



Axial SpA  
works silently.  
We don't.

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**TRUSTEES' REPORT AND FINANCIAL STATEMENTS**

**FOR THE YEAR ENDED 31 DECEMBER 2023**

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**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**REFERENCE AND ADMINISTRATIVE DETAILS OF THE CHARITY, ITS TRUSTEES AND ADVISERS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

<b>Trustees</b>	Rajeevendra Kumar Mahapatra, Chair (re-elected 30 September 2023) Nicholas Reid, Treasurer Dr Antoni Tuck Yin Chan, Trustee (re-elected 30 September 2023) Rachel Davis (elected 30 September 2023) Gillian Eames, Trustee Paul Curry, Trustee Dr Jacqueline Harris, Trustee (retired 30 September 2023) Poppy Hocken, Trustee Claire Jeffries, Trustee (re-elected 30 September 2023) Dr Lesley Jane Kay, Trustee Hannah Elizabeth Bruce, Trustee Prof Hasan Imam Syed Tahir, Trustee Alexia Katherine Dreese Granatt, Trustee
<b>Charity registered numbers</b>	1183175 and SC049746
<b>Principal office</b>	Unit 6 Cambridge Court 210 Shepherds Bush Road London W6 7NJ
<b>Independent auditors</b>	BKL Audit LLP 35 Ballards Lane London N3 1XW
<b>Bankers</b>	Barclays Bank UK Plc 1 Churchill Place London E14 5HP

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023

The Trustees present their annual report together with the audited financial statements of the National Axial Spondyloarthritis Society for the year 1 January 2023 to 31 December 2023.

## Objectives and activities

NASS' vision is as follows:

*"The future we want to create is one where every person with axial spondyloarthritis (axial SpA) has timely and effective diagnosis, treatment and care, is empowered to make informed health choices and feels part of a supportive community."*

The Charity seeks to do this by:

- providing information to the general public about axial SpA, and advice to people living with the condition, their families, carers, service-providers and employers
- advocating to ensure that every person with axial SpA has timely and effective diagnosis, treatment and care
- funding and disseminating research and analysis to advance scientific understanding of the condition and its effective treatment.

In setting objectives and planning for activities, the Trustees have given due consideration to general guidance published by the Charity Commission relating to public benefit, including the guidance 'Public benefit: running a charity (PB2)'.

### a. Strategies for achieving objectives

In accordance with the provisions set out in its Constitution, the Trustees have adopted the following strategy for the period 2020 – 2024 to meet NASS' principal objects:

To ensure that people with axial SpA receive timely diagnosis, effective treatment and care

- Maintain pressure at national level to ensure effective and widespread implementation of the NICE Guideline and Quality Standard for axial SpA
  - Continue to run an All Party Parliamentary Group on Axial Spondyloarthritis
  - Undertake Parliamentary work in the devolved nations
  - Develop and publish a Gold Standard time to diagnosis route map
  - Commission research on the economic consequences of a delay to diagnosis
  - Create impactful ways to engage primary care professionals and those in appropriate secondary care services to ensure that they identify and refer patients who may have axial SpA
  - Form an alliance to protect NHS hydrotherapy services
  - Develop a primary care clinical champions programme
  - Continue to work in partnership with professional bodies
  - Support rheumatology and other services to test approaches to improving diagnosis and treatment and spread the learning across the UK
  - Expand the *Aspiring to Excellence* healthcare improvement programme
  - Ensure that patient values and needs underpin NHS service delivery
  - Disseminate learning from *Aspiring to Excellence*
  - Raise awareness among those working in emergency care and NHS 111

**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023**

To empower, inform and inspire people affected by axial SpA

- Ensure that everyone affected by axial SpA has access to personalised support and the best information about the condition
- Extend personalised support through our Helpline service, and reliable and user-friendly information resources for everyone affected by axial SpA
- Promote physical activity, and support and motivate people to exercise
- Support and develop the NASS branch network to continue to ensure people can access regular group, physiotherapy led exercise sessions
- Support and motivate people to confidently and safely exercise independently
- Ensure that everyone affected by axial SpA has the skills, confidence and knowledge they need to manage their condition optimally
- Develop a self-management pilot programme and roll out if successful

To foster a connected and supportive community, raising axial SpA awareness everyday, everywhere

Conduct public awareness campaigns using various methods and channels to try and increase knowledge. Chiefly this activity will include:

- Using case studies of people living with axial SpA to generate media coverage
- Encouraging our members and supporters to become advocates for NASS and campaigners for improvements in axial care
- Online and social media campaigns to create interest and inform the public
- Using related national and international awareness days
- Create an active community of NASS members and supporters who work together
- Make more use of online tools for streaming events, conversations and debates, to encourage participation and engagement
- Increase our online supporter numbers through social media promotion, listening, and outreach to potential supporters
- Encourage members and supporters to take up fundraising activity for NASS, whether largescale challenge events or activity such as raffles and coffee mornings
- Ensure that people know what NASS stands for, the changes that we are seeking to bring about, and how we operate
- Offer thought leadership and op-ed pieces from the CEO, Chair and other key colleagues to professional and trade outlets and to mainstream health outlets
- Use social media listening techniques to reach out to people talking about axial SpA, making them aware of NASS and its resources
- Develop annual membership campaigns to increase the number of members and membership revenue
- Seek opportunities to outreach through external events outside of the sector at which NASS can contribute and have visibility.

**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**b. Activities undertaken to achieve objectives and achievements**

The charity fulfils its objectives by:

- Providing information to people living with axial SpA
- Supporting people through a Helpline service and welfare benefits advice
- Providing a wide range of self-management resources, including webinars, videos and on-line meetings
- Campaigning policy makers, Parliamentarians and health service leaders
- Providing expert quality improvement support to rheumatology teams and primary care professionals who are working to reduce diagnostic delay and improve the quality of care
- Raising public awareness of the condition and of NASS
- Supporting research studies
- Contributing to public consultations relating to musculoskeletal health and the management of spondyloarthritis.

