

# TRANSFORMING OUR IMPACT

Our annual report  
and accounts for  
2022 – 2023

BREAST  
CANCER  
NOW The research &  
support charity

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We're here

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The Pink Ribbonwalk at Blenheim Palace



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Unless noted otherwise, the facts and statistics stated in this report relate to the period 1 August 2022 to 31 July 2023.

Breast Cancer Now is a company limited by guarantee registered in England (9347608) and a charity registered in England and Wales (1160558), Scotland (SC045584) and Isle of Man (1200).

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# NAVIGATING CHALLENGES AND CELEBRATING SUCCESSES...

**A message from our chief executive, Delyth Morgan and chair of trustees, Jill Thompson**



**Baroness Delyth Morgan**  
Chief executive,  
Breast Cancer Now



**Jill Thompson**  
Chair of trustees  
Breast Cancer Now

**First of all, a heartfelt thank you to all of you who have so generously given your time, your energy, your voices and your donations. So that we can turn the tide on breast cancer together.**

We're enormously grateful to everyone who's dedicated to helping us achieve our vision. That by 2050, everyone diagnosed with breast cancer will live and be supported to live well.

It's been a busy year. But it feels as though we're now in a strong position following the challenges of COVID-19.

We've pivoted to cope with the changes brought about by the pandemic and drawn on everything we learned during that time. We're now able to reach more people who need our support. We've expanded all of our face-to-face and online services, including those for younger women with breast cancer, for people with incurable secondary breast cancer and for those adjusting to life after treatment.

This year we've focused on groups that have been underserved in the past, particularly black women, South Asian women and those from more deprived areas. By reaching more people, we can transform not just the support they get, but their experience of living with breast cancer.

As part of this activity, we've developed animations and translated our public health videos into 13 different languages. And created 4 short films about breast screening that feature women from black and South Asian backgrounds.

We've strengthened our support for healthcare professionals, who are a vital link to the people and communities who need our services.

We've set up a new strategic team to focus on our insight and impact evaluation. So we can concentrate on the areas that matter most to people affected by breast cancer, making sure we're totally in step with what they want and need.

Meanwhile, our research continues to deliver extraordinary results. To highlight just one of this year's outstanding discoveries, our researchers have developed an AI model to predict the risk of secondary triple negative breast cancer. One day, it could help doctors plan more tailored treatment based on the likelihood of breast cancer spreading. It could save lives, and reduce stress and worry.

By funding world-class research like this, led by some of the brightest minds in the field, every day we're working towards new breakthroughs that could save more lives. And this financial year we're delighted that we've been able to commit almost £16 million to funding vital research.

Turning to our campaigning work, we're delighted that olaparib – a potentially life-saving treatment for primary breast cancer – was approved for use on the NHS in England in April 2023. Thank you to each of the 70,651 people who signed our petition and proved just what we can achieve together.

This year we also launched a new phase of our #NoTimeToWaste campaign, calling for more government investment in breast screening. And we continued to call for more ambitious targets for diagnosis. Shorter waiting times and earlier detection are essential to helping save lives, so we're determined to hold those in power accountable.

When we look back at this year, we can see just how much we've achieved. But there's still so much more to do.

The number of people diagnosed with breast cancer has risen by about 17% over the last decade and looks set to carry on rising. Our absolute priority is to make sure we're here for everyone.

**IT'S BEEN A BUSY YEAR. BUT IT FEELS AS THOUGH WE'RE NOW IN A STRONG POSITION FOLLOWING THE CHALLENGES OF COVID-19.**



The environment is challenging, but we know what we need to do to achieve our 2050 vision. We also know that it's impossible for us to do it alone. That's why we need you, our supporters, by our side as we step into the future and make the changes that will turn the tide on breast cancer.

Together, we can do it. Let's make it happen.

**With huge appreciation,**

**Delyth Morgan**  
Chief executive

**Jill Thompson**  
Chair of trustees

# OUR 5 STRATEGIC OBJECTIVES



**To work to improve treatments, care, and services for those affected by secondary breast cancer.**

So that fewer lives are lost to secondary breast cancer – and fewer people feel forgotten by a system focused on “cure”.



**To improve support for the physical and mental health, and the emotional wellbeing of people affected by breast cancer.**

So that no one has to face breast cancer alone and unsupported.



**To develop kinder, smarter treatments for people with breast cancer and to improve access to them for all who could benefit.**

So that people with breast cancer can benefit from more effective treatments that don't rob them of their quality of life.



**To improve detection and diagnosis of breast cancer.**

So that everyone with breast cancer has the very best chance of survival.



**To further our understanding of why breast cancer occurs and spreads.**

So that fewer people develop breast cancer in the first place.

**Our commitment to equality, diversity and inclusion**

We're here for everyone affected by breast cancer. So it's vital that we do everything we can to be an inclusive organisation that truly reflects the needs of the people we support.

Our ambitions will include:

- Increasing inclusivity in the ways we deliver our charitable work
- Reaching more diverse communities with our health messages, support services and research
- Reducing and removing the differences in breast cancer survival outcomes based on ethnicity, geography and socioeconomic group
- Making sure that our support services and NHS care is accessible to and used by all
- Reducing the differences in screening attendance and awareness between ethnic and socioeconomic groups
- Understanding the reasons for variation in incidence between different groups, and working to reduce these where we can.



# STRATEGIC OBJECTIVE

# #1

To work to improve treatment, care and services for those affected by secondary breast cancer





## 2022-23 highlights

- Expanding our secondary breast cancer services, reaching 483 people face-to-face and 295 online (compared to 334 people face-to-face and 417 online in 2021-22)
- Supporting younger women with secondary breast cancer, reaching 58 people in face-to-face events and 38 people through online courses (compared to 41 people face-to-face and 33 online in 2021-22)
- Funding researchers who have developed an AI model to predict the risk of secondary breast cancer
- Investing in 4 new research projects worth almost £900,000 that could find new treatments for secondary breast cancer

## Of the 11,500 people who die each year from breast cancer, the vast majority have secondary breast cancer.

Secondary breast cancer occurs when breast cancer cells spread from the first (or primary) cancer in the breast to other parts of the body, through the lymphatic or blood system. The most common areas breast cancer can spread to are the bones, the lungs, the liver and the brain.

Secondary breast cancer can be treated, but it can't be cured. So it's vital to support people with secondary breast cancer to live well for as long as possible.

We currently estimate that over 61,000 people are currently living with secondary breast cancer in the UK. This figure represents a vast number of people who are living with a disease that's frequently misunderstood and overlooked.

A diagnosis of secondary breast cancer often comes as a huge shock and can leave people feeling very isolated. It can weigh heavily, both on the person with secondary breast cancer, as well as on their friends and family.

And many people with incurable secondary breast cancer experience delays in diagnosis, struggle to access the support of a specialist nurse and fear they won't be able to get the treatment they need in the future.

That's why we're campaigning for faster diagnosis, better treatments and support from professionals who understand the impact of secondary breast cancer.

**Here are some of the ways that we're working to bring about change...**

### Reaching more people with secondary breast cancer

#### ... by understanding what people want

After listening to the views of hundreds of people living with secondary breast cancer, we identified gaps in support. This gave valuable insights that will help us plan and grow our services in the future.

#### ... by improving digital access

We've significantly improved the way people can get information about secondary breast cancer on our website by making it more accessible and easier to navigate.

#### ... by strengthening our team

This financial year, we increased the size of our team that provides dedicated services for people living with secondary breast cancer. This includes 7 new therapist facilitators to help expand our Living with Secondary Breast Cancer service.

#### ... by bringing people together for support

We've reached out to people across the UK and set up new monthly face-to-face groups in Bedfordshire, Edinburgh, Oxford, Wrexham and central London.

Altogether, 30 groups are now up and running. So far, this service has supported 483 people who are living with secondary breast cancer (compared to 334 people in 2021-22). Adding up to 4,219 hours of support.

Meanwhile, our online services enable people to access support wherever they are. As we transition back to more in-person support following COVID-19, this year, 209 people have attended 81 monthly online groups (compared to 284 people in 2021-22), totalling 822 hours of support. Expert speakers have also shared their knowledge. We ran the first triple negative breast cancer Speakers Live event in September 2022 and now have a rich programme of specialist talks.

**Group members told us:**

“I will be forever grateful for the information, friendship, positivity and laughs.”

“There is always one of us that has been through side effects or problems and we can share our fears, worries, side effects and help each other try to resolve issues.”

“I can’t express how much the online group improved my confidence to ask for better treatment from my medical team.”

**In a survey of group members:**

- **73%** felt they had gained skills and techniques that help them cope with day-to-day living with secondary breast cancer
- **66%** felt more confident to talk to their treatment team and ask about their treatment and care
- **69%** felt they were better able to manage the emotional and psychological effects of secondary breast cancer

**... by supporting younger women with secondary breast cancer**

Finding out you have secondary breast cancer at a younger age can be especially isolating. This year we supported 75 younger women, totalling more than 450 hours of support, and helping them to feel less alone (compared to 41 women in 2021-22).

We also held monthly virtual sessions specifically designed to meet the needs of younger women living with secondary breast cancer. In total, 28 women attended our online gatherings, totalling 69 hours of support (compared to 21 women in 2021-22).

“It was good to meet women with secondary cancer. It was lovely to be around women in a similar situation. We may not be in exactly the same boats, but we are in the same sea.”

“In real life, we so often choose to – or have to – carry on and put a brave face on. Being surrounded by women in the same position who automatically have that understanding is such a relief.”

“The conference was extremely professional. The Breast Cancer Now people made everything absolutely seamless and helped me feel cared for every single time I asked a question or made a comment.”

... by raising awareness of symptoms with healthcare professionals and women with a primary breast cancer diagnosis

If we want to improve the speed of diagnosis, it’s vital that people know how to spot secondary breast cancer. This year, we worked with Synergy Healthcare Research to conduct an online survey with 204 GPs and 51 practice nurses to discover how much they know about the most common signs and symptoms of secondary breast cancer.

We made the stark discovery that a third of GPs don’t feel they have a good understanding of the main symptoms.

As a result, we ran 2 marketing campaigns in autumn 2022 and summer 2023 to raise awareness of the signs and symptoms of secondary breast cancer, funded by The Patricia Swannell Appeal. We aimed the campaigns at 2 key audiences: healthcare professionals and women with a primary breast cancer diagnosis.

In these campaigns:

- **7,000** information packs were distributed to GPs
- **90,000** leaflets were delivered to 3,000 surgeries
- Our webpage was viewed over **50,000** times

### Carrying out life-changing research

We're funding exciting new research that has the potential to predict and treat secondary breast cancer.

#### Research progress: new AI model predicts breast cancer

At the Breast Cancer Now Research Unit at King's College London, Professor Anita Grigoriadis has developed an AI model that can predict if triple negative breast cancer is likely to spread and become secondary breast cancer. The researchers hope that this AI model will be tested in clinical trials and that it could one day assist doctors in planning treatment.

### New research in the pipeline

Over the next few years, we're looking forward to seeing the results of 4 new research projects we're funding into detecting and treating secondary breast cancer.

#### Personalised therapies

Professor Elinor Sawyer from King's College London is looking for new ways to tell which people whose lobular breast cancer has returned may benefit from personalised therapies. This project could help us better identify which patients should receive more intense treatment.

#### New drug combination

Professor Penelope Ottewell from the University of Sheffield is testing a new combination of drugs to treat secondary breast cancer that's spread to the bone. She's investigating whether radium-223 can be combined with other drugs to make it more effective. This could lead to new treatments for secondary breast cancer in the bone.

#### Targeting oestrogen receptors

Professor Simak Ali from Imperial College London is working to better understand the oestrogen receptor (ER) gene. Understanding how changes in this gene contribute to cancer's resistance to hormone therapy could lead to better treatments for people with secondary ER-positive breast cancer.

### Understanding triple negative breast cancers

Dr Sankari Nagarajan from the University of Manchester is investigating whether specific drugs can stop triple negative breast cancers from spreading around the body. Her work could eventually lead to new treatments for some triple negative breast cancers.

### Gaining industry funding

During 2022-23, we received over £125,000 from the pharmaceutical industry towards our face-to-face and online secondary breast cancer support services, such as Living with Secondary Breast Cancer.

Additionally, Eli Lilly and Company Limited and Roche Products Ltd jointly sponsored our Service Pledge, a programme dedicated to improving breast cancer services.

This funding has allowed us to continue providing direct high-quality support to people living with secondary breast cancer, as well as working closely with national Cancer Alliances, many of whom have identified ways to improve their information and support for secondary breast cancer patients.

Lilly UK and Roche have not had any control or input into the programme.



## Accelerating change through philanthropic support

### ... by researching early detection

In this financial year, The Patricia Swannell Appeal has supported research into the early detection of secondary breast cancer and into discovering more effective treatments. This research is led by Professor Nick Turner and his team at the Breast Cancer Now Toby Robins Research Centre at the Institute of Cancer Research.

Professor Turner's team is aiming to develop more sensitive and accurate blood tests to detect the presence of tiny amounts of cancer cells left after treatment. This research has already shown that signs of secondary breast cancer can be detected in the blood nearly 11 months before secondary tumours show up on scans.

The team hopes this could allow treatments for emerging secondary breast cancer to start earlier, which could lead to better outcomes.

### ... by finding better ways to treat the disease

Professor Turner is also working to better understand what causes certain treatments to stop working in patients with secondary breast cancer, and to find better ways to treat the disease.

An element of this work involves identifying the best way to select patients for the most appropriate treatment so that everyone can benefit from truly personalised medicine.

## Gathering evidence and influencing policy

### ... by helping to shape audits on breast cancer

Since our last report, work has progressed on the 2 new national breast cancer audits (for primary and secondary breast cancer) that will cover England and Wales.

These audits will produce information on the diagnosis, treatment and care of people with primary and secondary breast cancer which will enable improvements to be made. This is especially important for those with secondary breast cancer, where data has not been collected.

At the beginning of 2023, we were involved with scoping surveys run by the National Audit of Metastatic Breast Cancer and the National Audit of Primary Breast Cancer. These audits on the issues affecting treatment and care for people with breast cancer are 2 of 6 new national cancer audits to be delivered by the National Cancer Audit Collaborating Centre.

The surveys generated a fantastic response and the results will help shape future work from the audits, to improve the quality of care for those living with primary and secondary breast cancer. We look forward to carrying on working with the audits, and to the first reports in 2024.

### ...by campaigning for better data collection

We continued to campaign for a secondary breast cancer audit in Scotland by engaging with politicians, clinicians and patients. We were delighted to secure a commitment for improved data collection for secondary breast cancer within the new Scottish Cancer Strategy.

### ...by gathering insights to improve early diagnosis

This year, we continued to focus on improving rapid diagnosis for secondary breast cancer.

Our research indicated that GPs wanted information on the most common signs and symptoms. As a result, we worked with GatewayC to support the roll-out of their breast recurrence course in England. We're pleased that this is now available to healthcare professionals in Wales and will also be rolled out in Scotland.

From a patient perspective, many people who've had primary breast cancer tell us they weren't given enough information about the potential symptoms of secondary breast cancer. We were therefore concerned by NICE's proposal to remove the recommendation from its clinical guideline on follow-up. Following our letter to NICE, it was confirmed that this recommendation would be retained in the guideline.

# THE PATRICIA SWANNELL APPEAL FOR SECONDARY BREAST CANCER

**Patricia Swannell was diagnosed with primary breast cancer in 2007. After a mastectomy, chemotherapy and radiotherapy she went on to celebrate her 5-year all-clear anniversary. And continued her medication for another 9 years.**

In 2019, Patricia started to experience pain in her hips and joints. She was told it was a side effect of the medication she was taking but in September 2021, Patricia was diagnosed with secondary (metastatic) breast cancer.

Patricia wasn't aware of the risk of cancer returning or the symptoms of secondary breast cancer. And felt that had she known more about the symptoms, she would have been able to self-advocate more effectively.

Driven by a selfless passion and determination to make a difference for those who come after her, Patricia devoted the last 18 precious months of her life to driving change for people affected by secondary breast cancer.

With the loving support of her family, The Patricia Swannell Appeal for Secondary Breast Cancer was set up in 2022. Its aims are to fund critical work in:

- Raising awareness of the signs and symptoms of secondary breast cancer



**PATRICIA DEVOTED THE LAST 18 PRECIOUS MONTHS OF HER LIFE TO DRIVING CHANGE FOR PEOPLE AFFECTED BY SECONDARY BREAST CANCER.**

- Supporting healthcare professionals with education and training
- Developing better testing, diagnosis and treatment through funding research to tackle the challenge of dormancy. So that we can understand why some breast cancer cells lay inactive, undetected and unaffected by treatments for many years before reawakening and leading to secondary breast cancer

Patricia's strength and stoicism inspired so many people. Her unwavering commitment to raising awareness of secondary breast cancer and bringing about change for people affected by it will live on through her appeal for years to come.

We're incredibly grateful to Patricia, her husband Robert and her family. And to everyone who has supported The Patricia Swannell Appeal which has raised over £1 million for Breast Cancer Now.

# STRATEGIC OBJECTIVE

# #2

To improve support for the physical and mental health, and emotional wellbeing of people affected by breast cancer





## 2022-23 highlights

- Supporting 14,125 people affected by breast cancer or with breast health concerns through our helpline and Ask Our Nurses service (compared to 13,809 people in 2021-22)
- 806 people were referred to us for support by their healthcare professional through our Here for You service (compared to 463 referrals in 2021-22)
- Connecting 1,693 people with breast cancer with trained volunteers through our Someone Like Me service (compared to 1,533 matches in 2021-22)
- Growing our Moving Forward service and helping 2,213 people to adjust to life after treatment (compared to 1,283 people in 2021-22)
- Investing over £670,000 in 4 new research projects exploring how to support women and address inequalities

It can be devastating to receive a diagnosis of breast cancer. When people first get the news, they often go through a whole range of emotions, from fear, shock and anger to disbelief, sadness and numbness.

In many cases, people also need to share the news with friends and family, and then face the reactions of their loved ones.

The days and weeks immediately after a diagnosis can be particularly overwhelming.

That's why we've put in place a network of support that helps people cope with breast cancer at every stage, from the initial diagnosis through to post-treatment care.

We know it can make all the difference to talk to people who've had similar experiences. So we've set up services that bring people together to share those experiences and support each other.

We also work closely with healthcare professionals to make sure that they're equipped with the latest information and can put people in touch with our support services.

**WE'VE PUT  
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At the same time, we're leading campaigns to raise awareness. And funding research that explores new ways to support the physical and mental health of people affected by breast cancer.

"I was in a state of shock when I was diagnosed with breast cancer. I felt scared and worried and did not know what to expect from the treatment.

Talking to the volunteers helped me to understand more about the surgery and the treatment plan. It helped me to put my mind at ease and I also got practical tips from them."

**Support service user**

Here's a round-up of some of our latest work in this area over the last financial year...

### Identifying what people need and want

#### ...by listening to women with breast cancer

We've carried out research with DJS Research to look into the needs of people with breast cancer who've been diagnosed since 2019. This involved 50 qualitative interviews and a survey which was completed by 530 people.

The findings encouraged us to focus more resources on:

- Supporting people with secondary breast cancer
- Providing more support services in more locations
- Reaching more people from more diverse backgrounds
- Demonstrating the impact of our services more effectively

We've recently recruited an equity, diversity and inclusion lead to make sure that our services reach more people from currently under-represented groups.

#### ...by asking for feedback from hospital staff and patients

We've liaised with a wide range of patients and hospital staff to discover how to improve breast cancer care and support. We already work across 2 Cancer Alliances in West Midlands and Lancashire and South Cumbria to deliver the Service Pledge. The Service Pledge works with hospitals to introduce improvements in breast cancer care, based on patient, carer and staff feedback.

We worked with 7 hospitals in these Cancer Alliances and sent surveys and focus group invitations to 3,449 people diagnosed with breast cancer and 421 hospital staff. We asked for feedback on primary and secondary breast cancer pathways, which will help us identify which areas of breast care services are working well and which need improvement.

We also held discussions with patients and hospital staff across 5 hospitals in the South Yorkshire Cancer Alliance. This exercise identified over 90 improvement goals, nearly half of which have now been implemented. The goals included increasing the number of Holistic Needs Assessments carried out for patients and improving information and signposting to support services.

### Offering the right support at the right time

#### ...by providing a free, confidential helpline

Our helpline continues to provide vital information and support to anyone affected by breast cancer or with a breast health concern. We also offer an Ask Our Nurses email service, which has increased its reach by 13% from 2021-2022.

Last year our helpline and Ask Our Nurses supported 14,125 people affected by breast cancer:

- We spoke to 11,155 people on our helpline and called a further 131 people following a referral from the Here for You team
- 2,839 people received a requested, written response via Ask Our Nurses

In a survey of people who contacted the helpline, 92% reported feeling less alone after calling and 95% said they were better informed. Of those living with breast cancer, 76% said they now felt better able to manage the symptoms or side effects they were experiencing.

"I can't recommend using the helpline enough. Both times I've needed to speak to someone I've been able to.

I felt supported and given the time I needed to talk, with helpful advice and reassurance. Thank you so much for being there."

Helpline caller

In the last year, the top 5 reasons for calling the helpline were to talk about:

- Treatment and side effects
- Emotional support
- Symptoms
- Screening
- Moving on after treatment

**...by sharing printed information**

In the last year, we distributed 1,160,678 printed booklets and leaflets containing vital information about breast cancer (compared to over 992,000 in 2021-22).

Our most popular leaflets were:

- Know your breasts: a quick guide
- Breast pain
- Exercises after breast cancer surgery
- Family history of breast cancer
- Breast cysts

We also published 2 issues of Vita, our magazine for people living with or beyond breast cancer.



**IN THE LAST YEAR, WE  
DISTRIBUTED 1,160,678 PRINTED  
BOOKLETS AND LEAFLETS  
CONTAINING VITAL INFORMATION  
ABOUT BREAST CANCER**



**...by sharing information digitally**

This year, we had 2,895,732 unique views of our online information and support pages.

The most visited pages included:

- Signs and symptoms of breast cancer
- Secondary breast cancer symptoms
- Side effects of anastrozole
- Side effects of radiotherapy
- Fibroadenoma
- Touch Look Check campaign page

Our award-winning free app, Becca, continued to support users through their primary breast cancer diagnosis, by featuring inspiring stories, hints and tips, and information.

