

# FacialPalsy<sup>UK</sup>

INFORM • SUPPORT • RESEARCH

Facial Palsy UK Annual Report and Unaudited Financial Statements  
For the Period Ended 30 June 2018

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.

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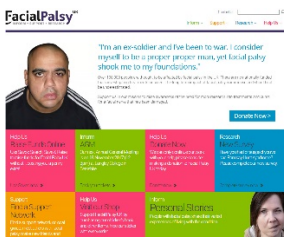
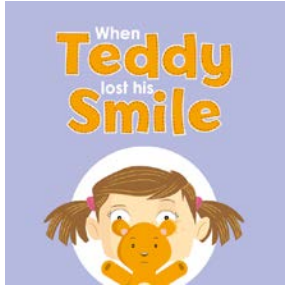
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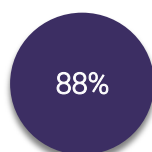
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Notes to the financial statements

## 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
<b>501</b> direct support enquiries during the year	Focus on Ramsay Hunt syndrome including a mnemonic, infographic, patient guide, lived experience booklet and photographic exhibition in Parliament.	<b>2</b> Family days
<b>232</b> attendances at local support groups	<b>2</b> New Patient Guides published	<b>18</b> families attended our family days
Feedback from attendees of local support groups showed <b>91%</b> felt more knowledgeable about healthcare options <b>89%</b> felt less isolated <b>79%</b> felt more confident approaching health professionals <b>89%</b> felt more confident generally <b>98%</b> said it was helpful to hear other people's experiences	Our mobile & user friendly website continued to attract more visitors  <b>288,457</b> users of our website during the year <b>542,019</b> views of information and support topics on our website	Children's Book 'When Teddy lost his Smile'. <b>34</b> copies sold in the year  <b>182</b> Members of Parents & Carers Facebook group at 30 Jun 2018
Volunteers	Research	Awareness
<b>70</b> active volunteers helping with support, information, research, feedback & events.	<b>321</b> People with Ramsay Hunt syndrome surveyed about their experience of the condition	<b>24</b> Media mentions in magazines, national & local press, radio and television



88% funded from charitable donations this year (see page 22 for more details)

# Report of the Chair/Acting CEO

One of the benefits of still being a practicing doctor is that I'm able to see first-hand many of the issues affecting those with facial palsy. The many gaps in service provision available on the NHS has been a constant theme in the seven years since the charity was founded. In particular there is a constant battle to improve services for facial palsy; many health professionals and managers still believe facial palsy is a cosmetic issue and consequently a low priority for funding. The recent emphasis on mental health by the NHS has allowed more focus on the non-appearance related issues that people with facial palsy can face, but the availability of community psychological services is still inadequate.

This report describes the past year's activities of our small team, and in particular Karen Johnson and Lorraine Thurston, the charity's only employees. We are lucky enough to be supported by nine trustees and a team of volunteers and medical experts.



Charles Nduka (Chair/Acting CEO)

The strap line for Facial Palsy UK is inform, support, research. This trio of interrelated activities form the foundation of the charity - each part strengthens the other.

## Inform

Over the past year the Facial Palsy UK website has grown considerably and continues to be the hub for reliable information about facial palsy, it attracts over a quarter of a million users per year. New resources are frequently added, particularly in the self-care section. There is still the important job of ensuring that healthcare professionals are fully informed about the appropriate care for patients, something we are seeking to address in our upcoming strategy. There are two ongoing initiatives that will reinforce medical education about facial palsy; a book for GPs and front line professionals, and a dedicated website.

## Support

We continue to support people affected by facial palsy via telephone, email and through our support groups. Many people are surprised that the charity only has one part-time support worker. The development and expansion of local support groups continues to enable peer level support for those affected. My personal highlight is from the Family Day for children with facial palsy at LEGOLAND® - it was enjoyable and exhausting in equal measure.

## Research

One of the biggest barriers affecting the provision of NHS care is the lack of large scale trials demonstrating the effects of treatments. We are continuing work to encourage the use of improved methods of measuring facial function. More and more studies are being published showing the effectiveness of some treatments. The charity has been actively involved in research and scientific presentations which support the building of the evidence needed to maintain NHS funding.

## Challenges ahead

We are reliant on the generosity of individual fundraisers and donors, to which we are grateful for. We are committed to spending your donations wisely. We are also acutely aware that the increased pressures on the NHS mean that the few services available now for people with facial palsy may be at risk – something we would strongly contest.

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 reviewing what your efforts have achieved for those affected by facial palsy.



Charles Nduka, Chair

## 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

## Key concerns

Inequalities in diagnosis and treatments are a key concern for Facial Palsy UK. Many areas of the UK do not manage facial palsy within a specialist multidisciplinary team, with only pockets of expertise across the UK. Furthermore, there are different approaches to treatment, with some Clinical Commissioning Groups (CCGs) having a dedicated policy, whilst others decide on a case by case basis.

For those who develop a chronic condition and have a prolonged struggle to access treatment, the risk of depression rises.

“Depression is approximately two to three times more common in patients with a chronic physical health problem than in people who have good physical health and occurs in about 20% of people with a chronic physical health problem.” NICE Clinical guideline (CG91 2009).

## 10 local support groups

### Our target

- Make more face-to-face support available locally

### Our achievements

- Peterborough Network launched with a face-to-face meeting taking place during the year
- Northern Ireland Facebook group launched June 2018 – 36 members
- Facial Palsy in Pregnancy Facebook group launched February 2018 – 61 members
- Cheshire & Mersey Group 1<sup>st</sup> Anniversary – 14 group members within first year
- Numbers attending support groups increased by 27% (232 attendances) compared to the previous year, the average number attending each group was 10.
- Out of 199 attendees who completed feedback forms about the support group, 89% said they now had greater confidence, 91% were more knowledgeable about health care options, 89% felt less isolated and 79% felt more confident approaching health professionals. 98% said it was helpful to hear other people's experiences.

“I love the group. I wish we could meet more often. It is so good to share thoughts, experiences and advice.”

Anonymous feedback collected at Norwich Support Group.

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

"It has been a pleasure to volunteer with Facial Palsy UK and meet the people who attend the group. The friendship and support that the group offers other members whether they have only attended one or two meetings or several, cannot be compared to a professional consultation and I am only too aware of what I can cover in the time I have with my patients in Aberdeen. The psychological and social impact of a facial palsy, as we know, is immense and this goes a good way to addressing this need. I never fail to take away something from the people in the group which helps me in my practice and hopefully benefits my patients too."

**Penny Gravill, Lead Speech and Language Therapist, Edinburgh Support Group facilitator.**

"I co-facilitate the Cheshire & Mersey Facial Palsy Support Group with Helen Martin (Health Professional). We hold our meetings bimonthly at The Brain Charity. I've lived with facial palsy for 30 years after having an operation to have a cholesteatoma removed which also resulted in deafness on my right side. I love our support group for the amount of people that turn up, everyone has their own story and we learn so much from each other. Sometimes we have speakers or we may just have a discussion on certain topics that help make us feel better about ourselves. We sometimes have tears but mostly have laughter. The feedback from members speaks volumes which gives great satisfaction knowing people look forward to the meetings, feel safe to say how they are feeling and go home happier. I feel proud to be part of this group with great people attending. I'm very passionate about facial palsy and will always give 100% to anyone in need of support."

**Sheila Fairclough, Cheshire & Mersey Support Group co-facilitator**



*Cheshire & Mersey Support Group Facilitators (Helen Martin & Sheila Fairclough)*

## Other support networks

In addition to regular support groups, local support networks in Belfast, Cornwall and Peterborough operated during the year. Volunteers establish how best to help people in the network and arrange meetings on an ad hoc basis as required. We also have a support network for mums who experience Bell's palsy in pregnancy.

In February 2018 Facial Palsy UK's Northern Ireland network held the inaugural meeting between patients and medical professionals in Belfast. Current issues around access to care and lack of awareness were discussed and objectives agreed. Further meetings will follow. This was entirely volunteer led.



Support group/network locations

# One staff member answers 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 501 people this year by telephone or email – this is a 43% increase on 2016/17.
- 49% of those who contacted us now have more information about healthcare options available to them that they weren't aware of before.
- 22% sought information about local support groups.



Our dedicated Support & Information Coordinator who works three days a week is a qualified and experienced counsellor with a radiotherapy background.

Many people we speak to have been diagnosed, provided some initial treatment but have had no further clinical input. Months or years later they are still having significant physical and psychological problems. Many have not met anyone else with the same condition.

Typically calls are 20–30 minutes long. Clients are often distressed and anxious about their altered appearance and the many functional problems that accompany it. A third of callers require a follow-up call, email 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.

