



Facial Palsy UK Annual Report and Unaudited Financial Statements
For the Period Ended 30 June 2017

Charity numbers 1148115 and SC045086
Company number 8107184



Contents

We believe that every person affected by facial palsy should be able to routinely access care and treatment to improve their quality of life. When the charity launched in 2012, there was little to no support available. This report shows what we have been doing this year to improve the situation for everyone affected by this life-changing condition.

Introduction

03

What we do

04

Report of the Chair/Acting CEO

Strategic Report

06

Objectives

20

Volunteering

27

Employees and Volunteers

07

Frontline support

21

How we are funded

28

Structure and Governance

11

Supporting families

22

Fundraising highlights

31

How did we do?

14

Website

23

Where our income comes from

33

Future plans

15

Information

24

How do we raise our funds?

35

Trustees' statement of responsibilities

16

Awareness

25

Financial review

36

Independent Examiner's Report

19

Research and Education

26

Risks and Uncertainties

Financial statements

37

Statement of financial activities

38


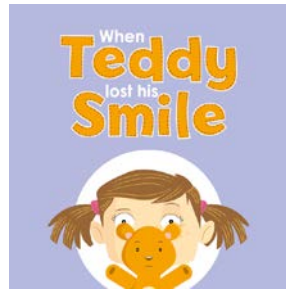
Balance sheet

39

Notes to the financial statements

What we do

Facial Palsy UK is a national charity supporting people affected by facial palsy due to any cause. We offer expert help, guidance and support to those living with the condition, their friends and families, and the professionals that care for them. Here are some of the highlights of our year.

Direct support	Information	Family Support
351 direct support enquiries during the year	572 mailings of leaflets & support options sent to Welsh Hospitals & GP surgeries	2 Family days
182 attendances at local support groups	921 mailings of leaflets & support options sent to English Hospitals & GP surgeries	15 families attended our family days
Feedback from attendees of local support groups showed 81% felt more knowledgeable about healthcare options 94% felt less isolated 69% Felt more confident approaching health professionals 74% felt more confident generally	New mobile & user friendly website launched in December 2016  263,311 users of our website during the year	Children's Book 'When Teddy lost his Smile' published March 2017 67 copies sold 
2 new local support groups	423,205 views of information and support topics on our website	92 Members of Parents & Carers Facebook group at 30 Jun 2017

Volunteers	Research	Awareness
61 active volunteers helping with support, information, feedback & events	85 participants in Delphi study to identify research priorities for facial palsy	17 Media mentions in magazines, national & local press, radio and television

97%

funded from charitable donations this year

Report of the Chairman/Acting CEO

Our strategic plan was renewed in June 2016, setting out our objectives for the next three years. A fluid document, this will be reviewed regularly to ensure we are still meeting the needs of those we set out to support. We are also keenly aware that our services should evolve to meet any changing needs of people with facial palsy.

Due to the decline in public trust, charities are having to look closely at their operations, how they are managing public funds and the way they communicate. Launched in 2012, Facial Palsy UK has never used high pressure fundraising techniques, and we welcome the arrival of the new Fundraising Regulator. We are committed to ensuring everyone who contacts us whether for support or to make a donation, has a positive experience. We are equally committed to spending your donations wisely.



Charles Nduka (Chair/Acting CEO)

Information and support

Our support team and website provide good quality information about facial palsy which is often lacking in the NHS. As there are over 50 different causes of facial palsy, we cannot expect all frontline NHS staff to be experts. However, there is much more that can be done to improve knowledge and care. Many people contact the charity when unable to access further medical help. This may be due to lack of knowledge from their GP, or because their condition has been mistakenly deemed cosmetic. Much of our work involves helping patients negotiate the often difficult route to receiving life-changing treatment. Often timing of treatment is important for better outcomes.

Information sought by the charity under the Freedom of Information Act showed that in 2017 just 12% of Clinical Commissioning Groups in England routinely fund surgical treatments for facial palsy. In Scotland the situation was slightly better with 21% of Health Boards offering treatments locally and another 36% (including those covering the Scottish islands & Highlands) stating they will refer to national centres. Health Boards in Northern Ireland are also willing to refer where surgeries are not available locally although they suffer from a lack of expertise locally. In Wales there is a very different picture with every person having to be assessed by the Welsh Health Specialised Services Committee to gauge their individual clinical need. There isn't a multi-disciplinary service for patients with facial palsy in Wales or Northern Ireland.

It is our belief that if we can improve this situation and reduce these inadequacies in care provision, there will be less need for our frontline support services going forward. We know, from what people tell us, that facial palsy impacts lives in many different ways. Research demonstrates that the level of disfigurement from facial palsy does not correlate to the level of anxiety felt. Facial palsy can affect the ability to communicate, physically or psychologically, our aim is for it to be properly recognised as a functional rather than cosmetic issue.

Challenges ahead

We are reliant on the generosity of individual fundraisers and donors, and with the current economic uncertainty we recognise that the current level of income could reduce. Also, the increased pressures on the NHS mean that the few services available now for people with facial palsy may be at risk.

Additionally, there is a lack of large randomised control trials to support the use of physiotherapy for patients with facial palsy. This is why many patients are denied this type of help. Small studies and anecdotal evidence, however, do suggest considerable benefits. The lack of nationally funded research means that this situation is unlikely to change. Facial Palsy UK only partners on research projects that put patients' needs first. We are currently helping to develop wearable technology which will make facial therapy more accessible to this patient group. This technology will also help to measure outcomes uniformly, paving the way for larger research trials.

We are constantly challenging ourselves to ensure our activities still fit with the most pressing needs of people affected by facial palsy, and that we are carrying out this work in the most efficient way possible.

Thank you

Finally, I would like to express my thanks to each and every one of our supporters, volunteers, staff and partners for all of their contributions over the past year. I hope you enjoy reading this report and seeing what your efforts have achieved for those living with facial palsy and their families.



Charles Nduka

Our aims

In 2016 we set out our three-year strategy to improve the situation for people affected by facial palsy across the UK.

Improve health

To improve the physical and emotional health of adults and children with facial palsy

Greater awareness

To increase awareness of facial palsy and its social, physical and psychological consequences.

Better diagnosis, management & rehabilitation

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

Our vision

For people living with facial palsy to have timely access to care and treatments that can improve their quality of life and for greater research into the causes and treatments of facial palsy.

Our mission

For every person in the UK affected by facial palsy to be given access to the best information, treatment and support available.



Frontline Support

10 local support groups run between two and six times per year

Our target

Make more face-to-face support available locally

Our achievements

Essex and Cheshire & Mersey Support Groups launched 2016/17

Numbers attending support groups increased by 6% compared to the previous year, the average number attending each group is 7.

Out of 155 attendees who completed feedback forms about the support group, 74% said they now had greater confidence, 81% were more knowledgeable about health care options, 94% felt less isolated and 69% felt more confident approaching health professionals.

In May 2017 after speaking to support group volunteers and members, we updated our feedback forms to a simpler format with more relevant questions. A popular addition was the space for people to suggest future topics and speakers.

"I am glad that this group exists. It was hard coming for the first time but it is valuable and I look forward to considering other topics."

Anonymous feedback collected at London Support Group.

Volunteers make it possible for people to receive peer support in their local area.

"I'm a support group volunteer helping coordinate the Manchester Support Group. I love my role and take great pleasure in helping other people with facial palsy. I grew up with this condition and in those days there was no support and I felt isolated and alone. Being a volunteer gives me the opportunity to meet other members, and give them both emotional and practical support, and hopefully make their lives with facial palsy a little easier. It feels great to help make a difference."

Sherry, Manchester Support Group co-facilitator



"I facilitated the setting up of the Cheshire and Merseyside Support Group in November 2016 to provide a much needed avenue of peer support for those with facial palsy and their companions. As a health care professional with a special interest in facial palsy, it is common to encounter people struggling to come to terms with their condition. Finding others who can truly empathise is made more challenging by the relative rarity of facial palsy and the varied medical specialties in which patients can be assessed. I knew that despite my medical knowledge, I was unable to offer peer support but could aim to create the opportunity for it to flourish.

The Cheshire and Merseyside group has quickly become a well-attended, dynamic group of people that teaches attendees coping strategies, provides that empathetic ear during difficult times and celebrates achievements in personal journeys. I learn so much at each meeting and gain great pleasure from seeing how the experiences of those living with facial palsy are shared for the benefit of the whole group and watching existing members help new attendees feel welcome, valued and share in the camaraderie."

Helen Martin, Advanced Practitioner Physiotherapist, Cheshire & Mersey group Support Group facilitator

Other support networks

In addition to regular support groups we have two local support networks in Belfast and Cornwall. If there isn't a volunteer health professional available to support a regular group and just one volunteer is providing support in the area, it is a big commitment to run regular groups where you don't always know who may attend. In remote areas where people need support, there are often very small numbers. Because of the vast range of causes, people may wish to discuss a range of topics which is difficult with a small group. For example someone may have facial palsy due to cancer and be going through chemotherapy, another person may have hearing loss or balance issues, and another person may wish to discuss synkinesis after Bell's palsy. People are put in touch with the volunteer running the network who then establishes how they can best help this person. Meetings are arranged but on an ad hoc basis as required. We also have a support network for mums who experience Bell's palsy in pregnancy. Support is offered by email or telephone by volunteers with similar personal experience of the condition.



Support group/network locations

Key concerns

Lack of local support for people in Wales – largely due to lack of specialists in Wales. We know of only one physiotherapist in Wales who has trained to treat patients with facial palsy, she is only allowed to treat patients within her health board area. In November 2016 the Joseph Rowntree Foundation reported that poverty in Wales is holding back almost a quarter of the population, therefore many with facial palsy will be unable to access private healthcare. Middlesbrough, Knowsley, Kingston upon Hull, Liverpool and Manchester are the local authorities with the highest proportions of neighbourhoods among the most deprived in England. We don't have a support group in Kingston upon Hull but we know there is a specialist facial palsy service locally which we can inform people about. In Glasgow there is also a specialist facial palsy service. We have leafleted as many GP practices in deprived areas as we can so people are aware of support available.

2 staff members answer support emails & telephone calls

Our target

To improve the support we offer year on year and to empower those affected by facial palsy.

Our achievements

We directly supported 351 people this year by telephone or email – 5% increase on 2015/16.

50% of those who contacted us now have more information about healthcare options available to them that they weren't aware of before.



Our office is normally manned Monday to Friday 9-5 but our support team often answer enquiries outside of normal hours too. Our dedicated Support & Information Coordinator who works three days a week is a qualified and experienced counsellor.

Many people whom we speak to have been diagnosed, given an initial treatment and have had no further medical input. Months or years later they are still having significant physical and psychological problems and have probably never met anyone else with the condition.

The length of a telephone call is typically 20–30 minutes and clients are often distressed and anxious about their altered appearance and the many functional problems that accompany it. Typically 1 in 3 callers would require a follow-up call, e-mail or letter. Emails often take the form of an ongoing dialogue throughout a day. As a trusting relationship is built up, a client often asks increasingly complex questions and begins to seek advice in other areas. As there are over 50 different causes of facial palsy, our team must have a broad knowledge of associated conditions.

