# Annual report and financial statements

for the year ended 31 March 2019



# PROSTATE Cancer uk



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# Overview of the year

This financial year marks the end of the third full year since we launched our ambitious strategy to tame prostate cancer; a great time to reflect on and evaluate our progress so far.

We have taken stock of our many achievements over the last few years, and the changes to the prostate cancer landscape, and assessed where we should refocus our energy in future. We identified three key areas to prioritise over the coming years: diagnosing prostate cancer early, diagnosing it accurately, and ensuring men get more effective treatments.

We've already laid firm foundations for our new strategic focus this year. In particular, we're working with a panel of clinicians, key NHS figures and the University of Sheffield School of Health And Related Research (ScHARR) to explore the potential for various diagnostic pathways to be used for prostate cancer screening in the UK. We're also extremely pleased to have renewed funding for both the London and Belfast-Manchester Movember Centres of Excellence, following a full review with our partners at the Movember Foundation. We look forward to seeing more breakthroughs reported from these Centres in the coming year, as they work to capitalise on the best ideas and the prostate cancer research excellence they've established.

This year's funding of Research Innovation Awards helped us hit another milestone, as our research investment to date topped the £50 million mark. Some of the highlights from this year's programme include Professor Paula Mendes at the University of Birmingham, who is reinventing the PSA test to improve diagnosis, and Dr Gunnel Hallden at Queen Mary University of London, who is testing the use of a cancer-killing virus as a treatment for advanced prostate cancer. You can read more about this, and other ground breaking research we are funding, later in this report.

Once research breakthroughs are identified, we step into action to ensure those developments reach men as quickly as possible. This year, our efforts to give as many men as possible access to pre-biopsy mpMRI have been hugely successful. Measurements in June 2018 suggest that 50 per cent of men had access to this imaging technology to support their diagnosis, up from only 30 per cent in October 2016, and we know that the roll-out has continued since then towards our target of access for every man facing prostate cancer.



We've worked with men and health professionals to reach a consensus on exactly how active surveillance should be offered and carried out for men whose cancer does not need immediate radical treatment. We successfully published this work in the British Journal of Urology International in March.

Our work to support men day in, day out has reached record levels, with more contacts with our Specialist Nurses and more people accessing our award-winning health information than ever before. You can read more highlights from all of our support and influencing activity further on in this report.

Our audience-led approach to engagement, and our commitment to communicating with people in ways that are most appropriate and interesting to them, means that this year we have ranked highest amongst UK charities for improving public perception. This has undoubtedly contributed to another fantastic year of income growth, which will allow us to invest in even more life-changing research in the years ahead, as we step boldly into the next phase of our strategic development.

Finally, I can't end an account of this year's activities without saying an enormous thank you to all our fantastic supporters for everything you've done over the last 12 months. We've made some huge strides towards taming prostate cancer and we couldn't have achieved any of this without you. Together we will stop prostate cancer being a killer and make it something the next generation need not fear. Men, we are with you.

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Angela Culhane, Chief Executive

### A message from our Chairman

This has been another remarkable year for Prostate Cancer UK, and I am, as ever, extremely proud to Chair the Board of such a dynamic and ambitious organisation. The passion and commitment that every member of staff, and each and every volunteer, brings to our work makes this organisation what it is, and translates an organisational ambition into real change for men.

Of course, none of this would be possible without the generosity and dedication of our supporters. Their tireless fundraising and championing of our cause has helped keep prostate cancer high on the national agenda over another year.

But despite the progress we've made, we know we have a long way still to go. Now is not the time to rest on our laurels. Instead, it's time to marshal our forces to continue to deliver meaningful, real-life changes to men with or at risk from prostate cancer. To do that, we need to continue fundraising, continue inspiring and continue challenging ourselves and others to do ever more, ever better.

That's where we really expect our new strategic focus to help; making sure that we concentrate our ambition on the areas we can have the biggest impact, and deliver the results that men need.

As Chairman of the Board, I've had the pleasure of working alongside my fellow Trustees this year, all of whom are dedicated to stopping prostate cancer being a killer, and reducing the harm caused by this disease. It's been an honour to work with such a talented group of individuals.



It's extremely important to us that in striving to reach our goals, our standards of governance, accountability and transparency remain high. This is not simply to remain compliant with regulations, although that's obviously important, but to ensure that we are fully deserving of the trust that our supporters and the public place in us. The success of this is demonstrated by our firstplace ranking among UK charities for improved public perception this year.

Thank you to everyone who has helped us to deliver some impressive results this year. I am confident that with your continued support, we will continue to make strides towards stopping prostate cancer being a killer.

CM Jacke

**Charles Packshaw, Chairman** 

### **Trustees' Annual Report**

The Trustees are pleased to present this year's Annual Report, which includes the strategic report. This highlights the charity's key achievements during the year and provides insight into our main objectives and strategy.

### **Investing in pioneering research**

#### Research trials: from the RAF to the clinic

In November 2013, Nick, an ex-RAF engineer officer, was enjoying a well-earned retirement with his wife when he was diagnosed with advanced prostate cancer.

"They initially put me onto hormone therapy, which I bumbled along on for quite a long time. But in early 2016 my consultant told me the therapy was no longer controlling the cancer and I moved onto enzalutamide for just over a year, until that eventually stopped working too. She then said, 'we've got chemo, or there's another option, you can go on a trial.' I said yes, I was all for it."

Thanks to his background in the RAF, Nick was no stranger to trials, even if they weren't clinical.

"I was a trials officer on helicopters back in the 1970s, and in my last years of service and after I retired I was doing trials on military explosives."

Clinical trials are the last of many stages to take research from the lab to clinical practice. They aim to rigorously prove whether new treatments or procedures can really help men, and for this, they need numbers.

# 6

I know from my background that people doing trials must have data – a lot of data. Without it, you may start blundering down the wrong path. So I was more than happy to embark on the trial.

#### Putting a STOP to ineffective chemotherapy

The trial Nick enrolled on was called CTC STOP, and it aimed to make chemotherapy more personalised for men like Nick, whose prostate cancer has spread to the bone and become resistant to hormone therapy.

Professor Johann de Bono led the trial, which was part of the work funded by the London Movember Centre of Excellence, in partnership with Prostate Cancer UK. "We have several kinds of chemotherapy to treat prostate cancer at this stage," he explained, "but they don't all work forever, or all work the same for different men."

"The trouble is, it's not easy to tell when these drugs are, or aren't, working. This means men are wasting precious time on treatments that are no longer giving them any benefit, while other drugs that could help, sit on the shelf unused."

In this trial, the team tested a new method to tell whether or not a treatment is working – by measuring the number of 'circulating tumour cells', or CTCs, in men's blood. CTCs are cells that have escaped from the prostate cancer into the bloodstream. Importantly, the team have discovered that when a cancer is responding well to treatment, numbers of CTCs in the blood drop.

By monitoring CTC levels during men's chemotherapy treatment, the team hope they can be quicker to react when a treatment stops working, and get them onto the next type of therapy.

"There were two sides to the trial," Nick said. "In one group, the researchers know what your CTC count is, and change treatments accordingly. In the other they don't, so they could compare results and work out if using CTC counts to inform treatment choices is beneficial. I'm on the half where we were given the information, so as we went along they could tell me what my CTC count was."

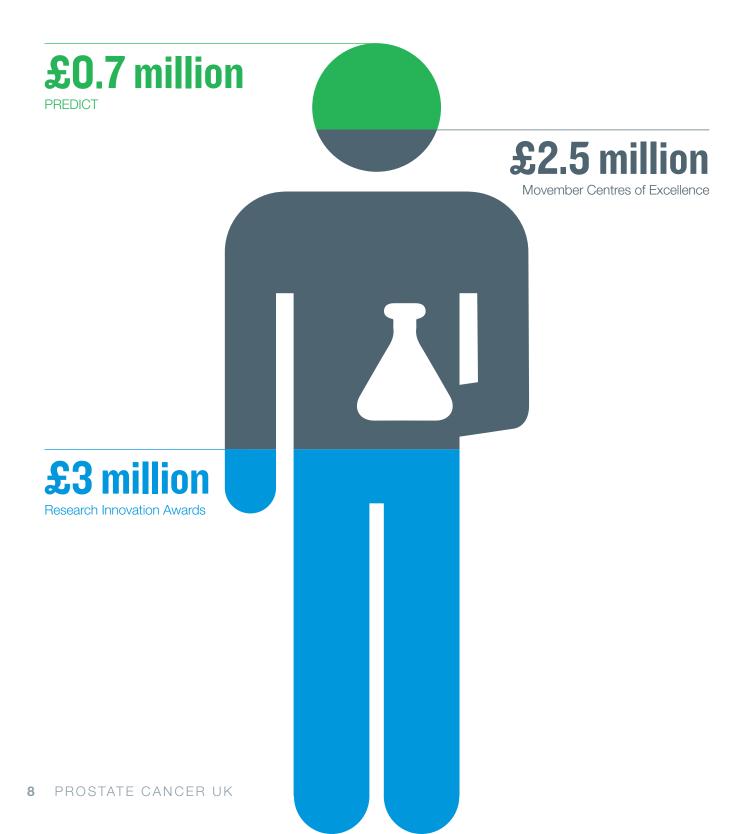


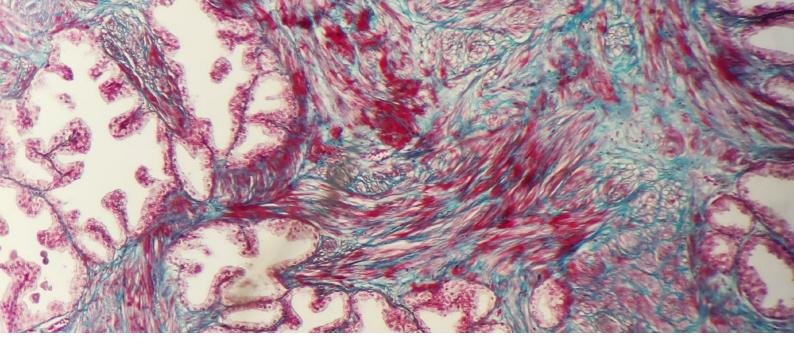
### Benefits to men today, and to men in the future

"The team are extremely good. They're obviously highly qualified, and kept me informed along the way. I went as far as nine cycles on docetaxel chemotherapy. Then I was warned by the research team that things weren't so good, and I should go onto the next stage of chemo in the trial, which was cabazitaxel. If I hadn't been taking part in CTC STOP, I may have continued to be treated with docetaxel when another drug would have been more helpful. As it happens, the team stopped my treatment with cabazitaxel after two cycles as my CTC count indicated it was not working. I have now entered a trial of a radionuclide therapy, which delivers radiation directly to tumours to kill them."

Nick has access to cutting edge ways of treating prostate cancer, that may very well improve his outcome and he's contributing to research that will help future generations of men. 6

Being on a trial doesn't necessarily mean you'll see any additional benefit yourself – although in my case they used it to take me off one chemo onto another – but somebody further down the line will. This year we've invested over  $\pounds 6.2$  million into pioneering prostate cancer research, as we once again raise the bar on our understanding of the disease, and how to stop it.





### **Research Innovation Awards**

As part of this investment, we funded eight Research Innovation Awards. These grants support novel, ground breaking research from across our research strategy. This year was extremely competitive, and we received 50 applications from across the country. After detailed assessment by external peer reviewers and our expert Research Advisory Committee, we awarded the top eight grants, detailed below, the sum of which is £3 million.

PRINCIPAL INVESTIGATOR	PROJECT TITLE	INSTITUTE	COST	STRATEGIC PRIORITY
Professor David Carling	Targeting the calcium/calmodulin-dependent protein kinase kinase 2 and AMP-activated protein kinase pathways in prostate cancer.	Imperial College London	£235,582	Better Treatment
Dr Stephen Tait	Targeting immunogenic cell death to better treat prostate cancer.	University of Glasgow	£241,508	Better Treatment
Dr Gunnel Hallden	Coating and modification of a prostate-selective oncolytic adenovirus to enable systemic delivery, eliminate metastases and induce tumour immunity.	Queen Mary University of London	£244,620	Better Treatment
Professor Hashim Ahmed	CHRONOS – Comparative Health Research Outcomes of NOvel Surgery in prostate cancer.	Imperial College London	£485,966	Better Treatment
Professor Johann de Bono	Identifying and validating actionable targets to block androgen receptor splicing.	Institute of Cancer Research	£516,492	Better Treatment
Professor Charlotte Bevan	Delineating mechanisms of post-transcriptional regulation of wild-type and variant androgen receptors in prostate cancer for therapeutic intervention.	Imperial College London	£593,128	Better Treatment
Dr Amanda Swain	Preclinical genetic modelling of advanced prostate cancer in response to therapy.	Institute of Cancer Research	£474,465	Better Treatment
Professor Paula Mendes	Development and validation of a synthetic sugar recognition technology for prostate cancer risk stratification.	University of Birmingham	£274,945	Better Diagnosis



### Investing in research to improve prostate cancer diagnosis

Improving the diagnostic pathway for prostate cancer is one of Prostate Cancer UK's top priorities. We've been working on an initiative that will investigate the merits of new diagnostic tests in the clinic, which we hope will provide a more accurate diagnosis than PSA alone. We have brought together an incredible expert panel of clinicians and key NHS figures to work with us and the University of Sheffield School of Health And Related Research (ScHARR). This team will explore various potential diagnostic pathways which could ultimately lead to a screening programme for prostate cancer in the UK. This work, together with other emerging research, will help inform the trial we plan to run to ensure success via the best possible design. After rigorous assessment by our Scientific Committee – including international expert peer reviewers – we were given the green light to initiate planning for a clinical trial designed to help us test the performance of alternative tests to PSA. Our initial commitment of c.£700k is designed to fully interrogate the trial design to make sure it will get us the answers men need and, if so, will also provide the investment needed to open the clinical trial to ensure that it is possible to recruit men to it before potentially committing a larger amount to conduct a large scale (20,000 man) clinical trial.

