

THE PATIENTS ASSOCIATION
(A Company Limited by Guarantee)

UNAUDITED

TRUSTEES' REPORT AND FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 DECEMBER 2024

THE PATIENTS ASSOCIATION
(A Company Limited by Guarantee)

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REFERENCE AND ADMINISTRATIVE DETAILS OF THE CHARITY, ITS TRUSTEES AND ADVISERS
FOR THE YEAR ENDED 31 DECEMBER 2024

Trustees	Suzanne White Rachel King Julie Thallon Wiqas Valji Meryl Davies Professor Alf Collins Tom Grinyer (appointed 12 August 2024)
Company registered number	02620761
Charity registered number	1006733
Registered office	32 Byron Hill Road Attn The Patients Association C/O A-Spire Business Partners Harrow On The Hill Middx HA2 0HY
Chief Executive Officer and Company Secretary	Rachel Power
Independent Examiner	MHA Chartered Accountants MHA House Charter Court Swansea Enterprise Park Swansea SA7 9FS

THE PATIENTS ASSOCIATION

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TRUSTEES' REPORT FOR THE YEAR ENDED 31 DECEMBER 2024

Introduction by Julie Thallon, Chair of the Patients Association

It is with great pride that I and the Trustees present our annual report together with the consolidated financial statements for the year 1st January to 31st December 2024. As I reflect on my first year as Chair, I am honoured by the responsibility of leading this vital organisation. I'm delighted to share the progress we've made in championing the patient voice and strengthening collaboration between patients, the healthcare system and our corporate partners.

Our first major piece of work, Patient experiences of diagnostics, explored how to enhance patient experiences of diagnostic services. The report analysed the opinions and experiences of more than 1,000 NHS patients and carers, and emphasised the importance of timely access, clear communication, and streamlined pathways in reducing anxiety and improving diagnosis and treatment. This work received significant media coverage, providing an early opportunity to highlight the value of our work.

2024 was again, a very challenging year for health and care, with waiting lists continuing to grow, further strike action by different areas of the workforce and growing health inequalities. All this set the backdrop for the General Election, held in early July. The subsequent win for the Labour party represents new opportunities and challenges for our purpose, as we continue to build on our relationships with new and already known policymakers.

I am particularly proud of our focused work on health inequity this year, both in our work with the system and in engaging with patients. Our work with Weber Shandwick developed a communications framework that addresses the persistent barriers to health literacy and accessibility experienced by low-income and ethnic minority patient communities. We finished the year by launching a major report on improving health equity for patients living with cancer and/or blood disorder, sponsored by Bristol Myers Squibb. Our research highlighted the systemic barriers that underserved communities face including mistrust in healthcare, discrimination, financial hardship, and poor access to services, all of which lead to worse health outcomes. As a charity, it is our responsibility to amplify these voices, challenge inequities, and push for more inclusive, patient-centred care and we plan to continue this work into 2025. Our strong recommendations for a way forward in this area include locating more health services in underserved areas to improve access and calling for a review of the Carr-Hill formula.

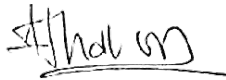
We continued to centre the authentic voice and views of patients across every aspect of our work. We're deeply grateful to our team for their dedication in bringing new and diverse patient voices to all areas of our work. By expanding our outreach to different communities, we're hearing from people with varied experiences and perspectives. This gives us great insight into the wide range of patient experiences. We will continue to include new patients in our work to better understand the diverse needs of all people living across the UK. We connected with over 2,000 patients through surveys and focus groups to gain insight into their experiences and shape our policy work and engagement with the health system. Meanwhile, our helpline provided support to more than 4,000 patients. We also engaged with the new Government's 10-year health plan consultation process by submitting our organisation response, which included feedback from our membership and expertise gathered from previous projects. We also recruited 'community connectors' for this work trusted patients with links to under-served communities - ensuring we reached marginalised voices and reflected their priorities in our submission.

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**TRUSTEES' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 DECEMBER 2024**

As we enter 2025 and my second year as chair, I am more convinced than ever that our purpose to achieve genuine patient partnership and shared decision-making across all aspects of health and care remains as vital as ever. I am proud of everything we accomplished in 2024 and look forward to another year of advocating of behalf of all patients in the UK.



Julie Thallon
Chair

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TRUSTEES' REPORT (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2024

The Trustees present their annual report together with the financial statements of the Charity for the 1st January 2024 to 31st December 2024.

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 and most distinctive health and care charities in the UK. Our remit is not disease-specific; it covers all issues that affect patients, including social care and public health. We advocate for genuine patient partnership in the design and development of services to ensure that everybody can access and benefit from the health and care they need to live well.

