

NET PATIENT FOUNDATION
ANNUAL REPORT AND UNAUDITED FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 SEPTEMBER 2018

NET PATIENT FOUNDATION

LEGAL AND ADMINISTRATIVE INFORMATION

Trustees Mr P Gwilliam (Chairman)
Mr D Jones
Mrs M Phillips
Mrs R Littlejohn
Dr R Srirajaskanthan
Mrs I Wotherspoon

Charity number 1092386

Principal address Second Floor
Holly House
74 Upper Holly Walk
Leamington Spa
Warwickshire
CV32 4JL

Independent examiner Chapman Worth Limited
6 Newbury Street
Wantage
Oxfordshire
OX12 8BS

Bankers Lloyds Bank
Butler Place Branch
PO Box 100
BX1 1LT

CONTENTS

	Page
Trustees' report	1 - 8
Independent examiner's report	9
Statement of financial activities	10
Statement of financial position	11
Notes to the financial statements	12 - 21

NET PATIENT FOUNDATION

TRUSTEES' REPORT

FOR THE YEAR ENDED 30 SEPTEMBER 2018

The Trustees have pleasure in presenting the Trustees' Report and Accounts of the NET Patient Foundation for the year ended 30 September 2018. The Trustees are satisfied with the performance and progress of the charity during the year.

The accounts have been prepared in accordance with the accounting policies set out in note 1 to the accounts and comply with the charity's constitutional document, the Charities Act 2011 and "Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102)" (as amended for accounting periods commencing from 1 January 2016)

Objectives and activities

The constitutional Objects of the charity are set out later in this report.

Our Vision is of a world in which people know how to recognize, diagnose, treat, care for and ultimately cure patients with neuroendocrine cancer.

Our Mission is to support and inform patients and families from diagnosis enabling access to the best care and treatment whilst stimulating neuroendocrine research, increasing national awareness and influencing improvements in outcomes.

The Values we believe in are (i) equality of care for all NET patients in the UK (ii) excellence in support, care, treatment and research (iii) fair allocation of national resources and inclusion in national policies and strategies for all cancer types (iv) collaborative working and building an accessible approachable fraternity and (v) honesty, transparency and integrity to promote confidence and trust in the charity.

NET PATIENT FOUNDATION

TRUSTEES' REPORT (CONTINUED)

FOR THE YEAR ENDED 30 SEPTEMBER 2018

Terminology, purpose and need

The umbrella name for neuroendocrine cancers was changed by the World Health Organisation in 2017 to neuroendocrine neoplasms (NENs), incorporating neuroendocrine tumours and neuroendocrine carcinomas. NENs are a group of unusual and unpredictable tumours which develop from cells in the diffuse endocrine system. NENs can affect people of any age and can be benign (non-cancerous) or malignant (cancerous). The NET Patient Foundation supports patients with malignant NENs (neuroendocrine cancer) which are found most commonly in the lung or gastrointestinal system. Every year about 5,000 people are diagnosed with NENs in the UK with around 40,000 living with the disease. Incidence has increased from 4.6 per 100,000 to 8.7 per 100,000 recorded in 2016.

It is undoubtable that receiving a cancer diagnosis is traumatic and patients are often left in a state of shock, confusion, sadness and anxiety. For NEN patients specifically the prospect of a cure is often nil and remission unlikely. Unlike other cancers, even if there are no other signs of visible disease after treatment, there will be a point when the cancer returns.

As patients frequently wait too long for their diagnosis they can often be treated for the wrong disease meaning their cancer pathway begins with feelings of extreme frustration. At all stages of their treatment NEN patients are also less likely to receive written information about their cancer and its side effects. This is highlighted by the 2014 National Cancer Patient Survey which found that only half of neuroendocrine cancer patients were given written information about all of their tests compared with 91% of cancer patients in general.

After treatment patients have to address the gravity of their diagnosis at home and often without regular access to the support of doctors and nurses. Therefore patients frequently suffer from feelings of abandonment and struggle to know in whom to confide. Indeed, if their cancer is particularly advanced, they face the possibility of dying. From our experience the complexity of NENs means that patients friends and family often struggle to comprehend their suffering.