### Movember Centres of Excellence

In 2014 the Movember Foundation and Prostate Cancer UK established the first ever Centres of Excellence for prostate cancer research in the UK. These Centres brought people together from different disciplines to tackle some of the biggest challenges in prostate cancer. With funding from the Movember Foundation, we awarded the two Centres approximately £10 million to conduct cuttingedge research over a period of five years. One of the Centres is a collaboration of London institutions, led by Professor Johann de Bono at the Institute of Cancer Research. The other Centre is a collaboration between Queen's University Belfast and The University of Manchester, and is led by Professors David Waugh, Joe O'Sullivan, Rob Bristow, Noel Clarke and Richard Marais.

Both Centres have been extremely productive since their launch, and produced high profile publications. In addition to the establishment of a number of clinical trials and early stage discoveries, they have provided an excellent training environment for junior researchers, attracted influential prostate cancer research programs to the UK and drawn in experienced researchers from other disciplines.

The original five-year programme ended in 2018, and both Centres submitted detailed proposals to extend their activity. An independent panel of internationally leading prostate cancer researchers assessed these proposals alongside an evaluation of their progress to date. The panel was unanimous in their support for both groups, praising all that they had achieved since their inception.

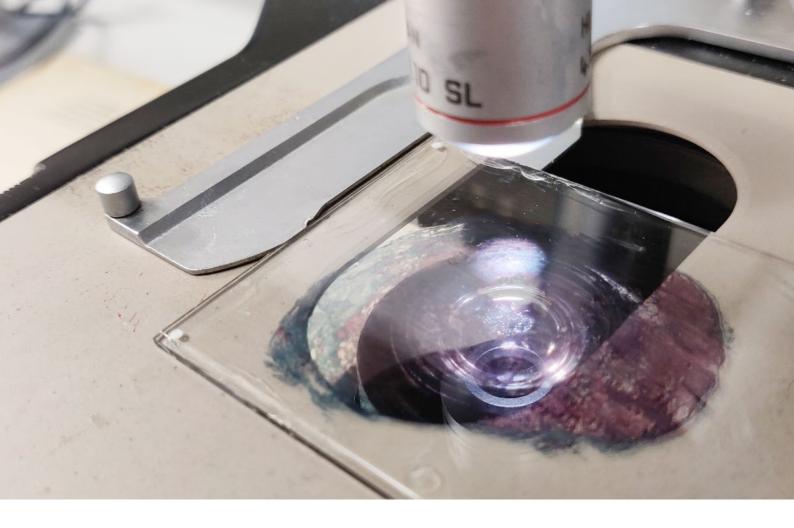


Therefore, we agreed that both Centres will receive a two- to three-year extension to their programmes, with a total of £2.5 million in additional funding from the Movember Foundation. This will provide the opportunity to build on their successes to date and expand the existing body of work currently underway.

The London Movember Centre of Excellence will use the £1.25 million we awarded to continue their investigation into genetic signatures that can be used to identify men at high risk of aggressive disease and optimise treatment choices.

Meanwhile, The Belfast-Manchester Movember Centre of Excellence will use their £1.25 million award to better identify patients with high-risk disease at diagnosis, and to gain a greater understanding of the genetics and biology of the disease. This work aims to prevent recurrence and improve effectiveness of treatment most notably the use of radiation therapy.





### Fostering collaboration and sparking ideas

During the year, we held three significant research events that brought the research community together. We held two new Frontier Meetings, the first of which was to discuss the barriers preventing immunotherapies from being a successful treatment for prostate cancer. The second presented the evidence behind novel imaging modalities and discussed how they could be rolled out into routine practice. Finally, we also held our annual event for early career researchers, that aims to support and nurture the next generation of prostate cancer experts.

### Frontier Meeting: the immunology of prostate cancer

This event, held in June, brought together leading researchers from across the world, and from a variety of different disciplines, to discuss how the immune system might be involved in the development, prevention and treatment of prostate cancer. Recent successes in melanoma and blood cancers meant that immunotherapy became an overnight public sensation and a fascinating 'hot topic' for cancer researchers. However, whilst promising advances are coming through in other cancers, prostate cancer remains a tough nut to crack. Participants were tasked with identifying the main challenges for the delivery of effective immunotherapeutics for the treatment of the disease. The key outcome of the Frontier Meeting was the identification of five significant knowledge gaps, the addressing of which would accelerate progress and enable immunotherapy to become a clinical reality for men with prostate cancer. In 2019/20 we will launch a funding call for research proposals looking to address these five knowledge gaps. This will advance our understanding of prostate cancer immunology and so provide the rational framework for new immunotherapeutic approaches for treating prostate cancer.

### Frontier Meeting: breakthroughs in imaging technology

We held our September Frontier Meeting on imaging technologies in partnership with the NHS England specialist cancer diagnostics clinical reference group. The aim was to transform how NHS England commissions new diagnostic technologies, and identify the gaps in our understanding where further research is required before PSMA-PET and whole body MRI can be introduced into routine clinical practice. Following this meeting we have collaborated closely to establish a new policy proposition on the use of novel imaging approaches. We've also developed research proposals that will deliver the evidence needed for the future commissioning of these imaging modalities.

### Making Progress: nurturing the potential of early career researchers

We are very keen to develop and support future prostate cancer researchers. In October, we held our annual early career researcher networking event (Making Progress). This supports the development of junior researchers and provides a forum for them to present their research, establish collaborations and foster a career in prostate cancer research. This event had a focus on networking, which is vitally important for researchers who are just starting out in their careers. It will help them to expand their relationships with other researchers, institutions and funders – perhaps laying the foundations for future collaborations or allowing fresh ideas to develop in their research areas.



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Making Progress day was a stand-out meeting for me. It provided a unique opportunity to network with senior and early career researchers, all together in one room, to build new friendships and collaborations.

Dr Adam Sharp, Institute of Cancer Research



### Tissue stiffness, oxygen deprivation and modified viruses... just some of the advances in prostate cancer research this year

This year we've seen a number of exciting advances from the research we have supported.

Our funded research has been published in close to 100 scientific papers, and was cited 5,000 times in 2018. In addition to this, our funded research leveraged a further £6.7 million in follow-on funding in 2017 (reported during 2018/19). Together, these measures demonstrate the extent of our reach and impact within the research community.

Some of this research was reported in the national press, including work from Professor Ghulam Nabi at the University of Dundee, who has been investigating a new way to diagnose prostate cancer by measuring the stiffness of the prostate tissue. Using a novel imaging technology called ultrasound shear wave elastosonography, Professor Nabi was not only able to demonstrate that the tissue stiffness can be measured using ultrasound, but that it is also possible to distinguish between aggressive and nonaggressive variants of the disease. Based on this exciting preliminary data, Professor Nabi now intends to continue his research to provide the evidence needed to support the use of this technology in routine practice.

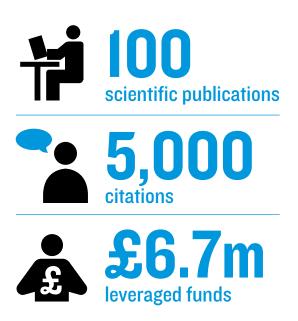
Each year, over 8,500 men receive radiotherapy to treat their prostate cancer, however unfortunately for a number of men the cancer returns. Professor Ananya Choudhury from the University of Manchester has been investigating whether this is due to resilient cancer cells that thrive in extremely low levels of oxygen, and continue to grow and spread even after radiation treatment. Professor Choudhury and her team have created a test to identify those men with low oxygen tumours, thereby revealing who may benefit from taking oxygen-boosting drugs that could improve the effectiveness of their radiotherapy treatment. This test is now being validated in patient samples and the group plan to advance into Phase III trials very shortly.



### Professor Ananya Choudhury, University of Manchester

Back in the lab, Dr Gunnel Hallden and her team from Queen Mary University of London have modified a virus to have the capability of killing prostate cancer cells. We supported Dr Hallden in 2012 with a PhD Studentship, and this year we awarded her a Research Innovation Award to continue this exciting research. She has so far used prostate cancer cell models to demonstrate that combining her artificially altered virus with chemotherapy can effectively and selectively kill the cancer cells. It also increases sensitisation to treatment, and reverses resistance to existing prostate cancer therapies. Dr Hallden will continue to refine this altered virus to increase the doses that can reach the cancer, and will optimise this approach so that it is ready to be tested in clinical studies within the next five years.

### This year, our funding led to:



### Supporting men, driving change

We are determined to ensure that men can get the best available treatment, care and support wherever they live and whatever their background. We do this by supporting men and their families directly, and by driving change in the way that care is delivered, as well as influencing government policy and the way resources are allocated. We take a flexible approach, directing our resources to where they are most needed based on our knowledge of care delivery, and men's experiences across the UK.

### Supporting men

### In 2018/19 there were:

**More** contacts to our Specialist Nurses:

More unique views to health information pages: More publications distributed:



15,356	
contacts	





**1.55 million** unique views





**675,100** publications distributed



More unique views to online self-management guides:



272,000 unique page views

up more than 100 per cent on 2017/18



Our clinical and information services continue to empower men to make informed decisions and demystify prostate cancer for those who have questions that need to be answered.



# I didn't feel I was silly to be asking the questions or to be worrying, and the answers put my mind at ease.

### **Caller to the Specialist Nurses**

There were 15,356 contacts to our Specialist Nurses in the year, 11 per cent up on 2017/18 and our highest ever total number of contacts. More people also visited the health information pages on our website; we had 1.55 million unique visitors, up from 1.46 million in 2017/18. In addition, we distributed 675,100 printed publications, a rise of 18 per cent on last year. The increased use of our services was at least partly driven by strong media coverage of prostate cancer in the early part of the year, resulting in higher awareness levels which were maintained through the year.

Our evaluation measures highlight that our Specialist Nurses are immensely valued by those who use them. The significant increase in those contacting us for emotional support this year underlines the benefit of the service we offer, with contacts increasing across all routes (phone, live chat and email). G

You have been my absolute saviours. Without you I wouldn't have any answers, I'd feel completely lost. You're a lifeline.

#### **Caller to the Specialist Nurses**

Feedback on our online information has given us a clearer picture of its benefit; 94 per cent of visitors found our information either useful or very useful. Our online self-management guides, launched last year, also continue to be well used with over 272,000 unique page views this year, more than double last year's number. We've continued to research areas of unmet information need, this year looking at the needs of partners and families of men with prostate cancer, as well as trans women.

Support groups are an important resource for men diagnosed with prostate cancer. We support independent groups with advice, resources, training and small grants. We continue to look for ways to ensure that everyone can benefit from the support of others who have experience of prostate cancer. This year we have been building our understanding of the support needs of men on active surveillance and of partners of men with advanced cancer, so that we can develop targeted peer support in these areas.

### **Driving change**

### Growing awareness

Until a screening programme is in place, one of the best ways we can influence earlier diagnosis is by making sure men at higher risk of prostate cancer are aware of that increased risk. We have been running a major campaign - Stronger Knowing More - to alert black men to their increased risk of prostate cancer. 1 in 4 black men will get prostate cancer in their lifetime, compared to 1 in 8 in the population as a whole. Our analysis shows that black men's awareness of their risk and use of our services has increased during the campaign, but we are not satisfied that this is at the level it should be yet – awareness is still below the level of other higher risk groups. We are still running short bursts of the campaign but also working to get the messages into our mainstream activity in order to reach more men.

#### Improving access to accurate diagnoses

Our activity to ensure all men have access to a highquality multiparametric MRI (mpMRI) scan before a biopsy made great progress this year. Half way through the year we established that over 50 per cent of men in the UK were getting high quality mpMRI scans before biopsy compared to around 30 per cent when we started our focus on mpMRI. Most Cancer Alliances and Health Boards who don't have this fully in place have work in progress to achieve it. We are

# Black man over 45?

You have an increased risk of prostate cancer.



now working to make sure that the remaining few areas without plans are supported to offer men this more accurate form of diagnosis.

We continued to support the roll-out by offering training to almost 200 radiologists that we developed in collaboration with the Royal College of Radiologists, and enabling the development of a quality assurance system. We were instrumental in the draft NICE guidelines for prostate cancer, published in December, fully endorsing the use of mpMRI.

### UK availability of mpMRI



### Working to get men access to the right treatment for them

This year, we completed our review of the use of active surveillance in the prostate cancer pathway. Active surveillance is a structured approach used to monitor men with low risk disease who may be able to safely avoid treatment. Working with men and with leading clinicians and researchers, we achieved consensus on exactly how active surveillance should be offered and carried out, and published this in the British Journal of Urology International in March. We have been developing training and health information resources alongside this which will now be rolled out to help ensure that all men get this high standard of care.

