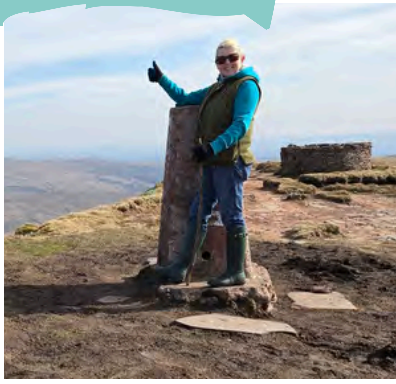
PELVIC
RADIATION
DISEASE
ASSOCIATION

Annual Report 2024-2025



Every story, every voice

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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 (resigned 22.5.24)
David Jillings acting chair from 23.05.24

Trustees:

John Buckle (appointed 07.06.24)
E Jane Hall
David E Jillings acting chair
Faye Popham
Lisa A Punt
Benjamin D Sacks (resigned 04.03.25)
Bhumi K Shah
Steve Simmonds (appointed 15.10.24)
Lesley M Smith
John A Webber Chair (resigned 22.5.24)

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

Professor Sara Faithfull

Adjunct Professor, Trinity College Dublin, The University of Dublin
Visiting Professor King's College, London

Pelvic Radiation Disease (PRD) is a late effect of cancer treatment which is often neglected and thought of by many as the "price to pay" for survival from cancer, but symptoms that stop you being able to go out of your home, limit your life, work and relationships are distressing.

The PRDA are challenging this experience by sharing clinical guidance, informing clinicians of PRD symptom management strategies and supporting those affected by PRD. As Tara's real-life story identifies on the PRDA web site she found that following her cancer treatment her symptoms subsided but her pelvic symptoms returned 8 years later. She says, "it's critical that healthcare professionals learn about PRD and don't just assume that because you have survived cancer, everything is fine". Real life stories play a vital role in raising awareness of the challenges faced by people living with PRD but also sharing helpful ways to support living with and after a cancer diagnosis. The experience of those seeking support from PRDA is positive, with an online community, chat together group as well as signposting to services or resources help patients with PRD that show that this is a much-needed UK charity.

Having worked with the PRDA team, over the last few years, as a clinical adviser and supporter I have always been impressed by the reach, ambition and clinical network that the team have developed. In the coming year I hope that the PRDA can develop and grow their resources and support services, fostering positive environments for those living with PRD, but also that by helping clinicians with the best practice guidance on how to support those with PRD, in their own clinical settings, that PRD will be better managed, improving people's lives. I feel privileged to support the charity and their work in the coming year.

Sara Faithfull

David Jillings - Acting Chair

This year marked a period of transition and renewed focus. With a change in leadership in May 2024, the charity has continued to evolve, guided by a clear sense of purpose and ambition. I've had the privilege of stepping into the role of Acting Chair during this time and have seen the strength of our community and the impact of our collaborative efforts first-hand. The foundations laid in recent years have enabled us to move forward with confidence, building on our strategic aims and deepening our commitment to people affected by Pelvic Radiation Disease.

Over the past financial year, we bid farewell to trustee Dr Ben Sacks, who has served with commitment and insight for five years. We are very thankful for his contributions and continued support of our mission.

This year has been marked by meaningful progress and strengthened partnerships. We expanded our virtual peer support programme, welcoming new volunteers whose energy and compassion have greatly enriched our work. We have been privileged to receive a number of powerful submissions through our Every Story, Every Voice call to action, as individuals living with PRD generously shared their experiences. These real-life stories continue to play a vital role in raising awareness, deepening understanding, and driving more compassionate, informed care.

A key development this year was expanding our Out and About Toolkit service, making it easier for patients to access resources directly through participating clinics.

We remain committed to advocating for standardised care for PRD in clinical practice. Our collaborative ethos was reflected in our recent contribution to the Society of Radiographers' Imaging and Oncology publication, which emphasised the vital role of partnerships between patients, charities, and healthcare professionals. Our ongoing work with the Sheffield Late Effects Clinic exemplifies this approach, supporting the development of a tool to improve how late effects following pelvic radiotherapy are assessed and managed.

As we look ahead, our ambition is clear: to build on these collaborations, deepen our impact, and continue raising awareness of PRD so that every patient receives the care and understanding they deserve.

David Jillings

Our Aims and Objectives

The Pelvic Radiation Disease Association (PRDA) is committed to improving the lives of an estimated 100,000 people in the UK who live with the long-term effects of Pelvic Radiation Disease (PRD).
PRD affects people who have completed radiotherapy treatment for cancer but continue to experience life-changing symptoms, including issues with bladder and bowel function, fertility, intimacy, mobility, and mental health. These challenges can significantly impact their quality of life, relationships, social interactions, independence, and the ability to return to work.
PRDA makes a significant difference to the lives of people living with this debilitating condition by providing information, peer-to-peer support, and advocating for better care. By giving a voice to those affected by PRD, we help raise awareness, improve understanding of its impact, and reduce the stigma often associated with its symptoms.

The key objectives and outcomes of our work are:

Fewer people feel alone while experiencing the debilitating symptoms of PRD

- Expanding our Chat Together peer support service offer.
- Increasing the number of people signing up to our peer support services

Better information made available to patients in advance of radiotherapy treatment

- Promoting the PRD Best Practice Pathway, which highlights the need for early, clear communication about potential long-term side effects before treatment begins.
- Sharing up-to-date research and developments in radiotherapy, helping patients to make informed decisions and understand potential outcomes.