We are the leading independent charity with a direct line to patients living with any health condition. For over 60 years, our freephone helpline, membership, patient activities, and consultancy have given us a unique insight into patient experience and a holistic view of the health and care system from their perspective. We talk to thousands of patients every year and are experts at reaching diverse groups and communities.

We create safe, supportive spaces where patients feel heard and valued, ensuring their experiences shapes improvements in healthcare. Our work with patients feeds directly into our work with healthcare professionals and key decision-makers, ensuring national policy decisions are influenced by authentic patient voice.

We started 2024 with the anticipation of a general election taking place later in the year. We published our Election Manifesto, developed in partnership with patients, outlining our key priorities for the upcoming Government. The Manifesto covered the topics of taking partnership from theory to practice, increasing the availability of quality care, placing health at the heart of government, delivering genuine two-way communication between patients and the NHS, and providing the workforce that patients need.

Following the election announcement, we shifted our focus towards gathering up to date patient feedback on their current experiences of health and care services. We received over 1200 responses to our patient experience survey. We used the results from the survey to form a report, 'Beyond the breaking point' and write to the newly elected Prime Minister and relevant Ministers in the DHSC.

Following the election, the Secretary of State for Health and Social Care commissioned an independent review into the NHS, led by Lord Darzi. We strongly welcomed the report and were pleased to see that it aligned with many of our key calls in 'Beyond the breaking point'. We accepted an invitation to be part of Lord Darzi's Expert Reference Group and provided evidence towards his investigation. Particularly relevant points from the Darzi Review for our mission include the lack of patient involvement and voice in NHS services, the potential of the role of technology in the NHS, and the need to tackle waiting lists to improve both the physical and mental health of patients. Our work 'I love the NHS but...' in collaboration with Demos was referenced in the final report.

The Darzi Review was pivotal in laying the foundations for the 10 Year Health Plan, a consultation also launched late last year that will shape the future of the NHS through three key shifts – hospital to community, analogue to digital and from sickness to prevention. We have engaged extensively with patients in our campaigns around the 10 Year Health Plan, including through our response to the consultation itself, setting up meetings with key advisers and Ministers involved in the plan, and providing the opportunity for patients to attend events associated with the Plan.

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We responded to the subsequent organisational consultation on the 10 Year Health Plan, combining insights from a refreshed patient experience survey in line with the questions in the consultation and information from our previous research and projects. We also submitted two additional responses – one with a coalition of patient charities, headed by Pfizer and Lexington Communications and another as a report written following a roundtable at the Houses of Parliament. The latter was penned by the Nuffield Department of Primary Care Services at Oxford University and the Centre for Research Equity. We are also members of the consultation's Partners Council, alongside many other significant charitable organisations.

Media engagement remained a vital tool in 2024 for amplifying patient concerns, advocating for improvements in care, and driving our campaign for patient partnership. Throughout the year we fulfilled over 130 media requests across print and online news, radio and TV.

The publication of the Patient Experience Diagnostics report in February led to significant media coverage, with 24 pieces across national, online, trade, and local outlets, including both print and online versions of The Daily Mail. Our report on patient attitudes toward the NHS App, produced with the Digital Coalition, received less exposure due to coinciding with the British Social Attitudes survey publication.

A significant media moment for us came in Channel 4's Dispatches: Undercover A&E: NHS in Crisis, in which Trustee Prof Alf Collins was interviewed. Although not focused solely on our work, this programme provided an opportunity to highlight the ongoing NHS crisis and its impact on patients. Our embargoed statement ahead of the broadcast gained further media traction. Additionally, our statement on the junior doctors' strike, released just before the general election, was widely picked up, appearing in The Independent and numerous local papers.

Our Chief Executive, Rachel, gave multiple high-profile broadcast interviews throughout the year, including BBC Radio 4's Today, LBC, and a detailed segment on BBC News Channel. Ahead of the general election in July, she contributed to coverage of Labour's NHS policies, ensuring patients' experiences remained central to the debate. She also met with The Daily Telegraph's health correspondent and was interviewed by NHS Confederation for a YouTube feature on our work.

Following the election, we closely monitored the new government's healthcare policies, providing timely media commentary on how their decisions would impact patients.

"You've been more helpful than other people I've contacted. I'm overjoyed. You've been absolutely brilliant."

Helpline caller

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TRUSTEES' REPORT (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2024

Consultations and events

At Module Three of the Covid Inquiry, Julia Jones of John's Campaign presented our findings alongside further evidence from John's Campaign and Care Rights UK. This module is now closed.

