

Charity registration number 801940 (England and Wales)

**THE PREVENTIVE CARDIOLOGY TRUST**  
**ANNUAL REPORT AND UNAUDITED FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 30 SEPTEMBER 2024**

# THE PREVENTIVE CARDIOLOGY TRUST

## LEGAL AND ADMINISTRATIVE INFORMATION

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**Trustees**

Professor G De Backer  
Dr S Connolly  
Dr J Jones  
Professor K Kotseva  
Professor D Wood

**Charity number**

801940

**Principal address**

Professor David Wood's Research Group  
3rd Floor, Room 332, NHLI, ICTEM Building  
Du Cane Road  
London  
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**Independent examiner**

F J Wilde FCCA MBA DChA  
Warner Wilde  
4 Marigold Drive  
Bisley  
Surrey  
GU24 9SF

**Bankers**

TSB Bank  
31 Above Bar St  
Southampton  
SO14 7DX

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# THE PREVENTIVE CARDIOLOGY TRUST

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# THE PREVENTIVE CARDIOLOGY TRUST

## TRUSTEES' REPORT

### *FOR THE YEAR ENDED 30 SEPTEMBER 2024*

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The trustees present their annual report and financial statements for the year ended 30 September 2024.

The financial statements have been prepared in accordance with the accounting policies set out in note 1 to the financial statements and comply with the trust's governing document, the Charities Act 2011 and "Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102)" (effective 1 January 2019).

#### **Objectives and activities**

The objects of the Trust are the promotion for the public benefit of research into the prevention of coronary heart disease and other forms of heart and vascular disease and without prejudice to the generality of the foregoing for research into the frequency aetiology natural history treatment and prevention of such diseases, and the dissemination of the useful results of all such research with powers to provide staff equipment consumables accommodation and all facilities required for the furtherance of such research; to support all clinical aspects of the identification and treatment of individuals at risk of coronary heart disease or other forms of heart and vascular disease; to support the education of individuals by funding attendance at scientific and educational meetings and by supporting visits to other academic groups and institutions and by supporting the organisation of scientific meetings; to support all activities related to the education of the general public on the causes and prevention of coronary heart disease and other forms of heart and vascular disease.

The Preventive Cardiology Trust supports the work of Professor David Wood in his capacity as Emeritus Professor of Cardiology at the National Heart and Lung Institute, a Division of the Imperial College Faculty of Medicine, Imperial College London, and in his parallel appointment as Adjunct Professor of Preventive Cardiology at the University of Galway, Republic of Ireland, since February 1st 2018. The Trust receives research funding from pharmaceutical companies and other organisations to further all aspects of cardiovascular research within the remit of the Trust Deed.

The trustees have paid due regard to guidance issued by the Charity Commission in deciding what activities the trust should undertake.

#### **Achievements and performance**

In the last year the Trust has supported Professor Wood in his research and teaching role as Adjunct Professor of Preventive Cardiology at the University of Galway and Director of Research, Strategy and International relations at the National Institute for Prevention and Cardiovascular Health at the Croi Heart and Stroke Centre in Galway. The Trust continues to support him in his professional editorial role as Joint Editor in Chief of the European Society of Cardiology Textbook of Preventive Cardiology (2nd Edition) and in his other professional commitments at an international and national level to join scientific conferences and meetings. Professor Wood holds an Emeritus appointment as Professor of Cardiology at the National Heart and Lung Institute since February 1st 2019. Professor Wood was also appointed as Adjunct Professor of Preventive Cardiology to the University of Galway in 2017 and was appointed to a half time contract as Director of Research, Strategy and International Relations at the National Institute for Prevention and Cardiovascular Health on February 1st 2018 which is renewable annually.

The Trust has also supported some of the administrative costs of the research group and support for other academic staff to attend courses and conferences.

The Trust is continuing to support statistical analyses and publications of ASPIRE-3-PREVENT(A-3-P), which is part of the EUROASPIRE V survey (2016-18) conducted across 27 European countries under the auspices of the European Society of Cardiology with funding from several pharmaceutical companies. The principal results of the A-3-P coronary patient survey were published in Open Heart.

