

Pancreatic Cancer Action



ANNUAL REPORT 2013

PANCREATIC CANCER ACTION

Registered Number: 07272699

Charity Number: 1137689

Annual Review and Accounts 2013

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Facts about Pancreatic Cancer

- Every hour, someone in the UK is newly diagnosed with pancreatic cancer.
- Each year nearly 9,000 people are newly diagnosed with pancreatic cancer in the UK, with nearly the same number dying each year.
- Pancreatic cancer affects men and women equally
- 23 people a day die from pancreatic cancer in the UK - one every 65 minutes.
- **5-year survival is only just over 3% and this figure has not improved in only 40 years.**
- Only 10% of patients are eligible for potentially curative surgery on diagnosis
- 50% of patients are diagnosed as an emergency presentation with only 16% diagnosed via a GP
- 40% of patients are under the age of 69
- Despite it being the UK's 5th biggest cancer killer, pancreatic cancer receives less than 1% of cancer research funding - in 2013 that amounted to a total of £5.2 million

“SIMPLY, WE WANT MORE PEOPLE DIAGNOSED IN TIME FOR SURGERY - CURRENTLY THE ONLY POTENTIAL FOR A CURE”

Ali Stunt, Pancreatic Cancer Survivor and Founder & CEO of Pancreatic Cancer Action

Marie-Hélène Way (right) was only 60 when she died of pancreatic cancer in June 2013 but throughout her illness, she became a good friend to the Charity and Ali Stunt in particular. Diagnosed in 2011 with inoperable pancreatic cancer, Marie-Hélène took on intensive chemotherapy with vigor. She had the tremendous support of her family including husband David and we got to know many members of her family and friends through their numerous fundraising events. In 2013, a team of 15 riders made up of family and friends did the 100 mile Nightrider London event, and her son and daughter ran the Paris Marathon, raising over £23,000 for PCA. Our condolences go to her family and friends.



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Legal and Administrative Information

PANCREATIC CANCER ACTION COMPANY INFORMATION

Trustees:

Brian Stevenson (Chair)
Alex Fulton
Nicola Mumford
Helen Matthews (Secretary)
Neville Menezes
Phil Stunt

Charity Correspondent: Alison Stunt, Founder & Chief Executive

Registered Office:

Chiltlee Manor
Liphook Road
Haslemere
Surrey
GU30 7AZ

Charity number:

1137689

Bankers:

HSBC Bank plc
19 High Street
Haslemere
Surrey
GU27 2HQ

Independent examiner:

Alliotts
Friary Court
13-21 High Street
Guildford
Surrey
GU1 3DL

Trustees' Report for the year ended 31 December 2013

The Trustees present their report and accounts for the year ended 31 December 2013.

The results for the year are presented in the form of a Statement of Financial Activities, which incorporates the traditional income and expenditure account, in order to comply with the revised Statement of Recommended Practice for Charities, as issued by the Charity Commission in 2005 and as identified in the Charities Act 2011.

STRUCTURE, GOVERNANCE AND MANAGEMENT

The charity is a company limited by guarantee in June 2010 and is therefore governed by its memorandum and Articles of Association. Its company registration number is 07272699 and its charity number is 1137689.

The Trustees, who are also the directors for the purpose of company law, and who served during the year were:

A Fulton	(Appointed 8 July 2013)
H Matthews	
J McCue	(Resigned 1 June 2014)
N Menezes	
N Mumford	(Appointed 8 July 2013)
B Stevenson	
A Stunt	(Resigned 29 April 2013)
P Stunt	

If there is a unanimous wish that they be appointed, the role is discussed with the nominee and if relevant, this is made at the next possible Meeting of the Trustees followed by appropriate induction procedures.

None of the Trustees has any beneficial interest in the company. All of the Trustees are members of the company and guarantee to contribute £10 in the event of liquidation.

The Trustees continue to keep the Charity's activities under review, particularly with regard to any major physical or financial risks that may arise from time to time, and to monitor the effectiveness of the system of internal controls and other variable means, including insurance cover where appropriate, by which those risks already identified by the Trustees can be mitigated.

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OBJECTIVES AND ACTIVITIES

The charity's objects are to increase survival rates through improving the earlier diagnosis of pancreatic cancer. We aim to promote and protect the physical and mental health of pancreatic cancer patients and their families and carers through the provision of support, education and practical advice and also to advance the education of health professionals and the general public in all areas related to pancreatic cancer.

The Trustees have paid due regard to guidance issued by the Charity Commission in deciding what activities the charity should undertake.

THE TRUSTEES' ACTIVITIES AND AIMS

The Trustees meet regularly to develop strategy to meet the charitable objects. The AGM seeks to establish if this strategy has been implemented throughout the year and how successful it has been in achieving the charitable objectives. Once the overall strategy has been agreed by the Trustees a series of operational meetings attended by a selection of the Trustees and volunteers, who the Trustees believe have relevant skills and experience in the specific area look at the operational implementation.

The Trustees currently have a range of skills and experience that range from medical/scientific, legal and corporate governance, PR. This has enabled the Trustees to successfully utilise appropriate and effective volunteers to work on specific projects.

ROLE OF VOLUNTEERS

The Charity receives the very welcome assistance of volunteers. To date this has usually been for specific projects or fund raising initiatives. In 2013 we developed a network of Regional Representatives to fundraise and to raise awareness in their communities. We have also had local volunteers assist with general office duties and specific IT projects at our Liphook office. The charity seeks volunteer assistance via the website, social media and by word of mouth.