Meanwhile, we've also updated our forum. We've migrated over 1.3 million posts and 20,000 users to a modern platform that is easier to use and navigate. Following the launch of the new forum in August, we're already seeing improved user engagement, with rates increasing from 76% to 83%, and the average engagement time rising from 5 minutes to over 8 minutes.

**...by sharing information in hospitals and in the community**

We provide information points. Most of them are in hospital breast clinics. Our information point volunteers work with hospital staff to make sure their information points are stocked with information that's up to date, relevant and tailored for the local area.

This year we rebranded 142 information points and extended our reach with a further 14, including our first ever information point in Northern Ireland and our first stand in a community setting.

**...by providing support after a recent diagnosis**

Here For You continues to flourish. Making sure people who've recently found out they have primary or secondary breast cancer get the support they need.

The service works through referral. Once people are diagnosed, a healthcare professional refers them to Here For You. Then one of our trained volunteers will get in touch, offering information, support, empathy and guidance. Recently, 16 new NHS Trusts in England have signed up to Here for You, meaning that healthcare professionals will be able to refer their patients to the service.

In the last year:

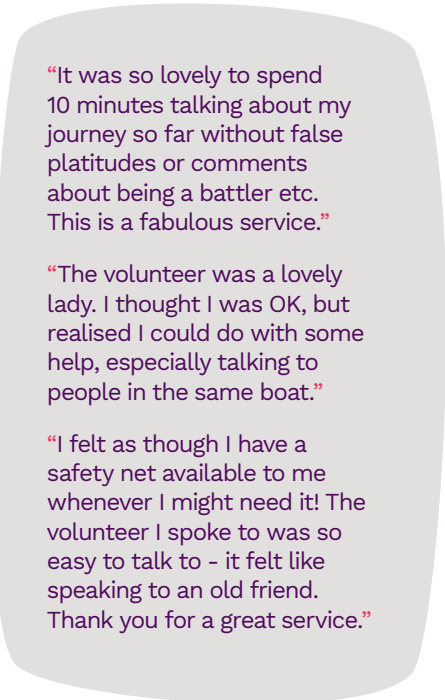
- Healthcare professionals referred 806 people to the service.
- 1,518 calls were made to people diagnosed with breast cancer

- 82.8% of service users said they would recommend their healthcare professional referring other patients to Here for You

The referral route has reached a diverse group of NHS patients, with 17% of people referred coming from minority ethnic groups.

Here for You is one of several of our initiatives made possible thanks to funding raised by players of People's Postcode Lottery and awarded to us by Postcode Care Trust.

People who were referred to Here for You told us:



**...by connecting people with a similar experience**

Someone Like Me celebrates its 50th year on Christmas Eve 2023. The service gives people a chance to talk to a trained volunteer who's had a similar experience to them. This person can answer questions, offer support or simply listen.

This financial year, Someone Like Me matched 1,693 people (1,493 by phone and 200 via email) with our trained volunteers.

The service now has 242 volunteers, including 31 volunteers who speak languages other than English. We offer 20 different languages, with the latest addition being Farsi. We also use the LanguageLine interpreting service to make our support available to as many people as possible.

"My volunteer was just what I needed after diagnosis. It's so easy to fall into the trap of thinking that cancer is the end of life as you know it.

She helped me see that there could be a life afterwards. She taught me the importance of advocating for myself and always pushing my doctors for clear answers. She also made me laugh at a time when there wasn't much else to laugh at!"

**Someone Like Me user**

**...by helping people to adjust after treatment**

Over the last year, our Moving Forward service has continued to grow and reach more people.

Moving Forward gives people the tools to adjust to life beyond primary breast cancer. It connects them with other people who understand that you don't always feel "back to normal" when you finish hospital treatment.

Last year, we delivered 185 face-to-face and 54 online Moving Forward events to 2,213 people – a rise of 930 compared to the previous year. In total, Moving Forward provided 15,238 hours of support.

In the 2022 evaluation of Moving Forward, participants reported experiencing improvements in their knowledge, confidence and emotional wellbeing. 91% said they'd recommend the service to other people affected by breast cancer.

"The period from ending my treatment left me feeling isolated and quite alone. This course was the most welcome experience. I now feel I can finally 'move forward' from my treatment and diagnosis and manage my emotions."

**Moving Forward user**

"The course helped me connect to other women who have been through the same cancer treatment journey. I don't feel so alone now and I feel lucky to have a group of people I know I can turn to."

**Moving Forward user**

**...by helping younger women to help each other**

Most women diagnosed with breast cancer are over 50. This means that younger women with breast cancer can feel particularly isolated, as well as facing additional issues relevant to their stage in life, like work or fertility.

Younger Women Together gives people aged 20 to 45 the chance to meet other women their age who understand what they're going through. In the last year, we held 9 Younger Women Together one-day events, supporting 141 women in total.

Before the events, 59% of service users knew about the ongoing physical and emotional effects of breast cancer treatment. This rose to 94% after the event. Similarly, before the events, only 33% knew how to manage the physical and emotional effects of breast cancer. After the event, 94% were confident they now had that information.

We also ran our Younger Women Together online course 3 times during the year. These 4-week courses gave 66 women access to support and enabled them to share their experiences and learn from expert speakers.

In addition, 117 people accessed online Speakers Live events where they could ask experts questions on a range of relevant topics.

“Meeting like-minded people who have been through a similar experience is really important. It’s so nice to not have to over-explain. Sometimes that connection of a shared experience is a game changer – you realise you’re not on an island alone.” **Younger Women Together user**

“It really helped me to keep things in perspective and manage my emotions more effectively.” **Younger Women Together user**

“I finally met some people similar to my own age who have the same issues, worries, concerns and anxieties as I do.” **Younger Women Together user**

**Getting our message out there**

**...by promoting our services to patients and professionals**

This year, we promoted the following services to people with a breast cancer diagnosis and healthcare professionals:

- Younger Women Together
- Someone Like Me
- Moving Forward
- Living with Secondary Breast Cancer

Our goals were to increase awareness and understanding of these services and to encourage people to sign up for them.

The campaign drove 38,883 landing page views among our patient audience and 6,439 landing page views from healthcare professionals, and successfully achieved an increase in registrations to our services.

**...by running online sessions**

This year, we delivered 38 live sessions across our social media channels that achieved a combined 931,000 views. They featured topics ranging from breast reconstruction to support for LGBTQ+ people, financial help and clinical trials.

We worked with organisations such as Live Through This and Macmillan Cancer Support, as well as hosting conversations with our funded researchers to make their work more accessible to our supporters.

During the sessions, we received almost 4,000 comments, showing a high level of engagement.

The majority of people who participated in our follow-up survey reported feeling more informed about the subject, more supported, and more confident to ask questions and explore different areas of support.

Importantly, 86% of people in our survey said that as a result of watching the live session, they would take further action such as:

- Registering for another one of our services
- Accessing health information on our website
- Speaking to their breast care team, oncologist or GP about their breast cancer concerns

“I find the live sessions as comforting now as I did whilst going through treatment. Always so informative and relatable. Makes you feel less alone – there is someone to turn to after active treatment is finished.” **Live session viewer**



“Taken the advice given during the interview on managing fatigue by giving myself permission to power nap and not feeling guilty afterwards.”

**Live session viewer**

“Thank you for making this live session so accessible. I was able to sit outside on my patio this evening just being comfortable and learning all the while”

**Live session viewer**

### **Working with trusted partners**

This year, we carried on finding innovative ways to support people living with breast cancer through joint events and initiatives with our trusted corporate partners.

### **Navigating work and cancer**

In May, we held our second panel event on navigating work and breast cancer. It was hosted by Sophie Blake, who is living with stage 4 breast cancer.

We curated a diverse group of women for the panel, all of whom have lived experience of breast cancer. This enabled an honest and in-depth discussion of the impact of breast cancer on a woman’s job, career and role in the workplace.

Our partners played an important role in the event. Jo Warner, Asda’s senior director of corporate affairs, featured as a guest on the panel. Jo openly shared her own experience of navigating work and breast cancer and how having a supportive employer was key to being able to manage her treatment and work.

Attendees included members of the breast cancer community, as well as a selection of companies and existing partners who wanted to learn more about the support they can offer employees who are going through breast cancer.

### **Post-surgery bras at Marks & Spencer**

We’ve continued to work with M&S to evolve their post-surgery product range by combining their knowledge of bra design, our insights and the lived experience of women with breast cancer.

We’ve also worked closely with M&S to develop new post-surgery bra fit training. So all M&S bra fitters feel informed about breast cancer and equipped to support the emotional wellbeing of people looking for a post-surgery bra.

### **Asda hosts Moving Forward events**

Asda has hosted 3 of our Moving Forward events at its Cardiff Bay store in a newly refurbished community room. Asda provided this space and refreshments free of charge so that women who had recently finished treatment for primary breast cancer could meet up and get support in adjusting to life post-treatment.

### **Encouraging best practice ...by engaging and informing healthcare professionals**

This year, we continued to work closely with healthcare professionals to make sure that people living with breast cancer get the best possible support for their physical health and emotional wellbeing.

2,213 healthcare professionals have signed up to receive our monthly email bulletin.

We’re also delighted that there are now 1,726 people in our Nursing Network, which is designed for nurses in current clinical practice who work with – or have an interest in – breast care.

Within the network, we have nurse champion groups, such as the secondary breast cancer nursing group, younger women and breast cancer group, and family history and genetics group.

Members shared their views:

“As always, good to network and share best practice.”  
(Secondary breast cancer group)

“Wonderful to see everyone - I always leave feeling more positive about the job in general and grateful to know we share common experiences, good and bad!” (Secondary breast cancer group)

“I learnt a lot about services I wasn't aware of. Here For You is a great service – it will be fantastic for our patients.”

**Live session viewer**

This year, we developed a new healthcare professional hub for educational material. It brings together useful information on events, resources and revalidation support for nurses, as well as links to resources for patients.

We also continued putting on webinars for healthcare professionals. These covered a variety of subjects from supporting nurses, lymphoedema and exercise and lifestyle.

### **Funding research into care and treatments**

Our research programmes are looking into innovative ways to improve support for the physical and mental health, and emotional wellbeing of people affected by breast cancer.

#### **Reducing fatigue**

Dr Sam Orange from Newcastle University is looking at ways to better support women with diet and exercise after breast cancer treatment. The hope is that this will help with the long-lasting low mood or extreme tiredness that people can experience after treatment. It may also help reduce the risk of a second breast cancer diagnosis.

#### **Health inequalities**

Mental health problems, remote living, socio-economic status and other inequalities can all have an impact on breast cancer diagnosis and treatment. Professor Chris Cardwell from Queen's University Belfast is investigating their impact in Northern Ireland. By understanding which women experience the greatest health inequalities, researchers will be able to find the best ways to address these issues.

### **Black women and breast cancer care**

Professor Robert Horne and Dr Zoe Moon at University College London are investigating what black women think about their breast cancer treatment and care in the UK. There is a particular focus on hormone therapy. This research could help improve the quality of care for black women who have breast cancer, as well as identifying unmet needs in treatment and support.

### **Black women and hormone therapy**

Hormone therapy often lasts for several years and can have challenging side effects. Dr Lyndsay Hughes from King's College London is investigating when black women take their medication and how their culture influences their experiences and expectations. This will help the researchers to produce educational materials for healthcare professionals, patients and support groups, so they can tailor their support for black women.

## Campaigning to influence people and policy

### ...by working with other charities

We continue to be a member of the Richmond Group of Charities, a collaboration of 15 leading health and social care charities. The group works as a collective voice to influence health and care policy, with the aim of improving the care and support of the 15 million people living with long-term conditions.

Our public health inclusion and awareness team sits on the Movement for All group, part of the Richmond Group's portfolio. This group oversees improving physical activity within the culture and output of member organisations.

### ...by being part of We Are Undefeatable

We Are Undefeatable is a campaign developed through Movement for All and funded by Sport England. It aims to change the way we talk about physical activity for people living with long-term health conditions and help them incorporate physical activity into their lives.

Results so far show that 45% of people surveyed felt inspired by the campaign. As 1 respondent said: "When I watched the advert I thought, I can do that, I can do some of that, I'm going to give it a go, and it's working."

We supported the campaign over 2022-23, both digitally and through our services, and:

- **5,466** impressions were gained via Twitter
- **117** women were reached via our services
- **680** volunteers got information about the campaign and resources in our volunteer newsletter

We also shared the campaign website with a total of 301 women from underserved communities, through our Empowering Women group, Islamic Reflections, Information and Events group, and Sales, Swaps, Freebies and Events group.

We've committed to supporting We Are Undefeatable again in 2023-24.

### ...by working to improve access to breast reconstruction

We published our report *Delivering Real Choice* during Breast Cancer Awareness Month 2022. This sets out the issues related to access to breast reconstruction in England, which have been worsened by the pandemic, and makes recommendations for improvements.

The report was based on a patient survey, Freedom of Information requests and a landmark summit event for clinicians.

To make sure the recommendations in the report are implemented swiftly, we formed 2 groups. One group is made up of clinicians and academics, including:

- Members of the Association of Breast Surgery
- Members of the British Association of Plastic Reconstructive and Aesthetic Surgeons
- The creators of the PEGASUS decision-making tool (which we funded)

The other group includes people who had been affected by the issues covered in the report.

The groups are working together, focusing on 4 objectives: clearing patient backlog, improving access to free flap services, sharing best practice, and enhancing patient choice.



# STRATEGIC OBJECTIVE #3

To develop kinder, smarter  
treatments for people with  
breast cancer and improve  
access to treatments for  
those affected



## 2022-23 highlights

- Successfully campaigning for ground-breaking treatment olaparib to be approved for NHS use
- Making sure several other new breast cancer drugs are also now available on the NHS
- Funding world-class research projects worth over £1.1 million that are developing kinder, smarter treatments for breast cancer
- Raising our concerns with all UK governments about the continued pressures facing the breast cancer workforce
- Tackling inequalities in tumour profiling tests

**Advances in science and technology have led to many exciting new treatments for breast cancer. However, current treatments have wide-ranging side effects that can be extremely debilitating.**

Pain and extreme tiredness are among the most commonly reported side effects of breast cancer treatment. However, the hidden effects – such as menopausal symptoms, loss of fertility, anxiety and depression – can affect people's quality of life, day after day after day.

Side effects can be traumatic, painful and emotionally upsetting, not just for the person who's having the treatment, but for their friends and family too. That's why we're so determined to deliver kinder, smarter treatments for people with breast cancer and to improve access to treatments for those who are affected.

Here are some of the ways that we're working to achieve this goal...

### **Campaigning for better access to life-changing treatments**

**...by calling on NHS England to act**

Getting fast access to the drugs they need can be life-changing for people with breast cancer. Since 2017, nearly 20 new breast cancer drugs have been approved for use on the NHS in England, with 7 approved in 2022 alone.

The significant increase in treatment options available, including for patients with secondary breast cancer, is fantastic. But we need to make sure breast cancer services are supported and resourced to deliver them quickly and safely.

That's why we've been supporting breast oncologists and surgeons from across the majority of Cancer Alliances to shine a spotlight on this important issue and call on NHS England to act.

Our actions encouraged NHS England to set up a Task and Finish Group to look at the capacity and pressures facing services delivering cancer drugs, initially through the lens of breast cancer. We were invited to join the group to make sure the needs of patients were reflected. We'll be continuing this work so that the safe and timely delivery of breast cancer drugs is not put at risk.

**...by championing a groundbreaking treatment**

This year saw the success of our Olaparib Now campaign, with the groundbreaking and potentially life-saving treatment finally approved for use on the NHS in England.

This treatment could reduce the risk of cancer returning or progressing to incurable secondary breast cancer for certain patients with primary breast cancer who have an altered BRCA gene. Hundreds of patients may be eligible in England each year.

Olaparib was provisionally rejected for this use on the NHS in November 2022. But thanks to our campaign, in April 2023, that decision was reversed.

We couldn't have achieved this success without the help of thousands of supporters who backed our campaign. Over 70,000 people added their name to our petition while other people with experience of the drug shared their stories, explaining why it was so important for other people to access this drug.

Olaparib is also now available in Northern Ireland and Wales and a decision on its use in Scotland is expected in October 2023.

It's thanks to our researchers and their colleagues that olaparib has become a breast cancer treatment. Back in 2005, our researchers discovered that drugs like olaparib work really well in the lab against cancer cells with changes in the BRCA1 and BRCA2 genes.

"This breakthrough is testament to the outstanding work, over the last 20 years, of world-class researchers - including many UK researchers funded by Breast Cancer Now - who uncovered weaknesses in breast cancer cells and laid the foundations for olaparib becoming available."

**Says Dr Simon Vincent, Breast Cancer Now director of research, support and influencing.**

**Ensuring new breast cancer drugs are approved for NHS use**

The approval of olaparib is an example of our dedication to fighting for fair and equal access to treatments.

In the last year, we've continued our work alongside patient experts to improve access to new breast cancer drugs by inputting at every step of all assessments undertaken by the National Institute for Health and Care Excellence (NICE) and the Scottish Medicines Consortium (SMC).

Wales and Northern Ireland normally follow NICE decisions. This has helped to make sure that a number of important new drugs for primary and secondary breast cancer are now available on the NHS across the UK.

These include:

**Pembrolizumab (Keytruda) NICE has approved drug this treatment when it's used:**

- With chemotherapy before surgery and then on its own after surgery
- For people with triple negative primary breast cancer at high risk of recurrence or locally advanced breast cancer

For too long, patients with triple negative breast cancer have faced limited treatment options. This is an important step forward as it significantly reduces the risk of the cancer returning. Up to 1,600 patients may now be eligible for this treatment each year in England, and 89 patients in Scotland.

**Trastuzumab deruxtecan (Enhertu)**

This has now been approved for a wider group of patients with HER2-positive secondary breast cancer on the Cancer Drugs Fund in England, and for use in Scotland. About 600 people a year will be eligible to access this treatment in England, and around 32 people in Scotland.

**Trastuzumab**

The National Cancer Medicines Advisory Group in Scotland approved a reduced treatment duration of 6 months, or 9 cycles, for patients categorised as lower risk with HER2-positive primary breast cancer.

**Palbociclib (Ibrance) with fulvestrant**

Following re-assessment by NICE, this has now been approved for routine use for certain people with secondary breast cancer. This secured its future on the NHS and it's estimated that 2,400 women will be eligible each year in England.

**Abemaciclib (Verzenio)**

This drug was approved by the SMC for certain patients with hormone receptor positive and HER2-negative primary breast cancer.

**Making vital discoveries**

In the last year, we've continued to invest in funding to develop kinder, smarter treatments for people living with breast cancer. Here are some details of what these projects have achieved.

**...finding out how early breast cancer can become invasive**

Professor Louise Jones and her team at Queen Mary University of London have carried out research into an early form of breast cancer, Ductal Carcinoma in Situ (DCIS). They've discovered a new indication that DCIS may progress to become invasive breast cancer. In the future, this might help avoid unnecessary treatment for some women with DCIS that we know won't cause them any harm.

**...preventing early breast cancer from returning**

Professor Ian Kunkler at the University of Edinburgh and his colleagues have found that an extra radiotherapy boost could reduce the chances of higher risk DCIS coming back in the same breast. This work is continuing so we further understand the role the radiotherapy boost can play in helping to reduce the risk of cancer returning over a longer period.

**...testing existing drugs that could benefit thousands**

Dr Rachael Natrajan and her team at the Breast Cancer Now Toby Robins Research Centre tested 80 drugs to find which may be effective against cancers with an altered SF3B1 gene. The drugs they tested are all currently used in cancer treatment or are in late-stage development.

The researchers found that PARP inhibitors were effective at destroying these cancer cells. In the future, this means that existing PARP inhibitor drugs could potentially help thousands more people, including those with ER-positive breast cancer that tend to have changes in this gene.

**...developing treatments for breast cancers that don't respond to chemotherapy**

Dr Sheeba Irshad of King's College London investigated the features of tumours and blood samples of early breast cancer patients whose cancer didn't respond to chemotherapy given to them before surgery. This new research

**IN THE LAST YEAR, WE'VE CONTINUED TO INVEST IN FUNDING TO DEVELOP KINDER, SMARTER TREATMENTS FOR PEOPLE LIVING WITH BREAST CANCER.**



provides important information about the immune system in and around these tumours.

While chemotherapy doesn't work well to treat these cancers, immunotherapy, a type of treatment that helps the immune system to recognise and destroy cancer cells, may provide a benefit. These findings could help to develop new immunotherapy treatments for people whose breast cancer isn't responding well to chemo.

**...discovering a new way to improve breast cancer treatment**

Dr Ahmet Ucar at the University of Manchester has discovered that a protein called RAC1B plays an important role in breast cancer. It can help breast cancer to become resistant to treatment, spread and come back. The researchers also found that in mice, having no RAC1B didn't cause any harmful effects. The hope is that targeting RAC1B could lead to a way to improve the effectiveness of breast cancer treatment.

**...improving the effectiveness of immunotherapy**

Professor Seth Coffelt and his team at the University of Glasgow have discovered that a type of immunotherapy, called a checkpoint inhibitor, could be more effective if an immune cell that prevents it from working is targeted at the same time. Findings like this could boost the power of existing immunotherapies and improve the likelihood of success for new ones.

This project has been made possible thanks to the very generous support of fundraisers and donors of Secondary1st.

**Building a pipeline of new research projects**

In the past financial year, we've invested in 5 new research projects, worth over £1,125,000, that offer the potential for developing better treatments for breast cancer.

**Investigating drug resistance**

Professor Kristijan Ramadan from the University of Oxford is investigating how triple negative breast cancer can become resistant to PARP inhibitors. This research could help us find ways to make breast cancer sensitive to PARP inhibitors again.

**Finding weaknesses in tumours**

Professor Nicholas Lakin from the University of Oxford wants to find new weaknesses in tumours that are resistant to PARP inhibitors. This project may potentially find new ways to treat breast cancers that don't respond to these drugs.

**Overcoming chemo resistance**

Professor Richard Clarkson from Cardiff University is looking for ways to make triple negative breast cancer more sensitive to chemotherapy. He believes that a protein called cFLIP helps cancer cells resist chemotherapy. By learning more about how cFLIP is involved, we may be able to overcome resistance to chemotherapy.

**Boosting the immune system**

Dr Christian Zierhut from the Institute of Cancer Research is investigating how we could boost the immune system during treatment with PARP inhibitors and whether it could make the treatment more effective. This project could lead to a new, more effective treatment combination.