We continue our work as core participants in Module Six, covering the impact of the pandemic on social care. These hearings will take place in Spring 2025.

We also responded to several other consultations and calls for evidence, including:

- NHS Never events consultation
- DHSC statutory duty of candour call for evidence
- AvMA Harmed Patient Pathway consultation
- The Patient Safety Commissioners Principles of Better Patient Safety
- Consultation on the NHS Constitution
- GMC consultation on physicians associates – in collaboration with National Voices and Healthwatch England
- Response to HM Treasury on the Autumn 2024 budget

Between our Chief Executive and Head of Patient Partnership, we took our message of patient partnership to 40 events nationally, including both the Labour and Conservative Party Conferences and NHS ConfedExpo. At the Labour Party Conference we were part of three panels which featured MPs, industry experts and representatives from other patient organisations. We also presented at Haleon's charity showcase, which included a keynote speech from the Secretary of State for Health and Social Care.

At NHS ConfedExpo we also presented at three panels, as well as taking part in a 1:1 interview for the Conference's YouTube channel, and provided closing remarks for the Conference with NHS Confederation's Chair.

"You are a good organisation, I read your newsletter regularly. I am glad you are there. Thank you for the information and returning my call so quickly."

Helpline caller

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TRUSTEES' REPORT (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2024

Patient engagement

We continue to expand and diversify our membership. We increased membership to 4,506 by the end of 2024, a rise of 27% on the previous year. We continue to talk to patients through our large-scale surveys, emails, focus groups, webinars, and by involving them in other organisations' events. We take what we heard from these patients when speaking up for all patients in our interactions and in various forums such as:

- NHS Assembly
- NHS England's Outpatients Recovery
- DHSC's Patient Safety Commissioner advisory group
- National Data Advisory Group
- Department of Health and Social Care Elective Recovery Taskforce
- Data Strategy Advisory Panel (DSAP) (Large Scale Public Engagement)
- Management and Leadership Development in the NHS
- Martha's Rule Working Group
- UK Covid 19 Inquiry
- Corridor care coalition
- Training for Medical Examiner Officers

We ran numerous patient surveys with strong engagement, including the following:

- DHSC consultation on Leading the NHS: proposals to regulate NHS managers, which received 100 responses
- 10 Year Health Plan organisational response survey received 292 responses
- Our patient experience survey for our 'Beyond the breaking point' report received 1298 responses
- DHSC consultation on the statutory duty of candour, received 176 responses
- Our survey on PPGs for our work with Herts and West Essex received 119 responses
- Our survey for our 'Patient experiences of diagnostics' report received 1012 responses

"Thank you very much for the speed and time you had taken in replying. Thank you so much for your response and guidance. It has made a difference. Thank you again."

Helpline caller

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TRUSTEES' REPORT (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2024

Helpline

We have a free helpline that people can contact 9-5 on weekdays by phone or email. Whilst our staff are not medically trained, they can support with the broader intricacies of the health system and:

- 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.

During 2024, we responded to 4,128 enquiries, up 28% from 2023.

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 especially dentistry and GP.

Our website's information and resources section plays a key role in supporting the helpline, providing patients and carers with essential guidance on navigating 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 2024 the website had 222,232 views, across 121,350 users. We published a new webpage and animation for patients on shared decision-making.

Since 2013, our helpline has partnered with the Care Quality Commission (CQC) on the regulator's "tell us about your care" campaign. Each month our advisers support callers to give feedback to the CQC on their care, whether it has been a positive example of great health or social care, or a troubling experience. In 2024, we passed on 347 pieces of feedback with the regulator – 63 more than in 2023 (22% increase).

"If you weren't around, patients like us wouldn't know what to do. You are the reason why my mother is still around. Your advice in the past had saved her life. Thanks for being there and getting back so quickly. I don't know any organisation that respond to people within 24 hours. You all really do make a difference."

Helpline caller

Webinars

Patient Partnership Week, which we established in 2022, returned for the third time in 2024. The week's aim is to bring together patients, carers, and healthcare professionals to talk about the importance patient partnership.

The week included six webinars focused on shared decision making, health inequalities, empowering patients, and joining services. Speakers included a mix of professionals and patients, with the audience reflecting as such.

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We were delighted to welcome back speakers such as Dr Henrietta Hughes, England's Patient Safety Commissioner, to discuss developments since last year's fireside chat. We welcomed new speakers including Trustee Professor Alf Collins, the Head of Health Improvement & Influencing at Pancreatic Cancer UK, and the Chief Executive of the Sickle Cell Society.

