



**Facial Palsy UK**  
(A company limited by guarantee)

**Report and Unaudited Financial Statements  
For the Period Ended 30 June 2014**

**Charity numbers 1148115 and SC045086  
Company number 8107184**

**Facial Palsy UK**  
(A company limited by guarantee)

**Financial Statements**  
**For the Period Ended 30 June 2014**

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## **Facial Palsy UK**

### **Report of the Directors and Trustees for the period ended 30 June 2014**

The Directors and Trustees (henceforth referred to as the Trustees) present their directors' report and independently examined financial statements for the period from 1 July 2013 to 30 June 2014.

#### **Reference and Administrative Information**

Charity name:	Facial Palsy UK
Charity registration numbers:	1148115 and SC045086
Company registration number:	8107184
Registered Office:	c/o Goldwins Ltd, 75 Maygrove Road, London, NW6 2EG
Operational address:	PO Box 1269 Peterborough PE1 9QN

#### **Directors/Trustees**

Charles Nduka (Chair and Acting CEO)	
Vanessa Venables	
Fiona Hawthorne	
Sean Cufley	until 8 November 2013
Louise Watson	from 13 October 2013
Alison Sweeting	from 18 December 2013

**Independent Examiner** - Goldwins, 75 Maygrove Road, West Hampstead, London, NW6 2EG

**Bankers** - HSBC, 125 Church Road, Hove, East Sussex, BN3 2AN

#### **Patrons**

Facial Palsy UK invites well-known, respected people to be Patrons. They receive feedback about the charity's work but do not have any decision-making powers. They are:

Jason Flemyng  
John Sudworth  
Nick and Susie Cave  
Sir Paul McCartney, MBE

## Councils

The Trustees are advised and supported in their work by the following bodies with no decision-making powers:

- The Medical Advisory Board composed of a multi-disciplinary group of experts in the field of facial palsy.
- Charity Representatives - people with personal experience of facial palsy are consulted for feedback on specific issues relevant to their experience, and help guide the work of the charity.

## Our Aims and Objectives

### Purposes and Aims

Our charity's purposes as set out in the objects contained in the company's memorandum of association are to:

- (i) improve the level of care and treatment of persons living with facial palsy by increasing awareness and understanding of facial palsy and its physical and psychological consequences;
- (ii) to assist the treatment and care of persons living with facial palsy by the provision of information, support, education and practical advice;
- (iii) to improve access to care by raising the profile of facial palsy and its consequences, through education and training of healthcare professionals, where such education and training is not normally provided by the statutory authorities;
- (iv) to raise funds to support and sponsor research and training for healthcare professionals involved in the management and treatment of facial palsy, where such activities are not normally provided by the statutory authorities;
- (v) to be an advocate for the facial palsy community in the development of service provision, education and research.

The aims of our charity are to increase awareness of facial palsy and its social, physical and psychological consequences, to improve the physical and emotional health of adults and children with facial palsy, and to promote diagnosis, acute and long-term management and rehabilitation of people living with facial palsy. Our aims fully reflect the purposes that the charity was set up to further.

### Ensuring our work delivers our aims

We review our aims, objectives and activities each year. This review looks at what we achieved and the outcomes of our work in the previous 12 months. The review looks at the success of our activities and the benefits they have brought to those groups of people we are set up to help. The review also helps us ensure our aims, objectives and activities remain focused on our stated purposes. We have referred to the guidance contained in the Charity Commission's general guidance on public benefit when reviewing our aims and objectives and in planning our future activities. In particular, the trustees consider how planned activities will contribute to the aims and objectives they have set.

## The rationale for Facial Palsy UK's work

The term facial palsy generally refers to weakness of the facial muscles, mainly resulting from temporary or permanent damage to the facial nerve. We take the simplest things for granted in our lives: the ability to close our eyes for sleep at night, to hold food in our mouth as we eat, to kiss our loved ones, and to smile or even frown. All these actions are controlled by the nerves in our face, meaning those with facial palsy cannot necessarily perform these functions. Added to the frustration of living with facial palsy is the public perception that the condition is purely a cosmetic issue, rather than a functional one affecting communication (facial expression), eating and drinking, and the closure of the eye on the affected side. There is also lack of awareness about the condition facial palsy and children repeatedly report being bullied throughout their school days.

The need for a charity specifically for facial palsy was recognised following the development of the Facial Palsy Clinic at the Queen Victoria Hospital in East Grinstead. In 2009, Consultant Plastic and Reconstructive Surgeon Charles Nduka, who set up the service, conducted a survey and in conjunction with patient feedback noted that:

- The average duration between the onset of paralysis and referral to a specialist for treatment was 5.6 years, which means that there is a huge unmet need for help.
- Patients were travelling from across the UK (including Northern Ireland and Scotland) in order to be seen.
- The information that patients had been given by some health professionals was incorrect and might impact negatively on their outcome.
- There were limited resources in the community to support patients, their relatives and partners.