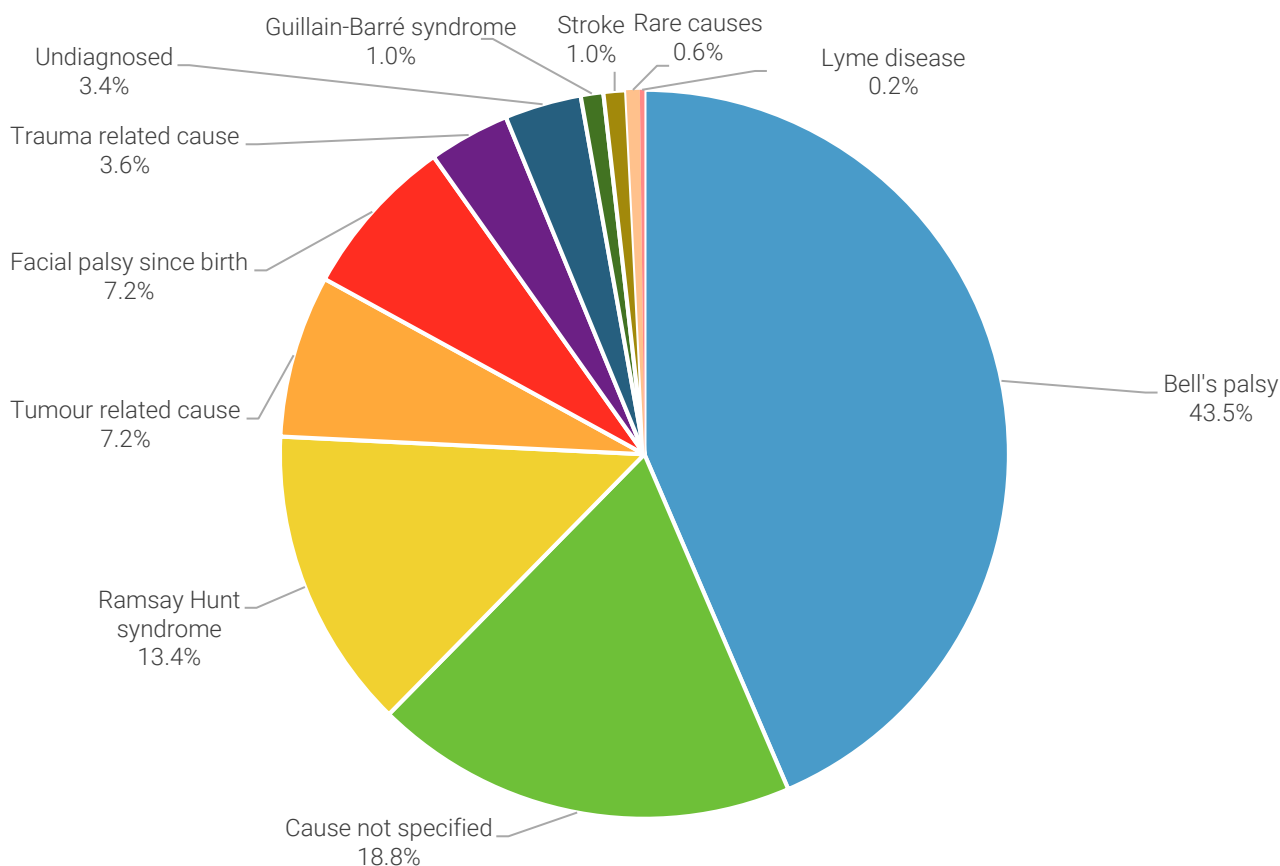
The key areas of support offered by phone or email are:

- 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 there are over 50 different causes of facial palsy, our team must have a broad knowledge of associated conditions.



## The conditions we've supported this year\*



The pie chart demonstrates the different causes of facial palsy we received enquiries about. Of these: 88% of enquiries were related to adults with facial palsy, 8% to childhood facial palsy and 4% of enquiries came from health professionals seeking advice about the management of facial palsy. As well as people living with facial palsy and their friends and families, we also received enquiries from teachers and employers.

\*Based on support enquiries between 1 July 2017 – 30 June 2018

"In March 2017 I came down with Bell's palsy. I went by ambulance to my local A&E. Following tests, e.g. MRI, CT scan, etc., I was sent home with a course of steroid tablets. With no follow-up I was left to my own devices. Following internet searches I discovered the Facial Palsy UK website. What a relief, somewhere I could look for information and advice. On several occasions I have contacted them by telephone and spoken at length. The assistance and advice has without doubt aided my recovery greatly. I have a long way to go but have to thank all at Facial Palsy UK. My own GPs do not appear to believe there is anything they can do for someone like myself and virtually told me I have no chance of recovering, this after a period of only three months from diagnosis. It would appear that due to Bell's palsy being a non-life threatening problem, money is not forthcoming for research as to its cause and treatment. To be able to speak to someone like Facial Palsy UK can be the glimmer of hope that is required to lift one's spirits and to make you realise you are not alone. Their patience and willingness to listen is worth more than I can say and I cannot praise them enough."

Anthony Davies, 15 June 2018.

The key areas of concern raised by enquirers were:

- GPs being unaware that further specialist help is available for patients.
- A lack of information and support when initially diagnosed.
- Lack of follow-up care and feeling they have to research specialists themselves.
- Specialist teams being absent in Mid-Wales, North Wales, Northern Ireland and some areas of England.
- The psychological impact of facial palsy being misunderstood by health professionals and the condition frequently considered a cosmetic problem.

[“My GP told me seven years ago that I just have to live with it.” - Support enquiry](#)

[“It is often difficult for people to find a voice when their face has changed, they often describe themselves as losing their identity and confidence. Being unable to smile to greet someone and the knowledge that their health condition is on public display is partly responsible for this.”](#)

[Lorraine, Facial Palsy UK Support and Information Coordinator.](#)

## Supporting families

### Our target

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

### Our achievements

- 4 families attended our Whitehouse Farm Family Day in Northumberland Sep 2017
- 14 families attended our LEGOLAND® Family Day in Windsor Jun 2018
- 1 experienced surgeon and 3 adults with facial palsy volunteered at family day events
- 100% positive feedback received at Family Days
- 182 members of Parents & Carers Facebook Group at 30 June 2018
- 34 copies of our children's book sold during the year

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.

[“During the family day my daughter turned to me and said she no longer wants to change her smile.”](#)  
[Parent feedback, LEGOLAND® Family Day, June 2018](#)

Parents too can feel isolated and welcome the opportunity to discuss common worries with other parents in a similar situation. Having a surgeon also 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.

"I love that Con is so comfortable surrounded by her face on other people. I like that the kids start their own chats and groups, it's so nice for them to have each other. Thank you so much for all your hard work as always. We love your team."

Louise Beddall, parent.



LEGOLAND Family Day



With our children's book

**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. At the request of the Parents and Carers this year we added a team of four adult volunteers born with facial palsy to the group to help answer questions.

"The Facial Palsy UK Parents and Carers Group was a light in some of my scariest weeks - facing life with a baby with facial palsy. I had no idea what this meant or what her future might hold. Then I found this group and the support and information helped me to not only get through those first emotional weeks, but helped me with a pathway forward on who and what I needed to seek advice on from our health professionals. She is now 8 months old and it continues to be a major source of information and support. I am so grateful it exists."

Tamara Badenoch, Australia, member of Parents and Carers Facebook Group

## Challenges to supporting families

Going forward we must ensure family days are accessible to as many people as possible. We currently rotate around England. As of yet we haven't had enough interest from people in Wales, Scotland or Northern Ireland. We must do more to help families in remote areas. A future plan is to hold a weekend conference offering activities for children and health professional talks for parents, making it more worthwhile to travel long distances and attracting a greater number of families.

## Website

## Information rich and user-friendly

### Our target

- For the website to be more community focused and increase signups by 15% year on year.

### Our achievements

- Overall visitors to website increased by 9.5% compared to previous year.
- 542,019 views of information and support topics on our website.
- New self-help content on our community website, e.g. Photography tips, Video Library.
- New products in online shop.



We have new sign ups to 'Join our Community' every day. 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 **288,457 users of our website** during this financial year. Enquiries about local support groups continue to increase suggesting people are finding information more easily. This year we cleansed our mailing list as part of our General Data Protection Regulation processes which resulted in a 9.6% decrease in mailing list numbers.

Our top three website topics	Page views
Bell's palsy	55,263
What is facial palsy?	50,390
Ramsay Hunt syndrome	39,072

**New content on our website** - our new video library enables people to access video content all in one place. We also added a page with Photography tips at the request of our community.

