



BRITISH LIVER TRUST

Annual report and accounts for the year ended 31 March 2022



Contents

Trustees' report	3
Chairman's welcome	3
About the British Liver Trust	4
Our activities in 2021/22	6
Our fundraising approach	36
Our plans in 2022/23	40
Financial review	43
Independent auditor's report	47
Financial statements	51
Notes to the financial statements	54

Reference and administrative details

Chairman

Wim Bushell

Chief Executive Officer

Pamela J Healy OBE

Trustees

Wim Bushell (Chair of Trustees)

Sally Benatar QPM

Diana Gornall

Abigail Jesson

Alastair King

Toby McMaster

David Meek (Chair of Audit and Risk Committee)

Martin Newlan

(Resigned 3 December 2021)

Professor Steve Ryder

Victoria Sheriff

Professor Douglas Thorburn

(Appointed 17 May 2021)

Principal Office

1st Floor Offices, Venta Court

20 Jewry Street, Winchester SO23 8FE

Company Registration Number

2227706

Charity Registration Number

298858 (E&W), SC042140 (Scotland)

Bankers

CAF Bank, PO Box 289

West Malling, Kent ME19 4TA

NatWest, 2 Tavern Street,

Ipswich, Suffolk, IP1 3BD

Auditor

Hopper Williams & Bell Limited

Chartered Accountants & Statutory Auditors,

Highland House, Mayflower Close,

Chandlers Ford, Eastleigh,

Hampshire SO53 4AR

Chairman's welcome



Welcome to the British Liver Trust's annual report and accounts.

The year 2021/22 was one of expansion and development for our charity. We relocated to a new office base in

Winchester, grew our team of incredible staff, and launched a new landmark strategy to tackle the growing liver disease crisis.

The strategy – *A World Without Liver Disease* – was launched in April 2021. It sets out how we will deliver vital change over the next three years, underpinned by six strategic priorities. You can read more about these priorities, and our work to achieve each of them, throughout this report.

A key focus in our strategy is the heartbreaking challenge of preventable deaths due to liver disease. This devastating disease is the third leading cause of premature death in the UK. And yet, whilst up to 90% of liver disease is reversible if caught at an early stage, three quarters of people with cirrhosis in the UK are diagnosed in an emergency setting, when it is often too late for effective treatment.

Our Make Early Diagnosis Routine campaign was launched in 2021 to tackle that. Only 26% of UK health bodies currently have effective pathways in place for early detection, so we are working with politicians and health leaders to bring about change, with overwhelming support from the public. Over 20,000 people signed our petition calling on the Government to improve early detection, and over 500 people responded to our call to demand action from their MPs.

Simple lifestyle changes can make an enormous difference to liver health, but many people are unaware of the very real risk factors, so we work

actively to raise awareness and change the narrative on liver disease. Our extensive media coverage had a phenomenal combined audience reach of 888 million during 2021/22, and we reached a further three million people through our own social media channels.

Now more than ever, we need to put liver disease in the spotlight. Deaths from liver disease in the UK increased by an alarming 15% in 2020, so for our 2022 Love Your Liver month, we campaigned to change unhealthy habits adopted during lockdown. Hundreds took our pledge to do one thing that would give their liver health a boost during the month, and over 13,000 people completed our online liver health screener.

Alongside our work to achieve change, we continue to provide vital support to people with liver disease and their families. Our nurse-led helpline service supported over 5,000 people in 2021/22 and we saw over 2,400 attendances at our virtual support groups. Launched out of necessity during the pandemic, these virtual groups allow us to bring together patients facing the same experiences, and attendees have told us that this brings enormous support and comfort.

Finally, I would like to say a huge thank you to all our staff for their hard work. In the last three years, the British Liver Trust team has grown by over 60%, and every one of those staff has made a difference. I would also like to express my enormous gratitude to our incredible fundraisers and generous donors. Thanks to you, we are changing the landscape for people with liver disease and liver cancer.

Wim Bushell
Chairman

About the British Liver Trust

The British Liver Trust is the leading charity for adults with liver disease and liver cancer in the UK. Our mission is to transform liver health through increased awareness, prevention, improved care and support. We provide information and support

to people with liver conditions, their families and carers. We raise awareness of liver health and the risk factors for liver disease, and we campaign to drive up standards of care, improve early detection and influence national policy.



Our vision and strategy

Our vision is a world without liver disease.

In April 2021, we launched our new three-year strategy for 2021 to 2024. The strategy identifies six key areas of progress where we can start making that vision a reality:

- Support everyone affected by liver disease and liver cancer
- Improve early detection so more people are diagnosed at a stage when the damage can be reversed
- Drive up standards of care and improve outcomes for people affected by liver disease
- Increase awareness and improve people's understanding of liver disease and liver cancer and reduce stigma
- Campaign for policy changes that make it easy for everyone to be healthier
- Work in partnership to support research and ensure patients are part of the conversation.



Liver disease – the facts

Liver disease is the big killer that no one is talking about.

Today, more than one in five of us are at risk of developing liver disease. Over 600,000 people in the UK have some form of serious liver disease and over 60,000 of these have cirrhosis.

Deaths due to liver disease have more than doubled in the last 20 years, and recent figures are particularly alarming. Liver disease deaths in England rose by 15% from 2019 to 2020, and there was a 20% increase in deaths from alcohol-related liver disease during the same year.

This is also a disease that affects people when they are relatively young – more than 10,000

people in England died from liver disease and liver cancer in 2020 who were under the age of 75.

In its early stages, liver disease often presents no signs or symptoms, making it difficult to spot. But early detection is key to successful treatment. Sadly, at present, only 26% of the UK has early detection pathways in place that could identify and manage liver disease, and three quarters of people with cirrhosis are diagnosed in an emergency setting, when it is too late for successful intervention or treatment.

Liver cancer is now the fastest rising cause of cancer death in the UK and the third most frequent cause of cancer death in the world.

There was a
20%
increase in deaths from alcohol-related liver disease from 2019 to 2020



Liver disease deaths in England rose by
15%
from 2019 to 2020

Three quarters of people with cirrhosis are diagnosed in an emergency setting



Our activities in 2021/22

The following report sets out the British Liver Trust's key activities and achievements during 2021/22, and outlines the impact these have had for people with liver disease and liver cancer, their families and the general public.

Priority
1

Supporting everyone affected by liver disease and liver cancer

We are here for everyone affected by liver disease and liver cancer. We empower patients by offering specialist support via our nurse-led helpline, and provide clear, comprehensive patient information on a wide range of conditions. Our virtual support groups and online community offer vital peer support to anyone who needs it.

Nurse-led helpline service

Our specialist nurses provide practical and emotional support to anyone affected by liver disease and liver cancer.

Requests for support continued to be high during 2021/22. The nurse team responded to a total of 5,069 enquiries over the year. This compared to 5,400 in 2020/21 during the height of the COVID-19 pandemic but was still over 30% higher than pre-pandemic levels (3,852 enquiries in 2019/20).

The team received a wide range of requests for help. These included urgent questions from distressed patients post-diagnosis, anxious family members looking for information and reassurance, enquiries about specialist care, and an increasing number of medically complex issues.

Average call durations were almost 20 minutes, as the team continued to support patients struggling to access their GP and liver teams, post-pandemic. These calls were often compounded by mental health problems and the nurses worked hard to provide the highest standards of care whilst ensuring the team's own wellbeing. Enquiries on COVID-related issues also continued throughout the year (see page 11 for more on this).

The year saw some exciting developments in the helpline service. In order to support more people, we introduced a 'call back' service that allows patients and families to leave a message when lines are busy, then receive a call once a member of the team is available. The new service has been well received and proved very helpful for those who have used it.

In February 2022, the team welcomed two new nurses. Kim Batchelor was previously a liver nurse specialist in palliative medicine, so brought a wealth of experience in end of life care to the team. Rebekah McGinn was previously a liver transplant nurse and joined the Trust in a new hybrid role, working on the helpline and as lead nurse on the Love Your Liver roadshows. Both Kim and Rebekah have been great additions to the nurse service, and allow us to provide even more specialist knowledge to our callers.

Our specialist nurse team now includes six part-time nurses who, between them, have over 130 years' experience in caring for people with liver disease.



The average call to our helpline lasted almost

20 minutes

“When I was first diagnosed, I looked online to find out about liver cancer and discovered the British Liver Trust. The helpline nurses give me encouragement and strength... you can’t put a price on the care they give.”

Phil, helpline caller

Julia's story

It all started with an infected insect bite, which resulted in my GP prescribing me Flucloxacillin. Around ten days after my last dose, I got a very bad headache, felt tired and nauseous, and went off my food.

A few days later, it felt very tender under my ribs, with a pain that radiated towards my back. My urine was much darker than usual, my skin had become very itchy, and the whites of my eyes had a yellow tinge. I saw an out of hours doctor, who confirmed I had mild jaundice and mentioned that there had been reports of people having liver issues due to this antibiotic – but stressed how rare it was. She advised me to go straight to A&E and have my bloods checked, which confirmed abnormal liver function test (LFT) results.

A few days later I went back to have further tests and an ultrasound, which revealed gallstones. They suggested there could be a stone blocking my bile duct. The pain under my ribs had started to ease, but the itching, loss of appetite, nausea and jaundice was worsening.

After a week of going back and forwards to the hospital, I was admitted for further tests. A scan confirmed that this wasn't down to my gallbladder or bile ducts, there were no signs of cancer, but that my liver was inflamed. Again, I mentioned the possibility of a drug-induced liver injury and they agreed this was probably the most likely cause. Ten days later I was discharged, with my bilirubin levels decreasing slightly, yet my alanine aminotransferase enzyme (ALT) levels were still increasing. And three days after leaving, both were rising again. By now I had lost 12 pounds, my arms and legs were covered in deep scratches, sores and bruises, and my skin was now yellow all over. Two weeks later, my ALT level



had risen to three times the amount it was when I left hospital. There was talk of a liver biopsy if things didn't improve.

By this point my mental health was really suffering – I was crying daily, mostly due to the symptoms, but also a fear of the unknown. It had been six weeks since I became ill and I felt no better. I did some research and came across the British Liver Trust helpline. I spoke to a nurse who answered all of my questions and more. It was like getting the biggest hug from my mum! She told me that “treatment was time” and that if I overdid things, I could expect to feel it the next day, and she was right. Over the following weeks I finally began to improve and by week seven or eight my blood tests reflected this.

Six months after I first got ill, my levels are almost back to normal, my skin and eyes are my usual colour, and I'm no longer itching. I was told it could take anything from two to six months to be back to my usual self, but I am so relieved to have turned the corner.

“Speaking to the British Liver Trust nurse was like getting the biggest hug from my mum! She answered all my questions.”

Support when and where it's needed

Our support groups are open to anyone affected by a liver condition, as well as their family, friends and carers. Facilitated and supported by British Liver Trust staff, the groups offer a safe space where people affected by liver disease can receive peer-to-peer support.

Following the introduction of virtual support groups in April 2020, we continued to see a growth in the number of attendees at online sessions. In the year prior to the pandemic, when our support groups were running face-to-face, we supported around 60 people per month. During 2020, following the launch of virtual support groups, we supported an average of 148 people per month. And in 2021, that number grew to an average of 197 people per month. We held 247 virtual support groups during 2021/22, with almost 2,400 attendances in total.

Our teams in Scotland and Wales have joined forces to deliver a UK-wide approach to

managing support, with groups organised around conditions rather than location. This has huge benefits for patients. It means we can connect greater numbers of people who are on the same journey, and bring together patients who know exactly what others are going through.

Virtual groups also mean people who might be too unwell to travel can still connect with others, as well as those in remote areas who might otherwise have very limited access to support.

Almost
2,400
attendances at
virtual support groups

9

“I find the monthly meeting a real life saver, providing much needed information and support from a group that really understands first-hand the realities of the condition. The meetings are always filled with good humour and invaluable advice.”

Gill, support group attendee

Our amazing volunteers

The British Liver Trust is supported by a team of fantastic volunteers, who provide help with fundraising events, engagement activities, outreach and more. We now have a dedicated Patient Advisory Group, who meet regularly to give us their views on our activities.

During 2021/22, the Scotland team trained volunteers to hold awareness events and talks in their communities, with two of our volunteers delivering a successful talk in Peterhead. Volunteers have also been trained to run virtual support groups, to increase capacity for these much-needed forums.

Online events and webinars

In April 2021 we launched a new programme of patient information webinars, designed to provide clear and accessible guidance on liver conditions to anyone interested in learning more. The events also provided patients and their families with a welcome opportunity to submit questions to expert clinician speakers.

