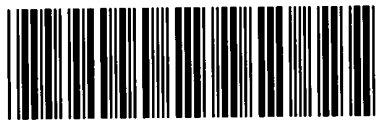


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Growing to face breast cancer together

by Anna O'Connell

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Welcome to a year of progress, 2016–17


When you are working towards ambitious targets, it sometimes takes dramatic action to help you get there.

For us this year action has come from our **Services and influencing strategy 2016–20**, which builds on the ambitions spelt out in our overarching strategies **Facing breast cancer together** (2014) and the earlier **Vision 2020: living with and beyond breast cancer** (2010). In essence, our ambition – set out in **Facing Breast Cancer Together** – is to double our reach by 2020 from where we were in 2014, and we're on track.

The **Services and influencing strategy** takes a detailed look at how we might grow sustainable services to move us forward towards our goal.

Our vision is that all the 62,000 women and men diagnosed with breast cancer every year have the chance to be supported through one of our face-to-face services if they want it. So we need to review our plans regularly to ensure we are getting there. You can read in this report how a generous in-year £1million grant from the UK government has helped to kick-start measurable progress.

For example, the number of people attending one of our Moving Forward courses has grown by 36% over 2015–16 attendances, and we are confident that we now have strong roots for further sustainable growth during 2017–18 (see page 8).

 increase in
Moving Forward
course attendance

We are immensely grateful for all the financial support we've had from trusts, grant-makers, corporate partners and individuals over the past year.

But we are acutely aware that in a competitive field, we need to be vigilant to make the most of fundraising opportunities so that we can provide the best care, information and support to everyone affected by breast cancer.

That's why we've carried out a root and branch review of our fundraising portfolio this year, resulting in new and revised initiatives for 2017–18. These include a refresh of our former Strawberry Tea fundraising parties. We hope the new Afternoon Tea events are more attractive for people to take part in.

We are also overwhelmingly grateful to all the volunteers and others who support our work in so many ways. For example, volunteers at the heart of delivering our vital services; campaigners with and for us; and people who offer their personal stories in mass media to help spread the word about the information, care and support we offer to anyone affected by breast cancer.

Without all these people we couldn't hope to keep growing towards our ambition: that everyone affected by breast cancer – from the point of diagnosis to living with primary or secondary breast cancer – has access to care, support and information from Breast Cancer Care whenever they need it and in whatever form they want it.

We thank them all.



Emma Burns,
Chair of the Board of Trustees (pictured right)

Samia al Qadhi,
Chief Executive

Who we are and what we do: a summary of our activities for 2016–17

When people face breast cancer, we're here for them from day one – and for their family and friends. We make sure there's a supportive network of breast cancer experts and people who've been there too whenever someone needs help to cope with living with and beyond breast cancer.

We know that every breast cancer experience is unique. So whatever someone's individual needs, we're here to meet them with expert, personalised support at the time and place they need it.

And this is increasingly often, as each year now 62,000* people in the UK are told they have the disease, that's one person every 10 minutes on average. It's the most common cancer for women in the UK today, killing more than 11,400 each year.

But, happily, more people than ever now survive their breast cancer for at least five years after diagnosis. However, this means that as NHS services are increasingly stretched, there's even more need for our vital UK-wide care, support and tailored information.

All our services and information are developed using our clinical expertise and knowledge alongside the experience of people going through breast cancer. That way – and because we've been doing this work for over 40 years – we're confident we're providing what people want and need as they face what may be one of the most difficult experiences of their life.

Because we talk to people affected by breast cancer all the time – on our Helpline, through research studies and surveys, during delivery and evaluation of our services, in our campaigning activities, via our Nursing Network and helping to populate patient information with real experience – we believe that we are the most informed voice of breast cancer in the UK today and we engage with healthcare policy decision-makers on that basis.

But not on our own: hundreds of volunteers take campaign actions and meet face-to-face with the people we are trying to influence, working together

to improve standards of care for everyone affected by breast cancer.

Many of our services are also supported by volunteers, who enable us to provide a comprehensive range of services so that we can offer people the support they need where and when it works for them.

Our services are delivered face-to-face, by phone, online and now through an innovative app called BECCA (see page 9). In all of them our aim is to make sure people have the best information and support to make decisions that are right for them and their loved ones, and to find their own best way to cope with breast cancer and its wide-ranging impact.

Breast care teams across the UK use and distribute our patient information, which is written and regularly reviewed by our nursing team, and informed by independent healthcare professionals and people with breast cancer. In addition, millions of people read our information online.

Our Nursing Network continues to attract more members, uniting breast care specialists to share best practice and service improvements, and take up training opportunities. The Network, run by our Clinical team, is for healthcare professionals working directly with people affected by breast cancer.

It keeps over 1,000 breast cancer healthcare professionals up to date with the latest developments in breast cancer and supports their professional development with top-class training opportunities counting towards Nursing and Midwifery Council revalidation. There are also specialist nursing forums for secondary breast cancer and younger women.

As we support others, we ourselves are supported by thousands of people who give their time, expertise, activity and money because they know that everyone with breast cancer needs people standing with them to face the trauma of breast cancer together.

* Figures released in February 2017.

How we grow together

Every year in our annual report we acknowledge how little we could do without the hundreds of volunteers and supporters who donate thousands of hours and millions of pounds to help people affected by breast cancer. This year is no exception so here is a quick snapshot of just a handful of these superstars.



Volunteering for us helped Hedwig Hegtermans feel normal again after her breast cancer treatment. She volunteers in our London office, for Moving Forward

courses, and for our Someone Like Me phone and email support service.



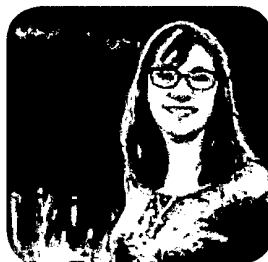
Being a Breast Cancer Care Trustee and Treasurer is 'not just a job' for Jill Thompson. All our trustees are volunteers, and Jill was inspired to apply for this vital role after using our services

following her own breast cancer diagnosis. 'This charity really matters to me,' she says.



Being a model at our 2016 annual fashion show was a confidence boost for Anita Sharma after the rigours of breast cancer treatment, all 'while raising

awareness of breast cancer and fundraising for a great cause'.



It felt 'fantastic' to be part of the team when Alison Metcalfe helped to develop our award-winning **Secondary breast cancer resource pack**. She was at the

British Medical Association Patient Information Awards ceremony in September 2016 to receive the accolade (see page 10).



For Stuart Hooper, running the London marathon '...was emotional and worth every bit of pain. Running for my wife, who was so proud, and running for you, who

helped her in her difficult journey.'

Find out more at
breastcancercare.org.uk/get-involved

Our blossoming numbers 2016–17

During 2016–17, we've fulfilled nearly **5.5 million** breast cancer support contacts*

2,594,355 unique visitors to our website

1,364,796 unique visitors to our online Forum

1,130,162 patient information resources distributed and downloaded

298,697 social media followers (Facebook/Twitter/Instagram)

12,538 Helpline calls and Ask Our Nurses queries answered

3,610 people supported through our face-to-face services

2,327 Campaigns Network members

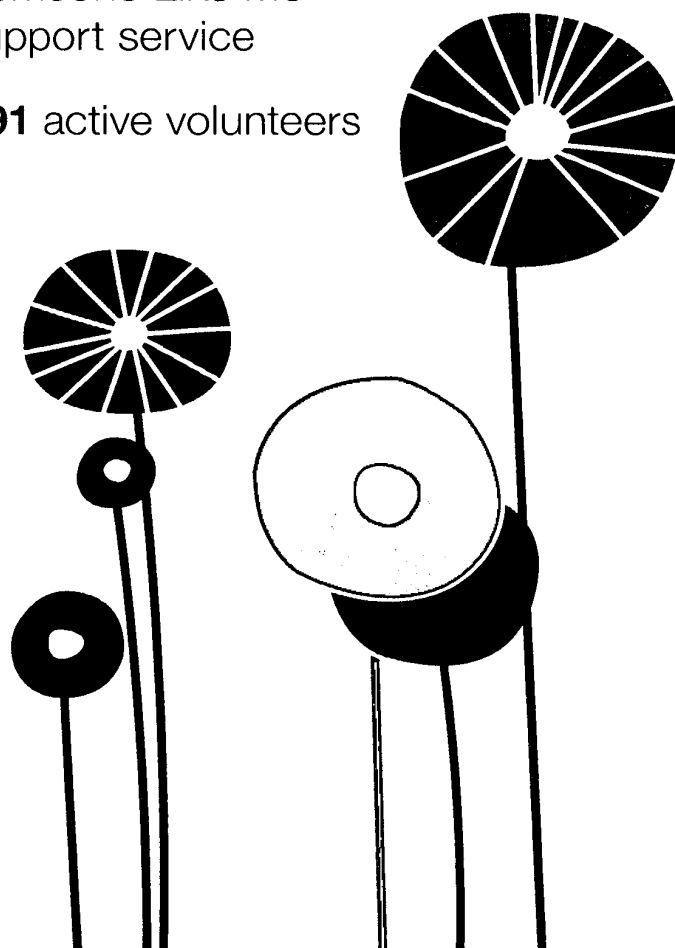
1,752 Breast Cancer Voices sharing their personal experiences

1,101 healthcare professionals in our Nursing Network

882 matches through the Someone Like Me support service

491 active volunteers

*Aggregate figure 5,406,141: online forum and website unique visits; social media followers; Helpline and Ask Our Nurses queries; patient information distributed; people supported by face-to-face and Someone Like Me services; Nursing Network members.



Strategic report

Here for you: strategies, aims and objectives

Vision 2020 – living with and beyond breast cancer is our overarching strategy. Written in 2010 for the then coming decade, we have since then focused our work in seven impact areas:

- early detection and breast awareness
- diagnosis and treatment
- Moving Forward
- secondary breast cancer
- younger women
- family history and breast cancer
- families and partners

At the time of formulating this strategy we consulted widely with our stakeholders – people who use our services, healthcare professionals, volunteers, trustees and staff – and have continued to do so as the decade has unfolded, so these areas of impact have remained constant.

However, we have not been complacent and details of the strategy have been revisited and refocused. This is to ensure we are continuing to make progress towards our goals and in response to changes in the external environment. The increasing numbers of women and men being diagnosed annually – at last count, up to nearly 62,000 – is of particular concern.

This work led to the **Facing breast cancer together** strategy of 2014 and then detailed directorate strategies such as the **Services and influencing strategy 2016–20**.

The latter document sets out our plans for a sustainable increase in our services, especially of our face-to-face services, concentrating on doing more of what we do well so that we can scale up our work and meet the ever-increasing demand.

At the heart of our activity is an ambition to enhance and significantly grow our Moving Forward package of services, designed to support people as they progress from the initial intense hospital-based treatment to dealing with the longer-term physical and psychological effects of a breast cancer diagnosis.

We are also ensuring that we understand the changing needs of women who have a secondary breast cancer diagnosis and are there for them with support through our Living with Secondary Breast Cancer service. This work has included in-depth research about people's experiences. Also, strong campaigning with policymakers and health service commissioners where we have identified gaps in care and support needing the attention of the NHS and other health service providers.

Additionally, there is a focus on planning the future development of our specialist support services for younger women and people with a family history of breast and related cancer diagnoses.

As you will see in this report, we were fortunate in 2016–17 to be able to lay deep foundations with the help of a £1million UK government grant.

But, as welcome as this grant has been, we know that it will take a longer-lasting uplift in our income to fulfil our ambitions. Finding ways to achieve this is challenging in an uncertain economic climate.

So this year we've completed a wide-ranging analysis of our fundraising activities, with the aim of ensuring our fundraising staff, volunteers and supporters are focusing their work and support as efficiently as possible. Also, importantly, so that when someone supports us financially, they get the best possible experience of working with Breast Cancer Care and want to do it again – and recommend us to their friends.

The results of this review started to be implemented in 2016–17 but we expect they will largely be seen in coming years, beginning with new initiatives in 2017–18.

If we are going to keep reaching more women and men affected by breast cancer, we need to increase our profile so that people know we're here for them, and to keep raising the money we need to fund our work.

In the rest of this report you can read about how we've progressed in the three key areas of reach, profile and income during 2016–17.