**New products in online shop** – we sourced variations of eco-friendly straws to give people the opportunity to trial all the different types at a cheaper price, addressing the recent move by businesses to stop providing plastic straws for customers. We have also designed eco-friendly bags promoting #uniquenessmiles and we sourced free pens which have been distributed at support groups. We've been told that these pens have been useful as a 'conversation starter' about facial palsy in the workplace.

"I just joined your community. I have been experiencing my palsy for three weeks now and found your website very helpful. Thanks for great information."

### Website feedback

# Information

## Our target

- To improve the information we provide for clients and health professionals

## Our achievements

This year we have:

- Published two patient guides (on Ramsay Hunt syndrome and children with facial palsy)
- Began work on dedicated health professionals' website
- Published the comprehensive results from our Ramsay Hunt syndrome survey
- Created an infographic and mnemonic about Ramsay Hunt syndrome
- Published a 'questions for my surgeon' form

**Work continued on developing a new dedicated health professionals' website** – it is a platform for sharing knowledge, education and collaboration opportunity. The website has been built and partial content loaded. Volunteer health professionals are currently working on the main content to be added before the site can go live.

**Published Ramsay Hunt syndrome patient survey results** – 321 people took part (206 UK and 115 non-UK participants). Out of 206 UK respondents, 152 people had received a confirmed diagnosis of Ramsay Hunt syndrome. Of those with a confirmed diagnosis:

- 57% were initially misdiagnosed and only 39% correctly diagnosed within the critical 72 hour window.
- 37% were not routinely followed up by their GP or a hospital clinic.
- 45% said their doctor was not knowledgeable about Ramsay Hunt syndrome.
- 36% felt their doctor was unsympathetic to the emotional impact of Ramsay Hunt syndrome.
- 52% received the correct treatment of antivirals within the optimum 72 hour window.

"My GP did not diagnose Ramsay Hunt syndrome and ignored my complaint of severe ear pain and told me the sickness (vertigo) was 'bad luck'. Even after I was referred to an ENT specialist and properly diagnosed, my GP still refused to acknowledge Ramsay Hunt syndrome and kept saying I had Bell's palsy." - Survey participant

"I asked for facial paralysis treatment. I was told NHS has no money for that." – Survey participant

The 'top 3' reported issues were:

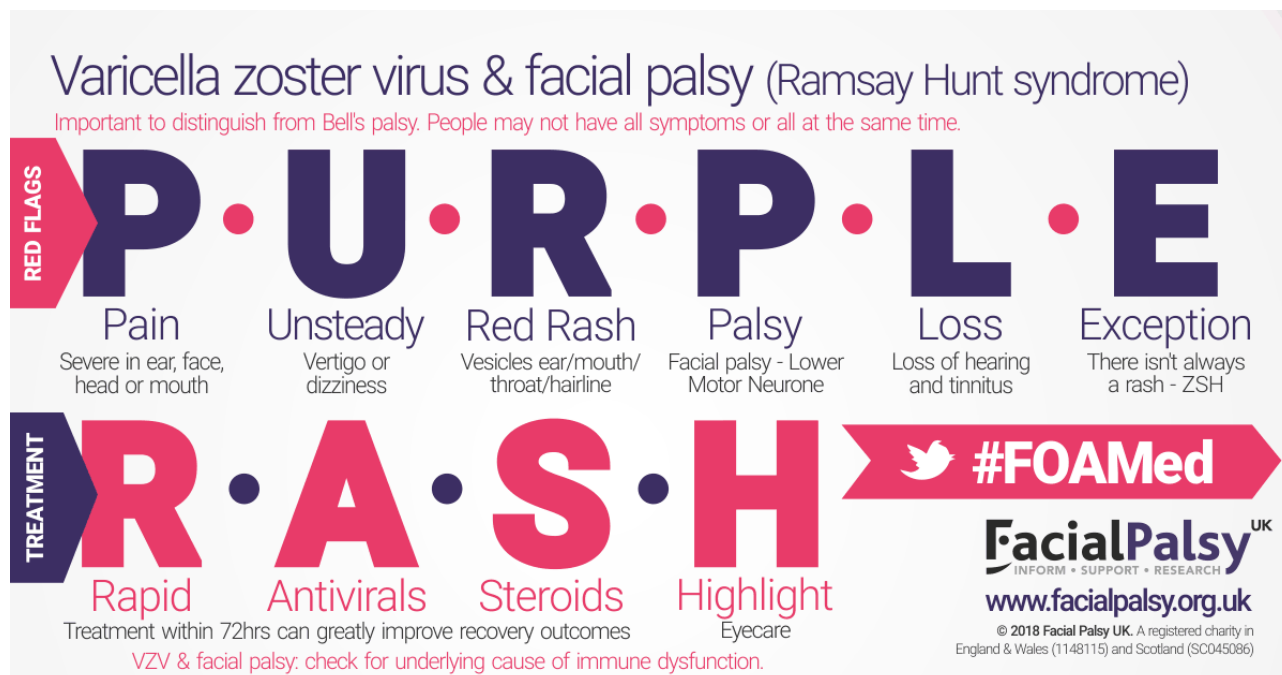
- People had to do their own research to find a specialist.
- GP did not know specialist care existed for people with facial palsy.
- The GP was unhelpful in providing follow-up care, i.e. making a referral.

"The Ramsay Hunt survey is a revelation. I have had it for 15 years and the survey details the most amount of information I've ever received about it. Thank you for raising awareness and for your brilliant work. It really does make a difference."

Feedback from our community



Created an infographic and mnemonic about Ramsay Hunt syndrome in conjunction with our Medical Advisory Board. The 'PURPLE' mnemonic aid was presented to a group of UK neurologists and a virologist – who all agreed it was a good idea.



“Almost all of us had seen serious complications as a result of facial palsy in context of Varicella zoster virus (VZV) and as a consequence in clinical practice had a low threshold for adding in acyclovir cover to steroids – if there was any doubt – e.g. severe ear pain, hearing loss, imbalance, or if patients were immunocompromised even if definite vesicles were not visible at that time.”

Dr Romi Saha (Consultant Neurologist), May 2018.

**Questions for my surgeon form created** – the four page form includes suggested questions to ask surgeons about prospective operations and also provides space for patients’ own questions and answers.

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. 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 just 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.

Previous Freedom of Information requests to local health authorities demonstrate that a vast majority consider 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

This year we have:

- Delivered a successful Facial Palsy Awareness Week 1-7 March 2018
- Featured on Public Health England Shingles Campaign materials
- Held an exhibition in the Houses of Parliament about Ramsay Hunt syndrome
- Had 24 media mentions in magazines, press, radio and television, 29% increase on previous year
- Received 155% increase in Twitter impressions
- Seen an overall increase in awareness via social media channels

**Public Health England added our logo and website to their Shingles campaign leaflet and posters** published March 2018. Our literature was also distributed at the National immunisation conference 24-25 April 2018. This was a result of our work highlighting Ramsay Hunt syndrome.

**Volunteer Mandy Brailsford successfully challenged a well-known national food retailer** about the description 'NO BEAUTY QUEENS' on fresh vegetable packaging, it was described in this way because the food didn't meet visual expectations. The retailer agreed to change the packaging and made a donation to Facial Palsy UK.

**Volunteer speakers** help us raise awareness, and often funds, in a variety of different settings.

**Exhibition held in the Houses of Parliament** for a week (from 19 March 2018). The exhibition in the House of Commons was organised in partnership with Helena g Anderson and sponsored by Helen Whately MP. This was a series of self-portraits of Helena taken during her recovery from Ramsay Hunt syndrome. Helena volunteered many hours to support this project and enable it to take place. We were extremely grateful for this huge opportunity to raise awareness of facial paralysis and for Helena's and Helen Whately's support. A booklet accompanied the exhibition. We also used this opportunity to empower people affected by Ramsay Hunt syndrome, seven people who had experienced this condition attended the opening ceremony.



Lasting memories people had from the exhibition:

"A very special personal journey but one which illustrated how the condition affects the whole person, their mind, emotional stability and their view of themselves."

"How slow the days are when recovering from a facial paralysis. Days become nights, nights become days, something Helena said."