**Exploring new treatments**

Dr Clare Davies from the University of Birmingham wants to understand what role a protein called PRMT5 has in helping triple negative breast cancer resist chemotherapy. This project may lead to new ways to combine treatments for triple negative breast cancer patients to make them more effective.

## Ensuring a sustainable breast cancer workforce

...by raising our concerns at government level

We've continued to raise our concerns with all UK governments about the continued pressures facing the breast cancer workforce and the impact this could have on the timely diagnosis and treatment of breast cancer patients.

In June 2023, the Long-Term Workforce Plan for which we've campaigned for many years was published in England. While it's an important step forward, we now need to understand what this means for important parts of the breast cancer workforce, including radiologists and oncologists.

Similarly, in February 2023 Wales published its National Workforce Implementation Plan. However, we're waiting to see how its implementation will support the delivery of the Cancer Implementation Plan.

The Scottish Cancer Strategy's first 3-year action plan commits to a workforce review of key professions and consideration of increasing oncology training places. But it includes little on how workforce challenges in the short-term will be addressed.

## Tackling inequalities in tumour profiling tests

...by urging NICE to review its guidance

A gap in national guidance in England has resulted in unequal access to tumour profiling tests in patients with node positive, hormone receptor positive, HER2-negative breast cancer. While tests are already recommended for eligible patients with node negative disease, there's evidence they could help even more people safely avoid chemotherapy. And they would reduce pressure on over-stretched clinics.

We've been working with healthcare professionals to bring urgent attention to this and as a result NICE is now reviewing the evidence. We expect a decision in January 2024.

We've also contributed to the Scottish Health Technologies Group evaluation of tumour profiling tests for guiding chemotherapy decisions for people with early-stage breast cancer. Their recommendation is expected to be published in October 2023.

# STRATEGIC OBJECTIVE

# #4

To improve detection and  
diagnosis of breast cancer



## 2022-23 highlights

- Sharing potentially life-saving information through our Touch Look Check campaign
- Raising awareness of breast cancer symptoms among ethnic minority groups
- Translating our breast cancer information video into 13 different languages
- Investing in 3 new research projects worth over £437,000 that tackle inequalities
- Calling for more government investment in breast screening with our #NoTimeToWaste campaign

### **Breast screening performance data for 2021-22 reveals that the percentage of women taking up their invitation for breast screening in England is still worryingly below pre-COVID-19 levels. Over 1 million women missed out on breast cancer screening in that time.**

This is deeply concerning, as screening is a vital tool for detecting breast cancer early. The sooner breast cancer is diagnosed, the better the chance of treatment being successful.

The breast screening programme is now chronically underfunded and overstretched. The government needs to take decisive action to guarantee women's right to accessible, equitable and effective breast screening.

It's also important to address significant health inequalities in early breast cancer diagnosis rates. Women who live in highly deprived areas, and from certain minority ethnic backgrounds, are at much greater risk of late diagnosis.

As well as reaching women from under-represented groups, we also need to raise awareness of the signs and symptoms of primary and secondary breast cancer more widely.

At the same time, we're supporting healthcare professionals, ensuring that they're equipped with the skills and information they need to support people with breast cancer and help them get the right treatment.

“Sadly, there is still a lack of understanding and a real stigma around breast cancer in under-represented communities.

A lot of women feel ashamed and embarrassed at the thought of getting a diagnosis, but they shouldn't be.

We need to increase awareness of the importance of screenings, so everyone gets the chance to be treated early.”

**Balwinder Nanray, who was diagnosed with an aggressive form of breast cancer following a routine mammogram**



Here's some of the work we're doing to help improve the rates of detection and diagnosis of breast cancer...

### **Sharing potentially life-saving information**

#### **...by encouraging people to check their breasts**

In the last year, we've increased investment in our breast health awareness activity and our Touch Look Check campaign. This promotes the signs and symptoms of primary breast cancer and encourages people to get to know what's normal for them through regular breast checking.

We developed a new creative approach and delivered a multi-channel campaign, which ran almost all year round. All of our activity targeted our key audience of women aged 45+, with a focus on reaching women from under-represented groups.

We promoted our campaign in a range of settings, including gyms, pharmacies and shopping centres across the UK. As well as GP surgeries serving under-represented groups and in areas of multiple deprivation.

Throughout the year, while the campaign was live, the Touch Look Check landing page was the most visited page on our website. We achieved 247,478 landing page views – an increase from 97,404 in 2021-22.

#### **...by delivering talks on early detection and prevention**

Last year, we continued to raise awareness of breast cancer through our public health talks programme. Our team of 45 trained public health volunteers regularly deliver talks, helping us spread our key messages on early detection and prevention in communities across the UK.

Our volunteers deliver talks online and in person. They speak to private, public and voluntary organisations including workplaces, local community groups, religious groups, universities and professional networks.

Due to the easing of COVID-19 restrictions and increased promotion of the talks, 2022-23 was our most successful year to date. We delivered 89 talks, more than double compared to 2021-22. As a result, we reached over 2,738 people with our early detection and prevention messaging. That's over 1,000 more people than the year before.

Audience feedback shows our talks help raise awareness of breast cancer, give people the confidence to check themselves regularly and recognise any new and unusual changes that should be checked by a GP.

Reaching under-represented communities through the talks is an important part of our work. Last year, this included presenting to groups such as the Royal Association for Deaf People, NHS England's staff network and the Birmingham Asian Resource Centre.

"I have a huge fear of potentially discovering something and so I wrongly never check my breasts.

After the input, I feel much more reassured and know that early detection is key."

### **Raising awareness of breast cancer symptoms among ethnic minority groups**

#### **...by taking part in Ethnic Minority Cancer Awareness Month**

Breast cancer doesn't discriminate. It affects people from all social and ethnic backgrounds.

And while the incidence of breast cancer is lower among the largest minority ethnic groups in the UK, women from these backgrounds tend to have lower survival rates, often due to late diagnosis of the disease.

As part of our commitment to equity, diversity and inclusion, we took part in Ethnic Minority Cancer Awareness Month (EMCAM) again this year. This national campaign, developed by Cancer Equality, takes place in July and aims to empower ethnic communities by raising awareness of cancer and helping to reduce risk.

Based on recommendations we've identified in recent years, we developed a more bespoke campaign for July 2023. It targeted women from the black and South Asian communities who were identified as having lower awareness of signs and symptoms and lower attendance at breast screening appointments when compared to white British women.

#### ...by filming the co-founder of the South Asian Supernovas

To kick off EMCAM, we filmed a personal interview with Kreena, a co-founder of the South Asian Supernovas, a not-for-profit organisation that aims to improve outcomes for South Asian women facing breast cancer.

In the film, Kreena shared her experience of diagnosis, having children and being a woman from the South Asian community. Across social media (Instagram, Twitter, LinkedIn and Facebook) we saw a total of 38,991 impressions.

Kreena's story resonated with many of our followers. On Instagram, one person commented, "I totally relate to you as I have been through [the] same being a South Asian."

#### ...by creating 4 short films about breast screening

The campaign saw the development of 4 short films covering the importance of breast screening. Our aim was to dispel fears about mammograms.

The films featured women from both black and South Asian backgrounds who shared their lived experiences. In addition, we created a film showing what to expect at an NHS breast screening appointment in collaboration with the Charing Cross breast screening unit.

- One Instagram follower commented, "[It's] 2 mins of maybe feeling uncomfortable but it saves your life...it did mine."

#### ...by updating our ethnic communities hub

As part of the EMCAM campaign, we updated our ethnic communities hub with new content in order to reach as many people in different communities as possible. Between 1 July and 14 August 2023, the hub saw 3,750 active users, many of whom chose to watch our informational videos and download materials.

We translated our breast cancer information video into 13 different languages, including Polish, Romanian, British Sign Language (BSL), Chinese, Gujarati, Bengali and Hindi.

The reaction to these videos has been exceptional, from both members of these communities and health professionals.

- A community group member on the ethnic communities hub commented: "I feel women from different backgrounds will pay more attention and look at the information provided as they will feel it's targeted specifically for their ethnic group."
- At a primary care conference, a delegate said: "There's still a lot of stigma in the Nigerian community. Really pleased to know that you'll have audio resources on this as not everyone can read leaflets."

Meanwhile, our public health, inclusion and awareness team have been contacted by several clinicians from breast screening units who are using the videos in their practice.

## **Campaigning for shorter waiting times and earlier detection**

### **...by calling for more government investment in breast screening**

In February 2023, we launched the next phase of our #NoTimeToWaste campaign, with a petition calling for investment in the breast screening programme in England, underpinned by our blueprint to transform breast screening.

This landmark policy paper maps out what breast screening needs to thrive in the coming 5 years. The petition was championed by our vice-patron Baroness Joan Bakewell and the presenter Julia Bradbury, with further support from ambassador Amanda Mealing.

Over 84,000 supporters added their names to our petition, backing our call for government action to address the issues faced by the programme now and make it fit for the future.

In March we held an event in parliament to launch our blueprint. Over 1,500 supporters emailed their MPs to ask them to attend. Many also shared their stories of what the breast screening programme meant to them. The event was attended by almost 100 MPs and had the backing of the women's health ambassador and the chair of the Health and Social Care Select Committee. These events are key to raising awareness with MPs and other stakeholders.

### **...by demanding more ambitious targets for diagnosis**

This year, we continued to raise our concerns with NHS England and ministers at the Department for Health and Social Care over NHS England's target that 75% of people referred with possible symptoms of breast cancer should be diagnosed with cancer or have it ruled out within 28 days. We believe this target simply isn't ambitious enough for breast cancer and have called for it to be raised.

NHS England has now said it will raise the target to 80% in 2025-26, and that it expects 90% or more of people referred with possible symptoms of breast cancer to get a diagnosis or be told they don't have cancer within 28 days.

We'll continue to call for the target to be raised further, and for the percentage of those diagnosed with breast cancer in 28 days to increase to close the gap with those who have it ruled out.

## **Pioneering new ways to speed up diagnosis**

### **...by investing in research that tackles inequalities**

- **Earlier diagnosis for black African women**

Dr Melanie Cooper from the University of Bradford is investigating ways to encourage black African women to go to their NHS breast screening appointments. Working together with black African communities, this research could lead to earlier diagnoses and more chance of black African women surviving the disease.

- **Better support for people with autism**

Professor Manuela Barreto and Dr Char Goodwin from the University of Exeter are studying the experiences of people with autism who've had breast cancer, including the challenges they face through diagnosis and treatment. They'll provide a set of guidelines for healthcare professionals to better support people with autism from breast screening to breast cancer treatment.

- **Investigating inequalities in diagnosis times**

Dr Robert Kerrison from the University of Surrey is investigating inequalities in the way people are diagnosed, and how long they have to wait for their diagnosis and treatment. He wants to understand whether these inequalities have got worse since the COVID-19 pandemic. His research will allow researchers, clinicians and policy makers to address these inequalities and tailor programmes and interventions towards people who need them **most**.

### **Working with corporate partners**

#### **...by raising awareness of breast cancer screening with Asda**

This year, we were pleased to announce a cross-sector collaboration with NHS England and Asda. It'll provide new, alternative locations for mobile breast screening units for the NHS breast screening programme.

Asda has made car parks available in specific regions in a bid to increase the convenience and visibility of vital breast screening services in England.

To date, Asda has hosted 6 mobile breast screening vans in England, 2 in Scotland and 1 in Wales. Identification of further locations will be based on an assessment by local breast screening services with local community needs in mind. This initiative will contribute towards wider efforts to increase awareness of breast screening and to encourage more women to take up screening appointments.

#### **...by encouraging younger women to take control with ghd**

With its Pink 22 Take Control Now campaign, ghd raised money for breast cancer charities while empowering and encouraging younger women to check their breasts regularly.

The campaign raised just over £235,000 through the sale of a collection of pink products embossed with the tagline "Take Control Now", keeping the message front of mind whenever people use their hair styling products.

#### **...by promoting breast awareness with Asda Tickled Pink**

Asda's The Real Self-Checkout campaign for Breast Cancer Awareness Month 2022 encouraged all their shoppers to become breast aware. A post-campaign survey of Asda customers indicated that more than 600,000 people checked their chests after seeing the campaign. We're so thankful to our wonderful case studies, Dave, Cassie, Esther, Kemi and Mikki who took part in the campaign and shared their breast cancer experiences. The campaign was awarded the Business Charity Awards Marketing Partnership of the Year, 2023.



# STRATEGIC OBJECTIVE #5

To further our understanding of why breast cancer occurs and spreads, and use our knowledge to prevent breast cancer developing



## 2022-23 highlights

- Investing almost £850,000 in 3 new research projects
- Discovering a potential way to prevent secondary breast cancer in the lung
- Researching how changes in the BRCA1 gene may make breast cancer more likely
- Investigating a possible link with triple negative breast cancer
- Looking into breast cancers that don't respond to pre-surgery chemo

### We're gathering valuable insights all the time into the different factors that influence someone's chances of developing breast cancer.

For some people, breast cancer can be prevented. We're working hard to understand more about who has an increased risk of breast cancer and who's most likely to develop secondary cancer.

We want to know more about why cancer develops and spreads, and to discover which interventions are most effective. That might be lifestyle changes such as diet and physical activity or risk-reducing surgery or drugs. And we want to share our knowledge as widely as possible, so we can help everyone to reduce the likelihood of developing the disease.

Here's how we're working to help prevent breast cancer from developing...

### Advancing our understanding of how breast cancer develops

...by discovering a potential way to prevent secondary breast cancer in the lung

#### Research progress: Preventing secondary breast cancer

At the Breast Cancer Now Toby Robins Research Centre, Professor Clare Isacke and her team have discovered a new way to help prevent secondary breast cancer in the lung.

They've found that breast cancer cells can be triggered to form secondary tumours in the lungs. A protein called PDGF-C plays an important role in "waking up" inactive breast cancer cells that have spread there.

In the future, the researchers hope they can target this process with existing or new drugs, to prevent secondary tumours.

**...by carrying out world-class research**

**Understanding the impact of changes in the BRCA1 gene**

Professor Ross Chapman from the University of Oxford wants to better understand how changes in the BRCA1 gene make breast cancer more likely and to unpick why some breast cancer cells develop resistance to PARP inhibitor drugs.

This research will increase our understanding of how changes in the BRCA1 gene can lead to the disease. It could also lead to better treatments for breast cancers caused by an altered BRCA1 gene.

**Investigating a link with triple negative breast cancer**

Professor Tyson Valentine Sharp from Queen Mary University of London is working to better understand how a protein called CoAsy is linked to triple negative breast cancer. This project could lead to new targeted treatments for this breast cancer type and could help us work out who's most at risk of developing more aggressive breast cancer.

**Looking into breast cancers that don't respond to pre-surgery chemo**

Dr Amy Llewellyn from King's College Hospital is investigating more aggressive oestrogen receptor negative (triple negative and some HER2-positive) breast cancers that don't respond to chemotherapy given before surgery. Her work could help us find features in the lymph nodes that show which tumours are more likely to spread to other parts of the body or resist treatment.

# OUR IMPACT AND PROGRESS IN 2022-23

To meet our objectives, we must continue to grow our impact. And not only through what we do ourselves but in how we influence, empower and inspire others to act alongside us. Our 4 “accelerators” help us to do just that:

#1

**Amplifying**  
the voice of experience

#2

**Unlocking**  
the power of our community

#3

**Evolving and adapting**  
our practices

#4

**Generating**  
further funding



# ACCELERATOR 1: AMPLIFYING THE VOICE OF EXPERIENCE



## Our aims in this area are:

- Raising our profile so that everyone affected by breast cancer knows both how we can support them – and how they can support us in driving the change we want to see
- Doris Field Charitable Trust Identifying and championing the issues that matter most to people affected by breast cancer
- Fearlessly leading conversations with governments and other policymakers, the NHS, and fellow health charities to boldly challenge and push for change
- Extending our reach through our own activity and in bold and innovative ways with our trusted partners
- Here's how we've been delivering against these aims in this report year.

## Here's how we've been delivering against these aims in this report year.

### Raising our profile

#### ...by running advertising campaigns to show we're here for people affected by breast cancer

We created 2 advertising campaigns showing the impact of breast cancer on people living with the disease, their families and friends. And raising awareness of us as the place to turn to for anyone affected by the disease.

#### Real Talk

Real Talk encouraged people to talk more openly about breast cancer. It featured a woman who is navigating life with breast cancer. Running across media channels including TV, radio, print, and social media, we saw the woman during her diagnosis, through to treatment and beyond. She's unable to share her real feelings with friends and loved ones. It's only at a Breast Cancer Now support group that she feels she can share her true feelings out loud.

#### The Chat

We developed the UK's first group messaging drama series, The Chat. Featuring an award-winning cast, this series encouraged us to question how we speak about breast cancer. It was inspired by real breast cancer experiences.

We secured significant PR for the campaign. It was featured on the ITV lunchtime news, Woman's Hour and Good Morning Britain.

#### ...by giving guidance on a secondary breast cancer storyline for Emmerdale

Our nursing team gave expert guidance for an Emmerdale storyline about secondary breast cancer. This gave us an incredibly important opportunity to make sure the character's diagnosis and experience would reflect the experience of the thousands of people living with the disease in the UK.

The storyline provided a crucial media moment for us to shine a light on secondary breast cancer and we hope that it raised awareness of the disease among millions of Emmerdale fans.

#### ...by joining new social media platforms

This year, we launched on 2 new social media platforms – TikTok and Threads – in order to build more digital communities and engage with different audiences.

#### ...by improving our website

We made changes to our website this year to help people engage with information and find relevant services and support more easily.

These changes included:

- Adding 124 personal stories and blog articles to our website
- Sharing quotes from people about their real-life experiences
- Reorganising our website content so that it's quicker and simpler for people to find information

## Identifying and championing the issues that matter most

### ...by listening to the voices of lived experience

We created Breast Cancer Voices to make sure that people could use their diverse experiences to shape and improve our work. Our Voices community now has over 1,000 members. 615 people are also in our Louder Voices group, signing up for more frequent involvement.

People in our Voices community have contributed to over 100 requests for insight, involvement and lived experience during the year. This integral resource is now officially part of our new transformation, insight, innovation and strategy team, ensuring the voices of those with lived experience inform our decision-making at a strategic level.

### ...by “passing the mic” to people with breast cancer

During the last year, we hosted a number of social media takeovers. This allowed people affected by breast cancer to post their stories and perspectives unfiltered to our followers.

People who took part included Phil, a man who was diagnosed with breast cancer in 2016, Brogan, a 34 year old woman diagnosed with secondary breast cancer, and Suzanne, who uses a wheelchair and has breast cancer.

### ...by sharing Adobea’s experience of secondary breast cancer with Ann Summers

Adobea, who’s now 35, sought medical help 3 times before receiving a diagnosis of incurable breast cancer at the age of 31. As part of our year-round commercial campaign with Ann Summers, we highlighted Adobea’s experience of living with secondary breast cancer on the brand’s Pleasure Positivity Project blog.

Adobea’s post helped us to reach more people as she promoted the My Viv Breast Cancer Now range through her own social channels. It also enabled her to highlight the importance of accessible sex and intimacy products and techniques to use during and post treatment.

## Fearlessly leading conversations

### ...by contributing to new cancer strategies

We engaged in the development of the new Cancer Improvement Plan in Wales and the Cancer Strategy in Scotland, seeking commitments to make sure that breast cancer patients receive the best possible care, at the best possible time.

We primarily spoke up for earlier diagnosis, retaining and growing the workforce that delivers breast cancer care, and better treatment and care of those with secondary breast cancer. We’ll continue to influence these plans and hold governments and NHS systems to account on the delivery of their commitments.

### ...by supporting a petition for ambitious action on cancer

We were disappointed that the UK government decided not to develop a new 10-year cancer strategy for England, opting instead to produce a 5-year major conditions strategy that will cover cancer.

We worked with the One Cancer Voice coalition of over 60 cancer charities to deliver a petition with over 76,000 signatures to the Prime Minister. The petition called for fully funded long-term ambitious action on cancer in England. We also fed into the development of the major conditions strategy.

### ...by sharing the voices of patients with NICE

This year, NICE started a review of 2 breast cancer guidelines, on early and locally advanced breast cancer, and on advanced breast cancer. We’re feeding into this process to make sure that the guidelines include the latest evidence and reflect what matters to breast cancer patients.

## Extending our reach

### ...by recruiting new volunteers with personal experience of cancer

This year we recruited 54 Moving Forward volunteers with a personal experience of primary breast cancer, including a genetic diagnosis, breast cancer recurrence and experience as a younger or older woman. We now have 57 Moving Forward facilitators in total, many of whom have had their own diagnosis of breast cancer.

# ACCELERATOR 2: UNLOCKING THE POWER OF OUR COMMUNITY



## Our aims in this area are:

- Improving how we engage, listen and learn from people affected by breast cancer, including previously unheard groups and individuals, whose perspectives are vital
- Collaborating creatively with our wider network of volunteers, healthcare professionals, supporters and partners, and using our collective voices, experiences, time, skills and networks to accelerate positive change
- Creating and embedding a high-performance culture powered by trust, and with a clear vision and mutual goals to guide us
- Building a diverse workforce of people committed to delivering and advancing those goals

## Here's how we've been delivering against these aims in this report year...

### Improving how we engage, listen and learn

#### ...by tailoring our Moving Forward course to participants

Men have attended Moving Forward in the past, but this year, we welcomed our first man to the new style course in York. And our oldest attendee this year was 87. Our new format means that each course reflects the experience of those in the room, with a tailored Q&A session and resources hosted on our online information hub.

We've also set up a Services Access Fund, so that finances don't need to be a barrier to accessing our support. We've funded 19 people to attend our services in person.

#### ...by listening to healthcare professionals

We've held interviews and carried out surveys with over 500 healthcare professionals, including oncologists, breast surgeons, nurses and GPs. The insights we've gathered will inform the development of our training and support offer for healthcare professionals across the UK.

#### ...by asking for feedback on our new forum update

We worked with our community champions, carrying out user surveys and interviews to gather insight and guide a new update of our forum. We also ran training sessions with users to help support the change.

## Collaborating creatively with our wider network

### ...by asking influencers to celebrate Barbie and support us with wear it pink

Capitalising on the popularity of the new Barbie film, we asked fashion influencers to share their favourite pink outfits and ask people to sign up for our flagship event wear it pink. It's allowed us to build our wear it pink community and encouraged sign-ups from a wider group of people.

