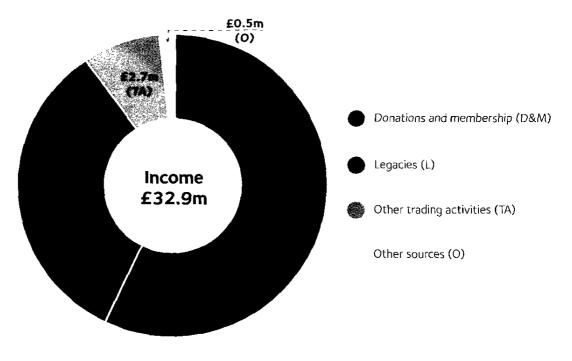
# TRUSTEES' REPORT AND FINANCIAL STATEMENTS

31 December 2016

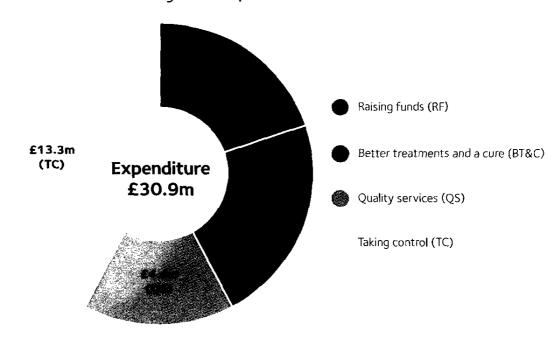
Together we can bring forward the day when no one fears Parkinson's



### Where our income came from in 2016



### Where our money was spent in 2016



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### Chair of Trustees introduction

It gives me great pleasure to introduce our latest annual report. 2016 was another strong year for the charity with significant increase in our work and impact, bolstered by a growing community of valued supporters.

Ultimately, the value of what we do must be measured by the strength of support we offer to people affected by Parkinson's and the pace at which we drive improvements in care and in research.

Your board ensures that we get the greatest impact from your donations, whether through developing our local services, building our clinical Excellence Network or focusing considerable investment in finding a cure.

The climate in which we work is changing. Our health service is under increasing pressure and our collaboration with health and social care professionals is more vital than ever in meeting the needs of an ever-growing number of people living with Parkinson's.

While the outlook for the coming year is strong, economic and political uncertainties mean that we cannot be complacent. We regularly review potential risks the charity may face, to ensure we are ready to take rapid action if required.

Our new Virtual Biotech approach is seeking out the best opportunities for drug discovery. We're also working increasingly around the globe, collaborating for instance with international pharmaceutical companies.

Our view is that we must embrace this new approach if we are going to accelerate progress towards better treatments and a cure.

The board has championed this shift in ways of working and has put in place robust governance to support this.

Charities are rightly now under increased public scrutiny to show how we channel generous donations into positive change. While we forge new paths, we must also apply renewed energy to key areas such as close compliance with fundraising regulations, vigilant protection of people's information and prudent management of our finances.

Working alongside the whole Parkinson's community remains vital to progress. We were deeply saddened by the passing of Tom Isaacs of The Cure Parkinson's Trust in May 2017. He always said he felt the work of each of our organisations was all the better for keeping each other on our toes.

With your support, we'll stay on our toes – much remains to be done. We will continue to drive forward with our ambitious work to deliver our purpose and, as ever, we live our values by listening and responding to you in all we do.

Our heartfelt thanks go to each and every one of you who makes our work possible.

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Mark Goodridge, Chair of Board of Trustees

### Chief Executive introduction

In 2016, important changes took shape at Parkinson's UK. Having laid the foundations of our 2015-2019 strategy, we really started to deliver.

For me, in my 11th year at the charity, there was a clear sense that this strategy marked a change. It felt like a strategy for Parkinson's itself, not just for us as an organisation.

We've always taken pride in listening to people living with Parkinson's. To respond to the challenges they've set us, we need to be even more local and relevant, providing the support they need on their doorstep. But we also need to reach out globally, using insight from personal connections to drive breakthroughs.

It's not an easy balance to get right. But with measured expansion we're on track to double the funds we put into research — developing progress in treatments and towards a cure not at the expense of support services for people living with Parkinson's but alongside them.

In 2016 we explored the possibilities of our new research strategy and did the hard work of establishing the Parkinson's Virtual Biotech concept – our own drug discovery and development arm to fast-track the most promising treatments. We saw it launch in 2017.

Our Critical Path for Parkinson's research initiative gathered pace, creating important new partnerships with key foundations and pharmaceutical companies. Closer to home, thanks to our Excellence Network, engagement of health professionals is growing and we're better placing ourselves to make critical improvements to Parkinson's services in the NHS.

Our newly formed local teams got to grips with issues and gaps on their patches, forming more vital partnerships locally, while collaborating more with local volunteers. Our volunteers are more inspiring than ever: always creative and looking for new ways to engage their communities.

We listen to the Parkinson's community online too. And to keep offering the level of support we want to in an increasingly digital world, we need to work differently. We made a big commitment to this in 2016, hiring a director with the calibre and experience to lead our digital transformation and embed the responsibilities that come with it. When people are diagnosed with Parkinson's, they expect the best digital offer — and we will provide it.

Everything we do to improve life for people with Parkinson's is underpinned by our generous supporters and inspirational volunteers.

We couldn't do what we do without you.

Thank you.

Steve Ford, Chief Executive

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### Trustees' report

### Objectives and activities

The trustees of Parkinson's UK (registered as the Parkinson's Disease Society of the United Kingdom) ('the charity') present their annual report for the year ended 31 December 2016 under the Charities Act 2011 and the Companies Act 2006. This includes the directors' report and the strategic report under the 2006 Act, together with the audited financial statements for the year.

This report has been prepared in accordance with the charity's governing document and the Statement of Recommended Practice (SORP 2015) 'Accounting and Reporting by Charities', published by the Charity Commission.

Our legal status and governance structure is explained in the 'Structure, governance and management' section of this report on pages 19 – 22.

### Objects and public benefit

We are the UK's leading charity working on behalf of people affected by Parkinson's. Our vision and ultimate ambition is to find a cure and improve life for everyone affected by Parkinson's. Through our local and UK-wide networks, we aim to support and empower people affected by Parkinson's to take control of their condition, and ensure everyone has access to high quality health and social care. We are also driving forward the search for better treatments and a cure.

The trustees confirm that they have referred to the information contained in the Charity Commission's general guidance on public benefit when reviewing the charity's aims and objectives, and in planning activities and strategy for the year ahead.

The activities that we carry out to further our charitable purposes are for the public benefit.

Our objects as set out in our Articles of Association are:

- to provide relief for people with the condition known as Parkinson's disease and allied conditions, and to provide assistance, support and advice to people with Parkinson's and/or their families, dependants, friends and carers and other persons affected by Parkinson's
- to promote and support research into the causes, prevention, treatment and cure of Parkinson's and to disseminate the results of such research
- to advance the education of the public and health and social care professionals on issues relating to Parkinson's
- to promote any other charitable purpose for the benefit of people with Parkinson's and/or their families, dependants, friends and carers and other persons affected by Parkinson's

### Strategic report

### Achievements, performance and plans for future periods

In our 2015 report, we set out our plans for 2016 under our strategic goals. Here, we report back on our achievements and look forward to our plans for 2017. Work in all three areas of our strategy is going to plan – we're pleased with the progress being made and the difference this is making to the lives of people with Parkinson's throughout the UK.

# Better treatments and a cure – faster Our plans for 2016

- Establish a new drug discovery programme, including selecting and initiating the first research in this area.
- Continue to fund life-changing research under the research grants management approach devised in 2015.
- Continue the Critical Path for Parkinson's project and look for opportunities to lead and collaborate in international research.
- Work with nurses and therapists to identify potential drugs we could repurpose for Parkinson's.

### Our 2016 achievement and impact Establish a new drug discovery programme

- To drive bigger, better treatment breakthroughs, we put together a Drug Discovery Advisory Panel made up of leading international experts from both academia and industry to shape our decision making.
- We engaged supporters with our new Parkinson's Virtual Biotech initiative in late 2016.
   This is inspiring more individuals, especially from a business background, to become active supporters of our research programme.
- We shortlisted a number of promising drug discovery projects using a rigorous scientific process and successfully selected and approved the first project for launch in January 2017.

### Continue to fund life-changing research

As part of our overall investment of £6.8m in developing better treatments and a cure we have:

- Ten new research projects in 2016 worth £1.1 million, including three that address priorities identified by people affected by Parkinson's as major unmet needs, through our 2014 James Lind Alliance Priority Setting Partnership.
- Four groundbreaking projects, for which we awarded follow-on funding totalling £2.7million

   a GDNF trial studying a growth factor protein that supports the survival of brain cells, and Tracking Parkinson's, Predict PD and Icicle-PD, which look at early detection and tracking and measurement of the progression of Parkinson's.
- In addition to these grants and as part of the Better Treatments and Cure programme, we ran projects to increase the involvement of people with Parkinson's in the design, planning and prioritisation of research; the interpretation and communication of important research developments for non-scientific audiences.

In July, the GDNF trial released top-line findings. While these initial findings weren't as positive as we'd hoped, further analysis in 2017 will tell us more about the potential of GDNF.

All our research projects delivered important progress in 2016. In particular, a study we funded showed that a commonly-prescribed dementia drug has promise for preventing debilitating falls for people with Parkinson's and improving their quality of life. The results of this are driving a second study in 2017.

### Continue the Critical Path project

- By the end of 2016, nine of the world's largest pharmaceutical companies had signed up to our significant initiative to improve clinical trials for Parkinson's, as well as the Universities of Cambridge, Oxford, Newcastle and Glasgow and the Michael J Fox Foundation, The Cure Parkinson's Trust, Parkinson's Foundation and Davis Phinney Foundation. All companies pay annual membership fees that, together, cover about half the total programme costs. This exceeded our initial ambition of attracting six fee-paying members.
- In a significant step towards improving the way that new treatments are tested, we had our first major success through the Critical Path project, gaining the support of the European Medicines Agency (EMA) to use a particular type of brain scan in clinical trials.
- We presented the pioneering Critical Path project with our partners, the Critical Path Institute, at the World Parkinson Congress in Portland, Oregon in September 2016.

### Work to identify potential drugs we could repurpose for Parkinson's

- The final report from our survey of people with Parkinson's and carers has been completed and shared with leading researchers to identify opportunities for future research.
- We have contributed as panel members to the Department of Health drug repurposing project. We are approaching researchers about several potential repurposing projects and we will be working on this very actively in 2017.

### Our plans in 2017

In 2017 we will:

 launch the Parkinson's Virtual Biotech initiative, which will allow us to work flexibly and creatively with leading research organisations that can work in a resultsfocused, efficient way to develop and commercialise new treatments for Parkinson's

- as a part of the Virtual Biotech approach, launch the drug discovery programme, selecting and commissioning the first drug discovery project
- continue to promote participation in research studies

### How our experience has influenced our plans

- In research, we have continued moving from a traditional model of funding academic research to a more complex, ambitious approach. Our experience showed us that, while the traditional model was effective in funding discoveries in basic science, it didn't assure they would get translated into drug discovery.
- Attracting investment in research drives
  progress forward in the interests of everyone
  affected by Parkinson's. We're starting to work
  increasingly in partnership with pharmaceutical
  and biotechnology companies changing the
  risk-reward balance so that investment in
  Parkinson's research becomes more attractive to
  large, well-resourced companies.
- The new research strategy will provide a more effective way to speed up the process of developing new drugs and treatments. Getting better treatments, faster, is a top priority for people living with Parkinson's.
   They influence our planning and project approval through everyday conversations, as well as through our Research Support Network, Research Strategy Board and trustees.

### Quality services as standard Our plans in 2016

- Establish the Excellence Network as the driver of high quality health and social care services across the UK.
- Use Parkinson's audit data and information from people with Parkinson's to identify and target key inequalities in services – bringing our expertise and resources alongside health and social care professionals to drive improvements and campaign for better services.

 Build education pathways for key Parkinson's disciplines and increase capacity through the development of volunteer and train-thetrainer programmes.