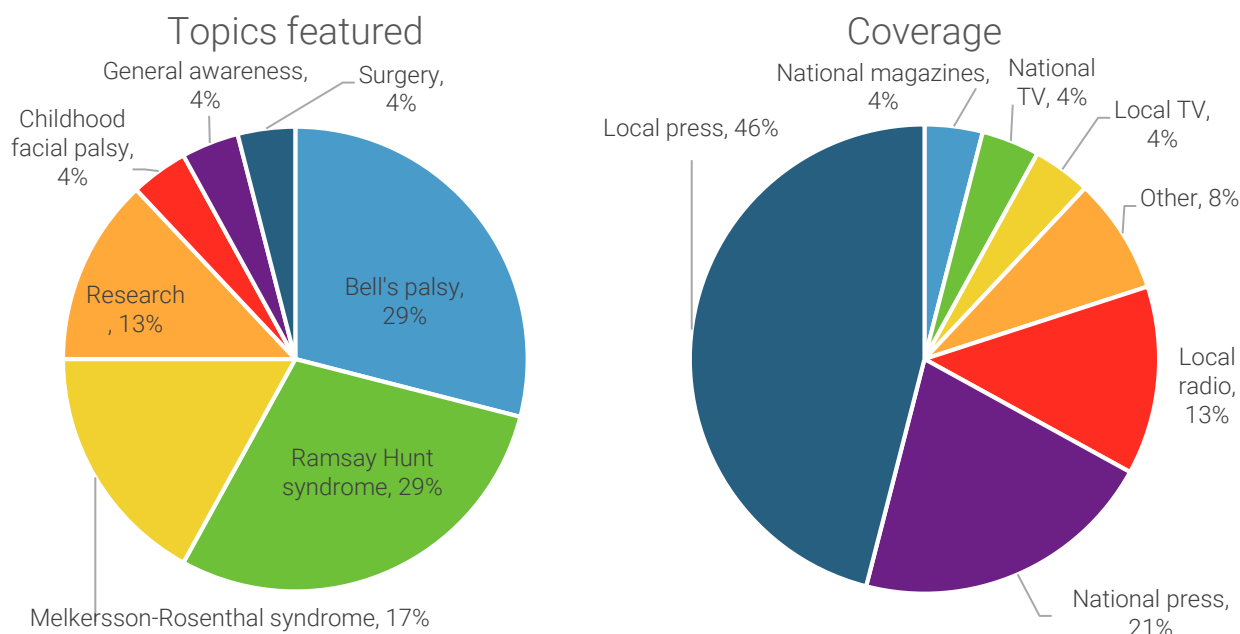
"The lasting memory I have is hearing how many people are affected by Ramsay Hunt syndrome and other examples of facial palsy and that there are low levels of support within the Health Service and society to help individuals and their families."

"The most memorable things were: - how long the original diagnosis took; how most doctors are not aware of Ramsay Hunt syndrome. Profoundly moving documented story."

"To my shame I'd never heard of Ramsay Hunt syndrome! Everyone should know! Well done in telling the world." **Giles Watling MP (Clacton)**



## In the media



Pie charts show topics featured and in what medium the coverage was y/e 30 June 2018.

Press interest often accompanies a celebrity being diagnosed with facial palsy, hence Bell's palsy stories are more frequently requested being more common. However, during Awareness Week in March we succeeded in raising the profile of Ramsay Hunt syndrome which is often misdiagnosed as Bell's palsy. For the first time we placed stories in the Northern Irish press.

The lack of good quality information about causes like Bell's palsy is often highlighted when celebrities go public about being diagnosed with facial palsy. Celebrities often inadvertently endorse different treatments purporting them to be 'cures' when there is no evidence to back up their claims. Because knowledge of facial palsy causes and treatments is poor among many generalist clinicians, patients are more likely to turn to celebrity 'advice' for help.

## Social media

We use the social media channels Facebook, Twitter and Instagram. With a small team and limited resources we are mainly active on Facebook using Twitter and Instagram less frequently. During Facial Palsy Awareness Week we post on Twitter more frequently and increase Instagram posts.

At 30 June 2018:

- 1368 Twitter followers (21% increase)
- 527,356 Twitter impressions (155% increase)
- 2,563 Facebook Likes (19% increase)
- 420 Instagram Followers



# Facial Palsy Awareness Week

## 1 – 7 March 2018

In 2015 we designated the first week of March as Facial Palsy Awareness Week. For our fourth awareness week, the theme was 'In Your Face'. We pushed the message that facial palsy affects function of the face and should not be dismissed as cosmetic. It's about what is happening 'in' your face, which is not always what others can see.

Activities included:

- People chose a number associated with a facial palsy fact and painted it on their face to raise awareness
- People shared stories about how facial palsy affects them
- People shared pictures and messages on social media to raise awareness
- Launch of our Facial Palsy in Pregnancy Facebook Group
- Information stands in hospitals with facial palsy specialist teams across the UK
- Fundraising
- Launch of two patient guides
- Published results of Ramsay Hunt syndrome patient survey
- Mnemonic created about diagnosis of Ramsay Hunt syndrome
- Published infographic about Ramsay Hunt syndrome



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 £6,789. Thank you!**



## Research & Education

Very few research projects are investigating the causes and treatments of facial palsy. 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.
- To understand more about Ramsay Hunt syndrome and the difficulties of those affected.

### Our achievements

This year we have:

- Published Delphi study results. This work was to ascertain top 10 priorities for facial palsy research.
- Partnered on FRAME research project supported by the National Institute of Health Research, the software being developed can also be used to standardise assessment procedures.
- Carried out a comprehensive survey about Ramsay Hunt syndrome.

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 work, as well as fundraisers and donors from our community who raised £4,255.

The full results are available via this link:

<https://www.facialpalsy.org.uk/research/identifying-the-research-priorities-for-facial-palsy/>

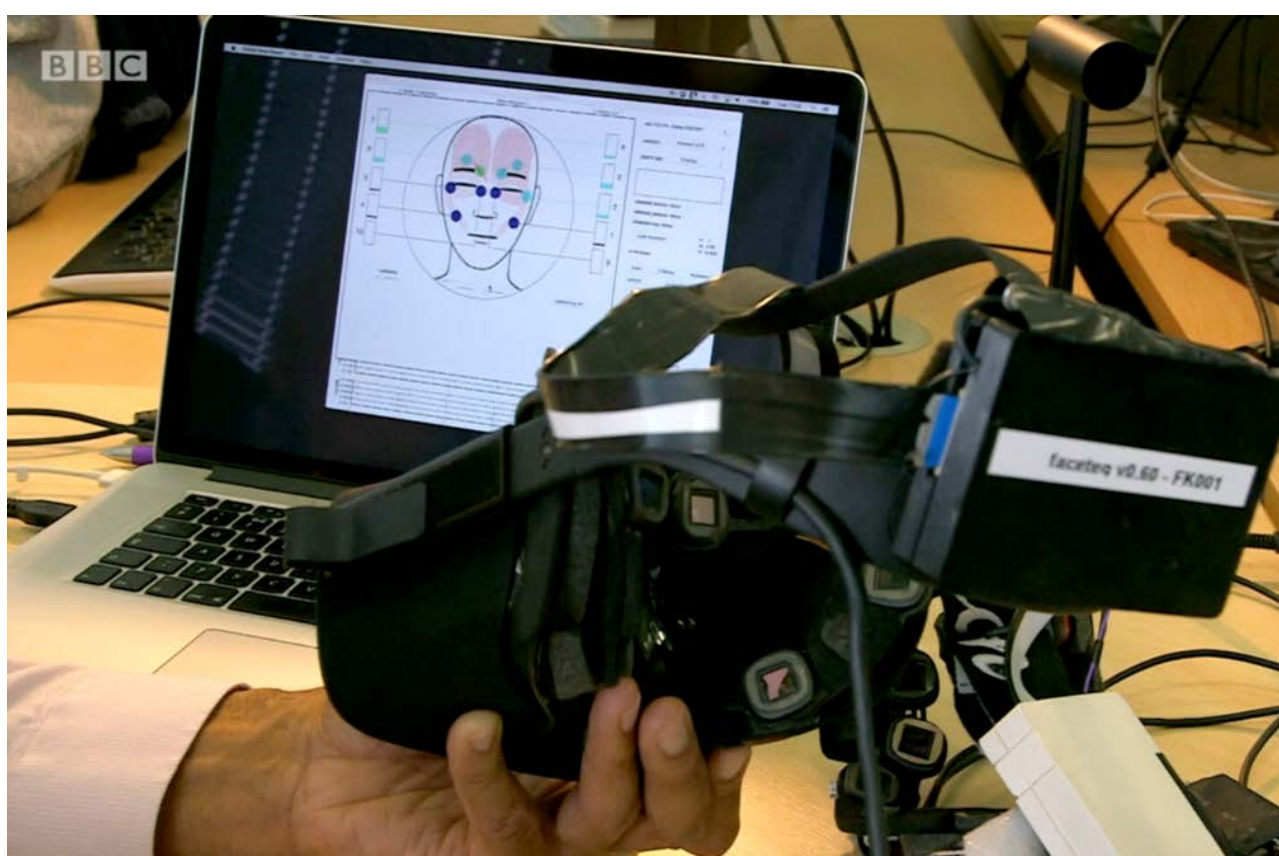
The number one priority for Patients and Carers was to find out what is the existing knowledge of front line professionals (especially GPs) when dealing with facial palsy and how can this be improved?