### ...by working with baking influencer, Cynthia Taiwo, on Afternoon Tea

In August, we worked with baking influencer, Cynthia Taiwo, to promote our Afternoon Tea event, where people come together to drink tea, sell cakes and raise money for our work.

Cynthia's follower demographic is 90% young black women, so her posts allowed us to reach and engage with an important community.

### ...by engaging with supporters at our fashion show

Trinny London joined ghd and Estee Lauder this year in giving much-valued gift in kind support at The Show, our fashion show featuring models who are all living with or beyond breast cancer.

The companies donated items from their collections for 500 goodie bags on offer to guests and models during the event. Estee Lauder and ghd also provided make-up and hair styling backstage.

Model Anna commented: "The hair stylist put me at ease and sorted my post chemo hair out which made me feel really confident."

"I was so happy there were makeup artists and hair stylists who had experience with Afro hair and make up for dark skin, as this was a bit of a concern for me in the beginning,"

**Said Adobebe, who also took part in The Show.**

### ...by working with adidas on an exclusive collection

For Breast Cancer Awareness Month 2022, we teamed up with adidas to create the Strength in Nature collection. The collection focused on the message that nature is for all. And that nature can benefit overall health, regardless of someone's physical ability or stage of life.

The limited-edition product range included an exclusive print designed by adidas athlete Veronique Sandler, who took inspiration from her own conversations with the breast cancer community.

We worked with our Louder Voices group on the campaign messaging, taking their lead on what resonated, and stress-tested the designs with them. We also recruited a diverse range of women who had differing experiences of breast cancer to appear in the hero campaign film and other marketing materials.

### ...by joining with Lounge for their #FeelYourBreast campaign

We were thrilled to join underwear brand Lounge as a partner for their #FeelYourBreast campaign. In its 5th year, the campaign promotes self-checking through social media and the innovative "Boob Box". This pop-up mobile stall tours university campuses, giving away free pink underwear while sharing vital breast health information and asking for donations.

Customers could also purchase lingerie sets for a reduced price of £10, with £5 going to charities including Breast Cancer Now. They could also make a donation at the check-out. Lounge's campaign raised an incredible £59,809 for us.



# ACCELERATOR 3: EVOLVING AND ADAPTING OUR PRACTICES



## Our aims in this area are:

- Putting our supporters at the heart of how we communicate so we can have more informed, timely and effective conversations with them and continue to build positive and mutually beneficial relationships
- Bringing transformational insight to our decision-making and actions through improved use of data
- Having the courage to change course and adapt to evolving circumstances, drawing on valuable experience gained during the COVID-19 crisis and with an unfaltering commitment to always doing what's best for people affected by breast cancer
- Identifying and implementing new technologies to support and enhance team working, inclusion, creativity and innovation

**Here's how we've been delivering against these aims in this report year.**

### **Putting our supporters at the heart of how we communicate**

**...by making more of an impact for people with breast cancer**

Thanks to support from the players of People's Postcode Lottery, we've developed a programme of transformational growth activities that will be delivered over the next 3 years. This will help us accelerate the impact we make for people affected by breast cancer.

### **Bringing transformational insight to our decision-making and actions through improved use of data**

**...by gathering more robust data on breast awareness trends**

As of July 2023, we now have a very robust set of results tracking breast awareness trends since October 2021. This gives us information on the number of women who are checking their breasts regularly. It also sheds light on how the rise in the cost of living is impacting people's wider health. We'll use this information to tailor and adapt our future campaigns.

**...by listening to the voices of people living with breast cancer**

We've dramatically increased our ability to gain actionable insights from breast cancer conversations happening online. Through our social listening, we can feed these insights into campaign planning, to make sure that the voices of people with breast cancer are heard in everything we do.

### **Having the courage to change course and adapt**

**...by updating and enhancing our services**

We relaunched our Moving Forward online course this year. It's now supported by a new hub that includes information on topics including wellbeing, benefits, financial advice and sleep.

We've worked hard to enhance the experience of our service users, so that people feel supported from the moment they first get in touch.

Meanwhile, in response to people's needs, Here for You has opened up referrals to include primary and secondary breast cancer patients.

## Identifying and implementing new technologies

### ...by setting up more collaborative social media systems

We've implemented a social media management tool to help us respond to supporters' queries more efficiently. And to empower teams across our charity to engage directly with supporters.

### ...by completing the first phase of our digital unification project

We've completed Phase 1 of our digital unification project. This has enabled us to evolve our ways of working, by building a modern technical framework which will be easy to adapt in the future. It's included adopting agile, user-led practices for digital product development.

This project has been made possible thanks to generous funding from players of People's Postcode Lottery.



# ACCELERATOR 4: GENERATING FURTHER FUNDING



## Our aims in this area are:

- Testing to find the most successful new routes for securing long-term sustainable support, reaching new audiences and inspiring more people to engage with us
- Initiating, connecting and growing our network by inspiring our supporters and partners to engage their contacts and communities, bringing additional funding, skills and expertise to the task of transforming breast cancer research and care
- Building on our success and commitment to innovation in digital to spark curiosity, fire ambition and find new routes for driving income, engagement and community action

## Here's how we've been delivering against these aims in this report year.

### Initiating, connecting and growing our fundraising network ...by nurturing valuable relationships with our partners

#### Asda

We've now had a partnership with Asda since 1996. This year, Asda's Tickled Pink campaign set a target to reach £100 million for breast cancer charities by 2026, to celebrate our partnership's 30th anniversary. This year, the campaign raised more than £4 million for us. Fundraising highlights included Asda bakery suppliers taking on the Yorkshire Three Peaks challenge, which raised over £40,000 and our first Together for Ramadan campaign, which raised £35,000.

Stores continue to go above and beyond to fundraise creatively for Asda Tickled Pink. Asda Coatbridge was named the top fundraising store, raising over £11,000 in 2022.

#### Estee Lauder

As well as providing gift in kind support for The Show, Estee Lauder Companies generously committed to supporting us through 2 partnerships. They were:

- A cause-related marketing campaign with the Cosmetics Company Stores, selling the world-renowned Advanced Night Repair Serum
- The continuation of our £100,000 fundraising challenge with Estee Lauder's beauty advisors across the UK.

#### Marks & Spencer

This year, M&S raised over £700,000 through the sale of post-surgery bras and supporting products, Sparks loyalty card scheme donations, M&S employee fundraising and M&S Bank Change4Change foreign currency donations.

#### Monsoon

Monsoon raised £33,000 in Breast Cancer Awareness Month 2022 by donating 15% of all online global sales on wear it pink day (21 October 2022). The Monsoon logo also got a temporary update on the day to help promote the campaign.

### Primark

In 2022 we entered a new partnership with Primark, becoming a charity that benefits from their annual breast cancer campaign. The campaign aims to raise awareness of the importance of checking for breast cancer symptoms, while supporting women at all stages of breast cancer through their post-surgery and loungewear range.

Primark donated £100,000 from the campaign, and staff and customers raised an additional £96,000 through employee fundraising and till donations. We're looking forward to our next campaign together in October 2023.

### Building on our success in digital fundraising ...by finding new ways to connect with supporters

Traditionally, the websites for our flagship fundraising events, Afternoon Tea and wear it pink, have been separate from our main website.

To make our supporters' experience more intuitive and to link the events more closely with our brand, both events now sit within our main website. As a result, the number of people going on to complete a sign-up form for the events has been high – including a 53% increase in sign-ups to Afternoon Tea.





# THANKS A MILLION

We're incredibly grateful to the loyal companies, foundations and individuals that consistently go above and beyond to support us.

They've already raised millions of pounds and every year they continue to give more and find new and innovative ways to extend their support. Support that's vital to us making more progress and achieving our goals faster for people affected by breast cancer.



## ASDA

**Asda is our longest-running partner.** Through their Tickled Pink campaign, they've been supporting us and other breast cancer charities for 27 years. And have raised a phenomenal £82 million in that time.

Impactful and disruptive campaigns inspire Asda colleagues and customers nationwide to become more breast aware. As a long-term, innovative and committed funder, the partnership has been at the heart of our progress – driving ground-breaking research and developing pioneering support services for people affected by breast cancer.

**THANKS A MILLION,  
ASDA**



**Together with ghd we've been encouraging their customers to take control and understand the importance of regularly checking for signs of breast cancer.** Over the past 20 years, our work together has raised over £11 million for Breast Cancer Now.

**THANKS A MILLION,  
GHD**



**We're incredibly grateful for the continued support of the Garfield Weston Foundation.** To date, they've donated over £2 million to our work, generously supporting our Tissue Bank and The Patricia Swannell Appeal.

Our Tissue Bank is a unique resource, giving scientists at the forefront of breast cancer research access to tissue, cell and blood samples. The Foundation's £200,000 grant over 2 years will fund the vital work of the bank, underpinning cutting-edge research and accelerating progress towards faster diagnosis and kinder, smarter treatments.

**THANKS A MILLION,  
GARFIELD WESTON  
FOUNDATION**

**M&S**

**M&S is another of our longest-standing partners.** Since our partnership began in 2001, we've raised over £33 million together.

M&S is the biggest contributor in the UK to breast cancer prevention research. Through their generous donations, they've enabled more than 70 world-class scientific discoveries about the causes of breast cancer.

**THANKS A MILLION,  
M&S**

### **Mary-Jean Mitchell Green Foundation**

**The Mary-Jean Mitchell Green Foundation has been supporting groundbreaking breast cancer research for over 30 years.** And their long-standing generosity has been truly transformational.

We're now in the final year of the Foundation's current 3-year funding pledge to Professor Nicholas Turner and the Molecular Oncology team. This world-leading research could revolutionise the way breast cancer is detected and treated. It could not only increase people's quality of life but ultimately save lives. The continued investment from the Mary-Jean Mitchell Green Foundation is helping to drive vital progress in this research and for everyone affected by this devastating disease.

**THANKS A MILLION,  
MARY-JEAN MITCHELL  
GREEN FOUNDATION**



**Between 2018-2022, the phenomenal players of People's Postcode Lottery have raised over £9 million to support our work.**

The incredible support of players, donated through Postcode Care Trust, is helping us to find new ways to be there for more people affected by breast cancer. From harnessing the power of digital to help people with breast cancer know they're not alone to driving innovations that make sure we reach people sooner with our specialist support.

**THANKS A MILLION,  
PEOPLE'S  
POSTCODE LOTTERY**

**Pentel**

**Since our partnership began 17 years ago, Pentel has raised over £1.6 million.** This impressive sum has been reached by selling over 7 million of their pink refillable Energel pens.

**THANKS A MILLION,  
PENTEL**



# FINANCIAL REVIEW

This report covers the period from 1 August 2022 to 31 July 2023.



## Income

During the year, total income fell by £17.3 million from £66.9 million to £49.5 million. This reduction of 26% was mainly due to a decrease in charitable activities income and reflects the one-off royalty income settlement received in 2021-22. Income excluding royalties remained broadly the same at £49.5m (2021-22: £49.7m).

Our main sources of income continued to be individual giving, corporate partnerships, philanthropic giving, community and events and royalty income. Income from charitable activities encompasses royalties generated from Breast Cancer Now-funded research activities, which has decreased as highlighted above. Below are some key highlights of our financial performance in those, and other, fundraising areas.

### Individual giving

Our supporters continued to be generous during these difficult times:

- Over 150,000 people chose to support us through our weekly lottery or with a regular direct debit gift
- More than 45,000 people supported us through fundraising appeals and raffles
- We always appreciate the kindness of people who choose to leave us a gift in their will, and this year we raised £3.6 million from legacy gifts

### Corporate partnerships

We continued to receive incredible support from our partners this year, which included:

- Asda raising over £4 million
- M&S raising over £700,000
- ghd raising over £235,000
- Primark raising over £190,000
- Ann Summers raising over £77,000
- Adidas raising over £75,000
- Lounge raising over £59,000
- Pentel raising over £54,000
- Estee Lauder & Cosmetic Company Stores raising over £50,000

### Events and community fundraising

- Our community fundraising volunteers enjoyed a successful year, raising just under £430,000. In all, 32 groups and 51 individuals across the UK fundraise tirelessly in their community every year. And the Isle of Man group is our longest serving at an incredible 30 years.
- We saw strong performance in Facebook fundraising for walking, running and swimming events in 2022-23, which generated £1,163,183 this financial year.
- We also piloted new virtual challenges on Facebook, including partnering with Meta to test new functionality on

their platforms. Featuring events such as Munro bagging, festive fitness and yoga, these activities generated more than £100,000 in income.

- We delivered 2 Pink Ribbon Walks this year and led a virtual Pink Ribbon Walk to engage a broader audience. These activities generated £669,908, more than £30,000 above target for the financial year.
- DIY fundraising continues to bounce back following the pandemic, generating £1,595,516 of income, more than £120,000 above target. Supporters have baked, walked and golfed across the country. One supporter, Angela Ratcliffe, first started wearing wigs on the school run to make losing her hair due to treatment less scary to her children and recently organised a Wig Walk, raising over £11,000.

- The London Marathon took place in October 2022 and April 2023, and to date has surpassed its target by £382,000. We also saw targets exceeded by supporters taking on their own running challenges and grew income in this area by 42%. This is a strong indication of a resurgence of in-person events following the pandemic.

### Philanthropy and special events

- In November, the Pink Ribbon Ball came back with a bang. We welcomed 285 guests to The Londoner for a fun night of entertainment that raised vital funds for us. Guests



heard about some of our key achievements and the event exceeded fundraising targets by raising an incredible £350,000. Our thanks to the Pink Ribbon Ball committee for organising a fantastic event.

- Over 400 supporters attended our Christmas Carols. We also offered the option for supporters to watch the event recording from home. Guests celebrated the festive season by enjoying readings from celebrities, songs from the choir and the chance to win some incredible prizes. The event raised an amazing £17,000
- The Society of Woman Artists generously offered a private viewing of their exhibition at The Mall Galleries. We welcomed supporters to the gallery to enjoy the exhibition and thank them for their support
- In April, 24 inspiring models, all living with or beyond breast cancer, took to the runway at The Show by Breast Cancer Now. We welcomed 500 guests to Illuminate at the Science Museum, including new and existing supporters, celebrities and models' friends and families. The event was also live streamed on Facebook. This played a key role in securing support from corporate partners, including Estee Lauder as the make-up artists, ghd as the hair stylists and multiple retailers who provided clothing for the fashion show

#### Mass participation events

- An amazing 15,034 individuals, schools and workplaces signed up to take part in wear it pink 2022, raising over £1.5 million
- And 8,383 sandwich and scone lovers held a Breast Cancer Now Afternoon Tea, raising a combined total of £856,231

#### Fundraising expenditure

Expenditure increased by £1.3 million from £21.7 million to £23.8 million, an increase of 6%. This reflected our growth plan in investing in fundraising in order to deliver future income to support our 2025 strategy.

#### Charitable expenditure

Charitable expenditure includes all activities relating to research, provision of clinical and support services, policy and campaigning, and public health and information. This year, our expenditure increased by £8.1 million from £22.2 million to £30.3 million – an increase of 36%. This increase includes additional research grant funding of £3.4 million.

#### Reserves

The net movement in funds was a decrease of £4.1 million to £45 million (2022: £49.2 million). This includes an unrealised investment loss of £0.26 million (2022: £0.1 million unrealised loss). The 2023-24 budget has been set to make sure that the charity is within the reserves policy set out below.

The charity holds reserves to provide funding for long-term financial commitments and a contingency against unforeseen operational cost pressures or reduction in income. Each year, the trustees review reserves levels in light of the year ahead, to ensure there are adequate funds to support the organisation. Reserves are held in 3 types:

- Restricted funds arise as a result of the donor making a specific stipulation as to how the funds may be used. This is often relating to a specific activity or grant that may fall over a number of years and therefore the balance carried forward at the year-end is committed for those activities. Restricted funds stood at £1.2 million at the year-end.
- Unrestricted funds arise when no stipulation is made by the donor. The Trustees are responsible for ensuring these funds are spent in line with the charity's objectives in a timely fashion. Unrestricted free reserves stood at £9.7 million at the year-end.
- Designated funds arise when no stipulation is made by the donor but which have been set aside by trustees for essential spend, future purpose or to reflect funds that are not available to expend such as fixed assets and long-term debtors. The trustees are responsible for ensuring these funds are spent in line with the charity's objectives in a timely fashion. Designated reserves stood at £34.2 million at the year-end.

The minimum reserves level has been calculated taking into account the different risk factors that the organisation faces. During the year, the trustees considered that a sufficient level of reserves for the organisation would be £7.2 million and the current reserves position is in line with this policy. Total funds at the year-end were £45.1 million.

### Financial statements

The charity's consolidated financial statements are set out on pages 72-98, including the results of the charity's subsidiaries. The financial results of the charity's regional groups are included within the consolidated results, as they operate within the same charity registration and are governed by the charity's regional group constitution.

### Subsidiary trading companies

The charity had 6 subsidiaries that are detailed in note 25 of the financial statements, along with their results for the year. The companies are all wholly-owned subsidiaries. These subsidiaries carry out activities such as sub-licensing the charity's logo and the Fashion Targets Breast Cancer logo to commercial partners and delivering certain charitable partnerships. BCN Research Ltd delivers the Breast Cancer Now Catalyst Programme.

The trading subsidiaries transfer any profits to the charity under the Gift Aid

scheme and their financial statements are consolidated into those of the charity.

### Going concern

The board has reviewed the charity's activities and financial position together with factors likely to affect future development, including the impact of economic uncertainty on voluntary income.

The financial impact of the cost of living crisis and a review of a range of scenarios assessing the potential impact on income projections have confirmed that appropriate actions can be implemented to maintain financial reserves within the policy range.

It's therefore reasonable to expect the charity to have adequate resources to continue in operation in the foreseeable future.

During 2022-23, income performed at levels in line with our 2022-23 budget and with continued resilience of the income streams from individual donors and corporate partners. This was further supported by the returns from additional investment within individual giving.

### Grants

The charity funds research of the highest quality. We support the scientific community across the UK and Europe through multiple funding mechanisms, through our Tissue Bank, and by supporting conferences. Some of our funding supports centres of excellence,

as we have taken a strategic decision to build a critical mass of research in a small number of locations. These are based in higher education institutions and close to hospitals and breast units, working under one roof in integrated, multidisciplinary programmes of research.

### Investments

The charity holds investments in accordance with the Investment Strategy approved by the trustees. The finance and investment committee reviews this Investment Strategy on an annual basis.

The charity's investment objective is to maximise the return on its investments in a manner consistent with the charity's overall strategy and values while meeting 2 requirements:

1. Investing to cover certain short-term spending with adequate liquidity and a shorter-term risk-averse profile
2. Investing longer-term reserves consistent with their use for longer-term commitments or as contingency assets

The finance and investment committee consider which are the most appropriate investment managers and as part of this, they consider their mandates, targets for performance and their ability to provide the appropriate support, diversification and performance required to achieve the investment strategy. The investments are held with CCLA.

# GOVERNANCE, STRUCTURE AND MANAGEMENT

## The board of trustees of Breast Cancer Now presents its annual report and accounts for the year ended 31 July 2023.

These comply with the Companies Act 2006, Breast Cancer Now's governing document the Memorandum and Articles of Association, and Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standards applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019).

### Status

Breast Cancer Now is a company limited by guarantee, governed by Articles of Association, registered in England and Wales (number 9347608) and registered as a charity in England and Wales (number 1160558), Scotland (SC045584) and Isle of Man (number 1200). The trustees listed on page 55 are also the charity's directors and have overall responsibility for the strategic direction and effective governance of the charity. The trustees met regularly during the year.

The legal and administrative details are listed on page 99.

### Objects

The charity's objects are to:

- Advance health, including the health of individuals suffering from cancer, patients receiving treatment, those convalescing following treatment by:
  - Promoting activities which will assist with awareness, identification and prevention of cancer
  - Assisting those individuals who are disabled, infirm or in need of assistance
- Advance the health of individuals by undertaking research into the causes and treatment of cancer on terms that the results of such research are published
- Advance public education in and understanding of the nature of cancer and its treatments, particularly (without prejudice to that generality) among sufferers of cancer and the families, friends and carers of such persons
- Promote such charitable objects concerned with medical research or the relief of sickness as the directors shall in their absolute discretion determine

### Trustee recruitment, appointment, induction and training

Trustees are appointed, by the board, for an initial period of 3 years that can be extended for a further 3-year term. A further 1, 2 or 3-year term can be agreed between the individual and the chairperson, or 3 other directors if deemed to be in the charity's best interest.

Trustees contribute their services voluntarily. Prior to their appointment as a trustee, they are appointed as a trustee designate, an honorary position in accordance with the charity's governing documents, for a period of 6 months. This is designed to enable potential trustees and the charity to evaluate if the role is right for them. It includes a formal induction programme and attendance at board and committee meetings where they can contribute but not formally vote.

We periodically carry out a skills audit of the board, to ensure the appropriate range of skills and expertise, including in areas of clinical and scientific knowledge, organisational strategy and management. Trustees undertake mandatory in-house training, covering topics such as cyber security and data protection. Additional training is available in line with their needs.

The board supports the principles of good governance set out in the Charity Governance Code and uses the code to review governance on an annual basis. During the year an external review of governance was undertaken and confirmed that a good governance framework is in place.

## Board of trustees

Members of the board during the year were:

**Jill Thompson** <sup>□ +</sup>  
chair

**Pascale Alvanitakis-Guely** <sup>□ ¥</sup>

**Mark Astaire** <sup>¥</sup>

**Barbara Brown** <sup>+</sup>

**Christopher Copeland**  
(resigned 31 March 2023)

**Professor Mitch Dowsett** <sup>¥ \*</sup>

**Sonia Gayle** <sup>□ ¥</sup>

**Professor Ingunn Holen** <sup>□</sup>

**Professor Andreas Makris** <sup>□ \*</sup>

**Andrew Moore** <sup>□ ¥</sup>  
vice chair

**Dr Georgette Oni** <sup>+ \*</sup>

**Ann Pickering** <sup>+</sup>  
(resigned 29 June 2023)

**Claire Ryan**  
(appointed 29 September 2022)

**Dr Nisha Sharma** <sup>+ \*</sup>

The trustees have the benefit of a qualifying third-party indemnity provision as defined by section 234 Companies Act 2006. The charity purchase and maintain throughout the year trustees' and officers liability insurance in respect of itself and its trustees.

