

FORGOTTEN PATIENTS, OVERLOOKED DISEASES

England & Wales · Charity number 1202442

Details

Status Registered

Legal form CIO

Registered 2023-03-22

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

Contact

Address Suite 616
The Shepherds Building
Charecroft Way
West Kensington

Phone 07553377871

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Website www.forgottenpatients.org

Activities

Objects: THE ADVANCEMENT OF GOOD HEALTH INCLUDING THE PREVENTION OR RELIEF OF SICKNESS, DISEASE, OR HUMAN SUFFERING FOR PEOPLE IN ENGLAND AND WALES AND BEYOND WHO HAVE MEDICALLY UNEXPLAINED SYMPTOMS, OVERLOOKED DISEASES* OR COMMON UNRESOLVED HEALTH PROBLEMS. WE WILL DO THESE BY: • DEVELOPING RESOURCES FOR PEOPLE WITH OVERLOOKED HEALTH ISSUES• PROVIDING SUPPORT/SIGNPOSTING FOR PATIENTS AND FAMILIES WHO ARE NOT BEING HELPED ELSEWHERE• FACILITATING, SPONSORING, OR DELIVERING RESEARCH AND SUPPORTING THE DISSEMINATION AND/OR APPLICATION OF THE USEFUL RESULTS OF SUCH FOR THE PUBLIC BENEFIT• PROMOTING EDUCATION IN, AND ADVANCING KNOWLEDGE OF, UNEXPLAINED SYMPTOMS, OVERLOOKED DISEASES OR COMMON UNRESOLVED HEALTH PROBLEMS.*IN THIS CLAUSE 'OVERLOOKED' DISEASES REFERS TO CONDITIONS FOR WHICH THERE MAY BE LIMITED MEDICAL EDUCATION OR INTEREST AMONG HEALTHCARE PROFESSIONALS, PROVIDERS, RESEARCHERS, INDUSTRY OR GOVERNMENTAL BODIES.

Activities: For those with medically unexplained symptoms, overlooked diseases or common unresolved health problems we will:1. Develop resources for people with overlooked health issues.2. Provide support/signposting for patients and families who are not being helped elsewhere.3. Facilitate, sponsor and deliver research.4. Promote education.5. Encourage the adoption of research findings.

Classification

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

Geography

- Throughout England And Wales

Finances

Period end	Income	Expenditure	Assets	Employees
2025-09-30	£1,242	£846	-	-
2024-09-21	£2,867	£5,525	-	-

Trustees

Name	Role	Appointed
Dr Adrian Jeffrey Tookman MB BS FRCP	Chair	2023-04-01
Dr Jennifer McCallum		2025-10-29
Dr Steven Walker MD		2022-11-01
Richard Stephens		2022-11-01
Rosalind Caffyn		2025-10-29

FORGOTTEN PATIENTS, OVERLOOKED DISEASES

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Trustees' Annual Report

YEAR ENDING 30 SEPTEMBER 2025

Forgotten Patients, Overlooked Diseases

ADVANCING HEALTH FOR FORGOTTEN PATIENTS AND OVERLOOKED DISEASES, CHARITY NUMBER: 1202442 CHARITY ADDRESS: SUITE 616, THE SHEPHERDS BUILDING, CHARECROFT WAY, WEST KENSINGTON, LONDON |

Introduction from the Chair

The past year has been one of significant development and growing recognition of the challenges faced by individuals with medically unexplained symptoms and overlooked diseases, specifically those navigating prolonged and uncertain diagnostic pathways.

Addressing these issues is a high-impact, cost-effective, and ethical imperative to reduce inequality and human suffering.

To help individuals navigate the healthcare system, achieve optimal outcomes, and reduce avoidable distress and delay, our focus remains on:

- Developing resources for people with overlooked health issues,
- Providing practical support and signposting for patients and families who are not being helped elsewhere,
- Facilitating, sponsoring, and delivering research,
- Promoting education, and
- Encouraging the adoption of research findings

During the year, the charity worked with patients, advocates, clinicians, researchers, and policymakers in the UK and internationally, ensuring that patient experience informs education, research, and advocacy.

