



**Crohn's and Colitis UK**

**Annual Report and Accounts**

**Year ending**  
**31<sup>st</sup> December 2010**

**Crohn's and Colitis UK is the working name for  
The National Association for Colitis and Crohn's Disease**

**Crohns and Colitis UK, 4 Beaumont House, Sutton Road,  
St Albans, Herts, AL1 5HH.**

**Charity registered in England and Wales No.1117148 and Scotland No. SC038632  
A company limited by guarantee in England: company number 5973370**

# THE TRUSTEES' REPORT

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This report and the attached statement of accounts comply with current statutory requirements and the Constitution of NACC and are in the format required by the Charity Commissioners - the Statement of Recommended Practice (SORP 2005) – and charity law.

## Constitution

From 1979 to 2006 The National Association for Colitis and Crohn's Disease (NACC) was a charitable, unincorporated association registered in England and Wales under charity number 282732. The Association was governed by a revised constitution adopted on 15th April 2000 and amended at the Annual General Meeting held on 12<sup>th</sup> April 2003. In 2006 the members voted to change the constitutional status of NACC to a charitable company limited by guarantee and this came into effect at midnight on 31<sup>st</sup> December 2006. (At that time the Unincorporated Association transferred all its assets and activities to the new charity registered under the same name as charity number 1117148 and as a company registered in England number 5973370. The Unincorporated Association remained in being under the new name of the National Association for Colitis and Crohn's Disease 1979-2006, until it was removed from the Charity Commission register on 29 October 2008.) In 2009, the Articles of the Charitable Company were altered by resolution at the AGM renaming the Council of Trustees as the Board of Trustees and increasing the permissible number of co-opted advisers.

The newly incorporated charity is also registered with the Office of the Scottish Charity Regulator under Scottish charity number SC038362. In May 2010, the working name of Crohn's and Colitis UK was adopted by resolution at the AGM.

## **Trustees**

The constitution provides for a Board of Trustees consisting of four executive honorary officers plus not less than three and not more than eight ordinary trustees, elected at the annual general meetings of members. Members who express an interest in being nominated for election as a Trustee have a meeting with the Trustees to ensure they are aware of the responsibilities and requirements of the role before nomination takes place. Once elected individual induction is arranged according to the Trustee's experience. The Trustees have power to co-opt Advisers as non-voting members of the Council and to appoint a number of committees. A full list of Trustees and Committees is given at the end of this Report.

The Trustees are responsible for determining the aims, policies, activities and budget of NACC. The staff led by the Chief Executive report to the Trustees. The staff are responsible for advising the Trustees and carrying through the policies and activities in accordance with the approach and budget determined by the Trustees.

## **Objects**

The charity's objects, as set out in its constitution, are:

- the relief of those suffering from Ulcerative Colitis, Crohn's Disease or related inflammatory bowel diseases (together generally referred to as IBD) including the support of those who care for them;
- the promotion of the welfare of those suffering from IBD;
- the advancement of education and research into the causes, prevention, treatment and cure of IBD and improvements in the management of the conditions, and the publication of the results of such research.

The objects are fulfilled through the aims, strategies and activities expressed in the 'NACC Plan 2010-2012' and, in the furtherance of these objects, the Directors, as the charity trustees, have complied with the duty in s.4 of the Charities Act 2006 to have due regard to the Charity Commission's published general and relevant sub-sector guidance concerning the operation of the public benefit requirement under that Act. It should be noted that all of the charity's services are open to non-members to use as well as members.

## **Strategic Plan 2010 - 2012**

In 2008/9 the Trustees developed a new strategic plan for 2010-2012 entitled 'Meeting the Challenge of Colitis and Crohn's Disease'. This was published in December 2009 as The NACC Plan for 2010 - 2012. The aim, vision and principles stated in the charity's previous strategic plan were largely unchanged and many services and activities continued unaltered. However, new strategic priorities and objectives were identified together with a number of key cross-cutting themes to be addressed over the three years.

This report is presented to match the structure of the Strategic Plan, which sets out the Challenge, Vision and Objectives for 2010 – 2012.

## **Crohn's and Colitis UK Aim**

Improving life for people affected by Colitis and Crohn's Disease.

## **Crohn's and Colitis UK's Vision**

*Crohn's and Colitis UK should be a well-known and active organisation recognised for excellence in:*

- Providing support & information for patients & their families who are affected by Inflammatory Bowel Diseases (IBD).
- Raising public & political awareness of IBD.
- Striving to improve healthcare services & provision for IBD.
- Influencing the attitudes of society to achieve positive change for those affected by Inflammatory Bowel Diseases.
- Promoting research into all aspects of Inflammatory Bowel Diseases & how they affect people's lives.

## **The principles underpinning Crohn's and Colitis UK's Vision**

Crohns and Colitis UK will be an *active organisation* both in the sense that members and volunteers will take an active role in achieving the objectives that have been agreed and in the sense that NACC will take a leading role in championing the needs and concerns of people affected by Inflammatory Bowel Diseases.

Crohns and Colitis UK will aim for excellence by basing its policies and plans on objective evidence wherever possible and by adopting recognised standards of quality in its services and practices.

Crohns and Colitis UK will expect Trustees, members, volunteers and staff to observe the principles of compassion, equality and inclusion and to act with respect and integrity in their work for the Association.

Whenever possible the Trustees will forward Crohns and Colitis UK 's objectives through research, development and service activities in partnership with health service, professional and other patient organisations and with the pharmaceutical industry.

## **Our objectives and how we are achieving them.**

In the following sections the Strategic Objectives are taken from the 'NACC Plan for 2010 – 2012: Meeting the challenge of Colitis and Crohn's Disease' and readers can find a fuller explanation of the Challenges, Vision and Objectives for each area of activity in that document which is available from [www.crohnsandcolitis.org.uk/NACCplan](http://www.crohnsandcolitis.org.uk/NACCplan)

### **Raising awareness of IBD**

#### ***Strategic objectives for 2010 - 2012***

- *Place raising awareness and understanding of IBD at the centre of all that we do in NACC.*
- *Consider changing the name by which the Association is known to make the words Colitis and Crohn's more prominent.*
- *Plan awareness campaigns annually to target selected key audiences including health professionals and managers, politicians, schools and colleges, businesses and employers, the media, young people and the general public.*
- *Hold an awareness month in May each year, commencing in 2010, to focus on proposed themes - in 2010 this will be "Step Up and Be Counted", in 2011 IBD and Employment, and in 2012 Sport, Exercise and IBD.*

- *Raise awareness among IBD patients of NACC and the support the charity offers, and encourage them, their families and friends to support and join NACC.*
- *Raise awareness within and outside of NACC of people affected by IBD who have particular needs, for example people from ethnic minorities or those living with IBD in prison.*
- *Seek funding support to develop a major campaign to increase public awareness.*

### **Achievements in 2010**

The charity has continued its activities to gain recognition and awareness of IBD by promoting features in health professional and consumer media. Through the work of its media agency (Healthcare Solutions), staff, members and supporters the Charity achieved a total of reader or listener impressions which in 2010 exceeded 261 million (2009: 100 million; 2008:44 million). The continuing progress of the Charity in this area was recognised at the 2010 PR Communiqué Awards where Crohn's and Colitis UK and Healthcare Solutions won the award for the best Patient Campaign.

The media campaign for 2010 was called "Step Up and Be Counted" and focused on a call for a UK-wide Registry of IBD patients. An online microsite was launched at 11 Downing Street on 10th March, 2010 at a reception hosted by Maggie Darling, and attended by the media, the Charity's Ambassadors and supporters. This was well reported with over 22 million hits in the regional and national press. Colitis and Crohn's Month in 2010 developed the Charity's call for members of the public to "Step Up and Be Counted" in campaigning for the National Register and the campaign accumulated over 7,500 individual e-signatures and testimonials, which has provided valuable additional material to support the Charity's public affairs campaigning.

The work to raise awareness of IBD was actively supported by Carrie Grant, vocal coach and TV personality, Jeff Hordley, actor, Rick Parfitt Jnr, musician, who attended the Reception and other events as Ambassadors and assisted in raising awareness of Crohn's and Colitis through a poster campaign. Carrie Grant also fronted a successful awareness and fundraising appeal on BBC Radio 4, which raised over £10,000 to fund Personal Grants for people in hardship as a result of IBD.

In line with the NACC Plan the charity rebranded during 2010 putting the names of the illnesses to the forefront and modernising the logo and brand image.

### **Key objectives for 2011**

- Maintain and develop the charity's media profile at national and regional level
- Identify new media volunteers/celebrity Ambassadors and develop relationships with existing champions
- Develop the marketing of the brand into the health and education sectors, including on campus
- Develop awareness of the conditions amongst employers
- Develop and promote the Charity's 2012 PR theme of IBD, Sports, Fitness and Well-being
- Develop the Charity's 2013 PR theme of IBD and Young People
- Develop regular communication and news-sharing with media contacts, membership and supporters using online as well as print media

## Meeting needs for Information and Support

### **Strategic objectives for 2010-2012**

- *Continue to provide high-quality one-to-one information and support services by telephone and email, with ongoing processes for review and improvement.*
- *Provide a range of high-quality information publications covering the medical and non-medical aspects of living with IBD.*
- *Provide information and education about strategies for living with IBD through a variety of audio-visual media and using IT developments creatively.*
- *Consider how to provide information and support to people who find traditional publications inaccessible or need information in other formats or languages.*
- *Publicise and provide personal grants to assist those affected by IBD who are on low incomes, and increase vocational support for young people.*
- *Develop a NACC programme providing opportunities for lay-led education in groups adapting models for long-term conditions.*
- *Work with IBD health professionals to improve awareness to information, education and support within health services and promote awareness of the services that NACC offers.*

### **Achievements in 2010**

The Information and Support Services include the helpline services, publications and personal grants, plus an online support forum for young people.

The charity provides two helplines – the Information Line and Crohn’s and Colitis Support – together with two additional telephone services in which trained volunteers are available by appointment. These are the Disability Benefits and Parent to Parent Services.

The Information Officers responded to 4,600 individual enquiries in 2010 and 752 people contacted Crohn’s and Colitis Support, which is also provided by trained volunteers. (Crohn’s and Colitis Support was previously known as NACC-in-Contact.)

92 people were supported with their claims for disability benefits, 8 new volunteers were selected and trained to work on the Disability Benefits service and four Benefits Guides were updated.