## Senior leadership team (at 31 July 2023)

**Delyth Morgan**  
Chief executive

**Rachael Franklin**  
Director of fundraising,  
communications and engagement

**Dr Simon Vincent**  
Director of research,  
support and influencing

**Chay Champness**  
Chief operating officer

During the year, the senior leadership team (SLT) were regarded as the charity's key management personnel per FRS102. Total earnings, including pension contributions, received by members of the SLT during the year were £547,589 (2021-22: £529,636).

In 2022-23, the chief executive, the highest paid member of staff, received remuneration of £144,242 (2021-22: £139,444).

## Staff employee reward

From August 2022 to July 2023, Breast Cancer Now employed an average of 330 (2022: 293) staff across the year. Our colleagues are fundamental to the work we do. We rely on them, our supporters, volunteers and trustees, and their amazing commitment, dedication and support they give to the charity.

Our people and culture committee monitors Breast Cancer Now's people plan, our organisational and cultural development and reward strategy. This includes our pay and benefits policies, our pay structure and annual pay review process, all of which determine how pay levels are decided. We're committed to equality in our pay and benefits policy. And we aim to ensure that our levels of pay and range of benefits reflect the knowledge, skills, experience and competencies of our staff.

We aim to pay salaries at the median level of the voluntary sector, and we regularly use salary survey data to check that our pay remains in line with the market we operate in. The committee approves the annual pay review process, which is determined partly by average pay awards across the sector, and partly by the charity's financial performance and affordability to fund an annual cost of living increase.

□ member of the finance and investment committee

¥ member of the risk and governance committee

+ member of the people and culture committee

\* member of the science strategy committee



Executive pay is governed by the same rules and review processes as for all other staff, and we offer the same level of benefits to the executive team as to the rest of our staff. Jobs are evaluated and graded into a framework with pay bands that are transparent and published to all staff.

Our trustees freely give their time and don't receive payment for the work they do, other than travel expenses.

### Equity, diversity and inclusion

Breast Cancer Now acknowledges that everyone is unique with individual skills, knowledge and life experiences. Everyone can make a valuable and positive contribution to the aims, values and strategic goals of the charity. We recognise the benefits of employing and engaging with individuals from all backgrounds and community groups as this helps build a workforce and business where creativity and valuing difference in others thrives.

We're committed to a policy that ensures all current and potential staff members and volunteers are offered the same opportunities regardless of their sex, sexual orientation, age, disability, gender status (in cases of gender re-assignment), pregnancy and maternity status, marital status, race and religion and belief (protected characteristics) and membership of or activities as part of a trade union, or social or economic status.

Our equity, diversity and inclusion (EDI) working group continues to meet with representatives from across directorates and a range of teams across the charity. The group steers the development, implementation and monitoring of an organisation-wide approach to EDI, which enables us to better reach and meet the needs of both internal and external stakeholders.

The group is using management information, external expertise and insight from lived experiences, to enable us to work towards our strategic objectives. It ensures diverse voices are listened to, fosters an inclusive environment for all colleagues and ensures we are reaching and supporting diverse beneficiaries through our charitable work. Since the group was formed in 2020, we have been laying the foundation for real change.

This year, we have started to focus on the 3 EDI strategic priority areas, which are aligned with our organisational strategy:

#### 1. Gathering clear EDI data to guide us

In March 2022, we appointed the Equality Works Group (EWG) to undertake an internal EDI audit. This was to help us understand in more detail the demographics and culture of our workforce. It also aimed to identify factors that will help us build on our work to create a diverse and inclusive organisation.

The audit was completed in July 2022 and highlighted many strengths. A number of recommendations were made to continue to deliver internal EDI progress, and an action plan was developed in November to deliver these recommendations in 2022-23 including appointing an EDI Manager. The priorities were then translated into an EDI action plan across 5 workstreams to ensure we're identifying the right interventions with our stakeholders and stay accountable through implementation, progress and measurement.

1. Resource
2. Data Collection / Policy Development
3. Learning & Development
4. Recruitment
5. Engagement / Senior Leadership Commitment

#### 2. Building our collective confidence around EDI

We continue to encourage colleagues to share their lived experiences and to celebrate key EDI events across the year. Sharing lived experiences continues to be an important way for us to build our collective confidence and understanding. Our EDI hub on our intranet is regularly used to share key learning and development resources.

### 3. Strengthening the networks that are vital to driving our EDI progress

Externally, we continue to develop our approach to EDI and reach underserved communities. For example:

- In our public health, inclusion and awareness work we've delivered public health talks in person and online, some of which have been bi-lingual, to make sure communities have access to the right information in a sensitive and accessible way.
- We've developed audio animations on the signs and symptoms of breast cancer, risk factors and the NHS breast screening programme in 13 different languages. These are Romanian, French, Polish, Welsh, Hausa (Nigerian), Arabic, Chinese, Hindi, Punjabi, Urdu (Pakistani), Gujarati, Bengal and British Sign Language (BSL). We'll continue to add to these in the coming year.
- In partnership with the Charing Cross breast screening unit, we developed 2 screening films – 1 for women from the black community and 1 for women from the South Asian community who are lower attenders of breast screening. The films take them through what to expect at an NHS breast screening appointment, following up on the insight we carried out with these ethnic groups the previous year.
- Through our Asda partnership we worked on a bespoke campaign for Ramadan this year, aimed at the Muslim community.

We recognise that we're learning. Where we make mistakes, we'll take ownership and reflect, learn and adapt our practices to move forward. Some of our recent EDI progress has come from not getting things right straight away.

### Approach to fundraising

We aim to build strong, meaningful, and long-lasting relationships with those who donate, fundraise and volunteer for us. We rely on the generosity of individuals and partners to help us reach our ambitious 2050 vision, and we take great pride in how we raise funds towards achieving that. Our supporters are essential to what we do. We'll always strive to give exciting opportunities, accompanied by an excellent experience and high standards of service, that we're continuously improving.

Our fundraising portfolio is diverse, ranging from volunteer-led fundraising, to lottery, to corporate, to gifts in wills, TV advertising and more.

To meet the expectations of our supporters, we continue to have a cross-organisational focus on ensuring that we're working in a way which is compliant with law and regulations governing charity fundraising. This includes being registered with the Fundraising Regulator and adhering to the GDPR. This focus enables us to adapt to any changes in the law or in best practice, and continuously consider what's important to our supporters with regards to their privacy and data.

### Fundraising on our behalf

Engaging with new and existing supporters is a privilege and an important part of our fundraising effort. We work with carefully selected professional fundraising agencies to conduct face-to-face activity and outbound calling as well as to manage our lottery, raffle and gift administration. We closely monitor those who work on our behalf through mystery shopping, call monitoring, training, and regular account management to make sure they adhere to our high standards and those of the Fundraising Code of Practice.

### Safeguarding and vulnerable supporters

We recognise our responsibility to safeguard our supporters and members of the public across all areas of our fundraising and services. Our safeguarding policy and annual safeguarding report is reviewed each year by the risk and governance committee, and we've developed a safeguarding training module ratified by safeguarding experts that all our staff are required to undertake.

### Complaint handling

From August 2022 to July 2023, we received and responded to 328 complaints. While the number of complaints we received is small compared to our overall reach, we take all negative feedback seriously. Each complaint has been thoroughly investigated and resolved with corrective action taken, where appropriate, to improve the work we do.

We currently have 1 complaint which is being investigated by the Fundraising Regulator. We've been working closely with the regulator to comply with all the information requests they have to complete their investigation. We're pending an outcome of this investigation and are committed to putting into action any recommendations made by the regulator to make sure we're fully compliant with the Fundraising Code.

All feedback is valuable for the continuous improvement of the experience of our supporters and beneficiaries. We continue to review our policies and procedures on a regular basis to ensure they are robust and serve our supporters in the best way possible.

### **Our fundraising promise**

We rely on the generosity of our supporters, partners, and volunteers to make what we do possible. Through donations and fundraised income, we can work towards our vision that by 2050 everyone diagnosed with breast cancer will live and be supported to live well.

We're committed to showing the individuals, companies, and organisations who support us how much they are valued and the difference their support makes. The following principles guide our ways of working:

### **Honesty and accountability**

- We ask for and listen to your feedback and complaints and make improvements based on what you say
- We closely monitor agencies working on our behalf and ensure they keep to our high standards
- We work in way that is compliant with relevant statutory bodies and the Fundraising Code of Practice

### **Kindness and respect**

- We inspire people to give or raise money for Breast Cancer Now, without making them feel pressured to give
- We have a procedure for working with people in vulnerable circumstances, including children
- We only communicate with you in the ways that you prefer and always with a friendly and approachable manner
- We treat all donors and the members of the public fairly and with respect
- We value and acknowledge the contributions made by our supporters and thank accordingly

### **Trust and transparency**

- We keep supporter data secure and do not sell or share it for marketing purposes
- We use donations wisely and always with an unrelenting focus on our beneficiaries and we do what we say we will do with the donations we receive

### **Learning and developing**

- We listen and learn and always strive to improve the experience of being a supporter of Breast Cancer Now
- We constantly monitor how fundraising activities are received and perform to understand how they are experienced by our supporters
- We invest time and energy in developing our own skills and knowledge so we can deliver effective fundraising and supporter experience

### **Advisory boards and committees**

#### **Finance and investment committee**

The finance and investment committee is responsible for advising the board on short and long-term financial planning, including reviewing financial plans, budgets and proposals. As well as playing a governance role in the review of financial policies, processes and controls, and advising on the appointment of external auditors. The committee is also responsible for appointing the charity's investment managers, setting and recommending the investment strategy to the board for approval and overseeing the management and performance of investments. The finance and investment committee met 4 times during the year.

**Risk and governance committee**

The risk and governance committee set the risk management process. They make sure that strategic risks are identified, reported to the board and, where necessary, highlighted to other committees (such as the finance and investment committee).

The committee makes sure that risk priorities and relevant actions are highlighted to the senior leadership team for further action by their directorates. The committee also oversees any material internal controls change programme and ensures recommendations are implemented.

The committee recommends the charity's risk management appetite and policy to the board for approval and reviews policies which may result in significant reputational risk. The risk and governance committee met twice during the year.

**People and culture committee**

The people and culture committee has delegated responsibility from the board for the remuneration and reward framework across the organisation, and appointment of trustees and senior leadership, including the chief executive. The committee also has strategic oversight of the charity's people plan. The people and culture committee met 3 times during the year.

**Science strategy committee**

The science strategy committee is responsible for overseeing our research portfolio and making recommendations to the board regarding distributing our research funding. The committee plays a key role in making sure that our research supports our strategic aims and met twice during the year.

**Chairs' committee**

The chairs' committee enables decisions to be made between board meetings where they are of sufficient urgency that it would be detrimental to wait until the next board meeting. The chairs' committee didn't meet during the year.

**Risk**

Risk is inherent within all our activities and therefore must be understood and managed. Accepting a certain level of risk allows us to innovate and strive to achieve more for people affected by breast cancer. It's important, however, to balance risk across the organisation to make sure that it remains within our current level of appetite and tolerance.

We operate a process of risk identification and management that's embedded into the governance of the organisation. Central to this are our risk registers, which are regularly reviewed and updated by the senior leadership and operational management teams, the trustees and considered by the risk and governance committee which normally meets twice a year.

We also regularly adapt the content to make sure we capture our understanding of our biggest risks and what we need to do to manage them. The registers are living documents that continue to change over time in response to internal and external stimuli.

Risks are scored in terms of likelihood and impact. This allows us to quickly identify the most pressing risks and any changes in their profile. For each risk, the registers set out the possible causes, current controls in place to manage it and any actions ongoing to provide further mitigation. These actions are assigned an owner, and progress is tracked by the senior leadership team and the trustees.

The trustees reviewed Breast Cancer Now's key risks and are satisfied that risk management has been undertaken appropriately and that adequate systems were in place to manage risk. The senior leadership team are responsible for the day-to-day risk management and ensuring that each directorate is aware of, and appropriately manages, their risks.

We've considered the key risks facing the charity in the year ahead. Some examples of these strategic risks and mitigations to manage them are:

Risk	Mitigation
<b>Legal and regulatory compliance</b>	
<p>Risks of non-compliance:</p> <ul style="list-style-type: none"> <li>• Serious data security breach (from a cyber-attack or non-compliance with GDPR)</li> <li>• Lack of compliance with regulations in relation to our fundraising practices</li> <li>• Failure to comply with legal or regulatory requirements</li> </ul>	<ul style="list-style-type: none"> <li>• IT policies and procedures including, Cyber Essentials Plus certification, vulnerability scanning, penetration testing and anti-virus software</li> <li>• Dedicated fundraising compliance senior officer; data privacy manager and governance manager</li> <li>• Regular training for staff</li> <li>• External peer review of research</li> </ul>
<b>Loss of reputation</b>	
<p>A high-profile incident results in a loss of reputational integrity, influence and support</p>	<ul style="list-style-type: none"> <li>• Anti-fraud policy and fraud monitoring in place, as well as mandatory fraud training for all staff</li> <li>• Reputation management and crisis communication processes in place</li> <li>• Conflicts of interest policy and processes in place</li> <li>• Whistleblowing policy in place outlining a clear process for staff to disclose any incidences of serious malpractice or wrongdoing</li> <li>• External governance review in 2022-23 confirmed good governance framework in place</li> </ul>
<b>Financial sustainability</b>	
<p>Failure to effectively manage our financial resources to ensure we can continue to support those affected by breast cancer</p>	<ul style="list-style-type: none"> <li>• Prudent 2023-24 budget and reserves policy</li> <li>• Senior and operational leadership teams review monthly management accounts alongside regular cashflow forecasting throughout the year</li> <li>• Agile fundraising strategy with quarterly reviews around performance to date and future pipeline</li> <li>• Regular reviews of investment performance and active use of money markets to deliver best available return on cash</li> </ul>
<b>Unforeseen disruptions such as COVID-19</b>	
<p>Inability to deliver our mission to those affected by breast cancer due to serious business disruption</p>	<ul style="list-style-type: none"> <li>• Agile governance arrangement, enabling quick and effective decision making</li> <li>• IT systems robust, secure and stable due to quality of leadership and decision-making</li> <li>• Motivated and engaged staff and volunteers</li> </ul>



**Risk****Mitigation****Marketing**

Low brand awareness

- New brand based on insight from, and tested on and with, beneficiaries, supporters and other key stakeholders including key fundraising contacts
- Investment in sustained brand marketing

**Services and research**

Not reaching enough service users with loss of reach and impact due to drop-out rates on courses and pressure on the NHS

- Monitoring of reasons for dropout rates
- Rolling programme of communications and marketing
- Our transformational growth plan includes additional investment to increase our reach

Inability to maintain our commitments to our long-term research activities or to fund future research, because of lower levels of income

- Close communication with those researchers to whom we provide long-term support, to discuss ways of mitigating the impact of any reductions in budgets
- Establishment of designated fund to support long term research commitments

Inability of existing research to continue due to disruption at research host institutions or loss of key researchers

- Close communication with researchers and senior administrative staff at key host institutions to monitor their ability to support the research we fund
- Long-term commitment to key strategic research activities to ensure stability for research staff and support for research training

**Staff and volunteers**

Failure to address the health and wellbeing of employees and volunteers and support their ability to perform their roles

- EDI programme across organisation
- Enhanced performance management programme for staff
- High-quality volunteering programme
- Annual staff engagement survey enables staff to give feedback in this area

## S172(1) Statement

The trustees are required to outline how they have met the requirements of S172(1) of the Companies Act 2006 in acting to promote the success of the charity to achieve its charitable purposes. This includes having regard to the interests of its stakeholders, volunteers, employees and the wider community.

The charity recognises it cannot achieve its mission on its own. Collaboration and working in partnership with its stakeholders are essential in ensuring that by 2050 everyone diagnosed with breast cancer will live and be supported to live well.

Our supporters, including members of the public, donors, trusts and corporate partners enable us to raise funds we need to fund research and provide support services. We work closely with our suppliers and our dedicated colleagues, who are vital in us progressing towards our goal. We set out below how the charity engages with its different stakeholders and listens to their views to better achieve its charitable objectives.

## Employees

Our success is underpinned by the wellbeing and performance of our colleagues, who are fundamental to everything we achieve. We engage with our colleagues in many ways:

- Our staff forum hosts regular online drop-ins for colleagues to raise questions, and for forum representatives to gather feedback and hear concerns
- Our monthly organisational updates give colleagues information on the charity's ongoing work, impact and progress. And are an opportunity for colleagues to ask questions and give feedback to the senior leadership team
- Our monthly directorate meetings give an opportunity for senior leaders to speak to their directorate and share updates across teams. The meetings are also an open forum for colleagues to update their peers, ask questions or flag concerns
- Our organisational management team meet monthly and cascade organisational information and raise concerns from colleagues
- Our weekly internal newsletter features updates from across the organisation, including operational news, campaigns and blogs
- Our intranet offers a space for colleagues to find and post information, and is an integral hub for connecting colleagues, wherever they're working from
- We host around 20 Now Sessions every year. These are informal, peer-to-peer sessions led by teams across the organisation to share knowledge, learnings and success stories
- We've developed an online learning and development platform to enhance learning opportunities, and meet the extensive and diverse training needs of colleagues
- We use staff surveys to get the views of colleagues, which is helping us to become a more equitable, diverse and inclusive organisation
- Our EDI group helps to help steer our development, implementation and monitoring of our organisational approach to EDI
- Our annual performance review process focuses on the performance and development of our colleagues
- We host a staff conference and annual awards ceremony to celebrate the achievements of colleagues and the organisation. Colleagues contribute to the content, and vote for their award nominations
- We've established an environmental group and several social and wellbeing groups including mental health first aiders, a social committee, netball team and a craft group. Other support groups include our peer-to-peer learning groups, long-term health conditions group, parenting group and carers group

## Volunteers

We won't achieve our vision with our colleagues and budgets alone. We rely on people's passion and personal connection, alongside their time, skill, voice, and willingness, to create real change. And we're delighted that 97% of our volunteers say they feel valued by Breast Cancer Now (Volunteer Experience Survey 2022).

Our volunteering strategy aims to "open the doors" of volunteering. Our 5-year volunteering plan aims to grow our key programmes in line with our Turning the Tide strategy, welcome new people from diverse backgrounds, and champion ideas to adapt and change.

### Help and support

Volunteering is interwoven into every directorate of our charity. The volunteer hub is responsible for providing infrastructure, training and support to staff teams who involve volunteers, while also championing new volunteer programmes.

### Growing our programmes

The number of managed volunteers (people who support us through formal, longer-term roles) grew by 13%, to almost 700 this year. Alongside this, one-off opportunities have been very popular, particularly as we opened up our face-to-face events. We've also created more remote and office support roles, with volunteers supporting teams from patient experience to data, legal to digital.

### Developing our approach to equity, diversity and inclusion

We developed an equity, diversity and inclusion action plan specific to volunteering. It identifies priorities that will help us to open the doors to volunteering at Breast Cancer Now. We've already delivered on some of the actions identified including:

- Trialling new ways of recruiting volunteers
- Making recruitment more accessible
- Reducing barriers to entry for certain roles
- Promoting opportunities using different media formats

We'll keep opening up new opportunities and reducing barriers to volunteering over the next year.

### Volunteer engagement

- We continued to act on feedback from volunteers to deliver an ongoing series of online events and talks, with over 100 volunteers attending
- We adapted our approach to volunteer connection, holding volunteer meetups in 7 different locations, with 50 volunteers attending and 50 more interested in further locations. The events provided an opportunity for volunteers to connect in person and on a local level – a desire expressed in our 2022 volunteer experience survey

- We've continued to give guidance for staff to better recognise volunteers across the organisation. We also delivered the annual Outstanding Volunteer Award in memory of Tracey Williams. The winner of the 2023 year's award was Hedwig Hegtermans, who has volunteered at Moving Forward courses, The Show, Pink Ribbon Walks and lingerie events. Hedwig also holds roles as a Someone Like Me volunteer, information point volunteer and public health volunteer.

"I am shocked to actually have won this wonderful award. Having been nominated was already such a great honour. There are so many worthy volunteers, but once I am over the shock, I will enjoy it. I love volunteering for Breast Cancer Now and it really helped me to move forward from my diagnosis" **Hedwig**

- Volunteer communications include regular "drop in and connect" virtual sessions, email bulletins, and 1-to-1 phone calls with volunteers who haven't heard from us recently or may have paused their volunteering

- Our dedicated volunteer learning platform – Volunteer Now – continues to develop into the focal point for volunteers to access training specific to their role, engage with resources, and find information about the charity. 80% of volunteers have used the platform.

### Donors, trusts and corporate partners

Our partnerships with our donors, trusts and corporate partners are fundamental to our charitable work. Here's how we engage with donors, trusts and corporate partners:

- We collaborate regularly with our corporate partners through online and face-to-face meetings, and co-create campaigns and actions
- We regularly review our partnerships to understand the levels of performance, impact and satisfaction
- We share major events and milestones with our donors and supporters. We report on the impact we're making thanks to their support, through impact reports, email communications and our annual report and accounts
- We give opportunities for our supporters to see the impact of their support in action, through research laboratory tours and talks from researchers and scientists

- We host cultivation events, such as our annual carol service, to give our donors, trusts and corporate partners an opportunity to meet key members of our staff, trustees and each other
- We host donor-specific thank you events for our events, community, philanthropic, and legacy supporters, to show them the impact of their support
- We have a clear thanking process for all supporters based on the type and level of support, and their relationship with us
- Our Fundraising Promise guarantees donors of all types what they can expect from their relationship with us
- We have a clear and quick escalation and resolution process if any of our donors, partners or trusts are dissatisfied with their relationship with us

### Partners and suppliers

Our ability to fund dedicated research, and to provide the necessary support to anyone affected by breast cancer, relies on good relationships with our partners and suppliers. Some of the ways we do that include:

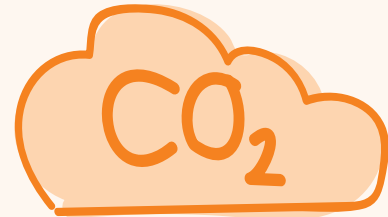
- Having a dedicated research team to give administrative support to make sure we collaborate effectively with institutions undertaking research on our behalf

- Building close working relationships with the hosts of our 4 long-term research activities: the Institute of Cancer Research (The Toby Robins Breast Cancer Research Centre and the Generations Study), Kings College London (the Breast Cancer Now Research Unit) and the Barts Cancer Institute at Queen Mary University of London (the Breast Cancer Now Tissue Bank)
- Developing links with external scientists through the science strategy committee and various conferences, including taking a leading role in the UK Interdisciplinary Breast Cancer Symposium
- Working with organisations that bring us together with others in the sector to amplify our voice, including the Association of Medical Research Charities, the Richmond Group and the National Cancer Research Institute
- Working with the Richmond Group of Charities to combine our influence and speak as a collective voice so that we can improve the support and care for people with long-term conditions
- Inviting healthcare professionals, such as oncologists, surgeons, physiotherapists and dietitians, to share their expertise and knowledge with service users through our face-to-face and online support services

- Employing sessional therapists, facilitators and nurses to co-deliver and support services to people affected by breast cancer, so we can reach more people across the UK
- Using a range of convenient, accessible and welcoming venues across the UK to host our services, creating a safe and comfortable environment for people to meet each other, share experiences and gain mutual support
- Developing our relationships with nurses in practice, supporting their continuous education and involving them with the development of nursing and health information services
- Working closely with our print suppliers to manage the distribution of our award-winning publications, and with our virtual call centre supplier, allowing delivery of a telephone helpline to provide support
- Using a political monitoring service and other specialist suppliers to help us to take our influencing and campaigning work to elected representatives and campaigners
- Working with policy experts in other organisations in the sector to give us additional capacity to develop policy

### Energy and emissions

The following figures make up the baseline reporting for Breast Cancer Now. Scope 2 consumption and emissions relate to indirect emissions relating to the consumption of purchased electricity in day-to-day operations.