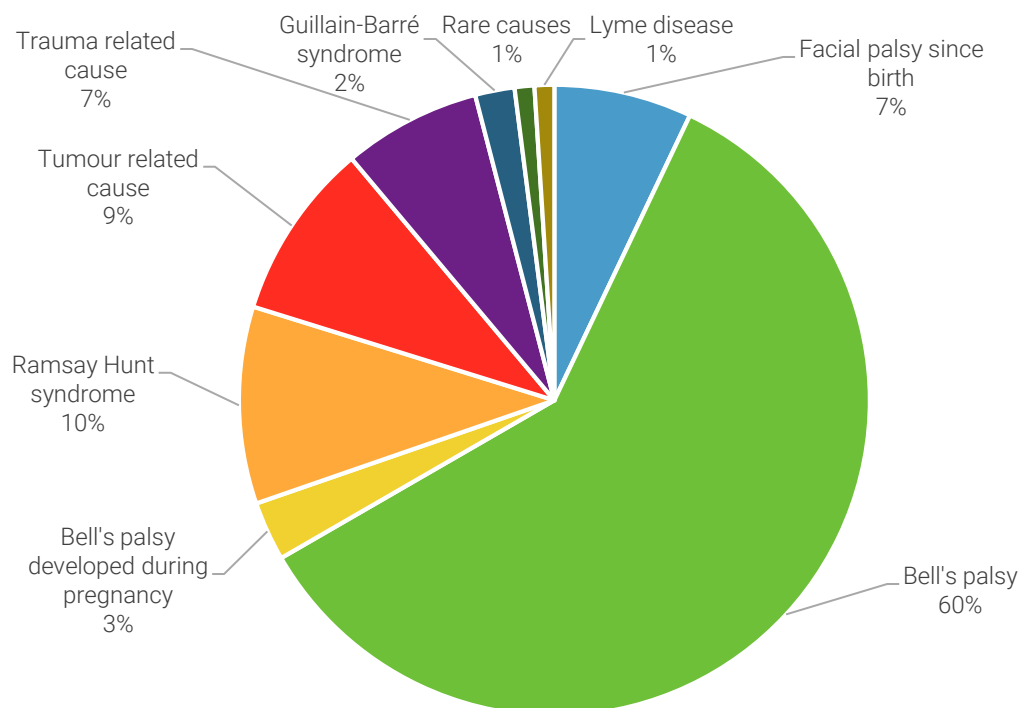
The key areas of support offered by phone or email are:

- Listening - using counselling skills to encourage the client to talk about their feelings, increasing understanding of their situation and enabling the client to see things more clearly.
- Information giving - helping individuals to understand their diagnosis, treatment and future options and signposting to local specialists and support groups.
- Coaching - using counselling skills to gently challenge and push the boundaries, giving clients' space to evaluate the options and make positive choices.

"As I walked out of the hospital I even felt a little more confident just knowing that I was getting some help after all the years I have struggled and put up with this. I can't thank you enough for your help. I already feel as if I have better vision in the restricted eye and have lost the aching pain I constantly had over my eye and down the side of my face. It is such a relief."

Julie Bushnell accessed support from Facial Palsy UK via email

Who is accessing our help via support and email?*



The pie chart demonstrates the causes many of our enquiries are linked to. 88% of enquiries related to adults with facial palsy, 8% to childhood facial palsy and 4% of enquiries come from health professionals seeking advice about the management of facial palsy.

*Based on support enquiries between 1 July 2016 – 30 June 2017

Key areas for concern highlighted

- Inequalities in care for people with facial palsy depending on where they live, or their diagnosis.
- Lack of NHS support for women who experience Bell's palsy in pregnancy.
- Confusion of frontline NHS staff about the different diagnoses and how to treat.
- Lack of research and specialists in relation to Ramsay Hunt syndrome.
- Some surgeons rushing children and families into surgeries not understanding the psychological impact.

"I'm concerned about the number of people contacting us who were originally diagnosed with Bell's palsy but later had the diagnosis changed to Ramsay Hunt syndrome by an expert. As the two treatments are different and both need to be administered within 72 hours for best chance of a good recovery, it is imperative there is more awareness about the different symptoms. A small number of people contact us with atypical Bell's palsy who haven't been referred for further investigations, there is a risk that life-threatening causes are being missed by inexperienced generalist clinicians which we must address. We always write to GPs and hospitals (with client permission) where we feel more education is needed."

Karen Johnson, Deputy CEO of Facial Palsy UK

Supporting families

Our target

To reduce isolation for young people with facial palsy and normalise the condition. To bring parents and carers together for mutual support.

Our achievements

9 families attended our Conkers Family Day in Derbyshire Jul 16
6 families attended our Eastside Family Day in London Feb 17
2 experienced surgeons volunteered at these events
3 adults with facial palsy volunteered at these events
100% positive feedback received at Family Days
92 members of Parents & Carers Facebook Group at 30 June 2017
67 copies of our first children's book sold March - June 2017

"The best thing was meeting other people who have facial palsy and spending time with family."

Child's feedback
Conkers Family Day, Jul 2016

Some children with facial palsy may feel isolated because it's unlikely they will have met another child affected by the condition. Meeting another child who also has the condition can really improve self-esteem. When you are the person with facial palsy, the only image you have of yourself is your mirror image or what you see in photographs or video. You don't see what other people see, your animated face with your whole personality shining through. People will often say to someone with facial palsy that they don't really notice it but it's only when you meet another person with facial palsy that you begin to understand why this is actually true. Meeting others with the condition really helps to build confidence. This is what our family days are all about.

Parents too can feel isolated and welcome the opportunity to discuss common worries with other parents. Having a surgeon attend gives parents the opportunity to ask questions in an informal setting. If children know the surgeon it makes them seem less scary meeting them in a fun setting.



Challenges

Going forward we must ensure family days are accessible to as many people as possible. We currently rotate around England because we don't have enough interest yet from people in Wales, Scotland or Northern Ireland. Our new 'Join our Community' form asks whether the person is a parent of a child with facial palsy. This will enable us to reach more people in future to gauge interest. We must do more to help families in remote areas. One idea we are investigating is to hold a weekend conference offering activities for children and also health professional talks for parents, making it more worthwhile to travel long distances and attracting a greater number of families.

What do you think your child got out of the day?

"Rowan said 'that's just like me' when he saw a baby. We don't know what he meant but we suspect that he identified a similarity in their eyes/smile." Parent's feedback – Conkers Family Day, July 2016.

What have you got out of the day?

"Getting to talk to other parents and being able to speak to the surgeon about possible surgery for the future. Had lots of fun too!" Parent's feedback – Eastside Family Day, Feb 2017.

Our Parents and Carers Facebook Group is open to people worldwide who have a child with facial palsy. This is a platform where parents and carers can discuss common worries such as a child's first MRI scan, eye care and how to deal with challenging questions from strangers. Facial Palsy UK staff are the main administrators for the group, people are only added if they are a parent or carer of a child with facial palsy. Other general groups are available on Facebook for people with facial palsy due to any cause. The difficulty with more general groups is that someone who develops facial palsy in later life may have a very different experience to a child with the condition. Our Parents and Carers Group is a safe place to discuss issues and experiences about children with facial palsy. A Medical Advisory Board member volunteers their time to answer questions in the group where relevant.

"By chance I found this group on Facebook. If I didn't find this page I would not be any further forward in helping our son. This group has helped me gain all the information I need for the facial palsy plus any doctors I should be seeing to help our son. Our son would not have his glasses nor be receiving any medical advice if it wasn't for the parents of other children with facial palsy plus Facial Palsy UK who set up the page."

Joni Whelan, member of Parents and Carers Facebook Group

We have found this forum very helpful on two levels. One is the emotional support given to parents by connecting with other parents/carers of kids with FP. This is particularly important due to the limited knowledge many GPs have diagnosing it. Also hearing stories of other children who are coping well, things parents are doing to equip their kids to develop good self-esteem are invaluable. Secondly, being able to tap into 125 people's experiences of treatment options in the UK and abroad is very valuable. Keep up the great work! Thanks.

Cristina & Pieter, Western Australia, members of Parents and Carers Facebook Group.

Starting School form

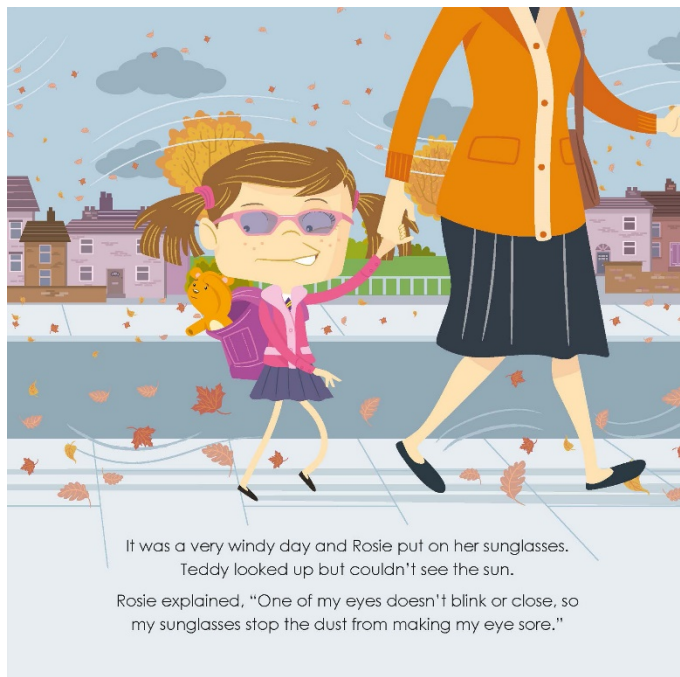
In August 2016 we developed a Starting School form. Parents can download and complete the form before their child starts school. It gives teachers an overview of facial palsy and parents can indicate how the condition affects their child. They identify their child's strengths and interests first thus promoting positivity. It suggests how to answer questions from other children about facial palsy, as well as how to support the affected child in answering questions of this nature. Other areas covered are school photographs, bullying and health issues. We aren't tracking downloads but this has been developed at the request of parents and anecdotal feedback has been positive.

When Teddy lost his Smile

In March 2017 we published our first children's book. Since the launch of the charity in 2012 we have received many requests for a children's book about facial palsy, a tool to raise awareness, to encourage discussion and to reduce isolation.

Leamington & County Golf Club, the Rotary Club of Epsom and the Yorkshire Building Society Charitable Foundation generously donated funds to create the book. Illustrator Andrew Hennessey (www.andrewhennessey.com) and artwork editor Dean Biddlecombe (www.red-eight.com) provided discounted services to support the creation of the book.

We enlisted the help of children with facial palsy, adults who had facial palsy in childhood, children of adults with facial palsy, teachers, psychologists and people who had no prior knowledge of facial palsy. The story was written by our Deputy CEO who has had facial palsy since birth, this was undertaken in her own time. The illustrator, Andrew Hennessey, has a daughter with Moebius syndrome, a rare cause of bilateral facial paralysis.