**c. Volunteers**

NASS is heavily dependent on 250 volunteer members who provide support at branch level. Volunteer members are unpaid and NASS' accounts do not reflect the value to NASS of the many hours work provided free to NASS. The Trustees are fully conscious of this value and recognise that the work of NASS would be considerably curtailed without the support provided by volunteer members.

Our NASS branches offer regular, physiotherapist led group exercise for anyone living with axial SpA. They are subcommittees of NASS and are led by a committee usually comprising a Chair, Treasurer and Secretary. We support our branches with a suite of resources, regular promotion of their activities, online meetings and a named member of staff who is available Monday to Friday to help with any problems or issues.

**d. Main activities undertaken to further the charity's purpose for the public benefit**

NASS provides public benefit by:

- working with statutory bodies and others that provide for the treatment and welfare of people affected by axial SpA
- educating people affected by axial SpA, as well as healthcare professionals and the public, on the problems related to it
- putting people affected by axial SpA in contact with expert advisers
- promoting research into the management and cure of axial SpA and its causes
- disseminating the results of research related to axial SpA.

In so doing, NASS improves the lives of those affected by axial SpA, particularly in relation to their ability to contribute positively to the prosperity of their communities and the country as a whole.

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023

## Achievements and performance

### a. Summary

2023 was a very challenging year for NASS, for healthcare charities and for the sector overall. The continued impact of Covid-19 on rheumatology departments, the ongoing workforce shortage in the NHS and the cost-of-living crisis impacted significantly on our work. Demand for our services remained exceptionally high, whilst the fundraised income needed to deliver them reduced considerably.

We put in place numerous cost reduction measures, and adapted our ways of working to ensure that, as best as possible, we were able to deliver on our core objectives.

Our staff responded with an incredibly positive and collegiate approach to the financial circumstances in which we found ourselves, demonstrating tenacity, flexibility and absolute loyalty to our mission and vision.

Despite the challenges we have faced, our activities, visibility and influence have been greater than ever:

- We continued to support 5000 people living with axial SpA through our Helpline and helped people to access £1.3m of welfare benefits
- We continued to build the case for change in diagnosis and care of axial SpA through publication of our first 'Time to Diagnosis' patient survey, patient quality standards, a survey of MSK radiology and MRI, and a study of awareness of axial SpA and referral practice in gastroenterology
- We contributed to the Department of Health and Social Care's draft Major Conditions strategy, the MSK Quality Standards in Wales and the British Society of Rheumatology's (BSR) axial SpA guideline development group. We supported BSR's Workforce campaign, we became members of the national MSK Partnership, and we continued to provide the secretariat to the Aquatic Physiotherapy and Hydrotherapy Alliance
- We continued to build a social movement for change, with *Aspiring to Excellence* growing to 23 rheumatology departments, and more than 100 healthcare professionals joining our new Peer to Peer Network
- We held many of our own events - *Aspiring to Excellence* network days, *Champions in Primary Care* network days, in person meetings of the All Party Parliamentary Group on Axial SpA, a Parliamentary reception, weekly physiotherapy and / or hydrotherapy sessions meetings of 68 branches, NASS Voices conferences, 12 *Your SpAce* online meetups, 12 online self-management sessions across the regions and 20 Facebook live sessions
- We launched three new initiatives: *Your SpAce*, the peer to peer network and the Change Maker awards. We undertook preparatory work for two others: Gold Standard treatment, care and self-management; and an integrated early diagnosis pilot in Belfast
- We presented our work at key scientific conferences, including BritSpA, BSR, SpA Academy, National Therapy Expo, Kings Fund conference on Women's Health, Pulse conference and EULAR PARE
- We reached more people than ever on all our social media channels
- We introduced new working of working in fundraising to improve stewardship and efficiency and created a Fundraising Board.

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023

**b. Key performance indicators**

Performance against key indicators was as follows:

- **Fundraising ratio:** every £1 spent on income generation activities raised £7.10 in income
- **% of expenditure on charitable activities:** 75% of our expenditure was directly related to charitable activities
- **total annual value of successful benefit applications for our members.** We helped members to secure £1,300,000 of welfare support payments
- **Numbers of people accessing our Facebook Live sessions:** 91,000
- **Helpline requests processed within two working days:** 97% (target is 95%).

**c. Review of activities**

**Reducing diagnostic delay**

In 2020, respondents to our national consultation process – healthcare professionals (HCPs), professional bodies and patients – agreed that it should be possible for every person experiencing symptoms of axial spondyloarthritis (axial SpA) to receive a diagnosis within one year of symptom onset this ambition. In June 2021 NASS published a route map which set out how to achieve a Gold Standard time of one year.

Starting from a current baseline average of 8.5 years, the achievement of this goal will require transformational change. This includes a significant increase in awareness of the condition among HCPs and the general public, a critical mass of clinical leaders who will improve health care performance in axial SpA, the widespread use of technology to ensure that axial SpA is higher within clinical reasoning and to support diagnosis, the routine use of pathways to ensure that patients are referred directly to rheumatology for assessment, and consistent use of agreed national protocols for imaging.

Above all, to attain such a dramatic change in time to diagnosis we must win hearts and minds, build a social movement of people who want to work with us to create change, and demonstrate proof of concept for our ideas.

2023 was the second full year of implementation of our route map.