At this early stage in the charity's development, it is naturally challenging to measure the full impact of the actions taken so far. However, we anticipate significant progress and growth in the coming period as our reach continues to expand.

Our Achievements in 2024–2025

1. Presentations and Outreach

- I. FPOD Annual Conference (June 2025) – Held in partnership with the Guild of Health Writers, following high profile media attention on overlooked patient experiences. Several members presented their work, alongside patient representatives who shared their experiences, to raise awareness among healthcare writers and professionals.
- II. European Society of Emergency Medicine Podcast (July 2025) – FPOD delivered a presentation on fair treatment for patients with medically unexplained symptoms at a European forum in Vienna led by Dr. Bernard Foex, receiving excellent feedback and prompting further discussion on equitable emergency care.

- III. Representatives of FPOD were invited to speak at the Royal Society of Medicine’s 44th Annual General Practice and Primary Care Update (September 2025), reflecting growing recognition of the charity’s expertise in this area.



2. Collaboration with European and UK Agencies

- I. FPOD representatives were privileged to be invited to join EURODIS, a European organisation that empowers and advocates for people living with a rare disease in Europe. Joined to learn best practice and share patient-led insight relevant to overlooked and hard-to-diagnose conditions.
- II. We connected with KAL Research Initiatives to understand innovative diagnostic coding approaches, including the R69 initiative, to make diagnostic uncertainty visible in health records. The aim is that patients with hard to diagnose conditions can receive better tracking, support, and ultimately faster diagnoses.
- III. We connected with UK agencies including the NHS Rare Diseases Advisory Group, Mast Cell Action, and other charities, contributing patient experience and practical insight to collaborative discussions.
- IV. We contributed to parliamentary advocacy addressing the “fabricated illness” label which delays diagnosis in the paediatric population, highlighting the adverse impact on children and families.

3. Research and Publications

- I. Participated in multiple research projects, including studies on frequent hospital attenders, providing patient-centred perspectives and advisory input.
- II. Published and contributed to peer-reviewed articles (Tookman et al, 2025) on overlooked diseases, medically unexplained symptoms, and “forgotten patients”, supporting evidence-based discussion and improved understanding among professionals.
- III. Developed a PROSPERO-registered narrative review proposal on medical gaslighting. The proposal has since been accepted and the research is ongoing in conjunction with UCL and Imperial College, London.

4. Practical Resources and Website

- I. Further developed the charity’s website, which is freely accessible, now offering detailed patient guides and practical tools to help individuals manage healthcare visits and advocate for themselves effectively.
- II. Expanded signposting resources, empowering patients to access appropriate support, guidance, and relevant organisations at no cost.
- III. Early informal feedback indicates increased confidence among users when preparing for clinical appointments and discussions.

Plans for 2025–2026

Key priorities include:

- Digital resources and storytelling – Continue to collect a series of patient stories, to share learning on the successful routes to diagnosis.
- Research and evidence – Develop a research programme to explore the use of patient stories in scientific research. The aim is to understand where diagnostic pathways fail, the potential value of symptom cluster identification, emerging management approaches and the potential role of artificial intelligence in successful diagnosis.
- Engagement and reach – Leverage social media to drive traffic to the website, share expertise, and connect patients with holistic support. Continue to enhance and develop useful online resources for patients via the website.

Education, research, and innovation –

- Build and deliver a multidisciplinary hybrid conference, conference report and filmed summary.
- Complete a PROSPERO registered systematic review on patients and doctors' experiences of 'Medical Gaslighting' in underdiagnosed conditions for submission to a peer reviewed journal.
- Submit a response to the December 2025 editorial on Persistent Physical Symptoms, published in the Future Health Journal, outlining a call-to-action for the acknowledgement and legitimisation of, and official coding for, clinical diagnostic doubt for patients with PPS.

Collaboration and learning –

Connect with other organisations to learn from patient experiences and international best practice, to improve signposting and guidance and to consolidate learning.