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

- Building a ‘community of practice’ among healthcare professionals, united by a shared commitment to improving care for those living with PRD.
- Collaborating directly with clinicians and specialists to build awareness, share expertise, and embed PRD into mainstream conversations about survivorship care.
- Increasing the PRDA’s presence at professional conferences, enhancing visibility and encouraging wider engagement.

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

- Broader distribution of Out and About Toolkits in NHS clinics, enabling more individuals to feel prepared and confident managing symptoms in public settings.
- Expansion of peer-to-peer support opportunities, helping more people feel empowered to speak openly about PRD and share their experiences without shame.

Improved quality of life for people affected by PRD

- Advocating for integrated, patient-centred care across all NHS regions, PRDA responded to the 10-Year Health Plan for England by calling for nationwide provision of late effects services—encompassing psychological support, self-management tools, clear care pathways, staff training, and strengthened research infrastructure.

Expanding our virtual peer support

Our regular Chat Together peer support sessions have been expanded to offer more opportunities for connection. In addition to our existing evening session, we've now introduced an afternoon slot to make the service more accessible.

New volunteer roles

We welcome three new volunteers this year and form our team of Chat Together facilitators. As people with lived experience of PRD, they play a key role in helping us run and grow the sessions.

> "I'm excited to get involved in facilitating Chat Together sessions so as many people as possible can benefit from the support the PRDA provide. PRDA has a special place in my heart"
>
> **Gill - Volunteer Chat Together Facilitator**

Our call for 'Every Story Every Voice'

This year, we placed a stronger focus on gathering and sharing real-life stories through our Every Story, Every Voice call to action. This initiative has encouraged consistent submissions from individuals living with PRD, enriching our growing collection of real-life stories. Sharing lived experiences remains at the heart of our efforts to raise awareness and understanding of PRD.

> "I can't remember if I was ever told about any long term effects but I still would not have changed the treatment I had, it saved my life at the end of the day…"
>
> **Amy - Real-life Story**

Roll out of PRD toolkits across the UK

This year, we've significantly expanded our Out and About Toolkit service by providing bulk supplies to participating Late Effects Services across the UK, allowing eligible patients to receive the kits directly in clinic. So far, we've given out 231 kits through this new approach – a significant number of people we hope now feel more confident going out and about.

A Voice for Patients at ESTRO

The 2024 European Society for Radiotherapy and Oncology (ESTRO) Congress featured dedicated sessions on *Quality of Life After Cancer Treatment* and *Late Effects of Radiotherapy*. PRDA Trustee, David Jillings, was a guest speaker as part of the *Quality of Life after Cancer Treatment* session, sharing the patient perspective and emphasising the importance of raising awareness of PRD.

The congress hall was full, and there was a very positive reaction to the talk by professionals on social media, showing the growing interest and understanding of quality of life issues for radiotherapy patients

Advocating for Standardised PRD Care in Clinical Practice

The PRDA was invited to contribute an article to the Society of Radiographers' Imaging and Oncology publication, which highlighted the importance of collaborative work with people affected by PRD, charities, and health professionals.

The piece advocated for better recognition, management, and support within healthcare, and emphasised the need for standardised care. It also encouraged the use of the PRD Best Practice Pathway to support professionals in delivering consistent, effective care.

How collaboration is making a big impact in the field of pelvic radiotherapy late effects

> Knowing that what I was going through was all linked together made me feel calmer in a way and ready to look out for any other changes in my body that may occur. If I had been informed of PRD either before or during my treatment, I could have prepared myself more effectively in advance.”
>
> **Maria Dullaghan - living with PRD and article contributor**

Partnering for Patient-Centred Innovation

The PRDA is proud to be working in partnership with the Sheffield Late Effects Clinic, led by Professor Diana Greenfield, to provide Patient and Public Involvement and Engagement (PPIE) and endorse the development of a novel web-based assessment tool. The electronic Personal Assessment Questionnaire (ePAQ) tool is designed to support the assessment of late effects following pelvic radiotherapy, helping to improve patient care and outcomes.

> "We anticipate that the questionnaire will support individuals in identifying, recording, and communicating their condition and concerns, helping them access the right support and advice."
>
> **Helen - PRDA Professional Engagement Coordinator**

Our Year in Numbers

428 Out and About Toolkits provided

We have distributed 231 to participating Late effects services and 197 through individual enquiries. More than a 100% increase in distribution compared to last year.

PROUD TO SUPPORT THE
SUNFLOWER
FOR INDIVIDUALS WITH HIDDEN DISABILITIES

Over 3573 Best Practice Pathway views

Our BPP remains a popular resource on our website and is consistently one of the most visited pages each month.

Over 53,000 page views on our website

Averaging 4484 page views a month. This equates to a 24% uplift compared with the previous year.

Our Online Community has 752 members

A 24% increase from last year - this growth reflects the strength of peer support and the value members find in sharing experiences and understanding

Social media followers up 15%

Our social media presence continues to expand, with Facebook seeing the most significant growth with a 40% increase in followers.

Our annual turnover was £34,311

Turnover growth was steadier this year, but as a small charity we're still punching above our weight. We were thrilled to grow our team with a new staff member.

Our Programmes

The PRDA works on two fronts to address PRD, focusing on both immediate support and long-term improvement. We provide direct patient support to help those living with PRD today, while also collaborating with healthcare professionals to develop better care pathways for the future.

Direct patient support

Online Community

Established in 2020, this peer-to-peer social support network enables individuals with PRD to connect with one another. Available 24/7, it provides a safe and supportive environment where members can share experiences and learn from each other. The community has grown steadily each year, with an average of 145 new members joining annually.

