

**BREAST
CANCER
NOW** The research
& care charity

A YEAR OF RESILIENCE

**Annual Report and
Accounts 2019–20**

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WELCOME TO BREAST CANCER NOW'S ANNUAL REPORT AND ACCOUNTS 2019-20

This report covers the period
from 1 August 2019 to 31 July
2020.

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A YEAR OF RESILIENCE

Our Chief Executive, Delyth Morgan, and Chair, Jill Thompson, present our Annual Report and Accounts 2019–20.

We are delighted to share with you Breast Cancer Now's first annual report and accounts as a merged charity. It has not been an ordinary year. Against a backdrop of a global pandemic, over the past financial year we've faced highs and lows but, amongst it all, we have been resolute and resilient in our commitment to people affected by breast cancer.

As the coronavirus (COVID-19) arrived in the UK we were just over halfway through our year. And, despite what was already a difficult external environment, we continued to lay the foundations of our new charity – building on the bold and ambitious step we made in creating one organisation that is here for anyone affected by breast cancer.

The successful launch of our new brand and visual identity in October 2019 marked one of the first major milestones in our new charity's history. We continued to make strides forward in providing people affected by breast cancer the support they need today and giving the hope for the future that so many people rely on us for.

Through our life-changing care and support services and expert patient and health information we continued to be that trusted friend that people can turn to when they need us most.

We continued to be a vehicle for change, championing the needs of those living with this devastating disease to make sure they get the best possible treatment and care. This included the launch of our new campaign on secondary breast cancer.

We continued making breakthroughs in the labs, committing around £11.5 million to world-class research that will bring us closer to the day when everyone who develops breast cancer will live. We also proudly hosted the UK Interdisciplinary Breast Cancer Symposium again, emphasising the importance of collaboration between professionals from many disciplines in understanding the disease and finding the very best ways to prevent it, treat it and improve the lives of those living with breast cancer.

Adapting to a changing world

However, as we entered the Spring of 2020, nobody could have foreseen the challenges that lay ahead. As the coronavirus took its grip on the UK, it quickly became the biggest crisis facing breast cancer in decades.

Our lives and the lives of those at the very heart of our charity – people affected by breast cancer – became filled with doubt, uncertainty and worry. As we worked quickly to provide clarity, reassurance and support in a rapidly evolving situation, by speaking with patients we heard hundreds of stories of the severe impact that the coronavirus was having on the emotional wellbeing of so many people and families affected by breast cancer.

At the height of the pandemic, we saw a big drop in the number of people being referred to see a specialist with suspected breast cancer. Screening services were paused. Recruitment to many clinical trials was paused. And, while many patient's treatment continued unchanged, other patients saw delays and cancellations to their treatment alongside changes to the support they received. This caused huge levels of anxiety – particularly for patients with incurable secondary breast cancer and their loved ones.

Amid a national lockdown, social-distancing, shielding and widespread economic uncertainty, Breast Cancer Now was deeply affected too. Many of the world-class scientists and experts we fund spent 100 days or more unable to work in their labs. Our life-changing community support services run at NHS hospitals have been suspended. And much of the fundraising that powers our vital work was hit hard.

Never has our resilience been more tested as it has been in 2020. Like many organisations, we have had to make some difficult and decisive decisions. In April, we

furloughed around 70% of our workforce. No decision was more difficult than changing the size and structure of the charity, which resulted in 45 much-valued colleagues subsequently leaving the organisation. We would like to thank all of them, and all the colleagues still with us, for their dedicated service and professionalism in such a tough period.

In these testing times, our colleagues, partners, supporters, volunteers and researchers have all rallied so that we can continue to provide the support for today and hope for the future that so many people rely on us for.

Rising to the challenge

We are immensely proud that while we have been unable to run our community support services, our offices have been closed and colleagues have adapted to working from home, we have continued to be there for people when they need us.

Our breast care nurses have been running our Helpline and Ask Our Nurses services remotely for the first time – receiving more than 1,400 enquiries in the first month of the pandemic. Despite the ever-changing support needs of people affected by breast cancer during this time, our expert health and patient information has been continually reviewed and has been a trusted source for thousands of people affected by the disease.

With our community support services suspended, we created new, virtual services so that we could continue providing a lifeline to as many people as possible. Our Moving

Forward Online programme is supporting people who have had a primary breast cancer diagnosis and finished their hospital-based treatment in the past two years. Our Living with Secondary Breast Cancer Online programme and Virtual Meetings are giving people a safe and confidential space to still meet with others who understand and are also dealing with the uncertainty and challenges that secondary breast cancer brings. For many, we know these services are not a perfect replacement for being able to meet and talk in person, but we will continue striving to make them as valuable as possible.

The coronavirus may have slowed down much of our fundraising but it did not stop us completely. In April, despite the London Marathon not going ahead, many of our Team Now runners, their friends, their families and many others took on The 2.6 Challenge for Breast Cancer Now. We adapted events to make them more lockdown-friendly, including our Afternoon Tea Moments. And we created new, socially-distanced ways of fundraising like our hugely successful virtual Walk 300,000 challenge.

The future

By the end of the year, our income – through fundraising, charitable activities and investments was £38.4 million up from £32.5 million in the previous year, reflecting the first full year of our merged charity. In such turbulent times, to maintain our income at this level has taken a lot of generosity, loyalty and creativity from our supporters – and we feel privileged to have such an incredible network of support standing with us.

However, over the next year, we will need to be more resilient than ever. We are predicting that our income could drop by as much as 20% and we have been left with little choice but to cancel two research grant funding rounds in 2020 which will potentially see us spend at least £2 million less on world-class research in 2020-21.

As we write this, thousands of people with breast cancer are still living each day incredibly worried not only about their increased risk of becoming seriously ill if they do contract COVID-19 but about the impact of the current crisis on their breast cancer treatment in the future and, ultimately, their survival.

However, there is cause for optimism. The resource and effort the NHS has put into finding ways to safely diagnose and treat cancer during the pandemic, and the knowledge we have gained, will prove invaluable moving forwards. Gradually, breast cancer services and research are returning to normal. A new normal. The number of referrals continues to recover every month. Breast screening has restarted. The number of people beginning treatment has risen. Our researchers are back in the lab. And we continue to develop our online support services.

We must make sure we are well prepared for the future. The progress that we have made in breast cancer must not be allowed to stall. We are more determined than ever to change the future of breast cancer and make sure that by 2050 everyone who develops breast cancer lives and lives well.

It's a vision we will continue putting all our energy into making a reality – underpinned by our new strategy for our merged charity, which we will launch in 2020-21.

People affected by breast cancer remain at the heart of our charity. They always will. We continue to be inspired and driven forward each day by their experiences and we will be keeping a close eye on the economic, political and social environment so we can make the biggest impact we can for them.

In the coming year, we will continue to fund the very best research, provide the very best support and campaign for the change that people affected by breast cancer really need. But we can't do it without your continued support. Whether you donate, fundraise, volunteer, campaign or support us in other ways, we need you now more than ever.

We are here for anyone affected by breast cancer, the whole way through – and we hope you are with us.



Delyth Morgan
Chief Executive



Jill Thompson
Chair of Trustees

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The Trustees are aware of the Charity Commission's guidance on public benefit and confirm that they have complied with the duty in section 17 of the Charities Act 2011.

SUPPORT FOR TODAY, HOPE FOR THE FUTURE

We are Breast Cancer Now, the charity that is steered by world-class research and powered by life-changing care. We're here for anyone affected by breast cancer, the whole way through, providing support for today and hope for the future.

We are that trusted friend that you turn to for caring support when you need it most. The expert authority on breast cancer

research who is making breakthroughs and driving forward progress. And a vehicle for change, acting now to make sure anyone affected by breast cancer gets the best possible treatment and care.

We believe that we can change the future of breast cancer and make sure that, by 2050, everyone diagnosed with the disease lives and lives well. But we need to act now.

DELIVERING SUPPORT AND HOPE

We have a bold vision. That, by 2050, everyone diagnosed with breast cancer will live and live well. To turn our vision a reality, everything we do is focussed around three long-term goals:

- Preventing and detecting breast cancer better
- Saving lives from breast cancer
- Living well with breast cancer

Throughout this report you will see how we are getting closer to reaching these goals, and our vision, through our strategic objectives. These objectives guide our day-to-day work so we can deliver people affected by breast cancer the support they need for today and the hope they need for the future.

- We will further our understanding of why breast cancer develops and spreads and use our knowledge to help prevent breast cancer developing.
- We will improve detection and diagnosis of breast cancer.
- We will develop kinder, smarter treatments for those with primary breast cancer* and improve access to treatments for those affected.
- We will tackle secondary breast cancer and work to improve treatments, care and services for those affected.
- We will improve support for people affected by breast cancer with their physical and mental health and their emotional wellbeing.

To achieve this...

- We will raise our profile as the trusted organisation for everyone affected by breast cancer so they get the support they need and are inspired to give support to make positive change.
- We will inspire more people to support us financially to allow us grow and develop as a sustainable organisation to meet future demands.
- We will establish and embed our culture - shared organisational values, behaviours, tools and ways of working - to enable our people to work efficiently and effectively to deliver impact for people affected by breast cancer.

Strategic objective one

FURTHERING OUR UNDERSTANDING OF WHY BREAST CANCER DEVELOPS AND SPREADS AND USING OUR KNOWLEDGE TO HELP PREVENT BREAST CANCER DEVELOPING

Long-term goals

Preventing and detecting breast cancer better

Saving lives from breast cancer

OUR WORK IN RESEARCH



New project Looking for new ways to prevent breast cancers caused by BRCA1 changes

One of two new research projects we have funded in this area of our work this year, Dr Sacha Howell from the University of Manchester is trying to understand exactly how the drug denosumab works to reduce breast cancer risk.

Women with changes in their BRCA1 gene are at very high risk of breast cancer, with 80% developing the disease in their lifetime. Currently the only option for these women to prevent breast cancer is removing both of their breasts – a double mastectomy.

In laboratory studies, denosumab has stopped the growth of cells that breast cancers are thought to arise from in these women. This drug is about to be tested in a large international clinical trial to see whether it will reduce the number of women with BRCA1 changes that develop breast cancer.

Dr Howell will study samples from women in the UK who have taken part in the international trial. Ultimately, Dr Howell hopes it will help to find the best way to prevent breast cancer in women at very high risk of developing the disease.

New project Improving ways to identify women at high risk of breast cancer

Our second new project this year is led by Dr Adam Brentnall from the Barts Cancer Institute, who is looking to improve the models we use to identify women at high risk of getting breast cancer.

In this project, Dr Brentnall will improve an existing method, that is currently used in the UK, by integrating the latest knowledge and understanding of breast cancer so that the new model can predict the risk a woman has of getting a particular type of breast cancer. Dr Brentnall also hopes to understand what best helps to predict more aggressive breast cancers. This project could help doctors to better identify women who may be at greater risk of getting aggressive breast cancer – meaning if they do get breast cancer, it can be detected and treated earlier.

New method to assess breast cancer risk

Professor Gareth Evans and researchers from the University of Manchester have improved the way to estimate a woman's chances of developing breast cancer.

The improved method takes into account known breast cancer risk factors, 143 genetic variations known to be linked to breast cancer and breast density. This is an important step forward as by improving the way to estimate each woman's likelihood of developing breast cancer, it could help to offer a tailored approach to prevention and screening. Meaning women could receive more or less frequent screening depending on their personal risk.

Scientists link weight gain to a lower risk of breast cancer before the menopause

New research results published this year have suggested women who gain weight from early adulthood have a lower chance of developing breast cancer before the menopause than women whose weight remains stable.

These results suggest that levels of fat could be an important factor that determines the likelihood of women getting breast cancer. Researchers, who analysed data from 17 studies across the world including the Breast Cancer Now Generations Study, took into account a variety of other factors that can change a woman's chances of developing the disease.

They looked at whether women had children and when, their starting weight, and family history of breast cancer. They also considered other lifestyle influences, such as smoking, level of physical activity and alcohol consumption.

These important findings bring us a step closer to understanding the fundamental role of weight on the risk of breast cancer in younger women. Understanding the biological reasons could lead to new ways to prevent the disease and more accurate tests to assess women's chances of developing breast cancer before the menopause.

But the research highlights that women shouldn't consider gaining weight as a way to prevent breast cancer. Putting on weight throughout adulthood increases the risk of breast cancer after the menopause, when breast cancer is most likely to develop, and higher weight also increases the risk of other cancers and health conditions.

OUR WORK IN PUBLIC HEALTH AND WELLBEING



Delivering community-based lifestyle advice

Over the past two years, Breast Cancer Now has been working closely with the University of Dundee on the ActWELL trial. Running in four areas across Scotland – Aberdeen, Dundee, Edinburgh and Glasgow – the trial aimed to test how effective it is to deliver lifestyle advice, through a trained volunteer lifestyle coach, to women aged 50-70 who have attended routine breast screening.

As part of the trial, which ended in September 2019, Breast Cancer Now recruited and trained 45 lifestyle coaches who delivered 623 face-to-face coaching sessions and held 1,915 support telephone calls over the two years of the trial. While the full impact of this type of community-based lifestyle intervention is still being assessed, we know that 3,769 women requested information about the ActWELL trial and 560 women were randomised to the trial with 83% continuing with the trial after the initial 12 months and 90% saying they were likely to recommend it to others.

Importantly, early evaluation shows that the volunteer lifestyle coaches themselves increased their understanding and awareness of the link between lifestyle behaviours and breast cancer. Over 80% of those who volunteered now feel they are more conscious of their own personal lifestyle habits and nearly half say they have started seeking more information about how to change their lifestyle.

**'I'VE BECOME CONSCIOUS OF MY OWN
SEDENTARY TIME AND PORTION CONTROL.'**

**'IF I FELT I COULDN'T BE BOTHERED DOING A
WORKOUT OR GOING OUT FOR A WALK IN THE
DRIZZLE I THOUGHT OF THE WOMEN I WAS
COACHING AND WHAT I WOULD SAY TO THEM.'**

Now For Me

Drinking less alcohol, maintaining a healthy weight and keeping physically active can all help to keep a woman's risk of developing breast cancer as low as possible. But it is not always easy to change your behaviours and habits.

Now For Me was developed to inspire, motivate and support women aged 35-55 to move more, eat more healthily and cut back on alcohol to help reduce their risk of breast cancer.

The pilot campaign, which ran from 13 January to 16 February 2020, encouraged women to sign-up to a programme of healthy behaviour change emails. Through targeted social media marketing, the campaign reached 2.2 million women in 12 locations, both urban and rural, across all four nations of the UK.

Nearly 2,500 women signed up to receive emails with alcohol (56%) being the most popular lifestyle behaviour to receive information about compared to diet (39%) or physical activity (5%). During the course of the campaign, the Now For Me section of the Breast Cancer Now website received 13,956 visits, with women aged 35-44 most likely to visit that content.

OUR WORK IN POLICY, INFLUENCING AND CAMPAIGNING



Bisphosphonates

This year, we continued to follow up on the availability of bisphosphonates – cheap, widely available drugs that can help to reduce the risk of breast cancer spreading to other parts of the body and becoming incurable.

Last year, our Freedom of Information request showed that 75% of hospital trusts in England were routinely offering bisphosphonates to women that would benefit, with another 20% in the process of making them available. This year, we wrote to all those trusts that were in the process of making them available to check on progress, and to those that told us they were not providing bisphosphonates. Following our long-running campaign to make bisphosphonates available, we are encouraged to hear that 94% of hospital trusts are now routinely offering them with 3% (just four trusts) still in the process of making them available with the remaining 3% either not yet responding or providing an unclear response.

If given to all postmenopausal women with early breast cancer, bisphosphonates could reduce the number of breast cancer deaths by 10%, as well as saving the NHS millions of pounds per annual group of patients prescribed them. Bisphosphonates are already available across Scotland and Wales.

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Strategic objective two

IMPROVING DETECTION AND DIAGNOSIS OF BREAST CANCER

Long-term goals

Preventing and detecting breast cancer better

Saving lives from breast cancer

OUR WORK IN RESEARCH



New project New way to detect cancer cells in lymph nodes

Karina Cox from Maidstone and Tunbridge Wells NHS Trust is investigating whether a special ultrasound method can help specialists find out if breast cancer has spread to the lymph nodes in the armpit.

Surgery to remove cancer in the breast and at least some lymph nodes from the armpit is the standard of care because we don't have accurate ways to examine the lymph nodes without removing and checking some of them. Technological advances may now offer new ways to check if breast cancer has spread to the lymph nodes in the armpit.

Karina will look at whether an ultrasound technique can be used in clinics to guide a needle biopsy and check for any signs of breast cancer cells in the lymph nodes. If the procedure is easy to use and can successfully find cancer cells in the lymph nodes, a clinical trial will be designed to test it further. If successful, it could help some breast cancer patients avoid armpit surgery.

Personalised blood test to detect return of breast cancer earlier

A new study at five UK hospitals has found that a personalised blood test for women with early breast cancer could detect the return of the disease earlier than hospital scans.

The study, funded by Breast Cancer Now and other collaborators, found that the test for levels of cancer DNA circulating in the blood detected the return of the disease after treatment nearly 11 months before patients developed symptoms or secondary tumours became visible on scans.

The test, developed by researchers led by Professor Nicholas Turner at the Breast Cancer Now Toby Robins Research Centre at The Institute of Cancer Research, was found to work in all types of breast cancer and could detect the early signs of the spread of the disease around the body (outside of the brain).

Further research is now needed to understand how the test could be used in the clinic to help guide treatment and help stop women dying from the disease.

OUR WORK IN PUBLIC HEALTH AND WELLBEING



Anyone can get breast cancer. No matter the size or shape of someone's breasts it is important they check them regularly and see a GP as soon as possible if they notice any changes or anything unusual. But we know that 1 in 2 women in the UK do not regularly check their breasts.

Encouraging women across the UK to get in the habit of regularly checking their breasts is vital because the sooner breast cancer is diagnosed, the better the chance of successful treatment.

Encouraging people to Touch, Look, Check

There is an easy way to remember to check your breasts – we call it Touch Look Check. We raise awareness of this important message in many ways, including through our website, social media channels, health information publications, breast awareness talks and corporate partnerships.

Since we launched our newly rebranded Breast Cancer Now website in October 2019, more than 200,000 people have visited the signs and symptoms page making it one of the most popular pages on the site.

Several of our valued corporate partners – including Asda, M&S and ghd – encouraged their customers to check their breasts in the last year, meaning we have been able to reach millions more people about breast awareness and the importance of early detection.

Our printed health information also continues to be popular. From August 2019 to July 2020, we distributed 63,259 copies of Know your breasts: a quick guide to breast awareness and 66,650 copies of Know your breasts: a guide to breast awareness and screening.

Reaching out to the community

As well as talking about breast checking through our corporate partnerships and our own channels, it is important that we reach out into communities too. Our Breast Cancer Public Health and Wellbeing Volunteers are vital in helping us to do this. They help explain who we are in their local area, champion the work we do and give informative and inspirational talks on the risk factors and signs and symptoms of breast cancer to everyone from community groups and associations to local business and companies.