Fundraising and sustainability –

Develop a focused fundraising strategy to secure sustainable funding to support the charity's work.

Governance and capacity –

Strengthen governance structures to support the charity's growth and long-term sustainability.

Public Benefit

All the charity's activities are undertaken to relieve sickness and suffering among people affected by overlooked diseases and medically unexplained symptoms by:

Providing free, practical support and signposting for individuals and families who may otherwise struggle to access appropriate guidance.

Developing openly available resources and guides that empower patients to navigate complex healthcare systems, communicate effectively with clinicians, and make informed decisions.

Promoting education, research, and knowledge-sharing among professionals and the wider public, contributing to improved understanding of diagnostic uncertainty and patient experience with the long-term aim of finding solutions.

As a small but growing charity, our focus in 2026 remains on strategic influence and partnership working rather than direct service delivery at scale.

Financial Review

The charity operated a receipts and payments system of accounting during the year.

Summary of financial position for the year ended 30th September 2025:

Receipts: £1,242

Payments: £846

Assets: £836

Liabilities: £4,592

Receipts for the year include membership fees, donations, and sales proceeds of conference tickets. The expenditure in the period has been external conference expenses only. The charity's other running costs were nil as trustees voluntarily absorbed minor administrative costs during the year.

The liabilities include conference expenses initially funded by an interest-free loan from St Giles Medical Limited. The director of St Giles Medical Limited is also a trustee of the charity and, accordingly, this arrangement constitutes a related party transaction. The trustee concerned declared their interest and did not participate in the discussion or decision-making relating to this arrangement.

The loan is repayable on or before 02.04.2031. St Giles Medical Limited has formally confirmed that it will not demand repayment of the loan at any time when to do so would prejudice the charity's ability to continue its operations or meet its liabilities as they fall due.

Having considered this agreement, together with the charity's overall financial position, the trustees (excluding the conflicted trustee) are satisfied that the charity remains a going concern and is able to meet its liabilities as they fall due.

Structure, Governance and Trustee Information

Forgotten Patients, Overlooked Diseases is a charity registered as a Charitable Incorporated Organisation on 22nd March 2023 and governed by written constitution.

There are currently 5 trustees and 15 members and a pool of some 80 attendees from a wide range of backgrounds. The trustees are:

Dr Adrian Tookman MB BS FRCP

Dr Steven Walker

Richard Stephens

Jennifer E. McCallum, PhD (appointed 29th October 2025)

Rosalind Caffyn (appointed 29th October 2025)

Fiona Lapraik (resigned in year)

Dr Jacques Tamin PhD (resigned in year)

Decisions are guided by the charity's trustees and strengthened by the support of its broad and engaged membership. The board brings together a diverse range of expertise, including distinguished healthcare professionals, dedicated patient advocates, experienced medical writers, and finance specialists, ensuring well-informed and balanced leadership.

The board identifies the need for new trustees by reference to skills gaps, activity expansion, trustee rotation and potential resignations. Candidates are sought principally via recruitment platforms and networking. The appointment and induction of new trustees is carried out in accordance with the governing document.

The current intention is to strengthen the board further with fundraising expertise and a suitable candidate is being actively sought.

Declaration

The trustees have approved this report and confirm that it complies with UK charity law.

Acknowledgements

We thank all members, volunteers, and supporters whose expertise and dedication have made this progress possible. Special recognition goes to Steven Walker and team, whose organisational skills have been key to managing this complex, international area of work successfully.