Public Benefit Statement

The Trustees confirm that they have complied with the duty in Section 4 of the Charities Act 2011 to have due regard to the Charity Commission's general guidance on public benefit.

OUR PURPOSE

Pancreatic Cancer Action works to save lives through promoting earlier diagnosis of pancreatic cancer. We do this through promoting greater awareness of the symptoms of the disease, the funding and development of medical educational programmes, supporting patients through improved information about pancreatic cancer either on our website or in print and by funding research.

OUR CHARITABLE OBJECTS

- To further and build pancreatic cancer awareness and education.
- To assist in the improvement of survival rates, effective treatments, support and standard of patient care for people affected by pancreatic cancer.
- To increase the overall level of funding available for pancreatic cancer

Our Mission

- It is our aim to get more people diagnosed in time for surgery – currently the only potential for a cure
- To help find a simple diagnostic test for pancreatic cancer.
- **Improve the knowledge of medical professionals about pancreatic cancer symptoms, management and treatments**
- Raise public awareness of the symptoms of pancreatic cancer
- Improve patient access to latest treatments and therapies including improved participation in clinical trials
- Improve the quality and quantity of pancreatic cancer patient information
- To lobby government and other funders to increase the level of research funding into pancreatic cancer.

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Deliverables & Activity in 2013

SYMPTOM STUDY

We are funding the SYMPTOM Study at the University of Cambridge during 2013/14 - the world's largest prospective study into the symptoms of pancreatic cancer. We hope this will provide us with evidence upon which we can design public symptoms awareness campaigns and to form the basis of GP-based early diagnosis initiatives. Results are due early 2015

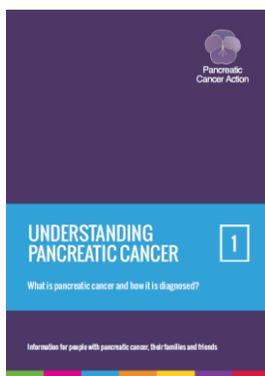
PCI PRECLINICAL STUDY –UNIVERSITY COLLEGE HOSPITAL LONDON

Photochemical Internalisation (PCI) is a new technique for improving delivery of chemotherapeutic agents to tumours. Since pancreatic cancer responds poorly to standard chemotherapy, the study proposes using this technique to improve the delivery of clinically approved chemotherapy drugs to the cancer cells, in order to achieve more effective tumour destruction with fewer side-effects. Patients with locally advanced cancer who are not considered suitable for surgery could benefit from PCI which is a laser-based minimally invasive treatment. PCA is funding 50% of the costs of this project and, dependent on results (due end of 2014), this could be developed into a phase 1 clinical trial in patients.

PANCREATIC CANCER ADVERTISING CAMPAIGN

The Trustees in 2013 approved the development and funding of the UK's first pancreatic cancer advertising campaign. Originally due for launch in November 2013, the decision was made to delay until February 2014 because of the cost of print and outdoor media in that period (so close to Christmas) and the fact that no other cancer awareness months are held in February. The "I wish I had.." campaign will be hard-hitting but through which we hope to gain additional PR opportunities through the media to deliver the important messages about pancreatic cancer. We developed the creative ideas with Team Darwin who given their services on a pro bono basis, for which we are very grateful.

PUBLICATIONS & INFORMATION STANDARD



We achieved re-certification under the Information Standard - a Department of Health scheme to ensure that public health information is accurate, up-to-date and unbiased. A 'kite-mark' for health information, this enables us to differentiate ourselves from other pancreatic cancer charities.

The first three of our booklets in the "Understanding Pancreatic Cancer" series were released for print in December 2013. They include:

- What is pancreatic cancer and how is it diagnosed
- Surgery for operable pancreatic cancer
- Treatments to control the symptoms of pancreatic cancer

A further four booklets are in the pipeline for 2014.

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REGIONAL REPRESENTATIVES

In 2013 we began the process of recruiting volunteer regional representatives to raise awareness and funds in their communities. The first ever meeting was held in London in April 2013 (room courtesy of RBS) with our first six reps covering Manchester, Cheshire, Birmingham, Wiltshire, Devon/Cornwall and Kent. All of our reps have a close personal connection with pancreatic cancer and two are surviving the

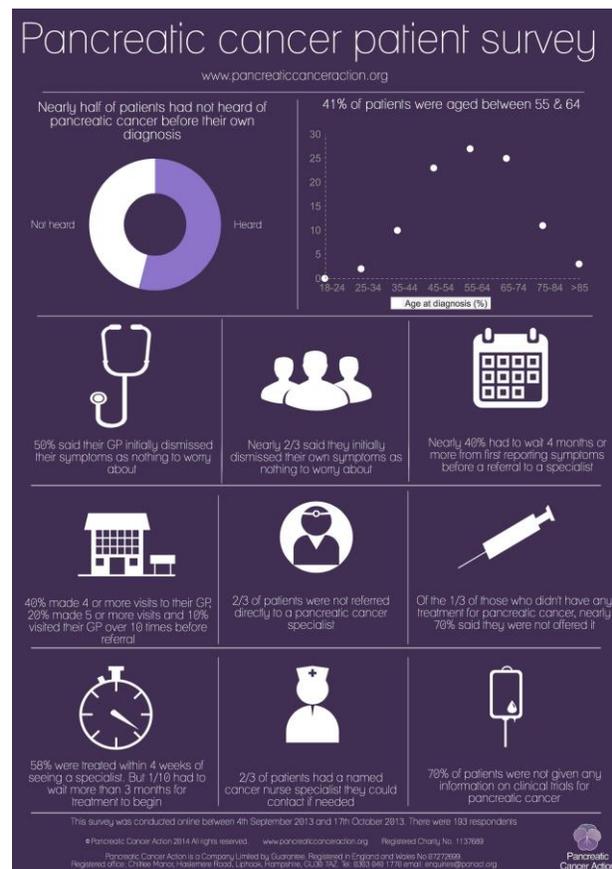
disease.