The number one priority for Health Professionals and Researchers was how can synkinesis be prevented and treated?

**FRAME stands for Facial Remote Activity Monitoring Eyewear.** 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. Large-scale studies have shown that up to a 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. 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 her 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. Facial Palsy UK's role has been to coordinate involvement of people with facial palsy who have been helping with tests to fine tune technology and focus groups to ascertain usability.



**Carried out a comprehensive survey about Ramsay Hunt syndrome**, 206 UK participants took part. (See page 13 for more details).

**Worked with the University of the West of England, Bristol** to explore the experiences of adults whose lives are affected by facial palsy. This will contribute to a greater understanding of the psycho-social impact of the condition and people's experiences of accessing and receiving treatment. We hope this research could inform the future care and provision of support for those affected by facial palsy.

**Worked with Coventry University** who undertook a UK-wide survey to gather evidence on current treatment pathways for patients with facial palsy and the place of facial exercise therapy. This was part of the FRAME research study.

## Volunteering

We would not be where we are now  
without our volunteers – thank you!

The charity has come a long way since it started six years ago. The support we offer would not be possible without our volunteers. 70 people gave up their time, skills and energy this year to help others affected by facial palsy, an increase of 15% 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

- The Parliament Exhibition in March was entirely organised by volunteer Helena g Anderson.
- New website content such as Photography Tips is coming from volunteer led Support Groups.

#### Volunteers help in the following ways:

##### Support

Our support groups simply would not run without the help of our volunteers. 232 attendances at support groups were made possible by 18 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.

##### Governance

Our Trustee Board oversee strategic direction, efficiency and legal responsibilities of the charity.

##### 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, manning merchandise stalls 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. They also assist in answering complex support enquiries.

##### Operations

Volunteers also help with social media, graphic design, fundraising and distributing literature.

## Challenges

We need to do more to make use of the volunteer resources available to us. We invested in our first database which has made us more efficient in volunteer management. We had planned to survey volunteers during this year to see how we could improve but this has had to be postponed due to additional work implementing new procedures for GDPR (General Data Protection Regulation). It will be carried out in 2019.

## How we are funded

88% 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

This year:

- 88% of our voluntary income came from the people, companies and trusts who supported us and 12% came from NIHR for a short-term project of two years\*.
- From this 88% raised, Facial Palsy Awareness Week activities and challenges accounted for 10% (£6,789 raised) of total income this year.
- Facebook was a new income stream for us raising £2,218.
- Individuals supported us through online shopping schemes such as 'Give as you Live', 'Amazon Smile' and 'Easy Fundraising' raising £426 (20% increase compared to the previous year).
- We also received our first legacy (£10,000).

Thank you for the many generous donations we received during the year from individuals and companies. We are also grateful to those who make regular donations via payroll giving, standing order or direct debit.

We are grateful for the following grants:

- The Sir Jules Thorn Charitable Trust (The Ann Rylands Small Donations Programme) £750
- \*National Institute for Health Research, Ref: II-LA-0814-20008 £7,984 – FRAME research project
- Police Mutual - Force for Good £400
- Lloyd's Charities Trust £2,000
- The Lynn Foundation £500
- The Magdalen Hospital Trust £1,600

We received our first legacy (£10,000) which made a huge difference to the work we were able to do this year. Thank you.

We were also kindly supported with pro bono support by:

- JGR Business Bureau who donated payroll processing hours to us.
- Go Displays who provided us with a free Display Banner.
- Orchard House Media who provided us with Google Adwords support.
- Rachel Schwartz (Trust fundraiser) for grant writing advice.
- Deanna Wolf (Trust fundraiser) for grant writing advice.
- Merlin's Magic Wand charity provided tickets for our LEGOLAND® family day.

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 2017/18. Thank you for making what we achieve possible.

### Great North Run 2017



Jonny, Janette, Cathy, Matty and Lisa took part in the Great North Run in September 2017 raising a total of £2,460.

### Bingo Fundraiser



Darcy and family organised a Family Bingo fundraiser in Lincolnshire during Facial Palsy Awareness Week. They raised £1,803 and a letter was sent to Darcy from John Hayes MP congratulating her on her achievements.

### Charity Fest



The Charity Fest team raised £3,663 in July 2017 with another fantastic festival in Walton-on-the-Naze, Essex.

### Creative fundraising



There are so many creative and dedicated people supporting our cause. Nicola made crochet creatures with #Uniquesmiles which raised funds and awareness.

### Virgin London Marathon 2018

Trustee Alison Sweeting stepped down in August 2017 but raised £2,538 during the year by taking part in the Virgin London Marathon in aid of Facial Palsy UK.

### Nottingham Fundraiser

Hayley and friends and family in Nottingham also organised a large ticketed event with bands and raffle prizes raising £1,851.



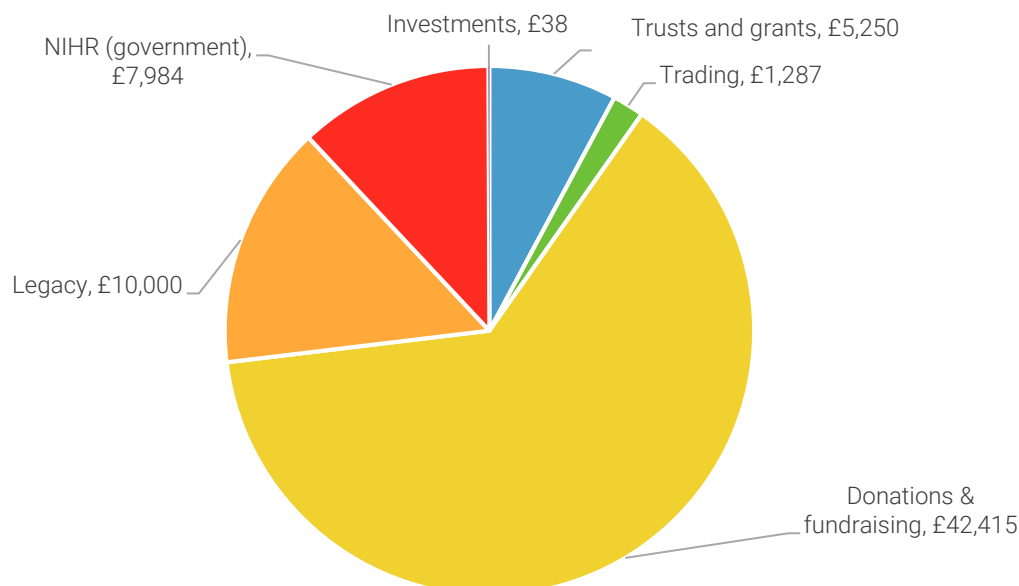
### Awareness & Fundraising

17 year old Lincolnshire sixth former Dan shaved off his hair to raise awareness and funds during Facial Palsy Awareness Week 2018.

He involved his sixth form peers and teachers in many different fundraising challenges leading up to Awareness Week and called it '50 days of awareness.'

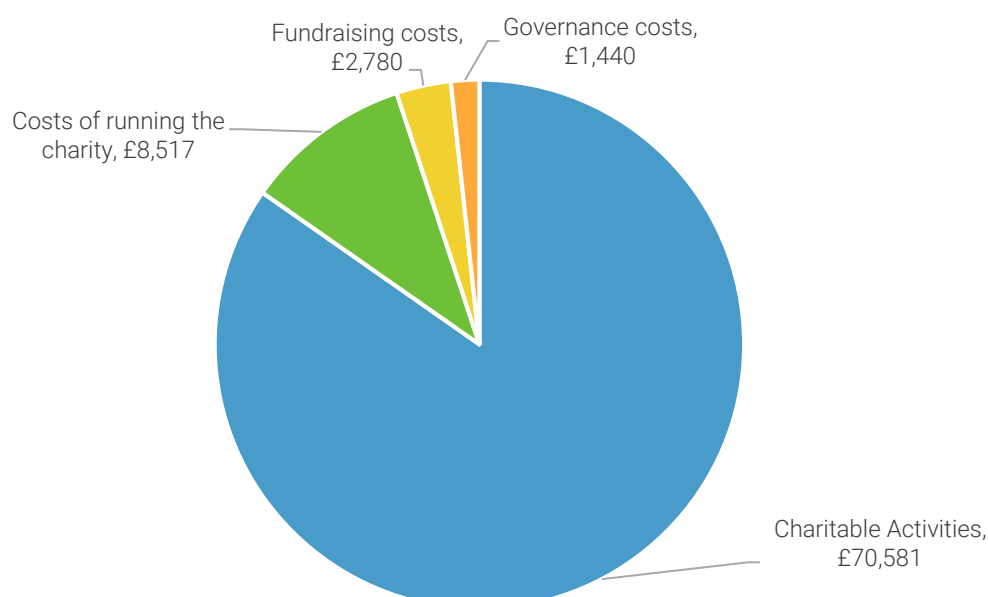
## Where our income comes from

This year you helped us to raise £66,974. The pie chart below shows where income was generated.