This year, our Breast Cancer Speaker Volunteers delivered 20 breast awareness talks across the UK.

OUR WORK IN PROVIDING CARE AND SUPPORT



The breast care nurses on our Helpline and Ask Our Nurses service talk to people affected by breast cancer and those who are worried about the disease. Where appropriate, our nurses signpost people to relevant health and patient resources to support the information they are giving.

OUR WORK IN POLICY, INFLUENCING AND CAMPAIGNING



Monitoring referral waiting times

We have continued to monitor how long people are having to wait to see a specialist after being referred by their GP under the 'two week wait' in England.

NHS England had proposed to replace the 'two week wait' with a new Faster Diagnosis Standard which would introduce a maximum time of 28 days from being referred by a GP or following a positive screening result, to either receiving a cancer diagnosis or cancer being ruled out.

We were concerned that there could be unintended consequences to this, with women being seen less quickly over time – particularly given that NHS England set the performance threshold for the new Standard at just 70%. We will continue to discuss these concerns with NHS England, however, implementation of the Standard has now been delayed due to the coronavirus.

Referrals and the coronavirus

During the peak of the coronavirus the number of referrals for women with suspected breast cancer to see a specialist declined dramatically.

We have taken every opportunity to encourage people to regularly check their breasts and contact their GP surgery if they notice anything unusual, including through our Chief Executive, Delyth Morgan, appearing in an NHS England video on this issue. We have called on governments and the NHS across the UK to set out clear plans to deal with the backlog of referrals, including ensuring that the already stretched workforce has the capacity to deal with this challenge.

Major reviews of breast screening

In October 2019, we responded to the publication of the year-long independent review of adult screening programmes in England, led by Professor Sir Mike Richards. We submitted evidence to the review and were pleased to see many of our comments addressed in the final set of recommendations. This included proposals to improve screening uptake, introduce clearer governance and incorporate family history screening into the Breast Screening Programme. Since publication of the review, we have been working with government bodies to understand the next steps and timelines for the implementation of this important set of recommendations.

A major review of the Breast Screening Programme in Scotland also began in November 2019. We have been inputting into the review as a member of the Independent Review Group overseeing it. The review is ongoing and scheduled to report its final recommendations by mid-2021.

Screening and the coronavirus

In March 2020, most breast screening services across the UK were suspended due to the coronavirus. We have been working with various stakeholders to understand when and how services can restart safely, with most services resuming over Summer 2020. As a member of the Scottish Breast Screening Programme Board, we inputted into the successful restart of breast screening services in Scotland.

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Strategic objective three

DEVELOPING KINDER, SMARTER TREATMENTS FOR THOSE WITH PRIMARY BREAST CANCER AND IMPROVING ACCESS TO TREATMENTS FOR THOSE AFFECTED

Long-term goals

Saving lives from breast cancer

Living well with breast cancer

OUR WORK IN RESEARCH



New project Understanding how we can stop breast cancer spreading

Breast cancer stem cells are thought to be responsible for some breast cancers developing resistance to treatment and may cause breast cancer to spread. Dr Paloma Garcia from the University of Birmingham wants to find out more about how we can target these cells to stop breast cancer spreading.

A protein called MYBL2 might be involved and Dr Garcia's team will be looking at whether targeting the MYBL2 protein could work as a new treatment to stop breast cancer returning, stop tumours becoming resistant to treatment and prevent the disease from spreading around the body. This would help to give people with breast cancer the best chance of survival.

New project Understanding how other cells can help triple negative breast cancer grow

Professor Sara Zanivan, from the Beatson Institute for Cancer Research in Glasgow, wants to find new therapies that could

stop people dying from breast cancer by investigating how non-cancer cells can help triple negative breast cancer grow and survive.

Breast tumours are made up of a collection of different types of cells. In addition to cancer cells, other cells can 'talk' to cancer cells and, in some cases, can help them grow.

In her other ongoing work, Professor Zanivan discovered that a protein called PDH is highly active in some of these cells. She now wants to understand how important PDH is in helping tumours grow and spread. Triple negative breast cancer can be an aggressive form of breast cancer that can be difficult to treat, so through this research, we hope to understand if using existing therapies to target PDH could help save the lives of people with triple negative breast cancer.

New project Developing a new Immunotherapy

The immune system protects the body from infection caused by viruses and bacteria, but it can also recognise and destroy cancer cells.

Professor Awen Gallimore from the University of Cardiff hopes to create a new immunotherapy by targeting two types of cells inside breast tumours that can stop the immune system from effectively destroying breast cancer cells.

Professor Gallimore and her team are exploring how treatments, that show very early promise to treat breast cancer, could be combined to harness the power of the immune system to treat the disease. If the combination is successful, they hope it could be further tested in clinical trials. Professor Gallimore and her team hope that this research will help immunotherapy to become an effective treatment against breast cancer, saving more lives.

New project Directing the immune system at triple negative breast cancer

A type of immune cell called a gamma/delta T cell is of particular interest to researchers – but we need to better understand how gamma/delta T cells work.

Dr Seth Coffelt and his PhD student will investigate the ability of this type of cell to kill breast cancer cells. The results of this project will directly inform ongoing clinical trials of immunotherapy.

Dr Coffelt's overall goal is to investigate and improve immunotherapy for women with triple negative breast cancer, which can be more aggressive and currently lacks targeted treatments available for other types of breast cancer.

Unique immune cell could help the body stop breast cancer

Scientists at the Francis Crick Institute and the Breast Cancer Now Research Unit at King's College London have found a collection of specific immune cells in human breast tissue including one type that are thought to be linked to better survival in people with triple negative breast cancer. These immune cells, called gamma/delta T cells, are found in both healthy breast tissue and breast tumours. Scientists found that there are several different varieties of

gamma delta cells in the breast, with one of them, called V delta 1, potentially important in breast cancer.

Triple negative breast cancer patients with higher numbers of these cells in their tumour were more likely to survive than those with low numbers. While further research is needed, exploiting these T cells could help boost the effectiveness of immunotherapies.

Training the immune system to spot drug-resistant cancers

New research, partly funded by Breast Cancer Now, has found that cancers that became resistant to drugs by restoring the function of BRCA1 or BRCA2 genes could be vulnerable to immunotherapy.

Cancers with changes in BRCA genes can be treated with platinum chemotherapy, such as carboplatin, or PARP inhibitors. Both treatments rely on alterations in BRCA genes to work well. However, cancers can sometimes sidestep the effects of these treatments through genetic changes that restore the function of BRCA genes. Scientists, led by Professor Chris Lord from the Breast Cancer Now Toby Robins Research Centre at the Institute of Cancer Research, studied breast, ovarian, pancreatic and prostate cancers with altered BRCA1 or BRCA2 genes. They wanted to understand how these cancers become resistant to treatment by repairing the BRCA genes.

They found the repaired versions of these genes were subtly different from the same genes in healthy cells and could lead to cancer cells being recognised by the body's immune system. It means that immunotherapies that take the brakes off the immune system could be effective against these cancers.

Researchers help ensure the best treatment during the coronavirus

Breast Cancer Now researchers have contributed to developing a new method to assess which women diagnosed with

oestrogen receptor positive (ER+) breast cancer during the coronavirus pandemic need urgent surgery or chemotherapy.

Due to the coronavirus, some cancer treatments have been altered to protect patients who may be more vulnerable to the infection. Some women diagnosed with ER+ breast cancer have been prescribed hormone therapy to keep the disease under control and delay their surgery. But for some, hormone therapy alone may not work well enough.

Analysing data from international trials, scientists arrived at guidance that will help doctors to know whose cancer is less likely to respond to hormone therapy.

A new drug inspired by broccoli and kale

Scientists from the University of Manchester, led by Professor Rob Clarke, have found that a drug based on a natural compound found in broccoli, kale and other cruciferous vegetables could reverse or even prevent breast cancer becoming resistant to hormone therapy.

The new drug, SFX-01, blocks an important chain of reactions in breast cancer cells. In future, it could be added to hormone therapies to boost their effectiveness. Further research is now needed to determine who would benefit the most from the new drug and to test it further in clinical trials.

OUR WORK IN PROVIDING CARE AND SUPPORT



The Service Pledge for Breast Cancer

Our Service Pledge is a programme dedicated to improving breast cancer services. The Service Pledge brings patients, healthcare professionals and Cancer Alliances together to work in partnership to design and deliver a concrete action plan of improvements, for everybody's experience of breast cancer.

Breast Cancer Now helps NHS hospitals gather patient and staff feedback on their breast care service through surveys and focus groups. The feedback gathered is discussed to find practical ways of making meaningful improvements. Through listening and learning from each other, patients and healthcare professionals work in a true partnership.

To deliver our Service Pledge we draw on 17 years' experience of improving breast cancer services across the country. To date, over 120 breast services across the UK have worked with patients to develop their local Service Pledge, delivering over 400 improvements for primary and secondary breast cancer patients in the past five years. This year, we worked with five NHS hospitals in the East of England Cancer Alliance.

Helpline and Ask our Nurses

The breast care nurses on our Helpline and Ask Our Nurses email service provide tailored information and specialist support to anyone affected by breast cancer or with queries about breast health.

We give people the chance to talk openly in a safe and confidential space, allowing them to feel more informed, confident and supported about what they are going through. Our nurses work to ensure that their knowledge and information they provide is accurate and up-to-date.

OUR WORK IN POLICY, INFLUENCING AND CAMPAIGNING



Treatment, care and the coronavirus

To understand how the coronavirus was affecting the treatment and care of people with breast cancer, we launched an online survey in March 2020, inviting people to share their experiences. The survey had 580 respondents who were living with and affected by breast cancer.

Analysis of the responses indicated that the impact of the coronavirus included delays and cancellations of treatment, uncertainty around appointments and cancelled scans. We used the findings of the survey to raise concerns with the NHS and governments across the UK, including weekly calls with NHS England and through the Scottish Cancer Coalition and Welsh Cancer Alliance. Our media work also highlighted the impact that the outbreak was having on people with breast cancer, including those with secondary breast cancer.

In July 2020, we launched a further online survey to help quantify the extent to which the coronavirus had impacted on the treatment and care of people with breast cancer. Our survey, completed by 2,124 people with breast cancer, built on the work we did in March to further explore people's experiences. The findings from the survey fed into our policy, influencing and campaigning work during Breast Cancer Awareness Month (October 2020).

Access to drugs

We continued our work to ensure that clinically-effective drugs are approved for use on the NHS. We have inputted into all breast cancer drug appraisals by the National Institute for Health and Care Excellence (NICE) and the Scottish Medicines Consortium (SMC) to ensure the patient voice is heard.

In terms of secondary breast cancer drugs, this year saw the three drugs (palbociclib, ribociclib and abemaciclib) in combination with fulvestrant made available for use on the NHS across the UK.

We also undertook significant work to ensure an immunotherapy drug, atezolizumab (Tecentriq), in combination with nab-paclitaxel was approved by NICE for routine use on the NHS. This is a treatment for newly-diagnosed patients with triple negative locally advanced or secondary breast cancer whose tumours produce a marker called PD-L1. We are now inputting into SMC assessment of this

treatment to ensure it is made available to patients in Scotland.

We continue to be involved with several other appraisals for new secondary breast cancer drugs, including trastuzumab deruxtecan (Enhertu).

This year, a number of drugs have also been approved for early breast cancer. NICE and SMC approved pertuzumab (Perjeta) in combination with trastuzumab and chemotherapy as a new option after surgery for certain patients, to help further reduce the risk of recurrence or secondary breast cancer. This treatment was initially rejected for use by SMC in late 2019. We urged the Scottish Government, SMC and the manufacturer to work together to ensure this treatment is routinely available for NHS patients in Scotland. This treatment is now available in Scotland.

Neratinib was approved for routine use by NICE and SMC as an additional treatment option for certain patients with hormone positive, HER2 positive primary breast cancer after surgery and adjuvant treatment with trastuzumab.

Trastuzumab emtansine (Kadcyla) was also approved by NICE for routine use on the NHS for certain patients with HER2 positive primary breast cancer after their surgery. We are currently inputting into SMC appraisal of this treatment.

More broadly, we have been working to influence a significant review NICE is undertaking about the way it assesses drugs for use on the NHS. We are inputting into this to ensure that it covers key areas of concern we have about the way drugs are assessed and that assessments are fit for the future for the new types of breast cancer drugs in the pipeline.

The NHS workforce

The workforce is the backbone of the health service. But the breast cancer workforce has been under severe pressure for many years and this has been exacerbated as a

result of the coronavirus and the expected backlog of appointments.

This year, we were a member of an NHS England taskforce looking at ways to improve the recruitment and retention of the cancer workforce. Our focus has been around the breast imaging and diagnostic workforce and clinical nurse specialists, including those to support people with incurable breast cancer. Our influencing work in this area continues following the publication of the NHS People Plan 2020-21, to ensure the UK Government invests in staff, both now and in the future, that people affected by breast cancer rely on.

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Strategic objective four

TACKLING SECONDARY BREAST CANCER AND WORKING TO IMPROVE TREATMENTS, CARE AND SERVICES FOR THOSE AFFECTED

Long-term goals

Saving lives from breast cancer

Living well with breast cancer

OUR WORK IN RESEARCH



New project Looking for a new way to block breast cancer reaching the brain

Breast cancer that has spread to the brain can be particularly hard to treat and severely affects people's quality of life. Dr Damir Varešlija, our Walk the Walk Fellow, is looking at how gene switches in breast cancer cells might make them more likely to spread to the brain and hopes to find ways to stop this from happening.

Dr Varešlija will study both breast tumours and tumours from the brain that have been donated by people with breast cancer. He will compare these samples to find out which gene switches might be responsible for breast cancer spreading to the brain.

The hope is that this research could reveal new treatments to stop breast cancer spreading to the brain or to treat breast cancer if it has spread there. As treatment options are currently so limited, finding ways to do this could extend lives and vastly improve the quality of life for people living with secondary breast cancer in the brain.

New project Understanding the role of ARID1A gene in breast cancer spreading

Dr Jason Carroll from the University of Cambridge will investigate what role a particular gene has in breast cancer spreading around the body. He wants to understand if a class of drugs called BET inhibitors could be used to treat secondary breast cancer with changes in the ARID1A gene.

Up to 80% of breast cancers are oestrogen receptor positive (ER+) and are commonly treated with hormone therapies, such as tamoxifen and fulvestrant. Dr Carroll believes the ARID1A gene is important to allow these treatments to work. Changes in this gene may help breast cancers become resistant to hormone therapies and spread around the body. Understanding how ARID1A is involved in breast cancer spreading could open up new ways to stop it spreading or treat it when it does.

New project Investigating how the immune system is involved in breast cancer spreading to the lungs

Dr Leo Carlin from the Beatson Institute for Cancer Research in Glasgow wants to understand how cancer cells manipulate the

immune system in the lung to help tumours grow there. He will then use this knowledge to make immunotherapies as effective as possible.

The lungs are one of the most common places that breast cancer can spread to. Recent studies have shown that certain immune cells, called neutrophils, can help breast cancer to spread to the lungs. But neutrophils also play an important role in protecting us from infection. We must understand exactly how they are involved in secondary breast cancer in the lungs so that we can stop them from helping cancer, but allow them to fight infection.

This research could help us understand how the immune system lets breast cancer spread to the lung and help us ensure immunotherapies are given at the right time and in the right combination with other treatments, making them as effective as possible.

New project Stopping breast cancer becoming resistant to PARP inhibitors

Professor Kristijan Ramadan from the University of Oxford is hoping to understand why some breast cancers become resistant to a group of drugs called PARP inhibitors. PARP inhibitors, which Breast Cancer Now scientists helped to develop, are a type of targeted therapy that can be used to treat breast cancers with altered BRCA genes. But sometimes cancer can become resistant to these drugs.

Professor Ramadan and his team have found that a protein called SPRTN may be involved in one of the ways in which this switch happens and will be studying it further. By understanding the role that SPRTN plays in breast cancer's resistance to PARP inhibitors, this research could lead to a new treatment to be used when PARP inhibitors no longer work.

New drug could help overcome resistance in triple negative breast cancers

Scientists at the Breast Cancer Now Toby Robins Research Centre at The Institute of

Cancer Research, led by Professor Spiros Linardopoulos, have discovered that a new drug that blocks one of cancer's escape routes from chemotherapy could be used to treat aggressive breast cancers.

The drug, known as BOS172722, showed it could reinvigorate the response to chemotherapy in cancers that had become resistant, in both cells grown in the lab and mice. The first clinical trial of the new treatment is now underway in solid tumours including triple negative breast cancers, and the researchers believe it might also be effective against other fast-growing cancers including ovarian cancer.

Creating a LEGACY with a new blood test

Following new results from the Breast Cancer Now LEGACY Study, analysing secondary breast cancer tumours donated by patients following their death, researchers have developed a new blood test that could help track the growth of multiple tumours around the body and monitor how they are responding to treatment.

The new test relies on watching breast cancer's molecular clock, identifying how many times breast cancer cells have multiplied. Researchers think the blood test could be used to track how secondary tumours evolve over time and to monitor their response to a range of treatments, including chemotherapy, immunotherapy or targeted therapies, as well as radiotherapy.

With further development, the molecular clock blood test could also be used in the early detection of recurrence or spread of breast cancer following treatment, and may also be relevant for other forms of cancer.

Arthritis drugs could help prevent breast cancer from spreading to the bone

Scientists at the University of Manchester and University of Sheffield, funded by Breast Cancer Now with contributions from other collaborators, found that a molecule made by the bone, called IL-10, encourages breast cancer cells to grow into tumours.

Existing arthritis drugs, such as anakinra, could block this action.

Arthritis drugs are known to be well-tolerated and are widely used. It is important that we fully understand their effects on breast cancer before they reach clinical trials for patients. But researchers think such trials could start in two to three years. If these drugs are proven to work in clinical trials, in the future they could be used to prevent secondary breast cancer in the bone and save lives.

OUR WORK IN POLICY, INFLUENCING AND CAMPAIGNING



In Breast Cancer Awareness Month (October 2019), we launched The Unsurvivors, a bold new campaign calling for urgent changes to improve support, treatment and care for those living with incurable breast cancer. The campaign was developed with the help of a Secondary Breast Cancer Campaign Group we established to support this work, which was made up of 29 women from across the UK, all living with incurable breast cancer.

Over 71,000 people backed the campaign by adding their names to an open letter to health chiefs across the UK. The letter called for action to improve diagnosis and access to drugs, as well as for commitments to invest in recruiting and training Clinical Nurse Specialists and to undertake national audits to understand the number of people living with this disease and their experiences. The letter also asked for Health Secretaries and Ministers to meet Breast Cancer Now and secondary breast cancer patients to discuss their experiences and the issues they faced.

To support the campaign's launch, we released a news story about worrying delays to the diagnosis of secondary breast cancer and secured coverage in seven national titles. Our spokespeople and women living

with the disease were also interviewed on five national broadcast outlets, including BBC Radio 4 Today, ITV Lunchtime News and Sky News, helping to call for changes to ensure everyone receives a prompt diagnosis.