Our programme of webinars covered a wide range of topics during 2021/22. There were

sessions on liver cancer, diet and liver disease, viral hepatitis, and alcohol, as well as support for people waiting for and recovering from liver transplants.

We also hosted sessions on key British Liver Trust projects and strategy, giving supporters and interested members of the public an opportunity to learn more about our work and activities.



A supportive community

Our online community provides a 24/7 space for people with liver disease to discuss their experiences and support one another. The forum is moderated to make sure discussions and information shared are appropriate, and where needed people receive further support or signposting.

The community provides a vital source of support for patients and their families, and it continued to grow during the year. By March 2022, this peer-to-peer forum had almost 30,000 active members

– a 15% increase from the previous year (from 25,290 at the end of March 2021 to 29,317 at the end of March 2022).

Almost
30,000
people are supported through
our online community



Helping patients through a pandemic

Many people with liver conditions are more vulnerable to COVID-19 and as the pandemic continued, our specialist nurses provided essential support to patients and their families on a wide range of issues.

These included enquiries about vaccinations and boosters, questions about anti-viral treatments, and emotional help for immunosuppressed patients anxious about still catching the virus.

We also continued to provide information and advice on COVID-19 through our communication channels, including the British Liver Trust website, newsletter and social media. We shared specialist information for people who were particularly vulnerable and required specific advice,

such as those who are immunosuppressed with liver disease (including people who have received a transplant). This advice has regularly changed as we learn to live with COVID-19, and we ensured people were kept up-to-date on the latest guidance.

In November 2021, we were proud to join forces with 16 other charities for a campaign to promote the importance of the COVID-19 booster and third vaccine for those with long-term health conditions and their carers.

We also promoted the NHS-led 'Distance Aware' campaign in early 2022, providing materials including posters, lanyards and badges, designed to give a polite reminder to people to maintain distance with COVID-19 still circulating in communities.

Spotlight on the nations: Supporting people with liver disease in Scotland

Hepatitis B Chinese community project

The team in Scotland worked in partnership with Waverley Care on a Hepatitis B Chinese community liver health support project. This led to the creation of two videos – *Physical Activity* and *Diet and the Liver* – which were produced in both English and Mandarin, to support the Chinese community in understanding how to maintain a healthy liver.

Self-management resources and toolkit

The team developed a toolkit for patients and carers containing holistic information to support overall wellbeing and self-management. Content includes links to British Liver Trust services, mental health support, financial advice, carers support, Citizens Advice, welfare, housing and palliative care. The toolkit signposts to regional services, and sits alongside the direct clinical support the patient receives. The pilot for the toolkit took place in Glasgow.

Additional support in hospital

The year saw the pilot of a project to offer

additional support to patients in hospital, many with advanced liver disease. The pilot offered signposting to voluntary/charitable support, including our publications. Many of the people were from groups we struggle to reach and have not traditionally been able to engage with. The learnings will help more people access and benefit from our services.

Events for patients and families

The Scottish team hold events to bring patients and families together. As well as support groups, these include other activities such as a transplant walk held in Edinburgh during Organ Donation Week (pictured below).



Jane's story

Jane told her moving story in a patient video produced in 2021.

Jane was diagnosed

with autoimmune hepatitis (AIH) and cirrhosis, and went on to have a liver transplant. She explains how she felt about her diagnosis and her transplant.

“When I was told I had autoimmune hepatitis and cirrhosis I thought I wasn’t going to go on much longer. That’s how ill I felt. I’d ask my consultant questions about what would

happen if I needed a transplant. One day he replied, ‘Jane, it’s not if you have a transplant, it’s when you have a transplant’.

“Having a transplant’s quite emotional because someone’s got to die for you to live. That’s quite hard to deal with. But it gives me hope for the future. It’s going to let me see my children get married and meet my grandchildren if I ever have any. I’ve got my life back again.”

Watch Jane tell her story in person at britishlivertrust.org

Publications and digital information

The British Liver Trust is a leading source of information on liver health. We have a library of over 45 patient information booklets and factsheets, and provide a range of digital information materials such as animations and patient videos.

In April 2021 we set out a three-year strategy for our patient information, focused on putting our audiences at the heart of production. The strategy is centred around four core principles of our information being:

- User-led
- Accessible and inclusive
- Digital-first (but not digital-only)
- Promoted

This has seen us change the way we develop our resources, involving people with liver disease much earlier in the process to understand the questions they have and what they really need from us. All our information is still reviewed by clinicians and other professional experts. And we're involving them earlier on too.

Over the year we held focus groups on non-alcohol related fatty liver disease (NAFLD), alcohol-related liver disease, liver transplant, and liver cancer as a starting point for updating and expanding our information on all these topics. People with liver disease have also been involved in reviewing our booklets and factsheets as they're developed, to help make sure the information is as useful and easy to understand as possible.

It's been really exciting to start working in this way – and to see the changes in our information. We are very grateful to

everyone who has helped by coming to a focus group, reviewing leaflets, or having a quote or story included.

During 2021/22 we published a range of new information for patients, including a suite of information about diet and the liver, with new booklets giving dietary advice for a range of liver conditions and a guide on treating NAFLD with a healthy diet and physical activity. We also published an updated edition of our detailed guide to the rare genetic liver condition Wilson's Disease.

Our digital library of information has continued to expand, with new patient story videos capturing personal experiences of liver disease (see Jane's Story, left) and a video covering what to expect following a diagnosis of liver cancer.



30,484

copies of our publications were
downloaded and **11,873 printed copies**
were sent out

Online support and information

The British Liver Trust's website is a vital source of information for patients, family members and healthcare professionals. Over two million people (2,072,133 unique visitors) visited the site during 2021/22 (compared to 2,369,015 in 2020/21).

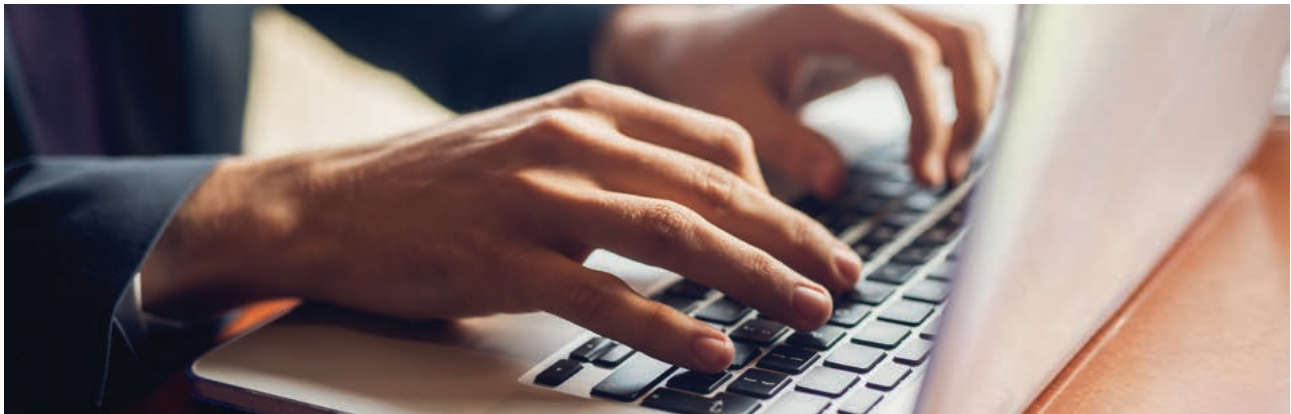
Liver disease symptoms are not always widely known and the site provides a trusted source of accurate information about signs and symptoms. Liver disease diagnosis and symptoms were amongst the most popular pages during 2021/22, with over 110,000 people visiting our liver blood tests page and over 120,000 people visiting our liver disease symptoms page.

The site hosts comprehensive information on a wide range of liver conditions. The most popular sections in 2021/22 included cirrhosis (over 68,000 unique page views), autoimmune hepatitis (over 57,000 unique page views) and non-alcohol related fatty liver disease (over 41,000 unique page views).

The site also continued to be a vital source of information on COVID-19, and our advice on vaccination for people with liver disease was the most visited page over the year (over 156,000 unique page visitors).

More than 36,000 people took our online liver health screener over 2021/22. After completing the screener, people are signposted to further health information and support, including downloadable factsheets. They can also sign up to receive updates on how to keep their liver healthy, and future opportunities to support our work.

Over
two million
people visited our website



Keeping in touch

Our digital newsletter, *In Touch*, allows us to keep our supporters up-to-date on liver health, news, and our own activities. Over 4,000 people signed up to receive the newsletter during 2021/22.

Our mailing list for *In Touch* grew by 30% over the year (from 13,445 to 17,482) and the newsletter – which is a valuable source of information for many – was opened over 57,000 times.

BRITISH
LIVER
TRUST

Priority
2

Improving early detection

Liver disease is at a tipping point. By acting now, we can slow, halt and then reverse the rising tide of deaths from liver disease and liver cancer. Early diagnosis is key to that. The liver is the only internal organ that can repair itself, which means liver disease can be reversed and even cured for many people – if it is diagnosed early enough.

Making early diagnosis routine

Our Make Early Diagnosis Routine campaign is critical to improving early detection pathways. This three-year project pushes for earlier detection of liver disease and improved liver disease health outcomes across the UK.

To find liver disease earlier, GPs and primary care nurses need to proactively look for it in patients who are at risk. To do this, they need clear guidelines and an easy-to-implement pathway to refer people for the right tests and treatment.

In 2020, we surveyed the whole country to map the state of primary care pathways. Our research found that only 26% of health bodies have effective pathways in place for the early detection of liver disease (see map, right). There are no pathways in many of the areas with the highest liver disease mortality.

The results of this survey were published in the peer-reviewed journal *The British Journal of General Practice* in August 2021, and we raised awareness of the study through widespread communications including media work and presentations to clinicians and stakeholders.

Through our Make Early Diagnosis Routine campaign, we want to see the newly formed integrated care systems and existing health boards implement full patient care pathways for the early detection of liver disease.

The campaign has been widely supported by members of the public. Over 20,000 people have now signed our Sound The Alarm petition, calling on the Government to improve early detection to save lives, and over 500 people have responded to our call to write to their MPs asking them to write to their local health body to ask for change.

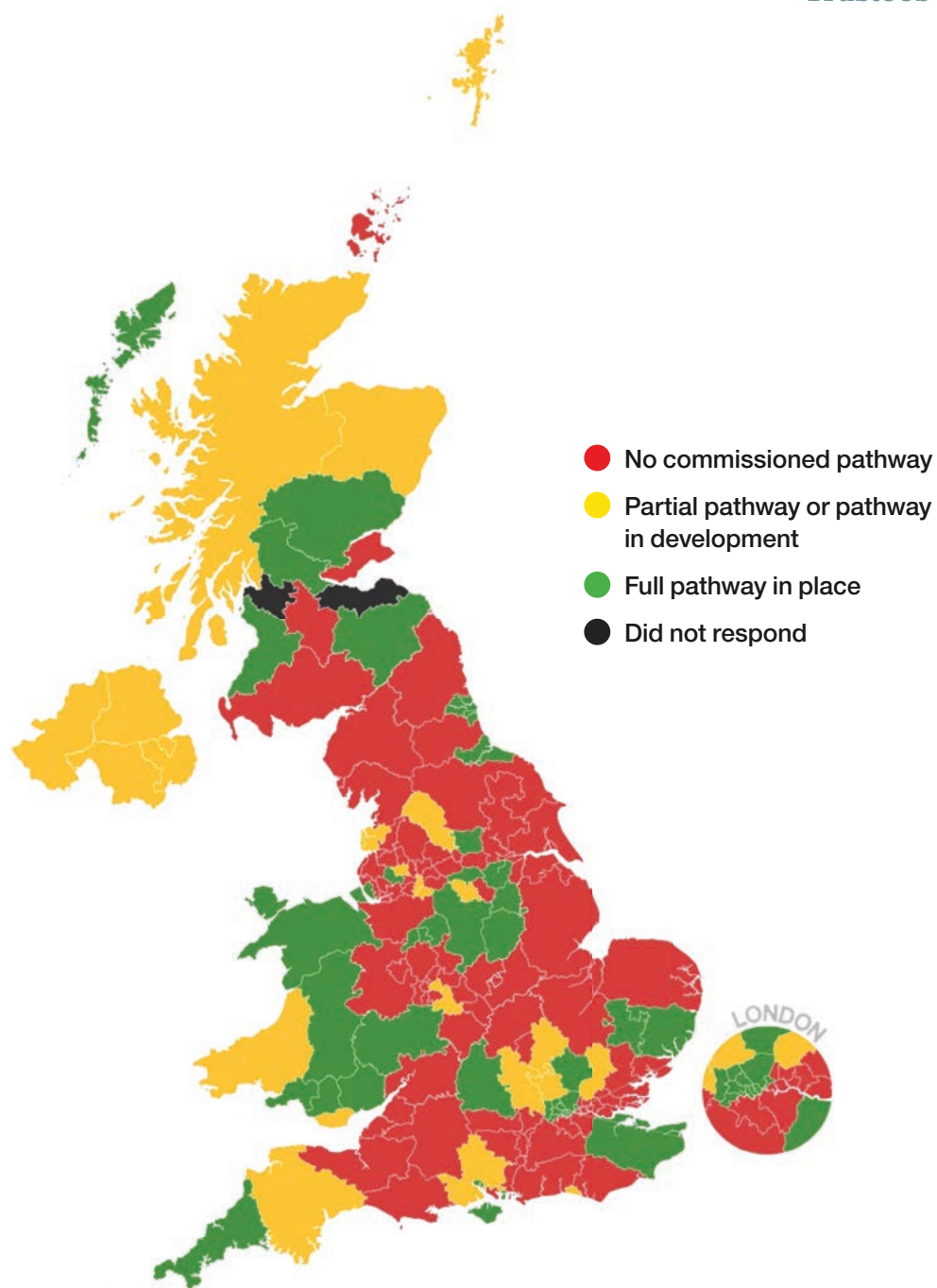
MPs have already lent their voice to the campaign, with wider work planned for 2022/23 (find out more in our Future Plans section on page 40). We engaged MPs directly through outreach work and held one-to-one meetings with nine MPs, and Baroness Finlay, Chair of the Commission on Alcohol Harms.



