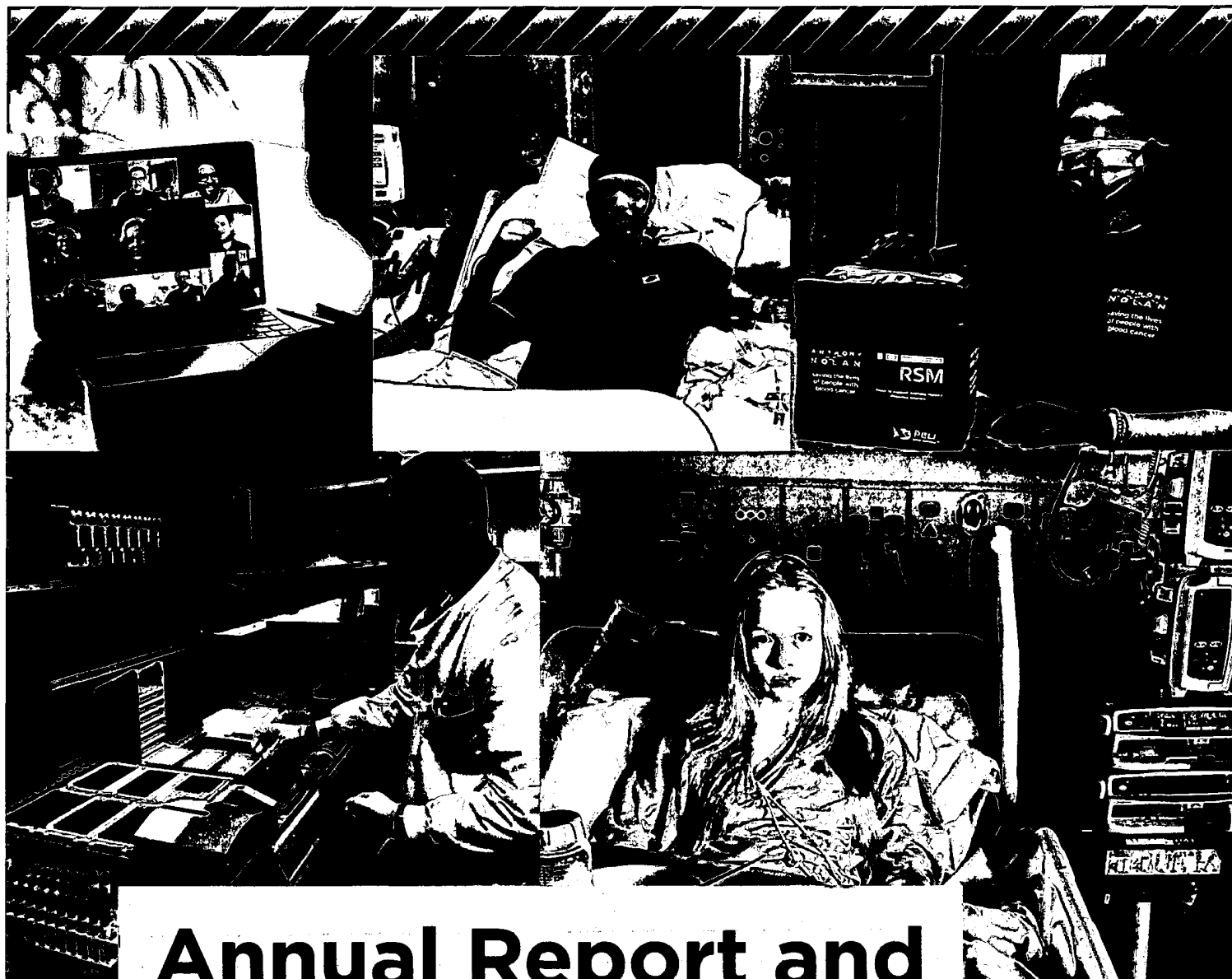




Annual Report and Financial Statements

For the year end 31 March 2021

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COMPANIES HOUSE

**ANTHONY
NOLAN**

saving the lives
of people with
blood cancer

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Trustees, Senior Leadership Team, Supporters and Advisors

Patron

Olivia Colman CBE

Life President

Simon Dyson MBE

Board of Trustees

Chair

Ian Krieger

Vice Chair

Carol MacKinnon

Chair Elect

Nicola Horlick

(appointed Chair on 22 July 2021)

Chair of the Audit and Finance Committee

Carol MacKinnon

Chair of the Governance, Nominations and Remuneration Committee

Ian Krieger (until 22 July 2021)

Nicola Horlick (from 22 July 2021)

Trustees

Dr Peter Aitken

(retired 25 September 2020)

Mike Altendorf

Lionel Cashin³

Nicola Horlick^{1,2}

(appointed 21 January 2021)

Ian Krieger^{1,2,3}

Dr James Kustow

Martin Laws^{1,2}

Carol Mackinnon^{1,3}

Professor Antonio Pagliuca

(retired 3 July 2020)

Mark Ritson

Dr Ann Robinson³

Sir Peter Robinson^{1,3}

Simon Spyer

Brian Turner CBE³

Oliver Zucker¹

¹ Audit and Finance Committee Member

² Governance, Nominations and Remuneration Committee Member

³ Retired as Trustee 22 July 2021

Chief Medical Advisor

Professor Charles Craddock CBE

Strategic Leadership Team

Chief Executive

Henny Braund MBE

Chief Bioinformatics and Immunogenetics Officer

Professor Steven Marsh

Chief Digital and Information Officer

Danny Attias

Chief Engagement and Marketing Officer

Terence Lovell

Chief Financial Officer

Ian Deans

Chief Medical and Scientific Advisor

Professor Antonio Pagliuca

(appointed 1 October 2020)

Chief Operating Officer

Nicola Alderson

Independent Review Board for Cell and Gene Therapies

Chair

Dr Laura Machin

Senior Lecturer in Medical Ethics at Lancaster University

External Haematology Consultant

Dr Victoria Potter

Haematology Consultant at King's College Hospital NHS Foundation Trust

Professional Advisors

Independent Auditors

BDO LLP

55 Baker St,

London W1U 7EU

Bankers

Barclays Bank plc

1 Churchill Place, London E14 5HP

Solicitors

Bates Wells

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London EC4R 1BE

Investment Manager

Smith & Williamson

Investment Management

25 Moorgate, London EC2R 6AY

Anthony Nolan

Registered Office

Royal Free Hospital, Pond Street,

Hampstead, London NW3 2QG

Administrative Address

2 Heathgate Place, 75-87 Agincourt Road, Hampstead, London NW3 2NU

England And Wales Charity

Registration Number

803716

Scotland Charity Registration Number

SC038827

Company Registration Number

02379280

Company Secretary

Samantha Durling

Chair's introduction

Through all the challenges of COVID-19, we have continued to prioritise giving the chance of life to as many blood cancer and blood disorder patients as we can, and to improve the quality of their lives.

I'm incredibly proud of what the whole team at Anthony Nolan has achieved. It is at times like these, when our operations are under such pressure, that the true quality of our people is demonstrated. Led by our brilliant Strategic Leadership Team, headed by our Chief Executive, Henny Braund, the whole organisation has really shown its tenacity, resilience and passion. I am delighted that Henny's leadership and the contribution of everyone at Anthony Nolan resulted in Henny being awarded an MBE in the Queen's Birthday Honours List in June 2021.

Determined to save lives

Nowhere is this quality and determination clearer than the fact that we have given 1,270 patients a second chance of life across the 2020/21 financial year – a phenomenal feat given the significant clinical and logistical challenges. It's been particularly awe-inspiring to see the creativity and dedication of the Donor and Transplantation Services team, who set up a 24-hour reception hub at Heathrow Airport to facilitate the time-critical delivery of stem cells from overseas to waiting patients.

Over the past few years, we have also been working hard to make our workplace systems and processes fit to deal with the opportunities and challenges of the digital age. As a result, our technology allowed us to move seamlessly to home working for the majority of staff. Our key workers have carried on going into their places of work throughout each lockdown. From our Clinical Nurse Specialists in hospitals, to staff in our cord blood programme, Cell Therapy Centre, laboratories and Research Institute, I am so grateful for their continued dedication. To assess the opportunities and challenges of hybrid ways of working, we have now set up a leadership group to consider what our future of work should look like. This will allow us to evolve the way we run Anthony Nolan whilst maximising our positive impact for patients.

We've also worked hard to keep innovating, in particular with our work to leverage our expertise in cell and gene therapies. Not only has this started generating additional income for reinvestment in our work, it is also advancing vital research into emerging treatments that will help to save and improve more lives.

As ever, patients remain at the heart of this work. That's why we're continually striving to stay on the front foot and advocate for the needs of patients and protect them during such a vulnerable time. Stem cell transplant patients had to shield for the majority of the last year and, unfortunately, early research is now indicating that the

immune response in blood cancer patients from COVID-19 vaccines may be worse than for most other types of cancer. We are responding by lobbying for additional research, and we have expanded our specialist patient support services to provide advice and financial support during this time.

We are very grateful that our supporters have showed their incredible loyalty over the past year. At a time when so many have suffered financially, our supporters have determinedly stood by us, providing the funds we need to save lives. This vital support, alongside some difficult cost cutting and judicious use of government support, means we have been able to keep investing in our stem cell register, our cord bank, our Clinical Nurse Specialists and our research. You can read more about these advances in our work, and how we have ensured our lifesaving operations can continue, throughout this year's report.

Looking ahead

After many years as a Trustee, four as Vice Chair and three and a half as Chair, I feel it is now time for me to stand down from Anthony Nolan's Board. I am truly delighted that renowned businesswoman, Nicola Horlick, who became a Trustee earlier this year, will take over as Chair at our board meeting in July. She will be leading a dedicated board of trustees and a charity that has gone over and above in delivering on the commitment our previous Chair, Simon Dyson, made to Shirley Nolan – to build an unparalleled UK stem cell registry.

Alongside these changes, we were delighted when Professor Antonio Pagliuca (Consultant Haematologist and Professor of Stem Cell Transplantation at King's College London) was appointed our Chief Medical and Scientific Adviser following a comprehensive recruitment process. This meant he had to stand down from our Board. But his wealth of experience, together with that of Professor Charles Craddock (Professor of Haemato-oncology at the University of Birmingham and the Academic Director of the Centre for Clinical Haematology at the Queen Elizabeth Hospital), bring to our Board meetings blood and marrow transplant expertise that is second to none.

Dr Peter Aitken stood down from the Board during the year because of the time commitment he needed to deal with NHS COVID-19 challenges. Lionel Cashin, Brian Turner and Peter Robinson have also decided to stand down as Trustees at the July board meeting, having served as Trustees for some time, but also to give Nicola space on the Board to recruit new Trustees. I am extremely grateful to each of them for their wisdom and guidance and for having been so important in helping Anthony Nolan become the thriving charity it is today. I am particularly grateful to Lionel who has been a Trustee almost as long as I have, and whose support has been unwavering and advice invaluable.

Anthony Nolan is in a great position to significantly change the lives of blood cancer and blood disorder patients. I am very grateful that I have had the opportunity to be personally involved with such a fantastic charity and am hugely proud of all we have achieved. I have every confidence that Anthony Nolan will continue to go from strength to strength in the future.



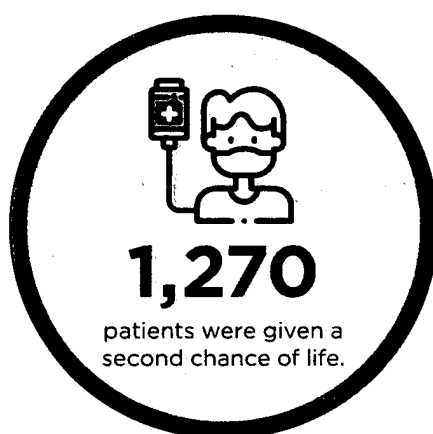
A handwritten signature in black ink, appearing to read 'Ian K' followed by a stylized flourish.

Ian Krieger
Chair

2020/21

The year in numbers

Anthony Nolan's lifesaving work has continued to thrive throughout the 2020/21 financial year. Here, we put the results of that work into numbers.



Our patients

23,000

engagements with our Patient Services team across phone, email, our Facebook page and Patients and Families Forum.

7,480

downloads and requests for our patient information booklets.

267

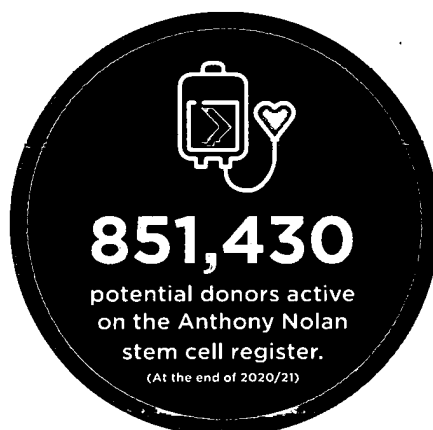
patient grants were provided, totaling £66,485.

58

patients, family members and nurses accessed our Telephone Emotional Support Service.

8

Anthony Nolan Clinical Nurse Specialists and 3 Clinical Psychologists are currently being funded. 5 of our previously funded Clinical Nurse Specialists are now permanent NHS funded posts.



Our stem cell donors

47,293

people have signed up to the stem cell register, 98% of whom joined online.

1,542

people were recruited by our 50 student Marrow groups through online recruitment – a completely new way of working for all groups.

34%

of the total recruited were young men aged 16-30, who are most likely to be chosen to donate.

16%

of new potential donors were from minority ethnic backgrounds.



Our supporters

260M+

times our online press and media articles have been accessed, carrying key messages about who we are, what we do and the difference we make.

1M+

visits to our website by supporters and patients.

£710,000

was raised through our Emergency Coronavirus Appeal since its launch in March 2020.

200,000+

people now follow us across Facebook, Twitter and Instagram.



Our operations

2,191

searches for unique UK patients were carried out by our Search and Selection team.

1,082

journeys were taken by our volunteer couriers to transport stem cells between donors and patients in need.

164

cord transplants were facilitated for UK and international patients, our highest annual number to date.

152

provisions of adult cells, cord blood or cord tissue to external researchers or organisations for cell and gene therapy services.

61

published scientific journal articles were written, or contributed to, by Anthony Nolan Research Institute researchers.

21

countries received stem cells for patients from Anthony Nolan donors.

Anthony Nolan saves the lives of people with blood cancer and blood disorders. We do this by connecting people in desperate need of a stem cell transplant with incredible strangers ready to donate their stem cells.

This has long been the core of Anthony Nolan's work, but our lifesaving operations now extend far further. We bring together the immediate lifesaving function of our growing register of potential donors with both cutting-edge research and specialised patient services to save and improve more lives.

Working together, we give three people a second chance of life every day.

Our vision

To save and improve the lives of everyone who needs a stem cell transplant.

This is our unwavering vision and commitment to patients to give them the best possible chance and quality of life. We're still driven by the same cause which inspired Shirley Nolan to found the organisation 47 years ago when she was searching for a matching donor for her son, Anthony.

Our values

Every day at Anthony Nolan, we live and breathe our values to ensure that we can deliver the best for everyone, from transplant patients to partners, supporters and staff. There are five values that guide our work. These commit us to always be:

- **Accountable**
- **Passionate**
- **Patient-focused**
- **Innovative**
- **Improving every day**

Our strategy

In April 2019, guided by our vision, we launched our ambitious strategy: **Together, We Can Save Lives**. The strategy was developed in collaboration with our trustees, colleagues, patients and partners.

The insight generated from this engagement was instrumental in setting our future strategic direction across five aims:

Aim 1:

Together, we can provide outstanding services for patients and the clinical community.

Aim 2:

Together, we can drive lifesaving research and turn it into action for patients.

Aim 3:

Together, we can harness the collective power of our supporters to champion and enable our lifesaving work.

Aim 4:

Together, we can be a stronger voice for patients to ensure they receive the best possible care.

Aim 5:

Together, we can.

Whilst we have made good progress towards our strategic aims, as outlined in the **strategic report** in the pages that follow, the COVID-19 pandemic – and our ongoing response to it – has disrupted some of our plans. Taking the impact of the pandemic into account, and the need for us to refocus on delivery, the Board of Trustees agreed to extend our current strategy by one year to March 2023. This provides stability in the medium-term by setting a clear framework for our plans and budgets over the next two years and allows us to focus on achieving the best possible outcomes for our patients.

Continuing our lifesaving work throughout COVID-19

When the COVID-19 pandemic brought the world to a halt in March 2020, we began a huge effort to ensure lifesaving transplants could still go ahead and to protect patients with blood cancer and blood disorders.

With the help of our supporters, partners and wider community, we have been able to meet the rising demands for our services and ensure that patients receive the support and guidance they need to stay safe whilst navigating their treatment and recovery.

COVID-19 has also had a significant impact on Anthony Nolan as a charity. We have worked at pace to make key decisions and work collaboratively within and outside the organisation to continue our lifesaving work. How we responded to these challenges is highlighted throughout the [strategic report](#), and a summary is provided below.

Providing lifesaving stem cells

When the pandemic first started, we entered a 'crisis management' phase. We constantly monitored the impact of the pandemic on our plans and implemented new initiatives to minimise disruption for patients.

- We set up a 24-hour emergency **Handover Hub** at Heathrow Airport to allow international couriers, who were unable to go into hospitals due to quarantine rules, to handover to, or collect stem cells from, one of our UK volunteers for the final lifesaving journey. In October 2020, we moved the hub to our offices in north London.
- Our volunteer couriers are crucial for getting stem cells to waiting patients. As many of them needed to shield during lockdown, we trained staff members to become couriers and carry out these journeys in their place. When restrictions eased, we were delighted to welcome back many of our 58 volunteers – who have undertaken 1,082 trips across the year.
- To protect our volunteer stem cell donors, we worked with transplant centres and the Department of Health to facilitate COVID-19 tests before their donation. We created contingency plans and updated guidelines to safeguard patients and donors.
- We introduced a cryopreservation service to freeze and preserve the viability of donated stem cells being sent to UK and international transplant centres. Donated adult cells usually have just 72 hours to reach their destination where the patient will have already begun their conditioning treatment, so the development of this service was vital during the pandemic.
- We focused our efforts on recruiting new donors to the stem cell register online, as face-to-face events could not go ahead. This meant investing more in digital advertising as well as engaging our student groups and existing supporters to help sign people up online.

Supporting our patients

The pandemic has led to treatment delays, as well as extreme isolation and uncertainty for our patients and their families. We have introduced new services and support to ensure they don't face this alone.

- To find out what support patients needed, we ran multiple patient surveys to investigate the effects of the pandemic on them and identify where we could make the biggest impact.
- Our surveys showed that many patients were struggling with their mental health. In response, we set up a Telephone Emotional Support Service and have seen 58 patients, family members and nurses access this service since March 2020.
- COVID-19 advice and guidelines have been constantly changing and have particularly affected our patients who have had to shield. We've worked to keep our coronavirus webpages regularly updated, sometimes daily, to clarify the latest updates and highlight the most relevant information to transplant patients.
- We expanded our patient grants programme to include COVID-19 Emergency Patient Grants to help patients facing extra costs due to coronavirus, especially those who were shielding and unable to work. We have provided 267 grants in total, with £66,485 given to patients.

Working with the clinical community

The NHS has been under intense pressure throughout the pandemic, and we have constantly been looking for ways to support the clinical community with our capacity and expertise to help ensure patients receive the best possible treatment, care and support.

- We provided additional laboratory services to free up NHS lab capacity, including loaning one of our automated liquid handling units to one of the UK's COVID-19 testing laboratories.
- To help resolve issues on the frontline, we facilitated regular virtual meetings with NHS leaders to work together on solutions and develop new guidelines.
- We provided our IMPACT clinical trials network to fast-track a clinical trial run by Great Ormond Street Hospital looking at the effects of COVID-19 on transplant patients.
- When the COVID-19 pandemic eventually passes, the healthcare system will look very different to how it was before. The debate on what the 'new normal' will look like is continuing and we are championing keeping the patient voice – right across the UK – front and centre.

Raising vital funds

Our work relies on generous donations to meet the needs of our patients, and when COVID-19 threatened many of our income streams, we quickly took action.

- We launched our **Emergency Coronavirus Appeal** at the start of the pandemic to help fund the urgent work required to ensure transplants could take place and meet increased demand for our services. Individuals, trusts, foundations and organisations have generously stood by us, and we are proud to have raised £710,000 since March 2020 through our appeal. £661,000 of this was raised in 2020/21.
- We secured £315,000 from the government's emergency COVID-19 funding – an important recognition of the essential nature of our pandemic response work. In addition, we received £532,000 through the government's Coronavirus Job Retention Scheme.
- Where possible, we moved our fundraising events online to continue engaging with our supporters, including our **Big Virtual Quiz** and **Zero to Hero** running challenge. This has given us opportunities to develop new ways of involving people in our work, which we will continue to learn from.

Supporting our staff

At Anthony Nolan, we are a community of passionate people who want to give blood cancer and blood disorder patients a second chance of life. It's been a priority to provide support for our staff's wellbeing as they carry out this crucial work during an incredibly challenging time.

These efforts will feed into our Future of Work Programme, which will take the learnings from the last year to improve our ways of working so we are best placed to meet the needs of patients.

