarkerPink

THE DARKER SIDE OF **Pink**




It's not fun knowing that we don't even have clinical trials based on black women's experiences.

Leila Asoko

Metastatic Breast Cancer

#DarkerPink

THE DARKER SIDE OF **Pink**

METUPOK

England & Wales - Charity number 1196494

Accounts

METUPOK ANNUAL REPORT

6 APRIL 2023-31 MARCH 2024



Second Annual Report (6 April 2023 – 31 March 2024)

METUPOK (Metastatic Exchange to Unleash Power UK)

METUPOK is a UK-wide patient advocacy charity for people with metastatic breast cancer (MBC) campaigning to increase public awareness and education about MBC. We work to see better care, access to drugs and trials as well as representation of MBC patients within NHS UK, the national regulators and drug companies.

Structure

METUPOK is a Foundation Charitable Incorporated Organisation registered with the Charity Commission of England and Wales (1196494), registration date 9 November 2021, and with the Office of the Scottish Charity Regulator (SCO55472), registration date 27 June 2024.

Charitable objects (excerpt from the Charity's Governing Document dated 9 November 2021)

The relief of patients in the UK who have or are at risk of metastatic breast cancer (MBC); in particular (but not exclusively) through raising awareness about MBC by the provision of information and education, working with stakeholders to increase MBC research and access to drugs and ensuring for the public benefit that MBC patient treatment and care remains a national priority.

What the charity does:

General Charitable Purposes

The Advancement of Health or Saving of Lives

Who the charity helps:

The General Public/mankind

How the charity helps:

Provides advocacy, advice and information

Where the charity operates:

Throughout England and Wales, Northern Ireland and Scotland

Registered office 11 Lower Knoll Road, Diggle, Oldham OL3 5PD

email: contact@metupuk.org.uk

“I’m passionate about creating change for patients especially those with MBC. The only way change will happen is for us to demand change together as a community. We cannot continue with the same outcomes and with women dying at the same rate.”

Jo Taylor, METUPUK Founder and Chair



Jo Taylor hosting the first UK patient led Metastatic Breast Cancer conference, June 2023 (page 12)

Another 12 months have passed as a registered charity and we have gone on to achieve so much in a short space of time. As we ended our first year as a Charity, we were at the Houses of Parliament with the Darker Pink exhibition, and quickly went into June 2023 where we hosted the first dedicated patient-led Metastatic Breast Cancer conference in the UK. To see our strategy for the last seven years coming to fruition has driven us further; always with those no longer with us at the front of our minds.

Awareness is a huge issue for Metastatic Breast Cancer (MBC) and seeing the Charity getting the message out to the devolved nations this year has been incredible. England’s Cancer Alliances are looking at using the End of Treatment Summary reports developed in Greater Manchester in conjunction with the infographics. In Wales, the infographics are being embedded as part of the NHS pathway. In Scotland they are now part of the Cancer Strategy and its website for patients and clinicians. There is still much work to be done, but the foundations are finally coming together. This has taken over 10 years to get England alone to have this focus on MBC, the hidden disease. For Northern Ireland, MBC patients have been left behind for many years without a cancer strategy. We welcome the publication of the Cancer Strategy for Northern Ireland 2022-23 and urge the Minister to ensure it is fully funded and implementation progresses in line with plans. We were also delighted in March to apply as a full member of the Northern Ireland Cancer Charities Coalition (NICCC), a partnership of organisations with a shared vision across the cancer landscape in Northern Ireland. (The application was accepted in April 2024, outside of the reporting period of this Annual Report).

Our board has gained two new Trustees; Phil Southwell, responsible for finance and

technology and Emma Smith, responsible for fundraising. We are incredibly grateful to all our generous fundraisers who enable us to keep driving change forward. Read all about fun and the painful (!) fundraising on page 21.

The year continued to see a number of volunteers die from metastatic breast cancer. Their voices, their bright souls and their drive for better will continue to shape and influence us as we mourn the loss of them.



MARY HUCKLE

Volunteer
Died June 2023



KIT DZERYN MBE

Volunteer
Died May 2023



ASHA UMRAWSINGH

Volunteer
Died March 2024



EMMA SAVILLE

Volunteer
Died July 2023



TASSIA HAINES

METUPOK Lead for Wales
Died March 2024

At the end of our 2023-24 financial year, our net profit was £16,699. We rely on the work of our Trustees and also our patient advocate volunteers. None of us draw a salary from the Charity and METUPOK would not function without all the people who freely give their time and expertise. I thank everyone who has helped us become the organisation that we are today.

A handwritten signature in black ink that reads "Jo Taylor".

JO TAYLOR

Founder/Chair METUPOK

“A 2-3 year median life expectancy for Metastatic Breast Cancer is not a statistic to rejoice in but rather a demonstration of how much more needs to be done.”

OUR PEOPLE



Trustees during financial period April 2023- March 2024 were Jo Taylor (Chair), Andy Figgins, Emma Smith, Helen Steele, Julia Bradford (resigned December 2023), Madeleine Meynell and Phil Southwell. Current Trustees are listed on page 25.

Founding Trustees were recruited from volunteers of the METUPUK precursor organisation and worked together to create the Charity. The constitution requires at least one trustee to have MBC. New Trustees are elected by the Board where a skill shortage has been identified. Dr Helen Steele has the responsibility for the induction of new trustees, and each Trustee is provided with a copy of The Essential Trustee.



JO TAYLOR
Founder/Chair
METUPUK



ANDY FIGGINS
Trustee - Friends and
Family Support



EMMA SMITH
Trustee -
Fundraising



DR HELEN STEELE
Trustee - Volunteers and
People



MADELEINE MEYNELL
Trustee -
Access to Drugs



PHIL SOUTHWELL
Trustee -
Finance and Technology

VOLUNTEERS

In addition to the METUPUK Trustees, all charitable activities rely on the hard work and dedication of a team of volunteers. As of 31 March 2024, 33 active volunteers from across all regions of the UK were working with METUPUK. The volunteers are at the heart of everything that METUPUK achieves. All volunteers have been personally affected by metastatic breast cancer. The majority are MBC patients, while others are friends and family of MBC patients or have lost a loved one to the disease. The Charity's MBC patient advocates are vital as they bring a voice to the statistics, for example by sharing their stories in campaigns and providing patient input to the drugs approvals process. One of the hardest things for all involved in METUPUK is that volunteers frequently die from MBC, reflecting the harsh reality of this disease. This year METUPUK mourned the loss of Kit Dzeryn, Mary Huckle, Asha Umrawsingh, Emma Saville and Tassia Haines.

METUPUK brings volunteers together once a year at a Strategy Weekend. It includes a review of the year as well as forward planning for campaigns and events falling in the next 12 months.

All Trustees and volunteers give time freely to METUPUK. There are no paid staff, although external suppliers are used on an ad hoc basis for website

maintenance, campaigns and producing the monthly newsletter. A proportion of funds are spent on enabling volunteers and Trustees to be efficient advocates. This includes providing all volunteers and Trustees with e-mail addresses and access to Sharepoint and funding patient advocates to represent METUPUK at meetings and events. See page 24 for financial spending breakdown.



OUR AIMS AND OBJECTIVES

Our Strategy is summarised across three main areas; **Awareness and Education, Research and Access to Drugs and Patient Treatment and Care.** These were formulated with the intention of providing benefit to the public and to patients with MBC.

AWARENESS AND EDUCATION

METUPOK Aims and Objectives:

MBC is currently incurable. We highlight the harsh reality of MBC which is not well reflected in the 'pink' celebratory campaigns. Alongside increasing public awareness, we challenge and educate policy makers, charities and government bodies to ensure that MBC is a priority for funding, research and innovation. We work to ensure that MBC is represented on all Trusts or Boards of breast cancer organisations, ideally by patient advocates being included as Trustees or Board Members. We work with Cancer Alliances and Health Boards to ensure primary breast cancer patients are provided with the tools and information to understand and recognise the symptoms of MBC. This encourages earlier MBC diagnosis and earlier treatment, thereby improving quality of life and survival prospects.

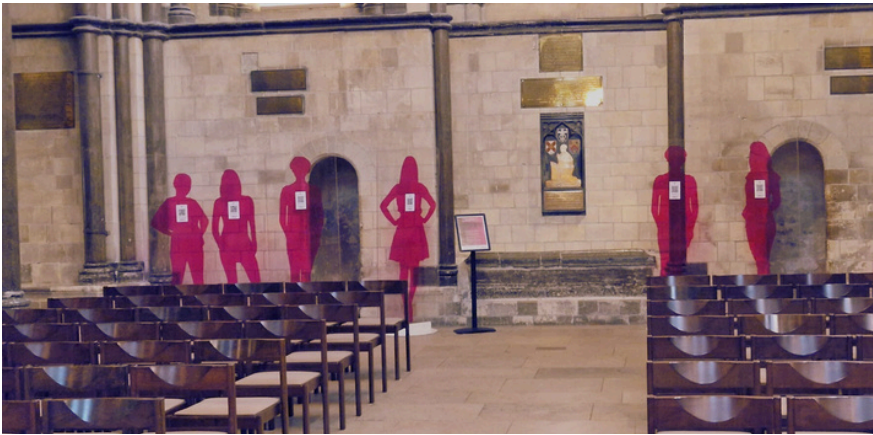
During this financial year there have been three major awareness campaigns; **Darker Pink, Metastatic May** and **Disappearing Lives.** In addition, in April 2023, Jo Taylor was a guest on BBC Radio 4 Woman's Hour speaking about MBC, her story, the infographics she created and promotes for use in the NHS and the work of METUPOK.



DARKER PINK

The Darker Side of Pink' physical interactive experience continued touring the UK this year with a number of new locations, highlighting the seriousness of MBC; the biggest killer of women in England aged 35-64.*

The impactful exhibition features 31 life-size transparent figures, depicting the invisibility of the disease – each one representing a woman who dies every day in the UK. METUPUK Trustee Connie Johncock, who died in March 2023, helped to organise Darker Side of Pink to exhibit at Rochester Cathedral. Connie had lived nearby and her family and friends came together with Cathedral staff and local MP to launch the exhibit in May 2023.



The figures were arranged throughout the cathedral to show how MBC patients walk among us. Connie's vision for within the building was for a figure to be visible from every aspect that the public might be in the building.

The launch event brought mixed feelings for all who attended as Connie died before seeing her plan come to reality. Her death also amplified the importance of METUPUK's work.

'The Darker Pink' figures feature a QR code that, when scanned, plays a video from a real-life woman living with MBC. Filmed in 2021, many of these women have since died (including Connie), themselves becoming a

“It is a poignant honour for us at Rochester Cathedral to welcome the installation of the Darker Side of Pink silhouettes.....it is very important that we align ourselves with all those who are campaigning for better treatment and care for those who suffer from breast cancer and we are delighted to be able to do that.”

The Rev'd Canon Dr Gordon Giles,
Canon Chancellor at Rochester
Cathedral



*Leading causes of death by age group, England, 2020 Source: Office for National Statistics Nomis.

statistic they spoke about whilst also campaigning for change.

The Business Design Centre in London had an extended stay of the exhibition due to its popularity of the campaign. METUPUK was incredibly grateful to the organisation who ensured that the campaign was promoted on a billboard and on escalator digital screens within the building at no cost to the Charity.



Darker Pink made it to Wales, as part of the Welsh MBC Conference in October (see page 18), and is also featured on the cover of the Annual Report.

Looking forward to 2024-2025, the Charity is planning venues in Northern Ireland as well as returning to Scotland for further locations.

METASTATIC MAY 2023

Metastatic May has been running since May 2021, providing a dedicated month to talk about metastatic disease, raise awareness and show that MBC patients are worth investment in. At the opposite end of the year to Breast Cancer Awareness Month in October, it gives more focus for the campaign without being drowned out by the pink washing of positivity that exists across UK media during October.

Each week in May focusses on a different theme; Treatment Lines and Drug Access, Mental Health, Living with Mets and Patient Stories.

Volunteers and supporters of METUPUK write blogs about MBC topics that are both educational and supportive for the wider MBC community finding 'someone like me', whether that be the same worries, challenges or positive action. It also showcases the breadth of volunteers involved in the Charity that underpin work for technical appraisals for NICE and SMC.



August 2023 saw the UK turn pink with the launch of the Barbie film. Given links to breast cancer, the Charity launched a mini campaign highlighting some of the key messages from the perspective of living with MBC. The reaction from the MBC community was incredible, striking a nerve with the anticipatory grief many patients have.

"I don't even know where to start with it all, the persistent enormous grief of lost dreams, a future, plans unfulfilled. Feeling too unwell to even do basic things, feeling like I'm wasting valuable time just resting. Utter sadness at missing out on so many milestones then realising I won't be here to notice that, then feeling selfish..it's overwhelming"

The images reinforced the message **It's not fun living on The Darker Side of Pink.**



DISAPPEARING LIVES 2023

In Breast Cancer Awareness Month (BCAM) 2023, the campaign focussed on the stories of the nine women who had already died since taking part in the Darker Pink campaign. Their stories were re-told of treatment, missed diagnoses, inaccessible treatment lines and failed access to trials.

Each day featured a different story of their 'disappearing lives', alongside providing educational resources.



Top, L-R Anne Cargill, Emily Roberts, Philippa Hetherington
Middle, L-R Emma Saville, Leila Asoko, Mary Huckle
Bottom, L-R Sally Nyland, Connie Johncock, Nina Masoud

The campaign was combined with dissemination of the ABCD Red Flag Infographics for ductal and lobular breast cancer. These infographics highlight the signs and symptoms of metastatic breast cancer and are signposted by NHS England to educate patients and the public.

The Disappearing Lives campaign across all socials was incredibly successful for the charity with over 10,000 plays of one of the stories. This gives a strong educational platform for increasing knowledge and awareness as well as gaining more supporters and volunteers to help with the Charity's aims and objectives.

The Charity would like to thank all of the families and friends of the nine women who appeared in Disappearing Lives. We appreciate both the heartbreak and pride that campaigns bring to loved ones.



CONFERENCES AND EVENTS

In May 2023, the annual **Association of Breast Surgeons** conference was held in Belfast. Our Executive Lead for Northern Ireland, Ann McBrien, was incredibly busy on the METUPUK stand discussing with clinicians the red flag signs and symptoms infographics for MBC. There was great interest in the infographics, particularly amongst nursing staff who play a lead role in educating early/primary breast cancer patients at the end of treatment.