Channel 5 News also aired our powerful and emotive campaign film. We also secured more than 35 pieces of press coverage in Scotland.

As a result of our campaigning and open letter, meetings were held with Matt Hancock, Secretary of State for Health and Social Care and Jeanne Freeman, Cabinet Secretary for Health in Scotland. In March 2020, accompanied by some of the incredible women from our Secondary Breast Cancer Campaign Group, we met with the Cancer Minister, Jo Churchill, to deliver the letter and discuss some of the key issues raised by the campaign. Since our secondary breast cancer campaign launched we have made good progress in a number of areas:

Diagnosis

We are working with GatewayC, a free online cancer education platform for healthcare professionals, to develop a course to equip GPs with the knowledge to more confidently spot cases of secondary breast cancer, leading to a quicker diagnosis.

We have called on NICE to improve its guidance for GPs on recognising and referring suspected cancers, so it includes guidance on recognising potential cases of secondary breast cancer.

We have had positive conversations with the Scottish Intercollegiate Guidelines Network (SIGN) to develop guidelines for healthcare professionals on secondary breast cancer. We have been pushing for clearer guidance for healthcare professionals on the need to inform patients finishing treatment for primary breast cancer of the signs and symptoms of a recurrence, including secondary breast cancer.

We have been working with NHS England to better inform healthcare professionals on the signs and symptoms of secondary breast cancer.

Treatment and support

We have been talking to NHS England about how Clinical Nurse Specialists can be supported to develop their knowledge and skills to support patients with secondary breast cancer.

We welcomed the introduction of grants to support more nurses to become Clinical Nurse Specialists, as set out in the NHS People Plan 2020-21. However, we now need to see a comprehensive strategy to recruit and train even more nurses in the future, to ensure that all patients with secondary breast cancer have access to the care they need.

Alongside this, we have surveyed breast care nurses to find out more about secondary nursing provision in hospitals across the UK and the challenges nurses face. We will be using this to inform our campaigning in this area.

Data collection

We have continued to push for data to be collected on the number of people diagnosed with secondary breast cancer across the UK. Although in England it has been mandatory for hospital trusts to collect data on new diagnoses of metastatic breast cancer since 2013, this has not routinely happened in practice. This information is vital to ensuring that commissioners and healthcare providers have the information they need to effectively plan their services for people living with the disease.

This year, alongside members of our Secondary Breast Cancer Campaign Group, we have raised the issue of data collection with policy makers across the UK and are calling for a secondary breast cancer audit to be funded.

Strategic objective five

IMPROVING SUPPORT FOR PEOPLE AFFECTED BY BREAST CANCER WITH THEIR PHYSICAL AND MENTAL HEALTH AND THEIR EMOTIONAL WELLBEING

Long-term goals

Living well with breast cancer

OUR WORK IN PROVIDING CARE AND SUPPORT



Helpline and Ask Our Nurses

Our breast care nurses and highly trained staff on our free and confidential Helpline are here for anyone affected by breast cancer, their family and friends and healthcare professionals. Whether someone has just been diagnosed, has questions about a loved one, wants to find out more about the signs and symptoms or anything related to breast cancer – we are ready to provide tailored information and support over the phone.

This year we responded to 10,838 calls on our Helpline. While this is a 17.4% reduction in the number of calls compared to the previous year, in the first few months of the coronavirus pandemic less people were reporting symptoms of breast cancer, being referred to see a specialist, and many patients saw delays, cancellations or changes to their appointments and treatment. As we adapted to running our Helpline remotely for the first time, for four weeks from mid-March 2020, the Helpline

also had reduced opening hours (14 hours fewer per week).

We understand that for some people it can be difficult to talk to in person about breast cancer or breast health concerns. And that some people prefer to receive information in writing. Our confidential Ask Our Nurses service means people can also email our breast care nurses for support and information. In 2019–20, we responded to 2,127 enquiries to our nurses (down 5.1% on the previous year) and have seen the number of queries received through social media (predominantly Facebook) steadily increase.

We are always working hard to offer more ways for people affected by breast cancer to access support and information from our breast care nurses. This year, we have introduced more Instagram Live and Facebook Live sessions with our nurses on a wide-range of topics from being diagnosed with breast cancer when you have young children to side effects of hormone therapy to secondary breast cancer. During the year, we hosted 20 live broadcasts with an estimated combined audience of 1.6 million.

In March 2020, as a full UK lockdown was put in place, we began to hear about the severe impact the coronavirus was having on the lives and emotional wellbeing of so many people and families affected by breast cancer.

In the early days of the pandemic we were almost overwhelmed by the number of people calling our Helpline, which we have run remotely for the first time, and emailing our specialist breast care nurses for trusted information and support as they tried to understand how the coronavirus could affect them or their treatment.

We saw a huge surge in emails to our Ask Our Nurses service with questions and concerns about the coronavirus and breast cancer, with a 60% increase in enquiries in March 2020 (compared to March 2019). We received over 1,400 enquiries to our Helpline and Ask Our Nurses service in total in the first month of the pandemic. Over 50% of enquiries to our specialist nurses for support during this time were about the impact of the coronavirus.

Life-changing support services

Over the course of this year we have provided life-changing support to 4,523 people with primary or secondary breast cancer through community support services – including our Moving Forward courses and Living with Secondary Breast Cancer meet-ups – and our Someone Like Me telephone and email service.

At a time where the need to support people affected by breast cancer has never been greater, we had to take the difficult decision to suspend our community support services, many of which are run in partnership with NHS hospitals, until at least January 2021. This meant that by the end of July 2020, we were unable to deliver more than 130 vital support events and courses.

To continue providing as much life-changing support to people as possible, we adapted our Someone Like Me telephone and email service so that our trained volunteers

could provide a listening ear and emotional support to people diagnosed with primary breast cancer who may have been feeling isolated due to impact of the coronavirus. We also worked quickly to create online versions of our Moving Forward and Living with Secondary Breast Cancer services.

Moving Forward

Adjusting to life after treatment for primary breast cancer can bring a mix of highs and lows. Our award-winning Moving Forward courses give people the chance to share their experiences in a supportive environment, get tips from breast cancer experts and connect with others in a similar situation. Whether it's help managing physical and emotional changes or improving general wellbeing, people can get the support they need to move forward with their life. 1,953 people attended Moving Forward courses across the UK, meaning we could provide more than 23,400 hours of support.

Moving Forward Online

Thanks to the generous support of the players of the People's Postcode Lottery, we had been developing an online service to complement our award-winning Moving Forward courses. Drawing on the user research and testing we had done to date, we rapidly rolled out a digital alternative, called Moving Forward Online.

Hosted in a private area of our online Forum, and utilising existing features such as group-based discussion, private messaging and video embedding, participants of the course can explore and discuss a range of topics including:

- Adjusting and adapting
- Activity and energy
- Breast and body awareness
- Nutrition and breast cancer
- Lymphoedema
- Menopausal symptoms

Each topic contains a video presented by an expert speaker and will link to further information, as well as opportunities to

ask questions and share experiences with others.

By the end of July 2020, 342 people had signed up to access the Moving Forward Online course.

'I THOUGHT THIS WAS AN EXCELLENT, WELL PUT TOGETHER PRESENTATION WHICH OPENED UP A LOT OF THOUGHT AVENUES FOR ME. I FEEL MORE REASSURED ABOUT MY FEELINGS AND WHAT SORT OF THINGS MIGHT HELP ME THROUGH.'

Moving Forward Online participant

Start Moving Forward

Last year, we piloted a new service, Start Moving Forward. Following in-depth research into the group support needs of people affected by breast cancer, the courses are designed for people near the end of active treatment or who have recently finished treatment. It consists of a half-day informal session with a practical focus. People can meet others in a similar situation and benefit from expert information and guidance.

This year, 93 people attended a Start Moving Forward course.

Living with Secondary Breast Cancer

Our Living with Secondary Breast Cancer meet-ups give people the chance to meet others with a secondary diagnosis and get the support and information they need – whether that's questions about pain management, treatment and side effects or just want to talk openly about whatever's on their mind.

This year, our meet-ups supported 717 women living with secondary breast cancer, providing more than 6,700 hours of support in total.

Living with Secondary Breast Cancer Online

Following the successful launch of Moving Forward Online, we quickly took the learnings from it and applied them to launch an online programme for women living with secondary breast cancer.

It is a private group where people can watch videos and presentations by expert speakers, get specialist information and share their experiences, understanding and support with others dealing with the uncertainty and challenges that secondary breast cancer brings. Open 24/7, people can access information and support on a range of topics any time that suits them, including:

- Secondary breast cancer and coronavirus
- Emotional and psychological wellbeing
- Managing side-effects of treatment
- Activity and exercise
- Relaxation and mindfulness

By the end of July 2020, 120 people had signed up to join.

'IT'S DEFINITELY A LIFELINE FOR INFORMATION AND A 'COMMUNITY' FEELING FOR SECONDARY BREAST CANCER PATIENTS WHEN SO LITTLE ELSE EXISTS.'

Living with Secondary Breast Cancer Online participant

Someone Like Me

People don't have to face breast cancer on their own. Our Someone Like Me service matches people with one of over 200 support volunteers who have had a similar diagnosis or experience of primary breast cancer. Our volunteers provide support over the phone or email, whenever it suits – because sometimes the only person who can understand is someone who has been there.

This year, we matched 1,288 people with support partners – a 7.3% increase on last year.

'THE SUPPORT OFFERED THROUGH SOMEONE LIKE ME HAS BEEN ABSOLUTELY INVALUABLE TO ME. I STARTED OFF WITH A SPECIFIC QUESTION ABOUT MY TREATMENT AND OPTIONS BUT SPENT JUST AS MUCH TIME TALKING ABOUT THE EMOTIONAL AND PRACTICAL ASPECTS OF OTHER PARTS OF CANCER TREATMENT. PARTICULARLY DURING THE COVID-19 PANDEMIC, WHERE I CAN'T ACCESS THE USUAL SUPPORT SERVICES AVAILABLE TO THOSE WITH A CANCER DIAGNOSIS, I AM SO GRATEFUL THAT THIS SERVICE EXISTS AND THAT THE VOLUNTEERS GIVE UP THEIR TIME SO GRACIOUSLY.'

Someone Like Me user

Younger Women Together

Our Younger Women Together residential events give women under the age of 45 diagnosed with primary breast cancer the chance to meet, talk, share and be themselves with other women in a similar situation – away from the pressures of everyday life.

Breast cancer is much rarer in younger women and because some of the challenges younger women face are different, they can feel very isolated following a diagnosis. At each event women can get expert information and support around treatments, relationships, diet, exercise and fertility.

This year our Younger Women together events supported 130 young women with primary breast cancer. Our Younger Women Together with Secondary Breast Cancer events also supported 54 women.

Becca, the breast cancer support app

Our breast cancer support app, Becca, has been generously funded by the National Lottery Community Fund since December 2017. In that time, the app has been downloaded over 40,000 times, taking the total number of downloads to over 46,000 since Becca launched in May 2017.

Working closely with our technical partners, the app now provides personalised content based on a person's individual interactions with the topics and content on offer. This year, we also introduced a language switcher option for Welsh speakers to use Becca. This new feature generated huge interest, with support from some of our Welsh celebrity supporters including rugby icons Mike Philips and Leigh Halfpenny. We also secured a huge amount of media coverage with stories on BBC One's breakfast, lunchtime and evening news programmes in Wales, BBC Cymru online, BBC Radio Wales, BBC Radio Cymru and Welsh-language news channel Newyddion S4C.

Health and patient information

We produce a wide-range of health and patient information, in print and online,

covering many aspects of breast cancer and breast health. Information is written by experts, including our breast care nurses, and produced in several formats. Good quality health information can make people feel more informed and better able to make decisions about their treatment and care. We are a member of the Patient Information Forum (PIF) whose aim is to help people to find trustworthy health information. In 2019, we became one of the first organisations to be awarded the PIF TICK as a trusted information creator.

Our printed information is freely available and used in breast care units across the UK. From August 2019 to July 2020 we distributed 1,053,508 printed materials. This included the following publications:

- 97,857 – Breast pain
- 66,650 – Know your breasts: a guide to breast awareness and screening
- 63,259 – Know your breasts: a quick guide to breast awareness
- 47,192 – Exercises after breast cancer surgery
- 29,976 – Your operation and recovery
- 29,952 – Reducing the risk of lymphoedema
- 23,777 – Treating primary breast cancer

In the last year, we had 4,326,582 unique visitors to the Information and Support pages of our website, which makes up 60.5% of all visitors to the Breast Cancer Now website.

Coronavirus Hub

To respond to the ever-changing information and support needs of people affected by breast cancer during the pandemic, we developed a Coronavirus Hub on our website.

This provides continually updated frequently asked questions and information on changes to breast clinic appointments, alongside useful blogs on dealing with isolation and keeping busy during lockdown. It also brings together other relevant support we offer, such as our Helpline, Ask Our Nurses and

Someone Like Me services. Up to the end of July 2020 the hub and its related pages received more than 180,000 visits.

We published a range of personal stories from women whose treatment or quality of life had been impacted by the coronavirus in different ways, which we shared through our social media channels. These personal stories, together with coronavirus-related information from our hub, were shared many thousands of times and reached 1.5 million people on Facebook.

We also increased our number of live broadcasts on Facebook and Instagram. Moving from monthly to weekly, the broadcasts discussed a range of topics relating to care and research and answered questions from viewers on things like mental health, dealing with side effects and secondary breast cancer. During the peak of the pandemic, our broadcasts reached over 1.5 million people.

OUR WORK IN RESEARCH



New project Understanding how weight loss could improve breast cancer survival

Dr Rebecca Beeken from the University of Leeds wants to see if a diet programme that has previously been successful in other healthcare settings could benefit overweight women with breast cancer.

Women with excess weight who have been diagnosed with breast cancer also have a higher chance of their cancer returning or being diagnosed with breast cancer again. They are also more likely to die from breast cancer or other causes. However, since weight loss programmes are not currently prescribed as treatment, this leaves it up to the individual to lose weight themselves which can be very difficult.

Dr Beeken will see if this programme can effectively support women with breast cancer to lose weight, bringing better quality of life and improved health outcomes.

Cognitive behaviour therapy to cope with menopause symptoms

Professor Deborah Fenlon at Swansea University has shown that trained breast care nurses can successfully deliver group cognitive behavioral therapy (CBT) sessions to help women who have had breast cancer effectively manage night sweats and hot flushes.

We now know that hot flushes and night sweats can affect up to 85% of women after breast cancer treatment and they tend to be more severe than the symptoms experienced during natural menopause. These symptoms can have a significant impact on the quality of life with the potential to affect sleep, personal relationships and work. They can be so severe that some women stop taking their prescribed hormonal therapies such as tamoxifen.

Hormone Replacement Therapy (HRT) is not recommended for women living with or after breast cancer as it can increase the risk of the disease returning and there are currently no consistent routes of helping these women to live well. Having demonstrated that group CBT can be effectively delivered in the context of the NHS by breast care nurses, Professor Fenlon would like to see this intervention available to women throughout the NHS.

OUR WORK IN PUBLIC HEALTH AND WELLBEING



We Are Undefeatable

We Are Undefeatable is a movement to support and encourage people with a range of long-term health conditions to find ways to be active that work for them, not against them.

The campaign was developed in collaboration with the 15 leading health and social care charities that make up the Richmond Group of Charities. Breast Cancer

Now is a member of the group, which is a collective voice working together to better influence health and care policy, with the aim of improving the care and support of the 15 million people living with long-term conditions.

Breast Cancer Now supported the campaign by promoting it to our supporters and people affected by breast cancer. In February 2020, our Twitter posts for the campaign generated 12,235 impressions. The following month (March 2020), we extended our reach of the campaign further with Twitter content generating 34,535 impressions, our real-life stories on Facebook reaching 36,462 people and our Instagram story #StayInWorkOut receiving 1,769 views and 33 responses.

Further activity was due to happen between June and July 2020 but due to the coronavirus our support for the campaign was put on hold. Further support for the campaign is due to take place in September and October 2020.

Scottish Physical Activity and Long Term Conditions Coalition

Following on from our involvement and work on the Richmond Group of Charities, Breast Cancer Now were invited to join the newly established Scottish Physical Activity and Long Term Conditions Coalition in November 2019.

The coalition is composed of leading national health charities who support, represent and advocate for people with a range of long-term conditions in Scotland along with input and support from a range of national agencies and academic institutions with an interest in health and physical activity.

The aim of the group is to work together to positively influence national and local investment in physical activity opportunities for people with long-term conditions, advocating across policy areas, planning, provision and delivery of services. The group has already met three times since it

was established and had a public launch in October 2020.

OUR WORK IN POLICY, INFLUENCING AND CAMPAIGNING



Access to personalised care

The NHS Long Term Plan included an ambition that 'By 2021, where appropriate every person diagnosed with cancer will have access to personalised care, including needs assessment, a care plan and health and wellbeing information and support'.

This year, Breast Cancer Now fed into NHS England's Health and Wellbeing Checklist for Cancer Alliances, which aims to help Alliances deliver this for their patients.

To improve follow-up care for patients, we also fed into NHS England's handbook for implementing Personalised Stratified Follow-Up Pathways. This handbook is aimed at supporting local health and care systems to provide comprehensive, personalised follow-up care to their patients, including information of signs and symptoms of a recurrence, rapid access back to their cancer team, regular surveillance scans or tests, and support planning.

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To achieve our strategic objectives, we have been

RAISING OUR PROFILE AS THE TRUSTED ORGANISATION FOR EVERYONE AFFECTED BY BREAST CANCER SO THEY GET THE SUPPORT THEY NEED AND ARE INSPIRED TO GIVE SUPPORT TO MAKE POSITIVE CHANGE

Long-term goals

Preventing and detecting breast cancer better

Saving lives from breast cancer

Living well with breast cancer

OUR NEW BRAND



On 1 October 2019, the charity launched its new brand following the merger of Breast Cancer Care and Breast Cancer Now earlier in the year. We set out to create a bold brand, building on the heritage of our previous brands, to combine the power of life-changing care and world-class research. To mark the start of Breast Cancer Awareness Month, we launched our first brand campaign as a new charity. Named 'What we'll see', the campaign highlighted how breast cancer still creates fear, contrasted with the hope that Breast Cancer Now brings through the combined power of research and care.

With a mix of advertising our campaign was well seen and well received by the public. Our outdoor advertising – including 50 bus panel adverts and 500 London Underground panel adverts – were estimated to reach 3.1 million people. Our digital advertising across Facebook, Instagram, Twitter, YouTube, Bing and Spotify performed well reaching more

than 806,000 people. And our radio adverts were heard by over 26 million people. We also partnered with LBC Radio to create a special week of daily features discussing a different aspect of breast cancer with interviews each day. These were heard by over eight million people.