The number of registrants and attendees increased on the previous year by almost 50%. Due to the success of the previous two years, the organisation will be running Patient Partnership Week in 2025 for the fourth time.

In addition to the Patient Partnership Week webinars, we held seven additional webinars:

- The first three were in partnership with NHS England to raise awareness of changes to the way primary care works: 'Exploring the Wider Practice Team', where we were joined by a paramedic, physiotherapist, and mental health practitioner. Then understanding the 'Pharmacy First' service, providing an opportunity to hear about the new service more than 10,000 community pharmacies are offering in England. Our panel of experts explained how patients can get treatment for seven common conditions at their local pharmacy. And finally, 'digital access to primary care', discussing the benefits and obstacles with professionals and patients.
- In the 'Untold Patient Stories: Shedding light on the realities of life with a long-term condition' webinar we heard from four people who live with long-term health conditions what their day-to-day lives are like. AbbVie provided arm's length full funding but has had no influence on the webinar in the project, or the development of any associated materials. We also shared a follow up email to all MPs and others who were unable to attend. This email included a short video with the highlights of the webinar.
- We hosted a webinar with Care Quality Commission (CQC) and Healthwatch England to hear about the Tell Us Your Care campaign, which aims to support more people to have their say on health and care services and understand the barriers that exist to giving feedback and potential solutions.
- Exploring the findings and recommendations from our 'Patient Experience of Diagnostics' report, in partnership with Roche. The report's findings showed that patients view diagnostics as a fundamental part of the NHS and one that should be prioritised over the coming years.
- In the 'Ensuring patient and family concerns are central to the recognition and management of acute illness and deterioration' webinar, we worked with NHS England's Worry and Concern Collaborative to look at how hospitals can make sure the worries and concerns of patients, their family, and friends are considered by healthcare professionals.

Our webinars are always free and open to anyone interested in health and social care. We always endeavour to include patients as panellists where possible, and continue to develop webinars based on what we understand patients are interested in. This information is based on what we hear through the helpline, our focus groups and correspondence with our members.

"I wish I had known this service before, I should have called you long time ago. Thank you so much."

Helpline caller

Funded work

Our commissioned project work in 2024 brought patients together with NHS organisations, industry, regulators and independent healthcare providers to influence health policy and practice. 15 projects were completed in total with the emphasis throughout all our project work on amplifying the voice of patients, particularly those from marginalised backgrounds, and ensuring their experiences are helping to drive change in the health and care system.

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For example:

- We launched a major report on improving health equity for patients living with cancer and/or blood disorder, highlighting the systemic barriers that underserved communities face including mistrust in healthcare, discrimination, financial hardship and poor access to services, all of which lead to worse health outcomes. Sponsored by Bristol Myers Squibb, this work has resulted in a guide and animation signposting patients to support that is available to them, while also underpinning our campaigning on health inequities.
- We expanded on our work in this area in partnership with the Weber Shandwick Collective, bringing patients from marginalised and underserved communities together to highlight how health communications can leave them feeling excluded or their experience unseen. Alongside Weber Shandwick, we have supported the development of CORE, a new communications framework that aims to increase inclusivity and equity in health and wellness communications.
- Our patient experience tracker survey, launched in partnership with Roche Diagnostics gave us further insight into the level of care patients are receiving in the health service. Findings from this work supported our participating in the Darzi Review and we our ongoing efforts to engage the DHSC and ensure patients get the best possible treatment that meets their needs and expectations.
- With Palantir awarded the contract for its Foundry software to support the NHS Federated Data Platform, we were commissioned to understand what questions patients had about Foundry and to work with Palantir and NHS England to provide answers in language that could be widely understood. This resulted in a patient guide and summary to Foundry that covered several issues important to patients including how their data is processed and controlled, and how it can support NHS organisations to plan and deliver care more effectively while reducing the administrative burden on staff.

The role of regulators is critical in maintaining patient safety and helping to protect the public, so we worked with the Professional Standards Authority to review their standards, bringing together a diverse group of patients to provide insight on their relevance and accessibility to the public. Recommendations from our focus groups have informed the wider public consultation process that is taking place in 2025.

Our plans

As we look to 2025, with a new government setting out its vision for the NHS and social care, and Lord Darzi's review providing a comprehensive diagnosis of the challenges, we have an opportunity to refine our focus, amplify our impact, and strengthen our position. The government's strategic shifts - from hospital to community-based care, from analogue to digital and from illness treatment to prevention - align with our mission to improve patient experiences across all healthcare settings. These transitions require careful consideration of our diverse patient communities, ensuring changes benefit everyone.