The book focuses on the feelings of a teddy bear who has lost his smile. Rosie who has facial palsy encourages Teddy not to worry about his smile, to concentrate on the positives and to remember that we are all different. Woven into the story are tips about how a child with facial palsy may need support, such as with eye care.

"The book made the children aware of facial palsy and that it's alright to be different. They listened well to the story and enjoyed choosing the teddy expression at the end. I have been asked to read the story again."

Staff member, Shaw Mhor Early Learning Years Centre, Glasgow

"I think it's great and I read it to a few of my friends' children and they love it and asked if they could buy a bear like teddy."

Chelsea Burger, adult volunteer who was born with facial palsy

"The first time we read this book our son chose the full-on smile for Teddy. The second time though we chatted about what Teddy whispered to dad and Rowan thought he'd like a smile like Rosie's and stuck this on. He said "Teddy has a different smile and it's okay.""

Kerry Boddy, mum to Rowan (age 6)

Website

Mobile friendly and easier to navigate

Our target

A more accessible website that can be easily navigated from every device
For the website to be more community focused and increase signups by 15% year on year

Our achievements

Complete redesign of existing website in December 2016 (overall visitors decreased by 9.09% compared to previous year as to be expected with a website move)
423,205 views of information and support topics on our website
37% increase on community signups

Our new website design and build was funded by a Big Lottery Fund Grant. 70% of the work to move, refresh and check content was completed in volunteer hours.



Many visitors to our website have problems with vision due to the inability to blink one or both eyes, making it difficult to view small text on mobile phones. Our old website did not function properly on mobile devices, therefore pages and text did not resize to suit the platform it was being viewed on. We worked with a designer to make our new website as accessible as possible. Also, the old website was built just prior to the charity's launch in 2012, it had quite a sterile feel to it and did not reflect the friendly community that our volunteers have helped us build. We wanted the new website to be more inviting, to encourage people to be a part of a

community where they can have a voice. New people sign up to 'Join our Community' every day and we have seen a 37% increase in signups this year. Our community is free to join, we ask people what caused their facial palsy when they sign up which enables us to make our communications more relevant and helpful. There were 263,311 users of our website during this financial year. Enquiries about local support groups have increased suggesting people are finding information more easily.

Our top three website topics

Bell's palsy
Ramsay Hunt syndrome
What is facial palsy?

"I have found your website really informative and useful for maintaining a positive outlook, despite the challenges this condition has brought."

"Reading the personal stories has made me a different person and changed the way I go about my life..."

Information

Our target

To improve the information we provide for clients and health professionals

Our achievements

8 patient information leaflets drafted

Established which surgical treatments are routinely available for people with facial palsy in the UK

New self-help content on our community website

Successfully acquired funding for a dedicated health professionals website

We received £2,000 from The Hospital Saturday fund to develop 8 Patient Guides (downloads only):

Facial palsy after tumour, Bell's in pregnancy, Bell's palsy, Facial palsy after trauma, Living with facial palsy, Facial palsy and Lyme disease, Children with facial palsy and Ramsay Hunt syndrome. All leaflets have been drafted and people with first-hand experience of causes have given us feedback. These will be passed to Facial Palsy UK's Medical Advisory Board before being finalised.

We received an additional donation of £500 from the Rotary Club of Epsom this year to fund a medical illustration detailing the facial nerve branches.

In 2015 the Department of Plastic and Reconstructive Surgery based at Castle Hill Hospital, Hull, issued a Freedom of Information (Fol) request to all Clinical Commissioning Groups (CCGs) in England. They asked which surgical procedures were offered freely and which on an individual basis for patients with facial palsy? Just 13% routinely funded all types of surgical treatments without requiring funding approval. Facial Palsy UK issued a follow-up Fol request in February 2017, asking whether this situation had changed. Just 12% of CCGs were found to routinely fund any form of surgical treatment for facial palsy. The original question was submitted to the Welsh, Scottish and Northern Ireland Health Boards in May 2017. In Scotland 21% of the health boards stated they routinely offer surgical treatments locally for facial palsy, with an additional 36% of health boards (including those covering the Scottish islands) referring to the national centres when surgeries are not available locally. Two of the health boards referred to Scotland's Adult Exceptional Aesthetic Referral Protocol which was developed across NHS Scotland. It puts facial palsy surgery under 'Aesthetic Facial Surgery' and is not routinely provided. The mixed feedback we received clearly shows that even health boards differ in how they view facial palsy. In Wales EVERY request for help has to go through the Welsh Health Specialised Services Committee and decisions are based on Individual Clinical Need. There isn't a Multi-disciplinary service for facial palsy patients in Wales. Also, psychological distress alone will not normally be accepted as a reason to fund surgery. In Northern Ireland all health and social care trusts said they would refer to another centre if surgeries were not available locally. The results of these Fol requests aren't promising and point to a complete lack of understanding about the needs of this patient group. However, we are now able to inform clients where routine procedures are available, as often GPs are unaware of the options.

£26,300 was received from the VTCT Foundation to create a dedicated health professionals' website - a platform for sharing knowledge, education and collaboration opportunity.

We monitor enquiries and look for the source of problems to see how we can make changes. Due to lack of resources we are quite slow at loading new content to our website. However, everything is logged and work is in progress all the time to make improvements.

Awareness

Facial palsy - not a cosmetic problem

Over 100,000 people are thought to have facial palsy in the UK, but this figure is a rough estimate due to lack of research. Facial palsy is an umbrella term which covers more than 50 different causes. Members of the general public mostly associate facial paralysis with stroke due to high profile awareness campaigns by stroke charities, yet less than 1% of our support enquiries this year came from people who had facial paralysis due to stroke. Once stroke is ruled out as a cause, there is little after-care or empathy for those with facial paralysis.

Our Freedom of Information requests to local health authorities demonstrate that a vast majority class facial palsy as a cosmetic problem, not one that affects basic human function such as the ability to smile or close the eye for sleep. It's demeaning for people with facial palsy to have to go through lengthy applications for treatment that could greatly improve their quality of life. There are few medical conditions where people are simply left to 'get on with it', but this is often the reality for this patient group. More awareness is urgently needed.

Our target

To demonstrate the real physical and psychological consequences of living with facial palsy, particularly to health professionals responsible for patient care.

To empower people with facial palsy and give them a voice.

To be innovative and creative and find different ways to raise awareness of what it is like to live with facial palsy.

Our achievements

572 mailings of leaflets and support options were sent to Welsh Hospitals & GP surgeries

921 mailings of leaflet and support options were sent to English hospitals & GP surgeries

'What I'd like to tell my surgeon' - speech given to 140 health professionals at British Association of Plastic, Reconstructive and Aesthetic Surgeons (BAPRAS) Facial palsy conference

2 presentations to Rotary Clubs

17 media mentions in magazines, national & local press, radio and television, 6% increase on previous year

Facial Palsy Awareness Week 1-7 March 2017

Our general leaflet was redesigned this year to better reflect the support and information we provide. Funds previously received from The Allergan International Foundation enabled us to leaflet 1,493 GP surgeries and hospitals in England and Wales. We mapped the most deprived areas in the UK and prioritised those, as well as areas where people are struggling to access help via the NHS.

Debbie & Steve Byles' fundraising team raised £8,851 for GP Awareness, this was used to secure additional funding to develop a new dedicated health professionals' website which is due for completion in 2018. This will include videos, information guides, discussion forum and e-learning for health professionals. Free to access for anyone with an NHS email address, it will be a very useful resource for GPs seeking more information to support a patient.

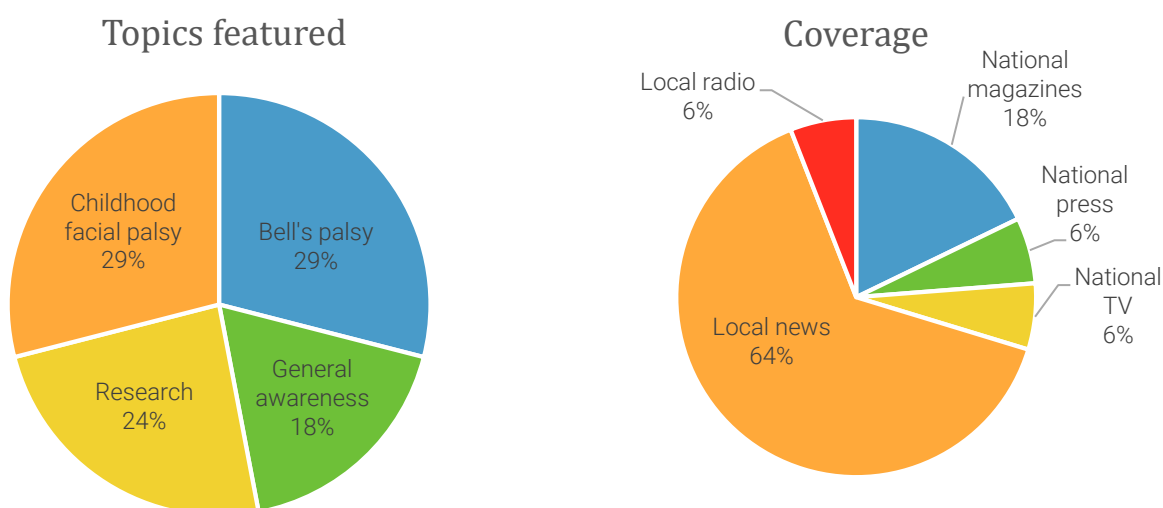
Deputy CEO Karen Johnson was invited to speak at a BAPRAS plastic surgery conference for health professionals and trainees interested in facial palsy. Over 100 people were surveyed about how the surgery journey could be improved and results presented. Feedback from health professionals was positive and it promoted discussion about how children should be involved in surgery decisions. Anecdotal feedback received after the conference suggested there had been some improvement during clinic appointments and parents felt less rushed into surgery decisions.

Volunteer speakers help us raise awareness and often funds too.

"We have just had a most enjoyable hour with Alex Barker. It is the simple things in life which we all take for granted... like smiling... which Alex is unable to do in the normal way. His talk was most illuminating and whilst we can get all sorts of information from the Internet, there is nothing like hearing about facial palsy from someone like Alex. You have a first class ambassador in Alex."

Laurie Day, Rotary Club of Warwick (Jan 2017)

In the media



Pie charts show topics featured and in what medium the coverage was y/e 30 June 2017.

Press interest often accompanies a celebrity being diagnosed with facial palsy, hence Bell's palsy stories are more frequently requested being more common. This year we worked with charity Changing Faces putting them in touch with media volunteers to appear on the Victoria Derbyshire programme where they discussed raising awareness in schools of facial difference.

Challenges

Raising awareness through traditional media channels is time consuming and as a young charity we lack resources in this area. Going forward we must assess the most efficient way to achieve maximum awareness by considering all avenues available, e.g. traditional media, social media, etc. We must consider how our activities can be used as awareness raising tools as well. For example, every sale of the children's book has the potential to raise awareness to a class of 30 children and their teacher.