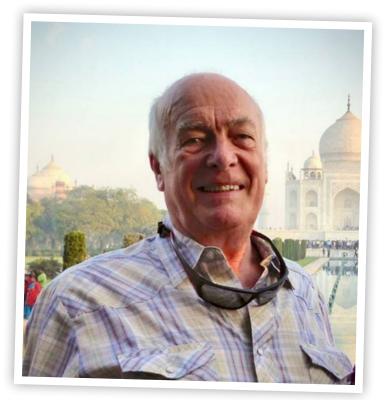
We've been working hard to get new treatments to men and have been trialling new approaches to making sure men's voices are heard through the processes that NICE run. We have also started to develop a way to plug gaps in evidence that NICE identifies. Our work aims to identify which men with newly diagnosed metastatic prostate cancer are most likely to benefit from abiraterone to make a strong case for why this should be made available on the NHS for these men.

### Active surveillance and me: Allan's story

Allan was diagnosed in November 2009 following a PSA test. "After talking to the consultant and doing some reading I decided that active surveillance seemed like the best option for me. At the time I had a Gleason score of six, so I was low risk. In the end I was on active surveillance for three years before having a prostatectomy once my cancer progressed.

"Having a good relationship with my urologist gave me a lot of confidence in the process. I felt I was monitored very closely, with consultations every three months for the first year, so if something did start to happen, it would be picked up quite quickly and action could be taken. And in the event, that's what happened.

"However my experience didn't start off as smoothly as it could have. At first I wasn't offered all the information I needed about my cancer or made aware of all the treatment options. Also, initially the telephone number I was given for a nurse by my hospital wasn't always answered.



Allan Higgin



That's why the work Prostate Cancer UK has been leading in this area is so important, as it highlights just how important it is that all men choosing active surveillance get adequate information and support right from the start.

"Having active surveillance is a very individual decision and it's a shame others don't get the same reassurance that I ultimately had. I'm pleased that much of my good experience is reflected in the new protocols. I hope they will help end the variation in treatment and information provision and make everything less grey and woolly."

### Promoting care that works for men

We've been leading eight major projects across the UK under the Movember-funded True NTH programme, which tackle critical areas of prostate cancer care. We're using the findings to roll out improvements more widely across the UK. So far, we have had considerable success in promoting one of these projects in particular; the Supported Self-Management model of care. This enables men to have a level of treatment follow up that's personalised to their needs and degree of risk, enabling them to access high quality support while avoiding unnecessary hospital appointments. We are currently working on implementing this approach with: six Cancer Alliances that between them cover 46 NHS Trusts; three NHS Trusts directly; seven Health Boards across Wales; and one Scottish Cancer Network. Five NHS Trusts have already initiated the pathway for patients.

### Working with health professionals

We're working to ensure that every man with prostate cancer has access to the expertise of nurse specialists throughout their treatment and care, and in relation to their specific needs. Together with our expert advisory group, we've developed a career pathway into prostate cancer for those wishing to specialise. We have also developed commissioning guidelines to support funders and hospitals in their planning to meet future need.

We have continued to provide online education on our own platform and via other providers, with 797 health professionals taking a module which will help them provide better care. We continued our well regarded primary care masterclasses, but also started delivering sessions on prostate cancer and the use of the PSA test as part of wider GP conferences – this combined approach enabled us to reach 1,657 GPs during the year (2,434 healthcare professionals in total).

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It was very enlightening. I had very limited knowledge in this area and felt I had a better understanding. I now feel more prepared to help those with prostate problems more, aware of the services that are available and the technology that is changing the way procedures are happening.

Cambridge GP

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A really valuable day which will change my practice and have shared with colleagues.

**Brighton GP** 



A health professional masterclass in Bridgend

#### Improving standards of care

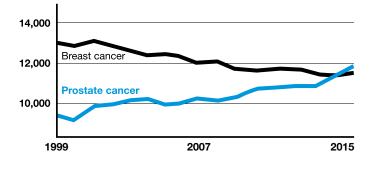
We have completed the Life After Prostate Cancer Diagnosis study, carried out by the Universities of Leeds and Belfast and funded by the Movember Foundation. The study aimed to determine the impact of prostate cancer on everyday life by directly asking UK men how their diagnosis and treatment have affected their physical health, mental and emotional wellbeing and social activities. 35,000 men responded, and this has provided a rich source of information, and a good understanding of how men's outcomes vary according to their stage of disease and treatment type, as well as by geographic area, age and other characteristics. A summary of the findings is available at **www.lifeafterprostatecancerdiagnosis.com/ news-and-updates/** 

We have updated our Best Practice Pathway across the whole of diagnosis, treatment and support for prostate cancer, with input and oversight from leading clinical experts. We have made this available to health professionals, and are developing plans to use it to improve care standards across the UK.

### Engaging people to tame prostate cancer

We have had another phenomenal year of growth. Following our biggest news story in 2018, that prostate cancer has overtaken breast cancer in the number of deaths each year, we were determined to keep prostate cancer high on the public agenda.

### PROSTATE CANCER DEATHS OVERTAKE THOSE FROM BREAST CANCER IN UK

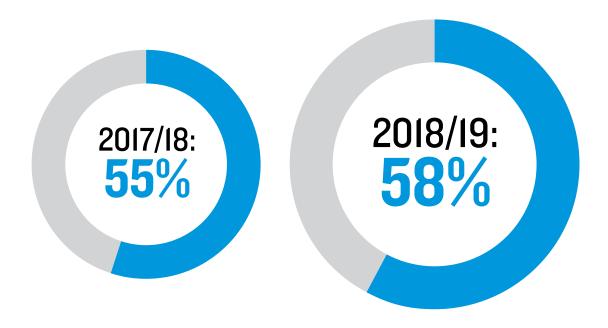


This national conversation about prostate cancer got the Westminster Government's attention, and was followed by an extra £10 million to deal with the dramatic increase in GP referrals to prostate cancer testing following the impact of Stephen Fry and Bill Turnbull talking publicly about their diagnoses.

Highlights like these have resulted in awareness measures growing, with a close link between public brand awareness and prostate cancer health awareness. Awareness measures peaked at 69 per cent following our CEO, Angela Culhane, appearing on BBC Breakfast News alongside Bill Turnbull in December 2018. At key moments throughout the year huge numbers of people visited our site, particularly the health information pages, and resulted in a record number of people contacting our Specialist Nurses.

We have also significantly increased awareness through targeted media investment. Key media partnerships with Sky Sports and talkSPORT, for example, have allowed us to dominate the men's health space in sport (particularly football and golf). Jeff Stelling and football managers on prime-time TV have continued to wear our badge with pride, in a show of solidarity for men.

### An increasing number of people know who we are, and what we stand for



### Learning more about our audience

Our work to learn more about people engaging with Prostate Cancer UK has enabled us to tailor our communications, reaching and appealing to people most likely to want to connect with us. We have focused hard on how to understand and improve the experience we offer people to develop more valued, personal relationships. We have learnt more about our brand, how it's perceived and what we need to do to better connect with people – including engaging with men and women more extensively beyond sport.

Our commitment to this has seen Prostate Cancer UK rank highest on brand tracker YouGov amongst UK charities for improving our public perception, and sit in the top five charities for Facebook fundraising.

### **Preparing for growth**

We defined our core brand philosophy – **Men, we are with you** – which will feature as part of our new brand campaign in May 2019 and throughout what we do and say. This is an evolution of some of our most effective messaging over the past few years. The brand campaign will launch this core messaging; celebrating men, and focusing on building an emotional connection to the cause, Prostate Cancer UK, and the scale of the issue, to help more people to get involved in the right activity for them.

By anticipating the increase in engagement, we've made sure that the technology behind the scenes isn't just robust and efficient but also people-focused. Through technology we will build more valued and trusted experiences based on individual needs, now and in the future. We want to make it easier to support, connect and inspire the people confronting prostate cancer and fighting for the cause.





Tony Collier and family, who shared their story in our Christmas fundraising appeal

### Growing our income

In 2017, we identified the need to raise significantly more income to meet our ambitious goal of taming prostate cancer. We have been carefully investing more into our fundraising efforts, like the March for Men walking programme, Gifts in Wills programme, Individual Giving and Community Fundraising.

We are pleased to report that our increased investment is starting to pay dividends as we have achieved another year of growth, with fundraising income showing a nine per cent increase on the previous year, reaching a total of £26.8 million.

In addition, the Movember Foundation has generously donated  $\pounds$ 3.6 million from their 2018 campaign, an increase of  $\pounds$ 0.5 million from the previous year.

None of this impressive growth would be possible were it not for our generous supporters and partners. We are incredibly grateful for all the support we receive.

### Fundraising income 2017/18 versus 2018/19

# 2017/18: £24.6 million



# 2018/19: £26.8 million

### Highlights of the year



### March for Men

We have continued to grow our overall walking programme, March for Men, which is made up of our flagship walks, football marches and walks organised by the public. In total, this has raised £1.8 million, of which our organised walks raised £900,000. We anticipate that 2019 will be bigger and better than ever, as we organise 10 local walks in June, across all four nations for the first time.

### Partnerships

Partnerships with companies across a range of business sectors continue to help raise vital funds and awareness, as thousands of their employees have helped support our cause. In 2018, we launched a new partnership with easyJet in conjunction with Breast Cancer Now. This collaborative effort on board easyJet flights raised more than £438,000 (split between the two charities). The money raised by passengers and cabin crews will help both organisations fund research into early detection, prevention, and treatment of both prostate cancer and breast cancer – in turn saving the lives of men and women across the UK. We've also maintained long-term support from our corporate partners, such as Iceland who increased their fundraising total to over £1 million this year. The Iceland Foods Charitable Foundation has been a significant supporter since 2008 and reached this incredible milestone with a recent donation of £138,000. The Keyline Rally, the flagship fundraising challenge organised by Keyline Civils Specialist, also celebrated smashing the £1 million mark. In June 2018, Keyline colleagues and suppliers returned to Monaco to celebrate in style after committing their support for Prostate Cancer UK for a further five years.



### Lease a van, save a man with 'MANarama' National League

In October 2018, vehicle-leasing brand Vanarama made English football history as they rebranded the Vanarama National League to 'MANarama' for six weeks and raised more than £150,000 for Prostate Cancer UK.

Vanarama's fundraising drive involved the commercial vehicle-leasing company transforming its naming rights for the fifth and sixth tiers of English football in the lead up to Non-League Day. Under the slogan, 'Lease a van save a man', Vanarama donated £50 for every vehicle leased from the start of September until Non-League Day on 13 October.

Prostate Cancer UK were presented with the cheque at the televised Non-League Day match between FC Halifax Town and Chesterfield. Ultra-marathon hero, Kevin Webber, who despite a diagnosis of advanced prostate cancer, had just completed seven walking marathons in seven days for us, was also given a guard of honour by both sets of fans before kick-off. In the build-up to Non-League Day, Kevin walked more than 180 miles from Blyth Spartans to FC Halifax Town, visiting 10 National League clubs and handdelivering unique captains' armbands to be worn by all MANarama teams on Non-League Day. The bright orange band, which includes the iconic Man of Men logo, illustrated the clubs' united stand against the most common cancer in men.

The campaign surpassed all expectations, helping to reach 1.9 million people and generating 53 pieces of press coverage across BBC Sport and The Sun. The ground-breaking partnership was recognised at the prestigious BT Sports Industry Awards, picking up the national award for Event or Competition Sponsorship of the Year. This beat multi-million pound campaigns for the FIFA World Cup and the Premier League.

We would like to thank both Vanarama and the National League for their efforts and enabling us to reach new audiences with our lifesaving health messages.





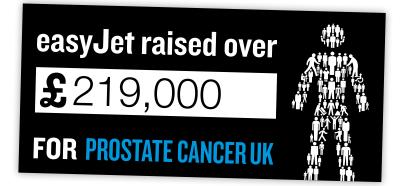
#### easyJet's life-saving journeys

Between October and November 2018, easyJet ran their life-saving journeys campaign to raise money for Prostate Cancer UK and Breast Cancer Now. As the most common cancers in men and women, one man and one woman die from prostate and breast cancer every 45 minutes, so our joint message was clear and powerful.

During the partnership, easyJet cabin crew did inflight collections on UK bound easyJet flights, which accepted all foreign currencies. They also did public announcements on flights to help raise awareness of both cancers and make customers aware of the collections taking place, and wore Breast Cancer Now and Prostate Cancer UK branded uniform and badges.

The easyJet staff also organised their own fundraising activities at their local airports, hosting bake sales, raffles, head shaves and awareness stands. In total, easyJet raised over £438,000, which was split equally between Breast Cancer Now and Prostate Cancer UK. This gave each charity over £219,000.

Eleven easyJet staff put themselves forward to be charity champions at their local airports. Their passion and commitment drove the success of this campaign. They were true campaign ambassadors, led a variety of fundraisers and awareness raising activities at their local airports, and were instrumental in getting so many staff and customers behind the campaign. The charity champions were also extremely active over social media, promoting the campaign and encouraging others to get involved. Some of the charity champions shared their personal experiences of breast and prostate cancer in local press and social media to help raise the profile of the campaign.





#### Keyline Rally together to hit the £1 million mark

Keyline Civils Specialist are one of our longest standing corporate partners and continue to go above and beyond to help us beat prostate cancer. This year the Rally reached a significant milestone, having raised over £1 million since 2010. The 'Millionaires Rally' featured more than 30 cars and 70 drivers as they headed back to Monaco, home of the very first Keyline Rally.

