Company Number 3409832
Registered Charity Number 1071038
Office of the Scottish Charity Regulator SC040914

Bowel Cancer UK

Trustees' Report and Audited Financial Statements
For the year ended 31st December 2014



BOWEL CANCER UK CONTENTS TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2014



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Welcome to the Trustees' Annual Report and Audited Financial Statements for the year ended 31st December 2014.

ACHIEVEMENTS AND ACTIVITIES DURING 2014

Introduction and key highlights

2014 was another good year for Bowel Cancer UK as we worked with determination to meet our mission to save lives and improve the quality of life of all those affected by bowel cancer. Our key highlights include:

- Making excellent progress with our Never Too Young and endoscopy campaigns including influencing national clinical referral guidance and gaining wider spread support for our policy calls.
- Increasing our high profile celebrity support. For example, Ricky Gervais, Stephen Fry, Benedict Cumberbatch and Sir Chris Hoy all got behind our Never Too Young campaign helping to cascade our key messages even further.
- Running another successful nurse study day attended by 120 nurses.
- Securing funding for and implementing a partnership project with Penny Brohn Cancer
 Care to pilot Living Well services for people in Scotland.
- Launching our new Diet Resource for people living with and beyond bowel cancer and winning the learning disability resource category at the 2014 British Medical Association Awards for our bowel health resource for people with learning disabilities.
- Directly speaking to over 7,000 people through our health promotion activities and distributing around 170,000 pieces of awareness information.
- Reaching an even broader audience through our proactive media outreach programme, resulting in over 1,200 mentions in the media and making appearances on TV and radio, including BBC Breakfast, Sky News Sunrise, ITV's This Morning and BBC Radio 4.
- Starting a joint research project with the Association of Coloproctology of Great Britain and Northern Ireland on variations in resources in coloproctology and outcomes for patients across the UK.
- Increasing our income by 7.5% giving us a firm foundation for 2015.

The Board of Trustees and staff would like to offer grateful thanks to the charity's many clinical, academic and business advisors for their advice and practical help in 2014. We also want to especially thank our wonderful patient and fundraising supporters and volunteers without whom we would not exist and whose dedication is both humbling and inspiring.



Background

During 2014 we continued to deliver our strategy as outlined in our strategic framework (Strategic Plan 2013-2016) which is:

Our mission:

Bowel Cancer UK aims to save lives and improve the quality of life for all those affected by bowel cancer.

Our values and operating principles:

Bowel Cancer UK will always:

- Ensure that the needs of all those affected by bowel cancer are at the heart of all we do;
- Be informed by clinical and other healthcare professional expertise;
- Work in partnerships that are beneficial to those affected by bowel cancer;
- Act with honesty, transparency and integrity;
- Strive for excellence, be innovative, independent and accountable for all we do;
- Embrace diversity, treating everyone fairly, with understanding and respect.

Our strategic aims:

- Strategic Aim 1: Increase awareness of bowel cancer and promote action amongst the general public and health care professionals
- Strategic Aim 2: Increase the charity's direct services for patients, carers and health care professionals focusing on gaps and best practice
- Strategic Aim 3: Lobby and campaign to ensure that high quality services are in place to meet demand across the UK

Our organisational aims:

We also have three organisational aims which underpin the delivery of our strategic aims, as follows:

- Organisational aim 1: Raise the charity's profile in order to increase our impact and reach
- Organisational aim 2: Prioritise, develop and build fundraising expertise to grow the charity's income
- Organisational aim 3: Develop the charity's infrastructure and resources to enable us to meet our mission



Strategic Aim 1: Increase awareness of bowel cancer and promote action amongst the general public and health care professionals

In 2013 we said we would:

- continue to develop and deliver a range of bowel cancer training, education and resources for healthcare professionals (HCPs) to promote best treatment and care.
- continue to develop and deliver our excellent range of bowel cancer awareness training and resources to promote early detection.

During 2014 we:

- delivered a number of bespoke and well evaluated training courses across the country including to GP practices. We also worked with Health Education London project (Team Up) to train a group of junior doctors and medical students to deliver bowel and screening awareness presentations in the community.
- took the decision to stop actively seeking information stands for volunteers to attend, which reduced the number of events we attended, however we still managed to reach over 7,000 directly with our bowel health and screening messages and distributed over 170,000 pieces of awareness information.
- completed 2 Awards for All funded projects aiming to raise awareness in deprived areas, involving recruiting and training new volunteers and producing two new pieces of information versions of the Good Bowel Health booklet in Bengali and easy-read.

In 2015 we will:

- train more volunteers to increase our reach across the country and develop targeted interventions to better reach high risk groups such as older people.
- seek to further strengthen our evaluation model, following up with attendees 3 and 6 months after seeing a presentation.



Strategic Aim 2: Increase the charity's direct services for patients, carers and health care professionals focusing on gaps and best practice

In 2013 we said we would:

- continue to develop and deliver a range of bowel cancer training, education and resources for healthcare professionals (HCPs) to promote best treatment and care.
- pilot information and support services where appropriate, in partnership with Macmillan Cancer Support, Penny Brohn Cancer Care and other organisations, to meet the unmet needs of people living with and beyond bowel cancer, including younger patients.
- retain our Information Standard accreditation.

In 2014 we:

- held our third colorectal cancer study day in Bristol attended by 120 delegates with very positive evaluation and further developed our plans for extending our training offer to health care professionals in 2015.
- made the decision to close our information and support service as we want to be a
 proactive organisation focusing on adding value and this was a reactive service where
 there is plenty of other provision.
- developed a pilot service with Penny Brohn Cancer Care in Scotland which focuses on enabling people to live well after cancer through the delivery of health and wellbeing clinics, 'Living well with the impact of cancer' courses and follow up services over a year.
- retained our Information Standard accreditation and produced a comprehensive diet information pack "Your diet: living with and beyond bowel cancer", which was published in February and has been very well received by patients.
- won the learning disability resource category at the 2014 British Medical Association Awards for our bowel health and screening resource and training programme for people with learning disabilities and their carers.
- undertook detailed research with younger people diagnosed with bowel cancer to inform the development of a new information booklet for this audience to complement audio visual information recorded at our nurse conference. This will be published in 2015.



In 2015 we will:

- complete and launch (in April 2015) the information booklet for younger people along with new audio visual information for the website.
- start to develop an online information portal for patients and their families.
- deliver our annual nurse conference.