Facial Palsy Awareness Week

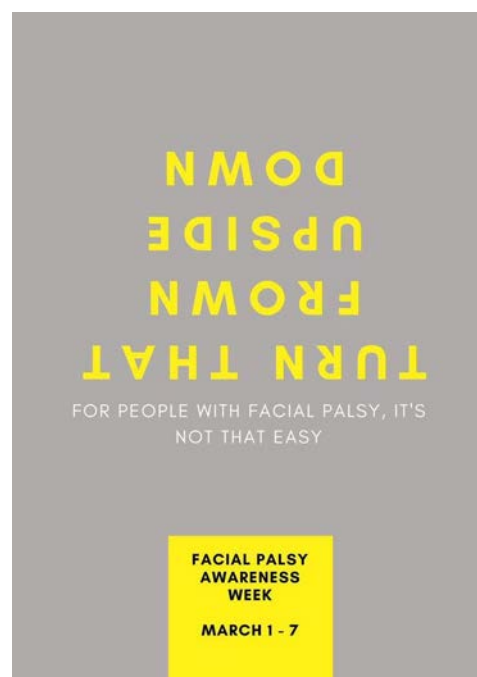
1 – 7 March 2017

In 2015 we designated the first week of March as Facial Palsy Awareness Week. For our third awareness week, the theme was **#ShareMyHappy** – because happiness isn't always shown on your face.

Activities included:

- People sharing personal stories about how facial palsy affects them
- Thanking those that supported people with facial palsy through their treatment journeys
- People sharing pictures and messages on social media to raise awareness
- Reaching out to others with facial palsy and Skyping them, etc. to reduce isolation
- Uploading pictures and comments to our Awareness Gallery on our website
- Writing to MPs with a template we provided to highlight better health care is needed
- Launch of our children's book
- Fundraising

We ran a Twitter competition through One Minute Briefs, they invite designers to come up with a design in one minute. Participants were given the brief "Happiness isn't always shown on your face" and ran with it. The competition was won by S3 advertising with the design pictured right. During March 2017 we achieved 67,900 Twitter impressions, our highest ever for one month, an increase on March 2015 of more than 60%.



3 infographics created and shared during the week:

- Botox helps paralysed faces
- When your Blink is on the Blink
- Amazing Face

43 additions to our Awareness Week gallery:

Many people supported Facial Palsy Awareness Week by fundraising and speaking to local press about their activities. This is a time when support groups often come together to raise awareness.

Fundraisers raised a total of £6,360. Thank you!

Norwich support group at the Virgin Money Lounge (pictured left)

Research & Education

Very few research projects investigating the causes and treatments of facial palsy are being undertaken. A key reason for setting up Facial Palsy UK was to raise funds for medical research into the condition.

Our target

Identify areas for medical research which will be beneficial to people with facial palsy
Raise funds to support or sponsor research and training for health professionals involved in the care of patients with facial palsy which is not normally provided by the statutory authorities
Standardise assessment procedures

Our achievements

Delphi study commenced to ascertain top 10 priorities for facial palsy research
Partner on FRAME research project supported by the National Institute of Health Research, the software being developed can also be used to standardise assessment procedures.

Facial Palsy UK commissioned the Centre for Appearance Research at the University of the West of England to conduct a priority setting exercise using a Delphi study. 85 participants (67 patients/carers and 18 health professionals) gave their views on what they thought were the priorities for research. Results were published autumn 2017. This research was funded by The Worshipful Company of Grocers, who previously donated £5,000 towards this important piece of research, as well as fundraisers and donors from our community who raised £4,255.

FRAME stands for Facial Remote Activity Monitoring Eyewear. Work began in September 2016 and patient trials are expected to start in 2018. 26 volunteers with facial palsy have taken part in early stage feedback provision. The purpose of the project is to develop a device in the form of a pair of glasses which will allow people living with facial palsy to carry out their exercises more easily. Virtual reality goggles are also being developed which will enable patients to see themselves exercising but with a different character rather than using mirror feedback. Anecdotal evidence shows that patients are deterred from completing facial exercises using a mirror as it reminds them of their condition. Large-scale studies have shown that up to the third of patients who develop Bell's palsy will be left with ongoing facial weakness or asymmetry. Many will have a condition called synkinesis which means that the facial muscles move in an uncoordinated fashion. Smiling or eating may cause the eye to involuntarily close, impairing quality of life. Treating facial synkinesis is difficult and the majority of patients do not have access to treatment. Some patients are treated with injections of botulinum toxin into the face every 3 to 5 months, which costs approximately £300-£400 per session. Early stage intervention could reduce this cost to the NHS. Software developed as part of the FRAME project also has the potential to serve as a measuring tool, enabling standardisation of assessment and allowing uniform data collection for larger scale randomised control trials. FRAME is being developed by a consortium led by Nottingham Trent University in collaboration with Queen Victoria Hospital in West Sussex, Brighton-based technology company Emteq, Coventry University, and Facial Palsy UK. Facial Palsy UK Trustee and founder Charles Nduka is Chief Science Officer (CSO) and Co-Founder of Emteq. Vanessa Venables Trustee and co-founder is a Principal Speech & Language therapist who has been employed by Queen Victoria Hospital as part of their role in this project. All potential conflicts of interest have been declared and managed. The research is funded by the National Institute for Health Research, Ref: II-LA-0814-20008.

Volunteering

We would not be where we are now without our volunteers

The charity has come a long way since it started five years ago. The support we offer would not be possible without our volunteers. 61 people gave up their time, skills and energy this year to help others affected by facial palsy, an increase of 103% compared to the previous year. Thank you for the incredible support you give the charity.

Our target

Value our people, support them and listen to them.

Our achievements

Support group leaders meeting where we gathered feedback and implemented changes.

Volunteers help in the following ways:

Support

Our support groups simply would not run without the help of our volunteers. 182 attendances at support groups were made possible by 19 volunteers. Not only do they offer support but many fundraise too.

Befriending – people offer to reach out to those newly diagnosed, often encouraging them to attend their first support group.

Research

Volunteers offer valuable feedback to ensure that we remain focused on activities most important to people with facial palsy.

Speakers & Media volunteers

Volunteer speakers and media volunteers do an important job in raising awareness.

Events

With just two members of staff we rely heavily on volunteers to help with events such as our Annual General Meeting, Family Days and Great North Run. Roles can include welcoming people, taking photographs and video, updating social media, serving food and refreshments, and more.

Medical Advisory Board

All of our website content relating to health care is checked for accuracy by volunteers from our Medical Advisory Board. Some members also fundraise for the charity.

Operations

Volunteers also help with social media, graphic design and distributing literature. This year many people have helped give feedback about the patient guides we are developing.

Challenges

As a young charity with limited resources, we recognise that we need to improve how we communicate with volunteers. We also need to ensure we make better use of the volunteer resources available to us. At the end of this year we made the decision to invest in our first database which will make us more efficient going forward. We also need to spend more time listening to our volunteers and will be conducting a survey next year to find out what we could be doing better.

How we are funded

97% voluntary funded*

Our target

To develop a diverse range of funding streams to ensure our activities are sustainable
To spend funds wisely and effectively
To work within the guidelines of the Fundraising Regulator and keep updated with changing legislation in relation to fundraising, charity accounting/reporting and data protection.

Our achievements

97% of our voluntary income comes from the people, companies and trusts who support us. 3% came from NIHR this year for a short-term project of two years*.
Overall our income increased by 17.5% to £122,832 (previously £104,509). Unrestricted expenditure decreased by 9.7% to £48,434.
Individual fundraisers raised £44,993, up by 24.4% from the previous year. £15,777 was set aside and restricted to funding the creation of children's books and GP awareness.
Facial Palsy Awareness Week activities and challenges accounted for 14% (£6,360 raised) of total individual fundraising income this year.
Direct debit/standing order income for the year totalled £2,339 including gift aid from 19 regular donors. This is a 40% increase on the previous year in income and we have 5 new regular donors.
Payroll giving for the year was £280 (an increase of 22% from the previous year).
Individuals supporting us through online shopping schemes such as 'Give as you Live' raised £353.54 (24% decrease compared to the previous year).
We registered with the new Fundraising Regulator in June 2017.

Thank you for the many generous donations we received during the year from individuals and companies.

We are grateful for the following grants:

Yorkshire Building Society £2,000 – Children's book illustration
Big Lottery Fund £9,384 – New Facial Palsy UK Community website
Hospital Saturday Fund £2,000 – Patient guides
The Barbara Ward Children's Foundation £1,424 – London Family Day
The VTCT Foundation £26,300 – Health Professionals website planned for 2018/18
Masonic Charitable Foundation £2,000 – unrestricted grant
National Institute for Health Research, Ref: II-LA-0814-20008 £4,173 – FRAME research project
Epsom Rotary Club £1,000 – Children's book and facial nerve picture

During the year we were also supported with a large donation of £5,000 from Dominic Bray, Facial Palsy UK Medical Advisory Board. We are also grateful for the pro bono support of JGR Business Bureau who donated payroll processing hours to us.

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. We are sorry we cannot mention you all. Every gift is used carefully to improve the lives of people affected by facial palsy.

Fundraising highlights

We couldn't do what we do without the dedication of our wonderful fundraisers. Here are just a few highlights from 2016/17. **Thank you for making what we achieve possible.**

Charity Fest

Debbie and Steve Byles and the Charity Fest team raised £8,851 in July 2016. This local festival was held in Walton-on-the-Naze in Essex. Local people enjoyed a BBQ, bars, entertainment, raffle, auction and even a firework display. Funds raised have enabled us to source additional funding to develop a new website dedicated to educating health professionals. These funds are to be used to improve GP knowledge.



Tough Mudder



Team Sayvol plunged to new muddy depths in April and raised £2,640.

Barclays Glasgow



Cheryl Wilson, friends and colleagues from Barclays Glasgow undertook the West Highland Way and held a raffle and bake sale for Facial Palsy Awareness Week. They raised £2,392.

Richard Hill and the Wildmans

Richard Hill along with Robert, Terry, Jamie and Bob Wildman have had a busy year. Between them they raised £3,339. They all took part in a Whitstable to Le Havre cycle ride covering 230 miles in 3 days. Then in April Robert ran the London marathon as well!



Leamington & County Golf Club

Rosie Skilbeck and fellow golfers raised £7,000 with the intention of funding the children's book. The first book 'When Teddy lost his Smile' has been produced and a balance of £2,396 has been set aside towards funding the second book.

Young fundraisers

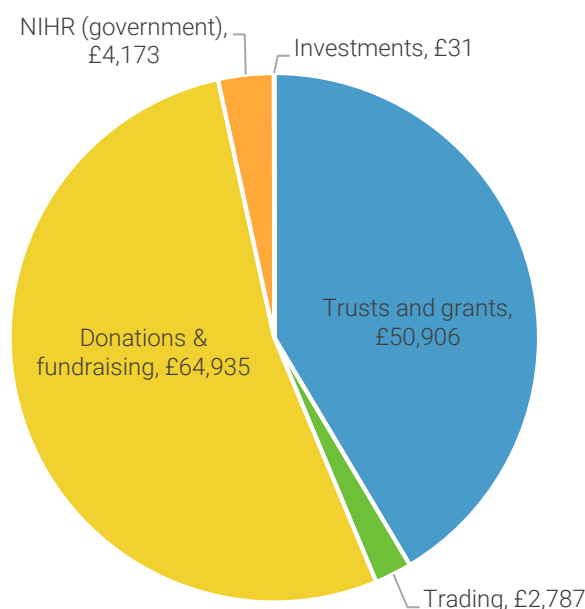
Izzy and Ethan Price raised £1,352 towards the next family day by doing a sponsored bike ride.