	2022-23	2021-22
<b>Scope 2</b>		
Grid supplied electricity – kWh	130,521	67,839
Associated Greenhouse gas emissions tonnes CO2 equivalent (tCO2e)	26	14
Intensity ratio Emissions per headcount, based on average staff numbers of 330	0.08	0.02

Scope 2 consumption and CO2e emission data have been calculated in line with the 2019 UK Government environmental reporting guidance. The following Emission Factor Databases consistent with the 2019 UK Government environment reporting guidance have been

used, utilising the current published kgCO2e relevant for the appropriate periods of 2022 and 2023 reporting year. For 2022 (1 January 2022 to 31 July 2022) used Database 2022, Version 1.0. For 2023 (1 January 2023 to 31 July 2023) used Database 2023, Version 1.0.



# STATEMENT OF TRUSTEES' RESPONSIBILITIES

**The trustees (who are also directors of Breast Cancer Now for the purposes of company law) are responsible for preparing the trustees' Annual Report (including the Strategic Report) and the financial statements in accordance with applicable law and regulation.**

Company law requires the trustees to prepare financial statements for each financial year. Under that law the trustees have prepared the financial statements in accordance with United Kingdom Accounting Standards, comprising FRS 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland", and applicable law (United Kingdom Generally Accepted Accounting Practice).

Under company law the trustees must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of the affairs of the charitable company and the group and of the incoming resources and application of resources, including the income and expenditure, of the charitable company for that period. In preparing these financial statements, the trustees are required to:

- Select suitable accounting policies and then apply them consistently
- Observe the methods and principles in the Statement of Recommended Practice: Accounting and Reporting by Charities (2015)

- Make judgments and estimates that are reasonable and prudent
- State whether applicable UK Accounting Standards, comprising FRS 102, have been followed, subject to any material departures disclosed and explained in the financial statements
- Prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in business.

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

They are also responsible for safeguarding the assets of the charitable company and the group and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

The Trustees are responsible for the maintenance and integrity of the charitable company's website. Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

In the case of each trustee in office at the date the Trustees' Report is approved:

- A. So far as the Trustee is aware, there is no relevant audit information of which the company's auditors are unaware; and
- B. They have taken all the steps that they ought to have taken as a trustee in order to make themselves aware of any relevant audit information and to establish that the company's auditors are aware of that information.

**Jill Thompson,  
trustee**

29th November 2023

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# INDEPENDENT AUDITOR'S REPORT

to the Members and the Trustees  
of Breast Cancer Now



## Opinion

We have audited the financial statements of Breast Cancer Now ('the charitable company') and its subsidiaries ('the group') for the year ended 31 July 2023 which comprise the Consolidated Statement of Financial Activities, the Group and Charity Balance Sheets, the Consolidated Cash Flow Statement and notes to the financial statements, including significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- Give a true and fair view of the state of the group's and the charitable company's affairs as at 31 July 2023 and of the group's income and expenditure, for the year then ended;
- Have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- Have been prepared in accordance with the requirements of the Companies Act 2006 and the Charities and Trustee Investment (Scotland) Act 2005 and Regulations 6 and 8 of the Charities Accounts (Scotland) Regulations 2006 (amended).

## Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the financial statements section of our report. We are independent of the charitable company / group in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

## Conclusions relating to going concern

In auditing the financial statements, we have concluded that the trustees' use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the charitable company's or the group's ability to continue as a going concern for a period of at least 12 months from when the financial statements are authorised for issue.

Our responsibilities and the responsibilities of the trustees with respect to going concern are described in the relevant sections of this report.

## Other information

The trustees are responsible for the other information contained within the annual report. The other information comprises the information included in the annual report, other than the financial statements and our auditor's report thereon. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

### Opinions on other matters prescribed by the Companies Act 2006

In our opinion based on the work undertaken in the course of our audit:

- The information given in the trustees' report, which includes the directors' report and the strategic report prepared for the purposes of company law, for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- The strategic report and the directors' report included within the trustees' report have been prepared in accordance with applicable legal requirements.

### Matters on which we are required to report by exception

In light of the knowledge and understanding of the group and charitable company and their environment obtained in the course of the audit, we have not identified material misstatements in the strategic report or the directors' report included within the trustees' report.

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

- Adequate and proper accounting records have not been kept or returns adequate for our audit have not been received from branches not visited by us; or

- The financial statements are not in agreement with the accounting records and returns; or
- Certain disclosures of trustees' remuneration specified by law are not made; or
- We have not received all the information and explanations we require for our audit.

### Responsibilities of trustees

As explained more fully in the trustees' responsibilities statement set out on page x, the trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the trustees are responsible for assessing the charitable company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the trustees either intend to liquidate the charitable company or to cease operations, or have no realistic alternative but to do so.

### Auditor's responsibilities for the audit of the financial statements

We have been appointed as auditor under section 44(1) (c) of the Charities and Trustee Investment (Scotland) Act 2005 and under the Companies Act 2006 and report in accordance with the Acts and relevant regulations made or having effect thereunder.

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

Details of the extent to which the audit was considered capable of detecting irregularities, including fraud and noncompliance with laws and regulations are set out below. A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at: [www.frc.org.uk/auditorsresponsibilities](http://www.frc.org.uk/auditorsresponsibilities).

This description forms part of our auditor's report.



### **Extent to which the audit was considered capable of detecting irregularities, including fraud**

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We identified and assessed the risks of material misstatement of the financial statements from irregularities, whether due to fraud or error, and discussed these between our audit team members. We then designed and performed audit procedures responsive to those risks, including obtaining audit evidence sufficient and appropriate to provide a basis for our opinion.

We obtained an understanding of the legal and regulatory frameworks within which the charitable company and group operates, focusing on those laws and regulations that have a direct effect on the determination of material amounts and disclosures in the financial statements. The laws and regulations we considered in this context were the Companies Act 2006, the Charities Act 2011 and The Charities and Trustee Investment (Scotland) Act 2005, together with the Charities SORP (FRS 102). We assessed the required compliance with these laws and regulations as part of our audit procedures on the related financial statement items.

In addition, we considered provisions of other laws and regulations that do not have a direct effect on the financial statements but compliance with which might be fundamental to the charitable company's and the group's ability to operate or to avoid a material penalty. We also considered the opportunities and

incentives that may exist within the charitable company and the group for fraud. The laws and regulations we considered in this context for the UK operations were General Data Protection Regulation, employment legislation and health and safety legislation.

Auditing standards limit the required audit procedures to identify non-compliance with these laws and regulations to enquiry of the Trustees and other management and inspection of regulatory and legal correspondence, if any.

We identified the greatest risk of material impact on the financial statements from irregularities, including fraud, to be within the timing of recognition of income and the override of controls by management. Our audit procedures to respond to these risks included enquiries of management and the Finance and Investment Committee about their own identification and assessment of the risks of irregularities, sample testing on the posting of journals, reviewing accounting estimates for biases, reviewing regulatory correspondence with the Charity Commission and reading minutes of meetings of those charged with governance.

Owing to the inherent limitations of an audit, there is an unavoidable risk that we may not have detected some material misstatements in the financial statements, even though we have properly planned and performed our audit in accordance with auditing standards. For example, the further removed non-compliance with laws and regulations

(irregularities) is from the events and transactions reflected in the financial statements, the less likely the inherently limited procedures required by auditing standards would identify it. In addition, as with any audit, there remained a higher risk of non-detection of irregularities, as these may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal controls. We are not responsible for preventing non-compliance and cannot be expected to detect non-compliance with all laws and regulations.

### **Use of our report**

This report is made solely to the charitable company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006, and to the charitable company's trustees, as a body, in accordance with Regulation 10 of the Charities Accounts (Scotland) Regulations 2006. Our audit work has been undertaken so that we might state to the charitable company's members those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and the charitable company's members as a body and the charitable company's trustees as a body, for our audit work, for this report, or for the opinions we have formed.

**Nicola May**

**Senior Statutory Auditor  
For and on behalf of Crowe U.K. LLP  
Statutory Auditor  
London**

17th January 2024

# CONSOLIDATED STATEMENT OF FINANCIAL ACTIVITIES

(incorporating an income and expenditure account)  
For the year ended 31 July 2023

	Note	Unrestricted funds £000	Designated funds £000	Restricted funds £000	Total 2023 £000	Unrestricted funds £000	Designated funds £000	Restricted funds £000	Total 2022 £000
<b>Income from:</b>									
Donations and legacies	2	26,844	-	5,362	<b>32,206</b>	22,734	-	4,676	27,410
Charitable activities		7,654	-	-	<b>7,654</b>	27,224	-	-	27,224
Other trading activities	3	8,306	-	681	<b>8,987</b>	11,302	-	553	11,855
Investments		732	-	-	<b>732</b>	395	-	-	395
<b>Total income</b>		<b>43,536</b>	<b>-</b>	<b>6,043</b>	<b>49,579</b>	<b>61,655</b>	<b>-</b>	<b>5,229</b>	<b>66,884</b>
<b>Expenditure on raising funds</b>									
	4	23,112	-	-	<b>23,112</b>	21,774	-	-	21,774
<b>Expenditure on charitable activities</b>									
	5	24,695	-	5,622	<b>30,317</b>	16,816	-	5,401	22,217
<b>Total expenditure</b>		<b>47,807</b>	<b>-</b>	<b>5,622</b>	<b>53,429</b>	<b>38,590</b>	<b>-</b>	<b>5,401</b>	<b>43,991</b>
Net realised investment gain	11	-	-	-	<b>-</b>	-	-	-	-
Net unrealised investment (loss)/gain	11	(265)	-	-	<b>(265)</b>	(122)	-	-	(122)
<b>Total net investment (loss)/gain</b>		<b>(265)</b>	<b>-</b>	<b>-</b>	<b>(265)</b>	<b>(122)</b>	<b>-</b>	<b>-</b>	<b>(122)</b>
<b>Net income/ (expenditure)</b>		<b>(4,536)</b>	<b>-</b>	<b>421</b>	<b>(4,115)</b>	<b>22,943</b>	<b>-</b>	<b>(172)</b>	<b>22,771</b>
<b>Transfers between funds</b>	20	2,887	(2,955)	68	<b>-</b>	(23,767)	23,655	112	-
<b>Net movement in funds</b>		<b>(1,649)</b>	<b>(2,955)</b>	<b>489</b>	<b>(4,115)</b>	<b>(824)</b>	<b>23,655</b>	<b>(60)</b>	<b>22,771</b>
Funds brought forward	20	11,385	37,155	665	<b>49,205</b>	12,209	13,500	725	26,434
<b>Funds carried forward</b>	<b>20</b>	<b>9,736</b>	<b>34,200</b>	<b>1,154</b>	<b>45,090</b>	<b>11,385</b>	<b>37,155</b>	<b>665</b>	<b>49,205</b>

The Consolidated Statement of Financial Activities is for the Group as a whole. Total income for the year for the parent charity was £49,001,000 (2022: £66,602,000).

All amounts relate to continuing operations. All gains and losses recognised in the year are included in the Consolidated Statement of Financial Activities. There are no material differences between the net income for the financial year and the historical cost equivalents.

# BALANCE SHEETS

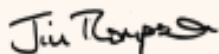
As at 31 July 2023

	Note	2023 £000	Group 2022 £000	Charity 2023 £000	Charity 2022 £000
<b>Fixed assets</b>					
Intangible assets	9	2,066	998	2,066	998
Tangible assets	10	389	587	389	587
Investments	11	19,693	19,958	19,693	19,958
		<b>22,148</b>	<b>21,543</b>	<b>22,148</b>	<b>21,543</b>
<b>Long term debtors</b>					
	15	12,732	15,040	12,732	15,040
<b>Current assets</b>					
Current investments	12	-	-	-	-
Debtors	14	14,286	13,571	18,608	16,875
Cash at bank and in hand		15,817	19,461	8,197	10,989
		<b>30,103</b>	33,032	<b>26,805</b>	27,864
Creditors: amounts falling due within one year	16	(14,333)	(16,208)	(12,141)	(12,614)
<b>Net current assets</b>					
		<b>15,770</b>	16,824	<b>14,664</b>	15,250
<b>Total assets less current liabilities</b>					
		<b>50,650</b>	53,406	<b>49,544</b>	51,832
Creditors: amounts falling due after more than one year	17	(5,105)	(3,860)	(4,006)	(2,299)
Provisions for liabilities	19	(455)	(341)	(455)	(341)
<b>Net assets</b>					
		<b>45,090</b>	49,205	<b>45,083</b>	49,192
<b>Unrestricted Funds</b>					
Unrestricted Funds	20	9,736	11,385	9,729	11,372
Designated Funds	20	34,200	37,155	34,200	37,155
Restricted Funds	20	1,154	665	1,154	665
<b>Total Funds</b>					
		<b>45,090</b>	49,205	<b>45,083</b>	49,192

The notes on pages 75 to 97 form part of these financial statements.

The Charity's net movement in funds for the year was a decrease of £(4.1)m (2022: increase of £22.8m)

The financial statements of Breast Cancer Now (Company No: 9347608) were approved by the Board of Trustees and authorised for issue on 29th November 2023 and were signed on its behalf.



Jill Thompson **Trustee**

# CONSOLIDATED CASH FLOW STATEMENT

For the year ended 31 July 2023

	Note	£000	Group 2023 £000	£000	Group 2022 £000
<b>Cash flows from operating activities:</b>					
<b>Net cash generated in operating activities</b>	a		<b>(2,859)</b>		<b>5,288</b>
<b>Cash flows from investing activities</b>					
Dividends, interest and rents from investments		614		(9,392)	
Purchase of tangible fixed assets	10	(59)		(356)	
Purchase of intangible fixed assets	9	(1,340)		(150)	
Proceeds from sale of investments	11	-		-	
<b>Net cash generated investing activities</b>			<b>(785)</b>		<b>(9,898)</b>
Change in cash in the reporting period			(3,644)		(4,610)
Cash at the beginning of the reporting period			19,461		24,071
<b>Cash at the end of the reporting period</b>	b		<b>15,817</b>		<b>19,461</b>
<b>(a) reconciliation of net incoming resources to net cash flow from operating activities</b>					
			<b>Group 2023 £000</b>		<b>Group 2022 £000</b>
Net income for the reporting period (as per the Statement of Financial Activities)			(4,115)		22,771
Depreciation and amortisation	9,10		525		663
Loss on disposal of fixed assets			5		-
Increase in provisions			114		(60)
Realised gain on investments	11		-		-
Unrealised loss/(gain) on investments	11		265		122
Dividends, interest and rents from investments			(732)		(395)
Investment fees deducted from portfolio	11		118		120
Decrease in stock			-		-
Increase in debtors			1,588		(16,542)
Decrease in creditors			(627)		(1,391)
<b>Net cash generated from operating activities</b>			<b>(2,859)</b>		<b>5,288</b>
<b>(b) Analysis of cash and cash equivalents</b>					
			<b>Group 2023 £000</b>		<b>Group 2022 £000</b>
Cash in hand			11,317		17,415
Notice deposits (less than 3 months)			4,500		2,046
<b>Total cash and cash equivalents</b>			<b>15,817</b>		<b>19,461</b>

# FINANCIAL ACCOUNTS AND NOTES

Breast Cancer Now  
Notes to the financial statements for the year ended 31 July 2023

## 1. Accounting policies

### Charity information

Breast Cancer Now (“the Charity”) is a Public Benefit Entity which was incorporated on 9 December 2014, and is registered in England and Wales (company number 09347608) and in the Isle of Man (company number 6021F). It was registered as a charity on 18 February 2015 with the Charity Commission in England and Wales (charity number 1160558), in Scotland (charity number SC045584) and the Isle of Man (charity number 1200). The Charity was established following the merger of Breakthrough Breast Cancer and Breast Cancer Campaign on 1 April 2015. On 29 April 2019 the Charity, following approval by the Trustees, acquired Breast Cancer Care.

On 30 April 2020, the Charity became the sole Corporate Trustee of Second Hope (Registered Charity No:1163205) a charity committed to supporting research in secondary breast cancer. Second Hope has been consolidated in the financial statements as a subsidiary.

### Basis of preparation

These financial statements are prepared under the historical cost convention, as modified by the inclusion of investments at fair value and in accordance with Financial Reporting Standard 102 (‘FRS 102’) ‘The Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland’ and with the Statement of Recommended

Practice ‘Accounting and Reporting by Charities’ FRS 102 as revised in 2019 (‘the SORP 2019’), together with the Companies Act 2006, the Charities Act 2011, the Charities and Trustee Investment (Scotland) Act 2005 and the Charities Accounts (Scotland) Regulations 2006.

The functional currency of the Group and Charity is considered to be GBP because that is the currency of the primary economic environment in which the Charity operates.

### Going concern

The board has reviewed the Charity’s activities and financial position together with factors likely to affect the future development, including the impact of economic uncertainty on voluntary income.

The financial impact of the cost of living crisis and a review of a range of scenarios assessing the potential impact on income projections has confirmed that appropriate actions can be implemented to maintain financial reserves within the policy range. It is therefore reasonable to expect the Charity to have adequate resources to continue in operation in the foreseeable future.

During 2022-23, income performed at levels in line with our 2022-23 budget and with continued resilience of the income streams from individual donors and corporate partners.

### Consolidation

The financial statements consolidate the Charity and its trading subsidiaries (“Group”). The income and expenditure from the date of acquisition has been incorporated in these financial statements.

A subsidiary is an entity controlled by the Group. Control is the power to govern the financial and operating policies of an entity so as to obtain benefits from its activities.

### Exemptions

The Charity has taken advantage of the exemption in section 408 of the Companies Act from disclosing its individual Statement of Financial Activities.

### Business combinations

Business combinations are accounted for by applying the purchase method. The cost of a business combination is the fair value of the consideration given, liabilities incurred or assumed and of equity instruments issued plus the costs directly attributable to the business combination. For combinations at nil or nominal consideration which are in substance a gift, any excess of the fair value of the assets received over the fair value of the liabilities assumed is recognised as a gain in the Statement of Financial Activities (“SOFA”). On acquisition, the fair values are attributed to the identifiable assets, liabilities and contingent assets.



Since the Charity is a charitable company, it is subject to the restriction in the Companies Act Accounts Regulations that prohibits the recognition of unrealised gains in the profit and loss account. In circumstances where the fair value of the assets received exceeds the fair value of the liabilities assumed, only the element of the gain which relates to the realised profits is recognised as “Other income” in the SOFA. The element of the gain which relates to unrealised profits is recognised as “Other recognised gains” in the SOFA.

### Funds

The following funds are held by the Charity:

- Restricted funds arise as a result of the donor making a specific stipulation as to how the funds may be used. This is often relating to a specific activity or grant that may fall over a number of years and therefore the balance carried forward at the year-end is committed for those activities. Restricted funds stood at £1.2 million at the year-end.
- Unrestricted funds arise when no stipulation is made by the donor. The Trustees are responsible for ensuring these funds are spent in line with the charity’s objectives in a timely fashion. Unrestricted free reserves stood at £9.7 million at the year-end.
- Designated funds arise when no stipulation is made by the donor but which have been set aside by trustees for essential

spend, future purpose or to reflect funds that are not available to expend such as fixed assets and long-term debtors. The trustees are responsible for ensuring these funds are spent in line with the charity’s objectives in a timely fashion. Designated reserves stood at £34.2 million at the year-end.

The Charity relies heavily on donations and legacies, which fluctuate year on year. In order to continue day-to-day operations, the trustees have identified that a minimum level of unrestricted funds should be maintained. This minimum level of funds is kept under annual review by the trustees in line with the reserves policy as described in the trustees report (page 52).

### Income

Income is accounted for and included in the SOFA when the Group is entitled to the income, receipt can be quantified and receipt is probable. Income is deferred when it relates to future accounting periods.

### Donations

Donations are recognised upon receipt along with any related gift aid. Donations which have been collected by a third party but not yet passed to the Charity are accrued based on the date of collection.

### Legacies

Legacies are recognised when capable of financial measurement, receipt is probable and

where there are no conditions that still need to be fulfilled. Pecuniary legacies are recognised once notification has been received and probate has been granted. Residuary legacies are recognised once notification has been received, probate has been granted and they can be reliably measured, usually on receipt of estate accounts.

### Corporate sponsorship and products

Income from corporate sponsorship and products is measured at the fair value of

consideration received or receivable and represents the amounts receivable, net of value added taxes. The Group recognises revenue when it has an entitlement to the revenue, it is probable that it will be received and the amount can be reliably measured. Revenue from corporate sponsorship is recognised over the period of the sponsorship arrangement. Revenue for the sale of goods is recognised at the point of sale.

### Lotteries

Income received in respect of lotteries is recognised when the draw is made. Income received in advance for future lottery draws is deferred until the draw takes place.

**Donated goods and services**

Donated goods and services are recognised in the accounts when the benefit to the Charity is reasonably quantifiable and measurable. The value is the price the Charity estimates it would pay should it purchase equivalent goods or services.