METUPUK was commended for the accessibility of the infographics with clear illustrations, simple language and translations into different languages. Many delegates committed to review the infographics with a view to introducing them within their care pathways.

Ann was also able to raise awareness of her work on the Secondary Breast Cancer Clinical Audit for NI, funded by the charity Cancer Focus NI.

MBC clinical trials in NI were also discussed given the scarce number of MBC trials compared to other parts of the UK.



Ann McBrien, METUPUK Executive Lead for Northern Ireland. ABS conference 2023

MBC CONFERENCE - MANCHESTER JUNE 2023

The first patient-led event of its kind in MBC, the conference brought together members of the MBC multi-disciplinary-team including clinicians, nurses, scientists, researchers and managers for one day to focus on improving regional and national MBC services. The objective was to highlight a 'Case for Change' that could be shared with Cancer Alliances and health systems across England and the rest of the UK. Each speaker was asked to identify calls to action, including any smaller 'quick wins', to feed into follow up actions after the conference.

Speakers covered all aspects of the MBC pathway and were joined by Andy Burnham, Mayor of Greater Manchester for the keynote speech.

METUPUK were incredibly proud to host such a key event and to be the only organisation to do this, driven by the patient voice, in the UK.

The follow up actions to the Conference are available here on the [METUPUK website](#).



Andy Burnham,
Mayor of Greater Manchester



Attendees and Speakers at the MBC
Conference

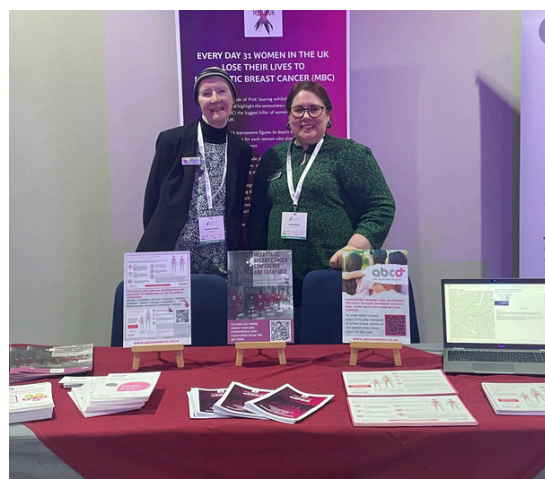


Jo Taylor, METUPUK. Nazanin Derakhshan,
Building Resilience in Breast Cancer
(BRiC)

UK INTERDISCIPLINARY BREAST CANCER SYMPOSIUM

METUPUK attended the UKIBCS in January 2024. It is hosted every two years by Breast Cancer Now, bringing the world of clinical research, oncology, surgery, radiology, pharma, charities and patients together with the latest news on primary and metastatic breast cancer. The two day event had a packed agenda, with many interesting talks about the latest developments across different types of breast cancer and future treatment options.

The METUPUK stand was busy, with visits from a broad range of delegates, many talking about the Ductal and Lobular MBC infographics. Volunteers shared information on awareness, the work underway with Greater Manchester Cancer Alliance and the clinical trial database on the METUPUK website of MBC trials recruiting across the UK.



RESEARCH AND ACCESS TO DRUGS



METUPUK Aims and Objectives:

- Work with life science companies to increase the number of MBC trials in line with the MBC number of patients, recognising the real potential to extend and save their lives.
- Work to make breast cancer trials more accessible to patients with MBC.
- Submit evidence to the National Institute for Health and Care Excellence (NICE) and the Scottish Medicines Consortium (SMC) to speed up the drug approval process for new drug treatments for MBC.
- Maximise technological advances to improve collation and analysis of data and statistics for MBC.
- Encourage decision makers to use information to better inform treatment decisions.

IMPROVING ACCESS TO DRUGS

Drug access is one of the key objectives of METUPUK because new drugs are needed to increase survival outcomes for patients with MBC. To achieve this we work as stakeholders with NICE and the SMC, who are responsible for ensuring that drugs and medical devices are value for money for the NHS. We bring the patient voice into the drug approvals process. All our written submissions are written in collaboration with patients who have the subtype of metastatic breast cancer being reviewed in relation to the proposed drug. We also send patient advocates to speak directly to the committees. The committees are dominated by health economists, scientists and drug companies, and so it is important for these decision-makers to hear from the patients who will benefit from the technology being appraised.

Recommendations made by NICE apply to NHS patients in England and are adopted in Northern Ireland and Wales. Acceptances by the SMC apply in Scotland. On our website we publish treatment line infographics for the three main subtypes of metastatic breast cancer and indicate if there are any differences in NHS access across the UK. Clear information on treatment availability, treatment line restrictions and differences in access across the devolved nations provides a valuable resource for patients to refer to in discussions with their oncologist.

The following drugs for MBC were approved during the financial year 6 April 2023 to 31 March 2024:

- **Enhertu second line HER2-positive (NICE and SMC)**
- **Enhertu HER2-low (SMC accepted, NICE provisional rejection)**
- **Talazoparib BRCA 1/2 (NICE and SMC)**

Only three new drugs were appraised in this financial year. There were fewer technology appraisals than in previous years for MBC from both NICE and the SMC.

NICE METHODS AND PROCESSES REVIEW

In February 2022, a review of the NICE Manual of Methods and Processes led to significant changes, particularly regarding funding for drugs treating conditions with short life expectancies. The former "End of Life Criteria," which allowed £50,000 per QALY gained for life-extending treatments, was challenged by NICE, citing that evidence for societal preference was lacking. Consequently, this criteria was replaced by a severity modifier that assesses health loss from severe diseases. The new framework includes a standard willingness to pay (up to £20,000-£30,000 per QALY gained) alongside two severity modifiers: medium (1.2 multiplier) and severe (1.7 multiplier and equivalent in value to the End of Life criteria). The severity modifier has been implemented as opportunity cost neutral, equivalent to the total NHS "End of life criteria" budget.

During METUPUK's first financial year (9 November 2022- 5 April 2023) all NICE drug appraisals were conducted using the previous methods. Many metastatic breast cancer drugs benefitted from the end of life criteria, and NICE and drug companies came to commercial agreements to bring new medications into the NHS in England.

INEQUALITIES IN DRUG ACCESS ACROSS NICE AND THE SMC

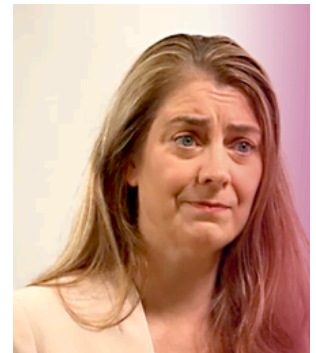
All three metastatic breast cancer drugs appraised during the 2023-24 financial year by NICE were given a 1.2 medium severity. A commercial agreement for Enhertu for HER2-low MBC could not be reached, and this drug has not been recommended by NICE, but is accepted by the SMC and available to patients in Scotland.

Enhertu for HER2-low almost certainly would have fallen under the end of life criteria, and is a first in-class drug. No other drugs used in the NHS in England target HER2-low MBC. In Scotland, the SMC retains dedicated methods and additional funding for end of life conditions. Companies can request a PACE (Patient and Clinical Engagement) meeting to describe the added benefits which may not be fully captured during a conventional clinical and economic assessment.

The Enhertu postcode lottery is not unique in the NHS. Last year the drug combination Piqray plus fulvestrant was recommended by NICE for use in England, but not accepted by the SMC. These discrepancies show that unequal access to cancer drugs remains within the UK. There is much work still to be done to ensure equitable access to therapeutics within the whole of the UK and between the patients treated in the private sector and the NHS.

Access to medicines is a group effort at METUPUK, with many people working tirelessly behind the scenes. Particular thanks to the following patient advocates for their work in NICE and SMC submissions and drug access campaigning. Many of these women have since died but their legacy in improving access to medicines lives on:

Emma Fisher for work on Enhertu for HER2-positive MBC at the second line.



Mary Huckle, Kirstin Spencer and Asha Umrawsingh for work on Enhertu for HER2-low.



Kirstin Spencer and Helen Stewart for work on Talazoparib.

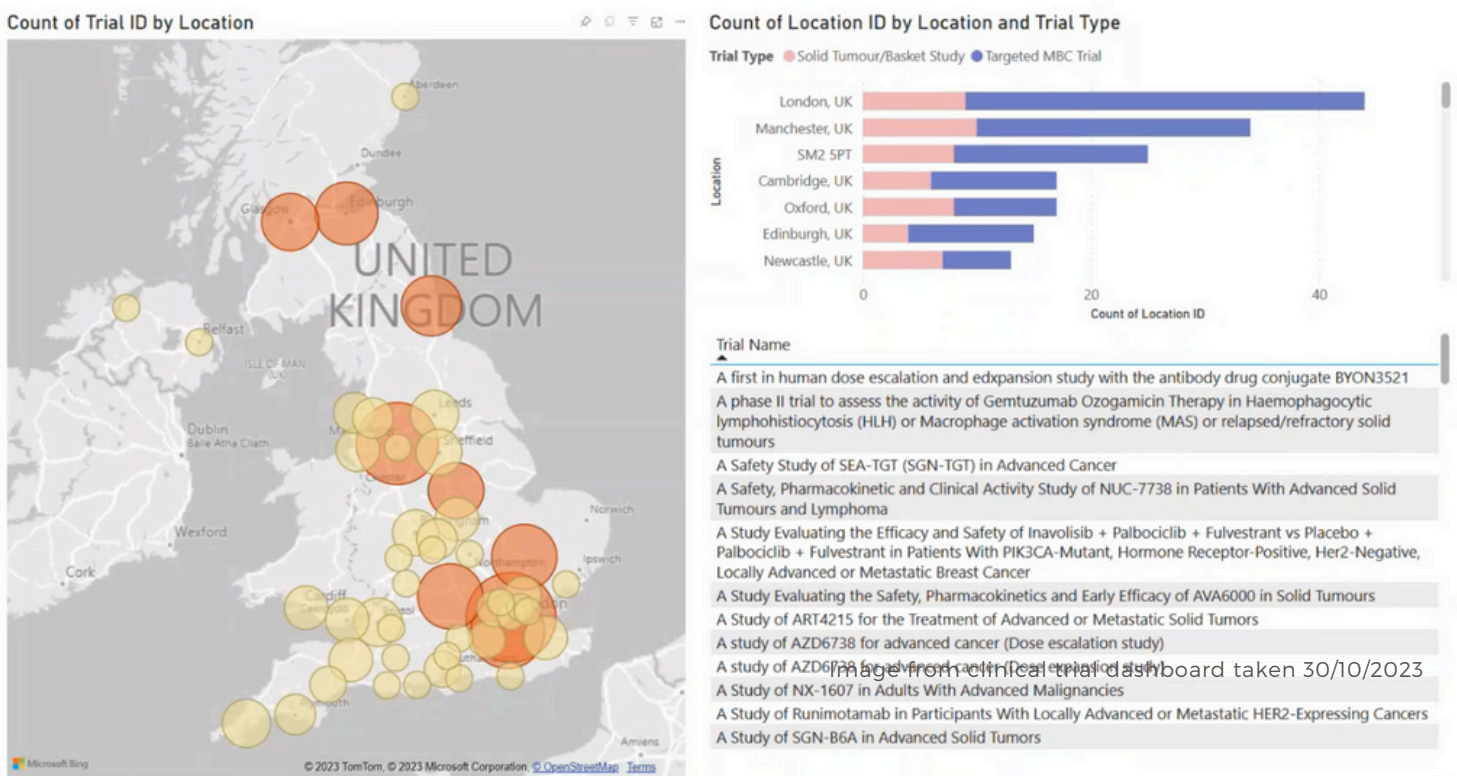
Patricia Snow for her campaigning on access to Piqray in Scotland.

Top L-R Emma Fisher, Mary Huckle and Kirstin Spencer
Bottom L-R Asha Umrawsingh, Helen Stewart and Patricia Snow

CLINICAL TRIALS

METUPUK's work on facilitating access to clinical trials builds on the initiative started by METUPUK patient advocate Beth Roberts in 2018. She constructed a clinical trials spreadsheet to help patients searching for MBC trials. She recognised that the large clinical trial databases were not fit for purpose, and the large organisations that should have been keeping them up to date were not. Trials were missing, trials that had stopped recruiting were being advertised as still open, trials available for MBC patients were not tagged so did not appear in the correct searches. Beth died in 2020, but her work lives on in published form accessible to all on the METUPUK website by a team of two volunteers.

Sadly the challenges of accessing up to date, accurate trial information for MBC still persists, with METUPUK campaigning for patient aimed information such as Be Part of Research to be urgently corrected.



METUPUK's listing as developed further in the financial year, now with dashboards by country and by sub type of disease. The Charity also continues its work with other third sector MBC organisations such as Make 2nds Count to produce the most up to date information for patients to use, wherever they live in the UK.

PATIENT TREATMENT AND CARE

OUR WORK AROUND THE UK - WALES

The Executive Lead for Wales, Tassia (Tass) Haines, had been a significant campaigner for MBC patients since her own diagnosis at 28 years old. Sadly in March 2024, Tassia died of MBC. Her work leaves a huge legacy for METUPUK to continue in Wales, something which she was still driving forward in her final few weeks alive. Tass's passion for change was driven by her own experience of healthcare inequalities. She was not told by any clinicians that there was a risk of developing metastatic disease after her initial primary breast cancer diagnosis. She was turned away from her GP ten times, despite having red flag symptoms. Subsequently she collapsed with spine metastases by the side of the road while out one day and upon hospitalisation, bone mets were found in her legs, hips, spine, ribs, skull and neck. Tass was driven by the stories of other women, who were similarly let down.

The year leading up to her death, saw Tass in May 2023 attending the Petition Committee of Senedd to update on progress that had been made for clinical nurse specialist (CNS) recruitment across Health Board's and for traction in implementing the red flag signs and symptoms of MBC along with a targeted MBC Pathway. From the Committee, Tass took the campaign to the Welsh Health Minister Eluned Morgan and to the National Cancer Clinical Director for Wales, Professor Tom Crosby. Throughout the year, Tass worked with Zoe Barber, Director for Breast Services at Cwm Taf Morgannwg University Health Board and Jo Taylor from METUPUK and After Breast Cancer Diagnosis (ABCD) to roll out the red flag infographics into the pathway for primary patients in Wales. This, coupled with a documented MBC pathway by Zoe Barber, has become Tass's legacy.

This legacy will benefit primary and metastatic patients across Wales for years to come.