Darcy Foulsham-Perkins raised £405 with a sponsored clubathon.

Nicholas and Patrick Grant from the USA raised £317 with sponsored school activities and by selling eggs from their hens.

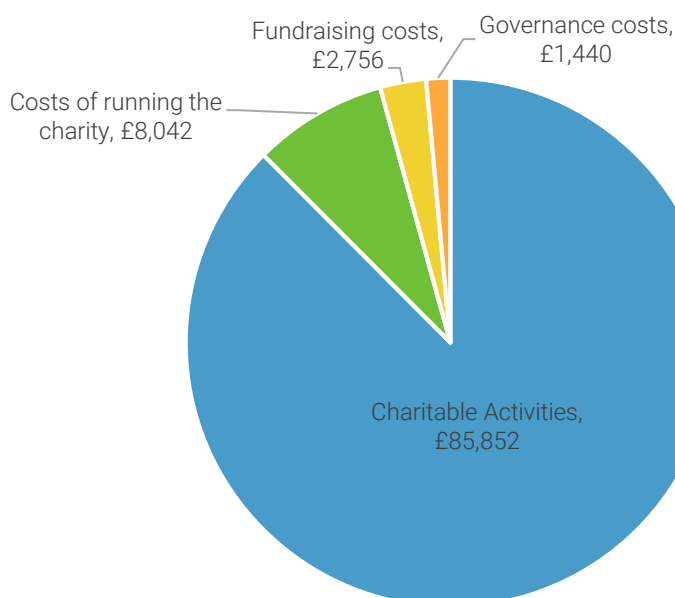
Where our income comes from

This year you helped us to raise £122,832. The pie chart below shows where income was generated.



Where we spend our income

Total resources expended this year were £98,090.



Charitable activities include providing support and information, raising awareness and research projects. Costs of running the charity include office rent, insurance, IT, telephone and internet costs and a proportion of salaries spent on operational requirements. £2,756 is the cost of applying for funding and supporting our fundraisers with fundraising materials, etc.

How do we raise our funds?

Since Facial Palsy UK launched in 2012, we have never employed high pressure fundraising tactics. With our new 'Join our Community' form we are asking whether people want to be contacted about fundraising. The ability for people to opt-in or opt-out means that we will only contact you specifically about fundraising if you have given us permission to do so. If you prefer to receive no further contact from us or to update your contact preferences we will make it easy for you to tell us.

We do not use fundraising agencies.

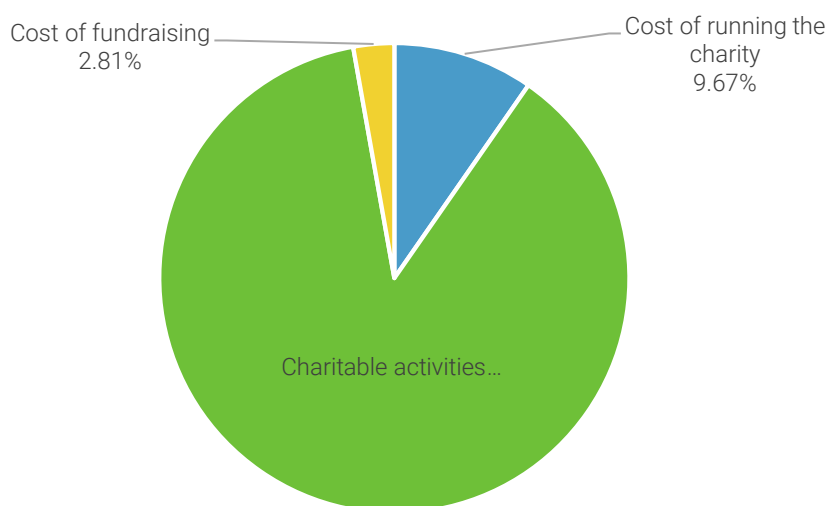
We do not sell or exchange lists of data with any other charities or companies for marketing or fundraising purposes.

We joined the new Fundraising Regulator this year and our Fundraising Promise is clearly detailed on our website. We also have a Complaints procedure should you be unhappy with us or any person acting on our behalf. We have not received any complaints about our fundraising practices in our 5 year history.

We promise to adhere to industry guidelines and regulations. We will adhere to the requirements of the new General Data Protection Regulation (GDPR) and the forthcoming new Data Protection Act legislation. We promise to ensure that all staff and volunteers are kept updated about data security and correct use and retention of data.

We promise to be open and honest about how the funds you raise are spent.

How we spend a £1 donation



For every £1 we spend:

- 87p goes on delivering and improving care for people with facial palsy
- 3p goes on generating future income
- 10p goes on the running costs of the charity including governance

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 Chair of Trustees, Charles Nduka. An additional £3,000 was loaned to the charity by Mr Nduka in September 2013. £15,000 was donated to the charity in 2014/15 to clear part of this loan with another £5,000 to be repaid in future.

This year our total annual income increased by 17.5% to £122,832. However, unrestricted income fell by 29.3% to £58,671. In the previous year we received a large one-off unrestricted donation of £25,000. Removing that anomaly we have seen growth of 1.1%.

Unrestricted expenditure decreased by 9.7% to £48,434. We had two part-time members of staff who left during the year who aren't being replaced and one full-time member of staff during this period. Another part-time member of staff was funded by a grant previously gifted by The Rayne Foundation as part of our Support Services project, their hours were increased.

Total expenditure increased by 51.9% to £98,090 which includes website rebuild, children's book creation, leaflet campaign, two family days, restricted support services project costs and two research projects.

We carefully analysed charity donation processors this year with regard to ease of use and fees. Due to JustGiving's soaring fees we are encouraging fundraisers to use Virgin Money Giving, a platform that is popular with fundraisers, easy to use and offers much lower payment processing fees.

Charitable activities

Expenditure on charitable activities increased by 63.3% to £85,852.

Expenditure on advertising and marketing (95% increase) and printing (341% increase) was due to our Awareness Campaign (1,493 GP surgeries and Hospitals sent information) and creation of our Children's Book (1,000 copies printed to keep individual book cost as low as possible).

Professional expenses increased as £8,500 was spent on the Delphi Research Project.

Travel expenses and venue hire increased as a result of the FRAME and Delphi Research Projects. We spent £9,384 on our new website.

Expenditure on Research was £13,506

- FRAME project £4,173
- Delphi (ascertaining priorities for research) project £9,333

Reserves

As we do not receive any regular government funding, our level of income depends on the generosity of donors, the enthusiasm of fundraisers and how the wider economy is performing. We must consider what would happen to our services should this income significantly reduce. In previous years we were fortunate to have additional funding for a second member of staff, our Support and Information Coordinator. This funding runs out early 2018.

Our future target for free reserves has been set at 6 months of core expenditure plus support services expenditure. This is £30,850. We are currently holding £25,000 in free reserves. We feel it is prudent to aim to hold at least six months reserves as we operate with a small team. If someone was unable to work for any reason, we need to be in a position to recruit extra help as necessary.

Risks and uncertainties

Our Trustee numbers grew substantially this year and one of the key areas focused on in early 2017 was our policy for managing risk. Our Risk Register was reviewed and refined, and a system put in place for reviewing the Risk Register at every Trustee meeting going forward. While we have always monitored risks with all of our activities, we are now much more structured with risks being assessed top down and bottom up.

Major risks

RISK	MANAGEMENT
Financial: The charity is reliant on fluctuating voluntary income to provide our services and has a lack of regular income streams. We have limited resources to dedicate to fundraising so careful planning is needed.	<ul style="list-style-type: none"> • Diversify income streams • Regular financial planning & review • Increase & sustain unrestricted reserves to ensure we can operate if fundraising income fluctuates • Fundraising strategy review
Operational: The loss of our Deputy CEO (sole full-time employee) although unlikely to happen, would have a major impact. We also must ensure all volunteers feel valued and supported, and are fully informed about policies and procedures. Data security should be continually reviewed in our ever-changing world to ensure it covers technological advancements that could make old policies & procedures obsolete.	<ul style="list-style-type: none"> • All communications to be centralised into charity database. • Document systems, plans and projects to ensure someone else could pick up tasks. • Review volunteer requirements and necessary policies and training, etc. • All policies and procedures relating to data protection to be reviewed annually with reference to latest legislation.
External: Incidents or events may negatively affect the charity's reputation or operations, e.g. non-compliance, fraud, security. Public perception of our work could be incorrect.	<ul style="list-style-type: none"> • Preventative mechanisms, policies & procedures. • Monitoring of preventative measures. • Improve our impact reporting.
Governance: Poor knowledge of regulatory requirements and legal responsibilities.	<ul style="list-style-type: none"> • Trustee Board increased to attain more skills, knowledge and experience. • Policies & procedures to be regularly reviewed and communicated throughout whole organisation.

Employees and Volunteers

Two employees left during the year, we increased the hours of our remaining part-time member of staff to cover their hours. We had two employees at the end of the year who normally work from one location, they communicate with the Trustee Board via email, telephone or face to face meetings. Information is mainly disseminated to volunteers by email or telephone as nearly all of our volunteers are not based locally to the office. We issue e-newsletters and arrange meetings as required. We do seek feedback from volunteers on key issues but this has been on an ad hoc basis since the charity formed in 2012. Going forward, we need to better structure how we involve volunteers in giving feedback on important issues. An annual survey would be one way of doing this and we welcome input from volunteers about how to improve. This will be carried out in early 2018. Volunteers are crucial to the services we deliver, we simply couldn't do it without them, we are very grateful for their support.

We are committed to being a diverse and inclusive charity. We have equal opportunities monitoring in place and value each individual's contribution. Our office is fully accessible. We set up a staff pension scheme in July 2017 in line with government requirements.

Remuneration policy

As a young charity we are not currently paying salaries at the median market rate. We do pay above the living wage. Our pay policy sets out that we are committed to ensuring our salaries are competitive in the labour market. However, we do not have sufficient surplus funds to enable us to do this currently. We do consult with employees about the ongoing situation to ensure they still feel valued.

No individual performance bonuses are paid. Where additional work is taken on for specific projects that involve working additional hours to those contracted, employees can apply for overtime to be paid at the normal hourly rate. Additional hours are not always charged to the charity though and are frequently donated as volunteer hours.

Our employees are currently over-stretched in terms of volume of work and we need to reach a position where we can take on additional staff and pay salaries at the correct level. We are fortunate that we have a committed team but we need to ensure we retain them.

Structure and Governance

Facial Palsy UK is a company limited by guarantee (incorporated on 15 June 2012, registered number 08107184) and a registered charity in England & Wales (charity number 1148115) and Scotland (charity number SC045086).

The charity purpose is set out in its Articles of Association (updated 7 July 2014).

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.

Facial Palsy UK's mission is for every person in the UK affected by facial palsy to be given access to the best information, treatment and support available.