People with a less common cancer like NENs are disadvantaged at every step of their cancer journey. From the speed of diagnosis through to treatment and research, people with rare cancers often receive a second-class service. It is time for a more consistent approach by ensuring that people are treated equally, that they get the specialist treatment they need and that they are properly supported to live their lives as fully as possible. Policy makers, health professionals and commissioners need to acknowledge the differences in patient experience and to take positive and meaningful steps to address them.

NET PATIENT FOUNDATION

TRUSTEES' REPORT (CONTINUED)

FOR THE YEAR ENDED 30 SEPTEMBER 2018

Achievements and performance

NPF services provided are based around five pillars of activity – Support, Education, Awareness, Advocacy and Research

Support

There are two patient support specialist nurses, the medical Advisory Board and two psychologists who provide patient support. In addition our NET Natter programme provides community support in many areas of the UK with more than 150 patient support meetings held during the year.

A new mobile App was developed during the year for launch in 2019. This will be 'life-useful' and aims to simplify day to day administrative management, providing a resource for information about the disease, details of the NET care team and medications, capture quality of life scores and house a repository of useful information. This App has been developed with our medical partners from UKINETS.

We developed a new service for patients diagnosed with Merkel Cell Carcinoma (a skin NET). As part of this service we developed a user survey to understand unmet needs and new patient information We were also invited to sit on the MCC NCRI group.

We also developed a report in conjunction with our psychotherapy service which looked at a years worth of data from patients requiring extra support. This report is the basis for a new project called "Mind the Gap". The reality of cancer long term can be an anxiety-ridden place and we have to help patients carry not only the physical but also the psychological burden of the disease.

Two new online support groups were set up during the year. NET Natter Online for patients who do not want to attend a face to face meeting group or wish for extra support online from home and Next2NETs which is for supporters of patients looking for a safe space to get support from others in a similar situation.

A collaboration with Maggie's was agreed this year. We proposed that each Maggie's Centre hosted a NET Natter group with one of our NET Natter coordinators on a monthly/quarterly basis with co-facilitation of the group as and when required. The NPF would provide disease specific information for both patients and staff to all Maggie's Centres and educational input for Maggie's staff as required. We have a clear aim for this collaboration based on the provision of robust, informed, responsive, community-based lifelong support for those affected by neuroendocrine cancer at the point and time of need, giving the opportunity to meet with others in similar circumstances in a relaxed domestic atmosphere. Maggie's also have additional services that we feel can be hugely beneficial to our patients and their loved ones. Maggie's were very receptive to our proposal.

A day out was arranged for our volunteer NET Natter facilitators. This day was planned to provide support for each other, a chance to talk about frustrations and plans for future meetings, to provide updated information and tools and to give some training on how to cope with difficult situations.

NET PATIENT FOUNDATION

TRUSTEES' REPORT (CONTINUED)

FOR THE YEAR ENDED 30 SEPTEMBER 2018

Education

2018 saw the development of our hospital pack for new patients. This is a free of charge pack for all NHS services seeing NEN patients. We also produced our new information booklet for Merkel Cell Carcinoma patients which has been distributed widely across the UK.

We ran three patient education events across the UK in conjunction with the local NET Specialist Centres at Kings College Hospital, in Northern Ireland and in Oxford.

We ran our first awareness session for junior GP's. This gave us an amazing opportunity to not only raise awareness of neuroendocrine cancers with the next generation of primary care physicians, but also to gain a better understanding of their perspective and informational needs. Further such educational sessions are booked for 2019.

Our nurses have been leading an initiative to produce a competency framework for nurses caring for patients with NENs. We feel that this is an urgent piece of work and hope to have it completed by the summer of 2019. We have received great support from our community to achieve this.

We have spoken at a wide variety of meetings during the year sharing our knowledge and desire for change to improve outcomes for patients.

NET PATIENT FOUNDATION

TRUSTEES' REPORT (CONTINUED)

FOR THE YEAR ENDED 30 SEPTEMBER 2018

Awareness

NENs are an unusual cancer and little is known about them by the general public. They are more complex than many other cancers and it is difficult to explain them succinctly. Raising awareness about NENs can therefore be very challenging even though year on year the number of people diagnosed is increasing.