With the permission of the sponsors of ASPIRE-3-PREVENT this survey was extended to the Republic of Ireland with funding granted by the Trust to Croi, the Heart and Stroke charity in Galway. IRELAND-ASPIRE has the same objectives as ASPIRE-3-PREVENT and this new survey was completed in October 2019 and is now published in Open Heart. A one year follow-up of all patients has been undertaken to measure re-hospitalisations, procedures and mortality.

# THE PREVENTIVE CARDIOLOGY TRUST

## TRUSTEES' REPORT (CONTINUED)

### FOR THE YEAR ENDED 30 SEPTEMBER 2024

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The Trust is continuing to support statistical analyses and publications of ASPIRE-3-PREVENT(A-3-P), which is part of the EUROASPIRE V survey (2016-18) conducted across 27 European countries under the auspices of the European Society of Cardiology with funding from several pharmaceutical companies. The principal results of the A-3-P coronary patient survey were published in Open Heart and the high risk patient survey have now been accepted for publication in the same journal. With the permission of the sponsors of ASPIRE-3-PREVENT this survey was extended to the Republic of Ireland with funding granted by the Trust to Croi, the Heart and Stroke charity in Galway. IRELAND-ASPIRE had the same objectives as ASPIRE-3-PREVENT and this new survey was completed in October 2019 and is now published in Open Heart. A one year follow-up of all patients has been undertaken to measure re-hospitalisations, procedures and mortality.

A new research project called INTERCEPT, developed in response to the impact Covid-19 has had on cardiology services, and specifically cardiac rehabilitation, is now sponsored by NovoNordisk and more recently by Novartis. The objective of INTERCEPT is to bridge the preventive care of coronary patients from hospital to home with a nurse-led programme supported by a health application: IINTERCEPT-App. The I-App has been developed by a UK company, Citrus Suite, co-designed with a Croi patient group in Galway. A feasibility study of the I-App in terms of acceptability and usage has been undertaken in the Cardiac Care

Unit at Galway University Hospital and the results are being prepared for publication. An application to Transforming Health Care Systems, funded by the European Union and National Governments, has been made by NIPC to evaluate the impact of INTERCEPT on prevention of cardiovascular disease in 5 health care systems in Europe: Ireland, The Netherlands, Poland, Portugal and Turkey.

A EUROASPIRE VI survey has now been launched under the auspices of the European Society of Cardiology and as part of this 27 country survey the UK contribution will be made through ASPIRE-TO-ACTION, a UK survey of secondary and primary prevention of CVD in collaboration with national specialist societies with sponsorship from Novo Nordisk and Novartis. The Trust's annual prize to recognise outstanding contributions by members of staff in the NHS Department of Cardiology and the academic department of Cardiovascular Medicine at Charing Cross campus and the Hammersmith Hospital campus was awarded to Dr Marwa Said in recognition of her outstanding achievement and contribution to the portfolio of postgraduate programmes in preventive medicine and cardiovascular health at the University of Galway and National Institute for Prevention and Cardiovascular Health.

The Trust's annual prize to recognise outstanding contributions by members of staff in the NHS Department of Cardiology and the academic department of Cardiovascular Medicine at Charing Cross campus and the Hammersmith Hospital campus was awarded to Irene Gibson for outstanding achievement and contribution to the area of cardiovascular health at Croi and National Institute for Prevention and Cardiovascular Health.

#### Financial review

The fund balance at the year end amounted to £64,376. As the plans for the future relate to these funds, the Trustees consider this to be satisfactory, although funding is required to cover general costs of the charity. It is the policy of the Trustees to accumulate sufficient funds within reserves to allow the Trust to continue to operate during the period between expenditure being incurred and agreed support received. In summary the Trust continues to support research and practice in the prevention of coronary heart disease and other forms of heart and vascular disease by supporting Professor Wood and his staff in their professional, scientific and clinical roles. The results of the EUROASPIRE V, ASPIRE-3-PREVENT and I-

ASPIRE surveys, supported by the Trust, will be a continuing stimulus to raise standards of evidence based care in secondary and primary prevention of cardiovascular disease. The INTERCEPT project will bridge preventive care for coronary patients from the point of hospital discharge to joining a cardiac rehabilitation programme and will be further evaluated in a randomised controlled trial. The EUROASPIRE VI survey is now launched and will include ASPIRE-TO-ACTION as the UK contribution to this European study of secondary and primary prevention of CVD.