In October 2023, METUPUK hosted the first patient-led MBC conference in Wales, to highlight the work in Wales, hear the latest updates on red flag implementation

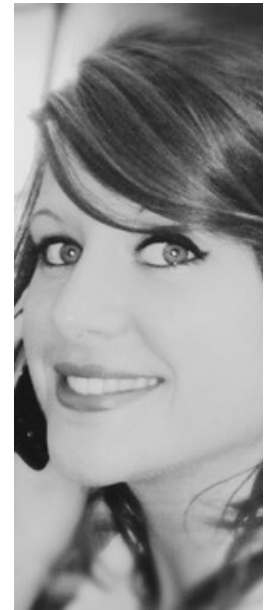


October 2023, METUPUK Conference in Wales.

and the serious situation around lacking clinical data for MBC patients. It was also the first opportunity to present awards created by METUPUK to honour former volunteers.

Carolyn Gammon Award for Outstanding Contribution to Advocacy in Metastatic Breast Cancer

Carolyn Gammon's family joined the conference attendees to honour Carolyn, who was a member of METUPUK in Wales and who died in 2020 from MBC. Tassia Haines received the award in recognition of her campaigning work with Senedd.



Philippa Hetherington Award for Outstanding Contribution to MBC (Clinical)

In remembrance of Philippa Hetherington who spearheaded the campaign for access to Trodelvy and died of MBC November 2022. The award was presented to Zoe Barber, Breast Surgeon.



Connie Johncock Outstanding Contribution to the MBC Community

In remembrance of Connie Johncock, former Trustee of METUPUK, who died March 2023. David Rees MS, who had supported Tass's work with Senedd received the award.

L-R Top: Carolyn Gammon, Philippa Hetherington, Connie Johncock
L-R Bottom: Tassia Haines, Zoe Barber, David Rees MS

The Metastatic Breast Cancer Pathway in Wales was signed off by the Welsh Cancer Network in November 2023, ready for the pathway to be implemented within individual health boards.

Tass was 32 when she died, achieving so much while she was alive to address matters that impacted her and also impacted other patients with MBC. Her legacy of work continues in Wales.

SUPPORT FOR FRIENDS AND FAMILY



METUPUK doesn't provide a support service for MBC patients directly as we do not wish to replicate what is already provided by other organisations. We do signpost patients to groups run by other registered charities. For friends and family, there is less support available. METUPUK have been successfully running a Facebook confidential group since 2021. It is moderated by Andy Figgins, Trustee, whose wife Elaine died of MBC. Emma Smith, Trustee, is also a moderator for the group and has lived experience through her sister Helen who has MBC.

The group provides peer support in a safe environment. Members share thoughts, feelings, memories or anything else which they have on their minds. It provides a safe space for those who wish to open up and share, as well as the wider benefit of members knowing that they are not alone, at whatever point they are supporting someone with MBC. The members are a mixture of those supporting someone under treatment for MBC, supporting end of life care and loved ones of those who have already died of MBC.

Key dates such as Christmas and New Year can be particularly difficult for members and so is one of the main points in the year where the group is encouraged to share stories of loved ones. This brings much comfort to members who can sometimes struggle to find understanding outside of the group.

In order to help keep conversations frequent and provide a positive outlet for support, the group also shares fundraising efforts for METUPUK. The amazing achievements from our fundraising community are shared on page 21.



FUNDRAISING AND DONATIONS



METUPUK is funded almost entirely by fundraising and donations (see page 24). The Charity is incredibly grateful to all the donors who have supported our work this year and the time taken to undertake challenges and events in our honour. The Charity also welcomed a dedicated fundraising Trustee, Emma Smith, to help provide support, merchandise requests and promote on social media until the event has taken place.

Terry Christian, supporter of METUPUK and our work locally in Manchester, chose us as his nominated Charity when he appeared on Celebrity Mastermind. We are thankful of his ongoing support and generous donation when he won!



Terry Christian



Music Secreta

In February 2024, Musica Secreta supported METUPUK on World Cancer Day by creating a playlist with donations to the Charity. The final fundraising piece of music was aired on Radio 3. It was a motet for St Agatha who is the patron saint of breast cancer patients.

METUPUK volunteer Laura Ashurst tracked her future son-in-law Bren Craggs through a collection of amazing challenges this year, raising money for METUPUK.



Over a period of six days, in the heat of the Namibian desert, Bren and the team covered 330km. This challenge pushed Bren to the limits of his mental and physical abilities but they did it raising over £4k in the process!

IN MEMORY

Kieron Else completed a charity truck pull for METUPUK in memory of Connie Johncock who was a founding Trustee. This incredible achievement took a significant amount of training and commitment and raised an amazing amount for the Charity.

We are so proud of Connie's family and friends who celebrate and honour her legacy in so many ways.



Louise Furneaux, a former Trustee of METUPUK who died in 2022, was the inspiration for her twin sister Sarah to raise over £1,300 with a challenge over 31 days. "I was 1 minute older than Lou, now I'm a year older, so in honour and loving memory of Louise and our first birthday apart I am completing a reformer Pilates class for 31 consecutive days". Louise's family also support METUPUK through the corporate partnership with their business Giveacar, a social enterprise that turns unwanted cars into donations for charity. They continue to raise funds for METUPUK ensuring that we can continue with our work across the UK.

Mary Huckle's family and friends came together to raise funds for METUPUK in her honour, after dying in May 2023. She campaigned for better access to treatments and trials for MBC patients and was a significant figure in the MBC community.



METUPUK has historically not had a fundraising strategy in place but with the introduction of Fundraising Trustee, looking forward into the next financial year the Charity seeks to build stronger financial foundations which it can forward plan activity around. The introduction of smaller, regular donations to the Charity along with organised fundraising events are in planning.



OUR FINANCES

Financial Review

The Charity was registered on 9th November 2021 and has now completed a second financial year (running from 6th April 2023 to 31st March 2024). The Charity's income for this period exceeded expenditure by £17k, continuing to leave the Charity in a stable position at the end of the financial year.

The Charity has realigned its financial year so that, from 2024-25, it will run from 1st April to 31st March each year.

Expenditure summary 2023-2024

The Charity's funds have been used effectively and have been spent in line with our objectives. The largest item of expenditure continues to be for attendance at events to further awareness of, and to provide education about, Metastatic Breast Cancer.

Through the use of restricted grant funding, the Charity arranged the first patient-led MBC Conference in the UK in June 2023. The Charity also funded a similar patient-led MBC Conference in Wales in October 2023 and the Charity's Strategy Conference in March 2024 as well as the Metastatic May and Breast Cancer Awareness Month (BCAM) campaigns.

Income summary 2023 - 2024

For the financial period, the Charity's main source of income was donations, comprising 65% of the total funding. The Charity also received a number of restricted grants, which were used to fund the MBC Conference in June 2023. The remaining income was generated through a small number of Charity-led fundraising activities.

STATEMENT OF FINANCIAL ACTIVITIES


RECEIPTS AND PAYMENTS ACCOUNTS

	Unrestricted	Restricted	2024	2023
Receipts				
Fundraising	3,082.59		3,082.59	73,044.38
Donations	50,760.96		50,760.96	13,823.83
Grant income	-	20,000.00	20,000.00	-
Other	3,809.20		3,809.20	15.00
Investment income	58.27		58.27	-
	<u>57,711.02</u>	<u>20,000.00</u>	<u>77,711.02</u>	<u>86,883.21</u>
Payments				
MBC awareness / Education events	38,932.82	15,143.57	54,076.39	22,339.35
Education/ Communications	327.44		327.44	600.05
Other costs	2,409.19		2,409.19	660.32
	<u>41,669.45</u>	<u>15,143.57</u>	<u>56,813.02</u>	<u>23,599.72</u>
Governance costs				
IT/ Website/ SM/ Telecoms	1,027.80		1,027.80	770.20
Insurance	171.55		171.55	179.32
Legal and governance costs	3,000.00		3,000.00	181.80
	<u>4,199.35</u>	<u>-</u>	<u>4,199.35</u>	<u>1,131.32</u>
Receipts less payments	11,842.22	4,856.43	16,698.65	62,152.17
Total funds				
Balance brought forward	62,152.17	-	62,152.17	-
Balance carried forward	<u>73,994.39</u>	<u>4,856.43</u>	<u>78,850.82</u>	<u>62,152.17</u>

STATEMENT OF ASSETS AND LIABILITIES

	Details	Unrestricted	Restricted	2024	2023
Cash funds	Lloyds bank	73,994.39	4,856.43	78,850.82	62,172.17
Liabilities	Accruals	750.00	-	750.00	-

Signed by one of the Trustees on behalf of all the Trustees.

 (Phil Southwell 20 January 2025)

Reserves Policy

METUPUK holds a minimum of 12 months running costs in reserve from unrestricted funds. These running costs include IT/telephone costs including Microsoft accounts, website hosting and support, virtual assistant fees and the cost of running ongoing campaigns such as the Darker Pink exhibition. We also need to set aside provision for professional fees such as accountancy and legal advice should be charity be closed. The funding of METUPUK relies mainly on donations via funding platforms, which varies between month to month. Any funding via grants are generally restricted funds which cannot form part of the reserves policy. The running costs vary according the number of active volunteers who require IT access and the cost of campaigns. The reserve set for this year is £25,000, and this figure will be reviewed by the Trustees on an annual basis.

Looking forward to 2024-2025

Despite the ongoing cost-of-living crisis, the Charity's income levels have continued to exceed expenditure in the 2024-25 financial year.

ADMINISTRATION

List of current Trustees as at 1 January 2025:

Jo Taylor – Founder/Chair (Founding Trustee)

Emma Smith – Fundraising (appointed July 2023)

Dr Helen Steele – Research and Clinical trials (Founding Trustee)

Nicky Goldthorpe – Secretary (appointed October 2024)

Phil Southwell – Finance and Technology (appointed November 2023)

Madeleine Meynell stepped down in November 2024 and Andy Figgins stepped down in December 2024.

The Charity's Registered Office is: 11 Lower Knoll Road, Diggle, Oldham OL3 5PD

The Charity's Independent Examiners are:

KM Chartered Accountants, 1st Floor, Block C, The Wharf, Manchester Road, Burnley BB11 1JG

The Charity's bankers are:

Lloyds Bank plc, 25 Gresham Street, London EC2V 7HN

Risk Management

METUPUK is committed to ensuring practices which will ensure consistent risk management approaches are in place across the organisation. Managing risk is seen as a key organisational responsibility and is integral to the management and governance of the Charity. We recognise that effective risk management is achieved by ensuring that Trustees and the whole volunteer team is engaged with managing and mitigating risk.

We are proactive in identifying all potential risks and in analysing and managing risks. During the year, a risk register was developed and is now being reviewed by Trustees on a regular basis. We will ensure good communications across the organisation to support learning and increasing good practice. We recognise that it is not possible to eliminate risk but aim to manage, mitigate and minimise risks across the Charity wherever possible.

INDEPENDENT EXAMINERS REPORT

Independent Examiner's Report to the trustees of METUPUK

I report to the trustees on my examination of the accounts of METUPUK for the year ended 31 March 2024.

Responsibilities and basis of report

As the charity trustees of METUPUK you are responsible for the preparation of the accounts in accordance with the requirements of the Charities Act 2011 ('the Act').

I report in respect of my examination of the METUPUK accounts carried out under section 145 of the 2011 Act and in carrying out my examination I have followed all the applicable Directions given by the Charity Commission under section 145(5)(b) of the Act.

Independent examiner's statement

I have completed my examination. I confirm that no material matters have come to my attention in connection with the examination giving me cause to believe that in any material respect:

1. Accounting records were not kept in respect of METUPUK as required by section 130 of the Act; or
2. the accounts do not accord with those records; or
3. the accounts do not comply with the accounting requirements concerning the form and content of accounts set out in the Charities (Accounts and Reports) Regulations 2008 other than any requirement that the accounts give a 'true and fair view' which is not a matter considered as part of an independent examination.

I have no concerns and have come across no other matters in connection with the examination to which attention should be drawn in this report in order to enable a proper understanding of the accounts to be reached.

M R Heaton FCCA FCIE DChA
KM Chartered Accountants
1st Floor, Block C
The Wharf
Manchester Road
Burnley
Lancashire BB11 1JG

Date: 15 January 2025




It's not fun knowing that we feel invisible and that no one is listening to us.

Jo Taylor

Metastatic Breast Cancer

#DarkerPink

THE DARKER SIDE OF **Pink**




It's not fun knowing that so many of us are unaware of the red flags symptoms.

Mary Huckle

Metastatic Breast Cancer

#DarkerPink

THE DARKER SIDE OF **Pink**




It's not fun knowing that it's a struggle to access any ongoing NHS mental support.

Laura Ashurst

Metastatic Breast Cancer

#DarkerPink

THE DARKER SIDE OF **Pink**




It's not fun knowing that there doesn't seem to be a test to show who is or potentially who isn't going to be cured.

Kirstin Spencer

Metastatic Breast Cancer

#DarkerPink

THE DARKER SIDE OF **Pink**




It's not fun knowing that I'm planning my funeral. It's not something that someone at 39 years old should be doing.

Carole Pollard

Metastatic Breast Cancer

#DarkerPink

THE DARKER SIDE OF **Pink**




It's not fun knowing that I'm less likely to access clinical trials because I take other medication.

Madeline Meynell

Metastatic Breast Cancer

#DarkerPink

THE DARKER SIDE OF **Pink**




It's not fun knowing that I had to self fund treatments as there was nothing else approved on the NHS available to me.

Phillipa Hetherington

Metastatic Breast Cancer

#DarkerPink

THE DARKER SIDE OF **Pink**




It's not fun knowing that we don't even have clinical trials based on black women's experiences.

Leila Asoko

Metastatic Breast Cancer

#DarkerPink

THE DARKER SIDE OF **Pink**

METUPOK

England & Wales - Charity number 1196494

Accounts

METUPOK ANNUAL REPORT

NOVEMBER 2021-APRIL
2023



First Annual Report (9 November 2021 - 5 April 2023)

METUPOK (Metastatic Exchange to Unleash Power UK)
Charity number 1196494

Registered address
11 Lower Knoll Road
Diggle
Oldham
OL3 5PD

METUPOK is registered by the Charity Commission of England and Wales.
Registration date 9 November 2021.

Structure

METUPOK is a Foundation Charitable Incorporated Organisation registered by the Charity Commission of England and Wales.