# Our 2016 achievement and impact Establishing the Excellence Network as the driver of high quality care

- In 2016, we built on the successful launch of the Excellence Network by supporting the 22 regional Excellence Network clinical leads

   mostly neurologists and geriatricians – and their local Parkinson's services to take forward quality improvement plans, based on results from the UK Parkinson's audit. We supported this collaborative action through 55 meetings of health professionals with key Parkinson's UK staff.
- To raise standards of care through shared learning, we developed and disseminated tools and resources in collaboration with Network professionals. For example, the 'Improving management of mental health in people with Parkinson's' and 'Providing better support to people with Parkinson's in the community' interactive guides, and the locally created OPTIMAL Parkinson's medication guideline and conversion calculator in Southampton, which has been accessed 1,335 times from the Excellence Network online resource centre since its promotion in May.
- We continued to build engagement of professionals with the Network through various activities including 11 conference programmes, sponsorship of the multidisciplinary event BritMODIS 2016, and partnership working with professional associations such as the Royal College of Speech and Language Therapists. More than 4,500 professionals had subscribed to the Excellence Network newsletter by the end of the year – an 11% increase.
- To recognise and celebrate quality services we also launched our first Excellence Network Awards scheme. We'd had 42 entries from services by the end of the year with results being announced in March 2017.

### Using audit and feedback data to target inequalities

 We identified six priority areas for improving Parkinson's services using data from the biggest ever UK Parkinson's audit and our Your Life, Your Services survey.

### These comprised:

- better information from diagnosis
- consistent access to a multidisciplinary team
- standardised practice based on best available evidence
- improved inpatient care including timely access to medication
- prevention of falls and infections
- anticipatory care that provides well-timed support over the course of the condition
- We focused the Excellence Network on tackling these priorities. Groups of clinical leaders, including professionals from a range of disciplines — nurses, physiotherapists, occupational therapists, speech and language therapists and pharmacists — worked together to determine the most effective way to achieve improvements. We used our education programmes, service improvement grants, and information resources for professionals to underpin progress in these areas.
- There were early indications of positive impact: results from the 2016 Your Life, Your Services survey already point to better access to nurses and therapists, and improved information and signposting to Parkinson's UK at diagnosis. For example, 58% of people who were newly diagnosed said they were signposted to us at diagnosis, compared to 51% in 2015. Less positively, the results highlight the need for continuing concerted action to improve access to medication on time in hospital settings.

### Building education pathways and capacity

- In 2016, to improve the knowledge and skill of those delivering care to people with Parkinson's, our Education and Training team:
  - educated nearly 4,000 healthcare professionals about Parkinson's
  - ran two Parkinson's masterclasses (with 50 delegates) and four roadshows focusing on advanced Parkinson's (with 145 delegates)
  - delivered six train-the-trainer courses to 44 trainers who have gone on to train more than 700 colleagues
  - enabled 1,175 professionals to access our online training programmes, with levels of satisfaction and impact on practice well above sector averages
  - supported volunteers to deliver 168 education sessions to nearly 1,700 health and social care staff
- Work also began in 2016 to develop competencies and learning pathways for Parkinson's nurses and this is continuing in 2017 as we develop learning pathways for therapy disciplines with a key role in Parkinson's care.

### Our plans for 2017

In 2017 we will:

- reach unengaged professionals and services by boosting participation in the Excellence Network and the 2017 Parkinson's audit and service improvement activity
- strengthen evidence and intelligence to support quality improvement and decision making, including establishing a health and social care research awards scheme
- promote access to a multidisciplinary team, developing clear learning pathways for therapy disciplines and building evidence for influencing and campaigning
- connect people to the right information and support from diagnosis

### How our experience has influenced our plans

We recognised that trying to improve health and social care from the outside was limiting our influence, especially as policy levers to drive up standards are relatively weak.

Forming a UK-wide alliance with passionate expert clinicians, and providing them with the support, tools and insight from people affected by Parkinson's to drive change, gives us the opportunity to have a much greater impact on service quality.

### Empowerment to take control Our plans in 2016

- Initiate a programme of work to establish
  a proactive relationship with each of the
  10,000 people diagnosed with Parkinson's
  in the UK each year, providing the right
  information, inspiration and opportunities to
  enable them to take control.
- Continue work towards making Parkinson's Links available across the UK, starting with the priorities identified by people with Parkinson's.
- Further strengthen and promote our information and support services.

## Our 2016 achievement and impact Establishing a proactive relationship with newly diagnosed people

- We started this ambitious programme by conducting research with people who are newly diagnosed and those closest to them.
   This is being used to make sure people can find the information they need easily on our website and to inform the way we package our services for people with a recent diagnosis.
- We boosted engagement rates with a new email tool that helps us provide more personally relevant communications based on better understanding of people's needs and interests. For example, in 2016, we more than doubled the rate at which people clicked through to read articles from our monthly

- email because we understand more about the content that will be most interesting to them.
- To make sure we offer the right tailored information and support and have a robust system for capturing people's consent and preferences, we began work on our data and contact strategy.

### Making Parkinson's Links available across the UK

- We developed priorities for local support and activities based on our Your Life Your Services survey, where people with Parkinson's identified access to mutual support and exercise as the top priorities.
- We mapped access to and availability of the priority activities across the UK to identify gaps in provision and local needs.
- We established 29 local development teams across the UK, bringing people with lived experience of Parkinson's, volunteers and staff together to make decisions about priorities and plan delivering activities in their area.
- New activities started taking place. We almost doubled the number of mutual support opportunities available, including many more informal and drop-in activities, with 276 specific mutual support activities 740 when we include our local support meetings across the UK. And we also ensured a wider range of exercise activities were available now 546 almost twice the number we had in 2015.

### Strengthening and promoting our information and support services

- We continued work on a multi-year project to integrate our support and information services to better meet the needs of people with Parkinson's. This included the development of our online Client Record System, which will be ready for launch in summer 2017.
- To enable people to take control of the support and information they receive, we piloted and introduced a new client preparation tool to help people prepare for a visit from a local adviser.

- We continued to deliver our information and support services, earning our Customer Service Excellence standard award for the fifth year running. Our helpline responded to nearly 26,500 calls in 2016, from around 17,000 individuals up from just over 22,500 in 2015. Our Parkinson's local adviser service responded to more than 12,500 referrals, giving in-depth support to more than 10,000 individuals, and our volunteers gave 90 people peer support. Evaluation of our services indicates that they make a real difference to people's lives:
  - 97% would recommend the helpline to other people with Parkinson's and 95% rate the helpline as excellent or good
  - 84% of people say that our peer support service made them feel more positive
  - 91% of users said that the local adviser 'helped them' or 'helped them a lot' to make choices that improved their life in some way
  - 82% of users of the local adviser service said it improved their emotional wellbeing
  - 97% of participants rate the selfmanagement programme as 'very good' or 'good'
- We expanded our self-management programme, delivering 40 groups attended by 477 people. That's a 41% rise on 2015 figures. Our six-month follow-up evaluation has shown positive outcomes are sustained after attending the programme. 78% of people have made positive progress with their action plans and 85% of people told us that attending the programme made them feel more positive about their current situation.

### Our plans for 2017

In 2017 we will:

- continue to take forward our ambition to provide personalised support and engagement opportunities to everyone affected, and reinvigorate our membership offer, building a wider movement for change
- ensure that people with Parkinson's, their families and carers have opportunities to access exercise, mutual support and locally

prioritised activities, wherever they live in the UK, through Parkinson's Links and our local groups and networks

 further strengthen and promote our information and support service, and grow our self-management programme

### How our experience has influenced our plans

As we developed our current strategy, our consultation with people affected by Parkinson's revealed we weren't having enough impact on people's everyday lives.

We worked closely with people affected by the condition to build a framework of the ways in which they want to be empowered. We built this framework into our tools, resources and plans and continue to work in collaboration with people affected, to ensure all our work best supports them to take control of their lives.

# Fundraising to support all our activities in 2016 and plans for 2017 Fundraising results

2016 proved to be our most successful fundraising year to date. Our work is entirely reliant on voluntary donations and support and we consider ourselves very fortunate to have such loyal and generous supporters, members and volunteers.

Whether through personal gifts and legacies, marathons, walks, bike rides and so much more, our amazing supporters were the bedrock of the charity's work and helped deliver total charity income of £32.9m, up £1.4m on 2015.

We have seen strong performance delivered by most Fundraising teams against the targets set in their budgets, the strongest being in Major Gifts, Legacies, Individual Giving and Events. Legacies contributed 38% of our total fundraising income and continued to be our single largest source of income at £12.4m.

Developing our local fundraising and volunteering is a key target for the charity and in 2016 our regional fundraising and local groups' voluntary giving and fundraising (excluding legacies), underpinned by thousands of local supporters and volunteers, raised a fantastic £7m.

Our UK-wide events programme, including challenge events and overseas activities, has continued to grow over many years. In 2016 more than 11,000 people raised over £2.6m by participating in and supporting events that were organised by our team at the UK office. Running, walking and cycling continued to prove very popular with our fundraisers and during the year 8,000 participants supported us in this way, up 900 on 2015.

The support of charitable trusts and foundations, high-net worth individuals and corporates, often with multi-year commitments, allowed us to plan long-term charitable activities. In 2016 they contributed over £5.4m, including three gifts of £1m. We were privileged that The Allan Willett Foundation gave a hugely generous cornerstone gift of £700,000 towards the creation of the charity's Virtual Biotech and drug development programme.

Despite what was a challenging year for our corporate fundraising, we were thrilled that after three hugely successful years as the National Garden Scheme's guest charity partner, we were awarded full beneficiary status in spring 2016 and a gift of £100,000. We were also indebted to Dave Clark and the Professional Darts Corporation, with the wider UK darts community, whose Coast to Coast Walk and charity of the year partnerships were such great successes.

Support from individual donors continued to be the foundation of our income and through our appeals programme and regular giving products we received over 74,000 gifts totalling £4.3m, including £430,000 from our members.

### Our fundraising promise and privacy

In 2016 we reviewed and updated our Fundraising Promise to our supporters. That promise is:

We will never:

- sell your data to another organisation
- · share your information with another charity
- share or sell personal details to another organisation for their own use

### We will always:

- keep your personal details safe
- listen to you, and ensure that we communicate with you in the way that you want
- treat you fairly and reasonably
- act with transparency if you have questions, we will answer them in an open and honest way
- be accountable if you don't like what we're doing we want to hear from you

In the latter part of 2016 we sought expert advice to review our policies and procedures and ensure our compliance with the Data Protection Act. We also enhanced our privacy statement (available at **parkinsons.org.uk/yourprivacy**), outlining how we use analysis and insights to improve our communications with supporters.

Our work is entirely reliant on voluntary donations, which means we do have to ask for money. When we do, we always try to ask responsibly and respectfully.

### **Growing our supporter base**

As part of our 2015-19 strategy, we recognised that we need to grow the absolute number of active supporters. During 2016, 90,000 people supported us. Of those, 28,000 were new supporters, 56,000 had supported us in the previous year, and we were also pleased to welcome back 6,000 lapsed supporters who had supported us in the past but not for 12 months. We're very fortunate to have such a loyal and generous supporter base and we never take that support for granted.

### Listening to our supporters

The safety and appropriate use of supporters' data is vitally important to us.

In 2016, we received 59 complaints about our fundraising campaigns and activities from 350,000 pieces of direct mail, 1.6m email broadcasts and 3,000 outbound telephone conversations. The top three types of complaint were related to: poor customer care (8), products in our shop (8), and repeat mailings (7). In 2015 we pledged to reduce supporter complaints and we are pleased to report that we almost halved the number, which decreased by 51 in the year.

### Fundraising plans and challenges for 2017

Looking ahead to 2017 we will develop an integrated approach to campaigns across fundraising, marketing, digital, PR and media, to promote and fund our core services and research. We will launch the We Won't Wait campaign in support of delivering better and new treatments for Parkinson's in years not decades, and we will launch our Garden Gathering product bringing Parkinson's UK fun to gardens across the UK.

We will continue to be supporter-focused, working to the standards we set in our Fundraising Promise. We will evidence this by reducing the number of individuals who stop supporting us, while increasing our reach to new supporters in the year.

We are committed to playing our part in the ongoing development of the Fundraising Regulator and the Code of Fundraising Practice, showing our dedication to the highest fundraising standards.