It is the policy of the Trustees to accumulate sufficient funds within reserves to allow the Trust to continue to operate during the period between expenditure being incurred and agreed support received.

# THE PREVENTIVE CARDIOLOGY TRUST

## TRUSTEES' REPORT (CONTINUED)

### FOR THE YEAR ENDED 30 SEPTEMBER 2024

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In summary the Trust continues to support research and practice in the prevention of coronary heart disease and other forms of heart and vascular disease by supporting Professor Wood and his staff in their professional, scientific and clinical roles. The results of the EUROASPIRE V, ASPIRE-3-PREVENT and I-ASPIRE surveys, supported by the Trust, will be a continuing stimulus to raise standards of evidence based care in secondary and primary prevention of cardiovascular disease. The INTERCEPT project will bridge preventive care for coronary patients from the point of hospital discharge to joining a cardiac rehabilitation programme and will be further evaluated in a randomised controlled trial. The EUROASPIRE VI survey is now launched and will include ASPIRE-TO-ACTION as the UK contribution to this European study of secondary and primary prevention of CVD.

The trustees have assessed the major risks to which the trust is exposed, and are satisfied that systems are in place to mitigate exposure to the major risks.

#### Plans for future periods

The Trust aims to continue raising funds to support further research into the causes and prevention of CVD. The main activities of the Trust in the coming year are to support academic staff in all their research activities. This will include the publication of new scientific papers from the Vth EUROASPIRE survey in hospital and primary care including ASPIRE-3-PREVENT, and IRELANDASPIRE. With the completion of the INTERCEPT feasibility study of the acceptability and usage of the I-App at Galway University Hospital in December 2023 the next step is to evaluate the impact of INTERCEPT in CVD prevention in 5 European countries subject to a funding application to THCS-EU. The ASPIRE-TO-ACTION project will be the UK contribution to EUROASPIRE VI which was officially launched by the European Society of Cardiology in October 2023. The hospital phase of ASPIRE-TO-ACTION/ EUROASPIRE VI will be undertaken over the period 2023-25.

Dr Susan Connolly, one of the Trustees moved positions to take up a Consultant cardiologist post in Galway University Hospital Ireland in 2022. She will be leading on the development of a new regional integrated cardiovascular prevention/ rehabilitation service in the West of Ireland serving a population area of 450,000. The model of care will align with the models implemented previously (MyAction Westminster and Our Hearts Our Minds in Northern Ireland).

#### Structure, governance and management

The Preventive Cardiology Trust was created, and is governed by its Trust Deed dated 10 May 1989 and subsequent Deeds of Variation 15 December 1998 and 25 November 2003.

The Trustees are appointed by the Board of Trustees on the basis of their skill and experience in areas relevant to the Trust's aims and objectives. The Trust Deed provides for a minimum of 3 Trustees and a maximum of 15 Trustees. Training for the Trustees will be arranged as and when it is deemed necessary. All decisions affecting the Trust are taken by the Trustees, whilst the administrator is responsible for the day to day management of the Trust.

The Trustees have examined the major strategic, business and operational risks which the Trust faces and confirm that systems have been established to enable regular reports to be produced so that the necessary steps can be taken to lessen the risks.

The trustees who served during the year and up to the date of signature of the financial statements were:

Professor G De Backer

Dr S Connolly

Dr J Jones

Professor K Kotseva

Professor D Wood

# THE PREVENTIVE CARDIOLOGY TRUST

## TRUSTEES' REPORT (CONTINUED)

***FOR THE YEAR ENDED 30 SEPTEMBER 2024***

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The trustees' report was approved by the Board of Trustees.