- Our COVID-19 guidance has been regularly updated based on government announcements to provide clarity on how it impacts staff. We've also delivered weekly updates from our **coronavirus taskforce** and **restart meetings**, ensuring everyone is kept up to date with the latest developments and plans.
- We have asked colleagues to work from home where possible and introduced collaborative tools including Microsoft Teams and Miro.
- Where colleagues have needed to work from the office or laboratories as part of their role, we've provided support and made changes to the workplace to ensure they can do so safely.
- We've offered flexible work patterns for colleagues facing new circumstances, including where children were unable to be in school.
- To support the wellbeing of colleagues, including those on furlough, we developed a suite of wellbeing resources and activities.

Like many organisations, the impact of the pandemic has required us to reflect strategically on our business model and structure. With the shift in focus for some of our activities, we made the difficult decision to make some roles redundant and also had to furlough circa 20% of staff. Whilst these decisions have been incredibly challenging, we are confident that they will make our impact stronger and ensure we can deliver for patients, both now and in the future.

What we've achieved in 2020/21

We continued working towards our vision to save and improve the lives of everyone who needs a stem cell transplant.

Throughout the second year of our 2019-2023 Organisational Strategy, ***Together, We Can Save Lives***, many of our initial plans were disrupted by COVID-19 as we focused on effectively responding to the pandemic.

Despite this, we made progress towards the outcomes outlined in our strategy. We focused on strengthening the foundations needed to successfully execute our work over the next two years and beyond, and developed new ways of working to maximise our impact for patients.

In 2020/21, we gave 1,270 patients a second chance of life – a number that was only possible due to incredible determination and ingenuity.

However, we know we need to redouble our efforts for those who need us, because:

- There are still people, particularly those from minority ethnic backgrounds, who struggle to find the best possible match from an unrelated donor.
- Patients and their families don't always receive the physical and emotional support they need throughout their transplant journey.
- Although survival has improved markedly since our research began, patients are still dying after a stem cell transplant – with long-term survival rates remaining unacceptably low.

We believe that Anthony Nolan is uniquely placed to tackle these challenges, bringing a donor registry, research expertise, service delivery and powerful advocacy together in one organisation. Our strategy aims to strengthen the connections between all our functions so we can work together to protect and promote the interests of patients.

Our 2019-2023 strategy is structured under five aims. The following pages set these aims out in detail, showing progress towards the outcomes defined in our strategy as well as areas we are striving to improve. As COVID-19 has had a wide-ranging impact on our work, we have included details of this where relevant. You can find more information about our continually evolving **response to the pandemic on page 10.**

Aim 1:

Together, we can provide outstanding services for patients and the clinical community

Anthony Nolan's work is centred around finding the best possible donor matches for patients, giving them the best possible chance of survival, a good quality of life, and a high standard of support throughout their transplant journey.

Collaborating with patients and the clinical community is vital to achieving this aim. We want to understand their needs so that we can co-design and fund services that fill gaps in patient care and reflect best practice.

We're working hard to explore and support the development of innovative treatments that will provide patients with better options and outcomes. Alongside this work, we're also campaigning and advocating so that all patients who can benefit from these developments have access to them.

What do we want the future to look like?

- 1. The time to transplant will have been reduced, meaning patients receive the treatment they need in the fastest time possible, which is shown to improve survival outcomes.**
- 2. More patients will receive the care they need throughout their transplant journey, thanks to our innovative services and advocacy.**
- 3. We'll be using our expertise and infrastructure to support the development of innovative treatments for patients.**

What we achieved in 2020/21:

1. Patients received the treatment they needed in the fastest time possible

Finding matching donors for patients requires complex and time-critical work. We're always working on ways to reduce time to transplant and improve the quality of matches.

- In 2020/21, we gave **1,270 patients a second chance of life, both in the UK and internationally**.
- Despite an initial pause due to COVID-19, we progressed our **transplant centre services improvement project, Aspire**. This included interviews with transplant centres to better understand their needs and identify opportunities to speed up the delivery of cells to patients. This project will streamline communication with transplant centres and help improve the experience of our stem cell donors.
- Our research showed the importance of matching a patient's and donor's cytomegalovirus (CMV) status for the success of a transplant. CMV is a common virus that can cause life-threatening complications for transplant patients if passed on. As a result, **we introduced CMV testing at recruitment** for men and those from minority ethnic backgrounds with over 30,000 additional swabs sent out to donors.
- We successfully implemented a new **tissue typing strategy**, investing in Next Generation Sequencing (NGS) to allow us to determine the entire DNA sequence for each gene with unprecedented accuracy so we can be confident of finding the best possible donor for every patient. This is part of our commitment to reduce the time to transplant for patients, and we're pleased to see that NGS is delivering excellent results and is proving fast and efficient.
- Our **cord blood bank grew to a total of 9,104** searchable cord blood units available for transplant. We also saw cord blood usage for transplants increase with 164 cord provisions for patients in the UK and internationally, the highest annual level to date. Cord blood offers an important alternative for people with no suitable match on the donor register, because the stem cells can adapt to a wide range of tissue types, meaning a greater level of mismatch can be tolerated. It also provides off-the-shelf options that speed up the delivery of lifesaving transplants. Our cord collection service was paused for four months due to COVID-19 which impacted on the number of cords collected.
- We introduced cryopreservation of adult cells for UK and international transplant centres, in line with their changing needs throughout the pandemic, as detailed in our **COVID-19 section on page 10**.
- **Global collaboration with international registries and the World Marrow Donor Association (WMDA)** is crucial to meeting the current and future needs of patients. We continued to support the work of the WMDA, for example, through stewardship of the **Search, Match & Connect** programme – a fast preliminary search facility to help find the best-matched donor or cord blood unit. We also developed a world-class open-source predictive search algorithm (ATLAS) for any registry in the world to use. This will promote greater collaboration and allow organisations implementing the algorithm to improve donor matching for the international community.

2. More patients received the care they needed throughout their transplant journey

We know that patients undergoing a stem cell transplant need tailored support to deal with the unique challenges they face throughout their transplant journey. From helping to manage physical side-effects to providing psychological support, we are working hard to deliver the care and support they need.

- **Demand for support from our Patient Services team intensified** due to the pandemic, as patients and families looked to navigate ever-changing advice. Engagement with our services increased by 38% from last year, including over 23,000 engagements across phone, email, our Facebook page and Patients and Families Forum. Our **Coronavirus and your stem cell transplant** information page, which is regularly updated to highlight relevant government advice, has had over 13,000 visitors since its launch.
- We are continuing to support patients who are still shielding or feeling anxious as restrictions ease. As part of this, we have **been involved in every step of the vaccine roll-out for our patients**, advocating for them and their families to have priority access and clarifying information.
- Our **Patient Grants Programme** provided 267 grants, equating to £66,485 in 2020/21, including those given to patients suffering financially due to COVID-19. These grants help with costs related to transplants, including travel to appointments or purchasing household equipment to reduce the risk of infection, and were expanded to help support people shielding or those unable to work.
- Following the outbreak of COVID-19, it's more important than ever that the **concerns of patients are reflected in national guidance**. We partnered with NHS leaders and senior healthcare professionals across the UK to ensure that transplant centres had access to up-to-date guidelines that reflected the needs of patients. We worked with decision-makers to troubleshoot issues faced by both patients and staff on the frontline.
- With many people now surviving longer after a stem cell transplant, the importance of personalised medicine, quality of life and wrap-around services is heightened. We invested in **research to evaluate and improve our patient care**, which includes research projects into quality of life, such as a study on palliative care for stem cell transplant patients.
- Our **nursing programme** continued to offer unique and specialised support to patients during their transplant journey. We have eight Clinical Nurse Specialists (CNS) and three Clinical Psychologists (CP) who provide holistic support and information to ensure patients and families get the right support at the right time. Over the last year, this has seen them adapt their services to provide more support over the phone when in-person appointments weren't possible. Five CNSs previously funded by Anthony Nolan have become permanent roles within hospitals, showing how valued these positions are.
- We launched a new programme of **Anthony Nolan adopted NHS posts** to complement our existing CNS funded posts. This has allowed us to strengthen our evidence base on patient need and empower more healthcare professionals to provide stem cell transplant patients with the care and support they need.
- To improve the consistency and quality of patient care, we are **continuing to update clinical guidelines**, such as awareness around vaccine records and neurocognition post-transplant with the need for support. We are also seeking views from the clinical community on the challenges around access to palliative and supportive care in stem cell transplantation.

3. Supported the development of innovative treatments for patients

Research and development have shown that novel cellular therapies – such as CAR T-cell therapy, where a patient's own immune cells are collected and modified to attack their cancer cells, can be used to treat a range of conditions, including blood cancer and blood disorders. We're working to understand how we can use our expertise and infrastructure to support the development and delivery of these treatments.

- As part of our **Cell & Gene Therapy Service**, cells from Anthony Nolan research donors, in addition to cord blood and tissue collected through our cord blood programme, are being used to **support the development of new cellular therapies**. These living drugs will provide exciting new treatment options for patients with blood cancer and blood disorders as well as potential new therapies for other conditions.
- We continue to build on our capabilities at our **Cell Therapy Centre** in Nottingham, founded on the expertise and capabilities established through our cord blood programme and preparing stem cells for transplant. We secured the Human Tissue Authority's (HTA) approval for the licence to provide adult cryopreservation services to UK and international transplant centres as part of our response to the COVID-19 pandemic.
- We know a key part of this work is creating strong partnerships which provide opportunities for us to increase our impact and accelerate the development of new treatments. Over the last year, our new partnerships include:
 - **ONK Therapeutics** to facilitate the development of the next generation natural killer (NK) cell therapies to improve the lives of patients with blood cancer and solid tumours.
 - The **Medical Technology Innovation Facility** in Nottingham to provide a centralised hub of knowledge and development capability that can guide researchers and companies working in cell and gene therapies.
 - **HiTech Health** to promote the provision of a reliable, scalable source of high-quality starting material for cell and gene therapies.

Aim 2:

Together, we can drive lifesaving research and turn it into action for patients

We're proud of the impact our pioneering research has had on patients' lives, but we know there's more to learn. We want to be leaders in discovering the full range of factors that influence the success of stem cell transplants and be catalysts for change by ensuring that patients see the benefits of research sooner.

What do we want the future to look like?

- 1.** We will better understand the factors that influence the success of a transplant, and this knowledge will be reflected in clinical practice.
- 2.** More transplant patients, including children and young adults, will be participating in clinical trials, and the findings from these studies will improve treatment and care.
- 3.** The Anthony Nolan Research Institute (ANRI) will be a platform for the clinical community, leading an action-focused research community working together to achieve shared goals.

What we achieved in 2020/21:

1. Increased our knowledge of the factors that influence the success of a transplant

Our work has continued to improve our understanding of stem cell transplantation across our key research areas. This was despite much of our research being paused in March 2020 due to staff furlough and briefly again in January 2021 due to lockdown restrictions. Significant time and resource has been invested to restart our projects and adjust to new models of working.

Finding the perfect match

- We continued to investigate what the **optimal match** looks like for patients. Our **long-running Patient/Donor Project** is following the progress of over 2,500 transplants, with the aim of understanding the factors that influence patient outcomes and therefore inform donor selection. Recruitment to the Patient/Donor Project is lower than in previous years, due to the pandemic, but we are confident this will recover soon.
- The results of a collaborative study between our HLA Informatics Group and the Centre for International Blood and Marrow Transplant Research (CIBMTR) Immunobiology Working Committee were accepted for publication in the prestigious Journal of Clinical Oncology. This new **study of over 5,100 patients confirmed our earlier findings that ultra-high resolution HLA typing can improve patient outcomes post-transplant**. This level of tissue typing significantly reduced the risk of acute graft versus host disease (GvHD), where the donated cells, or 'graft', attack the patient's cells, and transplant-related mortality. This should be used to help identify the best match when multiple, equally matched donors are available.

Reducing post-transplant complications

- Our immunotherapy group looks at how stem cells rebuild the immune system after transplant to help **reduce post-transplant complications**, like acute GvHD. Projects over the past year included developing new therapies for the treatment of relapse after a transplant, focusing on the use of natural killer (NK) cells, a type of white blood cell, as well as working to improve cord transplants to extend their use for adult transplantation.
- We published our first paper on the role of killer-cell immunoglobulin-like receptor (KIR) genes in **reducing the risk of post-transplant complications and survival rates**. These genes help NK cells to judge the health of our body's cells and control our immune response. Our research showed how KIR genes may help patients with acute myeloid leukaemia (AML) by protecting against potentially fatal post-transplant infections.
- We are also initiating research projects to **improve our understanding of how the long-term physical and mental effects of a transplant affect our patients and their quality of life**, with the aim of using this insight to improve the services we provide to them.

Translating research into practice

- To ensure our register meets the needs of an increasingly ethnically diverse population, we continued to **use bioinformatics to gain an improved understanding of the genetic variation** seen within the UK donor registry and to use this insight to target our register enrichment activity. We're also exploring projects **working with registries around the world** to improve options for donor selection on a global scale.
- We continued our **patient-focused research**, including quality of life studies, psychological care and post-transplant care. The outputs of this research will inform the way our services are delivered and will provide evidence to influence change on a wider scale.
- Colleagues across the organisation are working together to ensure the outputs of our research and the expertise we have can **influence changes in practice**. For example, we have continued to influence the training of health professionals through lectures, our nursing programme and Anthony Nolan's Education Week. We also want to ensure our research feeds into clinical guidelines and that we respond to consultations, as outlined in more detail under **Aim 4**.

Generating new knowledge

- For our pioneering research to make a difference, its findings need to be shared with a wider audience of academics, healthcare professionals and patients so that it can inform and influence policy and stimulate new ways of working. The **Anthony Nolan Research Institute published 61 research papers** over the last year and staff participated in national and international virtual conferences to present their findings.
- We initiated studies to **investigate the impact of changes in transplantation due to COVID-19**. Our Medical Director, Dr Robert Danby, is leading a study to understand the impact of cryopreservation on patient outcomes, and we are working with other blood cancer charities to understand the efficacy of the COVID-19 vaccine for blood cancer patients. Both studies will continue into 2021/22.

2. More patients participated in clinical trials to help improve the future of treatment and care

- The **IMPACT clinical trials initiative** is now in the final year of its pilot phase, which was extended by one year to the end of 2021 due to COVID-19. Working together with our partners, Leukaemia UK, NHS Blood and Transplant, the British Society of Blood and Marrow Transplantation and Cellular Therapy (BSBMTCT) and the University of Birmingham, this initiative aims to accelerate the design and delivery of much-needed studies that will improve stem cell transplant practice and outcomes. We are continuing to see the results of our investment in IMPACT, with **over 500 patients participating in trials**.
- Nationally, clinical research infrastructure and resources were redirected to respond to COVID-19. As such, **all IMPACT clinical trials were suspended in March 2020**, including patient recruitment, and were reopened in early May 2020. The focus over the following months has been on re-opening these trials and getting them back up and running. We are working with our partners to establish what comes next once the initiative reaches the end of its pilot phase in December 2021.

3. Strengthened the Anthony Nolan research community

We know that working in collaboration with the clinical community, academic researchers and the wider industry can help us to deliver action-focused research, achieve shared goals and deliver new treatments and services for patients.

- Our **Graft Selection Strategy Workshop** took place in September, comprising talks on key themes relating to transplant and was an opportunity for professionals in the transplant community to interact and share ideas around search and selection, as well as best practice.
- As mentioned in **Aim 1**, our new collaboration with ONK Therapeutics will facilitate the development of the next generation natural killer (NK) cell therapies. This collaboration will see our **Cell & Gene Therapy Services provide a consistent supply of ethically sourced umbilical cord blood and cord-derived NK cells** as a choice of starting material for both ONK Therapeutics' research activities and continued process development work. This partnership will bring together expertise with the aim of expediting the development of much needed new lifesaving cell therapies for patients with a broad range of cancers.
- A symposium for **Professor Alejandro Madrigal**, our former Scientific Director of Research, was held in March 2021 to celebrate the contributions of the Anthony Nolan Research Institute to haematopoietic stem-cell transplantation (HSCT) over the last 28 years, and the current status of innovative cell therapies. This was held virtually, enabling over 500 of the world's leading healthcare professionals to attend.
- We welcomed **Professor Antonio Pagliuca as our new Chief Medical and Scientific Adviser** in October 2020 to lead our research portfolio and the Anthony Nolan Research Institute. Professor Pagliuca will play a crucial role in driving forward research to help tackle some of the biggest issues facing patients in need of lifesaving stem cell transplants.

Aim 3:

Together, we can harness the collective power of our supporters to champion and enable our lifesaving work

Together, we can achieve far more than we could alone. That's why it's important for more people to hear about Anthony Nolan, know and believe in the impact we're making, and have the opportunity to get involved in a meaningful way. We want there to be a place for everyone to be part of our lifesaving community – the more people who are involved, the more lives we can save.

What do we want the future to look like?

- 1.** More people will know about the impact of Anthony Nolan, and we will have exciting and compelling ways for people to get involved and stay involved to help us save and improve more lives. We will be listening carefully to our supporters as we build relationships with them as vital partners in our lifesaving work.
- 2.** More potential lifesavers will have joined our register, particularly those from our target groups, so that we are better able to find patients the matching donors they need.
- 3.** We will have increased funding through more diverse channels that can sustainably support our ambitious and lifesaving goals.
- 4.** We will unlock the power of technology and digital to drive meaningful engagement and deepen relationships.

What we achieved in 2020/21:

1. More people know about Anthony Nolan, and are involved in supporting our work

We're working to spread the word about Anthony Nolan's work, engage people with our cause, and give our community of supporters the best experience possible to build strong partnerships.

- Increasing our **brand awareness, consideration to donate and public understanding of our work**, is key to growing our community of supporters. Our average overall brand awareness for 2020/21 was 53.1%, down slightly from 54.6% in 2019/20, and consideration to donate stood at 11% which was consistent with previous years. We have plans to strengthen our brand and profile in the year ahead with a new team structure to drive forward awareness and understanding of our work to mobilise more supporters.
- Our celebrity ambassadors continued to provide generous support, trialling our first **Instagram Live event with our patron Olivia Colman CBE and ambassador Joe Crowley**. This event raised awareness of Anthony Nolan and supported our COVID-19 emergency fundraising appeal. Olivia also kindly selected Anthony Nolan as one of the charities to benefit from her voiceover of the 2020 Marks & Spencer Christmas Advert.
- We had **1,046 active volunteers supporting our work in 2020/21**, which is a slight decrease from previous years due to COVID-19 disrupting our activities. Despite this, there have been new ways for volunteers to get involved, including Donor Visitors providing phone calls instead of in-person visits, and an increased membership of our Patients and Family Members Panel as we saw that online offers can make volunteering more accessible.

2. More potential lifesavers have joined our register

We continue to grow our register of lifesaving donors, particularly those from minority ethnic backgrounds and young men, so that the needs of current and future patients are met.

- The Anthony Nolan stem cell register grew to **851,430 potential stem cell donors**, with 47,293 new potential donors aged 16 to 30 being added, which was over 70% above our target. Almost 15,000 more potential donors were recruited online than we expected.
- As face-to-face donor recruitment events were unable to take place due to COVID-19, we **invested more in recruiting donors through digital platforms**. Online recruitment usually makes up 50% of our total numbers, but this year 98% of new potential donors who we added to the register signed up online, our highest proportion to date.
- One of our core priorities for growing the register is **increasing the number of donors from minority ethnic backgrounds**, as only 37% of patients from these backgrounds find an optimum match from an unrelated donor, compared to 72% for patients from white backgrounds. We have worked closely with key partners, such as the African Caribbean Leukaemia Trust (ACLT), as well as promoted patient stories appealing for people from specific ethnicities to join the register. Azaylia Cain's patient appeal, which was shared by millions of people, had a particularly strong impact. All this work resulted in 16% of all new donors recruited being from a minority ethnic background, our highest proportion ever recruited in one year. However, we know we have more to do to enable all patients to access the treatment and support they need.

- We also renewed our efforts to ensure our work better represents and resonates with audiences from minority ethnic backgrounds. We **collaborated with Brixton Finishing School** – a project that recruits diverse talent to the advertising industry – and worked with them to co-create campaigns with their students to reach our target donor audience which launched in May 2021.
- A **large number of people responded to patient appeals**, including for young patients like Reign, Libby and Azaylia. The peak of these saw a record-breaking number of people apply to join the register over one weekend.
- **We continued to focus our limited resources on recruiting people aged 16-30**, guided by research showing that younger donors can lead to better survival rates and quality of life for patients. We launched our **Youth Ambassador Programme** in partnership with the Duke of Edinburgh Award, giving people aged 16-18 a volunteering opportunity that focuses on peer-to-peer donor recruitment and fundraising. Since September 2020, more than 70 ambassadors have started the programme. We also continued our activities in schools, providing virtual talks and online recruitment links through our **Hero Project**.
- We worked with our partners including the Scottish Fire and Rescue Service (SFRS), African Caribbean Leukaemia Trust (ACLT), the Sue Harris Trust and Adrian Sudbury Schools' Education Trust (ASSET) to recruit the donors that patients need. We also began work to expand our volunteer networks to enable us to reach more of our young and diverse target audiences.
- Marrow, Anthony Nolan's network of volunteer university student groups, continued to play a key role in **recruiting potential donors from their universities**. Our 50 groups recruited 1,542 donors online through social media campaigns such as the **Lockdown Lifesaver Challenge**.

3. Raised funds through more diverse channels

We continued to fundraise and meet the needs of our supporters, while adapting to ensure we can still raise funds in a new and challenging landscape.