The objects for which the charity is established for the public benefit are:

- to 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;
- to assist the treatment and care of persons living with facial palsy by the provision of information, support, education and practical advice;
- 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;
- 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;
- to be an advocate for the facial palsy community in the development of service provision, education and research.

There has been no change to charity objects during the year.

Board of Trustees

The Board of Trustees is legally responsible for directing the affairs of the charity. Trustees are the directors of the company and serve for renewable terms of three years. 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. Eligible retiring trustees may be reappointed. The Board comprised 10 trustees as at 30 June 2017, 100% increase on the previous year. Trustees have a wide range of skills and experience including clinical and professional expertise.

The Trustees, who are also the directors for the purpose of company law, and who served during the year were:

Charles Nduka (Chair and Acting CEO)

Vanessa Venables

Fiona Hawthorne

Louise Watson

Alison Sweeting

Jan Jutsum

Gareth Price

Susan Parsons

Sheila Crowley

Rebecca Black

Dimitra Gkerdouki

(Resigned 8 October 2016)

(Appointed 8 October 2016)

(Appointed 8 October 2016)

(Appointed 18 January 2017)

(Appointed 18 January 2017)

(Appointed 18 January 2017)

(Appointed 26 April 2017)

The board meets at least four times per year to regularly review and direct Facial Palsy UK's strategy, budget and performance. All trustees give their time voluntarily and received no benefits from the charity. Any expenses reclaimed from the charity are set out in note 9 to the accounts. None of the trustees has any beneficial interest in the company. All of the Trustees are members of the company and guarantee to contribute £1 in the event of a winding up. Potential conflicts of interest are disclosed at the start of every meeting.

Day-to-day management of the charity is delegated by the Acting CEO and Chair of Trustees to the Deputy CEO. All financial movements through the bank are signed off at board level.

New and retired Trustees

We would like to thank Louise Watson who retired this year after 3 years of service as a Trustee. We would like to express our thanks to Gareth Price, Jan Jutsum, Sheila Crowley, Sue Parsons, Becky Black and Dimitra Gkerdouki who all joined the Trustee Board this year.

Appointments and training

The Board of Trustees appoint all new trustees who are recruited through a process of advertisement, application and interviews based on selection criteria. We aim to ensure a broad range of relevant skills and experience to benefit the charity.

All new trustees are 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 are also given copies of Strategic and Business plans.

They have introductory discussions with the Chair and Acting CEO and other members of the Trustee Board. They also meet the Deputy CEO, and staff and volunteers as relevant. They are signposted to relevant information on the Charity Commission website about 'the Essential Trustee'. They are given the opportunity to attend inexpensive training courses offered through the Small Charities Coalition and the Foundation for Social Improvement. All trustees are asked to provide a list of their skills and update it regularly.

Personnel

Deputy CEO

Support and Information Coordinator

Karen Johnson (full-time)

Lorraine Thurston (part-time)

Policies and Procedures

We have comprehensive policies and procedures in place (e.g. data protection & security, confidentiality, health & safety, equal opportunities, diversity, anti-fraud, conflict of interest, ethical fundraising, volunteers, bullying and harassment, risk assessment & management, child protection, photography, whistleblowing, safeguarding vulnerable adults, recruitment, privacy, complaints, pay policy and more). All are periodically reviewed to ensure they continue to meet the needs of the charity, comply with relevant legislation and new ones added where appropriate.

Public benefit

The trustees have given due consideration to the Charity Commission's published guidance on the Public Benefit requirement under the Charities Act 2011 when reviewing our aims and objectives and in planning our future activities.

Medical Advisory Board

The Medical Advisory Board is made up of practitioners from a range of medical professions of relevance to facial palsy. There is also a patient representative with personal experience of facial palsy. Two health professionals on the board also have personal experience of the condition. Members help with Facial Palsy UK website content ensuring it is checked for medical accuracy. They also provide guidance to our support team and are media volunteers. In 2017 one of our new Trustees took on the specific role of overseeing the function of the Medical Advisory Board. This will involve formalising the setup of our Research Sub-Committee which plans to develop policies to promote excellence in research across the field of facial palsy on behalf of Facial Palsy UK.

Patrons

Our patrons receive feedback about our work but don't have decision-making powers. They are:

Jason Flemyng

Nick and Susie Cave

John Sudworth

Sir Paul McCartney, MBE

Co-operation with other organisations

We are members of the Appearance Collective, a group of charities working together to support those with appearance related conditions.

Independent Examiners

A resolution proposing Rawlinson's Chartered Accountants be re-appointed as Independent Examiners of the charity will be put to the Annual General Meeting.

Reference and administrative details

Charity number: 1148115 (England & Wales), SC045086 (Scotland)
Company number: 8107184
Registered office: Facial Palsy UK, Eventus, Sunderland Road, Market Deeping, Peterborough, PE6 8FD.
Accountants: Rawlinsons, Ruthlyn House, 90 Lincoln Road, Peterborough, PE1 2SP.
Bankers: HSBC, 125 Church Road, Hove, East Sussex, BN3 2AN.

How did we do?

KEY	
Completed	
In progress	
Not started	

In our annual report for the previous year (ending 30 June 2016) we highlighted the following future plans in line with our 3-year Strategic plan for 2016-2019:

	TARGET	PROGRESS
AWARENESS	Create three children's books explaining what it is like for someone living with facial palsy	First book published March 2017
	Investigate how we can use modern technology to demonstrate the full impact of facial palsy	The work currently being carried out as part of the FRAME research project has the potential to be re-used for this purpose eventually.
	Update our general leaflet to give a more accurate reflection of our community and the work we do	Completed October 2016
	Explore innovative themes to raise awareness	Ongoing
SUPPORT	Create an information pack for people affected by Bell's palsy aimed at reducing secondary problems	A patient guide is being developed first and then we will review what else is needed. The guide has been drafted.
	Update our website to be more mobile friendly and easier to view with a visual impairment.	Completed December 2016
	Produce eight Patient Leaflets about specific causes of facial palsy	Drafts completed, awaiting sign off by Medical Advisory Board.
	Support Group Facilitator training online and face to face as required. Supporting those who support others.	Face to face meeting held January 2017. More work is needed in this area to ensure volunteers feel properly valued and supported.
	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.	More research needs to be done to see if this is the best way to offer this support. Patient leaflets are taking priority at the moment.
	Facial Palsy Conference – a national weekend conference to support those who don't have regular access to a local support group.	Initial costings have been carried out. After seeing the success of the Moebius Research Trust conference for patients in 2014 this needs to be a high priority within the next 2 years.
	Build a database of treatment providers	We have a growing spreadsheet of treatment providers which will be transferred to a database 2017/18. In conjunction with this we have approached all health boards in England, Scotland, Wales and Northern Ireland this year and established what surgical treatments for facial palsy are routinely offered in local areas and which need an Individual Funding Request.
	Deliver two Family Days per year for children affected by facial palsy	Two events took place - July 2016 and February 2017.
	Explore how we can use existing counselling techniques to provide a service model benefitting people with facial palsy	This has been researched. As part of the Appearance Collective (a group of charities working together who support people with appearance related conditions), we feel there is scope for a shared model which we are investigating further.
EDUCATION & TRAINING	Offer a guest speaker option for universities educating trainee speech and language therapists, physiotherapists, etc. and/or develop e-learning modules on the NHS e-learning platform.	We looked into the NHS e-learning platform but found it wasn't user friendly and existing modules about facial palsy were there but difficult to find. We have not made any progress yet regarding guest speaker options.
	Work closely with hospital clinics to improve patient care	Ongoing work. We've leafleted all hospitals in Scotland and Wales with an A&E. 22 English hospitals were also sent leaflets during the year. Where we receive feedback that hospital care is inadequate we write to the hospital department with more information about facial palsy.
	Increase the amount of information available on our website for health professionals	We received funding in April 2017 to create a dedicated health professionals website about facial palsy, a platform for sharing knowledge, education and collaboration opportunity. This will be free to access for anyone with an NHS email address.

RESEARCH	Instigate a pilot study to evaluate the psychological, social and physical impacts of facial palsy in the UK.	Progress limited to talks with universities about partnering on such a project.
	Employ a suitably qualified research assistant	This is on hold until the Medical Advisory Board are in a position to oversee this post.
	Encourage patients to sign up for the Public Patient Involvement Programme with NIHR to influence research.	In summer 2016 we encouraged individuals to get involved with the research for The National Institute for Health Research (NIHR). We shared their link with those who expressed an interest in research, on social media and in our summer newsletter. http://www.peopleinresearch.org/view-opportunities/
	Demonstrate evidence to NICE to improve guidance for care of patients with facial palsy.	Talks have been held with Facial Therapy Specialists UK and we are partnering on research that will make it simpler to demonstrate evidence to support physiotherapy. The new Health Professionals website will also make it easier to collate important research to be used as evidence to change NICE guidelines.
	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.	Lack of time previously made it difficult to move forward with this. One of our new Trustees took over management of the Medical Advisory Board function in April 2017 and we expect to have more to report in 2017/18.
	Patient, Carer and Clinician Priority Setting Exercise – establish a top 10 list of priorities for research.	This work took place during the year with a full and final report produced Autumn 2017.

Coming soon

Your Child and facial palsy is just one of the Patient Guides we have been working on this year.



Future Plans

It's crucial that we tie our plans into our strategy, monitor and evaluate our work, and report on our work openly and transparently. Working with limited resources is challenging, but it's important that we always plan ahead and ensure we continue to deliver what our community 'says' they need and not what we 'assume' they need. Here are the activities we intend to focus on in 2017/18:

Operations

As we grow we must stay focused on specific plans and not try to take on too much during one year, to ensure continued success. The largest project for the next year will be the new health professionals' website. Creating this hub will positively impact on future research, collaboration, knowledge and awareness.

Awareness

- Plan awareness campaign around the lack of NHS help available for people with facial palsy due to being considered a cosmetic issue. Report on Freedom of Information requests obtained from local health authorities. Seek case studies to demonstrate the issues.
- Plan Facial Palsy Awareness Week theme to fit with our PR agenda.
- Campaign encouraging more people with facial palsy to become speakers raising awareness about the condition.
- Highlight the lack of knowledge about Ramsay Hunt syndrome and publish results of a comprehensive survey. Seek case studies to demonstrate the issues. Organise a photographic exhibition with images representing the different stages of the condition.
- Focus on GP awareness using planned Health Professionals' website as a springboard.