Much of our current awareness raising is done by word of mouth through NET Natter groups, NET Cancer Day events, conference attendance, social media, policy reports and fundraising events.

We purchased a new social media platform called Miappi to enhance our social media presence and to ensure that our various campaigns have a dedicated space.

We started five new campaigns during 2018:

- (i) Walk for NETs to raise awareness and for fundraising purposes.
- (ii) Faces of NETs to raise awareness and share experiences of living with a NET on a visual platform.
- (iii) MIND the Gap supporting not only the physical but also the psychological needs of our community - 'cancer but not as you know it'.
- (iv) Coffee Mornings – part of NET Cancer Day global activities raising awareness and for fundraising purposes.
- (v) Neuroendocrinologists of the Future - educating doctors of the future about NENs.

We also worked with colleagues across the globe for NET Cancer Day. World NET Cancer Day is an annual event held on 10 November, created to increase awareness of neuroendocrine cancers and to provide a voice to the NET community for improved diagnostics, treatments, information, care and research. World NET Cancer Day is about drawing attention to this uncommon form of cancer and starting a global conversation amongst communities, medical professionals and governments - #LetsTalkAboutNets'. On November 10 INCA members from around the globe partner with local cafes and communities to promote 'Let's Talk About NET's' branded cups to increase community awareness about this often misdiagnosed form of cancer.

Work has begun to try to make sense of the terminology we should use now to avoid confusion but also to make the right impact in awareness campaigns.

NET PATIENT FOUNDATION

TRUSTEES' REPORT (CONTINUED)

FOR THE YEAR ENDED 30 SEPTEMBER 2018

Advocacy

We strive to be an evidence-based advocacy group, collecting real-life data from the NEN community to drive change in both commissioning for NEN treatments and clinical practice. Our advocacy role is aimed at having true impact within a community unaware of the needs of NEN patients. By sharing our knowledge and patient experience we can collaboratively create positive change. We want to enhance awareness and self-confidence within the NEN patient community so it can ask relevant questions and make informed choices. It is vital that the patient voice helps facilitate best practice, provides input into drug research and development and also that there is a safe platform for sharing experiences and supporting other patients.

We have had some success with NICE, SMC and WMSG in 2018 with the approval of Luthathera and Telotristat (SMC and WMSG only). We are still in conversation with NICE re Telotristat for England. Our patient community has been amazing in providing their stories and opinions, all of which have been shared with our commissioning bodies in the UK.

We worked with local councilors in Hackney as part of a mission to try to effect change at a local level, grass roots politics, with the hope that this would then pass up the political chain. We have a really strong champion in one of the councilors and, alongside fundraising activities and social media activity, Hackney Council has unanimously resolved to work with local GPs and local NHS Trusts to do more to tackle neuroendocrine neoplasms and other rare cancers.

The NPF continues to sit on the Executive Boards of the UK and Ireland Neuroendocrine Tumour Society, the International Neuroendocrine Cancer Alliance, the European Neuroendocrine Tumour Society Nurse Group, the NCRI Group for MCC, the NET Clinical Study Group (part of NCRI) and have two patient representatives who work with NICE and sit on the NET Clinical Study Group.

Research

There is a clear need for research support for neuroendocrine cancer since it is a relatively rare cancer. We will be developing a clear research plan over the next year to help guide the focus of research that we would like to support. We have joined with AMEND to work on this plan. The basis of this research plan will be the patient viewpoint, and a survey will be disseminated. We also need to understand the opinions of the healthcare community regarding research priorities so the same survey will be sent to UKINETs. We will then write a report based on survey results and our visits to research departments all over the UK with our recommendations.

NET PATIENT FOUNDATION

TRUSTEES' REPORT (CONTINUED)

FOR THE YEAR ENDED 30 SEPTEMBER 2018

Note from the CEO Cathy Bouvier

There are multiple components to running a patient organization. We are a 'small but vital charity' doing a wide range of activities, ensuring that the message we are shouting gets heard across many platforms, with the ultimate goal of working in a truly collaborative way, with compassion, and providing the best care for all affected by Neuroendocrine Neoplasms (NENs).

