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## Legal and Administrative Information

**Registered Company number:** 07998409 (England and Wales)

**Registered Charity number:** 1147802

Registered office: 62 Norbiton Avenue, Kingston upon Thames, Surrey, KT1 3QP

Chair: John A Webber

Trustees: Alison S Boyes

David E Jillings Lisa A Punt

Benjamin D Sacks

Bhumi Shah Lesley Smith

**Company Secretary:** D E Jillings **Independent Examiner Details:** 

Mary E Ryan FCCA, CertPFS, DChA

Ark Accountancy, Chartered Certified Accountant, 31 Cheam Road Epsom Surrey, KT17 1QX

## **Foreword**

### Sarah Steele

This year marks ten years of my living with Pelvic Radiation Disease (PRD) and 7 years working for the Pelvic Radiation Disease Association. I've witnessed the growth of the charity's support services to where we now have multiple resources to offer people living with PRD. I truly understand and appreciate the impact the services can have on individuals. Having the Online Community to share your experiences with people who know what it's like is invaluable.



I feel honoured and humbled that, in the Chat Together support group sessions, people have felt comfortable sharing experiences they've been unable to talk to their closest friends and family about. Talking with people who truly understand what you are going through can be an enormous comfort.

With almost a decade's experience of the trials and tribulations of advocating for my own care I can see that we are now at the forefront of a seismic shift in patient care and symptom management. When I had my first symptoms of PRD, it was rare to find health professionals who were familiar with late effects. More recently I have I have been fortunate to receive outstanding holistic care, although there is still a huge disparity in the availability of late effects services nationally.

PRDA's work collaborating with health professionals to raise the awareness of PRD has particularly come to the fore this year, with the launch of the fantastic Best Practice Pathway for Pelvic Radiation Disease. This document both aids health professionals with clinical management information and highlights the need for a holistic approach in the absence of local specialised late effects services.

I'm looking forward to seeing PRDA support services grow, particularly the Let's Talk programme, which will enable many more people to understand and manage their PRD. In tandem with resources like the Best Practice Pathway, our work will enable people to advocate for their own care, and support health professionals to manage symptoms.

## Introduction

## John Webber - Chair of Trustees

2022/23 was a year of steady growth and exciting new horizons for the Pelvic Radiation Disease Association.

In October, we launched our Best Practice Pathway for Pelvic Radiation Disease. Within weeks, the guidance, which features contributions from leading experts across the healthcare sector, was being used in clinics and hospitals across the country and news has literally spread across the world. This is a significant step forward for patients living with PRD, and we are thankful to everyone who contributed to the document.



In particular, we thank our Trustees Dr Lesley Smith and Dr Ben Sacks, and Professor Sara Faithfull for their tireless contribution to this pioneering piece of work. The document was launched at our online conference to an audience of over 350 healthcare professionals and was a ground-breaking moment for the organisation, which has put us in an incredibly strong position for the year ahead.

Our direct patient support also took strides forward: we distributed another 223 Out and About Toolkits to help people with PRD leave the house with confidence, and we launched the Let's Talk programme, which offers an introduction to PRD to those who have recently developed symptoms. These sessions, funded by the National Lottery Community Fund, feature talks from subject matter experts on particular topics, such as pain and fatigue, diet and nutrition, and bladder and bowel issues. We are particularly grateful for the work of Samantha Bostock, a Therapeutic Radiographer, who has volunteered many hours of her time to help us build a programme that has had a real impact on the lives of people at the beginning of their journey with PRD.

2022/23 was also a year of financial growth for the organisation, evidenced by the accounts featured towards the end of this report. We raised £63,202 – a notable increase from last year's total of £41,339. This is a clear sign that we are gaining momentum, and we are excited to be building a sustainable and scalable fundraising strategy to enable us to keep growing in the years to come.

We extend our heartfelt gratitude to our valued supporters and donors, whose generosity has enabled us to achieve so much in the past year, and we count on their contributed support as we continue to push for better care for people experience late-effects of pelvic radiotherapy. We feel a responsibility to give a voice to people who experience PRD, and we remain steadfastly committed to achieving our ambitions.

As we move forward, we look towards the future with excitement and dedication.

Thank you.

