
THE PATIENTS ASSOCIATION
(A Company Limited by Guarantee)

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THE PATIENTS ASSOCIATION
(A Company Limited by Guarantee)

**REFERENCE AND ADMINISTRATIVE DETAILS OF THE CHARITY, ITS TRUSTEES AND ADVISERS
FOR THE YEAR ENDED 31 DECEMBER 2023**

Ann Keen, Chair (appointed 15 December 2022, resigned 1 January 2024)
Ms J Thallon, Vice Chair (appointed 1 January 2024)¹
Mr I Egberedu, Treasurer²
Mr D Brereton CB, Honorary Treasurer and Vice Chair (appointed 18 May 2023)²
Dr A M Rollin MBE¹
Mrs F Browne, Chair of Governance Committee¹
Mrs S White¹
Ms R King
Mr W Valji²
Ms M Davies²
Prof A Collins (appointed 18 December 2023)
Ms B Joshi (resigned 13 July 2023)
Dr R Hillson (resigned 26 October 2023)

¹ Governance Committee
² Finance and Resources Committee

Company registered number 02620761

Charity registered number 1006733

Registered office P Block
The London North West Healthcare NHS Trust
Watford Road
Harrow
Middlesex
HA1 3UJ

Chief Executive Officer and Company Secretary Rachel Power

President Sir Robert Anthony Francis, KC

Independent Examiner MHA
Chartered Accountants
MHA House
Charter Court
Swansea Enterprise Park
Swansea
SA7 9FS

Bank Details HSBC
1 Centenary Square
Birmingham
B1 1HQ

TRUSTEES' REPORT
FOR THE YEAR ENDED 31 DECEMBER 2023

Introduction by Julie Thallon, Chair of the Patients Association

I and the Trustees present our annual report together with the consolidated financial statements for the year 1st January to 31st December 2023. I am pleased to share the progress we have made in advocating for patients and promoting partnership between patients and healthcare providers.

Last year, 2023, marked our 60th anniversary as one of the oldest health charities in the UK. It was also an extremely challenging year for health and social care, with lengthening waiting lists, worsening health outcomes, and widening health inequalities exacerbated by the pandemic and cost of living crisis. In addition, patient care was clearly affected by strike action and we were very clear in our messages that the Government and union representatives were not short of reasons to come back to the negotiating table.

Despite these pressures, we continued working to ensure the patient voice is heard. We engaged more than 2,000 patients through surveys and focus groups to understand their experiences and inform our policy work. Our helpline supported more than 3,000 callers. We influenced national policies on issues such as NHS data sharing through collaborative projects. I was personally delighted to represent the Patients Association, with members of the team, in the sprints that worked at pace with the Patient Safety Commissioner looking at how we could implement Martha's Rule across the NHS in England. During the sprints I had the privilege of working with Martha's parents Merope Mills and Paul Laity, and I want to pay tribute to both of them for their work on Martha's Rule.

Looking ahead, we remain committed to improving care and championing equal partnerships between patients and providers. Our 2024 plans focus on empowering patients, capturing patient perspectives (especially those of marginalised groups), raising public awareness, and strengthening our organisation.

I am proud of all we achieved in 2023 and look forward to furthering our mission of patient partnership and quality, equitable care. Thank you to our staff, volunteers, members, partners, and supporters who make our work possible.

Julie Thallon
Vice Chair

THE PATIENTS ASSOCIATION
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TRUSTEES' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 DECEMBER 2023

The Trustees present their annual report together with the financial statements of the Charity for the 1st January 2023 to 31st December 2023. The Annual Report serves the purposes of both a Trustees' report and a directors' report under company law. The Trustees confirm that the Annual Report and financial statements of the charitable company comply with the current statutory requirements, the requirements of the charitable company's governing document and the provisions of the Statement of Recommended Practice (SORP) applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS102) (effective 1 January 2019).

Background and objectives

The Patients Association is one of the oldest health and care charities in the UK. Established in 1963, the purpose of the organisation is to promote the health and wellbeing of people in the UK by influencing the enhancement of health and care services and helping people to secure the most suitable care and support. We believe this is best achieved by ensuring services are designed and delivered through equal partnership with patients.

The remit of the Patients Association is not condition-specific; it covers all issues that affect patients, including social care and public health. We work directly with patients, they are our members and the beneficiaries of our help, advice, and support. We speak up on their behalf to Government, the NHS, and other bodies about their priorities, concerns, and opinions. Our purpose is to ensure that everybody can access and benefit from the health and care they need to live well, by ensuring that services are designed and delivered through equal partnership with patients. We use what we hear from patients to ensure the patient voice is heard and acted upon in national and local policies.

During 2023 we continued our work to influence healthcare policy and service delivery to understand the benefits of patient partnership. We continued to develop our principles of patient partnership which are:

1. Treating patients as equals: Patients are treated as equals, with their views recognised as equally valid and having an equal say in decisions.
2. Patients who are fully informed: Services and systems make sure patients are fully informed, in a way that patients can access and understand, and patients use as much information as they wish to.
3. Shared decision making and patient partnership: Shared decision making, and patient partnership approaches are used as a matter of routine.
4. Recognising inequalities: Inequalities are recognised, and appropriate approaches adopted for different patient groups and communities, identifying and meeting their specific needs.
5. Seeking patient input: Patient input is actively sought, genuinely valued, and meaningfully acted on.
6. Joining services around patients: Services join up around patients, working with them to identify their needs, and responding to them in a way that make things as easy as possible for the patient.

It was our 60th anniversary in 2023, a year where health and social care remained under extreme pressure.

The Care Quality Commission's annual State of Care report showed a health and social care system in decline with the most vulnerable among us at greatest risk of poor outcomes. Waiting lists continued to grow and evidence mounts that those waiting saw their health worsen and, in some cases, die. We were optimistic at the start of the year about the elective recovery taskforce and the Prime Minister's personal commitment to bringing down waiting lists. But as the year ended, the NHS's finances and the scaling back of ambitions in reducing the waiting list meant millions will continue to wait for care for the foreseeable future. We were so dismayed by the decision to ease up on tackling waiting lists that we felt compelled to write to the Prime Minister asking him to honour the promise he made at the start of the year.