Professor G De Backer

Date: 28<sup>th</sup> July 2025

# THE PREVENTIVE CARDIOLOGY TRUST

## INDEPENDENT EXAMINER'S REPORT

### TO THE TRUSTEES OF THE PREVENTIVE CARDIOLOGY TRUST

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I report to the trustees on my examination of the financial statements of The Preventive Cardiology Trust (the trust) for the year ended 30 September 2024.

#### **Responsibilities and basis of report**

As the trustees of the trust you are responsible for the preparation of the financial statements in accordance with the requirements of the Charities Act 2011.

I report in respect of my examination of the trust's financial statements carried out under section 145 of the Charities Act 2011. In carrying out my examination I have followed the Directions given by the Charity Commission under section 145(5)(b) of the Charities Act 2011.

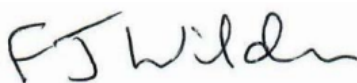
#### **Independent examiner's statement**

Your attention is drawn to the fact that the charity has prepared the financial statements in accordance with the relevant version of the Statement of Recommended Practice applicable to charities preparing their financial statements in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) in preference to the Accounting and Reporting by Charities: Statement of Recommended Practice issued on 1 April 2005 which is referred to in the extant regulations but has now been withdrawn. I understand that this has been done in order for the financial statements to provide a true and fair view in accordance with UK Generally Accepted Accounting Practice.

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

- 1 accounting records were not kept in respect of the trust as required by section 130 of the Charities Act 2011.
- 2 the financial statements do not accord with those records; or
- 3 the financial statements do not comply with the applicable requirements concerning the form and content of financial statements set out in the Charities (Accounts and Reports) Regulations 2008 other than any requirement that the financial statements give a true and fair view, which is not a matter considered as part of an independent examination.

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



#### **F J Wilde FCCA MBA DChA**

Warner Wilde  
4 Marigold Drive  
Bisley  
Surrey  
GU24 9SF  
Date: 28<sup>th</sup> July 2025



# THE PREVENTIVE CARDIOLOGY TRUST

## STATEMENT OF FINANCIAL ACTIVITIES INCLUDING INCOME AND EXPENDITURE ACCOUNT

**FOR THE YEAR ENDED 30 SEPTEMBER 2024**

	Notes	Unrestricted funds 2024 £	Restricted funds 2024 £	Total 2024 £	Unrestricted funds 2023 £	Restricted funds 2023 £	Total 2023 £
<b>Income from:</b>							
Charitable activities	3	38,324	23,470	61,794	9,977	164,447	174,424
Investments	4	1,012	-	1,012	591	-	591
<b>Total income</b>		39,336	23,470	62,806	10,568	164,447	175,015
<b>Expenditure on:</b>							
Charitable activities	5	66,946	66,102	133,048	-	96,786	96,786
<b>Total expenditure</b>		66,946	66,102	133,048	-	96,786	96,786
<b>Net income/(expenditure)</b>		(27,610)	(42,632)	(70,242)	10,568	67,661	78,229
Transfers between funds		27,657	(27,657)	-	-	-	-
<b>Net movement in funds</b>	8	47	(70,289)	(70,242)	10,568	67,661	78,229
<b>Reconciliation of funds:</b>							
Fund balances at 1 October 2023		16,083	110,982	127,065	5,515	43,321	48,836
<b>Fund balances at 30 September 2024</b>		16,130	40,693	56,823	16,083	110,982	127,065

The statement of financial activities includes all gains and losses recognised in the year. All income and expenditure derive from continuing activities.

# THE PREVENTIVE CARDIOLOGY TRUST

## BALANCE SHEET

AS AT 30 SEPTEMBER 2024

	Notes	2024 £	£	2023 £	£
<b>Current assets</b>					
Debtors	11	10,000		42,338	
Cash at bank and in hand		54,376		91,610	
		<u>64,376</u>		<u>133,948</u>	
<b>Creditors: amounts falling due within one year</b>	12	(7,553)		(6,883)	
<b>Net current assets</b>			<u>56,823</u>		<u>127,065</u>
<b>The funds of the trust</b>					
Restricted income funds	13		40,693		110,982
Unrestricted funds	14		16,130		16,083
			<u>56,823</u>		<u>127,065</u>

The financial statements were approved by the trustees on 28<sup>th</sup> July 2025

  
Professor G De Backer

# THE PREVENTIVE CARDIOLOGY TRUST

## NOTES TO THE FINANCIAL STATEMENTS

### FOR THE YEAR ENDED 30 SEPTEMBER 2024

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#### 1 Accounting policies

##### Charity information

The Preventive Cardiology Trust is a charity constituted by a trust deed dated 10 May 1989, amended by deeds of variation December 1998 and November 2003.