## Our Aims and Objectives

The Pelvic Radiation Disease Association (PRDA) gives a voice to people affected by Pelvic Radiation Disease, an extremely debilitating condition caused by radiotherapy treatment for cancer in the pelvic area. By offering information, peer-to-peer support, and advocacy for patients, we improve quality of life for people who have been treated for cancer but are now living with the consequences.

Founded in 2012, we are dedicated to making a difference in the lives of the estimated 100,000 people in the UK who had hoped to "get back to normal" after cancer, but are now facing the challenges of Pelvic Radiation Disease. People can experience life-changing effects on bladder and bowel function, fertility, mobility, mental health and their ability to have a family life, socialise and get back to work.

## The key objectives and outcomes of our work are:

## **Outcome**

## **Performance indicator**

**Fewer people** feel alone while experiencing the debilitating symptoms of PRD

- Increasing the number of people engaging with our direct patient support offerings.
- Raising awareness by collecting more case studies from volunteers.

**Better information** made available to patients in advance of radiotherapy treatment

Our Best Practice Pathway for PRD emphasises the importance of information prior to treatment.

**Better understanding among health professionals** who are treating people with
PRD symptoms

- The Best Practice Pathway for PRD is used increasingly across the sector to inform care decisions for patients.
- In 2023 we will host our first ever in-person networking event for healthcare professionals.

**Reduced stigma** associated with having long-term, embarrassing symptoms after cancer treatment

- Greater use of our Out and About Toolkits to give people more confidence in managing their symptoms.
- Access to patient stories and peer support to help people know they are not alone.

**Improved quality of life** for people affected by PRD

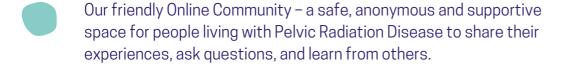
By advocating for better pathways of care, providing direct support, and empowering patients to manage their PRD, we make a significant difference to people's lives.

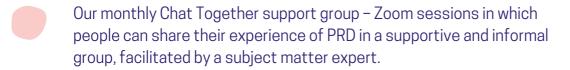
## **Our Programmes**

Our work focuses on two key pillars: direct patient support, and professional engagement. Working on both these fronts enables us to tackle PRD in both the immediate and long-term, by supporting people living with PRD today, while working with healthcare professionals to build better pathways of care for the future.

## **Direct patient support services**

We offer a wide range of support and resources to people experiencing PRD:







The Let's Talk support programme - a five-week programme for new patients, which serves as an introduction to PRD and helps people to understand their symptoms.

"I must say I really enjoyed the session... Great to speak with people who are in a similar position. You don't feel like you are going crazy or making it up. It was really good so thank you."

PRDA service user

- Out and About Toolkits packs filled with useful information, tips and items to help people with PRD have more confidence when leaving the house. We are hoping to distribute 400 Toolkits in 2023.
- Symptom Monitoring we provide resources to help patients track their symptoms and lifestyles, to better understand their PRD and to give their healthcare team the best possible information.
- General Information booklets like our Guide to Diet, Nutrition and PRD and signposting to other late effects services help patients get the specific support they need.





## **Professional engagement**

We collaborate with healthcare professionals and develop resources to encourage the best pathways of care:



**Best Practice Pathway** - in 2022 we released a 163-page document designed to support the development of effective pathways of care for people with PRD which is now being used across the healthcare sector.

Professional organisations that support the BPP include:

- UK Oncology Nursing Society
- the Society of Radiographers
- the British Lymphology Society



"It is ground-breaking in providing evidence and structure which will translate into improved outcomes and safer patient care."





**In-person networking opportunities** – we host in-person networking events for healthcare professionals and corporate partners, as we grow our community and provide opportunities for others to do the same.



**Virtual Annual Conference** – a series of talks and presentations, intended to share best practice, discuss research, and empower patients to advocate for better healthcare for themselves.