Adrian Tookman MB BS FRCP

Chair, Forgotten Patients, Overlooked Diseases

Date: January 2026

References to publications

***The challenge of medically unexplained symptoms, overlooked diseases and forgotten patients.** Published in BJGP Life. Bill Noble, Adrian Tookman, Carmen Schmechel, Richard Stephens, Christine Oesterling, Karim Jani, Revd Peter Speck, Eva Wiesenecker, Katia Chrysostomou, Steven Walker. Aug 2022

***The challenge of persistent physical symptoms.**
BJGP Analysis Paper. Adrian Tookman, Jay Verma, Eva Diehl-Wiesenecker, Richard Stephens, Jennifer E McCallum, Ursula Unterberger and Steven Walker. December 2025

Forgotten Patients, Overlooked Diseases

Registered Charity no: 1202442

Year ended 30.09.25

Receipts and Payments	£	Assets and Liabilities	£
Receipts		Cash at bank	
Membership Fees	120	Brought forward	441
Just Giving Donations	745	Receipts	1,242
Other Donations	200	Payments	<u>(846)</u>
Conference Tickets	177	Carried forward	<u>836</u>
	<u>1,242</u>		
Payments		Loan	
Conference: Room	(300)	Brought forward	(4,592)
Audio Visual	(250)	Movements in year	-
Printing	(90)	Carried forward	<u>(4,592)</u>
Food	(128)		
CPD Approval	(78)		
	<u>(846)</u>		
Net receipts / (payments)	395		

Basis of Accounting

Accounts are prepared on a receipts and payments basis.

All funds are unrestricted.

Related Party Transaction

During the last accounting period ending 30.09.2024, the charity received a loan from St Giles Medical Limited of £5,117. One repayment instalment of £525 was made during the same period.

Dr Steven Walker, one of the trustees of the charity is also a director of the company that made the loan.

At the start of the year, the balance outstanding was £4,592. During the year, no sums were advanced or repaid. At the year end, the balance outstanding was £4,592.

The loan has been made interest-free, is unsecured and there is an agreement in place between the company and the non-related party trustees of the charity that the loan is not repayable before 02.04.2031

All loan decisions have been made by the charity's trustees in the absence of the related party trustee. The arrangement was authorised in accordance with the charity's governing document and relevant legal requirements

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Trustees' Annual Report for the period

From **1.4.23** Period start date To **30.06.24** Period end date

Charity name: **Forgotten Patients, Overlooked Diseases**

Charity registration number: **1202442**

Objectives and Activities

	SORP reference	
Summary of the purposes of the charity as set out in its governing document	Para 1.17	<p>The Trustees of Forgotten Patients, Overlooked Diseases (FPOD) present their annual report and accounts for the first 15 months of the CIO's existence, and confirm that reporting complies with FPOD's governing document, Charities SORP (FRS 102), and relevant legislation.</p> <p>FPOD aims to develop resources for people with medically unexplained symptoms (MUS), overlooked health issues, or common unresolved health problems; provide support/signposting for patients & families not being helped elsewhere; facilitate or deliver research, and support the dissemination and/or application of the useful results of such, for the public benefit; promote knowledge in, and advance knowledge of medically unexplained symptoms, overlooked health issues, or common unresolved health problems. The term "overlooked diseases" refers to conditions for which there may be limited medical education or interest among healthcare professionals, providers, researchers, industry or government bodies.</p> <p>FPOD helps people with complex symptoms to find a diagnosis and access support. Modern healthcare can do so much, yet some people with undiagnosed complex symptoms may not receive potentially beneficial health interventions. Even people with common diseases can be overlooked. Organizations exist to support individuals with specific rare diseases, but those with unrecognised or incorrectly categorised diseases lack the support that disease-specific organizations can provide.</p> <p>FPOD's charitable activities aim to change that situation, by</p> <ul style="list-style-type: none">• developing practical, accessible resources for people trying to cope with the uncertainty of overlooked health issues• providing support/signposting for patients and families who are not being helped elsewhere• facilitating, sponsoring or delivering research• promoting education• encouraging the adoption of research findings.