'ONE OF THE BEST SPECIAL REPORT WEEKS WE'VE EVER RUN ON LBC – THE CONTENT WAS REALLY INTERESTING & ENGAGING, THE INTERVIEWEES WERE ALL FANTASTIC AND PROFESSIONAL, AND IT HAS LANDED REALLY WELL WITH OUR LISTENERS.'

LBC

By the end of the campaign we had seen an increase in all of our brand metrics, particularly our brand awareness which reached its highest yearly score at 51.1% (20% higher than September 2019 and 53% higher than November 2019 – well exceeding our target of 45%).

OUR DIGITAL WORK



As part of the launch of our new brand, we brought together online health information and publications, research project descriptions, fundraising events registration, volunteer opportunities, and much more – across thousands of web pages from our two previous charities' websites – into one redesigned website at breastcancernow.org. Throughout 2019–20, the website received around five million visits.

As well as launching the new website, we also rebranded our online community Forum at forum.breastcancernow.org and Becca, our post-treatment breast cancer support app.

Since then, and thanks to the generosity of the players of the People's Postcode Lottery, we have continued to make improvements to our online donation and ticketing platform so people can safely and securely donate and take part in our fundraising events.

We have also revamped our In Memory website for people to remember loved ones, raising money to offer support for today and hope for the future to people affected by breast cancer.

We brought together social media audiences from our two previous organisations, combining them into Breast Cancer Now pages on Facebook, Instagram, Twitter and LinkedIn for a total following of around one million people.

By maintaining a warm and engaged audience on our Facebook page, between August 2019 and July 2020, we were delighted to receive nearly £1.4 million from people who created birthday and other fundraisers with their friends, family and followers.

OUR PRESS, PR AND CELEBRITY WORK



Breast Cancer Now is the media's go-to source for journalists wanting expert comment and opinion on breast cancer-related stories.

You will read about media coverage we have secured around the charity's policy, influencing and campaigning work, fundraising activity, and research throughout this report.

We have provided expert opinion to every national broadcast news outlet – including BBC Radio 4 Today, ITV News at Ten, Channel 4 News, Channel 5 News, Sky News, BBC News Channel, BBC Radio Scotland, BBC Radio Wales, Talk Radio and Radio 5 Live – discussing topics including HRT and breast cancer, secondary breast cancer, long-term effects of breast cancer, breast screening and breast awareness.

In Scotland, we have also responded to many different breast cancer issues such as the high-profile review of the Scottish Breast Screening Programme, variations in treatment across NHS Tayside, cancer incidence figures and decisions made on the availability of new breast cancer treatments on Scotland's NHS – all generating over 60 pieces of coverage across a variety of Scottish media outlets.

We have also leveraged wide-ranging PR opportunities to ensure that women affected by breast cancer know that they are not alone and are aware of the support that we can offer them. This has included more than 15 magazine features, three national newspaper features about returning to work, younger women diagnosed with breast cancer and how to breast check. Our breast care nurses have also featured in five consumer Q&A pieces of coverage, including in high-circulation titles such as *The People's Friend*, *Woman's Own* and *Fabulous*.

Since August 2019, we have also led with research news stories on topics from molecular understanding of cancer to repurposing existing drugs to help treat breast cancer, gaining national and regional coverage. We have also provided our expert opinion on 15 other research stories in this time.

Through the merger of Breast Cancer Now and Breast Cancer Care, we have strengthened the support we receive from high-profile names. Our Royal Patron is HRH Prince of Wales and we are now fortunate to work with six Vice-Patrons and 18 celebrity Ambassadors.

OUR VOLUNTEERS



People giving up their valuable time to support us is vital in helping to raise our profile and our income. In the past year, over 5,500 volunteers have dedicated their time across 60 different opportunities to support the charity. This includes 526 managed volunteers who support us on an ongoing basis, as well as fundraising and event volunteers, committees, campaigners and Breast Cancer Voices, who all give their time and skills to make positive change. Our support services, office and campaigning volunteers have dedicated nearly 4,500 hours of support to our cause in this financial year.

Our network of Breast Cancer Voices use their experience to help shape our work. They have the chance to get involved with a wide range of our work from giving views on our publications and materials, taking part in photoshoots and telling their stories in our communications to helping us campaign for change and raise awareness of our life-changing care and world-class research. In the past year, the network has grown by 8% to 2,700 members.

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To achieve our strategic objectives, we have been

INSPIRING MORE PEOPLE TO SUPPORT US FINANCIALLY TO ALLOW US GROW AND DEVELOP AS A SUSTAINABLE ORGANISATION TO MEET FUTURE DEMANDS

Long-term goals

Preventing and detecting breast cancer better

Saving lives from breast cancer

Living well with breast cancer

OUR FUNDRAISING



Corporate partnerships

Our flagship Asda Tickled Pink partnership is now award-winning, securing the Most Outstanding Partnership in the Fashion and Retail sector at the Business Charity Awards 2020. We are delighted that the partnership innovation, disruptive campaigns and commitment to inform and educate groups with unmet needs with our breast awareness messaging was noted by the judges as sector-leading.

Asda had their most successful Breast Cancer Awareness Month campaign in October 2019 with a record number of suppliers contributing through cause-related marketing. Coverage of our campaign photo shoot with celebrities, influencers and people affected by breast cancer appeared in The Mirror, That's Life, Closer, Bella and The Sun. Over the course of the year the partnership raised nearly £4 million in total despite the considerable challenges from the coronavirus. We also

welcomed CoppaFeel! to our partnership to reach more people in the UK with breast awareness messaging.

Marks and Spencer has continued to generously support Breast Cancer Now with a range of fundraising activities. A highlight included their annual Breast Cancer Awareness Month campaign, which raised over £250,000 through the sale of selected sleep and lounge wear and in-store fundraising. To support the campaign, we generated more than 40 pieces of press coverage, including features in The Sun and The Daily Mail.

Marks and Spencer's post-surgery lingerie and swimwear range also continues to support Breast Cancer Now, with just over £370,000 raised.

We launched a new partnership with Ann Summers to help start a conversation about issues related to sex and intimacy after a breast cancer diagnosis and raise awareness of the support that Breast Cancer Now can offer. This included releasing the

findings of our survey on breast cancer, sex and intimacy which was covered in The Sun, metro.co.uk, You magazine and huffingtonpost.co.uk. We also secured features of women affected by breast cancer talking about these issues in high-profile consumer publications such as Red and Cosmopolitan magazines.

The partnership has raised almost £100,000 in its first year through the sales of selected products, customer and employee fundraising.

In Summer 2020, we worked with ghd to launch their Take Control Now campaign, featuring 11 women diagnosed with breast cancer under the age of 35 who shared their experiences to remind people to check their breasts regularly and what to look for. As part of the campaign, ghd created a hairdryer and hair straighteners embossed with the words Take Control Now to serve as a reminder, and we secured press coverage in The Express, Fabulous (Sun), The Mirror, The Metro, Woman & Home and 20 regional titles.

Other highlights throughout the year include:

- Working alongside easyJet and Prostate Cancer UK to raise an incredible £218,000 through employee fundraising and on-flight donations with our 'Life Saving Journeys' campaign.
- Long-standing partner, Dorothy Perkins, continue to raise money through their hugely successful Pound on the Bill campaigns alongside raising over £80,000 through the sale of their Breast Cancer Awareness Month clothing range.
- We also welcomed new partnerships with Anglian Water and Careys, both committing to raising money through employee fundraising and engagement activities.

Events and community fundraising

Our incredible Event fundraisers trekked the desert, ran marathons, climbed mountains, and even walked over hot coals

for us, raising a wonderful £3.3 million. Our community supporters raised £2.2 million through everything from cake sales, quiz nights and gala balls to a huge range of other activities.

During Breast Cancer Awareness Month 2019, The Show continued to be a highlight in the events calendar. Through our shows in London and Glasgow, more than 50 courageous models stepped out onto the catwalk following a breast cancer diagnosis in front of a collective audience of over 2,500 people, raising over £400,000. We also returned to St Paul's Church for our Carols by Candlelight concert where our guests enjoyed mulled wine and roasted chestnuts while raising vital funds for Breast Cancer Now.

We raised over £200,000 through our fantastic Women V Cancer partnership, which saw hundreds of women taking to their bikes and cycling challenging routes across the UK and as far afield as Kenya and Thailand.

Our huge thanks go to the many volunteers who continue to support us with our fundraising collections and activities. Many also organised their own events, which raised nearly £250,000, including:

- A member of our East Dunbartonshire and Glasgow Group in Scotland who raised a staggering £10,000 by holding collections in local supermarkets and shopping centres.
- Our Wales Fundraising Committee who raised over £18,000 through various events in the year including a gala ball.

Our many Clubs and Societies also put on their own events throughout the year, such as:

- Ramside Golf Club who raised nearly £10,000 through their Ladies Captain and a charity golf day.
- Boobs and Brass, a group of local people in the Midlands, who came together and held musical events throughout the year raising just short of £7,000.

Those supporting us in memory of a loved one, in celebration or through a Tribute Fund raised an amazing £485,000 during the year. In April 2020, the charity Second Hope became part of the Breast Cancer Now family. Second Hope raises funds for secondary breast cancer research and due to the success of the charity since 2015, it now requires full-time management. Breast Cancer Now will continue to raise funds through Second Hope to fund vital research into secondary breast cancer research.

Mass participation events

Wear it pink is our flagship mass participation fundraising event where people across the UK wear pink at work, home or school, raise money and help us to make life-saving research and life-changing care happen. 2019 was a fantastic year, raising over £2 million – 20% more than the previous year.

Our high-profile press campaign featured in the Daily Mirror, Daily Express and on the front page of The Guardian. In total, we generated more than 560 pieces of coverage reaching 43% of all UK adults.

During July 2019, thousands of people generously held a Breast Cancer Now Afternoon Tea – gathering in their gardens, community centres and public spaces to raise money for our vital work. The event was a huge success, with supporters raising £718,000.

Individual Giving

Tens of thousands of individuals generously supported us through regular direct debits, cash, raffle or lottery donations. Their committed support enables us to plan for the future and provide continued, long-term funding which is so important to the scientists, nurses and services we work with.

Our regular supporters were very generous, despite difficult times, donating an incredible £11 million – the largest amount we have ever received from this group of committed supporters. They supported our

weekly lottery, purchased our scratch cards and merchandise and gave generous support to our appeals and raffles. All of this helped us continue our vital services, supporting people with breast cancer all over of the UK. In October 2019, the Breast Cancer Research Trust (BCRT) merged with Breast Cancer Now with the aim of funding world-class research to ensure the best outcomes for people affected by breast cancer, now and in the future. The BCRT will continue to exist as a separate charitable trust but has handed the responsibility for its running to Breast Cancer Now. Existing and future funds donated to the BCRT will be used to fund breast cancer research, particularly to establish Translational Research Fellowships aimed at improving the outcomes of people diagnosed with breast cancer or those at risk of the disease.

Legacies

This year was a more challenging year for legacy income, however we received £1.7 million from people who were kind enough to leave a gift in their will to support our vital work.

Philanthropy

We are hugely grateful to the A Bigger Bounce Committee for hosting their fourth A Bigger Bounce event. Thanks to their dedication, the evening was an enormous success raising over £1 million for vital breast cancer research.

The Pink Ribbon Ball celebrated its 25th Anniversary and, thanks to the energy and hard work of the Committee, raised over £240,000 for our support services and research.

We thank the Mary-Jean Mitchell Green Foundation for renewing their generous support towards Professor Nick Turner's pioneering research. We are incredibly grateful for their long-standing commitment to Breast Cancer Now and our Research Centre.

We are hugely grateful for the William Grant Foundation's focussed investment this year

to enable a step-change to our specialist support provision for people facing breast cancer in the North of Scotland.

We were delighted to receive a grant of £400,000 from long-standing partners Walk the Walk, thanks to the support of the thousands of walkers who took part in one of their iconic walking events. This grant will fund the non-salary costs of the cross-centre teams at the Breast Cancer Now Toby Robins Research Centre, providing expertise and equipment to support all the research teams based there.

We remain grateful to members of the Care Collective for their support of our community support services, especially those members who have now fulfilled the final year of their pledge.

Our work has also been supported by generous contributions from donors who wish to remain anonymous and we would like to take this opportunity to recognise and thank them all.

Fundraising during the coronavirus

The coronavirus has had a major impact on our ability to fundraise. Like many other charities, we had to postpone much of our fundraising activity. With a national lockdown and social distancing guidelines in place, national events were cancelled, face-to-face fundraising and many of the ways our supporters use to raise money became impossible, and fundraising with many of our high-street retail partner was scaled back or paused.

With the safety of our supporters and people affected by breast cancer at the forefront of our minds, we were forced to make some difficult decisions. This resulted in the cancellation of our Pink Ribbon Walks, a series of events that had been targeted to raise over £500,000, as well as planned treks, walks, zip slides and skydives. The story was the same across our sporting events. The autumn events season got off to a fantastic start with our largest ever Great North Run team of over 600 runners raising over £300,000. Quickly followed by various other events all over the UK and

overseas in the lead up to Christmas.

Unfortunately, the coronavirus drastically hit third party events and after the Bath Half and The Big Half running events at the beginning of March 2020, unfortunately no further events could proceed for the remainder of the financial year. This severely impacted our income, particularly a busy Spring season where most of our sporting event income is generated.

Taking opportunities

Despite this, the organisers of the London Marathon designed The 2.6 Challenge to replace our largest income event (expected to raise £750,000). We capitalised on this challenge and encouraged all our supporters to take part and support us at a time where we have never needed them more. They rose to the challenge and up and down the country, supporters raised a fantastic £114,000 across the weekend of the planned London Marathon 2020.

Riding the wave of virtual events, in June 2020 we launched Walk 300,000 – Breast Cancer Now's first fundraising product that utilised Facebook's algorithm and machine learning to reach an audience who were spending an increased amount of time online during lockdown. The event was a huge success, reaching nearly 1.5 million people on Facebook, gaining over 2,500 registrations (94% of participants being new to charity) and, ultimately, beat our income target of £37,500 with a total income of £357,768.

Our supporters in the community continued to do all they could to support us despite challenging times and raised over £1 million through their own events – including popular activities like cake sales and coffee mornings. Walking also continued to prove popular with many supporters hosting their own walking events throughout the summer months.

Other highlights included the women's group, Caravan Girls, who raised a massive £18,500 through the sale of calendars. And our 46 local groups raised vital funds and helped promote our breast cancer awareness messages.

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To achieve our strategic objectives, we have been

ESTABLISHING AND EMBEDDING OUR CULTURE - SHARED ORGANISATIONAL VALUES, BEHAVIOURS, TOOLS AND WAYS OF WORKING - TO ENABLE OUR PEOPLE TO WORK EFFICIENTLY AND EFFECTIVELY TO DELIVER IMPACT FOR PEOPLE AFFECTED BY BREAST CANCER

Long-term goals

Preventing and detecting breast cancer better

Saving lives from breast cancer

Living well with breast cancer

Fundraising portfolio analysis

Following our merger in April 2019, we undertook a comprehensive analysis of our newly combined fundraising portfolio. Considering more than just the financial element, the project has sought to recognise the wider value our fundraising activity offers to the organisation, enabling us to identify the most valuable and engaging ways in which our supporters want to get involved and raise funds for us. Through this project we also now have a greater understanding of just how many of our participants have been impacted by breast cancer in some way. This has deepened our understanding that for many, taking on a challenge, hosting an event, committing to a regular donation or however they choose to support us, is an important part of how Breast Cancer Now can be there throughout their breast cancer experience.

This important element of our analysis, combined with the data of our fundraising performance, has not only highlighted our strengths but, crucially, has pointed to where improvements in systems, practice and resourcing can be made for our operations as a united breast cancer charity. Over time, as the workings of our merger slot further into place, evidence from this project will influence and drive the rationale behind the development of our fundraising strategy aimed at delivering long-term and sustainable growth in income.

Staff Terms and Conditions Pay and Reward

This year, in consultation with staff, we have reviewed and developed a new set of terms and conditions and reward structures and processes that are fit for purpose, sector-leading, accessible to all and championed at the highest level of the organisation. This has included reviewing our pension

contribution structure and changing our pension provider.

Organisational Design

In response to the impact of the coronavirus on our income, we undertook a full review of the organisation's design to ensure the charity met required cost-savings and had a structure that was fit for purpose for the 2020-21 financial year. This included reducing the Senior Leadership Team members from seven to four and a full consultation process with staff, regrettably resulting in 45 redundancies and the closing of our Edinburgh office.

HR Policy Development

Following the merger, we have reviewed existing HR policies and procedures to put in place one set of policies and procedures for our new charity and established new and better learning and development opportunities.

Colleague engagement

This year we have improved our ability to share important, relevant and timely information with our colleagues across the UK through our intranet – developing the site to become a vital communication channel to update on news, achievements and upcoming events.

We also formed our new Staff Forum, made up of representatives from all areas across the charity, to share and gather feedback from colleagues and have used focus groups, workshops and regular surveys to engage colleagues in our work.

Volunteering

We have scoped the volunteering opportunities across our newly merged charity and produced an action plan to enable us to involve more volunteers, supported by expert staff, to deliver impact for people affected by breast cancer.

FINANCIAL REVIEW

This report covers the period from 1 August 2019 to 31 July 2020.

Income

During the year, total income, excluding furlough income and other income, rose to £38.4 million from £32.5 million – a 18.2% increase. However, the year reflects 12 months of income from the combined charity (having merged on 1 April 2019) and income being significantly impacted by the coronavirus, with fundraising income being over 16% lower than planned.

The main sources of income continued to be individual giving (£15.8 million), corporate partnerships (£6.3 million) and events and community fundraising (£5.5 million). You can find more detail about our financial performance in these areas, along with income generated from mass participation events, and legacy, major gifts and trust fundraising on pages 40 to 43.

Income from charitable activities increased due to royalties generated from the intellectual property from Breast Cancer Now-funded research activities.

Fundraising expenditure

Expenditure declined from £18.3 million to £17 million (7.6%), which reflected the fact that many of Challenge Events that usually take place between April and July were cancelled or postponed due to the coronavirus restrictions.

Charitable expenditure

Charitable expenditure, which includes all activities relating to research, provision of clinical and support services, policy and campaigning, and public health and information, increased from £21.4 million to £22.6 million (5.6%). This increase in expenditure reflects the combined charitable activities for 12 months. The

increase is lower than expected due to the impact of the coronavirus which resulted in the suspension of community (face-to-face) support services and a reduction in research activity.

Reserves

The net movement in funds was a deficit of £255,000. During the year, restructuring costs of £653,000 were incurred as part of the Charity's response to the coronavirus. A budget for 2020-21 has been agreed, reflecting an assessment of the impact on the Charity caused by the coronavirus, which will continue to ensure that the Charity is within the reserves policy set out below.