Support

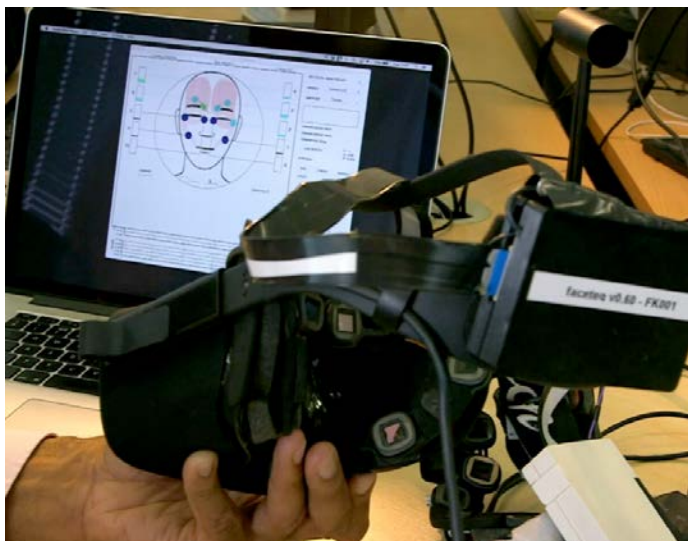
- Finalise eight Patient Leaflets so they are available in download form from our website. Seek funding for printed versions.
- Seek funding for Patient Conference with a view to holding this in 2018/19 at latest.
- Deliver 2 new support groups/networks
- Deliver 2 family days (subject to funding)
- Finish writing the second children's book which has a bullying theme and is aimed at older children. Publication planned for 2018/19.
- Improve our support to volunteers

Education

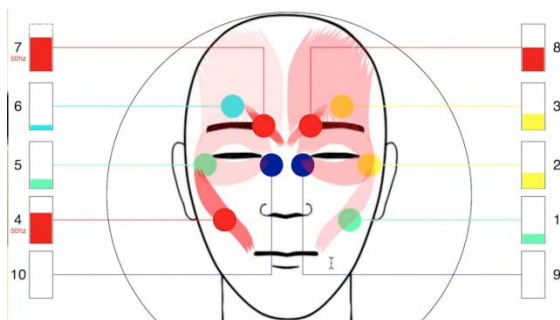
- Launch new facial palsy information website for health professionals, to improve knowledge, encourage collaboration and research.
- Plan how to deliver a guest speaker option to universities educating trainee speech and language therapists and physiotherapists.
- Seek funding to train more physiotherapists in Wales. Currently we know of just one physiotherapist who has undertaken training to treat facial palsy.

Research

- Produce final report on Top 10 priorities for facial palsy research.
- Use new health professionals' website to improve communications and encourage collaboration.
- Set goals for research in line with Top 10 priorities decided by patients, carers and health professionals. Formalise Facial Palsy UK's Research Advisory Committee.
- Research trials to begin for FRAME project in 2018.



FRAME project early stage development/testing



Statement of responsibilities of the Trustees

The charity trustees (who are also the directors of Facial Palsy UK for the purposes of company law) are responsible for preparing a trustees' annual report and financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company law requires the charity trustees to prepare financial statements for each year which give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of resources, including the income and expenditure, for the financial year. In preparing the financial statements, the trustees are required to:

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

The trustees are responsible for keeping proper accounting records that disclose with reasonable accuracy at any time the financial position of the charity and to enable them to ensure that the financial statements comply with the Companies Act 2006, the Charities and Trustee Investment (Scotland) Act 2005 and the Charities Accounts (Scotland) Regulations 2006 (as amended). They are also responsible for safeguarding the assets of the charitable company and hence taking reasonable steps for the prevention and detection of fraud and other irregularities.

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

Statement as to disclosure to our independent examiners

In so far as the trustees are aware at the time of approving our trustees' annual report:

- 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 charitable 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.

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



Charles Nduka (Chair/Director)
18 November 2017

Independent Examiner's Report

I report on the accounts of the charity for the year ended 30 June 2017, which are set out on pages 4 to 15.

Respective responsibilities of Trustees and examiner

The charity's Trustees, who are also the directors of Facial Palsy UK for the purposes of company law, are responsible for the preparation of the accounts. The Trustees consider that an audit is not required for this year under section 144(2) of the Charities Act 2011 (the 2011 Act) or under Regulation 10(1)(a) to (c) of the Charities Accounts (Scotland) Regulations 2006 (the 2006 Accounts Regulations) and that an independent examination is needed. The charity is preparing accrued accounts and I am qualified to undertake the examination being a qualified member of the ICAEW.

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:

- (i) examine the accounts under section 145 of the Charities Act 2011 and under section 44(1)(c) of the Charities and Trustee Investment (Scotland) Act 2005 (the 2005 Act);
- (ii) 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
- (iii) 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 and is in accordance with Regulation 11 of the Charities Accounts (Scotland) Regulations 2006. 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 seeking 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 next statement.

Independent examiner's statement

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

- (a) which gives me reasonable cause to believe that in any material respect the requirements:
 - (i) to keep accounting records in accordance with section 386 of the Companies Act 2006 and section 44(1) (a) of the 2005 Act; and
 - (ii) to prepare accounts which accord with the accounting records, comply with the accounting requirements of the Companies Act 2006, section 44(1) (b) of the 2005 Act and Regulation 8 of the 2006 Accounts Regulations; and
 - (iii) which are consistent with the methods and principles of the Statement of Recommended Practice: Accounting and Reporting by Charities;have not been met or
- (b) to which, in my opinion, attention should be drawn in order to enable a proper understanding of the accounts to be reached.



Tracey Richardson BSc (Hons) FCA
Ruthlyn House
90 Lincoln Road
Peterborough
Cambridgeshire
PE1 2SP

Dated: 21 November 2017

Statement of financial activities including income and expenditure account for the year ended 30 June 2017

	Notes	Unrestricted funds £	Restricted funds £	Total 2017 £	Total 2016 £
<u>Income from:</u>					
Donations and legacies	3	56,626	63,388	120,014	100,857
Other trading activities	4	2,014	773	2,787	3,637
Investments	5	31	-	31	15
Total income		58,671	64,161	122,832	104,509
<u>Expenditure on:</u>					
Raising funds	6	2,756	-	2,756	2,756
Charitable activities	7	45,678	49,656	95,334	61,821
Total resources expended		48,434	49,656	98,090	64,577
Net incoming resources before transfers		10,237	14,505	24,742	39,932
Gross transfers between funds		(19)	19	-	-
Net income for the year/ Net movement in funds		10,218	14,524	24,742	39,932
Fund balances at 1 July 2016		24,696	39,611	64,307	24,375
Fund balances at 30 June 2017		34,914	54,135	89,049	64,307

The statement of financial activities includes all gains and losses recognised in the year.

All income and expenditure derive from continuing activities.

The statement of financial activities also complies with the requirements for an income and expenditure account under the Companies Act 2006.

Balance sheet
as at 30 June 2017

	Notes	2017 £	£	2016 £	£
Fixed assets					
Tangible assets	11		-		237
Current assets					
Debtors	13	1,745		433	
Cash at bank and in hand		94,327		70,415	
		<u>96,072</u>		<u>70,848</u>	
Creditors: amounts falling due within one year	14	<u>(7,023)</u>		<u>(6,778)</u>	
Net current assets			89,049		64,070
Total assets less current liabilities			<u>89,049</u>		<u>64,307</u>
Income funds					
Restricted funds	16	54,135		39,611	
Unrestricted funds		34,914		24,696	
		<u>89,049</u>		<u>64,307</u>	

The company is entitled to the exemption from the audit requirement contained in section 477 of the Companies Act 2006, for the year ended 30 June 2017. No member of the company has deposited a notice, pursuant to section 476, requiring an audit of these accounts.

The Trustees' responsibilities for ensuring that the charity keeps accounting records which comply with section 386 of the Act and for preparing accounts which give a true and fair view of the state of affairs of the company as at the end of the financial year and of its incoming resources and application of resources, including its income and expenditure, for the financial year in accordance with the requirements of sections 394 and 395 and which otherwise comply with the requirements of the Companies Act 2006 relating to accounts, so far as applicable to the company.

These accounts have been prepared in accordance with the provisions applicable to companies subject to the small companies' regime.

The accounts were approved by the Trustees on 18 November 2017.



.....
Charles Nduka (Chair and Acting CEO)
Trustee

Company Registration No. 08107184

Notes to the financial statements for the year ended 30 June 2017

1 Accounting policies

Charity information

Facial Palsy UK is a private company limited by guarantee incorporated in England and Wales. The registered office is Eventus, Sunderland Road, Market Deeping, Peterborough, Lincolnshire, PE6 8FD.

1.1 Accounting convention

The accounts have been prepared in accordance with the charity's governing document, the Companies Act 2006, the Charities and Trustee Investment (Scotland) Act 2005, the Charities Accounts (Scotland) Regulations 2006 (as amended) and "Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102)" (as amended for accounting periods commencing from 1 January 2016). The charity is a Public Benefit Entity as defined by FRS 102.

The charity has taken advantage of the provisions in the SORP for charities applying FRS 102 Update Bulletin 1 not to prepare a Statement of Cash Flows.

The accounts are prepared in sterling, which is the functional currency of the charity. Monetary amounts in these financial statements are rounded to the nearest £.

The accounts have been prepared under the historical cost convention, modified to include the revaluation of freehold properties and to include investment properties and certain financial instruments at fair value. The principal accounting policies adopted are set out below.

1.2 Going concern

At the time of approving the accounts, the Trustees have a reasonable expectation that the charity has adequate resources to continue in operational existence for the foreseeable future. Thus the Trustees continue to adopt the going concern basis of accounting in preparing the accounts.

1.3 Charitable funds

Unrestricted funds are available for use at the discretion of the Trustees in furtherance of their charitable objectives unless the funds have been designated for other purposes.

Restricted funds are subject to specific conditions by donors as to how they may be used. The purposes and uses of the restricted funds are set out in the notes to the accounts.

1.4 Incoming resources

Income is recognised when the charity is legally entitled to it after any performance conditions have been met, the amounts can be measured reliably, and it is probable that income will be received.

Cash donations are recognised on receipt. Other donations are recognised once the charity has been notified of the donation, unless performance conditions require deferral of the amount. Income tax recoverable in relation to donations received under Gift Aid or deeds of covenant is recognised at the time of the donation.

Legacies are recognised on receipt or otherwise if the charity has been notified of an impending distribution, the amount is known, and receipt is expected. If the amount is not known, the legacy is treated as a contingent asset.

Income from government and other grants, whether 'capital' grants or 'revenue' grants, is recognised when the charity has entitlement to the funds, any performance conditions attached to the grants have been met, it is probable that the income will be received and the amount can be measured reliably and is not deferred. Income received in advance for the provision of specified service is deferred until the criteria for income recognition are met.

Notes to the financial statements (continued) for the year ended 30 June 2017

1 Accounting policies

Interest on funds held on deposit is included when receivable and the amount can be measured reliably by the charity; this is on formal notification of the interest paid or payable by the bank.

1.5 Resources expended

Expenditure is recognised once there is a legal or constructive obligation to make a payment to a third party, it is probable that settlement will be required and the amount of the obligation can be measured reliably. Expenditure is classified under the following activity headings:

- costs of raising funds comprise of trading costs and the costs incurred by the charitable company in inducing third parties to make voluntary contributions to it, as well as the cost of any activities with a fundraising purpose.
- Expenditure on charitable activities includes the costs of delivering services, exhibitions and other educational activities undertaken to further the purposes of the charity and their associated support costs.

1.6 Tangible fixed assets

Tangible fixed assets are initially measured at cost and subsequently measured at cost or valuation, net of depreciation and any impairment losses.

Depreciation is recognised so as to write off the cost or valuation of assets less their residual values over their useful lives on the following bases:

Computers	33% straight line
-----------	-------------------

The gain or loss arising on the disposal of an asset is determined as the difference between the sale proceeds and the carrying value of the asset, and is recognised in net income/(expenditure) for the year.