MARKET RESEARCH

Between Early September and the end of October 2013 we ran a patient survey on our website via Survey Monkey. We wanted to know about patients' awareness of pancreatic cancer before their own diagnosis and to find out how they were diagnosed, how many GP visits they had to make and so on. In total we had 192 respondents and key highlights are below:

- 50% of patients had not heard of pancreatic cancer before their own diagnosis.
- Half of patients said that their GP initially dismissed their symptoms as nothing to worry about.
- 2/3 said they initially dismissed their symptoms as being nothing to worry about.
- Top symptoms reported were as follows:

1. Abdominal pain (27%)
2. Jaundice (18%)
3. Back pain (12%)
4. IBS-type (including diarrhoea and pale stools)
5. Fatigue and malaise
6. Indigestion
7. Nausea
8. Weight Loss
9. Lack of appetite



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- 40% of patients visited their GP four times or more before being referred to a specialist
- 10% of patients visited their GP ten times or more before being referred to a specialist
- Nearly 40% had to wait over four months before a referral to a specialist with one in ten waiting more than 18 months before being referred to a specialist.
- 2/3 were not referred initially to a pancreatic cancer specialist
- 1/3 of patients did not have any treatment for their pancreatic cancer and 70% of those were never offered any treatment.
- 70% of patients were not giving any information on clinical trials.



PANCREATIC CANCER AWARENESS MONTH

November's Pancreatic Cancer Awareness Month was very busy. For the very first time we managed to turn Haslemere in Surrey (our Founder's home town) purple. Over 120 retailers and businesses either put up purple window displays and/or displayed our symptoms awareness posters and bunting for a week in November.

The Awareness Month was successful across the UK with many people ordering our awareness packs. Our awareness posters had to be re-printed, such was the demand.

We also utilised social media and ran a very successful "Purple P" campaign and found supporters, patients and celebrities to be photographed holding up a purple letter to spell the phrase Pancreatic Cancer Awareness Month, including patrons Hugh Grant and Joanna David.



SYMPTOMS AWARENESS VIDEO AND POSTERS

To coincide with our Pancreatic Cancer Awareness Month in November, we launched a new symptoms awareness video and posters to help educate the public.

These have been very well received and the symptoms video has had over 10,000 hits via our YouTube channel.

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AWARENESS IN THE MEDIA



During 2013 we continued to build a strong media presence for both pancreatic cancer and the Charity. This was boosted in June 2013 when we appointed a part-time Communications Manager, Natasha North. We have had articles in many national newspapers such as the Daily Mail, Mail on Sunday, Daily Mirror, Daily Telegraph, Health Magazine, New Magazine, Real People magazine; interviews with most of the UK's BBC regional radio stations, interviews

with BBC Midlands TV, ITV Midlands and an appearance by Kerry Harvey (pictured left), a pancreatic cancer patient on ITV's This Morning in July. There were also numerous articles relating to fundraisers' activities in regional press across the UK.

LOBBYING AND COLLABORATION

PCA is a stakeholder in the All Party Parliamentary Group on pancreatic cancer. We continue to work with other charities, government departments and individual parliamentarians to improve the profile of pancreatic cancer and to increase the level of funding available for the disease in terms of research and awareness campaign spending. We gave written evidence to the APPG Inquiry into pancreatic cancer, the results of which were published in November 2013. In particular, we want to see an increase in the level of funding for pancreatic cancer and for the development of an English pancreatic cancer audit of services in order to benchmark performance to identify best practice from which the whole of the UK can learn.

Ali Stunt was invited to join the Health Consumer Powerhouse European Pancreatic Cancer Index Expert Panel. A pan-European study of indices such as survival, incidence and treatment pathways. Results will be available in February 2014.

CANCER AWARENESS TOOLKIT

We were invited by the University of Central Lancaster to provide pancreatic cancer educational material for their Cancer Awareness Toolkit –an online tool to support NHS front line staff to promote awareness of cancer and the importance of early detection –see:

<http://cancerawarenesstoolkit.com/cancers/pancreatic-cancer>

EUROPEAN PANCREATIC CANCER PATIENT ADVISORY GROUP

Our Founder, Ali Stunt has attended meetings of a newly-formed European Pancreatic Cancer Patient Advisory Group. It is still in the early stages, but it is hoped that a European collaboration of patient organisations can ultimately benefit patients across the European Union and to use our expertise to help patients in countries where currently no patient group exists for pancreatic cancer.

Future projects and objectives - 2014

RESEARCH

SYMPTOM Study

We will continue to fund the SYMPTOM Study at the University of Cambridge during 2014 - the world's largest prospective study into the symptoms of pancreatic cancer. We hope this will provide us with evidence upon which we can design public symptoms awareness campaigns and to form the basis of GP-based early diagnosis initiatives.

INTERNATIONAL MEDICAL RESEARCH ADVISORY BOARD

Due to an increasing demand for us to fund research projects, we will, in 2014, be recruiting pancreatic cancer research scientists to become volunteer members of our Medical Research Advisory Board. With assistance from UK specialists, we hope to recruit specialists from the UK, USA, Europe and Australia. We aim to have this in place by November 2014 when we will make our first call for projects that have a focus on the early diagnosis of pancreatic cancer.