Among the celebrities taking part were ex-professional footballer and manager, Luther Blissett, while Tommy Walsh, best known for his role in the Nation's favourite, Ground Force, waved off the participants. Walsh said: "I'm thrilled to be supporting the Keyline Rally this year and attending the start of the event to wave off the cars."

# G

# It is an amazing achievement that Keyline have been able to raise $\pounds$ I million for Prostate Cancer UK.

### **Tommy Walsh**

The annual car rally across Europe, which aims to raise £100,000 a year, takes on a different theme each year. In 2019, Keyline's five-day cartoon-themed Rally heads through France, Switzerland and Italy and back to finish in Paris. But the fun doesn't stop there – Keyline colleagues in branches across the UK also get involved

in some incredible challenges from walking marathons, hosting golf days and organising cycle rides, literally taking their fundraising the extra mile.

Keyline also launched their Living Livery project, an initiative to bridge the gap between those at risk of prostate cancer and Keyline's target audience. Keyline arranged for new delivery trucks to be branded in Prostate Cancer UK colours, armed with Know your Prostate pocket guides in the cab. It's hard to miss us when you visit one of their branches, with every branch promoting awareness posters and displaying our latest health information on their in-branch TVs. All their branch colleagues and drivers wear co-branded hi-vis jackets to become brand ambassadors and raise awareness whilst at work.

As we approach the 10th anniversary of the partnership in 2020, we are proud and humbled by Keyline's continued commitment and efforts across their business and throughout the year. Their suppliers, customers and colleagues have raised an incredible £1.9 million (and counting!). Keyline's Board of Directors further demonstrated their support with a five-year partnership extension in June 2018, taking the partnership to 2023.

Keyline Civils Specialist have been with us every step of the way in recent years, and we are proud to have them by our side with every breakthrough we make to improve the lives of men and their families affected by prostate cancer.



#### Inspiring major support

This has also been a strong year for Trusts, foundations and major donors, who have raised over £370,000 from new donors out of a total of £2 million. A combination of our strong organisational strategy, the Specialist Nurses matched funding scheme (where a generous donor has pledged to match funds raised for the specialist nurses up to £335,000 per year for four years), our growing influential network of supporters known as the Pioneers, and our ever-popular Panel Debate and Dinner event has inspired more Trusts and individuals to either start or continue supporting us at a high level.



An excellent evening. I really enjoyed the panel discussion, and of course the chance to meet and chat to so many interesting people.

Panel Debate and Dinner event attendee



Panel Debate and Dinner, London

#### Growing individual giving to raise millions

Direct marketing income has grown by just over 25 per cent this year, up on last year's growth rate of 15 per cent. This growth has been across both our cash and regular giving programmes. We've doubled our regular giving income within two years, to just over £2 million in the financial year 2018/19, growing the base of regular givers consistently across the last three years, and almost trebling numbers in the last year. The direct marketing appeals sent to our warm audience have continued to deliver strong results since we moved the development in-house two years ago. Alongside our short and medium term income generating programmes, we've also seen an increase in the number of supporters pledging to leave the charity a gift in their Will - a testament to their commitment to the organisation.

We are grateful for the thousands of people up and down the country who are taking part in events and organising their own. Both our running and cycling programmes have grown this year, with particularly strong performances in the Grand Depart Classic, as well as our teams in the London Landmarks Half Marathon and Ride London. Our community fundraising grassroots programme across the UK has grown substantially with individuals, sporting clubs and other organisations doing a multitude of activities in support of Prostate Cancer UK. We have also raised a staggering £1 million from individuals setting up a birthday fundraiser on Facebook.

We know there is a lot more that needs to be done to achieve our organisational goals. To ensure that we can continue to increase funding for our vital work, we will continue to grow and invest in our fundraising programme and will optimise all opportunities.

### Maintaining the highest fundraising standards

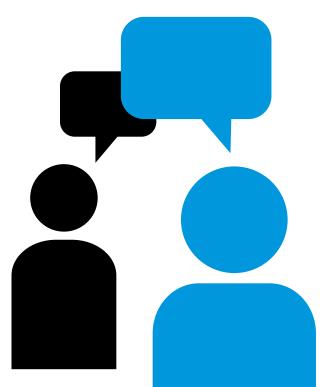
We take our responsibilities to our supporters very seriously, and this year have continued to ensure that our supporters can control how they hear from us, as well as ensuring that we continue to comply fully with GDPR guidelines.

We were well prepared for the new GDPR regulations that came into force in May 2018, ensuring that we contact people by telephone and email only if they opt-in. The number of people who have now indicated that they no longer want to hear from us amounts to a few thousand. However, we are encouraged that the vast number of people are still responding warmly to our mailings and collectively generated an incredible £2.5 million this year. GDPR has, without doubt, increased the cost and complexity of attracting new supporters. However, we are committed to providing everyone who comes into contact with us with a positive experience that meets their needs. As such, each time we communicate with our supporters, we are pleased to provide them with a choice of changing their communication preferences and frequency.

We are a member of the Fundraising Regulator and adhere to its Code of Fundraising Practice. Our Board of Trustees continue to oversee a programme of work to make sure our fundraising activities are compliant with all relevant rules and regulations, remain ethical and deliver to high standards.

We take a highly responsible approach towards communicating with individuals, ensuring that their preferences are respected at all times and that we are mindful of the needs of vulnerable people, protecting them from intrusion. For some activities, we use the services of third party agencies (under written terms), ensuring that those partners operate at the highest standard and have not contravened any codes of conduct. We monitor our partners' activities closely; giving them a thorough initial briefing, and ensuring that they comply with our policies to identify and safeguard vulnerable people. We maintain a Service Level Agreement in all contracts and regular partnership reviews. In addition we listen to a sample of all calls made and conduct regular mystery shopping.

We have a complaints handling process that deals with complaints from members of the public in an open and honest manner without prejudice. In 2018/19, we received 49 complaints relating to fundraising, which accounts for just 0.0001 per cent of all of our outbound communications. In addition to fundraising-related complaints, we received 31 complaints relating to our other work, including research, provision of prostate cancer services, and complaints relating to our trading subsidiary Prostate Cancer Trading Limited.





### **Our volunteers**

Belfast resident Jackie Dickson was so incensed that her husband, Billy, had to travel all the way to Cambridge for his prostatectomy, she joined our army of volunteers and organised the first ever Belfast March for Men.

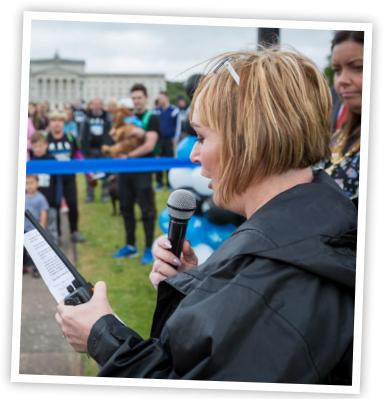
Jackie said: "After Billy's surgery I felt there was little support for men in Northern Ireland. I wanted to do something to raise awareness of the fact that prostatectomies are unavailable to men in Northern Ireland. I also wanted to do something to bring men and their families together and help raise money for Prostate Cancer UK.

"It was very difficult for my husband and I being away from family and friends – they couldn't even visit after the surgery. After visiting the Centre of Excellence for Public Health (Northern Ireland) and seeing the amazing research that's taking place in Belfast, I was inspired to make my March for Men event as successful as I possibly could."

Over 100 people took part in the inaugural Stormont event, among them local politicians, which further helped to raise awareness of the disease and the lack of the pioneering technology required to carry out the surgery in Northern Ireland. Shortly after, Jackie joined her local volunteer hub, to continue her quest to make a difference for men with prostate cancer.

Jackie added: "I've been working very hard, along with my family and the Prostate Cancer UK Northern Ireland hub, to raise awareness that men wanting a prostatectomy had to travel over to the mainland twice; once for the pre-op assessment and then two weeks later for the surgery, travelling home just two days after with a catheter bag in."

Working with her fellow volunteers, she organised another march the following year, growing the number of marchers to 200. In total, she's raised an incredible  $\pounds 27,000$  and with the popularity of the Belfast March for Men, Prostate Cancer UK has now joined forces with Jackie to make this one of the flagship March for Men events.



#### Jackie Dickson

In November 2018 came the news Jackie and our Northern Ireland volunteers had been waiting for. Belfast City Hospital confirmed plans to install a £1.5 million robot which will be used to operate on more than 100 men a year in Northern Ireland.

"I'm just over the moon we now have robot-assisted surgery," she said. "Men can have the support they need close by. I really enjoy helping to raise awareness and meeting other men and their families that have been affected by prostate cancer.

I feel very proud that I have achieved so much since first becoming a volunteer and a member of the hub. The work we've done has made a very big difference to men and their families here in Northern Ireland.

"The hub is now growing in number and we're receiving more and more requests to do information talks and stands throughout the country."



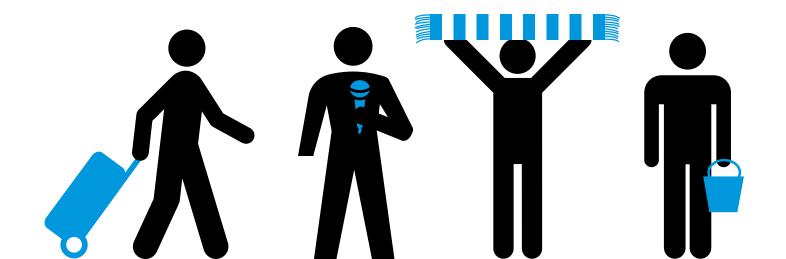
We are hugely grateful to the 1,800 people who gave their time in 2018/19 for contributing their professional skills, personal experience, local knowledge, energy and enthusiasm to our work. Volunteers raise awareness and funds across the UK, campaign for change to improve the lives of men with prostate cancer and deliver vital services such as peer support.

Last year we doubled the level of volunteer awareness activity by investing in engaging existing volunteers, developing volunteer hubs, forming partnerships, and strategically sourcing activities. This has resulted in a significant increase in both the number of active volunteers and the level of activity from our existing volunteer base. We were delighted to receive the prestigious Investing In Volunteers accreditation for the second time in January 2019. The award recognises the value and commitment we place on recruiting and developing our volunteers.

#### 2018/19 Volunteer highlights

- Our volunteers are not afraid to go the extra mile; in fact, lan travelled over 1,000 miles in a year for his volunteering activities, and Janet even supported us with an awareness campaign while she was on holiday in Yorkshire.
- Our volunteers set goals and then smash them: Phil has spoken to over 10,000 individuals about his personal journey with prostate cancer, delivering more than 300 awareness talks in six years, while Mark has volunteered at more than 90 fundraising collections at football match days since 2014.





### **Financial review**

In 2018/19 the group's total incoming resources were  $\pounds 27.5$  million, which represented a 10.1 per cent increase on the previous year ( $\pounds 24.9$  million). The donation received from the Movember Foundation this year totalled  $\pounds 3.6$  million, an increase of  $\pounds 0.5$  million over 2017/18. We have continued to record a strong performance across the charity's other income streams, which showed an overall increase of 9.0 per cent to  $\pounds 23.9$  million. The key drivers of this increase include our strong partnerships with corporate donors and the continued success of our sporting events and community fundraising activities. Key highlights are stated within our fundraising review on page 23.

Total group expenditure for the year was £28.5 million (2017/18: £24.7 million). This included £6.7 million on research; £4.5 million on supporting men and their families and influencing change in the delivery of care, and £7 million on awareness activities. Total charitable expenditure in the year amounted to 64p of every £1 expended (2017/18: 73p). Whilst we have increased expenditure on charitable activities, we have made significant investment in our income generation, which has resulted in the proportion of spending on charitable activities decreasing. This is a planned increase in investment in income generation to enable the transformative increase in investment in research, support and awareness-raising activities that is so urgently needed.

The activity levels in 2018/19 resulted in a deficit of £1.1 million for the year (2017/18: £0.2 million surplus). We continued to use our restricted reserves, which reduced by £0.2 million to £5.9 million as at 31 March 2019, to invest as much as possible into medical research. Unrestricted reserves decreased by £0.9 million to £9.1 million at the year end. Our reserves policy on page 39 and Note 18 on movements in funds provide further detail.

The group holds cash and short term deposits of  $\pounds$ 19.7 million, compared to  $\pounds$ 20.5 million at the start of the year, reflecting payments that have now been made in respect of grants committed in previous years. We remain in a strong position to be able to meet our  $\pounds$ 19.2 million commitment to long-term projects (see Note 6) on both our research and programme awards. Our treasury policy on page 39 provides information on how the charity invests balances held.

The charity also operates a wholly-owned subsidiary, Prostate Cancer Trading Limited (PCTL), which is responsible for all commercial activities of the group. All surplus funds earnt are paid under gift aid to the charity. The company has its own board of directors, responsible for all governance matters. Financial details for PCTL are shown in Note 3.



### **Plans for the future**

This year, our Executive Team and Trustees have undertaken a thorough review of our strategy to ensure that we stay on track to deliver our key charitable aims: to stop men dying from prostate cancer and to reduce the harm caused by prostate cancer.

When we launched our strategy in 2016, we set out our four pillars: Better Diagnosis, Better Treatment, Better Prevention and Better Support. All of our work, whether research, awareness, campaigns or our publications, goes towards achieving these objectives.

In reviewing the next steps in our strategy, we identified three key areas within these pillars that we believe will make the biggest difference towards saving men's lives. These are the areas we intend to focus on over the coming years.