Strategic Aim 3: Lobby and campaign to ensure that high quality services are in place to meet demand across the UK

In 2013 we said we would:

- publish new policy research and recommendations on endoscopy and diagnostic testing and undertake research into bowel cancer in people over 65 and people diagnosed with advanced bowel cancer.
- continue to pursue progress on the recommendations set out in our "Never Too Young" report on bowel cancer in people under 50.
- commence a joint project with the Association of Coloproctology of Great Britain and Ireland (ACPGBI) on resources in coloproctology and patient outcomes.
- improve Bowel Cancer UK's profile among parliamentarians to leverage influence on our priority issues.

During 2014 we:

- published "Right Test, Right Time", a comprehensive policy report on endoscopy services in the UK which was informed by a survey of over 700 people who have had an endoscopy. Our work in this area has been very well received by all key stakeholders.
- secured funding for and commenced two new research projects: a joint project with the
 Association of Coloproctology for Great Britain and Northern Ireland correlating
 resources in coloproctology and patient outcomes from the Bowel Disease Research
 Fund; and from the Department of Health for an academic study at the University of
 Exeter, called BODYSHOP, to develop a clinical decision aid tool for GPs to help better
 identify people under 50 with symptoms of bowel cancer.
- made progress on the recommendations set out in our "Never Too Young" report. This included: revised NICE guidance on referral for suspected cancer containing for the first time recommendations for people under 50 with symptoms of bowel cancer; securing a meeting with the Prime Minister's Special Advisor on health on surveillance screening for people at higher risk, following the publication of a briefing on the subject and media activity.



- recruited over 40 Parliamentary champions across the four UK devolved Parliaments who have agreed to support our campaigning work and built our community of campaign supporters to nearly 300.
- in addition, in December, our Chief Executive presented to the Cross Party Group on Cancer in Holyrood on the work of Bowel Cancer UK.
- pursued research on the experiences of people diagnosed with bowel cancer over the age of 65, and people with advanced bowel cancer. A report on advanced disease will be published in 2015.
- undertook other significant activity: responding to five policy consultations; helping to set up and taking on the joint secretariat of the NHS England Colorectal Clinical Reference Group; and lobbying to secure the roll-out of the age extension of the bowel screening programme, which will be done in early 2015.
- became a founding member of the Never Too Young global alliance, a group of bowel cancer charities predominately in America who work to improve the experience of people diagnosed with bowel cancer under the age of 50.

In 2015 we will:

- publish two new policy reports on variations in resources in coloproctology and outcomes for patients with the APBIGBNI and on advanced bowel cancer.
- conduct new research into the experiences of people with bowel cancer under the age of 50 to identify what has changed and progress make progress on improving access to surveillance screening for high risk group.
- Continue to press forward on our recommendations to improve capacity and access to endoscopy services in the UK.

Organisational aim 1: Raise the charity's profile in order to increase our impact and reach

In 2013 we said we would:

- establish a 3 year marketing and communications strategy to set priorities.
- increase the charity's media profile and coverage through proactive outreach work.
- use social media channels and other outlets to grow our community of supporters.



During 2014 we:

- completed work on developing our brand values and brand proposition, with buy-in from the Marketing and Communications Sub-Committee and the Board of Trustees.
 We expect to complete our marketing and communications strategy in 2015.
- increased the number of visitors to our website, with an average of over 600 visitors per day. The most popular page on our website is on the signs and symptoms of bowel cancer.
- increased our number of Facebook fans and Twitter followers and interacted with 31,000 people on social media, with our content being seen 37.5 million times.
- ran several successful social media-led initiatives, including: a coordinated celebrity tweet-out on our Never Too Young work, involving Stephen Fry, Ricky Gervais and Benedict Cumberbatch among others; working with AXA PPP healthcare on a Twitter day to support our joint #Bodytalking campaign.
- were mentioned in 1,200 items of press coverage. The topics that drove the most media coverage were: the deaths of Stephen Sutton and Linda Bellingham, and Bowel Cancer Awareness Month.
- made appearances on ITV's This Morning and Good Morning Britain, BBC Breakfast, Sky News, Channel 5's The Wright Stuff.

In 2015 we will:

- establish a 3 year marketing and communications strategy to set priorities.
- increase the organisation's media profile and coverage, including targeting the securing of celebrity supporters and broadening our range of media spokespeople.
- use our social media channels to grow our community of supporters.

Organisational aim 2: Prioritise, develop and build fundraising expertise to grow the charity's income

In 2013 we said we would:

- create a varied programme of events, treks and challenges which encouraged participation, engagement, loyalty and prestige;
- research and identify new major donor, trust, statutory, foundation and corporate prospects and secure and sustain multi-year partnerships wherever possible.
- develop and launch a regular giving programme and an appeals programme and develop and promote a Star of Hope fund.



In 2014:

Bowel Cancer UK's fundraising activities raised £1.7m, the highest annual fundraising total ever generated by the charity. This represents a 7.5% increase on income from the previous year. We would like to express our gratitude to every company, trust, community group, event participant and individual giver who helped fund our work in 2014.

Highlights from our work this year include:

- increasing our base of community fundraisers from 700 to 1,000 active supporters.
- achieving an increase of 37% in income raised by the Trust and Foundation programme over 2013. Statutory funding was secured from the Scottish Executive.
- the continuation of the benefit from a commitment of £100,000 from an anonymous donor which has funded a PR & Press Manager post over a three year period.
- our own place run programme performing strongly and shown considerable growth from 2013 to 2014 with a 68% increase in activity.
- in Memoriam donations performing well with a number of high profile funds being set up. Much Loved Star of Hope funds were a new introduction for supporters to give inmemory helping to increase this area of income by 52%.
- the summer and Christmas appeals which were sent to a highly targeted audience of responsive donors. Both appeals exceeded their target of a 10% response rate;
- a very successful charity of the year partnership with law firm, Travers Smith LLP;
- the strong performance of Decembeard in 2014 which saw increased participation levels and income significantly beyond that in 2013.

In 2015 the fundraising team will:

- explore potential for more opportunities to engage and motivate individual donors and community and events supporters to make committed gifts or to raise funds including by improving our supporter materials and developing our programme of bespoke community and challenge events.
- manage all existing relationships with major donors, trusts and statutory funders to secure on-going and multiyear support and develop and increase our base of supporters.
- secure and sustain high-value multi-year partnerships with companies.



Organisational aim 3: Develop the charity's infrastructure and resources to enable us to meet our mission

In 2013 we said we would:

- develop key performance indicators focusing on the key strategic aims.
- develop and implement an HR strategy including the introduction an annual staff survey and a benchmarking exercise for Terms and Conditions of employment.
- continue with the planned upgrade of IT systems and development of the database.