22 parents of children with IBD had an appointment with a Parent to Parent Support volunteer. A user survey of the Parent to Parent service was carried out in 2010 and found that all the parents interviewed felt they had benefited from their conversation with the Parent to Parent volunteer. One of the key benefits gained was reassurance, especially reassurance that they are not the only ones in such a situation, and that other people have been through something similar and have had similar feelings. All the parents surveyed said that they would use the service again if they felt the need, and all would recommend Parent to Parent to another parent.

Separate training modules were delivered for each of the three volunteer helplines as part of the volunteer conference.

An important publications’ achievement in 2010 was that Crohn’s and Colitis UK was successful in demonstrating compliance with the requirements of the Information Accreditation Scheme launched by the Department of Health and has been confirmed as a member of the scheme for a further year. Another significant step was the establishment of an editorial board of 23 medical advisers to support the production of NACC Information Sheets and Booklets. Two new publications were produced in 2010: a booklet ‘IBD in Children: a parent’s guide’ and an Information Sheet ‘Living with a Fistula’. The information for people whose first language is not English was updated and two further languages, Polish and Bengali, added following a needs survey of IBD Nurses.

The publications are widely used. 11, 003 Information Sheets and about 20,000 booklets were distributed from the Crohn’s and Colitis UK Office in 2010, and the Information Packs for newly

diagnosed adults and Family Information Packs for families of newly-diagnosed children continue to be widely used by health professionals in clinics and IBD paediatric Services throughout the UK.

NACC News continues to be published quarterly, providing members with information on developments in research and treatment, the opportunity to share experiences of living with IBD and news about Crohn's and Colitis UK activities. The Medical Editor for 2010 was Dr Peter Irving. An Anniversary Supplement was included in the autumn edition of NACC News to inform members of the 30th anniversary activities that took place throughout Crohn's and Colitis' in its anniversary year.

245 individual Personal Grants were made to people experiencing financial difficulty as a result of their IBD (2009: 206). Of these, 28 were given to young people between the ages of 15-25 to help further their education or training (2009:18).

The number of young people using the on-line discussion forum increased from 1836 to 2252 in 2010 and a Crohn's and Colitis UK Facebook page was launched.

Crohn's and Colitis UK are aware of groups of people with shared identifiable concerns and issues who are under-represented within the organisation. One such group is people in prison. In 2010, two visits were made to a prison as a prelude to reaching out in a more planned and comprehensive way to people who are living with IBD in prison.

#### **Key objectives for 2011**

- Identify and explore ways of reaching groups of people with IBD who are currently underrepresented
- Recruit and train more volunteers for Crohn's and Colitis Support
- Undertake a user survey of Crohn's and Colitis Support
- Consider how to increase the number of people using Crohn's and Colitis UK's Helplines
- Review the opening hours of Crohn's and Colitis UK's Helplines and consider whether these need to be extended to meet demand and improve accessibility.
- Explore the possibility of applying for the new Helplines Association quality standard, to be introduced in spring 2011
- Introduce further on-line discussion forums for Crohn's and Colitis UK members
- Seek opportunities to provide information and education about strategies for living with IBD through a variety of audio-visual media and using IT developments creatively
- Utilise the possibilities offered by Social Networking to further support and engage with people with IBD
- Run a pilot programme of Living with IBD workshops for young people

## **Changing society's attitudes and campaigning for better provision for people living with IBD**

### **Strategic objectives for 2010 – 2012**

- *Continue ongoing public awareness and education activities through the media to change attitudes to bowel problems and gradually reduce the social taboos, working with other organisations where this will be more effective.*
- *Seek opportunities for bringing IBD to the attention of politicians, organisations and the public to promote understanding of the illness, its impact on people's lives and what specific support would be helpful.*
- *Translate the learning from NACC-funded 'Living with IBD' Research into practical recommendations and action that will benefit people living with IBD.*
- *Inform relevant organisations how their activities and services could more effectively meet the needs of people who have IBD.*
- *Campaign for better provision to meet the needs of young people with IBD, and other specific groups whose needs are not being met by existing mainstream services.*

### **Achievements in 2010**

The charity's work to change attitudes is largely carried out through media campaigns to raise awareness, particularly by focusing on case study features which present the personal experiences of individual people and what it is like for them to live with IBD.

A significant development in 2010 has been the increase in public affairs activity made possible by the recruitment of a Public Affairs Officer to support the work already being undertaken by the Director of Information and Support and the Chief Executive. This has enabled us to extend our political campaigning beyond improving health services to other important issues such as welfare benefits for people who are unable to work, prescription charges, access to public toilets, provision of toilets on trains and the need for some form of parking concession for occasions when access to a toilet is needed very urgently. In line with this increased and broader focus the IBD Health Services Committee has been given a broader remit as the Public Affairs Committee.

A major part of the work in 2010 has been to respond in support of the needs of people who have IBD to the many consultation documents that have been put forward by the new Government in Westminster. These potentially have major implications for people with IBD, particularly the proposed welfare reforms and NHS changes.

Where appropriate this work has been carried forward through participation in specific campaigning groups formed with other health organisations so that common approaches can be negotiated where possible or alternatively the needs of people with IBD are taken into account in the formulation of policy proposals being put forward by these coalitions.

### **Key objectives for 2011**

- To continue active engagement and promotion of the interests of IBD patients in relation to Government policies on Welfare Reform and Health Services in England
- To establish clear objectives and a programme of supportive political meetings to influence and improve Health Services in the three devolved administrations in Scotland, Wales and Northern Ireland.
- To involve more members in active campaigning to support the national level representation.

## Improving health services for people who have IBD

### **Strategic objectives for 2010 – 2012**

- *To work with health professional groups at national and local level to put in place an overall strategy for the improvement of IBD Services.*
- *To campaign for NHS implementation of the IBD Standards throughout the UK.*
- *To contribute to a support programme for IBD service development and regular audit of IBD services in all four UK countries.*
- *To support the development of service quality measures that reflect patients' experience of their IBD care and the outcomes of IBD treatment that matter to them.*
- *To create opportunities for education of health professionals, including those in primary care, about the experiences and needs of people affected by IBD.*
- *To encourage greater involvement of IBD patients in the design and improvement of services and to support the development of good practice for patient involvement.*
- *To promote the concept of IBD Patient Panels and provide support, training and opportunities for sharing experiences and knowledge between Panel members.*
- *To promote and support the involvement of NACC volunteer patient representatives in NHS services and IBD research projects.*

### **Achievements in 2010**

This area of work continues to have high priority within the charity. Crohn's and Colitis UK has taken a leading role as the representative of IBD patients in the development of various strategic projects which together are intended to improve health services for Inflammatory Bowel Disease. The projects include promotion of the IBD Standards, the continuation of the UK-wide IBD Audit, the development of a web-based Quality Improvement Tool and Resource for IBD Services and the establishment of an IBD Registry which will capture anonymised data on the number of IBD patients across the UK, the pattern of their disease and the outcomes of treatment. Together these projects form an overall strategy to establish agreed standards for the provision and organisation of IBD Services locally, information and support to the local teams on how to improve their services, a means of regular national audit to benchmark service provision and quality of clinical care and a national database of patients to enable effective planning, costing and evaluation of services and treatment.

Part of the role of Crohn's and Colitis UK is to take a lead in representing the need for these developments to governments, health departments and NHS management nationally and locally putting the patient's voice at the forefront of the message. The Patient Panel programme which Crohn's and Colitis UK promotes and facilitates aims to develop direct patient involvement in service improvement at local level. This is coming to be seen as a valuable activity by an increasing number of IBD Teams and at the end of 2010 there were 35 such panels in existence, about 15% of IBD Services.

In line with the broader involvement of patients Crohn's and Colitis UK tries to identify suitable patients to participate in the steering groups and governance arrangements of IBD research projects. This is not always possible, but our success in doing so is gradually increasing.

### **Key objectives for 2011**

- Re-establishment of the IBD Standards Group to support the implementation of the Standards across the UK.
- Developing an integrated and sustainable strategy for future audit and quality assurance of IBD services.
- Engaging with the drive to develop good quality measures for IBD care and try to ensure that these include processes or outcomes of importance to patients.
- Promoting the need for improved IBD services to the new commissioning bodies in England.

## Supporting IBD Research

### **Strategic objectives for 2010 – 2012**

- *To increase the income available for NACC Research grants without detriment to NACC's other activities.*
- *To maintain three NACC-funded research grant programmes: - Medical Research, - Living with IBD Research - IBD Health Services Research*
- *To maintain high standards for assessment and decision-making on NACC-funded research.*
- *To establish a Research Strategy Advisory Panel representative of all areas of IBD Research to provide expert guidance to the Trustees.*
- *To seek opportunities for partnership applications for external funding for IBD research.*
- *To support others' research applications and projects where these meet NACC's research objectives.*
- *To encourage and support the involvement of IBD patients in developing ideas and priorities for IBD research and in giving patient perspectives on the involvement of patients in individual research projects.*
- *To support the development of a web-based resource to increase IBD patients' access to relevant clinical trials*

### **Achievements in 2010**

Grants were made under all three programmes in 2010. three grants totalling £245,986 were awarded for medical research, three grants totalling £256,129 for Living with IBD research and two grants totalling £73,752 for Health Services Research.

Crohn's and Colitis UK continued its active management of the multi-centre IBD and Fatigue Project which is funded by the Big Lottery.

Reports from research projects are routinely placed on the website and referenced in articles in NACC News.

Lack of staff resource has meant that progress has not yet been made on some of the key objectives in the three-year plan such as establishing the Research Strategy Advisory Panel and the web-resource for patients.

Funding was secured from Abbott for research into IBD and Employment in preparation for this to be a major awareness theme in 2011.

### **Key objectives for 2011**

- *To maintain grant-giving levels on all three programmes*
- *To identify opportunities for external funding of research and collaborative projects.*

## Members, Volunteers and Supporters

### **Strategic objectives for 2010 – 2012**

- *Ensure all newly-diagnosed patients are told about membership and encouraged to join.*
- *Explore whether NACC membership can be provided free to new patients as part of the education and support offered by IBD Services.*
- *Develop NACC's membership structure and benefits to encourage as many people as possible to join.*
- *Increase membership numbers substantially to add to NACC's authority as the leading UK organisation representing IBD patients, families and professionals.*
- *Assist existing NACC members to encourage other IBD patients, family and friends to join NACC.*
- *Encourage members to be active within NACC and to support NACC.*
- *Encourage people to become volunteers and/or active members of NACC.*
- *Develop volunteer activities within NACC and provide high quality training and support.*
- *Increase the numbers of people supporting NACC through fundraising.*

## ***Achievements in 2010***

Overall membership increased by 0.65% (199 members) in 2010. The figure at the close of the year was 30,628 (2009: 30,429). The number of new members was 3,785 of whom 2,794 joined online. The number of young people (under 30) joining Crohn's and Colitis UK increased from 1,005 in 2009 to 1,122 in 2010 (11.64% up). The charity introduced free membership for 16 and 17 year olds in September 2007 and 338 took advantage of this in 2010. (2009:331) A reduced subscription is made available on request to anyone who cannot afford the normal subscription because they are on a low income.