##### 1.1 Accounting convention

The financial statements have been prepared in accordance with the trust's governing document, the Charities Act 2011, FRS 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland" ("FRS 102") and the Charities SORP "Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102)" (effective 1 January 2019). The trust is a Public Benefit Entity as defined by FRS 102.

The trust has taken advantage of the provisions in the SORP for charities not to prepare a Statement of Cash Flows.

The financial statements have departed from the Charities (Accounts and Reports) Regulations 2008 only to the extent required to provide a true and fair view. This departure has involved following the Statement of Recommended Practice for charities applying FRS 102 rather than the version of the Statement of Recommended Practice which is referred to in the Regulations but which has since been withdrawn.

The financial statements are prepared in sterling, which is the functional currency of the trust. Monetary amounts in these financial statements are rounded to the nearest £.

The financial statements have been prepared under the historical cost convention. The principal accounting policies adopted are set out below.

##### 1.2 Going concern

At the time of approving the financial statements, the trustees have a reasonable expectation that the trust has adequate resources to continue in operational existence for the foreseeable future. Thus the trustees continue to adopt the going concern basis of accounting in preparing the financial statements.

##### 1.3 Charitable funds

Unrestricted funds are available for use at the discretion of the trustees in furtherance of their charitable objectives.

Restricted funds are subject to specific conditions by donors or grantors as to how they may be used. The purposes and uses of the restricted funds are set out in the notes to the financial statements.

Endowment funds are subject to specific conditions by donors that the capital must be maintained by the trust.

##### 1.4 Income

Income is recognised when the trust is legally entitled to it after any performance conditions have been met, the amounts can be measured reliably, and it is probable that income will be received.

Cash donations are recognised on receipt. Other donations are recognised once the trust has been notified of the donation, unless performance conditions require deferral of the amount. Income tax recoverable in relation to donations received under Gift Aid or deeds of covenant is recognised at the time of the donation.

Legacies are recognised on receipt or otherwise if the trust has been notified of an impending distribution, the amount is known, and receipt is expected. If the amount is not known, the legacy is treated as a contingent asset.

# THE PREVENTIVE CARDIOLOGY TRUST

## NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

FOR THE YEAR ENDED 30 SEPTEMBER 2024

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### 1 Accounting policies

(Continued)

#### 1.5 Expenditure

Expenditure is recognised once there is a legal or constructive obligation to transfer economic benefit to a third party, it is probable that a transfer of economic benefits will be required in settlement, and the amount of the obligation can be measured reliably.

Expenditure is classified by activity. The costs of each activity are made up of the total of direct costs and shared costs, including support costs involved in undertaking each activity. Direct costs attributable to a single activity are allocated directly to that activity. Shared costs which contribute to more than one activity and support costs which are not attributable to a single activity are apportioned between those activities on a basis consistent with the use of resources. Central staff costs are allocated on the basis of time spent, and depreciation charges are allocated on the portion of the asset's use.

#### 1.6 Cash and cash equivalents

Cash and cash equivalents include cash in hand, deposits held at call with banks, other short-term liquid investments with original maturities of three months or less, and bank overdrafts. Bank overdrafts are shown within borrowings in current liabilities.

#### 1.7 Financial instruments

The trust has elected to apply the provisions of Section 11 'Basic Financial Instruments' and Section 12 'Other Financial Instruments Issues' of FRS 102 to all of its financial instruments.

Financial instruments are recognised in the trust's balance sheet when the trust becomes party to the contractual provisions of the instrument.

Financial assets and liabilities are offset, with the net amounts presented in the financial statements, when there is a legally enforceable right to set off the recognised amounts and there is an intention to settle on a net basis or to realise the asset and settle the liability simultaneously.