During 2014 we:

- did not develop KPIs but did review strategic aims and objectives in line with our brand proposition. We developed a new strategic framework shown on Page 10.
- ran our first staff survey which was very useful. It gave us helpful recommendations and focus to ensure our staff are developed and supported effectively.
- reviewed our salary system and introduced a new policy to clarify procedures for setting and signing off staff remuneration packages.
- upgraded some of our key HR policies and procedures with help from an external consultant who now works alongside the charity.
- continued to develop our use of our Raiser's Edge database by looking at our use of data and ensuring our records are accurate and new records consistently recorded.
- finished our programme of upgrading our IT equipment.

In 2015 we will:

- complete the review of our strategy and priorities moving ahead.
- review all our HR policies and procedures and run another staff survey to identify any key issues that need to be addressed or what is working particularly well.
- review our financial management policies and procedures and ensure all budget holders are given finance training.



Bowel Cancer UK Strategic Plan 2015-2018

Mission:

Bowel Cancer UK is determined to save lives and improve the quality of life for all those affected by bowel cancer

Values and Operating Principles

Bowel Cancer UK will always:

- ensure that the needs of all those affected by bowel cancer are at the heart of all we do:
- be informed by clinical and other healthcare professional expertise;
- work in partnerships that are beneficial to those affected by bowel cancer;
- act with honesty, transparency and integrity;
- strive for excellence, be innovative, independent and accountable for all we do:
- · embrace diversity, treating everyone fairly, with understanding and respect.

Strategic Aim 1

Strategic Aim 2

Champion early diagnosis of bowel cancer

Improve access to best treatment and care for all those closely affected by bowel cancer

Organisational aim 1

Develop the charity's use of marketing and communications to increase our impact and reach

Organisational aim 2

Develop a sustainable income base for the charity

Organisational aim 3

Develop the charity's infrastructure and resources to enable us to meet our mission

The Board of Trustees also formed a strategic working group to consider two key issues: firstly should we continue to deliver any direct services for patients and secondly should we set up a new research programme. This work will complete in early 2015.



Conclusion

As this brief report highlights 2014 was a busy and successful year. Our over-riding focus for 2015 will be to grow the charity further to enable us to increase our impact and reach so we can save more lives from bowel cancer.

PUBLIC BENEFIT

From 1st April 2008 the Charities Act 2006 requires all charities to meet the legal requirement that its aims are for the public benefit. The Charity Commission in its "Charities and Public Benefit" guidance requires that there are two key principles to be met in order to show that an organisation's aims are for the public benefit: first, there must be an identifiable benefit and secondly the benefit must be to the public or a section of the public. The Council of Management (which equates to the Board of Trustees and henceforth referred to as such) confirm they have regard to the Charity Commission's guidance on public benefit and consider each year how it meets the public benefit objectives outlined in Section 4 of the Charities Act 2011. They are satisfied that Bowel Cancer UK meets the requirements and conforms with the Act's definition of a charity meeting all elements of the two key principles.

Our beneficiaries are at the heart of everything that we do as we believe this report fully demonstrates:

- We raise awareness of bowel cancer through our lobbying and campaigning, through our work with the medical profession and health officials, and through the volunteer awareness programme;
- We work with policy makers to ensure that the needs of those affected by bowel cancer and their carers are adequately addressed; and
- We provide practical support and advice to bowel cancer patients and their carers, by providing written information and advice, through a telephone and email advisory service staffed by specialist nurses, and by co-ordinating support given by volunteers who have experience of bowel cancer;
- We provide a range of training and information materials for Health Care professionals.

Our services are available to anyone who needs them, within the limits of our resources.



REGULATORY AND ADMINSTRATIVE DETAILS

Regulatory Compliance Statements

Bowel Cancer UK is registered as a company limited by guarantee no. 3409832 and has a charity no. 1071038 in England and Wales and SC040914 in Scotland. The principal office address is Willcox House, 140-148 Borough High Street London SE1 1LB, it is also the registered office address.

The Trustees are also the Directors of the Charitable Company for the purposes of the Companies Act. The Trustees in presenting their annual report and financial statements for the year ended 31st December 2014 for the Charitable Company confirm that they comply with the current statutory requirements, the requirements of the Charitable Company's governing document and the provisions of the Statement of Recommended Practice (SORP) "Accounting and Reporting by Charities" issued in 2005.

Who we are

Established in 1987, Bowel Cancer UK aims to raise awareness and save lives from bowel cancer. Our full mission statement can be found on page 2 of this report.

The main activities of the organisation include:

- Raising awareness of bowel cancer, its symptoms and the national screening programme and promoting simple changes people can make to their diet and lifestyle to reduce their risk of developing bowel cancer in the future.
- Conducting social research into different aspects of patient experience and using these to inform the development of our services and our policy positions.
- Policy and influencing work focused on key decision makers in national, regional and local government.
- Campaigning on behalf of patients to ensure they get access to best possible treatment and care.
- Providing direct advice and information services to patients and others affected by the disease.

For more information visit our website www.bowelcanceruk.org.uk



Where we are

The London Office (Principal & Registered office)

Willcox House

140-148 Borough High Street

London

SE1 1LB

Tel: 020 7940 1760 Fax: 020 7940 1761

Email: admin@bowelcanceruk.org.uk Website: www.bowelcanceruk.org.uk The Scottish Office 20 Queen Street Edinburgh EH2 1JX

Tel: 0131 225 5333

Council of Management (Board of Trustees)

The following individuals acted as Trustees throughout the year:

Peter Sedgwick (Chair)

Stephen Gibson (Vice Chair)

Linda Clemett (Treasurer)

Richard Anderson

Ann Elliott (Resigned 26 January 2014)

Phil Gates (Resigned 26 August 2014)

Mark Hodgson

Dennis Horner

Christina Dolan Lakin

Jerry Luckett

John Schofield

Michelle Scott

David Strickland-Eales (Resigned 19 September 2014)

Changes since Year End

Alastair Macpherson (Resigned 30 January 2015)

Chief Executive and Senior Management Team

Chief Executive

Deborah Alsina

Director of Fundraising

Luke Squires

Director of Finance and Resources

Simon Hawkins



Member of our Medical Advisory Board are:

Annie Anderson, Professor of Nutrition, University of Dundee

Jervoise Andreyev, Consultant Gastroenterologist in Pelvic Radiation Disease, Royal Marsden Hospital

Wendy Atkin, Professor of Gastrointestinal Epidemiology, Imperial College London Tom Cecil, Consultant Colorectal and General Surgeon, Basingstoke and North Hampshire