Whilst existing charities help and support some patients with specific causes of facial palsy (such as the British Acoustic Neuroma Association, or the Bell's Palsy Association), many patients do not fall within any recognised group and were therefore without support.

## The focus of our work

Our main objectives for the year have been to improve the support and information available for people affected by facial palsy and also to increase awareness of the condition and how it impacts on the lives of those affected. The methods we used to meet these objectives included:

- Providing unbiased support by telephone and email, signposting to relevant services.
- Tracking Tweets and Google mentions about facial palsy, reaching out to anyone who is experiencing a difficult time and may benefit from our support.
- Setting up a 'Health Unlocked' community which gives people a platform to communicate with others who understand and have personal experience of their situation.
- Distributing literature about the charity and promoting our local support groups.
- Networking with health professionals and other charities, as well as attending conferences for conditions which cause facial palsy and distributing information about our services.
- Providing support networks: putting people in touch with others who share experiences.
- Improving our website with further information about the condition; all of which has been verified by relevant health professionals and meets necessary timeliness requirements.

- A media campaign highlighting the real issues faced by people living with facial palsy and the need for greater awareness.
- Expanding our Medical Advisory Board ensuring more specialists across the field are represented. We also set up a Research sub-committee towards the end of the year including a patient representative.
- Providing advocacy services.
- Approaching health professionals to help set up more support groups around the country.
- Making printed information guides available to people without access to the internet.
- Seeking feedback from people with facial palsy about services they need, our future poster campaigns (ensuring sensitivity and putting across the right message), and the type of health care they need or are receiving.
- Empowering people with facial palsy to volunteer for the charity, therefore improving self-esteem and reducing social isolation.

### **How our activities deliver public benefit**

Our main activities and those who we try to help are described below. Our charitable activities focus on improving support and information for people affected by facial palsy, improving treatment options and access to care for patients, and supporting and sponsoring education and research in this area.

### **Who used and benefited from our services?**

We are a national charity registered in England and Wales, and more recently in Scotland (from September 2014). However, as we are the only charity to specifically support people affected by facial palsy due to any cause, we receive telephone calls and emails from all over the world. We operate in England and Wales in accordance with Charity Commission guidelines and in Scotland in accordance with the Office of the Scottish Charity Regulator. Due to poor record keeping and a lack of understanding of the condition, it is difficult to give accurate numbers on the percentage of the population affected by facial palsy. The condition has over 30 different causes and there are estimated to be at least 100,000 people affected in the UK.

### **Support and Information**

We received approximately 390 support enquiries over the past year. These have come from people with the condition, family members, friends, teachers, carers, GPs, surgeons, speech therapists, physiotherapists and more.

We currently have one full-time employee, our charity Coordinator and Communications Officer, who deals with all initial enquiries as well as all operational requirements. Requests for support and information are received by email, telephone and post, our Health Unlocked forum and via social media channels such as Twitter and Facebook.

We have given support to people affected by the following conditions: acoustic neuroma, facial nerve neuroma, congenital facial palsy, facial palsy due to birth trauma, Moebius syndrome, Bell's palsy, Guillain-Barre syndrome, Melkersson-Rosenthal syndrome, NF2, Ramsay Hunt syndrome, Stroke, head trauma, CHARGE syndrome, asymmetric crying facies, metastatic breast cancer,

salivary gland tumour, arteriovenous malformation and more. Occasionally we receive support enquiries from people who have been left with facial nerve damage after cosmetic procedures.

We received over 72,500 unique visitors to our website in the past year, this is an increase of 303% compared to our first year. We also delivered information via social media. By the end of June we had 345 Twitter followers and 688 Facebook Likes. We have been fairly conservative in growing our social media following; ensuring people who like or follow us are relevant and have a genuine interest in the work of the charity.

We are now linked by the NHS website, Patient UK and other respected websites, which has helped our search engine positions. We are also receiving a Google Adwords grant and as a result are reaching many more people in our second year as a charity.

Many people are unsure how to access the help they need, often because GPs are also unsure about the different services available for people with facial palsy. There is a lack of understanding about the functional, social and psychological consequences of the condition, which makes it difficult for people to access appropriate treatment. Some people find it difficult to put into words the problems they are having and are embarrassed to broach the subject with their GP. Often people are told to learn to live with it or that their problems could be much worse, and they find it difficult to justify why they need help. Talking things through with the charity reassures people that their concerns are valid and gives them the confidence to approach their GP and access further help.