#### Early diagnosis

Currently, only half of men are diagnosed with prostate cancer when it is still within the prostate. Improving awareness among the public and GPs will help to improve this but is limited by the lack of early symptoms in many cases. A national screening programme with better tests will help to catch many cancers earlier. It will take some time for the effects of a screening programme to work for the whole population, but it will ultimately impact on the biggest number of men, including future generations.

#### Accurate diagnosis

When prostate cancer is caught early, it is not always straightforward to judge how aggressive it is. This means that men are not always getting the most effective treatment. Developing and implementing more accurate tests will help to reduce the number of men experiencing under-treatment or over-treatment. This can help us make a difference for men even before we get to a screening programme.

#### More effective treatments

Once prostate cancer spreads to other parts of the body it is incurable, and any treatments can only prolong survival as long as the cancer doesn't become resistant. Even though every man's cancer is different, we currently use treatments in a one-size-fits-all approach.

We need to take a more personalised approach to treatment and find innovative new ways to treat prostate cancer, such as unlocking the potential of the immune system. Critically, we need to make sure the effective treatments that are developed are made available to the men they are intended for. This will improve outcomes for men who are still diagnosed with late stage disease, and potentially address some of the issues with prostate cancer recurrence.

We will do this in a number of ways that make sure we get the greatest impact from our limited resources. We will continue to use our expertise in prostate cancer to identify the gaps that have been left by others – whether that's the government, the NHS, or pharmaceutical companies – and either address them ourselves or pull the right levers to bring greater investment into beating prostate cancer.

We will also breathe life into radical new ideas that challenge our understanding of prostate cancer, support talented researchers in the early stages of establishing their careers, and work with other organisations to get new discoveries out of the lab and into the clinics so men get the benefit sooner.





### Structure, governance and management

### **Objects**

The charity's objects, set out in its Memorandum and Articles of Association (last amended 12 April 2016), are to invest in prostate cancer research and to make available useful results, to provide information and support to men and their families affected by prostate cancer and to raise public awareness of prostate cancer and other prostate diseases and their symptoms.

Within the Trustees' report is the strategic report, required under s414C(11) of the Companies Act 2006, which summarises the charity's activities, achievements and performance.

### Structure

The Members of the Council of Management ('The Trustees') of Prostate Cancer UK ('the charity'), who are also Directors of the charity for the purposes of the Companies Act, submit their annual report and the audited financial statements for the group for the year ended 31 March 2019.

The charity is a charitable company limited by guarantee and was set up on 14 October 1991. The Strategic Report provides information on the charity's activity and set out below are details of its financial performance from April 2018 to March 2019.

The charity has a trading subsidiary, Prostate Cancer Trading Limited (06157784) and also owns the following dormant companies: The Prostate Cancer Charity Limited (08183613), Prostate Cancer Research Foundation (05926197) and Prostate Action (07149009).

### Governance

Overall strategy and policy for the charity are agreed by the Council of Management (known as the 'Board of Trustees'), advised by the Chief Executive and Executive Directors who attend all meetings.

Trustees retire after three years but are then eligible for re-election. Officers of the Board (Chairman, Treasurer and Vice Chairman) are elected for an initial term of three years. They are then eligible for election for a further, final term of three years. These terms are extendable, exceptionally, at the discretion of the Board of Trustees.

It is our policy to recruit Trustees by open advertisement to ensure the widest field of applicants, and a good spread of relevant skills. A number of the Trustees have been personally affected by prostate cancer. During the year, three Trustees retired and three new Trustees were appointed.

It is the charity's policy to train new Trustees to ensure they have the knowledge and skills to perform their roles. New Trustees undertake an induction programme, meeting with staff from across the charity and are provided with relevant background briefing information.

The Board of Trustees is using the Charity Governance Code as a reference point for a rolling review of governance.

An important tool informing this governance focus, is the two-yearly Board effectiveness review. This was undertaken during the current year, facilitated by an independent third party organisation. It has helped to highlight the many strengths in the way the Board works, as well as some areas where improvements can be made.

The charity has put in place Trustee indemnity insurance. Trustees met on 28 occasions during the year, either as a full Board or in the committees.

#### **Trustees and Directors**

The Trustees and Directors who served the charity during the period were:

(Trustees are members of the committees as indicated by the numbers in brackets)

- Professor Jonathan Waxman (President) (2,5)
- Charles Packshaw
   (Chairman) (1,2,3,4,5)
- Mike Tye (Vice Chairman) (2,4)
- Lynne Robb (Treasurer) (1,2)
- Professor Sara Faithfull (3)
- Steve Ford (3)
- Simon Hammett (1,5)
- Marion Leslie (1)
- Andrew Mitchell (4)
- Professor David Neal CBE (5)
- Professor Martin Roland CBE (2,3,5)
- Tom Shropshire (2,3)
- Simon Peck (4)

Retired in period:

• Robert Humphreys (resigned 26 July 2018)

Independent committee members serving during the period:

- William Dickinson (Finance Risk and Audit Committee)
- Nick Kendall (Engagement Fundraising and Communications Committee)
- Nick Lemoine (Board Research Committee)

#### **Committees of the Board**

#### 1. Finance Risk and Audit

- Reviews in-depth budget and financial plans
- Monitors the charity's financial performance and compliance with accounting requirements
- Makes recommendations to the Board on financial policy matters
- Reviews strategic HR issues
- Scrutinises support services
- Leads on external audit matters
- Reviews arrangements for the management of risk, including those around data protection and safeguarding

#### 2. Nominations Committee

 Recommends to the Board the reward arrangements and appointment of new Trustees, Officers and the Chief Executive

#### 3. Support and Influencing Committee

- Provides oversight on behalf of the Board of the charity's delivery of support services and of its influencing work
- Monitors delivery of support and influencing activities against the business plan
- Monitors the charity's compliance with campaigning and lobbying regulations

#### 4. Engagement Fundraising and Communications Committee

- Reviews existing income generation and communications-related activity, as well as considering future opportunities in these areas
- Reviews progress against the strategy to develop deeper and long-lasting relationships with our supporters, both existing and potential and with all those who need our services
- Monitors the charity's compliance with fundraising regulations

#### 5. Board Research Committee

- Reports to the Board on general matters relating to research
- Monitors the research strategy, including its implementation

Terms of reference for committees are regularly reviewed.

#### Research Advisory Committee and Research Strategy Group

These committees exist to advise the Board of Trustees and Chief Executive by making recommendations as to which research grants the charity should support, and in which areas the charity should focus its research effort. The membership of both bodies, which includes independent clinicians/researchers, has been carefully selected to ensure a broad range of opinions and advice.

Prostate Cancer UK is a member of the Association of Medical Research Charities (AMRC) and complies with its guidelines. The AMRC is dedicated to helping medical and health charities deliver high quality research that improves people's lives.

#### **Executive team**

Executive team as at 31 March 2019:

- Chief Executive
   Angela Culhane
- Director of Research Dr David Montgomery (appointed 31 March 2019)
- Director of Support & Influencing Heather Blake
- Director of Engagement Tracey Pritchard
- Interim Director of Resources
   Simon Bass (appointed 18 January 2019)
   George Jenkins (appointed as
   Director of Resources from 10 June 2019)

Other members of the Executive team during the year:

- Director of Resources George Ruiz (Director of Resources until 18 January 2019)
- Director of Research
   Dr lain Frame (Director of Research until
   31 July 2018)
   Dr Matthew Hobbs (Acting Director of Research
   until 31 March 2019)

## Legal and administrative details of the charity

Registered in England and Wales with the Charity Commission under charity number 1005541.

Registered in Scotland by the Office of the Scottish Charity Regulator under charity number SCO39332.

Registered company number 02653887.

### Registered address and principal place of business

Prostate Cancer UK Fourth Floor, The Counting House 53 Tooley Street London SE1 2QN

#### prostatecanceruk.org

Prostate Cancer UK (Scotland) Unit F22-24, Festival Business Centre 150 Brand Street Glasgow G51 1DH

#### Banker

National Westminster Bank plc Park Royal Branch 1 Abbey Road London NW10 7RA

#### Auditor

MHA MacIntyre Hudson Chartered Accountants and Statutory Auditor New Bridge Street House 30-34 New Bridge Street London EC4V 6BJ

#### Legal Advisor

Macfarlanes LLP 20 Cursitor Street London EC4A 1LT

#### **Reserves policy**

The charity operates within a reserves policy which is reviewed annually as part of the charity's budget and planning processes.

The charity holds free reserves to ensure uninterrupted delivery of the charity's objectives regardless of short to medium term fluctuations in income and expenditure. The Trustees review reserves levels to ensure there are adequate funds available to support the work of the charity. During the year, the Trustees considered that a sufficient level of reserves for the organisation would be between three and six months of forward-looking unrestricted expenditure. The free reserves requirement is monitored on a monthly basis, with formal reporting to the Board of Trustees on a quarterly basis.

The level of free reserves at the balance sheet date in March 2019 was £8.6 million. This represents 3.6 months of unrestricted expenditure at 2019/20 budget levels and is in line with our policy.

A designated fund of £443,000 was held, representing the net book value of fixed assets.

The charity had restricted reserves of £5.6 million at the year end. Of this, £5.2 million relates to funds from the Movember Foundation, which will be fully committed to spending across the areas of research and survivorship.

#### **Treasury policy**

The charity has a risk-averse treasury policy, which is reviewed annually by Trustees.

The charity has a low risk appetite with regard to deposits, with a primary objective of capital preservation, and a secondary objective of generating income. Deposits are restricted to cash or near-cash products, held in:

- individual banking institutions;
- UK government debt instruments;
- pooled funds.

It is our policy to spread funds to mitigate risk and to take into account institutions' credit ratings.

Balances held are managed in order to meet working capital requirements, with accessibility maintained should phasing assumptions for income or expenditure be changed.

#### **Grants policy**

The charity awards grants for research funding in line with the standards and guidelines set out by the Association of Medical Research Charities.

Calls for applications are advertised through our website, research newsletter and appropriate specialist media. All applications for funding are sent to a minimum of three external independent expert reviewers who provide a written assessment of the quality, novelty, importance and relevance of the proposal. We also seek input from men affected by prostate cancer, and/ or their families, to ensure that the research proposed has been explained well for a lay audience and that it has the potential to make a difference from their experience. Once all peer reviews are received a final funding recommendation is made by our Research Advisory Committee.

#### **Remuneration policy**

The charity's remuneration policy is designed to attract, retain and motivate a high performing team to deliver the charity's aims as well as to demonstrate to our stakeholders an effective use of charitable funds.

The objectives of our remuneration policy are to:

- reward staff appropriately and enable the recruitment of high-calibre staff
- ensure the proper use of the charity's resources in accordance with its aims and within affordable limits based on the financial circumstances of the charity
- be non-discriminatory, just and equitable in the evaluation of jobs and their remuneration by providing a stable framework for the remuneration of the team
- operate within the law
- pay at a competitive level taking account of external market rates, with the aim being to set pay at the median level or above for comparable posts in the voluntary sector, subject to the charity's financial position.

Remuneration is reviewed on an annual basis and agreed by the Board of Trustees. When setting pay levels, the charity gives consideration to external benchmark comparators, changes in the national average earnings index, affordability and other internal and external pressures including recruitment and retention.

The above policy applies to all staff, including the charity's key management personnel (as defined in note 7). The annual salary of the Chief Executive, was £110,561 at 31 March 2019; this is overseen by the Nominations Committee.

#### **Public benefit**

We have considered the Charity Commission's guidance on public benefit when reviewing our aims and objectives and in planning future activities.

The public benefit of the charity is in mitigating the effect of prostate cancer and prostate disease in the United Kingdom. Our strategic aims and the charity's activities are designed to achieve this benefit.

The beneficiaries of our work are men and their families – reached either directly or through healthcare professionals. Some of those who have benefited from our services are detailed in this report. Our service is open to all men in the United Kingdom and their families, without charge.

As a result of the above, the Trustees consider that Prostate Cancer UK satisfies the public benefit test.

#### Principal risks and uncertainties

The principal risks to which the charity is exposed, as identified by the Trustees, have been reviewed and systems have been established to mitigate these risks. A risk register summarises the principal risks facing the charity, graded according to their likelihood and impact, and identifies actions to manage them. The register is regularly reviewed and updated by risk owners, the Executive Team, and the Finance Risk and Audit Committee. Any 'red light' issues are brought to the attention of the Board of Trustees.