Objects

The relief of patients in the UK who have or are at risk of metastatic breast cancer (MBC); in particular (but not exclusively) through raising awareness about MBC by the provision of information and education, working with stakeholders to increase MBC research and access to drugs and ensuring for the public benefit that MBC patient treatment and care remains a national priority.

What the charity does:

General Charitable Purposes
The Advancement Of Health Or Saving Of Lives

Who the charity helps:

The General Public/mankind

How the charity helps:

Provides Advocacy/advice/information

Where the charity operates:

Throughout England And Wales
Northern Ireland
Scotland

“I am delighted that METUPUK has completed our first 16 months as a registered charity. Looking back, it is amazing to see how far our organisation has come since I first set it up in 2016.”

Jo Taylor, METUPUK Founder and Chair



The seeds of METUPUK were planted in 2015, when a group of women in the United States came together to campaign for better awareness and treatment options for metastatic breast cancer (MBC). Unfortunately, little has changed between then and now, and metastatic breast cancer still has poor outcomes because data is not collected and we are not counted when we are alive. Around 30% of people with breast cancer can expect to develop MBC, defined as when breast cancer spreads in the body beyond the breast and nearby lymph nodes. Some are diagnosed with de novo metastatic breast cancer, when spread is found at the same time as first diagnosis. For others, it can occur at any time, including up to 20 or 30 years after a primary diagnosis. We have no reliable UK data on MBC, but in the US, median life expectancy is between 2-5 years depending on sub-type, and at five years after diagnosis just 31%* of people are expected to be alive.

Since our beginnings in 2016 and our registration as a charity in 2021, METUPUK has grown as a patient advocacy organisation. Many amazing patients joined our cause and helped to formulate our strategy. Most of these women who supported us in the early days have now died, but the METUPUK of today stands on their shoulders. We had passionate fundraisers whose generosity and drive gave our charity an opening bank balance of £13,800 when we registered in November 2021. At the end of our first year as a charity, our closing balance was over £62,000. We are incredibly grateful to all our generous donors and hardworking fundraisers. In this report we shall outline how these funds have been used to further our charitable purposes.

*<https://seer.cancer.gov/statfacts/html/breast-subtypes.html>

The 16 month period which forms our first financial year has seen the Charity lose too many volunteers from metastatic breast cancer. Our board of Trustees has lost two members, and we are shaped by their influence and mourn the loss of them.



**LOUISE
FURNEAUX**

Trustee, Secretary
Died September 2022



**CONNIE
JOHNCOCK**

Trustee, Treasurer
Died March 2023

We rely on the work of our Trustees and also our patient advocate volunteers. None of us draw a salary from the Charity and METUPUK would not function without all the people who freely give their time and expertise. I thank everyone who has helped us become the organisation that we are today.

A 2-3 year median life expectancy for MBC is not a statistic to rejoice but rather a demonstration of how much more needs to be done.

JO TAYLOR

Founder/Chair
METUPUK

"I am passionate about creating change for patients especially those with MBC. The only way change will happen is for us to demand change together as a group. We cannot continue with the same outcomes and with women dying at the same rate."

OUR PEOPLE



Trustees during financial period 9 November 2021- 5 April 2023 were Jo Taylor (Chair), Andy Figgins, Constance Johncock (Treasurer, died March 2023), Helen Steele, Julia Bradford, Louise Furneaux (Secretary, died September 2022) and Madeleine Meynell.



**JO
TAYLOR**

Founder/Chair
METUPUK



**ANDY
FIGGINS**

Trustee - Friends and
Family Support



**DR HELEN
STEELE**

Trustee - Research and
Clinical Trials



JULIA BRADFORD

Trustee -
Internal Operations



MADELEINE MEYNELL

Trustee -
Access to Drugs

Trustee Recruitment

Founding Trustees were recruited from volunteers of the METUPUK precursor organisation and worked together to create the Charity. Our constitution requires at least one trustee to have metastatic breast cancer. New Trustees are elected by the board of trustees where a skill shortage has been identified. We have a trustee with responsibility for the induction of new trustees, and each trustee is provided with a copy of The Essential Trustee.

"Without our dedicated and amazing volunteers we wouldn't have been able to achieve the breadth and reach of our work this year. They are at the heart of METUPUK"

Helen Steele, Volunteer Manager, Trustee



A proportion of our funds are spent on providing trustees and volunteers with the tools to be effective advocates. These include but are not limited to:

- Marketing information for events. ie. printed documentation, roller banners, equipment, stand costs.
- Funding patient advocates travel to attend meetings to represent METUPUK because volunteers are located across the UK.
- Funding IT/telephone costs for our website and secure Microsoft document storage.
- Providing trustees and volunteers email addresses and access to SharePoint and Microsoft 365.

We do not have any paid staff but we do use external suppliers on an ad-hoc basis for website maintenance, campaigns and to produce a monthly newsletter.

OUR AIMS AND OBJECTIVES

Our Strategy in our first financial year is summarised across three main areas; **Awareness and Education, Research and Access to Drugs** and **Patient Treatment and Care**. These were formulated with the intention of providing benefit to the public and to patients with MBC.

AWARENESS AND EDUCATION

METUPOK Aims and Objectives:

MBC is currently incurable. We highlight the harsh reality of MBC which is not well reflected in the 'pink' celebratory campaigns. Alongside increasing public

awareness, we challenge and educate policy makers, charities and government bodies to ensure that MBC is a priority for funding, research and innovation. We work to ensure that MBC is represented on all Trusts or Boards of breast cancer organisations, ideally by patient advocates being included as Trustees or Board Members. We work with Cancer Alliances and Health Boards to ensure primary breast cancer patients are provided with the tools and information to understand and recognise the symptoms of MBC. This encourages earlier MBC diagnosis and earlier treatment, thereby improving quality of life and survival prospects. During this financial year we have run two major awareness campaigns; **Darker Pink** and **True Crimes**.

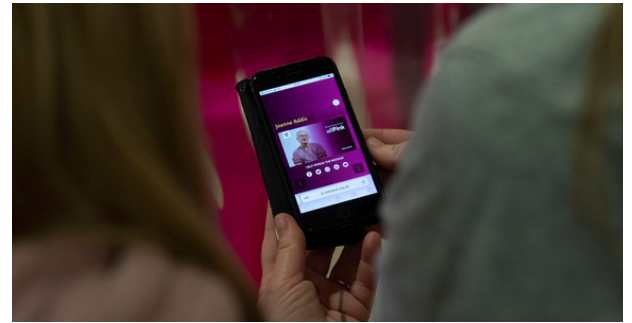
DARKER PINK

The Darker Side of Pink' is a physical interactive experience which highlights the seriousness of Metastatic Breast Cancer - the biggest killer of women aged 35-64



with cancer in the UK. The impactful exhibition features 31 life-size transparent figures, depicting the invisibility of the disease – each one representing **a woman who dies every day** in the UK. The exhibition is part of a drive to raise awareness of the issues and struggles faced by women living with metastatic breast cancer and the urgent need for better care and research.

Each 'Darker Pink' figure features a QR code that, when scanned, plays a video from a real-life woman living with secondary breast cancer. Filmed in 2021, many of these women have since died, themselves becoming a statistic they spoke about whilst also campaigning for change.



The exhibition has been placed in public spaces such as libraries, community centres and retail spaces across England and Scotland during our first year. With the sponsorship of Debbie Abrahams MP for Oldham East and Saddleworth, in March 2023 the Dark Pink exhibition was displayed in the Houses of Parliament (see image on front over). Patient advocates were available daily to speak to MPs and members of the House of Lords to explain to decision makers the issues that patients living with MBC face. We intend in the coming year to display the Darker Pink figures in Wales, along with locations in Northern Ireland, because we are committed to supporting all patients across the UK.



TRUE CRIMES

In Breast Cancer Awareness month 2022, we created a TV advert to complement the Darker Pink exhibition which was still touring the UK. Created and produced by Break Creative Partners, with support and assistance from Millk Media in Manchester, the hard hitting 30 second video was originally scripted and planned to be released across social media channels, but a partnership with media company Guerillascope, saw the advert being shown on mainstream TV across the UK on the 13th October 2022.

Voiced by **Maxine Peake**, it was seen on over 40 spots across 10 channels including ITV, Channel 5 and MTV, reaching an actual total audience of over 2 million. Programmes included Gok Wan, Jamie Oliver, Jeremy Vine, The Great British Bake Off, and prime spots in Emmerdale who were running a MBC story at the time. This elevated

our campaign to a large of people with a hard hitting message in keeping with the #DarkerPink messages. Both the Darker Pink Exhibition and the True Crimes advert provide education about metastatic breast cancer for the public benefit. They complement each other, with the Darker Pink exhibition providing in depth information about metastatic breast cancer, and True Crimes providing short form information to millions of people as a TV advert and a social media clip.



All of our campaigns were combined with dissemination of the ABCD Red Flag Infographics for ductal and lobular breast cancer. These infographics highlight the signs and symptoms of metastatic breast cancer and are signposted by NHS England to educate patients and the public.

Watch the True Crimes TV advert with Maxine Peak






It's not fun knowing that we feel invisible and that no one is listening to us.

Jo Taylor

Metastatic Breast Cancer

#DarkerPink

THE DARKER SIDE OF **Pink**




It's not fun knowing that so many of us are unaware of the red flags symptoms.

Mary Huckle

Metastatic Breast Cancer

#DarkerPink

THE DARKER SIDE OF **Pink**




It's not fun knowing that it's a struggle to access any ongoing NHS mental support.

Laura Ashurst

Metastatic Breast Cancer

#DarkerPink

THE DARKER SIDE OF **Pink**




It's not fun knowing that there doesn't seem to be a test to show who is or potentially who isn't going to be cured.

Kirstin Spencer

Metastatic Breast Cancer

#DarkerPink

THE DARKER SIDE OF **Pink**




It's not fun knowing that I'm planning my funeral. It's not something that someone at 39 years old should be doing.

Carole Pollard

Metastatic Breast Cancer

#DarkerPink

THE DARKER SIDE OF **Pink**




It's not fun knowing that I'm less likely to access clinical trials because I take other medication.

Madeline Meynell

Metastatic Breast Cancer

#DarkerPink

THE DARKER SIDE OF **Pink**




It's not fun knowing that I had to self fund treatments as there was nothing else approved on the NHS available to me.

Phillipa Hetherington

Metastatic Breast Cancer

#DarkerPink

THE DARKER SIDE OF **Pink**




It's not fun knowing that we don't even have clinical trials based on black women's experiences.

Leila Asoko

Metastatic Breast Cancer

#DarkerPink

THE DARKER SIDE OF **Pink**

RESEARCH AND ACCESS TO DRUGS



METUPUK Aims and Objectives:

- Work with life science companies to increase the number of MBC trials in line with the MBC number of patients, recognising the real potential to extend and save their lives.
- Work to make breast cancer trials more accessible to patients with MBC.
- Submit evidence to the National Institute for Health and Care Excellence (NICE) and the Scottish Medicines Consortium (SMC) to speed up the drug approval process for new drug treatments for MBC.
- Maximise technological advances to improve collation and analysis of data and statistics for MBC.
- Encourage decision makers to use information to better inform treatment decisions.

IMPROVING ACCESS TO DRUGS

Drug access is one of the key objectives of METUPUK because new drugs are needed to increase survival outcomes for patients with MBC. To achieve this we work as stakeholders with NICE and the SMC who are responsible for ensuring that drugs and medical devices are value for money for the NHS.

We bring the patient voice into the drug approvals process. All our written submissions are written in collaboration with patients who have the subtype of metastatic breast cancer being reviewed in relation to the proposed drug. We also send patient advocates to speak directly to the committees. The committees are dominated by health economists, scientists and drug companies, and so it is important for these decision-makers to hear from the patients who will benefit from the technology being appraised.

A number of drugs for MBC were approved during our first financial year. METUPUK was a stakeholder participating in the following drug approvals:

- **Trodelvy (NICE and SMC)**
- **Pembrolizumab plus chemo (NICE and SMC)**
- **Tucatinib combination (NICE and SMC)**
- **Enhertu third line (NICE and SMC)**
- **Piqray plus fulvestrant (NICE)**

All of these campaigns bring vital additional drug options to women and men with MBC in the UK. A campaign we would particularly like to highlight is the approval of **Trodelvy (sacituzumab govitecan)**, an antibody drug conjugate licensed to treat unresectable or metastatic triple negative breast cancer. Trodelvy was granted accelerated approval by the United States and was subsequently licenced in the UK under Project Orbis. Project Orbis was designed to deliver faster access to innovative cancer treatments, but this did not include the health technology appraisal which could take up to a year.

METUPUK patient advocate Dr Philippa Hetherington had triple negative metastatic breast cancer and understood that patients did not have that long to wait. Philippa started the #TrodelvyNow campaign to get Gilead, the manufacturer of Trodelvy, to introduce a named basis pre-reimbursement scheme so that patients could start on the drug before NICE/SMC approval was completed. Much of Philippa's advocacy was done while paralysed from a spinal cord compression and having to deal with a very different new normal. .

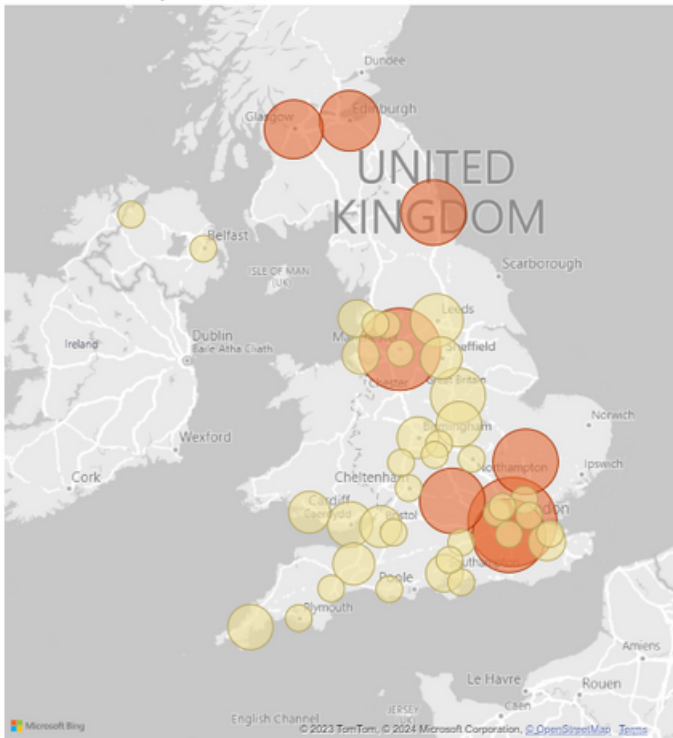
Most of the drugs accepted for use on the NHS this year were made available by both NICE and the SMC. An exception to this was the combination Piqray plus fulvestrant which was not accepted by the SMC and therefore is not available to MBC patients in Scotland treated within the NHS. This discrepancy shows that unequal access to cancer drugs remains within the UK. We intend to open up discussions with the drug company to discuss if resubmission to the SMC is possible, as part of next year's planned work.