In the past year we have supported people by signposting them to organisations, relevant sections on our website or by simply offering a friendly ear. We received numerous enquiries asking how patients can get referred and where they should get referred to. The Charity does not make recommendations concerning any aspect of treatment and so it is challenging to meet the needs of patients who are frustrated by the lack of information available; which is why our awareness campaign is so important. There is also the added complication of geographical differences in service provision; some NHS treatments are only available to people in certain areas of the country.

Complex medical enquiries were referred to relevant health professionals. Where there was no one appropriate on our Medical Advisory Board who could help, we contacted relevant organisations until we found the best person to answer the enquiry.

People contacted us with a range of issues related to their facial palsy, including problems with eating (food spilling from the mouth), eye closure, facial pain, hearing problems and breathing difficulties (due to nasal collapse).

Parents of children who were becoming reclusive due to being unable to smile contacted us for help. Parents of very young children diagnosed with Bell's palsy contacted us for guidance and support. Parents of school age children wanted literature that they could take into school to explain about their child's condition. Elderly people contacted us because they were still suffering but not receiving follow up care. Some people contacted us about slow onset facial paralysis and undiagnosed hearing loss and facial paralysis, having been diagnosed with Bell's palsy. We were able to arm them with questions and information to take back to their GPs. Many people were not sure if they were eligible for treatment on the NHS. Some people have taken a long time to find

out about possible surgeries or treatments and the relevant health professionals who perform them, only to be told the surgery is deemed cosmetic and therefore not eligible for NHS funded care.

Some people contacted us after they had been denied access to pubs and nightclubs because security staff mistakenly believed them to be intoxicated due to their slurred speech and facial appearance. We contacted the individual venues to inform them about facial palsy and the treatment these individuals had received, we sent leaflets and asked for them to be distributed to their security staff and training given. We also contacted the Security Industry Authority to ask them what is included in their training package for security personnel in relation to disability or disfigurement. As a result of this contact, information on this topic has now been expanded within the new SIA training qualification and also includes specific training on dealing with vulnerable individuals.

Speech therapists and other health professionals contacted us for more information about the condition and we are receiving an increasing number of enquiries from health professionals seeking training in this area.

We received support enquiries from parents and grandparents of children born with facial palsy. New parents face a period of uncertainty to see if the palsy resolves with time and mothers particularly talked about feeling guilty that they in some way caused the palsy. We received an increased number of enquiries in our second year from people with Bell's palsy, the most common cause of facial paralysis. People are concerned when they are diagnosed with a condition which has such a great impact on their daily life because normal feedback from GPs is that *most* people make a full recovery, but there are no guarantees. The lack of information given leads people to look for self-help online, such as facial exercises on YouTube. Our role has been very much about reassuring people that they need to rest their face like they would with any other kind of injury to the body and to explain when is the *right time* to seek a referral to a facial therapist. We also reinforce the need for eye care and explain symptoms of dry eye which are often misunderstood.

Bell's palsy is more common in women in the last trimester of pregnancy and we received enquiries from women who have received very little follow-up care even though many are experiencing ongoing symptoms including pain.

As with the previous year we struggled to help a small percentage of people who needed Outreach support because we had insufficient funding to provide this kind of service. We sometimes receive phone calls from people who cannot access local support groups, e.g. due to terminal illness, being elderly or living in a remote area. These people would benefit from a home visit from a representative of the charity. In May 2014 we were successful in our application to a trust for funding for two outreach and support coordinator posts, roles which will commence from September 2014.

At the end of June 2014 we have four Facial Palsy UK Support Groups, our existing groups in Newcastle and East Grinstead continue to be well attended with approximately 30 members in each group. We launched new quarterly support groups in Bristol and Manchester in October 2013, both new groups are run by a volunteer health professional and co-facilitated by a volunteer with facial palsy. Both groups have 13 attending members. Part of the role of the new support

coordinators will be to set up new support groups across England, Scotland and Wales. Plans are already underway for new groups in Norwich, London, Cornwall and Cardiff.

We monitored health care questions received and planned improvements to Patient Guides.

More than 200 people took part in a comprehensive survey about Bell's palsy compiled with the help of our Medical Advisory Board.

### Raising awareness

Nine new personal stories were submitted by people for use on the website throughout the year. Fourteen media volunteers have featured in a variety of different media channels in the past year including popular magazines, medical publications, local television, radio and newspapers. People have come forward for support after reading similar experiences to their own and feel empowered to ask for the help they deserve. Patient experiences described on the website such as the article about cognitive behavioural therapy (CBT) have led to more people seeking therapy that has the potential to be hugely beneficial to them. Many people are unsure what their condition is called having never received a proper diagnosis and now they have a greater understanding of the kind of services that may be available to them.