Spreading the word

We shared the findings of our primary care pathway research with regional and national media, and worked with patients and liver experts to bring the story to life.

The resulting coverage reached an audience of 8.2 million, with articles in *The Times*, *The Daily Post*, *Glasgow Evening Times* and *South Wales Argus*.



Liver disease pathways across the UK

In 2020, the British Liver Trust surveyed the status of planning and commissioning for the early detection of and management of liver disease across clinical commissioning groups

(CCGs) in England and equivalent bodies in Wales, Northern Ireland and Scotland. The map above shows which had effective pathways in place.

“Anyone who has liver disease, or is at risk of getting it, should get the medical care and advice they need, no matter where in the country they live. This data shows that, unfortunately, in the UK this is not yet the case. There are pockets of good practice, but there are also many areas that do not have a consistent approach to testing for and diagnosing liver disease. It shouldn't be a postcode lottery.”

Dr Helen Jarvis, Clinical Advisor for the British Liver Trust and lead author of the published research

Love Your Liver

Love Your Liver is the British Liver Trust's national awareness campaign devoted to liver health. It supports earlier detection by raising awareness of risk factors and providing screening tools. The campaign aims to give people the steps needed to keep their liver healthy and encourage them to make long-term changes to sustain a healthy liver.

In September 2021, we were delighted to relaunch our Love Your Liver roadshows, following the lifting of COVID-19 restrictions.

The roadshows offer people the opportunity to take our online screening test and find out if they are at risk. We also provide free liver scans on our dedicated mobile unit using a non-invasive FibroScan device, and offer expert advice on how to look after your liver.

The events are supported by local health professionals, who generously donate their time to help us. We were also very pleased to welcome our nurse Rebekah McGinn to the

team in February 2022, to provide scanning and specialist advice to roadshow visitors.

The roadshow visited 35 locations during 2021/22 and scanned 1,835 people. Over the year, a number of MPs also attended our Love Your Liver roadshows, including Mark Tami MP (Alyn and Deeside), Zarah Sultana MP (Coventry), Craig Mackinlay MP (Thanet South) and Sir Roger Gale MP (Thanet North).

Our Love Your Liver roadshow featured on a range of regional media channels over the year, including BBC Radio Lincolnshire and BBC Radio Stoke.

1,835

people had liver scans
at our roadshows





Love Your Liver month

Love Your Liver month is held every January and is dedicated to promoting good liver health.

Our 2022 campaign focused on unhealthy habits adopted during the COVID-19 pandemic. We reported the latest data on liver disease deaths, which revealed that deaths from liver disease in the UK had increased by an alarming 15% in 2020. Across the UK, 10,883 adults died of liver disease in 2020 – 30 people every day – compared to 9,470 deaths in 2019.

We also launched our Love Your Liver pledge, which asked people to take a pledge to do one thing that would give their liver health a boost. Hundreds of people took pledges that included completing a fitness challenge, giving up alcohol for a month, sticking to five a day, cutting down on sugar and ditching processed food and takeaways.

In addition, during Love Your Liver month:

- Over 13,000 people in the UK took our Love Your Liver screener to find out if they were at risk of liver disease
- Dozens of people affected by a preventable form of liver disease shared their story to help raise awareness. These stories often inspire people to make changes to their lifestyle
- Over 100 organisations and individuals shared our #LoveYourLiver messages online
- Our media coverage reached an audience of over 14 million
- We reached over 1.5 million people on social media and 75,000 of those people (5%) went on to visit our website to learn more.

Kirsty's story

Kirsty thought she'd been drinking more alcohol than she should, so when the Love Your Liver roadshow came to Bristol she had a liver scan, which revealed some signs of liver damage.

I'm a second-year nursing student and mum of two, I'm in my late forties and I'm a very active person. I eat well and my BMI is a good score. I say all of this to try and put into context the news I received recently that my liver was not as healthy as it should be.

In March 2021, I wrote an assignment as part of my first year of nursing studies on public health and alcohol which really unnerved me, and I began to question my own drinking habits. Before studying to become a nurse, I worked for 20 years in the alcoholic drinks industry, selling wine and spirits to bars and restaurants. For someone who adored a drink, this was a dream come true. By the time I was into my 30s, I would describe myself as a very heavy drinker. I drank most days as I entertained a lot for work events, but I was also out drinking a lot with my friends. I never had to have a drink to get going in the morning or hide alcohol around the house, but I did lose days to hangovers and being unproductive. I also used to suffer really badly with Sunday blues.

Later, when I became a mother, wife and student nurse, there was a lot less partying, but I still drank at weekends. I tallied my weekly units and realised I was often still drinking over 30 units a week, which is over double the recommended amount.

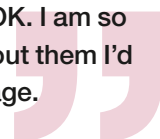
So I feel like the stars aligned when I heard about the British Liver Trust holding a Love Your Liver Roadshow scanning event in Bristol. I had read about FibroScans when I was researching my assignment and was curious. I headed over, filled in the paperwork and went into the booth to meet Katharine, the specialist liver nurse. The scan results showed that my liver is not as spongy or elastic as a healthy liver should be. My result was 12.4kp. A healthy result should be under 8.

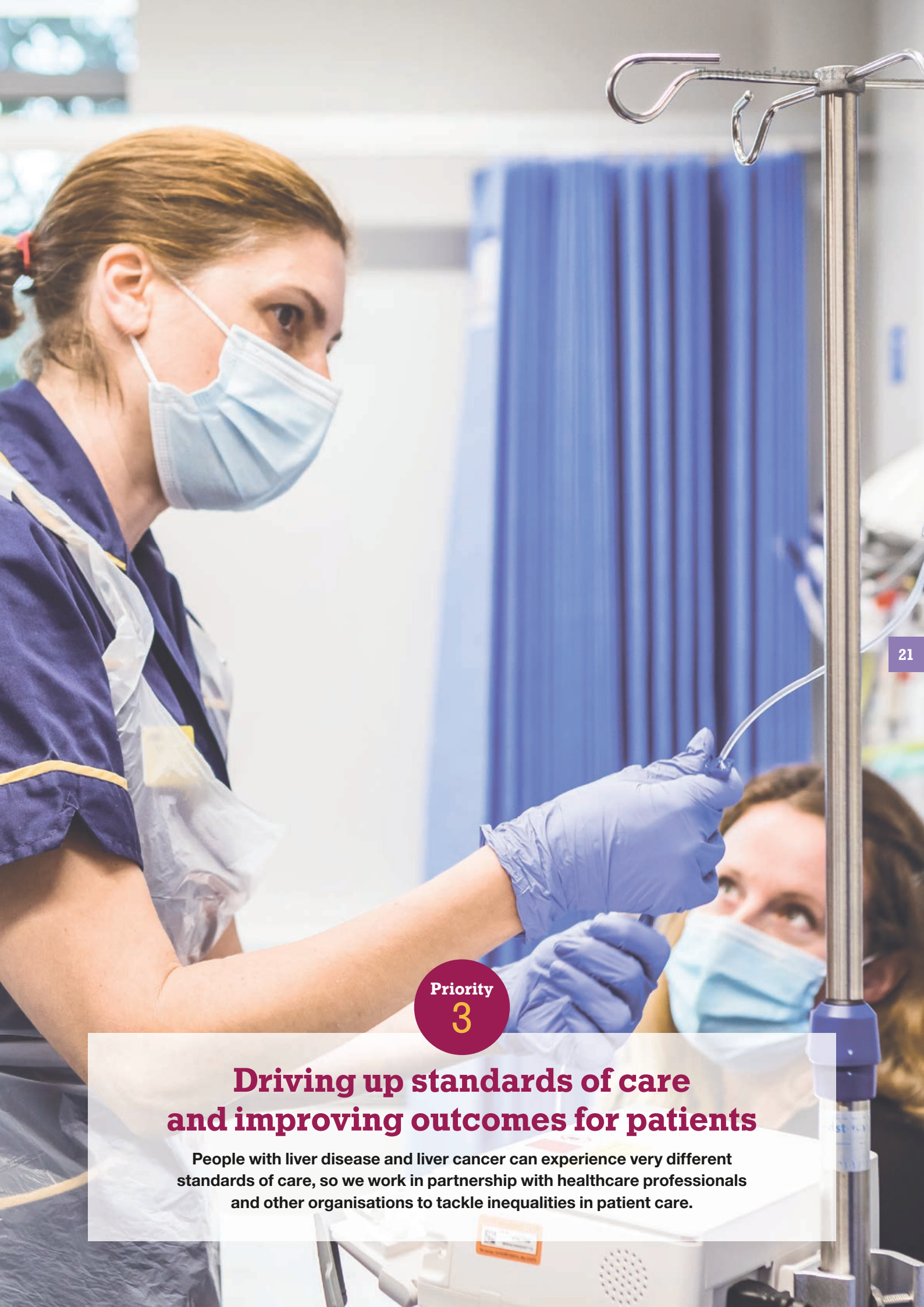


“The stars aligned when the Love Your Liver roadshow came to Bristol”

This was shocking news, but I can't say I was surprised. Katharine advised that I would need to significantly cut down my alcohol consumption and gave me a letter for my GP.

I had one glass of wine the day after but since then, I have begun exploring the world of no/low drinks. And it's been really encouraging. I went to a party recently and stayed up until 1am, drank 0% beer and was on the side of my son's football pitch the next morning, clear headed. It was actually great. I am saving money and saving my health. Friends and family have been super supportive. I hope that when I get my referral to hepatology for further tests, all will be OK. I am so grateful to the British Liver Trust – without them I'd still be drinking and doing further damage.





Priority
3

Driving up standards of care and improving outcomes for patients

People with liver disease and liver cancer can experience very different standards of care, so we work in partnership with healthcare professionals and other organisations to tackle inequalities in patient care.

UK Liver Alliance

In April 2021, the British Liver Trust hosted the inaugural meeting of a new UK Liver Alliance (UKLA). Chaired by our CEO Pamela Healy, the UKLA brings together over 30 organisations dedicated to improving liver health.

The organisations work in partnership to prevent the development of liver disease, reduce liver disease mortality and improve care for people with, or at risk of, liver disease across the UK. The UKLA aims to build on the work previously carried out under the auspices of the Lancet Commission.

The UKLA has three initial workstreams:

- Early detection, diagnosis and primary care, including pathways to secondary care
- Reducing the variation in hospital care across all four nations
- Ensuring that liver disease has the right workforce in place to improve outcomes.

A new UK Liver Patient Groups Alliance has also been formed to support the work of the UKLA. This group will be consulted at key points, to keep patients at the centre of the work and ensure their voice is heard.