Making the case for change

We continued to make the case for change through research and audit:

- We established a UK-wide patient-completed of audit of time to diagnosis in axial SpA. 39 NHS Trusts and Health Boards signed up to the audit, submitting data for 500 patients. We published our first report in September. It showed that the mean time to diagnosis of patients diagnosed since January 2021 was 8.2 years. Crucially, it provided robust empirical data that, on average, 56% of the delay occurs within primary care. It found that only 1 in 20 people is currently diagnosed within the Gold Standard time. This provides a critical UK baseline position from which to measure the future impact of work in this area.
- We used a Freedom of Information (FoI) request to understand the use of magnetic resonance imaging (MRI) in the diagnostic process for axial SpA. It found that there has been significant



**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023**

progress in raising awareness of axial SpA among radiology teams and of the importance of spinal MRI in the diagnostic process. It also highlighted a concern in the emergence of the reliance on non-musculoskeletal outsourcing for the interpretation of images and the lack of associated quality control. The reliance on non-musculoskeletal radiologists is of concern as the survey showed that non-MSK radiologists generally are less familiar with the term axial SpA and with the 2019 BRITSpA imaging guidance, which may result in poorer patient outcomes. Finally, the study highlighted that collaboration between rheumatology and radiology makes an important contribution to the quality of care that patients receive.

- We surveyed UK gastroenterologists to study awareness of axial SpA and referral practice in gastroenterology. It identified that education and joint working with rheumatology is key to help ensure swift recognition, identification, and referral of suspected axial SpA. Despite there being positive detection of inflammatory symptoms and high confidence to refer, the survey highlights the need for regular educational sessions and resources on axial SpA that are accessible to all clinicians. Also, the use of standardised screening tools and formal referral pathways in secondary care could support clinicians in identification and onward referral.

We brought these results to the attention of Ministers, other Parliamentarians, policymakers and healthcare professionals:

- In October, the Chair of the All Party Parliamentary Group (APPG) on Axial Spondyloarthritis led a Westminster Debate in which he cited the results of our economic research on the full economic costs of delayed diagnosis. In his response, Minister Will Quince also cited our research
- In October, the APPG explored issues for women living with axial SpA and examined evidence of the delay to diagnosis
- We presented our work at regional SpA Academies, the British Society of Spondyloarthritis conference, Hi-5 conference and regional rheumatology networks
- We presented the work in conference poster abstract exhibitions such as British Society for Rheumatology, British Society for Gastroenterologists and EULAR PARE.

#### Raising public awareness about early diagnosis

Raising public awareness about axial SpA and inflammatory back pain is key to earlier diagnosis. We continued to run a national social media campaign featuring case studies of people living with axial SpA. 33,058 people visited our campaign website. Our social media adverts reached 842,546 people which drove 172,112 engagements (likes, comments) and led to 9,883 views of our campaign videos. We also helped people start their diagnosis journey with 8,042 people completing the NASS symptom checker. We also made preparations for a second phase of our public awareness campaign to be delivered in Belfast in early 2024.

#### Raising clinical visibility for axial SpA in primary care

The lengthiest part of the delay in diagnosis is in primary care. In 2022 we sought to address this by creating a cadre of clinical champions in primary care and community services whose work would ensure that axial SpA is higher within the clinical reasoning of primary care professionals so that patients who present with suspected axial SpA are identified at the first presentation and urgently referred to rheumatology.

**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023**

In 2023, our Champions:

- Raised the profile of axial SpA nationally through presentations at the Primary Care Rheumatology and Musculoskeletal Medicine Society conference; the GP conference Pulse Live London 2023, the APPG on Axial SpA, the Therapy Expo and at a range of regional rheumatology / MSK sessions
- Embedded the NASS Symptom Checker in First Contact Practitioner (FCP) routine practice: for example, in Stoke they created a new appointment text messaging service leading to a significant uplift in people from the area completing the symptom checker and taking this to their next appointment for assessment and potential referral
- Created training resources and running local sessions across the UK within local Primary Care Networks and Integrated Care Networks to raise awareness of axial SpA amongst GPs, FCPs and the wider primary care team
- Implemented direct FCP referrals that enable the ordering of required tests and direct referral (without additional GP input) into local rheumatology services and clinics for assessment
- Used technology to streamline referrals by embedding UK and international triage and assessment criteria into clinical templates used by GPs and FCPs to ensure a thorough clinical assessment is done for suspected inflammatory back pain and axial SpA and attached to the rheumatology referral.

Engaging healthcare professionals (HCPs)

We launched an online peer to peer network in April to provide a space for HCPs to share their experiences, knowledge and skills in aiming to reduce diagnostic delay. BY December, a total of 124 HCPs had signed up, with members either working in the NHS or Private Practice, including Physios, Chiropractors and Osteopaths. We ran nine monthly sessions with members reporting to gain benefit from connecting with others and learning from their experiences.

We created an online toolkit which aims to have all the necessary resources for HCPs to reduce the delay to diagnosis all in one place. In collaboration with the *Champions in Primary Care* we compiled a 15minute education presentation specifically for use in Primary Care. We created a larger presentation that contained the background of the *Act on Axial SpA* campaign as well as our NASS resources which HCPs can tailor to their audience.

We created the *Change Maker* award to acknowledge the work of those who have demonstrated significant progress in implementing the gold standard time to diagnosis and made 23 awards at a Parliamentary reception.

We are seeing reductions in the time to diagnosis in some parts of the UK

Through our time to diagnosis audit and our *Aspiring to Excellence* programme (see below) we can see localised improvements in time to diagnosis. For example, since joining *Aspiring to Excellence* two years ago, the rheumatology team at the Royal Free NHS Foundation Trust has achieved a reduction in time to diagnosis from a median of six years to five years by implementing the recommendations in *Act on Axial SpA*. Since joining, Bedfordshire Hospitals NHS Foundation Trust has reduced the delay by 2.7 years. The Royal Berkshire NHS Trust has shown with a recent sample of patients that it has achieved the Gold Standard of diagnosis within one year of symptom onset. We will use this new evidence to encourage and support the improvement activities of others and continue to press the case for support at national level.