NHS Foundation Trust

Mark Coleman, Consultant Surgeon, Plymouth, Lead Clinician, Lapco National Training Programme for Laparoscopic Colorectal Surgery

Stephen Fenwick, Consultant Hepatobiliary Surgeon, University Hospital Aintree

Rob Glynne-Jones, Consultant Clinical Oncologist, Mount Vernon Cancer Centre (Chair)

Willie Hamilton, Professor of Primary Care Diagnostics, Peninsular College of Medicine and Dentistry

Tim Iveson, Cancer Relief Macmillan Consultant in Medical Oncology, Southampton University Hospitals NHS Trust

Michael Machesney, Pathway Director for Colorectal Cancer, London Cancer, UCL Partners Kevin Monahan, Consultant gastroenterologist, West Middlesex University Hospital

Dion Morton, Professor of Surgery, University of Birmingham

Christine Norton, Nurse Consultant, St Mark's Hospital

Greg Rubin, Professor of General Practice and Primary Care, Durham University

John Schofield, Cellular Consultant Pathologist, Maidstone; South East Coast Pathology Lead, Bowel Cancer Screening Programme

John Stebbing, Consultant Surgeon, Royal Surrey County Hospital NHS Foundation Trust; Clinical Director, Surrey Bowel Cancer Screening Centre, Chair, UK Joint Advisory Group on GI Endoscopy (the JAG)

Bob Steele, Professor of Surgery and Head of Department, University of Dundee

Mark Taylor, Consultant Hepatobiliary and Pancreatic Surgeon, Belfast Health & Social Care Trust

Richard Wilson, Clinical Director, Northern Ireland Cancer Trials Centre and Network, Queen's University Belfast



Auditors, Bankers and Solicitors

Auditors

Crowe Clark Whitehill LLP

Aquis House

49-51 Blagrave Street

Reading RG1 1PL

Bankers

The Bank of Scotland

St James's Gate

14/16 Cockspur Street

London SW1Y 5BL

Solicitors

Lamb Brooks LLP

Victoria House,

39 Winchester Street,

Basingstoke, Hampshire RG21 7EQ

STRUCTURE, GOVERNANCE AND MANAGEMENT

Governing Document and Constitution

Bowel Cancer UK is registered as a company limited by guarantee (without share capital) and as a charity its governing instrument is its Memorandum and Articles incorporated 25 July 1997 as amended by special resolutions dated 14 June 2007 and 23 December 2011. All the Members of the Charitable Company are Trustees and undertake to contribute to its assets in the event of it being wound up while s/he is a member, such amount as may be required not exceeding £1. All the Trustees are also Directors of the Charitable Company for the purposes of the Companies Act.

Trustees Appointment, Recruitment, Training and Induction

All Trustees are unremunerated and are voluntary. Trustees are appointed by resolution of the Trustees. Each Annual General Meeting one third of the Trustees shall be subject to retirement by rotation, but may offer themselves for re-election. No person other than a Trustee retiring by rotation shall be appointed as a Trustee at any general meeting of Trustees unless he or she is recommended by the Trustees. No Trustee may serve more than 7 years. After 7 years Trustees are not eligible for election until 3 years have elapsed.



Each new Trustee is provided with a detailed information pack upon appointment. This covers an introduction to fellow Trustees; details of the leadership team and staff accompanied by an organisation chart; Articles of Association; the history of the organisation; its objectives and policies; its work and products; recent Trustees and Sub-Committee minutes of meetings; the latest audited Trustees Report and Financial Statements; information on the role and responsibilities of a Trustee.

Training of Trustees will be given on new legislative issues affecting charity Trustees and directors as needed.

Organisation Structure and Decision-Making

A voluntary Board of Trustees is responsible for the overall management and direction of the Charitable Company. The Board meets four times a year. A Senior Management Team meets monthly and reports to the Trustees. The members of the group are shown on page 13.

Authority on financial, personnel and regulatory matters has been delegated to a Finance and Resources Sub-Committee which review management accounts, and the progress of the annual audit, as well as personnel and recruitment policies and compliance with the regulatory environment within which the organisation operates. It makes recommendations both to the Senior Management Team and to the main Board of Trustees. Membership currently comprises of the Chair of Trustees, the Treasurer and two other Trustees, the Chief Executive, Director of Fundraising and the Director of Finance and Resources.

Directors/Trustees retiring

The Directors retiring by rotation were Linda Clemett, Dennis Horner, Christina Dolan Lakin and Michelle Scott, all of whom were eligible for re-election and who were reappointed.

Risk and Uncertainties

Achievement of our aims and objectives entails taking risks. The Trustees are satisfied that appropriate internal control systems and risk management processes are in place. They consider that the following framework provides the Bowel Cancer UK with adequate measures to reduce the impact of identified risks:

- The Finance and Resources Sub-Committee reviews risk and internal controls, approves the annual risk-register, and receives regular progress reports on key risks.
- Senior management reviews key strategic and operational risks on a regular basis. They
 consider progress on mitigating actions, new and emerging risks, and opportunities.



Board sub-committees and management groups help identify, evaluate and manage risks relating to fundraising, governance, health and safety and remuneration.

The most significant risks to the Bowel Cancer UK include income generation and cashflow management, reputation, health and safety of staff and volunteers, operational management information, IT infrastructure, staff retention and development.

Trading subsidiary

The subsidiary Bowel Cancer UK (Services) Limited became officially dissolved on 11 February 2014.

FINANCIAL REVIEW

The results for the year ended 31 December 2014 are set out on page 23 of the financial statements.

Total incoming resources for the year increased to £1,729,104 (2013: £1,608,378) as a result of the amazing efforts of our many volunteers who raised money for us doing runs, treks and holding events in their community. In particular in 2014 we can report:

- A 5% increase in community fundraising and events from £954,173 in 2013 to top £1m for the first time in 2014;
- A 37% increase in charitable grants from £180,005 in 2013 to £246,531 in 2014; and
- A 13% increase in individual donations from £163,891 in 2013 to £185,933 in 2014.

Total resources expended for the year decreased by 7% from £1,824,585 in 2013 to £1,693,428. This reflects a reduction in staff costs following the decision taken in 2013 to close our information and support services, and our North of England operations so that we could better focus our services on the strategic plan objectives and the needs of our clients. Expenditure was tightly monitored and controlled throughout the year and we continue to keep governance and support costs to the minimum levels necessary to ensure the effective running of the charity.