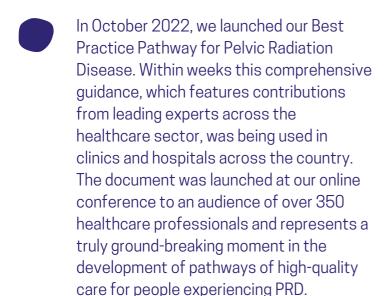
**Bringing PRD into the professional education**– by building relationships with professional organisations, we are establishing PRD as an accepted term and raising awareness of the impact of PRD on people's quality of life, and the importance of training and education for all health professionals



**Collaborative service provision** – we work with our database of healthcare professionals and late-effect services to signpost patients to options for PRD care locally and nationally.

"We must see people holistically, and think what range of organs may have been affected by their radiotherapy, and hence what questions we as professionals need to ask people about – bowel difficulties, bladder symptoms, sexual problems, fertility concerns, body image issues, fatigue, pain, skin problems, and very importantly – psychological issues."

## **Best Practice Pathway and virtual conference 2022**







"Radiotherapy late effects are life changing, this guidance helps us to understand the challenges that people face and to manage the whole person, not just individual systems or bits of anatomy."

> Dr Lisa Durrant, Consultant Therapeutic Radiographer, Radiation Late Effects Service Beacon Radiotherapy Centre, Musgrave Park Hospital, Somerset NHS Foundation Trust

## Launch of Let's Talk and Expansion of services

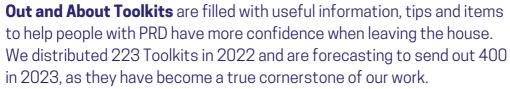


Thanks to funding from the National Lottery Community Fund we were able to launch Let's Talk – a five-week programme of weekly sessions to help people understand their symptoms, learn from subject matter experts and to take their first steps into PRD peer support. Over the course of the sessions, subjects covered included pain management, fatigue, diet and nutrition, and bladder and bowel health.

"The Let's Talk programme really has been great, not least because it has provided me with a connection with people who just get it which I really needed. Without that connection, life can feel pretty lonely."

PRDA service user

## Highlights of 2022-2023



"A very useful pack both for the information and the practical items to help out in an emergency. Reassurance is life-enhancing for folk with PRD"

Our **Online Community** and **Chat Together** support groups have continued to grow and give members much-needed peer support; many speak of the great relief in speaking to someone having the same experiences as them. We supported over 500 people in this way in 2022.





## **Volunteering**

We now have 19 volunteers, many of whom sit on our Patient Advisory Group and actively contribute to our work. They have become an important asset to the organisation helping us centre the patient voice in our decision making.

One of our volunteers spoke about their experience and the unexpected benefits of being a volunteer:



"I found out about the Pelvic Radiation Disease Association (PRDA) online. I wanted to help other people, so I came to PRDA with the aim of contributing. And then I found I was getting support that I wasn't necessarily expecting. There is someone whose symptoms are very similar to mine, and that was a relief, to talk to someone else who had the same sort of pain and the same sort of issues."

## **Funding**

As evidenced in the annual accounts attached to the end of this report, 2022/23 was another record year for income for the PRDA.

We are grateful to the following grant-makers for their support this year:

- The National Lottery Community Fund
- Inman Charity
- Garfield Weston Foundation
- Edward Gostling Foundation
- PF Charitable Trust
- D'Oyly Carte Charitable Trust

- Dawnie Trust
- William Allen Young Charitable Trust
- Hospital Saturday Fund
- Woodroffe Benton Foundation
- Tesco Community Grants
- Albert Hunt Trust

We are also grateful to Aspire Pharma, who donated £10,000 to the charity to support our professional engagement work, focused primarily around the Best Practice Pathway and annual conference.

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## Our year in numbers







**1700**web sessions on our
Best Practice Pathway



Over **18,000** visitors to our website

an increase of **63%** 

**448** Online Community members



1100 views of our PRDA22 YouTube playlist, featuring recordings from our 2022 annual conference



## Milena's Story

Due to a diagnosis of endometrial cancer in 2012, I had a full hysterectomy and oophorectomy. It was radical surgery and was followed up by five weeks of radiotherapy. Before I had the radiotherapy, I was told nothing about the possible side effects.

I was told I didn't even have to have radiotherapy if I didn't want to, but in the moment you're so terrified. My husband said "you should have everything you



can to prevent [the cancer from] coming back", which is always the fear – so I had it as a preventative measure.