Our core objectives for 2025 are to:

Enable patients to be equal partners in their healthcare journey through:

- Supporting them to access and understand information about their care
- Building knowledge and confidence for shared decision-making
- Empowering them to have an active voice in their care choice

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TRUSTEES' REPORT (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2024

Champion patient voices to drive change in healthcare by:

- Amplifying patient experiences
- Building partnerships with patients and patient communities
- Holding decision makers accountable

This year will also see us develop and launch a focused five-year strategic plan by September 2025 to take us into the next stage of the organisation.

Financial Review

Like many in the charity, and particularly health charity sector, 2024 was a challenging year with income raised approximately 12% less than the budget of £803,660 we set at the start of the year.

This was the result of multiple factors. The general election period naturally led to a quieter environment as stakeholders adopted a wait-and-see approach amid cost-of-living concerns. Additionally, we experienced a transition period with new staff joining our fundraising and project team which temporarily impacted our operational capacity. The fundraising landscape has become increasingly competitive with more organisations vying for limited resources. We continue to feel the knock-on effects of Brexit in terms of the UK markets importance to many of our key industry donors, while ongoing voluntary pricing scheme negotiations between the NHS and some of our key funders has created further uncertainty.

Despite the funding challenges, we ended 2024 with a surplus of £79,070 as the result of a significant legacy donation received during the year.

Our income comes from a variety of sources including:

- NHS trust memberships and improvement projects.
- NHS/DHSC/Industry funded health and care improvement projects.
- Corporate membership, sponsorship, and donations.
- Individual giving including legacies.

In 2024, we developed a new Income Generation Strategy which is focused on sustaining and expanding projects and corporate partnerships as our primary sources of funding, while diversifying and growing our income from Trusts & Foundations, Events and Sponsorship and Individual and Community giving. Successful implementation of this strategy will enable us to invest in priority areas of work to be set out in our new strategy.

The Patients Association is registered with the Fundraising Regulator and has fully adopted and is committed to its code of best fundraising practice. In addition, the Trustees and staff work to clearly ensure we work to an ethical fundraising policy and process. We have received no complaints about our fundraising ethics and do not fundraise from individuals in any way which could be seen as intrusive on a person's privacy or place pressure on any person to donate.

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.

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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. The company is in the process of being dissolved.

Reserves policy

The Trustees have reviewed the charity's reserves policy and approved a revised approach for 2025. The new policy establishes a flat rate of 6 months operating costs as the target reserves level. Based on our projected expenditure for 2025, this equates to £278,900 (compared to £353,020 in 2024).

This reserves figure includes provision for project expenses to ensure that, in the event of financial difficulties, the charity would have sufficient funds to complete any outstanding project commitments while maintaining core operations during the transition period.

The Trustees believe this revised policy provides appropriate financial resilience while ensuring that charitable funds are effectively deployed toward our purpose of promoting patient partnership in healthcare. The level of reserves is reviewed annually to ensure it remains appropriate to the organization's needs and financial circumstances.

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 2024 was a surplus of £79,070 (2023: £88,295). This compares to a surplus of £60,805 in 2022.

The balance held in unrestricted funds at the 31 December 2024 was £476,352 (2023: £397,282). This compares to a balance of £308,987 in 2022. The target reserves level for 2025 is £278,900.

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 2024.

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.

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.

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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, as evidenced by our comprehensive annual governance review process, structured recruitment procedures for staff and trustees that ensure diversity of skills and perspectives, regular risk register reviews conducted at both Finance Committee and Board levels, and appraisals that incorporate external contributors to maintain objectivity and accountability."

Principal risks and uncertainties

The principal uncertainties facing the organisation in 2024 included the ongoing economic pressures following the cost-of-living crisis, persistent inflationary environment, significantly increased competition for charitable funds, continued disruption in global politics including conflicts in Ukraine and the Middle East, and the changing healthcare landscape following the 2024 general election. Additionally, the new voluntary pricing agreement for pharmaceutical companies has created uncertainty in our corporate funding landscape. These combined factors continue to impact charitable funding and create operational challenges.

The Board of Trustees maintains its rigorous approach to risk management, regularly reviewing our comprehensive risk register which identifies principal risks that may affect our ability to achieve our objectives.

To mitigate these risks, the Chief Executive with support from the finance committee implements robust financial controls, ensures operational efficiency, demonstrates clear impact to funders, and maintains strong governance practices. The organisation has also invested in enhanced digital security measures and staff development to build resilience. Drawing on our 61-year history of adapting to changing circumstances, we remain confident in our ability to deliver our mission despite these challenges. The Board maintains close oversight of emerging risks as the political and economic landscape continues to evolve rapidly in the post-election environment.