We saw health inequalities widening in 2023, fuelled by the pandemic, cost of living crisis and challenges with access to both health and social care. Many vulnerable patients are trapped in a vortex that they cannot break free from and the services that once could have supported them are unable – or not there – to help.

TRUSTEES' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 DECEMBER 2023

We welcomed the plans for recovering access to primary care, which included changes we had called for, such as digital telephony, an enhanced role for community pharmacists, expanding the functionality of the NHS App, and the introduction of care navigators, as access to general practice reduced during the pandemic. We also welcomed the long-awaited NHS Long Term Workforce Plan as genuinely ambitious and an important milestone for both staff and patients. But the one plan that is missing is one to fix social care. We will continue in 2024 to hold the Government and NHS England to account to implement those plans and measure the impact on patients and to deliver a social care system that can support the NHS.

The media remain an important means by which we can raise patients' concerns, call for improvements in care, and campaign for patient partnership. News outlets are also important in raising awareness of who we are and our services among potential members; about one in ten people becoming members report that it was a news report featuring us that spurred them to join us. Many media outlets were interested in our concerns and opinions about the industrial action affecting the NHS and the consequences for the many waiting patients on waiting lists. We took every opportunity given by our media appearances to call for the Government to show leadership and for unions and the Government to use arbitration to resolve the several disputes. Journalists were interested in our opinions about problems with access to care, delays, and cancellations, and waiting in times, in addition to the industrial action. We were particularly pleased with the Chief Executive's interview in The Times, which gave us an opportunity to share our concerns around communication between the health services and patients and long waits for care. The Times's circulation is around 540,000 across print and digital formats. Our appearance on BBC Radio 4's Money Box enabled us to share helpful information about prescription charge penalties and how to avoid them. Money Box, according to YouGov, is the top 40 most popular UK radio programmes, above its stablemate, BBC Radio 4's PM afternoon news programme. We continued our policy of speaking to local radio stations when invited; although BBC local radio audiences are declining, live radio and local stations continue to have strong listener numbers and, therefore, offer us a means of reaching millions people across the UK.

We continue to expand and diversify our membership. We increased membership to 3,523 by the end of 2023, a rise of about 20% on the previous year. We repeated our biennial survey of members. We found that two fifths had joined us because they wanted to campaign for improvements in health and social care. Three fifths said we kept them informed about our latest work and that the issues in health and social care that most concerned members were engagement of patients and others in decisions about their care and care services (74%) and experience of using and accessing health and social care (67%). In addition to the survey, we hear from our members through emails and at our webinars.

We continue to talk to patients through our large-scale surveys and focus groups, which included 1,933 patients completing our patient experience survey, 337 taking part in the outpatients' strategy survey, 637 patients who completed the Digital Coalition's survey on attitudes towards using the NHS App, and 299 who completed a survey to inform our response to the Government's major conditions strategy. We use what we heard from these patients when speaking up for patients in all our interactions and in various forums such as:

- The Hewitt Review
- NHS Assembly
- NHS England's Outpatients Recovery
- DNA (did not attend) Action on Outpatients steering group
- Elective Care Engagement Forum
- DHSC's Patient Safety Commissioner advisory group
- NHS Urgent and Emergency Care Expert Reference Group
- NHS England Choice Programme,
- Dept of Health Patient Choice
- National Data Advisory Group
- Department of Health and Social Care Elective Recovery Taskforce.

TRUSTEES' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 DECEMBER 2023

Our national freephone helpline took more than 3000 calls during 2023, supporting patients and their families with information and guidance on navigating the health and care system.

The role of our helpline is to:

- Provide information and guidance to empower patients to have informed discussions with their healthcare providers
- Guide patients on how to be actively involved in the decision making process
- Facilitate communication to help patients think through what information they need and the next steps
- Help patients understand how shared decision making can work for them.

Throughout the course of the year, four themes remained constant in what people contacted the helpline about. These were: complaints, access to medical records, NHS IT systems, and access to appointments.

The helpline's work is supported by the information and resources section on our website, which has a diverse range of resources developed to help patients and carers navigate through health and social care. These resources are the most popular content on our website, accounting for more than half of all views of our website; in 2023 the website had 287,300 views, across 150,500 users. We added the following patient resources in 2023: Patient information on elective surgical hubs, Tips on making a complaint, your equality and human rights in the health and social care sector, and Things to consider when deciding about taking antibiotics

Our helpline also partners with the Care Quality Commission (CQC) on the regulators "tell us about your care campaign". Each month our advisers support callers to give feedback on their care whether it has been a positive example of great health or social care, or a troubling experience. We have been partners on this project since 2013. In 2023, we passed on 284 pieces of feedback with the regulator. There are a variety of actions the CQC can take when it receives information under the tell us about your care project. These include:

- Asking the care provider to give a response to the submitted feedback
- Meeting with management at the care provider to discuss the information
- Sharing information with other relevant agencies that need to know about it
- Carrying out an urgent inspection or bringing forward a planned inspection
- Warning, fining, or placing conditions on how a care service operates.

Feedback from callers was overall extremely positive during 2023:

- "Thanks for all your help with this, I'm in a significantly better place than I was, completely down to your help, which I will forever be grateful for."
- "Thank you for your support and making a difference to my life."
- "No-one explained this to me. I'm grateful, I can't tell you."
- "That sounds great. It's something I can get on with."
- "That's an excellent service, you called me back so quickly. That's lifted my spirits."

Patient Partnership Week, which we established in 2022, returned in 2023. The week's aim is to bring together patients, carers, and healthcare professionals to talk about patient partnership. The programme for 2023 included six webinars on themes of health inequalities, patient partnership and patient experience. We were delighted to welcome new speakers to the week including Professor Bola Owolabi, Director of the National Healthcare Inequalities Improvement Programme at NHS England, patient advocate Sara Turle, and Christiana Melam, CEO of the National Association of Link Workers. We welcomed back Dr Henrietta Hughes, England's Patient Safety Commissioner, frontline NHS staff and patients who spoke about their experiences of patient partnership during the week. We increased the number of people who attended, and feedback was positive. We plan to run Patient Partnership Week in 2024.