New members were each provided with a pack of information booklets and all members received their annually-renewed 'Can't Wait' card, quarterly newsletters and the opportunity to be in touch with a Crohn's and Colitis UK Group if they wished. A review of the categories of membership has been started and will be introduced once the new membership database goes live.

Over 400 members help by offering to tell their stories to the media to assist in raising awareness and understanding of IBD among the public. These members are recruited through the NACC newsletter, using a questionnaire that enables them to outline their 'story' and indicate the types of media that they are willing to participate in.

Many members also give generously of their time to respond to questionnaires which assist IBD research projects, inform Crohn's and Colitis UK's submissions to consultations and underpin the planning of Crohn's and Colitis UK's services.

Crohn's and Colitis UK encourages the active involvement of members as volunteers in all of its activities. As part of the NACC Plan for 2010-2013, the charity is developing support for all volunteering, co-ordinating overall policies, development and training, and seeking to maximise the opportunities for active participation in all aspects of work. There are approximately 1,000 people currently active as volunteers within Crohn's and Colitis UK. And in 2010 a volunteer carried out a Volunteering Impact Report. This report showed how important volunteering is to both the volunteer and to the Association.

At Group level, several hundred members raise awareness, fundraise and provide support through a network of 70 Groups throughout the United Kingdom. These volunteers have opportunities to attend development days and work to defined policies and Terms of Reference.

At national level, Crohn's and Colitis UK provides some national services through volunteers, notably Crohn's Colitis Support (formerly NACC-in-Contact), the Disability Benefits support service and the Parent to Parent support service. These 70 volunteers have undergone selection and training for their roles, work to defined policies and procedures and receive regular support. The charity uses 0845 technology to present a national service number whilst enabling volunteers to provide the service from their own homes.

Many volunteers assist Crohn's and Colitis UK through participation on Crohn's and Colitis UK's managing and advisory committees, and in ad hoc working groups. Wherever practicable, the Trustees advertise these opportunities in the NACC newsletter. Candidates are then invited to a selection meeting before appointment to a committee. This process has enabled the Association to benefit more effectively from the pool of knowledge and expertise that exists within the membership. Office Volunteers also help with the daily administrative tasks to ensure that mailings and merchandise is sent out.

The development days enable the volunteers to feel confident in their role and to develop their skills to better serve the Crohn's and Colitis UK's members. The Volunteer Conference in 2010

enabled volunteers carrying out different volunteer activities to be trained, share experiences and meet each other. In 2010 the volunteers who won the NACC 30th Anniversary Volunteer Recognition Award in 2009 received their awards at the AGM held in Newcastle.

In 2010 Crohn's and Colitis UK recruited more volunteers from outside of the Associations' membership to help plan and volunteer on the day for the walks held in London and York and the It's a Knock Out event held for the first time in St. Albans. These Crohn's and Colitis UK events are the largest Crohn's and Colitis UK organised Awareness and Fundraising activities held during 2010.

#### **Key objectives for 2011**

- Ensure all newly diagnosed patients are told about membership and encouraged to join.
- Develop Crohn's and Colitis UK's membership structure and benefits to encourage as many people as possible to join.
- Continue to increase membership numbers to add to Crohn's and Colitis UK's authority as the leading UK organisation for IBD patients, families and professionals.
- Continue to encourage members to actively support Crohn's and Colitis UK.
- Continue to encourage people to become active Crohn's and Colitis UK volunteers.
- Continue to develop volunteer activities with Crohn's and Colitis UK and provide high quality training and support.
- Increase the number of people supporting Crohn's and Colitis UK through fundraising.

### **Groups, Networks and Communities**

#### **Strategic objectives for 2010 – 2012**

- *NACC Groups across the whole of the UK providing educational meetings and social opportunities for IBD patients and their families to meet other people affected by IBD, and to develop awareness and fundraising activities as the local face of NACC.*
- *Develop web-based communities and networks to enable people to share experiences, interact and support each other in living with IBD or helping NACC.*
- *Promote and develop increased membership and Group activities in Scotland which has the highest incidence of IBD in the UK.*
- *Develop a network of young people with IBD who are selected and trained to lead group education and activity programmes for teenagers and young adults who have IBD.*
- *Promote Smilie's Network and arrange activity days and educational meetings for families who have a child diagnosed with IBD.*

#### **Achievements in 2010**

There are 70 active Groups covering most parts of the United Kingdom and providing opportunities for patients and their families to find out more about IBD and to meet each other informally. The Groups continue to increase the profile of the Association through local publicity and events and raised significant funds for national activities including research, Smilie's Network and support to local hospital services for IBD. Contributions to local hospitals have usually been to enhance some aspect of service or equipment, and many of the Groups have provided financial support for nurses to attend recognised IBD training courses.

All Crohn's and Colitis UK Groups have access to a template Group website and e-mail address and the volunteer responding to emails receives similar training to the Group volunteers who answer the local 0845 Group telephone numbers. This enables people with IBD to access Group information 24 hours a day and to correspond by e-mail with their local Crohn's and Colitis UK Group. During 2010 Groups were also given the opportunity to set up Facebook and Twitter accounts enabling people to use this facility to keep up-to-date with local Group activities and news. Groups also have the opportunity to use Post Office Box facilities for mail which

enables the volunteers to provide a local service from their own home but in safety by using the 0845 telephone technology, the Group e-mail address and a PO Box address.

Two new Groups were set up in 2010, 11 were 'revitalised' and one was closed. Throughout the year the Group and Volunteer Team supported the remaining groups with individual issues.

In 2010 10% of the membership were surveyed for their opinion on their local Groups. The 19% that responded most agreed that the Groups were very important to them and useful feedback was obtained. The programme of induction and development days was continued and towards the end of the year a new pilot approach to bring neighbouring Groups together for volunteer training began with a very successful first event.

The Smilie's Network held several events during the year including a residential weekend for families who have a child living with IBD.

'*Wotnpaper*' is a yahoo group for Organising Team members who are under 30 years of age. This was set up in 2010 to encourage younger people to share their views and experiences of being on a Group Organising Team. It also enables the Volunteer and Group Team to canvass their views on existing and potential ways of working with Groups.

#### **Key objectives for 2011**

- Continue and develop an effective network of Groups across the whole of the UK providing educational meetings and social opportunities for IBD patients and their families to meet other people affected by IBD, and to develop awareness and fundraising activities as the local face of Crohn's and Colitis UK.
- Develop more on-line communities and networks to enable people to share experience, interact and support each other in living with IBD or helping Crohn's and Colitis UK.
- Promote and develop increased membership and Group activities in Scotland which has the highest incidence of IBD in the UK.
- Develop a network of young people with IBD who are selected and trained to lead group education and activity programmes for teenagers and young adults who have IBD.
- Promote Smilie's Network and arrange activity days and educational meetings for families who have a child diagnosed with IBD.

## **Marketing and Fundraising**

### **Strategic Objectives for 2010 – 2012**

- *Grow income from events and challenge activities (walks, runs, cycling etc).*
- *Develop corporate awareness and fundraising income, including increasing support from pharmaceutical companies up to the 10% limit set by the Trustees.*
- *Develop Trust, Legacies and In Memoriam income.*
- *Develop individual giving and explore the potential for key supporters to make significant personal donations and 'open doors' for NACC.*
- *Reinforce awareness of fundraising needs across the organisation and provide support and guidance to maximise the effectiveness of individual and NACC Group fundraising.*
- *Reinforce and develop NACC 'brand' awareness through the website, digital and print media activity, NACC-branded merchandise and charity awards opportunities.*

### **Achievements in 2010**

The charity successfully rebranded in July 2010 changing its working name and logo and this marked the start of a two-year process of instilling the new identity in membership, supporters and the media, whilst ensuring that existing materials are not wasted.

Members' subscriptions and donations, together with the funds raised by Groups, again provided about one third of the Association's income. £130,000 was claimed during the year under Gift Aid as a result of a continuing drive to inform members of the scheme. Almost two thirds of the charity's members have now signed ongoing Gift Aid declarations or informed us that they are not taxpayers. Voluntary donations were down in 2010, possibly an indication of the effects of the recession.

Legacy gifts enabled the Charity to add to the designated Legacy Fund and the team continued to promote legacy giving to members.

Action!, the fundraising magazine for members and fundraising supporters, went online so that Fundraising Supporters who are not otherwise mailed, could access it for ideas and information.

The main area of income growth in 2010 continued to be in fundraising activities by individual supporters through events, sponsored walks and runs, and challenge activities and treks. The annual Walks for Colitis and Crohn's were held in two cities during Crohn's and Colitis Month in May 2010 – London and York – with over 1,000 people taking part. Following development of additional promotional materials, £43,231 was raised through Red Hot Day activities, including £25,085 through a Ball run by St Albans supporters and associated in memoriam donations. Other major Balls included the Rick Parfitt Jr Rock Ball at the Hurlingham Club and the Catherine McEwan Ball in Glasgow, both in March, together raising almost £60,000 although funds from these events were not received in time to be included in the 2010 accounts.

The charity's profile in the local community was raised through holding or presenting at networking events such as a Red Hot Caribbean Evening in Watford for the local business community and the Fundraising team launched its first successful It's a Knockout community fun and fundraising day in St Albans, raising around £2,000 profit and considerable awareness. The charity was the only charity to be a finalist in the Herts Business Awards in 2010 (Business in the Community) category.

A catalogue of Christmas Cards was produced with reasonable sales despite national trends being downwards. Profit was less in 2010 as the role previously fulfilled by volunteers had to be paid as a short-term contract.

Pharmaceutical Support links were strengthened and extended within the boundaries of the charity's policy (see further on page 14) and Team members regularly attend business networking opportunities to raise awareness and identify potential corporate support.