We received £6,650 funding towards an Awareness Campaign during the year and have now collated address details for 2,738 relevant hospital departments in NHS Acute Hospital Trusts in England where we plan to distribute literature and posters highlighting the support we offer. We will be seeking additional funding to target Wales and Scotland.

One of the key areas where we have been raising awareness is the treatment of Bell's palsy patients, as receiving the correct medical treatment within 72 hours can be vital to the recovery outcome. This issue was highlighted in articles in The Guardian and the Daily Express during the year.

### **Fundraising**

We are very grateful for all the donations, grants and pro bono support Facial Palsy UK has received in our second year. These include:

#### *Support from charitable trusts and corporates*

We acknowledge gifts from:

- The Allergan International Foundation (Awareness Campaign)
- Kestrel Ophthalmics (Awareness Campaign)
- The Carmichael and Mason Charitable Trust
- The Leach Fourteenth Trust

#### *Individuals, school and community groups*

- Individual fundraisers raised in excess of £26,000, doubling last year's amount and accounting for approx. 48% of our annual income for the year, this is an incredible

achievement and we are very grateful to all those who took part in a wide range of activities. Team spirit embraced by individuals has played a huge part in generating funds, so we also thank all those who inspire others to support our cause.

- Many individuals made donations to Facial Palsy UK throughout the year including one of £5,000.

#### *Pro bono support*

We are very grateful for the pro bono support we received from:

- CMS Cameron McKenna LLP for assisting with our application to the Scottish Charity Regulator.

#### *Training support*

- We received free training to the value of £930 via the Foundation for Social Improvement

Facial Palsy UK has also received many other gifts of time and advice from individuals and organisations throughout the year.

**We wish to thank every single person and organisation who has supported Facial Palsy UK in any way throughout the year. Every gift is used carefully to improve the lives of people affected by facial palsy.**

## Financial Review

In the first year of the charity's life (2012/13) there were start-up costs for advertising and marketing. Our first year deficit was facilitated by a loan of £17,000 from the charity's founder and Trustee, Charles Nduka. As funds become available this loan will be repaid. An additional £3,000 was loaned to the charity by Mr Nduka in September 2013, also to be repaid. The financial focus in 2013/14 was on keeping costs to a minimum, engaging volunteers, diversifying income streams and applying for funds to enable specific projects to proceed.

Funding of £21,321 has been approved for a two-year period - 2014/16 for our Support Services project (plus an additional £10,661 if we can secure match funding).

Expenditure is expected to rise in 2014/15 as we plan to take on an additional part-time member of staff to meet growing operational demands. We will also need to consider finding affordable office premises if sufficient funding can be secured. We recently signed up for Virgin Giving with the intention of reducing online donation charges.

### Income

Total unrestricted income from donations and fundraising increased by 80%, to £46,733 (2013: £25,896).

### Expenditure

Expenditure increased by 1.3%, to £41,990 (2013:£41,436). We paid one full-time member of staff throughout the 12 months compared to over a 4.5 month period the year before.

### Principal Funding Sources

The principal funding sources for the charity this year have been from individual fundraisers (£26,069), trusts (£8,500) and major donors (£5,000), with the rest made up of general donations, merchandise sales, event income, affiliate scheme income, payroll giving, regular giving and gift aid income. The charity was set up to meet the needs of people who have lived without support for many years, and we are therefore enthusiastically supported by the facial palsy community in our fundraising efforts. As a fledgling charity we have not yet received any legacy funding but we are beginning to attract more major donor income and project specific income.

### Investment and Reserves Policy

Going forward the charity needs to establish a policy whereby the unrestricted funds not committed or invested in tangible fixed assets held by the charity should be between 3 and 6 months of the expenditure. Budgeted expenditure (core costs) for 2014/15 is £49,000. Reserves between £12,250 and £24,500 would be needed to meet the current working capital requirements of the charity in the event of unforeseen circumstances arising.

## Plans for the future

The charity plans to continue the activities outlined above in the forthcoming years. Other future projects include:

### Awareness

- A general Awareness Campaign placing literature and posters in hospital clinics.
- A national competition to create an image that best explains the nature and impact of facial palsy using any 2-dimensional medium.
- Creating a children's book explaining what it is like for someone with facial palsy.
- Working with documentary producers to create information films about facial palsy.
- Investigating how we can use modern technology to demonstrate the full impact of facial palsy.