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.

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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.

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 identify checks.

Board meetings

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

Supporting staff and volunteers

During 2024, 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

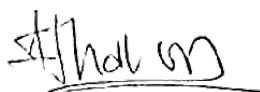
The Patients Association recognises the motivation of its staff team to work within the charitable sector and aims to strike a balance between paying enough to recruit and keep people with the skills we need, and the public and our donors' expectations that the money they entrust us with will be used 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 the Chief Executive 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

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

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



Mrs J Thallon,
Chair of the Board of Trustees.
Date: 13th May 2025

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STATEMENT OF TRUSTEES' RESPONSIBILITIES
FOR THE YEAR ENDED 31 DECEMBER 2024

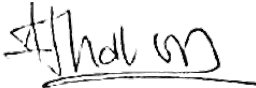
The Trustees (who are also the directors of the Charity for the purposes of company law) are responsible for preparing the Trustees' Report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company law requires the Trustees to prepare financial statements for each financial year. Under company law, the Trustees must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the 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:



.....
Ms J Thallon
Chair
Date: 13th May 2025

THE PATIENTS ASSOCIATION
(A Company Limited by Guarantee)

INDEPENDENT EXAMINER'S REPORT
FOR THE YEAR ENDED 31 DECEMBER 2024

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 Patients Association ('the parent Charity') and its subsidiary undertaking for the year ended 31 December 2024.

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:



Rachel Doyle

Dated: 13 May 2025

ACA DChA

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

MHA is the trading name of MHA Advisory Ltd, a limited company registered in England and Wales (company registration number 16233746).

THE PATIENTS ASSOCIATION
(A Company Limited by Guarantee)

STATEMENT OF FINANCIAL ACTIVITIES (INCORPORATING INCOME AND EXPENDITURE ACCOUNT)
FOR THE YEAR ENDED 31 DECEMBER 2024

	Note	Unrestricted funds 2024 £	Total funds 2024 £	<i>Total funds 2023 £</i>
Income from:				
Donations and legacies	4	404,351	404,351	318,098
Charitable activities	5	283,354	283,354	360,427
Other trading activities	6	11,390	11,390	3,092
Investments	7	9,497	9,497	6,072
Total income		708,592	708,592	687,689
Expenditure on:				
Raising funds		112,464	112,464	65,492
Charitable activities		517,058	517,058	533,902
Total expenditure		629,522	629,522	599,394
Net movement in funds		79,070	79,070	88,295
Reconciliation of funds:				
Total funds brought forward		397,282	397,282	308,987
Net movement in funds		79,070	79,070	88,295
Total funds carried forward		476,352	476,352	397,282

THE PATIENTS ASSOCIATION
(A Company Limited by Guarantee)
REGISTERED NUMBER: 02620761

BALANCE SHEET
AS AT 31 DECEMBER 2024

	Note	2024 £	2024 £	2023 £	2023 £
Fixed assets					
Tangible assets	13		3,700		1,966
			<u>3,700</u>		<u>1,966</u>
Current assets					
Debtors	14	127,846		120,716	
Cash at bank and in hand		375,228		317,821	
		<u>503,074</u>		<u>438,537</u>	
Creditors: amounts falling due within one year	15	(30,422)		(43,221)	
			<u>472,652</u>		<u>395,316</u>
Net current assets			<u>472,652</u>		<u>395,316</u>
Total net assets			<u>476,352</u>		<u>397,282</u>
Group funds					
Unrestricted funds	16		476,352		397,282
Total funds			<u>476,352</u>		<u>397,282</u>

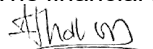
The Charity was entitled to exemption from audit under section 477 of the Companies Act 2006.

The members have not required the company to obtain an audit for the year in question in accordance with section 476 of Companies Act 2006.

The Trustees acknowledge their responsibilities for complying with the requirements of the Act with respect to accounting records and preparation of financial statements.

The financial statements have been prepared in accordance with the provisions applicable to entities subject to the small companies regime.

The financial statements were approved and authorised for issue by the Trustees and signed on their behalf by:



.....
Ms J Thallon

Chair

Date: 13th May 2025

The notes on pages 20 to 36 form part of these financial statements.