EDUCATION

E-learning module expansion

In 2013 we commissioned the British Medical Journal (BMJ) Online to develop a diagnosing pancreatic cancer e-learning module for a wider clinical audience to include hospital doctors and nurse practitioners. As the majority of patients will be diagnosed in a hospital environment, it is vital that clinicians there are apprised of the symptoms of pancreatic cancer so speedier referrals can be made to pancreatic specialists. This is planned for launch in July 2014.

Pancreatic cancer e-learning app

We will in 2014 be developing a mobile application version of our e-learning modules for clinicians.

GP Education

We will be working with the Pancreatic Society of Great Britain and Ireland (PSGB&I) to deliver a GP seminar at the PSGB&I annual conference in Guildford 2014. Over 100 GPs will be invited to attend and our Founder Ali Stunt will be chairing the session along with pancreatic cancer specialists and a GP cancer specialist. Our e-learning module will be showcased.

We will be extending our GP Education to a webinar format, which will now be available in late 2014.

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PUBLICATIONS

Our patient booklet series "Understanding Pancreatic Cancer" will be updated to include four more titles in 2014: Chemotherapy for Pancreatic Cancer; Chemotherapy drugs used for pancreatic cancer; Radiotherapy for pancreatic cancer and Diet and Nutrition for pancreatic cancer.

We will continue to achieve the standards necessary for revalidation under the Information Standard Certification scheme for all our public health information.

Pancreatic cancer information app

We will in 2014 start the process of developing our patient information booklets into a mobile app for use on tablets and smartphones. We anticipate the app version of this Information Standard certified information to be available in early 2015.

AWARENESS

Pancreatic Cancer Awareness Advertising Campaign

In February 2014 we plan to launch the UK's first pancreatic cancer awareness advertising campaign.

Pancreatic Cancer Awareness Month

We will continue to be proactive in raising public awareness of pancreatic cancer during our Pancreatic Cancer Awareness Month in November, developing the symptom awareness messages to our target audience. We will continue to produce and provide free of charge awareness materials such as posters and leaflets to members of the public on request and to develop new and innovative ways of increasing public awareness and understanding about the disease.

Pancreatic cancer awareness toolkit

We plan to develop a pancreatic cancer awareness toolkit folder for the public containing posters, leaflets and banners plus advice on the most effective ways they can raise awareness of the disease in their communities.

PCA REGIONAL REPRESENTATIVES

We aim to recruit further patients or carers who have had experience of pancreatic cancer as regional representatives in areas where we currently do not have representation. Areas include Scotland, Northern Ireland, Wales, NE England and London regional.

EXHIBITIONS

In 2014 we plan to exhibit at further exhibitions such as the Primary Care Conference, the RCGP conference, Health and Wellbeing at Work, the 50+ show (where our Founder, Ali Stunt will be a key speaker on two days of the show), the Britain against Cancer Conference.

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LOBBYING

We aim to continue to support the All Party Parliamentary Group on Pancreatic Cancer as one of the stakeholders and to provide evidence as needed to any inquiries.

We will support the Pancreatic Cancer e-petition through social media activities to attain the 100,000 signatures needed by 8th April 2014. The aim of the e-petition is to get the underfunding and lack of awareness of pancreatic cancer debated in parliament.

We will continue to be a member of Cancer52, the Rarer Cancers Forum, and the Cancer Campaigning Group.

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Fundraising highlights of 2013

In 2013 the number of people taking on fundraising challenges for us increased by 143 over 2012. In total 294 people took on challenges including runs, cycling events, walks and skydives.

In 2013, our income rose by 69% over 2012. The majority of our income comes from individual fundraisers. **We do not receive any funding from government.**

CHARITY OF THE YEAR



From March 2013 to March 2014 we are Charity of the Year for the UK's largest private insurance broker, Lockton. We are very grateful to the Associates who voted for PCA. By the end of 2013, Lockton Associates had raised over £25,000.

We were also Charity of the Year for Hare Hatch Sheeplands Garden Centre, the Boston Treatment Centre and joint charity of the year with Royal Bank of Scotland Corporate HR division.

THANK YOU!!

A big "thank you" to all our lovely fundraisers who in some cases have literally gone the extra mile! Some examples of the amazing events and activities below are just a flavour of what occurred throughout 2013:



Paul Bowker ran the grueling Marathon des Sables,



Dane's 3-some did the Three Peaks Challenge in support of patient, Dane Wilde

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Over 20 cyclists took part in 100 mile Nightrider London including a large team supporting patient Marie-Helene Way



Mark Cobb put on a Golf Day & invited special guest, Glen Hoddle



Jim cycled all the way from John O'Groats to Land's End



Ellie bravely did a tandem skydive

Chairman's Report

INTRODUCTION

Pancreatic Cancer Action (PCA) enjoyed another very successful year in 2013. We have grown our income considerably despite a difficult economic climate, we have funded some ground breaking work, built a regional support network in the UK, hired more staff and have continued to build an effective organisation for the challenging tasks that lie ahead.

Full details of our achievements are set out in the CEO's report but I would like to highlight some of the key messages.

THANKS AND WELCOME

First, I would like to thank all the staff in our office in Liphook, Hampshire. They have responded well to all the challenges that were facing them in 2013 and have continued to work hard in a team-based and happy manner. Secondly, I would like to welcome our two new members of the Board of Trustees, Nicola Mumford and Alex Fulton.