Reaching more people

Making sure that all our services are there for growing numbers of people affected by breast cancer is our primary objective. During 2016–17, we made great strides forward, though not without making some changes to encourage strong growth where it's most needed.

For example, we've been withdrawing from HeadStrong services across the UK during 2016–17, and Lingerie Evenings and Information Sessions in most of the country, but at the same time we've increased the number of hours of support delivered face to face to people affected by breast cancer to an estimated 39,889 hours, up 4% on the previous year.



increase in hours
of support delivered
by face-to-face
services

We've done this by incorporating the knowledge and experience from previous services into an enhanced Moving Forward offering, which aims to help people to get back to a normal life following hospital-based treatment for primary breast cancer. This is vital support that is not provided by the NHS.

We know so many people find this an unexpectedly hard part of their breast cancer experience as the impact of what has happened hits them. They may feel alone, anxious about whether their cancer will return and be struggling with long-term side effects of treatment such as lymphoedema (where your arms and chest can swell up) and cancer fatigue.

Moving Forward

Our Moving Forward courses – run in partnership with NHS hospitals, usually over sessions in four consecutive weeks – are now being presented by professional facilitators, enabling faster and more efficient expansion into new areas.

A more detailed volunteer role for the courses has been developed, and we are recruiting and training women who have themselves had a

breast cancer diagnosis to undertake this role. Increasingly now, trained volunteers are available for each phase of each Moving Forward course.

Because of this work, in 2016–17 we've been able to provide courses for 36% more women than in 2015–16, and we are planning further expansion for 2017–18.

Our development work has been informed by an evaluation of the benefits the service provides. People who had attended a Moving Forward course during 2015 reported that it:

- improved their emotional wellbeing
- increased their self-confidence
- helped them feel less alone
- increased their knowledge and understanding
- made them feel better able to manage the side effects of treatment
- made them feel better able to make decisions about their wellbeing

In addition, 100% said they'd recommend the course to others. One evaluation respondent said:

'An absolutely amazing course. It should be compulsory for every woman [who's been through breast cancer]. Thank you Breast Cancer Care.'

In addition, we've developed and tested a post-treatment support app, called BECCA. This was released as a smartphone app in May 2017 following web-based testing by over 1,000 women during 2016–17 (see box opposite).

Much of the development of the Moving Forward courses was funded by a £1million grant from HM Treasury. We've also used some of the grant money to launch a research study that includes asking hundreds of people exactly what support they need and when. As a result, we'll be piloting an additional support service during 2017–18. The plan is to bring to women some of the support from the Moving Forward course a little earlier in their breast cancer experience. For example, with side effects of treatment, bras, prostheses and other clothing after breast cancer surgery.



BECCA reminds you to look after yourself

The BECCA app gives support with hundreds of simple and inspiring suggestions on everything from healthy living, exercise and coping with side effects of treatment to beauty, fashion and getting help.

Damalie, one of the testers, said: 'BECCA is like a friend reminding you to look after yourself. It gives you information but only if and when you need it, and then it's there at the touch of a button.'

'Sometimes I can't pinpoint how I'm feeling, and I go on BECCA and it helps me make sense of this; it tells me it's OK to feel this way or gives me things to do to make me feel better.'

She went on to explain some of the benefits of the app: 'I've learnt to look after my body. I don't take it for granted anymore. I try and exercise, I know my limits and have taken on a healthy lifestyle.'

As with all our services, the Moving Forward offering is underpinned by our extensive portfolio of high-quality, externally accredited patient information, both on and off line.

Specifically, there is a freely available comprehensive resource pack, **Moving Forward: for people living with and beyond a diagnosis of primary breast cancer**. It was distributed to 16,715 people during 2016–17, that's a 37% increase on the numbers distributed during the previous year.

37% growth in resource pack distribution

Because of the focus on scaling up our core Moving Forward services and information, our Younger Women Together events were planned for slightly fewer people during 2016–17 than the previous year. However, this was ahead of hoped-for expansion in 2017–18.

Living with Secondary Breast Cancer

It has been estimated that there are around 36,000 people living with incurable secondary breast cancer in the UK, all of whom have complex treatment and support needs.

We know, because we speak regularly with people who have secondary breast cancer diagnoses, that many of these needs are not routinely met. So to help fill the support and information gap, we have developed, refined and expanded our Living with Secondary Breast Cancer service over the past several years.


During 2016–17, the regionally based monthly meet-up sessions, each facilitated by a trained counsellor, have also benefited from our new more efficient staffing arrangements, with responsibility for each service being much closer to the ground than before.

This has enabled us, among other launches, to set up a new service in the Scottish Highlands with quarterly video-conferencing from the sessions in Inverness to three further outlying locations. This is so that people in isolated rural areas can join in virtually, benefiting from guest speakers who are experts in their field and contact with other women who have secondary breast cancer. The video link is an innovation for us,

and the new service is enthusiastically supported by local breast care nurses.

Breast care nurse from NHS Highland Angeline Macleod said: 'Often, women with secondary breast cancer don't get the opportunity to meet somebody else with the diagnosis. One of the wonderful things that comes from this group is being able to share experiences.'

Overall, we provided Living with Secondary Breast Cancer services for 23% more women than in 2015–16, while our specialist Younger Women with Secondary Breast Cancer Together events remained, as planned, at around the same level as the previous year.

 growth in numbers attending Living with Secondary Breast Cancer

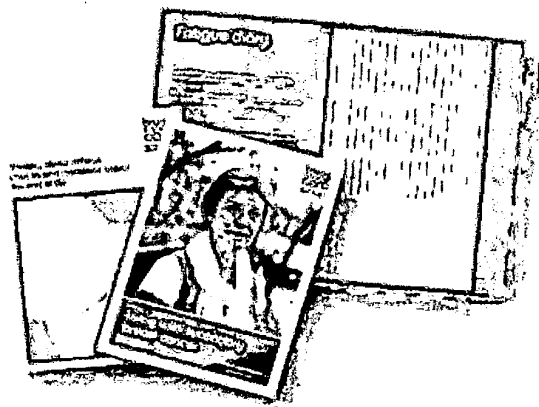
In addition, we commissioned an extensive impact evaluation of the Living with Secondary Breast Cancer service. This demonstrated the benefits of the service to people with secondary breast cancer as well as pointing to areas for development and improvement during 2017–18.

Women said the benefits of attending Living with Secondary Breast Cancer meet-ups included that it:

- addressed information and support needs and concerns
- improved their knowledge and understanding
- increased their self-confidence
- improved their emotional wellbeing
- created new friendships and connections
- provided support beyond the family

One respondent who attended one of our Living with Secondary Breast Cancer services said:

'It has changed my life completely. [I] have become more relaxed and confident about dealing with secondary breast cancer.'



Award-winning secondary breast cancer resource pack

Our information pack for people with secondary breast cancer was judged as an 'empowering resource' at the 2016 British Medical Association Patient Information Awards.

It took the top award in the long-term conditions category, with the judges adding: 'It has clearly benefited from some high-quality user involvement.'

The pack gives vital information and support about care, treatment and living with this incurable disease so that people can better understand what they are facing and find the best ways to cope.

It includes: a booklet on living with secondary breast cancer with signposting to our Helpline; a booklet on difficult decisions and choices; charts to monitor energy levels and pain; and patient record sheets to help people keep track of the many different appointments they will have, and the specialist treatment and advice they receive.

We distributed this free resource to 3,402 people during 2016–17.

Someone Like Me

Our Someone Like Me service supports people affected by breast cancer, linking them by phone or email with trained volunteers who have been there too (see box right).

It is available to people with or who have had primary breast cancer; people undergoing genetic testing or who have received a genetic diagnosis; and partners, family and friends of women and men affected by breast cancer.

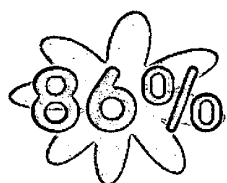
This year we matched 882 people needing support with volunteers, a similar number to 2015–16. We also started a recruitment drive so that we have more volunteers ready to be matched with people needing support in 2017–18.

Ask Our Nurses

The Ask Our Nurses service – which allows people to email questions to our expert nursing staff – experienced a blooming 86% increase in the number of inquiries during 2016–17.



This was helped by a new feature where people can post questions on our online Forum, to which they can expect a response within one working day. It means that other Forum users can read questions and responses, also benefiting from the information.



growth in
Ask Our Nurses
questions and
answers



A turning point

Playgroup manager and mother of two teenage sons Perin Dobran was diagnosed with breast cancer at age 45.

Following treatment she contacted our Helpline and was matched with a Someone Like Me volunteer who'd been through the same treatment.

Perin says, 'Throughout my treatment, I had tried my best to carry on like normal. I was desperate not to upset my two boys, who were in sixth-form and working towards their exams.

'When I spoke to the Breast Cancer Care trained volunteer, I was able to speak freely for the first time... I could finally ask all my questions without feeling silly or guilty for worrying her.

'When I got off the phone, I felt so much brighter, and positive for the first time since I was diagnosed.'

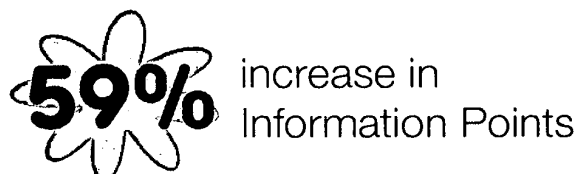
Helpline

There was an increase in the total number of Helpline calls answered by our nurses and other expert staff.

The 2016 pilot of a later opening time one day a week proved successful so that the Helpline is now routinely open until 7pm on Wednesdays.

Patient information

Another major and vital expansion, again supported by the £1million government grant, was in the number of Breast Cancer Care Information Points now in breast care units across the UK – up from 88 at the end of 2015–16 to 140 by the end of 2016–17, an increase of 59%.



Information Points, which are stocked by dedicated volunteers, ensure that a good selection of our free patient information booklets and resource packs is available in clinics for patients to choose from just when they need it. The Information Points also signpost people to even more information, either as booklets or from our website.

During 2016–17, we distributed well over a million patient information resources to people affected by breast cancer, while our information and support website pages were visited by 1.8million unique users.

In addition to booklets and leaflets, we make our patient information available in a variety of other formats so that women and men can get it in the way that suits them best. For example, as shareable website pages, PDFs, ebooks and audio files.

We also work tirelessly to make sure people can find our website information when they put breast cancer queries into their search engine. For instance, the number of people landing on our radiotherapy page from a Google search went up 226% in three months following work to reorganise the content, making it easier to find.

In addition, people now have the ability to leave feedback about the information they see on our website. One person left this comment in response to information on our page 'What to expect at a breast clinic':

'Very helpful. I suffer with severe anxiety and was minutes away from cancelling my appointment at the breast clinic. However, due to the clear and precise information of what the appointment will be like, I feel much more relaxed and will be going to my appointment.'

All our information in whatever format is written by our own team of specialist breast care nurses, and reviewed by volunteer independent healthcare professionals and people affected by breast cancer. We create new editions every other year or so to ensure things are kept up to date. This means a lot of work for our volunteer reviewers, all of whom we'd like to thank.

Because of this rigour, our patient information is certified as evidence-based and up-to-date by NHS England's Information Standard. This is essential as it means hospitals can rely on our information. The accreditation takes place annually.

The popularity of our website overall continues to grow, with more than 2,500,000 unique website visitors in 2016–17, a 24% increase on 2015–16, and almost 1.4million unique Forum visitors, an increase of 45% on 2015–16. We believe this increase demonstrates that our investment in a mobile-friendly website has been timely and a great success. Alongside our website, our social media following also continues to expand.





Tremendous source of support

Mother of two young children Claire Maddison found breastcancercare.org.uk a tremendous source of support when she was diagnosed with breast cancer.

She said: 'It was such a confusing time after my diagnosis and I wanted to know what to expect next. I went online to search "breast cancer" and Breast Cancer Care came up.

'There is a lot of brilliant information on the website, which was a huge relief. It's all written in plain language and the tone feels really friendly.

'My husband found the website really helpful because he wanted to understand how breast cancer was going to affect me and our family.'

Breast health promotion

As well as the large amount of patient information distributed and viewed online in this area, and the work done by our Helpline and Ask Our Nurses services to promote breast awareness and early detection of breast cancer, volunteers undertake outreach work, with breast awareness talks and information stands out in the community.