CLINICAL TRIALS

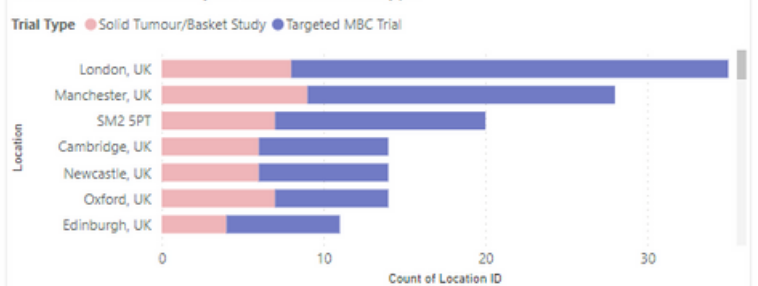
Our work on facilitating access to clinical trials builds on the work started by METUPUK patient advocate Beth Roberts in 2018. She constructed a clinical trials spreadsheet to help patients searching for MBC trials. She recognised that the large clinical trial databases were not fit for purpose, and the large organisations that should have been keeping them up to date were not. Trials were missing, trials that had stopped recruiting were being advertised as still open, trials available for MBC patients were not tagged so not appearing in the correct searches.

Beth died in 2020, and now one of our volunteers, Kat Southwell, has taken this role on. With an IT background, she is developing the trial listing as an interactive dashboard, to be further developed in the next financial year. We will also be collaborating with other third sector MBC organisations such as Make 2nds Count to produce the most up to date information for patients to use, wherever they live in the UK.

Count of Trial ID by Location



Count of Location ID by Location and Trial Type



Trial Name

- A first in human dose escalation and expansion study with the antibody drug conjugate BYON3521
- A Safety, Pharmacokinetic and Clinical Activity Study of NUC-7738 in Patients With Advanced Solid Tumours and Lymphoma
- A Study Evaluating the Safety, Pharmacokinetics and Early Efficacy of AVA6000 in Solid Tumours
- A Study of NX-1607 in Adults With Advanced Malignancies
- A Study of Runimotamab in Participants With Locally Advanced or Metastatic HER2-Expressing Cancers
- A Study of SGN-B6A in Advanced Solid Tumors
- A Study of SGN-B7H4V in Advanced Solid Tumors
- A Study of SGN-PDL1V in Advanced Solid Tumors
- A Study to Evaluate the Safety, Tolerability, and Efficacy of MORAb-202 (Herein Referred to as Farletuzumab Ecteribulin), a Folate Receptor Alpha (FRA)-Targeting Antibody-drug Conjugate (ADC) in Participants With Selected Tumor Types
- A trial of CCS1477 for prostate cancer and other solid tumours
- A trial of HMBD-001 for solid cancers that have spread
- Anti-tumor Effect of Ixabepilone in Metastatic Breast Cancer (mBC) Selected by the Ixabepilone DRP.
- Ascending Doses of Ceralasertib in Combination With Chemotherapy and/or Novel Anti Cancer Agents

PATIENT TREATMENT AND CARE

METUPUK campaigns to ensure that patients have access to the best treatment, so that patients can live longer and better. Our work with the drug regulatory bodies NICE and the SMC is an example of how we campaign for the most up to date treatments.

We also campaign for better access to radiotherapy and surgery for patients with MBC. For example, Philippa Hetherington gave evidence to the Parliamentary Health and Social Care Committee in October 2021 about the challenges faced by NHS patients accessing the latest drugs and radiotherapy, and what role science and innovation can play in helping us to bridge the gap in survival rates between the UK and countries such as Australia and Denmark. Philippa had been denied stereotactic radiotherapy for her brain metastases and so had paid out of her own pocket for treatment. Her testimony demonstrated firsthand to legislators the fact that NHS patients do not have access to the most innovative treatments.

An ongoing campaign has been for the provision of Clinical Nurse Specialists (CNS) dedicated to metastatic breast cancer.

This campaign has particular traction in Wales, where patient advocate Tassia Haines has taken it all the way to the Senedd. During and prior to 2022, there was just one MBC CNS the whole of Wales. Tassia's work has increased the number of CNS posts, but still not enough to cover every patient in Wales. Lack of dedicated CNS provision for patients with metastatic breast



cancer is not just a problem in Wales. There is still much to be done to ensure that every patient has a dedicated nurse to support them at every stage of their illness.

We also have an ongoing social media campaign about living well with metastatic breast cancer. Using the searchable hashtag #BusyLivingWithMets we highlight achievements made by people living with the disease, and use our social media channels to encourage living well. We do not endorse any “well being” activities that are not evidence based.

Our Chair Jo Taylor is passionate about the benefits exercise and fitness can bring to physical and mental health in cancer, and so are many of our volunteers.

We also recognise the impact that metastatic breast cancer has on friends and family. We have a Friends and Family Facebook group which is moderated by Andy Figgins, who lost his wife Elaine to metastatic breast cancer. The group provides peer support in a safe environment. We do not provide a group for patients with metastatic breast cancer because we do not wish to replicate what is already provided by other organisations. We do signpost patients to groups run by other registered charities.



OUR FINANCES

Financial Review

The Charity was registered on 9th November 2021, with a first financial year end of 5th April 2023. The Charity's income for this period exceeded expenditure by £62k, leaving the Charity in a stable position at the end of the financial year.

Expenditure summary 2021-2023

The Charity's funds have been used effectively and have been spent in line with our objectives. The largest item of expenditure was for attendance at events to further awareness of, and to provide education about, Metastatic Breast Cancer.

Income summary 2021-2023

For the financial period, the Charity's main source of income was fundraising, comprising 85% of the total funding. The remaining 15% was from direct donations to the Charity. Income came from individuals and corporates as well as income generated through Charity-led fundraising activities.

Charity Reserves Policy

METUPUK holds a minimum of 12 months running costs in reserve from unrestricted funds. These running costs include IT/telephone costs including Microsoft accounts, website hosting and support, virtual assistant fees and the cost of running ongoing campaigns such as the Darker Pink exhibition. We also need to set aside provision for professional fees such as accountancy and legal advice should the charity be closed. The funding stream of METUPUK relies mainly on donations via funding platforms, which varies between month to month. Any funding via grants are generally restricted funds which cannot form part of the reserves policy.

Our running costs vary according to the number of active volunteers who require IT access and the cost of our campaigns. The reserve set for this year is £25,000, and this figure will be reviewed by the Trustees on an annual basis.

STATEMENT OF FINANCIAL ACTIVITIES

METUPUK	
Charity no: 1196494	
Income	
Fundraising	£73,044.38
Donations	£13,823.83
Other	£15.00
	£86,883.21
Charitable Activities Costs	
MBC Awareness / Education Events	£22,339.35
Education/ Communications	£600.05
Other costs	£660.32
	£23,599.72
Governance Costs	
IT/Website/SM/Telecoms	£770.20
Insurance	£179.32
Legal & Governance Costs	£181.80
	£1,131.32
Incoming	£86,883.21
Outgoing	£24,731.04
Closing Balance	£62,152.17

Charity Name METUPOUK	Charity No	1196494		
	Company No			
Annual accounts for the period				
Period start date	11/9/2021	To	Period end date	4/5/2023

Section A Statement of financial activities (including summary income and expenditure account)

Recommended categories by activity	Guidance Note	Unrestricted funds £ F01	Restricted income funds £ F02	Endowment funds £ F03	Total funds £ F04	Prior year funds £ F05
Income (Note 3)						
Income and endowments from:						
Donations and legacies	S01	13,824	-	-	13,824	-
Charitable activities	S02	73,044	-	-	73,044	-
Other trading activities	S03	-	-	-	-	-
Investments	S04	-	-	-	-	-
Separate material item of income	S05	-	-	-	-	-
Other	S06	15	-	-	15	-
Total	S07	86,883	-	-	86,883	-
Expenditure (Notes 6)						
Expenditure on:						
Raising funds	S08	-	-	-	-	-
Charitable activities	S09	23,600	-	-	23,600	-
Separate material expense item	S10	-	-	-	-	-
Other	S11	1,131	-	-	1,131	-
Total	S12	24,731	-	-	24,731	-
Net income/(expenditure) before tax for the reporting period						
	S13	62,152	-	-	62,152	-
Tax payable	S14	-	-	-	-	-
Net income/(expenditure) after tax before investment gains/(losses)						
	S15	62,152	-	-	62,152	-
Net gains/(losses) on investments	S16	-	-	-	-	-
Net income/(expenditure)	S17	62,152	-	-	62,152	-
Extraordinary items	S18	-	-	-	-	-
Transfers between funds	S19	-	-	-	-	-
Other recognised gains/(losses):						
Gains and losses on revaluation of fixed assets for the charity's own use	S20	-	-	-	-	-
Other gains/(losses)	S21	-	-	-	-	-
Net movement in funds	S22	62,152	-	-	62,152	-
Reconciliation of funds:						
Total funds brought forward	S23	-	-	-	-	-
Total funds carried forward	S24	62,152	-	-	62,152	-

Section B Balance sheet

		Guidance Note	Unrestricted funds	Restricted income funds	Endowment funds	Total this year	Total last year	
			£	£	£	£	£	£
			F01	F02	F03	F04	F05	
Fixed assets								
Intangible assets	(Note 15)	B01	-	-	-	-	-	Not applicable
Tangible assets	(Note 14)	B02	-	-	-	-	-	Not applicable
Heritage assets	(Note 16)	B03	-	-	-	-	-	Not applicable
Investments	(Note 17)	B04	-	-	-	-	-	Not applicable
Total fixed assets		B05	-	-	-	-	-	
Current assets								
Stocks	(Note 18)	B06	-	-	-	-	-	Not applicable
Debtors	(Note 19)	B07	-	-	-	-	-	Not applicable
Investments	(Note 17.4)	B08	-	-	-	-	-	Not applicable
Cash at bank and in hand	(Note 24)	B09	62,152	-	-	62,152	-	As per bank i
Total current assets		B10	62,152	-	-	62,152	-	
Creditors: amounts falling due within one year	(Note 20)	B11	-	-	-	-	-	Not applicable
Net current assets/(liabilities)		B12	62,152	-	-	62,152	-	
Total assets less current liabilities		B13	62,152	-	-	62,152	-	
Creditors: amounts falling due after one year	(Note 20)	B14	-	-	-	-	-	Not applicable
Provisions for liabilities		B15	-	-	-	-	-	
Total net assets or liabilities		B16	62,152	-	-	62,152	-	
Funds of the Charity								
Endowment funds	(Note 27)	B17	-	-	-	-	-	
Restricted income funds	(Note 27)	B18	-	-	-	-	-	
Unrestricted funds		B19	62,152	-	-	62,152	-	
Revaluation reserve		B20	-	-	-	-	-	
Fair value reserve		B21	-	-	-	-	-	
Total funds		B22	62,152	-	-	62,152	-	

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

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

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

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

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

Print Name	Date of approval dd/mm/yyyy
Jo Taylor	2/3/2024
Madeleine Meynell	2/3/2024

Signature of director authenticating accounts being sent to
Companies House

Signature	Date dd/mm/yyyy
#VALUE!	2/4/2024
Phil Southwell	Print name

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Note 1 Basis of preparation

This section should be completed by all charities.

1.1 Basis of accounting

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

The accounts have been prepared in accordance with:

- and with* the Statement of Recommended Practice: Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) issued on 16 July 2014
- and with* the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102)
- and with the Charities Act 2011.

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

* -Tick as appropriate

1.2 Going concern

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

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

Not applicable

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

Not applicable

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

Not applicable

1.3 Change of accounting policy

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

Yes*

No*

* -Tick as appropriate

Please disclose:

<i>(i) the nature of the change in accounting policy;</i>	<i>Not applicable</i>
<i>(ii) the reasons why applying the new accounting policy provides more reliable and more relevant information; and</i>	<i>Not applicable</i>

<i>(iii) the amount of the adjustment for each line affected in the current period, each prior period presented and the aggregate amount of the adjustment relating to periods before those presented, 3.44 FRS102 SORP.</i>	<i>Not applicable</i>
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1.4 Changes to accounting estimates

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

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

Please disclose:

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

1.5 Material prior year errors

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

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

Please disclose:

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

Note 2 Accounting policies

This standard list of accounting policies has been applied by the charity except for those deleted. Where a different or additional policy has been adopted then this is detailed in the box below.

2.1 RECONCILIATION WITH PREVIOUS GENERALLY ACCEPTED ACCOUNTING PRACTICE

Please provide a description of the nature of each change in accounting policy

--

Reconciliation of funds per previous GAAP to funds determined under FRS 102

	Start of period	End of period
	£	£

Fund balances as previously stated

Adjustments:

Fund balance as restated _____

Reconciliation of net income/(net expenditure) per previous GAAP to net income/(net expenditure) under FRS 102

	End of period
	£

Net income/(expenditure) as previously stated

Adjustments:

Previous period net income/(expenditure) as restated _____

Not applicable
There are no differences

Note 2

Accounting policies

2.2 INCOME

Recognition of income

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

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

Yes*	No*	N/a*
✓	✓	✓

Offsetting

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

Yes*	No*	N/a*
✓	✓	✓

Grants and donations

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

Yes*	No*	N/a*
✓	✓	✓

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

Yes*	No*	N/a*
✓	✓	✓

Legacies

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

Yes*	No*	N/a*
✓	✓	✓

Government grants

The charity has received government grants in the reporting period

Yes*	No*	N/a*
✓	✓	✓

Tax reclaims on donations and gifts

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

Yes*	No*	N/a*
✓	✓	✓

Contractual income and performance related grants

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

Yes*	No*	N/a*
✓	✓	✓

Donated goods

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

Yes*	No*	N/a*
✓	✓	✓

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

Yes*	No*	N/a*
✓	✓	✓

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

Yes*	No*	N/a*
✓	✓	✓

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

Yes*	No*	N/a*
✓	✓	✓

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

Yes*	No*	N/a*
✓	✓	✓

Donated services and facilities

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

Yes*	No*	N/a*
✓	✓	✓

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

Yes*	No*	N/a*
✓	✓	✓

Support costs

The charity has incurred expenditure on support costs.