TRUSTEES' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 DECEMBER 2023

In addition to the Patient Partnership Week webinars, we held seven additional webinars, where we aimed to build understanding of patient partnership and patients' confidence to be involved in their healthcare. The webinars were:

Healthcare in the Future: through the lens of young people.

- We were delighted to celebrate our 60th birthday with Aishah Farooq, board member on the Children and Young People's (CYP) Transformation Programme at NHS England and now a member of the NHS Assembly to consider healthcare from the point of view of children and young people.
- Mixed picture of patients' experiences reported on what patients had experienced over winter 2022/2023. Based on a survey of nearly 2,000 patients, it found that when patients were with a healthcare professional their experiences were generally positive. But it also showed many respondents struggled to access the healthcare they needed in the previous six months.
- Online access to GP health records – what's in it for patients? Held in conjunction with NHS England the event was an opportunity for patients to ask about the NHS App; the panel included both patients and a GP discussing their experiences of using the NHS App.
- Breaking down barriers to shared decision making reported on our co-production project with the Patient Information Forum, Nottingham and Nottinghamshire Integrated Care Board, and local patient groups. The project's goal was to improve shared decision making along the musculoskeletal pathway in the area.
- Virtual wards: bringing the hospital home brought together patients and professionals to talk about hospital at home and answer people's question about the system.
- Digital primary care services: Online GP access and the NHS App was aimed at people supporting patients who may find it difficult to use the NHS, for whatever reason. Members of NHS England's NHS App team explained developments in the App, how to make the most of the App, and how one can support others to use it.
- What to do if you're unhappy about care you or a loved one has received featured solicitors from solicitors at our corporate partner, law firm Bolt Burdon Kemp, who explained patients' options when it comes to complaining about healthcare services.
- What is next of kin? Introduced and explained a range of persona carers adopt when supporting patients. Solicitors from our corporate partner, law firm Leigh Day, explained next of kin, best interest decisions and nearest relative, among others.
- Changes in primary care, understanding the role of the reception team kicked off a four-webinar series held in partnership with NHS England to give patients the opportunity for patients to learn more the new services how the access to primary care recovery plan will introduce. The first in the series focused on changes in the reception team.

Our webinars are always free and open to anyone interested in health and social care. We endeavour, in our webinar programme, to include patients as panellists and hold events that we know patients are interested in, based on what we hear on the helpline, through our focus groups and correspondence from our members.

We partnered with patients and several NHS organisations at a national and local level. We worked with two integrated care boards (ICBs) to support on-the-ground changes in shared decision making and empowering patient participation groups (PPGs). At a national level, we worked with NHS England to firmly embed patient partnership in its work to transform outpatients, the development of a data pact as part of the Government's Data Saves Lives strategy, and the expansion of Elective Surgical Hubs.

During 2023 we ran several key programmes to help influence health and policy and practice

- To understand patients' experience of healthcare over the winter of 2022/2023, a difficult time for the health service, we ran a survey among patients. The results, published in March 2023, painted a mixed picture of experiences. Many patients struggled to access the healthcare they needed. But half of the respondents said they had been involved in decisions about their care and treatment, suggesting a certain level of patient-centred care. This finding gave us cause for optimism that despite the crisis, some healthcare professionals were able to work in partnership with patients. In fact, two thirds of the respondents reported being listened to and taken seriously, and two thirds said the staff had dealt with them with compassion and understanding.

TRUSTEES' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 DECEMBER 2023

- Our work with NHS England and the Department of Health and Social Care focused on the introduction of a Data Pact: we worked with patients to understand attitudes to the idea of a data pact, first mentioned in the Government's Data Saves Lives strategy and included as a commitment in the final version of the strategy. Through focus groups, we examined attitudes towards data sharing generally, as well for specific uses of data, before focussing on the implications and expectations of a data pact. We found patients value their data's importance and support various uses for their data in healthcare. Addressing trust concerns and reciprocal benefits is crucial to unlocking data's potential, requiring a transparent and monitored data pact.
- With Engage Britain – now Demos – and the PMA we explored with patients the best and worst bits of how the NHS communicates with patients and carers. Our report made a powerful case for the urgent need to improve communication within the NHS and showed very clearly, good communication should not be seen as a 'nice to have', but as fundamental to the functioning of the NHS.
- With the British Red Cross, we explored what effect living in left behind neighbourhoods has on people's ability to access care.
- Supporting the Patient Safety Commissioner's website development: we convened a focus group that reviewed the Patient Safety Commissioner's website, identifying opportunities for improvement in engagement and accessibility. Ongoing collaboration aims to enhance utility and trust, with recommendations for immediate actions.
- Elective surgical hubs: NHS England, Getting It Right First Time, and the Royal National Orthopaedic Hospital worked with us to understand patient experiences of elective surgical hubs. The project aimed to develop an animated video explaining the hub programme for patients who may be referred to a hub for elective surgery. Patient feedback also informed the programme enabling improvements to be introduced.
- Transforming outpatients: We worked with the Royal College of Physicians and NHS England on outpatient strategy development, ensuring the patient voice guided the process. Patient panels, made up of regular outpatient users, provided insights on current strengths, areas for improvement, and access issues. Reports from these panels and patient participation at a series of summits have informed the strategy's development and we are excited to see the final strategy, which will be published in 2024.

Taken as a whole, these key projects show how our focus on patient partnership in the design and delivery of health and care services translates into action. All this work engaged patients directly in partnership.

The Patients Association is a core participant in Module 3 of the UK COVID-19 Inquiry, which investigates and analyses the healthcare decisions made during the pandemic, the reasons for them and their impact, so that lessons can be learned, and recommendations made for the future. Participation in the inquiry has enabled us to share the research we conducted at the height of the pandemic among patients, which we promised at the time we would share if there ever was an inquiry.