Out and About Toolkit

Our Out and About Toolkits are designed to help those with PRD-related continence issues feel more confident when venturing out. They provide valuable information, practical tips, and useful tools to offer support and reassurance.

Toolkits include essential items such as a 'Just Can't Wait' toilet card, a RADAR key—used to unlock over 10,000 accessible toilets across the UK that are part of the National Key Scheme—a Sunflower lanyard—a discreet way for people with hidden disabilities to signal that they may need assistance or understanding without having to explain their condition—Wype, an eco-friendly product that transforms toilet paper into a wet wipe, and hand sanitiser.

Chat Together

Open to people aged 18+ who are living with PRD, Chat Together is our online peer support group. Providing a safe, supportive space to share experiences, learn coping strategies, and connect with others who understand.

> "It's critical that healthcare professionals learn about PRD and don't just assume that because you've survived cancer, everything is fine."
>
> **Tara** - person living with Pelvic Radiation Disease

Real-life Stories

Real-life stories guide individuals to our support services, inform them about their condition, and educate both healthcare professionals and the public. These voices make a meaningful difference in the lives of those affected by PRD. When shared on social media, they consistently spark high engagement and meaningful discussion, underscoring their powerful impact and resonance within our wider community.

Let’s Talk

Currently in development, with plans to relaunch in an improved format, we will be incorporating feedback and recommendations from our service users and our Patient Advisory Group. The new service will integrate education, peer support, and insights from guest experts, as well as individuals with lived experience, to help develop users' understanding of PRD.

Once developed, it will serve as a central hub, providing access to resources and offering a greater understanding of new or emerging PRD symptoms they experience at any point in their life.

Direct enquiries

We currently receive individual enquiries via our online contact forms. In response, individuals are directed to the most relevant information, resources, or services best suited to address their query. This may include signposting to information and resources on the PRDA website, PRDA support services, or external services. The support we provide is not a substitute for professional care.

The PRDA cannot provide medical advice or facilitate direct connections with healthcare professionals.

General information

Service users living with PRD can access a comprehensive range of information and resources on the PRDA website, including downloadable materials such as the PRD Best Practice Pathway, our 'Diet, Nutrition and PRD' guide, a symptom checklist, a symptoms diary, and a list of Late Effects clinics, as well as other external support services.

Our media library features video recordings from previous conferences, covering topics such as self-management of PRD, current research, and the management of PRD symptoms. We also plan to expand our video resources in the future as part of our ongoing service offering

Discover how we can support individuals living with PRD
by visiting our website at **prda.org.uk/support**

Professional engagement

Collaborating for Greatest Impact

PRDA volunteers have added value to the development of a new web-based questionnaire. Based on the PRD Best Practice Pathway, the NHS clinical team in Sheffield anticipate that this questionnaire will help individuals to identify, document and communicate their condition and concerns, and access appropriate help and advice they need.

Building a Community of Practice

Our Community of Practice brings together health and research professionals from a range of disciplines, specialties, and settings to form an informative and supportive network. This year, we are seeking to broaden our reach by connecting with relevant professional societies and other organisations with a shared interest in PRD. By sharing knowledge and collaborating, members work collectively to enhance PRD services and advance research.

Working together to support patients

Following the successful 100% uptake of Out and About Toolkits by patients in the Leeds PRD service pilot, and the universally positive feedback received, we were able to extend this initiative nationally to all Late Effects services across the country. As a result, 11 services enrolled in the programme, collectively distributing 231 toolkits to patients through the clinic setting.

> "Being able to receive orders of the 'out & about' toolkits is invaluable to my work… it gives [patients] the sense of being cared for and understood… I'm very grateful to PRDA for providing them."
>
> **Samantha Bostock, Macmillan Radiotherapy Late Effects Lead Radiographer**

Professional Networking events

Our annual in-person networking day offers members of the Community of Practice a valuable opportunity to hear from leading experts, explore key studies in the field of PRD, and exchange knowledge and ideas in a supportive, collaborative environment. Following a successful day in London last year, we are planning for our next networking event in Birmingham in July 2025

Greater visibility of PRD

As part of the Department of Health and Social Care's public consultation on England's new 10-Year Health Plan, the Pelvic Radiation Disease Association called for the integration of comprehensive, networked radiotherapy late effects services across all NHS regions. This includes integrated psychological care as part of a wider initiative to improve supportive oncology care across primary, community, and secondary care.

BPP – preparations for update

The Best Practice Pathway (BPP) webpage attracted 3,573 views last year, demonstrating its ongoing relevance and value to the community. The BPP features in the new *British Society of Gastroenterology practice guidance on the management of acute and chronic gastrointestinal symptoms and complications as a result of treatment for cancer*. We are currently preparing for the next revision, drawing on insights from the evaluation of the MASCC survey results to ensure updates are evidence-based and aligned with current needs.

Professional Conferences

In 2024/25, we attended key healthcare conferences, including the annual meetings of the British Society of Gastroenterology, the Society of Radiographers, the Pelvic Floor Society, European Society for Radiotherapy and Oncology , and Multinational Association of Supportive Care in Cancer . These events provided valuable opportunities to raise awareness of Pelvic Radiation Disease (PRD) among healthcare professionals.

We actively share updates on conferences featuring programme content relevant to PRD across our website and social media platforms. Highlighting our attendance at these events further promotes PRD awareness within the healthcare community.