#### **Key objectives for 2011**

- Review and maintain all existing fundraising activities
- Increase the focus on seeking corporate donations
- Introduce an Annual Appeal to Members – in 2011, for the Crohn's and Colitis UK Helplines
- Consider developing a "Friends of Crohn's and Colitis UK" proposal for people who want to be supportive either through Fundraising or through Regular Giving, but do not want to receive the quarterly mailings and are happy to receive an annual summary of the Report and Accounts
- Review a national raffle proposal for 2012, linked to the annual appeal to members.
- Undertake a review of merchandise.
- Develop a City of London Lord Mayor's Show proposal for 2012
- Develop within the staff team a process for identification and budgeting of forthcoming projects, including research, to support funding bids to corporates, trusts and foundations

## **Working in partnership with health service, professional and other patient organisations and with the pharmaceutical industry**

### **Strategic approach**

*Working in partnership and collaborating with other organisations where this enables the charity to work more effectively is one of the principles underpinning the organisation. In fulfilment of this the charity has taken a collaborative approach to working with the National Health Service both nationally and locally throughout the UK, maintained close links with medical, surgical, nursing and allied health professional associations; looked for opportunities for effective partnership with other patient organisations and has been an active member of relevant umbrella organisations. The principle of a collaborative approach extends to pharmaceutical companies where opportunities are sought for effective collaboration within the ethical framework set out in NACC's pharmaceutical relations policy.*

### **Achievements in 2010**

Close links are continuously maintained with health professionals and their professional organisations and the charity has formal representation in a number of these organisation's committees. The number of health professionals formally linked to Crohn's and Colitis UK as Advisers is about 120 and each local Group has at least one appointed Medical Adviser. Advisers also assist with the NACC Publications and with media enquiries. Staff and members have taken part in various training courses for health professionals during the year, both locally and nationally, in line with our objective of raising awareness of the charity, the condition and the impact on people's lives. There were information displays at the annual meetings of BSPGHAN (British Society of Gastroenterology, Hepatology and Nutrition), the BSG (British Society of Gastroenterology), the ACPGBI (Association of Coloproctology) and the Crohn's and Colitis Nurses' Group within the Royal College of Nursing.

Links with IBD and voluntary sector organisations are equally important. The charity has continued to be closely involved with EFCCA - the European Federation of Crohn's and Ulcerative Colitis Associations and regularly exchanges information with other overseas IBD organisations. EFCCA held a Summer Camp and Young Persons meeting in 2010 and Crohn's and Colitis UK sent 2 volunteer representatives to each of these meetings.

There has been regular communication and some collaborative working with other gastroenterology patients' organisations in the UK, particularly the Crohn's in Childhood Research Appeal (CICRA), IA - The Ileostomy and Pouch Support Group, Coeliac UK and The Gut Trust (formerly the IBS Network). Membership or affiliation was also maintained with National Voices in England, the Long-term Conditions Alliance for Scotland, the Association of Medical Research Charities and the Disability Alliance.

The charity has a clear policy for relations with pharmaceutical companies which sets out the positive benefits of good working relationships with the industry, encourages multi-company support for the work of Crohn's and Colitis UK and states that financial support from pharmaceutical companies should not be greater than 10% of NACC's overall income in any year. The charity has developed a Corporate Supporter Framework with four levels at which companies can provide support for the general work of NACC, with up to half of the funds being designated for specific projects and half unrestricted. There were three Gold, one Silver and one Bronze level members in 2010.

### **Key objectives for 2011**

- Maintain and develop existing links with health professional organisations and strengthen the links to paediatric gastroenterology and the Primary Care Society of Gastroenterology.

- Continue raising awareness of Crohn's and Colitis UK among health professionals in all UK countries.
- Develop more active relationships with EFCCA and with other overseas IBD organisations.
- Encourage additional support from pharmaceutical companies within the Corporate Supporter Framework.

## Cross-cutting themes from the Crohn's and Colitis UK Plan

The 'NACC Plan for 2010-2012 identified the following cross-cutting themes as areas of priority which would be given emphasis within the strategic and operational objectives for the various areas of work carried out by the charity. These themes are Awareness of IBD, Young People, focusing on Living with IBD, Developing inclusiveness, Empowering people who have IBD, iNACC (increased use of IT), Adapting to the impact of devolved government in the UK and Raising Funds. The rationale for these is set out in the plan document and some examples of progress have been included in the achievements listed above. To give just one example here the Volunteer Conference included an important session at which various people from different under-represented groups contributed their perspectives on living with IBD.

## Financial Report

The accounts for 2010 are in the format required by the Charity Commissioners – the Statement of Recommended Practice (SORP 2005). This calls for the classification of Crohn's and Colitis UK funds using the following terms:

**Restricted funds** – refer to income that has been specified for a particular purpose by the donor, e.g. Research and Personal Grant Funds;

**Unrestricted funds** – refer to donations, grants or other income that has not been specified for a particular purpose by the donor;

**Designated funds** – refer to unrestricted income that the Trustees have decided to allocate for specific purposes; such funds may subsequently be reallocated by the Trustees.

The figures in the following paragraphs are taken from the Consolidated Statement of Financial Activities ('the SOFA') and from the Notes to the Accounts.

### Overall position

The financial result for the year is shown in the Consolidated Statement of Financial Activities and represents the total income, expenditure and resources relating to all activities in the year, being the work of the charity at national level, local groups and the contribution from the trading company, NACC Merchandise Ltd.

In 2010 there was an overall deficit of £214,695 (2009: Deficit £229,057), due to the total value of research grants awarded in the year which significantly exceeded income to the Research Fund. The Trustees are satisfied that this deficit is adequately covered by reserves.

## Funds

### Restricted Funds

These funds have been given for specific aspects of Crohn's and Colitis UK work and cannot be utilised to respond to a shortfall in operating Income.

Grants awarded in 2010 for Medical Research amounted to £245,986; Living with IBD Research totalled £256,129 and IBD Health Services totalled £73,752.

The figures discussed in the following paragraphs are drawn from Notes 11 and 23 to the accounts.

## **Research Fund**

Donations and investment income received were £310,159 for the year. Groups and volunteering fundraising activities raised an additional £20,617. After net transfers of (£23,470) the Fund's total income was £307,306 (2009: £368,161), representing a 16.5% reduction in income over last year.

Total resources expended were £576,331 producing a deficit for the year of £269,025 (2009: £132,765 deficit).

Resources expended include £502,115 grant expenditure and £74,216 grant support costs. The sum of £481,553 was carried forward for future distribution.

## **Personal Grants**

Grants are made by the Personal Grants Panel to individuals who have a particular need arising as a result of their inflammatory bowel disease. The maximum level of grant in 2010 was £500. 245 grants were made during the year amounting to £70,613

Crohn's and Colitis UK received £63,864 in donations and investment income for the Personal Grants Fund, (2009:£59,951). Grants awarded and support costs amounted to £76,631 resulting in an overall deficit of £12,767 for the year (2009: £861 deficit).

The sum of £8,770 is carried forward to 2011.

## **Unrestricted and designated funds**

The figures discussed in the following paragraphs are drawn from the SOFA and Notes 15 and 22 to the accounts.

Designated funds have been created to hold money set aside by the Trustees for particular purposes. These are to support projects or developments not included within the Association's normal annual budget, to cover any potential liabilities arising from the office lease, to meet the annual depreciation costs of the capital expenditure on premises and equipment, and to hold unrestricted legacy funds for future allocation to specific projects.

The Trustees' policy is to maintain a clear distinction between ongoing expenditure, which they aim to cover from dependable sources of income, and 'one-off' projects or new developments, which are funded from special fundraising or from legacy income that may vary unpredictably from year to year.

Total unrestricted income from the combined national and Group activities was £1,802,656 (2009: £1,652,061).

Expenditure was £1,801,442 (2009:£1,695,685) resulting in an operating surplus of £1,234 (2009: deficit £43,624) overall.

Groups and volunteering activities raised funds for local hospital projects amounting to grants of £25,203

The total of unrestricted funds carried forward to 2011 is £1,518,369. Of this some £760,000 is held in the General Reserve Fund to cover 20 weeks operating costs

## **Cost of generating funds.**

One indicator of a charity's efficiency is seen as the cost of generating funds as a percentage of total incoming resources. In 2010 this was 21.04% (2009: 19.25%)

## **Gift Aid**

The Trustees review each year how the Gift Aid reclaimed from the Inland Revenue should be allocated to the various aspects of the charities work and base their decision on what they believe to be the best interests of people living with IBD at the time. For 2010, the Trustees allocated the Gift Aid claimed from subscriptions and donations to the General, Research and Welfare Funds in the same proportion as the funds to which members directed their donations.

## **Investments and property**

Some £2.7m is placed in high-interest-bearing Deposit Accounts with the Bank of Scotland, Clydesdale Bank and Santander.

Crohn's and Colitis UK has a 15-year lease, ending September 2015, on its office accommodation in St Albans, which is held in the name of NACC Nominees Ltd. The Directors of NACC Nominees Ltd are Trustees of Crohn's and Colitis UK.

## **Grant-making Policies**

### ***Research Grants***

Grants for Medical and 'Living with IBD' Research are made following nationally-publicised advertisements. Applications are considered by members of the Awards Committees, comprising academic and medical specialists as well as lay NACC representatives. External specialist referees are asked to comment confidentially on applications. Grants are normally made for periods of up to three years, with reports required at annual intervals. Funds are normally set aside for the total cost of the project in the year of award. Health services Research is normally commissioned taking advice from relevant academic and health professional experts to provide peer review.

### ***Personal Grants***

Personal grants are made from the Personal Grant Fund decided by a small committee of members including two Trustees. Grants are made to people on low incomes and with specific needs arising from IBD. The normal maximum grants are £300 under the general scheme and £500 under the Young Persons' Assistance scheme.

### ***Local Grants***

Local groups sometimes make grants to their local hospitals to support or enhance aspects of their provision for IBD patients. Grants have to be made according to the policy guidelines approved by the Trustees and cannot be made for items that should be NHS funded. Group grants have to be specifically approved and a matching amount given to national funds.

## **NACC Merchandise Ltd**

NACC Merchandise Ltd recorded a net operating deficit for the year of £8472 (2009: surplus £27,740) The main activity of the company continues to be the sale of Christmas Cards to members through mail order although additional merchandise items are being made available.

## **Risk Assessment**

The Trustees, with input from the Chief Executive and staff, have conducted a review of the risks to which NACC is exposed in its ongoing activities and, in particular, the Trustees considered:

- the type of risks the charity faces;
- the level of risks which they regard as acceptable;
- the likelihood of the risks concerned materialising;
- NACC's ability to reduce the incidence and impact of risks that have been identified, and
- the costs of operating particular controls relative to the benefit obtained.

The Trustees review risks in relation to any new developments proposed and Committees and management are required to conduct at least annual reviews of the areas for which they are responsible.