- **Our supporters and partners raised over £8.2m gross (£6.3m net) in 2020/21**. These results are 8% up on original income projections (15% net), which is a testament to our supporter community and teams' response. Cost saving measures and the cessation of some activity owing to the pandemic has also contributed to our results. However, these measures have hindered some of our new supporter acquisition programmes for future income.
- We launched **the Charity's first emergency appeal to support our response to COVID-19** and collectively raised over £710,000 since its launch in March 2020. £661,000 of this was raised in 2020/21.
- **We developed new engagement products** such as our **Zero to Hero** challenges, which has in turn helped to build an online community of supporters. We also adopted new methods of engaging existing supporters, including webinars to offer insight into the work they are supporting.
- Our **retention rate of regular givers was 4% higher than the previous two years** as we shared the need and urgency for support through regular communications and our Emergency Appeal.

- We received £694,000 from those who left us a **lifesaving legacy in their wills** which exceeded our original projection by 7%.

4. Worked to transform the supporter experience

In 2019, we **launched the Transform Programme** – an ambitious initiative working to change the way we interact with our supporters to deliver personalised, high quality experiences that meet and exceed the needs and expectations of our supporters.

This programme will see **improvements to ways-of-working, processes, systems and data across the supporter experience**. This covers multiple projects, including a new supporter Customer Relationship Management (CRM) system and a new website. These changes are being supported by improved data quality and new streamlined processes that will help us gain insight into who our supporters are, as well as their motivations and behaviours, so that we can engage with them efficiently, purposefully and in a way that suits them.

- The Transform Programme delivered a range of early system improvements such as a **Legacy Management System, Marketing Automation platform** and outsourced fulfilment of materials for our donor recruitment and fundraising events.
- **We launched our new website in March 2021.** This website is mobile optimised with enhanced accessibility, integrated features, updated content and an emphasis on the user experience, informed by significant user testing throughout the project.

Aim 4:

Together, we can be a stronger | voice for patients to ensure they get the best possible care

Over the last 47 years of our lifesaving work, we have built the authority and credibility to influence change. Now, guided by our new influencing strategy, we want to effect a step-change in our work to ensure we can have a more wide-ranging and sustainable impact. As well as lobbying and campaigning to make patients' voices heard, we want to use the insight we generate to change policy and practice, so it benefits all patients.

What do we want the future to look like?

- 1. Increased awareness and understanding of Anthony Nolan's work and impact amongst the general public, policy-makers, and the clinical and research communities.**
- 2. We will have secured demonstrable changes in policy and practice, ensuring more patients receive the best possible care and the best possible treatment across the UK.**
- 3. We'll be powerful patient advocates, using our expertise and voice to safeguard and promote the interests of patients - including in the development and application of innovative treatments.**

What we achieved in 2020/21:

1. Increased awareness and understanding of Anthony Nolan's work and impact

Collaborating with others is an important part of raising awareness and understanding of Anthony Nolan's work and impact among the general public, policy makers and the clinical and research communities.

- We successfully **strengthened existing relationships** and worked to build new ones. We were key in facilitating the transplant clinical community's response to the pandemic, organising weekly teleconferences with senior doctors and NHS England to co-ordinate the response.
- We provided the **secretariat for the UK Stem Cell Strategic Forum**, contributing to setting a long-term strategy for the future of stem cell transplantation and advanced therapies. The Forum, which is sponsored by NHS Blood & Transplant and reports to the Department of Health and Social Care, facilitates information exchange between key stakeholders in transplantation and works towards improving outcomes for patients.
- We were bolder in talking about our achievements, the work we are doing and the challenges we face, and this has resulted in an **increase in coverage of our policy work**. This includes guest blogs on influential sites like Third Sector and NHS Confederation setting out our thoughts on what patients need during the pandemic.
- While the past year has been positive in building our influencing relationships overall, we have struggled to gain traction with parliamentarians when we haven't been able to hold physical events. As a result, **the levels of awareness of Anthony Nolan and our work amongst parliamentarians has decreased**. We are planning to reach out to a target group of politicians over the next year and expect to see levels of awareness improve.

2. Changed policy and practice to give more patients the best possible care and treatment

In 2020, we launched our influencing strategy which is helping us to focus on policy priorities that will make the biggest difference to patients' lives. Although the pandemic has forced us to postpone several projects due to the unavailability of clinical staff, we have made important progress and this work will continue in the year ahead. Our key priorities, and what we have achieved, are outlined below:

Equity of access to treatments:

- Alongside the All-Party Parliamentary Group (APPG) on Stem Cell Transplantation, we held an **inquiry looking into the barriers patients face in accessing treatment, care and support**. We received 40 written submissions and held an oral evidence session attended by the Minister of Health. The inquiry helped us identify key issues facing patients and the final report made 15 recommendations, which we will now work with the APPG on implementing.

- We secured funding for a research project looking specifically at the **experience of patients from minority ethnic backgrounds during the COVID-19 pandemic** to help ensure we are hearing from all patients and taking account of any differences in their support needs.
- We worked with the National Institute for Health and Care Excellence (NICE) to show how important the **patient perspective** is, highlighting that new treatments should be appraised according to the improvement they can have on a patient's quality of life, as well as survival rates.
- We **strengthened our voice in Scotland and Wales** through the Scottish Cancer Coalition and Wales Cancer Alliance. We contributed to the cancer recovery plans and cancer quality statements in both countries to ensure the specific needs of blood cancer patients were recognised.

Research into stem cell transplantation and new cell and gene therapies to drive improvements in patient survival rates, quality of life and experience:

- The main areas of focus in research this year have been the impact of the pandemic and Brexit on the research environment, and the need for research into COVID-19 vaccination efficacy and treatments for immunocompromised patients. We joined with other medical research charities to highlight the importance of our work, and to **ask the government for investment** in the face of huge funding cuts due to the pandemic. We have also pushed for post-Brexit policies that will ensure the UK remains an attractive place to carry out research.
- We joined with other blood cancer charities in an ongoing research study looking at **vaccine efficacy for our patients**, after initial data showed a low antibody response, as detailed in [Aim 2](#).
- Our work on **improving the data landscape and access to good quality data** has continued with the recruitment of a Research Data Manager who will work in two hospitals to improve their patient outcomes data. We also worked with other blood cancer charities to improve the **blood cancer dashboard**, which brings together national data on blood cancer in one place for the first time. Our goal is for this data to be used as part of the official national cancer dashboard, which currently only focuses on the top four cancers in terms of prevalence.

3. Safeguarded and promoted the interests of patients

We have continued to be powerful patient advocates, using our expertise to promote the interests of patients across the UK, in particular increasing awareness and influence in the devolved nations.

- Over the last year, we focused on ensuring the **response to COVID-19 considers stem cell transplant patients' specific needs**. Thanks to evidence gathered from our patient surveys, and the insight of the clinical community, we were able to ensure that:
 - Patient needs were reflected in new guidelines published by NHS England, the British Society of Bone Marrow Transplantation and Cellular Therapies (BSBMTCT) and NICE in response to the pandemic.
 - The need for psychological support for patients was included in the Scottish Cancer Recovery Plan.
 - Our patients and their families were given priority access to the COVID-19 vaccination programme.
 - HMRC and other government agencies made clear that the furlough scheme was open to clinically extremely vulnerable people who were unable to go into work, but couldn't carry out their work from home.

- We have also **taken learnings from the pandemic to inform our work on post-transplant care**. Our expert steering group, which guides this work, grew to include representatives from all four nations and key allied health professional roles.
- Ensuring the patient voice is heard has become more important than ever during the last year. We conducted three **patient surveys to help us understand the impact of COVID-19 on patients** and to shape both our services and our policy asks. Our findings were cited in the Health and Social Care Select Committee Inquiry report, ***Delivering Core NHS and Care Services during the Pandemic and Beyond***, and in an academic paper published in the *British Journal of Haematology*.

Aim 5:

Together, we can

A key part of our strategy is not just what we want to achieve, but how we will achieve it. We need to work more smartly, with the right tools to do our jobs and live our five values of being accountable, passionate, patient-focused, innovative and improving every day.

By strengthening our enabling infrastructure, capabilities and capacity, and adapting to the challenges of the last year, we will bolster our ability to achieve our ambitions over the lifetime of our strategy and beyond.

What do we want the future to look like?

- We'll collaborate with patients and more diverse partners, across the UK and globally, in all aspects of our work to make sure we're having the biggest possible impact in the right areas.
- Our funding will be increased from more diverse funding channels, allowing us to do more for patients.
- A coherent organisation will be working collectively as **'One Anthony Nolan'** in pursuit of our aims, with the right skills, culture, behaviours and capabilities to achieve our ambitions. We will foster a culture which celebrates and champions diversity and inclusion and hold ourselves to high standards.
- We'll be using modern technology and increased insight to improve efficiency, effectiveness and the experiences of staff, volunteers, supporters and customers.

What we achieved in 2020/21:

The following section details the six key objectives we have identified in relation to Aim 5 and the progress we have made towards these objectives during the last year.

Objective 1: Became a more patient-centred organisation, embedding patient and public involvement in every aspect of our work.

- We want to embed **Anthony Nolan Community Involvement (ANCI)** in every aspect of our work to create a mindset, culture and infrastructure that allows us to fully involve and harness the power of our diverse community. Over the last year, this included representatives from our community being on recruitment panels for senior roles in the organisation. These representatives brought a different perspective to the recruitment process and added real value.
- COVID-19 brought into sharper focus the need for Anthony Nolan community members to influence decisions that affect them. Our focus over the past year has been to ensure the response to the pandemic considered stem cell transplant patients' specific needs, as highlighted under **Aim 4**. We established a **Policy Insights Panel**, formed of patient representatives and family members. This panel will be involved in our influencing work to share their experiences and give feedback, and help ensure that stem cell transplant patients across the UK have access to the treatment, care and support they need.

Objective 2: Strengthened connections beyond the organisation, forging and brokering partnerships with and between those who can help us achieve our aims.

- Our strategy sets out our ambition to build a motivated community of supporters and partners, as outlined under **Aim 3**, all working towards collective goals to achieve more for our patients and donors.
- We continued to build a **close working relationship with the British Society of Blood and Marrow Transplantation and Cellular Therapy (BSBMTCT)** and are developing a joint plan to improve the transplant data management landscape, which will be implemented over the next year. This will help build our evidence base for research and influencing, and identify areas that need improving.
- We **developed relationships in cell and gene therapies**, including our new collaboration with ONK Therapeutics to facilitate the development of the next generation natural killer (NK) cell therapies, as detailed under **Aim 2**.
- Our partnerships with clinicians and other stakeholders in relation to our policy and influencing work continued to strengthen, ensuring our goals reflect real-life priorities. The **Anthony Nolan Clinical Retreat took place in October 2020** as a digital event. The Clinical Retreat brought together clinicians from all over the UK to share and discuss the changing landscape of stem cell transplantation.
- We are working closely with our partners, such as the Blood Cancer Alliance and Association of Medical Research Charities (AMRC), so the **sector speaks with one powerful voice on issues that affect our patients**. This was particularly important over the last year due to the changing political landscape and in response to COVID-19.

Objective 3: Diversified and grew our income streams and identified ways to do more – and better – for less, so we achieve value for money in all that we do.

- Continued disruptions caused by COVID-19 and Brexit impacted on the certainty of our income. The unpredictability of our income means we continue to adapt our approach and are working to identify savings from all areas of the organisation.
- The uncertainty in our environment shows the importance of innovating to diversify our income streams and rebuild our supporter base. Over the last year, we **improved our stewardship of existing financial supporters, and tested and piloted new approaches to fundraising**. This included virtual offerings where face-to-face events were not possible.
- We continued to invest in the infrastructure, capacity and capabilities required to generate increased commercial income that can be reinvested in our work. This included **providing products and services that contribute to the development of new treatments**. This work is governed by a robust ethical, regulatory and quality framework and all profits generated are reinvested in our lifesaving work.

Objective 4: Created and strengthened the culture, structures and capabilities necessary to achieve our ambition.

- During COVID-19, we've seen **collaboration across divisions, enabled by digital technology, and empowered decision making**. This has allowed us to respond quickly to the needs of patients. We are continually learning from this experience, especially in terms of ways of working, and this will lay the foundations of our Future of Work Programme.
- We **renewed our commitment to creating meaningful and sustainable change through greater inclusion and diversity**. We have made important steps forward in this area in 2020/21, implementing our **Inclusion Champions** group across the organisation to raise awareness of inclusion and diversity issues and gaining feedback from staff and identifying areas to focus on. We welcomed Dr Arti Agrawal as Director of Inclusion, Diversity and Involvement in March 2021 who will be driving this work forward.
- Our **wellbeing programme accelerated** to better support colleagues and build staff resilience in a prolonged period of difficult change – something that will remain a focus for the foreseeable future.

Objective 5: Provided the right technology and harnessed the opportunities of digital to improve efficiency, engagement, and experiences in all aspects of our work.

- We made good progress towards ensuring our infrastructure and technology is scalable, secure, accessible, and cloud based where possible so that it is always up to date. This includes **decommissioning legacy systems and implementing new systems that enable staff and outside parties to work more collaboratively**.
- One of the most significant shifts over the last year has been the **transition to working remotely**. This was enabled by the rollout of laptops to staff and the introduction of tools such as Office 365 to facilitate and enable collaborative working online.

- The opportunities provided by digital ways of working feed into the execution of activity under all aims of the strategy by supporting teams to deliver their ambition. Examples of this include **implementing a new tissue typing system for our laboratories**, as well as looking at how we can **use digital technology to increase customer engagement**, such as through the Aspire project with transplant centres, as detailed in [Aim 1](#).

Objective 6: Generated quality data and translated it into actionable insights that help strengthen the evidence-base for decision-making.

- We made **significant progress on delivering our data improvement plan**, which establishes standards and processes that govern the collection, storage, analysis and use of our data. A strong data community exists across the organisation, enabling sharing of expertise, statistical data for insights and research, as well as peer support.
- COVID-19 enabled a step-change in how we use data to ensure that it's accessible, and that it provides the right evidence at the right time to feed into decision making. This was exemplified through the production of a **COVID-19 dashboard of key metrics to help us monitor the impact of the pandemic**. We are looking to build on this to deliver greater insight capability through a new data management platform and the development of the next data strategy. A component of this will be to improve data literacy across the organisation.

Looking ahead

Going forward, Anthony Nolan is continuing to mitigate the risks associated with COVID-19, and looking to the future with confidence and renewed purpose.

As an organisation, we have learnt a huge amount about ourselves over the last year – such as our ways of working, our relationships and the lifesaving value we provide. Having shown great resilience throughout the pandemic, we're ready to carry these learnings forward to maximise our impact for patients, donors, supporters and our broader community.

As always, our vision will guide and underpin everything we do as we work to save and improve the lives of everyone who needs a stem cell transplant, and provide them with the best possible treatment and care.

We will continue to do this by:

- Providing patients, families and carers with the support and information they need through our Patient Services team.
- Working with transplant centres to understand their needs and use this insight to develop better clinical services.
- Growing and further enriching our register, particularly through the provision of CMV status.
- Driving our Transform Programme forward to put vital systems and processes in place to streamline the way we engage with supporters.
- Broadening our research agenda to understand the range of factors that influence the success of a transplant.
- Implementing our influencing strategy to achieve our policy goals. This will include involving our community and raising awareness among key audiences.
- Supporting employees in new ways of working, underpinned by technology, whilst decommissioning legacy systems, strengthening our core infrastructure and developing new solutions.
- Testing new approaches to income generation through innovation and diversification of income streams.
- Strengthening and forging partnerships across our wider community.
- Developing a Future of Work Programme to ensure we have the optimal workplace model to drive our work forward both now and in the future.

Financial review

The economic and social disruption and uncertainty of income generation as a consequence of the COVID-19 pandemic and Brexit led to a challenging financial year for Anthony Nolan in 2020/21.

We have, however, remained resilient through these unprecedented times and actively managed this uncertainty with free reserves maintained at levels consistent with the prior year, 2019/20.

The Trustees consider it prudent to hold a higher level of optimal free reserves in the short term and continue to work with the Strategic Leadership Team to review reserves regularly.

Information on principal risks and uncertainties can be found on page 55.

Stem cell provisions reduced by 188 (12%) to 1,342 in 2020/21 (2019/20: 1,530) but we added a further 47,293 potential lifesavers to our stem cell register.

We continued to develop our cell and gene therapy service offer, initially paused in the early part of the year, by diversifying and expanding our portfolio of products and services. In April 2021, we purchased a Tyto machine for £0.18m for our Cell Therapy Centre to implement isolation technology for specific cells. This will enable us to produce higher value products for our industry partners.

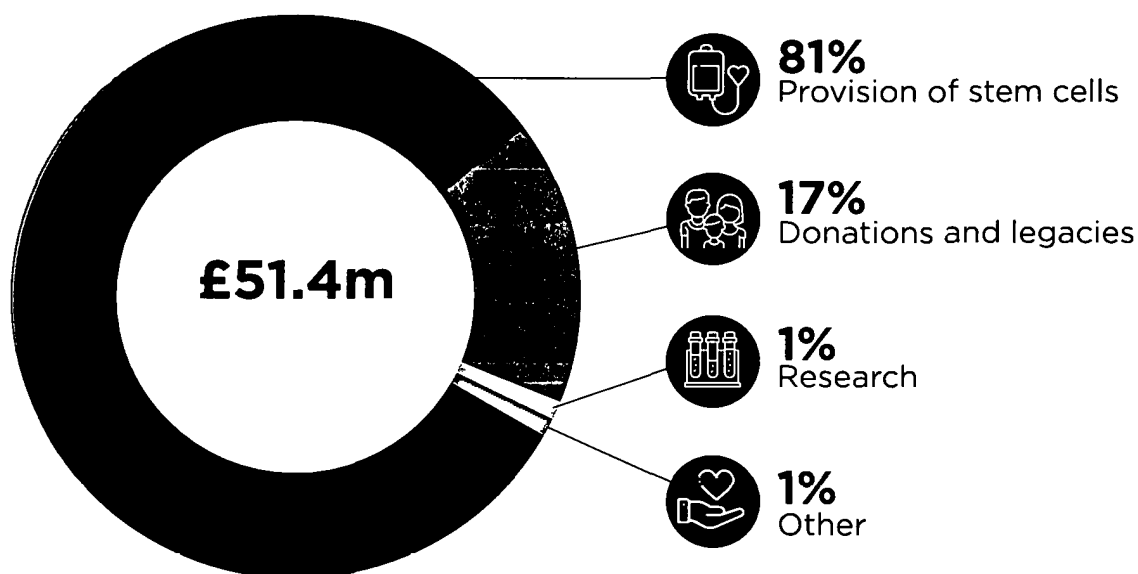
We also continued to invest more in our patient services, digital footprint and research work, all of which further supports our aims of improving patient outcomes and saving more lives.

A small surplus of £0.3m was recorded at net income, before investment gains from the sale of the investment portfolio of £0.3m, which increased total funds by £0.6m. Free reserves (general funds net of designated funds and the net book value of fixed assets) increased from £10.8m to £10.9m. A designated reserve of £0.1m for technology and brand innovation held over from 2018/19 was released back to general funds.

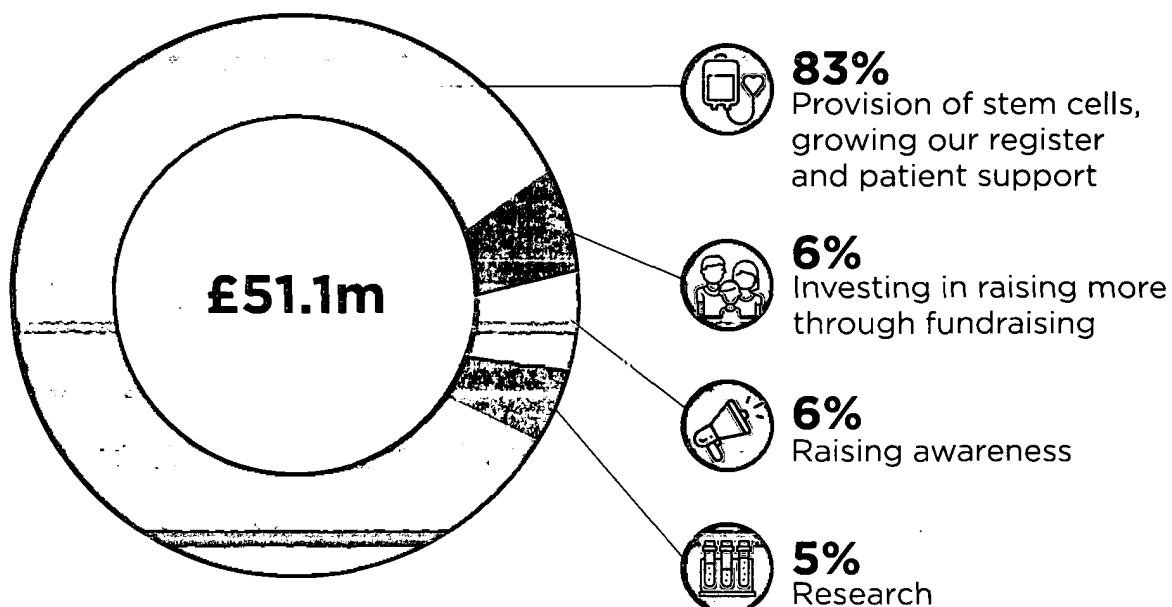
How we funded our work

Without vital funds, our lifesaving work wouldn't be possible.
Below details what we raised and spent to save more patients' lives.