<p>Summary of the main activities in relation to those purposes for the public benefit, in particular, the activities, projects or services identified in the accounts.</p>	<p>Para 1.17 and 1.19</p>	<p>FPOD’s activities focussed on advancing knowledge of MUS, for those personally affected by MUS, and for their healthcare providers. As well as helping to raise general awareness of MUS and the often protracted search for diagnosis experienced by some patients, FPOD’s activities increased the visibility of the charity, and generated significant feedback. Activities included -</p> <ul style="list-style-type: none"> • free educational webinar “Forgotten Patients, Overlooked Diseases and Lost Health Solutions”. • “Medically Unexplained Symptoms” conference • publications in professional journals • production of a patient guide “How to make the most of your GP visit” • a survey relating to hyper-mobility • Engagement with EURORDIS (European Organisation for Rare Diseases) <p><i>Note: MUS is the term used in FPOD’s Constitution. However there are other terms, such as persistent physical symptoms (PPS), used with reference to the long journey in search of diagnosis, which is experienced by some patients.</i></p>
<p>Statement confirming whether the trustees have had regard to the guidance issued by the Charity Commission on public benefit</p>	<p>Para 1.18</p>	<p>In setting objectives, trustees considered the Charity Commission’s guidance on public benefit. FPOD’s charitable activities benefit those affected by medically unexplained symptoms, overlooked health issues, or common unresolved health problems. As well as individuals who are personally affected, this includes their families and/or carers, and medical professionals involved in their treatment.</p>

Additional information (optional)

You may choose to include further statements where relevant about:

	SORP reference	
<p>Policy on grant making</p>	<p>Para 1.38</p>	<p>Grant-making is not part of FPOD’s charitable aims/activities.</p>
<p>Policy on social investment including program related investment</p>	<p>Para 1.38</p>	<p>Social investment is not part of FPOD’s charitable aims/activities</p>
<p>Contribution made by volunteers</p>	<p>Para 1.38</p>	<p>FPOD values the contribution made by volunteers, who are essential to the charity’s operation. 78 volunteers gave c.2000 hours to FPOD. A breakdown of the estimated hours is in the Annual Report. This does not give economic value to their contribution, but illustrates that FPOD could not provide projects or activities without the input of volunteers.</p> <p>FPOD volunteers include health and social care professionals, scientists, academics, ethicists, and people with medical conditions.</p>
<p>Other</p>		

Achievements and Performance

	SORP reference	
<p>Summary of the main achievements of the charity, identifying the difference the charity’s work has made to the circumstances of its beneficiaries and any wider benefits to society as a whole.</p>	<p>Para 1.20</p>	<ul style="list-style-type: none"> • “Medically Unexplained Symptoms”: conference, addressing the impact of MUS on healthcare providers, and patients trying to navigate the healthcare system. • Patient Guide: make the most of your GP visit. • “Forgotten Patients, Overlooked Diseases and Lost Health Solutions”: educational webinar • Presentations at the Institute of Medical Ethics Annual Conference “Being Heard” • established contact with bodies such as the Community Engagement Task Force (CETF) initiated by EURORDIS (European Organization for Rare Diseases). CETF is a multi-stakeholder group of scientists and clinicians. • The Zebra Survey: issues around hyper-mobility <p>Publications:</p> <ul style="list-style-type: none"> • Noble B, Tookman A, Schmechel C, Stephens R, Oesterling C, Jani K, Speck P, Diehl-Wiesenecker E, Chrysostomou K, Walker S. The Challenge of Diseases and Forgotten Patients. RCGP Life, 12th August 2022. http://bit.ly/3A8ryua (accessed 1st November 2022) • Lifschitz, Carlos MD*; Walker, Steven MD†; Tookman, Adrian MD‡. Awareness of Tissue Disorders and Functional Gastrointestinal Diseases. Journal of Pediatric Gastroenterology and Nutrition 77(6):p e115, December 2023. DOI: 10.1097/MPG.0000000000003947 • Goa, Ivy; Jani, Kiran; Patel, Chantal; Oesterling, Christine; Tookman, Adrian; Walker, Steven. Update on rare diseases and genetic testing. RCGP Life (published 17th February 2024) http://tinyurl.com/3uzvzz6c • Forrest, Christianne; Speck, Peter; Rajput-Ray, Minha; Tookman, Adrian; Walker, Steven. Medically unexplained symptoms: Four perspectives. RCGP Life (published 4th March 2024) https://shorturl.at/zrXdh • Tookman, A; Verma, J; Forrest, C; Chrysostomou, K; Stephens, R; Walker, S. Rapid Response to Richards T. BMJ Opinion: Not “all in the mind”. BMJ 2024; 385:q1210. https://shorturl.at/6kcCk <p>Abstracts/posters</p> <p>Samira Nur, James Coultas, Louise Jones, Christine Oesterling, Adrian Tookman, Steven Walker, British Journal of General Practice 2024; 74(suppl 1): bjgp24X738093. DOI: 10.3399/bjgp24X738093</p> <p>Activities have elicited significant feedback, demonstrating the impact of these pieces of work, and expanded FPOD’s visibility to other groups who are working in this area. It is hoped that this will lead to FPOD being able to develop appropriate resources in the future, for forgotten patients and people with overlooked diseases.</p>