## Strategic Overview 2010 and 2011

The core services and activities provided by the charity have continued through 2010 without major changes. These encompass the information and support activities, those involving members, Groups, volunteers and the support provided to all those who are helping to raise funds. A huge amount of work is undertaken by the staff and volunteers to maintain these activities and to ensure that they are undertaken to a high standard. Maintaining quality involves working to accreditation standards where possible – for example the new Department of Health Information Standard for patient literature – undertaking user or member surveys to gain feedback – for example the Volunteer Impact Survey undertaken for us by a volunteer in 2010 – and by providing training for volunteers involved in the helpline services, Group activities and other key roles.

The areas which have seen most development in 2010 have been Public Affairs and Marketing. Changing our name and logo was a major decision and a major work project which was accomplished in a very short space of time, at low cost and with widespread support across the charity. The benefits in terms of raising awareness are already becoming evident though everyone struggles without the handy acronym 'NACC'! Our marketing literature has nearly all been updated, redesigned and re-launched within the last year which it is hoped will encourage more people to promote, support or join the Association.

Public Affairs was mostly focused on health services until the last year and this work has expanded to include all aspects of public policy and provision affecting IBD patients, particularly the proposed welfare reforms. Responding to the flow of consultation documents from the new Government has required significant extra work and would not have been possible without the charitable donation which funded our new Public Affairs Officer post.

It has been a challenge maintaining all our services and meeting the growth in demand that follows our successful awareness campaigns at the same time as the country has experienced an economic downturn. Voluntary donations to the Association were lower in 2010 and it was only due to increased fundraising returns and legacies together with tight control of expenditure that the charity ended the year with a balanced budget. This placed significant demands on staff to sustain workloads without additional resources.

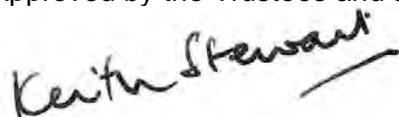
Overall the Trustees see 2010 as a very successful year but are cautious about the impact of the economic environment in the coming two years. They have therefore set a realistic budget and have set aside in the General Reserve and Legacy Funds sufficient unrestricted reserves to cover up to 26 weeks normal running costs. This means that the charity has no 'spare' funds to invest in development of the organisation or of new projects unless income exceeds expectations by a significant margin.

Nevertheless, as the strategic objectives from the 'NACC Plan 2010 – 2012' and the specific objectives for 2011 show, the Trustees, staff and volunteers remain committed to enhance services, activities and campaigning for the benefit of people living with IBD whenever there are opportunities to do so.

### Acknowledgements

The Trustees would like to record their thanks and appreciation to all those who continue to make the charity's work possible - the many people who individually or in Groups who have raised funds for Crohn's and Colitis UK, the charitable trusts and companies who have given their support, the volunteers in our Groups and support services, those who support the charity's activities or serve on our committees, our medical advisers and, not least, the Chief Executive, Senior Managers and staff at the Office in St Albans.

Approved by the Trustees and authorised to be signed by the Chairman on their behalf.



Keith Stewart, Chairman  
5<sup>th</sup> April 2011

## **Board of Trustees, Officers, Senior Management Team and Committees**

From 1<sup>st</sup> January 2010 to the date of signing of this Report and Accounts, the Honorary Officers, Trustees, Senior Management Team and committee members were as follows:

### **Life President**

Professor John Lennard-Jones

### **Vice-Presidents**

Margaret Chandler  
Rod Mitchell

Bradley Brown  
Elaine Steven

### **Board of Trustees**

#### **Honorary Officers**

Elaine Steven (*Chairman, until May 2010*)  
Keith Stewart (*Chairman, from May 2010*)  
Nigel Westwood (*Vice-Chairman, until May 2010*)  
Dr Martin Gay (*Vice-Chairman, from May 2010*)  
Tim Mutum  
Alan Thackrey (*National Treasurer, from May 2010*)

#### **Elected Trustees**

Stuart Berliner  
Denise Cann  
John Clarke  
Dr Martin Gay  
Gerald Gregory  
Mike Hilton  
Deborah Hodges (*from May 2010*)  
Kati Simpson  
John Stanley

#### **Advisers co-opted onto Board of Trustees**

Deborah Hodges (*until May 2010*)  
Professor Christine Norton  
Professor David Rampton  
Julie Reynolds  
Dr Jeremy Sanderson  
Dr Ian Shaw

#### **Member Involvement and Volunteering Committee**

Julie Reynolds (*Chairman*)  
Mike Hilton (*Vice-Chairman*)  
Nancy Greig  
Barbara Harvey  
Gail Walford  
Heather Baumohl  
Richard Driscoll  
Bev Loczy (*until December 2010*)  
Kate James (*from December 2010*)  
Wendy Childs

### **Senior Management Team**

Richard Driscoll Chief Executive  
Heather Baumohl Director of Member Involvement & Volunteering  
Suzi Clark Director of Marketing & Fundraising  
Helen Terry Director of Information and Support  
Andrew Shanks Dir of Finance & Administration (*until Feb. 2011*)  
Caroline Hardy Dir of Finance & Administration (*from March 2011*)

#### **Information and Support Committee**

Tim Mutum (*Chairman*)  
Bradley Brown  
Denise Cann  
Dawn Carter  
Rebecca Fisher  
Charlotte Gosden  
Gerald Gregory  
Deborah Hodges  
Judy Murphy  
Dr Tim Orchard  
Deirdre Choo (*until February 2011*)  
Glenys Davies  
Richard Driscoll  
Helen Terry

#### **Public Affairs Committee**

(*formerly IBD Health Services Committee*)  
Elaine Steven (*Chairman, until February 2011*)  
Dr Martin Gay (*Chairman, from February 2011*)  
David Barr  
Tracey Cole (*until February, 2011*)  
Mike Hilton  
Kiron Kurien  
Andy Player  
Azmina Verjee  
Heather Baumohl  
Peter Canham  
Richard Driscoll  
Alison Orlandi (*from September, 2010*)  
Helen Terry

**Marketing and Fundraising Committee**

John Stanley (*Chairman*)  
Stuart Berliner  
Jonathan Edwards  
Peter Foy  
Berkeley Greenwood  
Gerald Gregory  
Anna Griffiths  
Liz Smith  
Suzi Clark  
Richard Driscoll

**Crohn's and Colitis Support Managing Team**

(*formerly NACC-in-Contact*)  
Dawn Carter (*Chairman, until January 2011*)  
Deborah Hodges (*Chairman, from January 2011*)  
Lynne Bird  
Bruce Boyd  
Denise Cann  
Peri Gillespie  
Laura Hawes  
Emma Livesey  
Elina Bloomfield  
Helen Terry

**NACC Merchandise Ltd**

Rodney Mitchell (*Chairman*)  
Elaine Steven

**Bankers**

Lloyds TSB plc  
36 Chequer Street  
St Albans  
Herts AL1 3YQ

Bank of Scotland  
Beauclerc House  
3 Queens Road  
Reading  
RG1 4AR

Clydsdale Bank  
4<sup>th</sup> Floor  
Verulam Point  
Station Way  
St Albans  
AL1 5HE

**Solicitors**

Bates, Wells & Braithwaite  
2-6 Cannon Street  
London EC4M 6YH

**Auditors**

Kingston Smith LLP  
Devonshire House  
60 Goswell Road  
London EC1M 7AD

**Health Professional Advisers Panel**

(*formerly Medical Advisers Panel*)  
Dr Jeremy Sanderson (*Chairman*)  
Professor David Rampton (*Vice-Chairman*)  
Dr Ian Shaw (*Secretary*)

**Medical Research Awards Panel**

Professor Derek Jewell (*Chairman, until May 2010*)  
Professor David Rampton (*Chairman, from July 2010*)  
Dr Tim Card  
Professor John Cummings  
Alan Dearlove  
Dr Martin Gay  
Dr Barney Hawthorne (*from May 2010*)  
Dr John Mansfield (*until March 2010*)  
Bharat Odedra  
  
Dr Jeremy Sanderson  
Dr Ian Shaw  
Douglas Smallwood  
Dr Andrew Stagg (*from May 2010*)  
Jo Spencer (*until March 2010*)  
Professor Brendan Whittle (*until March 2010*)  
Richard Driscoll

**Living with IBD Research Awards Panel**

John Clarke (*Chairman*)  
Elaine Steven (*Vice-Chairman*)  
Professor Julie Barlow  
Denise Cann  
Dr Peter Irving  
Dr Anna Madill  
Lynne Marriott  
Professor Susan McLaren  
Professor Christine Norton  
Sneh Shah  
Professor Tricia Sloper  
Dr Gillian Thomas  
Helen Terry

**Personal Grants Panel**

Bradley Brown (*Chairman*)  
Denise Cann  
Melissa Fletcher  
Dr Martin Gay  
Stella Leigh  
Julia Devereux (*Secretary*)  
Helen Terry

**NATIONAL ASSOCIATION FOR  
COLITIS AND CROHN'S DISEASE**

**English Registered Charity No. 1117148**  
**Scottish Registered Charity No. SC038632**  
Company Number 5973370

**FINANCIAL STATEMENTS**

**FOR THE YEAR ENDED**

**31st DECEMBER 2010**

## **National Association for Colitis and Crohn's Disease Respective Responsibilities of Trustees' and Auditors**

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

Company Law requires the trustees to prepare financial statements for each financial year which give a true and fair view of the charitable company and the group and of the incoming resources and application of resources, including the income and expenditure, of the charitable group for that period.

In preparing these financial statements the trustees are required to:

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles of Charities SORP
- make judgements and estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements;
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charity will continue in operation.

The trustees are responsible for keeping accounting records which disclose with reasonable accuracy at any time the financial position of the charitable company and enable them to ensure that the financial statements comply with Companies Act 2006, the Charities and Trustee Investment (Scotland) 2005 Act and the Charities Accounts (Scotland) Regulations 2006.

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

In so far as the trustees are aware:

- there is no relevant audit information of which the charitable company's auditor is unaware; and
- the trustees have taken all the steps they ought to have taken to make themselves aware of any relevant audit information and to establish that the auditor is aware of that information.

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

# **Independent Auditors' Report to the Trustees of the National Association for Colitis and Crohn's Disease**

We have audited the financial statements of National Association for Colitis and Crohn's Disease for the year ended 31 December 2010 which comprise the Group Statement of Financial Activities, the Group Summary Income and Expenditure Account, the Group and Parent Charitable Company Balance Sheets and the related notes. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

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 charity's trustees, as a body, in accordance with Section 44(1)(c) of the Charities and Trustee Investment (Scotland) Act 2005, and in respect of the consolidated financial statements, in accordance with regulations made under section 43 of the Charities Act 1993. Our audit work has been undertaken so that we might state to the charitable company's members and trustees those matters which we are required to state to them in an auditors' report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to any party other than the charitable company, the charitable company's members, as a body, and the charity's trustees, as a body for our audit work, for this report, or for the opinion we have formed.