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023

**Improving healthcare quality across the patient pathway**

In 2019 we established the *Aspiring to Excellence* programme. In partnership with the NHS Transformation Unit, we teach rheumatology teams the fundamentals of healthcare quality improvement and, through learning sessions, coaching and webinars, we encourage participating teams to share their experiences and data.

In 2023 the programme continued to grow and generate new data and momentum. We welcomed four more rheumatology departments into the programme. We held a celebration day to reflect on progress from the first and second cohorts and to share data from the teams from their improvement work. We continued to promote the existing podcast series and launched a blog series asking teams to reflect on their experiences and learning.

We drew on the results of research we commissioned to look at the values and needs of people with axial SpA from which we created a long list of values-based quality standards in the diagnosis, treatment and care of axial SpA. Our supporters voted on their top ten which we developed into a poster. We created a toolkit to support HCPs in applying these standards to their services.

We began work on a programme to develop a gold standard approach to treatment, long-term care. We shared our proposal with a group of stakeholders and invited HCPs and people living with axial SpA to contribute. In partnership, we created a shared vision of the project, and agreed the workstreams, the review methodology and stakeholder agreement strategy.

**Helping people to live well with axial SpA**

Axial SpA is a condition that requires a great deal of information, support and guidance for people to manage their symptoms effectively and ensure optimal long-term outcomes. There are few formal patient education programmes for axial SpA and many people report feeling isolated and have never met anyone else with the condition. NHS backlogs and the rheumatology workforce crisis are such that this need is ongoing.

Helpline

Numbers contacting the NASS Helpline reduced since the unprecedented levels seen during COVID-19. We supported 5,000 enquiries in 2023. The trend towards more complex problems and longer calls continued. This seems to be related in part to staffing shortages and the workload in rheumatology departments, with callers reporting long waits for appointments and calls to department helplines resulting in a lack of response. The NASS Helpline is often the only place people can turn to for help and support and we responded to 80% of queries within 1 working day. The worsening economic situation has also led to more people seeking help with benefits as Welfare Rights organisations become overwhelmed. We supported 324 people with claims for disability benefits which we predict will result in people receiving £1.3 million in disability benefits.

NASS Branches

2023 saw branches make a strong return to pre-COVID activity. We had 58 branches meeting face to face for group physiotherapy sessions, of which 36 were able to offer hydrotherapy. This includes our two new branches, NASS Nottingham, and NASS Coventry. We also had 10 branches operating online, including our new NASS online branch. Some of these are in the final stages of negotiation to return to face-to-face sessions. We supported all branches in logistical conversations with hospitals, health professionals and venues and with promotion of their branch. This is despite of being unable to recruit a much-needed Branch Development Officer in 2023 due to funding.

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023

Information provision

We sent guidebooks to 122 rheumatology and physiotherapy departments, GP practices, osteopath and chiropractor clinics. We updated the website information on a rolling basis, added new information pages, and kept our Covid-19 information page updated.

Supported self-management programme

We support people through education and empowerment, and by creating a supportive community, we aim to reduce the isolation people with axial SpA experience.

In developing our self-management work, we held consultations with patients and healthcare professionals, which identified that our supported self-management programme should: empower patients with axial SpA to live well with their condition; be co-designed with people living with axial SpA and healthcare professionals; be easily accessible; reduce isolation; and leave a legacy.

Our supported self-management programme comprises:

- Regional online sessions in partnership with local NHS rheumatology teams
- *My AS, My Life* live webinars
- *Your SpAce* videos, downloadable resources, and online peer support meetups

We ran 12 online sessions in partnership with 26 NHS rheumatology departments, reaching nearly 450 people living with axial SpA.

We ran 20 Facebook Live sessions with over 91,000 views. The *My AS, My Life* webpages were visited nearly 20,000 times. We continued to get excellent engagement with the live sessions and the video library is an excellent resource to signpost people to. Sessions were run on: information about the condition; tips for daily life with axial SpA; exercise taster sessions; emotional wellbeing; and managing pain.

We launched *Your SpAce* which is aimed at people at the start of their axial SpA journey, as well as those who are struggling, and people who feel isolated. It was developed in collaboration with people with axial SpA and HCPs and focussed initially on pain, fatigue and flares. We made a series of videos and resources focusing on these topics and promoted them through *AS News*, social media and via rheumatology departments. We sent promotional packs to over 120 rheumatology department containing posters to display in clinics and promotional postcards to hand to patients. In the nine months since launch, the 14 videos had nearly 12,000 views and the webpages had over 22,000 views. We received excellent feedback:

- 88% felt the videos had helped them understand more about their axial SpA
- 81% now felt more confident managing their condition
- 97% found the information in the videos easy to digest
- 80% felt less alone after watching the lived experience videos
- 88% found that the downloadable resource sheets helped them build practical skills in managing their condition.

As part of *Your SpAce* we wanted to provide a safe space for people to meet and share experiences and ask questions. We ran 12 on-line meetups, with 300 attendees. These have also been very positively evaluated:

- 84% felt the meetup helped them understand more about axial SpA
- 96% felt less alone after hearing from other people with the condition
- 57% had never met someone else with axial SpA prior to joining a meetup.

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023

### **Raising the profile of axial SpA within Government**

In 2019 we worked with Parliamentarians to create an All Party Parliamentary Group (APPG) on axial SpA with the aim of providing national level oversight of the implementation of NICE Guideline 65 concerning the diagnosis and treatment of spondyloarthritis.

The APPG met twice in 2023. In April, women and axial SpA was discussed, whilst a second meeting in October reflected on the formation of Integrated Care Systems (ICS) one year on, and the opportunities to ensure that axial SpA is a local priority.

We responded to a call for evidence for the Major Conditions Strategy and subsequently met with the team developing the document and the Musculoskeletal Policy Team at the Department of Health and Social Care. We met with the Secretary of State for Health and Social Care representing the wider musculoskeletal community to discuss this. In Wales we continued to develop our relationship with the Musculoskeletal Clinical Leads within Welsh Government and contributed to the development of the MSK Quality Standards.