One of our key outcomes is to ensure that all the cogs in the NEN pathway are listening to the patient's perspective and focusing conversations on Quality of Life: how we can all best help patients manage and live with their illness. We have undertaken work this year looking at the overriding emotions of a NEN diagnosis and have seen clearly that Quality of Life is a personal perception that differs between people even with the same clinical condition. We need to feed this work time and time again into the inboxes of those treating NEN patients. Advocacy organisations have an essential role to play, working in partnership with the medical community to identify issues and improve diagnosis, care and research. The quality of communication between the patient and the medical team has an enormous impact on the quality of care. Understanding each other's perspective is the key.

We couldn't progress our work without the support of our volunteers, our dedicated trustees, our Patron Professor Martyn Caplin, our Advisory Board, our fundraisers and sponsors. A heartfelt thanks to all of them and we hope to keep developing strong relationships with the key stakeholders in NENs, keep pushing an agenda for change and improving our organization to meet the needs of our community.

Note from the Chair Peter Gwilliam

On behalf of the trustees I confirm our delight in the growth of the NPF and the strengths of our team and all they are achieving. This is all under the direction of the co-founder and Chief Executive Cathy Bouvier who gives so much in her role across the 5 pillars of NPF activity. Our thanks to you all and to the specialists, consultants and other helpers who give their time. We are of course totally dependent on grants and charitable donations and are so grateful to all our supporters.

This is also an opportunity to thank my fellow trustees for all their hard work in focusing on our vision, mission and values. The positive feedback received confirms that the NPF is making a big difference to so many lives. This report informs that we are certainly 'punching above our weight' and we will all continue to strive to achieve so much more.

Financial review

The charity is totally reliant on the generous grants and charitable donations received from its supporters. The charity reported a deficit of £12,740 for the year (2017 £41,977 surplus).

Income raised during the year enabled the charity to meet its objectives. Expenditure on charitable activities during the year (see note 7) was within the planned financial framework agreed by the trustees.

At the reporting date the charity held funds of £458,956 (2017 £471,696) and the trustees are satisfied that this level of funds will support the planned activities of the charity for the next 12 months. This level of reserves is in line with the reserves policy of the charity and ensures that it can prepare these accounts on a going concern basis with sufficient contingency if the level of grants and donations should fall during a period of increased economic uncertainty.

NET PATIENT FOUNDATION

TRUSTEES' REPORT (CONTINUED)

FOR THE YEAR ENDED 30 SEPTEMBER 2018

Structure, governance and management

The NET Patient Foundation was established on 21 February 2001. Its governing document is a Constitution which was adopted on that date and has been amended on a number of occasions subsequently. On 25 June 2013 the name of the charity was shortened to NET Patient Foundation removing the words "incorporating Living with Carcinoid". The Objects of the charity were amended on 5 December 2013 to more simply reflect its principal aims as follows:

(i) To advance the education of the general public (including relevant medical and scientific communities) in all areas relating to NETs.

(ii) To promote the physical and mental health of those affected by NETs through the provision of support, advice and education to patients, their carers and family members.

The Board of Trustees is responsible for the overall management and control of the charity and for the appointment of new trustees.

The trustees have a range of skills and experience and they meet regularly with the CEO of the charity to develop strategy, discuss and agree objectives and subsequently to establish whether the strategy has been implemented and the objectives have been achieved.

The charity enlists the support of volunteers for various projects such as patient input into NCRI neuroendocrine sub-group meetings, national NPF projects and awareness raising activities such as NET Cancer Day. It also uses a bank of consultants for PR and media support, and psychotherapy services for patients and family members.

In addition the NPF is supported by an expert Advisory Board which is an inter-disciplinary group of specialists (doctors, nurses and allied health care professionals including dieticians and counsellors) who all have a wealth of experience working with neuroendocrine cancer. This Board was established to provide expert advice, to promote and ensure effective, accessible, equitable and evidence-based health care and to provide information on current and future developments in neuroendocrine cancer care. The areas of clinical competence and expertise provided by members of this Board include primary, hospital and community care, pharmaceuticals, dietetics, research and development, health promotion and health education. Board members are based primarily but not exclusively in the fields of gastroenterology, surgery, endocrinology, radiology, nuclear medicine and oncology.

The trustees confirm that they have followed the Charity Commission's general guidelines on public benefit in undertaking their activities. All trustees are aware of the Charity Commission Public Benefit Guidance (September 2013).