Between our Chief Executive and Head of Patient Partnership, we took our message of patient partnership to more than 27 national conferences, including both the Labour and Conservative Party conferences.

Our plans

As 2023 drew to a close, the Patients Association remained concerned about the state of health and social care. Waiting lists remained stubbornly high, health outcomes worsened for many, and some patients even died for want of care. Health inequalities, which widened during the pandemic, and the cost-of-living crisis continued to disproportionately affect the most vulnerable in society.

Bearing all this in mind, we developed our plans for 2024. The Patients Association will advocate for care improvements and reducing inequalities. We will work in partnership to amplify patient voices. Through surveys, forums and focus groups, we will gather patient experiences to inform our work. Our helpline and website will provide information and guidance that will give patients the knowledge and tools to advocate for themselves and practice shared decision making with those who provide them with healthcare services. Using helpline data and project work, we will encourage partnerships and provide information to improve public discussion on health and social care.

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TRUSTEES' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 DECEMBER 2023

The Trustees receive full disclosure on a quarterly basis of all fundraising activities undertaken by the Association. At present the Association has not and does not have plans to engage external services of a professional or commercial fundraiser.

Income increased by £49,202 from the previous year. This variance was driven by an increase in legacy income (£69,593), offset by a reduction in corporate donations of £41,394. Income from charitable activities, mainly grants, increased by £25,890. Expenditure increased by £21,712, of which £13,204 was attributable to increased staff costs with the remaining variance split over a number of cost categories. The net surplus for the year was £88,295, an increase of £27,490 from last year.

Patient Association companies

The trading company ceased to trade in July 2020. Following independent and professional advice, all activity was transferred to the Charity, which was registered for VAT on 1st July 2020.

Reserves policy

The Patients Association has a reserves policy in place, which comprises of two levels:

Level One

A base reserve covering all liabilities. This fund is to ensure that the Association is able to cover its total liabilities, should it no longer be a 'going concern'.

Level Two

Six months reduced running costs to cover expenditure equivalent of four months budgeted expenditure in the event of reduced income or changes in expenditure.

This equates to holding £353,020 in reserves (forecasted without the legacy).

Although the balance of unrestricted funds held at the year-end is greater than the policy level, this is deemed reasonable given the current economic circumstances and the increased uncertainty over future costs as a result of the cost-of-living crisis.

Free reserves

The sum of the reserves levels makes up the unrestricted funds shown in the accounts.

The outcome for the year ending 31 December 2023 was a surplus of £88,295 (2022: £60,805). This compares to a surplus of £70,224 in 2021 and £62,995 in 2020.

The balance held in unrestricted funds at the 31 December 2023 was £397,282 (2022: £308,987). This compares to a balance of £248,182 in 2021 and £177,958 in 2020.

Restricted reserves

Restricted reserves relate to monies received where the donor has specified what the funds must be used for. There were no restricted reserves at the end of 2021, 2022 or 2023.

Investment policy

The Patients Association does not have investments in equity or stocks and has no plans to acquire such a portfolio. Our cash management principles are that when we have cash in excess of our reserves policy, any investment of cash must be balanced to achieve zero risk of loss and to ensure that the organisation maintains enough cash to ensure continuous operations.

THE PATIENTS ASSOCIATION
(A Company Limited by Guarantee)

TRUSTEES' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 DECEMBER 2023

Structure, Governance, and Management Legal and administrative information

The Patients Association is a registered company limited by guarantee, company number 02620761 registered in England and Wales. It is also a registered Charity, number 1006733. The Charity was established under a memorandum and articles of association.

Public benefit

When reviewing our aims and objectives and planning our current and future activities, we have referred to the Charity Commission's general guidance on public benefit. In particular, the Trustees consider how our activities will contribute to our objectives for the benefit of patients.

Governance and management

The Trustees continue in their commitment to achieving the highest possible standards by demonstrating exemplary leadership and governance.

Principal risks and uncertainties

The principal uncertainty is the impact of high inflation and the cost of living crisis, increased competition for limited funds, the war in Ukraine, and the lasting impact of COVID-19. These factors may negatively affect our funding and ability to sustain operations.

The Board of Trustees has responsibility for risk management, regularly reviewing our risk register which outlines principal risks that may impact achieving our objectives and control procedures to mitigate them. Key risks include potential declines in donations, public/private sector budget cuts to grants, difficulties retaining talent, cybersecurity threats and reputational risks,

To address these uncertainties, the Chief Executive monitors costs, demonstrates efficient operations and impact to funders, and maintains strong governance and internal controls. With prudent planning and drawing on our 60 years experience, we are confident we can sustain our mission even in these challenging times. But the Board continues vigilant oversight as conditions rapidly evolve.

Board of trustees

The Board is responsible and accountable for our policies and activities to our members, the Charity Commission, funders, stakeholders, and for compliance with charity and company law. It is responsible for setting the strategic direction and for the financial management of the Association, setting the annual budget and compiling the annual report and accounts. The Chief Executive is accountable to the Board of Trustees for delivery of the strategy and presents an update against progress in delivering our objectives at each board meeting.

Diversity

The Board is committed to ensuring the organisation represents a diverse range of skills, experience, and background. The Board of Trustees and the leadership team undertook diversity training during 2021 and a task and finish group of Trustees and staff was established in December 2021 to update our equality objectives.

Our diversity objectives are:

- To develop and encourage an inclusive environment where staff, freelancers, trustees, and volunteers feel empowered to express their views and perspectives.
- To ensure that our work is accessible to all patients and increase the diversity of the people that influence and guide our views

TRUSTEES' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 DECEMBER 2023

Board recruitment

Appointments to the Board continue to be via an open and formal recruitment process.

Our recruitment process includes an initial skills audit of the Board of Trustees to identify gaps, an open and transparent advertising process with formal interviews, and eligibility checks including fit and proper person, references and identity checks.

Board meetings

The Board of Trustees meets four times a year and at the Annual General Meeting.