### Support

- Support services project (two support coordinators will set up additional support groups and provide outreach support) - funding confirmed for year 1 for 2014/5.
- Support Workshops for people affected by facial palsy, e.g. non-verbal communication skills, assertiveness, back to work, parents and children, appearance, intimacy issues, Bell's palsy in pregnancy.
- Build a database of treatment providers
- Family Days for children affected by facial palsy - first date 13/09/14
- Provide an information pack for newly diagnosed Bell's palsy patients

### Education and training

- Support the delivery of effective training of therapists for facial palsy clinics
- Provide literature to support health professionals who treat patients with facial palsy - prioritising a comprehensive Bell's palsy information leaflet for GPs.
- Increase the amount of information available on our website for health professionals
- Identify where there are geographical gaps in NHS treatment provision for patients with facial palsy and endeavour to improve services.

### Research

- Call for submissions from UK Academic Institutions to discover the true scale of long-term facial palsy based on data collected in primary and secondary care.
- Instigate a pilot study to evaluate the psychological, social and physical impacts of facial palsy in the UK.
- Establishment of Facial Palsy UK's research advisory committee. This will advise on research proposals on which the charity has been consulted. Members may be co-opted onto research projects as part of Patient and Public Involvement.
- Raise funds (£20k) for a partnership with the James Lind Alliance – helping us understand what questions patients, carers and health professionals think are the priorities to answer. Our aim is to ensure that facial palsy becomes a research priority within the NHS.

## **Structure, Governance and Management**

### Governing Document

The organisation is a charitable company limited by guarantee, incorporated on 15/06/2012 and registered as a charity on 16/07/2012. The company was established under a Memorandum of Association which established the objects and powers of the charitable company and is governed under its Articles of Association as amended by Special Resolution 06/07/2012. In the event of the company being wound up members are required to contribute an amount not exceeding £1.

### Recruitment and Appointment of Trustees

The directors of the company are also charity trustees for the purposes of charity law. Under the requirements of the Memorandum and Articles of Association, one third (or the nearest one third) of the Trustees must retire at each AGM each year, those longest in office retiring first and the choice between any of equal service being made by drawing lots. Eligible retiring Trustees may be reappointed.

All Trustees give their time voluntarily and received no benefits from the charity. Any expenses reclaimed from the charity are set out in note 5 to the accounts.

Mrs A Sweeting was co-opted as a member of the Board on 18 December 2013 and will be re-appointed at the AGM.

The Trustees seek to ensure that the needs of people with facial palsy are appropriately reflected through the diversity of the trustee body. To enhance the potential pool of trustees, the charity is seeking interested parties from the facial palsy community and other individuals with experience which will help us achieve our goals.

Relevant medical skills and NHS management experience are well represented on the Trustee Board, and we also have a trustee with charity experience. Two of our trustees have personal experience of facial palsy. Trustees are requested to provide a list of their skills and update it each year. In the event of particular skills being lost due to retirements, individuals are approached to offer themselves for election to the Board of Trustees.

### Trustee Induction and Training

All new trustees will be sent all relevant documents which set out the operational framework for the charity including the Memorandum and Articles and details of the current financial position as set out in the published accounts. They will also be given copies of our latest Business and 3-year Strategic Plan, as well as have an introductory discussion with the Chair and Acting CEO and other members of the Trustee Board. They are also signposted to relevant information on the Charity Commission website about 'the Essential Trustee'. They are given the opportunity to attend inexpensive relevant training courses offered through the Small Charities Coalition or The Foundation for Social Improvement if they want to improve their skills and knowledge in a particular area which will benefit our charitable activities.

## Policies and Procedures

In our first year we put in place comprehensive policies and procedures to ensure we have a solid platform to build on (e.g. data protection, data backup, confidentiality, health and safety, equal opportunities, diversity, anti-fraud, conflict of interest, ethical fundraising, volunteers, volunteer induction, bullying and harassment, risk assessment and management, child protection, photography, whistleblowing, safeguarding vulnerable adults, recruitment, privacy, complaints and more.) Procedures and policies will be periodically reviewed to ensure that they continue to meet the needs of the charity, comply with relevant legislation and new ones added where appropriate.

## Risk Management

As part of our Business Plan the Trustees conducted a review of the major risks to which the charity is exposed. A risk register has been established and will be updated at least annually. We have taken particular care in ensuring we meet government and charity commission guidelines with our planned activities. We have also agreed a protocol for disclosure of potential conflicts of interest.

Key risks include:

- financial risks – the challenging economic climate means it is a difficult time for any business start-up. We need to diversify our funding sources and establish regular income streams.
- operational risks – we are currently operating with just one paid member of staff who is supported by a team of volunteers. We need to increase numbers of volunteers and take on additional staff as soon as funds allow. We would also benefit from additional trustees who would be willing to assist with operations management during this time of growth.