### **Health inequalities**

Our work in health inequalities focused on sex, gender and gender identity. We secured funding for a research study and commissioned Headstrong Thinking to conduct a series of focus groups and interviews.

### **Media engagement**

NASS CEO was quoted by *The Guardian* newspaper on the impact that missing a medicines delivery has on people with axial SpA. He was also quoted by *The Pharmaceutical Journal* in a news story about a Care Quality Commission investigation into this area.

We launched the findings from our patient values research which uncovered large disparities in the experience of men and women with axial SpA as they navigate diagnosis and care. The research was covered by The Times (print and online), with a combined reach of 43 million.

### **Social media**

We continued to reach and engage broader audiences on social media, creating a sense of community and sharing stories about people's experiences of life with axial SpA. For example:

- We launched a video featuring women who faced a long delay to diagnosis, shared posts with quotes from women commenting about the misconceptions of women and axial SpA and how this affected their journey to diagnosis. We also had a blog story from a woman sharing her journey to diagnosis.
- On World AS Day we ran a series of blogs to highlight different aspects of life with axial SpA reaching more than 17,000 people.
- In Pride Month, we shared three blog posts: Disability and Pride intersectionality; how Pride relates to NASS; barriers to healthcare. The blogs received over 300 views and were shared across social media.

**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023**

We had to scale back our plans in the second half of the year as interim management arrangements were put in place for communications as a consequence of the need to make cost reductions. Nevertheless, we were able to grow our followship.

- **Facebook:** our paid advertising led to 1.8million impressions with an average of around 150,000 a month. Our organic activity via the NASS Facebook page reached 2.3 million people and led to 41,230 visits to our page.
- **Instagram:** our Instagram activity / posts reached 588,800 profiles with our content, led to 7,735 visits to our profile and resulted in 919 new followers.
- **YouTube:** the NASS YouTube channel increased subscribers by 1397, our videos received 127,269 views and had 1.4m impressions.
- **LinkedIn:** the NASS LinkedIn page had a reach 62,306 with our content with an engagement rate of 23%. We have had 565 people follow us and 1,900 clicks on our content.
- **Twitter (X):** the NASS Twitter (X) page had 453,568 total reach across our tweets, leading to 12,900 engagements and an engagement rate of 7.5%.
- **Website performance:** The NASS website had 124,416 users.

### **Alliances**

We continued to provide the secretariat for the newly formed Aquatic Physiotherapy and Hydrotherapy Alliance. It worked on key areas - policy and parliamentary, rapid response, research and supporting NHS services. The alliance developed a document outlining the benefits of hydrotherapy to help departments maintain and retain services and a suite of materials to help develop services further.

We became key members of the MSK Partnership, a multi-professional partnership inclusive of all MSK professions, MSK sub-specialties, professional bodies, arms-length organisations, the third sector, public and patients. This gave us the opportunity to be partners at the MSK Conference, part of Therapy Expo.

We continued to build our relationship with the MSK Clinical Leads in Wales and had an exhibition stand at the launch of the Wales MSK Quality Standards.

### **Membership**

Our members are the lifeblood of the society. Due to the need for cost reduction, we were without a Membership Officer for 18 months, until the end of July 2023. Membership numbers remained constant at around 4,100 which was encouraging in light of the macro-economic environment and its impact on people's disposable income. We held another successful Members Day, but did so online only due to budget constraints, and held NASS Voices events in Glasgow and Cardiff.

### **d. Factors relevant to achieve objectives**

The challenging macro-economic environment has impacted negatively on our fundraised income affecting the achievement of some of our communications objectives. Conversely, the strength of our long-term funding relationships with pharmaceutical companies has provided the stability necessary to deliver our larger multi-year projects. We have excellent relationships with a wide range of healthcare professionals, professional bodies, health consortia and other charities, all of which has enriched our work and strengthened its impact.

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023

**e. Fundraising activities and income generation**

**Raising funds for NASS**

Thank you to everyone who supported us in 2023 by donating or fundraising. We don't receive public funding and couldn't do our work without the generosity of our supporters. The money we raise ensures that we're here to transform axial SpA diagnosis and care, and offer practical support and advice to anyone affected by the condition.

At the national level we exceeded our target by £8,741 and our income in 2023 amounted to £873,253 (£908,425 in 2022).

Income at branch levels amounted to £154,399 in 2023 (£118,099 in 2022)

In 2023 our fundraising activities included:

**Community and events fundraising:** 38 people took on a running, trekking, swimming, cycling or rowing challenge, and 55 people joined Gaming for AS, Walk Your AS Off, Stretch-Tember or the Winter Walks Challenge.

**Donations and individual giving:** Despite the cost-of-living crisis, 246 people gave a one-off cash gift, 122 people gave a regular donation, 96 people donated in memory of someone, and 230 people - including 14 branches - donated to the Winter Appeal. Whether you gave a one-off cash gift, a regular donation, a gift in memory of someone, or gave to our Winter Appeal, we want to thank you for your generosity.

**Corporate Donations:** We extend our thanks to the corporate companies that have generously supported us through direct donations and matched donations. Your support is invaluable in helping us continue our mission.

Capital Group  
David Lloyd Leisure  
Dot Origin Ltd  
Estee Lauder  
Google  
Lloyds TSB Foundation  
Microsoft  
Morrisons Foundation  
Palo Alto Networks  
Paul Berg and Taylor  
Robert W Baird Group  
Sony Interactive Entertainment Europe  
The Generation Foundation  
Working at Height Limited

**Legacy fundraising:** We are extremely grateful to everyone who leaves a gift in their Will. In 2023 we received income from five legacies totalling £79,443.