What we received



What we have spent



Income and expenditure

Income, excluding net gain on investments, totalled £51.4m, a decrease in the year of £(4.0)m (7.2%). Donor provision fees continued to be the main source of income for Anthony Nolan, raising £41.6m (2019/20: £45.1m). The number of facilitated donor transplants fell by 12% in total and decreased for both UK and export purposes by 5% and 36% respectively, as a direct consequence of the COVID-19 pandemic. Gross voluntary income reduced to £8.8m from £9.1m due to the continued attrition within individual giving whilst legacies increased by £0.1m. Net voluntary income increased to £5.0m from £4.9m, benefiting from additional emergency appeal funding and lower direct activity costs due to COVID-19 lockdown restrictions. Gross voluntary income includes £0.5m (2019/20: nil) from the Coronavirus Job Retention Scheme (CJRS). We raised a further £37,000 from fundraising activities through our trading subsidiary, Anthony Nolan Trading Limited (ANTL), making the total gross fundraising income £8.3m (2019/20: £9.6m). Total income through ANTL was £324,000 (2019/20: £594,000). In total, our trading subsidiary generated operating profits of £47,000 (2019/20: £116,000) all of which was distributed to the Charity in the year.

Total expenditure was £51.1m, a decrease of £(4.2)m (7.6%) from the previous year. Expenditure to raise donations and legacies decreased to £3.3m (2019/20: £4.2m), and expenditure also decreased on charitable activities to £47.6m (2019/20: £50.7m). Within charitable activities, £41.6m was spent on donor provisions and giving a chance of life to patients, £2.8m was spent on research, and a further £3.1m on education and awareness events that support our donor recruitment, campaigning and fundraising activities.

Included in total expenditure are support costs of £10.1m (2019/20: £10.0m).

Reserves policy

Anthony Nolan's policy with regards to reserves is to make suitable investment in the ongoing development of the Charity, while maintaining adequate funds to deal with current and medium-term needs and having the necessary provision to deal with unforeseen circumstances. The Trustees have determined that the optimal level for free reserves is between £8m and £12m, and that in the medium term, free reserves should be managed to reach this level to deal with the following:

- Requirements for a reasonable level of working capital, taking into account our growth.
- Period of time required to downsize operations if necessary, to respond to any downturn in income streams or reduced demand for donors.
- Period of time to re-establish income streams.

Reserves are maintained at a level that enables Anthony Nolan to manage financial risk and short-term income volatility.

Free reserves at year end amounted to £10.9m (2019/20: £10.8m), which sits well within the target free reserves level, of between £8m and £12m. The general fund of £14.0m (2019/20: £13.3m) reflects free reserves and the net book value of tangible fixed assets at £3.1m (2019/20: £2.5m).

There was further capital investment in 2020/21 of £0.6m in a digital transformational technology project to engage with and manage our supporters, as well as £0.4m as continued support for the IMPACT clinical trials initiative. These investments will continue into 2021/22.

Restricted reserves

Restricted reserves were maintained for the year at £0.9m (2019/20: £0.9m), with the income received matched against expenditure to support patients in the Donor Provision, Laboratory Equipment and Patient Experiences funds.

Designated funds

The designated fund of £0.1m earmarked for technology and brand innovation was released back to general funds in the year.

The Trustees regularly review the appropriate level of reserves with the Strategic Leadership Team.

Investment policy

Anthony Nolan's Board of Trustees has delegated investment policy decisions and the setting of formal investment criteria to the Audit and Finance Committee.

Anthony Nolan has £10.9m of free reserves that may be available for investment. A portion of these reserves have been identified as long-term reserves and open to a development fund of up to £3m with the remainder being held as short-term reserves, i.e. cash to meet unanticipated cash flow needs.

A traditional investment portfolio return model, where investment management is delegated to an authorised professional investment manager, regulated by the Financial Conduct Authority of the United Kingdom, remains an option for longer-term reserves.

The Audit and Finance Committee has responsibility for agreeing strategy and monitoring the investment assets at quarterly meetings.

Going concern

The Trustees have reviewed the group's and the Charity's forecasts and scenario plan projections (including the impact of COVID-19) covering a period that exceeds 12 months from the date of signing these financial statements.

The Trustees have also considered that there are no material uncertainties in the operating environment.

Accordingly, the going concern basis has been used in preparing these financial statements.

Section 172 Statement

The Board of Trustees of Anthony Nolan are required to report on how their decision-making has aligned with their duty to promote the success of the Charity in accordance with section 172 of the Companies Act 2006.

The Board are required by law to take regard to the following factors in any decision-making process:

- the likely consequences of any decision in the long term,
- the interests of the company's employees,
- the need to foster the company's business relationships with suppliers, customers and others,
- the impact of the company's operations on the community and the environment,
- the desirability of the company maintaining a reputation for high standards of business conduct, and
- the need to act fairly as between members of the company.

Stakeholders

The following details our key stakeholder groups and how we support and engage with them. By understanding who our stakeholders are, Board discussions duly consider the potential impact of our decisions on each stakeholder group along with their needs and concerns.

External stakeholders

Patients		
<u>Key considerations:</u> ■ Increasing survival rates. ■ Finding the best possible match. ■ Having a good quality of life post-transplant. ■ Facilitating delivery of the best possible graft for the patient in need, in line with all applicable regulatory requirements.	<u>How we engage:</u> ■ Providing patients with stem cell products as well as a high standard of care that includes psychological support, reliable information and a full and defined end-to-end relationship throughout the patient's journey. ■ Carrying out research with a diverse range of patient groups. ■ Influencing government, regulators and policymakers to advocate on behalf of our patients and ensure their voices are heard when decisions are made.	<u>Outcomes and long-term objectives:</u> ■ For all patients to survive and have a good quality of life post-transplant. ■ UK patients to have access to the best possible graft, as identified by their clinician.

Clients and collaborators - cell and gene therapy		
<u>Key considerations:</u> ■ Providing resources to researchers and developers of cell and gene therapies that align with our research focus.	<u>How we engage:</u> ■ Providing cellular material for research and development. ■ Collaborating on research projects.	<u>Outcomes and long-term objectives:</u> ■ Facilitate robust and ethical research and development of cell and gene therapies to improve and save the lives of patients.

Clients and collaborators - transplant centres and international registries		
<u>Key considerations:</u> ■ Improving the range, quality and efficiency of services that are provided to transplant centres and international registries. ■ Improving the clinical impact on the transplant community in the UK.	<u>How we engage:</u> ■ 'Aspire' partnership initiative – working directly with transplant centres to improve and develop our services to them. ■ Regular meetings to report on service delivery and receive feedback. ■ Direct communication on specific cases and our wider services.	<u>Outcomes and long-term objectives:</u> ■ A suite of services used and valued by customers. ■ Engagement leads directly to improvements to our service.

Donors – recruiting new people to the stem cell register		
<u>Key considerations:</u> ■ Recruiting people aged 16-30 provides better outcomes for patients. ■ Targeting a young, male audience who are more likely to be chosen to donate. ■ Increasing the chances of patients from minority ethnic backgrounds finding a donor.	<u>How we engage:</u> ■ Targeted, paid social media advertising. ■ Recruitment events through university groups, schools, colleges and other partnerships. ■ Focus groups and surveys.	<u>Outcomes and long-term objectives:</u> ■ To have an ethnically diverse stem cell donor register that serves all patients in need of a transplant. ■ Move towards supporter-led events.

Donors – potential stem cell donors on our register		
<u>Key considerations:</u> ■ Recruiting committed and engaged donors. ■ Maintaining donor engagement during their lifetime on the register.	<u>How we engage:</u> ■ Regular emails to educate and engage. ■ Programmes of enrichment to improve data on target donors (e.g. gaining CMV status).	<u>Outcomes and long-term objectives:</u> ■ To maintain a register of quality donors who are contactable, engaged and committed.

Donors – stem cell donors who are donating or have donated		
<u>Key considerations:</u> ■ Supporting donors throughout the donation process. ■ Ensuring that donors have the necessary information to make an informed decision about donation.	<u>How we engage:</u> ■ Direct communication and support throughout the donation. ■ Medical assessment and consent at our contracted collection centres. ■ Follow up post-donation in line with World Marrow Donor Association standards. ■ Post-donation panels where donors help us shape donor experience.	<u>Outcomes and long-term objectives:</u> ■ Stem cell products available for patients in the UK and worldwide, donated by informed and supported donors. ■ A positive and supportive donor experience that is seamless and tailored to their needs.

Financial donors		
<u>Key considerations:</u> ■ Understanding the need for their support and the impact. ■ Feeling valued and appreciated. ■ Fundraising activities are compliant with relevant regulations and laws.	<u>How we engage:</u> ■ Email communications (mass and direct). ■ Phone calls (direct and through telemarketing agency). ■ Advertising (digital and print). ■ Online events. ■ Webinars.	<u>Outcomes and long-term objectives:</u> ■ Retain supporters and inspire them to continue giving. ■ Attract new financial supporters. ■ Develop and grow our support from high value supporters and through partnerships.

Policy decision-makers		
<u>Key considerations:</u> ■ Building relationships with policy decision-makers so that we can influence emerging NHS and government changes affecting our patients.	<u>How we engage:</u> ■ Collaborating on specific policy areas and projects. ■ Gaining insight and input from experts, patients, healthcare professionals and policy-makers. ■ Campaigns targeted at decision-makers.	<u>Outcomes and long-term objectives:</u> ■ Influencing policy and practice for the benefit of patients now and in the future. ■ Taking opportunities to advocate for patients when policy changes are made at a local, regional or national level.

Regulators		
<u>Key considerations:</u> ■ Adherence to set standards to maintain the quality and safety of the products and services we provide. ■ Complying with all applicable regulatory requirements.	<u>How we engage:</u> ■ Submitting annual activity data and reports. ■ Reporting notifiable serious adverse events as necessary.	<u>Outcomes and long-term objectives:</u> ■ Anthony Nolan maintains a high standard of regulation and governance and is accredited accordingly.

Suppliers		
<u>Key considerations:</u> ■ Securing and maintaining relationships with reputable suppliers. ■ Provision of good quality, value-for-money goods and services. ■ Trade and customs disruption on supplies due to Brexit.	<u>How we engage:</u> ■ Due diligence checks on new suppliers.	<u>Outcomes and long-term objectives:</u> ■ Consistent supply of goods and services. ■ Ethical and sustainable procurement.

Internal Stakeholders

Employees		
<u>Key considerations:</u> ■ Growing, training and developing all employees. ■ Staff engagement. ■ A safe 'COVID-secure' place to work. ■ Staff wellbeing. ■ Diverse and inclusive culture and environment.	<u>How we engage:</u> ■ Regular supervision and team meetings. ■ All staff briefings, weekly CEO emails, newsletters and regularly updated intranet. ■ Staff Forum. ■ Wellbeing programme.	<u>Outcomes and long-term objectives:</u> ■ Employees develop and progress. ■ Employees are supported, engaged, informed and involved in the organisation. ■ Staff feel safe and confident at work.

Volunteers		
<u>Key considerations:</u> ■ Feeling supported and involved. ■ Meaningful volunteer roles that contribute to the goals of the organisation.	<u>How we engage:</u> ■ Volunteers are involved throughout the organisation. ■ Regular contact through volunteer managers and newsletters.	<u>Outcomes and long-term objectives:</u> ■ Volunteers are proactively engaged and support Anthony Nolan's work.

Stakeholder risk

In line with our risk management policy and procedures, Anthony Nolan has identified the key risks facing our individual stakeholders. We have in place robust mitigating actions to ensure that the likelihood and impact of any risks to our stakeholders are minimised as much as possible. Our greatest risk lies with our patients. Unfortunately, as they are acutely aware, they face the risk of further illness or death post-transplant. Anthony Nolan's focus is on finding patients the best possible donor match to minimise this risk and we constantly work to improve the outcomes for every one of our patients post-transplant.

In relation to building up our stem cell register, there is a risk that we are unable to attract the most suitable donors or the possibility that our donors have a negative donation experience. To mitigate these risks, we provide support throughout the donation process including support to donors post-donation.

As for any organisation, especially one built on the trust of patients and donors, the risk to our reputation is always a concern. We continue to take measures to ensure this is mitigated, be it through staff, trustee and volunteer training, due diligence checks on our suppliers or ensuring the research we support is scientifically sound and ethical.

All our staff are key to delivering Anthony Nolan's strategy and many offer unique medical, scientific or institutional expertise which could pose a risk to the organisation if we were to lose them. We have arrangements in place for succession planning and we constantly strive to ensure that our staff are engaged.

COVID-19 and Brexit have brought the potential risk that external circumstances pose into sharp focus. We mitigate against these risks by ensuring we have strong business continuity plans and specific taskforces that regularly meet to monitor the situation as it develops and provide ongoing solutions for the organisation.

Change in relationships with stakeholders

Along with most organisations, our relationships and engagement with stakeholders has moved from face-to-face to the virtual world. Whilst the transition has been smooth, and COVID-19 has not changed who we help, it has had an impact on how we best meet the needs of our stakeholders operationally.

For patients, Anthony Nolan has developed emergency assistance for enhanced financial support and a telephone support service for those feeling vulnerable and in need of emotional support. As a result, the organisation has given out a larger number of higher value grants this year. Through a new COVID-19 webpage, live updates have also been provided for patients.

Due to the discernible risks associated with COVID-19, Anthony Nolan has had increased interaction with our healthcare regulators. The organisation was required to adapt and accommodate changes in clinical practice, such as cryopreservation of stem cells. Variations were made to both our Human Tissue Authority licences, which resulted in a better working relationship with them. We are looking to further enhance this through a programme of work utilising the skills and expertise from both organisations to discuss ways to overcome further challenges and benefits from potential opportunities.

All stem cell donor recruitment for Anthony Nolan moved online this year. As in-person events resume in the coming months, rather than being staff led as they were pre-pandemic, they will be led by our volunteers and partners to enable us to be more supporter-led, targeted and cost-effective. We are developing training so that events can be run independently of Anthony Nolan staff, ensuring always that such events are run in accordance with our guidelines.

Many of our volunteers have been unable to carry out their usual roles, such as couriers, due to government restrictions. The way volunteers engage with Anthony Nolan is changing as more online roles and opportunities are explored.

Most of our staff have worked from home since the start of the pandemic except for our cord collectors, laboratory and research, Cell Therapy Centre staff, Clinical Nurse Specialists and some operational and support staff who have continued to work on-site. We have supported staff by:

- Promoting wellbeing support.
- Promoting flexible working to fit in with caring and home-schooling commitments.
- Providing staff working from home with laptops, keyboards, and screens.
- Moving our staff training to digital platforms.
- Garnering regular feedback from staff.

Our Facilities team have been proactive in introducing safety measures to protect staff who had to continue to work on-site. Workspaces were reconfigured to meet social distancing guidance and a desk booking system was introduced. Safety signage as well as hand hygiene and PPE stations were also installed. These measures have proved successful in containing the virus and enabled our key laboratory and donor activities to continue with limited disruption.

Between March and October 2020, circa 20% of our employees were furloughed as part of the government's Coronavirus Job Retention Scheme. Between November 2020 and March 2021, we furloughed six employees on average per month. In total, we have furloughed 87 individual employees in this reporting period. All staff who have been furloughed have received full pay. 15 employees were made redundant between October 2020 and April 2021. We did not award any salary increases at our annual salary review in April 2020.

Key decisions

The Board of Trustees is responsible for our strategic planning and policymaking. Accordingly, all key decisions, and the future long-term plans for the organisation, are referred to and taken by the Board.

By working collaboratively with the Strategic Leadership Team and listening to feedback from our many stakeholders and governance structures, the Board is well-positioned to respond to uncertainties and to promote the success of Anthony Nolan.

The corporate governance of the Charity is administered by two subcommittees of the Board, the Audit and Finance Committee and the Governance, Nominations and Remuneration Committee, which ensure oversight and best practice. The Board, alongside its delegated subcommittees, made a number of key decisions in 2020/21, each underpinned by the interests of our stakeholders and the wider factors set out in section 172 of the Companies Act 2006.

1. Electing Nicola Horlick as Chair of the Board of Trustees

The Decision: To appoint Nicola Horlick as the Chair Elect of Anthony Nolan's Board of Trustees.

Key considerations:

- The need for a Chair who has outstanding commercial experience and business acumen given the uniqueness, breadth and complexity of Anthony Nolan, as well as the likelihood of considerable change due to new opportunities in the medical fields underpinning our work.
- Finding a determined individual to drive our ambitious strategy.
- Preference for an individual who has a personal connection to Anthony Nolan, therefore ensuring their passion and devotion to the role.
- Harnessing the expertise of a recruitment company to help the Governance, Nominations and Remuneration Committee identify diverse and suitable candidates.

Impact: Nicola is due to take post in July 2021 and we look forward to updating on her progress as Chair next year.

2. Extending our strategy

The Decision: To extend our current strategy: *Together, We Can Save Lives*, by one year to March 2023.

Key considerations:

- When COVID-19 struck, Anthony Nolan was required to stabilise activity to ensure the needs of existing stakeholders were met. The organisation was therefore unable to progress in its ambition to broaden its research focus or to faster progress on data.
- The strategic aims that Anthony Nolan wants to achieve remain unchanged.
- Delivering the goals we set out in our strategy to our stakeholders.
- Taking a pragmatic approach in terms of finances and resources.

Impact: The organisation is provided with stability in the medium-term by setting a clear framework for our work over the next two years.

3. Investment in diversity and inclusion

The Decision: To commit resources to diversity and inclusion, including putting in place Inclusion Champions throughout the organisation and hiring a Director of Inclusion, Diversity and Involvement to move forward our work in this area.

Key considerations:

- By promoting and embedding the principles of equality, diversity and inclusion throughout the organisation we can better serve our patients and save more lives.
- Desire from staff to implement change in this area.
- New recommendations provided by the Charity Governance Code.

Impact: An inclusive and diverse workforce and Board is created that is best placed to serve our patients and save more lives.

4. Organisational restructuring programme

The Decision: Following an organisation restructuring programme, a difficult decision was made to make 15 employees redundant.

Key considerations:

- The effect of COVID-19 on areas of the business that we cannot continue for the foreseeable future, such as event fundraising and donor recruitment events.
- Ensuring we operate efficiently and adapt to the post COVID-19 landscape.
- How to best support staff that were made redundant during the process and into the future.
- How to rebuild morale in affected areas of the organisation.

Impact: A more resilient and focused organisation which continues to meet our objectives despite the necessary reduction in resources.

5. Sale of investment portfolio

The Decision: To sell 100% of Anthony Nolan's investment portfolio, valued at £3.2m, in June 2020.

Key considerations:

- Due to the uncertainty arising from the COVID-19 pandemic, it was considered that the organisation may require invested funds in the short term.
- Our previous investment strategy had been to invest surplus resources, that were unlikely to be needed for approximately five years, to be externally managed in a balanced portfolio.
- Our new investment strategy focuses on creating a purpose-driven development fund that provides funding contributions to the advancement of science and has impact on better patient outcomes by the participation and development of health-related ventures.
- The Board of Trustees is to set up a Development Fund sub-committee which has delegated responsibility to appraise, evaluate and recommend social and scientific investments and/or funding contributions in health-related ventures.

Impact: Improved liquidity through the availability of cash funds that can be used by the Charity now or in the future to fund development opportunities.

Organisational structure

Anthony Nolan is a registered charity and a company limited by guarantee incorporated in England and Wales. Every member undertakes to contribute an amount not exceeding £1 to the assets of the Charity in the event of it being wound up during the period of their membership or within one year thereafter. The members, who are the Trustees, are also the Directors of the Charity. Our governing document is in the form of a Memorandum and Articles of Association revised and updated on 6 April 2017.

The overall strategic direction of Anthony Nolan is determined by the Trustees, who meet formally at least five times each year. Due to the restrictions imposed by the COVID-19 pandemic, all Board and Board subcommittee meetings have taken place exclusively via video conferencing facilities as permitted by the Articles of Association. The Trustees are responsible for planning and policymaking and, accordingly, all key decisions are referred to and taken by the Board of Trustees. The Chair of the Board is Ian Krieger, who will remain in the role until Nicola Horlick takes over in July 2021.

There are two formal subcommittees of the Board, the Audit and Finance Committee and the Governance, Nominations and Remuneration Committee, chaired by Carol MacKinnon and Ian Krieger respectively. The Audit and Finance Committee enables the Trustees to consider issues on financial strategy and planning, investments, risk, corporate governance and matters relating to the external audit as well as internal controls in more detail where needed. The Committee meets approximately two weeks in advance of each Board meeting. The responsibilities of the Governance, Nominations and Remuneration Committee include recruiting new Trustees, managing Trustee terms of office and approving CEO remuneration. The Committee meets annually and on an ad hoc basis as and when requested by the Board of Trustees.

The day-to-day management of Anthony Nolan is entrusted to the Chief Executive and the Strategic Leadership Team, who have delegated authority from the Board to administer the affairs of the Charity. There is a short, closed session at the start of each Board meeting for the Trustees. The Chief Executive and Strategic Leadership Team are then invited to join the main part of the Trustees' meetings and provide them with updates on the work of Anthony Nolan.

The Chief Executive and Strategic Leadership Team meet regularly throughout the year to discuss and consider strategic and operational activities as well as review monthly financial and management information.

Recruitment, appointment, election, induction and training of Trustees

Recruitment and appointment

Appointment to the Board of Trustees is done via an open recruitment process after the needs of the organisation and a range of suitable candidates are considered by the Trustees. The number of Trustees is subject to a maximum of 20 and must be greater than three.

In January 2021, the Governance, Nominations and Remuneration Committee undertook an open recruitment process and Nicola Horlick was appointed to the Board of Trustees as a Trustee and Anthony Nolan's Chair Elect. Nicola will be appointed Chair of Anthony Nolan in July 2021 when Ian Krieger retires from this post.

