



**Facial Palsy UK**

(A company limited by guarantee)

**Report and Unaudited Financial Statements  
For the Period Ended 30 June 2015**

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

**Facial Palsy UK**

(A company limited by guarantee)

**Financial Statements**

**For the Period Ended 30 June 2015**

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**Facial Palsy UK**

**Report of the Directors and Trustees for the period ended 30 June 2015**

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 2014 to 30 June 2015.

**Reference and Administrative Details**

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
Office premises as of May 2015:	Eventus, Sunderland Road, Northfields Industrial Estate Market Deeping Peterborough PE6 8FD

**Directors/Trustees**

Charles Nduka (Chair and Acting CEO)  
Vanessa Venables  
Fiona Hawthorne  
Louise Watson  
Alison Sweeting

**Management**

Karen Johnson (Deputy CEO)

**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. This incorporates a Research Committee with patient representative with 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.

## **Aims, Objectives and Activities**

### Purposes

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.

## Aims

Our aims fully reflect the purposes that the charity was set up to further:

- 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.
- To promote diagnosis, acute and long-term management and rehabilitation of people living with facial palsy.

## 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.

## 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 a 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 results of a follow up study were released in February 2015 to coincide with the charity's first Facial Palsy Awareness Week. The study considered 400 consecutive patients referred to the Facial Palsy (FP) Specialist Service at Queen Victoria Hospital, East Grinstead. It focussed on the time from onset of paralysis until referral for specialist treatment, as well as the prevalence of psychological side effects. The age range of patients varied from 2 to 97 years, with the average age being 51 years old. Surprisingly, the average interval between the onset of facial palsy and being seen at the specialist unit was still over 5 years, with only 46% of referrals coming from GPs and the rest from other hospitals/specialists. Over half of these patients reported significant symptoms of anxiety and/or depression.

## Objectives

Our main focus for the year has 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. This has been achieved by:

- Providing unbiased support by telephone and email, signposting to relevant services.
- Delivering eight local support groups.
- Hosting two family days, reducing isolation for children with facial palsy and their parents.
- Launching the first ever global 'Facial Palsy Awareness Week' 1-7 March 2015 which will be repeated each year. Case studies were featured in various newspapers and on BBC Breakfast.
- The development of guides for Health Professionals including 'Eye care in facial palsy patients' and 'Assessment and Management of Bell's palsy – a guide for GP's.'
- Tracking Tweets and Google mentions about facial palsy, reaching out to anyone who is experiencing a difficult time and may benefit from our support.
- 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 and in different geographical locations are represented.
- 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.
- Empowering people with facial palsy to volunteer for the charity, therefore improving self-esteem and reducing social isolation.
- Incorporating ideas and feedback from beneficiaries in our work.

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

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, Wales and Scotland. 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 a lack of understanding and a paucity of record keeping in relation to a diagnosis 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.

## **Achievements and performance**

With the invaluable support of 30 volunteers we have made significant progress in our third year as a charity.

### Support and Information

#### **4 new support groups in 2014/15 – 100% increase on previous year!**

In July 2014 we were awarded £21,321 payable over two years for our Support Services project. The desired outcomes were that people with facial palsy would have greater confidence generally, be more knowledgeable about their health care options, feel less isolated and be more confident about approaching health professionals for the help they need. We employed two part-time home based Support Coordinators on a 12 month contract to further develop our local support groups and to deliver outreach support as required. There were only three occasions during the year where home visits were deemed necessary. Due to each Support Coordinator only working one day per week, all of the day to day enquiries were dealt with by our Deputy CEO.

We analysed a nine month period where we supported 424 individuals who were either people with facial palsy, their carers or family members. We found that more than 50% of those who contacted us were now more knowledgeable about their health care options and 40% said they felt less isolated having spoken to Facial Palsy UK. Only 30% of people felt more confident about approaching health professionals suggesting greater awareness is still needed among GPs particularly. Just 11% felt they had more confidence generally.