Yes*	No*	N/a*
✓	✓	✓

Volunteer help

The value of any voluntary help received is not included in the accounts but is described in the trustees' annual report.

Yes*	No*	N/a*
✓	✓	✓

Income from interest, royalties and dividends This is included in the accounts when receipt is probable and the amount receivable can be measured reliably.

Yes*	No*	N/a*
✓	✓	✓

Income from membership subscriptions Membership subscriptions received in the nature of a gift are recognised in Donations and Legacies.

Yes*	No*	N/a*
✓	✓	✓

Membership subscriptions which gives a member the right to buy services or other benefits are recognised as income earned from the provision of goods and services as income from charitable activities.

Yes*	No*	N/a*
✓	✓	✓

Settlement of insurance claims Insurance claims are only included in the SoFA when the general income recognition criteria are met (5.10 to 5.12 FRS102 SORP) and are included as an item of other income in the SoFA.

Yes*	No*	N/a*
✓	✓	✓

Investment gains and losses This includes any realised or unrealised gains or losses on the sale of investments and any gain or loss resulting from revaluing investments to market value at the end of the year.

Yes*	No*	N/a*
✓	✓	✓

2.3 EXPENDITURE AND LIABILITIES

Liability recognition Liabilities are recognised where it is more likely than not that there is a legal or constructive obligation committing the charity to pay out resources and the amount of the obligation can be measured with reasonable certainty.

Yes*	No*	N/a*
✓	✓	✓

Governance and support costs Support costs have been allocated between governance costs and other support. Governance costs comprise all costs involving public accountability of the charity and its compliance with regulation and good practice.

Yes*	No*	N/a*
✓	✓	✓

Support costs include central functions and have been allocated to activity cost categories on a basis consistent with the use of resources, eg allocating property costs by floor areas, or per capita, staff costs by the time spent and other costs by their usage.

Yes*	No*	N/a*
✓	✓	✓

Grants with performance conditions Where the charity gives a grant with conditions for its payment being a specific level of service or output to be provided, such grants are only recognised in the SoFA once the recipient of the grant has provided the specified service or output.

Yes*	No*	N/a*
✓	✓	✓

Grants payable without performance conditions Where there are no conditions attaching to the grant that enables the donor charity to realistically avoid the commitment, a liability for the full funding obligation must be recognised.

Yes*	No*	N/a*
✓	✓	✓

Redundancy cost The charity made no redundancy payments during the reporting period.

Yes*	No*	N/a*
✓	✓	✓

Deferred income No material item of deferred income has been included in the accounts.

Yes*	No*	N/a*
✓	✓	✓

Creditors The charity has creditors which are measured at settlement amounts less any trade discounts

Yes*	No*	N/a*
✓	✓	✓

Provisions for liabilities A liability is measured on recognition at its historical cost and then subsequently measured at the best estimate of the amount required to settle the obligation at the reporting date

Yes*	No*	N/a*
✓	✓	✓

Basic financial instruments The charity accounts for basic financial instruments on initial recognition as per paragraph 10.7 FRS102 SORP. Subsequent measurement is as per paragraphs 11.17 to 11.19, FRS102 SORP.

Yes*	No*	N/a*
✓	✓	✓

2.4 ASSETS

Tangible fixed assets for use by charity These are capitalised if they can be used for more than one year, and cost at least

--	--	--

They are valued at cost.

Yes*	No*	N/a*
✓	✓	✓

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

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

Yes*	No*	N/a*
✓	✓	✓

They are valued at cost.

Yes*	No*	N/a*
✓	✓	✓

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

Yes*	No*	N/a*
✓	✓	✓

They are valued at cost.

Yes*	No*	N/a*
✓	✓	✓

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

Yes*	No*	N/a*
✓	✓	✓

end. The same treatment is applied to unlisted investments unless fair value cannot be measured reliably in which case it is measured at cost less impairment.

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

Yes*	No*	N/a*
✓	✓	✓

Stocks and work in progress

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

Yes*	No*	N/a*
✓	✓	✓

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

Yes*	No*	N/a*
✓	✓	✓

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

Yes*	No*	N/a*
✓	✓	✓

Debtors

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

Yes*	No*	N/a*
✓	✓	✓

Current asset investments

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

Yes*	No*	N/a*
✓	✓	✓

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

Yes*	No*	N/a*
✓	✓	✓

POLICIES ADOPTED ADDITIONAL TO OR DIFFERENT FROM THOSE ABOVE

Note 3

Income

Analysis of income		Unrestricted funds	Restricted income funds	Endowment funds	Total funds £	Prior year £
Donations and legacies:	Donations and gifts	13,824	-	-	13,824	-
	Gift Aid	-	-	-	-	-
	Legacies	-	-	-	-	-
	General grants provided by government/other charities	-	-	-	-	-
	Membership subscriptions and sponsorships which are in substance donations	-	-	-	-	-
	Donated goods, facilities and services	-	-	-	-	-
	Other	15	-	-	15	-
	Total	13,839	-	-	13,839	-
Charitable activities:	Fundraising events	73,044	-	-	73,044	-
		-	-	-	-	-
		-	-	-	-	-
	Other	-	-	-	-	-
	Total	73,044	-	-	73,044	-
Other trading activities:		-	-	-	-	-
		-	-	-	-	-
		-	-	-	-	-
	Other	-	-	-	-	-
	Total	-	-	-	-	
Income from investments:	Interest income	-	-	-	-	-
	Dividend income	-	-	-	-	-
	Rental and leasing income	-	-	-	-	-
	Other	-	-	-	-	-
	Total	-	-	-	-	
Separate material item of income		-	-	-	-	-
		-	-	-	-	-
		-	-	-	-	-
		-	-	-	-	-
	Total	-	-	-	-	
Other:	Conversion of endowment funds into income	-	-	-	-	-
	Gain on disposal of a tangible fixed asset held for charity's own use	-	-	-	-	-
	Gain on disposal of a programme related investment	-	-	-	-	-
	Royalties from the exploitation of intellectual property rights	-	-	-	-	-
	Other	-	-	-	-	-
	Total	-	-	-	-	
TOTAL INCOME		86,883	-	-	86,883	-

Other information:

All income in the prior year was unrestricted except for: (please provide description and amounts)

Not applicable

Where any endowment fund is converted into income in the reporting period, please give the reason for the conversion.

Not applicable

Where any endowment fund is converted into income in the prior period, please give the reason for the conversion.

Not applicable

Within the income items above the following items are material: (please disclose the nature, amount and any prior year amounts)

Not applicable

This year: Where sums originally denominated in foreign currency have been included in income, explain the basis on which those sums have been translated into sterling (or the currency in which the accounts are drawn up).

Not applicable

Last year: Where sums originally denominated in foreign currency have been included in income, explain the basis on which those sums have been translated into sterling (or the currency in which the accounts are drawn up).

Not applicable

Note 4 Analysis of receipts of government grants

	Description	This year £
Government grant 1		-
Government grant 2		-
Government grant 3		-
Other		-
	Total	-

	Description	Last year £
Government grant 1		-
Government grant 2		-
Government grant 3		-
Other		-
	Total	-

	This year	Last year
<i>Please provide details of any unfulfilled conditions and other contingencies attaching to grants that have been recognised in income.</i>		

	This year	Last year
<i>Please give details of other forms of government assistance from which the charity has directly benefited.</i>		

Not applicable

Note 5 Donated goods, facilities and services

	This year £	Last year £
Seconded staff	-	-
Use of property	-	-
Other	-	-

	This year	Last year
Please provide details of the accounting policy for the recognition and valuation of donated goods, facilities and services.		
Please provide details of any unfulfilled conditions and other contingencies attaching to resources from donated goods and services not recognised in income.		
Please give details of other forms of other donated goods and services not recognised in the accounts, eg contribution of unpaid volunteers.		

Note 6 Expenditure

Analysis	This year				Last year			
	Unrestricted funds	Restricted income funds	Endowment funds	Total funds	Unrestricted funds	Restricted income funds	Endowment funds	Total funds
Expenditure on raising funds:				£				£
Incurred seeking donations	2,392	-	-	2,392	-	-	-	-
Incurred seeking legacies	-	-	-	-	-	-	-	-
Incurred seeking grants	-	-	-	-	-	-	-	-
Operating membership schemes and social lotteries	-	-	-	-	-	-	-	-
Staging fundraising events	22,339	-	-	22,339	-	-	-	-
Fundraising agents	-	-	-	-	-	-	-	-
Operating charity shops	-	-	-	-	-	-	-	-
Operating a trading company undertaking non-charitable trading activity	-	-	-	-	-	-	-	-
Advertising, marketing, direct mail and publicity	-	-	-	-	-	-	-	-
Start up costs incurred in generating new source of future income	-	-	-	-	-	-	-	-
Database development costs	-	-	-	-	-	-	-	-
Other trading activities	-	-	-	-	-	-	-	-
Investment management costs:	-	-	-	-	-	-	-	-
Portfolio management costs	-	-	-	-	-	-	-	-
Cost of obtaining investment advice	-	-	-	-	-	-	-	-
Investment administration costs	-	-	-	-	-	-	-	-
Intellectual property licencing costs	-	-	-	-	-	-	-	-
Rent collection, property repairs and maintenance charges	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-
Total expenditure on raising funds	24,731	-	-	24,731	-	-	-	-
Expenditure on charitable activities:								
	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-
Total expenditure on charitable activities	-	-	-	-	-	-	-	-
Separate material item of expense								
	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-
Total	-	-	-	-	-	-	-	-
Other								
	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-
Total other expenditure	-	-	-	-	-	-	-	-
TOTAL EXPENDITURE	24,731	-	-	24,731	-	-	-	-

Other information:

Analysis of expenditure on charitable activities

Activity or programme	This year				Last year			
	Activities undertaken directly	Grant funding of activities	Support Costs	Total this year	Activities undertaken directly	Grant funding of activities	Support Costs	Total last year
	£	£	£	£	£	£	£	£
Activity 1	-	-	-	-	-	-	-	-
Activity 2	-	-	-	-	-	-	-	-
Other	-	-	-	-	-	-	-	-
Total	-	-	-	-	-	-	-	-

This year: Where sums originally denominated in foreign currency have been included in expenditure, explain the basis on which those sums have been translated into sterling (or the currency in which the accounts are drawn up).

Last year: Where sums originally denominated in foreign currency have been included in expenditure, explain the basis on which those sums have been translated into sterling (or the currency in which the accounts are drawn up).

Section C**Notes to the accounts****(cont)****Note 7 Extraordinary items***Please explain the nature of each extraordinary item occurring in the period.*

	Description	This year £	Last year £
Extraordinary item 1		-	-
Extraordinary item 2		-	-
Extraordinary item 3		-	-
Extraordinary item 4		-	-
Total extraordinary items		-	-

Not applicable

Section C

Notes to the accounts

Note 9 Support Costs

Please complete this note if the charity has analysed its expenses using activity categories and has support costs.

This year

Support cost (examples)	Raising funds	Activity 1	Activity 2	Activity 3	Grand total	Basis of allocation
	£	£	£	£	£	(Describe method)
Governance	1,681	-	-	-	1,681	
Charities activities	23,600	-	-	-	23,600	
	-	-	-	-	-	
	-	-	-	-	-	
Other	-	-	-	-	-	
Total	25,281	-	-	-	25,281	

Last year

Support cost (examples)	Raising funds	Activity 1	Activity 2	Activity 3	Grand total	Basis of allocation
	£	£	£	£	£	(Describe method)
Governance	-	-	-	-	-	
Charities activities	-	-	-	-	-	
	-	-	-	-	-	
	-	-	-	-	-	
Other	-	-	-	-	-	
Total	-	-	-	-	-	

Please provide details of the accounting policy adopted for the apportionment of costs between activities and any estimation techniques used to calculate their apportionment.

Section C **Notes to the accounts**

Note 10 **Details of certain types of expenditure**

Note 10.1 Fees for examination of the accounts

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

Independent examiner's fees

Assurance services other than independent examination

Tax advisory fees

Other fees (for example: financial advice, consultancy, accountancy services) paid to the independent examiner

This year £	Last year £
-	-
-	-
-	-
-	-

Not applicable

Note 11 **Paid employees**

Please complete this note if the charity has any employees (transactions with Trustees dealt with in Note 28)

11.1 Staff Costs

	This year £	Last year £
Salaries and wages	-	-
Social security costs	-	-
Pension costs (defined contribution scheme)		
Other employee benefits	-	-
Total staff costs	-	-

This year:

--	--

Please provide details of expenditure on staff working for the charity whose contracts are with and are paid by a related party

Last year:

--	--

Please provide details of expenditure on staff working for the charity whose contracts are with and are paid by a related party

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

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

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Band	Number of employees	
	This year	Last year
£60,000 to £69,999	-	-
£70,000 to £79,999	-	-
£80,000 to £89,999	-	-
£90,000 to £99,999	-	-
£100,000 to £109,999	-	-

Please provide the total amount paid to key management

This year £	Last year £
-	-

11.2 Average head count in the year

The parts of the charity in which the employees work

	This year Number	Last year Number
Fundraising	-	-
Charitable Activities	-	-
Governance	-	-
Other	-	-
Total	-	-

11.3 Ex-gratia payments to employees and others (excluding trustees)

Please complete if an ex-gratia payment is made.

Please explain the nature of the payment

This year	
Last year	

Please state the legal authority or reason for making the payment

This year	
Last year	

Please state the amount of the payment (or value of any waiver of a right to an asset)

This year	Last year
£	£
-	-

11.4 Redundancy payments

Please complete if any redundancy or termination payment is made in the period.

Total amount of payment

This year	Last year
£	£
-	-

The nature of the payment (cash, asset etc.)

--	--

The extent of redundancy funding at the balance sheet date

This year	Last year
£	£
-	-

Please state the accounting policy for any redundancy or termination payments

--	--

Note 12 Defined contribution pension scheme or defined benefit scheme accounted for as a defined contribution scheme.

12.1 Please complete this note if a defined contribution pension scheme is operated.

	This year	Last year
	£	£
Amount of contributions recognised in the SOFA as an expense	-	-

Please explain the basis for allocating the liability and expense of defined contribution pension scheme between activities and between restricted and unrestricted funds.