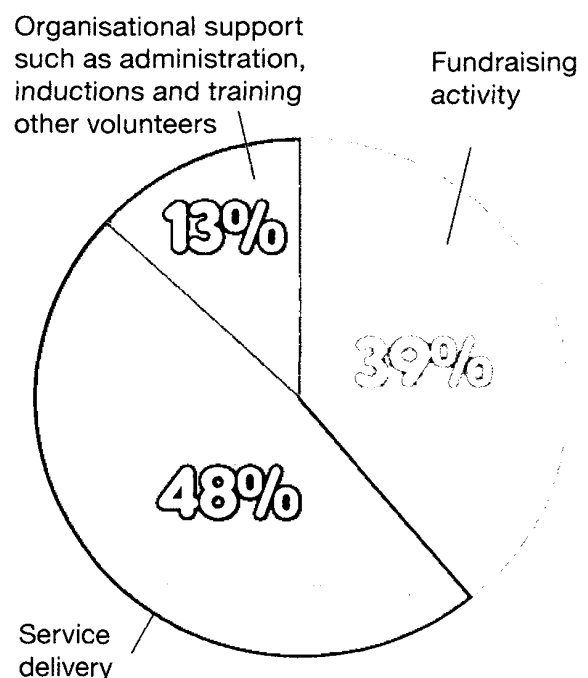
During 2016–17, volunteers delivered or took out 66 breast awareness talks and stands in England and Wales plus 75 talks in Scotland under the B-Aware programme, funded by Chris Weir to take the vital breast awareness message to more women in Scotland. Altogether, this took 627 hours of their valuable time, for which we thank them deeply. If

people are diagnosed earlier with breast cancer, their treatment is likely to be more successful, so this is life-changing and potentially life-saving work.

Our wonderful volunteers

During 2016–17, volunteers contributed an astonishing 10,601 hours delivering tasks and activities to support our objectives, and that's without counting the people who turned out to cheer on challenge event participants or take Campaign actions (see page 14).

Proportion of volunteer hours used supporting service delivery, fundraising and organisational functions



Raising our profile

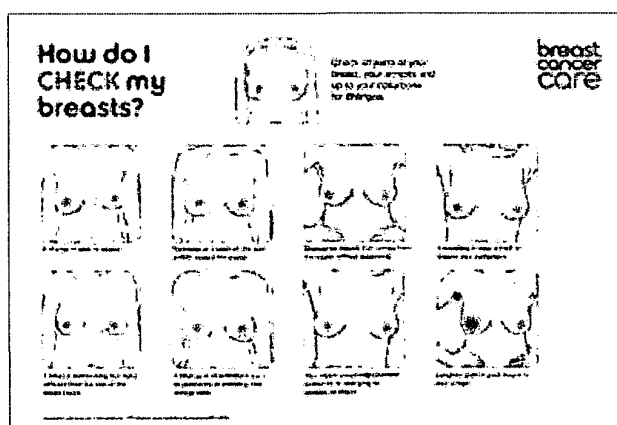
In order to maximise our spending on services, we have fairly modest marketing and engagement budgets compared to some other charities in our field. This means we have to work all the harder to increase our profile and raise awareness.

Nevertheless we achieve some remarkable successes in raising awareness about breast cancer and the impact it has on people's lives; campaigning for better services where we see they are needed; giving people affected by breast cancer a platform to share their stories more widely; and promoting our services and information so that more people benefit.

Sharing stories

Simply buying space in the media is frequently beyond our means, so we largely rely on unpaid media such as features in newspapers, magazines and online, and social media posts.

This was successful enough to see Breast Cancer Care ranked number 19 in the top 20 Charity Brand Index 2016 – the charity sector's league table for monitoring awareness levels in the general public. For a charity of our size, this is an incredible achievement of which we are proud.



As a result of our work with the BBC following a viral 'Know Your Lemons' campaign by Worldwide Breast Cancer, our signs and symptoms website page had a massive traffic growth, from 511 views on Saturday 14 January 2017 to over 13,200 on Sunday 15 January and another 5,300 the following Monday.

The index also tells us 70% of people thought Breast Cancer Care drew attention to its cause – with only Macmillan Cancer Support and Comic Relief scoring higher. An equally strong 62% reported seeing Breast Cancer Care in the news a lot.

During 2016, we featured in over 5,500 articles – putting us in the top 50 league table for charities appearing in mainstream and social media (2016 Annual Charity Barometer). This profile not only drives awareness of our information and support services, but also actively encourages new and current supporters to campaign or raise funds to support our services.

We'd like to thank everyone who has shared their personal story or given us the space to raise awareness. Your support and generosity of spirit has enabled us to promote our life-changing services, which are needed now more than ever.

Campaigning and influencing for better services

We provide information and support services for people with secondary breast cancer, but we know there is room for a great deal of improvement in overall care and treatment for people with this incurable disease.

We have been campaigning heavily in this area since 2006, so this year we refreshed our knowledge of the care, treatment and support needs of both patients and healthcare professionals through an extensive survey.

In our survey:

- over half of people with secondary breast cancer said they hadn't known before diagnosis how to spot its signs and symptoms
- two-thirds of hospital trusts in England didn't know how many of their patients had secondary breast cancer
- three-quarters of NHS trusts and health boards across the UK said there wasn't enough specialist nursing care for people with secondary breast cancer

These results make it clear that too many people with secondary breast cancer aren't getting good enough care and support when they need it most. So we launched a campaign – **Secondary. Not**

Second Rate. It calls for improved services for people with secondary breast cancer.

Under the campaign during 2016–17, we published the first three of four major reports, exhibited at the Labour, Conservative and Scottish National Party conferences, and tripled the membership of our Campaigns Network in six months – from 632 members to 2,327. This astonishing rise of 268% demonstrates the level of concern for the issues we have focused on.



rise in
Campaigns
Network
membership

Our three campaign reports published in 2016–17 covered: people's experience of being diagnosed with secondary breast cancer; missing data about the number of people diagnosed, despite statutory obligations to collect this data in England (that came into force partly as a result of our earlier campaigning); the support patients receive dealing with the impact of their diagnosis.

A fourth report launched in April 2017–18 covers nursing care for secondary breast cancer patients. All four reports are available on our website at breastcancercare.org.uk/secondary

Between them our campaigners took 2,005 campaign actions such as emailing their MPs, MSPs and AMs, tweeting about the campaign and communicating with their local clinical commissioning group or health board.

To mark Secondary Breast Cancer Awareness Day in October 2016 we held an event at the Westminster Parliament to continue our conversations with MPs about our campaign. Following our event, the issue of secondary breast cancer data collection was discussed during Prime Minister's Questions. Our **Secondary. Not Second Rate** campaign was also acknowledged on Twitter by David Mowat, then Health Minister with responsibility for cancer.

An independent monitoring report sampling the views of 150 Westminster MPs said 63% of

them were aware of our campaign on secondary breast cancer and 51% supported it, showing that everyone's hard work has been worth it. During 2017–18 we will be continuing to work hard to turn this awareness into commitments to deliver positive change.

In Scotland we met with Shona Robison MSP and the Head of Strategic Planning in the Health Directorate at the Scottish Government to discuss the campaign aims. We also made sure that our messages about secondary breast cancer – and other breast cancer issues – were heard by politicians from across the political spectrum, including meeting with the health spokespeople of all the Scottish parliamentary parties.

In Wales, our responses to policy consultations – including a review of the Cancer Plan for Wales – has helped to ensure that health boards are now required to make changes to ensure improvements in support and care for people with secondary breast cancer. Additionally, there is action planned to make data collection about the number of patients diagnosed with secondary breast cancer in Welsh hospitals a reality.

Cancer drugs

In addition to our influencing work on secondary breast cancer, we have taken an active role in putting pressure on the government, NICE (the National Institute for Health and Care Excellence) and NHS England to consider fully the needs of breast cancer patients in making changes to the Cancer Drugs Fund (CDF) in England, sometimes working in collaboration with other charities.

The CDF gives cancer patients access to expensive drugs not routinely available on the NHS, but it was consistently operating over its budget, causing the review and subsequent changes implemented in July 2016.

We are now monitoring the effects of the changes, and plan to feed in to NHS England's formal evaluation of the new CDF, which is promised for no later than Autumn 2017.

Also during the past year, there have been changes to the way new drugs are assessed and funded through the NICE Technology Appraisal

Programme in England. We spoke out about the changes, which we believe will have a negative impact on access to new breast cancer drugs.

During the consultation period, which ran between October 2016 and January 2017, we collaborated with other cancer charities to call on NICE and NHS England to reconsider the proposed changes, including through a petition.

The petition reached 29,005 signatories, showing the level of concern about the changes from patients. Unfortunately, these changes went ahead and came into effect on 1 April 2017.

We will monitor their impact over the course of 2017–18, and will continue working with other charities to raise any concerns with NICE, NHS England and the government.

Breast Cancer Voices

In making our representations to the government on the changes to the Cancer Drugs Fund, one of the sources of patient experience data was Breast Cancer Voices, our volunteer user group. During 2016–17, membership of this active group increased from 803 to 1,752, a 118% rise.



rise in Breast
Cancer Voices
membership

Policy networks in England, Scotland and Wales

Aside from our specific campaigning, we routinely play a part in healthcare policy and decision-making meetings and consultations in England, Scotland and Wales, making sure the needs and voices of people with breast cancer are heard at the highest level.

Our Clinical Director represents Breast Cancer Care on the National Cancer Research Institute Breast Clinical Studies Working Group on Symptom Management; the National Audit of

Breast Cancer in Older Patients; the Medicines and Healthcare Products Regulatory Agency; the Plastic, Reconstructive and Aesthetic Surgery Expert Advisory Group; and the Cancer Nursing Partnership.

Our clinicians and policy leads are also involved in breast cancer drug appraisals for NICE (England and Wales) and the Scottish Medicines Consortium.

We are now represented on the Executive Group of Patients Involved in NICE. Additionally we continue to be involved with NHS England's Cancer Patient Experience Advisory Group and the Common Cancers Charity Coalition, which feeds into the Cancer Strategy's National Cancer Advisory Group for the England Cancer Strategy.

In Wales we have representation on the Cancer Implementation Group and Cross-Party Group on Cancer.

Influencing hospital practice

We are working with a number of individual hospitals – in collaboration with research charity Breast Cancer Now – to help them improve their secondary breast cancer services.

We help hospitals to find out from their patients what improvements are needed locally. The hospital then publicly launches a Secondary Breast Cancer Pledge, which commits them to working towards these improvements, with our support.

We've worked with 26 hospitals so far, and during 2017–18 we're aiming to involve another five or six.

We'll also be reviewing delivery of the Pledge project to see if we can find effective ways of increasing its impact to further embed a culture of continuous service improvement.

Hospital staff tell us that the real strength of the initiative is that it involves patients throughout. Macmillan Nurse Clinician Claire Ryan said:

‘The Secondary Breast Cancer Pledge has offered a powerful voice to our patients and provided a platform of aspirations to... make a positive difference to how patients live with the uncertainty... of the disease.’

In 2016–17 the strength of the patient voice helped University Hospitals of Leicester to apply for and win charitable funding for another nurse so that the Breast Care Nursing team there can support patients with secondary breast cancer.

Our Nursing Network

Demand for this thriving healthcare professional network continues to grow, with 130 more breast care health professionals joining in 2016–17.

The network offers expert breast cancer training through a series of focused events during the year, in 2016–17 on topics including lymphoedema, fertility, and bone and brain metastases (where the breast cancer has spread to other parts of the body).

It also helps breast care professionals to share best practice and support each other in improving care for people with breast cancer in their local areas.

In addition to the main Nursing Network group, there are two highly engaged specialist groups looking at developments in the care and treatment of younger women and people with secondary breast cancer.

Other member benefits include **Nursing Network News** three times a year, featuring: news from the world of breast care; resource listings; professional development opportunities and examples of innovative practice from nurses working in the field; and email update bulletins between issues.

Thanks are due to Genomic Health, a company providing diagnostic tests to help in the treatment of cancers, whose sponsorship enables us to carry out our unique programme of healthcare professional training.

Reaching out to GPs

People who have been through breast cancer often go to their GP for help dealing with the longer-term effects of diagnosis and treatment. These can include fatigue, lymphoedema causing swelling of the arms and chest, menopausal symptoms, body image problems and low mood or depression.