In June we reviewed the way we were delivering this project and decided to restructure it in the second year to ensure greater efficiency, better use of funds and improved outcomes for people with facial palsy. We plan to employ an office based part-time Support and Information Worker

who will be available three days a week to take support enquiries. This person will also be tasked with improving networks with local health care providers so that people are made aware of the support we offer. We will also retain the services of a health professional to provide ad hoc outreach support and provide support group cover as required.

During the year we received enquiries from people with facial palsy, their carers, family members, other charities, teachers, health visitors, GPs, surgeons, speech therapists, physiotherapists and more. 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 give support to people affected by facial palsy due to ANY cause. There are over 30 different causes of facial palsy with the most common being Bell's palsy. Those working in a support role have to understand the many different and complex conditions which can cause facial palsy, these may be linked to infections, neurological causes, various tumours and cancers, trauma and more. Everyone's experience of facial palsy is different, therefore we often bring people together at a support group who have very different medical histories. For example they may also have hearing loss, balance issues or sight loss. Some people may also be receiving treatment for cancer, some may have a terminal diagnosis. The support groups are not a "one size fits all" and support group facilitators have to be able to manage a diverse group of people with a diverse set of problems ensuring everyone gets their turn to speak. We set up new local support groups during the year in Norwich, Cornwall, Edinburgh and the Midlands bringing our total to eight groups (100% increase on previous year). Edinburgh is our first group in Scotland.

We received over 194,000 unique visitors to our website in the past year, this is an increase of 167% compared to the previous year. We also delivered information via social media. By the end of June we had 695 Twitter followers (101% increase on previous year) and 1,314 Facebook Likes (91% increase on previous year). We are still being very 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. Facial Palsy Awareness Week was largely responsible for increasing our online presence.

People are still unsure how to access the specialist help they need and many are still being denied treatments which could greatly improve their quality of life. 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. Many people are frustrated at the lack of pathway for facial palsy patients. They complain that GPs do not know where to refer them to and information given about their recovery is misleading. Many are referred to general physiotherapists with no prior knowledge of treating faces. Patients often have to find the treatment information on the internet and then ask the GP to make the appropriate referral.

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

Parents of 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. Parents of children with facial palsy who were being bullied or becoming reclusive contacted us for help. Some children with facial palsy have not received follow up care



after starting school which has clearly affected their psychological wellbeing. We continue to receive support enquiries from parents 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 feelings of guilt that they in some way caused the palsy. We recognise that we need to improve the support and information available for parents when a child is born with facial palsy.

We delivered two Family Days during the year, the first in the south of the country was attended by 36 people (7 families) plus 5 staff/volunteers. The aim of the day was to reduce isolation for the children and parents, to improve confidence in children with facial palsy and to get people talking openly about the condition and their feelings. Feedback was very positive and we also heard that we needed to ensure that families had more opportunity to network during the day. The second Family Day was in the north of England making it accessible to those in Scotland as well, 27 people (7 families) attended plus 5 staff/volunteers. We learned from the previous event and this time the networking was much more successful with some families choosing to stay in contact afterwards and arranging their own further informal meetups. The last comment of the day was from a 9 year old who said "Thank you, this has been the best day of my life!"

As we know there are limited opportunities for children to meet others with facial palsy, we changed our AGM this year to a Saturday daytime event and organised family friendly activities. This was a success and we will repeat the format in 2015/16.

Some people reported repeated episodes of facial paralysis and were struggling to access appropriate help. 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 provided questions and information to take back to their GPs. Many people were unsure if they were eligible for treatment on the NHS. Some people have taken a long while 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 funding.

More 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 again 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 developed an awareness card (Claire's card) which was launched in Facial Palsy Awareness Week (1-7 March 2015) which people could use in situations like this.

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.

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. People are given varying information from health professionals in respect of recovery times, treatment available, etc. This vagueness and lack of information leads people to look for self-help online, such as facial exercises on YouTube, which can do more harm than good.

We recognise that the information on our website is not always easy to find or follow in respect of timelines, treatment options, etc. and needs improvement.

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.