--	--

12.2 Please complete this section where the charity participates in a defined benefit pension plan but is unable to ascertain its share of the underlying assets and liabilities.

Please confirm that although the scheme is accounted for as a defined contribution plan, it is a defined benefit plan.

--

Please provide such information as is available about the plan's surplus or deficit and the implications, if any, for the reporting charity this year and last year, if different

--

12.3 Please complete this section where the charity participates in a multi-employer defined benefit pension plan that is accounted for as a defined contribution plan.

Describe the extent to which the charity can be liable to the plan for other entities' obligations under the terms and conditions of the multi-employer plan. If this is different for last year, provide details

--

Provide an explanation of how any liability arising from an agreement with a multi-employer plan to fund a deficit has been determined. If this is different for last year, provide details

--

Not applicable

Note 13 Grantmaking

Please complete this note if the charity made any grants or donations which in aggregate form a material part of the charitable activities undertaken.

This year:**13.1 Analysis of grants paid (included in cost of charitable activities)**

Analysis	Grants to institutions	Grants to individuals	Support costs	Total
			£	£
Activity or project 1	Nil	Nil	Nil	Nil
Activity or project 2	Nil	Nil	Nil	Nil
Activity or project 3	Nil	Nil	Nil	Nil
Activity or project 4	Nil	Nil	Nil	Nil
Total	-	-	-	-

Please enter "Nil" if the charity does not identify and/or allocate support costs.

13.2 Grants made to institutions

<i>My charity has made grants to particular institutions that are material in the context of its grantmaking. Details of the institution supported, purpose of the grant and total paid to each institution is available on the charity's web site.</i>	Yes	<i>Please provide details of charity's URL.</i>
	No	<i>Provide details below</i>

Names of institution	Purpose	Total amount of grants paid £
		-
		-
		-
		-
		-
		-
		-
		-
		-
		-
Total grants to institutions in reporting period		-
Other unanalysed grants		-
TOTAL GRANTS PAID		-

Last year:

13.3 Analysis of grants paid (included in cost of charitable activities)

Analysis	Grants to institutions	Grants to individuals	Support costs £	Total £
Activity or project 1	Nil	Nil	Nil	Nil
Activity or project 2	Nil	Nil	Nil	Nil
Activity or project 3	Nil	Nil	Nil	Nil
Activity or project 4	Nil	Nil	Nil	Nil
Total	-	-	-	-

Please enter "Nil" if the charity does not identify and/or allocate support costs.

13.4 Grants made to institutions

My charity has made grants to particular institutions that are material in the context of its grantmaking. Details of the institution supported, purpose of the grant and total paid to each institution is available on the charity's web site.

Yes	<i>Please provide details of charity's URL.</i>
N/a	<i>Provide details below</i>

Names of institution	Purpose	Total amount of grants paid £
		-
		-
		-
		-
		-
		-
		-
		-
		-
		-
Total grants to institutions in reporting period		-
Other unanalysed grants		-
TOTAL GRANTS PAID		-

Note 14 Tangible fixed assets*Please complete this note if the charity has any tangible fixed assets***14.1 Cost or valuation**

	Freehold land & buildings	Other land & buildings	Plant, machinery and motor vehicles	Fixtures, fittings and equipment	Total
	£	£	£	£	£
At the beginning of the year	-	-	-	-	-
Additions	-	-	-	-	-
Revaluations	-	-	-	-	-
Disposals	-	-	-	-	-
Transfers *	-	-	-	-	-
At end of the year	-	-	-	-	-

14.2 Depreciation and impairments

**Basis	SL or RB (Straight Line or Reducing Balance)	SL or RB	SL or RB	SL or RB	SL or RB
** Rate					

At beginning of the year	-	-	-	-	-
Disposals	-	-	-	-	-
Depreciation	-	-	-	-	-
Impairment	-	-	-	-	-
Transfers*	-	-	-	-	-
At end of the year	-	-	-	-	-

14.3 Net book value

Net book value at the beginning of the year	-	-	-	-	-
Net book value at the end of the year	-	-	-	-	-

14.4 Impairment

This year: Please provide a description of the events and circumstances that led to the recognition or reversal of an impairment loss.

--

Last year: Please provide a description of the events and circumstances that led to the recognition or reversal of an impairment loss.

--

14.5 Revaluation

If an accounting policy of revaluation is adopted, please provide:

the effective date of the revaluation

the name of independent valuer, if applicable

the methods applied and significant assumptions

the carrying amount that would have been recognised had the assets been carried under the cost model.

This year

Last year

	-	-

14.6 Other disclosures

(i) Please state the amount of borrowing costs, if any, capitalised in the construction of tangible fixed assets and the capitalisation rate used.

(ii) Please provide the amount of contractual commitments for the acquisition of tangible fixed assets.

(iii) Details of the existence and carrying amounts of property, plant and equipment to which the charity has restricted title or that are pledged as security for liabilities.

This year	Last year
£	£
-	-
-	-

* The "transfers" row is for movements between fixed asset categories.

** Please indicate the method of depreciation by deleting the method not applicable (SL = straight line; RB = reducing balance). Also please indicate the rate of depreciation: for straight line, what is the anticipated life of the asset (in years); for reducing balance, what is

Not applicable

Note 15 Intangible assets*Please complete this note if the charity has any intangible assets***15.1 Cost or valuation**

	Research & development	Patents and trademarks	Other	Total
	£	£	£	£
At beginning of the year	-	-	-	-
Additions	-	-	-	-
Disposals	-	-	-	-
Revaluations	-	-	-	-
Transfers *	-	-	-	-
At end of the year	-	-	-	-

15.2 Amortisation and impairments

**Basis	SL or RB	SL or RB	SL or RB	SL or RB	Straight Line ("SL") or Reducing Balance ("RB")
** Rate					
At beginning of the year	-	-	-	-	-
Disposals	-	-	-	-	-
Amortisation	-	-	-	-	-
Impairment	-	-	-	-	-
Transfers*	-	-	-	-	-
At end of year	-	-	-	-	-

15.3 Net book value

Net book value at the beginning of the year	-	-	-	-
Net book value at the end of the year	-	-	-	-

15.4 Accounting policy*Please disclose the accounting policy for intangible fixed assets including:**Reasons for choosing amortisation rates**Policies for the recognition of any capital development*

15.5 Impairment

This year:

Please provide a description of the events and circumstances that led to the recognition or reversal of an impairment loss.

--

Last year:

Please provide a description of the events and circumstances that led to the recognition or reversal of an impairment loss.

--

15.6 Revaluation

If an accounting policy of revaluation is adopted, please provide:

the effective date of the revaluation

the name of independent valuer, if applicable

the methods applied

the carrying amount that would have been recognised had the assets been carried under the cost model.

This year	Last year

15.7 Other disclosures

(i) If your intangible asset was acquired by way of grant, provide value on initial recognition and carrying amount of the asset.

(ii) Details of the carrying amounts of any intangible assets to which the charity has restricted title or that are pledged as security for liabilities.

(iii) Please provide the amount of contractual commitments for the acquisition of intangible assets.

(iv) State the amount of research and development expenditure recognised as expenditure in the year.

(v) Please detail the headings in the SOFA in which a charge for amortisation of intangible assets is included.

(vi) For any material intangible assets, please provide a description, its carrying amount and any remaining amortisation period.

* The "transfers" row is for movements between fixed asset categories.

** Please indicate the method of depreciation by deleting the method not applicable (SL = straight line; RB = reducing balance). Also please indicate the rate of depreciation: for straight line, what is the anticipated life of the asset (in years); for reducing balance, what is the percentage annual deduction.

Not applicable

Note 16 Heritage assets

Please complete this note if the charity has heritage assets

16.1 General disclosures for all charities holding heritage assets

	This year	Last year
(i) Explain the nature and scale of heritage assets held.		
(ii) Explain the policy for the acquisition, preservation, management and disposal of heritage assets.		

16.2 Cost or valuation

	Heritage asset 1 £	Heritage asset 2 £	Heritage asset 3 £	Heritage asset 4 £	Total £
At beginning of the year	-	-	-	-	-
Additions	-	-	-	-	-
Disposals	-	-	-	-	-
Revaluations	-	-	-	-	-
Transfers *	-	-	-	-	-
At end of the year	-	-	-	-	-

16.3 Depreciation and impairments

**Basis					Straight Line ("SL") or Reducing Balance ("RB")
** Rate					

At beginning of the year	-	-	-	-	-
Disposals	-	-	-	-	-
Depreciation	-	-	-	-	-
Impairment	-	-	-	-	-
Transfers*	-	-	-	-	-
At end of year	-	-	-	-	-

16.4 Net book value

Net book value at the beginning of the year	-	-	-	-	-
Net book value at the end of the year	-	-	-	-	-

16.5 Impairment

This year

Please provide a description of the events and circumstances that led to the recognition or reversal of an impairment loss.

--

Last year

Please provide a description of the events and circumstances that led to the recognition or reversal of an impairment loss.

--

16.6 Revaluation

If an accounting policy of revaluation is adopted, please provide:

the effective date of the revaluation

the name of independent valuer, if applicable

qualifications of independent valuer

the methods applied and significant assumptions

any significant limitations on the valuation

	This year	Last year

16.7 Analysis of heritage assets by class or group distinguishing those at cost and those at valuation

	At valuation Group A	At cost Group B	Total
	£	£	£
Carrying amount at the beginning of the period	-	-	-
Additions	-	-	-
Disposals	-	-	-
Depreciation/impairment	-	-	-
Revaluation	-	-	-
Carrying amount at the end of period	-	-	-

16.8 Heritage assets (where heritage assets are not recognised on the balance sheet)

	This year	Last year
(i) Explain the reason why heritage assets have not been recognised on the balance sheet.		
(ii) Describe the significance and nature of heritage assets.		
(iii) Disclose information that is helpful in assessing the value of heritage assets.		

(iv) Explain the reason why it is not practicable to obtain a valuation of heritage assets.

--	--

16.9 Five year summary of heritage assets transactions

	2015	2014	2013	2012	2011
	£	£	£	£	£
Purchases					
Group A	-	-	-	-	-
Group B	-	-	-	-	-
Group C	-				
Other	-				
Donations					
Group A	-	-	-	-	-
Group B	-	-	-	-	-
Group C	-	-	-	-	-
Other	-	-	-	-	-
Total additions	-	-	-	-	-
Charge for impairment					
Group A	-	-	-	-	-
Group B	-	-	-	-	-
Group C	-	-	-	-	-
Other	-	-	-	-	-
Total charge for impairment	-	-	-	-	-
Disposals					
Group A - carrying amount	-	-	-	-	-
Group B - carrying amount	-	-	-	-	-
Group C	-	-	-	-	-
Other	-	-	-	-	-
Total disposals	-	-	-	-	-

Not applicable

Note 17 Investment assets

Please complete this note if the charity has any investment assets.

17.1 Fixed assets investments (please provide for each class of investment)

	Cash & cash equivalents	Listed investments	Investment properties	Social investments	Other	Total
Carrying (fair) value at beginning of period	-	-	-	-	-	-
Add: additions to investments during period*	-	-	-	-	-	-
Less: disposals at carrying value	-	-	-	-	-	-
Less: impairments	-	-	-	-	-	-
Add: Reversal of impairments	-	-	-	-	-	-
Add/(deduct): transfer in/(out) in the period	-	-	-	-	-	-
Add/(deduct): net gain/(loss) on revaluation	-	-	-	-	-	-
Carrying (fair) value at end of year	-	-	-	-	-	-

*Please specify additions resulting from acquisitions through business combinations, if any.

--

Please note that Fair Value in this context is the amount for which an asset could be exchanged between knowledgeable and willing parties in an arm's length transaction. For traded securities, the fair value is the value of the security quoted on the London Stock Exchange Daily Official List or equivalent. For other assets where there is no market price on a traded market, it is the trustees' or valuers' best estimate of fair value.

17.2 Please provide a breakdown of investments shown above agreeing with the balance sheet row B04 differentiating between those held at fair value and those held at cost less impairment.

This year:
Analysis of investments

Cash or cash equivalents

Listed investments

Investment properties

Social investments

Other investments

Total

Grand total (Fair value at year end+Cost less impairment)

Fair value at year end	Cost less impairment
£	£
-	-
-	-
-	-
-	-
-	-
-	-
-	-
-	-

Last year:
Analysis of investments

Cash or cash equivalents

Listed investments

Investment properties

Social investments

Other investments

Total

Fair value at year end	Cost less impairment
£	£
-	-
-	-
-	-
-	-
-	-
-	-
-	-

Grand total (Fair value at year end+Cost less impairment)

-

17.3 If your charity holds investment properties, please complete the following note:

(i) Explain the methods and significant assumptions in determining the fair value of investment property held by the charity

(ii) Name or independent valuer, if applicable, and relevant qualifications

(iii) Provide details of any restrictions on the ability to realise investment property or on the remittance of income or disposal proceeds

(iv) Explain any contractual obligations for the purchase, construction or development of investment property or for repairs, maintenance or enhancements

This year	Last year

17.4 Please provide a breakdown of current asset investments, if applicable, agreeing with the balance

Analysis of current asset investments

Cash or cash equivalents

Listed investments

Investment properties

Social investments

Other investments

Total

This year	Last year
£	£
-	-
-	-
-	-
-	-
-	-
-	-
-	-

17.5 Guarantees

Please provide details and amount of any guarantee made to or on behalf of a third party

Name of the entity or entities benefitting from those guarantees

Please explain how the guarantee furthers the charity's aims

This year	Last year

17.6 Concessionary loans

Amount of concessionary loans made (*Multiple loans made may be disclosed in aggregate provided that such aggregation does not obscure significant information*).

Description	This year £	Last year £
	-	-
	-	-
	-	-
	-	-
Total	-	-

Amount of concessionary loans received (*Multiple loans received may be disclosed in aggregate provided that such aggregation does not obscure significant information*).

Description	This year £	Last year £
	-	-
	-	-
	-	-
Total	-	-

Terms and conditions eg interest rate, security provided

Value of any concessionary loans which have been committed but not taken up at the reporting date

Amounts payable within 1 year

Amounts payable after more than 1 year

Amounts receivable within 1 year

Amounts receivable after more than 1 year

This year	Last year

17.7 Additional information

Please provide information about the significance of investments to the charity's financial position or performance eg. terms and conditions of loans or the use of hedging to manage financial risk.

For all investments measured at fair value, the basis for determining the value, including any assumptions applied when using a valuation technique.