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023

**Funding from pharmaceutical companies:** We would also like to thank the following companies that supported us in 2023:

AbbVie Ltd	£30,850
Biogen Idec Ltd	£30,000
Eli Lilly and Company	£30,000
Janssen-Claig Limited	£5,000
Novartis Pharmaceuticals UK Ltd	£77,862
UCB Pharma Ltd	£247,582

Any relationship NASS has with a pharmaceutical company is underpinned by the following principles:

- **Independence** – The independence of NASS must not be compromised by the relationship with an external organisation or by the agreed working arrangements. The financial benefit must be made available for the support of our charitable activities without restriction. We will not allow funders to influence our campaigning, policymaking, research or fundraising for their own purposes. We will ensure our editorial independence is maintained and all information produced by NASS will be based on the latest evidence, informed by our Medical Advisory Board
- **Transparency** – Any relationship with an external organisation is not an endorsement of their product or organisation and will be made transparent to our members, supporters, staff and the general public including in our annual Report and Accounts. All partnerships will be governed by a written agreement which will detail requirements and expectations from each party
- **Benefit for those living with axial SpA** – Any relationship formed with an external organisation must be positive for NASS members and people living with axial SpA and in furtherance of our charitable aims
- **Regulation and good practice** – All funders must comply with all relevant laws and regulations, as well as good practice. This includes full compliance with the Association of the British Pharmaceutical Industry's Code of Practice
- **Use of NASS logo** - our logo may only be used following written approval from NASS. We may use a funder's mark where relevant to the relationship including in webinars, event banners, on our website or on press releases where appropriate. The use of a funder's trademark will have no impact on the independence of the charity
- **Sharing expertise and knowledge** - We will work with funders to share non-product expertise and knowledge. This may include participation in networking events and meetings
- **Privacy policy** - In line with our privacy policy NASS will not, under any circumstances, share the personal data of any of our service users or supporters with a pharmaceutical company
- **Alignment with our strategy and values** - Any collaboration or cooperation with pharmaceutical companies will be assessed against the ethics, desirability and practicality in relation to the overall plans and work of NASS.

**Trading:** 450 people took part in a raffle, 46 people made a bid in the online Christmas auction and 19 people bought a card from Making a Difference Cards. We want to thank everyone for taking part and supporting our work.



**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**Trust fundraising:** We would like to thank the following charitable Trusts that supported us, collectively giving £63,200.

Clifford Chance UK Foundation  
Forest Trust  
Garfield Weston Foundation  
Help for Health  
John Coates Charitable Trust  
Oakdale Trust  
Pentwyn Trust  
Pilkington Charities Fund  
Souter Charitable Trust  
The Bernadette Charitable Trust  
The February Foundation  
The Hamilton Wallace Trust  
The Joan Ainslie Charitable Trust  
The Mary Homfray Charitable Trust  
The Medicash Foundation  
The Michael and Anna Wix Charitable Trust  
The Simon Gibson Charitable Trust  
The Weinstock Fund

**Enhancing Fundraising Efficiency and Stakeholder Engagement**

We re-wrote and re-structured the Fundraise for NASS section of the website. We recruited a Fundraising Assistant to lead the day-to-day delivery of fundraising tasks and release more time for the Senior Fundraising Officer to spend on development and strategy. We improved Google Ads for each income stream. We started to develop higher quality stewardship journey. Staff were upskilled through training courses in Fundraising Regulations, Gift Aid, GDPR, Legacy fundraising, Individual Giving, Direct Mail and Fundraising Tech.

We partnered with People's Fundraising to deliver online, paperless and fully branded auctions and raffles with improved stewardship, as well as the option for supporters to create their own raffles and auctions. Finally, we have been actively engaging with the Information and Support team to increase the awareness of service users that NASS depends on public support to deliver their frontline information and support services.

**Fundraising responsibly**

We rely on the generosity of our donors and fundraisers to do our life-changing work and have processes and policies in place to ensure that we fundraise responsibly.

- We are a member of the Fundraising Regulator and pay an annual levy
- We are transparent about our fundraising and treat donors and fundraisers respectfully and fairly
- We provide personal stewardship to anyone who is taking part in a fundraising activity for us; this includes ensuring people are aware of the risks of taking part in activities
- We explain how to opt out of communications and people are easily able to unsubscribe from emails
- We adhere to data-protection legislation and provide information on our website about our data-privacy policy, and how to opt-out of communications

**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023**

- We take all reasonable steps to opt-people out of communications if they request to no longer hear from us
- We respond quickly and efficiently to any complaints about fundraising. We received no official complaints in 2023
- We mitigate against the risk of not reaching our fundraising targets by reviewing our management accounts monthly to monitor income levels, reforecasting and taking appropriate actions if fundraising income is below the levels we forecast. We have also introduced a quarterly analysis of our fundraising income by ROI
- We are registered with Hammersmith and Fulham Council as a Small Society Lottery under Paragraph 42 of Part 5 of Schedule 11 to the Gambling Act 2005
- Our Summer Raffle raised £3,557. £1,651.13 of the proceeds were retained as unrestricted income to fund our work, the remaining income covered prizes and the administrative cost of running the lottery
- Our Festive Raffle raised £2,385. £2,285.32 of the proceeds were retained as unrestricted income and used to fund our work, the remaining income covered prizes and the administrative cost of running the lottery. £100 of a £500 prize was donated back to NASS as a cash gift.

**f. Investment policy and performance**

To minimise the risk of potential loss of funds and maintain financial security, a portion of our funds is held in cash within a reputable bank.

Additionally, the charity has made strategic investments in two properties we own which provide a consistent and reliable source of income for our charitable initiatives.

NASS' investments also included one statuette gifted by Dame Elisabeth Frink which was sold at auction in 2023. All investments are carried at market value.

**Financial review**

**a. Going concern**

After making appropriate enquiries, the Trustees have a reasonable expectation that the Charity has adequate resources to continue in operational existence for the foreseeable future. For this reason, they continue to adopt the going concern basis in preparing the financial statements. Further details regarding the adoption of the going concern basis can be found in the accounting policies.