THE PATIENTS ASSOCIATION
(A Company Limited by Guarantee)

STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED 31 DECEMBER 2024

	2024	2023
	£	£
Cash flows from operating activities		
Net cash used in operating activities	51,492	7,301
	<hr/>	<hr/>
Cash flows from investing activities		
Investment income	9,497	6,072
Purchase of tangible fixed assets	(3,581)	(1,757)
	<hr/>	<hr/>
Net cash provided by investing activities	5,916	4,315
	<hr/>	<hr/>
Change in cash and cash equivalents in the year	57,408	11,616
Cash and cash equivalents at the beginning of the year	317,821	306,205
	<hr/>	<hr/>
Cash and cash equivalents at the end of the year	375,229	317,821
	<hr/> <hr/>	<hr/> <hr/>

The notes on pages 20 to 36 form part of these financial statements

THE PATIENTS ASSOCIATION
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

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.

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

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 include 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 2024

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.

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

2. Accounting policies (continued)

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.

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.

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

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 2024

4. Income from donations and grants

	Unrestricted funds 2024 £	Total funds 2024 £
Donations and grants	5,683	5,683
Corporate donations/ membership	189,168	189,168
Legacy donations	209,500	209,500
Total 2024	<u>404,351</u>	<u>404,351</u>
	<i>Unrestricted funds 2023 £</i>	<i>Total funds 2023 £</i>
Donations and grants	5,115	5,115
Corporate donations/membership	233,390	233,390
Legacy donations	79,593	79,593
<i>Total 2023</i>	<u>318,098</u>	<u>318,098</u>

5. Income from charitable activities

	Unrestricted funds 2024 £	Total funds 2024 £
Helpline and Information Services	17,500	17,500
Performance-related grants	265,854	265,854
Total 2024	<u>283,354</u>	<u>283,354</u>

THE PATIENTS ASSOCIATION
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

5. Income from charitable activities (continued)

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

6. Income from other trading activities

Income from fundraising events

	Unrestricted funds 2024 £	Total funds 2024 £
Event income	11,390	11,390

	<i>Unrestricted funds 2023 £</i>	<i>Total funds 2023 £</i>
Event income	3,092	3,092

7. Investment income

	Unrestricted funds 2024 £	Total funds 2024 £
Bank interest receivable	9,497	9,497

THE PATIENTS ASSOCIATION
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

7. Investment income (continued)

	<i>Unrestricted funds 2023 £</i>	<i>Total funds 2023 £</i>
Bank interest receivable	6,072	6,072

8. Expenditure on raising funds

	Unrestricted funds 2024 £	Total funds 2024 £
Direct costs - Staff costs	112,463	112,463

	<i>Unrestricted funds 2023 £</i>	<i>Total funds 2023 £</i>
Direct costs - Staff costs	65,482	65,482

THE PATIENTS ASSOCIATION
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

9. Analysis of expenditure by charitable activities

	Activities undertaken directly 2024 £	Support costs 2024 £	Total funds 2024 £
Helpline and Information Services	149,625	22,337	171,962
Influencing Policy and Practice	300,417	44,679	345,096
Total 2024	<u>450,042</u>	<u>67,016</u>	<u>517,058</u>
	<i>Activities undertaken directly 2023 £</i>	<i>Support costs 2023 £</i>	<i>Total funds 2023 £</i>
Helpline and Information Services	142,484	24,810	167,294
Influencing Policy and Practice	316,987	49,621	366,608
<i>Total 2023</i>	<u>459,471</u>	<u>74,431</u>	<u>533,902</u>

THE PATIENTS ASSOCIATION
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

9. Analysis of expenditure by charitable activities (continued)

Analysis of support costs

	Total funds 2024	<i>Total funds 2023</i>
	£	£
Depreciation	1,848	982
Rent and rates	2,455	390
Recruitment expenses	2,291	1,956
Communication costs	21,644	21,840
Consultancy costs	12,316	19,960
Advertising and marketing	2,030	1,896
Travel and subsistence	3,891	2,225
Printing, postage and stationery	758	2,806
Subscriptions	1,587	2,341
Bank charges	74	74
Governance costs	13,216	16,629
Other costs	4,906	3,078
Loss on disposal of fixed assets	-	254
Total 2024	67,016	74,431

Governance costs are analysed in Note 10.

10. Governance costs

	2024	<i>2023</i>
	£	£
Insurance	2,071	3,205
Independent Examiners' Remuneration	2,930	3,940
Bookkeeping & accountancy costs	7,150	8,774
Other costs	1,065	710
	13,216	16,629

THE PATIENTS ASSOCIATION
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

11. Staff costs

	2024	<i>2023</i>
	£	£
Wages and salaries	371,700	306,227
Social security costs	32,923	26,845
Pension scheme contributions	10,947	9,544
	415,570	342,616

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

	2024	<i>2023</i>
	No.	No.
Staff	10	9

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

	2024	<i>2023</i>
	No.	No.
In the band £70,001 - £80,000	-	1
In the band £80,001 - £90,000	1	-

The total amount of employee benefits, including employers social security costs, received by Key Management Personnel of the Charity was £92,695 (2023: £86,046). 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 (2023: £NIL).