FUNDRAISING

During 2013 we have increased our fundraising by 69% which is a tremendous achievement in present circumstances. The charity now has sufficient resources to invest in significant research and awareness projects that have the potential to make a real difference. Some of this will now be familiar to you from the publicity work that we carried out in early 2014. This has been made possible by many creative and loyal supporters. Thank you.

PROJECT INVESTMENTS

The highlights of our year include the continued roll out of the GPs eLearning module for General Practitioners, the extension of this to hospital doctors in collaboration with the British Medical Journal and the preparation work for an extensive range of leaflets giving much needed information to sufferers and their families. Our CEO will provide more details but this work has already proved to be useful in laying the ground work for achieving two of our key objectives, namely raising awareness and improving early diagnosis.

ORGANISATION, STAFFING AND PREMISES

As we have grown over the past two years, so we have needed to pay attention to our people and organisation. During 2013 we hired one more part-time employee to help with our media communications.

We also recruited and established a regional network of supporters in the UK to help throughout the country. This has proved invaluable in giving assistance to local fundraising events.

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KEY OBJECTIVES

In 2013 we have not changed what we stand for or what we are seeking to achieve.

Our strongest focus is on improving early diagnosis and through this we aim to ultimately make a significant contribution to improving survival rates. To turn this into a reality there are two key enablers. First, to raise awareness in the general public, with governments and politicians and with the medical world. Second, to continue the effort to attract more funding for research into the disease and to help with treatment.

In turn we will continue to keep a very careful control on our expenses to ensure that the generosity of our supporters translates into the achievement of our key objectives.

2014 AND BEYOND

Much more still needs to be done to take significant strides forward in the realisation of our key objectives. We have firmly established a strong foundation for our work and are in the process of improving our fundraising skill in a very competitive market together with the further exploration of wise ways to spend our income.

We have established ambitious plans for 2014 and beyond and these are already visible through a much higher public profile both in relation to pancreatic cancer and in government circles. We continue to explore with the medical profession and other relevant bodies how we might make an increasing contribution to the research challenges associated with the early diagnosis of pancreatic cancer.

CONCLUSION

Last year was another good year for PCA. Our Chief Executive is totally dedicated to our cause and continues to make a real difference in the achievement of our key objectives. I would like to thank Ali for the continued commitment that she has shown in 2013.

We are looking forward together to making a real impact in 2014 thanks to the generous support of many people that have given both money and time to help further our aims.



Brian Stevenson
Chairman of the Board of Trustees
Pancreatic Cancer Action

CEO's Report

INTRODUCTION

2013 has been a further year of great change and great achievement for PCA. We are continuing to grow and develop and are becoming recognised for our work. While 2013 has still seen economic austerity, I am delighted to report that our income in 2013 is 69% greater than 2012. This is down to the amazing contributions our supporters and fundraisers have given us.

In 2013 we welcomed Joanna David to become our Patron. Joanna is one of the UK's most cherished actresses and has been a familiar face on our TV screens as well as in the theatre and in film for many years. Joanna is very supportive of PCA and our activities following the loss of a good friend, Angharad Rees to pancreatic cancer.

OUR ORGANISATION

Organisationally we are continuing to mature. In November we moved out of our small one-roomed office to a slightly larger space with two rooms in the same building to accommodate our growing team. By remaining in Liphook, Hampshire, we are able to keep our office rental low and by taking rooms in an under-occupied building, we have been able to negotiate a significant discount.

We have taken on a new member of staff - a part-time Communications Manager to join our existing team including a part-time Fundraising Assistant and a Grant and Trust fundraiser/office admin. A great team is developing and in 2014 I plan to employ a part-time Information and Operations officer to oversee our patient information and publications and a part-time Marketing Assistant to help us with our advertising campaign. Costs will be kept to a minimum and a low cost-to-income ratio will be maintained.

OUR WONDERFUL SUPPORTERS

We have had phenomenal support from individuals who have been touched by the disease and who have fundraised on our behalf. We saw a huge increase in the numbers of people taking on fundraising challenges such as runs, cycling events, walks and skydives with a total of 294 in 2013 with many already signing up for activities in 2014.

Fundraisers of particular note were: Paul Bowker, who ran the Marathon des Sables and raised over £15,000, The 50-strong Wilde Wolves who ran the Wolf Run in September and raised over £7,500 in support of Dane Wilde who was battling pancreatic cancer, Kevin Jones' Golf Day raised over £8,000 and our Regional Reps; Beverley Hodgson and Linda Edwards arranged a fantastic 5-seater cycle event in the centre of Manchester which raised over £5,000 and tons of awareness for the disease in the city.

CHARITY OF THE YEAR

2013 saw the start of our Charity of the Year relationship with Lockton - the UK's largest private insurance broker. By the end of 2013, £25,000 had been raised through the activities of individual staff members

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with more to come in 2014. I would like to thank all Lockton Associates involved in fundraising events in 2013 and next year.

I would also like to thank our corporate partner, RBS Corporate HR who took us on as joint Charity of the Year for 2012/13 and to Hare Hatch Sheeplands Garden Centre and The Boston Treatment Centre who also adopted PCA as their charity of the year.

IN MEMORY FUNDRAISING

It is the very nature of pancreatic cancer that means that many supporters will raise money in memory of a loved one they have lost through the disease. In 2013 we received over £40,000 of donations in memory and/or in lieu of funeral flowers –double that of 2012.

In 2013 we are launched the Pansy Fund –an online tribute fund –with partners, Much Loved which is starting to grow in popularity with supporters.

PRO BONO SERVICES

We are very grateful to Team Darwin for their pro-bono creative work for the UK's first pancreatic cancer advertising campaign we launched in February 2014.