We will strive to deliver on our fundraising vision 'to ensure that the funds needed to deliver our charitable objectives are always available'. And we will continue to be grateful for the incredible support that we receive from across the UK and beyond.

### Our finances in 2016

Our consolidated financial statements for the year are shown on pages 26–41. A summary of the financial results for the year is set out below.

### Incoming resources

We had another successful year, breaking our income record by £1.4m. Legacies, donations and other fundraising activities accounted for 98% of our total income. The total income for the year was over £32.9m (2015: £31.5m). Legacy income continued to be our largest single source of funding, raising £12.4m - (2015: £12.9m). Although there was a small decrease in legacy income, our expected future income from legacies remains strong.

During the year, we saw an increase in donation and membership income, which reached £17.3m (2015: £15.2m), while our income from other fundraising activities, including trading, marginally decreased by £61,000 to £2.7m (2015: £2.8m).

These results also include income generated by local groups, which saw a decrease of 21% in income from £5.4m in 2015 to £4.2m in 2016. In 2015 we reported an exceptional result for local groups when a large legacy was received. Ignoring this large legacy, the decrease of income was 2%.

### Resources expended

As part of our strategy to further increase the reach and benefits of our work to support people affected by Parkinson's, we invested £30.9m in our work in 2016. This was an increase of £97,000 on our 2015 spend.

Our main plans are to step up investment and impact in Parkinson's research and we continue to fund projects that, in our opinion, will have the most life-changing impact on our beneficiaries. In 2016, we spent £6.8m on developing better treatments and a cure: a small decrease of £213,000 on 2015. This decrease was caused by a small delay in one of the research projects, which pushed it into 2017.

We continued to engage health and social care professionals across the UK by spending £4.3m (2015: £4.8m) on quality services, listening to the views of people with Parkinson's so that support and resources can be targeted at areas of greatest need.

In our activities to empower people in taking control, we have continued to invest more — providing crucial information and support services to more people affected by Parkinson's. We've focused on reaching those who are newly diagnosed, providing the tools, resources and support they told us they need to take more control of their lives. In 2016 we invested almost £13.3m (2015: £12.7m) in activities including local and helpline support, provision of information resources, volunteer-led support programmes and awareness-raising.

Our costs in raising funds in 2016 (just over £6.4m) showed a small increase on the costs incurred in 2015 (£6.3m).

### **Reserves policy**

Our policy is to invest funds in the ongoing expansion of our work but to retain sufficient levels of available reserves (ie excluding fixed assets) to enable us to continue our core strategic activities in the event of a significant downturn in income. This policy takes into account the risks associated with our different income streams, our ongoing investment in delivering our strategy and growth, the varying needs of local groups, longer-term cash flow projections and other relevant business risks.

We have identified sufficient levels of available reserves as being within the range of three to five months of the following year's planned expenditure. We recognise that there could be circumstances where reserves levels fall below this target range. However, our policy is that falling below the minimum levels should not be permitted without the development of a clear action plan to restore them.

Our restricted funds usually relate to ongoing core activities of the charity for which the annual expenditure is much larger than the balance on the relevant restricted fund at that time. Consequently, the level of restriction imposed by our restricted funds does not normally put actual constraints on how we can use those funds in our day-to-day work. As a result, we include restricted funds in determining our available reserves.

Note 17 to the financial statements (on page 39) gives details of the amounts and purposes of funds held by the charity. It shows total funds (excluding amounts invested in fixed assets) at 31 December 2016 of over £15.4m. This level of reserves is above the minimum level to support core strategic activities in the event of an unexpected, significant drop in income but is within the target reserves range of between three to five months of the following year's planned expenditure (£9.3m to £15.5m respectively). Our current plans are to maintain reserves levels within this target range.

### Investment policy and returns

Our investment policy is reviewed by the board on an annual basis. During 2016, the overall investment objective remained as follows: to achieve income and capital growth (ie total) returns while both accepting a moderate degree of risk and ensuring that operational cash requirements to fund the charity's objectives are met in full.

At 31 December 2016 the market value of the long term investment portfolio was £15.6m, held within two investment portfolios: £10.9m with Goldman Sachs and £4.7m in the Trojan Fund managed by Troy Asset Management. The remaining investments are cash deposited in various institutions to generate the best possible interest available at the time deposits are made and in line with our investment policy.

During the year the investment portfolio delivered income of £215,000 (2015: £230,000) and a net gain of £1.3m (2015: £64,000). Although the investment performance was affected by adverse market conditions following the result of the referendum on the UK's withdrawal from the European Union, the long-term investment delivered satisfactory income and positive gains.

The trustees rely on specialist advisers for the fund selection allocation. Investment performance is compared to independent benchmarks. The benchmark selected for the Goldman Sachs portfolio is what we believe is an appropriate measurement for a moderate risk account: 50% bonds and 50% equities. The bond index we use is the JPMorgan Government Bond Index UK 1-10 year total return. The equity index we use is the MSCI World Net Total Return 70% hedged back to GBP. The Trojan Fund's performance is benchmarked against the consumer price index. The target for investment returns is to outperform these benchmarks. The trustees are satisfied that the investments have been performing in line with their expectations.

The performance of our investments and the credit ratings for financial institutions in which we invest are kept under review regularly throughout the year.

In line with our policy, we hold our funds with UK-based institutions with strong credit ratings and we keep the policy under review in the light of changes to the financial climate.

### Going concern

The Board of Trustees has reviewed the Parkinson's UK financial position and believes there are sufficient resources to manage any operational or financial risks. It is considered there is a reasonable expectation that our organisation has adequate resources to continue in operational existence for the foreseeable future.

Therefore the board continues to adopt the going concern basis of accounting in preparing the annual report.

### Principal risks and uncertainties

We have a comprehensive risk register which takes into account plans and strategies for mitigating risk. The register is reviewed throughout the year by the senior leadership team and the Audit Committee. In addition, the board receives updates on the status of key risks as part of the regular reporting to each board meeting.

Risks are ranked according to the probability of their occurrence and their potential impact on the charity.

Below is a summary of our principal risks and the processes we have in place to manage them. The board does not seek to eliminate risk and recognises that some risks cannot be mitigated in full. However, the senior leadership team actively monitors and manages such risks to make sure the charity achieves its objectives and that responsible risk taking is central to how trustees make decisions.

### Income and financial assets

- Risk: we may be unable to secure the income needed to deliver our plans.
- Management: to ensure we have necessary income levels, fundraising budgets are based on staff levels, the previous year's performance, income trends and charitable expenditure demands, and are then scrutinised by the board. Income streams are planned beyond annual budgets and are reviewed regularly by the Fundraising team. We have a balanced fundraising portfolio, with income from individual giving, legacies, corporates and trusts. We monitor trends in our supporter base through the year to get a sense of how many new supporters we need to meet our fundraising goals.
- **Risk**: we may be exposed to risk by the failure of a bank or investment product.
- Management: we have an investment committee that oversees a diversified investment portfolio and there is a boardapproved bank policy that only allows investment with banks that meet the set criteria.

### Partnership working

- **Risk**: our work through the Excellence Network may not be effective in securing improvements in social care.
- Management: to ensure we keep securing improvements, social care is an important focus for our campaign activity. We continue

to work in partnership with care-providing bodies to improve the standards of care and offer extensive education and training for social care staff.

### Volunteering and local work

- Risk: volunteers make important decisions in their areas about how we spend money, deliver activities and provide support.
   Also, groups may not have the volunteers they need to function in line with our governance processes and deliver support to meet the need of their local Parkinson's community.
- Management: the Local Networks team and volunteer co-ordinators support local groups.
   Volunteers are also being supported through projects to increase engagement. The local groups submit annual returns and conduct an annual review of their activities. These help to identify the groups that are considered to require more support.
- Risk: some of our local staff and volunteers may be working with people with Parkinson's, who are considered to be adults at risk.
- Management: safeguarding and reporting policies and procedures are in place and have been updated in line with the Care Act 2015.
   Volunteers in 1:1 roles are vetted, subject to disclosure checks, and given training as to what to do if they have an issue or concern.
   There is an annual safeguarding review which ensures all lessons learned are captured.

### Research

- Risk: we may not focus our research strategy and spending sufficiently to enable us to meet our objectives.
- Management: the Research Strategy Board helps inform the direction of our research and the type of projects we fund. We also have two independent grant award panels to assess applications and award grants according to their value to people with Parkinson's.
- **Risk**: participants in the clinical trials we fund and commission could suffer adverse effects.

17 Trustees' report and financial statements 2016

· Management: clinical trials for new drug development are overseen by the Medicines and Healthcare Products Regulatory Agency (MHRA), and the Local Ethics Board, which is part of the hospital and is totally autonomous from Parkinson's UK, ensures that risks to participants are clearly communicated.

### Data and technology

- Risk: we need to manage data effectively to comply with the current and changing environment surrounding use of data and related regulation.
- · Management: we actively review our processes to ensure our regulatory compliance. Our Parkinson's Local Adviser team, Telephone Services team, Fundraising directorate and local groups have practice guidelines regarding data protection and confidentiality to ensure they comply with regulations. Local ethics committees have approved data protection arrangements for research projects and there is a data protection update at each Audit Committee meeting. Laptops are encrypted to protect data.
- Risk: we may not be able to provide support and information in a way that people expect due to possible delays in technology change and IT concerns.
- Management: we have increased the size and skillset of our IT team and created a new Digital Transformation directorate, which actively monitors plans around technology and digital development. There are multiple projects in progress to improve data integration and our IT systems are updated and tested regularly. There is a cyber security update at each Audit Committee meeting.

### Performance management

We use a performance management framework to monitor how well we are delivering our annual plans and multi-year strategy. We track progress against key indicators, with regular reporting to senior leadership team and our Board of Trustees. During the year, changes were agreed to improve further the flow of information. For 2017, measures include:

- Better treatments and a cure: we will measure our research leverage and track the number of treatments being developed - monitoring progress towards a cure. We will track the numbers of members and volunteers in our Research Support Network and the number of requests for patient and public involvement support from researchers.
- Quality services as standard: we will monitor the reach and impact of our training for healthcare professionals. We will measure progress against a range of quality standards for Parkinson's services, including access to information and a multidisciplinary health team.
- Enabling people with Parkinson's to take control: we will continue to track satisfaction with, and impact of, our information and support services. We will measure yearon-year progress in equipping people to feel in control of their lives, using a robust, independently developed scale, based on the factors people affected by Parkinson's say empower them to take control.
- Developing the charity: we will track the number of volunteers each month and the number of roles they are fulfilling.
- Digital transformation: we will track improvements in the charity's digital capability, and our reach and engagement through digital channels, to ensure we are maximising the opportunities that technology offers.

### How we allocate resources to maximise impact

Our planning, budgeting and resource allocation takes place through a multi-stage process:

- During the multi-year budgeting that took place in late 2014 as part of strategic planning, we decided to allocate the bulk of our income growth to research in future years, to increase the proportion of our budgets invested in research. This approach has been defined in partnership with the Board of Trustees, and underpinned by significant feedback from people affected by Parkinson's.
- Annual budgets are defined in line with this multi-year approach.
- We changed the focus of our country and regional teams in 2015, moving people into roles with more responsibility for supporting volunteers and local activities, and reducing the burden of governance and administration. This was a significant change programme, with over 200 staff changing roles over a 12-month period. It was managed within existing resources, in order to maximise the impact we secure from our investment. These changes took time to embed in 2016 so, while there was growth in local activity, it hasn't yet been transformational.

We continue to review our staffing to ensure we have the right organisation, capacity and capabilities to deliver our ambitious plans.

# Structure, governance and management

### Legal status

The Parkinson's Disease Society of the United Kingdom was founded in 1969 by Mali Jenkins, whose sister had Parkinson's. The Society rebranded in 2010 and since then we have operated under our trading name 'Parkinson's UK'. Parkinson's UK is an incorporated charity so is not only regulated as a charity by the Charity Commission (registered in England and Wales – no 258197) and the Office of the Scottish Regulator (registered in Scotland – no SC037554) but is also a company, limited by guarantee, registered at Companies House (registered in England and Wales – no 948776).