The use of restricted funds has been maximised and this coupled with our most successful year ever for fundraised income has seen our unrestricted reserves increase by £94,945 to stand at £210,541 at the end of the year. Our overall surplus for the year of £35,676, compares to a deficit of £216,207 in 2013. The Charity's spare cash balances have been invested in interest bearing accounts.

The Balance Sheet on page 24 reflects the activities in the year. The increase in current assets from £361,383 in 2013 to £395,437 in 2014 reflects an increase in prepayments



relating to places bought for future running events. The amounts shown as fixed assets and creditors are broadly similar year on year.

Key Performance Indicators for the year are:

- The fundraising ratio has stabilised at £2.30 for every £1 spent in the year. The plan is for this to improve in 2015 and future years.
- Support costs remain on target (below 15%) at 12% for the year (14% in 2013).
- Unrestricted reserves have risen from 1 month's running costs in 2013 to 1.5 month's running costs in 2014, compared to a target of 3 months. The Trustees aim to continue to rebuild the reserves to the level they consider necessary for the future stability of the charity.

RESERVES

The Board of Trustees recommend that to allow the Charity to be managed efficiently, an unrestricted reserve equivalent to at least three months operating expenditure (with a longer term aim of six months) should be built up. The Trustees believe that this is the minimum level of reserves required to ensure the operating efficiency of the charity and to provide some protection to the organisation, its charitable programmes and to provide time to adjust to changing financial circumstances.

The Charity now has free reserves of £137,293 (2013: £43,498). Over the next few years efforts will continue to be made to accumulate reserves whilst still facilitating Bowel Cancer UK's services, public awareness and policy campaigns.

Designated funds are amounts identified by the Trustees for a particular project or use. The Trustees have also increased the amount in the designated fund for fixed assets to £73,248, to reflect the net book value of the fixed assets.

Statement of Trustees' responsibilities

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



Company law requires the Trustees to prepare financial statements for each financial year. Under company law the Trustees must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of resources, including the income and expenditure, of the charitable company 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 SORP;
- make judgments and estimates that are reasonable and prudent;
- state whether applicable UK accounting standards have been followed, subject to any material departures disclosed and explained in the financial statements; and
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in business.

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

Provision of information to auditors

In so far as the Trustees are aware:

- There is no information of which the charitable company's auditors are 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 auditors are aware of that information.

Staff and Volunteers

The Board of Trustees wish to record their thanks and appreciation to all staff and volunteers for their devoted work, often beyond the call of duty to ensure that the charity continues to meet its mission.



Auditors

The Company's auditors, Crowe Clark Whitehill LLP are willing to continue in office. A resolution proposing their re-appointment will be considered at the next Annual General Meeting.

This report has been prepared in accordance with the special provisions of Part 15 of the Companies Act 2006 relating to small companies.

This report was approved by the Council of Management / Board of Trustees on 24 warch 2015 and signed on their behalf by

Linda Clemett, Member of Council

BOWEL CANCER UK INDEPENDENT AUDITOR'S REPORT FOR THE YEAR ENDED 31 DECEMBER 2014



Independent Auditors' Report to the Trustees and Members of Bowel Cancer UK

We have audited the financial statements of Bowel Cancer UK for the year ended 31 December 2014 set out on pages 23 to 38. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

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 section 44(1c) of the Charities and Trustee Investment (Scotland) Act 2005. Our audit work has been undertaken so that we might state to the charitable company's trustees and members 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 and the company's members as a body, for our audit work, for this report, or for the opinions we have formed.

Respective responsibilities of Trustees and auditors

As explained more fully in the Statement of Trustees' Responsibilities, the Trustees (who are also the directors of the charitable company for the purpose of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view.

We have been appointed as auditor under section 44(1c) 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 responsibility is to audit and express an opinion on the financial statements in accordance with applicable law and International Standards on Auditing (UK and Ireland). Those standards require us to comply with the Auditing Practices Board's Ethical Standards for Auditors.

Scope of the audit of the financial statements

An audit involves obtaining evidence about the amounts and disclosures in the financial statements sufficient to give reasonable assurance that the financial statements are free from material misstatement, whether caused by fraud or error. This includes an assessment of: whether the accounting policies are appropriate to the charitable company's circumstances and have been consistently applied and adequately disclosed; the reasonableness of significant accounting estimates made by the trustees; and the overall presentation of the financial statements. In addition, we read all the financial and non-financial information in the Trustees' Annual Report to identify material inconsistencies with the audited financial statements and to identify any information that is apparently materially incorrect based on, or materially inconsistent with, the knowledge acquired by us

BOWEL CANCER UK INDEPENDENT AUDITOR'S REPORT (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2014



in the course of performing the audit. If we become aware of any apparent material misstatements or inconsistencies we consider the implications for our report.

Opinion on financial statements

In our opinion the financial statements:

- give a true and fair view of the charity's state of affairs as at 31 December 2014 and of its incoming resources and application of resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006, the Charities and Trustee Investment (Scotland) Act 2005 and regulation 8 of the Charities Accounts (Scotland) Regulations 2006 (as amended).

Opinion on other matter prescribed by the Companies Act 2006

In our opinion the information given in the Trustees' Annual Report for the financial year for which the financial statements are prepared is consistent with the financial statements.

Matters on which we are required to report by exception

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

- proper and adequate accounting records have not been kept, or returns adequate for our audit have not been received from branches not visited by us; or
- the financial statements are not in agreement with the accounting records and returns;
 or
- certain disclosures of Trustees' remuneration specified by law are not made; or we have not received all the information and explanations we require for our audit; or
- the trustees were not entitled to prepare the financial statements in accordance with the small companies regime and take advantage of the small companies exemption from the requirement to prepare a strategic report or prepare the trustees annual report.

Janette Joyce

Senior Statutory Auditor

For and on behalf of

Crowe Clark Whitehill LLP

Statutory Auditor

Reading

Date: 27 MARCH 2015

Crowe Clark Whitehill LLP is eligible to act as an auditor in terms of section 1212 of the Companies Act 2006.