## Organisational Structure

Facial Palsy UK has a Trustee Board of up to 10 members who meet quarterly and are responsible for the strategic direction and policy of the charity. At present the board has five members from a variety of professional backgrounds relevant to the work of the charity.

A scheme of delegation is in place and day to day responsibility for the provision of the services rest with the Acting Chief Executive Officer along with Coordinator and Communications Officer. The Acting CEO is responsible for ensuring that the charity delivers the services specified and that key performance indicators are met. The Coordinator and Communications Officer has responsibility for the day to day operational management of the charity.

## Related Parties

The charity understands the importance of working with other relevant organisations whose services may be useful to our beneficiaries and vice versa. We liaise with organisations such as Changing Faces, Hearing Link, British Acoustic Neuroma Association, The Moebius Research Trust and the Neuro Foundation to ensure we are not duplicating services, and promote services they

are offering which may be of use to our contacts. Going forward we would expect to further our partnerships with relevant organisations.

### **Statement of responsibilities of the Trustees**

Company law requires the Trustees to prepare financial statements for each financial year which give a true and fair view of the state of the affairs of the charitable company as at the balance sheet date and of its incoming resources and application of resources, including income and expenditure, for the financial year. In preparing those financial statements, the Trustees should follow best practice and:

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

The Trustees are responsible for maintaining proper accounting records which disclose with reasonable accuracy at any time the financial position of the charitable company and to enable them to ensure that the financial statements comply with the Companies Act 2006. The Trustees are also responsible for safeguarding the assets of the charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

### **Members of the Trustee Board**

Members of the Trustee Board, who are directors for the purpose of company law and trustees for the purpose of charity law, who served during the year and up to the date of this report are set out on page 3.

In accordance with company law, as the company's directors, we certify that:

- so far as we are aware, there is no relevant information of which the company's independent examiners are unaware; and
- as the directors of the company we have taken all the steps that we ought to have taken in order to make ourselves aware of any relevant audit/independent examination information and to establish that the charity's independent examiners are aware of that information.

### **Independent Examiner**

Goldwins Limited was appointed as the charitable company's independent examiner during the year. They are willing to continue in office and a resolution to reappoint them will be proposed at the Annual General Meeting.

This report has been prepared in accordance with the Statement of Recommended Practice - Accounting and Reporting by Charities and in accordance with the special provisions of Part 15 of the Companies Act 2006 relating to small companies and with the Statement of Recommended Practice – Accounting and Reporting by Charities.

Approved by the Board of Trustees on 22 November 2014 and signed on its behalf by:

A handwritten signature in black ink, appearing to be 'Mr C Nduka', written over a faint horizontal line.

**Mr C Nduka (Director)**

## **Independent Examiners' Report to the Trustees on the unaudited accounts of Facial Palsy UK**

I report on the accounts of the company for the period ended 30 June 2014 which are set out on pages 18 to 22.

### **Respective responsibilities of Trustees and Examiner**

The Trustees (who are also the directors of the company for the purposes of company law) are responsible for the preparation of the accounts. The charity's trustees consider that an audit is not required for this year under section 144 of the Charities Act 2011 (the 2011 Act) and that an independent examination is needed.

Having satisfied myself that the charity is not subject to audit under company law and is eligible for independent examination, it is my responsibility to:

- examine the accounts under section 145 of the 2011 Act;
- to follow the procedures laid down in the General Directions given by the Charity Commission under section 145(5)(b) of the 2011 Act; and
- to state whether particular matters have come to my attention.

### **Basis of Independent Examiner's Report**

My examination was carried out in accordance with the General Directions given by the Charity Commission. An examination includes a review of the accounting records kept by the charity and a comparison of the accounts presented with those records. It also includes consideration of any unusual items or disclosures in the accounts, and the seeking of explanations from you as trustees concerning any such matters. The procedures undertaken do not provide all the evidence that would be required in an audit and, consequently, no opinion is given as to whether the accounts present a 'true and fair view' and the report is limited to those matters set out in the statement below.

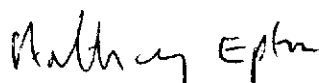
### **Independent Examiner's Statement**

In connection with my examination, no matter has come to my attention:

- Which gives me reasonable cause to believe that, in any material respect, the requirements
  - a. to keep accounting records in accordance with section 386 of the Companies Act 2006; and
  - b. to prepare accounts which accord with the accounting records, comply with the accounting requirements of the Companies Act 2006 and with the methods and principles of the Statement of Recommended Practice: Accounting and Reporting by Charities (revised 2005).

have not been met; or

- to which, in my opinion, attention should be drawn in order to enable a proper understanding of the accounts to be reached.