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

- Restricted funds arise as a result of the donor making a specific stipulation as to how the funds may be used. This is often relating to a specific activity or grant that may fall over a number of years and therefore the balance carried forward at the year-end is committed for those activities. Restricted funds stood at £2.2 million at the year-end.
- Unrestricted funds arise when no stipulation is made by the donor. The Trustees are responsible for ensuring these funds are spent in line with the Charity's objectives in a timely fashion. Unrestricted free reserves, excluding those held in intangible and tangible assets of £1.6 million, stood at £12.2 million at the year-end.

The minimum reserves level has been calculated taking into account the different risk factors that the organisation faces. During the year, the Trustees considered that a sufficient level of reserves for the organisation would be a minimum of three months operating costs. The current free reserves position of 4.5 months, based on budgeted expenditure for 2020-21, is in line with this policy. Total funds at the year-end were £16.1 million.

Financial Statements

The Charity's consolidated financial statements are set out on pages 61 to 82, including the results of the Charity's subsidiaries. The financial results of the Charity's regional groups are included within the consolidated results, as they operate within the same charity registration and are governed by the Charity's regional group constitution.

Subsidiary Trading Companies

The Charity had nine subsidiaries that are detailed in note 26 of the financial statements along with their results for the year. The companies are all wholly-owned subsidiaries. These subsidiaries carry out activities such as sub-licensing the Charity's logo and the Fashion Targets Breast Cancer logo to commercial partners and delivering certain charitable partnerships. BCN Research Ltd delivers the Breast Cancer Now Catalyst Programme. On 30 April 2020 Second Hope, a registered charity, became a subsidiary of the Charity (£163,000). The trading subsidiaries transfer any profits to the Charity under the Gift Aid scheme and their financial statements are consolidated into those of the charity.

Going concern

The financial impact of the coronavirus on the Charity and Group has been significant. During 2019-20, whilst some income streams were significantly lower, income from regular donors and our corporate partners continued to deliver an important contribution. Additionally, the cost savings we achieved in the four months to 31 July 2020 and the additional financial support through accessing the Government's Job

Retention Scheme ensured that we ended the year with a relatively small deficit and unrestricted free reserves of over £12 million and cash and cash equivalents of £22 million. Going forward we continue to respond to the pandemic through a reduction in the level of operations for 2020-21 and obtaining specific grant support from the National Lottery Covid-19 support fund to help mitigate the financial impact of the coronavirus during 2020-21.

The Board has reviewed the Charity and Group's activities and financial position together with factors likely to affect the future operations, including the impact of economic uncertainty on voluntary income. A review of a range of scenarios assessing the impact of the coronavirus on income projections have confirmed that appropriate actions can be implemented by the Trustees to maintain financial reserves within the policy range and it is therefore reasonable to expect the Charity and Group to have adequate resources to continue in operation for the foreseeable future, representing a period of at least 12 months from authorisation of the financial statements.

Given this satisfactory closing position, a prudent balanced budget for 2020-21, and present projections the Trustees consider it appropriate for the financial statements to be prepared on a going concern basis as outlined in the Statement of Trustees' Responsibilities.

Grants

The Charity funds research of the highest quality. We support the scientific community across the UK and Europe through multiple funding mechanisms, through our Tissue Bank and by supporting conferences and training courses. Some of our funding supports centres of excellence, as we have taken a strategic decision to build a critical mass of research in a small number of locations. These are based in higher education institutions and close to hospitals and breast units, working under one roof in integrated, multidisciplinary programmes of research.

Investments

The Charity holds investments in accordance with the Investment Strategy approved by the Trustees. The Finance and Investment Committee reviews this Investment Strategy on an annual basis. The Charity's investment objective is to maximise the return on its investments in a manner consistent with the Charity's overall strategy and values while meeting two requirements:

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

The investments are split into two portfolios which are managed by different investment managers; BlackRock and CCLA. In October 2019, the Goldman Sachs portfolio was disinvested, please see note 11 of the financial statements. The Finance and Investment Committee consider which are the most appropriate investment managers and as part of this, they consider their mandates, targets for performance and their ability to provide the appropriate support, diversification and performance required to achieve the investment strategy.

GOVERNANCE, STRUCTURE AND MANAGEMENT

The Board of Trustees of Breast Cancer Now presents its Annual Report and Accounts for the year ended 31 July 2020. These comply with the Companies Act 2006, Breast Cancer Now's governing document the Memorandum and Articles of Association, and Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standards applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2015).

Status

Breast Cancer Now is a company limited by guarantee, governed by Articles of Association, registered in England and Wales (number 9347608) and registered as a charity in England and Wales (number 1160558), Scotland (SC045584) and Isle of Man (number 1200). The Trustees listed on page 52 are also the Charity's Directors and have overall responsibility for the strategic direction and effective governance of the Charity. The Trustees met regularly during the year.

The legal and administrative details are listed on page 86.

Objects

The Charity's objects are to:

- Advance health, including the health of individuals suffering from cancer, patients receiving treatment, those convalescing following treatment by:
 - promoting activities which will assist with awareness, identification and prevention of cancer;
 - assisting those individuals who are disabled, infirm or in need of assistance;

- Advance the health of individuals by undertaking research into the causes and treatment of cancer on terms that the results of such research are published
- Advance public education in and understanding of the nature of cancer and its treatments, particularly (without prejudice to that generality) among sufferers of cancer and the families, friends and carers of such persons
- Promote such charitable objects concerned with medical research or the relief of sickness as the Directors shall in their absolute discretion determine.

Trustee recruitment, appointment, Induction and training

Trustees are appointed, by the Board, for an initial period of three years that can be extended for a further three-year term. A further one, two or three-year term can be agreed between the individual and the chairperson, or three other directors if deemed to be in the Charity's best interest.

Trustees contribute their services voluntarily and upon appointment will participate in a formal induction programme, including attendance at Breast Cancer Now events, visits to our offices and tours of our research units.

A skills audit of the Board is performed periodically to ensure the appropriate range of skills and expertise, including in areas of scientific knowledge, organisational strategy and management.

Board of Trustees

Members of the Board during the year were:

Jill Thompson ^{†*} **Chair**

Professor Trevor J Powles ^{*} **Vice Chair**

Pascale Alvanitakis-Guely ^{†*}

Mark Astaire ^{*}

Barbara Brown ^{*}

Christopher Copeland [~]

Susan Gallone ^{†*}

Sonia Gayle ^{†*}

Professor Adrian L Harris [~]

Dr Marion Lewis ^{†*}

Andrew Moore [~]

Ann Pickering ^{*}

[†] member of the finance and investment committee

^{*} member of the risk and governance committee

^{*} member of the people and culture committee

^{*} member of the science strategy committee

[~] member of the strategy committee

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

Chief Executive and management

Day-to-day management of the Charity is delegated to the Chief Executive assisted by the Senior Leadership Team (SLT), other staff and volunteers. The Board approves the delegation of financial authority through the Chief Executive to the staff with specific limits imposed within and approved scheme of delegation.

Senior Leadership Team (at 31 July 2020)

Delyth Morgan (Chief Executive)

David Crosby (Director of Services)
(in office until 4 June 2020)

Fiona Hazell (Director of Communications & Influencing) (in office until 4 June 2020)

Steve Lucas (Director of Fundraising & Partnerships) (in office until 1 October 2019)

Rachael Franklin (Director of Fundraising & Partnerships) (in office from 16 March 2020)

Polly McGivern (Director of Corporate Services) (in office until 17 April 2020)

Chay Champness (Director of Corporate Services) (in office from 6 April 2020)

Emma Pennery (Clinical Director)

Simon Vincent (Director of Research)

During the year, the SLT were regarded as the Charity's key management personnel per FRS102. Total earnings, including pension contributions, received by members of the SLT during the year were £824,059 (2018-19 £738,000).

As part of the restructuring due to the coronavirus, two directors were made redundant and severance payments which totalled £124,431 are included in these costs. In 2019-20, the Chief Executive, the highest paid member of staff, received remuneration of £122,378 (the assessment of the highest paid member of staff in the year excluded any termination benefits paid)

In response to the impact of the coronavirus on our income all members of the SLT agreed to a temporary reduction in their basic salary between April and July 2020.

Staff employee reward

From August 2019 to July 2020, Breast Cancer Now employed an average of 311 staff across the year. Our staff are fundamental to the work we do and we rely on them, our supporters, volunteers and trustees, and their amazing commitment, dedication and support they give to the charity.

Our People and Culture Committee, which superseded the Remuneration, Appointments and Nominations Committee from 1 April 2019, monitors Breast Cancer Now's people plan, our organisational and cultural development and reward strategy. This includes our pay and benefits policies, our pay structure and annual pay review process, all of which determine how pay levels are decided. We are committed to equality in our pay and benefits policy and aim to ensure that our levels of pay and range of benefits reflect the knowledge, skills, experience and competencies of our staff.

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

Executive pay is governed by the same rules and review processes as for all other staff, and we offer the same level of benefits to the executive team as to the rest of our staff. Jobs are evaluated and graded into a framework with pay bands that are transparent and published to all staff. Our Trustees freely give their time and do not receive payment for the work they do, other than travel expenses.

Information

We provide staff with information on matters of concern to them through various channels of communication including the intranet, newsletters, team briefings, and informal monthly face-to-face meetings led by our Chief Executive and Directors to update staff on important news, achievements and upcoming events.

Over the past year we have taken time to listen to how our staff feel about working for our organisation through staff and pulse surveys, focus groups and

workshops to engage staff in our work which has helped us shape our approach in learning and development; reward and policy development and to make Breast Cancer Now a great and safe place to work. Their feedback was instrumental in how we supported staff on furlough (70% of the workforce) and their return to work including the development of a virtual staff conference that ran over a week and included presentations from Executive Directors, Trustees, Associate Directors and our beneficiaries on the life-changing work being undertaken and our priorities for the coming year.

We recognise and appreciate the work our Staff Forum undertakes. The Staff Forum actively seeks and shares the voice of our staff with our Senior Management Team, our Organisational Management Team and our Trustees through the People & Culture Committee. During the last year, we have consulted with our staff through the Staff Forum on our new terms and conditions and pay structure; our HR policy portfolio and following the impact of coronavirus a restructuring programme unfortunately resulting in 45 redundancies. Their insight and constructive feedback on behalf of staff was pivotal in helping us undertake these programmes in an effective, collaborative and informed manner.

Equality

Breast Cancer Now acknowledges that everyone is unique with individual skills, knowledge and life experiences and everyone can make a valuable and positive contribution to the aims, values and strategic goals of the charity. We recognise the benefits of employing and engaging with individuals from all backgrounds and community groups as this helps build a workforce and business where creativity and valuing difference in others thrives. We are committed to a policy that ensures all current and potential staff members and volunteers are offered the same opportunities regardless of their sex, sexual orientation, age, disability, gender status (in cases of gender re-assignment), pregnancy

and maternity status, marital status, race and religion and belief (protected characteristics) and membership of or activities as part of a trade union, or social or economic status.

An Equality, Diversity and Inclusion (EDI) Group has been formed to steer the development, implementation and monitoring of an organisation wide approach to EDI, which will enable us to better reach and meet the needs of both internal and external stakeholders.

The Group is using management information, external expertise and insight from lived experiences, to enable us to work towards our strategic objectives. It will ensure diverse voices are listened to, foster an inclusive environment for all colleagues and ensure we are reaching and supporting diverse beneficiaries through our charitable work.

Our fundraising ethos

All of our donations come from the public and our partners. Whether someone donates, fundraises or volunteers for us, we aim to build strong, respectful and empowering relationships with all our supporters. It is only through the generosity of these individuals, companies and organisations that we can continue to fund our work.

We cannot reach our 2050 ambition alone, and so we take great pride in striving for fundraising excellence, maintaining high standards when handling information about our supporters, and respecting their preferences. As a new charity, we will continue to work hard on this as we bring together our fundraising and fundraisers from both Breast Cancer Care and Breast Cancer Now.

From April 2019, when we merged to become one charity, we brought together two fundraising programmes both focusing on providing excellent supporter experience and raising vital funds for research and care. The following principles guide our combined fundraising strategy and operations:

- We aim to inspire people to give or raise money for Breast Cancer Now
- We thank supporters appropriately and demonstrate the difference their money makes
- We keep supporters' data secure and do not sell or share it for marketing purposes
- We manage agencies working for us closely and demand high standards of them to ensure supporters and the wider public do not feel pressured to give and are treated with respect at all times
- We listen to our supporters and learn from what they tell us, what they respond to and how they want to be communicated with – so we can continually improve
- We have developed a Vulnerable Persons' Policy which our Fundraising staff and agencies working on our behalf are required to adhere to, to ensure we fundraise appropriately and vulnerable people are respected and protected.

Breast Cancer Now continues to have a cross-organisational focus on ensuring that we are working in a way which is compliant with law and regulations governing charity fundraising, including GDPR, and which meets the expectations of our supporters. This focus ensures we are adapting to any changes in the law or in best practice and continuously consider what is important to our supporters with regards to their privacy and data.

Breast Cancer Now employs a number of carefully selected professional fundraising agencies to solicit donations on our behalf by door-to-door, private site and telephone and SMS channels. We manage our agencies closely and require them to be compliant with the Fundraising Regulator's Code of Fundraising Practice and all regulations governing charity fundraising. To ensure the agencies we engage are operating to the required standards, we carry out appropriate and regular monitoring which includes one or more of the following as appropriate: shadowing individual fundraisers, mystery shopping and caller monitoring.

Breast Cancer Now is registered with the Fundraising Regulator, has paid the levy and adheres to the Code of Fundraising Practice. Breast Cancer Now fully complies with the requirements of the Fundraising Preference Service.

Breast Cancer Now's fundraising activities and compliance with fundraising regulations and best practice are closely scrutinised by our Risk and Governance Committee, which in turn reports to our Board of Trustees.

Complaint Handling

At Breast Cancer Now, we aim to maintain high standards in all our work, but we recognise that there may be instances where we don't get it right, or meet the expectations of our supporters, despite our best intentions. If, and when, this occurs we will always act quickly to manage, resolve and communicate the issues, and review the measures we have in place to prevent any reoccurrences.

From July 2019 to August 2020 we received and responded to 119 complaints, which is a 55% decrease on the number of complaints compared to last year. The most common source of complaints was around our face-to-face fundraising activity. Other complaints across the year covered our direct marketing, fundraising from business and volunteer-led fundraising. Whilst the number of complaints we received is small compared to the overall reach, each complaint has been thoroughly investigated and corrective action and feedback to improve the work that we do has been taken as appropriate. We continue to review our policies and procedures to ensure that are robust and serve our supporters how they need.

ADVISORY BOARDS AND COMMITTEES

Finance and Investment Committee

The Finance and Investment Committee is responsible for advising the Board on short and long-term financial planning, including review of financial plans, budgets and proposals, as well as playing a governance role with the review of financial policies, processes and controls and advising on the appointment of external auditors. The committee also sets and recommends the investment strategy to the Board for approval and oversees the management and performance of investments. The Finance and Investment Committee met three times during the year.

Risk and Governance Committee

The Risk and Governance Committee set the risk management process and ensure that strategic risks are identified, reported to the Board and, where necessary, highlighted to other committees, such as the finance and investment committee.

The Committee ensures that risk priorities and relevant actions are highlighted to the Senior Leadership Team for further action by their directorates. The Committee also oversees any material internal controls change programme and ensures recommendations are implemented. The Committee recommends the charity's risk management appetite and policy to the Board for approval and reviews policies which may result in significant reputational risk. The Risk and Governance Committee met once during the year.

People and Culture Committee

The People and Culture Committee has delegated responsibility from the board for the remuneration and reward framework across the organisation and appointment of Trustees, and Senior Leadership including the Chief Executive. The Committee also has strategic oversight of the charity's people plan. The People and Culture Committee met once during the year.

Science Strategy Committee

The Science Strategy Committee is responsible for making recommendations to the Board as to which research projects should be funded and plays a key role in ensuring that our research supports our strategic aims. The Science Strategy Committee met once during the year.

Strategy Committee

The Strategy Committee is a temporary committee assisting the Board in developing the charity's strategy and framework to accurately measure the impact of the charity. The Committee also reviews strategic changes to the charity's activities prior to consideration by the Board or its committees. The Strategy Committee met three times during the year.

Chairs' Committee

The Chairs' Committee enables decisions to be made between Board meetings where they are of sufficient urgency that it would be detrimental to wait until the next Board meeting. Due to the coronavirus, the Chairs' Committee to meet five times during the year.

Risk

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

We operate a process of risk identification and management that is embedded into the governance of the organisation. Central to this are our risk registers, which are regularly reviewed and updated by the Senior Leadership Team, the Trustees and considered by the Risk and Governance Committee which normally meets twice a year.

We also regularly adapt the content to ensure we capture our understanding of our biggest risks and what we need to do

to manage them. The registers are a living document that continues to change over time in response to internal and external stimuli.

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

The Trustees reviewed Breast Cancer Now's key risks and are satisfied that risk management has been undertaken appropriately and that adequate systems were in place to manage risk. The Senior Leadership Team are responsible for the day-to-day risk management and ensuring that each directorate is aware of, and appropriately manages, their risks. We have considered the key risks facing the charity in the year ahead and have assessed the impact of the coronavirus across the range of strategic risks than as a specific risk itself. These strategic risks and mitigations to manage them are:

Risk	Mitigation
Coronavirus (COVID-19) pandemic	
<p>Inability to deliver our vision to those affected by breast cancer due to the coronavirus pandemic.</p>	<ul style="list-style-type: none"> • Business continuity focus by Trustees, Senior Leadership team, led and co-ordinated by Chief Operating Officer. • Agile governance arrangement, enabling quick and effective decision making. • Robust IT infrastructure enabling staff to work remotely. • Agile implementation of digital solutions.
Fundraising Income	
<p>Significantly reduced income from fundraising activities as a result of the coronavirus pandemic. This includes the cancellation and postponement of fundraising events, the challenging economic environment, increased competition from other charities and any other social, political or economic event, (e.g. impact of a No Deal Brexit).</p> <p>Failure to anticipate or respond to significant changes in supporter behaviour and preferences arising from the coronavirus pandemic and other social and economic trends.</p>	<ul style="list-style-type: none"> • Acceleration and expansion of online fundraising products including both pivoting existing events to virtual (Tour de Law) and initiating new Facebook based virtual events (e.g. Walk 400,00, Run 100,000). • Accessing opportunities for coronavirus emergency funding from major funders. • Ensuring close relationships with major partners and funders to align strategic priorities and focus on opportunity for fundraising in challenging environment. • Strong and powerful external communications about the impact of the coronavirus on Breast Cancer Now and people affected by breast cancer to build the case for giving. • Accessing the Government Job Retention Scheme fund. • Increased monthly financial monitoring focusing on cash collection, measures to reduce costs and maximising existing income streams. • Ongoing review of performance to allow flex to activity to build on strong performance. • Focus on development of new and additional sources of income. • Acceleration of increased delivery of fundraising, supporter care and services via online technology. • Structural changes to team to develop centralised Strategic Insight function to increase focus on supporter insight and performance. • External horizon scanning to understand and respond to short and longer trends and attitudinal changes.
Research activities	
<p>Inability to maintain our commitments to our long-term research activities or to fund future research, because of lower levels of income thanks to the coronavirus pandemic and other economic factors.</p>	<ul style="list-style-type: none"> • Temporary pausing of schemes for new grants. • Close communication with those researchers to whom we provide long-term support, to discuss ways of mitigating the impact of reductions in budgets. • Provision of supplements to grants funded in previous years to support them during coronavirus disruption and ensure that research we have already committed to can be completed.