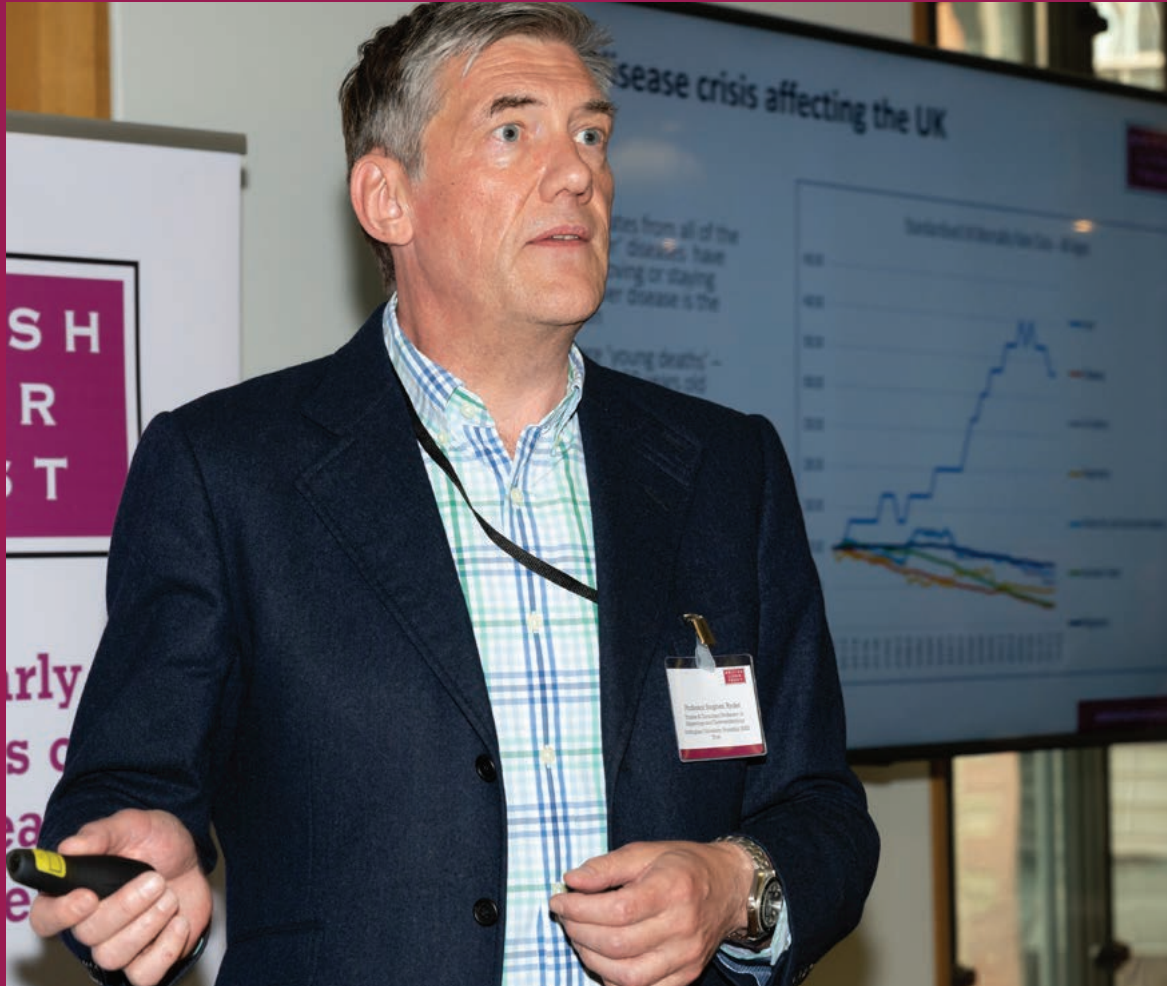
Working with healthcare professionals

We work closely with healthcare professionals to improve patient outcomes and tackle disparities in care standards. A significant focus of this work in 2021/22 centred around our Make Early Diagnosis Routine campaign, which you can read more about on page 16.

Our outreach teams in Scotland and Wales also engage with clinicians on an ongoing basis and

we communicate regularly with a database of nearly 1,800 healthcare professionals via a quarterly newsletter.

The work of the British Liver Trust is supported and guided by our multidisciplinary Clinical Advisory Group, who provide vital clinical expertise, subject knowledge and insight on liver disease.



Leading clinicians and politicians attend Lancet Commission event

Many of the UK's leading liver disease clinicians, policy makers and interested MPs met in April 2021 to discuss how the recommendations from the final Lancet Commission report could be transformed into action.

The British Liver Trust and Foundation for Liver Research jointly hosted the virtual launch of the Commission's seventh report into liver disease: *New Dimensions for Hospital Services and Early Detection of Disease*. The report addresses the unacceptably high mortality of patients

with liver disease and promotes the need for an integrated approach to reduce mortality levels and improve care.

Introduced by our CEO Pamela Healy and chaired by Professor Sir Ian Gilmore, Professor of Hepatology, the event also featured presentations from a range of high-profile speakers. These included Alex Norris MP, Shadow Minister for Public Health and Patient Safety, and specialist liver clinicians including Dr Helen Jarvis, a GP with a special interest in liver disease, and Professor Stephen Ryder (pictured above).

Spotlight on the nations: Improving early diagnosis in Wales

To raise awareness and drive better care for patients in Wales, the British Liver Trust published a policy report in 2021: *Sound The Alarm On Liver Disease In Wales: A Call To Action*. The report called for urgent action to improve liver disease awareness, prevention, treatment and outcomes, with ten clear policy proposals to develop the progress already made by the Welsh Government's *Together for Health – Liver Disease Delivery Plan* (see box, right).

Originally published in June 2021, the report was officially launched in November 2021 at a Senedd event. The virtual event provided an opportunity to share the policy document and set out proposals for preventing liver disease and improving outcomes and care in Wales.

Understanding patients' views

In 2021, we surveyed people with liver disease and carers in Wales to understand how they felt

about their diagnosis and care. We asked patients about their risk factors, diagnosis, the care they received, and whether they felt their disease and care were clearly explained. The 249 responses mirrored those of other studies, which show that often diagnosis of liver disease comes at an advanced stage of illness. While patients in Wales are efficiently referred to a secondary care specialist, policy-makers, planners and clinicians must make sure systems are in place to detect liver disease earlier.

Cross Party Group

March 2022 saw the launch of the Cross Party Group on Liver Disease and Liver Cancer at the Senedd, chaired by Chair Joel James MS. We also held a Love Your Liver event (pictured) with our mobile unit outside the Senedd to coincide with the event, which was attended by a third of Senedd members (20 MSs). The event was filmed by ITV Wales, reaching an audience of 9.9 million.





New blood test guidance for Welsh doctors

In October 2021, the British Liver Trust chaired the launch of new guidance for doctors in Wales, designed to reduce the devastating consequences of late diagnosis of liver disease.

The All Wales Abnormal Liver Blood Tests Pathway was devised by hepatologists from health boards across Wales. The pathway helps doctors recognise people at risk of developing advanced liver disease, and address

their risk factors, such as providing alcohol support and weight management services. The guide simplifies and improves an older pathway that doctors in the UK often follow, which relies only on looking at the results of simple liver blood tests without appropriate follow up. The new pathway makes it easier to identify abnormalities, explains when to send people for more tests and how to make a follow-up plan for those with abnormal results.

A call to action

Sound The Alarm On Liver Disease In Wales: A Call To Action calls on the Welsh Government to:

- Include liver disease as part of general health checks
- Increase access to weight management services across Wales
- Establish alcohol care teams in all health boards
- Increase the number of hepatologists
- Deliver the 'Healthy Weight: Healthy Wales' programme
- Deliver on the World Health Organisation 2030 target to eliminate hepatitis C
- Ensure successful delivery of the 'All Wales Liver Disease Pathway'
- Give every cirrhosis patient in Wales access to a specialist liver nurse
- Ensure better signposting to services
- Increase the number of referrals for liver transplants.

Highlighting the rising threat of liver cancer

Over 2,000 people from across the UK took part in our liver cancer survey in 2021. The results provided a unique insight into the experiences of people with liver cancer. They will help us to campaign more effectively on behalf of everyone with the condition, and work to improve patient support.

The survey revealed that more than half of UK adults are unaware of many of the factors that can increase their risk of liver cancer. Primary liver cancer is the fastest growing cause of cancer death in the UK and, due to late diagnosis, only 13% of people with the disease will survive for more than five years – but 87% of people surveyed thought the figure was much higher than this.

Alarming, nine in ten people do not realise that gender is a risk factor, despite

men being twice as likely to be diagnosed with liver cancer in their lifetime. The survey also revealed that:

- More than half are unaware that having an underlying liver condition, being overweight or living with type 2 diabetes can increase their risk of liver cancer
- Only one in ten people would be 'extremely concerned' if they were told there was a problem with their liver
- 42% of people who discussed dietary issues with their GP were not told about the links between diet and liver disease or offered testing for liver health

We shared the results of the survey during Liver Cancer Awareness Month in October 2021, and also use the findings regularly when talking to policy-makers and politicians.

Primary liver cancer is the fastest growing cause of cancer death in the UK and, due to late diagnosis, only 13% of people with the disease will survive for more than five years.



Priority
4

Increasing awareness and improving understanding

We want to see a world where liver disease and liver cancer are no longer overlooked. To help us achieve that, we use every platform possible to raise awareness. That includes local, regional and national media, and our own increasingly popular communication channels.



Putting liver disease in the spotlight

We continued to raise the profile of liver disease through wide-ranging media coverage during 2021/22, reaching a combined audience of over 888 million – a huge 525% increase on 2020/21. This included 119 pieces of coverage on broadcast media, including BBC, ITV and Sky News.

Many people know relatively little about liver disease, so we work with the media to improve understanding of signs and symptoms. In 2021/22, that message featured in high profile articles in the *Daily Express*, with a particular focus on fatty liver disease. The coverage reached an audience of over 7 million.

The COVID-19 pandemic had a frightening impact on rates of alcohol-related liver disease and we highlighted this through extensive media work, to raise awareness of the risks of higher alcohol consumption.

In July, new data from Public Health England revealed there had been a 20% increase in alcohol-related liver disease deaths during the pandemic. Our subsequent media statement resulted in 130 pieces of coverage in regional, national and international press including *Daily Mail Online* and *Liverpool Echo*. We also worked with Channel 4 and the liver unit at Nottingham Trent University to gain coverage on *Channel 4 News* in November 2021.

People with liver disease often face stigma and blame, but we are working to increase the public's understanding and tell the stories of people with liver disease and liver cancer. These include Chris Matthews, who had a transplant at the end of 2021, fifteen months after joining the transplant waiting list. He shared his story in *The Metro*, reaching an audience of 2.3 million.

In April 2021, we also worked with ITV to tell the story of Diana, who sadly lost her husband to alcohol-related liver disease in March 2021 and was keen to highlight how the pandemic had led to her husband increasing his alcohol consumption. The coverage highlighted the very real impact of COVID-19, and reached an audience of over 3 million.

We work with the media to highlight preventable deaths caused by liver disease

Our media coverage had a combined audience reach of over

888 million

Awareness days and months

In addition to our own annual Love Your Liver awareness month, we joined forces with our partners in the Less Survivable Cancers Taskforce in January 2022 to launch the taskforce's first awareness day. Held on 11 January, the day called for greater focus on early diagnosis and more research, as well as a Government commitment to increase five year survival for less survivable cancers to 28% by 2029. The resulting publicity reached an audience of almost 2 million.

We also use wider national and international awareness campaigns to highlight liver disease and tell patients' stories. In 2021/22, this included:

- **Mental Health Awareness Week (10-16 May 2021)** – reported the results of our survey revealing that 40% of liver disease patients have been worried about their mental health during the pandemic
- **International NASH Day (10 June 2021)** – highlighted rising rates of obesity. In 2020, one million adults were reported to have been admitted to hospital with obesity-related conditions
- **Rare Disease Day (28 February 2022)** – shared information on social media with a link to our liver conditions page, reaching over 7,500 people.

Getting social



Social media provides a fantastic platform for us to tell people's stories, share information, highlight types of liver disease, and signpost to support. It also

allows us to share stories about rarer forms of disease, such as Andrea's experience with bile duct cancer (cholangiocarcinoma), shared in February 2022, which reached over 9,000 people and received over 250 reactions from people responding to her story.