Additional information (optional)

You may choose to include further statements where relevant about:

<p>Achievements against objectives set</p>	<p>Para 1.41</p>	<p>FPOD's main objectives for the first 2 years of operation are :</p> <ul style="list-style-type: none"> • to raise the visibility of FPOD among those whose lives are affected by overlooked health issues, so that they recognise FPOD as a reliable source of support and signposting; • to establish & maintain FPOD's reputation among healthcare professionals & providers, researchers, industry, government bodies. This may be achieved by delivering research encouraging the adoption of research findings. <p>The response to events and publications indicates that FPOD is meeting its objectives.</p>
<p>Performance of fundraising activities against objectives set</p>	<p>Para 1.41</p>	<p>No specific objectives were set, for fundraising activities. The one-day conference on 1.5.24 produced some income from ticket sales, but the primary intention was to ensure that as many people as possible had access to the wide-ranging discussion of topics on the programme.</p>
<p>Investment performance against objectives</p>	<p>Para 1.41</p>	<p>Not applicable</p>
<p>Other</p>		

Financial Review

Review of the charity's financial position at the end of the period	Para 1.21	<p>FPOD's accounts have not been independently examined, as income has been less than £25,000.</p> <p>At the end of the reporting period, FPOD's financial situation was in deficit, due to expenditure on the one-day conference which took place on 1.5.24. An interest-free loan of £1500 was made to FPOD by St Gilesmedical Ltd, to pay the deposit relating to the conference. St Gilesmedical was subsequently appointed to act as an agent for FPOD, paying other costs relating to the conference directly: those costs totalled £3617. The total interest-free loan was £5117, of which £525 has been repaid. The remaining debt of £4592 will be repaid in instalments, over a period of 36 months. £420.69 was retained in FPOD's current account., to meet any minor expenditure.</p> <p>Trustees are aware of concerns about a loan from a trustee, and have taken steps to protect the charity:</p> <ul style="list-style-type: none"> • Confirmed FPOD's Constitution permitted the borrowing; • Concluded that the loan was necessary, as the conference would enable FPOD to carry out its charitable purposes more effectively; • Recognized the potential conflict of interest, implicit in accepting a loan from another trustee, and will abide by FPOD's Conflict of Interest policy and Risk Management policy; • The loan totalling £5117 is documented, and will be repaid in instalments. Repayment in full should be completed within 36 months of 1.5.24; • Trustee Dr Steven Walker, Scientific Director of St Gilesmedical, will absent himself from discussion relating to the debt, and has added the loan to his Declaration of Interests. All trustees ensure that their declaration is updated to reflect any changes in their situation, which may affect FPOD.
Statement explaining the policy for holding reserves stating why they are held	Para 1.22	FPOD's future reserves policy will reflect the intention to hold reserves sufficient to allow FPOD to continue operating for a minimum of 3 months, in the event of an unplanned closure, so that essential services are maintained for beneficiaries, until alternative support is located.
Amount of reserves held	Para 1.22	Nil
Reasons for holding zero reserves	Para 1.22	FPOD has not secured sufficient income, to be able to allocate any amount, for reserves. At present, FPOD has no regular overheads, as the charity has neither premises nor employees.
Details of fund materially in deficit	Para 1.24	As detailed above, FPOD's financial situation was in deficit at the end of the reporting period, with a debt of £4592 owed to St Gilesmedical.
Explanation of any uncertainties about the charity continuing as a going concern	Para 1.23	Trustees do not believe that there is any uncertainty about FPOD's future as a going concern.