The charity's trustees closely monitor its reserves. To ensure adequate cash reserves, the Board of Trustees decided to take out a loan against the properties owned by NASS. The loan increased the charity's free cash reserves.

Trustees approved a plan for cost reductions measures proposed by the CEO.

**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**b. Reserves policy**

Free reserves, defined as the balance of unrestricted funds less fixed assets, at the end of reporting period amount to £77,521 (2022 - £93,145).

The remaining funds are comprised of two investment properties (valued at £655,000) from which NASS derives rental income, branch funds of £243,190 and other restricted grants totalling £62,762.

NASS must raise income each year from voluntary sources and total income is likely to fluctuate from year to year.

We aim to hold 6-9 months free cash reserves. This working capital protects the continuity of our core work, that is, work not funded through restricted income. Core work includes our information and support service, awareness raising, campaigning and policy influencing, and the work of our branches across the UK. We have chosen a reserves level of 6-9 months having considered the level of predictability/unreliability in our income sources and the extent to which our cost base is flexible or committed. Our largest income sources (legacies and grant funding from pharmaceutical companies) come at irregular intervals, and the majority of our costs are committed, principally in the form of the staff who deliver our charitable objectives.

In 2022 our unrestricted cash reserves fell below our policy target. This was a consequence of two factors: the impact of the COVID pandemic on community and events fundraising and a lower than average legacy income. To ensure continued delivery of our charitable objectives, the Board decided to use some of the reserves below the reserves policy level. The reserves continued to decrease in 2023. Recognising the importance of strengthening our liquid reserves, in August 2023, we took a long-term bank loan. As a result, our long-term liabilities have increased. However, it has also positively impacted our cash position, and our free cash reserves at the end of the reporting period stood at £372,950, which represented 8.14 months of actual operating costs.

**c. Material investments policy**

The Charity holds two properties that are rented out to private tenants. Properties were chosen as a reliable source of income for the Charity and the expected income is set at £34,000 per annum given both properties are fully let.

**d. Principal risks and uncertainties**

The Trustees have adopted appropriate policies necessary to limit or mitigate the risks faced by NASS. The principal risks are:

- Loss of income: NASS seeks to broaden and expand its income from all sources. Nevertheless, NASS is dependent upon voluntary income, both at branch level and at national level, and aims to increase its membership locally and nationally
- Loss of reputation: NASS seeks at all times to maintain its independent viewpoint. Grants from pharmaceutical companies are strictly controlled so as to ensure that our independence is not compromised
- Loss of staff: NASS has a reward strategy to ensure that the charity is able to recruit and retain high quality staff. It also has a set of HR policies to provide the appropriate framing for all HR matters.

**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023**

NASS has a safeguarding policy and set of procedures applicable to beneficiaries, staff, trustees and volunteers. Staff are trained in safeguarding and NASS branches have a training resource. The safeguarding policy and procedures are reviewed on an annual basis.

**e. Financial risk management objectives and policies**

Effective management of financial risk is a high priority. Given the importance of accurate financial projections and reporting, we have taken a comprehensive approach to ensure that we consistently maintain a high standard in all aspects of financial management. It includes implementing robust budgeting and costing methods, adhering to donor-imposed restrictions, maintaining strong financial systems and controls, regular reporting and ensuring adequate reserves and cash flow management. We also conduct regular audits and financial reviews to maintain transparency and accountability. We have a range of policies and procedures to achieve these objectives. We employ processes and controls to guarantee accurate financial forecasting and reporting. We follow a well-defined procedure for expenditure approval, ensuring that any spending is fully authorised, and documented accordingly. Furthermore, we take great care to keep detailed records of all restricted funds, which helps to ensure complete transparency and accountability in their utilisation.

Collaborative budgeting methods are also used to ensure our financial management practices are practical and efficient. These policies and practices reflect our commitment to sound financial management, compliance, transparency, and accountability.

**f. Principal funding**

In 2023, NASS received its funding from various sources, with a notable distinction between income generated at the national level and that at the branch level. 85% of our total income was raised at the national level, while 15% was generated through the efforts of our branch network, designated for their specific use (84 % of branch income came from Subscriptions, 9% from donations and legacies, 6% from fundraising activities and 1% from other income)

At the national level, our income for 2023 was diversified across various categories. Majority of our funding originated from grants provided by pharmaceutical companies (48%), designated for specific projects (restricted), along with a contribution towards general operational expenses.

Other sources of income were as follows:

Donations: 17%

Fundraising: 10%

Membership subscriptions: 9%

Legacies: 9%

Investments 4%

Other income 3%

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023

## Structure, governance and management

### a. Constitution

The charity is a Charitable Incorporated Organisation and was registered with the Charity Commission in April 2019. The rules and regulations of the CIO are set out in its Constitution, adopted by the Board of Trustees on 14 September 2019.

### b. Methods of appointment or election of Trustees

The governing body of NASS is a Board of Trustees consisting of elected Trustees. Only members of NASS may be appointed as Trustees and the maximum number is twelve.

At every annual general meeting of the members of NASS, one third of the charity trustees shall retire from office. The charity trustees to retire by rotation shall be those who have been longest in office since their last appointment or reappointment. If any trustees were last appointed or reappointed on the same day those to retire shall (unless they otherwise agree among themselves) be determined by lot. The vacancies so arising may be filled by the decision of the members at the annual general meeting; any vacancies not filled at the annual general meeting may be filled by the charity trustees. Such persons shall retire at the conclusion of the next annual general meeting after the date of their appointment, and shall not be counted for the purpose of determining which of the charity trustees is to retire by rotation at that meeting.

The members or the charity trustees may at any time decide to appoint a new charity trustee, whether in place of a charity trustee who has retired or been removed in accordance with clause 15 (Retirement and removal of charity trustees), or as an additional charity trustee, provided that the limit specified on the number of charity trustees would not as a result be exceeded.