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

Mr P Gwilliam (Chairman)

Mr D Jones

Mrs M Phillips

Mrs R Littlejohn

Dr R Srirajaskanthan

Mrs I Wotherspoon

The Board of Trustees is responsible for the overall management and control of the charity and for the appointment of new Trustees.

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

.....
Mr P Gwilliam (Chairman)

Trustee

Dated:

NET PATIENT FOUNDATION

INDEPENDENT EXAMINER'S REPORT

TO THE TRUSTEES OF NET PATIENT FOUNDATION

I report to the Trustees on my examination of the financial statements of NET Patient Foundation (the charity) for the year ended 30 September 2018.

Responsibilities and basis of report

As the Trustees of the charity you are responsible for the preparation of the financial statements in accordance with the requirements of the Charities Act 2011 (the 2011 Act).

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

Independent examiner's statement

Since the charity's gross income exceeded £250,000 your examiner must be a member of a body listed in section 145 of the 2011 Act. I confirm that I am qualified to undertake the examination because I am a member of ICAEW, which is one of the listed bodies.

Your attention is drawn to the fact that the charity has prepared financial statements in accordance with Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) in preference to the Accounting and Reporting by Charities: Statement of Recommended Practice issued on 1 April 2005 which is referred to in the extant regulations but has now been withdrawn.

I understand that this has been done in order for financial statements to provide a true and fair view in accordance with Generally Accepted Accounting Practice effective for reporting periods beginning on or after 1 January 2015.

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

- 1 accounting records were not kept in respect of the charity as required by section 130 of the 2011 Act; or
- 2 the financial statements do not accord with those records; or
- 3 the financial statements do not comply with the applicable requirements concerning the form and content of accounts set out in the Charities (Accounts and Reports) Regulations 2008 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.

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

Anna Chapman FCA

Chapman Worth Limited
6 Newbury Street
Wantage
Oxfordshire
OX12 8BS

Dated:

NET PATIENT FOUNDATION**STATEMENT OF FINANCIAL ACTIVITIES
INCLUDING INCOME AND EXPENDITURE ACCOUNT****FOR THE YEAR ENDED 30 SEPTEMBER 2018**

	Notes	Unrestricted funds 2018 £	Restricted funds 2018 £	Total 2018 £	Total 2017 £
<u>Income from:</u>					
Donations and legacies	3	243,794	-	243,794	331,390
Grants	4	71,383	50,000	121,383	105,306
Investments	5	46	-	46	54
Total income		<u>315,223</u>	<u>50,000</u>	<u>365,223</u>	<u>436,750</u>
<u>Expenditure on:</u>					
Raising funds	6	6,218	-	6,218	5,697
Charitable activities	7	313,588	58,157	371,745	389,076
Total resources expended		<u>319,806</u>	<u>58,157</u>	<u>377,963</u>	<u>394,773</u>
Net (expenditure)/income for the year/ Net movement in funds		(4,583)	(8,157)	(12,740)	41,977
Fund balances at 1 October 2017		<u>390,696</u>	<u>81,000</u>	<u>471,696</u>	<u>429,719</u>
Fund balances at 30 September 2018		<u><u>386,113</u></u>	<u><u>72,843</u></u>	<u><u>458,956</u></u>	<u><u>471,696</u></u>

The statement of financial activities includes all gains and losses recognised in the year.

All income and expenditure derive from continuing activities.

NET PATIENT FOUNDATION**STATEMENT OF FINANCIAL POSITION****AS AT 30 SEPTEMBER 2018**

	Notes	2018 £	£	2017 £	£
Current assets					
Debtors	14	-		3,461	
Cash at bank and in hand		461,817		483,599	
		<u>461,817</u>		<u>487,060</u>	
Creditors: amounts falling due within one year	15	(2,861)		(15,364)	
Net current assets			<u>458,956</u>		<u>471,696</u>
Income funds					
Restricted funds	17		72,843		81,000
Unrestricted funds			386,113		390,696
			<u>458,956</u>		<u>471,696</u>

The financial statements were approved by the Trustees on

.....
 Mr P Gwilliam (Chairman)
Trustee

NET PATIENT FOUNDATION

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 30 SEPTEMBER 2018

1 Accounting policies

Charity information

NET Patient Foundation is a unincorporated charity in England and Wales (charity number: 1092386) providing support and information to people affected by neuroendocrine cancers. The charity's address is: Second floor, Holly House, 74 Upper Holly Walk, Leamington Spa, Warwickshire, CV32 4JL.