Risk	Mitigation
Inability of existing research to continue due to disruption at research host institutions or loss of key researchers.	<ul style="list-style-type: none"> • Close communication with researchers and senior administrative staff at key host institutions to monitor their ability to support the research we fund. • Long-term commitment to key strategic research activities to ensure stability for research staff and support for research training.
Governance and compliance	
<p>Inability to deliver our strategic objectives and respond to a number of risks which are heightened during the coronavirus pandemic:</p> <ul style="list-style-type: none"> • Serious data security breach (from a cyber-attack or non-compliance with GDPR). • Lack of compliance with regulations in relation to our fundraising practices. • Failure to comply with legal or regulatory requirements. 	<ul style="list-style-type: none"> • Comprehensive governance structure with Board Committees specifically in place to review governance and compliance. • Dedicated Compliance Officer and Governance team. • Regular training for staff. • Enhanced performance management programme for staff. • External peer review of research. • IT policies and procedures including vulnerability scanning and penetration testing and anti-virus software.
Staff and volunteers	
Failure to address the health and wellbeing of employees and volunteers and support their ability to perform their roles during the coronavirus pandemic and beyond.	<ul style="list-style-type: none"> • Regular staff updates via virtual platforms including a staff conference. • Additional guidance and support for staff around remote working. • Ongoing engagement with volunteers. • Temporary closure of offices in accordance with Government guidance. • Risk assessment for the re-opening of some offices for a pool of staff to ensure continued wellbeing. • Engagement of staff through surveys to identify concerns of staff about return to the office and working remotely. • Expansion and re-focus of diversity initiatives across the Charity. • Development of online learning and development platform.
Financial sustainability	
Failure to effectively manage our financial resources to ensure we can continue to support those affected by breast cancer during the coronavirus pandemic and beyond.	<ul style="list-style-type: none"> • Prudent 2020-21 budget and reserves policy. • Enhanced cashflow forecasting to 31 December 2021. • Agile fundraising strategy with quarterly reviews around performance to date and future pipeline. • Introduction of monthly updates to year-end forecast.

STATEMENT OF TRUSTEES' RESPONSIBILITIES

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

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

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

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles in the Statement of Recommended Practice: Accounting and Reporting by Charities (2015);
- make judgments and estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards, comprising FRS 102, have been followed, subject to any material departures disclosed and explained in the financial statements; and

- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in business.

The Trustees are responsible for keeping adequate accounting records that are sufficient to show and explain the charitable company's transactions and disclose with reasonable accuracy at any time the financial position of the charitable company and the group and enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charitable company and the group and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

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

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

(a) so far as the Trustee is aware, there is no relevant audit information of which the company's auditors are unaware; and

(b) they have taken all the steps that they ought to have taken as a Trustee in order to make themselves aware of any relevant audit information and to establish that the company's auditors are aware of that information.



Sue Gallone, Trustee

INDEPENDENT AUDITORS' REPORT TO THE MEMBERS AND TRUSTEES OF BREAST CANCER NOW

REPORT ON THE AUDIT OF THE FINANCIAL STATEMENTS

Opinion

In our opinion, Breast Cancer Now's Group's financial statements and parent charitable company financial statements (the "financial statements"):

- give a true and fair view of the state of the Group's and of the parent charitable company's affairs as at 31 July 2020 and of the Group's incoming resources and application of resources, including its income and expenditure, and cash flows, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice (United Kingdom Accounting Standards, comprising FRS 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland", and applicable law); and
- have been prepared in accordance with the requirements of the Companies Act 2006, the Charities and Trustee Investment (Scotland) Act 2005 and regulations 6 and 8 of the Charities Accounts (Scotland) Regulations 2006 (as amended).

We have audited the financial statements, included within the Annual Report and Accounts (the "Annual Report"), which comprise: the Group and parent charitable company balance sheets as at 31 July 2020; the consolidated statement of financial activities, incorporating an income and expenditure account, consolidated cash flow statement for the year then ended; and the notes to the financial statements.

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) ("ISAs (UK)") and applicable law. Our responsibilities under ISAs (UK) are further described in the Auditors' responsibilities for the audit of the financial statements section of our report. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Independence

We remained independent of the charitable company in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, which includes the FRC's Ethical Standard and we have fulfilled our other ethical responsibilities in accordance with these requirements.

Conclusions relating to going concern

We have nothing to report in respect of the following matters in relation to which ISAs (UK) require us to report to you when:

- the Trustees' use of the going concern basis of accounting in the preparation of the financial statements is not appropriate; or
- the Trustees have not disclosed in the financial statements any identified material uncertainties that may cast significant doubt about the Group's and parent charitable company's ability to continue to adopt the going concern basis of accounting for a period of at least twelve months from the date when the financial statements are authorised for issue.

However, because not all future events or conditions can be predicted, this statement is not a guarantee as to the Group's and parent charitable company's ability to continue as a going concern.

Reporting on other information

The other information comprises all of the information in the Annual Report other than the financial statements and our auditors' report thereon. The Trustees are responsible for the other information. Our opinion on the financial statements does not cover the other information and, accordingly, we do not express an audit opinion or, except to the extent otherwise explicitly stated in this report, any form of assurance thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained

materially misstated. If we identify an apparent material inconsistency or material misstatement, we are required to perform procedures to conclude whether there is a material misstatement of the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report based on these responsibilities.

With respect to the Strategic Report and Trustees' Annual Report, we also considered whether the disclosures required by the UK Companies Act 2006 have been included.

Based on the responsibilities described above and our work undertaken in the course of the audit, ISAs (UK) require us also to report certain opinions and matters as described below.

Strategic Report and Trustees' Annual Report

In our opinion, based on the work undertaken in the course of the audit the information given in the Trustees' Annual Report, including the Strategic Report, for the financial year for which the financial statements are prepared is consistent with the financial statements; and the Strategic Report and the Trustees' Annual Report have been prepared in accordance with applicable legal requirements.

In addition, in light of the knowledge and understanding of the Group and parent charitable company and its environment obtained in the course of the audit, we are required to report if we have identified any material misstatements in the Strategic Report and the Trustees' Annual Report. We have nothing to report in this respect.

Responsibilities for the financial statements and the audit

financial statements

As explained more fully in the Statement of Trustees' Responsibilities set out on page 59, the Trustees are responsible for the preparation of the financial statements in accordance with the applicable framework and for being satisfied that they give a true and fair view. The Trustees are also responsible for such internal control as they determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

Auditors' responsibilities for the audit of the financial statements

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

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

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at: www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditors' report.

Use of this report

This report, including the opinions, has been prepared for and only for the charity's members and Trustees as a body in accordance with section 44(1)(c) of the Charities and Trustee Investment (Scotland) Act 2005 and the Companies Act 2006 and regulations made under those Acts (regulation 10 of the Charities Accounts (Scotland) Regulations 2006 (as amended) and Chapter 3 of Part 16 of the Companies Act 2006) and for no other purpose. We do not, in giving these opinions, accept or assume responsibility for any other purpose or to any other person to whom this report is shown or into whose hands it may come save where expressly agreed by our prior consent in writing.

OTHER REQUIRED REPORTING**Matters on which we are required to report by exception**

Under the Companies Act 2006 and the Charities Accounts (Scotland) Regulations 2006 (as amended) we are required to report to you if, in our opinion:

- we have not received all the information and explanations we require for our audit; or
- adequate and proper accounting records have not been kept by the parent charitable company or returns adequate for our audit have not been received from branches not visited by us; or
- certain disclosures of Trustees' remuneration specified by law are not made; or
- the parent charitable company financial statements are not in agreement with the accounting records and returns.

We have no exceptions to report arising from this responsibility.

Frances Cucinotta (Senior Statutory Auditor)
for and on behalf of PricewaterhouseCoopers LLP
Chartered Accountants and Statutory Auditors
London

29 March 2021

CONSOLIDATED STATEMENT OF FINANCIAL ACTIVITIES

(incorporating an income and expenditure account)
For the year ended 31 July 2020

	Note	Unrestricted Funds £000	Restricted Funds £000	Total 2020 £000	Unrestricted Funds £000	Restricted Funds £000	Total 2019 £000
Income from:							
Donations and legacies	2	19,186	3,816	23,002	18,388	3,069	21,457
Charitable activities		5,579	-	5,579	3,842	-	3,842
Other trading activities	3	9,013	481	9,494	6,102	853	6,955
Investments		276	-	276	252	-	252
Other income	24	-	-	-	9,269	6	9,275
Furlough income	25	1,686	-	1,686	-	-	-
Total income		35,740	4,297	40,037	37,853	3,928	41,781
Expenditure on raising funds							
	4	17,032	-	17,032	18,292	-	18,292
Expenditure on charitable activities	5	19,344	3,275	22,619	15,585	5,805	21,390
Total expenditure		36,376	3,275	39,651	33,877	5,805	39,682
Net investment gain/(loss)							
Net realised investment gain/(loss)		8	-	8	(36)	-	(36)
Net unrealised investment (loss)/gain		(649)	-	(649)	842	-	842
Total net investment (loss)/gain		(641)	-	(641)	806	-	806
Net (expenditure)/income		(1,277)	1,022	(255)	4,782	(1,877)	2,905
Other recognised gains/(losses):							
Other recognised gains	24	-	-	-	2,672	-	2,672
Net movement in funds		(1,277)	1,022	(255)	7,454	(1,877)	5,577
Funds brought forward	19	15,094	1,261	16,355	7,640	3,138	10,778
Funds carried forward	19	13,817	2,283	16,100	15,094	1,261	16,355

The Consolidated Statement of Financial Activities is for the Group as a whole. Total income for the year for the parent charity was £40,473,000 (2019: £41,991,000).

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

BALANCE SHEETS

As at 31 July 2020

	Note	Group 2020 £000	Group 2019 £000	Charity 2020 £000	Charity 2019 £000
Fixed assets					
Intangible assets	9	643	373	643	373
Tangible assets	10	1,000	1,418	1,000	1,418
Investments	11	8,522	15,279	8,522	15,279
Total Fixed assets		10,165	17,070	10,165	17,070
Current assets					
Current investments	12	-	4	-	4
Stock		14	25	-	-
Debtors	14	7,312	12,547	9,791	11,751
Cash at bank and in hand		22,086	12,027	11,666	3,867
Total Current assets		29,412	24,603	21,457	15,422
Creditors: amounts falling due within one year	15	(15,921)	(17,801)	(10,891)	(12,966)
Net current assets		13,491	6,802	10,566	2,456
Total assets less current liabilities		23,656	23,872	20,731	19,526
Creditors: amounts falling due after more than one year	16	(7,039)	(6,864)	(4,127)	(3,095)
Provisions for liabilities	18	(517)	(653)	(517)	(653)
Net assets		16,100	16,355	16,087	15,778
Unrestricted Funds	19	13,817	15,094	13,804	14,517
Restricted Funds	19	2,283	1,261	2,283	1,261
Total Funds		16,100	16,355	16,087	15,778

The notes on pages 66 to 85 form part of these financial statements. The Charity's net movement in funds for the year was an increase of £0.3m (2019: increase of £5.0m)

The financial statements of Breast Cancer Now (Company No: 9347608) were approved by the Board of Trustees and authorised for issue on 29 March 2021 and were signed on its behalf.



Susan Gallone
Trustee

CONSOLIDATED CASH FLOW STATEMENT

For the year ended 31 July 2020

	Note	£000	Group 2020 £000	Group 2019 £000
Cash flows from from operating activities:				
Net cash (used)/generated in operating activities	a		4,226	(6,504)
Cash flows from investing activities				
Dividends, interest and rents from investments		146	78	
Cash acquired from Breast Cancer Care	24	-	5,546	
Purchase of tangible fixed assets	10	(48)	(374)	
Purchase of intangible fixed assets	9	(467)	(196)	
Proceeds from sale of investments	11	6,198	5,567	
Net cash generated investing activities			5,829	10,621
Change in cash in the reporting period			10,055	4,117
Cash at the beginning of the reporting period			12,031	7,914
Cash at the end of the reporting period	b		22,086	12,031
(a) reconciliation of net incoming resources to net cash flow from operating activities				
			Group 2020 £000	Group 2019 £000
Net (deficit)/income for the reporting period (as per the Statement of Financial Activities)			(255)	5,577
Depreciation and amortisation	9,10		615	450
Gain on acquisition of Breast Cancer Care	24		-	(11,947)
Loss on disposal of fixed assets			48	-
(increase)/decrease in provisions			(136)	96
(Realised gains)/losses on investments	11		(8)	36
Unrealised loss/(gain) on investments	11		649	(842)
Dividends, interest and rents from investments			(276)	(252)
Investment fees deducted from portfolio	11		48	35
Decrease in stock			11	31
Decrease/(increase) in debtors			5,235	(2,125)
(Decrease)/Increase in creditors			(1,705)	2,437
Net cash generated from/(used in) operating activities			4,226	(6,504)
(b) Analysis of cash and cash equivalents				
			Group 2020 £000	Group 2019 £000
Cash in hand			20,059	10,515
Notice deposits (less than 3 months)			2,027	1,512
Long-term deposits			-	4
Total cash and cash equivalents			22,086	12,031

NOTES TO THE FINANCIAL STATEMENTS

For the year ended 31 July 2020

1. ACCOUNTING POLICIES

Charity Information

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

On 31 October 2019, the Charity completed a Deed of Gift with Breast Cancer Research Trust. The gift has been recognised in the Statement of Financial Activities in the financial year. On 30 April 2020, the Charity became the sole Corporate Trustee of Second Hope (Registered Charity No:1163205) a charity committed to supporting research in secondary breast cancer. Second Hope has been consolidated in the financial statements as a subsidiary.

Basis of preparation

These financial statements are prepared under the historical cost convention, as modified by the inclusion of investments at fair value and in accordance with Financial Reporting Standard 102 ('FRS 102') 'The Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland' and with the Statement of Recommended Practice 'Accounting and Reporting by Charities' FRS 102 as revised in 2019 ('the SORP 2019'), together with the Companies

Act 2006, the Charities Act 2011, the Charities and Trustee Investment (Scotland) Act 2005 and the Charities Accounts (Scotland) Regulations 2006.

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

Going concern

The financial impact of the coronavirus on the Charity and Group has been significant. During 2019–20, whilst some income streams were significantly lower, income from regular donors and our corporate partners continued to deliver an important contribution. Additionally, the cost savings we achieved in the four months to 31 July 2020 and the additional financial support through accessing the Government's Job Retention Scheme ensured that we ended the year with a relatively small deficit and unrestricted free reserves of over £12 million and cash and cash equivalents of £22 million. Going forward we continue to respond to the pandemic through a reduction in the level of operations for 2020–21 and obtaining specific grant support from the National Lottery Covid-19 support fund to help mitigate the financial impact of the coronavirus during 2020–21.

The Board has reviewed the Charity and Group's activities and financial position together with factors likely to affect the future operations, including the impact of economic uncertainty on voluntary income. A review of a range of scenarios assessing the impact of the coronavirus on income projections have confirmed that appropriate actions can be implemented by the Trustees to maintain financial reserves within the policy range and it is therefore reasonable

to expect the Charity and Group's to have adequate resources to continue in operation for the foreseeable future, representing a period of at least 12 months from authorisation of the financial statements.

Given this satisfactory closing position, a prudent balanced budget for 2020-21, and present projections the Trustees consider it appropriate for the financial statements to be prepared on a going concern basis as outlined in the Statement of Trustees' Responsibilities.

Consolidation

The financial statements consolidate the Charity and its trading subsidiaries ("Group"). The income and expenditure from the date of acquisition has been incorporated in these financial statements. A subsidiary is an entity controlled by the Group. Control is the power to govern the financial and operating policies of an entity so as to obtain benefits from its activities.

Exemptions

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

Business combinations

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

Since the Charity is a charitable company, it is subject to the restriction in the Companies Act Accounts Regulations that prohibits the recognition of unrealised

gains in the profit and loss account. In circumstances where the fair value of the assets received exceeds the fair value of the liabilities assumed, only the element of the gain which relates to the realised profits is recognised as 'Other income' in the SOFA. The element of the gain which relates to unrealised profits is recognised as 'Other recognised gains' in the SOFA.

Funds

The following funds are held by the Charity:

*Unrestricted funds are donations and other income receivable or generated from the objects of the Charity without further specified purpose and are available as general funds.

*Restricted funds arise when conditions are imposed by the donor, or by the specific terms of the appeal, and can only be spent on the activities specified.

The Charity relies heavily on donations and legacies, which fluctuate year on year. In order to continue day-to-day operations, the Trustees have identified that a minimum level of unrestricted funds should be maintained. This minimum level of funds is kept under annual review by the Trustees in line with the reserves policy as described in the Trustees report (page 48).

Income

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

Donations

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

Legacies

Legacies are recognised when capable of financial measurement, receipt is probable and where there are no conditions that

still need to be fulfilled. Pecuniary legacies are recognised once notification has been received and probate has been granted. Residuary legacies are recognised once notification has been received, probate has been granted and they can be reliably measured, usually on receipt of estate accounts.

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

Lotteries

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

The Charity receives proceeds of lotteries held by the People's Postcode Lottery ('PPL'). The Charity has no ability to alter the price of tickets, determine the prizes or reduce the management fee. As such, PPL is treated as acting as principal. Net proceeds due to the Charity are recognised under trading income in the SOFA.

Donated goods and services

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

Investment income

Investment income is recognised on a receivable basis.

Regional Groups

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

Fundraising events

Revenue is recognised at the date of event. Where revenue is received in advance, recognition is deferred and included in creditors and where entitlement arises before income is received, the income is accrued.

Grants

Grant income, which is recorded within income from charitable activities, is recognised when the funding offer is communicated in writing to the Charity or when performance related conditions are met.

Furlough income

Government grant income received from the Coronavirus Job Retention Scheme ('Furlough income') has been recognised on a receivable basis in the Statement of Financial Activities over the same period as the costs to which it relates. The government grant income is classified as unrestricted.

Income from charitable activities

Income from charitable activities includes income from intellectual property rights and is recognised on a receivable basis,

Expenditure

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

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

Expenditure on charitable activities includes direct staff costs and expenditure relating to charitable activities provision of services,

clinical support, health information and policy and campaign costs and research grant expenditure.

Research grants in furtherance of the Charity's objectives are the total amounts granted to external bodies for charitable work. The grants made by the Trustees are recognised in the SOFA in the year the grant is awarded and notified to the recipient, provided a legal or constructive commitment exists and any conditions attaching to the grant have been fulfilled by the recipient. The liability is measured as the total of expected payments for the period to the next scientific review.