Where a charity has provided financial assets as a form of security, the carrying amount of the financial asset pledged as security and the terms and conditions relating to its pledge.

For all investments measured at fair value, the basis for determining the value, including any assumptions applied when using a valuation technique.

Where a charity has provided financial assets as a form of security, the carrying amount of the financial asset pledged as security and the terms and conditions relating to its pledge.

This year	Last year

Not applicable

Note 18 Stocks

Please complete this note if the charity holds any stock items

18.1 Please state the carrying amount of stock and work in progress analysed between activities.

	Stock		Donated goods		Work in progress
	For distribution	For resale	For distribution	For resale	
	£	£	£	£	£
Charitable activities:					
<i>Opening</i>	-	-	-	-	-
<i>Added in period</i>	-	-	-	-	-
<i>Expensed in period</i>	-	-	-	-	-
<i>Impaired</i>	-	-	-	-	-
<i>Closing</i>	-	-	-	-	-
Other trading activities:					
<i>Opening</i>	-	-	-	-	-
<i>Added in period</i>	-	-	-	-	-
<i>Expensed in period</i>	-	-	-	-	-
<i>Impaired</i>	-	-	-	-	-
<i>Closing</i>	-	-	-	-	-
Other:					
<i>Opening</i>	-	-	-	-	-
<i>Added in period</i>	-	-	-	-	-
<i>Expensed in period</i>	-	-	-	-	-
<i>Impaired</i>	-	-	-	-	-
<i>Closing</i>	-	-	-	-	-
Total this year	-	-	-	-	-
Total previous year	-	-	-	-	-

This year	Last year
£	£

18.2 Please specify the carrying amount of any stocks pledged as security for liabilities

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Note 19 Debtors and prepayments

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

19.1 Analysis of debtors

	This year £	Last year £
Trade debtors	-	-
Prepayments and accrued income	-	-
Other debtors	-	-
Total	-	-

Complete 19.2 where a material debtor is recoverable more than a year after the reporting date.

19.2 Disclosure of debtors recoverable in more than 1 year (included in debtors above)

	This year £	Last year £
Trade debtors	-	-
Prepayments and accrued income	-	-
Other debtors	-	-
Total	-	-

Not applicable

Note 20 Creditors and accruals

Please complete this note if the charity has any creditors or accruals.

20.1 Analysis of creditors

	Amounts falling due within one year		Amounts falling due after more than one year	
	This year £	Last year £	This year £	Last year £
Accruals for grants payable	-	-	-	-
Bank loans and overdrafts	-	-	-	-
Trade creditors	-	-	-	-
Payments received on account for contracts or performance-related grants	-	-	-	-
Accruals and deferred income	-	-	-	-
Taxation and social security	-	-	-	-
Other creditors	-	-	-	-
Total	-	-	-	-

20.2 Deferred income

Please complete this note if the charity has deferred income

Please explain the reasons why income is deferred.

	This year	Last year

Movement in deferred income account

	This year £	Last year £
Balance at the start of the reporting period	-	-
Amounts added in current period	-	-
Amounts released to income from previous periods	-	-
Balance at the end of the reporting period	-	-

Not applicable

Note 21 Provisions for liabilities and charges

Please complete this note if you have included in charity expenditure any provisions. A provision is made when the charity has a liability of uncertain timing or amount.

21.1 Movements in recognised provisions and funding commitment during the period

	This year £	Last year £
Balance at the start of the reporting period	-	-
Amounts added in current period	-	-
Amounts charged against the provision in the current period	-	-
Unused amounts reversed during the period	-	-
Balance at the end of the reporting period	-	-

21.2 Please provide:

- a brief description of any obligations on the balance sheet and the expected amount and timing of resulting payments;

- an indication of the uncertainties about the amount or timing of those outflows; and

- the amount of any expected reimbursement, stating the amount of any asset that has been recognised for that expected reimbursement.

	This year	Last year

21.3 For any funding commitment that is not recognised as a liability or provision, provide details of commitment made, the time frame of that commitment, any performance-related conditions and details of how the commitment will be funded (with contracts for capital expenditure separately identified).

	This year	Last year

21.4 Where unrestricted funds have been designated to a fund commitment, please disclose the nature of any amounts designated and the likely timing of that expenditure.

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Not applicable

Section C **Notes to the accounts** **(cont)**

Note 22 Other disclosures for debtors, creditors and other basic financial instruments

	This year	Last year
<p>22.1 Please provide information about the significance of financial instruments (eg. debtors, creditors, investments etc) to the charity's financial position or performance, for example, the terms and conditions of loans or the use of hedging to manage financial risk.</p>		
<p>22.2 If the charity has provided financial assets as a form of security, the carrying amount of the financial assets pledged as security and the terms and conditions related to its pledge should be given here.</p>		

Not applicable

Note 23 Contingent liabilities and contingent assets**23.1 Contingent liabilities**

Where the charity has contingent liabilities, please complete the following section unless the possibility of their existence is remote.

This year

Description of item including its legal nature. Please describe any security provided in connection to the liability.	Estimate of financial effect

Last year

Description of item including its legal nature. Please describe any security provided in connection to the liability.	Estimate of financial effect

23.2 Contingent assets

Where the charity has contingent assets, please complete the following section when their existence is probable

This year

Description of item	Estimate of financial effect

Last year

Description of item	Estimate of financial effect

23.4 Other disclosures for contingent assets and/or liabilities

Please provide the following information where practicable:

	This year	Last year
Explain any uncertainties relating to the amount or timing of settlement; and the possibility of any reimbursement		
Where it is not practical to make one or more of these disclosures, please state this fact		

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Section C**Notes to the accounts****(cont)****Note 24 Cash at bank and in hand**

Short term cash investments (less than 3 months maturity date)
Short term deposits
Cash at bank and on hand
Other
Total

This year £	Last year £
-	-
-	-
62,152	-
-	-
62,152	-

Lloyds Bank a/c

Note 25 Fair value of assets and liabilities

	This year	Last year
<p>25.1 Please provide details of the charity's exposure to credit risk (the risk of incurring a loss due to a debtor not paying what is owed) , liquidity risk (the risk of not being able to meet short term financial demands) and market risk (the risk that the value of an investment will fall due to changes in the market) arising from financial instruments to which the charity is exposed at the end of the reporting period and explain how the charity manages those risks.</p>		
<p>25.2 Please give details of the amount of change in the fair value of basic financial instruments (debtors, creditors, investments (see section 11, FRS 102 SORP)) measured at fair value through the SoFA that is attributable to changes in credit risk.</p>		

Not applicable

Section C	Notes to the accounts	(cont)
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Note 26 **Events after the end of the reporting period**

Please complete this note events (not requiring adjustment to the accounts) have occurred after the end of the reporting period but before the accounts are authorised which relate to conditions that arose after the end of the reporting period.

	This year	Last year
Please provide details of the nature of the event		
Provide an estimate of the financial effect of the event or a statement that such an estimate cannot be made		

Not applicable

Note 27 Charity funds

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

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

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

Fund names	Type PE, EE R or UR *	Purpose and Restrictions	Fund balances brought forward £	Income £	Expenditure £	Transfers £	Gains and losses £	Fund balances carried forward £
Fundraising Events	U	One off fundraising amounts	-	73,044	(22,339.35)	-	-	50,705
Donations	U	One off donations	-	13,824	(2,391.69)	-	-	11,432
Other funds (balancing figure)	U	One off	-	15	-	-	-	15
			-	-	-	-	-	-
			-	-	-	-	-	-
			-	-	-	-	-	-
			-	-	-	-	-	-
			-	-	-	-	-	-
			-	-	-	-	-	-
			-	-	-	-	-	-
Other funds (balancing figure)	N/a	N/a	-	-	-	-	-	-
Total Funds as per balance sheet			-	86,883	- 24,731	-	-	62,152

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

Yes*	No*
✓	✓

If yes, please state the basis on which the assets and/or liabilities have been translated into sterling (or the currency in which the accounts are drawn up).

Section C **Notes to the accounts** **(cont)**

Note 27 **Charity funds**

27.2 Details of material funds held and movements during the PREVIOUS reporting period

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

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

Fund names	Type PE, EE R or UR *	Purpose and Restrictions	Fund balances brought forward £	Income £	Expenditure £	Transfers £	Gains and losses £	Fund balances carried forward £
Fundraising Events	U	One off fundraising amounts	-	-	-	-	-	-
Donations	U	One off donations	-	-	-	-	-	-
Other funds (balancing figure)	U	One off	-	-	-	-	-	-
			-	-	-	-	-	-
			-	-	-	-	-	-
			-	-	-	-	-	-
			-	-	-	-	-	-
			-	-	-	-	-	-
			-	-	-	-	-	-
			-	-	-	-	-	-
Other funds (balancing figure)	N/a	N/a	-	-	-	-	-	-
Total Funds as per balance sheet			-	-	-	-	-	-

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

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

Note 27

Charity funds (cont)

27.3 Transfers between funds

This year

	Reason for transfer and where endowment is converted to income, legal power for its conversion	Amount
Between unrestricted and restricted funds		-
Between endowment and restricted funds		-
Between endowment and unrestricted funds		-
		-

Last year

	Reason for transfer and where endowment is converted to income, legal power for its conversion	Amount
Between unrestricted and restricted funds		-
Between endowment and restricted funds		-
Between endowment and unrestricted funds		-
		-

27.4 Designated funds

This year

Planned use	Purpose of the designation	Amount
		-
		-
		-
		-
		-
		-

Last year

Planned use	Purpose of the designation	Amount
		-
		-
		-
		-
		-
		-

Not applicable

Note 28 **Transactions with trustees and related parties**

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

28.1 Trustee remuneration and benefits

This year

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

	1
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In the period the charity has paid trustees remuneration and benefits. Please give the amount of, and legal authority for, any remuneration or other benefits paid to a trustee by the charity or any institution or company connected with it.

Name of trustee	Legal authority (eg order, governing document)	Amounts paid or benefit value				
		Remuneration	Pension contribution	Redundancy (including loss of office)/ex gratia	Other	TOTAL
		£	£	£	£	£
		-	-	-	-	-
		-	-	-	-	-
		-	-	-	-	-
		-	-	-	-	-

Please give details of why remuneration or other employment benefits were paid.

Where an ex gratia payment has been made to a trustee, provide an explanation of the nature of the payment.

If a third party has been reimbursed for providing one or more trustees, state the nature of the payment and amount of the reimbursement.

State the number of trustees to whom retirement benefits are accruing under a defined contribution pension scheme.

Last year

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

1

In the period the charity has paid trustees remuneration and benefits. Please give the amount of, and legal authority for, any remuneration or other benefits paid to a trustee by the charity or any institution or company connected with it.

Name of trustee	Legal authority (eg order, governing document)	Amounts paid or benefit value				
		Remuneration	Pension contribution	Redundancy (including loss of office)/ex gratia	Other	TOTAL
		£	£		£	£
		-	-	-	-	-
		-	-	-	-	-
		-	-	-	-	-
		-	-	-	-	-

Please give details of why remuneration or other employment benefits were paid.

--

Where an ex gratia payment has been made to a trustee, provide an explanation of the nature of the payment.

--

If a third party has been reimbursed for providing one or more trustees, state the nature of the payment and amount of the reimbursement.

--

State the number of trustees to whom retirement benefits are accruing under a defined contribution pension scheme.

--

28.2 Trustees' expenses

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

No trustee expenses have been incurred (True or False)

1

Type of expenses reimbursed	This year	Last year
	£	£
Travel	-	-
Subsistence	-	-
Accommodation	-	-
Other (please specify):	-	-
	-	-
TOTAL	-	-

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

--	--

28.3 Transaction(s) with related parties

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

This year

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

1

Name of the trustee or related party	Relationship to charity	Description of the transaction(s)	Amount	Balance at period end	Provision for bad debts at period end	Amounts written off during reporting period
			£	£	£	£
			-	-	-	-
			-	-	-	-
			-	-	-	-

In relation to the transactions above, please provide the terms and conditions, including any security and the nature of any payment (consideration) to be provided in settlement.

--

For any related party, please provide details of any guarantees given or received.

--

Last year

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

1

Name of the trustee or related party	Relationship to charity	Description of the transaction(s)	Amount	Balance at period end	Provision for bad debts at period end	Amounts written off during reporting period
			£	£	£	£
			-	-	-	-
			-	-	-	-
			-	-	-	-

In relation to the transactions above, please provide the terms and conditions, including any security and the nature of any payment (consideration) to be provided in settlement.

--

For any related party, please provide details of any guarantees given or received.

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Note 29**Additional Disclosures**

The following are significant matters which are not covered in other notes and need to be included to provide a proper understanding of the accounts. If there is insufficient room here, please add a separate sheet.



Independent examiner's report on the accounts

Section A Independent Examiner's Report

Report to the trustees

Charity Name METUPOK (Metastatic Exchange to Unleash Power UK)

On accounts for the period ended

05/04/2023 Charity no (if any) 1196494

Set out on pages

1-11

I report to the trustees on my examination of the accounts of the above charity ("the Trust") for the period ended 05 / 04 / 2023.

Responsibilities and basis of report

As the charity's trustees, you are responsible for the preparation of the accounts in accordance with the requirements of the Charities Act 2011 ("the Act").

I report in respect of my examination of the Trust's accounts carried out under section 145 of the 2011 Act and in carrying out my examination, I have followed all the applicable Directions given by the Charity Commission under section 145(5)(b) of the Act.

Independent examiner's statement

[The charity's gross income exceeded £250,000 and I am qualified to undertake the examination by being a qualified member of [insert name of applicable listed body]]. Delete [] if not applicable.

I have completed my examination. I confirm that no material matters have come to my attention in connection with the examination (other than that disclosed below*) which gives me cause to believe that in, any material respect:

- the accounting records were not kept in accordance with section 130 of the Charities Act; or
the accounts did not accord with the accounting records; or
the accounts did not comply with the applicable requirements concerning the form and content of accounts set out in the Charities (Accounts and Reports) Regulations 2008 other than any requirement that the accounts give a 'true and fair' view which is not a matter considered as part of an independent examination.

I have no concerns and have come across no other matters in connection with the examination to which attention should be drawn in this report in order to enable a proper understanding of the accounts to be reached.

* Please delete the words in the brackets if they do not apply.

Signed: Alina Lord Date: 05/02/2024

Name: ALINA LORD

Relevant professional qualification(s) or body

FCCA

(if any):

Address:

43 High Street, Uppermill, Oldham, OL3 6HS

Section B

Disclosure

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

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