### **Board of Trustees**

Our governing body, the Board of Trustees (the board), is responsible for the overall governance and work of the charity.

Our trustees are volunteers and do not receive any remuneration for their services but may claim reasonable expenses incurred through attending meetings or other duties. The board usually meets six times each year and is responsible for directing the affairs of the charity and ensuring that it is solvent, well run, and delivers charitable outcomes for the benefit of people affected by Parkinson's.

Details of our trustees who served during the year are listed on page 42.

### Trustee recruitment

The board may include up to 15 trustees at any one time, made up of seven elected trustees (four from England and one each from Northern Ireland, Scotland and Wales), five appointed trustees and up to three co-opted trustees.

Elected trustees are recruited from and elected by our members. Candidates must fulfil the eligibility criteria set out in our governing document and be nominated by two other members. Election is by ballot, with all members living in the electing country eligible to vote.

Appointed trustees may be recruited from within or outside the charity and suitable candidates are identified via a thorough recruitment and selection process.

This process is usually managed by our Nominations and Remuneration Committee, a committee of the board. The committee then makes a recommendation for appointment to the board, which makes the final decision.

The board may also choose to co-opt up to three additional trustees. These places are usually used to meet an identified need or specific skills gap and candidates are recruited using the same process described for appointed trustees. The overall aim of trustee recruitment is to ensure that there is a good mix of skills on the board and that succession planning needs are met.

Elected and appointed trustees usually serve for a fixed term of four years and may serve for an additional term subject to their successful reelection or appointment. If a trustee stands down before the end of their term, a successor may be recruited to serve for the remainder of that term.

Co-opted trustees serve for a fixed term of one year and may be co-opted for a further year. Following their second year a co-opted trustee must stand for election or appointment or retire from the board.

We have developed an alumni scheme for former board and committee members, which includes events and access to the charity's publications. Alumni also have the opportunity to become involved in the work of the charity, so that valuable experience and expertise is not lost.

### Trustees' induction and development

The charity aims to ensure that its trustees are fully informed about their role. The Nominations and Remuneration Committee has reviewed the induction policy on behalf of the board. New trustees are given a detailed induction, including buddying with an existing trustee. This includes a detailed mix of online and hard copy information and activities, including tailored induction sessions at the UK office and visits to charity services, to build their knowledge of the charity.

All trustees receive regular correspondence from the charity and are invited to attend briefing sessions and other charity events to help keep them up-to-date and engaged with its work. Other internal or external training is offered to individual trustees as required.

### Committees of the Board of Trustees

While the board acknowledges that there are a number of matters that it has to reserve to itself, it delegates certain responsibilities and decision making to a number of committees established to support its work. The role and remit of each committee is set out in written terms of reference and include details of any authority delegated to it as set out in the charity's delegated authority policy.

The minutes of all committee meetings are made available to the trustees and each committee is required to submit an annual written report to the board summarising its activities over the past year, including the use of any delegated authority.

### **Executive Committee**

The Executive Committee is comprised of the honorary officers of the board, namely the chair, vice chair, finance and governance trustees. It meets as required and can act on behalf of the board in respect of any matter which is required urgently. The committee also meets annually to appraise the performance of the Chief Executive. The Executive Committee reports back to the next full board meeting on all its activity.

### **Audit Committee**

The Audit Committee is comprised of the finance trustee, at least one other trustee and no fewer than two non-trustee members. The committee meets three times a year and assists the board in ensuring the charity has effective internal control and risk management systems in place, and is operating within approved polices.

### **Investment Committee**

The Investment Committee is comprised of the finance trustee, at least one other trustee and no fewer than two non-trustee members. The committee meets twice a year and is responsible for reviewing and monitoring the performance of the charity's investment portfolio.

### Nominations and Remuneration Committee

The Nominations and Remuneration Committee is comprised of the chair of the board, two other trustees and up to three non-trustee members, meeting four times a year. The committee advises and makes recommendations to the board, giving consideration to the succession requirements of the board (and its committees). It also has responsibility for trustee recruitment, induction, appraisal and evaluation, and ensures development mechanisms are in place so that the board has the full range of skills and expertise required to operate effectively. These have been reviewed in the light of best practice in the sector and policies recommended to the board. In the last year, it has also taken responsibility on behalf of the board for the remuneration (including senior staff pay) policy of the charity.

### Research advisory groups

There are a number of advisory groups and panels involved in our research work. They provide advice and support to the Director of Research and the Chief Executive and, through them, the board, on our proactive and innovative research programme. These include:

• The Research Strategy Board, made up of researchers, industry specialists, people affected by Parkinson's and staff, advises the charity on overarching research activities and direction.

- Two Grant Advisory Panels, made up of researchers and people affected by Parkinson's, review grant proposals from academic institutions and make recommendations for funding.
- The Drug Discovery Advisory Panel, including leaders from research, companies and biotechs, provides expert input and advice on drug discovery projects supported through the Parkinson's Virtual Biotech.
- The Cohort Studies Council, made up of leaders of key Parkinson's cohort studies and cohort study experts from other fields, helps develop a strategy for cohort studies for Parkinson's, and develops and evaluates study proposals.
- The Research Support Network Development team, made up of people affected by the condition, provides input and guidance on how we can better engage the Parkinson's community in research.
- The Critical Path Oversight Committee oversees
  the management and progress of the Critical
  Path for Parkinson's project for Parkinson's UK
  as project funder and key stakeholder. The
  committee includes an independent member,
  a member from our local group membership,
  as well as executive and trustee leadership.

There are also panels and groups in place to guide, develop and review more specific projects and areas of work.

### Local governance

Our local groups fall under the governance and constitution of the charity. They are not separate legal entities, nor are they autonomous. However, the board delegates certain responsibilities to their lead volunteers and committees through rules and guidelines.

### Local groups

Our network of branches and support groups (collectively referred to as local groups) is essential in delivering our strategy locally for the benefit of people affected by Parkinson's. In 2016 we had 452 local groups – 217

branches, 142 support groups and 93 sub-groups across the UK and the Channel Islands. They provide activities, mutual support and friendship for people with Parkinson's, their families and carers. Local groups also make a valuable contribution to campaigning and fundraising for, and supporting the work of, the charity at a local level. Country councils had previously been established in Wales, Scotland and Northern Ireland but are currently inactive, by choice, as they were not playing an active part in decision making, planning or budgeting.

### Management

The board delegates operational planning and day-to-day management of the charity to the Chief Executive, supported by the senior leadership team and the charity's staff. This authority is delegated within approved limits, in accordance with the charity's delegated authority policy.

The performance of the Chief Executive is overseen by the board through reports and briefings presented by him and the senior leadership team at board meetings, and as part of the planning and budgeting process. The Executive Committee undertakes a formal appraisal of the Chief Executive on behalf of the board on an annual basis.

### Staff and volunteers

The charity aims to be an organisation where our people are engaged, motivated and inspired by their contribution to deliver our organisational strategy. Through our recruitment, annual appraisal and learning and development processes, we focus on supporting staff to be the very best they can. In 2016, we carried out significant research with our staff and volunteers to enable us to develop our approach to a new people strategy for 2017, building on our achievements to date. We used this research to begin the development of an employee value proposition, aimed at articulating our employer brand in line with our charity brand and values.

In 2016, we were proud to receive external recognition for our progress in people engagement and development areas, including:

- change project of the year at the Charity Times Awards, for our 2015-19 strategy change project
- charity leader of the year at the Charity Staff and Volunteer Awards, Steve Ford
- Queen's Award for Voluntary Service, Solihull Local Group Branch
- inspiring communicator at the CharityComms Awards, Steve Ford
- top 30 charity CEOs on social media, awarded by Social CEOs to Steve Ford
- Customer Service Excellence, awarded for the fifth year running for putting people with Parkinson's at the heart of everything we do
- silver in the Best eLearning Programme and Best use of Resources categories at the Charity Learning Awards, for our online volunteer induction
- highly commended at the British Medical Association (BMA) Patient Information Awards, for our taking control resources

Staff and volunteers played a key role in developing our present strategy and are kept fully updated on progress towards its delivery through staff briefings throughout the year. We also provide additional information through our employee intranet site (Staff Central) and our monthly publication for local groups (Network News). Volunteers outside local groups are kept updated with information relevant to their role, as well as the wider charity, by their staff contacts. We also have an employee consultation committee (Staff Voice) in place, whose role is to support the downward and upward flow of information sharing.

At Parkinson's UK, we are committed to employing and retaining staff with the expertise, skills and knowledge needed to find a cure and improve life for everyone affected by Parkinson's. We are dedicated to attracting a diverse workforce and aim to be an employer

of choice. We particularly welcome applications from people affected by Parkinson's and the charity's commitment to non-discrimination is embedded in its values, policies, procedures and practices.

In relation to senior staff salaries, we pay a fair and appropriate salary to attract and keep the very best people with the right leadership experience. In our commitment to openness we disclose information about senior staff salaries in our annual report and on our website, three clicks away from our home page, here: parkinsons.org.uk/executivepay

All salaries, including executive salaries, are evaluated using an external, charity-sector salary benchmarking organisation, using a job evaluation system, which provides sector comparison information based on charities of a similar size, impact and income. Our policy position is to pay at median level of their recommended scales. The framework and policy for executive pay is determined by the Board of Trustees, through the recommendations of the Nominations and Remuneration Committee. The Chief Executive is responsible for determining Director pay within the approved framework. Responsibility for all other salaries is delegated to the Chief Executive.

### Trading subsidiary company Parkinson's UK Sales Limited

The charity owns the entire share capital of Parkinson's UK Sales Limited, a company limited by guarantee and registered at Companies House (registered in England and Wales as 1575175).

The company's activities include the trading element of fundraising events and sale of daily living aids, Christmas cards, stationery and general gift items.

The company donates all its profits to the charity. Its results are shown in note 4 to the financial statements on page 32.

# Statement of Trustees' responsibilities

The trustees (who are also directors of Parkinson's Disease Society of the United Kingdom for the purposes of company law) are responsible for preparing the Trustees' Annual Report and the financial statements in accordance with applicable law and United Kingdom Generally Accepted Accounting Practice (United Kingdom Accounting Standards).

Company law requires the trustees to prepare financial statements for each financial year. 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 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/group 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 Charities SORP
- make judgements and estimates that are reasonable and prudent
- state whether applicable UK accounting standards 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, disclose with reasonable accuracy at any time the financial position of the charitable company and enable them to ensure

that the financial statements comply with the Companies Act 2006, the Charities and Trustee Investment (Scotland) Act 2005, the Charities Accounts (Scotland) Regulations 2006 (as amended) and the provisions of the charity's constitution. They are also responsible for safeguarding the assets of the charity and the group and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

### Disclosure of Information to Auditors

In so far as each of the trustees of the charity at the date of approval of this report is aware, there is no relevant audit information (information needed by the charity's auditor in connection with preparing the audit report) of which the charity's auditor is unaware. Each trustee has taken all of the steps that he/she should have taken as a trustee in order to make himself/herself aware of any relevant audit information and to establish that the charity's auditor is aware of that information.

The Trustees' Report, under the Charities Act 2011 and the Companies Act 2006, was approved by the Board of Trustees on 19 July 2017, including approving in their capacity as company directors the Strategic Report contained therein, and is signed as authorised on its behalf by:

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Mark Goodridge, Chair of Board of Trustees

# Independent Auditor's report to the members and trustees of Parkinson's UK

We have audited the financial statements of Parkinson's UK for the year ended 31 December 2016 which comprise the Consolidated Statement of Financial Activities incorporating the income and expenditure account, the consolidated and charity balance sheets, the consolidated cash flow statement and the related notes numbered 1 to 22.

The financial reporting framework that has been applied in their preparation is applicable law and FRS 102, The Financial Reporting Standard applicable in the UK and Republic of Ireland.

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 section 44(1c) of the Charities and Trustee Investment (Scotland) Act 2005. 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 company's members as a body, for our audit work, for this report, or for the opinions we have formed.

### Respective responsibilities of trustees and auditor

As explained more fully in the Statement of Trustees' responsibilities, the trustees (who are also the directors of the charitable company for the purpose of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view.