So this year, with the help of the £1million government grant, we acted to make sure more GPs know about Breast Cancer Care and the free information and support we can offer to their patients to supplement their care and treatment.

We delivered one of our **Moving Forward resource packs for people living with and beyond a diagnosis of primary breast cancer** to almost every GP practice in the UK with information about how the GP practices can get more free copies for their patients and refer people to our Moving Forward services.

In 2017–18, we hope to introduce a volunteer role to liaise with GP surgeries.

Initial pilot stage evaluation of this initiative was positive. For example, one GP said:

‘I liked it a lot... user friendly and addressed things that patients don’t talk about. Very real.’

During the first half of 2017, we have been completing in-depth interviews with GPs to find out more about how we can support them in their work with breast cancer patients. Results are expected during 2017.

In Wales, we’re meeting with health board GP oncology leads to encourage referrals to our free services for breast cancer patients in the community.

Raising more money

The economic climate remained uncertain during 2016–17. The vote to leave the European Union affected people's financial confidence, although the stock market's reaction benefited our investments (see page 23).

Against this background, our finances remained stable during 2016–17 ('Our finances' on page 23 and 'Financial statements and notes' on page 28). As we are aiming for increased year-on-year income to support our planned growth up to 2020, this outcome was not what we had hoped.

We therefore launched a comprehensive review of our fundraising portfolio to ensure we are concentrating efforts in the right places and maximising possible funds. We plan for the results of this review to be put into action and start bringing financial benefits in 2017–18.

Thanks to the thousands

3,349 Pink Ribbonwalkers

1,930 Strawberry Teas

1,602 Big Pink events

2,719 people doing sporting and challenge events

We'll be continuing with the same systematic analysis of our fundraising portfolio every year in future. In this way we will be able to make sure we are making the most of our staff resources, focusing on the areas where people can support us best financially, and working collaboratively with engaged partners.

We take immense care about how we fundraise, and want to do even more to show that, when people support Breast Cancer Care, we put their money immediately to good use, helping people affected by breast cancer.

Corporate partners

We are incredibly grateful to all our corporate partners, who continue to provide such invaluable support.

Special thanks go to Asda as we celebrated 20 years of partnership and a fantastic £25million raised for Breast Cancer Care through the Tickled Pink campaign. Also to QVC which, through 18 years of partnership, has now raised over £6million.

With the ongoing backing of all our corporate partners, we have been able to help thousands of people affected by breast cancer with our support services, while reaching a record number of people through their businesses.

You can see more of these wonderful partners and other supporters on page 44.

People power

Our financial stability this year has also been helped by people making a regular donation in a range of ways. For example, through initiatives such as our raffle and lottery, via a simple direct debit and by regularly buying merchandise through our online shop.

We relaunched the online shop in December 2016, making it easier for people to access on devices such as smartphones and tablets. It is now much easier to submit and pay for orders, resulting in an uplift in customer numbers.

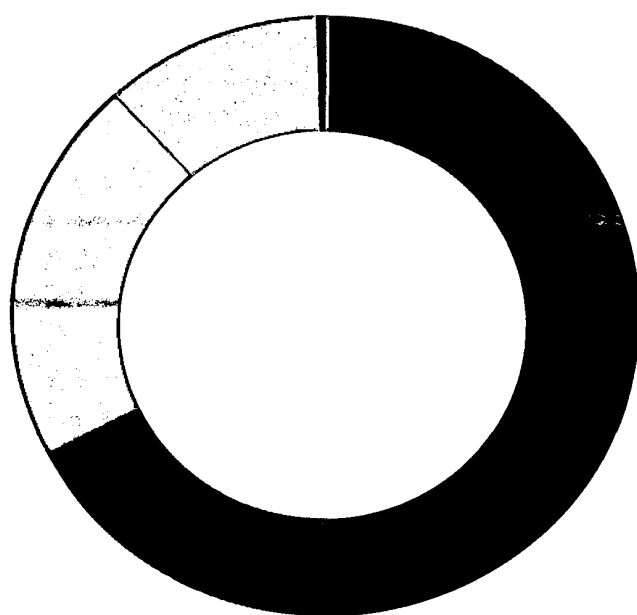
We also did the groundwork for an exciting trial venture into the retail market in 2017–18 with a series of charity shops in the Bedfordshire area, the first of which opened in May 2017 in Leighton Buzzard.

Our Cornerstone Collective – a group of people committed to working with us to raise substantial funds for specific projects – started to grow in 2016–17 following its launch in 2015. There are now 14 members, who are working with us to plan future fundraising events and engage more members.

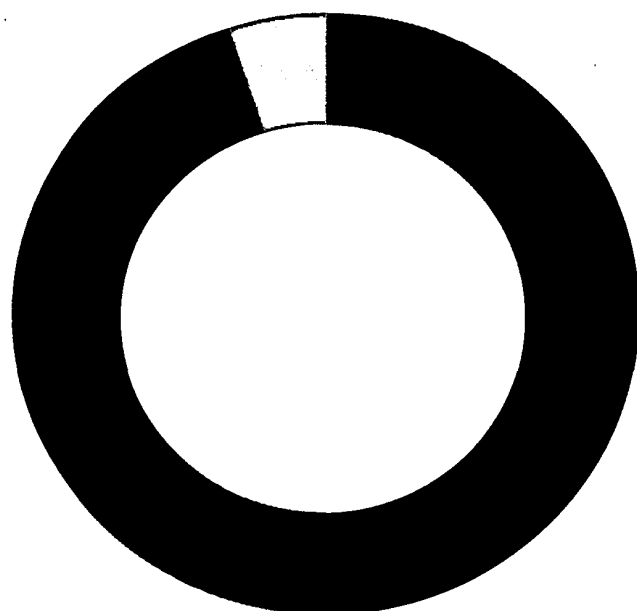
Meanwhile, people turned out in their thousands to raise funds by taking part in Pink Ribbonwalks, holding Strawberry Teas, dressing up for Big Pink events, running, cycling, modelling and so much more.

We also moved our London office to a new, more financially sustainable space and embraced much more efficient working practices, which together will deliver a significant long-term saving. The contact details for the new office are on page 48.

Summary of our income and expenditure 2016–17



Income	£m
■ Community fundraising, trust fundraising, individual donations and legacies	7.59
■ Events income	3.87
▨ Corporate partnerships and sponsorship income	3.49
■ Project grants	1.31
▨ Conference, merchandising and other income	0.52
■ Investment income	0.11
Total	16.89



Expenditure	£m
■ Services to people affected by breast cancer	8.92
■ Fundraising	6.72
▨ Policy and research	0.79
Total	16.43

For more details see pages 23 and 28–42.

Our structure, governance and management

Breast Cancer Care is a company limited by guarantee and registered in England. It is a charity, registered in England and Wales in 1993 and in Scotland in 2007 and it was incorporated in 1989. The charity is governed by the company's Memorandum and Articles of Association. A copy is available on request from the Company Secretary.

The Board

Members of the Board have two roles: first, as directors of the company in company law and, second, as trustees of the charity.

Recruiting and training trustees

Applications for Board membership are sought openly through external advertisement. The Governance and Nominations Committee, with the involvement of the Chief Executive, selects, interviews and proposes suitable candidates for the role of trustee to the whole Board for approval.

Appointments are made according to relevant skills, competencies and experience. Breast Cancer Care endeavours to ensure that at least one third of its trustees have been personally affected by breast cancer. At 31 March 2017, five of 10 trustees have had breast cancer, and all of them have been personally affected by breast cancer in some way. In accordance with best practice, term limits are in place for all trustees.

We recognise the responsibilities placed by law on a charity trustee and therefore offer a programme of training for all trustees including a full and formal induction programme for new trustees.

All trustees have a review meeting about once every 18 months with either the Chair or Vice-Chair. The Chair carries out a review with the Vice-Chair and vice versa.

Statement of trustees' responsibilities

The trustees are responsible for preparing this 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 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 Statement of Recommended Practice (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 a going concern basis unless it is inappropriate to presume that the charitable company will continue in business

The trustees are responsible for keeping adequate accounting records that are sufficient to show and explain the charitable company's transactions, and also to disclose (with reasonable accuracy and 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. Each trustee confirms the following to our independent auditors.

1. So far as the trustee is aware, there is no relevant audit information of which Breast Cancer Care's auditors are unaware.
2. The trustee has taken all the steps that she or he ought to have taken as a trustee in order to make herself/himself aware of any relevant audit information and to establish that Breast Cancer Care's auditors are aware of that information.

This confirmation is given and should be interpreted in accordance with the provisions of section 234ZA of the Companies Act 2006.

Public benefit

The trustees confirm that they have complied with their duty under the Charities Act 2011 to have due regard to the public benefit guidance published by the Charity Commission in determining the activities undertaken by the charity.

We are confident that our whole approach to equality of access (as detailed in our vision statement) meets the highest aspirations of the public benefit policy and that our reported achievements will ensure we maintain that vision.

Organisational structure and decision-making

The Board of Trustees has legal responsibility for the effective use of resources in meeting the charity's objects and for providing effective leadership and direction.

They meet quarterly and annually have at least a half day of team-building, in-depth discussion and debate. They also have access to a range of training opportunities.

Sub-committees

The Board of Trustees delegates some of its authority to the following sub-committees: Finance and General Purposes, Audit and Assurance, Investment, Human Resources and Remuneration, and Governance and Nominations.

Each sub-committee has specific terms of reference and functions delegated by the Board and a Chair appointed by the Board.

In the case of the Audit and Assurance Committee, the current Chair, who is not a member of the Board of Trustees, was appointed after an open recruitment and interview process. The Chair is due to change in 2017,

A complete list of the sub-committees of the Board and their members plus Breast Cancer Care's advisory committees is available at the end of this document.

Management responsibility for day-to-day management matters and the implementation of policy is delegated to the Chief Executive, supported by the Senior Management team.

Employees

Breast Cancer Care's staff play a key role in the success of the organisation. Their commitment and specialist skills are central to the delivery of our high-quality, wide-ranging services for people affected by breast cancer.

We're committed to supporting, developing and effectively managing our staff. Our Human Resources team provides a wide range of support, guidance and development opportunities for staff so that we continue our culture of learning and retain talent.

Staff remuneration

The majority of employees are paid in line with existing public sector pay scales, including any annual award for cost of living increases.

Staff salaries are either pegged to the National Joint Council (NJC) pay scale, typically used within local authorities, or the Agenda for Change (AfC) scale, which is used within the NHS.

The Chief Executive and Senior Management team's pay is set and reviewed annually by the Human Resources and Remuneration Committee, a sub-committee of the Board of Trustees with delegated powers, in accordance with an established procedure that aims to be transparent, sustainable, proportionate and performance-based.

Like other employees, Senior Management team members are entitled to a cost of living increase (the NJC award) though they are not eligible for incremental pay rises. However,

should specific criteria be met, they may receive a nonconsolidated payment, capped at 5% of gross pay. This depends both on them individually achieving a range of objectives and the overall financial strength of the charity.

Further details can be found in note 10 to the financial statements.

Our finances

As noted elsewhere in this report, 2016–17 was another challenging year for fundraising organisations that rely on funds raised in-year to resource services, with Breast Cancer Care being no exception.

We were affected by the loss of BHS, one of our long-standing corporate partners, from the high street early in the year, and unfortunately, for a variety of reasons some of our fundraising events failed to reach the levels of income projected.

This is reflected in our overall income for the year, which at £16.9million is slightly lower than we achieved in 2015–16.

What is not reflected in the numbers is the in-depth review of our fundraising products, which will stand us in good stead to strengthen our portfolio in the future.

The year also included some significant income successes.

In March 2016 we were awarded £1million from the UK government to expand our Moving Forward courses and fund an accompanying economic evaluation of the service. As detailed elsewhere in this report, this has greatly helped us to increase the reach of our face-to-face services. Our challenge now is to make them sustainable in future years when such a generous government grant may not be available.

Our strategic goal to double our reach by 2020 continues to be a challenge when our income does not grow at the same pace. We are having to find ways to do more with less, which is reflected in our charitable expenditure remaining at a similar level to 2015–16 at £9.7million, despite the growth in the number of hours of support we have provided.

As a result of carefully managing our expenditure to balance against our evolving expectations of income achievable in the year, and significant gains generated by our portfolio of investments, we achieved a modest surplus of £777,000 in 2016–17.