Additional information (optional)

You may choose to include further statements where relevant about:

<p>The charity's principal sources of funds (including any fundraising)</p>	<p>Para 1.47</p>	
<p>Investment policy and objectives including any social investment policy adopted</p>	<p>Para 1.46</p>	<p>FPOD does not have an investment or social investment policy</p>
<p>A description of the principal risks facing the charity</p>	<p>Para 1.46</p>	<p>The main risk facing FPOD is the difficulty of securing income. This does not threaten FPOD's existence as such, as FPOD currently has no regular overheads, but it could restrict possibilities for growth and development. We need to secure core funding, so that FPOD has some operating stability. Trustees are seeking someone to take a lead on fundraising, as a member of the board of trustees</p>
<p>Other</p>		

Structure, Governance and Management

Description of charity's trusts:		<p>FPOD is an independent charity without a parent body or subsidiary bodies, not part of any wider group structure. FPOD is a CIO with voting members other than its trustees. Membership is open to anyone who is interested in furthering FPOD's purposes.</p> <p>FPOD aims to develop resources for people with medically unexplained symptoms, overlooked health issues or common unresolved health problems, by</p> <ul style="list-style-type: none"> • developing practical, accessible resources for people trying to cope with the uncertainty of overlooked health issues • providing support/signposting for patients and families who are not being helped elsewhere • facilitating, sponsoring or delivering research • promoting education • encouraging the adoption of research findings.
Type of governing document (trust deed, royal charter)	Para 1.25	FPOD's governing document is a Constitution
How is the charity constituted? (e.g unincorporated association, CIO)	Para 1.25	FPOD is constituted as a CIO.
Trustee selection methods including details of any constitutional provisions e.g. election to post or name of any person or body entitled to appoint one or more trustees	Para 1.25	<p>FPOD welcomes expressions of interest, about becoming a trustee. After initial discussion with the Chair & trustees, 1) to ensure the applicant is eligible to be a trustee, and not disqualified from trusteeship, by any provisions in FPOD's Constitution, or the Charities Act 2011; 2) to ensure that the applicant understands the functions and duties of a charity trustee. To that end, the applicant would be provided with FPOD's Constitution, FPOD Trustees Code of Conduct, and the most recent Annual Report & Accounts. That would enable the applicant to make an informed decision, whether they want to proceed.</p> <p>At the AGM, members would be invited to vote on the appointment as a trustee, of the applicant.</p> <p>No external body or individual is entitled to appoint any FPOD trustees.</p>

Additional information (optional)

You may choose to include further statements where relevant about:

Policies and procedures adopted for the induction and training of trustees	Para 1.51	<ul style="list-style-type: none"> • Trustees' Code of Conduct • Trustees' Conflict of Interests Policy & Procedure • Finance Policy (including Trustee Expenses) • Risk Management Policy
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<p>The charity's organisational structure and any wider network with which the charity works</p>	<p>Para 1.51</p>	<p>With no employees yet, FPOD trustees are gradually assembling a structure that will allow the charity to develop in the future, when finances permit.</p> <p>FPOD works closely with the Forgotten Patients, Overlooked Diseases Advisory Forum, a multi-disciplinary group of health and social care professionals, public health experts, academics, scientists, ethicists, people with illness or medical conditions, spiritual care-givers, politicians, and campaigners with an international perspective. The Forum meets remotely, once a month.</p> <p>“Forgotten Patients, Ideas and Diseases Group” (as the FPOD Advisory Forum was initially known) was formed in early 2021, with 19 founding members: the Group developed into an innovative international network with 42 current members, whose strategy is to explore example diseases, using a holistic, multi-disciplinary approach, which could then be applied to other conditions. Among health problems of current interest to Forum members are Ehlers-Danlos syndrome//hyper mobility spectrum disorders, porphyria, fibromyalgia, and eosinophilic disease of the gastrointestinal tract.</p> <p>The FPOD Advisory Forum aims to make a measurable difference to the lives of forgotten patients, by drawing attention to overlooked diseases, ideas & initiatives benefitting affected individuals.</p>
<p>Relationship with any related parties</p>	<p>Para 1.51</p>	<p>St Gilesmedical Ltd - a science writing, health film, medical education & research company: Scientific Director Dr Steven Walker is a FPOD trustee. St Gilesmedical provides some administrative support for FPOD, on a voluntary basis.</p> <p>St Gilesmedical has made an interest-free loan to FPOD. The loan and its management is detailed in the Financial Review section of this form.</p>
<p>Other</p>		