#### **RISK**

#### **MITIGATION**

Failure to make the right strategic choices that result in the best impacts for men.	<ul> <li>Regular review of our strategy, including horizon scanning and monitoring the external environment.</li> </ul>
There is a significant shortfall in our income restricting our ability to deliver our charitable objectives in a sustainable way.	<ul> <li>Exposure to this risk is reduced by increasing the spread of fundraising sources.</li> <li>Effectiveness of fundraising activities is closely monitored with corrective action taken as necessary.</li> <li>Close control over commitments with expenditure on grants only agreed when we have funds available.</li> </ul>
Material loss or significant interruption to services/ activities, or reputational damage due to failure in controls or a legal / compliance failure in areas such as GDPR / data breaches; cyber-security or serious fraud.	<ul> <li>Regular review and training, with access to specialist resource in key areas such as data protection and legal to support operations.</li> <li>Continuing technology strategy to drive IT improvements and strengthen infrastructure and security to protect the charity's assets.</li> <li>Proactive detection, investigation and reporting of potential adverse events.</li> <li>Proactive and reactive media plan.</li> <li>Clear whistleblowing policy.</li> </ul>
Reputational damage as a result of fundraising activities (either our own, contracted staff or third parties), those of the wider fundraising sector or the activities of other partners.	<ul> <li>Regular review of fundraising practices.</li> <li>Risk assessments undertaken for all events.</li> <li>Due diligence on our service providers carried out before engaging with them and ensuring we have effective contract terms that minimise the risks to the charity.</li> <li>Fundraisers all trained in the IOF code of practice.</li> <li>Process review ensures that permissions which we capture are recorded and acted on accurately.</li> <li>Partnership working arrangements are controlled to ensure they are appropriate and that effective contractual terms are in place.</li> </ul>
Attracting, developing and retaining talented staff and volunteers in a competitive market.	<ul> <li>Employee and volunteer engagement surveys and action follow ups.</li> <li>An active communication plan to ensure our people are always informed on the strategy and progress against it.</li> <li>Review of compensation and benefits approach and ongoing benchmarking.</li> <li>Opgoing proactive staff and volunteer recruitment campaigns.</li> </ul>

• Ongoing proactive staff and volunteer recruitment campaigns.

#### Trustees' responsibility statement

The Trustees (who are also directors of Prostate Cancer UK for the purposes of company law) are responsible for preparing the Trustees' Annual Report (including the Strategic Report) and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company law requires the Trustees to prepare financial statements for each financial year, which give a true and fair view of the state of affairs of the charitable company and the group and of the incoming resources and application of resources, including the income and expenditure, of the charitable company and the group for that period. In preparing these financial statements, the Trustees are required to:

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles in the Charities Statement of Recommended Practice (SORP) 2015 (FRS102);
- 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 and the group will continue in operation.

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

In so far as the Trustees are aware:

- there is no relevant audit information of which the charitable company's auditor is unaware; and
- the Trustees have taken all steps that they ought to have taken to make themselves aware of any relevant audit information and to establish that the auditor is aware of that information.

The Trustees are responsible for the maintenance and integrity of the corporate and financial information included on the charitable company's website. Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

#### Auditor

MHA MacIntyre Hudson has been appointed as the charity's auditor.

The Trustees review the appointment of the auditor on an annual basis and have delegated power to set the auditor's remuneration to the Finance Risk and Audit Committee.

The Trustees' Annual Report and Strategic Report were approved by the Council of Management (Board of Trustees) on 17 July 2019 and authorised to be signed on its behalf by:

CM. Paule

Charles Packshaw, Chairman Date: 17 July 2019

### Independent Auditor's Report to the members and Trustees of Prostate Cancer UK (registered company no. 02653887)

#### Opinion

We have audited the financial statements of Prostate Cancer UK (the 'charitable company') for the year ended 31 March 2019 which comprise the Group and Charity Statement of Financial Activities including summary income and expenditure accounts, Group and Charity Balance Sheets, the Group Statement of Cashflows and the 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, including Financial Reporting Standard 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the group's and parent charitable company's affairs as at 31 March 2019, and of the group's and parent charitable company's incoming resources and application of resources including the group's and parent charitable company's 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, the Charities and Trustee Investment (Scotland) Act 2005 and regulations 6 and 8 of the Charities Accounts (Scotland) Regulations 2006.

#### **Basis for opinion**

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the financial statements section of our report. We are independent of the group and parent 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**

We have nothing to report in respect of the following matters in relation to which the ISAs (UK) require us to report to you where:

- the trustees' use of the going concern basis of accounting in the preparation of the financial statements is not appropriate; or
- the trustees have not disclosed in the financial statements any identified material uncertainties that may cast significant doubt about the group's or parent charitable company's ability to continue to adopt the going concern basis of accounting for a period of at least twelve months from the date when the financial statements are authorised for issue.

#### 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 auditor's report 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 there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

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

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

- the information given in the Trustees' Annual Report (including the Strategic Report) for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the Strategic Report and the Trustees Annual Report have been prepared in accordance with applicable legal requirements.

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

In the light of our knowledge and understanding of the group and parent charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the strategic report and the directors' report.

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

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

### Respective responsibilities of trustees and auditor

As explained more fully in the Trustees' Responsibilities Statement set out on page 42, 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 group's and parent 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 group or the parent charitable company or to cease operations, or have no realistic alternative but to do so.

### Auditor's responsibilities for the audit of the financial statements

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

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

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 auditor's report.

#### 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, and to the charitable company's trustees, as a body, in accordance with Regulation 10 of the Charities Accounts (Scotland) Regulations 2006. Our audit work has been undertaken so that we might state to the charitable company's members and trustees those matters we are required to state to them in an auditor's 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, the charitable company's members as a body and the charitable company's trustees as a body, for our audit work, for this report, or for the opinions we have formed.

Sudhi Singh

Sudhir Singh FCA (Senior Statutory Auditor) For and on behalf of: MHA MacIntyre Hudson Chartered Accountants & Statutory Auditor New Bridge Street House 30-34 New Bridge Street House London EC4V 6BJ

Date: 2 August 2019

MHA MacIntyre Hudson is eligible to act as an auditor in terms of section 1212 of the Companies Act 2006.

### **Group statement of financial activities including** summary income and expenditure account for the year ended 31 March 2019

	Notes	Unrestricted Funds £'000	Restricted Funds £'000	Total 2019 £'000	Total 2018 £'000
INCOME FROM					
Donations and legacies	2	21,697	5,129	26,826	24,561
Other trading activities	3	483	-	483	233
Investments – bank interest		153	-	153	154
Total		22,333	5,129	27,462	24,948
EXPENDITURE ON					
Raising funds	2	10,226	-	10,226	6,575
Charitable activities	5	12,900	5,391	18,291	18,162
Total		23,126	5,391	28,517	24,737
Net income/(expenditure)	4	(793)	(262)	(1,055)	211
Transfers between funds	18	(68)	68	-	-
Net movement in funds		(861)	(194)	(1,055)	211
Reconciliation of funds:					
Total funds brought forward		9,952	6,083	16,035	15,824
Total funds carried forward	18	9,091	5,889	14,980	16,035

The comparative figures for each fund are shown in the notes to the accounts.

All of the above results are derived from continuing activities. There were no other recognised gains or losses other than those stated above.

# **Charity statement of financial activities including summary income and expenditure account for the year ended 31 March 2019**

	Unrestricted Funds £'000	Restricted Funds £'000	Total 2019 £'000	Total 2018 £'000
INCOME FROM				
Donations and legacies	22,020	5,129	27,149	24,734
Investments	153	-	153	154
Total	22,173	5,129	27,302	24,888
EXPENDITURE ON				
Raising funds	10,090	-	10,090	6,515
Charitable activities	12,876	5,391	18,267	18,162
Total	22,966	5,391	28,357	24,677
Net income/(expenditure)	(793)	(262)	(1,055)	211
Transfers between funds	(68)	68	-	-
Net movement in funds	(861)	(194)	(1,055)	211
Reconciliation of funds:				
Total funds brought forward	9,952	6,083	16,035	15,824
Total funds carried forward	9,091	5,889	14,980	16,035

The comparative figures for each fund are shown in the notes to the accounts.

All of the above results are derived from continuing activities. There were no other recognised gains or losses other than those stated above.

### **Balance sheets as at 31 March 2019**

		GROUP		CHARITY	
	Nistas	2019	2018	2019	2018
Fixed assets	Notes	£'000	£'000	£'000	£'000
Intangible assets	10	58	96	58	96
Tangible assets	10	385	383	385	383
Investments	12	-	-	-	-
Total fixed assets		443	479	443	479
Current assets					
Stocks	13	63	34	-	-
Debtors	14	18,201	17,334	18,616	17,572
Short-term deposits		14,266	13,530	14,266	13,530
Cash at bank and in hand		5,483	6,962	5,096	6,743
Total current assets	_	38,013	37,860	37,978	37,845
Liabilities:					
Creditors: Amounts falling due within one year	15 _	14,040	9,861	14,005	9,846
Net current assets	_	23,973	27,999	23,973	27,999
Total assets less current liabilities		24,416	28,478	24,416	28,478
Creditors: Amounts falling due after more than one year	16	9,436	12,443	9,436	12,443
Net assets	-	14,980	16,035	14,980	16,035
Funds:					
Restricted income funds	18	5,889	6,083	5,889	6,083
Unrestricted funds					
General	18	8,648	9,473	8,648	9,473
Designated	18	443	479	443	479
	_	9,091	9,952	9,091	9,952
Total funds	_	14,980	16,035	14,980	16,035
	-				

Approved and authorised for issue by the Council of Management (Board of Trustees) on 17 July 2019 and signed on its behalf by: Charles Packshaw, Chairman

C.M. Paule

### **Group statement of cash flows for the year ended 31 March 2019**

		2019		2018	18	
	Notes	£'000	£'000	£'000	£'000	
Cash flows from operating activities:						
Net cash provided by (used in) operating activities	22		(780)		(3,440)	
Cash flows from investing activities:						
Interest		153		154		
Purchase of fixed assets		(116)		(91)		
Net cash provided by (used in) investing activities			37		63	
Change in cash and cash equivalents in the reporting period			(743)	_	(3,377)	
Cash and cash equivalents at the beginning o the reporting period	f		20,492		23,869	
Cash and cash equivalents at the end of the reporting period			19,749		20,492	

#### General information and basis of preparation

- 1.1 Prostate Cancer UK is a charitable company limited by guarantee incorporated in England, Wales and Scotland. In the event of the charity being wound up, the liability in respect of the guarantee is limited to £1 per member of the charity. The financial statements of the charity, which is a public benefit entity under FRS 102, have been prepared under the historical cost convention in accordance with the Financial Reporting Standard Applicable in the UK and Republic of Ireland (FRS102), the 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) (Charities SORP (FRS102)) and the Charities Act 2011 and the Companies Act 2006. The significant accounting policies applied in the preparation of these financial statements are set out below. These policies have been consistently applied to all years presented unless otherwise stated.
- 1.2 These financial statements consolidate the results of the charitable company and its whollyowned active subsidiary Prostate Cancer Trading Limited on a line-by-line basis. Transactions and balances between the charitable company and its active subsidiary have been eliminated from the consolidated financial statements. Balances between the two companies are disclosed in the notes to the charitable company's balance sheet. The three dormant subsidiaries are not consolidated as their inclusion is not material in order to provide a true and fair view. The financial statements are prepared in sterling which is the functional currency of the group, and rounded to the nearest £000.

#### **Going concern**

1.3 The financial statements have been prepared on a going concern basis as the trustees consider that there are no material uncertainties about the group's ability to continue as a going concern. This is on the basis of the charitable company and its active subsidiary having sufficient income and levels of reserves to continue for at least 12 months from the date of authorising these financial statements.

#### Accounting policies

- 1.4 Income is shown gross.
- 1.5 Donations and legacies are accounted for when the charity has entitlement, the amount can be measured reliably and the receipt is probable. Information that is received after the balance sheet date is adjusted for where the financial effect is material. Legacies in the form of property or investments are included at fair value when recognised.
- 1.6 Registration fees for specific fundraising events received in advance of the event are deferred until the events take place.
- 1.7 Donated goods and services are included at the estimated value to Prostate Cancer UK. These include goods and services provided for use within the charity, with amounts received stated in Note 2. In accordance with Charities SORP (FRS 102), no amounts have been included in these financial statements to reflect the value of services provided free of charge to the charity, by volunteers.
- 1.8 Income tax recoverable in relation to donations received under Gift Aid is recognised at the time of production of the claim and allocated to the appropriate income stream.
- 1.9 Resources expended are recognised in the period in which they are incurred. Resources expended include attributable VAT, which cannot be recovered.
- 1.10 Charitable activities include expenditure associated with research, support and influencing and awareness.

- 1.11 Grants awarded are included in the Statement of Financial Activities, when approved by the Trustees and agreed with the recipient organisation.
- 1.12 Expenditure on raising funds relates to the costs of attracting income, and that incurred in trading activities that raise funds.

Expenditure on awareness includes delivering national and local integrated communications campaigns, to raise awareness of the cause and the brand.

- 1.13 Governance costs include the costs of governance arrangements which relate to the general running of the charity, as opposed to the direct management functions inherent in charitable activity and fundraising activities. These include external audit, trustee indemnity insurance and strategic planning processes, that relate to the future development of the charity.
- 1.14 Support costs (including governance costs) are allocated between fundraising and charitable activities, on the basis of a combination of staff numbers and the use of resources within the department for each activity.
- 1.15 Rentals payable under operating leases are charged to the Statement of Financial Activities over the life of the lease, on a straight line basis.
- 1.16 Most employees are members of a defined contribution pension scheme. The assets of the scheme are held separately from those of the charity in independently administered funds. Contributions in respect of the scheme are charged against net incoming resources in the year in which they are due.
- 1.17 When employees have rendered service to the Charity, short-term employee benefits to which the employees are entitled are recognised at the undiscounted amount expected to be paid in exchange for that service.
- 1.18 Termination benefits, including redundancy costs, are recognised when the Charity has an obligation to pay the benefits and they can be measured reliably.

1.19 Critical accounting estimates and areas of judgment:

The following judgements (apart from those involving estimates) have been made in the process of applying the above accounting policies that have had the most significant effect on amounts recognised in the financial statements:

- allocation of support costs
- depreciation rates for tangible fixed assets
- useful economic lives of assets
- legacies

Software

• basis of valuation for gifts in kind and donated services received.