## "The biggest challenge is being able to live my full life"

I think it was about a year after treatment that I first started experiencing symptoms of PRD. I went from being horribly constipated to having diarrhoea and an upset stomach for quite a long time – it was like IBS. But then it all settled down and I thought it was finished with.

Then I had what turned out to be the first gastric attack. We had gone away for a weekend, and I thought I was going to have to go to A&E it was just so painful. By the morning it had gone, but after that I started getting them regularly.

I didn't discover anything about post-radiation effects until I found a Macmillan pamphlet a year and a half later. I sat and cried reading it. Everything just fell into place because it described my symptoms.

The biggest challenge is being able to live my full life. I have to think twice before I go on holiday and the thought of being in someone else's house where I can't have a loo to myself or a place I can go and be ill horrifies me. It does limit what I feel comfortable doing.

I haven't been given any help for the sexual issues. I tried to talk to the hospital staff about the intimacy side of things – the vaginal dilators were useless for me and painful to use. I didn't really get any help there, although they did talk about reconstructive surgery, but I thought, "No way is anyone messing about down there!"

I went for a check-up and said I wasn't managing. I mentioned the dilators but they said they hadn't given them to me so I could still have sex, but just so they could still examine me. My daughter saw what they'd given me and took me to a women-only sex shop, and they were lovely. I bought a set of dilators and lubricants which were much more comfortable, but even with those it was just too painful.

I found out about the Pelvic Radiation Disease Association (PRDA) online; I hadn't heard from anybody else having the same issues as me and was starting to doubt myself. I wanted to help other people, especially with the sexual side because I am quite open about it and because a lot of women wouldn't have a daughter who would take them to a sex shop!

Before you have the treatment for cancer, you must sign a consent form, and you think, "what alternative do I have? I just don't want cancer." When you think the options are dying or having this, what do you do? It has left me angry enough to be very willing to share this experience, because I just feel sorry for other women out there who may be going through something similar.

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Report of the Trustees for the Year Ended 31 March 2023

The trustees who are also directors of the charity for the purposes of the Companies Act 2006, present their report with the financial statements of the charity for the year ended 31 March 2023. The trustees have adopted the provisions of Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019).

#### **OBJECTIVES AND ACTIVITIES**

### Objectives and aims

The term Pelvic Radiation Disease is still to gain general acceptance among health professionals as a valid and useful framework within which to describe brief or long lasting problems, mostly in the bowel, caused by pelvic radiotherapy. The trustees aim to bring this disease to the attention of health professionals and patients to inform them about how to alleviate their symptoms. The trustees work to have the most up to date information for patients on the various aspects of Pelvic Radiation Disease and available resources for treatment.

The objectives of the charity as per the Articles are:

To campaign for the wider recognition of Pelvic Radiation Disease as well as for improvement in National Health Service facilities and treatment to help the management of radiation induced injury.

To support patients suffering from radiation induced injury and in particular patients suffering from Pelvic Radiation Disease in any appropriate way including through a network of informal support groups that are professionally supported.

To gather information about and support research into Pelvic Radiation Disease.

#### Significant activities

Founded fourteen years ago as a patient support group and registered as a charity in 2012, the trustees continue to dedicate themselves, with the support of volunteers, to expand the outreach of the Pelvic Radiation Disease Association (PRDA) and to further refine the charity's provision of information, support and guidelines to both patients and health professionals.

#### FINANCIAL REVIEW

#### Financial position

It has been another good year, with increases in both spending and in fundraising. This allowed us to expand our service provision and develop new reference resources. The extra income puts the charity on a sound footing to continue expanding the range and quantity of support it provides for the foreseeable future.

The gross income of the charity for the year ended 31 March 2023 amounted to £61,947 (2021/22: £41,399) whereas costs for charitable activities were £53,554 (2021/22: £38,018), of which Governance costs were £650 (2021/22: £640). The net surplus for the year was £8,393 (2021/22: £3,381).

The overall net assets of the company have increased from £45,430 to £53,823.

#### Reserves policy

It is the policy of the trustees to maintain unrestricted funds, which are the free reserves of the charity, at the minimum level of £25,000.