Election

Under the Memorandum and Articles of Association, the Trustees retire from the Board by rotation every four years with the option of re-election for up to a maximum of three terms. A rotation plan is in place to ensure the phased retirement of existing Trustees for the purposes of business continuity as new Trustees are appointed.

The Trustees aim to ensure that the composition of the Board has the right balance of skills and expertise and is made up of individuals with suitable backgrounds and experience to contribute positively to the governance of Anthony Nolan. Since the members of Anthony Nolan are the Trustees and Directors, election and re-election is determined by the current Board in all cases.

Induction and training

The work of Anthony Nolan involves continuously advancing scientific and medical processes of stem cell transplants. To keep Trustees aware of the Charity's operations on both a national and international level, sessions are arranged to update them on facets of Anthony Nolan's work, either during Trustees' meetings or at separate meetings.

Presentations by outside advisers relating to specific governance issues are organised as appropriate. The induction of a new Trustee is tailored to the individual concerned and includes a guided tour of our operations, an introduction to key staff, and an outline of the duties and responsibilities of being a Trustee and Director. During the COVID-19 pandemic, an induction for the Chair Elect has taken place remotely, however plans are in place for face-to-face training once all our facilities re-open. All newly appointed Trustees are provided with an induction pack of key documents and information relating to Anthony Nolan. Each year, the January Board meeting includes refresher sessions for all Trustees in the format of an education day.

Declaration of interests

At each board meeting, there is a standing agenda item for each Board member to declare their interests. Each financial year, all Trustees complete a Declaration of Interests form and new Trustees complete a Fit & Proper Person Declaration, as recommended by HMRC. Declarations of Interests are also completed by members of the Strategic Leadership Team and the Company Secretary.

Remuneration of key management personnel

The Board of Directors, who are the Charity's Trustees, together with the Strategic Leadership Team, comprise our key management personnel, as defined by FRS102. All Trustees give their time freely and none receive remuneration. Trustees are entitled to claim reasonable expenses under our Expenses Policy. Trustees' expenses during the year are disclosed in **note 11 to the Financial Statements**. There were no related party transactions during the year except for those with Anthony Nolan Trading Limited. The pay of the Strategic Leadership Team, and any pay increases, are approved by the Chair of the Board of Trustees. Remuneration is reassessed as required when job vacancies are advertised based on a market benchmark across relevant sectors.

Number of Trustees

Currently, the Anthony Nolan Board has 13 Trustees. As part of the Board's rotation plans the number of Trustees, as well as the expertise identified as necessary for decision-making, enables a degree of succession planning and stability so that new Trustees can benefit from the experience of the longer-serving members. Four Trustees will retire in July 2021 and Board may look to make some new appointments in the forthcoming year.

Charity Governance Code

Anthony Nolan supports the seven principles of good governance laid out in the Charity Governance Code. As a charity registered in Scotland, as well as England and Wales, Anthony Nolan also supports the five core best practice principles laid down in the Scottish Governance Code 2018. Anthony Nolan aspires to always follow best practice guidelines and has considered the updates made to the Charity Governance Code in December 2020 regarding the principles of Integrity and Equality, Diversity and Inclusion. The following outlines how we have embedded the new recommended practices and further actions we have identified to strengthen our governance in these two areas.

Integrity

Anthony Nolan has identified five values that lie at the heart of everything we do and are vital for our success: accountable, passionate, patient-focused, innovative and improving every day. These values underpin the decisions made by, and actions of, our Board of Trustees and Senior Leadership Team. Anthony Nolan also adheres to the National Council for Voluntary Organisations (NCVO) Charity Ethical Principles by putting our patients and donors first, creating a safe space for staff, volunteers and beneficiaries and operating with integrity and openness. We have in place a number of policies and procedures to ensure that at Anthony Nolan, we work responsibly and ethically.

The Board of Trustees is mindful of the need for each member to have an equal opportunity to voice their opinion and to be listened to in order to avoid power imbalances. Board papers are sent out in advance of board meetings allowing members time to prepare any issues they want to address. Each Trustee has an equal vote on proposals.

To ensure power imbalances are avoided within the organisation, Anthony Nolan has numerous mechanisms to ensure employees' voices are heard. Staff are consulted on initiatives and organisational changes via our Staff Forum. Through the Forum, attended by our HR team, staff can put forward their opinions and suggestions via their representatives. Anthony Nolan also has a virtual suggestion box through which feedback, queries and suggestions can be submitted anonymously. This enables staff to voice their concerns in a way they feel most comfortable wherever they are located in the organisation. We also have a number of other staff groups, including our Inclusion Champions and Mental Health First Aiders, which act as an informal mechanism for staff to raise concerns and share ideas. Line managers encourage regular feedback in 1-2-1s and team meetings and our chiefs host regular divisional meetings, with the opportunity for staff to feedback and ask questions. We regularly distribute online surveys and have hosted focus groups. This year we also introduced **ANCast** webinars through which the CEO and other members of the Strategic Leadership Team update all staff on the direction and strategic aims of the organisation. At the end of each ANCast, staff have the opportunity to ask questions and raise any concerns, including anonymously if they wish to.

Protecting and safeguarding all those who come into contact with us through our work (including children and adults at risk) from abuse and mistreatment of any kind is a priority for Anthony Nolan and its Trustees. A Safeguarding Policy is in place and published on our website. The policy and compulsory annual training for staff, as well as training for volunteers identified as requiring inductions for working with the Charity, are subject to regular review by the Designated Safeguarding Director together with the leads for staff and volunteers, patients and donors. Arrangements are in place for staff and volunteers to report concerns to independent, external third parties to ensure at all times that matters can be raised without fear or favour. All Trustees are required to complete our compulsory safeguarding training and quarterly safeguarding reports are provided to Trustees as part of our governance process.

Equality, diversity and inclusion

In 2021, further to consultation with staff and Board members, Anthony Nolan recruited Dr Arti Agrawal as its first Director of Inclusion, Diversity and Involvement. Building on the organisation's commitment to diversity across all levels, this much-needed role demonstrates the importance the organisation places on investing in diversity and inclusion to ensure both a cultural and organisational change within the Charity.

Since joining Anthony Nolan, Arti has been getting to know the organisation to determine what the lived reality is for staff, volunteers and patients. This has included looking at data from last year's **Listen and Learn** series and staff pulse surveys, as well as speaking to the Inclusion Champions, student Marrow volunteers, senior leadership, and staff from across the organisation.

Momentum has been building amongst staff and volunteers for greater diversity and inclusion and Anthony Nolan has identified the following needs: to introduce more appropriate language around ethnicity, gender and sex, greater diversity on the donor register, better services and outcomes for our diverse patients, a more diverse organisation across all levels, and a more inclusive culture that supports progression of all staff members. In line with the recommendations in the Charity Governance Code, the organisation will look at setting actions at Board level to address these matters.

Anthony Nolan will develop a diversity and inclusion strategy, led by the Director of Inclusion, Diversity and Involvement, but co-created with staff to ensure that it is impactful, sustainable and deliverable. This approach will harness staff's understanding of the organisation, their area of work and ideas.

A number of pilots are planned, including one on **Deconstructing Ethnicity**. Through the pilots, the organisation will learn which approaches are successful and use the feedback to embed inclusivity in our future work as well existing projects such as Equity of Access, Future of Work, Website Accessibility, and Register Optimisation.

The Director of Inclusion, Diversity and Involvement will work with the Chair of the Board of Trustees to consider how we may approach increasing the diversity of our Board. This will include looking at recruitment and accessibility, as well as helping the Board to assess their understanding of equality, diversity and inclusion and embed recommended practices into their way of working. The Board sees the need for, and value of, diversity and, over the next year, will be taking steps to be the leaders in this area for the organisation and exemplify the need for change that has been identified.

Employees

Anthony Nolan provides an inclusive working environment for employees and supports professional and personal development. Anthony Nolan is committed to fostering a culture of diversity, respect and inclusion as well as equality of opportunity for all employees. Employment practices and policies are in place to ensure that no employee, or potential employee, receives less favourable treatment because of age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage and civil partnership, co-parenting, pregnancy and maternity/paternity.

In response to COVID-19, between March and October 2020, circa 20% of our employees were furloughed as part of the government's Coronavirus Job Retention Scheme. Between November 2020 and March 2021, we furloughed six (full and part-time) employees on average per month. In total we have furloughed 87 individual employees in this reporting period. All staff who have been furloughed have received full pay. We continue to monitor and respond to the situation as it evolves.

Employee information

The Strategic Leadership Team regularly provides information to employees through a variety of channels including all-staff briefings and weekly emails from the Chief Executive. Information, news, policies and resources are shared via our widely used staff intranet, Matchbook. Our Chief Executive provides updates to the whole organisation about the strategic direction of the Charity via **ANCast** webinars.

Regular consultations are held with staff through Anthony Nolan's Staff Forum which includes a representative from every division. Employees' views are also sought through web-based surveys, focus groups and team meetings, the results of which feed into senior management decision making.

During the COVID-19 pandemic, the Strategic Leadership Team set up a Coronavirus Taskforce. At the height of the pandemic, the Chief Executive reported weekly to all staff on matters discussed and outcomes agreed by the taskforce, in addition to the regular weekly Chief Executive email. In August 2020, the Restart Group was formed to consider how we bring staff back into the office and prepare further COVID-19 secure measures. From the end of 2020, updates from the Coronavirus Taskforce and Restart Group have been included in the weekly Chief Executive's internal communication as appropriate.

In order to ensure all staff were engaged, including those on furlough, information channels were set up for all divisions as well as an all-staff channel and one specifically dedicated to wellbeing, in order to share information with employees.

Wellbeing

As a result of the COVID-19 pandemic, and the subsequent lockdowns, the organisation has been concerned about the impact this has had on employees' mental health and wellbeing. By early April 2020, the HR team had set up a wellbeing channel, which acts as a hub for practical tips, resources and tools to support staff through this difficult period and builds on our existing programme. Colleagues have run online quizzes, meditation sessions, virtual yoga and pilates classes, a book club and an art club. This has proven a positive outlet for many and is a way for colleagues to stay in contact whilst working from home outside of their normal working patterns. Staff have been encouraged to schedule informal coffee breaks within their departments and regular **Time to Talk** drop-in sessions have been set up with our Mental Health First Aiders. A wellbeing newsletter is sent to staff each week which provides tips and information on an array of issues from how to support children through the pandemic to how to deal with sleep problems, as well as information on accessing services available through Anthony Nolan. This newsletter also provides links to external programmes such as meditation and online exercise classes.

Staff also have access to our Employee Assistance Programme (EAP) which provides webinars, health checks, online counselling and articles on physical and mental wellbeing. Our managers are encouraged to make wellbeing part of the regular conversations with their teams and signpost to the EAP, Mental Health First Aiders and wellbeing channel as appropriate.

We ran our annual **Wellbeing Week** in November 2020 which included a host of online activities, such as training around resilience in challenging times, and a reflective session which offered staff practical tips on how to look after their own wellbeing.

Our volunteers

Volunteers and supporters are the lifeblood of Anthony Nolan. As an organisation, we want them to be influential in shaping our activity and approaches. During what has been a difficult year, our volunteers and supporters have passionately supported us wherever possible and are eager to get back to the roles that they love and that are so valuable to Anthony Nolan.

Whilst the majority of events and opportunities were cancelled due to government guidance during 2020/21, as soon as it was safe to do so, our 58 active volunteer couriers undertook 1,082 trips across the UK to ensure that lifesaving stem cells were delivered to patients who needed them. This dedicated team of volunteers continue to demonstrate that they are committed to supporting Anthony Nolan and its goals during even the most trying times.

Despite being unable to run regular recruitment events, 613 volunteers across 50 Marrow groups were able to sign up 1,542 potential donors through online recruitment. The resourcefulness and willingness to adapt by Marrow groups is yet another example of how dedicated our volunteers are.

As we move forward into a changing world, Anthony Nolan is exploring and implementing new volunteer roles that can be done from home or online to enable people to support us at times that suit them. By creating new roles, as well as developing our existing ones, we want to enable our volunteers to reduce the reliance on in-person delivery and enable them to help save lives, wherever they might be.

Business relationships

Contract management procedures are in place to ensure that all supplier and customer contracts operate in the best interests of the Charity. New suppliers are subject to an appraisal process including standard requirements for declaring interests and agreements to comply with our Modern Anti-Slavery Statement. Service level agreements with customers are reviewed on a regular basis with contracted parties and price agreements negotiated to mutual benefit. A Delegation of Financial Authorities Policy and Schedule, approved by the Board of Trustees, is in place to determine signing authorities for contracts and oversight of key capital investment decisions, staffing matters and audit protocols. This ensures that Trustees are aware of the use of resources within the organisation. All contracts over £250,000 are reported quarterly to the Audit and Finance Committee, and any contracts with a value of £1m or higher require approval by the Chair and are reported to the Board of Trustees. A conflict of interests declaration is a standing item on the agenda for each Board meeting.

The Charity has a robust procurement and vendor risk management process in place to vet its customers and suppliers. Through effective contract management, engaging relationships and reviews with key suppliers and customers, the Board of Trustees, via delegated authority to the Audit and Finance Committee, ensure that value for money is achieved with charitable funds.

Further information on our work to foster trusted business relationships and partnerships is outlined in the strategic aims of our Organisational Strategy.

Safeguarding

To read about our commitment to safeguarding all who come into contact with Anthony Nolan, please refer to [our work on Integrity at page 49](#).

Whistleblowing

It is important that any fraud, misconduct or wrongdoing by staff or volunteers, including Trustees, acting on behalf of Anthony Nolan is reported and properly dealt with. A Whistleblowing Policy is in place to ensure that people can safely raise concerns and feel confident they will be listened to and their concerns will be properly investigated and acted upon appropriately.

Research integrity

In July 2020, Anthony Nolan implemented our new Research Integrity policy. The policy outlines our commitment to [The Concordat to Support Research Integrity](#) and how we fulfil the related principles in creating a comprehensive framework for responsible research conduct and governance. The policy also meets the UK Research and Innovation Policy and Guidelines on Governance of Good Research Conduct.

In the last year no concerns have been raised about the integrity, or otherwise, of research embarked on and produced by Anthony Nolan.

Anthony Nolan Trading Limited

Anthony Nolan Trading Limited (ANTL) is a wholly owned subsidiary of Anthony Nolan. This subsidiary plays a crucial role in fundraising on our behalf and the principal activity of ANTL is to carry on the trading operations of the group with a view to raising funds. This is achieved through advertising, fundraising events and utilising intellectual and similar rights held by the parent charity.

Professional indemnity insurance

Anthony Nolan has taken out an insurance policy that provides professional indemnity insurance cover for the Trustees. The cost of this insurance for the period was £4,052 (2019/20: £3,377).

Risk and corporate governance matters

Anthony Nolan operates a robust risk management process. In November 2020, a new Risk Management Policy and Organisational Risk Register was approved by the Board of Trustees and rolled out across the organisation. The aim of the policy and register is to ensure we actively identify and manage risks. This will strengthen our operational resilience thus aiding our ability to prevent, respond to, recover and learn from operational disruptions.

Our Organisational Risk Register records the main high-level risks facing Anthony Nolan that have the potential to impede the delivery of our strategic objectives or to have a very significant impact on the organisation. This Register is reviewed by our Strategic Leadership Team and Audit and Finance Committee every six months and reviewed and approved by the Board annually.

Throughout the organisation, we have also implemented Divisional Risk Registers which help staff identify and manage risks within their division and are reviewed on a more frequent basis. This allows us to continually identify the controls and plans in place to mitigate against the risks.

Our ability to continue to save patients' lives, and improve their quality and length of life, depends on having sufficient funding in place. Therefore, continuity of income remains the first of three principal risks identified by the Board of Trustees. Our response to this risk has been informed by the impact of the COVID-19 pandemic and the fact that we are in part dependent on NHS healthcare policy. A range of actions have been, and continue to be taken to mitigate this risk. These include working closely and building commercial relationships with UK transplant centres and international registries, working on ways to diversify our income portfolio (through our expanded Cell & Gene Therapy Service), and influencing healthcare funding with the UK government. We adopt continuous improvement in our approach to fundraising appeals and donations within the digital space, alongside marketing campaigns that invest in our brand to help raise our profile.

The risk that we do not operate in accordance with all medical, scientific and safety regulatory requirements and licences, has been identified as the second of three principal risks by the Board of Trustees. This is mitigated by our Quality and Regulation Team who play a key role in ensuring that the Charity operates in accordance with all operational and technical regulatory requirements. This includes ensuring compliance with the Care Quality Commission and the Human Tissue Authority (HTA), which licences our registry and our Cell Therapy Centre in Nottingham to carry out our lifesaving work. Our registry also holds full accreditation by the World Marrow Donor Association (WMDA). Our Histocompatibility Laboratory is accredited by the United Kingdom Accreditation Service to ISO 15189 standards as well as by the European Federation for Immunogenetics. Our Cell Therapy Centre holds National Ethical Approval to act as a research tissue bank and has FACT-NetCord accreditation. The team also provides support to help navigate the regulatory environment of cell and gene therapy services.

Under the legislative requirement of the HTA, the Quality and Regulation Team investigates all incidents that have a direct effect on patients and donors. These incidents are reported as serious events and adverse reactions (SEARs) to the HTA reporting system. All post-donation effects in our donors are monitored as part of our donor follow-up procedure and if an event meets the serious product events and adverse reactions (SPEARs) criteria, this is reported to the WMDA's central reporting system.

In the process of carrying out our lifesaving work, the health and safety of donors, patients, staff and volunteers is of paramount importance. We have a range of controls in place to mitigate the risk of any potential harm to individuals. These include health and safety training, inductions and guidance for our staff and volunteers, medical check assessments before the donation process, verification procedures to ensure correct identification of patients and donors prior to transplant, and risk assessments carried out for all events.

The loss or misuse of personal data is the third principal risk identified by the Board of Trustees, as we hold sensitive information in relation to patients, donors, financial supporters, staff and volunteers. To mitigate against this risk, we have clear data protection, information security and confidentiality policies and induction and online training in place. Technical solutions have been established to ensure personal and sensitive medical data is encrypted and transmitted securely. These policies and procedures are communicated to staff and volunteers, are available through a dedicated page on our intranet and are monitored by a standing Data Security and Protection Working Group. Internal notification reporting processes of data loss or misuse are in place to identify, investigate and mitigate against any potential issues with regards to the use of personal data.

A Privacy Office, run by a dedicated Data Privacy Manager, ensures that data protection impact and legitimate interest assessments are completed where necessary. Policies and procedures comply with the requirements of the UK General Data Protection Regulation (UK GDPR) and the Data Protection Act 2018 and our Data Protection Officer reports directly to the Board through a quarterly written report. Our organisation-wide data mapping exercise is undertaken annually which identifies all of our data processing activities throughout the organisation as well as any areas of risk. We have implemented a robust procedure to respond to Subject Rights Requests. During the Financial Year 2020/21 two Subject Access Requests and 80 Rights to Erasure Requests were received. All were resolved within the required one month timeframe.

Given the impact of the COVID-19 pandemic and the need for remote working, we have introduced more robust information security policies to ensure that our systems are secure and regularly reviewed, with proportionate disaster recovery measures in place. There has also been a rollout of monthly bitesize cyber security training sessions for all staff as well as simulated phishing testing so we can identify any weaknesses.

Contracts management procedures are in place to make sure that all supplier contracts operate in the best interests of the Charity. New suppliers are subject to an appraisal process including standard requirements for declaring interests and agreements to comply with our Modern Anti-Slavery Statement. A Delegation of Financial Authorities Policy and Schedule, reviewed and updated in March 2021, is in place to determine signing authorities for contracts, as agreed by the Board.

All contracts over £250,000 are reported quarterly to the Audit and Finance Committee. Any contracts with a value of £1m or higher require approval by the Chair and are reported to the Board of Trustees. A conflict of interests declaration is a standing item on each Board agenda.

As required by the Charity Commission, a Serious Incidents Reporting Policy is in place and during the last year no serious incidents were reported.

Energy and carbon reporting

As part of the obligations set out under the Energy and Carbon Report Regulations 2018, Anthony Nolan is required to disclose the energy use and carbon created as an organisation over the last reporting year. To fulfil this we have measured our UK energy and greenhouse gas emissions as classified within scopes 1 and 2 of the Streamlined Energy and Carbon Reporting (SECR) which are presented in tables 1, 2 and 3 below. This statement excludes scope 3 emissions as these are not material to our activities.

Organisational and operational boundaries of the company

Anthony Nolan does not have a complex company structure and therefore the company accounts for 100% of the greenhouse gas (GHG) emissions from operations over which it has control. Its structural and operational boundaries are the same with the company operating from three sites:

- 1. Head Office, London**
- 2. Nottingham**
- 3. Laboratory and Research Facility, London**

The sites at Nottingham and the London laboratory are located on hosted sites and therefore receive energy from third parties. As such, consumption data is based on sub-meter readings taken by these parties.

Energy consumption and greenhouse gas emissions

The methodology used for determining energy and carbon emissions within this section of the report comes from a number of sources of our greenhouse emissions:

- 1. Natural gas used for heating and hot water in the buildings we occupy (Scope 1)**
- 2. Electricity used for lighting, cooling and air conditioning and the operation of laboratory equipment (Scope 2)**
- 3. Fuel consumption in vehicles that are used for the organisation including staff vehicles used for business travel and fleet vehicles (Scope 1)**

Gas and electricity consumption have been taken from invoices and sub-meter readings as appropriate. Where the readings or invoices do not cover a full year, we have estimated the consumption for the full year based on the average consumption per day in the period.