Thank you to Royal Bank of Scotland who have provided us with a London meeting room (with lunch thrown in!) for our Regional Reps meetings and to Wragge and Co who have helped host Trustee meetings.

Our thanks also to WillmerHale and now to Brown Rudnick who have provided us with pro bono legal services including drawing up research contracts and terms of agreement.

FAREWELL

2013 was also a year tinged with sadness as we said our last goodbyes to two amazing and inspirational friends of PCA who lost their fight with pancreatic cancer; Marie-Hélène Way who died age 60 and Dane Wilde who was only 49.

We have received significant support in the form of donations and fundraising from the friends and families of both Dane and Marie-Hélène.

Many others have also lost their lives to this disease that we never got to meet or talk to but that we knew about from the funeral or in memory donations. We'd like to thank their families for choosing Pancreatic Cancer Action as the recipient of funeral donations or monies donated in memory.

CONCLUSION

We have had another successful, full and challenging year at PCA. This is primarily due to the phenomenal support we have received from members of the public who have fundraised and helped us raise awareness of pancreatic cancer in their own communities.

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I have to thank all of the Trustees for their support and commitment to Pancreatic Cancer Action over the past year.

I would also like to thank our out-going trustee, Jane McCue for her work over the past three years. Jane was instrumental in preparing us for the processes involved in the Information Standard Certification and I am grateful to her for getting us through that.

We have an exciting time ahead in 2014 with the UK's first ever pancreatic cancer advertising campaign in February and lots of new developments planned to help further our aim of improving early diagnosis of pancreatic cancer –thus saving lives.



Ali Stunt, Chief Executive and Founder

Financial Activities

The results for the year are summarized in the Statement of Financial Activities on page 22.

The Trustees are delighted to report that the charity's incoming resources for 2013 amounted to **£295,297** [2012: £172,622], [2011: £107,815] an increase of 69 per cent vs. 2012.

The Trustees would like to thank all the volunteers, fundraisers and donors who have supported the charity in increasing numbers over the past year and on whom we are wholly dependent.

Total spending on charitable activities was **£80,647** [2012: £44,438], [2011: £9,186].

An additional £93,000 of funds was designated to charitable activities in 2014.

As a result of these activities, the charity achieved a surplus of £108,250 [2012: £62,729], [2011: £91,506]

Our Chief Executive worked full-time unpaid (as she has done since the Charity was founded in June 2010) until April 2013, thereafter claiming a modest salary.

RESERVES POLICY

It is the policy of the charity that unrestricted funds which have not been designated for a specific use should be maintained at a level equivalent to between six and nine months' expenditure. The Trustees consider that reserves at this level will, in the event of a significant drop in funding, they will be able to continue the charity's current activities while consideration is given to ways in which additional funds may be raised. This level of reserves has been maintained throughout the year.

At 31st December 2013, the charity held reserves of £283,618, of which £6,192 was restricted. This more than covers three months of non-grant/project expenditure and thus complies with the reserves policy established by the board.

Approved by the Board of Trustees on 7th July 2014 and signed on its behalf by

Brian Stevenson
Chairman of Trustees.

Independent Examiner's report to the Trustees of Pancreatic Cancer Action.

I report on the accounts of the charity for the year ended 31 December 2013, which are set out on pages 22 to 29.

Respective responsibilities of Trustees and examiner

The Trustees who are also the directors of Pancreatic Cancer Action for the purposes of company law, are responsible for the preparation of the accounts. The Trustees consider that an audit is not required under section 144(2) of the Charities Act 2011, the 2011 Act, and that an independent examination is needed. The charity's gross income exceeded £250,000 and I am qualified to undertake the examination being a member of the Institute of Chartered Accountants in England and Wales.

Having satisfied myself that the charity is not subject to audit under company law and is eligible for independent examination, it is my responsibility to:

- (i) examine the accounts under section 145 of the 2011 Act;
- (ii) to follow the procedures laid down in the general Directions given by the Charity Commission under section 145(5)(b) of the 2011 Act; and
- (iii) to state whether particular matters have come to my attention.

Basis of independent examiner's report

My examination was carried out in accordance with the general Directions given by the Charity Commission. An examination includes a review of the accounting records kept by the charity and a comparison of the accounts presented with those records. It also includes consideration of any unusual items or disclosures in the accounts, and seeking explanations from you as trustees concerning any such matters. The procedures undertaken do not provide all the evidence that would be required in an audit and consequently no opinion is given as to whether the accounts present a 'true and fair view' and the report is limited to those matters set out in the statement below.

Independent examiner's statement

In connection with my examination, no matter has come to my attention:

- (a) which gives me reasonable cause to believe that in any material respect the requirements:
 - (i) to keep accounting records in accordance with section 386 of the Companies Act 2006; and
 - (ii) to prepare accounts which accord with the accounting records, comply with the accounting requirements of 396 of the Companies Act 2006 and with the methods and principles of the Statement of Recommended Practice: Accounting and Reporting by Charities;

INDEPENDENT EXAMINER'S REPORT

(b) to which, in my opinion, attention should be drawn in order to enable a proper understanding of the accounts to be reached.