**Anthony Epton BA, FCA, CTA, FCIE**  
**Goldwins Chartered Accountants**  
**75 Maygrove Road**  
**West Hampstead**  
**London NW6 2EG**

Date: 27 November 2014

**Facial Palsy UK**  
**Statement of Financial Activities (including Income & Expenditure Account)**  
**for the period ended 30 June 2014**

		<u>Restricted</u>	<u>Unrestricted</u>	<u>2014 Total</u>	<u>2013 Total</u>
		<u>Funds</u>	<u>Funds</u>		
	<u>Notes</u>	£	£	£	£
<b>Incoming Resources</b>					
<u>Voluntary Income</u>					
Donations		-	44,286	44,286	10,567
Fundraising		-	2,447	2,447	15,329
Trading Income		-	658	658	-
		-	47,391	47,391	25,896
Investment Income		-	3	3	-
<b>Incoming Resources from Generated Funds</b>		-	47,394	47,394	25,896
<b>Incoming Resources from Charitable Activities</b>					
Grants	2	6,650	-	6,650	-
Other Income		-	588	588	-
<b>Total Incoming Resources</b>		6,650	47,982	54,632	25,896
<b>Resources Expended</b>					
<b>Charitable Activities</b>		-	41,060	41,060	39,662
<b>Governance Costs</b>		-	930	930	1,774
<b>Total Resources Expended</b>	6	-	41,990	41,990	41,436
<b>Net Incoming Resources before Transfers</b>		6,650	5,991	12,641	(15,540)
<b>Transfers between Funds</b>		-	-	-	-
<b>Net Movement in Funds</b>		6,650	5,991	12,641	(15,540)
<b>Funds at 1 July 2013</b>		-	(15,540)	(15,540)	-
<b>Funds at 30 June 2014</b>		6,650	(9,549)	(2,899)	(15,540)

The statement of financial activities includes all gains and losses in the year. All incoming resources and resources expended derive from continuing activities.

The notes on pages 20 to 22 form part of these Accounts.

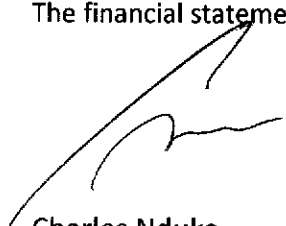
**Facial Palsy UK**  
**Balance Sheet as at 30 June 2014**

		<u>2014</u>	<u>2013</u>
	<u>Notes</u>	<u>£</u>	<u>£</u>
<b>Fixed Assets</b>			
Tangible Assets	8	<u>248</u>	<u>-</u>
		248	-
<b>Current Assets</b>			
Debtors	9	1,471	680
Cash at Bank and in Hand		<u>16,703</u>	<u>4,153</u>
		18,174	4,833
<b>Liabilities</b>			
Creditors: Amounts Falling Due Within One Year	10	21,321	20,373
<b>Net Current Assets</b>		(3,147)	(15,540)
<b>Net Assets</b>		<u>(2,899)</u>	<u>(15,540)</u>
<b>Funds</b>			
Restricted Funds		6,650	-
Unrestricted Funds		(9,549)	(15,540)
<b>Total Funds</b>		<u>(2,899)</u>	<u>(15,540)</u>

For the financial year ended 30 June 2014, the Company was entitled to exemption from audit under Section 477 of the Companies Act 2006, and no notice has been deposited under Section 476. The directors acknowledge their responsibilities for ensuring that the Company keeps accounting records which comply with Section 386 of the Act and preparing Financial Statements which give a true and fair view of the state of affairs of the Company as at the end of the period and of its profit or loss for the financial period in accordance with the requirements of Sections 394 and 395 and which otherwise comply with the requirements of the Companies Act 2006, so far as applicable to the Company.

The Financial Statements have been prepared in accordance with the special provisions relating to small companies within Part 15 of the Companies Act 2006 and in accordance with the Financial Reporting Standard for Smaller Entities (effective April 2008).

The financial statements were approved by the Board on 22 November 2014 and signed on its behalf by:

  
Charles Nduka  
Trustee

The notes on pages 20 to 22 form part of these Accounts

## Notes forming part of the Financial Statements for the period ended 30 June 2014

### 1. ACCOUNTING POLICIES

#### 1.1. Basis of preparation of financial statements

The financial statements have been prepared under the historical cost convention and in accordance with the Financial Reporting Standard for Smaller Entities (effective April 2008), the Companies Act 2006 and follow the recommendations in Accounting and Reporting by Charities: Statement of Recommended Practice issued in March 2005. The trustees recognise that there is a deficit of funds at 30 June 2014. They consider that it is appropriate to prepare the accounts on a going concern basis as the loan from Charles Nduka will not be repaid until funds are available.