Over the year we monitored health care questions received and planned improvements to Patient Guides. We also developed information guides for health professionals:

- Eye care in patients with facial palsy
- GP guide to the assessment and management of patients with Bell's palsy

#### Raising awareness & networks

October 2014:

- A young volunteer conceptualised our "Some faces are harder to read" poster which has been received favourably by health professionals and those with facial palsy.
- Attended the Moebius Research Trust conference raising awareness of our services. This was also an important development opportunity for staff who sat in on the educational talks.
- Were charity partners of CCR EXPO (a large conference about aesthetic medicine) and had a free information stand at the event. The conference received 4,000 visitors over 2 days.

November 2014:

- We invited volunteers to attend a parliamentary reception for the launch of #GivingTuesday in the UK, further raising awareness about the needs of facial palsy patients.

December 2014:

- Attended a meeting for an Appearance Collective organised by the Healing Foundation, bringing together UK charities operating within the reconstruction, disfigurement, aesthetics and appearance field to see how they may work in partnership. We will participate in any future meetings to see how we may work with others in a similar field.
- Also took part in #GivingTuesday but with limited success.

January 2015:

- Displayed a stand at the 'Advances in facial reanimation' conference at the Royal Society of Medicine which was another important opportunity to raise awareness of our services with a very relevant audience of clinicians.

March 2015:

- At the suggestion of one of our volunteers we launched the first global Facial Palsy Awareness Week from 1-7 March 2015, which will now be repeated every year during the first week of March. It was a huge success with people from Australia, the US and other countries also getting involved. The intended aim of the week was mainly raising awareness but people used the main #FaceMyDay theme to raise funds as well. This involved sporting half beards or half makeup for the week. Others took part in sponsored walks, rowing, music nights, bake sales and more. Our American friends chose an #AboutFace campaign and wore or drew on half moustaches. Net income from Facial Palsy Awareness Week was £13,400. A media volunteer and member of our Medical Advisory Board were featured on BBC Breakfast during the week. There were also features in local press and on local radio and television. People wrote and shared Facebook statuses throughout the week about how facial palsy affects them and said friends and family had learnt in much greater detail about the true impact of living with facial palsy. Some people also submitted poems about facial palsy for our website and one young person wrote and performed a topical song. Claire's card was launched.

May 2015:

- Our Deputy CEO was invited to speak to an international audience as a patient advocate at the Royal Society of Medicine conference - 'Consensus and controversies in facial reanimation: an MDT approach.' Following this meeting, one of the leading Canadian facial surgeons decided to set up a similar charity to Facial Palsy UK for the benefit of their patients.

June 2015:

- Comprehensive three page article about Facial Nerve Palsy and Facial Palsy UK in the national medical magazine PMFA news, including information about Facial Palsy Awareness Week. We were also invited to contribute to a review article in the British Medical Journal on facial palsy.
- We took part in the Aviva Community Fund competition to try and win funds to create two children's books to support young people affected by facial palsy. We reached the finals but were not selected. However, we received 3,787 votes for our project creating awareness. We will continue to seek funds for this project in future months. We would like to thank Oakwood Insurance Consultants who submitted our entry for the competition.
- We were chosen to be an official partner of the Northampton Town Charitable Foundation for the next football season.

IN ADDITION:

Some members of our Medical Advisory Board have started giving talks at GP training sessions but much more work needs to be done to raise awareness of the needs of this patient group.

Five new personal stories were submitted by people for use on the website throughout the year.

Media volunteers have featured in a variety of different media channels in the past year including national press, popular magazines, medical publications, BBC Breakfast, local television, radio and newspapers. We nominated one of our volunteers for a Points of Light Award which was awarded

by the Prime Minister in August 2014. This was featured in the national and local press and the recipient was interviewed on local radio.

We received £6,650 funding towards an Awareness Campaign during the previous year. We used some of this funding during the year for a leaflet and poster campaign reaching 97% of GP surgeries in England, Scotland and Wales.

### Research

In Autumn 2014 we launched our Research Appeal. Currently there are no nationally funded trials investigating treatments or cures for facial palsy. This leads to uncertainty with regards to best practice and treatments. Despite recognition that conditions such as facial palsy are neglected in terms of research funding, this situation is unlikely to change. In order for the right trials to be funded, we need to understand what questions patients, carers and health professionals think are the priorities to answer. Facial Palsy UK is looking to raise £20,000 in order to push facial palsy research onto the research funding agenda. This money will fund a Priority Setting project and would see a list of priorities published for researchers looking into the causes, treatment, prevention and consequences of facial palsy. By the end of this financial year we raised £3,541 for this appeal.