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

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

Governance costs are the costs incurred to manage the Charity in compliance with constitutional and statutory requirements and are included in support costs.

Operating leases

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

Taxation

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

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

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

Pensions

Employees are entitled to join the pension scheme provided by Aegon and Standard Life. These are defined contribution schemes administered by an independent scheme administrators. Scheme funds are independent to the Charity and invested with Aegon and Standard Life. The Charity contributes by matching employee contributions to their personal pension to a maximum of 7% of salary. The cost of providing this pension scheme is charged to the SOFA when it is incurred.

Investments

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

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

Financial instruments

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

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

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

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

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

Listed investments are included in the balance sheet at fair value which is their closing bid price. Unlisted investments are included in the balance sheet at their fair value. Investments in subsidiary undertakings are held at cost less impairment. All investment gains and losses are included within the SOFA.

At the balance sheet date the Group held financial assets at amortised cost of £28,439k (2019: £23,189k), financial assets at fair value through income or expenditure of £8,522k (2019: £15,279k) and financial liabilities at amortised cost of £19,093k (2019: £22,573k).

Tangible assets

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

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

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

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

Intangible assets

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

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

IT software and website: over 4 years

Critical accounting judgements and key sources of estimation uncertainty

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

Critical accounting estimates:

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

*KSF provision is calculated based on the most recent progress report from the Administrators. At 1 August 2008, the Charity held £4,370,000 of short-term cash deposits with Kaupthing Singer and Friedlander (KSF). A further £44,000 was due in interest as at that date. On 8 October 2008, the FSA applied to the High Court for KSF to be put into administration, as they concluded that it no longer met the FSA's threshold conditions. The Charity recovered £23,000 during the period, taking the total recovery to 31 July 2020 to £3,825,000. This represents 87.5% of the

original sum invested. As at 7 April 2020, the administrator's estimate was updated to state that between 86.8% and 87.0% will ultimately be recovered by the Charity. The Trustees have reduced the provision to reflect the recovery in the year with a carrying value of £Nil. The non-recovery of the original sum invested is 13.33% or £583,000 (2019: 13.75% or £607,000).

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

Critical accounting judgements:

*Donated goods and services are not recognised where the incremental benefit to the Charity cannot be reliably measured. This will primarily relate to services which are gifted on a pro-bono basis and there is no comparable expenditure incurred by the Charity. Please see note 2.

*Since the Charity is a charitable company, it is subject to the restriction in the Companies Act Accounts Regulations that prohibits the recognition of unrealised gains in the profit and loss account. On acquisition of Breast Cancer Care on 31 March 2019, the fair value of the assets received exceeded the fair value of the liabilities assumed. As such, only the element of the gain which related to the realised profits can be recognised as 'Other income' in the SOFA. The element of the gain which related to unrealised profits has been recognised as 'Other recognised gains' in the SOFA.

In order to make this assessment, the Charity has determined which of the assets received were 'qualifying assets' within the meaning of company law. This involves judgement. The Charity has a realised profit only to the extent that the fair value of all of the 'qualifying assets' received exceeded the fair value of all of the liabilities taken on.

2. DONATIONS AND LEGACIES

	Unrestricted £000	Restricted £000	2020 £000	Unrestricted £000	Restricted £000	2019 £000
Trusts and appeals	499	630	1,129	-	543	543
Donations and legacies from individuals	15,046	3,018	18,064	14,099	1,409	15,508
Corporate donations	3,037	168	3,205	4,289	1,117	5,406
Other income	604	-	604	-	-	-
Total	19,186	3,816	23,002	18,388	3,069	21,457

The Charity benefits from the services of unpaid volunteers. The value of this has not been recognised in the financial statements. Donations and legacies from individuals includes £129,144 (2019: £274,099) of donated goods for auction prizes. Office space of £Nil (2019: £3,000) was donated of which £Nil (2019: £Nil) would have otherwise been purchased. Legal advice was provided on a pro-bono basis the value of which totalled £94,000 (2019: £Nil) and has been recognised in the SOFA.

During the year the Charity was donated advertising space the value of which was £97,000 (2019 £Nil) which has also been recognised in the SOFA. The net amounts for pecuniary and residuary cases not included in legacy income as at 31 July 2020, but which are classed as a contingent asset total £29,000 (2019: £31,000).

3. INCOME FROM OTHER TRADING ACTIVITIES

	Unrestricted £000	Restricted £000	2020 £000	Unrestricted £000	Restricted £000	2019 £000
Events	699	-	699	274	-	274
Corporate products and sponsorship	2,816	481	3,297	3,318	853	4,171
Lottery income (note 27)	5,027	-	5,027	-	-	-
Other income	471	-	471	2,510	-	2,510
Total	9,013	481	9,494	6,102	853	6,955

4. EXPENDITURE ON RAISING FUNDS

	Direct costs £000	Support costs £000	Total 2020 £000	Direct costs £000	Support costs £000	Total 2019 £000
Cost of raising funds from donations and legacies	13,209	2,980	16,189	14,590	2,980	17,570
Cost of other trading activities	647	148	795	549	102	651
Cost of managing investments	48	-	48	71	-	71
Total	13,904	3,128	17,032	15,210	3,082	18,292

5. EXPENDITURE ON CHARITABLE ACTIVITIES

	Grants £000	Direct costs £000	Support costs £000	Total 2020 £000	Grants £000	Direct costs £000	Support costs £000	Total 2019 £000
5a. Charitable activities								
Research	11,469	1,948	1,194	14,611	14,178	1,623	683	16,484
Clinical	-	879	372	1,251	-	413	213	626
Services	-	2,906	898	3,804	-	1,191	513	1,704
Health Information & Policy	-	2,265	688	2,953	-	2,182	394	2,576
Total	11,469	7,998	3,152	22,619	14,178	5,409	1,803	21,390

5b. Grants	2020	2019
Grants were made to the following institutions during the year:	£000	£000
Institute of Cancer Research	6,656	7,943
Queen Mary University of London	1,015	594
King's College London	847	1,230
Royal College of Surgeons in Ireland	664	-
Beatson Institute of Cancer Research	600	-
University of Manchester	330	230
University of Birmingham	230	-
University of Cardiff	230	230
University of Leeds	219	-
University Medical Centre Utrecht, USA	-	506
University of Glasgow	-	460
University of Liege, France	-	398
Erasmus University Medical Centre	-	363
Vall d'Hebron Institute of Oncology	-	323
IDIBAPS	-	275
Catholic University of the Sacred Heart	-	266
University of Edinburgh	-	238
University of Dundee	-	220
Imperial College London	-	136
Other Institutions	678	766
Total	11,469	14,178

6. SUPPORT COSTS

	2020 £000	2019 £000
IT, Finance & HR	2,904	1,396
Office	2,131	2,077
Management	712	785
Governance	533	627
Total	6,280	4,885

Total support costs of £6,280,000 (2019: £4,885,000) comprise of charitable support costs of £3,152,000 (2019: £1,803,000) and expenditure on raising funds of £3,128,000 (2019: £3,082,000). All support costs have been allocated entirely on a headcount basis.

7. NET EXPENDITURE FOR THE YEAR

	2020 £000	2019 £000
This is stated after charging:		
Depreciation and amortisation	615	450
Auditors' remuneration:		
Audit work	76	59
Other services - taxation	6	4
Operating leases rentals:		
Property	1,141	718
Equipment	23	42

8. EMPLOYEES

	2020 £000	2019 £000
Wages and salaries	12,181	8,414
Social security cost	1,148	829
Pension costs	856	446
Other employee benefits	26	20
Total	14,211	9,709

Termination payments during the year totalled £589,000 (2019: £188,000). Termination payments are recognised on an accruals basis and are included in wages and salaries.

8. EMPLOYEES (CONTINUED)

	2020 no.	2019 no.
The average number of employees during the year were:		
Charitable activities	139	81
Fundraising	138	110
Support Services and governance	34	34
Total	311	225

	2020 Total no.	2019 Total no.
The number of employees receiving remuneration over £60,000 (excluding employer pension contributions) during the year was as follows:		
£60,001 - £70,000	6	5
£70,001 - £80,000	5	3
£80,001 - £90,000	1	1
£90,001 - £100,000	1	1
£100,001 - £110,000	1	2
£110,001 - £120,000	-	-
£120,001 - £130,000	1	-
£130,001 - £140,000	2	1
Total	17	13

Pension costs for these higher paid employees amounted to £132,016 (2019: £71,719).

The key management personnel of the Charity comprise the Trustees, the Chief Executive, the Director of Corporate Services, the Director of Communications & Influencing, the Director of Research, the Director of Services, Director Clinical Services and the Director of Fundraising. The total earnings, including pension contributions, received by the key management personnel of the Charity during the year were £824,059 (2019: £738,074). As part of the restructuring due to the coronavirus pandemic, two directors were made redundant and termination payments which totalled £124,431 are included in these costs. In 2019-20, the Chief Executive was the highest paid member of staff and received remuneration of £122,378 (the assessment as to the highest paid member of staff in the year excluded any termination benefits paid).

Trustees have not received remuneration (2109: £Nil). Trustees have been reimbursed expenses incurred in undertaking their duties as disclosed in note 22.

9. INTANGIBLE ASSETS (GROUP AND CHARITY)

	IT Software & Website £000
Cost	
At 1 August 2019	1,279
Additions	467
Disposals	(867)
At 31 July 2020	879
Accumulated amortisation	
At 1 August 2019	906
Charge for the year	159
Disposals	(829)
At 31 July 2020	236
Net book value	
Brought forward at 1 August 2019	373
Carried forward at 31 July 2020	643

10. TANGIBLE ASSETS (GROUP AND CHARITY)

	Leasehold Improvements £000	Fixtures and Fittings £000	IT Hardware £000	Total £000
Cost				
At 1 August 2019	1,147	357	942	2,446
Additions	2	-	46	48
Disposals	(39)	(21)	(176)	(236)
At 31 July 2020	1,110	336	812	2,258
Accumulated depreciation				
At 1 August 2019	403	133	492	1,028
Charge for the year	143	99	214	456
Disposals	(40)	(21)	(165)	(226)
At 31 July 2020	506	211	541	1,258
Net book value				
Carried forward at 31 July 2019	744	224	450	1,418
Carried forward at 31 July 2020	604	125	271	1,000

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

11. INVESTMENTS (GROUP AND CHARITY)

	2020 £000	2019 £000
Market value at 1 August	15,279	15,727
Realised gains	8	(36)
Unrealised (losses)/gains	(649)	842
Income reinvested	130	174
Business combination (note 24)	-	4,174
Investment fees	(48)	(35)
Withdrawals	(6,198)	(5,567)
Market value at 31 July	8,522	15,279

All investment assets are held in the UK and are unrestricted. The total historic cost of these investments is £3,176,000. The holdings by fund on a market value basis are as follows:

			2020 £000	2019 £000
Fund	Asset class	Fund manager		
Charishare	Equities	BlackRock	3,946	4,525
CCLA	Equities, fixed interest and cash	CCLA	4,576	4,564
Goldman Sachs	Equity linked	Goldman Sachs	-	6,190
Total market value			8,522	15,279

12. CURRENT INVESTMENTS (GROUP AND CHARITY)

	2020 £000	2019 £000
Balance as at 1 August	4	32
Write back of provision	19	-
Transfer to cash at bank and in hand	(23)	(28)
Balance as at 31 July	-	4

The provision has been reduced to reflect a carrying value of £Nil given the dividends received in the year. An assessment of the provision is set out in the critical accounting estimates in note 1.

13. SUBSIDIARY UNDERTAKINGS

Breast Cancer Now has three active subsidiaries; BCN Trading Ltd (03090884), BCN Research Ltd (05047652) and Breast Cancer Care Trading Ltd (02681072). The Charity also has 5 dormant subsidiaries and 1 non-trading subsidiary. All of the subsidiaries are incorporated in the United Kingdom and have a year end of 31 July, with the exception of Pink Ribbon Ltd. The investment in subsidiary undertakings held by the Charity at 31 July 2020 was £245 (2019: £245).

	Breast Cancer Care Trading Ltd £000	Breast Cancer Now Research Lotteries Ltd £000	Second Hope £000	BCN Research Ltd £000	BCN Trading Ltd £000	2020 Total £000	2019 Total £000
Turnover	559	-	-	39	3,209	3,807	6,646
Cost of sales	(13)	-	-	(38)	(17)	(68)	(2,421)
Interest receivable	-	-	-	35	-	35	56
Administrative expenses	(62)	-	-	(36)	(534)	(632)	(503)
Profit before gift aid and taxation	484	-	-	-	2,658	3,142	3,778
Gift Aid payable to the Charity	(484)	-	-	-	(2,658)	(3,142)	(3,216)
Profit before taxation	-	-	-	-	-	-	562
Tax expense	-	-	-	-	-	-	-
Profit after taxation	-	-	-	-	-	-	562
Assets	1,421	9	163	2,912	3,559	8,064	12,297
Liabilities	(1,421)	-	-	(2,912)	(3,552)	(7,885)	(11,719)
Net assets	-	9	163	-	7	179	578

Breast Cancer Campaign (05074725), Breakthrough Breast Cancer (02848982), Pink Ribbon Ltd (04690589), Breast Cancer Care (02447182) and Breast Cancer Now Support and Care Lotteries Ltd (12397737) are dormant companies. On 30 April the Charity became the Sole Trustee of Second Hope a registered charity (No: 1163205). Breast Cancer Now Research Lotteries Limited (03239583), formerly Breakthrough Promotions Limited, has taken advantage of the small company audit exemption for 2019–20. The taxable profit from the subsidiaries each year is transferred to the parent Charity as a Gift Aid payment. For 2019–20 a total payable of £3,142,000 to the parent Charity has been recognised in addition to £562,000 from Breast Cancer Care Trading Limited relating to the four month period to 31 July 2019. For a full listing of the subsidiary undertakings please see note 26.

14. DEBTORS

	Group 2020 £000	Group 2019 £000	Charity 2020 £000	Charity 2019 £000
Trade debtors	672	3,690	379	2,524
Amount owed by subsidiary undertakings	-	-	3,625	3,117
Other debtors	107	518	107	514
Prepayments & accrued income	6,533	8,339	5,680	5,596
Total	7,312	12,547	9,791	11,751

Trade debtors includes £Nil (2019: £Nil) falling due after more than one year. Trade debtors are stated after provisions for impairment of £6,000 (2019: £29,000). Amounts owed by group undertakings are unsecured, interest free, have no fixed date of repayment and are repayable on demand.

15. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	Group 2020 £000	Group 2019 £000	Charity 2020 £000	Charity 2019 £000
Trade creditors	218	1,787	210	1,321
Grants payable	10,442	11,964	7,635	8,739
Taxes and social security	1,425	746	1,425	745
Accruals and deferred income	3,707	2,918	1,499	1,777
Other creditors	129	386	122	384
Total	15,921	17,801	10,891	12,966

Deferred income comprises sponsorship income received in advance of fundraising events taking place in 2020-21, as well as income received in advance for entries to our weekly lottery. Deferred income also includes income received relating to the Catalyst Programme which is run through BCN Research Ltd, a wholly owned subsidiary of Breast Cancer Now. Income is recognised at the point research spend is committed.

Deferred income	Group 2020 £000	Group 2019 £000	Charity 2020 £000	Charity 2019 £000
Balance as at 1 August	1,849	357	784	295
Amount released to income	(1,849)	(357)	(784)	(295)
Amount deferred in year	2,442	1,849	240	784
Balance as at 31 July	2,442	1,849	240	784

16. CREDITORS: AMOUNTS FALLING DUE AFTER MORE THAN ONE YEAR

	Group 2020 £000	Group 2019 £000	Charity 2020 £000	Charity 2019 £000
Grants payable	7,039	6,864	4,127	3,095

17. GRANTS PAYABLE

	2020	2019
	£000	£000
At 1 August	18,828	18,506
Awarded during the year	13,141	14,842
Paid during the year	(12,816)	(13,856)
Adjustments during the year	(1,672)	(664)
As at 31 July	17,481	18,828
Due within one year (note 15)	10,442	11,964
Due after one year (note 16)	7,039	6,864
As at 31 July	17,481	18,828

A list of all grants awarded in year is included under Note 5b which represents grants awarded during the year of £13,141,000 and adjustments during the year of £(1,672,000), totalling £11,469,000. Adjustments during the year of £1,672,000 (2019: £664,000) reflect research grant award underspend which has arisen due to Covid-19 restrictions in the year.

At 31 July 2020, the Charity had unrecognised commitments of £54.8m (2019: £64.2m) for grant awards which are conditional upon the favourable outcome of both scientific and financial reviews. The decrease reflects the impact of the grants awarded in the year. The contingent liability relates to grants which are expected to be awarded until the next grant process in 2024-25. These commitments will be funded from income in the relevant period.

18. PROVISIONS FOR LIABILITIES (GROUP AND CHARITY)

	Onerous lease	Dilapidations	Total	Onerous lease	Dilapidations	Total
	2019	2020	2020	2019	2019	2019
	£000	£000	£000	£000	£000	£000
Balance as at 1 August	395	258	653	-	-	-
Business Combination	-	-	-	557	-	557
Additional provision	262	83	345	-	258	258
Utilised	(481)	-	(481)	(162)	-	(162)
Release	-	-	-	-	-	-
Balance as at 31 July	176	341	517	395	258	653

The onerous lease is expected to be utilised by November 2021 and the dilapidations provision is expected to be utilised by January 2025.

19. RECONCILIATION OF FUNDS

	Balance at 1 August 2019 £000	Income £000	Expenditure £000	Investment losses £000	Balance at 31 July 2020 £000
Unrestricted funds	15,094	35,740	(36,376)	(641)	13,817
Restricted					
Tissue Bank (1)	-	31	(31)	-	-
Prevention Research (2)	669	912	(1,206)	-	375
Kings College London (3)	-	43	(43)	-	-
Molecular Cell Biology (4)	-	450	(450)	-	-
Gene Function Analysis (5)	-	30	(30)	-	-
Secondary Research (6)	550	498	(100)	-	948
Other restricted funds (7)	42	2,333	(1,415)	-	960
Total restricted funds	1,261	4,297	(3,275)	-	2,283
Total Group funds	16,355	40,037	(39,651)	(641)	16,100
Unrestricted Charity funds	14,517	35,985	(36,057)	(641)	13,804
Restricted Charity funds	1,261	4,297	(3,275)	-	2,283
Total charity funds	15,778	40,282	(39,332)	(641)	16,087

Notes

(1) Donations specifically given to fund the Breast Cancer Now Tissue Bank

(2) Donations specifically given to fund the research area of prevention

(3) Donations specifically to support the research unit at Kings College London

(4) Donations specifically to support the Molecular Cell Biology Team at the Institute of Cancer Research

(5) Donations specifically to support the Gene Function Analysis at the Institute of Cancer Research

(6) Donations specifically to support the research area of secondary breast cancer

(7) This includes a variety of funds, where donations are restricted to specific areas of research and other charitable activity.