Supporting staff and volunteers

During 2023, we continued to work hard on the well-being and engagement of our staff and volunteers. We have one volunteer supporting the work of the organisation.

Remuneration of key personnel

The Patients Association recognises the motivation of its staff team to work within the charitable sector and aims to strike a balance between paying enough to recruit and keep people with the skills we need, and the public and our donors' expectations that the money they entrust us with will be used wisely. Our Remuneration Policy sets out the approach of the Patients Association to setting remuneration levels in order to be able to recruit and retain staff with the appropriate skills and experience needed to meet the requirements of our charitable objectives and to deliver our agreed strategic objectives.

The Board of Trustees is ultimately responsible for setting the remuneration levels of senior members of staff in line with the skills, experience and competencies required to meet the requirements of Patients Association's purpose and deliver the agreed strategic objectives. It does this by a thorough review of the skills needed benchmarking against other organisations and consideration of the sustainability of the organisation.

The Trustees' Annual Report has been prepared in accordance with the provisions applicable to entities subject to the small companies' regime.

Signed on behalf of the Trustees by:

Julie Thallon
.....
Ms J Thallon
Acting Chair
Date: 16th May 2024

THE PATIENTS ASSOCIATION
(A Company Limited by Guarantee)

STATEMENT OF TRUSTEES' RESPONSIBILITIES
FOR THE YEAR ENDED 31 DECEMBER 2023

The Trustees (who are also the directors of the Charity 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 (United Kingdom Generally Accepted Accounting Practice).

Company law requires the Trustees to prepare financial statements for each financial . Under company law, the Trustees must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the Charity and of its incoming resources and application of resources, including its income and expenditure, 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 the Charities SORP (FRS 102);
- make judgments and accounting estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards (FRS 102) 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 business.

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

Approved by order of the members of the board of Trustees and signed on its behalf by:

Julie Thallon

.....
Ms J Thallon

Chair

Date: 16th May 2024

THE PATIENTS ASSOCIATION
(A Company Limited by Guarantee)

INDEPENDENT EXAMINER'S REPORT
FOR THE YEAR ENDED 31 DECEMBER 2023

Independent Examiner's Report to the Trustees of The Patients Association ('the Charity')

I report to the charity Trustees on my examination of the accounts of the Group comprising the The Patients Association ('the parent Charity') and its subsidiary undertaking for the year ended 31 December 2022.

Responsibilities and Basis of Report

As the Trustees of the Charity (and its directors for the purposes of company law) you are responsible for the preparation of the accounts in accordance with the requirements of the Companies Act 2006 ('the 2006 Act').

Having satisfied myself that the accounts of the Charity are not required to be audited under Part 16 of the 2006 Act and are eligible for independent examination, I report in respect of my examination of the Charity's accounts carried out under section 145 of the Charities Act 2011 ('the 2011 Act'). In carrying out my examination I have followed the Directions given by the Charity Commission under section 145(5)(b) of the 2011 Act.

Independent Examiner's Statement

Since the Charity's gross income exceeded £250,000 your examiner must be a member of a body listed in section 145 of the 2011 Act. I confirm that I am qualified to undertake the examination because I am a member of the Institute of Chartered Accountants in England and Wales, which is one of the listed bodies.

I have completed my examination. I confirm that no matters have come to my attention in connection with the examination giving me cause to believe in any material respect:

1. accounting records were not kept in respect of the Charity as required by section 386 of the 2006 Act; or
2. the accounts do not accord with those records; or
3. the accounts do not comply with the accounting requirements of section 396 of the 2006 Act other than any requirement that the accounts give a 'true and fair' view which is not a matter considered as part of an independent examination; or
4. the accounts have not been prepared in accordance with the methods and principles of the Statement of Recommended Practice for accounting and reporting by charities [applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102)].

I have no concerns and have come across no other matters in connection with the examination to which attention should be drawn in this report in order to enable a proper understanding of the accounts to be reached.

Signed: 

Dated: 16/3/24

Rachel Doyle

ACA FCCA DChA

MHA
MHA House
Charter Court
Swansea Enterprise Park
Swansea
SA7 9FS

MHA is the trading name of MacIntyre Hudson LLP, a limited liability partnership in England and Wales (registered number OC312313).

THE PATIENTS ASSOCIATION
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STATEMENT OF FINANCIAL ACTIVITIES (INCORPORATING INCOME AND EXPENDITURE ACCOUNT)
FOR THE YEAR ENDED 31 DECEMBER 2023

	Note	Unrestricted funds 2023 £	Total funds 2023 £	Total funds 2022 £
Income from:				
Donations and legacies	4	318,098	318,098	291,887
Charitable activities	5	360,427	360,427	334,537
Other trading activities	6	3,092	3,092	10,494
Investments	7	6,072	6,072	1,569
Total income		687,689	687,689	638,487
Expenditure on:				
Raising funds		65,492	65,492	52,278
Charitable activities		533,902	533,902	525,404
Total expenditure		599,394	599,394	577,682
Net movement in funds		88,295	88,295	60,805
Reconciliation of funds:				
Total funds brought forward		308,987	308,987	248,182
Net movement in funds		88,295	88,295	60,805
Total funds carried forward		397,282	397,282	308,987

THE PATIENTS ASSOCIATION
(A Company Limited by Guarantee)

STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED 31 DECEMBER 2023

	2023 £	2022 £
Cash flows from operating activities		
Net cash used in operating activities	7,301	44,457
	<hr/>	<hr/>
Cash flows from investing activities		
Investment income	6,072	1,569
Purchase of tangible fixed assets	(1,757)	(948)
	<hr/>	<hr/>
Net cash provided by investing activities	4,315	621
	<hr/>	<hr/>
Change in cash and cash equivalents in the year	11,616	45,078
Cash and cash equivalents at the beginning of the year	306,205	261,127
	<hr/>	<hr/>
Cash and cash equivalents at the end of the year	<u>317,821</u>	<u>306,205</u>

The notes on pages 17 to 33 form part of these financial statements

THE PATIENTS ASSOCIATION
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2023

1. General information

The Patients Association is a company limited by guarantee and is registered with the Charity Commission (Charity Registered Number 1006733) and Registrar of Companies (Company Registration Number 02620761) in England and Wales. In the event of the Charity being wound up, the liability in respect of the guarantee is limited to £1 per member of the Charity. The address of the registered office is given in the Charity information on page 1 of these financial statements. The nature of the Charity's operations and principal activities are detailed in the Trustees' Report.