Report of the Trustees

for the Year Ended 31 March 2023

#### STRUCTURE, GOVERNANCE AND MANAGEMENT

#### **Governing document**

The Charity was established under a Memorandum of Association which established the objects of the charitable company, and is governed under its Articles of Association.

The charity is governed by the Board of seven trustees, which meets on a regular basis. The trustees oversee all day to day operations of the charity and support and advise on all financial matters. Trustees receive written minutes at Board Meetings held during the year to ensure they are kept up to date with the activities of the charity. In addition, the trustees review the Pelvic Radiation Disease Association portfolio of policies and procedures on a regular basis, and introduce new policies and procedures as appropriate.

The charity is registered with the Fundraising Regulator

#### Recruitment and appointment of new trustees

There were no changes to the Board of trustees during the course of the year. The Board has identified a need for more trustees who can bring specific skills and lived experience of PRD, and intends to take action to address this need.

#### Related parties

The Charity has no subsidiaries. There are no related parties in the charity.

#### Risk management

The trustees have assessed the major risks to which the Charity is exposed, in particular those related to the operation and finances of the charity, and are satisfied that the systems are in place to mitigate their exposure to the major risks. Efforts are continuously made to increase funds. Internal risks are minimized by implementation of satisfactory operational procedures, and consistent quality of service delivery. These are reviewed by the Board on a regular basis.

PRDA does not hold any investments.

### REFERENCE AND ADMINISTRATIVE DETAILS

**Registered Company number** 

07998409 (England and Wales)

#### **Registered Charity number**

1147802

## Registered office

62 Norbiton Avenue Kingston upon Thames Surrey KT1 3QP

### **Trustees**

D E Jillings

L A Punt

B D Sacks

B K Shah

L M Smith

J A Webber

A S Boyes

#### **Company Secretary**

D E Jillings

Report of the Trustees for the Year Ended 31 March 2023

## REFERENCE AND ADMINISTRATIVE DETAILS

**Independent Examiner** 

Mary E Ryan Ark Accountancy Chartered Certified Accountant 31 Cheam Road Epsom Surrey KT17 1QX

Approved by order of the board of trustees on 11 August 2023 and signed on its behalf by:

D E Jillings - Trustee

## Independent Examiner's Report to the Trustees of PELVIC RADIATION DISEASE ASSOCIATION

## Independent examiner's report to the trustees of PELVIC RADIATION DISEASE ASSOCIATION ('the Company')

I report to the charity trustees on my examination of the accounts of the Company for the year ended 31 March 2023.

#### Responsibilities and basis of report

As the charity's trustees of the Company (and also its directors for the purposes of company law) you are responsible for the preparation of the accounts in accordance with the requirements of the Companies Act 2006 ('the 2006 Act').

Having satisfied myself that the accounts of the Company are not required to be audited under Part 16 of the 2006 Act and are eligible for independent examination, I report in respect of my examination of your charity's accounts as carried out under Section 145 of the Charities Act 2011 ('the 2011 Act'). In carrying out my examination I have followed the Directions given by the Charity Commission under Section 145(5) (b) of the 2011 Act.

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

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

- 1. accounting records were not kept in respect of the Company as required by Section 386 of the 2006 Act; or
- 2. the accounts do not accord with those records; or
- 3. the accounts do not comply with the accounting requirements of Section 396 of the 2006 Act other than any requirement that the accounts give a true and fair view which is not a matter considered as part of an independent examination; or
- 4. the accounts have not been prepared in accordance with the methods and principles of the Statement of Recommended Practice for accounting and reporting by charities (applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102)).

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

Man & Ryan

Mary E Ryan

Ark Accountancy Chartered Certified Accountant 31 Cheam Road Epsom Surrey KT17 1QX