## **Respective Responsibilities of Trustees and Auditors**

As explained more fully in the Trustees' Responsibilities Statement set out on page 1 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.

We have been appointed as auditor under Section 44(1)(c) of the Charities and Trustee Investment (Scotland) Act 2005, the Companies Act 2006 and section 43 of the Charities Act 1993 and report to you in accordance with regulations made under those Acts. Our responsibility is to audit and express an opinion on the financial statements in accordance with applicable law and International Standards on Auditing (UK and Ireland). Those standards require us to comply with the Auditing Practices Board's (APB's) Ethical Standards for Auditors.

## **Scope of the audit of the financial statements**

An audit involves obtaining evidence about the amounts and disclosures in the financial statements sufficient to give reasonable assurance that the financial statements are free from material misstatement, whether caused by fraud or error. This includes an assessment of: whether the accounting policies are appropriate to the group's and the parent charitable company's circumstances and have been consistently applied and adequately disclosed; the reasonableness of significant accounting estimates made by the trustees; and the overall presentation of the financial statements.

## **Opinion on financial statements**

In our opinion the financial statements:

- give a true and fair view of the state of the group's and the parent charitable company's affairs as at 31 December 2010 and of the group's incoming resources and application of resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the Companies Act 2006, the Charities and Trustee Investment (Scotland) Act 2005, regulations 6 and 8 of the Charities Accounts (Scotland) Regulations 2006 (as amended) and the Charities Act 1993.

# **Independent Auditors' Report to the Trustees of the National Association for Colitis and Crohn's Disease**

## **Opinion on other matter prescribed by the Companies Act 2006**

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

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

We have nothing to report in respect of the following matters where the Companies Act 2006, the Charities Accounts (Scotland) Regulations 2006 (as amended) and the Charities Act 1993 require us to report to you if, in our opinion:

- have not been received from branches not visited by us; or
- the parent charitable company's financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit; or
- the trustees were not entitled to prepare the financial statements in accordance with the small companies regime and take advantage of the small companies exemption in preparing the Trustees' Annual Report.

Sandra De Lord, Senior Statutory Auditor  
for and on behalf of Kingston Smith LLP, Statutory Auditor

Devonshire House  
60 Goswell Road  
London EC1M 7AD  
Date:

**National Association for Colitis and Crohn's Disease**  
**Consolidated Statement of Financial Activities**  
**For the year ended 31st December 2010**  
**(including Income and Expenditure Account)**

	Note	Unrestricted funds (inc. designated funds note 22)	Restricted funds	Total funds 2010	Total funds 2009
		£	£	£	£
<b>Incoming resources</b>					
Incoming resources from generated funds					
Voluntary income:					
Donations and similar income	2	347,643	335,753	683,396	618,127
Legacies		187,450	54,340	241,790	166,690
Activities for generating funds	3	808,357	93,612	901,969	763,238
Investment income and interest	4	47,678	12,774	60,452	146,638
Incoming resources from charitable activities	5	403,527	60,675	464,202	398,280
Other miscellaneous Income		8,000	-	8,000	-
<b>Total incoming resources</b>		<b>1,802,655</b>	<b>557,154</b>	<b>2,359,809</b>	<b>2,092,973</b>
<b>Resources Expended</b>					
Cost of generating funds		495,803	9,386	505,189	402,860
Charitable activities					
Grantmaking		6,610	728,377	734,987	603,508
Information line, booklets and newsletters		401,887	32,394	434,281	451,689
Raising awareness		174,104	-	174,104	135,955
Policy & Campaigns		111,065	-	111,065	184,543
Groups and Volunteering		341,815	-	341,815	275,685
NACC in Contact		39,301	-	39,301	41,227
Membership costs		140,788	-	140,788	152,135
Governance	6	92,976	-	92,976	74,428
<b>Total resources expended</b>	6	<b>1,804,349</b>	<b>770,157</b>	<b>2,574,506</b>	<b>2,322,030</b>
<b>Net Outgoing resources before transfers</b>					
		(1,694)	(213,003)	(214,697)	(229,057)
Transfers between funds	15	28,171	(28,171)	-	-
<b>Net Expenditure</b>		<b>26,477</b>	<b>(241,174)</b>	<b>(214,697)</b>	<b>(229,057)</b>
Net (loss)/gain on investment assets		-	-	-	-
<b>Net movement in funds for the year</b>		<b>26,477</b>	<b>(241,174)</b>	<b>(214,697)</b>	<b>(229,057)</b>
Fund balances brought forward at 1st January 2010		<b>1,488,984</b>	<b>884,776</b>	<b>2,373,760</b>	<b>2,602,817</b>
<b>Fund balances carried forward at 31st December 2010 (page 4)</b>		<b>1,515,461</b>	<b>643,602</b>	<b>2,159,063</b>	<b>2,373,760</b>
		Note 22	Note 23		

All gains and losses arising in the year are included in the Statement of Financial Activities and arise from continuing operations.

The net outgoing resources of the Charitable Company for the period was £ (214,697)

**National Association for Colitis and Crohn's Disease**  
**Balance Sheets at 31st December 2010**

	Note	Group*		Charity	
		2010 £	2009 £	2010 £	2009 £
<b>Fixed assets</b>					
Tangible assets	16	72,780	88,349	72,780	88,349
Investment	17	-	-	1	1
		<u>72,780</u>	<u>88,349</u>	<u>72,781</u>	<u>88,350</u>
<b>Current assets</b>					
Stock of goods for resale		24,470	21,964	-	-
Debtors	18	190,964	80,878	211,320	133,984
Cash at bank and in hand	19	<u>2,977,774</u>	<u>3,262,137</u>	<u>2,955,621</u>	<u>3,203,433</u>
		3,193,208	3,364,979	3,166,941	3,337,417
<b>Creditors: amounts falling due within one year</b>	20	<u>(663,349)</u>	<u>(649,454)</u>	<u>(639,517)</u>	<u>(632,799)</u>
<b>Net current assets</b>		<u>2,529,859</u>	<u>2,715,525</u>	<u>2,527,424</u>	<u>2,704,618</u>
<b>Creditors: amounts falling due After one year</b>		<u>(443,576)</u>	<u>(430,114)</u>	<u>(443,576)</u>	<u>(430,114)</u>
<b>Total net assets</b>		<u><b>2,159,063</b></u>	<u><b>2,373,760</b></u>	<u><b>2,156,629</b></u>	<u><b>2,362,854</b></u>
<b>Funds</b>					
<b>Unrestricted funds</b>	22				
Designated funds held nationally		642,681	702,374	642,681	702,374
General Reserve Fund held nationally		756,895	606,552	756,895	606,552
Unrestricted funds held by local groups		113,451	169,152	113,451	169,152
Non charitable trading funds		<u>2,434</u>	<u>10,906</u>	<u>-</u>	<u>-</u>
<b>Total unrestricted funds</b>		<u><b>1,515,461</b></u>	<u><b>1,488,984</b></u>	<u><b>1,513,027</b></u>	<u><b>1,478,078</b></u>
<b>Restricted funds</b>	23				
Held nationally		541,404	790,781	541,404	790,781
Held by local groups		<u>102,198</u>	<u>93,995</u>	<u>102,198</u>	<u>93,995</u>
<b>Total restricted funds</b>		<u><b>643,602</b></u>	<u><b>884,776</b></u>	<u><b>643,602</b></u>	<u><b>884,776</b></u>
<b>Total funds</b>		<u><b>2,159,063</b></u>	<u><b>2,373,760</b></u>	<u><b>2,156,629</b></u>	<u><b>2,362,854</b></u>

The accounts, which comprise the consolidated statement of financial activities, the balance sheets and the related notes, were approved by the Council of Trustees and authorised for issue on 5th April 2011 and signed on its behalf by:



Keith Stewart

Chairman

\*Group represents the consolidation of the charity with its trading company.

# **National Association for Colitis and Crohn's Disease**

## **Notes to the Accounts**

### **For the year ended 31st December 2010**

#### **1 Accounting policies**

##### **Basis of accounting**

The accounts have been prepared under the historical cost convention and in accordance with the Statement of Recommended Practice for Charities "Accounting and Reporting by Charities" (2005), the Charities Act 1993 and applicable accounting standards. Comparative figures have been reorganised to reflect the changes.

##### **Group financial statements**

These financial statements consolidate the results of the charity and its wholly owned trading subsidiary NACC Merchandise Limited, on a line by line basis. A separate statement of financial activities (SOFA) is not presented because the charity has taken advantage of the provisions of paragraph 397 of the SORP.

##### **Groups and Volunteering**

The charity had local groups that were active to some degree during the year. All active groups are required to make returns of income and expenditure for the year which are consolidated in the financial statements. By the nature of the charity, however, the deadline for returns to be received cannot always be met which means that some results are omitted, and some groups are inactive. Returns had not been received from 2 groups at the time of the audit.

##### **Income**

- i) All income is included in the accounts without netting off expenditure
- ii) Members' subscriptions are taken to income in full in the year of receipt.
- iii) Investment income is taken to income when received and then allocated annually to the various funds in proportion to their average balance throughout the year.
- iv) Donations received are treated as unrestricted funds unless they are specifically designated by the donor for either research or the welfare of sufferers, in which cases they are kept in the separate funds. All donations received "in memory" are treated as research unless the donor specifies otherwise.
- v) Legacies are included in the financial statements as soon as their receipt can be anticipated with a high degree of certainty. This frequently coincides with the funds being received.

##### **Expenditure**

- i) Expenditure is charged on an accruals basis.
- ii) The full cost of booklets, leaflets etc. is charged in the year the expenditure is incurred.
- iii) Research grants are charged to expenditure at the time they are allocated.

Grants are allocated to cover the cost of equipment and/or the salaries of research staff.

The majority of grants, which can be for more than one year, are paid quarterly in arrears. For administrative reasons it can take some time for the grantee to appoint suitable staff and consequently some grants may remain partly unpaid at the year end.

Full provision is made for amounts allocated but not yet paid and this provision is shown as a creditor falling due within one year and after one year.

- iv) The majority of costs are directly attributable to specific activities. Costs incurred in respect of the charitable activities include elements of staff costs and attributable support costs.
- v) Support costs are those costs which are common to all areas of the organisation including premises and office operating costs. These are allocated across all areas of activity on the basis of staff time spent on each activity.
- vi) Governance costs include both the direct costs of the charity meeting its statutory obligations and a portion of officer and overhead time spent on the strategic direction of the organisation and compliance with constitutional and statutory requirements.