2. Accounting policies

2.1 Basis of preparation of financial statements

The financial statements have been prepared in accordance with the Charities SORP (FRS 102) - Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Companies Act 2006.

The Patients Association meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy.

The financial statements are presented in sterling, which is the functional and presentational currency and are rounded to the nearest pound.

2.2 Going concern

The Trustees have assessed the use of going concern and have considered possible events or conditions that might cast significant doubt on the ability of the Charity to continue as a going concern. The Trustees have made this assessment for a period of at least one year from the date of the approval of these financial statements. The Trustees have concluded that there is a reasonable expectation that the Charity has adequate resources to continue in operational existence for the foreseeable future. The Charity, therefore, continues to adopt the going concern basis in preparing these financial statements.

THE PATIENTS ASSOCIATION
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2023

2. Accounting policies (continued)

2.3 Income

All income is recognised once the Charity has entitlement to the income, it is probable that the income will be received and the amount of income receivable can be measured reliably.

Grants, including government grants, are included in the Statement of Financial Activities on a receivable basis. The balance of income received for specific purposes but not expended during the period is shown in the relevant funds on the Balance Sheet. Where income is received in advance of entitlement of receipt, its recognition is deferred and included in creditors as deferred income. Where entitlement occurs before income is received, the income is accrued.

Gifts in kind donated for distribution are included at valuation and recognised as income when they are distributed to the projects. Gifts donated for resale are included as income when they are sold.

On receipt, donated professional services and facilities are recognised on the basis of the value of the gift to the Charity which is the amount it would have been willing to pay to obtain services or facilities of equivalent economic benefit on the open market; a corresponding amount is then recognised in expenditure in the period of receipt.

Legacy income is recognised in the Statement of Financial Activities when the charity is legally entitled to the income and the amount can be quantified with reasonable accuracy. If legacy income cannot be quantified with reasonable accuracy, a contingent asset disclosure is included in the notes to the accounts.

2.4 Expenditure

Expenditure is recognised once there is a legal or constructive obligation to transfer economic benefit to a third party, it is probable that a transfer of economic benefits will be required in settlement and the amount of the obligation can be measured reliably. Expenditure is classified by activity. The costs of each activity are made up of the total of direct costs and shared costs, including support costs involved in undertaking each activity. Direct costs attributable to a single activity are allocated directly to that activity. Shared costs which contribute to more than one activity and support costs which are not attributable to a single activity are apportioned between those activities on a basis consistent with the use of resources. Central staff costs are allocated on the basis of time spent, and depreciation charges allocated on the portion of the asset's use.

Expenditure on charitable activities is incurred on directly undertaking the activities which further the Charity's objectives, as well as any associated support costs.

All expenditure is inclusive of irrecoverable VAT.

2.5 Interest receivable

Interest on funds held on deposit is included when receivable and the amount can be measured reliably by the Charity; this is normally upon notification of the interest paid or payable by the institution with whom the funds are deposited.

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2023

2. Accounting policies (continued)

2.6 Taxation

The Charity is considered to pass the tests set out in Paragraph 1 Schedule 6 of the Finance Act 2010 and, therefore, it meets the definition of a charitable company for UK corporation tax purposes. Accordingly, the Charity is potentially exempt from taxation in respect of income or capital gains received within categories covered by Chapter 3 Part 11 of the Corporation Tax Act 2010 or Section 256 of the Taxation of Chargeable Gains Act 1992, to the extent that such income or gains are applied exclusively to charitable purposes.

2.7 Tangible fixed assets and depreciation

Tangible fixed assets are initially recognised at cost. After recognition, under the cost model, tangible fixed assets are measured at cost less accumulated depreciation and any accumulated impairment losses. All costs incurred to bring a tangible fixed asset into its intended working condition should be included in the measurement of cost.

At each reporting date the Charity assesses whether there is any indication of impairment. If such indication exists, the recoverable amount of the asset is determined to be the higher of its fair value less costs to sell and its value in use. An impairment loss is recognised where the carrying amount exceeds the recoverable amount.

Depreciation is charged so as to allocate the cost of tangible fixed assets less their residual value over their estimated useful lives.

Depreciation is provided on the following basis:

Fixtures, fittings and equipment	-	25%	straight line or reducing balance
Computer equipment	-	33%	straight line or reducing balance

2.8 Investments

Investments in subsidiaries are valued at cost less provision for impairment.

2.9 Debtors

Trade and other debtors are recognised at the settlement amount after any trade discount offered. Prepayments are valued at the amount prepaid net of any trade discounts due.

2.10 Cash at bank and in hand

Cash at bank and in hand includes cash and short-term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

2.11 Liabilities and provisions

Liabilities are recognised when there is an obligation at the Balance Sheet date as a result of a past event, it is probable that a transfer of economic benefit will be required in settlement, and the amount of the settlement can be estimated reliably.

Liabilities are recognised at the amount that the Charity anticipates it will pay to settle the debt or the amount it has received as advanced payments for the goods or services it must provide.

THE PATIENTS ASSOCIATION
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2023

2. Accounting policies (continued)

2.12 Financial instruments

The only financial assets and financial liabilities are of a kind that qualify as basic financial instruments. The financial assets and financial liabilities of the Charity are as follows:

Debtors – trade and other debtors (including accrued income) are basic financial instruments and are debt instruments measured at amortised cost as detailed in Note 14. Prepayments are not financial instruments.

Cash at bank – is classified as a basic financial instrument and is measured at face value.

Liabilities – trade creditors, accruals and other creditors will be classified as financial instruments, and are measured at amortised cost as detailed in Note 15. Taxation and social security are not included in the financial instruments disclosure. Deferred income is not deemed to be a financial liability, as in the cash settlement has already taken place and there is simply an obligation to deliver charitable services rather than cash or another financial instrument.