20. ANALYSIS OF NET ASSETS BETWEEN FUNDS

	Group Unrestricted	Group Restricted	Group Total	Group Unrestricted	Group Restricted	Group Total
	2020	2020	2020	2019	2019	2019
	£000	£000	£000	£000	£000	£000
Tangible & intangible assets	1,643	-	1,643	1,791	-	1,791
Investments	8,522	-	8,522	15,279	-	15,279
Net current assets	11,208	2,283	13,491	5,541	1,261	6,802
Long term liabilities	(7,556)	-	(7,556)	(7,517)	-	(7,517)
Total net assets	13,817	2,283	16,100	15,094	1,261	16,355

	Charity Unrestricted	Charity Restricted	Charity Total	Charity Unrestricted	Charity Restricted	Charity Total
	2020	2020	2020	2019	2019	2019
	£000	£000	£000	£000	£000	£000
Tangible & intangible assets	1,643	-	1,643	1,791	-	1,791
Investments	8,522	-	8,522	15,279	-	15,279
Net current assets	8,283	2,283	10,566	1,195	1,261	2,456
Long term liabilities	(4,644)	-	(4,644)	(3,748)	-	(3,748)
Total net assets	13,804	2,283	16,087	14,517	1,261	15,778

21. FINANCIAL AND OTHER COMMITMENTS

Operating lease commitments

The Group and Charity have the following future minimum lease payments under non-cancellable operating leases for each of the following periods:

	2020 £000	2019 £000
Property leases expiring:		
Within one year	953	956
Within two to five years	3,216	4,230
In over five years	-	321
Equipment leases expiring:		
Within one year	2	2
Within two to five years	-	-
In over five years	-	-

Lease payments expensed in the year are disclosed in note 7.

22. TRUSTEE EXPENSES

The Trustees received no remuneration in the year. Four Trustees received reimbursement for travel and accommodation expenses totalling £1,709 for the year (2019: £1,786). The Charity has in place insurance to indemnify the Trustees for actions brought against them for wrongful acts committed. A Trustee Indemnity Insurance policy was held during the year as follows:

From 1 April 2019 to 31 March 2020 - Hiscox Ltd. Indemnity cover of £2,000,000. The cost of this specific policy is £1,022.
From 1 April 2020 to 31 March 2021 - Hiscox Ltd. Indemnity cover of £2,000,000. The cost of this specific policy is £1,159.

23. RELATED PARTY DISCLOSURES

In accordance with FRS 102, the Charity discloses related party transactions that were recognised in the SOFA. Expenses reimbursed to Trustees are disclosed in Note 22 of the financial statements. Remuneration of key management personnel is disclosed under Note 8 of the financial statements.

However, some Trustees, members of the Charity's Board and directors of its subsidiary undertakings are Trustees or directors of organisations that are in receipt of funds from the Group or enter into commercial transactions with the Group. The following transactions are disclosed as the individuals concerned are regarded as holding a position of influence in both parties to the transactions concerned at the time they were entered into:

- The parent Charity received income of £3,814,000 (2019: £3,225,000) from Asda Tickled Pink during the year and had an outstanding debtor of £Nil at year end (2019: £11,000). The Chief Executive, Baroness Delyth Morgan, holds the position of Trustee at Asda Tickled Pink.
- During the year the Charity awarded grants of £199,000 (2019: £Nil) to the University of Oxford and had an outstanding creditor of £358,000 at year end (2019: £263,000). The Charity made a payment of £105,000 during the year (2019: £181,000). Trustee Professor Adrian Harris is Professor of Medical Oncology at the University of Oxford.
- During the year the Charity awarded grants of £Nil (2019: £230,000) and grant adjustments of £6,000 (2019: £Nil) to the University of Edinburgh and had an outstanding creditor of £328,000 at year end (2019: £433,000). The Charity made a payment of £99,000 during the year (2019: £181,000). Trustee Mark Astaire, who was appointed as a Trustee on 1 April 2019 is a member of the International Advisory Board of the University of Edinburgh.
- The Charity paid for membership and conference related costs to the National Cancer Research Institute (NCRI) totalling £40,000 (2019: £46,000) during the year. In addition, the Charity awarded a grant to NCRI of £Nil (2019: £Nil) and had an outstanding creditor of £2,500 at year end (2019: £5,000). The Charity made a payment of £2,500 during the year (2019: £2,500). The Chief Executive, Baroness Delyth Morgan, holds the position of Director at the NCRI.

During the year, the Charity had the following transactions with its subsidiary companies:

- Payable under Gift Aid from BCN Trading Ltd of £2,658,000 (2019: £3,126,000) and management charge of £523,000 (2019: £406,000).
- Payable under Gift Aid from BCN Research Ltd of £Nil (2019: £90,000).
- Payable under Gift Aid from Breast Cancer Care Trading of £1,046,000 (2019: £Nil) and management charge of £49,000 (2019: £69,000).

At the year end, the Charity had an outstanding debtor balance due from BCN Trading Limited of £2,202,000 (2019: £2,569,000), an outstanding debtor balance due from BCN Research Limited of £9,000 (2019: £98,000), and an outstanding debtor balance from Breast Cancer Care Trading Limited of £1,414,000 (2019: £451,000).

24. OTHER INCOME

On 31 March 2019, Breast Cancer Now ('BCN') acquired all the assets and liabilities of Breast Cancer Care ('BCC') under a Transfer Agreement. Prior to the acquisition BCN's focus was on research and policy and campaigning for breast cancer. As a result of the acquisition the Group has broadened to cover care and support for those suffering from breast cancer and secondary breast cancer. The acquisition also provides greater geographical reach through the 'centres of excellence' operated by BCC. There was nil consideration for the acquisition.

Following the acquisition BCC has not traded. Given the full integration of the BCC operations with Breast Cancer Now it is not possible to identify the income and expenditure of the acquired business in the period April to July 2019. Directly attributable costs of £106,000 have been incurred relating to the acquisition of BCC. The following table summarises the recognised assets of the identifiable assets acquired and liabilities assumed at the acquisition date.

	Note	Book value £000	Adjustments £000	Fair value £000
Tangible fixed assets	A	771	(216)	555
Investments		4,174	-	4,174
Cash at bank and in hand		5,546	-	5,546
Stock		56	-	56
Debtors		3,860	-	3,860
Creditors		(1,687)	-	(1,687)
Provisions for liabilities	B	(260)	(297)	(557)
Total net assets		12,460	(513)	11,947
Cash consideration				-
Fair value of Gift				11,947

Note

- A** A decrease in tangible fixed assets following an impairment review of assets acquired. A significant element of this relates to the leasehold improvements relating to the London office building previously used by the BCC Charity.
- B** An increase in provision for onerous leases and adjustment to dilapidations provision following a third party valuation.

The total value of the gift of £11,947,000 is analysed between qualifying consideration of £9,275,000 and non-qualifying consideration of £2,672,000.

25. FURLOUGH INCOME

During the year the Charity accounted for a receivable under the Government's Job Retention Scheme of £1,686,000 (2019: £Nil).

26. SUBSIDIARY ENTITIES

Name	%	Registration	Registered office	Status
BCN Trading Limited	100	England & Wales	Fifth Floor, Ibex House, 42-47 Minories, London EC3N 1DY	Trading
BCN Research Limited	100	England & Wales	Fifth Floor, Ibex House, 42-47 Minories, London EC3N 1DY	Trading
Breast Cancer Care Trading Limited	100	England & Wales	Fifth Floor, Ibex House, 42-47 Minories, London EC3N 1DY	Trading
Breast Cancer Now Research Lotteries Limited (formerly Breakthrough Promotions Limited)	100	England & Wales	Fifth Floor, Ibex House, 42-47 Minories, London EC3N 1DY	Non-trading
Breast Cancer Care	100	England & Wales	Fifth Floor, Ibex House, 42-47 Minories, London EC3N 1DY	Dormant
Pink Ribbon Limited	100	England & Wales	Fifth Floor, Ibex House, 42-47 Minories, London EC3N 1DY	Dormant
Breast Cancer Campaign	100	England & Wales	Fifth Floor, Ibex House, 42-47 Minories, London EC3N 1DY	Dormant
Breakthrough Breast Cancer	100	England & Wales	Fifth Floor, Ibex House, 42-47 Minories, London EC3N 1DY	Dormant
Breast Cancer Now Support and Care Lotteries Limited	100	England & Wales	Fifth Floor, Ibex House, 42-47 Minories, London EC3N 1DY	Dormant
Charitable Incorporated Organisation	Ownership	Regulator	Registered Office	Status
Second Hope	Sole Trustee	Charity Commission	Fifth Floor, Ibex House, 42-47 Minories, London EC3N 1DY	Active

27. PEOPLES POSTCODE LOTTERY (PPL) INCOME

Lottery income includes income from PPL. The Charity received £639,126 of net proceeds from PPL during the year (2019: £Nil).

	2020 £000	2019 £000
Ticket value	1,997	-
Prize fund	(799)	-
Management fee	(559)	-
Net proceeds	639	-

LEGAL AND ADMINISTRATIVE DETAILS

For the year ended 31 July 2020

Patron

HRH The Prince of Wales

Independent Auditors

PricewaterhouseCoopers LLP,
1 Embankment Place,
London, WC2N 6RH

Bankers

Barclays Bank plc,
1 Churchill Place,
London, E14 5HP

Solicitors

Russell Cooke,
2 Putney Hill,
London, SW15 6AB

Investment Managers

BlackRock Investment Managers,
12 Throgmorton Avenue,
London, EC2N 2DL

CCLA (from 1 April 2019),
Senator House,
85 Queen Victoria Street,
London, EC4V 4ET

Coutts & Co (until January 2019),
440 Strand,
London, WC2R 0QS

Registered Office

5th Floor,
Ibex House,
42-47 Minories,
London, EC3N 1DY

Edinburgh (now closed)

222/2 Leith Walk,
Edinburgh, EH6 5EQ

Glasgow

Robertson House,
Ground Floor,
152 Bath Street,
Glasgow, G2 4TB

Sheffield

St James House,
Vicar Lane,
Sheffield, S1 2EX

Cardiff

1st Floor,
14 Cathedral Road,
Cardiff, CF11 9LJ

info@breastcancernow.org
breastcancernow.org

Research Centre

The Breast Cancer Now Toby Robins
Research Centre,
Mary-Jean Mitchell Green Building,
The Institute of Cancer Research,
London, SW3 6JB

Director: Professor Andrew Tutt

THANK YOU

We thank all the breast cancer patients who have kindly donated tissue and blood samples to our Tissue Bank.

We thank the members of the Grants Committee, the Science Strategy Committee, Tissue Bank Advisory Council, Tissue Access Committee and the Catalyst Committee.

We thank the staff and scientists in the laboratories we fund who have taken the time to show people around their labs and talk about the work Breast Cancer Now is funding.

We thank the officers and members of the All-Party Parliamentary Group on Breast Cancer, especially Co-Chairs Craig Tracey MP and Bambos Charalambous MP.

Thanks to all Breast Cancer Now Ambassadors and the MPs, MSPs and AMs who supported our work, tabled questions, met with their constituents, took part in our wear it pink Parliamentary photocalls, and continue to help us raise awareness of breast cancer and highlight the issues faced by them.

We thank all the people affected by breast cancer who have shared their experiences to inform the appraisal of a number of breast cancer drugs.

We thank all the facilitators, expert speakers and healthcare professionals across the UK who have contributed their time, expertise and energy to making sure people with breast cancer have access to, and benefit from, our support services.

We thank our wonderful volunteers who give their time freely to support others, raise awareness about the work of the charity and join us in campaigning for better treatment and care.

We thank the many NHS hospitals across the UK who work with us in delivering our Moving Forward courses and host our Information Points.

We thank the many hundreds of experts from across the world who have provided detailed feedback on grant applications.

We thank everyone who took part in our Secondary Breast Cancer Campaign Group, and remember those who have sadly passed away:
(Correct at time the annual report and accounts was signed).

Joy Knott
Sarah Alton (passed away)
Rachel Sørensen
Rebecca Willcox (passed away)
Flora Sheringham
Judith Willowe
Joanne Myatt
Laura Ashurst
Gina Carson
Helen Barnes
Jen Hardy
Alison Tait
Carolyn Gammon (passed away)
Tracey Williams (passed away)
Nicola Ingram
Melanie Kennedy (passed away)
Joanne Taylor
Prabhjot Kaur
Shakun Banfield
Miranda Ashitey
Aliya Hasan
Shelley Lee
Constance Johncock
Nathalie Wastle-Brett
Beth Roberts (passed away)
Claire Myerson
Mary Huckle
Fiona Leslie (passed away)
Jane O'Neill

We thank all the healthcare professionals, patients and volunteers who have helped make our Service Pledge work such a success, ensuring that patient experience is continually improved across England.

We thank the organisations and individuals who have supported our public health and wellbeing work including Sport England, the Richmond Group of Charities and Professor Annie Anderson of the ActWELL trial.

We thank every individual, local Breast Cancer Now group, £1k Challenger, RAG and charitable trust who has donated or raised money for us in the past year or remembered us in their Will.

WE ALSO ACKNOWLEDGE THE GENEROUS SUPPORT OF

3Ts Charitable Trust

A Bigger Bounce Committee

ACCA

Alex Ball

Alex Lloyd, Tour de Law Volunteer

Amanda Jones

Amgen

Angela Quinn

Anglian Water

Ann Summers

Anna Stevenson

Asda

Ashley Wilton

Asda suppliers taking part in Tickled Pink:

Bonnier Books UK

Cereal Partners – Nestlé and General Mills

Coca Cola European Enterprises

Kellogg's

Lindt & Sprungli

Mondelez UK

Nestle UK

Penguin

Premier Foods

P&G

Unilever

SC Johnson

Transworld

Twinings

Weetabix

Barclays Bank

Belinda Gray & Art For Cure

Beverley Nash

BFT MastClimbing Ltd

Big Yellow Storage

Bishop's Stortford - Gill Blair-Park & Annice Osborne

Bognor Regis Golf Club

Boobs and Brass

Breast Mates Stowmarket Group

Bromley Group - Lorraine Hathorn

Bromley Youth Music Trust

Bruckhaus Deringer

BT

Burgess Hill Breast Cancer Now Group

Cameron Events

Cardiff & Vale Group

Careys Foundation

Carolyn Collard

Chantele Rashbrook and the Clifftop Challengers

Cherie Blair

Cheshire Fundraising Group

Chris Sturges and The Show London Committee

Chris Ttofalli

Christopher and Lynn Hammersley

Claire Seedhouse

Clive, Jack and Lucy Ellis

Colin Wilmott, Rhian Owen and Kate Wilmott-Smith

Cotswold Breast Cancer Now Group

Curves Gyms

D&D London

Damart

David Chappell

David Guest

David Phillips

David Watkins

Dawsongroup

DCW Group

Delicious magazine

DHL Air

Doris Field Charitable Trust

Dorothy Perkins

Dorset Breast Cancer Now Group

Dream Challenges for their continued support as

part of Women v Cancer

Duncan Spence

East Dunbartonshire & Glasgow Group

easyJet

EDF Energy

Edinburgh Fundraising Group

Edith Murphy Foundation

Elaine Mitchell

Eleanor Moffat

ELEMIS

Eli Lilly

Ellen Kane Trust

Emma Barker

EP Barrus

Essex Fundraising Group - Sarah Gaeta

Estee Lauder

Eversheds Sutherland

Eveson Charitable Trust

Fairfax And Favor

Falmouth Breast Cancer Now Group

Fighting Breast Cancer Herts

Flintshire Fundraising Group

Flowers by Post

Fortnum & Mason

Frank Adams, Jane Davalle and Beryl Smallpeice

Freshfields

Garfield Weston Foundation

George

George Darby, Nina Caplin and Leigh Jenkins

ghd

Glasgow Fundraising Group

Glasgow High Kelvinside RFC

Goodbox

Greenberg

Gregg Drennan

Gregory Stone

Guillaume Soumier

Haley Family Charitable Trust

Hallmark

Hasan Hejazi Limited

Hayley Carpenter-Priest

Hilary Alexander, Deborah Britz and the team of

stylists

Hilton Glasgow

House of Fraser

I Saw It First

Ian Barraclough

Ian Tod

Isle of Man

Isle of Wight - Sarah Tyrrell-Jones

James Auld & SAIF

James Holgate

Jamie Godin

Jan Hulme

Jane Brooks

Jane Smith

Jane Woodward

Janet Brennand

Jason Guy

Joanne and Chris Thomson

John Hartson Foundation

John Lewis

June McCullough

Katie Hammond

Kerry Banks BME

King & Spalding LLP

L'Inviti Singers

Lakeside Leisure Group

Latham & Watkins LLP

Linda Dye

Linda Larter MBE, Chief Executive Sevenoaks Town

Council

Linda Lee

Liz Mackay

London Wembley BCN Group

Lorraine Hathorn

Lulu Guinness

Lynn Dewar

M&S

Mad March Hare

Maltin PR

Margaret Davies

Mark and Claire Urquhart	Sally-Ann Petts
Martim Valente	Samantha Lipman
Mary Carmichael	Santander
Mary-Jean Mitchell Green Foundation	Saracens Sport Foundation
Matthew Parsons	Sassoon
Members of the Care Collective	Shayne Taylor
Mike Phillips	Sheila McNicol
Milk_Shake Haircare	Sheila Wilson
Monica Vinader	Simon Halden (Sarah Greene Tribute Fund)
Moondance Foundation	Skechers
N Brown	SLX
Nan McDonald	Sofology
National Lottery Community Fund	Somerset Breast Cancer Now Group
Neath Group	Southside Ladies Fundraising Group
New Romney Group - Hayley CP	St Paul's Knightsbridge
Nick Capehorn at Theme	Staffordshire Fundraising Group
Nick Payne	Steph Harrison for her continued Sevenoaks Pink Week and community fundraising
Novartis	Surrey Group - Katie Baker
Oldmeldrum Fundraising Group	SweetSpot for their continued partnership for The Women's Tour
One Stop	
Palmers	The Berkeley
Pam Penfold	The Show Scotland Committee
Park Plaza Westminster Bridge	Think Pink York Fundraising Group
Pentel	Tikiboo
Perth Racecourse	Trendsetter
Pfizer	Trisha Davidson
Philip Small	Turnhouse Golf Club (Maggie Pringle)
Philippa Lovering	
Pink on the Tyne Fundraising Group	Val McGavin
Pink Ribbon Ball Committee	Valerie Stephenson
Players of People's Postcode Lottery	
Polly and Wayne Barnes	Wales Fundraising Committee & Nick Young
Premier Paper	Walk the Walk Worldwide
Rachel Ireland	West Ham United Womens Football Team
Redlibbets Golf Club	West Midlands Fundraising Group
River Island	Wilkie Farr & Gallagher LLP
Robert Cuthbertson	William Grant Foundation
Robin Lancashire, Sharon Smits and Liz Franklin	Wright Hassall LLP
Roche	Zochonis Charitable Trust
Rosemary Walker	
Rugby Against Cancer/Aaron Beesley	

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