#### 1.2. Income

This represents income from grants, donations and other fund raising activities. Donations are credited to the income and expenditure account in the year in which they are received.

#### 1.3. Resources expended

Resources expended are recognised in the period in which they are incurred and include attributable VAT which cannot be recovered and are categorised as follows:

Charitable activities comprise all expenditure directly relating to the objectives of the charity. Governance costs comprise all costs associated with constitutional and statutory requirements with which the charity must comply.

The costs of generating funds are those costs attributable to generating income for the charity.

#### 1.4. Unrestricted funds

Unrestricted funds are donations and other incoming resources receivable or generated for the objects of the charity without further specified purpose and are available as general funds.

#### 1.5. Designated funds

Designated funds are unrestricted funds earmarked by the Trustees for particular purposes.

#### 1.6. Restricted funds

Restricted funds are to be used for specific purposes as laid down by the donor. Expenditure which meets these criteria is charged to the fund, together with a fair allocation of management and support costs.

#### 1.7. Taxation

The charitable company is exempt from Corporation Tax on its charitable activities.

**Notes forming part of the Financial Statements for the period ended 30 June 2014 (Continued)**

2 Grants	2014	2013
	£	£
Awareness Campaign	6,650	-
	<u>6,650</u>	<u>-</u>

3 Net Incoming / (Outgoing) Resources before Transfers	2014	2013
	£	£
Are stated after charging:		
Depreciation	82	-
Independent Examiner's fee	900	450
Independent Examiner's fee prior year underprovision	30	-

**4 Staff Costs and Numbers**

Salaries and Agency Wages	25,000	9,271
Social Security Costs	2,379	841
	<u>27,379</u>	<u>10,112</u>

No employee received emoluments of more than £60,000 in the year.

5 Directors' Remuneration and Expenses	£	£
No Director received nor waived any remuneration during	-	-

**Trustees Expenses**

During the year one of the trustees has been reimbursed for the amount of £562. The amount related to travelling, accommodation and office supplies.

**6 Resources Expended**

Analysis of total resources expended	Charitable activities	Governance Costs	Total 2014	Total 2013
	£	£	£	£
<b>Unrestricted funds</b>				
Advertising & Marketing	5,299	-	5,299	19,439
Wages	27,379	-	27,379	10,112
Conference & Seminars	-	-	-	24
Insurance	394	-	394	476
IT Support	2,978	-	2,978	7,648
Legal expenses	-	-	-	1,200
Online donation charges	1,524	-	1,524	31
Postage, Freight & Courier	811	-	811	373
Printing & Stationery	468	-	468	520
Audit & Accountancy fee	-	900	900	450
Staff Training	290	-	290	45
Telephone & Internet	190	-	190	252
Travel-National	1,558	-	1,558	866
Depreciation	82	-	82	-
Sundry	117	-	117	-
<b>Total unrestricted resources expended</b>	<b>41,090</b>	<b>900</b>	<b>41,990</b>	<b>41,436</b>

**Notes forming part of the Financial Statements for the period ended 30 June 2014 (Continued)**

**7 Taxation**

All of the charity's income is applied for charitable purposes and therefore exempt from corporation tax.

**8 Tangible Fixed Assets**

	<b>Equipment 2014 £</b>
Cost:	
At 1 July 2013	-
Additions	330
At 30 June 2014	<u>330</u>
Depreciation:	
At 1 July 2013	-
Charge for Year	82
At 30 June 2014	<u>82</u>
Net Book Value at 30 June 2014	<u>248</u>

**9 Debtors**

	<b>2014 £</b>	<b>2013 £</b>
Stock	480	
Other Debtors and prepayments	200	200
Gift Aid receivable	791	480
	<u>1,471</u>	<u>680</u>

**10 Creditors: Amounts Falling Due Within One Year**

Taxation & Social Security	421	631
Accruals	900	2,742
Loan from Trustee	20,000	17,000
	<u>21,321</u>	<u>20,373</u>

**11 Movement on Restricted Funds**

	<b>As at 1.7.2013 £</b>	<b>Incoming Resources £</b>	<b>Outgoing Resources £</b>	<b>Returns &amp; Transfers £</b>	<b>As at 30.6.2014 £</b>
Allergan International Foundation Sponsorship	-	6,500	-	-	6,500
	-	150	-	-	150
<b>Total Restricted Funds</b>	-	<u>6,650</u>	-	-	<u>6,650</u>

**12 COMPANY STATUS**

The company is a private company limited by guarantee and consequently does not have share capital. Each of the members is liable to contribute an amount not exceeding £1 towards the assets of the company in the event of liquidation during the time that they are members or within 12 months afterwards.