Statement of Financial Activities For the year ended 31st December 2014 (incorporating the income and expenditure account)

MILLS - 133441		Unrestricted	Restricted	2014	2013
	Note	Funds	Funds	Total	Total
		£	£	£	£
INCOMING RESOURCES					
Incoming resources from generated funds:					
Voluntary income	2	437,206	278,856	716,062	587,071
Activities for generating funds	2	1,001,265	*	1,001,265	954,173
Investment income		388	-	388	1,472
Incoming resources from charitable activities	3	2,069	9,320	11,389	65,662
Total incoming resources		1,440,928	288,176	1,729,104	1,608,378
RESOURCES EXPENDED					
Cost of generating funds:					
Costs of generating voluntary income	4	751,571		751,571	706,181
Charitable activities	4	579,791	347,445	927,236	1,104,144
Governance costs	4	14,621		14,621	14,260
Total resources expended	-	1,345,983	347,445	1,693,428	1,824,585
Net incoming / (outgoing) resources	5	94,945	(59,269)	35,676	(216,207)
Gross transfers between funds	2		ī ÷		
Net movement in funds		94,945	(59,269)	35,676	(216,207)
Total funds brought forward	=	115,596	126,667	242,263	458,470
Total funds carried forward	11 _	210,541	67,398	277,939	242,263

All of the above results are derived from continuing activities. The Charity has no other recognised gains and losses other than those stated above.

The notes on pages 25-38 form part of these financial statements.



			"sa
Balance Sheet as at 31 st December 2014	_		live
Company number 3409832 (England and Wales	•		
	Note	2014	2013
		£	£
Fixed assets			
Tangible assets	7	73,248	72,682
Current assets			
Debtors and prepayments	8	139,925	82,213
Cash at bank and in hand		255,512	279,170
		395,437	361,383
Creditors: amounts falling due within one year	9	(166,746)	(167,802)
Net current assets		228,691	193,581
Provisions: amounts due in more than one year	10	(24,000)	(24,000)
NET ASSETS		277,939	242,263
Funds			
Unrestricted funds			
Designated		73,248	72,098
General funds		137,293	43,498
		210,541	115,596
Restricted funds		67,398	126,667
TOTAL FUNDS	11	277,939	242,263

These financial statements have been prepared in accordance with the special provisions relating to companies subject to the small company regime within Part 15 of the Companies Act 2006 and in accordance with the Financial Reporting Standard for Smaller Entities (effective April 2008).

The financial statements were approved and authorised for issue by the board and were signed on its behalf on 24 March 2015 by

Linda Clemett

Member of Council

Linda Clemett

The notes on pages 25-38 form part of these financial statements.



1. Accounting policies

1.1 Basis of preparation

The financial statements have been prepared under the historical cost convention and in accordance with the Financial Reporting Standard for Smaller Entities (effective April 2008) and the Statement of Recommended Practice "Accounting and reporting by Charities (SORP 2005)".

The Trustees consider that there is a reasonable expectation that the charity has adequate resources to continue in operational existence for the foreseeable future and for this reason they continue to adopt the going concern basis in preparing the annual financial statements.

1.2 Company status

The Charity is a company limited by guarantee. The guarantors are the members of Council named on page 13. The liability in respect of the guarantee, as set out in the memorandum, is limited to £1 per member of the company.

1.3 Incoming resources

Income is accounted for on a receivable basis, with the exception of donations which are accounted for when received.

Grants are credited as income in the year in which they are receivable. Grants are recognised as receivable when all conditions for receipt have been complied with. Where donor-imposed restrictions apply to the timing of the related expenditure as a precondition of it use, the grant is treated as deferred income until those restrictions are met. Grants received for specific purposes are accounted for as restricted funds.

Legacy income is included in the financial statements when the charity is satisfied that the conditions of entitlement, certainty and measurement have been met. Pecuniary legacies are accounted for when notified. Residuary legacies are accounted for when notification of impending distribution is received and/or receipt occurs. Residuary legacies subject to a life interest held by another party are not included in income until the conditions associated with payment have been fulfilled.

Donated services are included as a gift in kind and an expense and are included at their estimated value to the charity where this is reasonably quantifiable and measurable.



1.4 Expenditure

All expenditure is charged on an accruals basis and is allocated between:

- expenditure incurred directly on charitable activities;
- expenditure incurred in generating voluntary income, including fundraising; and
- expenditure incurred in the governance of the charity, which are the costs of statutory compliance and trustee meetings.

Wherever possible, costs are allocated directly to the appropriate activity. Support costs incurred in the general running of the charity are allocated to the charitable activities on the basis of staff numbers.

1.5 Fund accounting

General funds are available for use at the discretion of the Council of Management in furtherance of the general objectives of the Charity.

Designated funds comprise unrestricted funds that have been put aside at the discretion of the Trustees for particular purposes (see note 11). Each Designated fund is applied by the Board of Trustees on the recommendation of the Finance & Resources Sub-Committee.

Restricted funds are funds subject to specific restriction imposed by donors or by the purpose of appeals. The purpose and use of the restricted funds is set out in the notes to the financial statements.

All income and expenditure is shown in the Statement of Financial Activities.

1.6 Tangible fixed assets and depreciation

Tangible fixed assets are stated at cost including any incidental expenses of acquisition.

Assets with a cost in excess of £500 intended to be of ongoing use to Bowel Cancer UK in carrying out its activities are capitalised as fixed assets.

Depreciation is provided on all tangible fixed assets at rates calculated to write off the cost on a straight-line basis over their expected useful economic lives as follows:

Computer equipment - over 4 years Fixture & Fittings - over 5 years Office Refurbishment - over 3 years



1.8 Leases

Rentals payable under operating leases are charged to the Statement of Financial Activities on a straight line basis over the life of the lease.

1.9 Pension costs

The company operates a defined contribution group personal pension scheme. The charge in the SOFA is the amount of contributions payable to the pension scheme in respect of the accounting year.

2.0 Provisions

In accordance with FRS 12, provisions are recognised when:

- a) the charity has a present obligation as a result of a past event;
- b) it is probable that a transfer of economic benefits will be required to settle the obligation;
- c) a reliable estimate can be made of the amount of the obligation.