Our overall result for the year was also aided by a London office move that cost significantly less than expected due to skilled project management

and a generous donation of furniture from our new landlord Workspace. This has allowed the remaining reserve held for this purpose to be released back into our unrestricted reserves.

Our fundraising approach

Recent scrutiny of fundraising activities by the media and the Information Commissioner's Office have dented public trust in the charity sector generally. Here at Breast Cancer Care we are proud to say that we put our supporters at the heart of everything that we do, especially as they are often people affected by breast cancer and therefore also our beneficiaries. This approach is clearly valued by our supporters and our trust levels remain strong.

In accordance with this approach, we are registered with the Fundraising Regulator and adhere to the code of fundraising when carrying out our activities.

For some activities, such as door-to-door fundraising it is cost-effective for us to work with professional fundraisers, and when we do we ensure that they are thoroughly trained in Breast Cancer Care's objectives and that they carry out their activities with the same care that we would ourselves.

We do this by regularly monitoring their activities, including shadowing of fundraisers, review of phone calls made and 'mystery shopping' activities. We also mystery shop our own Supporter Care team to ensure our high standards are maintained in this key public-facing function.

We operate a clear and stringent complaints and compliments handling procedure that is reported regularly to the Senior Management team and the Board of Trustees. We are mindful of protecting the public, including vulnerable people, from unreasonably intrusive or persistent fundraising approaches, and make use of agreed policies with the external fundraisers that we employ to help us with this.

Of the estimated 70 million people that we engaged with in relation to our fundraising activities in 2016, we received 111 complaints. Every one of these was taken seriously and followed up with the complainant, addressing the concerns of our supporters. We also aim to keep improving our practice, learning from supporter feedback.

Risk management

We operate a process of risk identification and management that is embedded year-round into the governance of the organisation. Central to this is our risk register, which is regularly reviewed and updated by the Senior Management team and the Board of Trustees.

Our main risks are about our ability to raise income to fund our services and our ability to increase the number and diversity of people who can access our services.

Almost all the money we spend on our services is raised in the same year, meaning that if we plan an ambitious range of activities, these are inevitably at risk from volatility within our income streams. Part of our fundraising strategy is to diversify our income to help to mitigate against this.

Our income is also at risk from changes in the economic environment, public trust in charities and changing fundraising regulation, all of which we monitor closely and respond to through our in-year plans.

As the number of people affected by breast cancer in the UK continues to rise, there is an ever present risk that the reach of our services cannot keep pace in its growth. To meet this challenge, our **Services and influencing strategy 2016–20** has rationalised our services and moved us towards a more scalable model of delivery that will make it easier to scale up our activities as funds allow.

Investment policy

We hold a portion of our reserves as investments in order to protect against their erosion through inflation in the medium to long term.

Our objective is to balance income and capital return to enable us to provide services for our beneficiaries in the present and in the future, against an acceptable level of risk. We are currently holding a position that is relatively low in risk but still allows us to achieve our investment targets, reflecting the ongoing economic uncertainty. Investments are sufficiently liquid that they can be redeemed in a short period of time if required.

We have an ethical policy that means we will not invest directly in tobacco-related companies or companies that derive significant revenue from

tobacco-related products. We require that our investment managers exercise care to ensure that tobacco-related companies do not form a material component of any investments made 'indirectly' through collective funds.

Fixed asset investments totalled £3.9million at 31 March 2017, with all of this held in securities managed on our behalf by investment managers Charles Stanley.

Performance in 2016–17 was positive, with capital value rising by £312,000 buoyed by the performance of the UK stock market in the wake of the EU referendum result in June 2016.

We regularly review the performance of our investment managers to ensure they are in line with agreed benchmarks and that our approach is in line with our broader strategy and plans.

Reserves policy

We retain a level of reserves in line with good financial management practice. They are held for a number of practical reasons, including:

- providing working capital to meet upfront expenditure during the year before income is received
- to give time to restructure the charity should there be a sustained fall in the level of income generated each year, including meeting any expenditure commitments
- to provide resource for investment, for example, updating technology, service development or growing fundraising

We review and update our reserves policy at least annually to reflect the risk inherent in our income and activities, and our investment requirements. Currently, our policy determines that our reserves should be between £5.3million and £9.2million, which is equivalent to four to seven months of planned expenditure.

As at 31 March 2017, our unrestricted reserves stood at £7.4million, which is within our target range.

Designated reserves

Designated reserves are funds that have been earmarked by trustees for a specific reason or purpose. For this reason these funds are excluded from our reserves policy figure. We hold

a designated reserve equal to the net book value of our fixed assets as these assets are not readily convertible into cash, and therefore cannot protect us from risk in the same way that unrestricted reserves can.

With the London office relocation completed during 2016–17 we were able to release the funds we had previously designated for this. As a result, designated funds have reduced to £923,000 compared to £1.38million in 2015–16.

Further detail about designated funds can be found in note 21 to the financial statements.

Restricted funds

Restricted funds arise through conditions stipulated by donors/funders on how income may be applied, or because an appeal raises funds for a particular activity.

As at 31 March 2017, reserves that were restricted in this way totalled £294,000. Further detail about restricted funds can be found in note 20 to the financial statements.

Breast Cancer Care Trading Limited

Breast Cancer Care Trading Limited is the wholly owned subsidiary of Breast Cancer Care. In 2016–17 it achieved income of £1.5million and net profit before Gift Aid payments of £753,000.

All profits generated by Breast Cancer Care Trading Limited are donated to Breast Cancer Care.

The annual report, prepared under the Charities Act 2011 and the Companies Act 2006, was approved by the trustees of Breast Cancer Care on 20 September 2017, including in their capacity as company directors approving the strategic report contained therein and is signed as authorised in its behalf by:

[signature to add]



Emma Burns

Chair, Board of Trustees

Independent auditor's report to the members and trustees of Breast Cancer Care

We have audited the financial statements of Breast Cancer Care for the year ended 31 March 2017 set out on pages 28 to 42.

The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice), including Financial Reporting Standard 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 non-financial information in the Strategic report and the Trustees' Annual Report 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 March 2017 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 United Kingdom Generally Accepted Accounting Practice
- 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 based on the work undertaken in the course of our audit:

- 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
- the trustees' annual report and strategic report have been prepared in accordance with applicable legal requirements.

Matters on which we are required to report by exception

In light of the knowledge and understanding of the group and parent company and its environment obtained in the course of the audit, we have not identified material misstatements in the Strategic report or the Trustees' Annual Report.

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
- 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

[signature to add]



Nicola May

Senior Statutory Auditor

For and on behalf of

Crowe Clark Whitehill LLP

Statutory Auditor

London

Date: 28th September 2017

Crowe Clark Whitehill LLP is eligible to act as an auditor in terms of section 1212 of the Companies Act 2006.

Financial statements and notes

Breast Cancer Care

Consolidated Statement of Financial Activities (incorporating an Income and Expenditure Account) for the year ended 31 March 2017

	Note	Unrestricted Funds £'000	Restricted Funds £'000	2016-17 £'000	2015-16 £'000
Income and endowments from:					
Donations and legacies:					
Voluntary income	2	10,611	461	11,072	11,763
Project grants	3	-	1,314	1,314	310
Charitable activities					
Other trading activities	4	4,029	55	4,084	4,450
Investments	5	115	-	115	126
Other: Rental, conferences & other income		314	-	314	387
Total		15,069	1,830	16,899	17,036
Expenditure on:					
Raising funds:					
Costs of generating voluntary income		3,952	-	3,952	4,122
Costs of activities for generating funds		2,767	-	2,767	2,626
		6,719	-	6,719	6,748
Charitable activities:					
Support & Inform		7,281	1,640	8,921	9,565
Influence		691	103	794	772
		7,972	1,743	9,715	10,337
Total	6	14,691	1,743	16,434	17,085
Net gains/(losses) on investments	14	312	-	312	(257)
Net income/(expenditure)		690	87	777	(306)
Transfers between funds		-	-	-	-
Net movement in funds		690	87	777	(306)
Reconciliation of Funds					
Total funds brought forward at 1 April	20 & 21	7,637	207	7,844	8,150
Total funds carried forward at 31 March		8,327	294	8,621	7,844

There were no recognised gains or losses other than those shown in the statement above.
No corporation tax was payable by the charity in the year ended 31st March 2017 (2016: nil).
All the above results derive from continuing activities.

The surplus for the year of Breast Cancer Care for Companies Act 2006 purposes was £777,000
(2016: deficit of £306,000)

The notes on pages 30 to 42 form part of these accounts.

Breast Cancer Care

Consolidated and Charity Balance Sheets as at 31 March 2017

	Note	Group 2016-17 £'000	Group 2015-16 £'000	Charity 2016-17 £'000	Charity 2015-16 £'000
Fixed Assets					
Intangible Assets	12	110	138	110	138
Tangible Assets	13	799	351	799	351
Investments	14	3,941	4,639	3,941	4,639
		4,850	5,128	4,850	5,128
Current Assets					
Stock		88	121	12	16
Debtors	15	2,319	3,066	3,095	3,368
Investments	16	510	518	510	518
Cash at bank and in hand		2,747	1,664	1,967	1,406
		5,664	5,369	5,584	5,308
Creditors: amounts falling due within one year	17	(1,444)	(1,546)	(1,364)	(1,485)
Net Current Assets		4,220	3,823	4,220	3,823
Creditors: amounts falling due after more than one year	18	(198)	-	(198)	-
Provisions for liabilities	19	(251)	(1,107)	(251)	(1,107)
Total Net Assets		8,621	7,844	8,621	7,844
The Funds of the Charity:					
Restricted income funds	20	294	207	294	207
Unrestricted funds:					
Designated funds	21	923	1,375	923	1,375
General funds	21	7,404	6,262	7,404	6,262
Total Charity Funds	22	8,621	7,844	8,621	7,844

The profit (net income) for the year of the parent charity was £777,000 (2016: deficit of £306,000)

Approved by the Board of Trustees
on 20 September 2017 and signed
on its behalf by:



Emma Burns

Chair



Jill Thompson

Treasurer

The notes on pages 31 to 42 form part of these accounts.

Breast Cancer Care

Consolidated Cashflow Statement for the year ended 31 March 2017

	2016-17	2015-16	
	£'000	£'000	
Net cash provided by operating activities (a)	<u>711</u>	<u>(264)</u>	
Cash flows from investing activities:			
Cash withdrawals from investments	1,011	-	
Purchase of property, plant and equipment	(647)	(219)	
Proceeds from sale of investments	1,398	614	
Purchase of investments	<u>(1,398)</u>	<u>(614)</u>	
Net cash provided by investing activities	364	(219)	
Increase in cash in the year	<u>1,075</u>	<u>(483)</u>	
Change in cash and cash equivalents in the reporting period	1,075	(483)	
Cash and cash equivalents at the beginning of the reporting period	2,182	2,665	
Cash and cash equivalents at the end of the reporting period	<u>3,257</u>	<u>2,182</u>	
	2016-17	2015-16	
	£'000	£'000	
(a) Reconciliation of net income/(expenditure) to net cash flow from operating activities			
Net incoming resources for the reporting period (from the Statement of Financial Activities)	465	(49)	
Adjustments for:			
Depreciation and amortisation charges	227	174	
(Increase) in stocks	33	(49)	
(Increase) in debtors	747	(716)	
(Decrease)/increase in creditors	<u>(761)</u>	<u>376</u>	
Net cash provided by operating activities	<u>711</u>	<u>(264)</u>	
(b) Analysis of cash and cash equivalents	31 March	Cashflow	1 April
	2017		2016
	£'000	£'000	£'000
Cash at bank and in hand	2,747	1,083	1,664
Notice deposits (less than 3 months)	<u>510</u>	<u>(8)</u>	<u>518</u>
Total cash and cash equivalents	<u>3,257</u>	<u>1,075</u>	<u>2,182</u>

Breast Cancer Care

Notes to the Accounts for the year ending 31 March 2017

Company information

The charity is a company limited by guarantee (registered number 02447182), which is incorporated and domiciled in the UK. The address of the registered office is Kennington Business Park, Chester House, 1–3 Brixton Road, London SW9 6DE.

1. Accounting policies

Basis of accounting

The financial statements are prepared under the historical cost convention and in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2015) – (Charities SORP (FRS 102)), the Financial Reporting Standard applicable in the UK and republic of Ireland (FRS 102) and the Companies Act 2006.