1.20 Intangible fixed assets and amortisation:

Expenditure on individual intangible assets (software) with a value greater than £5,000 is capitalised. Software is stated at amortised historical cost. Amortisation is provided on a straight line basis at the following annual rate in order to write off each asset over its estimated useful life:

1.21 Tangible fixed assets and depreciation:

Expenditure on individual tangible assets with a value greater than £5,000 is capitalised. Tangible assets are stated at depreciated historical cost. Depreciation is provided on a straight line basis at the following annual rates in order to write off each asset over its estimated useful life:

33%

Lease improvements	over period of Lease
Computer equipment and website developments	33%
Fixtures and fittings	33%

#### 1.22 Stock:

Stock consists of purchased goods for resale, which are valued at the lower of cost and net realisable value on a first-in first-out basis.

Provision is made for any obsolete or slowmoving items.

1.23 Short term deposits:

Short term deposits are highly liquid investments and are held at fair value. These include cash on deposit and cash equivalents with a maturity of less than one year.

1.24 Financial assets and liabilities:

Financial assets and financial liabilities, including debtors and creditors, are recognised when the charity becomes party to the contractual provisions of the instrument. Additionally, all financial assets and liabilities are classified according to the substance of the contractual arrangements entered into. Financial assets and liabilities are initially measured at transaction price (including transaction costs) and are subsequently re-measured where applicable at amortised cost.

1.25 The following funds are held by the charity:

#### **Restricted:**

These are funds that can only be used for particular restricted purposes. Restrictions arise when specified by the donor or when funds are raised for particular restricted purposes.

#### **Unrestricted:**

These are funds which can be used in accordance with the charitable objects at the discretion of the Council.

#### **Designated:**

These are funds set aside by the Council out of unrestricted funds for specific purposes.

1.26 Grant commitments and other long term liabilities are measured at cost and, in accordance with accounting practice, are discounted where material. 1.27 Financial Instruments

The Group only holds basic Financial Instruments. Financial Instruments are classified and accounted for according to the substance of the contractual arrangement as financial assets or financial liabilities. The financial assets and financial liabilities of the Group are as follows:

- Debtors trade and other debtors (including accrued income) are financial instruments and are debt instruments measured at amortised cost as detailed in note 14.
   Prepayments amounting to £1,012,000 (2018: £882,000) for the Group and Charity are not financial instruments.
- Cash at bank is classified as a basic financial instrument and is measured at face value.
- Liabilities trade creditors, accruals and other creditors are classified as financial instruments, and are measured at amortised cost as detailed in note 15 and 16. Amounts due for taxation and social security are not included in the financial instruments disclosure. Deferred income amounting to Nil (2018: £6,990) for the Group and Charity is not deemed to be a financial liability, as the cash settlement has already taken place and there is simply an obligation to deliver charitable services rather than cash or another financial instrument.

#### 2. Income from donations and legacies and expenditure on raising funds

	INCOME		INCOME		2019	2018
_	Unrestricted	Restricted	Total income	Total income		
	£'000	£'000	£'000	£'000		
Individual donors and legacies	9,022	56	9,078	10,710		
Community and events	9,488	3	9,491	6,658		
Movember Foundation	-	3,566	3,566	3,048		
Major donors and charitable trusts	625	1,424	2,049	2,412		
Corporate donors	1,903	80	1,983	1,012		
Donated goods and services	250	-	250	395		
Other donations	409	-	409	326		
	21,697	5,129	26,826	24,561		

#### Restricted Unrestricted

5,058 19,503 24,561

		EXPENDITURE ON RAISING FUNDS		2018
	Direct costs	Direct costs Support costs		Total costs
	£'000	£'000	£'000	£'000
Individual donors and legacies	5,226	902	6,128	3,283
Community and events	2,331	402	2,733	2,143
Major donors and charitable trusts	499	86	585	533
Corporate donors	549	95	644	576
Trading	136	-	136	40
	8,741	1,485	10,226	6,575

All expenditure on raising funds was unrestricted in both years.

For a breakdown of prior year comparatives see note 24.

#### 3. Net income and assets of activities of trading subsidiary

The charity has a wholly-owned subsidiary incorporated in England and Wales, Prostate Cancer Trading Limited (registered number 06157784), which raises funds through trading activity, marketing and the sale of goods. The company pays its profits under Gift Aid to Prostate Cancer UK under a legal obligation created by a deed of covenant between the two entities. Audited accounts are filed with the Registrar of Companies. A summary of its trading results, which represent unrestricted funds in both years, is as follows:

	2019	<b>2018</b>
	Total £'000	Total £'000
Turnover	483	233
Cost of goods sold	(149)	(52)
Gross profit	334	181
Administrative expenses	(87)	(77)
Interest payable	(1)	(2)
Net profit	246	102
Income transferred by Gift Aid	(246)	(102)
Retained in subsidiary		-
	2019	2018
	Total £'000	Total £'000
Total current assets as at 31 March	455	265
Total current liabilities as at 31 March	(455)	(265)
Net assets held as at 31 March		_

Other subsidiaries wholly owned or controlled by Prostate Cancer UK are Prostate Cancer Research Foundation, The Prostate Cancer Charity Limited and Prostate Action, all of which are dormant and have nil net assets.

#### 4. Net income/(expenditure) for the year

This is stated after charging:

	2019	<b>2018</b>
	£'000	£'000
Depreciation and amortisation	152	223
Accountants – advisory services	1	1
Auditor's remuneration – audit services	31	31
Operating lease rentals – property	499	455

#### 5. Charitable activities

			2019	2018
	Direct costs	Support costs	Total costs	Total costs
	£'000	£'000	£'000	£'000
Research	6,412	332	6,744	6,064
Support and influencing	3,592	937	4,529	5,124
Awareness	6,158	860	7,018	6,974
	16,162	2,129	18,291	18,162
Of which in 2018:				
Restricted				15,171
Unrestricted				2,991
				18,162

Expenditure on charitable activities has increased from 2018, alongside an increase in the expenditure on raising funds. The latter has risen at a faster rate, which has resulted in the proportion of expenditure on charitable activities in year reducing from 73p to 64p per £1. This is a planned investment in our fundraising activity to support the continued growth in income needed to enable delivery of our strategy to tame prostate cancer.

For a breakdown of prior year comparatives see note 24.

#### 6. Grants awarded

Grant commitments comprise research commitments and programme commitments.

Research grants are awarded to fund Researchers in three key areas in line with our Research strategy; better treatment, better diagnosis and better prevention.

_	2019	<b>2018</b>	BETTER IREATMENT	BETTER DIAGNOSIS	BETTER PREVENTION
Research grants were awarded to the following institutions:	Total £'000	Total £'000			
The Institute of Cancer Research	2,240	1,301	$\checkmark$	$\checkmark$	$\checkmark$
Imperial College London	1,972	-	$\checkmark$	$\checkmark$	
Queen's University Belfast	685	276	$\checkmark$	$\checkmark$	$\checkmark$
University of Manchester	565	-	$\checkmark$	$\checkmark$	$\checkmark$
University of Birmingham	275	-		$\checkmark$	
Queen Mary University of London	245	-	$\checkmark$		
University of Glasgow	242	-	$\checkmark$		
University College London	-	1,761	$\checkmark$		
University of Sheffield	-	597	$\checkmark$		
Royal Marsden NHS Foundation Trust	-	574	$\checkmark$		
University of Oxford	-	469	$\checkmark$		$\checkmark$
Newcastle University	-	347	$\checkmark$	$\checkmark$	
_	6,224	5,325			

Research grants awarded in the year were for the following projects:

- Centres of Excellence Extension: Two awards totalling £2.5 million consisting of £1.25 million to The Institute of Cancer Research and a total of £1.25 million to Queen's University Belfast and University of Manchester.
- Research Innovation Awards: Eight awards totalling £3.06 million to fund bold, innovative research that has the real potential to impact the way prostate cancer is diagnosed, treated or even prevented.
- PREDICT: One award totalling £0.7 million to Imperial College London.

#### 6. Grants awarded (continued)

Reconciliation of research grants payable: £'000	£'000
Commitments at 1 April 17,928	18,455
Commitments made in the year 6,224	5,325
Grant adjustments and cancellations (329)	(187)
Grants paid during the year (5,212)	(5,665)
Commitments at 31 March 18,611	17,928
2019	2018
Outstanding research commitments at 31 March 2019 £'000 are payable as follows:	£'000
Within one year (note 15)         9,498	5,706
After more than one year (note 16) 9,113	12,222
18,611	17,928

The split of future payment dates is based upon contractual terms.

Programme commitments, included within Support and Influencing, comprise the following:

- Funding to a number of NHS and other bodies for part-time and full-time Health and Social Care Professionals (HSCP) for periods of between 18 months and two years. Programmes have been awarded to NHS Trusts, Care Commissioning Groups and Hospices. No new HSCP programme grants were made in 2018/19.
- Funding for TrueNTH (previously ASAP A Survivorship Action Partnership), a three year programme. TrueNTH is a global initiative, led by the Movember Foundation, tackling critical areas of prostate cancer care. It puts the spotlight on helping men with prostate cancer and their families to overcome a range of prostate cancer side-effects, helping them return to a good quality of life following diagnosis and treatment. One new TrueNTH programme grant totalling £60,000 was made to The University of Southampton in 2018/19, for additional scaling work.
- Funding for Life After Prostate Cancer Diagnosis (formerly known as PROMS Patient Recorded Outcome Measures), a three year programme. This research, funded by the Movember Foundation, aims to find out the impact of prostate cancer on everyday life by asking men and their families. The results will be key to improving the lives of men diagnosed with prostate cancer now and in the future. No further awards were committed to under this programme in either year.

#### 6. Grants awarded (continued)

Total programme commitments: Total	Total
£'000	£'000
TrueNTH 383	670
Health and Social Care Professionals (HSCP) 28	77
Life After Prostate Cancer Diagnosis 139	547
550	1,294
2019	2018
Reconciliation of programme grants payable: £'000	£'000
Commitments at 1 April 1,294	3,598
Commitments made in the year -	-
Grant adjustments and cancellations (44)	(17)
Grants paid during the year (700)	(2,287)
Commitments at 31 March 550	1,294
2019	2018
Outstanding programme commitments at 31 March 2018Totalare payable as follows:£'000	Total £'000
Within one year (note 15)550	1,145
After more than one year (note 16)	149
550	1,294

The split of future payment dates is based upon contractual terms.

#### 7. Council of management and employee information

No member of the Council received any remuneration from the charity in either year. Directly incurred expenses are reimbursed, if claimed.

Trustees' expenses represents the payment or reimbursement of travel and subsistence costs which for the year were Nil (2018: £104 for one trustee) relating to attendance at meetings of the trustees.

The key management personnel of the charity comprises the members of the Council of Management (Board of Trustees), the Chief Executive and the Executive Directors, as stated on pages 37 and 38 of the Annual Report. The total employee benefits of the key management personnel of the charity were  $\pounds$ 574,018 paid to six posts (2017/18:  $\pounds$ 538,152 paid to five posts). Interest-free travel loans amounting to  $\pounds$ 6,912 were provided to two of these key personnel (2017/18:  $\pounds$ 9,164 to two key personnel). The amounts outstanding at the year end amounted to  $\pounds$ 6,999 (2017/18:  $\pounds$ 5,666).

The above benefits relate to the Chief Executive and Executive Directors only.

The average full-time equivalent number of persons employed by the group during the year was:

	2019	<b>2018</b>
Fundraising	59	52
Research	7	7
Support and Influencing	43	45
Communications	35	32
Resources, People and Facilities	31	35
Engagement	11	12
	186	183

The average number of employees (head count based on number of staff employed) during the year was as follows:

	2019	2018
Fundraising	62	54
Research	7	7
Support and Influencing	46	48
Communications	37	34
Resources, People and Facilities	32	36
Engagement	11	12
	195	191

#### 7. Council of management and employee information (continued)

Amounts paid in respect of employees were:

	2019	2018
	£'000	£'000
Salaries and wages	7,139	6,792
Social security costs	757	720
Pension costs	724	668
Termination payments	26	51
Total emoluments of employees	8,646	8,231
Agency staff	213	355
Total emoluments	8,859	8,586

The number of employees whose emoluments for the year were over £60,000 was:

	2019	2018
£60,001 to £70,000	5	4
£70,001 to £80,000	3	2
£80,001 to £90,000	1	4
£90,001 to £100,000	-	-
£100,001 to £110,000	-	-
£110,001 to £120,000	1	1

The changes in banding in the above table reflect movements within the senior team during the year, as shown on pages 37 and 38.

The charity made pension contributions under a defined contribution scheme amounting to \$95,629 (2017/18: \$107,204), in respect of the 10 employees in the table above (2017/18: 11).

Trustee indemnity insurance for the year was set at £5 million cover collectively at a cost of £3,780 (2017/18: £4,032).

#### 8. Pension costs

The charity operates a defined contribution pension scheme. The assets of the scheme are held separately from those of the charity in independently administered funds. The pension cost, which represents contributions paid by the charity to these funds, amounted to  $\pounds724,264$  (2017/18:  $\pounds667,939$ ). The amount payable at the year end was  $\pounds65,015$  (2017/18:  $\pounds58,469$ ).

#### 9. Analysis of support costs

The breakdown of support costs and how these are allocated is shown below.