## Statement of Financial Activities for the Year Ended 31 March 2023

INCOME AND ENDOWMENTS FROM Donations and legacies	Notes	Unrestricted fund £ 5,467	Restricted fund £	31.3.23 Total funds £ 5,467	31.3.22 Total funds £ 7,829
-		,		,	,
Charitable activities					5,000
Penguins against cancer Dawnie Trust		2,000	-	2,000	5,000
P F Trust		4,000	<del>-</del>	4,000	1,000
Albert Hunt Trust		1,000	_	1,000	_
Gisella Graham Foundation		-	_	-	1,000
National Lottery Community Fund		-	8,928	8,928	-,
The Woodroffe Benton Foundation		-	1,500	1,500	-
Hospital Saturday Fund		=	2,000	2,000	2,000
Community Fund Local Connect		-	-	-	2,450
Aspire Pharma		10,000	-	10,000	10,000
Tesco Community Fund		1,000	-	1,000	-
The D'Oyly Carte Charitable Trust		=	3,000	3,000	-
Garfield Weston The Inman Charity		-	5,000 5,000	5,000 5,000	-
William Allen Young Charitable Trust		2,000	5,000	2,000	_
Edward Gostling Foundation		4,000	_	4,000	_
Lawara Gooming Foundation		1,000		.,000	
Other trading activities	2	6,552	<del>-</del>	6,552	12,120
Total		36,519	25,428	61,947	41,399
EXPENDITURE ON Charitable activities Charitable activities Lennox Hannay Charitable Trust Community Fund Local Connect		38,232	15,322	53,554	32,671 1,795 3,552
Community I and Local Connect					
Total		38,232	15,322	53,554	38,018
NET INCOME/(EXPENDITURE) Transfers between funds	9	(1,713) (166)	10,106 166	8,393 	3,381
Net movement in funds		(1,879)	10,272	8,393	3,381
RECONCILIATION OF FUNDS Total funds brought forward		45,430		45,430	42,049
TOTAL FUNDS CARRIED FORWARD		43,551	10,272	53,823	45,430

Balance Sheet 31 March 2023

	Notes	Unrestricted fund £	Restricted fund £	31.3.23 Total funds £	31.3.22 Total funds £
CURRENT ASSETS Debtors	7	150	-	150	150
Cash at bank		45,769	11,133	56,902	47,605
		45,919	11,133	57,052	47,755
CREDITORS					
Amounts falling due within one year	8	(2,368)	(861)	(3,229)	(2,325)
NET CURRENT ASSETS		43,551	10,272	53,823	45,430
TOTAL ASSETS LESS CURRENT LIABILITIES		43,551	10,272	53,823	45,430
NET ASSETS		43,551	10,272	53,823	45,430
FUNDS Unrestricted funds Restricted funds	9			43,551 10,272	45,430
TOTAL FUNDS				53,823	45,430

The charitable company is entitled to exemption from audit under Section 477 of the Companies Act 2006 for the year ended 31 March 2023.

The members have not required the company to obtain an audit of its financial statements for the year ended 31 March 2023 in accordance with Section 476 of the Companies Act 2006.

The trustees acknowledge their responsibilities for

- (a) ensuring that the charitable company keeps accounting records that comply with Sections 386 and 387 of the Companies Act 2006 and
- (b) preparing financial statements which give a true and fair view of the state of affairs of the charitable company as at the end of each financial year and of its surplus or deficit for each financial year in accordance with the requirements of Sections 394 and 395 and which otherwise comply with the requirements of the Companies Act 2006 relating to financial statements, so far as applicable to the charitable company.

JAWA

Balance Sheet - continued

31 March 2023

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

The financial statements were approved by the Board of Trustees and authorised for issue on 11 August 2023 and were signed on its behalf by:

D E Jillings - Trustee

J A Webber - Trustee

Notes to the Financial Statements for the Year Ended 31 March 2023

#### 1. ACCOUNTING POLICIES

#### Basis of preparing the financial statements

The financial statements of the charitable company, which is a public benefit entity under FRS 102, have been prepared in accordance with the Charities SORP (FRS 102) 'Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019)', Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' and the Companies Act 2006. The financial statements have been prepared under the historical cost convention.

#### Income

All income is recognised in the Statement of Financial Activities once the charity has entitlement to the funds, it is probable that the income will be received and the amount can be measured reliably.

#### Expenditure

Liabilities are recognised as expenditure as soon as there is a legal or constructive obligation committing the charity to that expenditure, it is probable that a transfer of economic benefits will be required in settlement and the amount of the obligation can be measured reliably. Expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all cost related to the category. Where costs cannot be directly attributed to particular headings they have been allocated to activities on a basis consistent with the use of resources.