Promotion of Research, Guidance, and Education

As a charity, we play a key role in promoting research, clinical guidance, and professional education related to pelvic radiation disease (PRD). We regularly share relevant updates, resources, and events through our website and social media channels to support healthcare professionals and raise awareness of best practices. Over the past year, we have signposted and promoted:

- The launch of the Rad Chat website - a new hub for radiotherapy education.
- Published article - Radiotherapy toxicities: mechanisms, management, and future directions which explores the science behind late effects and strategies for improved care.
- The RTUK Talks series, focusing on patient experience.
- A webinar hosted by Prostate Cancer Research on radiotherapy and the management of late effects
- NICE guidelines on vitamin B12 deficiency, which now recognise prior pelvic radiotherapy as a contributing risk factor
- The British Society of Gastroenterology practice guidance on the management of acute and chronic gastrointestinal symptoms and complications as a result of treatment for cancer.

Grants and corporate donors

We are sincerely grateful to the trusts, foundations, and corporate partners who have supported our work this year. Their generosity enables us to continue providing vital resources and services to those affected by PRD.
We would especially like to thank Wype for their continued in-kind support, supplying a key component of our Out and About Toolkit at cost price.

- The Albert Hunt Trust
- The Dawnie Charitable Trust
- The D'Oyly Carte Charitable Trust
- Gledswood Charitable Trust
- The PF Charitable Trust
- William Allen Young Charitable Trust

Regular donations

Thanks to the incredible generosity of our community, regular monthly donations reached an impressive £3,318 this year, with one-off contributions totalling £5,594. These donations form a vital foundation for sustaining our support services and initiatives, helping us continue to make a meaningful difference for people living with PRD.

Worthing Wobble annual challenge

Once again, the wonderful 'Wobblers' took to their bikes for the annual Worthing Wobble, cycling over 100 miles from Hampton Court to Worthing and back. Their continued dedication and energy are a true testament to the power of community fundraising, and we're deeply grateful for their ongoing support. The Wobblers raised over £1200 this year for PRDA.

Individual Fundraising

Our heartfelt thanks go to the individuals who went the extra mile to support our work this year.

One standout effort came from Lesley, who undertook a truly unique and entertaining challenge to raise awareness of PRD and funds for the charity.

Dressed as 'Elvis the Pelvis', Lesley embarked on a 14-hour journey across London, visiting tube, train, and bus stops whose initials spelled out Pelvic Radiation Disease—a creative and heartfelt tribute to the cause. Her dedication and sense of humour helped raise over £2,500, and we are so thankful for her inspiring support.

Individual donations and fundraising remains a vital part of our income, helping to sustain our services and raise awareness of PRD. This year, we were thrilled to receive **£5,326** from personal fundraising efforts, including Gift Aid—support that makes a real and lasting difference to people living with PRD. We are hugely grateful to everyone who has contributed.

Other donation streams

Our Festive Fundraiser brought light and hope to the season, with supporters helping us reach our £500 target. Each donation added a shining star to our virtual Christmas tree, symbolising support and solidarity for people living with Pelvic Radiation Disease. Every contribution—big or small—helped make a meaningful impact

> "Thank you for being there, for caring, and for making a difference. Together, we are stronger. I'm so proud to be part of this amazing community which helps me face each day with hope and resilience"
>
> **- Message left by an anonymous donor on our tree**

This year, we launched our fundraising partnership with the **Kingston Community Lottery**—a fantastic new way for supporters to contribute to PRDA while also getting the chance to win up to £25,000 each week. We hope this initiative offers a fun way to get involved, and that even more people will join in 2025/26 for the chance to win while supporting PRDA.

Give as you Live

Give as you Live is a simple way supporters can help us through their everyday purchases from grocery shopping to holiday bookings. Every purchase made through the platform earns a donation for our charity, making a big difference with no added expense to our supporters.

Legacy gifts and donations in memory

Legacy gifts and donations in memory—such as through funeral collections—are a meaningful way for supporters to leave a lasting impact. These heartfelt contributions help sustain our work and honour the lives of those of people affected by PRD.

Challenge events

We continue to encourage supporters to take part in our challenge events as a great way to get involved and raise vital funds. We've secured ten places for the 2025 London Royal Parks Half Marathon, giving us the exciting opportunity to send a dedicated team of runners to the start line. We're currently recruiting our very first 'Team PRDA'—a group of enthusiastic individuals ready to take on the challenge and run in support of people living with Pelvic Radiation Disease.

Let us know if you're interested in taking part

We'd like to thank everyone who donated, took part in personal challenges, and our Challenge Events, to raise money for the PRDA.

Personal stories offer powerful insight into what it's like to live with Pelvic Radiation Disease. By sharing these experiences, we shine a light on the realities of PRD—both the challenges and the resilience. These voices not only foster greater understanding and compassion but also help others feel seen, supported, and less alone. At PRDA, we're proud to centre lived experience in everything we do.

Laurie's Story

I was diagnosed with cervical cancer in May 2022. Treatment consisted of 5 weeks of chemo, 5 weeks of external beam radiotherapy and then internal radiotherapy (brachytherapy). Unfortunately, my veins aren't that good, so I had to have a PICC line to administer the chemo, but my vein wasn't particularly happy about that either and it caused some pretty hefty blood clots. I had to be hospitalised with a nasty blood clot but, up until that point, I was really active during my cancer treatment with my horse, dog and work.
Fortunately, the treatment did the trick, and my cancer had 'vacated the building', as I say.

Everything seemed to be heading in the right direction but in October, I started to get problems with my stomach. It started with just being uncomfortable eating a few things. Radiotherapy and chemotherapy can affect your bowels and appetite, but I was confused because that had all returned to normal. The pain started to increase when eating, and I think Christmas 2022 was the last time I ate a proper meal. The pain I felt from the Christmas dinner was so excruciating that it made for a pretty miserable Christmas.