Facebook continues to be our leading platform to engage with people affected by, or at risk of, liver disease and liver cancer. Promoting the importance of organ donation on social media is a key activity. These posts really resonate with our

audience, for example, a post about a Holby City episode which led to a spike in organ donations received hundreds of engagements

Instagram is a great place to celebrate our fundraisers' achievements, such as the incredible efforts of Joshua, who raised over £14,000 in London marathon events. The post reached thousands of people.

Twitter is often used to promote our campaigning and research work. At the launch of the 'poo study' trial in Parliament in March 2022 (see page 35) we achieved over 30 retweets and 50 likes.

Over the year, the number of people following us on our social media channels (Facebook, Instagram and Twitter) increased significantly. Our Facebook followers increased by 27%, Instagram 26% and Twitter 8%. Across all platforms, we reached over 3.1 million people during the year.

Priority
5

Campaigning for policy changes

Change must happen at a national level to achieve effective improvements in care, treatment and patient outcomes. Recognising that, we have stepped up our work to engage with parliamentarians and policymakers, and held 15 outreach meetings with MPs during 2021/22. We also work in partnership with other charities and organisations to amplify our voice and give our messages greater impact.

New All Party Parliamentary Group

In December 2021, we took over the secretariat and supported the launch of the new All Party Parliamentary Group (APPG) on Liver Disease and Liver Cancer. Chaired by Wayne David MP, the APPG provides a mechanism to raise issues in parliamentary debates, submit parliamentary questions and bill amendments, and publish reports. The group will look at areas including early

diagnosis, regional variations in workforce and consistency of messaging. It is key to achieving successful change.

A significant focus of our policy work during 2021/22 was on improving early detection (see page 16 for more on this) but we also campaigned on key issues linked to liver disease risk factors and patient outcomes.



A tribute to Sir David Amess

We were devastated to hear of the tragic death of Sir David Amess in October 2021, who was Chair of the All-Party Parliamentary Group on Liver Health for many years. Sir David supported the Trust's work by

promoting policies to improve care and outcomes for patients with liver disease during his chairmanship of the group. His death is a huge loss for the liver health community.

Reducing alcohol consumption

Alcohol is the biggest cause of liver disease in the UK. Working in partnership with over 30 other organisations as part of the Alcohol Health Alliance UK, we raised awareness of alcohol-related health risks and campaigned on key policies to reduce alcohol consumption.

In May 2021, as part of the Alliance, we published research into alcohol labelling which found that the majority of the public wants labelling to tell

75% of people want to know the number of units in their drink

them more about what's in their drink – 75% want to know the number of units, 61% want calorie information and 53% want to know the amount of sugar. We signed a letter to the then Health Secretary Matt Hancock in support of better alcohol labelling, and will continue to work with the Alliance to make this happen.

Research has shown that minimum unit pricing is an important tool in reducing alcohol consumption – a report in the Lancet found that alcohol sales fell by almost 8% after the policy was introduced in Scotland. We continue to campaign for minimum unit pricing to be introduced in England. We also signed a letter to the Scottish Government from the Alcohol Health Alliance in November 2021, calling for the minimum unit price for alcohol to be raised from 50p to 65p, to ensure it is kept in line with inflation.

'Research has shown that minimum unit pricing is an important tool in reducing alcohol consumption. We continue to campaign to introduce it in England.'

Tackling obesity and diet

Maintaining a healthy weight helps to reduce the risk of liver disease and liver cancer, and the Government has a vital role to play in improving diet and tackling obesity.

In partnership with over 40 other organisations as part of the Obesity Health Alliance, we published a new report in September 2021 calling on the Government to take action to reverse the persistently high levels of excess weight in the population. With input from clinicians and dietary specialists, the report – *Turning the Tide: A 10-year Healthy Weight Strategy* – emphasised that change is possible, but the Government needs to act now.

The Alliance called on the Government to take key steps including a levy on the food industry to incentivise the production of healthier food and drink, mandated weight management services in every area of the country, and the introduction of the 9pm watershed on junk food advertising.

We were delighted when the Government accepted our recommendations and our campaign succeeded in driving these changes. It was deeply disappointing that the Government then announced on 14 May 2022 its decision to delay implementation, and we will continue to campaign so these new policies are not diluted.

Campaigning on liver cancer

Every year in the UK, over 6,000 people are diagnosed with liver cancer, and only 13% will survive for more than five years or more. We are determined to change that.

In March 2022, we submitted a consensus statement in response to the Government's Call for Evidence to inform a new 10-year Cancer Plan. The statement was produced in partnership with over 50 other charities including

Cancer Research UK, Macmillan, and the Less Survivable Cancer Taskforce.

The statement sets out the actions that the Government and NHS need to take to ensure people diagnosed with cancer get the very best care and treatment, with ten key tests that must be met to ensure success. Separately the British Liver Trust also submitted a specific response on behalf of liver cancer patients (see box below).



Changing cancer care

The British Liver Trust submitted a response to the Government's 10-Year Cancer Plan on behalf of liver cancer patients in March 2022. After working with liver cancer patients to inform our submission, we called on the Government to:

- Improve early detection of liver cirrhosis as it's a leading risk factor for liver cancer and often has no symptoms to prompt diagnosis
- Introduce better and more effective liver cancer surveillance programmes for those who are diagnosed with liver cirrhosis
- Urgently commission research to identify new biomarkers for liver cancer to support earlier detection
- Reduce variation and ensure everyone gets access to good care, no matter where they live.

Priority
6

Supporting research

The British Liver Trust works with researchers and research bodies to ensure people with liver conditions are involved in all aspects of the research process as partners. We also fund patient-focused research.

Can antivirals help vulnerable people at risk of COVID?

The British Liver Trust supported the Panoramic study to recruit people to take part in a COVID-19 treatment clinical trial in January 2022. Adults over the age of 50 or with an underlying health condition, including people with liver disease, who test positive for COVID-19 were urged to sign up for a world-first study which is providing life-saving antivirals to thousands of people.

Along with the Government and other charities, the British Liver Trust sought at least 6,000 more participants to come forward, so that expert scientists can understand more about how to deploy these treatments in the NHS more widely.

We promoted the study widely, resulting in over 200 pieces of media coverage.

New research explores the benefits of poo transplants

Launched in March 2022, the Promise study will investigate whether poo transplants could cut the risk of serious complications from advanced liver disease.

The study will look at how capsules containing bacteria from a healthy donor's poo – known as Faecal Microbiota Transplants (or poo transplants) – can clear up infections that are resistant to antibiotics in people with liver disease.

The research may also have important implications for global health as it could help tackle antibiotic resistance.

The British Liver Trust is supporting the study and ensuring that patients are at the heart of the research. We worked with researchers to find out patients' views on using poo transplants in this way so that any barriers to an effective treatment can be understood and overcome.



“I have serious liver disease and I am really proud to have been involved in this research. This has given us hope.”

Patient in pilot study, Promise Trial

Our fundraising approach

We want to take this opportunity to say a very big thank you to all the donors and grant makers who have supported us in another very challenging year. Our committed supporters have continued to donate, seeing the impact of their gifts, and we are extremely grateful.

Building income through incredible support

Our fundraising approach is based on conveying the impact of donations and grants, ensuring that those who choose to give to the British Liver Trust can see that we will spend their money wisely to create positive impact for patients and families.

The British Liver Trust is registered with the Fundraising Regulator and subject to the policies and practices laid out by this body. Any fundraising complaints can be made through the Regulator. In 2021/22 the charity received no complaints about our fundraising.

Our strategy is to build income from a wide range of sources to ensure long term sustainability. We have seen strong growth in recent years, helping us to reach and support more people, and deliver more services, and we are planning for more growth to support our strategic aims of providing information and support to everyone affected by liver disease or liver cancer, and growing the number of people who are engaged with us, to drive up income.

The British Liver Trust used professional fundraisers during the year for two campaigns. These were our Sound the Alarm campaign, which combined Facebook advertising with telephone fundraising, provided by a professional agency, and our Run60 challenge, again using Facebook ads, this time combined with digital messaging. The digital communications for Run60 were managed by a professional

fundraising agency. All work with professional fundraisers is subject to a written signed agreement, and monitoring and management for each of these campaigns was provided via daily communication and weekly campaign meetings with the teams.

Thanks to our incredible fundraisers and to grants from trusts and foundations and key corporate partners, this year we have been able to increase the number of nurses in our helpline services team, and expand our reach with virtual support groups. Our first Policy and Public Affairs Manager joined us in 2021, thanks to securing funding, and we are starting to see the early effects of our policy calls across the country.

All gifts are valuable to the charity, from lottery to legacy, and we will continue to offer supporters a range of ways to get involved with us, whether by supporting us with a gift, volunteering for the charity at our events, or sharing our campaigns on social media - however supporters want to get involved, were here for them.

During the year we were extremely pleased to see the return of face to face community events and activities, including the London Marathon, and our own Leap for Liver skydive event. We continued to offer virtual events alongside public, organised activities, and we were delighted to see community fundraising income back up around pre-pandemic levels this year.



'We were extremely pleased to see the return of face-to-face events including our own Leap for Liver skydive event.'

Our amazing community fundraisers, who raise funds on behalf of the charity, do so via secure online platforms such as JustGiving, Enthuse and MuchLoved. All funds donated via these platforms are transferred securely to the charity regularly. Our fundraisers are supported to achieve their fundraising targets by our Community Fundraiser and our Supporter Care Officer, who monitor progress towards targets and provide the necessary authorisation and identity badges for those who are fundraising for us. We keep in close contact with supporters who are fundraising, the majority of whom are personally affected by a liver condition or have lost a loved one. We offer support, advice and fundraising guidance, and will follow the charity's Safeguarding Policy if there are any concerns about vulnerable people.

The 2021 Big Give Christmas appeal made a significant contribution to income – this matched funding campaign again formed the basis of our Christmas Appeal, with a powerful message of making gifts worth double, and this year raised over £30,000.

We have seen some staff changes, and at the end of the year appointed a new Individual Giving Manager and a Senior Trusts and Foundations Fundraiser. Both posts are crucial to our planned growth in these two vital income streams. We also appointed a part time Database Officer, reflecting the pressure on data management and

the need to ensure quality data management for reporting and future planning.

We also appointed a Supporter Care Officer to the team, joining us from our Admin team. This role is our first point of contact for supporters and provides great stewardship, ensuring donors are thanked in a timely and appropriate way. In the coming year we will build new journeys for our supporters, keeping them updated and engaged, and showing the impact and value of our work.

Income from gifts in wills continues to drive us forward, helping us have confidence to invest in new roles across the charity, and we are extremely grateful to those supporters who make the decision to name the British Liver Trust in their will. Such gifts absolutely help to ensure the charity will be here for patients and families for the long term.

We are supported with grants from pharmaceutical companies where we have shared objectives that are of benefit to patients with liver disease, and we are very grateful for grants and donations from these companies. All grants and donations comply with the Association of British Pharmaceutical Industry (ABPI) Code of Practice, and all have a written agreement setting out what activity has been agreed for specific projects or ongoing support.

Corporate fundraising makes a significant contribution to unrestricted income, supporting the core costs of the charity. Charity of the year partnerships are a great way to raise awareness of our work, and we ask our supporters to nominate us if the opportunity arises.

A huge thank you to all our supporters for helping us to grow and allowing us to invest in our campaigning work to call for change across the UK.





Thank you!

We would like to thank all the charitable trusts and companies who support our work. Due to limitations on space, we have included only funders who donated over £2,500 during 2021/22 here, but we are very grateful to all of our funders, for all grants and donations.

- The Aberbrothock Skea Trust
- Astellas Pharma Ltd
- Bank of Scotland Foundation
- Boston Scientific
- British Association of Gastroenterologists (BSG)
- British Association for the Study of the Liver (BASL)
- Bristol Myers Squibb
- Daiichi Sankyo
- The D'Oyly Carte Charitable Trust
- Edith Murphy Foundation
- Eisai Co. Ltd
- The February Foundation
- Foundation for Liver Disease Research
- Garfield Weston Foundation
- Gilead Sciences Europe Ltd
- Help For Health
- The Hospital Saturday Fund
- Incyte Biosciences
- Intercept Pharma Limited
- Ipsen Solutions Ltd
- John Swire 1989 Charitable Trust
- Murdoch Forrest Charitable Trust
- National Lottery Community Fund England
- Norgine Limited
- The PF Charitable Trust
- Roche Pharma Solutions
- The Shears Foundation
- Shionogi Inc.
- Sirtex Medical
- The Souter Charitable Trust
- Sylvia Aitken Charitable Trust
- Walter Lees Foundation

I DID IT!