#### Tangible fixed assets

Depreciation is provided at the following annual rates in order to write off each asset over its estimated useful life.

Website - 33% on cost

#### **Taxation**

The charity is exempt from corporation tax on its charitable activities.

### **Fund accounting**

Unrestricted funds can be used in accordance with the charitable objectives at the discretion of the trustees.

Restricted funds can only be used for particular restricted purposes within the objects of the charity. Restrictions arise when specified by the donor or when funds are raised for particular restricted purposes.

Further explanation of the nature and purpose of each fund is included in the notes to the financial statements.

## Pension costs and other post-retirement benefits

The charitable company operates a defined contribution pension scheme. Contributions payable to the charitable company's pension scheme are charged to the Statement of Financial Activities in the period to which they relate.

#### 2. OTHER TRADING ACTIVITIES

	31.3.23 £	31.3.22 £
Fundraising events Other income	6,552	11,814 306
Other medite		
	6,552	12,120

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Notes to the Financial Statements - continued for the Year Ended 31 March 2023

## 3. TRUSTEES' REMUNERATION AND BENEFITS

There were no trustees' remuneration or other benefits for the year ended 31 March 2023 nor for the year ended 31 March 2022.

## Trustees' expenses

There no trustees' expenses paid to the trustees in their role as trustees for the year ended 31 March 2023 nor for the year ended 31 March 2022.

### 4. STAFF COSTS

The average monthly number of employees during the year was as follows:

	31.3.23	31.3.22
Administrators	3	1

No employees received emoluments in excess of £60,000.

## 5. COMPARATIVES FOR THE STATEMENT OF FINANCIAL ACTIVITIES

	Unrestricted fund	Restricted fund	Total funds
	£	£	£
INCOME AND ENDOWMENTS FROM			
Donations and legacies	7,829	-	7,829
Charitable activities			
Penguins against cancer	5,000	-	5,000
Dawnie Trust	1,000	-	1,000
Gisella Graham Foundation	1,000	-	1,000
Hospital Saturday Fund	2,000	-	2,000
Community Fund Local Connect	-	2,450	2,450
Aspire Pharma	10,000	-	10,000
Other trading activities	12,120	<del>-</del>	12,120
Total	38,949	2,450	41,399
EXPENDITURE ON Charitable activities			
Charitable activities	32,671	-	32,671
Lennox Hannay Charitable Trust	=	1,795	1,795
Community Fund Local Connect	<del>-</del>	3,552	3,552
Total	32,671	5,347	38,018
NET INCOME/(EXPENDITURE) Transfers between funds	6,278 4,413	(2,897) (4,413)	3,381
Net movement in funds	10,691	(7,310)	3,381
RECONCILIATION OF FUNDS Total funds brought forward	34,739	7,310	42,049

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Notes to the Financial Statements - continued for the Year Ended 31 March 2023

5.	COMPARATIVES FOR THE STATEMI	ENT OF FINANCI	AL ACTIVITIES Unrestricted fund £	Restricted fund	Total funds £
	TOTAL FUNDS CARRIED FORWARD		45,430	<del>-</del>	45,430
6.	TANGIBLE FIXED ASSETS				Website
	COST At 1 April 2022 and 31 March 2023				£
	<b>DEPRECIATION</b> At 1 April 2022 and 31 March 2023				12,792
	NET BOOK VALUE At 31 March 2023				
	At 31 March 2022				
7.	DEBTORS: AMOUNTS FALLING DUE	WITHIN ONE YE	EAR	31.3.23 £	31.3.22 £
	Tax			<u>150</u>	<u>150</u>
8.	CREDITORS: AMOUNTS FALLING DO	UE WITHIN ONE	YEAR	31.3.23 £	31.3.22 £
	Social security and other taxes Other creditors Accrued expenses			(99) 2,678 650 3,229	(538) 2,223 640 2,325
9.	MOVEMENT IN FUNDS		Net movement	Transfers between	At
	Unrestricted funds	At 1.4.22 £	in funds £	funds £	31.3.23 £
	General fund	45,430	(1,713)	(166)	43,551
	Restricted funds Restricted funds		10,106	166	10,272
	TOTAL FUNDS	45,430	8,393	<del>-</del>	53,823