We have been appointed as auditor under section 44(1c) of the Charities and Trustee Investment (Scotland) Act 2005 and under the Companies Act 2006 and report in accordance with regulations made under those Acts. Our responsibility is to audit and express an opinion on the financial statements in accordance with applicable law and International Standards on Auditing (UK and Ireland). Those standards require us to comply with the Auditing Practices Board's Ethical Standards for Auditors.

### Scope of the audit of the financial statements

An audit involves obtaining evidence about the amounts and disclosures in the financial statements sufficient to give reasonable assurance that the financial statements are free from material misstatement, whether caused by fraud or error. This includes an assessment of: whether the accounting policies are appropriate to the charitable company's circumstances and have been consistently applied and adequately disclosed; the reasonableness of significant accounting estimates made by the trustees; and the overall presentation of the financial statements. In addition, we read all the financial and nonfinancial information in the Strategic report, the Trustees' Annual Report and any other surround information to identify material inconsistencies with the audited financial statements and to identify any information that is apparently materially incorrect based on, or materially inconsistent with, the knowledge acquired by us in the course of performing the audit. If we become aware of any apparent material misstatements or inconsistencies we consider the implications for our report.

### Opinion on financial statements

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 December 2016 and of the group's incoming resources and application of resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with FRS 102, The Financial Reporting Standard applicable in the UK and Republic of Ireland: and
- have been prepared in accordance with the requirements of the Companies Act 2006, the Charities and Trustee Investment (Scotland) Act 2005 and Regulations 6 and 8 of the Charities Accounts (Scotland) Regulations 2006 (amended).

# Opinion on other matter prescribed by the Companies Act 2006

In our opinion the information given in the Strategic report and the Trustees' Annual Report for the financial year for which the financial statements are prepared is consistent with the financial statements.

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

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

- the parent charitable company has not kept adequate accounting records, or returns adequate for our audit have not been received from branches not visited by us; or
- the parent charitable company 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

10. Hear Lemi

Naziar Hashemi, Senior Statutory Auditor For and on behalf of Crowe Clark Whitehill LLP Statutory Auditor London 10 July 2017

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### Consolidated statement of financial activities

(incorporating an income and expenditure account) for the year ended 31 December 2016

		Group	Group	2016	Group	Group	2015
		unrestricted	restricted	Group	unrestricted	restricted	Group
	Notes	funds	funds	total funds	funds	funds	total funds
Income from:		£'000	£'000	£′000	£.000	£'000	£'000
Donations and legacies		22,303	7,326	29,629	20,738	7,442	28,180
Charitable activities		64	103	167	44	121	165
Other trading activities		2,593	122	2,715	2,611	165	2,776
Investments		237	8	245	263	9	272
Other sources		104_	4	108	48	10	58
Total income	3	25,301	7,563	32,864	23,704	7,747	31,451
Expenditure on:							
Cost of generating voluntary income		5,997	2	5,999	5,873	2	5,875
Trading and merchandising		386	1	387	393	1	394
Investment management costs		48	0	48	11	00	11
Raising funds	7	6,431	3	6,434	6,277	3	6,280
Net incoming resources available for charitable a	plication	18,870	7,560	26,430	17,427	7,744	25,171
Charitable activities	7						
Better treatments and a cure		2,593	4,189	6,782	1,795	5,200	6,995
Quality services		3,284	1,060	4,344	3,161	1,661	4,822
Taking control		12,509	822	13,331	11,549	1,148	12,697
Total expenditure on charitable activities		18,386	6,071	24,457	16,505	8,009	24,514
Total expenditure	7	24,817	6,074	30,891	22,782	8,012	30,794
Net gains on investments	11	1,347	0	1,347	64	0	64
Net income/(expenditure)		1,831	1,489	3,320	986	(265)	721
Transfers between funds	17	34	(34)	0	(1,470)	1,470	0
Other gains and losses							
Net interest in joint venture operating result (discont	inued)	0	0	0	95	0	95
Net movement in funds		1,865	1,455	3,320	(389)	1,205	816
Fund balances brought forward at 1 January	17	12,707	1,966	14,673	13,096	761	13,857
Fund balances carried forward at 31 December	17	14,572	3,421	17,993	12,707	1,966	14,673

All incoming resources and resources expended derive from continuing activities. The statement of financial activities includes all gains and losses recognised in the year.

The surplus determined under the Companies Act 2006 is £1,973,000 (2015: £657,000).

Included within the group results are income of £32,360,000 (2015: £30,966,000), expenditure of £30,388,000 (2015: £30,214,000), and net movement in funds of £3,320,000 (2015: £816,000) resulting from the activities of the charity.

### Consolidated and charity balance sheets as at 31 December 2016

		2016	2015	2016	2015
	Notes	Group	Group	Charity	Charity
		£'000	£'000	£'000	£'000
Fixed assets					
Intangible	10	423	444	392	393
Tangible	10	2,187	2,288	2,187	2,288
Investments	11	19,818	16,763	19,843	16,788
Total fixed assets		22,428	19,495	22,422	19,469
Current assets					
Stock		25	74	0	0
Debtors	12	2,470	2,688	2,691	2,754
Cash at bank and in hand:					
UK programmes		2,331	2,718	2,012	2,591
Local groups		3,792	3,884	3,792	3,884
Total current assets	·	8,618	9,364	8,495	9,229
Creditors					
Amounts falling due within one year	14	(9,050)	(8,677)	(8,921)	(8,516)
Net current (liabilities)/assets		(432)	687	(426)	713
Total assets less current liabilities		21,996	20,182	21,996	20,182
Creditors					
Amounts falling due after more than one year	15	(4,003)	(5,509)	(4,003)	(5,509)
Net assets		17,993	14,673	17,993	14,673
Funds					
Unrestricted funds		14,572	12,707	14,572	12,707
Restricted funds		3,421	1,966	3,421	1,966
Total funds	17	17,993	14,673	17,993	14,673
Notes:					
Funds					
UK programmes		13,085	9,709	13,085	9,709
Local groups	5	4,908	4,964	4,908	4,964
Total funds	17	17,993	14,673	17,993	14,673

The financial statements were approved by the Board of Trustees and signed on its behalf by:

Mark Goodridge Chair of Board of Trustees

Date: 19 July 2017

The accompanying notes form an integral part of these financial statements.

Mary Whyham Trustee

		2016	2015
	Notes	Total funds	Total funds
Cash flow from operating activities:		£′000	£'000
Net cash provided by operating activities	(a)	1,410	1,453
Cash flow from investing activities:			
Dividends and interest from investments		245	272
Proceeds from sale of tangible fixed assets		0	2
Purchase of intangible and tangible fixed assets		(418)	(317)
Net cash movements in investments		(1,708)	205
Net cash provided by /(used in) investing activities		(1,881)	162
Change in cash and cash equivalents in the reporting period		(471)	1,615
Cash and cash equivalents at the beginning of the reporting period		6,589	4,974
Cash and cash equivalents at the end of the reporting period	(b)	6,118	6,589
Notes:			
(a) Net income for the reporting period (as per statement of financial activities)		3,320	721
Adjustments for:			
Depreciation charges		540	536
Gains on investments		(1,347)	(64)
Dividends and interest from investments		(245)	(272)
Profit on the sale of fixed assets		0	(2)
Decrease in current investments		8	0

49

218

(1,133)

1,410

6,118

88

96

350

1,453

6,589

Decrease in stock

Increase in debtors

Cash in hand

Increase /(decrease) in creditors

Net cash provided by operating activities

(b) Analysis of cash and cash equivalents

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### Notes to the consolidated financial statements

for the year ended 31 December 2016

### 1. Charity information

The Parkinson's Disease Society of the United Kingdom (known as Parkinson's UK) is a company limited by guarantee (registered number 948776), which is a public benefit entity and registered as a charity in England and Wales (charity number 258197), and Scotland (SCO37554), and domiciled in the UK. The address of the registered office is 215 Vauxhall Bridge Road, London SW1V 1EJ.

### 2. Accounting policies

### Basis of accounting

The financial statements have been prepared in accordance with the Charities SORP (FRS102) applicable to charities preparing their accounts in accordance with FRS102 the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS102) and the Charities Act 2011, the Companies Act 2006 and the Charities and Trustee Investment (Scotland) Act 2005 and the Charities Accounts (Scotland) Regulations 2006, and UK Generally Accepted Accounting Practice as it applies from 1 January 2015. The charity has taken the exemption from presenting its unconsolidated SOFA under section 408 of Companies Act 2006.

Parkinson's UK meets the definition of the public benefit entity under FRS102. The financial statements have been prepared under historical cost convention with the exception of investments, which are reported at market value.

### **Basis of consolidation**

The financial statements of Parkinson's UK, its branches, support groups and a trading subsidiary, Parkinson's UK Sales Limited (registered number 1575175), are consolidated, on a line by line basis, to produce the Group financial statement. The consolidated entity is referred to as "the Group".

### Going concern

The Board of Trustees (the board) has reviewed Parkinson's UK's financial position and believes that there are sufficient resources to manage any operational or financial risks. It is considered there is a reasonable expectation that Parkinson's UK has adequate resources to continue in operational existence for the foreseeable future. Therefore, the board continues to adopt the going concern basis of accounting in preparing the accounts.

### Local groups

Local groups are required to operate under the charity's financial rules and to present unaudited accounts to their members at respective annual general meetings and submit an annual financial return to the charity's finance department. The income, expenditure and assets of local groups are set out in detail in note 5 and are included in the charity's results. Larger value returns are subject to an independent examination process.

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

In the application of the charity's accounting policies, which are described in note 18, trustees are required to make judgements,

estimates and assumptions about 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.

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

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.

### **Funds**

Unrestricted funds are funds which are expendable at the discretion of the trustees in furtherance of the charity's objectives.

Restricted funds are funds which are to be used in accordance with specific restrictions imposed by donors or which have been raised by the charity for particular purposes. The aim and use of each of the charity's funds is further explained in note 17.

### Incoming resources

All incoming resources are included in the statement of financial activities when the charity is legally entitled to the income, the amount can be measured with reasonable accuracy and its receipt is probable. When income is received in advance of providing goods or services, it is deferred until Parkinson's UK becomes entitled to the income. For legacies, entitlement is the earlier of the estate accounts being approved or cash received. For relevant grants, income is accounted for as the charity earns the right to consideration by its performance. Where the grant is received in advance of performance, its recognition is deferred and included in creditors. Where entitlement occurs before the grant is received, it is accrued in debtors.

### Resources expended

Expenditure has been classified by reference to specific activity categories: all direct costs relating to a specific activity have been aggregated – costs of raising funds include all direct fundraising expenses and an apportionment of support costs. All direct expenditure in furtherance of the charity's objects, together with an apportionment of support costs, is included under the charitable activities heading. The bases of allocation of support costs are reviewed regularly and are explained in detail in note 7(b). When redundancy costs arise, they are charged in the period in which the charity becomes committed to incurring the costs and allocated on the same basis as other expenditure.

Grants to third parties for specific activities are charged in the accounts when an award is approved by the relevant award panel, or when performance related grants' conditions are met, although disbursement of the funds may be made in subsequent accounting periods.

### Financial instruments

Financial assets and financial liabilities are recognised when the Group becomes party to the contractual provision of the instrument. The Group has only basic financial instruments and these are initially measured at transaction values and subsequently measured at their settlement value. Financial assets comprise cash at bank and in hand, short term deposits and the group debtors excluding prepayments. Financial liabilities comprise the Group's short and long term creditors excluding deferred income.

Cash at bank and in hand is held to meet short-term cash commitments as they fall due and includes all cash equivalents held in the form of short term deposits

Trade and other debtors are recognised when amounts are due to the Group. Creditors and provisions are recognised when the Group has a legal obligation to transfer funds as a result of past events that can be reliably measured or estimated and will probably result in transfer of funds.

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.

Investments, including bonds and cash held as part of the investment portfolio, are held at fair value at the balance sheet date, with gains and losses being recognised within income and expenditure. Investments in subsidiary undertaking is held at cost less impairment.

### Leasing

Operating lease rentals are charged to the statement of financial activities over the period of the lease on a straight line basis.