2. Incoming resources from generated funds

Legacies General grants Corporate donations Activities for generating funds Runs Treks and challenges Community fundraising Other special events Rental income 1,0 3. Incoming resources from charitable activities	2014	2013
Donations from individuals Legacies General grants Corporate donations Activities for generating funds Runs Treks and challenges Community fundraising Other special events Rental income 1,0 3. Incoming resources from charitable activities	£	£
Legacies General grants Corporate donations Activities for generating funds Runs Treks and challenges Community fundraising Other special events Rental income 1,0 3. Incoming resources from charitable activities		
General grants Corporate donations 7 Activities for generating funds Runs General grants 7 Activities for generating funds Runs Greks and challenges Generating funds 3 Treks and challenges Generating funds 3 Treks and challenges 1 Treks and challenge	85,933	163,891
Activities for generating funds Runs Streks and challenges Community fundraising Other special events Rental income 1,0 1,0 3. Incoming resources from charitable activities	23,166	103,574
Activities for generating funds Runs 3 Treks and challenges 2 Community fundraising 3 Other special events Rental income 1,0	46,531	180,005
Activities for generating funds Runs 3 Treks and challenges 2 Community fundraising 3 Other special events Rental income 1,0 Incoming resources from charitable activities	.60,432	139,601
Runs Treks and challenges Community fundraising Other special events Rental income 1,0 Incoming resources from charitable activities	16,062	587,071
Treks and challenges Community fundraising Other special events Rental income 1,0 Incoming resources from charitable activities		
Community fundraising Other special events Rental income 1,0 3. Incoming resources from charitable activities	86,103	404,873
Other special events Rental income 1,0 3. Incoming resources from charitable activities	15,309	160,882
1,0 3. Incoming resources from charitable activities	68,454	376,938
1,0 3. Incoming resources from charitable activities	27,786	11,480
Incoming resources from charitable activities	3,613	5
	01,265	954,173
	2014	2013
	£	£
raining	11,389	65,662
	11,389	65,662



4. Resources expended

	Direct	Direct costs S		t costs	Total	Total
	Staff	Other	Staff	Other	2014	2013
	£	£	£	£	£	£
Costs of generating fund	ds					
Costs of generating						
voluntary income	410,723	243,548	56,726	40,574	751,571	610,940
Costs of investing in						
new fundraising						
activities		2	32	2	1 14	95,241
	410,723	243,548	56,726	40,574	751,571	706,181
Charitable activities						
Awareness & Direct						
Services	360,628	257,149	37,757	27,006	682,540	720,053
Communications and						
Campaigning	113,762	89,646	24,071	17,217	244,696	384,091
	474,390	346,795	61,828	44,223	927,236	1,104,144
Governance costs					S	
Bank charges	8	3,288	â	87.0	3,288	1,564
Legal and Professional	9			530		2,196
Audit and Accountancy	- 1	11,333	5		11,333	10,500
		14,621	-		14,621	14,260
Total costs	885,113	604,964	118,554	84,797	1,693,428	1,824,585

Support costs have been allocated on the basis of staff numbers employed in each area of activity.



5. Net incoming resources is stated after charging:

	2014	2013
	£	£
Depreciation	27,802	18,002
Operating lease payments	89,311	89,570
Auditors' remuneration:		
Audit fee for the current period	8,750	8,750
- Non Audit fee for the current period	695	
6. Staff costs		
	2014	2013
	£	£
Wages and salaries	902,207	941,082
Social security costs	88,090	99,804
Pension Contributions	13,370	17,571
	1,003,667	1,058,457
Redundancy fees	Tail	29,184
	1,003,667	1,087,641



6. Staff costs (Continued)

The number of employees whose emoluments exceeded £60,000 fell within the following ranges:

	2014	2013
	Number	Number
£60,000 - £70,000	1	1
	1	1

Pension Contributions of £2,840 (2013:£2,840) were paid in respect of the higher paid individual.

The charity contributes to group personal pension schemes (defined contribution) for all participating employees. The assets of the schemes are held separately from those of the charity in independently administered funds. The pension charge represents contributions payable by the charity to the fund. Pension contributions outstanding at 31 December 2014 amounted to £288 (2013: £nil).

The average number of FTEs analysed by function was:

	2014 Number	2013 Number
Fundraising	11	10
Awareness & Direct Services	7	10
Communications and Campaigning	5	6
Central Support	4	4
	27	30

Trustees

None of the trustees received, nor waived, any emoluments during the year (2013: £Nil). None of the trustees received any reimbursed expenses during the year (2013: £Nil).



7. Tangible fixed assets

	Office Refurbishment	Fixture & Fittings	Computer Equipment	Total
	£	£	£	£
Cost				
At 1 January 2014	37,084	23,750	42,156	102,990
Additions	9,803	2	18,706	28,509
Disposals			(675)	(675)
At 31 December 2014	46,887	23,750	60,187	130,824
Depreciation				
At 1 January 2014	6,119	2,418	21,771	30,308
Charge for the period	12,777	4,750	10,275	27,802
Disposals		<u> </u>	(534)	(534)
At 31 st December 2014	18,896	7,168	31,512	<u>57,576</u>
Net book value as at 31 December				
2014	<u>27,991</u>	<u>16,582</u>	28,675	73,248
Net book value as at 31 December				
2013	30,965	21,332	20,385	72,682

All fixed assets are used for charitable purposes.



8. Debtors and Prepayments

	2014	2013
	£	£
Other Debtors	20,013	15,010
Prepayments and accrued income	119,912	67,203
	139,925	82,213
9. Creditors		
	2014	2013
	£	£
Trade creditors	78,028	37,170
Accruals	49,689	74,983
Taxes and social security costs	21,021	30,117
Deferred Income	10,300	22,500
Other creditors	7,708	3,032
	<u>166,746</u>	<u>167,802</u>
10. Provisions		
		Property
		provision 2014
		2014 £
At 1 January 2014		24,000
Amounts reversed		±4,000
Amounts introduced		<u> </u>
At 31 December 2014		24,000
At 31 December 2014		24,000



11. Statement of funds

	Balance 1 January 2014	Income	Expenditure	Transfers Between Funds	Balance 31 December 2014
	£	£	£	£	£
Total Designated					
funds:					
Fixed Assets	72,098	(4)	=	1,150	73,248
Total General					
Funds	43,498	1,440,928	(1,345,983)	(1,150)	137,293
Total Unrestricted					
funds	115,596	<u>1,440,928</u>	(1,345,983)		210,541

Designated funds

Designated funds are amounts identified by the Trustees for a particular project or use.

Designated funds of £73,248 (2013: £72,098) have been set aside from the charity's unrestricted funds by the trustees to reflect the net book value of the fixed assets.