Notes to the Financial Statements - continued for the Year Ended 31 March 2023

## 9. MOVEMENT IN FUNDS - continued

Net movement in funds, included in the above are as follows:

		Incoming resources £	Resources expended £	Movement in funds £
Unrestricted funds General fund		36,519	(38,232)	(1,713)
Restricted funds Restricted funds		25,428	(15,322)	10,106
TOTAL FUNDS		61,947	<u>(53,554</u> )	8,393
Comparatives for movement in funds				
	At 1.4.21	Net movement in funds £	Transfers between funds £	At 31.3.22 £
Unrestricted funds General fund	34,739	6,278	4,413	45,430
Restricted funds Restricted funds	7,310	(2,897)	(4,413)	
TOTAL FUNDS	42,049	<u>3,381</u>		45,430
Comparative net movement in funds, included i	n the above are a	s follows:		
		Incoming resources	Resources expended £	Movement in funds £
<b>Unrestricted funds</b> General fund		38,949	(32,671)	6,278
Restricted funds Restricted funds		2,450	(5,347)	(2,897)
TOTAL FUNDS		41,399	(38,018)	3,381

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Notes to the Financial Statements - continued for the Year Ended 31 March 2023

## 9. MOVEMENT IN FUNDS - continued

A current year 12 months and prior year 12 months combined position is as follows:

Unrestricted funds	At 1.4.21 £	Net movement in funds £	Transfers between funds £	At 31.3.23 £
General fund	34,739	4,565	4,247	43,551
Restricted funds Restricted funds	7,310	7,209	(4,247)	10,272
TOTAL FUNDS	42,049	11,774	<u> </u>	53,823

A current year 12 months and prior year 12 months combined net movement in funds, included in the above are as follows:

	Incoming resources £	Resources expended £	Movement in funds £
Unrestricted funds General fund	75,468	(70,903)	4,565
Restricted funds Restricted funds	27,878	(20,669)	7,209
TOTAL FUNDS	103,346	<u>(91,572)</u>	11,774

## 10. RELATED PARTY DISCLOSURES

Expenses of £2,558 were reimbursed to 1 director during the year (2022 £1,826 to 4 directors)

Detailed Statement of Financial Activities		
for the Year Ended 31 March 2023	31.3.23 £	31.3.22 £
INCOME AND ENDOWMENTS		
Donations and legacies		
Donations Gift aid	4,679 788	5,390 2,439
	<del></del>	
	5,467	7,829
Other trading activities Fundraising events	6,552	11,814
Other income		306
	6,552	12,120
Charitable activities		
Grants	49,928	21,450
Total incoming resources	61,947	41,399
EXPENDITURE		
Charitable activities Wages	34,090	24,290
Pensions	469	229
Insurance	468	425
Telephone Postage & stationery	385 953	531 158
Leaflets and posters	4,126	445
Sundries	2,113	258
Travel	315	-
Subscriptions & registrations	98	85
Room hire & catering	3,292	- 144
Payroll & HR IT & website	144 2,272	144 2,688
Consultancy		3,605
Training	55	
Conferences	<del>-</del>	968
O&A Toolkit	4,124	3,552
	52,904	37,378
Support costs		
Governance costs	650	640
Accountancy fees	650	640
Total resources expended	53,554	38,018
Net income	<u>8,393</u>	3,381

## We give a voice to people affected by Pelvic Radiation Disease

The Pelvic Radiation Disease Association aims to support all people affected by, or at risk of, side effects due to pelvic radiotherapy, at any stage of cancer treatment, and however long ago cancer treatment was given.

The Best Practice Pathway for Pelvic Radiation Disease addresses the lack of awareness about the impact PRD has on people's lives, and the lack of knowledge about how to improve symptoms and quality of life.

## The Best Practice Pathway for Pelvic Radiation Disease can be accessed via the QR code.

Each chapter covers key clinical management steps, and points users to published guidance, service models, quality standards and sources of professional education. There is also a comprehensive section on supporting people to self-manage their PRD symptoms. In addition, the document provides advice on service development.



prda.org.uk/prd-best-practice-pathway



website | prda.org.uk email | info@prda.org.uk