## Where we spend our income

Total resources expended this year were £83,318.



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. £2,780 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 'Join our Community' form we ask 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 are members of the Fundraising Regulator 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 6 year history.

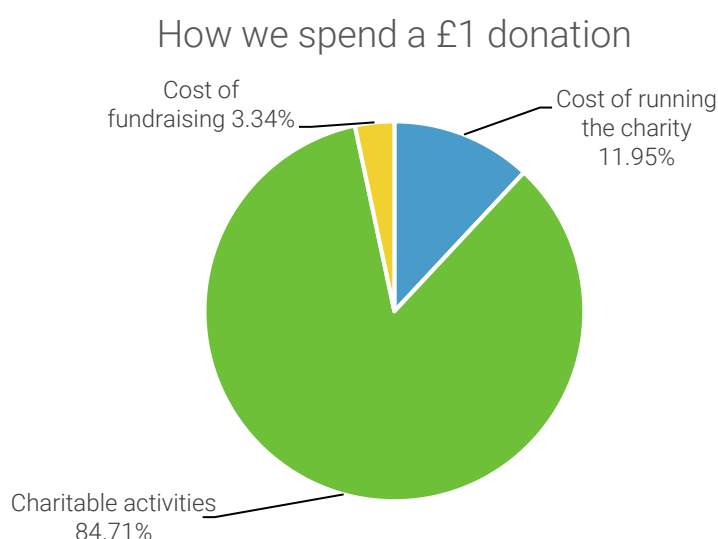
We promise to adhere to industry guidelines and regulations. We have invested time this year in ensuring we meet the requirements of the new General Data Protection Regulation (GDPR). We promise to ensure that all staff and volunteers are kept updated about data security and correct use and retention of data.

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

## How we spend our income

For every £1 we spend:

- 85p goes on delivering and improving care for people with facial palsy
- 3p goes on generating future income
- 12p 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. No date has been set for this repayment.

This year our total annual income decreased by 45.5% to £66,974 (previously £122,832). However, unrestricted income only fell by 4.9% to £55,818 (previously £58,671).

Unrestricted expenditure increased by 6.2% to £51,417 (previously £48,434). We employed one full-time and one part-time member of staff during this period. Unrestricted funds totalling £3,105 were spent on the exhibition in the Houses of Parliament.

Total expenditure decreased by 15.1% to £83,318 (previously £98,090) which includes two family days, restricted support services project costs, Health Professionals' website development work, creation of two patient guides and one research project.

We encourage fundraisers to use Virgin Money Giving (VMG), a platform that is popular with fundraisers, easy to use and offers much lower payment processing fees than competitors such as JustGiving. The tables below show the difference this makes.

2017/18					
Platform	Monthly fee	Processing fee	Income	Fee	Pennies in £ to cause
Virgin Money Giving	Nil	2% + card fee	£12,096	£357	£0.97
JustGiving	£46.80 (£561.60)	5% + card fee	£7,662	£416 + £562 = £978	£0.87
<b>TOTALS</b>			<b>£19,758</b>	<b>£1,338</b>	

2016/17					
Platform	Monthly fee	Processing fee	Income	Fee	Pennies in £ to cause
Virgin Money Giving	Nil	2% + card fee	£7,577	£225	£0.97
JustGiving	*£46.80 (£504.00)	5% + card fee	£17,651	£1,020 + £504 = £1,524	£0.91
<b>TOTALS</b>			<b>£25,228</b>	<b>£1,749</b>	

\* Monthly fee rose from £18.00 to £46.80 in September 2016.

JustGiving's monthly fees rise when you raise £15,000 or more in their financial year. Our JustGiving fees are to be reduced to £18.00 per month from September 2018 which will bring costs down. Both VMG and JustGiving have now added functionality for donors to cover processing fees if they choose.

We need to continually review this as people may be more likely to donate to JustGiving pages due to familiarity and ease of use. We reviewed the average income per fundraising page:

Platform	Average income per fundraising page	
	2016/17	2017/18
Virgin Money Giving	£838	£1,066
JustGiving	£797	£652

Our income via these channels reduced by £5,470 this year but this is due to fluctuation in number of fundraising events. We feel it is necessary to keep JustGiving as an option for fundraisers. We prefer to use well-known platforms to avoid risk.

## Charitable activities

Expenditure on charitable activities decreased by 15.5% to £80,538. £13,865 was spent on developing our new health professionals' website and making updates to our main website. Sundry expense includes one-off equipment rental (display stands) of £1,080 for the Parliament Exhibition.

## 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. We also need to mitigate the risk of having a small office team. If one of our staff members became ill and was unable to work we would need to recruit temporary cover.

To cover employee sickness for 6 months (statutory sick pay and temporary staff member) we would need at least £17,791. To cover redundancy we would need £5,505. These two scenarios would be unlikely to happen in unison. Our full-time member of staff is multi-skilled and has a high workload. We would possibly need a second additional member of staff in the short term while any replacement is learning our systems. We are holding £25,000 free reserves which includes £7,209 contingency fund for fluctuating income.



## Risks and uncertainties

Our Risk Register is reviewed at every Trustee meeting. Risks are assessed top down and bottom up.

### Major risks

RISK	MANAGEMENT
<b>Financial:</b> 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"> <li>• Diversify income streams</li> <li>• Regular financial planning &amp; review</li> <li>• Sustain unrestricted reserves to ensure we can continue to operate</li> <li>• Fundraising strategy review</li> </ul>
<b>Operational:</b> 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"> <li>• All communications centralised into charity database.</li> <li>• Document systems, plans and projects to ensure someone else could pick up tasks.</li> <li>• Periodically review volunteer requirements and necessary policies and training, etc.</li> <li>• All policies and procedures relating to data protection to be reviewed annually with reference to latest legislation.</li> </ul>
<b>External:</b> 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"> <li>• Preventative mechanisms, policies &amp; procedures.</li> <li>• Monitoring of preventative measures.</li> <li>• Improve our impact reporting.</li> </ul>
<b>Governance:</b> Poor knowledge of regulatory requirements and legal responsibilities.	<ul style="list-style-type: none"> <li>• Trustee Board increased to attain more skills, knowledge and experience.</li> <li>• Policies &amp; procedures to be regularly reviewed and communicated throughout whole organisation.</li> </ul>

## Employees and Volunteers

Our two employees (one full-time and one part-time) 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. Going forward, we need to better structure how we involve volunteers in giving feedback on important issues. We had proposed to do a survey of all volunteers in 2018 but this has been delayed due to extra workload caused by GDPR, it will be revisited 2019/20. We have contacted all volunteers this year to discuss GDPR updates and taken on feedback. 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 nine trustees as at 30 June 2018. Trustees have a wide range of skills and experience including clinical and professional expertise. Rebecca Black was designated co-chair in June 2018 to improve communications and strategic direction.

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)	(Re-elected 18 November 2017)
Rebecca Black (Co-chair)	
Vanessa Venables	(Re-elected 18 November 2017)
Fiona Hawthorne	(Re-elected 18 November 2017)
Alison Sweeting	(Retired 3 August 2017)
Janet Jutsum	
Gareth Price	
Susan Parsons	
Sheila Crowley	
Dimitra Gkerdouki	

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. Charles Nduka recognises that a potential conflict of interest is his several roles as co-founder and CEO of the charity, surgeon, researcher and technology developer in a private company. In particular, Charles is lead investigator on the NIHR funded FRAME research and development project. Transparency has been maintained at Trustee meetings and with all parties. Charles has committed to donate any personal profits from facial palsy products to Facial Palsy UK.

Day-to-day management of the charity is delegated by the Acting CEO and Chair/Co-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 Alison Sweeting who retired this year after 3 years of service as a Trustee.

### **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	Karen Johnson (full-time)
Support and Information Coordinator	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). We have updated our Privacy Policy and have put new systems in place in line with GDPR requirements. All policies and procedures 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, two having personal experience of the condition. There is also a patient representative with personal experience of facial palsy. 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.