1.1 Accounting convention

The accounts have been prepared in accordance with the charity's constitution, the Charities Act 2011 and "Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102)" (as amended for accounting periods commencing from 1 January 2016). The charity is a Public Benefit Entity as defined by FRS 102.

The charity has taken advantage of the provisions in the SORP for charities applying FRS 102 Update Bulletin 1 not to prepare a Statement of Cash Flows.

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

The accounts are prepared in sterling, which is the functional currency of the charity. Monetary amounts in these financial statements are rounded to the nearest £1.

The financial statements have been prepared under the historical cost convention, modified to include the revaluation of freehold properties and to include investment properties and certain financial instruments at fair value. The principal accounting policies adopted are set out below.

1.2 Going concern

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

1.3 Charitable funds

Unrestricted funds are available for use at the discretion of the Trustees in furtherance of their charitable objectives unless the funds have been designated for other purposes.

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

1.4 Incoming resources

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

Cash donations are recognised on receipt. Other donations are recognised once the charity has been notified of the donation (such as legacies), unless performance conditions require deferral of the amount. Income tax recoverable in relation to donations received under Gift Aid or deeds of covenant is recognised at the time of the donation on a receivable basis.

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

NET PATIENT FOUNDATION

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

FOR THE YEAR ENDED 30 SEPTEMBER 2018

1 Accounting policies

(Continued)

Turnover is measured at the fair value of the consideration received or receivable and represents amounts receivable for goods and services provided in the normal course of business, net of discounts, VAT and other sales related taxes.

1.5 Resources expended

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 settlement will be required and the amount of the obligation can be measured reliably.

All expenditure is accounted for on an accruals basis. All expenses including support costs and governance costs are allocated or apportioned to the applicable expenditure headings.

Provisions for grants are made when the intention to make a grant has been communicated to the recipient but there is uncertainty as to the timing of the grant or the amount of grant payable.

Costs of raising funds

The costs of generating funds consist of investment management costs and certain legal fees.

Costs of charitable activities include grants made, governance costs and an apportionment of support costs and are shown in note 8.

Governance costs and support costs relating to charitable activities have been apportioned based on the number of individual grant awards made in recognition that the administrative costs of awarding, monitoring and assessing research grants, salary support grants are broadly equivalent. The allocation of support and governance costs is analysed in note 9.

Support costs have been allocated between governance costs and other support costs. Governance costs comprise all costs involving the public accountability of the charity and its compliance with regulation and good practice. These costs include costs related to statutory audit and legal fees together with relevant apportionment of overhead and support costs.

1.6 Cash and cash equivalents

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

1.7 Financial instruments

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

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

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

NET PATIENT FOUNDATION

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

FOR THE YEAR ENDED 30 SEPTEMBER 2018

1 Accounting policies

(Continued)

Basic financial assets

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

Basic financial liabilities

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

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

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

Derecognition of financial liabilities

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

1.8 Employee benefits

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

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

1.9 Retirement benefits

Payments to defined contribution retirement benefit schemes are charged as an expense as they fall due.

NET PATIENT FOUNDATION**NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)****FOR THE YEAR ENDED 30 SEPTEMBER 2018****2 Critical accounting estimates and judgements**

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

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

Critical judgements**Allocation of support costs**

Support costs have been allocated on a basis of estimation that the cost was incurred to support the charity's objectives. These judgements are made by the board of trustees to reflect the actual costs incurred in supporting the charity. See note 10 to the accounts which show the critical judgements made by the trustees and show the estimated costs that are deemed attributable to the charity's overheads.