##### **Basic financial assets**

Basic financial assets, which include debtors and cash and bank balances, are initially measured at transaction price including transaction costs and are subsequently carried at amortised cost using the effective interest method unless the arrangement constitutes a financing transaction, where the transaction is measured at the present value of the future receipts discounted at a market rate of interest. Financial assets classified as receivable within one year are not amortised.

##### **Basic financial liabilities**

Basic financial liabilities, including creditors and bank loans are initially recognised at transaction price unless the arrangement constitutes a financing transaction, where the debt instrument is measured at the present value of the future payments discounted at a market rate of interest. Financial liabilities classified as payable within one year are not amortised.

Debt instruments are subsequently carried at amortised cost, using the effective interest rate method.

Trade creditors are obligations to pay for goods or services that have been acquired in the ordinary course of operations from suppliers. Amounts payable are classified as current liabilities if payment is due within one year or less. If not, they are presented as non-current liabilities. Trade creditors are recognised initially at transaction price and subsequently measured at amortised cost using the effective interest method.

##### **Derecognition of financial liabilities**

Financial liabilities are derecognised when the trust's contractual obligations expire or are discharged or cancelled.

# THE PREVENTIVE CARDIOLOGY TRUST

## NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

FOR THE YEAR ENDED 30 SEPTEMBER 2024

### 1 Accounting policies

(Continued)

#### 1.8 Employee benefits

The cost of any unused holiday entitlement is recognised in the period in which the employee's services are received.

Termination benefits are recognised immediately as an expense when the trust is demonstrably committed to terminate the employment of an employee or to provide termination benefits.

### 2 Critical accounting estimates and judgements

In the application of the trust's accounting policies, the trustees are required to make judgements, estimates and assumptions about the carrying amount of assets and liabilities that are not readily apparent from other sources. The estimates and associated assumptions are based on historical experience and other factors that are considered to be relevant. Actual results may differ from these estimates.

The estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognised in the period in which the estimate is revised where the revision affects only that period, or in the period of the revision and future periods where the revision affects both current and future periods.

### 3 Income from charitable activities

	Unrestricted funds 2024 £	Restricted funds 2024 £	Total 2024 £	Unrestricted funds 2023 £	Restricted funds 2023 £	Total 2023 £
<b>Charitable activities</b>						
Sale of goods	38,324	-	38,324	9,977	-	9,977
Performance related grants	-	23,470	23,470	-	164,447	164,447
	<u>38,324</u>	<u>23,470</u>	<u>61,794</u>	<u>9,977</u>	<u>164,447</u>	<u>174,424</u>

### 4 Income from investments

	Unrestricted funds 2024 £	Unrestricted funds 2023 £
Interest receivable	<u>1,012</u>	<u>591</u>

# THE PREVENTIVE CARDIOLOGY TRUST

## NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 30 SEPTEMBER 2024

### 5 Expenditure on charitable activities

	Charitable activities 2024 £	Charitable activities 2023 £
<b>Direct costs</b>		
My Action	364	120
Education, travel & conferences	50,570	41,653
Aspire-3-Prevent	2,613	-
Intercept	4,661	39,237
Subscriptions	2,366	4,442
Aspire-2-Action	58,464	-
	<u>119,038</u>	<u>85,452</u>
Grant funding of activities (see note 6)	4,295	1,384
<b>Share of support and governance costs (see note 7)</b>		
Support	7,991	6,679
Governance	1,724	3,271
	<u>133,048</u>	<u>96,786</u>
<b>Analysis by fund</b>		
Unrestricted funds	66,946	-
Restricted funds	66,102	96,786
	<u>133,048</u>	<u>96,786</u>

### 6 Grants payable

	Charitable activities 2024 £	Charitable activities 2023 £
Grants to institutions:		
Other	4,295	1,384
	<u>4,295</u>	<u>1,384</u>

# THE PREVENTIVE CARDIOLOGY TRUST

## NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 30 SEPTEMBER 2024

### 7 Support costs allocated to activities

	2024 £	2023 £
Administration	7,991	8,312
Governance costs	1,724	1,638
	<u>9,715</u>	<u>9,950</u>