### Tangible fixed assets and depreciation

Tangible fixed assets are included at cost and are stated net of depreciation and any provision for impairment. Assets below the value of £2,000 are not capitalised except for computer

Depreciation is provided to write off the cost of tangible fixed assets over their useful economic lives on a straight-line basis and it is charged across all activities as part of support costs. The annual rates used are:

Freehold buildings 2.0% Freehold improvements 15.0% Office equipment and fixtures 15.0% Computer hardware 33.3%

### Intangible fixed assets

IT software and website development costs have been capitalised within intangible assets as they can be identified with specific projects anticipated to produce future benefits. Once brought into use, they are amortised on a straight-line basis over the anticipated life of the benefits arising from the completed project. Currently the rate of amortisation is 33.3% per year and it is charged across all activities as part of support costs.

### **Fixed asset investments**

Stock exchange listed investments are stated at market value. Net realised and unrealised gains and losses in the year are included in the statement of financial activities. Cash deposits not expected to be utilised within 12 months are included in fixed asset investments and are stated at cost. The investment in the trading subsidiary (£25,000) is also stated at cost.

### Stock

Stock comprises goods for resale and is valued at the lower of cost and net realisable value.

### **Current asset investments**

Current asset investments are cash deposits which are expected to be utilised within 12 months and are stated at cost.

### Taxation

Parkinson's UK is a registered charity and is exempt from taxation on its income and gains to the extent that they are applied to its charitable purposes. The charity's subsidiary, Parkinson's UK Sales Limited, has not incurred a tax charge in the period due to its policy of paying its taxable profits to the charity under Gift Aid. The charity is not registered for VAT and does not recover any VAT charged on its expenditure. Parkinson's UK Sales Limited is registered for VAT.

### **Pensions**

Prior to 1 February 2014, employees had the option to participate in a defined contribution arrangement in which the charity matched, on a two to one basis, employee contributions of up to 5% of salary into employees' own personal pension plans. In line with the requirements of The Pensions Regulator and in accordance with the required staging date of 1 February 2014, the charity implemented a new pension auto-enrolment defined contribution scheme. As a result, from 1 February 2014, for new employees, employee contributions of up to 3% are matched by the charity on a two to one basis.

### Foreign exchange

Foreign currency grant commitments and payments are recorded at the exchange rate at the time of transactions. Foreign currency outstanding commitments are translated into sterling at the exchange rate at the balance sheet date. Foreign exchange losses are recognised in the consolidated statement of financial activities within the relevant charitable activity expenditure for the period in which they are incurred. Foreign exchange gains are offset against any recognised losses. If such gains exceed the recognised losses the net surplus is recognised as other income.

# 3 Trustees' report and financial statements 2016

### 3. Income from:

		Group	Group	2016	2015
		unrestricted	restricted	Group total	Group total
	Notes	£'000	£'000	£′000	£'000
a) Income from donations and legacies					
Legacies	13	10,665	1,690	12,355	12,938
Donations and membership		11,638	5,636	17,274	15,242
		22,303	7,326	29,629	28,180
b) Income from charitable activities					
Grants	18	29	103	132	153
Education and training events		35	0	35	12
		64	103	167	165
c) Income from other trading activities					
Trading and merchandising		480	0	480	457
Other fundraising		2,113	122	2,235	2,319
		2,593	122	2,715	2,776
d) Income from investments					
Interest on deposits held by					
- UK programmes		17	8	25	36
- local groups		5	0	5	6
Income from investments	11				
- Managed funds		215	0	215	230
		237	8	245	272
e) Income from other sources					
Other incoming resources		104	4	108	58
Total income		25,301	7,563	32,864	31,451

Share capital Shareholders' funds

### 4. Trading activities of subsidiary

The charity owns the entire share capital of Parkinson's UK Sales Limited, incorporated in England and Wales. This company is responsible for the generation of income through various commercial activities for the financial benefit of the charity.

Summarised financial results for 2016 and the position of Parkinson's UK Sales Limited at 31 December 2016, before consolidation, were:

Profit and loss account		
	2016	2015
	£′000	£'000
Total income including interest receivable	613	575
Total expenditure	(578)	(553)
	35	22
Turnover	613	575
Cost of sales	(511)	(501)
Gross profit	102	74
Administrative expenses	(67)	(52)
Net profit for the year before Gift Aid donation to the charity	35	22
Gift Aid donation to the charity	(35)	(22)
Net profit for the year	0	0
Balance sheet		
Intangible fixed assets	31	50
Current assets	466	323
Creditors: amounts falling due within one year	(472)	(348)
Net current liabillities	(6)	(25)
Net assets	25	25

25

25

25

25

### 5. Financial returns of local groups

The charity carries out a number of its charitable activities through a UK-wide network of local groups, which raise income sufficient to fund their activities and, in most cases, also contribute to the funding of UK programmes.

The charity's local groups produce independently examined accounts or finance returns annually. All local groups submitted financial information for 2016

Income and expenditure	Notes	2016	2015
		£'000	£'000
Total income	(a)	4,235	5,356
Total expenditure	(b)	(3,546)	(3,436)
Net movement in funds		689	1,920
Application of not funds raised by local groups:			
Application of net funds raised by local groups:  Transfers to UK programmes for:			
Better treatments and a cure		(564)	(1,293)
Quality services		(59)	(114)
Taking control		(55)	(362)
General and other activities		(67)	(108)
Total net resources transferred		(745)	(1,877)
Net movement in funds retained by local groups after transfers		(56)	43
Fund balances brought forward at 1 January		4,964	4,921
Fund balances carried forward at 31 December		4,908	4,964
Delegas sheek			
Balance sheet			
Debtors		9	2
Cash held centrally for local groups		1,151	1,104
Cash at bank and in hand		3,792	3,884
		4,952	4,990
Creditors due within one year		(44)	(26)
Net assets		4,908	4,964
Notes:			
(a) Income from:			
Legacies		156	1,457
Donations and membership		1,940	1,727
Activities for generating funds (events etc)		1,925	2,020
Investment income		5	6
Incoming resources from charitable activities – grants		116	91
Other incoming resources		93	55
Total income		4,235	5,356
(h) Evpanditure on:			
(b) Expenditure on: Raising funds		134	129
Linearing Patrick		.,,	
Charitable activities			
Taking control		3,332	3,217
Local group administration support costs		80	90
		3,412	3,307
Total expenditure		3,546	3,436

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Trustees'
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### 6. Net outgoing resources for the year is stated after charging:

				2016	2015
Fees payable to the group's auditors:				£'000	£'000
Statutory audit				62	49
Assurance services other than audit				16	22
Other financial services (consultancy)				2	0
				80	71
Depreciation				540	536
Operating lease rentals				49	235
Profit on sale of tangible fixed assets				0	2
7. Takal wasan wasan aya an da d					
7. Total resources expended					
		Direct	Support	Total	Total
	Grants	costs	costs	2016	2015
	£'000	£′000	£'000	£'000	£'000
a) Expenditure on:					
Raising funds					
Cost of fundraising activities		5,046	953	5,999	5,875

387

5,481

1,517

3,274

11,079

15,870

503

4,838

5,157

1,072

316

48

0

0

953

427

755

2,249

3,431

383

394

11

6,280

6,995

4,822

12,697

24,514

4,384

387

48

6,434

6,782

4,344

13,331

24,457

313

Total resources expended			5,157	21,351	4,384	30,891	30,794
	£,000 11.	Facilities £'000	Human resources £'000	Finance £'000	Governance £'000	Management £'000	Total £'000
b) Support costs apportioned:							
Cost of raising funds	275	248	225	88	67	50	953
Better treatments and a cure	89	104	73	54	41	66	427
Quality services	229	128	188	98	75	37	755
Taking control	716	324	586	263	200	160	2,249

804

### Allocation of support costs

Investment management costs

Total costs of raising funds

Better treatments and a cure

Total expenditure on charitable activities

Charitable activities

Quality services

Taking control

Trading and merchandising

Directly attributable support costs are allocated as appropriate. Governance costs include the cost of dedicated staff, internal and external audit, the costs of annual local group meetings and the charity's AGM and direct costs incurred by the Board of Trustees and its sub-committees and are allocated per distinct budgetary activity.

1,309

Remaining support costs are allocated as follows: 1T, Facilities and Human resources - per employee, Finance - per distinct budgetary activity, and Management - per £ of expenditure. The administration cost of local groups, totalling £80,000, are included under the Management heading (2015: £90,000).

### 8. Amounts committed for grants

				Group and	Group and
		Parkinson's	Financial	charity total	charity total
	Research	nurses	assistance	2016	2015
	£′000	£,000	£′000	£'000	£'000
Balance at 1 January	10,046	1,808	0	11,854	11,093
Awarded	4,739	331	3	5,073	5,938
Unused grants reversed	(106)	(15)	0	(121)	(195)
US dollar grant commitment revaluation	205	0	0	205	23
Payments	(5,308)	(623)	(3)	(5,934)	(5,005)
Balance at 31 December	9,576	1,501	0	11,077	11,854
Estimated to be disbursed:					
Within one year	6,303	771	0	7,074	6,345
After more than one year	3,273	730	0	4,003	5,509
	9,576	1,501	0	11,077	11,854

All grants were awarded to institutions except Financial assistance grants which were for individuals.

In 2016 there were no grants awarded to non-UK institutions (2015: £1,375,000). However, a grant previously awarded to the Critical Path Institute was revalued at the balance sheet date due to recent currency devaluation of sterling to US dollar resulting in further liability being recognised and valued at £205,000. In 2017 the charity has committed itself to forward exchange rate contracts to eliminate foreign currency movement exposure.

At the time of application for the research grant the applicants must state the duration of the project and estimate timings of payments requests. Nurse grants are normally agreed for a specific period of time on an individual basis with health authorities and payments begin on recruitment of the nurse. This information is then used to calculate our creditors within one year and more than one year. There are instances where the research projects or nurse recruitment processes are delayed and these estimates are reviewed when the information is available.

The basis of allocation of support costs is described in note 7. It is not appropriate to split support costs between grant making and direct service provision as our support functions work across our direct service provision and our grant making activities.

Grants awarded to institutions:	2016	2016	2015	2015
	No. of awards	£'000	No. of awards	£'000
Research grants				
University of Oxford	2	1,252	3	1,423
Southern General Hospital, Glasgow	1	789	0	0
University College London	1	594	3	129
Imperial College London	2	447	2	313
North Bristol NHS Trust	1	432	0	0
University of Bristol	2	290	0	0
School of Pharmacy and Biomedical Science, Portsmouth	1	225	0	0
University of Cambridge	3	214	1	200
Newcastle University	2	207	4	192
King's College London	1	78	1	141
Cardiff University	1	46	4	508
Critical Path Institute (USA)	1	31	1	1,375
University of Glasgow	0	0	1	461
Sanger Institute, Cambridge	0	0	1	217
Other grants less than £100,000	4	134	7	341
Total research grants	22	4,739	28	5,300
Parkinson's nurse grants				
NHS North Manchester CCG	1	129	0	0
NHS Brent CCG	1	114	0	0
NHS Lincolnshire East CCG	0	0	1	102
Other grants less than £100,000	7	88	10	486
Total Parkinson's nurse grants	9	331	11	588

### 9. Employees, trustees and volunteers

	2016 £'000	2015 £'000
a) Employee costs:	1 000	1000
Salaries	12,416	11,566
National Insurance contributions	1,234	1,170
Pension contributions	920	891
	14,570	13,627

During the year Parkinson's UK has made termination payments to six employees (2015: 13 employees) totalling to £41,063 (2015: £72,035). Of these payments £27,090 was outstanding at the year end. This amount included £11,666 (2015: £52,808) of redundancy payments made to two employees (2015: 12 employees), payment in lieu of notice to three employees (2015: one employee) of £15,191 (2015: £7,292) and ex-gratia payment to two employees (2015: one employee) of £14,206 (2015: £10,935). The ex gratia payment in 2016, as well as payments in 2015, were within the context of a legal settlement agreement.

	NO.	No.
b) Average number of full-time equivalent staff during year:		
Cost of fundraising activities	79	76
Better treatments and a cure	26	25
Quality services	65	69
Taking control	203	180
	373	350

The average number of staff employed during the year was 434 (2015: 411); it consists of 264 (2015: 245) full-time employees and 170 (2015: 166) part-time employees.