			2019	2018
	Raising funds £'000	Charitable activities £'000	Total costs £'000	Total costs £'000
Staff and similar costs	745	1,068	1,813	2,186
Supplies and services	233	334	567	729
Premises costs	460	660	1,120	1,117
Depreciation	31	44	75	106
Governance costs	16	23	39	39
	1,485	2,129	3,614	4,177

Governance costs comprise:	2019	2018
	Total costs £'000	Total costs £'000
Audit fees	32	32
Legal fees	7	7
	39	39

For a breakdown of prior year comparatives see note 24.

#### IO. Intangible fixed assets - Group and charity

	Software
Cost	£'000
At 1 April 2018	210
Additions	7
At 31 March 2019	217
Amortisation	
At 1 April 2018	114
Charge for the year	45
At 31 March 2019	159
Net book value	
Net book value at 31 March 2018	96
Net book value at 31 March 2019	58

#### II. Tangible fixed assets - Group and charity

	Lease improvements	Fixtures and fittings	Computer equipment and website development	Total
Cost	£'000	£'000	£'000	£'000
At 1 April 2018	601	582	993	2,176
Additions	-	-	109	109
At 31 March 2019	601	582	1,102	2,285
Depreciation				
At 1 April 2018	277	581	935	1,793
Charge for the year	62	-	45	107
At 31 March 2019	339	581	980	1,900
Net book value				
Net book value at 31 March 2018	324	1	58	383
Net book value at 31 March 2019	262	1	122	385

#### 12. Investments - Charity

The charity's investment in its active subsidiary undertaking Prostate Cancer Trading Limited (06157784) amounted to £100, being 100 ordinary shares, representing the entire share capital. The charity also wholly owns the following dormant companies: The Prostate Cancer Charity Limited (08183613), Prostate Cancer Research Foundation (05926197) and Prostate Action (07149009), which are not consolidated in these financial statements.

#### I3. Stock

	GROUP		CHARIT	Y
	2019	2018	2019	2018
	£'000	£'000	£'000	£'000
Stock for resale	63	34	-	-

#### **I4. Debtors**

	GROUP		CHARITY	Y	
	2019	2018	2019	2018	
-	£'000	£'000	£'000	£'000	
Trade debtors	23	70	23	58	
Amounts due from subsidiary undertaking	-	-	421	250	
Prepayments	1,012	882	1,012	882	
Accrued income	1,016	1,889	1,010	1,889	
Other debtors	1,057	253	1,057	253	
	3,108	3,094	3,523	3,332	
Movember Foundation accrued income	15,093	14,240	15,093	14,240	
Total debtors	18,201	17,334	18,616	17,572	

The group has been notified of certain legacies which have not been accrued in the financial statements as the recognition criteria in line with the Charities SORP had not been met at the year end.

There are no specific security or repayment terms in respect of the working capital agreement with the subsidiary company.

The donation from the Movember Foundation is confirmed and committed by them each year following the success of that year's fundraising campaign. Funds are then received in line with the programme committed expenditure.

#### 15. Creditors - Falling due within one year

	GROUP		CHARITY	,
	2019	2018	2019	2018
	£'000	£'000	£'000	£'000
Trade creditors	2,754	1,293	2,746	1,291
Research commitments	9,498	5,706	9,498	5,706
Programme commitments	550	1,145	550	1,145
Other taxes and social security	240	219	221	209
Accruals and deferred income	583	1,161	575	1,158
Other creditors	415	337	415	337
	14,040	9,861	14,005	9,846

Deferred income relating to fundraising activities taking place after the year end amounted to Nil (2017/18: £6,990).

Deferred income analysis:	GROUP		CHARITY	,
	2019	2018	2019	2018
	£'000	£'000	£'000	£'000
Balance at 1 April	7	13	7	13
Amounts released to incoming resources	(7)	(13)	(7)	(13)
Amount deferred in the year	-	7	-	7
Balance at 31 March	-	7	-	7

#### **I6.** Creditors – Falling due after more than one year

	GROUP		CHARITY	(
	2019	2018	2019	2018
	£'000	£'000	£'000	£'000
Research commitments	9,113	12,222	9,113	12,222
Programme commitments	-	149	-	149
Other creditors	323	72	323	72
	9,436	12,443	9,436	12,443

Other creditors consist of the initial rent-free period of the lease at Counting House. This will be released over the next four years and three months, being the remainder of the lease period.

#### **17. Analysis group net assests between funds**

	General funds £'000	Designated £'000	Restricted £'000	Total funds £'000
Fixed assets (note 10 and 11)	-	443	-	443
Current assets	12,963	-	25,050	38,013
Liabilities due within one year	(3,992)	-	(10,048)	(14,040)
Liabilities due after more than one year	(323)	-	(9,113)	(9,436)
Net assets at 31 March 2019	8,648	443	5,889	14,980

For a breakdown of prior year comparatives see note 24.

#### **18. Movement in funds - Group**

	As at 01.04.2018	Incoming	Outgoing	Transfers	As at 31.03.2019
	£'000	£'000	£'000	£'000	£'000
Restricted funds:					
Movember Foundation	5,051	3,566	(2,826)	(294)	5,497
Other restricted funds:					
General research	876	811	(2,049)	362	-
IT architecture project	-	256	-	-	256
Helpline	57	441	(457)	-	41
Other restricted funds	99	55	(59)	-	95
Total other restricted funds	1,032	1,563	(2,565)	362	392
Total restricted funds	6,083	5,129	(5,391)	68	5,889
Unrestricted funds	9,473	22,333	(22,974)	(184)	8,648
Designated funds:					
Fixed asset reserves	479	-	(152)	116	443
Total designated funds	479	-	(152)	116	443
Total unrestricted funds	9,952	22,333	(23,126)	(68)	9,091
Total funds	16,035	27,462	(28,517)	-	14,980

The transfers between funds reflect adjustments made as a result of reconciliations during the year.

#### **19.** Purposes of restricted funds

Movember Foundation	Movember Foundation income from its campaigns, restricted to spend on research and survivorship services for men with prostate cancer.
General research	Funding received to support either specific research awards or to be put towards other unfunded research activity.
IT Architecture Project	Funding received to support the Charity's IT data architecture and website development.
Helpline	Funding for the specialist helpline to increase access and support for men and their families affected by prostate cancer.

#### 20. Purposes of designated funds

Designated funds – funds set aside from the general fund for objectives stated below:

Fixed asset reserves Amount representing the net investment in fixed assets.

#### 21. Commitments under operating leases

The group has commitments under operating leases due within the periods stated below:

	PROPERTY		
	2019	2018	
	£'000	£'000	
Less than one year	609	147	
Two to five years	1,972	2,411	
Greater than five years	-	151	
	2,581	2,709	

#### 22. Note to group statement of cash flows

Reconciliation of net income/(expenditure) to net cash inflow from operating activities.

	2019	2018
	£'000	£'000
Net income/(expenditure) for the reporting period (as per the statement of financial activities)	(1,055)	211
Adjustments for:		
Dividends and interest	(153)	(154)
Depreciation charges	152	223
Loss on sale of fixed assets	-	-
(Increase)/decrease in stocks	(29)	9
Increase in debtors	(867)	(1,470)
Increase/(decrease) in creditors	1,172	(2,259)
Net cash used in operating activities	(780)	(3,440)

#### 23. Related party transactions

This note lists transactions with other entities in which either Trustees or key management personnel of Prostate Cancer UK or their close family members hold positions of authority.

**Related party:** University of Surrey.

**Connected party:** Professor Sara Faithfull – a Trustee of Prostate Cancer UK from 1 March 2016 and project lead for the Exercise and Diet project within the TrueNTH programme at the University of Surrey.

Detail of<br/>transactions:Total commitment of £430,782 with an outstanding commitment at 31 March 2019<br/>of £11,304.

This commitment was made before Professor Faithfull became a Trustee of the charity.

Aggregate donations received from trustees, key management personnel and connected parties during the year amounted to £2,448 (2017/18: £13,849).

Event and merchandise purchases by trustees, key management personnel and connected parties amounted to £5,912 (2017/18: £12,000).

There were no other related party transactions in either year.

#### 24. Comparative note only

#### Note 2 – Income from donations and legacies and expenditure on raising funds

	INCOME	2018	
	Unrestricted £'000	Restricted £'000	Total income £'000
Individual donors and legacies	10,687	23	10,710
Community and events	6,645	13	6,658
Movember Foundation	-	3,048	3,048
Major donors and charitable trusts	599	1,813	2,412
Corporate donors	860	152	1,012
Donated goods and services	395	-	395
Other donations	317	9	326
	19,503	5,058	24,561

	EXPENDITURE ON RAISING FUNDS		2018	
	Direct costs £'000	Support costs £'000	Total costs £'000	
Individual donors and legacies	2,687	596	3,283	
Community and events	1,754	389	2,143	
Major donors and charitable trusts	436	97	533	
Corporate donors	472	104	576	
Trading	40	-	40	
	5,389	1,186	6,575	

#### 24. Comparative note only - continued

#### Note 5 – Charitable activities

			2018
	Direct costs £'000	Support costs £'000	Total costs £'000
Research	5,695	369	6,064
Support and influencing	3,938	1,186	5,124
Awareness	5,538	1,436	6,974
	15,171	2,991	18,162

#### Note 9 – Analysis of support costs

			2018
	Raising funds £'000	Charitable activities £'000	Total costs £'000
Staff and similar costs	621	1,565	2,186
Supplies and services	207	522	729
Premises costs	317	800	1,117
Depreciation	30	76	106
Governance costs	11	28	39
	1,186	2,991	4,177

#### Note 17 – Analysis of group net assets between funds

	General funds £'000	Designated funds £'000	Restricted funds £'000	Total funds 2018 £'000
Fixed assets (note 10 and 11)	-	479	-	479
Current assets	12,555	-	25,305	37,860
Liabilities due within one year	(3,081)	-	(6,851)	(9,932)
Liabilities due after more than one year	(1)	-	(12,371)	(12,372)
Net assets at 31 March 2018	9,473	479	6,083	16,035

### Thank you

ABB Scotland Alastair Gibbons Amalur Foundation Angela Milne Angus McCaffery Anonymous Pioneers Aspire Pharma Itd Astellas Pharma Itd **Barry Family Foundation** Below the Belt Grooming **Bill Smail** Brian and Jill Moss Charitable Trust Mr I F Brown BTG plc **Burton Menswear Camille Rhodes** Cardy Beaver Foundation Caroline Jowett-Ive Cato Stonex **Charles Wells** Chris Field David Lyon David A Pretty, CBE David Sullivan Don Robert Duncan Heath easyJet plc **EBM** Charitable Trust Efficiency East Midlands (EEM Ltd) Ms V B Farjeon **Fidelity UK Foundation** FirstGroup plc Florian Charitable Trust Fuller, Smith & Turner plc Gerry Pack Gordon Gilby Hadyn Cunningham Mr F W Hale Mr B W Hammerton Homebase

Mr P K Howard Hugh Orange HW Abbott Will Trust Iceland Foods Charitable Foundation Irene Ann Foga **Discretionary Trust** Ivor Spiro J P Moulton Charitable Foundation Jacamo Jackie Dickson Janssen UK Ltd Jemima Jowett-Ive Jim and Caroline O'Neill Jonathan Abrahams John Bloor, OBE John Brownless John Emberson Julian Howard JW Lees & Co (Brewers) Kevin Webber Keyline Civils and Drainage **KN** Circet Lady Joy Bourne Laurance Racke LGC Group Life Technologies Itd Lincolnshire Cooperative Lord Evans of Watford Malcolm Strong Marston's Brewery plc Miss Margaret Butters Reekie Charitable Trust Moss Bros Group plc Movember Foundation Pam Chaplin Patient Representative Network Patrick and Helena **Frost Foundation** Paul Thompson Pentel Stationery

Peter Bache Peterborough Male Voice Choir PF Charitable Trust PGA Phillip and Julie Porter **Pilkington Charities Fund PPG** Architectural Coatings UK & Ireland Professor Mark Emberton Provincial Grand Chapter of Hampshire and the Isle of Wight PubAid **Research Advisory** Committee Research Strategy Group Royal Bank of Scotland Safran Seats GB Mrs P E C Schenk Scotland's Towns Partnership Scottish Grocers Federation Severfield Foundation ShareGift Sir Martin and Lady Jocelyn Broughton Sir Maurice and Lady Hatter Sir Peter Thompson Sir Samuel Scott of Yews Sir Stuart Lipton Sir Tom Hunter Foundation Stewart Matthewson Mr R J A G Smith Sovereign Health Care Squire Patton Boggs The 3Ts Charitable Trust The Access Group The Band Trust The Barbour Foundation The Borrows Charitable Trust

The Doris Field Charitable Trust The F.J Wallis **Charitable Trust** The Henry Lumley Charitable Trust The Holbeck Charitable Trust The Kidani Memorial Trust The National League The Patrick Rowland Foundation The Peter Stebbings Memorial Trust The Rotary Club of Leatherhead The Sandhu Charitable Foundation The Simon Gibson Charitable Trust The Steel Charitable Trust The WA Handley Charity **Trust Distribution** Thomas Allen Thomas Duggan Ms P J Thompson **Timothy Hailstone** Tony Bramall Charitable Trust Tony McGovern TM Lewin Tom and Sheila Springer Charity Tom Curtin Tracy and Team Darts Trailfinders Ltd Vanarama WA Young Charitable Trust Walking Football Association Walking Football Scotland William Hill Scotland Worcester Bosch Zochonis Charitable Trust

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