**National Association for Colitis and Crohn's Disease**  
**Notes to the Accounts**  
**For the year ended 31st December 2010 (continued)**

**1 Accounting policies (continued)**

**Stocks**

Stocks of goods for resale are valued at the lower of cost and net realisable value.

**Capitalisation and depreciation of tangible fixed assets**

All assets costing more than £500 are capitalised at the cost to the charity.

With the exception of leasehold improvements, depreciation is provided in respect of fixed assets at a rate of 25% per year which rate it is believed fairly reflects the average estimated life of the charity's assets. Leasehold improvements are depreciated over the life of the lease.

**Fixed asset investments**

Fixed asset investments are included at market value at the balance sheet date. Any gain or loss on revaluation is taken to the SOFA.

**Pension Contributions**

The charity makes contributions for employees to a group personal pension scheme. This is a defined contribution scheme to which the Association makes employer's contributions of 8% of gross pay. Where employees prefer to maintain their personal pension schemes similar employer contributions are made. Outstanding contributions to the scheme at 31st December 2010 amounted to £4,873 these are included in creditors.

**Funds Accounting**

Funds held by the charity are:

*Unrestricted general funds* - these are funds which can be used in accordance with the charitable objects at the discretion of the trustees.

*Designated funds* - these are funds set aside by the trustees out of unrestricted general funds for specific future purposes in accordance with the development plans of the organisation and to enable the completion of existing projects.

*Restricted funds* - these are funds that can only be used for particular restricted purposes within the objects of the charity. Restrictions arise when specified by the donor or when funds are raised for particular purposes.

These funds are further divided between those held Nationally and those held by NACC Groups. Further explanation of the nature and purpose of each fund is included in the notes to the accounts.

**Operating leases**

Rentals applicable to operating leases where substantially all the benefits and risks of ownership remain with the lessor are charged to the SOFA as they arise.

**2 Donations, and similar incoming resources**

	<b>2010</b>	<b>2009</b>
	<b>£</b>	<b>£</b>
Donations from members	200,397	200,012
Donations to local groups	70,853	82,898
Other donations	412,146	335,216
	683,396	618,127
	683,396	618,127

**National Association for Colitis and Crohn's Disease**  
**Notes to the Accounts**  
**For the year ended 31st December 2010 (continued)**

<b>3</b>	<b>Income from activities for generating funds</b>			<b>2010</b>	<b>2009</b>
				<b>£</b>	<b>£</b>
	National fundraising			711,640	527,305
	Local groups' fundraising			81,760	124,228
	Turnover of Trading Subsidiary (note 10)			81,079	99,834
	Other income			<u>27,490</u>	<u>11,871</u>
				<u>901,969</u>	<u>763,238</u>
<b>4</b>	<b>Investment income and interest</b>			<b>2010</b>	<b>2009</b>
				<b>£</b>	<b>£</b>
	Other Interest	- Charity		60,431	146,620
		- Trading Subsidiary (note 10)		<u>21</u>	<u>18</u>
				<u>60,452</u>	<u>146,638</u>
<b>5</b>	<b>Income from activities in furtherance of the objects</b>			<b>2010</b>	<b>2009</b>
				<b>£</b>	<b>£</b>
	Subscriptions			318,727	309,738
	Other Grants			<u>145,475</u>	<u>88,542</u>
				<u>464,202</u>	<u>398,280</u>
<b>6</b>	<b>Resources Expended</b>				
		<b>Direct staff</b>	<b>Other direct</b>	<b>Support</b>	<b>Total</b>
		<b>costs</b>	<b>costs</b>	<b>Costs</b>	<b>2010</b>
		<b>£</b>	<b>£</b>		<b>£</b>
	Cost of generating funds (note 9)	167,195	279,114	58,880	505,189
	Charitable activities				
	Grantmaking (note 11)	29,460	695,153	10,374	734,987
	Information line, booklets and newsletters	178,011	193,581	62,689	434,281
	Raising awareness	43,002	115,958	15,144	174,104
	Policy & Campaigns	33,659	65,553	11,853	111,065
	Groups and volunteering	180,624	97,582	63,609	341,815
	NACC in Contact	21,606	10,086	7,609	39,301
	Membership costs	73,847	40,935	26,006	140,788
	Governance (note 12)	<u>31,228</u>	<u>50,749</u>	<u>10,999</u>	<u>92,976</u>
		<u>758,632</u>	<u>1,548,711</u>	<u>267,163</u>	<u>2,574,506</u>
		(note 7)		(note 8)	<u>2,322,030</u>

**National Association for Colitis and Crohn's Disease**  
**Notes to the Accounts**  
**For the year ended 31st December 2010 (continued)**

<b>7 Staff costs</b>	<b>2010</b>	<b>2009</b>
	<b>£</b>	<b>£</b>
Wages and salaries	714,770	603,628
Social security costs	68,881	57,746
Pension costs	37,038	30,054
	<u>820,690</u>	<u>691,428</u>
Direct costs	758,632	633,525
Support costs	41,226	57,903
	<u>799,858</u>	<u>691,428</u>

The average number of staff and the allocation of their time was:

Charitable activities		
Direct	17.75	17.45
Support	0.90	0.90
Governance	0.15	0.15
Cost of generating funds	6.20	4.50
	<u>25.00</u>	<u>23.00</u>

One member of staff was paid more than £60,000 in the year (2009: nil)  
Pension contributions in respect of this staff member totalled £5,016

<b>8 Support Costs</b>	<b>2010</b>	<b>2009</b>
	<b>£</b>	<b>£</b>
Staff costs	41,226	57,903
Other staff related costs	13,695	12,949
Premises	89,932	92,103
Office operating costs	116,732	117,926
Other costs	5,578	4,405
	<u>267,163</u>	<u>285,286</u>

Included in support costs are the following:

Depreciation	18,865	22,431
Property rental	44,491	43,777

Support costs are allocated across the activity areas of the charity on the basis of direct staff time related to that activity.

<b>9 Cost of generating funds</b>	<b>2010</b>	<b>2009</b>
	<b>£</b>	<b>£</b>
Costs of Trading Subsidiary (note 10)	87,622	70,162
National fundraising direct costs	174,260	138,355
Local groups' fundraising	17,232	26,475
	<u>279,114</u>	<u>234,992</u>

**National Association for Colitis and Crohn's Disease**  
**Notes to the Accounts**  
**For the year ended 31st December 2010 (continued)**

**10 Trading Subsidiary**

The charity has a wholly owned trading subsidiary NACC Merchandise Limited, a company incorporated in the UK. The company sells Christmas cards and other products. The company gift aids its taxable profits to NACC. A summary of the trading results of the company is shown below. Audited accounts have been filed with the Registrar of Companies.

	<b>2010</b>	<b>2009</b>
<b>Profit and loss account</b>	<b>£</b>	<b>£</b>
Turnover	81,079	99,834
Cost of sales	<u>(65,351)</u>	<u>(52,024)</u>
Gross profit	15,728	47,810
Distribution costs	(17,608)	(12,679)
Administration expenses	(6,614)	(7,409)
Interest payable	-	-
Interest receivable	<u>22</u>	<u>18</u>
Net (loss)/profit	(8,472)	27,740
Amount gift aided to NACC	<u>-</u>	<u>(27,740)</u>
(Loss)/Profit on ordinary activities	(8,472)	-
Retained profit brought forward	<u>10,906</u>	<u>10,906</u>
Retained profit carried forward	<u><u>2,434</u></u>	<u><u>10,906</u></u>

**11 Grant making direct costs**

Grant making direct costs comprise:

	<b>2010</b>	<b>2009</b>
<b>Grants made</b>	<b>£</b>	<b>£</b>
Personal Grants	70,613	53,248
Medical Research	245,986	321,382
Living with IBD Research	256,129	143,312
Health Services Research	73,752	-
Grant liabilities written back	(59,892)	(14,956)
Other - Groups and volunteering	<u>25,203</u>	<u>43,178</u>
	611,791	546,164
<b>Direct costs of grant making process</b>	<u>83,362</u>	<u>17,024</u>
	<u><u>695,153</u></u>	<u><u>563,188</u></u>

**Personal grants**

Grants are made to individual people who have a particular need arising as a result of their inflammatory bowel disease. The maximum level of basic grant in 2010 was £500 (2009: £500). 245 grants were made in the year totalling £70,613 (2008 £53,248).

**Research grants**

Grants are awarded by Crohn's and Colitis UK Research Committees to fund research projects that have been approved by peer review. Grants may be for equipment, consumables or salaries, the institutions to which grants were paid in 2010 are listed below. Crohn's and Colitis UK does not contribute to the overhead costs of such institutions.

<b>Medical research</b>	<b>2010</b>
	<b>£</b>
Nottingham City Hospital	98,939
Kings College London	77,749
Queen Mary University of London	69,298
	<u>245,986</u>

**Other grants**

Local Groups raised funds for local hospital projects to which grants totalling £25,203 were made.

**National Association for Colitis and Crohn's Disease**  
**Notes to the Accounts**  
**For the year ended 31st December 2010 (continued)**

<b>11</b>	Continued	<b>2010</b>	
	<b>Living with IBD Research</b>	<b>£</b>	
	Kings College London	106,449	
	Bucks New University	39,139	
	School of Pharmacy London University	110,541	
		<u>256,129</u>	
	<b>Health Services Research</b>		
	University of Durham	30,000	
	Central Manchester Foundation Trust	43,752	
		<u>73,752</u>	
<b>12</b>	<b>Governance direct costs</b>	<b>2010</b>	<b>2009</b>
		<b>£</b>	<b>£</b>
	Auditors' remuneration - current year (group)	17,959	17,965
	Other fees paid to auditors	5,805	1,111
	Legal and professional expenses	9,901	4,985
	Meetings and trustee expenses	13,330	14,877
	Other expenses	<u>3,755</u>	<u>2,552</u>
		<u>50,750</u>	<u>41,490</u>

**13 Transactions with trustees**

No trustee received any remuneration for their services as a trustee.

A total of £13,330 (2009 - £15,616) was reimbursed to 12 (2009 - 11) trustees in respect of travelling expenses and other costs incurred in carrying out their responsibilities as trustees.