Stephen Meredith FCA Alliotts

Friary Court

13-21 High Street

Guildford Surrey GU1 3DL

Dated:

STATEMENT OF FINANCIAL ACTIVITIES

Statement of Financial Activities

PANCREATIC CANCER ACTION: STATEMENT OF FINANCIAL ACTIVITIES YEAR END DEC 2013

	NOTES	UNRESTRICTED FUNDS £	DESIGNATED FUNDS £	RESTRICTED FUNDS £	TOTAL 2013 £	TOTAL 2012 £
<u>Incoming Resources from generated funds</u>						
Donations and legacies	2	205,507	-	-	205,507	129,223
Activities for generating funds		66,780	-	-	66,780	43,270
Investment income	3	129	-	-	129	-
		272,897	-	-	272,897	172,622
Incoming resources from charitable activities	4	1,548	-	15,050	16,598	-
Other incoming resources	5	1,542	-	-	1,542	-
Total incoming resources		275,987	-	15,050	291,037	172,622
<u>Resources Expended</u>						
Cost of generating funds						
Cost of generating donations and legacies		88,603	-	-	88,603	62,360
Fundraising Trading: cost of goods sold		11,467	-	-	11,467	2,615
		100,070	-	-	100,070	64,975
Net incoming resources available		175,917	-	15,050	190,967	107,647
Charitable activities						
Raising awareness		22,021	-	5,158	27,179	41,516
Funding research		6,223	-	3,770	9,923	-
Medical Education		43,545	-	-	43,545	2,922
Total charitable expenditure		71,789	-	8,858	80,647	44,438
Governance costs		2,070	-	-	2,070	480
Total Resources expended		173,929	-	8,858	182,787	109,893
Net incoming resources before transfers		102,058	-	6,192	108,250	62,729
Gross transfers between funds		(93,000)	93,000	-	-	-
Net income for the year/Net movement in funds		9,058	93,000	6,192	108,250	62,729
Fund balances at 1 January 2013		175,368	-	-	175,368	112,645
Fund balances at 31 December 2013		184,426	93,000	6,192	283,618	175,374

The statement of financial activities also complies with the requirements for an income and expenditure account under the Companies Act 2006.

BALANCE SHEET

Pancreatic Cancer Action Balance Sheet

PANCREATIC CANCER ACTION		BALANCE SHEET AS AT 31 DECEMBER 2013			
	NOTES	2013 £	£	2012 £	£
Fixed Assets					
Tangible assets	12		504		-
Current Assets					
Stocks		5,706		4,993	
Debtors	13	5,833		5	
Cash at bank and in hand		287,015		177,278	
		298,554		182,276	
Creditors: amounts falling due within one year	14	(15,440)		(6,902)	
Net current assets			283,114		175,374
Total assets less current liabilities			283,618		175,374
Funds					
Restricted	16		6,192		175,374
Unrestricted			277,426		175,374
			283,618		175,374

The company is entitled to the exemption from the audit requirement contained in section 477 of the Companies Act 2006, for the year ended 31 December 2013. No member of the company has deposited a notice, pursuant to section 476, requiring an audit of these accounts.

The directors acknowledge their responsibility for ensuring that the company keeps accounting records which comply with section 386 of the Act and for preparing accounts which give a true and fair view of the state of affairs of the company as at the end of the financial year and of its incoming resources and application of resources, including its income and expenditure, for the 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 accounts, so far as applicable to the company.

These accounts have been prepared in accordance with the special provisions relating to small companies within Part 15 of the Companies Act 2006.

These accounts were approved by the Board on 7th July 2014.

----- Brian Stevenson, Chairman of Trustees

NOTES TO THE ACCOUNTS

Notes to the accounts

for the year ended 31 December 2013

1. ACCOUNTING POLICIES

1.1. Basis of preparation

The accounts have been prepared under historical cost convention.

The accounts have been prepared in accordance with applicable accounting standards, the Statement of Recommended Practice, "Accounting and Reporting by Charities", issued in March 2005 and the Companies Act 2006.

1.2. Incoming Resources

Grants, donations, legacies and similar income receivable are allocated to either restricted or unrestricted income. Monies received which are restricted for specific projects are included in the Statement of Financial Activities and the excess income or expenditure is carried forward as Restricted Funds at 31 December 2013, after providing for any surplus repayable to a donor.

Donations and investment income are included in the financial statements as they are received.

1.3. Resources expended

Expenditure has been allocated between the main headings in the Statement of Financial Activities on the basis of the type of activity to which they relate, including irrecoverable VAT.

Overhead and support costs relating to charitable activities and the cost of generating funds have been apportioned based on the estimated staff time spent on these matters.

Income and expenses have not been netted off.

1.4. Tangible fixed assets and depreciation

Tangible fixed assets are stated at cost less depreciation. Depreciation is provided at rates calculated to write off the cost less estimated residual value of each asset over its expected useful life, as follows:

Computer equipment	25% on cost
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1.5. Stock

Stock is valued at the lower of cost and net realisable value.

NOTES TO THE ACCOUNTS

2. DONATIONS AND LEGACIES

	2013	2012
	£	£
Donations and gifts	203,407	129,223
Grants receivable for core activities	2,100	-
	205,507	129,223

3. INVESTMENT INCOME

	2013	2012
	£	£
Interest receivable	610	129

4. INCOMING RESOURCES FROM CHARITABLE ACTIVITIES:

	UNRESTRICTED	RESTRICTED	TOTAL	TOTAL
	£	£	2013	2012
	£	£	£	£
Grants towards patient information booklets	-	11,350	11,350	-
Grants towards Symptom Study	-	3,700	3,700	-
Speaking engagement fees	1,548	-	1,548	-
	1,548	15,050	16,598	-