3 Donations and legacies

	Unrestricted funds	Restricted funds	Total	Total
	2018 £	2018 £	2018 £	2017 £
Donations and gifts	243,794	-	243,794	266,390
Legacies receivable	-	-	-	65,000
	243,794	-	243,794	331,390
For the year ended 30 September 2017	316,390	15,000		331,390

NET PATIENT FOUNDATION**NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)****FOR THE YEAR ENDED 30 SEPTEMBER 2018****4 Grants**

	Ipsen	Novartis	Pfizer	Imaging Equipment	Sertex	Victory Net	Total 2018
	2018	2018	2018	2018	2018	2018	
	£	£	£	£	£	£	£
Performance related grants	-	-	-	50,000	-	71,383	121,383
	<u>-</u>	<u>-</u>	<u>-</u>	<u>50,000</u>	<u>-</u>	<u>71,383</u>	<u>121,383</u>
	<u>-</u>	<u>-</u>	<u>-</u>	<u>50,000</u>	<u>-</u>	<u>71,383</u>	<u>121,383</u>
Analysis by fund							
Unrestricted funds	-	-	-	-	-	71,383	71,383
Restricted funds	-	-	-	50,000	-	-	50,000
	<u>-</u>	<u>-</u>	<u>-</u>	<u>50,000</u>	<u>-</u>	<u>71,383</u>	<u>121,383</u>
	<u>-</u>	<u>-</u>	<u>-</u>	<u>50,000</u>	<u>-</u>	<u>71,383</u>	<u>121,383</u>
For the year ended 30 September 2017							
Unrestricted funds	27,578	28,485	8,066	16,177	5,000	-	85,306
Restricted funds	-	20,000	-	-	-	-	20,000
	<u>27,578</u>	<u>48,485</u>	<u>8,066</u>	<u>16,177</u>	<u>5,000</u>	<u>-</u>	<u>105,306</u>
	<u>27,578</u>	<u>48,485</u>	<u>8,066</u>	<u>16,177</u>	<u>5,000</u>	<u>-</u>	<u>105,306</u>

NET PATIENT FOUNDATION**NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)****FOR THE YEAR ENDED 30 SEPTEMBER 2018****5 Investments**

	Unrestricted funds	Total
	2018 £	2017 £
Interest receivable	46	54
	<u>46</u>	<u>54</u>

6 Raising funds

	Unrestricted funds	Total
	2018 £	2017 £
<u>Fundraising and publicity</u>		
Other fundraising costs	6,218	5,697
	<u>6,218</u>	<u>5,697</u>
	<u>6,218</u>	<u>5,697</u>

NET PATIENT FOUNDATION**NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)****FOR THE YEAR ENDED 30 SEPTEMBER 2018****7 Charitable activities**

	2018	2017
	£	£
Staff costs	133,923	111,046
Charitable activities	68,051	85,853
Computer costs	1,097	1,654
Advertising and marketing	9,392	32,397
Travel and subsistence	7,849	8,168
Rent	8,564	7,350
Telephone	3,713	2,576
	<u>232,589</u>	<u>249,044</u>
Grant funding of activities (see note 9)	-	15,000
Share of support costs (see note 10)	134,757	119,957
Share of governance costs (see note 10)	4,399	5,075
	<u>371,745</u>	<u>389,076</u>
Analysis by fund		
Unrestricted funds	313,588	321,786
Restricted funds	58,157	67,290
	<u>371,745</u>	<u>389,076</u>
For the year ended 30 September 2017		
Unrestricted funds	321,786	
Restricted funds	67,290	
	<u>389,076</u>	

8 Description of charitable activitiesExpenditure to support the primary activity

The charitable activities are to inform people to recognise, diagnose, treat, care for, and ultimately cure people with Neuroendocrine cancer. All activity costs above are the direct charitable costs in achieving these charitable objectives.

9 Grants payable

	2018	2017
	£	£
Queen Elizabeth Hospital Board Charity	-	15,000
	<u>-</u>	<u>15,000</u>

NET PATIENT FOUNDATION**NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)****FOR THE YEAR ENDED 30 SEPTEMBER 2018****9 Grants payable****(Continued)****10 Support costs**