2.13 Operating leases

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

2.14 Pensions

The Charity operates a defined contribution pension scheme and the pension charge represents the amounts payable by the Charity to the fund in respect of the year.

Contributions are expensed as they become payable. This expenditure is allocated to an activity and fund based on the department that member of staff works in.

2.15 Fund accounting

General funds are unrestricted funds which are available for use at the discretion of the Trustees in furtherance of the general objectives of the Charity and which have not been designated for other purposes.

Investment income, gains and losses are allocated to the appropriate fund.

THE PATIENTS ASSOCIATION
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2023

3. Critical accounting estimates and areas of judgment

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

Critical accounting estimates and assumptions:

The Charity makes estimates and assumptions concerning the future. The resulting accounting estimates and assumptions will, by definition, seldom equal the related actual results. The estimates and assumptions that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next financial year are listed below.

- Depreciation rates for tangible fixed assets
- Allocation of support costs.

THE PATIENTS ASSOCIATION
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2023

4. Income from donations and grants

	Unrestricted funds 2023 £	Total funds 2023 £
Donations and grants	5,115	5,115
Corporate donations/ membership	233,390	233,390
Legacy donations	79,593	79,593
Total 2023	<u><u>318,098</u></u>	<u><u>318,098</u></u>

	<i>Unrestricted funds 2022 £</i>	<i>Total funds 2022 £</i>
Donations and grants	7,103	7,103
Corporate donations/membership	274,784	274,784
Legacy donations	10,000	10,000
<i>Total 2022</i>	<u><u>291,887</u></u>	<u><u>291,887</u></u>

5. Income from charitable activities

	Unrestricted funds 2023 £	Total funds 2023 £
Helpline and Information Services	17,710	17,710
Performance-related grants	342,717	342,717
Total 2023	<u><u>360,427</u></u>	<u><u>360,427</u></u>

THE PATIENTS ASSOCIATION
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2023

7. Investment income (continued)

	<i>Unrestricted funds 2022 £</i>	<i>Total funds 2022 £</i>
Bank interest receivable	1,569	1,569

8. Expenditure on raising funds

	Unrestricted funds 2023 £	Total funds 2023 £
Direct costs - Staff costs	65,482	65,482

	<i>Unrestricted funds 2022 £</i>	<i>Total funds 2022 £</i>
Direct costs - Staff costs	51,926	51,926
Direct costs - Other costs	352	352
<i>Total 2022</i>	<u>52,278</u>	<u>52,278</u>

THE PATIENTS ASSOCIATION
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2023

9. Analysis of expenditure by charitable activities

	Activities undertaken directly 2023 £	Support costs 2023 £	Total funds 2023 £
Helpline and Information Services	142,484	24,810	167,294
Influencing Policy and Practice	316,987	49,621	366,608
Total 2023	459,471	74,431	533,902

	<i>Activities undertaken directly 2022 £</i>	<i>Support costs 2022 £</i>	<i>Total funds 2022 £</i>
Helpline and Information Services	165,680	20,489	186,169
Influencing Policy and Practice	298,257	40,978	339,235
<i>Total 2022</i>	<i>463,937</i>	<i>61,467</i>	<i>525,404</i>

THE PATIENTS ASSOCIATION
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2023

9. Analysis of expenditure by charitable activities (continued)

Analysis of support costs

	Total funds 2023 £	<i>Total funds 2022 £</i>
Depreciation	982	678
Rent and rates	390	2,325
Recruitment expenses	1,956	865
Communication costs	21,840	22,832
Consultancy costs	19,960	8,282
Advertising and marketing	1,896	2,560
Travel and subsistence	2,225	1,103
Printing, postage and stationery	2,806	1,666
Subscriptions	2,341	2,879
Bank charges	74	304
Governance costs	16,629	14,957
Other costs	3,078	3,016
Loss on disposal of fixed assets	254	-
Total 2023	74,431	61,467

Governance costs are analysed in Note 10.

10. Governance costs

	2023 £	<i>2022 £</i>
Insurance	3,205	2,966
Independent Examiners' Remuneration	3,940	3,750
Bookkeeping & accountancy costs	8,774	8,180
Other costs	710	61
	16,629	14,957

THE PATIENTS ASSOCIATION
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2023

11. Staff costs

	2023	2022
	£	£
Wages and salaries	306,227	319,302
Social security costs	26,845	29,864
Contribution to defined contribution pension schemes	9,544	9,848
	342,616	359,014

The average number of persons employed by the Charity during the year was as follows:

	2023	2022
	No.	No.
Staff	9	9

The number of employees whose employee benefits (excluding employer pension costs) exceeded £60,000 was:

	2023	2022
	No.	No.
In the band £70,001 - £80,000	1	1

The total amount of employee benefits, including employers social security costs, received by Key Management Personnel of the Charity was £86,046 (2022: £84,452). The Charity considers its Key Management Personnel to comprise of the Trustees and the Chief Executive Officer. As disclosed in Note 12, no Trustees received any remuneration or other benefits during the year (2022: £NIL).

12. Trustees' remuneration and expenses

During the year, no Trustees received any remuneration or other benefits (2022 - £NIL).

During the year ended 31 December 2023, no Trustee expenses have been incurred (2022 - £NIL).