11. Statement of funds (continued)

	1 January		3	31 December
	2014	Income	Expenditure	2014
	£	£	£	£
Restricted Funds:				
Awareness England	10,000	(5)	(10,000)	
Awareness NI	12,976	1,000	(13,976)	7-114
Awareness Scotland	2,131	30,000	(26,858)	5,273
Scottish Govt – Detect Cancer early	1,338	1,820	(3,158)	1950
Printing	601	3,492	(3,919)	174
Information & Support	39,794		(33,050)	6,744
Communications Officer	19,652	33,333	(41,540)	11,445
Diet Resource	6,828	12,338	(18,166)	1,000
Older Person's Research Project	10,657	10,000	(20,657)	-
Advanced Disease	22,690	2	(22,690)	≅
Young Peoples Service	Œ	56,075	(39,346)	16,729
ACPGBI	樣	22,800	(15,171)	7,629
Penny Brohn		66,118	(48,264)	17,854
Colorectal Cancer Study Days	2	20,000	(20,000)	-
Awareness Staff	*	4,700	(4,700)	
Awareness		14,950	(14,950)	
General Patient Services	2	550	29	550
General Work in Scotland		11,000	(11,000)	
Total Restricted funds	126,667	288,176	(347,445)	67,398
Total funds	242,263	1,729,104	<u>(1,693,428</u>)	277,939



11. Statement of funds (continued)

Restricted funds

Restricted funds are where the donor has imposed restrictions on the use of the funds.

Awareness England

Funding has been received from the Big Lottery Fund's Awards for All England grant programme for the recruiting, training and supporting of Bowel Cancer Awareness volunteers in the North of England.

Awareness NI

Funding has been received from the Big Lottery Fund's Awards for All Northern Ireland grant programme and the Lloyds Bank Foundation for Northern Ireland and The Enkalon Foundation for the recruiting, training and supporting of Bowel Cancer Awareness volunteers in Northern Ireland.

Awareness Scotland

This fund is being used to recruit, train and support Bowel Cancer Awareness volunteers in the Scotland. This is funded by Scottish Executive's Section 16b Grant Scheme, Miss M B Reekie's Charitable Trust, Alexander Moncur Trust, Society of Deacons and Free Preseses of Glasgow, The W M Mann Foundation, The JTH Charitable Trust, Aberbrothock Skea Charitable Trust, Miss E.C. Hendry's Charitable Trust and Nancie Massey Charitable Trust.

Scottish Government - Detect cancer early

This funding was received to support the Scottish Government's detect cancer early screening programme.

Printing

This funding was received from Sunsweet Growers Inc. and Yakult UK Ltd. to develop and print a range of patient resource materials.

Information & Support

Funding has been received from the Garfield Weston Foundation, The Childwick Trust, The DMF Ellis Charitable Trust and The Shanly Foundation to develop our strategy to improve the efficiency of our information & support services, to expand our range of patient materials and to design and pilot specific support services for younger people.

Communications Officer

Additional funding was secured in the year to increase our staff resource with our communications and PR team.

Diet Resource

Funding for this project has kindly been received from Sunsweet Growers Inc., The Steel Charitable Trust, the Constance Green Foundation, the Annie Tranmer Charitable Trust, the Paycare Charity Trust, the Gledswood Charitable Trust, the Excel Fund, the Kate Wilson Oliver Trust, The Lexus Foundation and the Albert Hunt Trust. During the year work began on developing a diet resource to help bowel cancer patients in their dietary choices post-surgery and during chemotherapy. This will allow them to self- management post treatment bowel problems.

Older People's Research Project

Work has commenced on research into older people's (+65) experience of bowel cancer treatment and care to identify best practice and gaps in care. Further funding from The Mackintosh Foundation was received.



11. Statement of funds (continued)

Advanced Disease

Funding has been received from Bayer Healthcare, Roche Products Ltd. and Sanofi for research into the effects of advanced disease in bowel cancer patients and to make recommendation on the delivery of support services to patients.

Younger People's Service

Funding has been received from the Caron Keating Foundation, the Shanly Foundation and fourteen individual trusts and foundations to develop a new programme of information services for younger people (those under 50) with bowel cancer.

ACPGBI

Funding has been received from the Bowel Disease Research Foundation, the Schroder Charity Trust, Pharsalia Charitable Trust, Kathleen Laurence Charitable Trust, Hamamelis Trust and Mrs Iris Noreen Setchell Foundation towards the research project 'Patient Outcomes in Coloproctology and their Correlation with Resources for Treatment' run in partnership with the Association of Coloproctology of Great Britain and Ireland.

Penny Brohn

Funding has been received from Health and Social Care Alliance Scotland's Self Management IMPACT Fund, The Robertson Trust, The Mary Andrew Charitable Trust, James Weir Foundation, Gordon Fraser Charitable Trust, Mickel Fund, Harold Merton Adams Trust and James Wood Bequest Fund towards a partnership project with Penny Brohn Cancer Care which will deliver 'Living Well with the impact of bowel cancer' support services to bowel cancer survivors in Scotland.

Colorectal Cancer Study Days

Funding has been received from Merck Serono UK, Roche Products Ltd and Sirtex to run an education day for Colorectal Nurse Specialists covering bowel cancer prevention, screening treatment and care. The education day will support Clinical Nurse Specialists' professional development, encourage best practice and improve standards of care.

Awareness Staff

Funding has been received from Lewis PR and The Sylken Charitable Trust towards the staff costs of running our health promotion and awareness raising activities in England.

Awareness

Funding has been received from Benham Charitable Settlement, Brian Wilson Charitable Trust, The Tom Hall Charitable Trust, The Alice Ellen Cooper Dean Charitable Foundation, IBC Vehicles Ltd Employees' Charity Fund, The Diana Edgson Wright Charitable Trust and Banham Charitable Foundation to fund the recruitment, training and support of Bowel Cancer UK's Health Promotion Volunteers in England.



11. Statement of funds (continued)

General Patient Services

Funding has been received from The Chandris Foundation, The Marston Charitable Trust and The Rest-Harrow Trust to sustain and support Bowel Cancer UK's programme of information services for bowel cancer patients, their families and carers.

General Work in Scotland

Funding has been received from The Martin Connell Charitable Trust, Sylvia Aitken Charitable Trust, The Hugh Fraser Foundation, The Gordon & Ena Baxter Foundation and The John M Archer Charitable Trust to sustain and support Bowel Cancer UK's programme of health promotion, patient support, and policy work in Scotland.

Transfers

Transfers in the year amounted to £1,150 (2013: £5,449).

12. Analysis of net assets between funds

	Unrestricted funds	Restricted funds	Total funds
	£	£	£
Funds balances at 31 December 2014 are			
represented by:			
Tangible fixed assets	73,248		73,248
Net current assets	161,293	67,398	228,691
Provisions	(24,000)		(24,000)
Charity funds at 31 December 2014	210,541	67,398	277,939

13. Related party transactions

There were no related party transactions during the year (2013: none).

14. Operating Leases

	2014	2013
	£	£
Property Lease – 1 year	3,137	
Property Lease – 2-5 years	80,052	80,052
Office equipment – 1 year		2,017
Office equipment – 2-5 years	1,474	1,228
	<u>84,663</u>	83,297