Fuel consumption is measured from use of grey fleet vehicles and journeys by employees traveling from site to site. Where employees use their own vehicles for business purposes, a mileage allowance is paid, even though we are only indirectly responsible.

Our consumption and associated greenhouse gas emissions for the financial year April 2020 to March 2021 are shown in Tables 1 and 2.

Table 1: Total energy consumption and associated greenhouse gas emissions from Scope 1 and Scope 2 for SECR Year 2 reporting period

Energy Type:	Energy Use (kWh)	% Split kWh	Emissions (tCO ₂ e/yr.)	% Split CO ₂ e
Combustion of Gas (Scope 1)	355,602	35.81%	65.0	28.51%
Transport (Scope 1)	23,668	2.38%	6.0	2.63%
Electricity (Scope 2)	613,762	61.81%	157.0	68.86%
Total (Scope 1 & 2)	993,032	100.00%	228.0	100.00%

Table 2: Energy and Carbon Conversion Factors

Activity	Fuel	Unit	Year	kg CO ₂ e
Electricity generated	Electricity: UK	kWh	2020	0.2556
Gaseous Fuels	Natural gas	kWh	2020	0.18385
Transport (average car)	Diesel	kWh	2020	0.24462
Transport (average car)	Diesel	Mile	2020	0.27901

UK Government GHG Conversion Factors for Company Reporting, 2020, BEIS & DEFRA

Vehicle use is based on fleet vehicles and employee travel using their own vehicles for business use. An assumption has been made that all vehicles use standard diesel biofuel blend and have an engine transmission of 2L or less. Therefore 0.24462 kg CO₂e per kWh value has been applied. The fuel conversion factor applied is (kWh/mile): 0.27901 kg CO₂e per mile / 0.24462 kg CO₂e per kWh = 1.1406 kWh/mile.

Intensity ratio

Intensity ratios compare emissions data with an appropriate business metric or financial indicator. This allows a comparison of energy efficiency performance over time and with other similar types of organisations. We have chosen to compare our overall emissions with our annual turnover for the 2020/21 year.

Table 3: Intensity Ratio - Energy consumption and associated greenhouse gas emissions per £100,000 of annual turnover

Energy Consumption	Total greenhouse gases emissions	The annual group turnover (£'M)	Intensity Ratio	Intensity Ratio
(kWh)	(tCO ₂ e)	FY 19/20	(kWh / £100,000 turnover)	(tCO ₂ e / £100,000 turnover)
993,032	228.0	51.4	1932.0	0.444

Energy use and reduction measures

We have seen a substantial reduction in the overall carbon and greenhouse gas emissions in comparison to the prior year (2019/20). Energy consumption is down 397,030 kWh, 29% and greenhouse gas emissions down 97.2 tCO₂e, 30% versus the prior year. This is primarily due to reduced activities and staff working from home during the COVID-19 pandemic year. We are committed to continually reducing our energy use and have established the following measures to achieve this:

1. We will continue to support best practice for green and sustainability measures such as reducing energy waste through staff education and local practices.
2. We have an established Green Committee that proactively review our processes and practices.
3. We have introduced local measures to encourage employees to reduce emissions through reduced heating, lighting and cooling.
4. We have installed BMS (building management support) systems to reduce energy consumption in our London and Nottingham laboratories.
5. We have installed additional bicycle storage on our sites and encourage cycling to work by operating a bicycle scheme and providing storage and washing facilities on all sites.
6. We have an asset replacement programme in place to replace old inefficient heating and cooling plant.
7. Where we need to upgrade our workspaces, we actively seek to incorporate energy saving measures including replacing inefficient plant and upgrade insulation.

Brexit

Intertwined with our response to the COVID-19 pandemic, the Charity has continued to adapt to the incoming changes of the UK leaving the European Union.

With negotiations between the UK and EU still ongoing by September 2020, the prospect of a 'No-Deal' Brexit remained a possibility. As part of our ongoing contingency planning, the Strategy team continued to support colleagues across the organisation in understanding the implications of leaving the EU for their operations, processes and relationships.

Implications for Anthony Nolan

The 'Trade and Cooperation Agreement' as agreed on 24 December 2020 has various implications for the organisation including:

- Continued air, road, rail and maritime connectivity, though market access has fallen below what the Single Market offers. These arrangements offer safeguards for private and volunteer courier transportation of stem cells, and our business-critical supply chains.
- There is no longer freedom of movement of labour between the UK and European Economic Area (EEA) countries, with the UK Government introducing a new points-based immigration system. Recruitment timelines may be extended but there are exceptions built in for most health care professionals and a Global Talent Visa is available for life sciences professionals.
- Regulatory alignment with regards to human tissues and medicine licensing currently continues, with the UK carrying over previous EU rules. However, the European Commission is consulting on new proposals in blood, tissues and cells regulation, and the UK remains ambitious in setting independent regulations over time.
- NHS authorities across the UK have continued to fortify their supply chains against disruptions resulting from Brexit, the pandemic or additional winter pressures. To date, no significant medicine or medical product shortages that could be directly linked to the UK's departure have impacted UK transplantations.
- Following the UK's formal exit and free trade agreement, the British economic environment has not significantly diverted beyond the existing pandemic context. As of 31 March 2021, sterling sits at around \$1.38 and no additional financial pressures have been noted with respect to budgeting and supply chain management.

Our response

- In order to mitigate any potential disruptions to stem cell transportation, alternative private couriership services have been put in place for imports and exports from the EU. Similarly, discussions with Heathrow Airport have continued throughout the Transition Period, ensuring volunteer couriers would be prioritised in the event of airport delays and disruption.

- Written agreements have been confirmed with current EU-based licence establishments and registries to allow for continued regulatory compliance for imports and exports. A WMDA 'umbrella' data agreement will also facilitate data transfers between the UK and EU partners.
- HR colleagues have continued to liaise with all employees who have EU citizenship, informing them of the current situation, and supporting them with applications to the UK Government's EU Settlement Scheme.

Professional fundraising partnerships

Anthony Nolan uses a select group of third-party agencies to fundraise on our behalf. We have longstanding partnerships with all the third-party agencies we use, and they were all appointed following a thorough tender process driven by a focus on quality. Due to COVID-19 restrictions, we did not carry out any face-to-face fundraising this year, but continued to work with external agencies to deliver our telephone fundraising campaigns as well as our Payroll Giving programme and our raffles and lottery.

In order to ensure the safety and protection of our supporters, we conduct regular monitoring and mystery shopping of those dealing directly with the general public. We listen to a minimum of 10 calls a month during a telephone campaign to check the quality of appeals made on our behalf. We also collate all feedback we receive about these practices and pass it on to the relevant agencies so we can adapt our approach if necessary. Anthony Nolan is scrupulous about these practices.

To aid with this, we also have a robust policy – approved by our Board of Trustees – to protect vulnerable people, intrusion of privacy and unreasonably persistent approaches. This includes extensive training of those fundraising on our behalf.

We received a total of eight complaints related to fundraising in 2020/21, which is significantly less than we have received in previous years (45 in 2019/20). This is likely to be due to the limitations on our fundraising activities due to COVID-19 restrictions and we asked significantly fewer people for support directly. Most complaints received were from people who objected to receiving a request to donate or the method of the approach.

Anthony Nolan values the privacy of all those who support us in our lifesaving work. We have systems in place to ensure that supporter data is collected, managed and processed in line with all necessary legislation and to satisfy the requirements of the UK GDPR and Data Protection Act 2018. We are members of the Fundraising Regulator and comply with all requirements, including following the Fundraising Regulator Code of Fundraising Practice. We also check that, as representatives of Anthony Nolan, our agencies follow these practices. Anthony Nolan holds a Gambling Commission Licence for our postal and online raffle programme and lottery.

We value all types of feedback about our fundraising and marketing activities, including complaints. These help us to learn and to improve the services we offer. We attempt to respond to all people directly about their feedback, provided we have the information and permission to do so, in order to try to resolve the issue and to turn it into a positive experience.

Complaints can be sent to us in writing to our Fundraising Complaint Coordinator at our head office, by email to fundraisingcomplaints@anthonyolan.org, or by phoning 020 7424 6626.

Complaints are reviewed by the Complaint Coordinator before being forwarded to the relevant person to investigate and respond. This depends on the nature of the feedback and the type of activity it relates to. We will get back to people within 14 days to confirm receipt and within 30 days to follow up on the investigation including details of what they can do if they are dissatisfied with the outcome. Where individuals are not satisfied with the outcome of the investigation, they can escalate these to senior staff at Anthony Nolan and/or the Fundraising Regulator. We record feedback centrally in order to assess which activities are driving complaints, to ensure that we are meeting timelines to understand any emerging themes and to support staff training where appropriate. These are collated and shared as part of our central feedback reporting to our senior leadership and as members of the Fundraising Regulator we report back to them as part of the annual complaints return.

Fundraisers

At the request of the organisations listed below, we disclose and recognise the following fundraising donations received in 2020/21. We are grateful for their generous support of our work.

- PF Charitable Trust – £10,000 received on 29 May 2020 as part of our COVID-19 Emergency Appeal.
- The Steel Charitable Trust – £10,000 received on 24 June 2020 as part of our COVID-19 Emergency Appeal.
- Tracey Sollis Leukaemia Trust – £6,736 received on 14 August 2020 for equipment.
- Jack Petchey Foundation – £25,000 received on 26 November 2020 for our Clinical Support Nurses.
- David and Ruth Lewis Family Charitable Trust – £60,000 received on 24 December 2020 for research as part of a £60,000 three-year pledge.
- Susan Amber Gordon – £5,000 received on 3 February 2021 in recognition of University College Hospital London and Anthony Nolan providing her stem cell transplant.
- Wolfson Foundation – £218,620 received 30 April 2021 but accounted for in 2020/21 for equipment.

Working with pharmaceutical companies

Anthony Nolan works with pharmaceutical companies in a variety of ways and several policies ensure these relationships are conducted ethically. We have a policy in place which governs how we work with pharmaceutical companies in a non-commercial capacity. If a relationship is commercial, this is subject to our usual due diligence procedures for working with third parties and is always subject to a contractual framework. We always aim to be open, transparent and honest in response to any public, supporter, patient or media enquiry concerning any of our relationships with pharmaceutical companies. In the last year, our non-commercial work with pharmaceutical companies included:

- Gilead – £15,000 grant received on 18 April 2020 to be used to save lives during the COVID-19 pandemic.
- Servier Laboratories Ltd – £1,000 grant received on the 28 April 2020 to be used to facilitate the working of Anthony Nolan during COVID-19.
- Takeda – £10,000 received on 28 April 2020 as a grant to fund saving patients' lives with blood cancer during COVID-19.
- Pfizer – £10,000 grant received on 29 April 2020 to be used to support the Institution's existing activities, any increased demands on its services and its continued work to support patients and the wider community during the COVID-19 pandemic.
- Mallinckrodt – £10,000 grant received on 1 June 2020 to be used to save the lives of people with blood cancer during the pandemic.
- Amgen – £10,000 grant received 15 June 2020 as part of the COVID-19 Emergency Patient Grant Scheme.
- Jazz Pharmaceuticals – £10,000 grant received 9 July 2020 for ANTL Transplant Operations Emergency Measures, to deliver specific emergency activities aimed at ensuring that lifesaving stem cells arrive at their destination in time for the patient's transplant, and in response to the significant challenges that the COVID-19 pandemic poses to the transplant operations services.
- Gilead – £10,000 grant received on 11 August 2020 for addressing the health inequality exposed for minority ethnic communities by COVID-19.
- Merck Sharp & Dohme (MSD) – £10,000 received on 23 October 2020 to fund a policy online roundtable event.

Anthony Nolan is one of 15 UK charities who form the Blood Cancer Alliance (BCA). Together, we are working to tackle the issues blood cancer patients face and improve the experience and outcomes of all those living with blood cancer. While the BCA receives funding from the pharmaceutical industry, it is wholly independent of these commercial organisations. Current funding totals £95,000, full details of which are available on the BCA website (bloodcanceralliance.org/funding).

Public benefit

The Trustees, in exercising their powers and duties, have complied with their duty in section 4 of the Charities Act 2011 and have had due regard to the public benefit guidance published by the Charity Commission. In preparing the report and accounts, the Trustees have complied with the requirements set out in the guidance to report on the significant activities and achievements of the Charity in 2020/21. They have reported in a way that both sets out the aims and strategies of the Charity and demonstrates how our aims and activities were carried out for the public benefit.

Trustees' and Directors' responsibilities in the preparation of financial statements

The Trustees are responsible for preparing the strategic report, the Trustees' report and the financial statements in accordance with the applicable law and regulations.

Company law requires the Trustees to prepare financial statements for each financial year in accordance with United Kingdom Generally Accepted Accounting Practice (United Kingdom Accounting Standards and applicable law). Under company law the Trustees must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the group and charity and of the incoming resources and application of resources, including the income and expenditure, of the group and charity for that period.

In preparing these financial statements, the Trustees are required to:

- select suitable accounting policies and then apply them consistently,
- make judgements and accounting estimates that are reasonable and prudent,
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements, 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 Charity's transactions and disclose with reasonable accuracy at any time the financial position of the Charity, and enable them to ensure that the financial statements comply with 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. They are also responsible for safeguarding the assets of the Charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

Financial statements are published on the Charity's website in accordance with the legislation in the UK governing the preparation and dissemination of financial statements, which may vary from legislation in other jurisdictions. The maintenance and integrity of the Charity's website is the responsibility of the Trustees. The Trustees' responsibility also extends to the ongoing integrity of the financial statements contained therein.

Auditor

Following a formal tender process, BDO were appointed by the Audit and Finance Committee in November 2020 as the new auditors for Anthony Nolan.

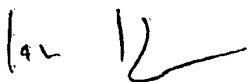
Statement as to disclosure of information to auditor

The Trustees who were in office on the date of approval of these financial statements have confirmed, as far as they are aware, there is no relevant audit information of which the auditor is unaware. Each Trustee has confirmed that they have taken all the steps that they ought to have taken in order to make themselves aware of any relevant audit information, and to establish that it has been communicated to the auditor.

Funds held as custodian

Although Anthony Nolan maintains restricted funds to deal with income which is earmarked for a particular purpose by donors, sponsors, and other funds, Anthony Nolan does not currently hold, and the Trustees do not intend that it will in the future hold, any funds as custodian for any third party.

The Trustees' **Annual Report** is approved by order of the Board of Trustees and the strategic report and the Directors' report required by company law (included therein) are approved by the Board of Trustees in their capacity as the directors at a meeting on 22 July 2021 and signed on their behalf by:

A handwritten signature in black ink, appearing to read 'Ian Krieger', with a stylized flourish at the end.

Ian Krieger
Chair

Independent auditors' report to the Trustees and members of Anthony Nolan

Opinion on the financial statements

In our opinion, 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 March 2021 and of the Group's incoming resources and application of resources and the Parent Charitable Company's incoming resources and application of resources for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006, the Charities and Trustee Investment (Scotland) Act 2005 and regulations 6 and 8 of the Charities Accounts (Scotland) Regulations 2006, as amended in 2010.

We have audited the financial statements of Anthony Nolan ("the Parent Charitable Company") and its subsidiaries ("the Group") for the year ended 31 March 2021 which comprise the consolidated statement of financial activities, the parent statement of financial activities, the consolidated and charity balance sheets, the consolidated cash flow statement and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

Basis for opinion

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

Conclusions related to going concern

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

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

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

Other information

The Trustees are responsible for the other information. The other information comprises the information included in the Annual Report and Financial Statements, other than the financial statements and our auditor's report thereon. The other information comprises: The Trustees' report and the strategic report. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon. Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in 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 in this regard.

Other Companies Act 2006 reporting

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

- the information given in the Trustees' report, which includes the Directors' Report and the strategic report prepared for the purposes of Company Law, for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the strategic report and the Directors' report, which are included in the Trustees' report, have been prepared in accordance with applicable legal requirements.

In the light of the knowledge and understanding of the Group and the Parent Charitable Company and its environment obtained in the course of the audit, we have not identified material misstatement in the strategic report or the Trustee's report.

We have nothing to report in respect of the following matters in relation to which the Companies Act 2006 and the Charities and Trustee Investment (Scotland) Act 2005 requires us to report to you if, in our opinion;

- proper and adequate 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
- the Parent Charitable Company financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of Directors' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit.

Responsibilities of Trustees

As explained more fully in the Trustees' and Directors' Responsibilities in the Preparation of the Financial Statements, the Trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the Trustees determines 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 the 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 or the Parent Charitable Company or to cease operations, or have no realistic alternative but to do so.

Auditor's responsibilities for the audit of the financial statements

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

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

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

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud is detailed below:

We considered the Group's own assessment of the risks that irregularities may occur either as a result of fraud or error and the Group's compliance with laws and regulations that have a direct impact on the financial statements, including the Companies Act, Charities Act 2011 and Charities and Trustee Investment (Scotland) Act 2005. Other laws and regulations where non-compliance may have a material impact on the financial statements include: employment law, taxation legislation, data protection, health and safety legislation, fundraising regulations and the Human Tissue Act 2004. Auditing standards limit the required audit procedures to identify non-compliance with these laws and regulations to enquiry of Those Charged with Governance and other management and inspection of regulatory and legal correspondence, if any.

We also evaluated management's incentives and opportunities for fraudulent manipulation of the financial statements (including the risk of override of controls), and determined that the principal risks were related to posting inappropriate journal entries to manipulate financial results and management bias in accounting estimates.

In addition, we considered the scope for management to manipulate financial results through the timing of the recognition of income, in particular income relating to the provision of stem cell donors.

Audit response to risks identified

The Senior Statutory Auditor has assessed and concluded that the engagement team collectively had the appropriate competence and capabilities to identify or recognise non-compliance with laws and regulations.

We enquired of management and those charged with governance, including obtaining and reviewing supporting documentation, concerning the Group's policies and procedures relating to:

- identifying, evaluating and complying with laws and regulations and whether they were aware of any instances of non-compliance;
- detecting and responding to the risks of fraud and whether they have knowledge of any actual, suspected or alleged fraud; and
- the internal controls established to mitigate risks related to fraud or non-compliance with laws and regulations.

Our tests included reviewing the financial statement disclosures and tested to supporting documentation to assess compliance with relevant laws and regulations discussed above.

We made enquiries of the Trustees' representatives and management and performed analytical procedures to identify any unusual or unexpected relationships that may indicate risks of material misstatement due to fraud.

We also reviewed minutes of meetings of those charged with governance and performed audit procedures to identify any unusual or unexpected relationships that may indicate risks of material misstatement due to fraud.

In addressing the risk of fraud through management override of controls, we tested the appropriateness of journal entries and other adjustments to address the risk of management override of controls; assessed whether the judgements made in making accounting estimates are indicative of a potential bias; and evaluated the business rationale of any significant transactions that are unusual or outside the normal course of business.

We challenged assumptions made by management in their significant accounting estimates, including revenue recognition, capitalisation policies and cost allocation methodology.

Throughout our audit procedures, we did not identify any matters relating to irregularities, including fraud.

Our audit procedures were designed to respond to risks of material misstatement in the financial statements, recognising that the risk of not detecting a material misstatement due to fraud is higher than the risk of not detecting one resulting from error, as fraud may involve deliberate concealment by, for example, forgery, misrepresentations or through collusion. There are inherent limitations in the audit procedures performed and the further removed non-compliance with laws and regulations is from the events and transactions reflected in the financial statements, the less likely we are to become aware of it.

A further description of our responsibilities for the audit of the financial statements is located at the **Financial Reporting Council's (FRC) website**. This description forms part of our auditor's report.

Use of our report

This report is made solely to the Charitable Company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006, and to the Charitable Company's trustees, as a body, in accordance with the Charities and Trustee Investment (Scotland) Act 2005. Our audit work has been undertaken so that we might state to the Charitable Company's members and trustees those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the Charitable Company, the Charitable Company's members as a body and the Charitable Company's trustees as a body, for our audit work, for this report, or for the opinions we have formed.

DocuSigned by:



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10 December 2021

David I Anson (Senior Statutory Auditor)

For and on behalf of BDO LLP, statutory auditor, Southampton, UK

BDO LLP is a limited liability partnership registered in England and Wales (with registered number OC305127).