THE PATIENTS ASSOCIATION
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2023

13. Tangible fixed assets

	Fixtures and fittings £	Computer equipment £	Total £
Cost or valuation			
At 1 January 2023	5,677	3,951	9,628
Additions	-	1,759	1,759
Disposals	(5,677)	-	(5,677)
At 31 December 2023	<u>-</u>	<u>5,710</u>	<u>5,710</u>
Depreciation			
At 1 January 2023	5,424	2,762	8,186
Charge for the year	-	982	982
On disposals	(5,424)	-	(5,424)
At 31 December 2023	<u>-</u>	<u>3,744</u>	<u>3,744</u>
Net book value			
At 31 December 2023	<u>-</u>	<u>1,966</u>	<u>1,966</u>
At 31 December 2022	<u>253</u>	<u>1,189</u>	<u>1,442</u>

THE PATIENTS ASSOCIATION
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2023

14. Debtors

	2023 £	2022 £
Due within one year		
Trade debtors	46,681	66,397
Amounts owed by group undertakings	3	23,635
Other debtors	32	32
Prepayments and accrued income	74,000	10,000
	<u>120,716</u>	<u>100,064</u>

15. Creditors: Amounts falling due within one year

	2023 £	2022 £
Trade creditors	6,539	6,399
Other taxation and social security	25,102	32,073
Accruals and deferred income	11,580	60,252
	<u>43,221</u>	<u>98,724</u>

	2023 £	2022 £
Deferred income		
Deferred income at 1 January	54,000	39,000
Resources deferred during the year	5,000	54,000
Amounts released from previous periods	(54,000)	(39,000)
Deferred income at 31 December	<u>5,000</u>	<u>54,000</u>

Deferred income represents income received in 2023 for projects & corporate membership relating to the following financial reporting period.

THE PATIENTS ASSOCIATION
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2023

16. Statement of funds

Statement of funds - current year

	Balance at 1 January 2023 £	Income £	Expenditure £	Balance at 31 December 2023 £
Unrestricted funds				
General unrestricted funds	<u>308,987</u>	<u>687,689</u>	<u>(599,394)</u>	<u>397,282</u>

Statement of funds - prior year

	Balance at 1 January 2022 £	Income £	Expenditure £	Balance at 31 December 2022 £
Unrestricted funds				
General unrestricted funds	<u>248,182</u>	<u>638,487</u>	<u>(577,682)</u>	<u>308,987</u>

Unrestricted funds are general funds which are available for use at the discretion of the Trustees in furtherance of the general objectives of the Charity and which have not been designated for other purposes.

THE PATIENTS ASSOCIATION
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2023

17. Analysis of net assets between funds

Analysis of net assets between funds - current year

	Unrestricted funds 2023 £	Total funds 2023 £
Tangible fixed assets	1,966	1,966
Current assets	364,537	364,537
Creditors due within one year	30,779	30,779
Total	397,282	397,282

Analysis of net assets between funds - prior year

	<i>Unrestricted funds 2022 £</i>	<i>Total funds 2022 £</i>
Tangible fixed assets	1,442	1,442
Current assets	406,269	406,269
Creditors due within one year	(98,724)	(98,724)
Total	308,987	308,987

18. Reconciliation of net movement in funds to net cash flow from operating activities

	2023 £	2022 £
Net income for the year (as per Statement of Financial Activities)	88,295	60,805
Adjustments for:		
Depreciation charges	982	678
Investment income	(6,072)	(1,569)
Loss on the sale of fixed assets	254	-
(Increase)/ decrease in debtors	(20,655)	(34,781)
Increase/ (decrease) in creditors	(55,503)	19,324
Net cash provided by operating activities	7,301	44,457

THE PATIENTS ASSOCIATION
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2023

19. Analysis of cash and cash equivalents

	2023	<i>2022</i>
	£	£
Cash in hand	317,821	<i>306,205</i>
Total cash and cash equivalents	317,821	<i>306,205</i>

20. Analysis of changes in net debt

	At 1	Cash flows	At 31
	January	£	December
	2023	£	2023
	£		£
Cash at bank and in hand	306,205	11,616	317,821
	306,205	11,616	317,821

21. Pension commitments

The charity operates a defined contribution pension scheme. The assets of the scheme are held separately from those of the charity in an independently administered fund. The pension cost charge represents contributions payable by the charity to the fund and amounted to £9,543 (2022: £9,848) in the year. An amount of £1,590 (2022: £1,502) was due to the independently administered fund at the year end.

22. Operating lease commitments

At 31 December 2023 the Charity had commitments to make future minimum lease payments under non-cancellable operating leases as follows:

	2023	<i>2022</i>
	£	£
Not later than 1 year	-	<i>1,424</i>

The following lease payments have been recognised as an expense in the Statement of Financial Activities:

	2023	<i>2022</i>
	£	£
Operating lease rentals	1,071	<i>1,298</i>

THE PATIENTS ASSOCIATION
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2023

23. Trustees liability

Each Trustee of the charitable company undertakes to contribute to the assets of the company in the event of it being wound up while they are a Trustee, or within one year after they cease to be a Trustee, such amount as may be required, not exceeding £1 for the debts and liabilities contracted before they cease to be a Trustee.

24. Related party transactions

Other than Trustee and Key Management Personnel transactions detailed in Notes 11 and 12, there were no other related party transactions during the period (2022: None).

25. Principal subsidiaries

Subsidiary name:	The Patients Association Trading Company Limited
Company registration number:	05252321
Principal address:	The London North West Heal NHS Trust, Watford Road, Harrow, Middlesex, HA1 3UJ
Basis of control:	100% controlled
Total assets as at 31 December 2023:	£3
Total liabilities as at 31 December 2023:	£3
Total equity as at 31 December 2023:	£Nil
Turnover for the year ended 31 December 2023:	£Nil
Expenditure for the year ended 31 December 2023:	£Nil
Taxation for the year ended 31 December 2023:	£Nil
Profit for the year ended 31 December 2023:	£Nil

The principal activity of The Patients Association Trading Company Limited was to support The Patients Association in providing services to patients of both health and social care. The Patients Association Trading Company Limited was dormant during the current year, after ceasing to trade in 2020.

26. Post balance sheet events

The Patients Association Trading Company Limited ceased to trade during 2020 and the Directors are in the process of winding up the Company.

27. Contingent Assets

Prior to the balance sheet date, the charity received notification of entitlement to two legacies. One legacy has been estimated based upon the estimated value of the estate, but it is possible that additional amounts may be payable to the charity. Such amounts cannot be estimated and therefore have not been included within the financial statements. The second legacy cannot be estimated with reasonable accuracy and therefore no amounts have been included within the financial statements.