**Investment income**

Investment income is recognised on a receivable basis.

**Regional groups**

The income of regional fundraising groups includes all transactions cleared on the regional group bank statements up to the year-end.

**Fundraising events**

The company recognises revenue for events at the date of event. Where revenue is received in advance, recognition is deferred and included in creditors and where entitlement arises before income is received, the income is accrued.

**Grants**

Grant income is recognised when the funding offer is communicated in writing to the Charity or when performance-related conditions are met.

**Expenditure**

Expenditure is accounted for on an accruals basis and attributed to the appropriate activities within the SOFA.

Expenditure on raising funds includes direct staff costs and expenditure relating to all fundraising activities. Support costs are apportioned on a headcount basis. Additionally, it includes marketing costs and management support.

Expenditure on charitable activities includes direct staff costs and expenditure relating to charitable activities provision of services, clinical support, health information and policy and campaign costs, and research grant expenditure.

Research grants in furtherance of the Charity's objectives are the total amounts granted to external bodies for charitable work. The grants made by the trustees are recognised in the

SOFA in the year the grant is awarded and notified to the recipient, provided a legal or constructive commitment exists and any conditions attaching to the grant have been fulfilled by the recipient. The liability is measured as the total of expected payments for the period to the next scientific review.

Costs relating to the sale of goods include the direct costs of purchasing and distributing goods for sale.

Communication and support costs are reviewed and any costs directly relating to our charitable activities have been allocated to the appropriate strategic charitable priority with the remainder being apportioned to charitable activities and raising funds based on a combination of headcount and staff time.

Governance costs are the costs incurred to manage the Charity in compliance with

constitutional and statutory requirements and are included in support costs.

**Operating leases**

Rentals under operating leases are charged on a straight-line basis over the lease term, even if the payments are not made on such a basis. Benefits received and receivable as an incentive to sign an operating lease are similarly spread on a straight-line basis over the lease term.

**Taxation**

Breast Cancer Now has charitable status and therefore any income and gains are exempt from corporation tax under Section 202 of the Corporation Act 2010 to the extent that they are applied for their charitable objects.

Value Added Tax is only partially recoverable by the Charity and therefore the nonrecoverable element is included with the expenditure on which the VAT was charged in the SOFA.

The Charity's subsidiaries do not generally pay UK Corporation Tax because their policy is to pay taxable profits to the Charity as gift aid.

#### Pensions

Employees are entitled to join the pension scheme provided by Aviva. These are defined contribution schemes administered by an independent scheme administrator. Scheme funds are independent to the Charity and invested with Aviva. The Charity contributes by matching employee contributions to their personal pension to a maximum of 8% of salary. The cost of providing this pension scheme is charged to the SOFA when it's incurred.

#### Investments

Fixed asset investments are stated at fair value at the balance sheet date. Any realised or unrealised gains and losses are shown in the SOFA. Gains and losses are calculated with reference to market values as at the beginning of the year or cost if purchased during the year.

Current investments are shown at cost less any provision for expected losses.

#### Financial instruments

Basic financial instruments are initially recognised at transaction value and subsequently measured at amortised cost with the exception of investments which are held at fair value.

Financial assets held at amortised cost comprise cash at bank and in hand, together with trade and other debtors excluding prepayments. A specific provision is made for debts for which recoverability is in doubt. Cash at bank and in hand is defined as all cash held in instant access bank accounts and used as working capital.

Financial liabilities held at amortised cost comprise all creditors excluding deferred income, social security and other taxes and provisions.

Assets and liabilities held in foreign currency are translated to GBP at the balance sheet date at an appropriate year end exchange rate.

No discounting has been applied to these financial instruments on the basis that the periods over which amounts will be settled are such that any discounting would be immaterial.

Listed investments are included in the balance sheet at fair value which is their closing bid price. Unlisted investments are included in the balance sheet at their fair value. Investments in subsidiary undertakings are

held at cost less impairment. All investment gains and losses are included within the SOFA.

At the balance sheet date the Group held financial at fair value of £19,693k (2022: £19,958k).

#### Tangible assets

Tangible fixed assets are stated at cost, less depreciation. Assets of under £1,000 in value are not capitalised but are taken fully as expenditure in the year of purchase.

Disposed assets are removed from the fixed asset register on the date of their sale or disposal. Any gain or loss on disposal is included within the SOFA. Depreciation is provided by the straight-line method, calculated to write off assets over their estimated useful lives at the following rates:

- Fixtures and fittings: over 4 years
- Leasehold improvements: over lease period
- IT hardware: over 4 years

Tangible assets are subject to an annual impairment review, and any impairment identified is recognised in the SOFA in the year of the review.

**Intangible assets**

Intangible assets are stated at cost less accumulated amortisation. Intangible assets of under £1,000 in value are not capitalised but are expensed fully in the year of purchase.

Amortisation is calculated using the straight-line method at the following rate, calculated to write off assets over their estimated useful lives at the following rate:

- IT software and website: 4-7 years

**Critical accounting judgements and key sources of estimation uncertainty**

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

Critical accounting estimates:

- Legacies inherently contain a degree of uncertainty and are recognised in line with the income accounting policy.

In the view of the trustees, no assumptions concerning the future or estimation uncertainty affecting assets and liabilities at the balance sheet date are likely to result in a material adjustment to their carrying amounts in the next financial year.

Critical accounting judgements:

- Donated goods and services are not recognised where the incremental benefit to the charity cannot be reliably measured. This will primarily relate to services which are gifted on a pro-bono basis and there is no comparable expenditure incurred by the

Charity. Please see note 2.

# NOTES TO THE FINANCIAL STATEMENTS

for the year ended 31 July 2023

## 2. Donations and legacies

	Unrestricted £000	Restricted £000	2023 £000	Unrestricted £000	Restricted £000	2022 £000
Trusts and appeals	2,969	192	3,161	147	660	807
Donations and legacies from individuals	23,123	1,887	25,010	20,784	1,518	22,302
Corporate donations	749	3,283	4,032	1,802	2,498	4,300
Donation from subsidiary	-	-	-	-	-	-
Other income	3	-	3	1	-	1
<b>Total</b>	<b>26,844</b>	<b>5,362</b>	<b>32,206</b>	22,734	4,676	27,410

The Charity benefits from the services of unpaid volunteers. The value of this has not been recognised in the financial statements.

Donations and legacies from individuals includes £109,580 (2022: £20,235 of donated goods for auction prizes and has been recognised in the SOFA).

Legal advice was provided on a pro-bono basis the value of which totalled £65,897 (2022: £17,073) and has been recognised in the SOFA.

During the year the Charity was donated credits for ads by Google and Meta. The value of which was £347,307 (2022 £340,000) which has also been recognised in the SOFA.

The net amounts for pecuniary and residuary cases not included in legacy income as at 31 July 2023, but which are classed as a contingent asset total £25,000 (2022: £25,000).



**3. Other trading activities**

	Unrestricted £000	Restricted £000	<b>2023</b> <b>£000</b>	Unrestricted £000	Restricted £000	2022 £000
Events	1,054	-	1,054	618	-	618
Corporate products and sponsorship	1,654	681	2,335	2,484	553	3,037
Lottery income	5,598	-	5,598	8,070	-	8,070
Other income	-	-	-	130	-	130
<b>Total</b>	<b>8,306</b>	<b>681</b>	<b>8,987</b>	11,302	553	11,855

**4. Expenditure on raising funds**

	Direct costs £000	Support costs £000	<b>Total</b> <b>2023</b> <b>£000</b>	Direct costs £000	Support costs £000	Total 2022 £000
Cost of raising funds from donations and legacies	20,330	1,877	22,207	19,344	1,840	21,184
Cost of other trading activities	719	68	787	428	42	470
Cost of managing investments	118	-	118	120	-	120
	<b>21,167</b>	<b>1,945</b>	<b>23,112</b>	19,892	1,882	21,774

## 5. Expenditure on charitable activities

5a. Charitable activities	Grants £000	Direct costs £000	Support costs £000	Total 2023 £000	Grants £000	Direct costs £000	Support costs £000	Total 2022 £000
Research	15,553	3,617	1,069	20,239	12,198	1,862	780	14,840
Clinical	-	1,083	333	1,416	-	882	242	1,124
Services	-	3,907	803	4,710	-	2,986	587	3,573
Health Information & Policy	-	3,336	616	3,952	-	2,230	450	2,680
	<b>15,553</b>	<b>11,943</b>	<b>2,821</b>	<b>30,317</b>	12,198	7,960	2,059	22,217

### 5b. Grants

Grants were made to the following Institutions during the year:

	2023 £000	2022 £000
Institute of Cancer Research	10,335	8,863
Queen Mary University of London	(123)	(338)
Kings College London	1,773	694
Queen Mary University Belfast	142	677
Barts	(93)	514
University of Edinburgh	(9)	302
University of Southampton	(29)	221
University of Cambridge	1,027	451
University of Bradford	116	278
University of Oxford	626	-
University of Exeter	173	-
Imperial College London	253	-
University of Sheffield	138	-
University of Surrey	150	-
Royal College of Surgeons in Ireland	-	(32)
Newcastle University	250	-
University of Manchester	262	230
University of Birmingham	249	-
University of Cardiff	231	-
University of Leeds	44	215
Other Institutions	38	123
	<b>15,553</b>	12,198

## 6. Support costs

	<b>2023</b>	<b>2022</b>
	<b>£000</b>	<b>£000</b>
IT, Finance & HR	2,183	1,660
Office	1,798	1,585
Management	332	407
Governance	455	289
	<b>4,768</b>	<b>3,941</b>

Total support costs of £4,767,000 (2022:£3,941,000) comprise of charitable support costs of £2,821,000 (2022: £2,050,000) and expenditure on raising funds of £1,946,000 (2022: £1,892,000). All support costs have been allocated entirely on a headcount basis.

## 7. Net expenditure for the year

<b>This is stated after charging:</b>	<b>2023</b>	<b>2022</b>
	<b>£000</b>	<b>£000</b>
Depreciation and amortisation	526	663
Loss on disposal of fixed assets	-	-
Auditors' remuneration:		
Audit work	60	53
Audit work relating to prior year	-	-
Other services - taxation	-	-
Operating leases rentals		
Property	956	977
Equipment	20	9

## 8. Employees

	<b>2023</b> <b>£000</b>	<b>2022</b> <b>£000</b>
Wages and salaries	11,791	10,582
Social security costs	1,206	1,082
Pension costs	850	774
Other employee benefits	84	89
	<b>13,931</b>	12,527

Termination payments during the year totalled £0 (2022: £71,000). Termination payments are recognised on an accruals basis and are included within staff costs

The average number of employees during the year were:

	<b>2023</b> <b>no.</b>	<b>2022</b> <b>no.</b>
Charitable activities	160	134
Fundraising	121	121
Support Services and governance	49	39
	<b>330</b>	294

The number of employees receiving remuneration over £60,000 (excluding employer pension contributions) during the year was as follows:

	<b>2023</b> <b>Total</b> <b>no.</b>	<b>2022</b> <b>Total</b> <b>no.</b>
£60,001 - £70,000	5	3
£70,001 - £80,000	8	6
£80,001 - £90,000	-	-
£90,001 - £100,000	-	2
£100,001 - £110,000	3	1
£110,001 - £120,000	-	-
£120,001 - £130,000	-	-
£130,001 - £140,000	-	1
£140,001 - £150,000	1	-
	<b>17</b>	13

Pension costs for these higher paid employees amounted to £125,523 (2022: £99,356).

The key management personnel of the Charity comprise the Trustees, the Chief Executive, the Chief Operating Officer, the Director of Fundraising, Communication & Engagement and the Director of Research, Influencing & Services. The total earnings, including pension contributions, received by the key management personnel of the Charity during the year were £547,589 (2022: £529,636). In 2022/23 the Chief Executive was the highest paid member of staff and received remuneration of £144,242.

Trustees have not received remuneration (2022 £Nil). Trustees did not incur any expenses which have been reimbursed in undertaking their duties.

## 9. Intangible assets (Group and Charity)

### IT Software & Website

£000

#### Cost

At 1 August 2022	1,567
Additions	1,340
Disposals	(4)
Transfers	-
<b>At 31 July 2023</b>	<b>2,903</b>

#### Accumulated amortisation

At 1 August 2022	569
Charge for the year	269
Disposals	(1)
Transfers	-
<b>At 31 July 2023</b>	<b>837</b>

#### Net book value

Carried forward at 31 July 2022	998
<b>Carried forward at 31 July 2023</b>	<b>2,066</b>

## 10. Tangible assets (Group and Charity)

	Leasehold Improvements £000	Fixtures and Fittings £000	IT Hardware £'000	Total £000
<b>Cost</b>				
At 1 August 2022	1,229	433	653	2,315
Additions	-	-	59	59
Disposals	-	-	(336)	(336)
Transfers	-	-	-	-
<b>At 31 July 2023</b>	<b>1,229</b>	<b>433</b>	<b>376</b>	<b>2,038</b>
<b>Accumulated Depreciation</b>				
At 1 August 2022	782	422	524	1,728
Charge for the year	177	9	70	256
Disposals	-	-	(335)	(335)
Transfers	-	-	-	-
<b>At 31 July 2023</b>	<b>959</b>	<b>431</b>	<b>259</b>	<b>1,649</b>
<b>Net book value</b>				
Carried forward at 31 July 2022	447	12	129	587
<b>Carried forward at 31 July 2023</b>	<b>270</b>	<b>2</b>	<b>117</b>	<b>389</b>

There were no assets held under finance leases in either year.



**11. Investments (Group and Charity)**

	<b>2023</b>	<b>2022</b>
	<b>£000</b>	<b>£000</b>
<b>Market value at 1 August</b>	<b>19,958</b>	10,413
Realised gains	-	-
Unrealised (losses)/gains	(265)	(122)
Income reinvested	118	9,787
Investment fees	(118)	(120)
<b>Market value at 31 July</b>	<b>19,693</b>	19,958

All investment assets are held in the UK and are unrestricted. The total historic cost of these investments is £12,843,000. The holdings by fund on a market value basis are as follows:

<b>Fund</b>	<b>Asset class</b>	<b>Fund manager</b>	<b>2023</b>	<b>2022</b>
			<b>£000</b>	<b>£000</b>
CCLA	Equities, fixed interest and cash	CCLA	19,693	19,958
<b>Total market value</b>			<b>19,693</b>	19,958

**12. Current investments (Group and Charity)**

	<b>2023</b>	<b>2022</b>
	<b>£000</b>	<b>£000</b>
<b>Balance as at 1 August</b>	-	-
Write back of provision	-	-
Transfer to cash at bank and in hand	-	-
<b>Balance as at 31 July</b>	-	-

An assessment of the provision is set out in the critical accounting estimates in note 1.

### 13. Subsidiary undertakings

Breast Cancer Now has two active subsidiaries; BCN Trading Ltd (03090884) and BCN Research Ltd (05047652). The Charity also has 4 dormant subsidiaries and 1 non-trading subsidiary. All of the subsidiaries are incorporated in the United Kingdom and have a year end of 31 July, with the exception of Pink Ribbon Ltd. The investment in subsidiary undertakings held by the Charity at 31 July 2023 was £245 (2022: £245).

	Breast Cancer Care Trading Ltd £000	Second Hope £000	BCN Research Ltd £000	BCN Trading Ltd £000	<b>2023 Total £000</b>	<b>2022 Total £000</b>
Turnover	-	-	-	2,335	2,335	3,218
Cost of sales	-	-	(43)	-	(43)	22
Interest receivable	-	-	153	-	153	25
Administrative expenses	-	-	(6)	(571)	(577)	(475)
<b>Profit before gift aid and taxation</b>	-	-	104	1,764	1,868	2,790
Gift Aid payable to the Charity	-	-	(104)	(1,764)	(1,868)	(2,790)
<b>Profit before taxation</b>	-	-	-	-	-	-
Tax expense	-	-	-	-	-	-
<b>Profit after taxation</b>	-	-	-	-	-	-
Assets	-	185	4,046	4,383	8,614	10,405
Liabilities	-	-	(4,046)	(4,375)	(8,421)	(10,228)
<b>Net Assets</b>	-	185	-	8	193	177

Breast Cancer Campaign (05074725) and Breakthrough Breast Cancer (02848982). Pink Ribbon Ltd (04690589) and Breast Cancer Now Support and Care Lotteries Ltd (12397737) were dissolved during the year. The Charity is the Sole Trustee of Second Hope a registered charity (No:1163205).

The taxable profit from the subsidiaries each year is transferred to the parent Charity as a Gift Aid payment. For 2022/23 a total payable of £2,790,000 to the parent Charity has been recognised.

For a full listing of the subsidiary undertakings please see note 25.

**14. Debtors: amounts falling due within one year**

	<b>Group 2023 £000</b>	Group 2022 £000	<b>Charity 2023 £000</b>	Charity 2022 £000
Trade debtors	3,639	4,000	2,914	2,434
Amount owed by subsidiary undertakings	-	-	5,131	5,067
Other debtors	1,139	741	1,139	739
Prepayments & accrued income	7,196	6,700	7,112	6,505
Other accrued income	2,312	2,130	2,312	2,130
	<b>14,286</b>	<b>13,571</b>	<b>18,608</b>	<b>16,875</b>

Trade debtors includes £Nil (2022 £Nil) falling due after more than one year.

Amounts owed by group undertakings are unsecured, interest free, have no fixed date of repayment and are repayable on demand.

**15. Debtors: amounts falling due after more than one year**

	<b>Group 2023 £000</b>	Group 2022 £000	<b>Charity 2023 £000</b>	Charity 2022 £000
Other accrued income	12,732	15,040	12,732	15,040

**16. Creditors: amounts falling due within one year**

	<b>Group 2023 £000</b>	Group 2022 £000	<b>Charity 2023 £000</b>	Charity 2022 £000
Trade creditors	1,435	1,896	1,435	1,896
Grants payable	10,314	11,134	8,629	8,047
Taxes and social security	729	523	729	523
Accruals and deferred income	1,451	1,953	946	1,450
Other creditors	404	702	402	698
	<b>14,333</b>	16,208	<b>12,141</b>	12,614

Deferred income comprises sponsorship income received in advance of fundraising events taking place in 2023/24, as well as income received in advance for entries to our weekly lottery. Deferred income also includes income received relating to the Catalyst Programme which is run through BCN Research Ltd, a wholly owned subsidiary of Breast Cancer Now. Income is recognised at the point research spend is committed.

<b>Deferred income</b>	<b>Group 2023 £000</b>	Group 2022 £000	<b>Charity 2023 £000</b>	Charity 2022 £000
<b>Balance as at 1 August</b>	751	1,004	260	461
Amount released to income	(751)	(1,004)	(260)	(461)
Amount deferred in year	921	751	430	260
<b>Balance as at 31 July</b>	<b>921</b>	751	<b>430</b>	260

**17. Creditors: amounts falling due after more than one year**

	<b>Group</b> <b>2023</b> <b>£000</b>	Group 2022 £000	<b>Charity</b> <b>2023</b> <b>£000</b>	Charity 2022 £000
Grants payable	5,105	3,860	4,006	2,299

**18. Grants payable**

	<b>2023</b> <b>£000</b>	2022 £000
<b>At 1 August</b>	14,994	14,059
Awarded during the year	15,951	13,591
Paid during the year	(15,126)	(11,877)
Adjustments during the year	(400)	(779)
<b>As at 31 July</b>	<b>15,419</b>	14,994
Due within one year (note 16)	10,314	11,134
Due after one year (note 17)	5,105	3,860
<b>As at 31 July</b>	<b>15,419</b>	14,994

A list of all grants awarded in year is included under Note 5b which represents grants awarded during the year of £15,951,000 (2022: £13,591,000) and adjustments during the year of a credit of £400,000 (2022: credit of £779,000), totalling £15,551,000 (2022: £12,994,000).

At 31 July 2023 the Charity had a unrecognised commitments of £24m (2022: £36.9m) for grant awards which are conditional upon the favourable outcome of both scientific and financial reviews. The decrease reflects the impact of the grants awarded in the year. The contingent liability relates to grants which are expected to be awarded until the next grant process in 2024/25. These commitments will be funded from income in the relevant period.

**19. Provisions for liabilities (Group and Charity)**

	<b>Onerous lease</b>	<b>Dilapidations</b>	<b>Other</b>	<b>Total</b>	<b>Onerous lease</b>	<b>Dilapidations</b>	<b>Total</b>
	<b>2023</b>	<b>2023</b>	<b>2023</b>	<b>2023</b>	<b>2022</b>	<b>2022</b>	<b>2022</b>
	<b>£000</b>	<b>£000</b>	<b>£000</b>	<b>£000</b>	<b>£000</b>	<b>£000</b>	<b>£000</b>
<b>Balance as at 1 August</b>	-	341	-	341	60	341	401
Additional provision	-	114	-	114	-	-	-
Utilised	-	-	-	-	(60)	-	(60)
Released	-	-	-	-	-	-	-
<b>Balance as at 31 July</b>	-	455	-	<b>455</b>	-	341	341

The dilapidations provision is expected to be utilised by January 2025.



**20. Reconciliation of funds**

	Balance at 1 August 2022 £000	Transfers £000	Income £000	Expenditure £000	Investment loss £000	Balance at 31 July 2023 £000
<b>Unrestricted funds</b>	<b>11,385</b>	<b>2,887</b>	<b>43,536</b>	<b>(47,807)</b>	<b>(265)</b>	<b>9,736</b>
<b>Designated funds</b>	37,155	(2,955)	-	-	-	34,200
<b>Restricted</b>						
General Research (1)	353	137	2,460	(2,299)	-	651
Prevention Research (2)	-	-	672	(672)	-	-
Secondary Research (3)	(171)	171	-	-	-	-
Support Services (4)	314	(69)	406	(651)	-	-
Other restricted funds (5)	170	(171)	2,504	(2,000)	-	503
<b>Total restricted funds</b>	<b>665</b>	<b>68</b>	<b>6,043</b>	<b>(5,622)</b>	<b>-</b>	<b>1,154</b>
<b>Total Group funds</b>	<b>49,205</b>	<b>-</b>	<b>49,579</b>	<b>(53,429)</b>	<b>(265)</b>	<b>45,090</b>
<b>Unrestricted Charity funds</b>	<b>11,372</b>	<b>2,105</b>	<b>43,481</b>	<b>(46,965)</b>	<b>(265)</b>	<b>9,729</b>
<b>Designated Charity funds</b>	<b>37,155</b>	<b>(2,955)</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>34,200</b>
<b>Restricted Charity funds</b>	<b>665</b>	<b>68</b>	<b>6,043</b>	<b>(5,622)</b>	<b>-</b>	<b>1,154</b>
<b>Total Charity funds</b>	<b>49,192</b>	<b>(782)</b>	<b>49,524</b>	<b>(52,587)</b>	<b>(265)</b>	<b>45,083</b>

## Notes

- (1) Donations specifically given to fund general research
- (2) Donations specifically given to fund the research area of prevention
- (3) Donations specifically to support the research area of secondary breast cancer
- (4) Donations specifically to support our services
- (5) This includes a variety of funds, where donations are restricted to specific areas of research and other charitable activity.