Consolidated Statement of Financial Activities

(Including Consolidated Income and Expenditure Account) for the year ended 31 March 2021

	Notes	Unrestricted Funds	Restricted Funds	Total 2021	Unrestricted Funds	Restricted Funds	Total 2020
		£'000	£'000	£'000	£'000	£'000	£'000
Income from:							
Donations and legacies	2	8,008	796	8,804	8,429	711	9,140
Charitable activities							
Donor provision	5	41,260	315	41,575	45,078	-	45,078
Research	6	9	309	318	28	249	277
Other trading activities	3	320	-	320	594	-	594
Investments	4	102	-	102	194	-	194
Other	7	261	-	261	106	-	106
Total income		49,960	1,420	51,380	54,429	960	55,389
Expenditure on:							
Raising funds:							
Expenditure on raising donations and legacies	8	3,270	-	3,270	4,221	-	4,221
Expenditure on other trading activities	3, 8	238	-	238	375	-	375
Charitable activities:							
Donor provision	8	40,676	952	41,628	43,988	285	44,273
Education and awareness	8	3,144	-	3,144	3,405	-	3,405
Research	8	2,473	317	2,790	2,729	257	2,986
Total expenditure		49,801	1,269	51,070	54,718	542	55,260
Net income/(expenditure) before investment gains/(losses)		159	151	310	(289)	418	129
Net gains/(losses) on investments	14	275	-	275	(229)	-	(229)
Net income/(expenditure)		434	151	585	(518)	418	(100)
Transfers between funds	23	246	(246)	-	41	(41)	-
Net movements in funds		680	(95)	585	(477)	377	(100)
Reconciliation of funds							
Total funds brought forward	23	13,368	946	14,314	13,845	569	14,414
Total funds carried forward	23	14,048	851	14,899	13,368	946	14,314

Parent Charity Only Statement of Financial Activities

(including Parent Charity Only Income and Expenditure Account) for the year ended 31 March 2021

	Notes	Unrestricted Funds	Restricted Funds	Total 2021	Unrestricted Funds	Restricted Funds	Total 2020
		£'000	£'000	£'000	£'000	£'000	£'000
Income from:							
Donations and legacies	2	8,008	796	8,804	8,429	711	9,140
Charitable activities							
Donor provision	5	41,260	315	41,575	45,078	-	45,078
Research	6	9	309	318	28	249	277
Investments		149	-	149	310	-	310
	4						
Other	7	296	-	296	209	-	209
Total income		49,722	1,420	51,142	54,054	960	55,014
Expenditure on:							
Raising funds:							
Expenditure on raising donations and legacies	8	3,270	-	3,270	4,221	-	4,221
Charitable activities:							
Donor provision	8	40,676	952	41,628	43,988	285	44,273
Education and awareness	8	3,144	-	3,144	3,405	-	3,405
Research	8	2,473	317	2,790	2,729	257	2,986
Total expenditure		49,563	1,269	50,832	54,343	542	54,885
Net income/(expenditure) before investment gains/(losses)		159	151	310	(289)	418	129
Net gains/(losses) on investments	14	275	-	275	(229)	-	(229)
Net income/(expenditure)		434	151	585	(518)	418	(100)
Transfers between funds	23	246	(246)	-	41	(41)	-
Net movements in funds		680	(95)	585	(477)	377	(100)
Reconciliation of funds							
Total funds brought forward	23	13,308	946	14,254	13,785	569	14,354
Total funds carried forward	23	13,988	851	14,839	13,308	946	14,254

Consolidated and Charity Balance Sheets

As at 31 March 2021

Company number: 02379280 Charity number: 803716 Charity number (Scotland): SCO38827

	Notes	Group 2021	Group 2020	Charity 2021	Charity 2020
		£'000	£'000	£'000	£'000
Fixed assets					
Tangible assets	13	3,099	2,465	3,099	2,465
Investments	14	1	2,907	1	2,907
		3,100	5,372	3,100	5,372
Current assets					
Stocks	15	424	653	424	653
Debtors	16	10,187	11,792	10,821	12,131
Cash at bank and in hand	17	11,241	7,514	10,521	6,931
		21,852	19,959	21,766	19,715
Liabilities					
Creditors: Amounts falling due within one year	18	9,449	9,877	9,423	9,693
		12,403	10,082	12,343	10,022
Net Current assets					
		15,503	15,454	15,443	15,394
Total assets less current liabilities					
Creditors: Amounts falling due after one year	19	-	572	-	572
Provisions for liabilities	22	604	568	604	568
		14,899	14,314	14,839	14,254
Net assets					
The funds of the Group and the Charity					
Restricted income funds	23	851	946	851	946
Unrestricted income funds					
General Fund	23	14,048	13,268	13,988	13,208
Designated funds	23	-	100	-	100
		14,899	14,314	14,839	14,254
Total Group and Charity funds	23,24				

The financial statements on pages 71 to 100 were approved by the Trustees and authorised for issue on 22 July 2021 and are signed on their behalf by



Date: 22 July 2021

Chair

Ian Krieger

Consolidated and Charity Statements of Cashflow

For the year ended 31 March 2021

Company number: 02379280 Charity number: 803716 Charity number (Scotland): SCO38827

	Group 2021	Group 2020	Charity 2021	Charity 2020
	£'000	£'000	£'000	£'000
Reconciliation of net income to net cash flow from operating activities				
Net income/(expenditure) for the reporting period	585	(100)	585	(100)
Adjustments for:				
Depreciation	621	886	621	886
Change in value of investments	(286)	186	(286)	186
Interest and rents from investments	(102)	(194)	(149)	(310)
Decrease/(Increase) in stocks	229	(79)	229	(79)
Decrease/(Increase) in debtors	1,605	(1,467)	1,310	(1,383)
(Decrease)/Increase in creditors	(1,000)	880	(842)	900
Increase in provisions	36	-	36	-
Net cash provided by operating activities	1,688	112	1,504	100
Net cash generated by/(used in) investing activities:				
Interest and rents etc. from investments	102	194	149	310
Purchase of property, plant and equipment	(1,255)	(547)	(1,255)	(547)
Sale of fixed asset investments	3,192	-	3,192	-
Net cash generated by/(used in) investing activities:	2,039	(353)	2,086	(237)
Increase/(decrease) in cash and cash equivalents	3,727	(241)	3,590	(137)
Cash and cash equivalents at the beginning of year	7,514	7,755	6,931	7,068
Cash and cash equivalents at the end of year	11,241	7,514	10,521	6,931
The changes in cash and cash equivalents due to exchange rate movements in the year were £41k decrease (2020: £9k decrease).				

	Group 2021	Group 2020	Charity 2021	Charity 2020
	£'000	£'000	£'000	£'000
Analysis of changes in net debt				
Cash and cash equivalents				
As at 1 April	7,514	7,755	6,931	7,068
Cash flows	3,727	(241)	3,590	(137)
As at 31 March	11,241	7,514	10,521	6,931

Notes to the Financial Statements

For the year ended 31 March 2021

Charity information

Anthony Nolan is a company limited by guarantee (registered number 02379280), which is a public benefit entity and registered as a charity in England and Wales (charity number 803716), and Scotland (SCO38827), and domiciled in the UK. The address of the registered office is Royal Free Hospital, Pond Street, London NW3 2QG.

1 Accounting policies

The principal accounting policies adopted, judgements and key sources of estimation uncertainty in the preparation of the financial statements are as follows:

a) Basis of accounting

The financial statements have been prepared in accordance with Accounting and reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (second edition effective 1 January 2019) - (Charities SORP (FRS 102)), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102); the Companies Act 2006, The Charities Act 2011 and the Charities and Trustee Investment (Scotland) Act 2005 and the Charities Accounts (Scotland) Regulations 2006. The reporting currency is pound sterling.

Anthony Nolan meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy note(s).

b) Basis off consolidation

The consolidated accounts incorporate the result of Anthony Nolan and its wholly owned subsidiary undertaking, Anthony Nolan Trading Limited, on a line by line basis. The consolidated entity is referred to as 'the group'.

Notes to the Financial Statements

For the year ended 31 March 2021

1 Accounting policies (continued)

c) Going concern

The Trustees have reviewed the group's and the charity's forecasts and scenario plan projections (including the impact of COVID-19) covering a period that exceeds 12 months from the date of signing these financial statements. Three scenario plans were tabled back in 2020, 'worst case', 'better case' and 'possible case', based on transplant activity falling by 50%, 25% and 10% respectively. Actual transplant activity for FY2020/21 fell only by 9% against annual expectations.

Further strategic outlook and scenario planning reviews in 2021 anticipate activity growth of circa 5% for FY 2021/22 and FY 2022/23 respectively.

The key operational impacts of COVID-19 have been:

- Stem cell transplants are still going ahead – but at reduced levels, 9% reduction in FY 2020/21 versus the prior year.
- Fundraising income has declined, by £0.3m in FY 2020/21 vs the prior year. Primarily due to the loss of some key events, private site opportunities and individual giving, as lockdown measures have been extended and no mass gatherings have been possible. Events and Community fundraising are expected to return, but at a reduced level, pre-COVID, from the summer 2021. Legacy and Philanthropic donations largely remain at expected levels. Fundraising income in FY 2021/22 is anticipated to only marginally grow, after reflecting the success of the COVID emergency appeal in FY 2020/21, £0.7m, and the continued uncertainty of individual giving as digital online activity increases and donations recover.
- Cell & Gene Therapy and the collection of cord blood services were paused back in March 2020 and has returned at a reduced level from August 2020. Strong growth in services of this revenue stream is now anticipated in FY 2021/22, circa £1m, following isolation technology capital investment of £0.18m in April 2021.

The Strategic Leadership Team have acted to address operational efficiencies and the cost base to ensure the best use of charitable funds including:

- Variable cost reductions in relation to operational transplant activity;
- Use of the government furlough scheme;
- Capital and revenue investment delayed and prioritisation; and
- Discretionary spend stopped, recruitment frozen, staffing resources reviewed.

An unsecured overdraft facility of £2.0m remains in place from March 2020 with Barclays Bank.

Based on the existing levels of cash, and the scenario planning predictions based on estimated levels of income and expenditure, the Trustees are satisfied that the charity has adequate resources to continue in operation for the foreseeable future.

Trustees have also considered there are no material uncertainties in the operating environment.

Accordingly, the going concern basis has been used in preparing these financial statements.

Notes to the Financial Statements

For the year ended 31 March 2021

1 Accounting policies (continued)

d) Income

Income is recognised when the charity has entitlement to the income, it is probable that the income will be received and the amount of income receivable can be measured reliably. Donations are accounted for when either receivable or there is sufficient evidence to suggest that it is probable and there is entitlement to the income. Donations are stated gross of any attributable tax recoverable. Sponsorship income from events is recognised when the event takes place.

Income from government and other grants are recognised when the charity has entitlement to the funds, any performance conditions attached to the grants have been met, it is probable that the income will be received and the amount can be measured reliably. Donations and grants given for specific purposes are treated as restricted income.

Income from legacies is recognised when probate is granted and there is sufficient information to value them. Reversionary interest involving a life tenant is not recognised. Where a payment is received from an estate after the reporting date and before the accounts are authorised but it is clear that the payment had been agreed by the executors prior to the end of the reporting period, then it is treated as an adjusting event and accrued as income.

Income in respect of payments for transplants and other similar services derives from the amounts charged in respect of the search for matching tissue types and the arrangement of the transplants, and is accounted for when transplant or other procedure takes place. It is classed as income from charitable activities.

Rental income on assets leased under operating leases is recognised on a straight line basis over a lease term and is presented within the investment income.

e) Expenditure and allocation of support and governance costs

All expenditure is accounted for on an accruals basis inclusive of any irrecoverable Value Added Tax. Expenditure on charitable activities includes grants payable to other institutions and individuals. Where costs cannot be directly attributed, they are allocated to categories on a basis consistent with the budgeted use of the resources concerned and in proportions based upon a suitable ratio applicable to the nature of the cost involved. The basis of allocation of support and governance costs is analysed in Note 10.

Redundancy and termination benefits are recognised in the period in which the charity commits to incur the costs. These costs are allocated on the same basis as other expenditure.

Under government measures announced to support entities employing key workers during the coronavirus pandemic, an extension of the window that employees can take their statutory annual leave entitlement has been amended for the next two years. The regulations, FRS102, will allow up to four weeks unused annual leave to be carried over. Anthony Nolan has agreed a maximum carry over of ten (10) days and the necessary Holiday Pay provision has been accrued at year end by individual staff members based on their annual leave entitlement.

Grants to third parties are charged in the year when an award is approved by the relevant award panel and the commitment is communicated to the recipient, except in cases where the offer is conditional. Such grants are recognised as expenditure when conditions are fulfilled.

The cost of volunteers' time is not accounted for as this cannot be measured reliably.

Notes to the Financial Statements

For the year ended 31 March 2021

1 Accounting policies (continued)**f) Foreign currencies**

Transactions denominated in foreign currencies are recorded using the rate of exchange ruling at the date of the transaction. Monetary assets and liabilities denominated in foreign currencies are translated using the rate of exchange ruling at the balance sheet date. All exchange gains or losses are included in the statement of financial activities in the period to which they relate.

g) Financial instruments**Basic financial instruments**

The group has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments, other than fixed assets investments, are initially recognised at transaction value and subsequently measured at their settlement value.

h) Research and development expenditure

Expenditure on research and development is written off to the Statement of Financial Activities in the period in which it is incurred.

i) Tangible fixed assets

All tangible assets purchased costing more than £1,000 that have a useful economic life that exceeds one year are capitalised and classified as fixed assets, the exception being computer equipment, which is all capitalised, even if the cost is lower than £1,000. Tangible fixed assets are stated at historical cost less depreciation. Depreciation is provided on all tangible fixed assets at rates calculated to write each asset down to its estimated residual value over its expected useful life, as follows:

Leasehold buildings	over the life of the lease
Leasehold improvements, fixtures & fittings	over 3 to 4 years
Office equipment	over 3 to 5 years
Computer equipment and software	over 3 years
Laboratory equipment	over 3 to 5 years

In circumstances where the charity incurs software development costs that meet the criteria set out in Section 18 of FRS 102 then those costs will be capitalised.

Software and software development costs are treated as tangible assets.

j) Other investments

Investments, including bonds and cash held as part of the investment portfolio investments are measured at fair value. The basis for measuring fair value is bid price. Realised and unrealised gains and losses in the year are included in the statement of financial activities.

Notes to the Financial Statements

For the year ended 31 March 2021

1 Accounting policies (continued)

k) Stocks

Stocks are valued at the lower of cost and net realisable value. Stocks that have reached the expiry date are written off at the point of expiry.

l) Leased assets and obligations

Rentals payable under operating leases are charged to the Statement of Financial Activities on a straight line basis over the lease term.

m) Taxation

The company is a registered charity and as such its income and gains falling within Sections 471 to 489 of the Corporation Tax Act 2010 or Section 256 of the Taxation of Chargeable Gains Act 1992 are exempt from Corporation tax to the extent that they are applied to its charitable activities.

Costs are recorded gross of VAT but the group is able to reclaim a proportion of VAT paid, because of its trading activities, using the partial exemption method.

The subsidiary company distributes any taxable profits to the charity each year under Gift Aid.

n) Pension contributions

The group and the charity make contributions into defined contribution pension schemes on behalf of certain employees. The assets of the schemes are held separately from those of the group and the charity in independently administered funds. The amount charged to the Statement of Financial Activities in respect of pension costs is the total contributions payable for the year.

o) Fund accounting

The general fund comprises the accumulated surpluses of unrestricted incoming resources over resources expended, which are available for use in furtherance of the general objectives of the charity.

Designated funds are part of unrestricted funds which Trustees have earmarked for a particular project or use, without restricting or committing the funds legally. The designation may be cancelled by the trustees if they later decide that the charity should not proceed or continue with the use or project for which the funds were designated.

Restricted funds are funds subject to specific conditions imposed by funders. The purpose and use of the restricted funds are set out in the notes to the accounts. Amounts unspent at the period end are carried forward in the balance sheet. Where the specific conditions of the donation are met so the funds are no longer restricted in purpose or use, unspent amounts are transferred to the general fund.

Restricted income spend on fixed assets, such as laboratory equipment, is shown as a transfer to the unrestricted fund at the point of purchase, once the terms of the restriction have been met.

Notes to the Financial Statements

For the year ended 31 March 2021

1 Accounting policies (continued)**p) Provisions**

Provision is made by the group and the charity for liabilities and charges arising from legal or constructive obligations that exist at the balance sheet date. The amount is calculated on the basis of the estimated cost to settle the present obligation or transfer it to a third party at that date. Consideration is given to the timing of the cash flows and to future events and uncertainties which may affect the amount required to settle the obligations.

Critical accounting judgement and sources of estimation uncertainty

Estimates and judgements are continually evaluated and are based on historical evidence and other factors, including expectations of future events that are believed to be reasonable under the circumstances.

Critical judgements in applying the charity's accounting policies**(i) Dilapidation costs**

In estimating the dilapidation costs relating to the leases of premises, a provision is calculated in accordance with the amount per square foot. This is applied at each year end based on the premises occupied and when major improvements are carried out, or according to the surveyor's estimates.

2 Donations and legacies income

	Unrestricted Funds	Restricted Funds	Total 2021	Total 2020
	£'000	£'000	£'000	£'000
Group & Charity				
Donations	6,782	796	7,578	8,495
Legacies	694	-	694	645
Statutory grants (CRJS grant)	532	-	532	-
	8,008	796	8,804	9,140

Notes to the Financial Statements

For the year ended 31 March 2021

3 Trading operations and investments

The charity has one wholly owned subsidiary, Anthony Nolan Trading Limited ("ANTL"), a company registered in England & Wales (Company number 02511952, registered office: The Royal Free Hospital, Pond Street, London NW3 2QG). The charity owns 100 ordinary shares of £1 each that were issued in ANTL at par upon incorporation. These shares are carried in the balance sheet at their original cost of £100.

The principal activity of ANTL is to carry on the trading operations of the group with a view to raising funds on behalf of the parent charity, which is achieved through the sale of merchandise, advertising, the organisation of fundraising events, and by exploiting intellectual property and other similar rights held by the parent charity. Annual financial statements for this subsidiary company are filed with the Registrar of Companies for England and Wales, and are publicly available.

At 31 March 2021, the value of ANTL's net assets was £61k (2020: £61k) matching the value of the shareholder's funds. Current assets were £814k (2020: £693k) and current liabilities £753k (2020: £632k).

In the year ANTL made a turnover of £320k (2020: £594k) and expended £273k (2020: £478k), including a share of central costs payable to Anthony Nolan (Note 28), thereby generating operating profit of £47k (2020: £116k). The sum equivalent to the taxable profits was distributed to Anthony Nolan.

4 Investment income

	Unrestricted Funds	Restricted Funds	Total 2021	Total 2020
	£'000	£'000	£'000	£'000
Group				
Rent receivable under operating leases	78	-	78	83
Investment income	21	-	21	66
Bank interest receivable on short term cash deposits	3	-	3	45
	102	-	102	194
Charity				
Rent receivable under operating leases	78	-	78	83
Investment income	21	-	21	66
Bank interest receivable on short term cash deposits	3	-	3	45
Anthony Nolan Trading Ltd: Gift aid distribution	47	-	47	116
	149	-	149	310

Notes to the Financial Statements

For the year ended 31 March 2021

5 Donor provision income

	Unrestricted Funds	Restricted Funds	TOTAL 2021	TOTAL 2020
	£'000	£'000	£'000	£'000
Group and Charity				
Fees receivable for the provision of donors	40,900	-	40,900	44,768
Support income in relation to donor processing	360	-	360	310
Statutory grant (DHSC COVID-19 grant)	-	315	315	-
	41,260	315	41,575	45,078

6 Research income

	Unrestricted Funds	Restricted Funds	TOTAL 2021	TOTAL 2020
	£'000	£'000	£'000	£'000
Group and Charity				
Grant income receivable	9	309	318	277

7 Other income

	Unrestricted Funds	Restricted Funds	TOTAL 2021	TOTAL 2020
	£'000	£'000	£'000	£'000
Group				
Other income	261	-	261	106
	261	-	261	106
Charity				
Anthony Nolan Trading Ltd: recharge of costs	35	-	35	103
Other income	261	-	261	106
	296	-	296	209

Notes to the Financial Statements

For the year ended 31 March 2021

8 Analysis of expenditure

	Activities undertaken directly		Grant funding of activities	Support costs (Note 10)		Total costs
	Staff costs	Other cost		Staff costs	Other cost	
	£'000	£'000	£'000	£'000	£'000	£'000
Group						
2020/21						
Expenditure on:						
Raising funds						
Expenditure on raising donations and legacies	1,340	866	-	447	617	3,270
Expenditure on other trading activities	-	238	-	-	-	238
Charitable activities:						
Donor Provision	7,869	26,516	84	3,226	3,933	41,628
Education and awareness	1,485	577	-	451	631	3,144
Research	1,274	578	150	331	457	2,790
Total expenditure	11,968	28,775	234	4,455	5,638	51,070
2019/2020						
Expenditure on:						
Raising funds						
Expenditure on raising donations and legacies	1,451	1,638	-	450	682	4,221
Expenditure on other trading activities	-	375	-	-	-	375
Charitable activities:						
Donor Provision	8,338	28,793	119	3,054	3,969	44,273
Education and awareness	1,550	859	-	384	612	3,405
Research	1,472	652	-	330	532	2,986
Total expenditure	12,811	32,317	119	4,218	5,795	55,260

Notes to the Financial Statements

For the year ended 31 March 2021

8 Analysis of expenditure (continued)

	Activities undertaken directly		Grant funding of activities	Support costs (Note 10)		Total costs
	Staff costs	Other cost		Staff costs	Other cost	
	£'000	£'000	£'000	£'000	£'000	£'000
Charity						
2020/21						
Expenditure on:						
Raising funds	1,340	866	-	447	617	3,270
Charitable activities						
Donor Provision	7,869	26,516	84	3,226	3,933	41,628
Education and awareness	1,485	577	-	451	631	3,144
Research	1,274	578	150	331	457	2,790
Total expenditure	11,968	28,537	234	4,455	5,638	50,832
2019/2020						
Expenditure on:						
Raising funds	1,451	1,638	-	450	682	4,221
Charitable activities						
Donor Provision	8,338	28,793	119	3,054	3,969	44,273
Education and awareness	1,550	859	-	384	612	3,405
Research	1,472	652	-	330	532	2,986
Total expenditure	12,811	31,942	119	4,218	5,795	54,885

The amount of irrecoverable VAT included in the group and charity expenditure is £1,266k (2020: £1,440k).