Aims are to:

- bring patient, carer and clinician groups together on an equal footing
- identify treatment uncertainties which are important to all groups
- work with all groups to prioritise the uncertainties
- produce a 'top 10' list of jointly agreed uncertainties, as research questions to be presented to funders.

### Other changes during the year

We became registered as a charity in Scotland on 1 September 2014.

We employed a permanent part-time member of staff to work one day per week from September 2014 to assist with general admin. This was increased to two days per week in April on receipt of a grant from the Foyle Foundation to pay for the extra day to improve our volunteer management.

The job title of our one full-time employee was changed from Coordinator and Communications Officer to Deputy CEO towards the end of this financial year, to fully reflect her role within the charity.

The charity which was previously home based moved into office space in May 2015. Premises facilities are shared meaning costs are kept to a minimum.

We completed an expression of intent form with the Northern Irish Charity Regulator on 24 June 2015 to become registered with them. Apparently this process may take several years as charities who only work in Northern Ireland are being registered first. This process has been undertaken after consultation with people affected by the condition living in Northern Ireland.

## 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 Rayne Foundation (Support Services Project) £15,991
- The Foyle Foundation £2,500
- The Freemasons' Grand Charity £1,000
- Brighton College Prep. School Association £3,500
- CCR Expo (event charity partners) £690
- CIPFA South East Region £1,319

### *Individuals, school and community groups*

- Individual fundraisers raised £28,490, up by 9% from the previous year and accounting for approx. 40% of our annual unrestricted income. We're very grateful to all those who took part in a wide range of activities. People's involvement in raising funds during Facial Palsy Awareness Week accounted for approximately 48% of individual fundraising income this year.
- Many individuals made donations to Facial Palsy UK throughout the year.
- The charity's founder Charles Nduka converted £15,000 of the charity's start-up loan into a donation.

### *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.

### *Other*

- Display equipment donation from Go Displays

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. An additional £3,000 was loaned to the charity by Mr Nduka in September 2013. £15,000 has been donated to the charity in 2014/15 to clear part of this loan with another £5,000 still to be repaid when funds become available. The financial focus in 2014/15 was on continuing to keep costs to a minimum and to try and diversify income streams to become more sustainable. However, the workload has increased significantly since the charity's inception and it was difficult to continue running the charity from a home based office as it limits growth in terms of space and there were also confidentiality concerns. Moving into office space has increased our overhead by £4,934 per year.

Funding of £21,321 was approved for a two-year period - 2014/16 for our Support Services project (plus an additional £10,661 if we can secure match funding). The final instalment of £5,330 is due in November 2015.

Funding of £2,500 was awarded over a year to cover core costs to improve our volunteer management.

Expenditure will rise in 2015/16 and it is important we concentrate on securing additional core funding as well as project funding. We must consider the return on investment of recruiting a dedicated fundraiser if we are to continue to grow.

### Income

Total unrestricted income from donations and fundraising (excluding £15,000 from Charles Nduka) increased by 14.74%, to £53,623 (2014: £46,733).

### Expenditure

Unrestricted expenditure increased by 29%, to £54,357 (2014:£41,990). We paid one full-time member of staff throughout the whole of this period and one part-time member of staff over approximately 10 months compared to just one full-time member of staff throughout the whole 12 month period the year before.

### Principal Funding Sources

The principal funding sources for the charity this year have been from individual fundraisers (£28,490), trusts (£19,491), major donors (£4,300) and Charles Nduka (£15,000) 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 large donations 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 2015/16 is £61,331. Reserves between £15,333 and £30,666 would be needed to meet the current working capital requirements of the charity in the event of unforeseen circumstances arising.

### Pensions

The charity's staging date is 1 July 2017.