1.7 Impairment of fixed assets

At each reporting end date, the charity reviews the carrying amounts of its tangible assets to determine whether there is any indication that those assets have suffered an impairment loss. If any such indication exists, the recoverable amount of the asset is estimated in order to determine the extent of the impairment loss (if any).

Intangible assets with indefinite useful lives and intangible assets not yet available for use are tested for impairment annually, and whenever there is an indication that the asset may be impaired.

1.8 Cash and cash equivalents

Cash and cash equivalents include cash in hand, deposits held at call with banks, other short-term liquid investments with original maturities of three months or less, and bank overdrafts. Bank overdrafts are shown within borrowings in current liabilities.

1.9 Financial instruments

The charity has elected to apply the provisions of Section 11 'Basic Financial Instruments' and Section 12 'Other Financial Instruments Issues' of FRS 102 to all of its financial instruments.

Financial instruments are recognised in the charity's balance sheet when the charity becomes party to the contractual provisions of the instrument.

Financial assets and liabilities are offset, with the net amounts presented in the financial statements, when there is a legally enforceable right to set off the recognised amounts and there is an intention to settle on a net basis or to realise the asset and settle the liability simultaneously.

Notes to the financial statements (continued) for the year ended 30 June 2017

1 Accounting policies

Basic financial assets

Basic financial assets, which include debtors and cash and bank balances, are initially measured at transaction price including transaction costs and are subsequently carried at amortised cost using the effective interest method unless the arrangement constitutes a financing transaction, where the transaction is measured at the present value of the future receipts discounted at a market rate of interest. Financial assets classified as receivable within one year are not amortised.

Basic financial liabilities

Basic financial liabilities, including creditors and bank loans are initially recognised at transaction price unless the arrangement constitutes a financing transaction, where the debt instrument is measured at the present value of the future payments discounted at a market rate of interest. Financial liabilities classified as payable within one year are not amortised.

Debt instruments are subsequently carried at amortised cost, using the effective interest rate method.

Trade creditors are obligations to pay for goods or services that have been acquired in the ordinary course of operations from suppliers. Amounts payable are classified as current liabilities if payment is due within one year or less. If not, they are presented as non-current liabilities. Trade creditors are recognised initially at transaction price and subsequently measured at amortised cost using the effective interest method.

Derecognition of financial liabilities

Financial liabilities are derecognised when the charity's contractual obligations expire or are discharged or cancelled.

1.10 Employee benefits

The cost of any unused holiday entitlement is recognised in the period in which the employee's services are received.

Termination benefits are recognised immediately as an expense when the charity is demonstrably committed to terminate the employment of an employee or to provide termination benefits.

2 Critical accounting estimates and judgements

In the application of the charity's accounting policies, the Trustees are required to make judgements, estimates and assumptions about the carrying amount of assets and liabilities that are not readily apparent from other sources. The estimates and associated assumptions are based on historical experience and other factors that are considered to be relevant. Actual results may differ from these estimates.

The estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognised in the period in which the estimate is revised where the revision affects only that period, or in the period of the revision and future periods where the revision affects both current and future periods.

Notes to the financial statements (continued)
for the year ended 30 June 2017

3 Donations and legacies

	Unrestricted funds £	Restricted funds £	Total 2017 £	Total 2016 £
Donations and gifts	56,626	18,107	74,733	79,062
Grants	-	45,281	45,281	21,795
	<u>56,626</u>	<u>63,388</u>	<u>120,014</u>	<u>100,857</u>
Year ended 30 June 2016 comparative figure	<u>77,601</u>	<u>23,256</u>		<u>100,857</u>

4 Other trading activities

	Unrestricted funds £	Restricted funds £	Total 2017 £	Total 2016 £
Fundraising events	814	773	1,587	3,255
Trading income	1,200	-	1,200	382
	<u>2,014</u>	<u>773</u>	<u>2,787</u>	<u>3,637</u>
Other trading activities				
Year ended 30 June 2016 comparative figure	<u>3,427</u>	<u>210</u>		<u>3,637</u>

5 Investments

	2017 £	2016 £
Interest receivable	<u>31</u>	<u>15</u>

6 Raising funds

	2017 £	2016 £
<u>Fundraising and publicity</u>		
Staff costs	<u>2,756</u>	<u>2,756</u>
	<u>2,756</u>	<u>2,756</u>

Notes to the financial statements (continued) for the year ended 30 June 2017

7 Charitable activities

	2017 £	2016 £
Staff costs	36,619	35,802
Depreciation and impairment	237	234
Advertising and marketing	13,490	6,901
Venue hire	667	120
Professional expenses	8,982	221
Online donation charges	2,003	1,989
Postage, freight and courier	918	530
Printing and stationery	5,832	1,321
Travel - national	4,206	1,906
Website improvements	12,434	3,052
Sundry	464	470
	<u>85,852</u>	<u>52,546</u>
Share of support costs (see note 8)	8,042	8,109
Share of governance costs (see note 8)	1,440	1,166
	<u>95,334</u>	<u>61,821</u>
Analysis by fund		
Unrestricted funds	45,678	48,854
Restricted funds	49,656	12,967
	<u>95,334</u>	<u>61,821</u>

8 Support costs

	Support costs £	Governance costs £	2017 £	2016 £
Staff costs	2,756	-	2,756	2,756
Office rent	4,133	-	4,133	4,133
Insurance	164	-	164	460
IT support	696	-	696	648
Telephone & internet	293	-	293	333
Accountancy	-	1,440	1,440	945
	<u>8,042</u>	<u>1,440</u>	<u>9,482</u>	<u>9,275</u>
Analysed between				
Charitable activities	<u>8,042</u>	<u>1,440</u>	<u>9,482</u>	<u>9,275</u>

Governance costs includes payments to the independent examiner of £1,440 (2016- £945) for fees.

Notes to the financial statements (continued) for the year ended 30 June 2017

9 Trustees

The Trustees received no remuneration from the charity in the year (2016 - £nil).

During the year two Trustees were reimbursed £280 (2016 - one Trustee was reimbursed £86). The amount related to travelling for the purposes of meetings, research and running support groups. No Trustee received payment for professional or other services supplied to the charity (2016 - £nil).

10 Employees

Number of employees

The average monthly number employees during the year was:

	2017 Number	2016 Number
	3	4
	<hr/>	<hr/>
Employment costs	2017 £	2016 £
Wages and salaries	41,935	40,618
Social security costs	196	696
	<hr/>	<hr/>
	42,131	41,314
	<hr/>	<hr/>

No employees earned more than £60,000 in the year (2016 - none).

11 Tangible fixed assets

	Computers £
Cost	
At 1 July 2016	710
	<hr/>
At 30 June 2017	710
	<hr/>
Depreciation and impairment	
At 1 July 2016	473
Depreciation charged in the year	237
	<hr/>
At 30 June 2017	710
	<hr/>
Carrying amount	
At 30 June 2017	-
	<hr/>
At 30 June 2016	237
	<hr/>

Notes to the financial statements (continued) for the year ended 30 June 2017

12 Financial instruments

	2017 £	2016 £
Carrying amount of financial assets		
Other debtors	501	433
Bank and cash	94,327	70,415
	<u>94,828</u>	<u>70,848</u>
Measured at cost		
Carrying amount of financial liabilities		
Trade creditors	-	210
Accruals and deferred income	1,440	945
Other creditors	5,000	5,000
Other taxation and social security	583	
	<u>7,023</u>	<u>6,155</u>
Measured at cost		

13 Debtors

	2017 £	2016 £
Amounts falling due within one year:		
Trade debtors	919	-
Other debtors	501	433
Prepayments and accrued income	325	-
	<u>1,745</u>	<u>433</u>

14 Creditors: amounts falling due within one year

	2017 £	2016 £
Other taxation and social security	583	623
Trade creditors	-	210
Other creditors	5,000	5,000
Accruals and deferred income	1,440	945
	<u>7,023</u>	<u>6,778</u>

15 Analysis of net assets between funds

	Unrestricted funds £	Restricted funds £	Total £
Fund balances at 30 June 2017 are represented by:			
Current assets/(liabilities)	34,914	54,135	89,049
	<u>34,914</u>	<u>54,135</u>	<u>89,049</u>

Notes to the financial statements (continued) for the year ended 30 June 2017

16 Restricted funds

The income funds of the charity include restricted funds comprising the following unexpended balances of donations and grants held on trust for specific purposes:

	Balance at 1 July 2016	Movement in funds		Transfers	Balance at 30 June 2017
	£	Incoming resources £	Resources expended £	£	£
Awareness Campaign	3,765	-	(3,769)	4	-
Family Day	120	2,514	(1,544)	-	1,090
Children's Book Appeal	346	10,103	(8,053)	-	2,396
Support Service Project	26,125	-	(12,090)	-	14,035
Research Appeal	9,255	63	(9,333)	15	-
HP Website – VTCT Foundation	-	26,300	-	-	26,300
Patient Guides	-	2,773	(114)	-	2,659
GP Awareness Fund	-	8,851	(1,196)	-	7,655
Frame – NIHR funding	-	4,173	(4,173)	-	-
Big Lottery Fund Grant (website)	-	9,384	(9,384)	-	-
	<u>39,611</u>	<u>64,161</u>	<u>(49,656)</u>	<u>19</u>	<u>54,135</u>

Awareness Campaign - Production and distribution of general charity information to GP surgeries and hospitals in the UK.

Family Day - To provide family days for children with facial palsy, reducing isolation and increasing confidence and self-esteem.

Children's Book Appeal - To fund a children's book to support children affected by facial palsy.

Support Service Project - To provide support and information to people affected by facial palsy, via local support groups, telephone and email.

Research Project - To fund a priority setting exercise between patients, carers and health professionals, deciding the top ten facial palsy research questions to be answered.

Health Professionals' website – To create a platform for health professionals for the purpose of sharing knowledge, education and collaboration opportunity.

Patient Guides – To create eight patient guides in download format covering various causes of facial palsy.

GP Awareness Fund – To raise awareness of facial palsy with GPs.

Frame – Collaborative project to develop a device in the form of a pair of glasses as a facial therapy aid.

Website (funded by a Big Lottery Fund Grant) – To create a new mobile friendly website with improved accessibility.

Notes to the financial statements (continued) for the year ended 30 June 2017

17 Operating lease commitments

At the reporting end date the charity had outstanding commitments for future minimum lease payments under non-cancellable operating leases, which fall due as follows:

	2017 £	2016 £
Within one year	4,133	4,133
Between two and five years	-	4,133
	<u>4,133</u>	<u>8,266</u>

18 Related party transactions

Remuneration of key management personnel

The remuneration of key management personnel is as follows.

	2017 £	2016 £
Aggregate compensation	<u>30,063</u>	<u>27,563</u>

Transactions with related parties

Included in other creditors is a loan of £5,000 (2016 - £5,000) due to Charles Nduka, Chair of Trustees and Acting CEO. No interest is charged on this loan.

There are no donations from related parties which are outside the normal course of business and no restricted donations from related parties.