Notes to the Financial Statements

For the year ended 31 March 2021

9 Analysis of grants

	Grants to institutions £'000	Grants to individuals £'000	Support costs £'000	Total costs £'000
Group and Charity				
2020/21				
Charitable activities:				
Donor Provision	17	68	13	98
Research	150	-	22	172
	167	68	35	270
2019/20				
Charitable activities:				
Donor Provision	40	79	19	138
	40	79	19	138

During the 2020/21 financial year £167k (2020: £40k) worth of grants were given to institutions:

£150k (2020: Nil) was committed to Blood Cancer UK to fund COVID-19 vaccine research project.

£10k (2020: £8k) was given in the year to African-Caribbean Leukaemia Trust to recruit BAME donors.

£4k (2020: £4k) was given to Adrian Sudbury Schools' Education Trust.

£3k (2020: £3k) was given to your simPal.

During the 2020/21 financial year £69k (2020: £79k) worth of grants were given to individuals.

£66k (2020: £67k) was given to 267 (2020: 331) patients to help with the costs of lifestyle changes caused by treatment. £1k (2020: Nil) was given to three Marrow student donor recruitment groups.

Notes to the Financial Statements

For the year ended 31 March 2021

10 Analysis of support costs

	Property	Finance and Management	Human Resources	Technology	Governance	Total costs
	£'000	£'000	£'000	£'000	£'000	£'000
Group and Charity						
2020/21						
Expenditure on:						
Raising funds	178	129	134	586	37	1,064
Charitable activities:						
Donor Provision	1,064	1,585	801	3,490	219	7,159
Education and awareness	184	118	139	603	38	1,082
Research	132	94	100	435	27	788
Total support costs	1,558	1,926	1,174	5,114	321	10,093
2019/2020						
Expenditure on:						
Raising funds	209	191	141	554	37	1,132
Charitable activities:						
Donor Provision	1,153	1,822	779	3,063	206	7,023
Education and awareness	190	139	128	505	34	996
Research	165	115	112	440	30	862
Total support costs	1,717	2,267	1,160	4,562	307	10,013

Basis of the allocation of expenditure:

Where appropriate, expenditure, including depreciation, is allocated directly to the activity to which that expenditure relates.

Expenditure which does not relate directly to an activity but is incurred to enable activities to occur is classified as support costs.

- Finance & management costs relating to governance are estimated based on the time and resources incurred on governance activities.
- Other finance costs are apportioned in proportion to total direct expenditure incurred per activity.
- All other support costs are apportioned in accordance with the average full-time equivalent number of staff directly employed in that activity during the financial year.

Notes to the Financial Statements

For the year ended 31 March 2021

11 Staff costs

The charity considers its key management personnel, as defined by FRS 102, to comprise the Trustees, the Chief Executive Officer and the members of its Strategic Leadership Team. All Trustees give their time freely and no one receives remuneration.

	Group and Charity	Group and Charity
	2021 No.	2020 No.
The average monthly number of persons employed by the group during the year (excluding trustees) was:		
Charitable activities:		
Donor provision	252	247
Education and awareness	33	32
Research	25	28
Raising funds	33	38
	343	345
Staff costs for the above:	£'000	£'000
Wages and salaries	12,911	12,807
Social security costs	1,341	1,327
Pension costs	711	713
Staff restructuring costs	176	73
	15,139	14,920
Staff costs are allocated in the group's financial statements as follows:	£'000	£'000
Donor provision	11,095	11,392
Education and awareness	1,936	1,934
Research	1,605	1,802
Raising funds	1,787	1,901
	16,423	17,029

Included in the allocated staff costs (note 8), in addition to payroll costs, are the costs of funding academic positions of £29k (2020: £102k); staff benefit costs of £151k (2020: £150k); NHS secondment and other similar costs of £935k (2020: £1,718k) and £169k (2020: £139k) other staff costs including training and staff holiday accrual.

During 2020/21 the charity continued development work on the new Customer Relationship System TRANSFORM. £275k of project development staff costs was capitalised (2020: £12k), including £236k wages and salaries (2020: £10k), £26k of social security costs (2020: £1k) and £13k pension costs (2020: £1k).

These salary costs are not included in staff costs figures above.

Remuneration and benefits received in the year by key management personnel, including employer's National Insurance contributions, were £896k (2020: £992k).

Staff restructuring costs included ex-gratia payments to 18 employees (2020: 6 employees) of £173k (2020: £73k)

Notes to the Financial Statements

For the year ended 31 March 2021

11 Staff costs (continued)

	Group and Charity 2021 No.	Group and Charity 2020 No.
The number of employees whose emoluments for the year fell within the following ranges was:		
£60,001 to £70,000	14	12
£70,001 to £80,000	4	3
£80,001 to £90,000	3	1
£90,001 to £100,000	2	3
£100,001 to £110,000	1	-
£110,001 to £120,000	1	1
£120,001 to £130,000	1	1
£130,001 to £140,000	-	1

The group made contributions to money purchase pension schemes on behalf of all employees whose emoluments exceeded £60,000, and the total contributions payable during the year amounted to £130k (2020: £97k).

Amount of travel expenses claimed by trustees was Nil (2020: £755).

12 Other costs

	2021 £'000	2020 £'000
Net movement in funds is stated after charging:		
Depreciation:		
Charge for the year	621	886
Stock: amounts expensed during the year	1,818	2,228
Research and development expenditure	2,022	2,124
Operating lease rentals:		
Land and buildings	530	529
Plant and machinery	34	37
Auditor's remuneration:		
Statutory Audit fees payable to		
BDO LLP (Charity £43k (2020: £35k))	46	-
Grant assurance fees payable to		
RSM UK Audit LLP	10	45
Tax compliance services payable to		
RSM UK Tax & Accounting Ltd	5	5
Advisory services payable to		
RSM Risk Assurance Services LLP	3	5

The group and the charity have an insurance policy that provides professional indemnity insurance cover for the trustees. The cost of this insurance for the year was £4k (2020: £3k).

During the year to 31 March 2021, the group accounted for net foreign exchange gains of £26k (2020: £9k net losses).

Notes to the Financial Statements

For the year ended 31 March 2021

13 Tangible assets

	Leasehold buildings		Leasehold improvements, fixtures and fittings	Office equipment	Laboratory equipment	Total
	Long term	Short term				
	£'000	£'000	£'000	£'000	£'000	£'000
Group and Charity						
Cost:						
1 April 2020	1,842	137	1,433	3,459	5,105	11,976
Additions	-	-	80	780	395	1,255
Disposals	-	-	(72)	(812)	(1,095)	(1,979)
31 March 2021	1,842	137	1,441	3,427	4,405	11,252
Depreciation and disposals						
1 April 2020	615	82	1,151	3,001	4,662	9,511
Charge for the year	16	6	84	314	201	621
Disposals	-	-	(72)	(812)	(1,095)	(1,979)
31 March 2021	631	88	1,163	2,503	3,768	8,153
Net book value:						
31 March 2021	1,211	49	278	924	637	3,099
31 March 2020	1,227	55	282	458	443	2,465

Certain leasehold buildings are used, when surplus to the group's and the charity's requirements, to generate rental income under operating leases.

Notes to the Financial Statements

For the year ended 31 March 2021

14 Investments

	Group 2021 £'000	Group 2020 £'000	Charity 2021 £'000	Charity 2020 £'000
Funds held in managed portfolios				
Valuation at 1 April	2,907	3,093	2,907	3,093
Acquisition at cost	-	-	-	-
Sale of investments	(3,192)	-	(3,192)	-
Income received	21	67	21	67
Net gains/(losses) on revaluation	275	(229)	275	(229)
Investment management costs	(10)	(24)	(10)	(24)
Valuation at 31 March	1	2,907	1	2,907

The historical cost of the investment portfolio is £1k (2020: £3m).

15 Stocks

	Group 2021 £'000	Group 2020 £'000	Charity 2021 £'000	Charity 2020 £'000
Raw materials and consumables	424	653	424	653

16 Debtors

	Group 2021 £'000	Group 2020 £'000	Charity 2021 £'000	Charity 2020 £'000
Amounts falling due within one year:				
Trade debtors	6,094	7,782	6,033	7,731
Amounts due from group undertakings	-	-	679	333
Gift Aid distribution receivable from group undertakings	-	-	47	116
Other debtors	7	72	7	72
Prepayments and accrued income	4,086	3,938	4,055	3,879
	10,187	11,792	10,821	12,131

Notes to the Financial Statements

For the year ended 31 March 2021

17 Cash

	Group 2021	Group 2020	Charity 2021	Charity 2020
	£'000	£'000	£'000	£'000
Cash at bank and in hand	<u>11,241</u>	<u>7,514</u>	<u>10,521</u>	<u>6,931</u>

18 Creditors: amounts falling due within one year

	Group 2021	Group 2020	Charity 2021	Charity 2020
	£'000	£'000	£'000	£'000
Trade creditors	3,377	4,111	3,374	4,044
Other creditors	117	100	117	100
Other taxation and social security costs	419	344	419	344
Accruals and deferred income	4,750	4,875	4,727	4,758
Grants payable	786	447	786	447
	<u>9,449</u>	<u>9,877</u>	<u>9,423</u>	<u>9,693</u>

The charity is party to a Group VAT registration with its subsidiary undertakings. At 31 March 2021 the amount due under this arrangement in respect of the group companies was £56k (2020: £6k).

19 Creditors: amounts falling due after more than one year

	Group 2021	Group 2020	Charity 2021	Charity 2020
	£'000	£'000	£'000	£'000
Grants payable	<u>-</u>	<u>572</u>	<u>-</u>	<u>572</u>

Notes to the Financial Statements

For the year ended 31 March 2021

20 Grants payable

	Group 2021 £'000	Group 2020 £'000	Charity 2021 £'000	Charity 2020 £'000
Grants brought forward	1,019	1,491	1,019	1,491
Additions	234	119	234	119
Payments	(467)	(591)	(467)	(591)
Grants carried forward				
Payable within one year	786	447	786	447
Payable after more than one year	-	572	-	572
	786	1,019	786	1,019
Grants payable to:				
IMPACT - University of Birmingham	636	1,019	636	1,019
Blood Cancer UK - COVID Vaccine Research	150	-	150	-
	786	1,019	786	1,019

21 Movements in deferred income

	Group 2021 £'000	Group 2020 £'000	Charity 2021 £'000	Charity 2020 £'000
Deferred income at beginning of the year	565	544	464	406
Income recognised in the year	(564)	(537)	(463)	(399)
Income deferred in the current year	593	558	573	457
Deferred income at the year end	594	565	574	464

Deferred income comprises income received in respect of the future fundraising events.

Notes to the Financial Statements

For the year ended 31 March 2021

22 Provisions for liabilities and charges

	Group 2021 £'000	Group 2020 £'000	Charity 2021 £'000	Charity 2020 £'000
As at 1 April	568	568	568	568
New provisions	36	-	36	-
As at 31 March	<u>604</u>	<u>568</u>	<u>604</u>	<u>568</u>

A provision for dilapidations is being carried in the balance sheets of the group and the charity in respect of the estimated costs of unavoidable reinstatement and refurbishment works relating to certain leasehold properties that are currently occupied by the charity for its own use. This provision was created in 2004, added to in 2017 (£200k) and recalculated in 2021 following lease negotiations. It is now expected to be utilised at the earliest in 2024.

Notes to the Financial Statements

For the year ended 31 March 2021

23 The funds of the Group and the Charity

	Balance at 1 Apr 2020	Income	Expenditure	Gross transfers between funds	Net gains/ (losses) on investments	Balance at 31 Mar 2021
	£'000	£'000	£'000	£'000	£'000	£'000
Group						
Restricted income funds						
<u>Voluntary income</u>						
Donor Campaign and Processing Fund	130	112	(145)	-	-	97
Donor Provision Fund	301	85	(165)	-	-	221
Research Projects Fund	7	30	(30)	(7)	-	-
Laboratory Equipment Fund	1	228	-	(228)	-	1
Patient Experience Fund	71	341	(327)	-	-	85
	<u>510</u>	<u>796</u>	<u>(667)</u>	<u>(235)</u>	<u>-</u>	<u>404</u>
Scientific Research Funds	436	309	(287)	(11)	-	447
<u>Statutory grants</u>						
DHSC COVID-19 grant	-	315	(315)	-	-	-
Total restricted funds	946	1,420	(1,269)	(246)	-	851
Unrestricted income funds						
<u>Designated funds</u>						
Innovation Fund	100	-	-	(100)	-	-
	<u>100</u>	<u>-</u>	<u>-</u>	<u>(100)</u>	<u>-</u>	<u>-</u>
General Fund	13,268	49,960	(19,801)	346	275	14,048
Total funds	<u>14,314</u>	<u>51,380</u>	<u>(51,070)</u>	<u>-</u>	<u>275</u>	<u>14,899</u>

Notes to the Financial Statements

For the year ended 31 March 2021

23 The funds of the Group and the Charity (continued)

	Balance at 1 April 2019	Income	Expenditure	Gross transfers between funds	Net gains/ (losses) on investments	Balance at 31 March 2020
	£'000	£'000	£'000	£'000	£'000	£'000
Group						
Restricted income funds						
<u>Voluntary and statutory income</u>						
Donor Campaign and Processing Fund	103	120	(93)	-	-	130
Donor Provision Fund	1	353	(53)	-	-	301
Research Projects Fund	9	48	(50)	-	-	7
Laboratory Equipment Fund	13	29	-	(41)	-	1
Patient Experience Fund	49	161	(139)	-	-	71
	175	711	(335)	(41)	-	510
Scientific Research Funds	394	249	(207)	-	-	436
	569	960	(542)	(41)	-	946
Unrestricted income funds						
<u>Designated funds</u>						
Digital & Technology Fund	500	-	(500)	-	-	-
Innovation Fund	300	-	(200)	-	-	100
	800	-	(700)	-	-	100
General Fund	13,045	54,429	(54,018)	41	(229)	13,268
Total funds	14,414	55,389	(55,260)	-	(229)	14,314

Notes to the Financial Statements

For the year ended 31 March 2021

23 The funds of the Group and the Charity (continued)

	Balance at 1 April 2020	Income	Expenditure	Gross transfers between funds	Net gains/ (losses) on investments	Balance at 31 March 2021
	£'000	£'000	£'000	£'000	£'000	£'000
Charity						
Restricted income funds						
<u>Voluntary and statutory income</u>						
Donor Campaign and Processing Fund	130	112	(145)	-	-	97
Donor Provision Fund	301	85	(165)	-	-	221
Research Projects Fund	7	30	(30)	(7)	-	-
Laboratory Equipment Fund	1	228	-	(228)	-	1
Patient Experience Fund	71	341	(327)	-	-	85
	510	796	(667)	(235)	-	404
Scientific Research Funds	436	309	(287)	(11)	-	447
<u>Statutory grants</u>						
DHSC COVID-19 grant	-	315	(315)	-	-	-
Total restricted funds	946	1,420	(1,269)	(246)	-	851
Unrestricted income funds						
<u>Designated funds</u>						
Innovation Fund	100	-	-	(100)	-	-
	100	-	-	(100)	-	-
General Fund	13,208	49,722	(49,563)	346	275	13,988
Total funds	14,254	51,142	(50,832)	-	275	14,839

Notes to the Financial Statements

For the year ended 31 March 2021

23 The funds of the Group and the Charity (continued)

	Balance at 1 April 2019	Income	Expenditure	Gross transfers between funds	Net gains/ (losses) on investments	Balance at 31 March 2020
	£'000	£'000	£'000	£'000	£'000	£'000
Charity						
Restricted income funds						
<u>Voluntary and statutory income</u>						
Donor Campaign and Processing Fund	103	120	(93)	-	-	130
Donor Provision Fund	1	353	(53)	-	-	301
Research Projects Fund	9	48	(50)	-	-	7
Laboratory Equipment Fund	13	29	-	(41)	-	1
Patient Experience Fund	49	161	(139)	-	-	71
	175	711	(335)	(41)	-	510
Scientific Research Funds	394	249	(207)	-	-	436
	569	960	(542)	(41)	-	946
Unrestricted income funds						
<u>Designated funds</u>						
Digital and Technology Fund	500	-	(500)	-	-	-
Innovation Fund	300	-	(200)	-	-	100
	800	-	(700)	-	-	100
General Fund	12,985	54,054	(53,643)	41	(229)	13,208
Total funds	14,354	55,014	(54,885)	-	(229)	14,254

Restricted funds

Donor Campaign and Processing Fund: in 2020/21 the charity received various grants to cover volunteer courier operations.

Donor Provision Fund: in 2020/21 the charity received various grants in the year to recruit and type to high resolution male donors aged between 16 and 30 years and BAME donors.

Patient Experience Fund was created in 2014/15 for the purposes of supporting post transplant patients. 2020/21 grants were mainly to fund positions of patient nurses in UK Transplant Centres and support patients' grant scheme.

The biggest donor to the Donor Campaign and Processing Fund, Donor Provision Fund and Patient Experience Fund was RSM UK, contributing £222k in 2020/21 (2019/20: £211k).

Donations and grants received to fund the purchase of specific items of laboratory equipment for either research or histocompatibility laboratories are credited to the **Laboratory Equipment Fund**. When the specified asset is purchased and there is no on-going restriction over its use, the value of the asset is transferred to General Fund. £228k was transferred from Laboratory Equipment Fund to General Fund. The biggest contributor in 2020/21 was The Wolfson Foundation, with the donation of £218,620 to purchase a DNA sequencer.

The depreciation of the asset is charged to the General Fund over the life of the asset.

The **Scientific Research Fund** and the **Research Projects Fund** are set up to recognise income received annually in the form of a number of different grants awarded for specific research projects in immunogenetics and related fields. The cost of undertaking these research projects is allocated to the funds, with unspent monies being carried forward into 2021/2022.

During 2020/21 the balance of £100k in the designated Innovation Fund was transferred to the general fund. No other designations were made.

Notes to the Financial Statements

For the year ended 31 March 2021

24 Analysis of net assets between funds

	Fixed assets	Net current assets	Creditors over 1 year and provisions for liabilities and charges	Total
	£'000	£'000	£'000	£'000
Fund balances at 31 March 2021				
Group				
Restricted income funds	-	851	-	851
Unrestricted income funds: General Fund	3,100	11,552	(604)	14,048
Net Assets	3,100	12,403	(604)	14,899
Charity				
Restricted income funds	-	851	-	851
Unrestricted income funds: General Funds	3,100	11,492	(604)	13,988
Net Assets	3,100	12,343	(604)	14,839
Fund balances at 31 March 2020				
Group				
Restricted income funds	-	946	-	946
Unrestricted income funds: General Fund	5,372	9,136	(1,140)	13,368
Net Assets	5,372	10,082	(1,140)	14,314
Charity				
Restricted income funds	-	946	-	946
Unrestricted income funds: General Funds	5,372	9,076	(1,140)	13,308
Net Assets	5,372	10,022	(1,140)	14,254

Notes to the Financial Statements

For the year ended 31 March 2021

25 Commitments under operating leases

	Group 2021	Group 2020	Charity 2021	Charity 2020
	£'000	£'000	£'000	£'000

The Charity as a lessee:

The total future minimum lease payments under non-cancellable operating leases, which are calculated based on rent notice period, are as follows:

Land and buildings
Amounts due

Within one year	348	455	348	455
Between one and five years	14	14	14	14

Plant and machinery
Amounts due

Within one year	18	22	18	22
Between one and five years	4	11	4	11

384	502	384	502
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The total future minimum service charge payments are as follows:

Land and buildings
Amounts due

Within one year	205	222	205	222
Between one and five years	136	164	136	164

341	386	341	386
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The Charity as lessor:

At the year end, the Charity had contracted with tenants, under non-cancellable operating leases, for the following future minimum lease payments:

Amounts receivable:

Less than one year	75	75	75	75
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75	75	75	75
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The operating leases represent lease of 65% of Research facility to a third party. The lease is negotiated over terms of 75 years (2020: 76 years).

Notes to the Financial Statements

For the year ended 31 March 2021

26 Pension commitments

The group and the charity make contributions into defined contribution pension schemes on behalf of certain employees. The assets of the schemes are held separately from those of the group and the charity in independently administered funds. The amount charged to the Statement of Financial Activities in respect of pension costs (as shown in note 11) is the total contributions payable for the period. The amount payable at 31 March 2021 is £105k (2020: £100k).

27 Capital commitments

	Group 2021	Group 2020	Charity 2021	Charity 2020
	£'000	£'000	£'000	£'000
Capital commitments – contracted for, but not provided	230	172	230	172

28 Related parties transactions

Anthony Nolan Trading Limited (ANTL) is a wholly owned subsidiary of Anthony Nolan.

During 2020/21 Anthony Nolan received income of £82k from ANTL, which is made up of Gift Aid £47k and management charge £35k (2019/20 income of £219k: Gift Aid £116k and management charge £103k).

The nature of transfers to/from the subsidiary covers the following areas:

- Income received by the Charity on behalf of ANTL.
- Income received by ANTL on behalf of the Charity, and
- Expenditure incurred by the Charity on behalf of ANTL.

ANTL debtor balance at 31 March 2021 was £727k (31 March 2020: £449k).

Red Badger, digital consultancy company, carried out £8,000 worth of pro bono work for Anthony Nolan in 2020/21.

Mike Altendorf, Trustee of Anthony Nolan, is a Non-Executive director of Red Badger.

Our vision

**To save and improve the lives
of everyone who needs
a stem cell transplant.**



Find out more at anthohnynolan.org

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