## **Plans for the future**

The charity plans to continue the activities outlined above in the forthcoming years. We are due to review our strategic plan in March 2016. Other future projects include:

### Awareness

- Distribute literature and posters in hospital clinics and GP surgeries and make available for download on our website.
- 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

- In 2015/16 we will no longer use home based Support Coordinators. We plan to employ a part-time office based Support and Information Worker to improve efficiency and outcomes. We will also employ an Outreach and Support Officer to provide ad hoc support group cover in the north where required.
- More local support groups (London group launch date 12 September 2015)
- Facial Palsy Conference – as we cannot reach all of the areas we would like to with local support groups, we are planning to hold a weekend conference to provide another avenue for support and enable sharing of information between health professionals and patients. There will also be the opportunity for health professionals to share knowledge with each other.
- Redesigned website to make it easier for people to find information.
- 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
- More Family Days for children affected by facial palsy

- Provide more detailed information for specific target groups, e.g. newly diagnosed Bell's palsy patients, women developing Bell's palsy in pregnancy, parents of babies born with facial palsy, etc.

#### 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.
- Meetings 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 research priority setting exercise – 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 and as amended by Special Resolution 07/07/2014. 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.



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.) This year an important addition has been a Pay Policy. 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 full-time member of staff, part-time staff and a team of volunteers. We need to increase numbers of volunteers and also staff hours, as funds allow. We would benefit from additional trustees who are able to take on specific duties 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 the Deputy CEO. The Acting CEO is responsible for ensuring that the charity delivers the services specified and that key performance indicators are met. The Deputy CEO 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 has acted 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 17 October 2015 and signed on its behalf by:



**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 2015 which are set out on pages 21 to 25.

**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: 23 October 2015

**Facial Palsy UK**  
**Statement of Financial Activities (including Income & Expenditure Account)**  
**for the period ended 30 June 2015**

		<u>Restricted</u>	<u>Unrestricted</u>	<u>2015 Total</u>	<u>2014 Total</u>
		<u>Funds</u>	<u>Funds</u>		
<u>Notes</u>	£	£	£	£	£
<b>Incoming Resources</b>					
<u>Voluntary Income</u>					
Grants	2	18,491	-	18,491	6,650
Donations		3,541	65,066	68,607	44,286
Fundraising		-	3,557	3,557	2,447
Trading Income		-	956	956	658
Other Income		-	2,083	2,083	588
Investment Income		-	7	7	3
<b>Total Incoming Resources from Generated Funds</b>		<b>22,032</b>	<b>71,669</b>	<b>93,701</b>	<b>54,632</b>
<b>Resources Expended</b>					
<b>Charitable Activities</b>		<b>12,070</b>	<b>53,412</b>	<b>65,482</b>	<b>41,060</b>
<b>Governance Costs</b>		<b>-</b>	<b>945</b>	<b>945</b>	<b>930</b>
<b>Total Resources Expended</b>	6	<b>12,070</b>	<b>54,357</b>	<b>66,427</b>	<b>41,990</b>
<b>Net Incoming Resources before Transfers</b>		<b>9,962</b>	<b>17,312</b>	<b>27,274</b>	<b>12,642</b>
<b>Transfers between Funds</b>		<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Net Movement in Funds</b>		<b>9,962</b>	<b>17,312</b>	<b>27,274</b>	<b>12,642</b>
<b>Funds at 1 July 2014</b>		<b>6,650</b>	<b>(9,549)</b>	<b>(2,899) -</b>	<b>15,540</b>
<b>Funds at 30 June 2015</b>		<b>16,612</b>	<b>7,763</b>	<b>24,375</b>	<b>(2,899)</b>

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 from pages 23 to 25 form part of these Accounts.

**Facial Palsy UK**  
**Balance Sheet as at 30 June 2015**

		<u>2015</u>	<u>2014</u>
	<u>Notes</u>	<u>£</u>	<u>£</u>
<b>Fixed Assets</b>			
Tangible Assets	8	<u>471</u>	<u>248</u>
		471	248
<b>Current Assets</b>			
Debtors	9	1,714	1,471
Cash at Bank and in Hand		<u>28,688</u>	<u>16,703</u>
		30,402	18,174
<b>Liabilities</b>			
Creditors: Amounts Falling Due Within One Year	10	6,498	21,321
<b>Net Current Assets</b>		23,904	(3,147)
<b>Net Assets</b>		<u>24,375</u>	<u>(2,899)</u>
<b>Funds</b>			
Restricted Funds		16,612	6,650
Unrestricted Funds		7,763	(9,549)
<b>Total Funds</b>		<u>24,375</u>	<u>(2,899)</u>