> **"I was losing weight, and it was becoming apparent that there was something very wrong every time I ate."**

During October and December 2022, I had multiple A&E trips due to the bowel pain. I contacted my radiotherapy team to ask why this could be happening. I was losing weight, and it was becoming apparent that there was something very wrong every time I ate. All I was told was to take Buscopan and try different types of diet. Buscopan did nothing, and after going vegan for a few weeks with no success, I managed to get a diagnosis from an A&E doctor of 'colitis of the colon' in December 2022. However, at a routine appointment, my consultant told me it wasn't that; it was actually 'radiation enteritis of the small bowel'.

The radiation I received to my cervix had to go through an area of my bowel, and unfortunately, it had damaged a 40cm section of it. I was finally referred to a gastro' consultant and the dietitian team. It all took time to actually see someone, so I took matters into my own hands and researched the condition. I found that only a few foods didn't cause pain and I started to live off mostly water, milk, white bread, plain Greek yoghurt, white meat and smooth peanut butter.

Everything else that I would try was a gamble and sometimes didn't cause pain, but mostly, I would be left doubled over for 24-48 hours in the worst pain you can imagine. I learnt to not eat, really, and went from 9.5 stone pre-treatment to 6.4 stone at my worst.

In May 2023, I insisted I be admitted to hospital. I was worried after a very bad week of pain and stuck in the bedroom that I'd never make it out. Once admitted, I went on to a Fortisip shake and powdered meal with milk diet. My new normal started to look better, and I put on some weight. Working was easier; I couldn't really eat out with my family or friends but that was a compromise to be able to enjoy other activities with them again. I started to ride my horse more often and walk the dog further, but then in August 2023, what I thought was just a bad meal choice turned out to be something that would totally change my life.

In August 2023, out of nowhere, I ended up with a [bowel] blockage, an abscess, and a perforation in my small bowel. The damaged 40cm of my bowel had finally had enough and very much told me so. I had to have an emergency operation to cut the bowel away and give me a stoma bag. During the 6-hour operation, they also found another 20cm of damage bowel further up, which they didn't want to leave in. So then 'Grot bag' was born—haha.

"...I'm constantly reminding myself that although it's challenging living with it, I'm alive and it's enabling me to do the things I love to do."

Having the ileostomy operation and stoma has come with many obstacles for me. Due to the positioning, how thin I was going into the operation (I hadn't eaten for 9 days prior), and generally how unwell I was, all contributed to a bumpy road of this next stage in my journey. I have short bowel syndrome and high output. I can't maintain my own magnesium or hydration levels without medication and supplements, and I struggle a lot with the bag leaking due to the contents always being like liquid. I do get quite anxious if I'm not within easy reach of a toilet; journeys have to be well thought-out shall we say.

'Grot bag' has enabled me to enjoy most foods again, have a foodie social life again and I'm slowly but surely putting weight back on—currently sitting at around 7.8 stone. 2024 has been a challenge of many hospital visits due to dehydration issues and critical magnesium levels, but I'm starting to learn how best to manage all this. I tried a clinical trial, which unfortunately didn't end well and highlighted that my bowel still isn't in a good place to be able to have the stoma reversal operation yet. I'm hopeful that maybe next year this could happen, but if my stoma is here for life then I'm constantly reminding myself that although its challenging living with it, I'm alive and it's enabling me to do the things I love to do. It's just a new kinda normal.

What I've explained may sound scary and put people off having radiotherapy, but the only answer I can give is that without it, I doubt I'd still be here. Complications such as these are rare, but if you feel something isn't right after treatment, keep speaking up!

Our volunteers

Our volunteers bring passion, dedication, and lived experience that are central to everything we do. From fundraising and awareness-raising to direct patient support and shaping our digital and printed resources, they play an active role across all areas of our work.

We are proud to place people living with Pelvic Radiation Disease at the heart of our organisation, ensuring our efforts are shaped by those who truly understand the challenges. By generously sharing their time, skills, and stories, our volunteers offer hope, reduce isolation, and help build a more informed, supportive, and empowered community.

We're committed to building a stronger, more connected community by expanding the ways volunteers can get involved. We're currently looking to welcome a Social Media Volunteer and an Online Community Volunteer to help us engage and support people affected by Pelvic Radiation Disease through our digital platforms and peer support networks.

Patient Advisory Group

Our Patient Advisory Group (PAG) plays a vital role in ensuring the voices and experiences of people living with PRD remain at the heart of everything we do. By sharing their insights and lived experience, PAG members help guide our work, influence our priorities in direct support services, and ensure we stay true to our mission of supporting individuals affected by Pelvic Radiation Disease. This year PAG members helped to shape the development of a new electronic questionnaire (ePAQ) for PRD

Chat Together Group Facilitators

Our Chat Together Group Facilitators — **Donna, Gill, and Trudy** — play a vital role in co-hosting our online peer support meetings via Zoom. Living with PRD themselves, they bring invaluable empathy, insight, and lived experience to each session. We are deeply grateful for their continued dedication to supporting others in the community.

Our Community of Practice

We are proud to be supported by a growing network of professional volunteers who generously share their expertise to improve care for people affected by PRD. Our Medical Advisory Panel provides trusted clinical guidance and supports both our Trustees and operational team with enquiries from frontline healthcare professionals.

With the appointment of our Professional Engagement Coordinator, we are committed to further developing our Community of Practice—a collaborative network of healthcare and research professionals from diverse disciplines and settings. Through shared learning, peer support, and joint initiatives, members are helping to strengthen services and advance PRD research.