### Designated Funds

The Charity's commitment to fund research is on a long-term objective which has been funded through annual net fundraising income which is subject to fluctuations.

Total funds at the year-end were £49.2 million (2021: £26.4 million) and are £39.4m more than the minimum level of reserves, most of which has been currently designated to fund long-term research commitments and will be expended over the coming years.

The prior year reconciliation of funds is shown below

	Balance at 1 August 2021 £000	Transfers £000	Income £000	Expenditure £000	Investment gains £000	Balance at 31 July 2022 £000
<b>Unrestricted funds</b>	<b>12,209</b>	<b>(23,767)</b>	<b>61,655</b>	<b>(38,590)</b>	<b>(122)</b>	<b>11,385</b>
<b>Designated funds</b>	13,500	23,655	-	-	-	<b>37,155</b>
<b>Restricted</b>						
Tissue Bank	-	-	50	(50)	-	-
Prevention Research	-	-	295	(295)	-	-
Kings College London	-	-	20	(20)	-	-
Molecular Cell Biology	-	-	200	(200)	-	-
Gene Function Analysis	-	-	-	-	-	-
Secondary Research	-	170	94	(265)	-	(1)
Other restricted funds	725	(58)	4,569	(4,570)	-	665
<b>Total restricted funds</b>	<b>725</b>	<b>112</b>	<b>5,229</b>	<b>(5,401)</b>	<b>-</b>	<b>665</b>
<b>Total Group funds</b>	<b>26,434</b>	<b>-</b>	<b>66,884</b>	<b>(43,991)</b>	<b>(122)</b>	<b>49,205</b>
<b>Unrestricted Charity funds</b>	<b>12,196</b>	<b>(23,767)</b>	<b>61,252</b>	<b>(38,186)</b>	<b>(122)</b>	<b>11,372</b>
<b>Designated Charity funds</b>	<b>13,500</b>	<b>23,655</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>37,155</b>
<b>Restricted Charity funds</b>	<b>725</b>	<b>112</b>	<b>5,229</b>	<b>(5,401)</b>	<b>-</b>	<b>665</b>
<b>Total Charity funds</b>	<b>26,421</b>	<b>-</b>	<b>66,481</b>	<b>(43,587)</b>	<b>(122)</b>	<b>49,192</b>

## 21. Analysis of net assets between funds

	Group Unrestricted	Group Designated	Group Restricted	Group Total	Group Unrestricted	Group Designated	Group Restricted	Group Total
	2023	2023	2023	2023	2022	2022	2022	2022
	£000	£000	£000	£000	£000	£000	£000	£000
Tangible & Intangible assets	2,456	-	-	<b>2,456</b>	1,585	-	-	1,585
Investments	6,193	13,500	-	<b>19,693</b>	6,458	13,500	-	19,958
Net current assets	6,649	7,968	1,154	<b>15,770</b>	7,544	8,615	665	16,824
Long term assets	-	12,732	-	<b>12,732</b>	-	15,040	-	15,040
Long term liabilities	(5,562)	-	-	<b>(5,562)</b>	(4,202)	-	-	(4,202)
<b>Total net assets</b>	9,736	34,200	1,154	<b>45,090</b>	11,385	37,155	665	49,205

	Charity Unrestricted	Charity Designated	Charity Restricted	Charity Total	Charity Unrestricted	Charity Designated	Charity Restricted	Charity Total
	2023	2023	2023	2023	2022	2022	2022	2022
	£000	£000	£000	£000	£000	£000	£000	£000
Tangible & Intangible assets	2,455	-	-	<b>2,455</b>	1,585	-	-	1,585
Investments	6,193	13,500	-	<b>19,693</b>	6,458	13,500	-	19,958
Net current assets	5,542	7,968	1,154	<b>14,664</b>	5,971	8,615	665	15,250
Long term assets	-	12,732	-	<b>12,732</b>	-	15,040	-	15,040
Long term liabilities	(4,461)	-	-	<b>(4,461)</b>	(2,641)	-	-	(2,641)
<b>Total net assets</b>	9,729	34,200	1,154	<b>45,083</b>	11,373	37,155	665	49,192

## 22. Financial and other commitments

### Operating lease commitments

The Group and Charity have the following future minimum lease payments under non-cancellable operating leases for each of the following periods:

	2023 £000	2022 £000
<b>Property leases expiring:</b>		
Within one year	989	989
Within two to five years	416	1,355
In over five years	-	-
<b>Equipment leases expiring:</b>		
Within one year	8	8
Within two to five years	1	10
In over five years	-	-

Lease payments expensed in the year are disclosed in note 7.

## 23. Trustee expenses

The Trustees received no remuneration in the year. No Trustees received reimbursement expenses totalling during the year (2022: £nil).

The Charity has in place insurance to indemnify the Trustees for actions brought against them for wrongful acts committed. A Trustee indemnity insurance policy was held during the year as follows:

From 1 April 2023 to 31 March 2024 - PIB Insurance Brokers. Indemnity cover £1,000,000. The total Management Liability package came to £4,801 which covers trustee indemnity, employment practices liability and entity legal liability.

From 1 April 2022 to 31 March 2023 - Hiscox Ltd. Indemnity cover £1,000,000. The cost of this specific policy is £529.

From 1 April 2021 to 31 March 2022 - Hiscox Ltd. Indemnity cover £2,000,000. The cost of this specific policy is £960.

From 1 April 2019 to 31 March 2021 - Hiscox Ltd. Indemnity cover of £2,000,000. The cost of this specific policy is £1,159

## 24. Related party disclosures

In accordance with FRS 102, the Charity discloses related party transactions that were recognised in the SOFA. Expenses reimbursed to Trustees are disclosed in Note 22 of the financial statements. Remuneration of key management personnel is disclosed under Note 8 of the financial statements.

However, some Trustees, members of the Charity's Board and directors of its subsidiary undertakings are Trustees or directors of organisations that are in receipt of funds from the Group or enter into commercial transactions with the Group. The following transactions are disclosed as the individuals concerned are regarded as holding a position of influence in both parties to the transactions concerned at the time they were entered into:

During the year the Charity awarded grants of £nil (2022: £302,000) and grant adjustments of £8,615 (2022: £Nil) to the University of Edinburgh and had an outstanding creditor of £445,384 at year end (2022: £549,000). The Charity made payments of £95,622 during the year (2022: £48,000). Trustee Mark Astaire is a member of the International Advisory Board of the University of Edinburgh.

During the year the Charity awarded grants of £142,889 and grant adjustments of £782 (2022: £nil and £2,000 respectively) to the University of Sheffield. There was an outstanding creditor of £142,000 at year end. The Charity made a payment of £4,064 (2022: £3,000) during the year. Trustee Ingunn Holen is an employee (tenured) of the University of Sheffield.

During the year the Charity made a grant adjustment of £4,863 (2022:£nil) to the University of Nottingham. There was no outstanding creditor at year end. The Charity made a payment of £10,676 (2022: £99,349) during the year. Trustee Georgette Oni is a Consultant Oncoplastic Breast Surgeon at the University of Nottingham.

During the year the Charity made a grant adjustment of £1,766 (2022:£nil) to Maidstone & Tunbridge Wells NHS Trust. There was an outstanding creditor of £81,350 at year end. The Charity made a payment of £44,878 (2022: £50,061) during the year. Trustee Claire Ryan is a Macmillan Consultant Nurse Metastatic Breast Cancer at the Trust.

The Charity paid a levy to the Fundraising Regulator of £8,000 (2022: £8,000) during the year. The Charity had an outstanding creditor of £Nil at year end (2022: £Nil). The Chair, Jill Thompson, holds the position of Director at the Fundraising Regulator.

The Charity paid a sponsorship fee of £1,000 to LTA BWBC Ltd (2022: £nil) during the year. The Charity had an outstanding creditor of £Nil at year end (2022: £Nil). A Trustee, Georgette Oni, holds the position of Director, Consultant Oncoplastic Breast Surgeon at LTA BWBC Ltd.

The Charity received a corporate donation of £42,315 from AstraZeneca to support the Helpline and Ask Our Nurses (2022: £nil). There was an outstanding debtor of £nil at year-end. A Trustee, Professor Mitch Dowsett provide ad-hoc advice to AstraZeneca.

The Charity received a corporate donation of £41,196 from Gilead Sciences Ltd and £30,000 from Pfizer Limited to support Living with Secondary Breast Cancer programme (2022: £nil). There was an outstanding debtor of £nil at year-end. A Trustee, Claire Ryan holds a Honorarium for Chair of the National Nurse Education Meeting (The Elevate Series) and Honorarium for Nursing Education Sharing Best Practice respectively.

The Charity received a corporate donation of £15,194 from Exact Sciences International to support the Helpline and Ask Our Nurses (2022: £nil). There was an outstanding debtor of £nil at year-end. A Trustee, Barbara Brown was engaged to provide a 6 month coaching programme for the Business Lead for Scotland and Northern Ireland.

During the year, the Charity had the following transactions with its subsidiary companies:

- Payable under Gift Aid from BCN Trading Ltd of £1,764,000 (2022: £2,696,000) and management charge of £563,886 (2022: £468,955).
- Payable under Gift Aid from BCN Research Ltd of £104,600 (2022: £173,000).

At the year end, the Charity had an outstanding debtor balance due from BCN Trading Limited of £2,947,000 (2022: £3,325,000), an outstanding debtor balance due from BCN Research Limited of £761,000 (2022: £250,000), and an outstanding debtor balance from Breast Cancer Care Trading Limited of £nil (2022: £nil).

## 25. Subsidiary entities

Name	%	Registration	Registered Office	Status
<b>BCN Trading Limited</b>	100	England & Wales	Fifth Floor, Ibex House, 42-47 Minories, London EC3N 1DY	Trading
<b>BCN Research Limited</b>	100	England & Wales	Fifth Floor, Ibex House, 42-47 Minories, London EC3N 1DY	Trading
<b>Breast Cancer Care Trading Limited</b>	100	England & Wales	Fifth Floor, Ibex House, 42-47 Minories, London EC3N 1DY	Non-trading
<b>Breast Cancer Campaign</b>	100	England & Wales	Fifth Floor, Ibex House, 42-47 Minories, London EC3N 1DY	Dormant
<b>Breakthrough Breast Cancer</b>	100	England & Wales	Fifth Floor, Ibex House, 42-47 Minories, London EC3N 1DY	Dormant
Charitable Incorporated Organisation	Ownership	Regulator	Registered Office	Status
<b>Second Hope</b>	Sole Trustee	Charity Commission	Fifth Floor, Ibex House, 42-47 Minories, London EC3N 1DY	Active





BREAST  
CANCER

BREAST  
CANCER  
NOW The research  
& care charity

BREAST  
CANCER  
NOW The research  
& care charity

I volunteer because  
I was supported by  
Tracey.

# LEGAL AND ADMINISTRATIVE DETAILS

## **Independent Auditors**

Crowe U.K. LLP  
55 Ludgate Hill, London EC4M 7JW

## **Bankers**

Barclays Bank plc  
1 Churchill Place, London E14 5HP

## **Solicitors**

Russell Cooke  
2 Putney Hill, London SW15 6AB

## **Investment Managers**

CCLA  
Senator House, 85 Queen Victoria  
Street, London EC4V 4ET

## **Registered Office**

5<sup>th</sup> Floor Ibex House, 42-47  
Minories, London EC3N 1DY

## **Glasgow**

Robertson House, Ground Floor,  
152 Bath Street, Glasgow G2 4TB

## **Sheffield**

St James House, Vicar  
Lane, Sheffield S1 2EX

## **Cardiff**

1<sup>st</sup> Floor, 14 Cathedral  
Road, Cardiff CF11 9LJ

[hello@breastcancer.org](mailto:hello@breastcancer.org)

[breastcancer.org](http://breastcancer.org)

# THANK YOU

## We would like to thank everyone who supported us during 2022-23. Special thanks go to:

### Our research committees:

- The Dame Vera Lynn Translational Fellowships Review Committee
- The Inequalities Funding Committee
- The Grants Committee
- The Science Strategy Committee
- The Tissue Bank Advisory Council
- The Tissue Access Committee
- The expert peer reviewers from all over the globe who helped us evaluate research grant applications.

The staff and scientists in the laboratories we fund who have supported us in promoting the world-class research we're funding.

All the patients who have generously donated tissue and blood samples to the Breast Cancer Now Tissue Bank.

All of our partners in the NHS across the 4 nations of the UK.

All the organisations who offer rooms free of charge for our support service events.

Nipunika Silva and Kousar Tasneem from the West of London Breast Screening Service for allowing us to film at the Charing Cross Hospital breast clinic.

Lorraine Marke, Donna Fraser OBE, and Kaur and Kreena Dhillon for taking part in our Ethnic Minority Cancer Awareness Month campaign and sharing their experiences.

Jen Hardy and Alison Tait, who continue to generously share their time and experience to deliver change for secondary breast cancer patients in Scotland.

Everyone who shared their experience and views with us, including those who want to remain anonymous, to help us make the strongest case possible about the importance of a number of new treatments being assessed for use on the NHS. They include:

- Claire Spragg
- Nicola Gregory
- Nicola Tracey
- Mary Hope

Our vice-patron, Baroness Joan Bakewell, our ambassador, Amanda Mealing and Julia Bradbury for their support of our #NoTimeToWaste campaign. And everyone who used their platforms or shared their experiences of the breast screening programme to support the campaign, including:

- Anjli Khawani
- Balwinder Nalray
- Carol Geeson
- Denise Goldup
- Gerry Walker
- Gillian Dolphin
- Jane Butcher
- Judy Miller
- Kerry Banks
- Kirsty Welsh

- Lesley Claire Fleming
- Lynette Byrne
- Maggi Hassall
- Rosie Drake
- Sandee Osborne
- Tracy Ashby
- Val Paragon

### Our pro bono partners:

- AllBright
- Rokabye
- Emma Rehal-Wilde and all the other pro bono lawyers who've supported us at Baker McKenzie
- Sam Omar at CMS
- Simon Hems at McGuireWoods

### Our corporate and pharma partners who donated more than £10,000:

- Adidas
- Ann Summers
- Asda
- AstraZeneca
- Beldray
- Cath Kidston
- Damart
- Dorothy Perkins
- Lilly UK
- Estee Lauder Companies
- Estee Lauder Cosmetic Company Stores
- Exact Sciences
- Future Dreams & Lipsy
- Ghd
- Gilead
- Liv Cycling
- Lounge
- M&S
- Monsoon
- Novartis
- Pentel
- Pfizer
- Primark
- River Island
- Roche
- Seagen
- Trinny London

**Asda suppliers who supported our Tickled Pink partnership:**

- Britvic
- Coca-Cola Europacific Partners
- Dailyceer Limited
- George at Asda
- International Procurement and Logistics Limited
- Mondelez UK
- P&G
- Penguin Random House

**Our Progress Fund members:**

- Belinda Gray and Art for Cure
- Isla and Rod Smith
- Jill and Paul Thompson
- Mark and Liz Astaire
- Pascale Alvanitakis-Guely
- Rosemary Walker
- Ruth and Paul Willmott

**Fundraising committees and societies**

- The Pink Ribbon Ball Committee
- The Society of Women Artists

**Charitable trusts and foundations:**

- Art for Cure
- Doris Field Charitable Trust
- Edenbeg Charitable Trust
- Garfield Weston Foundation
- Isle of Man Anti-Cancer Association
- Mary-Jean Mitchell Green Foundation
- Postcode Care Trust
- Secondary 1st
- The Syncona Foundation
- The Schroder Foundation

**Major donors:**

- Chris and Sarah Busby
- Claire and Mark Urquhart
- Michael and Helen Danson
- Patricia and Robert Swannell
- Rosemary Walker
- ShareGift

**Thank you to everyone who has supported The Patrica Swannell Appeal****The following individuals, groups and businesses who supported our fundraising this year:**

- 4 Pump Court
- ACCA
- Alexandra Lloyd
- Allan Leighton
- Amanda Jones
- Amgen
- Amy Langmead
- AND Digital
- Anissa Kermiche
- APEX Consulting Engineers
- Avril Gilchrist
- Batley Bulldogs RLFC
- Barclays Bank
- Beccles Breast Cancer Now Group
- Becky Leighton
- Bex Turley
- BFT MastClimbing Ltd
- Bishopbriggs Golf Club
- Bishop's Stortford Breast Cancer Now Group
- Boundary Outlet
- Boobs and Brass
- Bott & Co
- Brendan Gallen
- Bromley Breast Cancer Now Group
- Bruckhaus Deringer
- BT
- Burgess Hill Breast Cancer Now Group
- Callie Tanner
- Catherine Bennett
- Cawder Golf Club
- Chantele Rashbrook and the Clifftop Challengers
- Chatham Financial
- Cheshire Breast Cancer Now Group
- Chesterfield Golf Club
- Chubb Services
- Claire Seedhouse
- Clifford Chance LLP
- CMS
- Cornishware
- Cotswold Breast Cancer Now Group
- Covington & Burling LLP
- Cravath, Swaine & Moore LLP
- David Chappell & Boston Park Farm
- Dawson Group
- Department for Education
- DCW Group
- DHL Air
- DLA Piper
- Dominic James
- DS Smith Group
- East Renfrewshire Golf Club
- Edinburgh Breast Cancer Now Group
- Elaine Mitchell
- Eleanor Moffat BEM
- Emma & Tom Barker
- Enstar
- Essex Fundraising Group
- Europanel
- Eversheds Sutherland LLP
- Fairfax & Favor
- Falmouth Fundraising Group – Pink Wig Events
- Farrer & Co LLP
- Fichtner Consulting Engineers
- Fighting Breast Cancer Committee
- Herts Fighting Breast Cancer Now Group
- Fichtner Consulting Engineers
- FITISM Ltd
- Fluxx
- Forest of Dean Rugby Club
- Fragomen LLP
- Gathurst Golf Club
- Gillian Stewart
- Glasgow Fundraising Group
- Gordons Partnership Law
- Gourock Golf Club



- Hayley Carpenter-Priest
- Hempsons LLP
- Henderson Connellan
- Henton & Chattel
- Howden Group Holdings
- Ian Barraclough
- Ineos Grenadiers
- Isle of Man Breast Cancer Now Group
- Isle of Wight Breast Cancer Now Group
- Jan Hulme
- Jane Brooks
- James Holding
- Jason Guy
- Jeanette Horlock
- Jo Gazzard
- John and Liz Watson
- Jonathan Cordell
- Jones Day LLP
- Katie Somers
- Kennedys LLP
- Kerry Banks
- Kings Chambers
- Kirkland & Ellis LLP
- Latham & Watkins London LLP
- Letham Golf Club
- Lincolnshire Co-op
- Linda Lee
- Linda Robertson
- Liz Mackay/Riny Wondergem
- London Wembley Breast Cancer Now Group
- Mad March Hare
- Maltin PR
- Melissa Fisher
- Michaela Franklin and Sue Facey
- Mike Phillips
- Morrison Foerster LLP
- Natalie Johnson
- Nelsons LLP
- New Law Solicitors
- New Romney Breast Cancer Now Group
- Network Rail
- Nick Payne
- Notre Dame High School
- North Hants Golf Club
- Oldmeldrum Fundraising Group
- Olswang LLPCAF
- Otter House
- Outer Temple Chambers
- Outfly
- Pamela & David Penfold
- Perth Racecourse
- Pink Hygiene
- Pink on the Tyne Fundraising Group
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- Powell Gilbert
- Proskauer Rose London LLP
- Rayleigh Golf Club
- Rebecca Cochrane
- Redlibbets Golf Club
- Reed Smith
- Robert Cuthbertson
- Ropes & Gray LLP
- Rust Bucket Rally
- Saffron Seats
- Salisbury and New Forest Breast Cancer Now Group
- Santander
- Sarah Greene Tribute Fund
- Scot JCB
- Sheila McNicol
- Sheila Wilson
- Shelley Dobson
- Shropshire Breast Cancer Now Group
- Simon Halden
- Simpson Builders
- Simpson Thacher Bartlett LLP
- Sofology
- Somerset Breast Cancer Now Group
- South Herts Breast Cancer Now Group
- South Wales Fire Service
- South Wales Police
- Squire Patton Boggs LLP
- Starwood Capital
- Steph Harrison
- Stewarts Law LLP
- Stowe Family Law
- Surrey Breast Cancer Now Group
- Sweet Causes
- Technip FMC
- Tetbury Lions
- The Walt Disney Company
- Thermo Fisher Scientific
- Tocara
- Tom Plant & Sons
- Transport for Wales
- Trisha Davidson
- Turnhouse Golf Club
- Uphall Golf Club
- UK Charity Allstars
- Valerie McGavin
- Volvo Truck and Bus Centre Scotland
- Wales Fundraising Committee
- Ward Hadaway
- Wayne & Polly Barnes
- Western Power
- West Ham United Womens Football Team
- West Lancashire Fundraising Group
- Wilkie Farr
- William Grant & Sons
- Willmot Dixon
- Willmores
- Women in Property North West
- Women in Property Scotland

# WE'RE A CHARITY WITH A **SINGLE FOCUS** ON BREAST CANCER

We work solely on bringing together research and support to tackle breast cancer more effectively, to reduce the risk and to better support all those affected by the disease, whether directly or indirectly.

We're a force to be reckoned with and every supporter makes us stronger.

This report sets out our progress during the specific period 1 August 2022 to 31 July 2023.

## OUR VISION

...is by 2050, everyone diagnosed with breast cancer will live and be supported to live well

## OUR MISSION

...is to be recognised as the place to turn for information and support on all aspects of breast cancer and the driving force for breakthroughs in prevention, detection, and treatment of the disease in all its forms



**BREAST  
CANCER  
NOW** The research &  
support charity

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**We're here**

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