	Support costs	Governance costs	2018	2017	Basis of allocation
	£	£	£	£	
Staff costs	79,496	-	79,496	46,084	Administrative staff
Office expenses	20,842	-	20,842	44,570	100% of the cost
Legal and professional	18,589	-	18,589	14,222	100% of the cost
Computer costs	3,123	-	3,123	4,708	40% of the cost
Rent and rates	2,141	-	2,141	4,900	40% of the cost
Telecommunications	2,475	-	2,475	1,717	40% of the cost
Other costs	8,091	-	8,091	3,756	100% of the cost
Audit fees	-	3,842	3,842	2,149	Governance
Trustees expenses	-	557	557	2,926	Governance
	<u>134,757</u>	<u>4,399</u>	<u>139,156</u>	<u>125,032</u>	
Analysed between					
Charitable activities	<u>134,757</u>	<u>4,399</u>	<u>139,156</u>	<u>125,032</u>	

Each member of staff has specific roles and responsibilities to fulfil and support the charity's objectives. Each member of staff is either allocated to frontline duties or placed in a supporting role which aids those staff to fulfil the charity's objectives.

Judgements are made by the trustees to allocate a percentage of resources to support costs that accurately reflect the time and resources spent in supporting the charities objectives. The estimation techniques can be seen in the note above and are specific to the charity's activities.

Governance costs include payments to the Independent Examiner of £1,500 (2017- £2,250) for the Independent Examination.

11 Trustees

None of the Trustees (or any persons connected with them) received any remuneration during the year, but travelling expenses of £470 were reimbursed (2017- £672).

During the year Trustees donated a total of £240 (2017 - £240) to general funds.

NET PATIENT FOUNDATION**NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)****FOR THE YEAR ENDED 30 SEPTEMBER 2018****12 Employees****Number of employees**

The average monthly number of employees during the year was:

2018	2017
Number	Number
7	6
<u>7</u>	<u>6</u>

Employment costs

	2018	2017
	£	£
Wages and salaries	192,043	148,477
Social security costs	16,366	7,697
Other pension costs	5,010	956
	<u>213,419</u>	<u>157,130</u>

13 Financial instruments

	2018	2017
	£	£
Carrying amount of financial assets		
Debt instruments measured at amortised cost	-	3,461
	<u>-</u>	<u>3,461</u>
Carrying amount of financial liabilities		
Measured at amortised cost	2,861	15,364
	<u>2,861</u>	<u>15,364</u>

14 Debtors

	2018	2017
	£	£
Amounts falling due within one year:		
Other debtors	-	3,461
	<u>-</u>	<u>3,461</u>

15 Creditors: amounts falling due within one year

	2018	2017
	£	£
Accruals and deferred income	2,861	15,364
	<u>2,861</u>	<u>15,364</u>

16 Retirement benefit schemes**Defined contribution schemes**

The charity operates a defined contribution pension scheme for all qualifying employees. The assets of the scheme are held separately from those of the charity in an independently administered fund.

The charge to profit or loss in respect of defined contribution schemes was £5,010 (2017:£956).

NET PATIENT FOUNDATION**NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)****FOR THE YEAR ENDED 30 SEPTEMBER 2018****17 Restricted funds**

The income funds of the charity include restricted funds comprising the following unexpended balances of donations and grants held on trust for specific purposes:

	Movement in funds			Balance at 30 September 2018
	Balance at 1 October 2017	Incoming resources	Resources expended	
	£	£	£	£
Imaging Equipment Limited - NET data coding project	55,000	-	(48,000)	7,000
Imaging Equipment Limited - App project	-	50,000	(4,157)	45,843
Victory NET	6,000	-	(6,000)	-
Novartis	20,000	-	-	20,000
	<u>81,000</u>	<u>50,000</u>	<u>(58,157)</u>	<u>72,843</u>

Imaging Equipment Limited donated funds specifically for the NET data coding project and the App project.

Novartis donated funds specifically for the NET data coding project.

Victory NET donated funds specifically for funding a NET nurse.

18 Analysis of net assets between funds

	Unrestricted funds 2018	Restricted funds 2018	Total 2018	Total 2017
	£	£	£	£
Fund balances at 30 September 2018 are represented by:				
Current assets/(liabilities)	386,113	72,843	458,956	471,696
	<u>386,113</u>	<u>72,843</u>	<u>458,956</u>	<u>471,696</u>

19 Related party transactions**Remuneration of key management personnel**

The remuneration of key management personnel is as follows.

	2018	2017
	£	£
Aggregate compensation	<u>49,475</u>	<u>47,500</u>