#### Analysed between:

Charitable activities	<u>9,715</u>	<u>9,950</u>
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#### Governance costs comprise:

	2024 £	2023 £
Independent examiner fees	1,724	1,638
	<u>1,724</u>	<u>1,638</u>

### 8 Net movement in funds

	2024 £	2023 £
The net movement in funds is stated after charging/(crediting):		
Fees payable for the independent examination of the charity's financial statements	<u>1,724</u>	<u>1,638</u>

### 9 Trustees

None of the trustees (or any persons connected with them) received any remuneration during the year, but three (2022: one) of them were reimbursed a total of £ £40,034 travelling expenses and £10,992 other (2023: one was reimbursed £ £19,283).

All travel was in relation to fulfilling the objects of the charity as approved by the board of Trustees and it is the policy of the Trust to reimburse travel insurance costs.

### 10 Taxation

The charity is exempt from taxation on its activities because all its income is applied for charitable purposes.

### 11 Debtors

	2024 £	2023 £
Amounts falling due within one year:		
Other debtors	<u>10,000</u>	<u>42,338</u>

# THE PREVENTIVE CARDIOLOGY TRUST

## NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 30 SEPTEMBER 2024

### 12 Creditors: amounts falling due within one year

	2024 £	2023 £
Accruals and deferred income	7,553	6,883

### 13 Restricted funds

The restricted funds of the charity comprise the unexpended balances of donations and grants held on trust subject to specific conditions by donors as to how they may be used.

	At 1 October 2023 £	Incoming resources £	Resources expended £	Transfers £	At 30 September 2024 £
Intercept	11,317	5,808	(4,661)	(12,464)	-
MyAction	19,665	-	(364)	(193)	19,108
Aspire-3-Prevent	-	-	(2,613)	2,613	-
Aspire-2-Action	80,000	17,662	(58,464)	(17,613)	21,585
	<u>110,982</u>	<u>23,470</u>	<u>(66,102)</u>	<u>(27,657)</u>	<u>40,693</u>

Previous year:	At 1 October 2022 £	Incoming resources £	Resources expended £	Transfers £	At 30 September 2023 £
Intercept	21,909	84,447	(95,040)	-	11,316
MyAction	19,984	-	(318)	-	19,666
Aspire-3-Prevent	1,428	-	(1,428)	-	-
Aspire-2-Action	-	80,000	-	-	80,000
	<u>43,321</u>	<u>164,447</u>	<u>(96,786)</u>	<u>-</u>	<u>110,982</u>

### 14 Unrestricted funds

The unrestricted funds of the charity comprise the unexpended balances of donations and grants which are not subject to specific conditions by donors and grantors as to how they may be used. These include designated funds which have been set aside out of unrestricted funds by the trustees for specific purposes.

	At 1 October 2023 £	Incoming resources £	Resources expended £	Transfers £	At 30 September 2024 £
General funds	16,083	39,336	(66,946)	27,657	16,130



# THE PREVENTIVE CARDIOLOGY TRUST

## NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

FOR THE YEAR ENDED 30 SEPTEMBER 2024

### 14 Unrestricted funds (Continued)

Previous year:	At 1 October 2022	Incoming resources	Resources expended	Transfers	At 30 September 2023
	£	£	£	£	£
General funds	5,515	10,568	-	-	16,083

### 15 Analysis of net assets between funds

	Unrestricted funds 2024 £	Restricted funds 2024 £	Total 2024 £
<b>At 30 September 2024:</b>			
Current assets/(liabilities)	16,130	40,693	56,823
	16,130	40,693	56,823
	Unrestricted funds 2023 £	Restricted funds 2023 £	Total 2023 £
<b>At 30 September 2023:</b>			
Current assets/(liabilities)	16,083	110,982	127,065
	16,083	110,982	127,065

### 16 Related party transactions

#### Transactions with related parties

During the year the trust entered into the following transactions with related parties:

One trustee received reimbursement of interest charges on a credit card used solely for charitable expenditure and reimbursement of travel insurance costs.