Meet our staff team

This year marked an exciting step forward for PRDA with the growth of our staff team, including the addition of a new role focused on professional engagement. Each member of the team brings a unique blend of professional expertise and personal commitment, working together to ensure people affected by PRD receive the support, information, and advocacy they need. From fundraising to awareness, engagement, and service delivery, the team is united by a shared passion for making a meaningful difference.

Fundraising and Operations Manager - Cat

Cat joined PRDA in 2024 and leads on income generation and day-to-day operations. With a background in NHS, local government, and charity management, she brings a strong focus on service development and organisational efficiency.

"It's an exciting time to join the PRDA, I'm looking forward to growing the number of people we support and our reach as we advocate for people living with PRD."

Information and Awareness Co-ordinator - Sarah

Part of the team since 2016, Sarah provides information and raises awareness through talks and outreach. As someone living with PRD, she brings powerful insight and empathy to her role, helping both patients and professionals better understand the condition.

"... I want people living with PRD to know that we truly understand what they're going through and that we are here for them."

Professional Engagement Co-ordinator - Helen

Helen has been part of the team since 2022 and plays a pivotal role in building relationships with healthcare professionals and organisations— promoting best practice in Pelvic Radiation Disease, and ensuring professional engagement remains central to PRDA's mission. With a background in research leadership within the charity sector, Helen brings valuable experience and insight to her role. Her work helps bridge the gap between patients and professionals, raising awareness, encouraging collaboration, and supporting improved care.

"I want to make a difference by supporting healthcare professionals to come together and work collaboratively towards improving the lives of people living with PRD."

Services and Volunteer Co-ordinator - Maria

Maria joined PRDA in 2025 with a strong background in social care and volunteer management. She's passionate about person-centred services and is committed to creating inclusive spaces where volunteers and service users feel supported and empowered.

"I'm looking forward to supporting the wonderful work we do and helping to grow the number of people we can assist.

Meet the Trustees

PRDA is guided by a committed and diverse Board of Trustees whose professional expertise and lived experience help shape our strategy, governance, and services. With backgrounds in healthcare, science, and public service, they share a united goal: to raise awareness and improve the lives of those affected by Pelvic Radiation Disease.

David Jillings

Hon. Treasurer and Acting Chair of Trustees

A retired civil servant with a background in IT and digital media, David brings both strategic insight and lived experience of PRD following treatment for rectal cancer.

John Buckle

With a PhD in Physiology and extensive experience in the pharmaceutical industry, John supports PRDA with strategic thinking and business development expertise. He joined the board in 2024 following his own experience with PRD.

Jane Hall

A Therapeutic Radiographer with a background in clinical care and service development, Jane brings frontline insight to the board. She is currently Leading the Pelvic Late Effects Service in Lincolnshire.

Faye Popham

A senior HR leader in the charity sector, Faye brings expertise in safeguarding and organisational development. Her personal connection to PRD through her mother drives her advocacy work.

Lisa Punt

Lisa is a Consultant Radiographer and Centre Head at Maggie’s, Cambridge. Her clinical and research background in pelvic radiotherapy consequences is a vital asset to PRDA’s work.

Steve Simmonds

With experience in healthcare communications and consultancy, Steve offers strategic marketing and engagement expertise. He joined the board in 2024 to help raise PRDA’s profile.

Lesley Smith

Senior Programme Manager at NHS England, Lesley has worked extensively on the consequences of pelvic cancer treatments. Her NHS and Macmillan experience enrich PRDA’s professional engagement focus.

Updating the Pelvic Radiation Disease Best Practice Pathway

We are preparing for the next revision of the Pelvic Radiation Disease Best Practice Pathway. This update will be informed by insights from the recent evaluation of the Multinational Association of Supportive Care in Cancer (MASCC) survey, as well as the latest British Society of Gastroenterology (BSG) guidance on managing gastrointestinal symptoms after cancer treatment. Our aim is to ensure the pathway remains evidence-based and continues to provide a guide to high-quality, multi-disciplinary, person-centred pathways of care.

Annual Professional Networking Event

In July 2025, we will bring together members of the Community of Practice for our annual professional networking event. The day will provide a unique platform to learn from individuals with lived experience of Pelvic Radiation Disease (PRD), hear insights from leading specialists, review recent research developments, and share ideas and best practice in an open, collaborative setting.

Embedding PRD in Clinical Language - the PRD Pledge

In 2025, we are launching the PRD Pledge — a campaign encouraging healthcare professionals to use the term Pelvic Radiation Disease in clinical discussions and written correspondence. By adopting consistent terminology, we aim to improve awareness and understanding of PRD across both primary and secondary care, as well as among patients themselves.

The campaign supports a key recommendation from our Best Practice Pathway: that the term Pelvic Radiation Disease should be included alongside any organ-specific diagnoses in medical records and clinic letters. This recognises that PRD often affects multiple organs and tissues, as well as mental health, and promotes a multi-professional, holistic approach to long-term care.

We plan to promote the PRD Pledge at relevant events and across digital platforms to help embed this practice widely within clinical settings.

Helping People Understand and Manage PRD

In response to feedback from service users and our Patient Advisory Group, we are developing a new Understanding PRD service. Designed to combine education, peer support, and insights from both clinical experts and people with lived experience, this resource will help individuals build a deeper awareness of PRD and its potential impacts.

Once launched, it will act as a central access point for trusted information, helping users to recognise, interpret, and respond to new or evolving symptoms throughout their lives.