## 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: Baldwins Holdings Limited T/As 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 2017) we highlighted the following future plans in line with our 3-year Strategic plan for 2016-2019:

	TARGET	PROGRESS
AWARENESS	Highlight the lack of knowledge about Ramsay Hunt syndrome (RHS) and publish the 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.	We published the largest comprehensive survey of people's experience of living with Ramsay Hunt syndrome. We worked with volunteers across the world to design the survey. Seven interviews with people with RHS were featured on local radio and television and in the press. The photographic exhibition took place in the House of Commons in March 2018.
	Plan awareness campaign around the lack of NHS help available for people with facial palsy due to being considered a cosmetic issue. Seek case studies to demonstrate the issues.	We focused on Ramsay Hunt syndrome for Facial Palsy Awareness Week this year due to the huge number of enquiries we were getting from people who'd been misdiagnosed. Our large survey and successful media campaign led to Public Health England distributing our literature and adding us to their shingles vaccination campaign leaflet. Volunteer Lisa Beardsley's North Lincolnshire campaign led to her local Clinical Commissioning Group's commitment to improve.
	Report on Freedom of Information requests obtained from local health authorities.	A medical professional is completing this on our behalf, the work is ongoing.
	Campaign encouraging more people with facial palsy to become speakers raising awareness about the condition.	The extra work involved with preparing for GDPR meant this had to be put on hold.
	Encourage the facial palsy community to share their stories on our website which often results in mutual support via comments on social media.	Ongoing. This year we doubled the number of stories about Ramsay Hunt syndrome and featured Melkersson-Rosenthal syndrome for the first time.
	Focus on GP Awareness using planned Health Professionals' website as springboard.	Work on the new website continues. We created a mnemonic for health professionals to help identify symptoms of Ramsay Hunt syndrome.
SUPPORT	Produce eight Patient Leaflets about specific causes of facial palsy.	Two patient guides published. Six are still being finalised.
	Improve support to volunteers.	All procedures & policies updated during the year but we still need to do more to engage with volunteers.
	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, potential funders identified and a survey has been completed to find out preferences of our community. This is now a priority for 2019/20.
	Build a database of treatment providers.	We are planning to make this list available on our Health Professionals' website so GPs know where to refer patients.
	Deliver two Family Days per year for children affected by facial palsy.	Two events took place – September 2017 and June 2018.
	Deliver two new support groups/networks.	Peterborough Network and Facial Palsy in Pregnancy Facebook group launched.
	Finish writing the second children's book which has a bullying theme and is aimed at older children.	Idea for second book has been drafted and approved but still needs to be written. We may need to find a new author.

EDUCATION & TRAINING	Plan how to deliver a guest speaker option to universities educating trainee speech and language therapists and physiotherapists.	We made tentative enquiries about offering guest speaker options but have not made any real progress yet.
	Seek funding to train more physiotherapists in Wales. Currently we know of just one therapist who has undertaken training to treat facial palsy.	We have been unsuccessful. Funders are possibly reluctant to fund any service that should be provided by the NHS. We need to revisit how we can best achieve this.
	Launch new facial palsy information website for health professionals, to improve knowledge, encourage collaboration and research.	The website framework is complete and we are now awaiting additional content from health professionals who are volunteering on the project before this can go live.
RESEARCH	Produce final report on 'Top 10' priorities for facial palsy research.	Completed. <a href="https://www.facialpalsy.org.uk/research/identifying-the-research-priorities-for-facial-palsy/">https://www.facialpalsy.org.uk/research/identifying-the-research-priorities-for-facial-palsy/</a>
	Use new health professionals' website to improve communications and collaboration.	A forum has been created for this purpose but the website isn't live yet. Ongoing work.
	Set goals for research in line with 'Top 10' priorities decided by patients, carers and health professionals.	Work will begin when we renew our Strategic Plan and our current research work on FRAME is complete.
	Formalise Facial Palsy UK's Research Advisory Committee.	Although the Medical Advisory Board met in March 2018, we have not made any further progress on this yet.
	Research trials to begin for FRAME project in 2018.	Trials have begun.

## 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 2018/19:

### 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. We decided to move our mailing list provider at the end of this year. There will be quite a lot of work to do but the end result will mean less duplication of effort as we are integrating with our website. We will also have improved segmentation which will result in more useful targeted communications for our community.

### Awareness

We used social media to ask what we should focus on for Facial Palsy Awareness Week 2019, the majority of people wanted us to highlight the psychological impact and also the difficulties accessing health care. With this in mind our priorities are:

- Highlight the impact of living with facial palsy and difficulties accessing treatment. Publish results of a comprehensive survey.
- Seek case studies to raise awareness of the difficulties accessing specialist treatment and lack of support.
- Send Freedom of Information requests to all Clinical Commissioning Groups/Health funders in UK about availability of specialist facial therapy.
- Create animation to raise awareness with GPs and the general public about impact of living with facial palsy.
- Campaign encouraging more people with facial palsy to become speakers raising awareness about the condition.
- Seek funds to distribute our children's book into libraries.

## Support

- Finalise two of six Patient Leaflets so they are available in download form from our website. Seek funding for printed versions.
- Seek funding for Patient Conference/social event with a view to holding this in 2019/20 at latest.
- Deliver 2 new support groups/networks.
- Deliver 2 family days (subject to funding).
- Make progress with the second children's book which has a bullying theme and is aimed at older children.
- Improve our support to volunteers.
- Create guides about employment and facial palsy.
- Add more video content to our website.
- Work with the Northern Ireland network to improve services in the region.
- Work with the Welsh network to highlight lack of facial therapy in the region.

## 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.

## 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 be completed for FRAME project in 2019.

## Fundraising

- Recruit our first dedicated Trust fundraiser
- Launch a lottery to bring in more regular income

# 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)  
27 February 2019

# Independent Examiner's Report

I report to the Trustees on my examination of the financial statements of Facial Palsy UK (the charity) for the year ended 30 June 2018.

## Responsibilities and basis of report

As the Trustees of the charity (and also its directors for the purposes of company law) you are responsible for the preparation of the financial statements in accordance with the requirements of the Charities and Trustee Investment (Scotland) Act 2005 (the 2005 Act), the Charities Accounts (Scotland) Regulations 2006 (as amended) and the Companies Act 2006 (the 2006 Act). You are satisfied that the financial statements of the charity are not required by charity or company law to be audited and have chosen instead to have an independent examination.

Having satisfied myself that the financial statements of the charity are not required to be audited under Part 16 of the 2006 Act and are eligible for independent examination, I report in respect of my examination of the charity's financial statements carried out under section 44 (1) (c) of the 2005 Act and section 145 of the Charities Act 2011 (the 2011 Act). In carrying out my examination I have followed the requirements of Regulation 11 of the Charities Accounts (Scotland) Regulations 2006 (as amended) and all the applicable Directions given by the Charity Commission under section 145(5)(b) of the 2011 Act.

## Independent examiner's statement

Since the charity is required by company law to prepare its accounts on an accruals basis and is registered as a charity in Scotland your examiner must be a member of a body listed in Regulation 11(2) of the Charities Accounts (Scotland) Regulations 2006 (as amended). I confirm that I am qualified to undertake the examination because I am a member of ICAEW, which is one of the listed bodies.

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

- 1 accounting records were not kept in respect of the charity as required by section 386 of the 2006 Act and Regulation 4 of the 2006 Accounts Regulations; or
- 2 the financial statements do not accord with those records; or
- 3 the financial statements do not comply with the accounting requirements of Regulation 8 of the Charities Accounts (Scotland) Regulations 2006 (as amended) and do not comply with the accounting requirements of section 396 of the 2006 Act other than any requirement that the accounts give a true and fair view which is not a matter considered as part of an independent examination; or
- 4 the financial statements have not been prepared in accordance with the methods and principles of the Statement of Recommended Practice for accounting and reporting by charities applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102).