Having assessed the charity's financial position, its plans for the foreseeable future and the risks to which it is exposed, the trustees are satisfied that there are no material uncertainties about the charity's ability to continue. It remains appropriate therefore to prepare the financial statements on the going concern basis.

Breast Cancer Care meets the definition of a public benefit entity under FRS 102.

The individual entity accounts of Breast Cancer Care have taken advantage of the disclosure exemption under FRS 102 to separately disclose categories of financial instruments and items of income, expenses, gains or losses relating to instruments as these have been presented on a group basis in the notes to the accounts.

Group accounts

The group accounts consolidate the funds of the charity and its wholly owned trading subsidiary company on a line by line basis. A separate Statement of Financial Activities and Income and Expenditure Account for the charity has not been presented because advantage has been taken of the exemption afforded by section 408 of the Companies Act 2006.

Critical accounting judgements and key sources of estimation uncertainty

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

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.

The key sources of estimation uncertainty that have a significant effect on the amounts recognised in the financial statements are described in the accounting policies and are summarised below:

Dilapidation provision – the charity has provided for its possible liability in relation to its leasehold property, which has been estimated as disclosed in note 19.

Incoming resources

All incoming resources are included when the charity is legally entitled to the income, is reasonably certain of receipt and the amount can be measured with reasonable accuracy.

For legacies, recognition is the earlier of the estate accounts being approved or cash being received. Income from will or reversionary trusts is not recognised until the life interest has passed away.

Donated services are included at the value to the charity where this can be quantified, which is the amount the charity would have been willing to pay to obtain services or facilities of equivalent economic benefit on the open market. In accordance with the Charities SORP (FRS 102) no amounts are included in the financial statements for services donated by volunteers. Refer to the Trustee's Annual Report for more information about their contribution. Gifts in kind are included at the value to the charity or, where resold, at the resale price.

Income relating to events taking place after the year end is deferred and included in creditors. The relevant costs associated with these events are also deferred and included in prepayments.

Rental income is recognised on a straight line basis over the term of the lease.

Resources expended

All expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all costs related to the category. Where costs cannot be attributed directly to the individual areas they have been apportioned to activities on a basis consistent with use of the resources. All overheads have been apportioned either on the basis of the number of staff engaged in each activity or the floor space occupied by the staff as appropriate.

Fundraising costs are those incurred in seeking voluntary contributions and do not include the costs of disseminating information in support of the charitable activities or the costs of delivering charitable services.

Support costs are those costs incurred directly in support of expenditure on the objects of the charity. Support costs together with governance costs are apportioned between the key activities undertaken in the year (see note 6).

Taxation

Breast Cancer Care, as a registered charity, is exempt from taxation of income falling within Section 505 of the Taxes Act 1988 or Section 256 of the Taxation of Chargeable Gains Act 1992 to the extent that this is applied to its charitable objectives. No tax charge has arisen in its trading subsidiary, Breast Cancer Care Trading Ltd, because of its policy of gifting its taxable profits to the parent charity each year. Breast Cancer Care has no similar exemption from VAT. Irrecoverable VAT is included in the cost of those items to which it relates. All other income and expenses are net of VAT.

Tangible fixed assets

Tangible fixed assets costing more than £1,000 are capitalised. Depreciation is charged on a straight line basis to write off the cost of the assets over their useful life as follows:

- leasehold improvements – term of the lease
- furniture, fixtures and fittings – 20 to 40% per annum
- computers and equipment – 20 to 25% per annum

- CRM database – 14% per annum
- Forum platform – term of the contract

Intangible fixed assets

Intangible fixed assets costing more than £1,000 are capitalised. Depreciation is charged on a straight line basis to write off the cost of the assets over their useful life as follows:

- website development costs – 25 to 33% per annum.

Fixed asset investment

Investments are valued in the balance sheet at their market value at the balance sheet date. The Statement of Financial Activities includes the net gains and losses arising on revaluations and disposals throughout the year. Income from investments is included in the Statement of Financial Activities on a receivable basis.

Stock

Stock comprises Christmas cards, pin badges and other merchandise for sale, valued at the lower of cost and net realisable value.

Debtors

Trade and other debtors are recognised at the settlement amount due. Prepayments are valued at the amount prepaid.

Current investments

Current investments include cash held on deposit accounts with a maturity date of less than one year.

Cash at bank and in hand

Cash at bank and cash in hand includes cash held for immediate use by the charity.

Creditors and provisions

Creditors and provisions are recognised where the charity has a present obligation resulting from a past event that will probably result in the transfer of funds to a third party and the amount due to settle the obligation can be measured or estimated reliably. Creditors and provisions are normally recognised at their settlement amount.

Financial instruments

The charity only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value.

Publications expenses

Expenditure on publications is written off in the period such cost is incurred, as these have no resale value.

Leases

Rentals under operating leases are charged on a straight line basis over the term of the lease. Further information on charges in the year and future commitments is given in note 8.

Fund Accounting

Restricted, designated and general funds are separately disclosed, as set out in notes 20 and 21. The different funds held are defined as follows:

- restricted funds are subject to specific restrictions imposed by the donor or by the nature of the appeal

- designated funds are set aside at the discretion of the trustees for specific purposes. Details of the specific designated funds are given in note 20
- other charitable funds are available to spend at the discretion of the trustees in furtherance of Breast Cancer Care's charitable objectives

Pension costs

Permanent employees are entitled to join the group Personal Pension Scheme provided by Standard Life, which was established on 14 April 1998. This is a contributory defined contribution scheme, administered by an independent scheme administrator. Scheme funds are independent of the charity and invested with Standard Life. Payments to the pension scheme are a fixed percentage of salary for each employee, and the amount charged in the income and expenditure account is the cost of the fixed percentage along with the costs of the independent scheme administrator. The cost of providing this pension scheme is charged to the Statement of Financial Activities when it is incurred.

Breast Cancer Care

Notes to the Accounts for the year ended 31 March 2017

2. Voluntary income

	Unrestricted Funds £'000	Restricted Funds £'000	2016-17 Total £'000	2015-16 Total £'000
Individual and other donations	6,209	352	6,561	5,935
Corporate donations	2,957	91	3,048	4,071
Corporate sponsorships through trading subsidiary	438	-	438	456
legacies	1,007	18	1,025	1,301
	<u>10,611</u>	<u>461</u>	<u>11,072</u>	<u>11,763</u>

Voluntary income was £11,072,000 (2016: £11,763,000), of which £10,611,000 was unrestricted (2016: £10,708,000) and £461,000 was restricted (2016: £1,055,000).

Individual and other donations includes gifts in kind of £592,689 (2016: £98,804) and corporate donations includes gifts in kind of £70,224 (2016: £84,844).

At 31 March 2017, in addition to legacy income that has been included in the accounts, the charity expects to benefit from legacies to an approximate value of £129,000 (2016: £465,000) from estates for which the administration has yet to be finalised.

It is not possible to account for the value our volunteers bring to the charity, but they donate their time to a range of activities across the organisation, including fundraising efforts, campaigning and the delivery of services, as described in the strategic report.

3. Project grants

	2016-17 Total £'000	2015-16 Total £'000
The Tampon Tax fund	1,000	
Moondance Foundation	141	
The Saracens Sport Foundation	50	
The Jane Hodge Foundation	20	10
The Robertson Trust	15	15
The Ellen Kane Charitable Trust	10	
The Hugh Fraser Foundation	7	14
The Northwood Charitable Trust	6	
The Zochonis Charitable Trust	6	6
The Eveson Charitable Trust	5	6
The William Grant Gordon Foundation		50
The Freemasons' Grand Charity		34
Department of Health		28
Welsh Government Health Challenge Wales Voluntary Sector Grant		8
The City of London Corporation's charity, City Bridge Trust		21
The Childwick Trust		20
The Scottish Government – Health Department		15
Tom and Sheila Springer Charity		10
The Lake House Charitable Foundation		10
The February Foundation		5
Various grant giving trusts	54	58
	<u>1,314</u>	<u>310</u>

4. Activities for generating funds

	Unrestricted Funds £'000	Restricted Funds £'000	2016-17 Total £'000	2015-16 Total £'000
Events income	3,814	55	3,869	4,141
Merchandising income	215	-	215	309
	<u>4,029</u>	<u>55</u>	<u>4,084</u>	<u>4,450</u>

Income from activities for generating funds was £4,084,000 (2016: £4,450,000), of which £4,029,000 (2016: £4,422,000) was unrestricted, and £55,000 (2016: £28,000) was restricted.

5. Investment income

	Unrestricted Funds £'000	Restricted Funds £'000	2016-17 Total £'000	2015-16 Total £'000
Interest received	6	-	6	9
Investment income	109	-	109	117
	<u>115</u>	<u>-</u>	<u>115</u>	<u>126</u>

Breast Cancer Care

Notes to the Accounts for the year ended 31 March 2017

6. Analysis of expenditure

	Generating voluntary income £'000	Activities for generating funds £'000	Support £'000	Influence £'000	2016-17 Total £'000	2015-16 Total £'000
Direct costs						
Staff costs	1,417	824	3,996	373	6,610	6,924
Other direct costs	1,784	1,607	2,918	324	6,633	6,655
	<u>3,201</u>	<u>2,431</u>	<u>6,914</u>	<u>697</u>	<u>13,243</u>	<u>13,579</u>
Support costs						
Information technology	112	35	292	17	456	412
Finance & supporter services	238	175	615	16	1,044	1,058
Public awareness	-	-	-	-	-	-
Facilities	286	90	743	43	1,162	1,417
Human resources	114	36	296	17	463	522
Governance	23	7	61	4	95	93
VAT recovered	(22)	(7)	-	-	(29)	4
	<u>751</u>	<u>336</u>	<u>2,007</u>	<u>97</u>	<u>3,191</u>	<u>3,506</u>
Total costs	<u>3,952</u>	<u>2,767</u>	<u>8,921</u>	<u>794</u>	<u>16,434</u>	<u>17,085</u>

Support costs above include the following governance costs:

CEO office salary costs	67	66
Trustee & trustee meeting expenses	8	8
Audit fees	21	20
	<u>96</u>	<u>94</u>

Expenditure totalled £16,434,000 (2016: £17,085,000), of which £14,691,000 (2016: £15,801,000) was unrestricted, and £1,743,000 (2016: £1,284,000) was restricted. Restricted funds were used for generating voluntary income (£0; 2016: £0); to support and inform (£1,640,000; 2016: £1,237,000); and influence (£103,000; 2016: £47,000).

Support costs include £1,351,000 of staff costs (2016: £1,256,000).

Facilities include the cost of premises and associated maintenance; these premises are used for the delivery of client services.

7. Total Resources Expended

Resources expended include:	2016-17 £'000	2015-16 £'000
Auditors' remuneration:		
- Audit fees	21	20
- Tax advisory services	1	2
Depreciation and amortisation	227	172

8. Lease Commitments – lessee

Operating lease rentals of £846,993 (2016: £913,479) were paid in respect of equipment, and property and facilities held under leases during the year. In the future, the charity is committed to paying the following amounts in respect of operating leases, expiring:

	Equipment		Property and Facilities	
	2016-17 £'000	2015-16 £'000	2016-17 £'000	2015-16 £'000
Within one year	6	11	731	903
Between one and five years	-	-	2,403	36
More than five years	-	-	-	-

9. Lease Commitments – lessor

Income from operating lease rentals of £0 (2016: £377,300) was received in respect of property and facilities let under leases during the year. In the future, the lessees are committed to paying the following amounts to the charity in respect of operating leases, expiring:

	Property and Facilities	
	2016-17 £'000	2015-16 £'000
Within one year	-	342
Between one and five years	-	-
More than five years	-	-

Breast Cancer Care

Notes to the Accounts for the year ended 31 March 2017

10. Trustees' remuneration and expenses

	2016-17 £'000	2015-16 £'000
Trustees' expenses reimbursed	6	5

None of the trustees have been paid any remuneration or received any other benefits from any employment with the charity (2016: None). Out-of-pocket expenses for travel and subsistence were reimbursed to 8 trustees (2016: 7).