Reference and Administrative details

<p>Charity name</p>	<p>Forgotten Patients, Overlooked Diseases</p>
<p>Other name the charity uses</p>	<p>None</p>
<p>Registered charity number</p>	<p>1202442</p>
<p>Charity's principal address</p>	<p>c/o Suite 616 The Shepherds Building Charecroft Way London W14 0EE</p>

Names of the charity trustees who manage the charity

	Trustee name	Office (if any)	Dates acted if not for whole year	Name of person (or body) entitled to appoint trustee (if any)
1	Adrian Tookman	Chair	Not applicable	Not applicable
2	Steven Walker	Secretary	Not applicable	Not applicable
3	Fiona Strathern Lapraik		Not applicable	Not applicable
4	Richard Stevens		Not applicable	Not applicable
5	Jacques Tamin		Not applicable	Not applicable

Corporate trustees – names of the directors at the date the report was approved

Director name		
No corporate trustees		

Name of trustees holding title to property belonging to the charity

Trustee name	Dates acted if not for whole year	
None		

Funds held as custodian trustees on behalf of others

Description of the assets held in this capacity	No funds held as custodian trustees on behalf of others
Name and objects of the charity on whose behalf the assets are held and how this falls within the custodian charity's objects	Not applicable
Details of arrangements for safe custody and segregation of such assets from the charity's own assets	Not applicable

Additional information (optional)

Names and addresses of advisers (Optional information)

Type of adviser	Name	Address
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Name of chief executive or names of senior staff members (Optional information)

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Exemptions from disclosure

Reason for non-disclosure of key personnel details

Not applicable

Other optional information

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Declarations

The trustees declare that they have approved the trustees' report above.

Signed on behalf of the charity's trustees

Signature(s)

	
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Full name(s)

Adrian Tookman	
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Position (eg
Secretary, Chair, etc)

Chair	
-------	--

Date

17.02.2025

Forgotten Patients, Overlooked Diseases (Registered Charity no. 1202442) : Accounts for 22.3.23 - 30.6.24

INCOME		£	LIABILITIES		£	£
	Membership Fees	140		StGilesmedical Ltd	Loan	1500
	Just Giving Donations	103			Conference expenditure *	3617
	Other Donations	600				
	Conference Tickets	524			Partial repayment of loan	525
	Loan from StGilesmedical Ltd.	1500				
				Total still owed to StGilesmedical Ltd		4592
	TOTAL	2867				
EXPENDITURE						
	Conference					
	Deposit (paid 11.10.23) ^^	1105				
	Artwork (paid 11.10.23) ^^	300				
	Accommodation (guest speakers) *	340				
	Balance of Delegate Package *	1575		Notes		
	Room Hire with Laptop *	260		* Payments made directly by St Gilesmedical Ltd.		
	CPD Approval *	78		acting as agent appointed by Forgotten Patients,		
	Sound Engineer *	535		Overlooked Diseases		
	Printing *	351		^^ Payments made by Forgotten Patients,		
	Name Badges *	15		Overlooked Diseases (from StGilesMedical loan)		
	Advertising *	300				
	Sundries *	27				
	Travel *	61				
	Banners *	75				
	Charity launch event	500				
	Test payment	3				
	TOTAL	5525				