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



Tracey Richardson BSc (Hons) FCA

Ruthlyn House  
90 Lincoln Road  
Peterborough  
Cambridgeshire  
PE1 2SP

Dated: 8 March 2019



## Statement of financial activities including income and expenditure account for the year ended 30 June 2018

	Notes	Unrestricted funds £	Restricted funds £	Total 2018 £	Total 2017 £
<b>Income from:</b>					
Donations and legacies	3	54,493	11,156	65,649	120,014
Other trading activities	4	1,287	-	1,287	2,787
Investments	5	38	-	38	31
<b>Total income</b>		<u>55,818</u>	<u>11,156</u>	<u>66,974</u>	<u>122,832</u>
<b>Expenditure on:</b>					
Raising funds	6	2,780	-	2,780	2,756
Charitable activities	7	48,637	31,901	80,538	95,334
<b>Total resources expended</b>		<u>51,417</u>	<u>31,901</u>	<u>83,318</u>	<u>98,090</u>
<b>Net incoming/(outgoing) resources before transfers</b>		4,401	(20,745)	(16,344)	24,742
Gross transfers between funds		(262)	262	-	-
<b>Net income/(expenditure) for the year/ Net movement in funds</b>		<u>4,139</u>	<u>(20,483)</u>	<u>(16,344)</u>	<u>24,742</u>
Fund balances at 1 July 2017		34,914	54,135	89,049	64,307
<b>Fund balances at 30 June 2018</b>		<u>39,053</u>	<u>33,652</u>	<u>72,705</u>	<u>89,049</u>

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 2018

	Notes	2018 £	£	2017 £	£
<b>Fixed assets</b>					
Tangible assets	11		553		-
<b>Current assets</b>					
Debtors	13	3,094		1,745	
Cash at bank and in hand		76,155		94,327	
		<hr/>		<hr/>	
		79,249		96,072	
<b>Creditors: amounts falling due within one year</b>	14	(7,097)		(7,023)	
		<hr/>		<hr/>	
Net current assets			72,152		89,049
<b>Total assets less current liabilities</b>			<hr/>		<hr/>
			72,705		89,049
			<hr/>		<hr/>
<b>Income funds</b>					
Restricted funds	15	33,652		54,135	
Unrestricted funds		39,053		34,914	
		<hr/>		<hr/>	
			72,705		89,049
			<hr/>		<hr/>

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 2018. No member of the company has deposited a notice, pursuant to section 476, requiring an audit of these financial statements.

The Trustees acknowledge their responsibilities for ensuring that the charity keeps accounting records which comply with section 386 of the Act and for preparing financial statements 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 financial statements, so far as applicable to the company.

These financial statements 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 27 February 2019.



Charles Nduka (Chair and Acting CEO)  
Trustee

Company Registration No. 08107184

## Notes to the financial statements for the year ended 30 June 2018

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

The financial statements 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 financial statements, 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 financial statements.

#### 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 financial statements.

#### 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 2018

### 1 Accounting policies

(Continued)

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 2018

### 1 Accounting policies

(Continued)

#### *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 2018

3 Donations and legacies

	Unrestricted funds £	Restricted funds £	Total 2018 £	Total 2017 £
Donations and gifts	51,743	672	52,415	74,733
Grants	2,750	10,484	13,234	45,281
<b>For the year ended 30 June 2018</b>	<b>54,493</b>	<b>11,156</b>	<b>65,649</b>	<b>120,014</b>
<b>For the year ended 30 June 2017</b>	<b>56,626</b>	<b>63,388</b>		<b>120,014</b>

4 Other trading activities

	Unrestricted funds £	Restricted funds £	Total 2018 £	Total 2017 £
Fundraising events	371	-	371	1,587
Trading income	916	-	916	1,200
<b>For the year ended 30 June 2018</b>	<b>1,287</b>	<b>-</b>	<b>1,287</b>	<b>2,787</b>
<b>For the year ended 30 June 2017</b>	<b>2,014</b>	<b>773</b>		<b>2,787</b>

5 Investments

	2018 £	2017 £
Interest receivable	38	31

6 Raising funds

	2018 £	2017 £
Fundraising and publicity	2,780	2,756
Staff costs	2,780	2,756

## Notes to the financial statements (continued) for the year ended 30 June 2018

### 7 Charitable activities

	2018 £	2017 £
Staff costs	37,584	36,619
Depreciation and impairment	277	237
Advertising and marketing	9,024	13,490
Venue hire	-	667
Professional expenses	79	8,982
Online donation charges	892	2,003
Postage, freight and courier	202	918
Printing and stationery	2,867	5,832
Travel - national	3,366	4,206
Website improvements	13,865	12,434
Sundry	2,425	464
	<u>70,581</u>	<u>85,852</u>
Share of support costs (see note 8)	8,517	8,042
Share of governance costs (see note 8)	1,440	1,440
	<u>80,538</u>	<u>95,334</u>
Analysis by fund		
Unrestricted funds	48,637	45,678
Restricted funds	31,901	49,656
	<u>80,538</u>	<u>95,334</u>

### 8 Support costs

	Support costs £	Governance costs £	2018 £	2017 £
Staff costs	2,780	-	2,780	2,756
Office rent	4,420	-	4,420	4,133
Insurance	497	-	497	164
IT support	576	-	576	696
Telephone & internet	244	-	244	293
Accountancy	-	1,440	1,440	1,440
	<u>8,517</u>	<u>1,440</u>	<u>9,957</u>	<u>9,482</u>
Analysed between				
Charitable activities	8,517	1,440	9,957	9,482

Governance costs includes payments to the independent examiner of £1,440 (2017- £1,440) for fees.

## Notes to the financial statements (continued) for the year ended 30 June 2018

### 9 Trustees

The Trustees received no remuneration from the charity in the year (2017 - £nil).

During the year one Trustee was reimbursed £330 (2017 - two Trustees were reimbursed £280). 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 (2017 - £nil).

### 10 Employees

#### Number of employees

The average monthly number employees during the year was:

	2018 Number	2017 Number
	2	3
	<hr/>	<hr/>
<b>Employment costs</b>	<b>2018 £</b>	<b>2017 £</b>
Wages and salaries	42,241	41,935
Social security costs	903	196
	<hr/>	<hr/>
	43,144	42,131
	<hr/>	<hr/>

No employees earned more than £60,000 in the year (2017- none).

### 11 Tangible fixed assets

	Computers £
<b>Cost</b>	
At 1 July 2017	710
Additions	830
	<hr/>
At 30 June 2018	1,540
	<hr/>
<b>Depreciation and impairment</b>	
At 1 July 2017	710
Depreciation charged in the year	277
	<hr/>
At 30 June 2018	987
	<hr/>
<b>Carrying amount</b>	
At 30 June 2018	553
	<hr/>

Notes to the financial statements (continued)  
for the year ended 30 June 2018

12 Financial instruments

	2018 £	2017 £
<b>Carrying amount of financial assets</b>		
Other debtors	523	501
Bank and cash	76,155	94,327
	<hr/>	<hr/>
Measured at cost	76,678	94,828
	<hr/>	<hr/>
<b>Carrying amount of financial liabilities</b>		
Trade creditors	78	-
Accruals and deferred income	1,440	1,440
Other creditors	5,000	5,000
Other taxation and social security	579	-
	<hr/>	<hr/>
Measured at cost	7,097	6,440
	<hr/>	<hr/>

13 Debtors

	2018 £	2017 £
<b>Amounts falling due within one year:</b>		
Trade debtors	2,218	919
Other debtors	523	501
Prepayments and accrued income	353	325
	<hr/>	<hr/>
	3,094	1,745
	<hr/>	<hr/>

14 Creditors: amounts falling due within one year

	2018 £	2017 £
Other taxation and social security	579	583
Trade creditors	78	-
Other creditors	5,000	5,000
Accruals and deferred income	1,440	1,440
	<hr/>	<hr/>
	7,097	7,023
	<hr/>	<hr/>

## Notes to the financial statements (continued) for the year ended 30 June 2018

### 15 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 Jul 2017 £	Movement in funds		Transfers	Balance at 30 Jun 2018 £
		Incoming resources £	Resources expended £	£	
Family Day	1,090	1,600	(1,219)	262	1,733
Children's Book Appeal	2,396	-	-	-	2,396
Support Service Project	14,035	899	(12,414)	-	2,520
Research Appeal	-	34	-	-	34
HP Website	26,300	-	(8,460)	-	17,840
Patient Guides	2,659	-	(1,824)	-	835
GP Awareness Fund	7,655	-	-	-	7,655
Frame	-	7,984	(7,984)	-	-
Northern Ireland Funds	-	179	-	-	179
Cheshire and Mersey Group Funds	-	460	-	-	460
	<u>54,135</u>	<u>11,156</u>	<u>(31,901)</u>	<u>262</u>	<u>33,652</u>

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.

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.



## Notes to the financial statements (continued) for the year ended 30 June 2018

### 16 Analysis of net assets between funds

	Unrestricted funds £	Restricted funds £	Total £
Fund balances at 30 June 2018 are represented by:			
Tangible assets	553	-	553
Current assets/(liabilities)	38,500	33,652	72,152
	<u>39,053</u>	<u>33,652</u>	<u>72,705</u>

### 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:

	2018 £	2017 £
Within one year	4,644	4,133
Between two and five years	9,288	-
	<u>13,932</u>	<u>4,133</u>

### 18 Related party transactions

#### Remuneration of key management personnel

The remuneration of key management personnel is as follows.

	2018 £	2017 £
Aggregate compensation	<u>30,804</u>	<u>30,063</u>

#### Transactions with related parties

Included in other creditors is a loan of £5,000 (2017 - £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.