11. Staff costs

	2016-17 £'000	2015-16 £'000
Employee costs during the year were:		
Salaries	6,722	6,958
Social Security costs	696	708
Pension contributions	529	508
Redundancy payments	14	6
	7,961	8,180

Redundancy payments were as a result of organisational restructure. Payments are recognised at the point notice of redundancy is given to the employee.

The key management personnel of the charity and the group comprise the trustees, the Chief Executive Officer, and the directors. As indicated in note 10, none of the trustees were paid any remuneration or received any other benefits. The total employee benefits of the key management personnel of the charity were £509,894 (2016: £499,427). The Chief Executive received total pay of £120,341 (including a salary of £107,091 and Employers National insurance of £13,609)

The number of employees whose emoluments as defined for taxation purposes amounted to over £60,000 in the year was as follows:

	2016-17 No.	2015-16 No.
£110,001 – £120,000	0	1
£100,001 – £110,000	1	0
£90,001 – £100,000	2	1
£80,001 – £90,000	0	1
£70,001 – £80,000	1	1
	4	4

All employees earning more than £60,000 participated in the pension scheme. Contributions paid in respect of these individuals in the year totalled £54,380 (2016: £54,024).

The average weekly number of employees, calculated on a full time equivalent basis, analysed by function was:

	2016-17 No.	2016-17 FTE	2015-16 No.	2015-16 FTE
Charitable activities	147	125	155	135
Cost of generating funds	68	59	75	61
	215	184	230	196

12. Intangible Fixed Assets Group and Charity

	Website Development costs £'000	Total Intangible Assets £'000
Cost		
At 1 April 2016	205	205
Additions	20	20
Disposals	-	-
At 31 March 2017	225	225
Amortisation		
At 1 April 2016	67	67
Charge for the year	48	48
Disposals	-	-
At 31 March 2017	115	115
Net Book Value		
At 31 March 2017	110	110
At 31 March 2016	138	138

Breast Cancer Care

Notes to the Accounts for the year ended 31 March 2017

13. Tangible Fixed Assets Group and Charity

	Leasehold Improvements £'000	Furniture & Fittings £'000	Computers & Equipment £'000	Total Tangible Assets £'000
Cost				
At 1 April 2016	2,149	38	1,016	3,203
Additions	141	261	225	627
Disposals	(2,096)	(19)	(43)	(2,158)
At 31 March 2017	194	280	1,198	1,672
Depreciation				
At 1 April 2016	2,130	32	690	2,852
Charge for the year	21	20	138	179
Disposals	(2,096)	(19)	(43)	(2,158)
At 31 March 2017	55	33	785	873
Net Book Value				
At 31 March 2017	139	247	413	799
At 31 March 2016	19	6	326	351

14. Fixed asset investments Group and Charity

	2016-17 £'000	2015-16 £'000
Market value at 1 April	4,639	4,896
Transfers to cash reserves	-	-
Purchases	1,398	614
Disposal proceeds	(1,398)	(614)
Net realised (losses)/gains during the year	180	(114)
Net unrealised (losses)/gains on disposal	132	(143)
Market value of listed investments at 31 March	4,951	4,639
Transfers from current investments 31 March	(1,010)	-
Market value of fixed asset investments at 31 March	3,941	4,639
Unrealised net gains on revaluation at 31 March	(296)	(198)
Historical cost at 31 March	3,645	4,441

	2016-17		2015-16	
	Fixed asset Investment £'000	Current Investment £'000	Fixed asset Investment £'000	Current Investment £'000
Investments are represented by:				
Fixed interest securities	2,413	-	1,597	-
Property funds	-	-	-	-
Equity shares	1,373	-	1,820	-
Hedge funds	-	-	-	-
Cash deposit funds	153	510	1,220	518
Total Investments held in the UK	3,939	510	4,637	518

There were no investments representing over 10% by value of the portfolio.

Investment charges for the portfolio are built into the unit cost values above.

Investments held by the charity also included an additional £2 (2016: £2) investment in the subsidiary company at cost (see note 24). The charity also holds an investment of £20 for a one-third share in Pink Ribbon Limited. The other two-thirds are held by Breast Cancer Now.

15. Debtors

	Group 2016-17 £'000	Group 2015-16 £'000	Charity 2016-17 £'000	Charity 2015-16 £'000
Trade Debtors	173	340	100	217
Other Debtors	158	32	18	32
Prepayments and accrued income	1,988	2,694	2,134	2,610
Subsidiary company	-	-	843	509
	2,319	3,066	3,095	3,368

Breast Cancer Care

Notes to the Accounts for the year ended 31 March 2017

16. Current Investments

	Group 2016-17 £'000	Group 2015-16 £'000	Charity 2016-17 £'000	Charity 2015-16 £'000
Money market and bank deposits	510	518	510	518

17. Creditors: amounts falling due within one year:

	Group 2016-17 £'000	Group 2015-16 £'000	Charity 2016-17 £'000	Charity 2015-16 £'000
Trade creditors	174	173	172	163
Other creditors	84	202	84	202
Accruals	537	503	537	503
Deferred income	391	438	391	414
Taxation and Social Security	258	230	180	203
Subsidiary company	-	-	-	-
	1,444	1,546	1,364	1,485

Deferred income includes amounts received for fundraising events taking place in the next financial year. During the year £391,200 of income was deferred (2016: £436,844) and £438,040 of income was released (2016: £380,055).

18. Creditors: amounts falling due after one year:

	Group 2016-17 £'000	Group 2015-16 £'000	Charity 2016-17 £'000	Charity 2015-16 £'000
Other creditors	198	-	198	-
	198	-	198	-

19. Provisions for liabilities

	1 April 2016 £'000	Group and Charity		31 March 2017 £'000
		Transfer £'000	Release £'000	
Office lease commitments	1,107	-	(856)	251

Provisions relate to the potential dilapidations and exit costs associated with our four offices. One lease expired in 2016-17 and resulted in the release from the provision.

20. Restricted Funds

	Balance at 1 April 2015 £'000	Income £'000	Expenditure £'000	Balance at 31 March 2016 £'000
Lavender Trust Fund	-	106	(106)	-
The City of London Corporation's charity, City Bridge Trust	-	21	(21)	-
Novartis	-	123	(47)	76
Department of Health – HSCVF	3	28	(31)	-
Client services	95	1,115	(1,079)	131
	98	1,393	(1,284)	207

	Balance at 1 April 2016 £'000	Income £'000	Expenditure £'000	Balance at 31 March 2017 £'000
Lavender Trust Fund	-	44	(44)	-
Department of Health – Tampon Tax Fund	-	1,000	(774)	226
Novartis	76	-	(76)	-
Moondance Foundation	-	141	(127)	14
Client services	131	643	(720)	54
	207	1,828	(1,741)	294

Breast Cancer Care

Notes to the Accounts for the year ended 31 March 2017

The Lavender Trust Fund at Breast Cancer Care raised funds specifically to provide support and information services for younger women.

The Department of Health Tampon Tax Fund – this grant is to fund and evaluate our Moving Forward Courses, including publications and Information Points, aimed at breast cancer patients coming to the end of hospital-based treatment and adjusting to life after breast cancer.

Novartis – funding over two years has been received to survey secondary breast cancer patients' needs and experiences as well as the value and impact of secondary breast cancer nurses.

Moondance Foundation – this grant is to fund our moving forward courses in Wales, specifically.

Client Services restricted funds have been received from a variety of donors funding a range of our client services activities during the year.

21. Unrestricted Funds

	1 April 2015 £'000	Income £'000	Expenditure £'000	Transfer £'000	Investments £'000	31 March 2016 £'000
General funds	7,008	15,479	(15,668)	(300)	(257)	6,262
Designated funds						
Fixed assets fund	444	164	(133)	-	-	475
Office resource fund	600	-	-	300	-	900
	1,044	164	(133)	300	-	1,375
Total Unrestricted Funds	8,052	15,643	(15,801)	-	(257)	7,637
	1 April 2016 £'000	Income £'000	Expenditure £'000	Transfer £'000	Investments £'000	31 March 2017 £'000
General funds	6,262	14,442	(14,512)	900	312	7,404
Designated funds						
Fixed assets fund	475	627	(179)	-	-	923
Office resource fund	900	-	-	(900)	-	-
	1,375	627	(179)	(900)	-	923
Total Unrestricted Funds	7,637	15,069	(14,691)	-	312	8,327

Fixed assets fund represents the net book value of tangible fixed assets except those held in restricted assets.

Office resource fund was to cover the planned move to a smaller office in London, IT investment and other associated costs as the move took place in 2016-2017, this fund was released in year.

22. Analysis of Group Net Assets between Funds

	General Funds £'000	Designated Funds £'000	Restricted Funds £'000	Total Funds £'000
Fund balances at 31 March 2016 were represented by:				
Intangible Fixed Assets	-	138	-	138
Tangible Fixed Assets	-	351	-	351
Investments	4,639	-	-	4,639
Current Assets	4,276	886	207	5,369
Current Liabilities	(1,546)	-	-	(1,546)
Provision for Liabilities	(1,107)	-	-	(1,107)
Total Net Assets	6,262	1,375	207	7,844

Fund balances at 31 March 2017 are represented by:

	General Funds £'000	Designated Funds £'000	Restricted Funds £'000	Total Funds £'000
Intangible Fixed Assets	-	110	-	110
Tangible Fixed Assets	-	799	-	799
Investments	3,941	-	-	3,941
Current Assets	5,356	14	294	5,664
Current Liabilities	(1,444)	-	-	(1,444)
Provision for Liabilities	(449)	-	-	(449)
Total Net Assets	7,404	923	294	8,621

Breast Cancer Care

Notes to the Accounts for the year ended 31 March 2017

23. Financial Instruments

At the balance sheet date the consolidated group held financial assets at amortised cost comprising cash and short term deposits, stock, trade debtors, other debtors and accrued income of £5,096,000 (2016: £4,418,000) and financial liabilities at amortised cost, comprising trade creditors, other creditors and accruals at of £795,000 (2016: £878,000). Total interest income received in respect of financial assets held at amortised cost totalled £6,000 (2016: £9,000).

The charity held assets at fair value through income and expenditure of £3,941,000 (2016: £4,639,000). Movements in the year through the statement of financial activities comprised income of £109,000 (2016: £117,000) and gains of £312,000 (2016: losses of (£257,000)).

24. Subsidiary Company

The charity owns the whole of the issued ordinary share capital of Breast Cancer Care Trading Limited, a company registered in England (company no. 02681072). The subsidiary is used for trading activities, including the sale of merchandise, cause-related marketing agreements, corporate sponsorships and events subject to tax.

All activities have been consolidated on a line by line basis in the Statement of Financial Activities.

The total net profit of the company is gifted to the charity.

A summary of the results of the subsidiary is shown below:

	Merchandising £'000	Corporate Income £'000	Events £'000	Other £'000	2016-17 Total £'000	2015-16 Total £'000
Turnover	750	481	146	118	1,495	850
Cost of Sales	(528)	-	-	-	(528)	(370)
Gross Profit/(Loss)	222	481	146	118	967	480
Bank charges	-	-	-	(6)	(6)	(8)
Management fee paid to the charity	-	-	-	(207)	(207)	(119)
Other expenses	-	-	-	(1)	(1)	(1)
Net Profit/(Loss)	222	481	146	(96)	753	352

	2016-17 £	2015-16 £
The aggregate of the assets, liabilities and funds was:		
Assets	1,046,982	570,422
Liabilities	(1,046,980)	(570,420)
Funds (representing two ordinary shares of £1 each)	2	2

Registered office address: Kennington Business Park, Chester House, 1-3 Brixton Road, London SW9 6DE

25. Related Party Transactions

In the year ending 31 March 2017, the following transactions took place between the charity and its wholly owned subsidiary Breast Cancer Care Trading Ltd:

- the charging of an annual management charge from the charity to Breast Cancer Care Trading Ltd for use of the charity's premises, staff and resources of £206,913 (2016: £119,867)

- the transfer under Gift Aid of the trading profits of Breast Cancer Care Trading Ltd to the charity of £752,837 (2016: £351,046)

There was an outstanding balance due to the charity by Breast Cancer Care Trading Ltd of £842,000 (2016: £509,000), and an outstanding balance due by the charity to Breast Cancer Care Trading Ltd of £0 (2016: £0) as at the 31 March 2017.

26. Trustee Indemnity Insurance

During the year, the charity purchased insurance to indemnify the trustees against the consequences of neglect or default on the part of the trustees. The cost of the insurance was £1,693 (2016: £1,640).