12. Trustees' remuneration and expenses

During the year, no Trustees received any remuneration or other benefits (2023 - £NIL).

During the year ended 31 December 2024, £196 of expenses were reimbursed to 1 Trustee (2023: £NIL). These reimbursements were for meeting and travelling costs.

THE PATIENTS ASSOCIATION
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

13. Tangible fixed assets

	Computer equipment £
Cost or valuation	
At 1 January 2024	5,710
Additions	3,583
At 31 December 2024	<u>9,293</u>
Depreciation	
At 1 January 2024	3,744
Charge for the year	1,849
At 31 December 2024	<u>5,593</u>
Net book value	
At 31 December 2024	<u>3,700</u>
<i>At 31 December 2023</i>	<u>1,966</u>

THE PATIENTS ASSOCIATION
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

14. Debtors

	2024	2023
	£	£
Due within one year		
Trade debtors	53,812	46,681
Amounts owed by group undertakings	3	3
Other debtors	31	32
Prepayments and accrued income	74,000	74,000
	127,846	120,716

15. Creditors: Amounts falling due within one year

	2024	2023
	£	£
Trade creditors	860	6,539
Other taxation and social security	23,531	25,102
Accruals and deferred income	6,031	11,580
	30,422	43,221

	2024	2023
	£	£
Deferred income		
Deferred income at 1 January	5,000	54,000
Resources deferred during the year	-	5,000
Amounts released from previous periods	(5,000)	(54,000)
Deferred income at 31 December	-	5,000

Deferred income represents income received in 2024 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 2024

16. Statement of funds

Statement of funds - current year

	Balance at 1 January 2024 £	Income £	Expenditure £	Balance at 31 December 2024 £
Unrestricted funds				
General unrestricted funds	397,282	708,592	(629,522)	476,352

Statement of funds - prior year

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

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 2024

17. Analysis of net assets between funds

Analysis of net assets between funds - current period

	Unrestricted funds 2024 £	Total funds 2024 £
Tangible fixed assets	3,700	3,700
Current assets	503,074	503,074
Creditors due within one year	(30,422)	(30,422)
Total	<u>476,352</u>	<u>476,352</u>

Analysis of net assets between funds - prior period

	<i>Unrestricted funds 2023 £</i>	<i>Total funds 2023 £</i>
Tangible fixed assets	1,966	1,966
Current assets	438,537	438,537
Creditors due within one year	(43,221)	(43,221)
Total	<u>397,282</u>	<u>397,282</u>

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

	2024 £	2023 £
Net income for the period (as per Statement of Financial Activities)	<u>79,070</u>	<u>88,295</u>
Adjustments for:		
Depreciation charges	1,848	982
Investment income	(9,497)	(6,072)
Loss on the sale of fixed assets	-	254
(Increase)/ decrease in debtors	(7,130)	(20,655)
Increase/ (decrease) in creditors	(12,799)	(55,503)
Net cash provided by operating activities	<u>51,492</u>	<u>7,301</u>

THE PATIENTS ASSOCIATION
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

19. Analysis of cash and cash equivalents

	2024	2023
	£	£
Cash in hand	375,229	317,821
Total cash and cash equivalents	375,229	317,821

20. Analysis of changes in net debt

	At 1 January 2024	Cash flows	At 31 December 2024
	£	£	£
Cash at bank and in hand	317,821	57,408	375,229
	317,821	57,408	375,229

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 £10,964 (2023: £9,543) in the year. An amount of £1,874 (2023: £1,590) was due to the independently administered fund at the year end.

22. Operating lease commitments

At 31 December 2024 the Charity had commitments to make future minimum lease payments under non-cancellable operating leases as follows:

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

	2024	2023
	£	£
Operating lease rentals	-	1,071

THE PATIENTS ASSOCIATION
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

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 (2023: 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 2024:	£3
Total liabilities as at 31 December 2024:	£3
Total equity as at 31 December 2024:	£Nil

Turnover for the year ended 31 December 2024:	£Nil
Expenditure for the year ended 31 December 2024:	£Nil
Taxation for the year ended 31 December 2024:	£Nil
Profit for the year ended 31 December 2024:	£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.