Promoting Awareness Through Professional Forums

To maximise our impact and extend the reach of our work, we will continue to attend key healthcare conferences, including the annual meetings of the British Society of Gastroenterology, the Society of Radiographers, and the International Multidisciplinary Anal Cancer Conference.

These events offer vital opportunities to raise awareness of Pelvic Radiation Disease (PRD) among healthcare professionals, share best practice, and ensure that the patient voice is represented

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.

Gastrointestinal
Urinary
Lymphoedema
Skin
Vascular
Bone
Sexual difficulties – Female
Sexual difficulties – Male
Chronic Pelvic Pain
Lumbar Plexopathy
Endocrine
Mental Health and Wellbeing

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

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

#PelvicRadiationDisease #PRDPledge

September 2025

REGISTERED COMPANY NUMBER: 07998409 (England and Wales)
REGISTERED CHARITY NUMBER: 1147802

Report of the Trustees and

Unaudited Financial Statements for the Year Ended 31 March 2025

for

PELVIC RADIATION DISEASE ASSOCIATION

Ark Accountancy Limited
Chartered Certified Accountant
56-58 High Street
Ewell
Epsom
Surrey
KT17 1RW

PELVIC RADIATION DISEASE ASSOCIATION

Contents of the Financial Statements for the Year Ended 31 March 2025

Page

PELVIC RADIATION DISEASE ASSOCIATION

Report of the Trustees
for the Year Ended 31 March 2025

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 2025. 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 sixteen 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 and our much-valued members of staff, 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

The charity has continued to make a significant impact both among healthcare professionals and by helping people affected by PRD. Although income was not as strong as we would have hoped we go forward into the new financial year with stronger fundraising resources and adequate reserves. The trustees see no reason why the charity should not continue to increase its outreach and service provision in line with recent years' growth.

The gross income of the charity for the year ended 31 March 2025 amounted to £34,311 (2023/24: £61,627) whereas costs for charitable activities were £51,823 (2023/24: £54,879), of which Governance costs were £2,229 (2023/24: £1,808). The net deficit for the year was £17,512 (2023/24: surplus £6,748).

The overall net assets of the company have decreased from £53,823 to £43,059.

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.

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 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.

STRUCTURE, GOVERNANCE AND MANAGEMENT

Recruitment and appointment of new trustees

All trustees of the charity are also Directors of the charitable company, and vice versa. 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).

During the year two trustees resigned, John Webber and Ben Sacks. The board is extremely grateful for the valuable contributions made by John and Ben.

Two new trustees were welcomed to the board – John Buckle and Steve Simmonds.

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

John W Buckle	(appointed 7.6.24)
E Jane Hall	
David E Jillings	(acting Chair from 22.5.24)
Faye Popham	
Lisa A Punt	
Benjamin D Sacks	(resigned 4.3.25)
Bhumi K Shah	
Steven J Simmonds	(appointed 15.10.24)
Lesley M Smith	
John A Webber - Chair	(resigned 22.5.24)

Company Secretary

D E Jillings

REFERENCE AND ADMINISTRATIVE DETAILS

Independent Examiner

Mary E Ryan
Ark Accountancy Limited
Chartered Certified Accountant
56-58 High Street
Ewell
Epsom
Surrey
KT17 1RW

Approved by order of the board of trustees on 19 August 2025 and signed on its behalf by:

David Jillings

....
D E Jillings - Trustee

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 2025.

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.

Mary E Ryan

Mary E Ryan

Ark Accountancy Limited
Chartered Certified Accountant
56-58 High Street
Ewell
Epsom
Surrey
KT17 1RW

Date: 2/9/2025

Statement of Financial Activities
for the Year Ended 31 March 2025

	Notes	Unrestricted fund £	Restricted fund £	31.3.25 Total funds £	31.3.24 Total funds £
INCOME AND ENDOWMENTS FROM					
Donations and legacies		11,133	-	11,133	10,459
Charitable activities					
Dawnie Trust		2,000	-	2,000	-
P F Trust		4,000	-	4,000	4,000
Albert Hunt Trust		5,000	-	5,000	3,000
National Lottery Community Fund		-	-	-	(3,057)
Aspire Pharma		-	-	-	20,000
The D'Oyly Carte Charitable Trust		5,000	-	5,000	4,000
William Allen Young Charitable Trust		2,000	-	2,000	-
The Foyle Foundation		-	-	-	10,000
The Will CharitableTrust		-	-	-	8,000
Douglas Arter Foundation		-	-	-	500
Gledswood CharitableTrust		1,000	-	1,000	-
Other trading activities	2	4,178	-	4,178	4,725
Total		34,311	-	34,311	61,627
EXPENDITURE ON					
Charitable activities					
Charitable activities		51,823	-	51,823	54,879
NET INCOME/(EXPENDITURE)		(17,512)	-	(17,512)	6,748
RECONCILIATION OF FUNDS					
Total funds brought forward		60,571	-	60,571	53,823
TOTAL FUNDS CARRIED FORWARD		43,059	-	43,059	60,571

Balance Sheet
31 March 2025

	Notes	Unrestricted fund £	Restricted fund £	31.3.25 Total funds £	31.3.24 Total funds £
CURRENT ASSETS					
Stocks	7	105	-	105	105
Debtors	8	200	-	200	200
Cash at bank		50,986	-	50,986	66,181
		51,291	-	51,291	66,486
CREDITORS					
Amounts falling due within one year	9	(8,232)	-	(8,232)	(5,915)
NET CURRENT ASSETS		43,059	-	43,059	60,571
TOTAL ASSETS LESS CURRENT LIABILITIES		43,059	-	43,059	60,571
NET ASSETS		43,059	-	43,059	60,571
FUNDS	10				
Unrestricted funds				43,059	60,571
TOTAL FUNDS				43,059	60,571

The charitable company is entitled to exemption from audit under Section 477 of the Companies Act 2006 for the year ended 31 March 2025.