5. OTHER INCOMING RESOURCES

	2013	2012
	£	£
Other incoming resources	1,542	-

NOTES TO THE ACCOUNTS

6. TOTAL RESOURCES EXPENDED

	STAFF COSTS £	DEPRECIATION £	OTHER COSTS £	TOTAL 2013 £	TOTAL 2012 £
Costs of generating funds					
Costs of generating donations & legacies	32,899	69	55,635	88,603	62,360
Fundraising trading: costs of goods sold	-	-	11,467	11,467	2,615
TOTAL	32,899	69	67,102	100,070	64,975
Charitable activities					
Raising awareness					
Activities undertaken directly	7,646	15	16,280	23,941	40,013
Support costs	-	-	3,238	3,238	1,503
TOTAL	7,646	15	19,518	27,179	41,516
Funding research					
Activities undertaken directly	2,790	6	5,945	8,741	-
Support costs	-	-	1,182	1,182	-
TOTAL	2,790	6	7,127	9,923	-
Medical Education					
Activities undertaken directly	12,251	26	26,080	38,357	2,922
Support costs	-	-	5,188	5,188	-
TOTAL	12,251	26	31,268	43,545	2,922
	22,687	47	57,913	80,647	44,438
Governance Costs					
	-	-	2,070	2,070	480
	55,586	116	127,085	182,787	109,893

Governance costs includes payments to the auditors of £1,140 (2012: £480) for audit fees

NOTES TO THE ACCOUNTS

7. COSTS OF GENERATING DONATIONS AND LEGACIES

	2013	2012
	£	£
Other costs comprise:		
Freelance and contractor costs	7,576	-
Advertising and marketing	11,313	36,815
Event costs	22,814	7,569
Recharge of support costs	13,932	13,396
	55,635	57,780

8. SUPPORT AND GOVERNANCE COSTS

	2013	2012
	£	£
Detailed breakdown of support costs:		
Rent	6,892	4,838
Office costs	1,710	90
Telephone & Internet	1,341	1,372
Computer costs	3,831	2,697
Insurance	484	549
Printing, postage & stationery	5,305	4,449
Staff welfare	315	285
Training, recruitment & internship costs	1,708	-
Book-keeping	685	-
Entertaining	122	-
Bank charges	1,147	619
Audit and accounts	2,070	480
Support cost reallocation – cost of generating funds	(13,932)	(13,396)
Support cost reallocation – raising awareness	(3,238)	(1,503)
Support cost reallocation – funding research	(1,182)	-
Support cost reallocation – medical education	(5,188)	-
	2,070	480

9. TRUSTEES

None of the trustees (or any persons connected with them) received any remuneration during the year and none of them were reimbursed travelling expenses (2012: 2 were reimbursed £1,834)

NOTES TO THE ACCOUNTS

10. EMPLOYEES

	2013	2012
	£	£
Employment costs		
Wages and salaries	51,581	4,275
Social security costs	4,005	305
	55,586	4580

There were 4 part-time employees and 1 full-time employee employed at various points during the year. This is equal to 2 full-time equivalents.

No employee received remuneration in excess of 60,00 in the year.

11. TAXATION

The company is a registered charity and is, therefore, exempt from taxation.

12. TANGIBLE FIXED ASSETS

	Computer equipment
	£
Cost	
At 1 January 2013	-
Additions	620
At 31 December 2013	620
Depreciation	
At 1 January 2013	-
Charge for the year	116
At 31 December 2013	116
Net book value	
At 31 December 2013	504

NOTES TO THE ACCOUNTS

13. DEBTORS

	2013 £	2012 £
Trade debtors	1,541	5
Prepayments and accrued income	4,292	-
	5,833	5

14. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2013 £	2012 £
Trade creditors	11,195	6,422
Taxes and social security costs	1,695	305
Accruals	2,550	480
	15,440	7207

15. SHARE CAPITAL

Pancreatic Cancer Action is a company limited by Guarantee and consequently does not have share capital. Each of the directors is liable to contribute an amount not exceeding £10 towards the assets of the charity in the event of a liquidation.

16. RESTRICTED FUNDS

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

MOVEMENT IN FUNDS

	BALANCE AT 1 JANUARY 2013 £	INCOMING RESOURCES £	RESOURCES EXPENDED £	BALANCE AT 31 DECEMBER 2013 £
Patient information booklets	-	11,350	(5,158)	6,192
Symptom Study	-	3,700	(3,700)	-
	-	15,050	(8,858)	6,192

Restricted funds relate to grants received for the specific purposes as set out above. Any amount unspent is carried forward to be spent in the next financial year

NOTES TO THE ACCOUNTS

17. DESIGNATED FUNDS

The income funds of the charity include the following designated funds which have been set aside out of unrestricted funds by the Trustees for specific purposes:

MOVEMENT IN FUNDS:

	BALANCE AT 1 JANUARY 2013	TRANSFER FROM UNRESTRICTED FUNDS	BALANCE AT 31 DECEMBER 2013
	£	£	£
Awareness advertising campaign	-	85,000	85,000
Patient information booklets	-	8,000	8,000
	-	93,000	93,000

18. ANALYSIS OF NET ASSETS BETWEEN FUNDS

	UNRESTRICTED	DESIGNATED	RESTRICTED	TOTAL
	£	£	£	£
Fund balances at 31 December 2013 are represented by:				
Tangible fixed assets	504	-	-	504
Current assets	199,362	93,000	6,192	298,554
Creditors: amounts falling due within one year	(15,440)	-	-	(15,440)
	184,426	93,000	6,192	283,618

19. ULTIMATE CONTROLLING PARTY

The charitable company is controlled by the Trustees who are all directors of the company.

CONTACT INFORMATION

Contact us

PANCREATIC CANCER ACTION

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