**14 Operating Leases**

At 31st December 2010 the group had annual commitments under non-cancellable leases as follows:-

	2010	2010
	Equipment	Land and Buildings
	5,530	44,667

**15 Transfers**

Transfers are made for a variety of reasons, between types of funds and between national and NACC Groups, the note below illustrates these:

	Unrestricted Funds	Designated Funds	Restricted Funds	Total
	£	£	£	£
<b>National</b>				
Transfers between Groups' funds	(13,100)	-	13,100	-
Transfers from Groups' funds	148,976	-	57,940	206,916
Transfers (from)/to designated funds	<u>249,437</u>	<u>(249,437)</u>	<u>-</u>	<u>-</u>
Total national funds	<u>385,313</u>	<u>(249,437)</u>	<u>71,040</u>	<u>206,916</u>
<b>Groups and volunteering</b>				
Transfers from National	-	-	-	-
Transfers between Groups' funds	41,271	-	(41,271)	-
Transfers to national funds	<u>(148,976)</u>	<u>-</u>	<u>(57,940)</u>	<u>(206,916)</u>
Total of Groups' transfers	<u>(107,705)</u>	<u>-</u>	<u>(99,211)</u>	<u>(206,916)</u>
<b>Total funds</b>	<u>277,608</u>	<u>(249,437)</u>	<u>(28,171)</u>	<u>-</u>
	(note 22)	(note 22)	(note 23)	

**National Association for Colitis and Crohn's Disease**  
**Notes to the Accounts**  
**For the year ended 31st December 2010 (continued)**

**16 Fixed assets**

All assets held for use by the charity.

<b>Charity</b>	<b>Leasehold premises</b>	<b>Equipment and furniture</b>	<b>Groups and volunteering</b>	<b>Total</b>
<b>Cost</b>	<b>£</b>	<b>£</b>	<b>£</b>	<b>£</b>
Brought forward 1st January 2010	192,312	80,279	1,883	274,474
Additions	-	3,297	-	3,297
Carried forward at 31st December 2010	<u>192,312</u>	<u>83,576</u>	<u>1,883</u>	<u>277,771</u>
<b>Depreciation</b>				
Brought forward 1st January 2010	113,218	71,474	1,433	186,125
Charge for the year	12,353	6,513	-	18,866
Carried forward 31st December 2010	<u>125,571</u>	<u>77,987</u>	<u>1,433</u>	<u>204,991</u>
<b>Net book value</b>				
At 31st December 2010	<u>66,741</u>	<u>5,589</u>	<u>450</u>	<u>72,780</u>
At 31st December 2009	<u>79,095</u>	<u>8,804</u>	<u>450</u>	<u>88,349</u>
<b>Group*</b>				
<b>Cost</b>	<b>£</b>	<b>£</b>	<b>£</b>	<b>£</b>
Brought forward 1st January 2010	192,312	80,279	1,883	274,474
Additions	-	3,297	-	3,297
Carried forward at 31st December 2010	<u>192,312</u>	<u>83,576</u>	<u>1,883</u>	<u>277,771</u>
<b>Depreciation</b>				
Brought forward 1st January 2010	113,218	71,474	1,433	186,125
Charge for the year	12,353	6,513	-	18,866
Carried forward 31st December 2010	<u>125,571</u>	<u>77,987</u>	<u>1,433</u>	<u>204,991</u>
<b>Net book value</b>				
At 31st December 2010	<u>66,741</u>	<u>5,589</u>	<u>450</u>	<u>72,780</u>
At 31st December 2009	<u>79,095</u>	<u>8,804</u>	<u>450</u>	<u>88,349</u>

\*Group represents the consolidation of the charity with its trading company.

**National Association for Colitis and Crohn's Disease**  
**Notes to the Accounts**  
**For the year ended 31st December 2010**  
**(continued)**

17 Investments	Group		Charity	
	2010 £	2009 £	2010 £	2009 £
Investment in subsidiary	-	-	1	1
Cost at 31st December 2009 and 2010	-	-	1	1

18 Debtors	Group		Charity	
	2010 £	2009 £	2010 £	2009 £
<b>All amounts fall due within one year</b>				
Balance with trading subsidiary	-	-	24,845	65,651
Prepayments	79,814	36,434	79,814	32,984
Tax recoverable	43,559	35,349	43,559	35,349
Other debtors	4,489	9,095	-	-
Accrued income	63,102	-	63,102	-
	<u>190,964</u>	<u>80,878</u>	<u>211,320</u>	<u>133,984</u>

19 Analysis of cash at bank and in hand	Group		Charity	
	2010 £	2009 £	2010 £	2009 £
Current accounts and cash balances	92,924	163,737	70,771	105,033
Interest-bearing account balances	2,668,700	2,853,507	2,668,700	2,853,507
Groups and volunteering	216,150	244,893	216,150	244,893
	<u>2,977,774</u>	<u>3,262,137</u>	<u>2,955,621</u>	<u>3,203,433</u>

20 Creditors: amounts falling due within one year	Group		Charity	
	2010 £	2009 £	2010 £	2009 £
Unpaid balances of research grants	488,658	450,379	488,658	450,379
Trade creditors	128,018	141,184	109,948	134,119
Social security and other taxes	20,180	26,234	20,180	18,619
Other creditors	8,609	3,791	4,873	3,791
Accruals and deferred income	17,884	27,866	15,859	25,891
	<u>663,349</u>	<u>649,454</u>	<u>639,517</u>	<u>632,799</u>

Creditors: amounts falling due after one year	Group		Charity	
	2010 £	2009 £	2010 £	2009 £
Unpaid balances of research funds	<u>443,576</u>	<u>430,114</u>	<u>443,576</u>	<u>430,114</u>

**21 Capital commitments**

At 31st December 2010 the charity had capital commitments of £nil

**National Association for Colitis and Crohn's Disease**  
**Notes to the Accounts**  
**For the year ended 31st December 2010 (continued)**

22 Unrestricted funds		Brought forward	Incoming resources	Resources expended*	Transfers	Carried forward
		£	£	£	£	£
<b>Designated funds</b>						
Contractual liabilities	(a)	100,000	-	-	(40,000)	60,000
Legacies						
special projects	(b)	405,132	187,450	-	(237,019)	355,563
Heyman Bursary	(c)	109,344	2,734	(440)	-	111,638
Fixed assets	(d)	87,898	-	-	(15,118)	72,780
Office Refurbishment	(e)	-	-	-	42,700	42,700
Designated total		<u>702,374</u>	<u>190,184</u>	<u>(440)</u>	<u>(249,437)</u>	<u>642,681</u>
<b>Other unrestricted funds</b>						
General Reserve Fund held nationally		606,552	1,471,801	(1,671,637)	350,179	756,895
Non charitable trading funds		10,906	81,100	(89,572)	-	2,434
Groups and volunteering		<u>169,152</u>	<u>59,570</u>	<u>(42,700)</u>	<u>(72,571)</u>	<u>113,451</u>
		<u>786,610</u>	<u>1,612,471</u>	<u>(1,803,909)</u>	<u>277,608</u>	<u>872,780</u>
<b>Total unrestricted funds</b>		<u>1,488,984</u>	<u>1,802,655</u>	<u>(1,804,349)</u>	<u>28,171</u>	<u>1,515,461</u>

- (a) The contractual liabilities fund was established to ensure funds are available to meet any annual potential rent liabilities.
- (b) The legacies for future special projects fund was established to ensure that these funds are used for major projects to be designated by the trustees.
- (c) The Heyman Bursary has been established from a legacy to act as an expendable endowment for the development of specialist nursing for IBD. An allocation will be made to the fund each year of a portion of interest earned.
- (d) The fixed asset fund represents sums set aside for the purchase of fixed assets and is written off in line with the depreciation charge for the assets acquired.
- (e) Office refurbishment - these monies have been set aside to meet the costs of future office refurbishments.
- (f) The General Reserve Fund represents 20 weeks operating costs in line with Charity Commission best practice.

**National Association for Colitis and Crohn's Disease**  
**Notes to the Accounts**  
**For the year ended 31st December 2009 (continued)**

23 Restricted funds	Brought forward	Incoming resources	Resources expended	Transfers	Carried forward
National	£	£	£	£	£
Research	719,324	310,159	(570,531)	3,039	461,991
Personal grants	21,537	42,642	(76,631)	20,000	7,548
Other projects					
Big Lottery Fatigue Project	-	60,675	(55,281)	-	5,394
Sidney Hulin Legacy	20,000	-	-	-	20,000
Catherine McEwan Fund for Scotland	29,920	-	-	(9,939)	19,981
Horners Trust Fund (Public Affairs)	-	25,000	(6,900)	-	18,100
RPJ Crohn's Foundation Research Fund	-	3,390	-	-	3,390
Website Development	-	5,000	-	-	5,000
<b>Total restricted funds held Nationally</b>	<b>790,781</b>	<b>446,866</b>	<b>(709,343)</b>	<b>13,100</b>	<b>541,404</b>
<b>Groups and volunteering</b>					
Research	31,254	20,617	(2,892)	(26,509)	22,470
Personal grants	-	1,108	-	114	1,222
Local projects	62,741	88,563	(57,922)	(14,876)	78,506
<b>Total restricted funds held by Groups and volunteering</b>	<b>93,995</b>	<b>110,288</b>	<b>(60,814)</b>	<b>(41,271)</b>	<b>102,198</b>
	<u>884,776</u>	<u>557,154</u>	<u>(770,157)</u>	<u>(28,171)</u>	<u>643,602</u>

Each fund is used for the purpose its name defines except that the Sidney Hulin Fund is to be used for a specific project in the name of the donor.

**24 Analysis of charity net assets between funds**

	Unrestricted		Restricted		Total
	Groups and volunteering	National	Groups and volunteering	National	
	£	£	£	£	£
Fund balances at 31st December 2010 are represented by:					
Tangible fixed assets	450	72,330	-	-	72,780
Investments	-	1	-	-	1
Current assets	113,001	1,481,012	102,198	1,470,730	3,166,941
Current liabilities	-	(150,859)	-	(488,658)	(639,517)
Long term liabilities	-	-	-	(443,576)	(443,576)
	<u>113,451</u>	<u>1,402,484</u>	<u>102,198</u>	<u>538,496</u>	<u>2,156,629</u>

**25 Related Party**

A company, NACC Nominees Limited, has been formed to hold the lease of the offices occupied by the charity.

The Directors of NACC Nominees Limited are the trustees of the charity. The obligations under the lease are borne by the charity.

The Charity has entered into an agreement with Mr N Westwood, a trustee until May 2010, under which Mr Westwood's business hosts the charity's website. During the year up to his retirement as a Trustee fees of £4,988 were paid to this business. In accordance with the charity's policy Mr Westwood withdrew from Trustee discussions authorising the transaction.

J.S Projects Limited, a company of which Stuart Berliner is a Director, was paid £488 during the year in respect of survey work for potential new premises.