Employee costs are charged to activities either as part of direct cost when staff perform duties directly linked to the activity, or as support costs. Support staff are allocated to charitable activities on the same basis as support costs (as detailed in note 7). When cost of employment is allowed to be charged to a specific restricted fund, this cost might also include pension costs.

	110.	TVO.
c) The number of employees whose emoluments (including remuneration and benefits in kinexcluding pension contributions) amounted to more than £60,000 was:	nd and	
Band £60,001 to £70,000	4	3
Band £70,001 to £80,000	1	2
Band £80,001 to £90,000	4	3
Band £110,001 to £120,000	1	1
Band £120,001 to £130,000	1	1

Contributions of £75,708 (2015: £70,000) were made for the provision of defined contribution benefits for 11 (2015: 10) employees earning over £60,000. The key management personnel of the charity comprise the senior leadership team listed in the annual report on page 43. Total remuneration for the senior leadership team of nine (2015: eight) during the year amounted to £803,058 (2015: £744,550).

### d) Trustees:

No trustees received remuneration for their services in either 2016 or 2015. A trustees indemnity policy was purchased at a cost of £2,059 (2015: £1,974).

Trustee expenses were £24,491, of which £8,130 was reimbursed for travel and subsistence to 13 trustees (2015: £14,614 expenses for 12 trustees).

### e) Volunteers:

The charity has 3,700 active volunteers, the majority of whom have a personal connection to the condition, either having it themselves or through a close relative or friend. Our volunteers put their wealth of skills and experience into supporting people affected by Parkinson's throughout the UK, and drive forward the charity's key activities of awareness raising, fundraising, research and campaigning.

# 10. Tangible and intangible fixed assets

Group	Freehold land and building £'000	Freehold improve- ments £'000	Office equipment and fixtures £'000	Computer hardware £'000	Total tangible assets £'000	Intangible assets £'000	Total £'000
Cost							
At 1 January 2016	2,700	908	142	54 <b>1</b>	4,291	1,549	5,840
Additions	0	0	5	103	108	310	418
Disposals	0	(287)	0	0_	(287)	0	(287)
At 31 December 2016	2,700	621	147	644	4,112	1,859	5,971
Accumulated depreciation							
At 1 January 2016	766	765	91	381	2,003	1,105	3,108
Charge for the year	45	30	19	115	209	331	540
Disposals	0	(287)	0	0	(287)	0	(287)
At 31 December 2016	811	508	110	496	1,925	1,436	3,361
Net book values							
Brought forward at 1 January 2016	1,934	143	51	160	2,288	444	2,732
Carried forward at 31 December 2016	1,889	113	37	148	2,187	423	2,610

## 11. Fixed asset investments

	Funds held in		Investment in		
	managed	<u>-</u> -	Parkinson's	<u>-</u> -	_
	portfolios	Cash	UK Sales	Total	Total
Group	2016 £'000	2016	2016 £'000	2016	2015
	£ 000	£′000	£ 000	£′000	£,000
Valuation at 1 January	14,187	2,576	0	16,763	16,809
Acquisitions at cost	0	1,654	0	1,654	10,000
Disposals at proceeds of sale	0	0	0	0	(6,323)
Transfers between asset classes	95	(95)	0	0	(3,859)
Income received	30	185	0	215	72
Withdrawals	(76)	(85)	0	(161)	
Net gains on revaluation	1,344	3	0	1,347	64
Valuation at 31 December	15,580	4,238	0		16,763
	Funds held in	l:	nvestment in		
	managed		Parkinson's		
	portfolios	Cash	UK Sales	Total	Total
Charity	2016	2016	2016	2016	2015
	£′000	£′000	£′000	£′000	£'000
Valuation at 1 January	14,187	2,576	25	16,788	16,929
Acquisitions at cost	0	1,654	0	1,654	10,000
Disposals at proceeds of sale	0	0	0	0	(6,418)
Transfers between asset classes	95	(95)	0	0	(3,859)
Income received	30	185	0	215	72
Withdrawals	(76)	(85)	0	(161)	0
Net gains on revaluation	1,344	3	0	1,347	64
Valuation at 31 December	15,580	4,238	25		16,788
All investments are held with UK-based institutions.					
	Group	Group		Charity	Charity
	2016	2015		2016	2015
	£′000	£'000		£'000	£'000
The historical cost of marketable securities and deposits at 31 December was:	13,721	13,713		13,721	13,713

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## 12. Debtors

	Group	Group	Charity	Charit
	2016	2015	2016	201
	£,000	£,000	£′000	£'00i
Legacies (note 13)	513	119	513	119
Amounts due from Parkinson's UK Sales Limited	0	0	343	188
Tax recoverable on donations and other incoming resources	810	1,204	810	1,204
Other debtors	311	357	199	260
Prepayments and accrued income	836	1,008	826	983
	2,470	2,688	2,691	2,754

The amount of £308,000 due from Parkinson's UK Sales Limited (excluding Gift Aid contribution) is treated as a concessionary loan and this is not interest bearing.

	Group and	Group and
13. Amounts accrued for legacies	charity	charity '
J	2016	2015
	£,000	£'000
Balance at 1 January	119	150
Entitlements	12,355	12,939
Receipts	(11,961)	(12,970)
Balance at 31 December	513	11 <u>9</u>

At 31 December 2016, legacies which had been notified but not recognised as incoming resources in the Statement of Financial Activities had an estimated value of £10,126,000 (2015: £8,277,000), which had not been accrued.

### 14. Creditors - amounts falling due within one year

		Group	Group	Charity	Charity
		2016	2015	2016	2015
	Notes	£,000	£,000	£′000	£'000
Amounts committed to grants	8	7,074	6,345	7,074	6,345 .
Trade creditors		460	488	454	453
Tax and social security		5	0	5	0
Accruals		555	788	489	719
Deferred income		817	847	788	805 '
Other creditors		139	209	111	194
		9,050	8,677	8,921	8,516

Further analysis of creditors in 2016 lead us to reclassify certain trade creditors and amounts committed to grants relating to 2015. Deferred income consists principally of project grant funding for the Monument Trust Discovery Award (further details in note 15) – £786,000 was deferred at 31 December 2016 (2015: £813,000 was deferred and then released in 2016).

### 15. Creditors - amounts falling due after more than one year

		Group	Group	Charity	Charity
		2016	2015	2016	2015
	Notes	£'000	£'000	£'000	£'000
Amounts committed to grants	8	4,003	5,509	4,003	5,509

#### 16. Financial instruments

At 31 December the Group held:		Group 2016 £'000	Group 2015 £'000			
Financial assets at amortised cost		11,413	10,148			
Financial liabilities at amortised cost		12,231	13,341			
Financial assets at fair value through income or expenditure		15,580	14,187			
Financial liabilities at fair value through income or expenditure		0	0			
			Gains /			Gains /
The Group's income, expense, gains and losses	Income	Expenses	(losses)	Income	Expenses	(losses)
in respect of these financial instuments	2016	2016	2016	2015	2015	2015
	£'000	£'000	£'000	£,000	£'000	£'000
Financial assets at amortised cost	30	0	0	42	0	0
Financial assets at fair value through income or expenditure	1,562	0	0	367	0	(74)

#### 17. Statement of funds

		Balance at 1 January	Total incoming	Total resources		Net gains on	Balance at 31 December
		2016	resources	expended	Transfers	investments	2016
	Notes	£'000	£'000	£'000	£′000	£,000	£'000
Unrestricted funds							
- Amounts held in fixed assets		2,732	0	0	(122)	0	2,610
- Other funds		9,975	25,301	(24,817)	156	1,347	11,962
Total unrestricted funds		12,707	25,301	(24,817)	34	1,347	14,572
Restricted funds							
Better treatments and a cure							
Research projects	(a)	372	3,763	(2, <del>9</del> 41)	0	0	1,194
Research: Monument Trust Discovery Award	(b)	0	1,227	(1,227)	0	0	0
Research: The Allan Willett Discovery Fund	(c)	0	735	0	0	0	735
Quality services							
Resources and education	(d)	545	651	(545)	0	0	651
Parkinson's nurses	(e)	40	97	(135)	0	0	2
Monument Parkinson's Nurse Specialists Challenge Fund	(f)	373	(160)	(213)	0	0	0
Taking control							
Geographical	<b>(</b> g)	160	445	(584)	0	0	21
Information and support	(h)	139	423	(124)	0	0	438
Local groups	(i)	337	382	(305)	(34)	0	380
Total restricted funds		1,966	7,563	(6,074)	(34)	0	3,421
Total funds		14,673	32,864	(30,891)	0	1,347	17,993

#### **Restricted funds**

- (a) Research projects funds are used to meet the direct costs of the charity's medical research projects.
- (b) The Monument Trust Discovery Award is a five-year project, funded by the Monument Trust, aimed at understanding the early pathological pathways of Parkinson's.
- (c) The Allan Willett Discovery Fund is to meet the costs of the new Virtual Biotech programme.
- (d) Resources and education funds are used to meet the cost of creating information resources for people affected by Parkinson's and to provide resources and ongoing professional development for healthcare professionals.
- (e) Parkinson's nurse funds are used to meet the costs of the charity's nurse development grants.
- (f) The Monument Parkinson's Nurse Specialists Fund was set up in collaboration with the Monument Trust to contribute to Parkinson's UK's ambition of 100% coverage of nurse specialists across the UK.
- (g) Geographically restricted funds are used to fund local services for people affected by Parkinson's in specific countries or regions in the UK.
- (h) Information and support funds are used to provide country-wide support for people affected by Parkinson's including the helpline and self-management programme.
- (i) Local groups funds are held by volunteer led local groups and are primarily used to provide friendship and support at a local level.

#### Transfers

The transfer of £34,000 from local group restricted funds to unrestricted funds reflects certain income received by some local groups, which was spent for the purposes for which it had been given, but had been recorded as unrestricted expenditure within UK programmes.

Analysis of net assets between funds:	Unrestricted funds £'000	Restricted funds £'000	Total funds £'000
Intangible assests	423	o	423
Tangible fixed assets	2,187	0	2,187
Investments	19,818	0	19,818
Current assets	2,006	6,612	8,618
Liabilities	(9,862)	(3,191)	(13,053)
Net assets	14,572	3,421	17,993

### 18. Accounting estimates and judgements

In preparing the financial statements, the trustees are required to make estimates, judgements and assumptions. The most important areas where the judgements affect the financial statements and could impact the results of reported operations are listed below.

#### Grants commitments

Parkinson's UK makes grant commitments and recognises the expenditure in the year when the commitment is made. Most of the commitments become payable within two to three years. Judgement is exercised when subsequent payments are released upon receipt of a report showing satisfactory progress being made against agreed outcome. Outstanding amounts are not discounted on the basis that the periods over which amounts will be settled are such that any discounting would be immaterial.

#### Cost allocation

Costs not attributable to a single activity are allocated or apportioned to activities on a basis consistent with identified drivers for that cost category and a judgement is made in applying these cost drivers to the cost categories (note7b).

#### 19. Related and connected party transactions

#### In accordance with FRS102 section 33 the charity discloses the following related party transactions:

During 2016, research grants as summarised below were awarded to projects involving a member of the charity's Grant Assessment Panel (GAP) in the capacity as research professional or other related party:

				Outstanding balance at
			Grants	31 December
Related Party	Organisation	Relationship	awarded	2016
•			£'000	£′000
Dr Jerome Swinny	School of Pharmacy and Biomedical Science, Portsmouth	Member of GAP	225	225
Dr David Burn	Newcastle University	Consultant	207	150

The above individuals did not participate in the decisions to award grants to their respective organisations.

#### Donations from trustees:

During 2016 the charity received donations totalling £9,878 from trustees of the charity.

Transactions within the group	Net income to charity	Balance owed to charity at
		31 December
		2016
	£'000	£′000
Transaction between Parkinson's UK and Parkinson's UK Sales Limited	72	343

All transactions above resulted from transfers between members of the group relating to the operational activities of the trading subsidiary including an administration fee of £55,000 charged by the charity and transfer of profits of £35,000 to the charity under the Gift Aid scheme, which were offset by purchases of merchandise by the charity.