27. Taxation

Breast Cancer Care, as a charitable organisation, is exempt from taxation of its income and gains to the extent that they are applied to its charitable objectives. No tax charge arises in the subsidiary entity included in the group accounts due to its policy of gifting all taxable profits to Breast Cancer Care each year.

Breast Cancer Care

Notes to the Accounts for the year ended 31 March 2017

28. Income from pharmaceutical companies

Breast Cancer Care received the following income from pharmaceutical companies in the year:

	2016-17 Total £'000	2015-16 Total £'000
Pfizer	27	33
Roche Products Ltd	20	21
Novartis	-	123
AstraZeneca	-	15
Genomic Health	-	11
Celgene	-	1
Amgen	-	-
	47	204

Income received from pharmaceutical companies in 2016–17 supported our secondary breast cancer awareness work, and the Breast Cancer Care Nursing Network – which provides educational resources, learning events, regular news publications and training, currently for 1,101 specialist breast care nurses across the UK. All donations strictly adhere to our policy on working with pharmaceutical companies, and are in accordance with the requirements of the ABPI Code of Practice for the Pharmaceutical Industry.

29. Defined Contribution Pension Scheme

The company provides defined contribution schemes for all employees. The amount charged to the statement of financial activities is the contribution payable in the year and amounted to £528,757 (2016: £507,977)

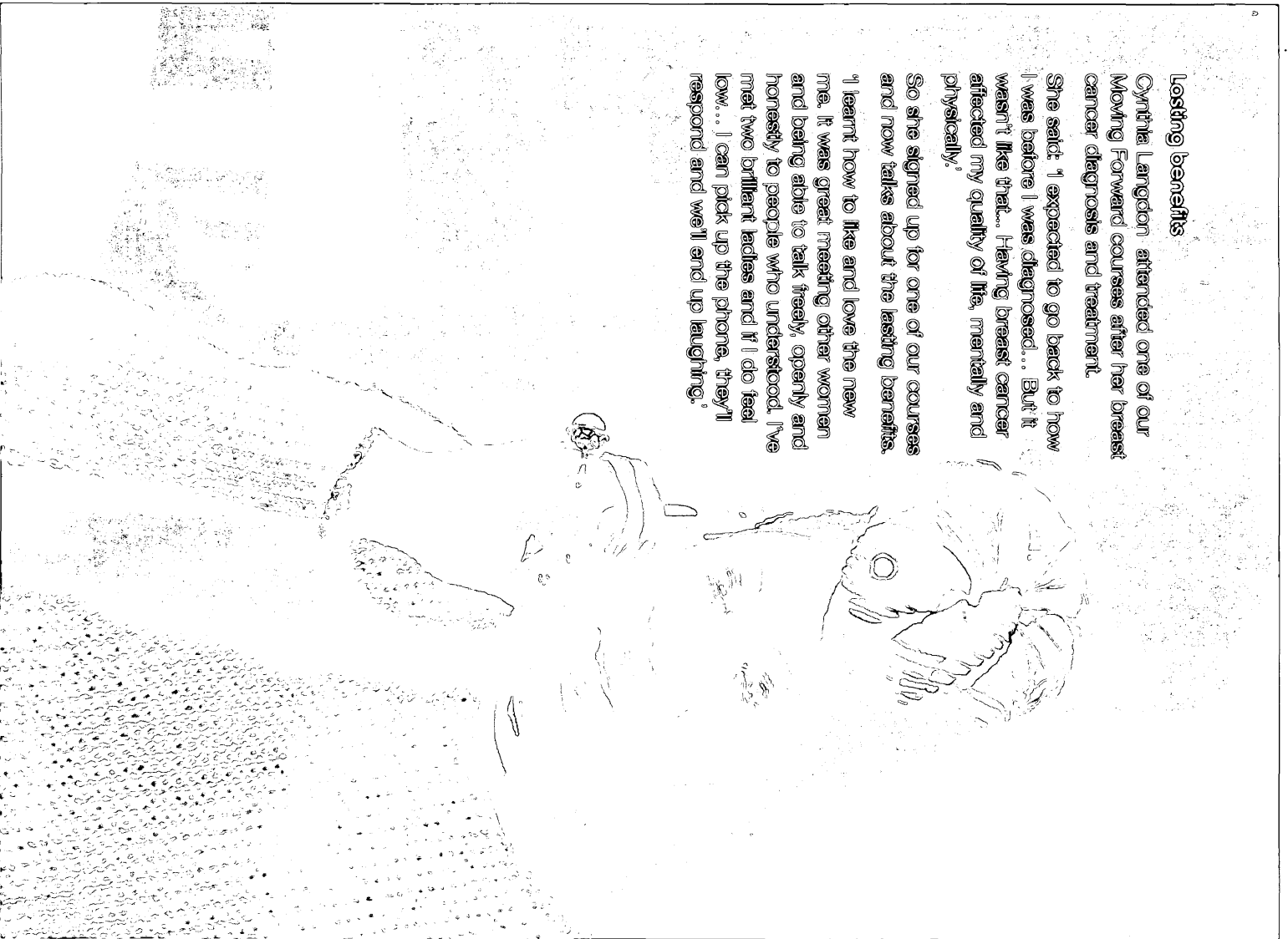
lasting benefits

Cynthia Langdon attended one of our Moving Forward courses after her breast cancer diagnosis and treatment.

She said: 'I expected to go back to how I was before I was diagnosed... But it wasn't like that... Having breast cancer affected my quality of life, mentally and physically.'

So she signed up for one of our courses and now talks about the lasting benefits.

'I learnt how to like and love the new me. It was great meeting other women and being able to talk freely, openly and honestly to people who understood. I've met two brilliant ladies and if I do feel low... I can pick up the phone, they'll respond and we'll end up laughing.'



Thank you

Ann and Calum Frampton
Asda for the incredible Tickled Pink campaign

Baker & McKenzie
Begbies Traynor
Betty and Colin Hart
BHS
Big Yellow Self Storage Company Ltd
Bishop's Stortford Fundraising Group
Bob & Christine Sturgess
Boux Avenue
Brian Steer
BT
Buyagift.com

Cardiff Fundraising Committee
Caroline Hiles
Chris Weir
Claire McDonnell
Community Pharmacy Scotland
Curves
Cynthia Langdon

Dawn Tumbridge
Dee Anderson
De Groot Fresh Produce UK Ltd
Deborah Hubbard
delicious. magazine
Dorothy Perkins
Duncan Spence

Eat Natural
ELEMIS
EMCOR UK
En Route International
ESPA
Essex Fundraising Group
Estée Lauder
Eversheds

Fairfax & Favor
Fife Flyers
Fiona Treharne
Folli Follie
Football Association Wales
Freixenet
Freshfields Bruckhaus Deringer

Glasgow Fundraising Group
Glasgow High Kelvinside RFC

Hayley Carpenter-Priest

Hazel Clarke
Hilary Alexander, Lesley Goring and the team of
stylists
HiQ

intu Trafford Centre

Jackie Scully
Jane Hinrichs for chairing The Show London
committee and thank you to all our Breast
Cancer Care Fashion Show committee members
JML
Joanne and Chris Thomson
John Bryson and the team at Train2Fight
Jonny Lee-Kemp
Jupiter Hotels

Kate Wauchope
King & Spalding
L Lynch Plant Hire & Haulage Ltd
Lakeside Leisure Group
Latham & Watkins
Lewisham Council and The Mayor of Lewisham
and the Mayoress' committee
Lilian Mitchell
Linda Dye
Linda Murray
Lindt
Linzi Shoes
Liz Mackay
Look Good Feel Better
Lorraine Hathorn

McAllister Litho Glasgow
Maltin PR
Manchester Beer and Cider Festival
Mark Master
Miss Selfridge
Mission Foods
Monica Takvam
Moya Sparrowhawk
Murgitroyd

Nabarro
Newbury Racecourse
Nick Miles
Novartis

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Pester and the Saracens Sport Foundation, and

our members of The Cornerstone Collective,
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Steph Harrison
Surrey Fundraising Group

The 29th May 1961 Charitable Trust, and The
Eveson Charitable Trust for funding work in the
West Midlands
The Carols by Candlelight London committee
members
The Edith Murphy Foundation
The Evelyn Drysdale Foundation, Hugh Fraser
Foundation, Len Thomson Charitable Trust,
Martin Connell Charitable Trust, PF Charitable
Trust, Souter Charitable Trust, The Miss
Isabel Harvey Charitable Trust, The Northwood
Charitable Trust, and William Grant Foundation
for funding work in Scotland

The Football Association, Wembley Stadium and
members of the England squads

The Former Service User Research Partnership
(SURP)
The Jane Hodge Foundation for funding the
expansion of Breast Cancer Care Cymru's
co-delivery of Reducing the Risk of
Lymphoedema service across Wales
The Moondance Foundation for funding the
expansion of Moving Forward work across Wales
The Rangers Charity Foundation for donating
£25,000 for services in Scotland
The Robertson Trust for supporting Living with
Secondary Breast Cancer services in Scotland
The Sandra Charitable Trust
The Show Scotland committee
The Simon Gibson Charitable Trust for supporting
services in Wales
The William Allen Young Charitable Trust
The Zochonis Charitable Trust for funding services
in Manchester
TT Litho printers

Vicki Meagher

Wayne Palmer and Dale Hattey
Westdale Press
Wilko Retail Limited
Woman & Home
Workspace

Xercise4Less

Yvonne Shuttleworth

**A special thank you to each person
who very kindly remembered
Breast Cancer Care's work in their Will**

About us: our legal and administrative details

Royal Patron

Her Royal Highness The Duchess of Kent GCVO

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Cherie Blair CBE QC
Geri Horner
Allan Leighton
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Denise Lewis OBE
Amanda Mealing
Diana Moran
Mike Phillips
Lisa Snowdon
Meera Syal CBE
Denise Van Outen
Chris Weir

Founder

Betty Westgate MBE (1919–2000)

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Dr Marion Lewis, Vice-Chair
Dheepa Balasundaram, Treasurer (resigned 30 November 2016)
Jill Thompson, Treasurer (appointed 9 December 2016)
Farida Anderson MBE (resigned 26 October 2016)
Mark Astaire
Susan Brannigan
Dr Christine Douglass
Dr Alison Jones
Nick Morris
Jill Pask
Sybil Roach-Tennant*
Fiona Wood (resigned 29 September 2016)

*final term of office ends on 20 September 2017

Chief Executive

Samia al Qadhi

Executive Directors

David Crosby (Services and Engagement)
Jenny Fernando (Finance and Resources from 1 December 2016)
Graham Galvin (Finance and Resources to 30 November 2016)
Andy Harris (Fundraising and Marketing)
Dr Emma Pennery CBE (Clinical and Information)

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Emma Burns
Nick Morris
Jill Pask

Investment

Jill Pask, Chair
Mark Astaire
Susan Brannigan
Dr Marion Lewis
Jill Thompson

HR and Remuneration

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Emma Burns
Sybil Roach-Tennant
Steve Jenkins (co-opted)

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Emma Burns
Dr Alison Jones

Audit and Assurance

Catherine Young, Chair
Dr Christine Douglass
Dr Alison Jones
Sybil Roach-Tennant
Jonathan Dancey (co-opted)
Raj Kambo (co-opted)

Registered office

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Tel 0345 092 0800
Fax 0345 092 0820
breastcancercare.org.uk
email info@breastcancercare.org.uk

Company Secretary

Callum Calder

Auditors

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10 Salisbury Square
London EC4Y 8EH

Bankers

HSBC plc
315 Fulham Road
London SW10 9QJ

Investment managers

Charles Stanley & Co Limited
25 Luke Street
London EC2A 4AR

Solicitors

Bates, Wells and Braithwaite
138 Cheapside
London EC2V 6BB

Russell Cooke
8 Bedford Row
London WC1R 4BX



When you have breast cancer, everything changes.

At Breast Cancer Care, we understand the emotions, challenges and decisions you face every day. That's why we offer support and information and campaign for better care.

Whether you want to speak to our nurses, read reliable information or connect with someone who's faced what you are facing now, we'll help you feel more in control.

For breast cancer care, support and information, call us free on 0808 800 6000 or visit **breastcancercare.org.uk**

Central Office

Breast Cancer Care
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