For the financial year ended 30 June 2015, 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 17 October 2015 and signed on its behalf by:

  
Charles Nduka  
Trustee

The notes on pages 23 to 25 form part of these Accounts

**Notes forming part of the Financial Statements for the period ended 30 June 2015**

**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.

**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 2015 (Continued)**

<b>2 Grants</b>	<b>2015</b>	<b>2014</b>
	£	£
Allergan International Foundation	-	6,650
The Rayne Foundation	15,991	-
Foyle Foundation	2,500	-
	<u>18,491</u>	<u>6,650</u>

<b>3 Net Incoming / (Outgoing) Resources before Transfers</b>	<b>2015</b>	<b>2014</b>
	£	£
Are stated after charging:		
Depreciation	157	82
Independent Examiner's fee	945	900
Independent Examiner's fee prior year underprovision	-	30

**4 Staff Costs and Numbers**

Salaries and Agency Wages	38,336	25,000
Social Security Costs	2,549	2,379
	<u>40,886</u>	<u>27,379</u>

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

<b>5 Directors' Remuneration and Expenses</b>	<b>£</b>	<b>£</b>
No Director received nor waived any remuneration during the year.	-	-

**Trustees Expenses**

During the year one of the trustees has been reimbursed for the amount of £1,055. The amount related to travelling, accommodation and office supplies.

**6 Resources Expended**

<b>Analysis of total resources expended</b>	<b>Charitable activities</b>	<b>Governance Costs</b>	<b>Total 2015</b>	<b>Total 2014</b>
	£	£	£	£
<b>Unrestricted funds</b>				
Advertising & Marketing	8,673	-	8,673	5,299
Wages	40,885	-	40,885	27,379
Conference & Seminars	-	-	-	-
Insurance	438	-	438	394
IT Support	3,773	-	3,773	2,978
Professional expenses	558	-	558	-
Online donation charges	2,174	-	2,174	1,524
Postage, Freight & Courier	1,082	-	1,082	811
Printing & Stationery	1,804	-	1,804	468
Audit & Accountancy fee		945	945	900
Staff Training	(120)	-	(120)	290
Telephone & Internet	358	-	358	190
Travel-National	4,435	-	4,435	1,558
Depreciation	157	-	157	82
Sundry	1,265	-	1,265	117
<b>Total unrestricted resources expended</b>	<u>65,482</u>	<u>945</u>	<u>66,427</u>	<u>41,990</u>



**Notes forming part of the Financial Statements for the period ended 30 June 2015 (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 2015 £</b>
Cost:	
At 1 July 2014	330
Additions	380
At 30 June 2015	<u>710</u>
Depreciation:	
At 1 July 2014	82
Charge for Year	157
At 30 June 2015	<u>239</u>
Net Book Value at 30 June 2015	<u>471</u>

**9 Debtors**

	<b>2015 £</b>	<b>2014 £</b>
Stock	-	480
Other Debtors and prepayments	200	200
Gift Aid receivable	<u>1,514</u>	<u>791</u>
	<u>1,714</u>	<u>1,471</u>

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

Taxation & Social Security	553	421
Accruals	945	900
Loan from Trustee	<u>5,000</u>	<u>20,000</u>
	<u>6,498</u>	<u>21,321</u>

**11 Movement on Restricted Funds**

	<b>As at 1.7.2014 £</b>	<b>Incoming Resources £</b>	<b>Outgoing Resources £</b>	<b>Returns &amp; Transfers £</b>	<b>As at 30.6.2015 £</b>
Awareness Campaign	6,650	-	2,800	-	3,850
Support Service Project	-	18,491	9,269	-	9,222
Research Appeal	-	3,541	-	-	3,541
					-
<b>Total Restricted Funds</b>	<u>6,650</u>	<u>22,032</u>	<u>12,069</u>	<u>-</u>	<u>16,612</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.