The members have not required the company to obtain an audit of its financial statements for the year ended 31 March 2025 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.

continued...

Balance Sheet - continued
31 March 2025

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 19 August 2025 and were signed on its behalf by:

David Jillings

....
D E Jillings - Trustee

Lesley Smith

....
L M Smith - Trustee

The notes form part of these financial statements

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

Stocks
Stocks are valued at the lower of cost and net realisable value, after making due allowance for obsolete and slow moving items.

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.

continued...

2. OTHER TRADING ACTIVITIES

	31.3.25	31.3.24
	£	£
Fundraising events	4,178	4,725

3. TRUSTEES' REMUNERATION AND BENEFITS

There were no trustees' remuneration or other benefits for the year ended 31 March 2025 nor for the year ended 31 March 2024.

Trustees' expenses

Trustees' expenses of £1,449 were paid to 4 trustees in their role as trustees for the year (2024 £1,028 to 6 trustees)

4. STAFF COSTS

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

	31.3.25	31.3.24
Administrators	3	3

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	10,459	-	10,459
Charitable activities			
P F Trust	4,000	-	4,000
Albert Hunt Trust	-	3,000	3,000
National Lottery Community Fund	-	(3,057)	(3,057)
Aspire Pharma	20,000	-	20,000
The D'Oyly Carte Charitable Trust	-	4,000	4,000
The Foyle Foundation	10,000	-	10,000
The Will CharitableTrust	8,000	-	8,000
Douglas Arter Foundation	500	-	500
Other trading activities	4,725	-	4,725
Total	57,684	3,943	61,627
EXPENDITURE ON			
Charitable activities			
Charitable activities	50,630	4,249	54,879
NET INCOME/(EXPENDITURE)	7,054	(306)	6,748
Transfers between funds	9,966	(9,966)	-
Net movement in funds	17,020	(10,272)	6,748

continued...

5. COMPARATIVES FOR THE STATEMENT OF FINANCIAL ACTIVITIES - continued

	Unrestricted fund £	Restricted fund £	Total funds £
RECONCILIATION OF FUNDS			
Total funds brought forward	43,551	10,272	53,823
TOTAL FUNDS CARRIED FORWARD	60,571	-	60,571

6. TANGIBLE FIXED ASSETS

	Website £
COST	
At 1 April 2024 and 31 March 2025	12,792
DEPRECIATION	
At 1 April 2024 and 31 March 2025	12,792
NET BOOK VALUE	
At 31 March 2025	-
At 31 March 2024	-

7. STOCKS

	31.3.25 £	31.3.24 £
Stocks	105	105

8. DEBTORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	31.3.25 £	31.3.24 £
Tax	200	200

9. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	31.3.25 £	31.3.24 £
Social security and other taxes	1,277	744
Other creditors	6,175	4,391
Accrued expenses	780	780
	8,232	5,915

continued...

10. MOVEMENT IN FUNDS

	At 1.4.24 £	Net movement in funds £	At 31.3.25 £
Unrestricted funds			
General fund	60,571	(17,512)	43,059
TOTAL FUNDS	60,571	(17,512)	43,059

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

	Incoming resources £	Resources expended £	Movement in funds £
Unrestricted funds			
General fund	34,311	(51,823)	(17,512)
TOTAL FUNDS	34,311	(51,823)	(17,512)

Comparatives for movement in funds

	At 1.4.23 £	Net movement in funds £	Transfers between funds £	At 31.3.24 £
Unrestricted funds				
General fund	43,551	7,054	9,966	60,571
Restricted funds				
Restricted funds	10,272	(306)	(9,966)	-
TOTAL FUNDS	53,823	6,748	-	60,571

Comparative net movement in funds, included in the above are as follows:

	Incoming resources £	Resources expended £	Movement in funds £
Unrestricted funds			
General fund	57,684	(50,630)	7,054
Restricted funds			
Restricted funds	3,943	(4,249)	(306)
TOTAL FUNDS	61,627	(54,879)	6,748

continued...

11. RELATED PARTY DISCLOSURES

There were no related party transactions for the year ended 31 March 2025.

PELVIC RADIATION DISEASE ASSOCIATION

Detailed Statement of Financial Activities
for the Year Ended 31 March 2025

	31.3.25 £	31.3.24 £
INCOME AND ENDOWMENTS		
Donations and legacies		
Donations	8,979	4,272
Gift aid	2,154	1,187
Donated services and facilities	-	5,000
	11,133	10,459
Other trading activities		
Fundraising events	4,178	4,725
Charitable activities		
Grants	19,000	46,443
Total incoming resources	34,311	61,627
EXPENDITURE		
Charitable activities		
Wages	34,219	32,322
Pensions	514	441
Insurance	589	512
Telephone	134	593
Postage & stationery	1,581	1,579
Leaflets and posters	520	130
Sundries	2,665	787
Travel	388	1,016
Subscriptions & registrations	81	297
Room hire & catering	-	2,760
Payroll & HR	443	472
IT & website	2,686	2,094
Consultancy	-	829
Training	398	-
Conferences	700	-
Out & About Toolkits	4,676	4,239
Gifts in kind	-	5,000
	49,594	53,071
Support costs		
Governance costs		
Accountancy fees	780	780
Trustees expenses	1,449	1,028
	2,229	1,808
Total resources expended	51,823	54,879
Net (expenditure)/income	(17,512)	6,748