40



GREATNORTH.ORG

Our plans in 2022/23

We will continue to expand our work to support patients and change the liver health landscape. Activities against each of our strategic priorities will continue – key highlights are set out on the next two pages.

Supporting patients

New liver cancer campaign: After undertaking wide-reaching research with patients, supporters, healthcare professionals and the general public, we will launch a major new campaign with its own unique look and feel, to make sure every person diagnosed with liver cancer recognises us as the go-to organisation for information and support.

Hepatitis B: We will be working with people who have hepatitis B from diverse communities so that we can better support them and advocate on their behalf. A new steering group, including

patients, clinicians and other stakeholders, will drive activity.

New support groups: We will launch new groups to cover advanced liver disease complications and a wider range of conditions.

Developing our helpline: We will trial a new 'webchat' facility that will expand the support we are able to offer. This will enable more people affected by liver disease to get the information they need in real time.



Raising awareness and highlighting the impact of stigma

Stamp out Stigma: We know that people with liver disease face stigma on a daily basis. Launching in summer 2022, this important campaign will highlight the shocking levels of stigma, empower people, and provide tools to address and challenge stigma when and wherever they find it.

Love Your Liver: We plan to raise funds for a new Love Your Liver unit, which will deliver vital additional capacity – it will have two large scanning

rooms plus an additional third room for confidential conversations and viral hepatitis testing.

Screening parliamentarians: We will hold events for policy-makers and parliamentarians in Westminster and Holyrood to highlight the importance of early detection. As well as raising awareness, the events will drive engagement by offering attendees a scan, so they better understand their own liver health.

Policy and campaigning

Make Early Diagnosis Routine campaign:

We will seek political support from MPs and MSPs to write to their new integrated care systems or health boards to promote the implementation of full patient care pathways, and will hold meetings with health bodies about the implementation and improvement of pathways. We will also promote our campaign with public health directors and clinicians to champion our policy asks, and begin to engage more closely with stakeholders within the NHS such as pathology departments, to progress the implementation of patient pathways.

Develop a toolkit to support MP visits to hospital liver units: To make it easier for MPs to understand more about the challenges facing liver care, we will develop a communications toolkit for hospital liver units to handle MP visits independently.

We will facilitate arrangements, while the toolkit will provide the necessary collateral (including

template press releases, policy asks, social media assets, briefings and biographies). The approach will ensure our resources are effectively used to maximise political engagement with liver units across the UK.

All Party Parliamentary Group plans:

Our new All-Party Parliamentary Group on Liver Disease and Liver Cancer will continue to raise the profile of liver disease in Westminster. The group will hold three meetings over the year which will include:

- Calling for a Government review of adult liver services
- Levelling up health: liver disease and regional health inequalities and disparities in care and outcomes
- An inquiry into liver disease in the UK, which will form the basis of a policy report and recommendations.

Supporting research

Mapping chronic liver disease: The Trust will support a new project that will map chronic liver disease across the UK so that we can better understand how patients are currently looked after across the NHS and how hospital services should best be organised so that we can optimise their care. The study will also use interviews and ethnographic observations to enhance our understanding of the patient experience and improve healthcare professionals' interactions.

Liver cancer surveillance research: Patients with underlying liver problems are at risk of getting liver cancer. It is recommended that these patients have an ultrasound scan of their liver every six months to try and pick-up cancer tumours early when it can be cured.

However, only 30% of at-risk patients come to appointments regularly. We will work with two different research centres to understand the barriers to patients accessing treatment and how we can improve early diagnosis of liver cancer.

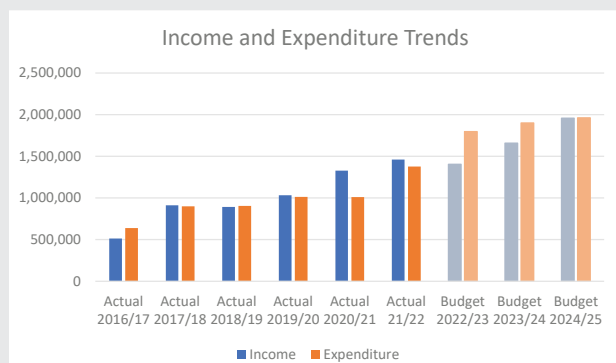
Continuing research for patients with PSC:

Primary Sclerosing Cholangitis (PSC) is a rare and chronic liver condition. People living with the condition often experience difficult symptoms and there is currently no tool that can assess how these impact on quality of life. This is important as it is one of the measures that is used when assessing whether new medicines and treatments should be approved. The Trust will jointly fund a new PHD student who will develop and pilot test a new Quality of Life tool.



Financial review

The British Liver Trust is in a strong financial position at 31 March 2022, with reserves continuing to be boosted by surplus over the past three years, despite the COVID-19 pandemic. In fact, the pandemic has highlighted even further the need for the charity to grow to meet the needs outlined above. The charity has a clear strategy for this growth, underpinned by a three-year rolling budget, and a carefully planned approach for utilising reserves to invest in growth, both of our services and of our fundraising team. The latter will ensure that we are able to raise funds at a level to sustain services once the reserves designated for growth investment have been used.



Expenditure

The chart above shows the growth in expenditure over recent years, which has enabled the delivery of activities outlined in this report. As some activities were reduced or even curtailed by the COVID-19 pandemic, and replaced by activities which were not face to face and therefore cheaper to run, expenditure in 2020/21 did not increase, but in 2021/22 all activities have increased again as teams found the best way of delivering services in a post pandemic world. This increase in activity is planned to continue, reflected in a planned ongoing increase in expenditure over the next two to three years.

Income

Again shown above, income has had a similar growth trend over the past 6 years. We have a strategy, including investment in staff, to ensure this growth rate continues in accordance with the budgets outlined above.

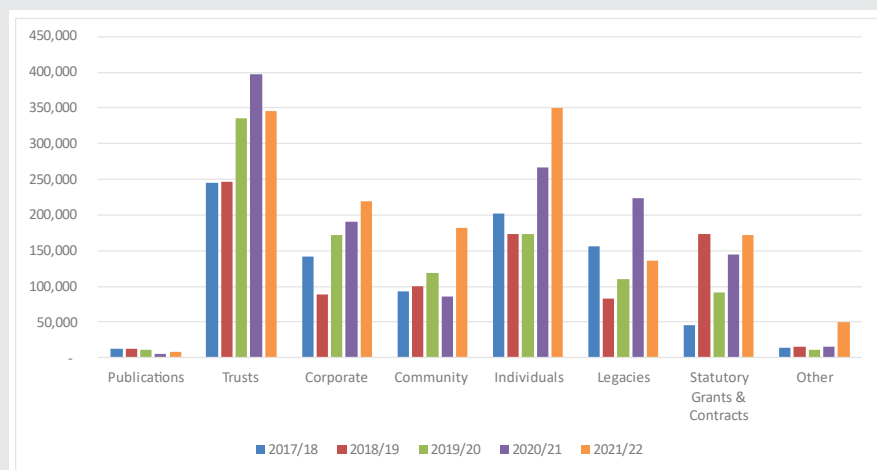
Past fundraising from various sources is shown below. Legacy income is by definition variable, and income from trusts and foundations was exceptionally high in 2020/21, due to COVID-19 grants given to help flex our work in the light of the pandemic. All other sources of income show growth in 2021/22.

Reserves

At 31 March 2022 the charity held £1,178,516 in reserves, (2021 £1,094,310) of which £206,200 (2021 £316,422) represent funds restricted in their use by the donor. In accordance with the reserves policy, the Board of Trustees have designated £334,945 (2021 £486,926) of the unrestricted reserves for future use as follows:

Growth Investment Fund

The charity has a 3 year strategy for growth, as required to deliver its mission statement and meet growing need. A strategy for investment in fundraising has been developed, to grow income to a sustainable level beyond the 3 year strategy, but this investment, and the use of reserves to grow service delivery in the meantime, produces a deficit budget for the next 3 years. The Trustees have agreed that reserves that are planned to be used in the two years beyond 31 March 2023 will be set aside funds for this purpose. This amounts to £246,614 (2021 £434,072). As the period for this budgeted deficit passes, the fund will be reduced.



Legacy Equalisation Fund

The charity is now including legacy income in its budget, but recognises this as a point of risk, due to the unpredictability of this income stream. Trustees are therefore designating a further amount of £35,477 (2021 £52,854) from legacy income to the legacy equalisation fund, being the amount by which legacies for the year exceeded

the budgeted amount. This brings the total fund, which will be increased or reduced as legacies exceed or fall short of expectation, to £88,331.

The Trustees' policy is to hold non-designated unrestricted reserves of 3 to 6 months budgeted expenditure, having adjusted that expenditure for restricted funds held that will contribute towards it. At 31 March 2022 the non-designated unrestricted reserves held by the charity amounted to £637,371 (2021 £290,962) which amounts to 4.6 months such expenditure. Reserves are largely held in cash deposits, including term deposits amounting to £596,608 (2021 £338,900) shown as investments on the balance sheet.

Going Concern

As outlined, the Trust has both the reserves and the strategic planning to be able to assure its status as a going concern. The current 3 year rolling budget predicts that unrestricted reserves will remain at around or over 3 months expenditure throughout that 3 year period and cashflow forecasts show that liquidity will not be an issue.

Investment Policy

The Trust holds its funds in a range of low risk current and deposit accounts with varying notice periods and interest rates, with the aim of maximising interest whilst ensuring liquidity.

Structure, Governance and Management

The charity is a company limited by guarantee and a charity registered with the Charities Commission in England and Wales and the Scottish Charity Regulator. Its governing document, updated during 2021/22, is the Memorandum and Articles of Association registered with Companies House. The charity is governed by the Board of Trustees, although operational matters are delegated to the Chief Executive, Pamela Healy OBE, who has been in post throughout the year, along with Directors of Finance and Operations, Alison Orman, and Communications and Policy, Vanessa Hebditch.

A full Board meeting is held four times a year,

attended by the Executive Team, with reports received from other managers and staff members. The Audit and Risk Committee meets before every Board meeting and at other times as matters relating to financial and risk governance arise. A remuneration committee also meets once a year to agree general pay scales and cost of living rises and to discuss executive pay.

Prospective trustees are selected following a full recruitment process including an application and an interview with the Nominations Committee. New trustees receive a full induction pack with information pertaining to both the charity and the role of a trustee. They also have an induction meeting with the CEO and each of the senior management team. A search to recruit a replacement treasurer took place during the year, but was unsuccessful. The trustees are satisfied that the financial expertise on the Board at this time is sufficient, but remain alert to the potential for a new treasurer.

Risk

The Trust has a risk register which is a living document, updated regularly by the Director of Finance and Operations as new risks are recognised and mitigations required. The register is reviewed by the Audit and Risk Committee at each meeting following an update, and by the Board of Trustees at least annually. In these reviews the trustees are keen to ensure that residual risk has been reduced to a level they are content with and support the Executive Team in ensuring that this happens.

The trustees confirm that they have referred to the guidance contained in the Charity Commission's general guidance on public benefit when reviewing the Trust's aims and objectives and in planning future activities and setting the policies for the year.

The annual report was approved by the trustees of the charity on and signed on its behalf by:

Wim Bushell (Chair of Trustees), Trustee
Dated: 29 September 2022

Statement of trustees' responsibilities

The trustees (who are also the directors of British Liver Trust for the purposes of company law) are responsible for preparing the trustees' report and the financial statements in accordance with the United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice) and applicable law and regulations.

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

- select suitable accounting policies and apply them consistently;
- observe the methods and principles in the Charities SORP;

- make judgements and estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements; and
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in business.

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

The annual report was approved by the trustees of the charity on and signed on its behalf by:

Wim Bushell (Chair of Trustees)
Trustee

Dated: 29 September 2022

Independent Auditor's Report to the Members of British Liver Trust

Opinion

We have audited the financial statements of British Liver Trust (the 'charitable company') for the year ended 31 March 2022 which comprise the Statement of Financial Activities, the Balance Sheet, the Cash Flow Statement and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 31 March 2022 and of its incoming resources and application of resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities

under those standards are further described in the Auditors' responsibilities for the audit of the financial statements section of our report. We are independent of the charitable company in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions relating to going concern

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

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

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

Other information

The trustees are responsible for the other information. The other information comprises the information included in the Annual Report, other than the financial statements and our Report of the Independent Auditors thereon.

Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

Opinions on other matters prescribed by the Companies Act 2006

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

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

Matters on which we are required to report by exception

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

We have nothing to report in respect of the following matters where the Companies Act 2006 requires us to report to you if, in our opinion:

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

Responsibilities of trustees

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

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

Our responsibilities for the audit of the financial statements

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

The extent to which our procedures are capable of detecting irregularities, including fraud is detailed below:

- We obtained an understanding of the legal and regulatory frameworks that are applicable to the company, and the industry in which it operates. These include but are not limited to compliance with the Companies Act 2006, UK Generally Accepted Accounting Principles and the relevant tax compliance regulations for the company.
- We obtained an understanding of how the company is complying with these frameworks through discussions with management.
- We enquired with management whether there were any instances of non-compliance with laws and regulations or whether they had knowledge of actual or suspected fraud. These enquiries are corroborated through follow-up audit procedures including but not limited to a review of legal and professional costs, correspondence and a review of board minutes.
- We assessed the susceptibility of the company's financial statements to material misstatement, including the risk of fraud and management override of controls. We designed our audit procedures to respond to this assessment, including the identification and testing of any related party transactions and the testing of journal transactions that arise from management estimates, that are determined to be of significant value or unusual in their nature.
- We assessed the appropriateness of the collective competence and capabilities of the engagement team, including consideration of the engagement team's knowledge and understanding of the industry in which the company operates in, and their practical experience through training and participation with audit engagements of a similar nature.

Independent auditor's report

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at www.frc.org.uk/auditorsresponsibilities. This description forms part of our Report of the Independent Auditors.

Use of our report

This report is made solely to the charitable company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act

2006. Our audit work has been undertaken so that we might state to the charitable company's members those matters we are required to state to them in an auditors' report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and the charitable company's members as a body, for our audit work, for this report, or for the opinions we have formed.

Michaela Johns FCCA
(Senior Statutory Auditor)

Dated: 14 October 2022

For and on behalf of Hopper Williams & Bell Limited
Statutory Auditor

Highland House, Mayflower Close
Chandler's Ford, Eastleigh, Hampshire SO53 4AR

Statement of Financial Activities for the Year Ended 31 March 2022

(Including Income and Expenditure Account)

	Note	Unrestricted funds £	Restricted funds £	Total 2022 £	Total 2021 £
Income and Endowments from:					
Donations and legacies	2	976,723	421,469	1,398,192	1,165,689
Charitable activities	3	58,853	-	58,853	157,943
Investment income	4	4,861	-	4,861	4,708
Total Income		1,040,437	421,469	1,461,906	1,328,340
Expenditure on:					
Raising funds		(312,537)	-	(312,537)	(229,728)
Charitable activities	5	(533,472)	(531,691)	(1,065,163)	(780,266)
Total Expenditure		(846,009)	(531,691)	(1,377,700)	(1,009,994)
Net movement in funds		194,428	(110,222)	84,206	318,346
Reconciliation of funds					
Total funds brought forward		777,888	316,422	1,094,310	775,964
Total funds carried forward	19	972,316	206,200	1,178,516	1,094,310

All of the charity's activities derive from continuing operations during the above two periods.
The funds breakdown for 2022 is shown in note 19.

Balance Sheet as at 31 March 2022

	Note	2022 £	2021 £
Fixed assets			
Tangible assets	11	27,248	26,900
Current assets			
Stocks	12	7,491	4,554
Debtors falling due within one year	13	196,007	251,402
Debtors falling due after more than one year	13	8,829	-
Investments	14	596,608	338,900
Cash at bank and in hand		493,131	567,330
		1,302,066	1,162,186
Creditors: Amounts falling due within one year	15	(150,798)	(94,776)
Net current assets		1,151,268	1,067,410
Net assets		1,178,516	1,094,310
Funds of the charity:			
Restricted funds		206,200	316,422
Unrestricted income funds			
Board designated funds		334,945	486,926
Unrestricted funds		637,371	290,962
Total funds	19	1,178,516	1,094,310

The financial statements have been prepared in accordance with the provisions applicable to companies subject to the small companies' regime.

The financial statements on pages 51 to 67 were approved by the trustees, and authorised for issue on and signed on their behalf by:

David Meek (Chair of Audit and Risk Committee)
Trustee

Dated: 29 September 2022

Statement of Cash Flows for the Year Ended 31 March 2022

	Note	2022 £	2021 £
Cash flows from operating activities			
Net cash income		84,206	318,346
Adjustments to cash flows from non-cash items			
Depreciation & loss on disposal of assets		22,439	17,485
Investment income	4	(4,861)	(4,708)
		101,784	331,123
Working capital adjustments			
(Increase)/Decrease in stocks	12	(2,937)	1,190
Decrease/(Increase) in debtors	13	46,566	(43,916)
Increase/(Decrease) in creditors and deferred income	15	56,022	(63,480)
Net cash flows from operating activities		201,435	224,917
Cash flows from investing activities			
Interest receivable and similar income	4	4,861	4,708
Purchase of tangible fixed assets	11	(22,787)	(6,954)
Net cash flows from investing activities		(17,926)	(2,246)
Net increase in cash and cash equivalents		183,509	222,671
Cash and cash equivalents at 1 April		906,230	683,559
Cash and cash equivalents at 31 March	21	1,089,739	906,230

All of the cash flows are derived from continuing operations during the above two periods.

Notes to the financial statements for the year ended 31 March 2022

1. Accounting policies

Summary of significant accounting policies and key accounting estimates

The principal accounting policies applied in the preparation of these financial statements are set out below. These policies have been consistently applied to all the years presented, unless otherwise stated.

Statement of compliance

British Liver Trust is a registered charity, registration number 298858 (E&W), SC042140 (Scotland), company number 2227706, registered in the United Kingdom. The address of the charity is given in the reference and administrative details on page 2 of these financial statements. The nature of the charity's operations and principal activities are described in the Trustees' annual report.

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) issued on 16 July 2014, the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102), the Charities and Trustee Investment (Scotland) Act 2005, the Charities Accounts (Scotland) Regulations 2006 (as amended) the Charities Act 2011 and UK Generally Accepted Practice as it applies from 1 January 2015.

Basis of preparation

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

The financial statements are prepared on a going concern basis under the historical cost convention, modified to include certain items at fair value. The financial statements are prepared in sterling which is the functional currency of the charity and rounded to the nearest £.

Going concern

The financial statements have been prepared on a going concern basis. The trustees have considered the level of funds held and the expected level of income and expenditure for 12 months from authorising these financial statements and it is clear that the charity to be able to continue as a going concern.

Income and endowments

Voluntary income including donations, gifts, legacies and grants that provide core funding, or are of a general nature, is recognised when the Charity has entitlement to the income, it is probable that the income will be received and the amount can be measured with sufficient reliability.

Grants

Grants relating to revenue are recognised in income over the period in which the related costs are recognised.

Donations and legacies

Donations and legacies are recognised on a receivable basis when receipt is probable and the amount can be reliably measured.

Investment income

Investment income is recognised on a receivable basis.

Charitable activities

Income from charitable activities includes income recognised as earned (as the related goods or services are provided) under contract.

Expenditure

All expenditure is recognised once there is a legal or constructive obligation to that expenditure, it is probable settlement is required and the amount can be measured reliably. All costs are allocated to the applicable expenditure heading that aggregate similar costs to that category. Where costs cannot be directly attributed to particular headings they have been allocated on a basis consistent with the use of resources.

Raising funds

These are costs incurred in attracting voluntary income.

Charitable activities

Charitable expenditure comprises those costs incurred by the charity in the delivery of its activities and services for its beneficiaries. It includes both costs that can be allocated directly to such activities and those costs of an indirect nature necessary to support them.

Governance costs

These include the costs attributable to the Charity's compliance with constitutional and statutory requirements, including audit, strategic management and Trustees' meetings and reimbursed expenses.

Irrecoverable VAT

Irrecoverable VAT is charged against the category of resources expended for which it was incurred.

Taxation

The charity is considered to pass the tests set out in Paragraph 1 Schedule 6 of the Finance Act 2010 and therefore it meets the definition of a charitable company for UK corporation tax purposes.

Accordingly, the charity is potentially exempt from taxation in respect of income or capital gains received within categories covered by Chapter 3 Part 11 of the Corporation Tax Act 2010 or Section 256 of the Taxation of Chargeable Gains Act 1992, to the extent that such income or gains are applied exclusively to charitable purposes.

Tangible fixed assets

Individual fixed assets costing £250 or more are initially recorded at cost, less any subsequent accumulated depreciation and subsequent accumulated impairment losses.

Depreciation and amortisation

Depreciation is provided on tangible fixed assets for the entire year, regardless of when an asset is purchased, so as to write off the cost or valuation, less any estimated residual value, over their expected useful economic life as follows:

Asset class	Depreciation method and rate
Furniture and Equipment	20% straight line basis
Software	33% straight line basis

Stock

Stock is valued at the lower of cost and estimated selling price less costs to complete and sell, after due regard for obsolete and slow moving stocks. Cost is determined using the first-in, first-out (FIFO). Items donated for resale or distribution are not included in the financial statements until they are sold or distributed.

Trade debtors

Trade debtors are amounts due from customers for merchandise sold or services performed in the ordinary course of business.

Trade debtors are recognised initially at the transaction price. They are subsequently measured at amortised cost using the effective interest method, less provision for impairment. A provision for the impairment of trade debtors is established when there is objective evidence that the charity will not be able to collect all amounts due according to the original terms of the receivables.

Cash and cash equivalents

Cash and cash equivalents comprise cash on hand and call deposits, and other short-term highly liquid investments that are readily convertible to a known amount of cash and are subject to an insignificant risk of change in value.

Investments

Investments comprise cash deposits held for investment purposes in deposit accounts with access greater than 90 days. There is a planned programme to draw on these deposits to meet the planned deficits for the next two years and thereby fund our growth.

Trade creditors

Trade creditors are obligations to pay for goods or services that have been acquired in the ordinary course of business from suppliers. Accounts payable are classified as current liabilities if the Charity does not have an unconditional right, at the end of the reporting period, to defer settlement of the creditor for at least twelve months after the reporting date. If there is an unconditional right to defer settlement for at least twelve months after the reporting date, they are presented as non-current liabilities.

Fund structure

Unrestricted income funds are general funds that are available for use at the trustees' discretion in furtherance of the objectives of the Charity. In accordance with their reserves policy, trustees take a risk based approach to reserves management and designate funds from the unrestricted funds to meet defined strategic objectives. Restricted income funds are those donated for use in a particular area or for specific purposes, the use of which is restricted to that area or purpose.

Leases

Leases in which substantially all the risks and rewards of ownership are retained by the lessor are classified as operating leases. Rentals payable under operating leases are charged in the Statement of Financial Activities on a straight line basis over the lease term.

Pensions and other post retirement obligations

The charity operates a defined contribution pension scheme. Contributions are charged in the statement of financial activities as they become payable in accordance with the rules of the scheme.

2. Income from donations and legacies

	Unrestricted funds £	Restricted funds £	Total 2022 £	Total 2021 £
Donations and legacies:				
Legacies	135,477	-	135,477	222,854
Government Grants	-	-	-	2,867
Other grants & donations	841,246	421,469	1,262,715	939,968
	976,723	421,469	1,398,192	1,165,689

£343,830 of the income in the prior year was attributable to restricted funds and £821,859 was attributable to unrestricted funds.

3. Income from charitable activities

	Unrestricted funds £	Restricted funds £	Total 2022 £	Total 2021 £
Sale of publications	7,853	-	7,853	4,998
Contract income	25,775	-	25,775	141,815
Health events, Patient and Public involvement in research etc	25,225	-	25,225	11,130
	58,853	-	58,853	157,943

£141,815 of the income in the prior year was attributable to restricted funds and £16,128 was attributable to unrestricted funds.

4. Investment income

	Unrestricted funds £	Restricted funds £	Total 2022 £	Total 2021 £
Interest receivable on bank deposits	4,861	-	4,861	4,708

All the income in the prior year was attributable to unrestricted funds.

5. Expenditure on charitable activities

	Total 2022 £	Total 2021 £
Employment costs	716,629	606,507
Other direct costs	102,709	9,787
Premises and office expenses	47,222	47,812
IT costs	53,176	34,774
Printing, posting and stationery	15,246	4,666
Training, subscriptions and conferences	17,563	6,822
Cleaning	1,751	1,372
Travel and subsistence	26,769	85
Legal and professional costs	8,835	3,325
Communications and awareness	35,342	31,940
Bank charges	620	444
Depreciation & loss on disposal of tangible fixed assets	22,439	17,485
Governance costs	16,862	15,247
	1,065,163	780,266

£533,472 (2021 - £367,290) of the above expenditure was attributable to unrestricted funds and £531,691 (2021 - £410,109) to restricted funds.