### 20. Operating lease commitments

As at 31 December 2016 the charity had annual operating lease commitments as set out below:

	2016	2016	2015	2015
	Land and		Land and	
	Buildings	Other	Buildings	Other
	£′000	£'000	£,000	£'000
Operating leases payments due:				
within one year	11	18	8	36
within two to five years		3	0	14
	16	21		50

#### 21. Grants received

In accordance with agreements entered into with grantors the charity acknowledges the receipt of the following grants included within the total grant income of £132,000 in the Statement of Financial Activities.

		£'000
Grantor	Activity	
NHS Barnsley CCG	Exercise sessions - Barnsley Branch	13
Reading Borough Council	Advice services - Reading Branch	13
NHS Swindon CCG	Exercise sessions - Swindon and District Branch	11
Swansea Council for Voluntary Action	Active with Parkinson's exercise and Self-management programmes	10
NHS Wokingham CCG	Therapies - Reading Branch	10
The Big Lottery Fund	Group activity - Clydesdale Parkinson's Group	7
Conwy County Borough Council	Active with Parkinson's exercise programme	6
Pembrokeshire County Council	Carers grant - Pembrokeshire Branch	6
Royal Borough of Kensington and Chelsea	Group activity - Kensington and Chelsea Support Group	5
NHS Newbury and District CCG	Group activity - Newbury Branch	5
NHS Pennine CCG	Group activity - Burnley Support Group	4
Warwickshire County Council	Exercise sessions - Rugby Branch	3
Three Rivers District Council	Group activity - West Hertfordshire Branch	3
The Big Lottery Fund	Awareness Week event - Cardiff Branch	2
Lewisham Borough Council	Exercise sessions - Lewisham Branch	2
Derbyshire Dales District Council	Group activities - Ashbourne and Chesterfield Branches	2
Cherwell District Council	Exercise sessions - Banbury Branch	1
Barnsley Metropolitan Borough Council	Carers day - Barnsley Branch	1
Calderdale Council	Carers grant - Halifax Branch	1
Nailsea Town Council	Transport – North West Somerset Branch	1
Other grants under £1,000		26
Total grants		132

## 22. Contingent liability

At the year end the charity had three outstanding performance-related grant commitments that were not included in the balance sheet as the related payments are possible but subject to satisfactory review. The costs are recognised in the statement of financial activities as they are incurred throughout the year. The grants are listed below:

Name of institution and grant title	Nature of contingency	Timescale for remaining commitment years	Total award £'000	Amount not recognised at 31 December 2016
University of Oxford - Monument Discovery Award	Performance related grant, funded by Monument Trust	2017 - 2019	5,857	4,218
University of Glasgow – Tracking Parkinson's	Performance related grant	2017 - 2020	3,308	1,132
Imperial College London - MS and PD tissue bank	Performance related grant	2017 - 2019	1,264	538

# Reference and administrative

## Charity details Parkinson's UK

(registered as the Parkinson's Disease Society of the United Kingdom) 215 Vauxhall Bridge Road London SW1V 1EJ parkinsons.org.uk

A company limited by guarantee and registered in England and Wales (948776)
A charity registered in England and Wales (258197)
A charity registered in Scotland (SCO37554)

#### **Patron**

HRH The Duchess of Gloucester GCVO

#### **President**

Jane Asher

## Professional advisers

#### **Auditors**

Crowe Clark Whitehill LLP St Bride's House 10 Salisbury Square London EC4Y 8EH

#### **Bankers**

Royal Bank of Scotland 97 New Bond Street London W1S 1EU

Lloyds Bank 4th Floor, 25 Gresham Street London EC2V 7HN

#### Solicitors

Wilsons Solicitors LLP Steynings House Summerlock Approach Salisbury Wiltshire SP2 7RJ Withers LLP 16 Old Bailey London EC4M 7EG

#### Investment managers

Goldman Sachs International River Court 120 Fleet Street London EC4A 2BE

Troy Asset Management Limited 33 Davies Street London W1K 4BP

# Board of Trustees and committees

#### **Elected trustees**

Hilary Ackland (England)
Margaret Chamberlain, Governance Trustee
(England)

Tim Tamblyn (England)

Teresa Watson (Scotland, until September 2016) Mary Whyham MBE (England), Vice Chair

### Appointed trustees

Nadra Ahmed OBE Lucie Austin (from July 2016) Mark Goodridge, Chair Doug MacMahon Richard Raine, Finance Trustee

#### Co-opted trustees

Gay Ireland (Northern Ireland – until October 2016) Freda Lewis (Wales) Anne MacColl (Scotland – from August 2016)

#### **Executive Committee**

Margaret Chamberlain Mark Goodridge, Chair Richard Raine Mary Whyham MBE Every hour, someone in the UK is told they have Parkinson's – a brain condition that turns lives upside down, leaving a future full of uncertainty.

Parkinson's UK is here to make sure people have whatever they need to take back control – from information to inspiration.

We want everyone to get the best health and social care. So we bring professionals together to drive improvements that enable people to live life to the full.

Ultimately, we want to end Parkinson's. That's why we inspire and support the international research community to develop life-changing treatments, faster. And we won't stop until we find a cure.

Together we can bring forward the day when no one fears Parkinson's.

Parkinson's UK 215 Vauxhall Bridge Road London SW1V 1EJ

Free confidential helpline **0808 800 0303** (Monday to Friday 9am–7pm, Saturday 10am–2pm). Interpreting available. Text Relay **18001 0808 800 0303** (for textphone users only)

hello@parkinsons.org.uk parkinsons.org.uk

# Our values

Our six core values set out the way we work together to pursue our vision and what people can expect from us.

## We listen

Everything we do is based on the experiences of people affected by Parkinson's.

## We unite

We work together as one organisation united behind one shared vision.

## We inspire

Our passion and determination inspire those around us.

## We innovate

We are forward thinking, always seeking to improve.

## We're inclusive

We reach out to the whole Parkinson's community.

## We focus

We deliver results and make the most of our resources.

Find out more about our vision, mission and values at parkinsons.org.uk/ourvision

Parkinson's UK (registered as Parkinson's Disease Society of the United Kingdom) A company limited by guarantee and registered in England and Wales (948776) A charity registered in England and Wales (258197). A charity registered in Scotland (SC037554)

## High-profile supporters

Thanks to the supporters below for helping to raise our profile and awareness of Parkinson's in 2016:

Derren Brown

Laura Carmichael

Nathan Caton

Enzo Cilenti

Dave Clark

Billy Connolly CBE

Jilly Cooper OBE

Barry Cryer OBE

Alan Davies

Rob Deering

Ken Dodd OBE

Nick Easter

Hayley Ellis

Mick Ferry

Michael Fox

Helen Glover MBE

Kerry Godliman

Sienna Guillory

**Gavin Hastings OBE** 

Fergus Henderson MBE

Jane Hill

Dominic Holland

Elis James

Rachel Johnson

Charlotte Johnson Wahl

Natasha Kaplinsky

Gary Lineker OBE

Siân Lloyd

Jason Manford

Jessica Mann

Gabriele Marcotti

Paul Mayhew-Archer

Sarah-Jane Mee

Sarah Millican

James Morgan

Kate Mosse OBE

Dame Jenni Murray

Graham Norton

Juliette Pochin

Dame Esther Rantzen

Adil Ray OBE

Gerald Scarfe CBE

John Stapleton

Harry Styles

Alan Titchmarsh MBE

Paul Tonkinson

Anne Twist

The Noise Next Door

Tim Vine

#### Our staff

Our staff are highly skilled people who are passionate about their work. Their tremendous effort across the year means that Parkinson's UK has made huge progress on all fronts.

# Community, charitable trusts and statutory organisations

We continue to value the generosity of all community, charitable trusts and foundations that support Parkinson's UK.

Our special thanks, however, go to the following for making a special contribution to our work in 2016:

The Allan Willett Foundation

Calderdale Mayor's Charity Fund

The EH Trust and The PH Trust administered by Blevins Franks Trustees Limited

Garfield Weston Foundation

Greville Bathe Fund

The Healthcare Management Trust

The J Macdonald Menzies Charitable Trust

Kirby Laing Foundation

The Monument Trust

Parkinson's EOUIP

Peacock Charitable Trust

ShareGift

# Companies and other organisations

The contribution of our corporate supporters remains crucial to our success as a charity.

We would like to thank them for their support in 2016:

Aberdeen Asset Management

Ashfords LLP

Association for Public Service Excellence

**BPX Group Ltd** 

Dhamecha Group

The National Gardens Scheme

The Professional Darts Corporation

## Those who remembered Parkinson's UK in their will

Without the generosity of these people, our work wouldn't be possible. Legacies are vital to our work — enabling us to carry out our support and research.

## Individual supporters

Our thanks also go to these individuals who made a special contribution to our work in 2016:

Philip Abram

Steven Bailey

John Barton

Scott and Caroline Beaumont

Ben Brodie

David Brodie

Philip Brodie

Simon Dicks

Andy Dicks

Deirdre Duncan

Joe Elliott

Nick Fitzpatrick

Funding the Cure (Niki Aresti, Stavroulla Aresti, Jane Gardiner, Mary Mouskas, Verra Soanes, Katie Varnavides, Phaedra Votsis)

Nick Hazell

Victoria Hazell

Joe Lacy

The South London Younger Parkinson's Network (Angela Barton, Marcus Buckland, Barry Millns, Susan Venner, Dominique Versace, Sarah Webb, Kerry Wilson)

Peter Thornton

# Thank you

Although it's not possible here to thank every single person or organisation who has supported us, we'd like to give particular thanks to:

#### Our Patron

HRH The Duchess of Gloucester GCVO

#### **Our President**

Jane Asher

#### Our ambassadors

We're privileged to work with many individuals who help us by promoting awareness and encouraging others to support us. Our special thanks go out to these individuals who made a truly exceptional contribution in 2016:

John Amphlet

Bernard and Monica de Salis

David and Louise Kaye

Roddy Lee

Cilla Massey

Patricia McWilliam-Fowler

Ann Monk

Fabian Peake

Clare Penate

Lyn Rothman

Fiona Grant Wilson MBE

#### Our members

The size of our membership gives us a strong position to influence decision makers. Thank you to everyone who joined Parkinson's UK or renewed their membership in 2016.

## Our volunteers and local groups

Our volunteers bring skills, experience, energy, enthusiasm and commitment to Parkinson's UK. Our trustees, local groups, fundraisers and volunteers are integral to our work and they make a real difference to the lives of people affected by Parkinson's. Thank you for everything that you do.

In 2016, we were delighted to grant Honorary Life Memberships to the following volunteers in recognition of their outstanding contribution to the charity over many years:

Steve Beech

Paul Boothman

David Boucher

Patricia Butt

Colin Cheesman

Alice Donaldson

Christine Endersby

Clarinda Foster

Ed Foster

John Foster

William Foster

David Martindale

Georgina Martindale

Alun Morgan

Paolo Moscuzza

Elizabeth Pratt

Terry Reed

Tim Stockley

Ann Todd

Teresa Watson

Michael Wharrad

Liz Wolstenholme

#### **Audit Committee**

Margaret Chamberlain Caroline Emerton David Prince CBE, Chair Richard Raine Tim Tamblyn

#### **Investment Committee**

Mark Dumas, Chair Milena Ivanova Karin Norman Richard Raine Tim Tamblyn (from September 2016) Rachel Beagles (from January 2017)

# Nominations and Remuneration Committee

Hilary Ackland
Nadra Ahmed OBE, Chair
Peter Collins (from April 2016)
Bridget Flint
Clive Francis (from April 2016)
Mark Goodridge

## Senior leadership team

Steve Ford, Chief Executive

Richard Penney, Deputy Chief Executive / Director of Finance, IT and Performance Valerie Buxton, Director of Strategic Intelligence and Excellence Julie Dodd, Director of Digital Transformation and Communication (from August 2016) Paul Jackson-Clark, Director of Fundraising Carolyn Nutkins, Director of Organisational Development Arthur Roach, Director of Research Barbara Williams, Director of Support and Local Networks (to May 2017) Katherine Crawford, Acting Director of Support and Local Networks (from May 2017) Joe Nickel, Head of Planning, Performance and Change (to February 2017)