Within the expenditure analysed above, there are governance costs of £16,862 (2021 - £15,247) which relate directly to charitable activities. See note 6 for further details.

6. Analysis of governance costs

	Unrestricted funds £	Restricted funds £	Total 2022 £	Total 2021 £
Audit fees				
Audit of the financial statements	13,482	-	13,482	10,025
Auditor fees in respect of other services	727	-	727	3,250
Companies House	13	-	13	-
Annual Report production	2,640	-	2,640	1,942
Trustee Board Expenses	-	-	-	30
	16,862	-	16,862	15,247

7. Net incoming resources

Net incoming/outgoing resources for the year include:

	2022 £	2021 £
Audit fees	13,482	10,025
Other non-audit services	727	3,250
Depreciation & loss on disposal of fixed assets	22,439	17,485

8. Trustees' remuneration and expenses

No trustees, nor any persons connected with them, have received any remuneration from the charity during the year. The amount of expenses received by the trustees during the year totalled £Nil (2021 - Nil).

9. Staff costs

The aggregate payroll costs were as follows:

	2022 £	2021 £
Staff costs during the year were:		
Wages and salaries	767,131	650,232
Social security costs	69,114	60,060
Pension costs	67,029	52,145
	903,274	762,437

The monthly average number of persons (including senior management team) employed by the charity during the year was as follows:

	2022 No	2021 No
Charitable activities	28	24

One employee received emoluments of more than £60,000 during the year. The number of employees whose emoluments fell within the following bands was:

	2022 No	2021 No
£70,001 - £80,000	1	1

The total employee benefits of the key management personnel of the charity were £211,811 (2021 - £160,416). The chief executive officer, as the highest paid member of staff, received benefits totalling £79,000 (2021 - £75,750).

10. Taxation

The charity is a registered charity and is therefore exempt from taxation.

11. Tangible fixed assets

	Furniture and equipment £	Software £	Total £
Cost			
At 1 April 2021	165,995	5,874	171,869
Additions	22,787	-	22,787
Disposals	(34,475)	(4,752)	(39,227)
At 31 March 2022	154,307	1,122	155,429
Depreciation			
At 1 April 2021	139,469	5,500	144,969
Charge for the year	20,947	374	21,321
Eliminated on disposals	(33,357)	(4,752)	(38,109)
At 31 March 2022	127,059	1,122	128,181
Net book value			
At 31 March 2022	27,248	-	27,248
At 31 March 2021	26,526	374	26,900

12. Stock

	2022 £	2021 £
Stocks	7,491	4,554

13. Debtors**Amounts due within one year**

	2022	2021
	£	£
Trade debtors	26,645	5,689
Prepayments	48,131	36,697
Accrued income	112,500	193,663
Other debtors	8,731	15,353
	196,007	251,402

Amounts due after more than one year

	2022	2021
	£	£
Other debtors	8,829	-

14. Investments

	2022	2021
	£	£
Deposit accounts	596,608	338,900

15. Creditors: amounts falling due within one year

	2022	2021
	£	£
Trade creditors	70,378	22,388
Taxation and social security	16,116	17,698
Other creditors	2,456	517
Pension scheme creditor	10,012	8,122
Accruals	51,836	46,051
	150,798	94,776

16. Pension and other schemes

Defined contribution pension scheme

The Charity operates a defined contribution pension scheme. The pension cost charge for the year represents contributions payable by the Charity to the scheme and amounted to £67,029 (2021 - £52,145).

Contributions totalling £10,012 (2021: £8,122) were payable to the scheme at the end of the year and are included in creditors.

17. Charity status

The charity is limited by guarantee, incorporated in England & Wales, and consequently does not have share capital. Each of the trustees is liable to contribute an amount not exceeding £1 towards the assets of the charity in the event of liquidation.

18. Commitments

Operating Lease Commitments

The operating lease commitment on the lease of the property expires on 1 January 2026.

The new lease commenced on 1 January 2022 and the total amount recognised as an expense for operating leases during the year was £18,956 (2021: £19,605 on the old lease which ceased in January 2022).

The total amount contracted for but not provided in the financial statements was £156,622 (2021 - £15,572 on old lease).

19. Funds

	Balance at April 2021 £	Incoming resources £	Resources expended £	Transfers £	Balance at 31 March 2022
Unrestricted funds					
Unrestricted income fund	290,962	1,040,437	(846,009)	151,981	637,371
Growth investment fund	434,072	-	-	(187,458)	246,614
Legacy equalisation fund	52,854	-	-	35,477	88,331
Total Unrestricted funds	777,888	1,040,437	(846,009)	-	972,316
Restricted funds					
General research	14,963	-	-	-	14,963
PSC / Cholangiocarcinoma research	21,564	-	-	-	21,564
Love your liver roadshows	98,412	12,928	(94,087)	(2,738)	14,515
Love your liver trailer unit	5,000	-	(5,000)	-	-
Helpline	19,468	116,217	(100,436)	-	35,249
Patient Information	78,397	-	(67,424)	-	10,973
Wales cross-party working gp	5,000	-	(123)	-	4,877
Scotland projects	66,384	76,983	(84,311)	-	59,056
Wales projects	7,234	149,901	(141,078)	-	16,057
Policy role	-	35,000	(27,565)	-	7,435
UKLA	-	20,000	(11,667)	-	8,333
GP training tool	-	10,440	-	-	10,440
ICS	-	-	-	2,738	2,738
Total restricted funds	316,422	421,469	531,691	-	206,200
Total funds	1,094,310	1,461,906	1,377,700	-	1,178,516

19. Funds (continued)

	Balance at April 2020 £	Incoming resources £	Resources expended £	Transfers £	Balance at 31 March 2021 £
Unrestricted funds					
<i>General</i>					
Unrestricted income fund	384,761	839,828	(597,018)	(336,609)	290,962
<i>Designated</i>					
Growth investment fund	150,317	-	-	283,755	434,072
Legacy equalisation fund	-	-	-	52,854	52,854
Total unrestricted funds	535,078	839,828	(597,018)	-	777,888
Restricted funds					
General research	14,963	-	-	-	14,963
PSC / Cholangiocarcinoma research	21,564	-	-	-	21,564
Love your liver roadshows	82,674	15,738	-	-	98,412
Love your liver trailer unit	10,000	-	(5,000)	-	5,000
HCP engagement	30,850	-	(33,229)	2,379	-
Helpline	1,716	112,707	(94,955)	-	19,468
Patient Information	-	118,950	(40,553)	-	78,397
Wales cross-party working gp	-	5,000	-	-	5,000
Scotland projects	71,815	86,435	(91,866)	-	66,384
Wales projects	7,304	146,815	(144,506)	(2,379)	7,234
Total restricted funds	240,886	485,645	(410,109)	-	316,422
Total funds	775,964	1,325,473	(1,007,127)	-	1,094,310

Designated funds:

Growth Investment Fund – The charity has a 3 year strategy for growth, as required to deliver its mission statement and meet growing need. A strategy for investment in fundraising has been developed, to grow income to a sustainable level beyond the 3 year strategy, but this investment, and the use of reserves to grow service delivery in the meantime, produces a deficit budget for the next 3 years. The Trustees have agreed that reserves that are planned to be utilised in the two years beyond 31 March 2023 will be set aside funds for this purpose. This amounts to £246,614 (2021 £434,072). As the period for this budgeted deficit passes, the fund will be reduced.

Legacy Equalisation Fund – The charity is now including legacy income in its budget, but recognises this as a point of risk, due to the unpredictability of this income stream. Trustees are therefore designating a further amount of £35,477 (2021 £52,854) from legacy income to the legacy equalisation fund, being the amount by which legacies for the year exceeded the budgeted amount. This brings the total fund, which will be increased or reduced as legacies exceed or fall short of expectation, to £88,331

The specific purposes for which the funds are to be applied are as follows:

Restricted funds:

General research – Money held from former donations for general research projects. The Trust has extensive networks to establish

research required and potential researchers and also undertakes patient research. The Trust is determining a research project to utilise these funds in the current financial year.

PSC / Cholangiocarcinoma research – This represents donations for research into a Quality of Life tool for people living with PSC in partnership with University College London. This project is currently at the reporting phase and a further decision concerning use of the remaining funds will be made after this.

Love Your Liver Roadshows – Funds are raised regionally, normally from charitable trusts, for specific roadshows and allocated towards the roadshows in that area. The roadshows raise awareness of liver disease and its prevention, as well as promoting early detection and community diagnosis. Following the COVID-19 pandemic, the Trust has again been undertaking roadshows and utilised funds donated prior to the pandemic, with the exception of the amount of £2,738 transferred to the ICS project with the agreement of the donor trust.

Love Your Liver Trailer Unit – A donation was specifically given in 2016 for the purchase of a unit for our Love Your Liver roadshows. This has been depreciated annually.

Helpline – Donations have been provided for the provision of information and support, through a telephone and email helpline and an online peer forum, to anyone affected by liver disease including patients, carers and health care professionals.

Patient Information – This represents funding for the production and dissemination of information on liver health and liver conditions.

Wales Cross-party Working Group – This funding has been provided to facilitate the functioning of a cross-party working group in Wales. The funding was received in the previous financial year, but the formation of the group delayed by COVID-19. The group has now been formed and early meetings are taking place.

Scotland Projects – Donations have been received, largely from charitable trusts, for the promotion and development of support groups for liver patients and relatives/ carers in Scotland, together with raising awareness of liver health and promoting early detection.

Wales Projects – Funding provided by the Welsh Liver Disease Implementation Group for the promotion and development of support groups for liver patients and relatives/carers in Wales, together with raising awareness of liver health and promoting early detection.

Policy role – Funding has been received to support the salary of a Policy Manager, working through Westminster and across the devolved nations. £25,000 of this funding is from the Foundation for Liver Research with whom we have a close working relationship.

UKLA – We received funding from British Association for the Study of the Liver and British Society for Gastroenterology to chair and act as the secretariat for the UK Liver Alliance, bringing together all the voices of the liver community.

GP Training Tool – This funding is towards the production of a training tool to help raise GP awareness of liver disease and increase early detection rates. The tool will be available in the first half of the current financial year.

ICS – This funding will help support our campaigning work with Integrated Care Systems to improve the early detection of liver disease.

20. Analysis of net assets between funds

	Unrestricted funds £	Restricted funds £	Total funds at 31 March 2022 £
Tangible fixed assets	27,249	-	27,249
Current assets	1,095,865	206,200	1,302,065
Current liabilities	(150,798)	-	(150,798)
Creditors over 1 year	-	-	-
Total net assets	972,316	206,200	1,178,516

21. Analysis of net funds

	At 1 April 2021 £	Cash flow £	At 31 March 2022 £
Investments	338,900	257,708	596,608
Cash at bank and in hand	567,330	(74,199)	493,131
Total	906,230	183,509	1,089,739

22. Related party transactions

During the year the charity made the following related party transactions:

Wim Bushell

Wim Bushell is chair of Trustees and a Deputy Chair of Arthur J Gallagher, who act as insurance brokers for the Trust. Transactions of £9,849 (2021: 8,581) during the year with Arthur J Gallagher were in the normal course of business.

Alison Orman

(Alison Orman is the Director of Finance and Operations of the British Liver Trust)
Expenses of £301 were reimbursed to Alison Orman during the year (2021: £216). At the balance sheet date the amount due to/from Alison Orman was £244 (2021 - £Nil).

Pamela Healy

(Pamela Healy is the CEO for British Liver Trust)
Expenses of £490 were reimbursed to Pamela Healy during the year (2021: £46). At the balance sheet date the amount due to/from Pamela Healy was £216 (2021 - £Nil).

Vanessa Hebditch

(Vanessa Hebditch is the Director of Communications and Policy for British Liver Trust)
Expenses of £Nil were reimbursed to Vanessa Hebditch during the year (2021: £64). At the balance sheet date the amount due to/from Vanessa Hebditch was £Nil (2021 - £Nil).



The British Liver Trust is the largest UK liver charity for adults and leads the fight against liver disease and liver cancer.

We reach millions of people each year, raising awareness of the risk factors for liver disease and how to look after your liver. We campaign for improved care and treatment, support research, and provide information and support including a free nurse-led helpline and award-winning publications.

Our work is only possible thanks to voluntary grants and donations. Thank you to all those who support our work and enable us to deliver our services.