The Chair and Treasurer are approved by the Board and selected from among the trustee group. Their term of office as Chair and Treasurer is consistent with their term of office as a trustee. In advance of each AGM members of NASS are widely encouraged to nominate a fellow member as Trustee.

On appointment, new trustees are asked to spend a half day in the NASS central office for a briefing with the Chief Executive and staff to understand how the society works. Formal training is provided when required.

### c. Organisational structure and decision-making policies

The Trustees meet quarterly to review matters of policy and to make appropriate judgements, directions and decisions on CIO issues. Trustees delegate authority on some matters to a Finance and General Purposes Committee consisting of the Chair, the Treasurer, up to three appointed Trustees and the Chief Executive and Head of Finance and Administration. This Committee meets four times per year. NASS also has a Medical Advisory Board which acts in advisory capacity only. Day to day management of NASS is undertaken by the Chief Executive and their staff. The trustees consider the Chief Executive and management team as comprising the key management personnel of the charity in charge of directing and running and operating the charity on a day to day basis.

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023

**d. Policies adopted for the induction and training of Trustees**

All new trustees receive an induction programme which includes the organisation's structure, scheme of delegation, NASS constitution, strategic plan, business plan and budget, trustee code of conduct and CC3, *The Essential Trustee*. Periodic training is provided (e.g. how to read management accounts).

**e. Pay policy for key management personnel**

Every three years we commission external HR consultants to undertake independent benchmarking of all roles. The last review was in November 2022. Our medium term aim is to pay at the midpoint. The pay of the Chief Executive is reviewed annually by the trustees.

**f. Related party relationships**

There are no related party relationships. NASS is a member of various umbrella groups, including the Arthritis and Musculoskeletal Alliance, The Axial SpA International Federation, National Voices, the National Council for Voluntary Organisations, the Disability Benefits Consortium and the Prescription Charge Coalition and The Alliance (Scotland). Our membership of these bodies does not impact on the operating policies adopted by the charity.

**g. Financial risk management**

Further to the risks identified above, in 2024 trustees will be asked to approve an updated risk management strategy.

**h. Trustees' indemnities**

NASS holds Trustee Indemnity insurance through Markel UK, providing cover with a limit of 1 million pounds against any wrongful act claim made against a Trustee.

**Plans for future periods**

Our priority areas for 2024 are:

**Reducing diagnostic delay:** we will

- Continue to build the case for change with three scientific journal publications
- Continue delivery of *Champions in Primary Care*
- Continue to build and support our peer-to-peer network
- Implement an integrated pilot in Belfast that supports people in their journey from symptom onset to diagnosis in rheumatology
- Hold a parliamentary event to present our key campaign learning to policy makers and Parliamentarians, and focus even more on spreading our campaign messages, data and collateral at HC and other events
- Undertake Parliamentary activity to continue to raise the profile of axial SpA in Westminster
- Further roll out our audit tool on time to diagnosis and publish our second report

TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023

***Supporting the NHS to improve axial SpA care:*** we will

- Continue delivery of *Aspiring to Excellence* primarily with cohorts three and four but also including cohorts one and two
- Publish the scope of our proposed gold standard approach to treatment, long-term care and self-management and issue a call for evidence
- Continue to grow our regular programme of communications which will include a second series of improvement podcasts, the continuation of a blog series and social media content
- Make preparations to hold the first national quality improvement conference in axial SpA in 2025
- Promote our work at BSR, BRITSpA and SpA academy conferences
- Publish a set of patient quality standards
- Publish commissioned work on sex, gender and gender identity
- Further build our alliance of organisations that want to work together to promote the role of aquatic physiotherapy and hydrotherapy across condition areas

***Supporting people affected by axial SpA (including self-management):*** we will

- Continue to run online self-management sessions
- Create a resource library which will be available to all HCPs to set up and run their own sessions independently
- Continue to run *My AS, My Life* sessions streamed live simultaneously across multiple social media channels
- Launch Phase Two of *Your SpAce* modules and continue with regular online meetups
- Seek to maintain our information and support service at current levels
- Continue to support our branch network, promote their services and bring branches closer to NASS and to each other
- Update our biologics guide

***Ensuring that NASS is an effective organisation:*** we will

- Strengthen member stewardship including the potential for a new IT system to improve member experience
- Increase the average value of our pool of regular givers through a new stewardship journey
- Consolidate the support of repeat and long-term funders and improve their stewardship by developing video content featuring beneficiaries of our support services to include in impact reports
- Promote a wider range of fundraising events and improve stewardship
- Support the work of the Fundraising Board
- Secure grant funding from pharmaceutical companies at current levels
- Develop a new corporate strategic plan
- Review governance at Board level, introduce a programme of trustee appraisal and identify a programme of core minimum training for each trustee
- Hold one staff away day and ensure that staff development is well supported.

**Statement of Trustees' responsibilities**

The Trustees are responsible for preparing the Trustees' report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

The law applicable to charities in England & Wales and Scotland requires the Trustees to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the Charity and of its incoming resources and application of resources, including its income and

**TRUSTEES' REPORT (CONTINUED)  
FOR THE YEAR ENDED 31 DECEMBER 2023**

expenditure, for that period. In preparing these financial statements, the Trustees are required to:

- select suitable accounting policies and then apply them consistently
- observe the methods and principles of the Charities SORP (FRS 102)
- make judgments and accounting estimates that are reasonable and prudent
- state whether applicable UK Accounting Standards (FRS 102) have been followed, subject to any material departures disclosed and explained in the financial statements
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the Charity will continue in business.

The Trustees are responsible for keeping adequate accounting records that are sufficient to show and explain the Charity's transactions and disclose with reasonable accuracy at any time the financial position of the Charity and enable them to ensure that the financial statements comply with the Charities Act 2011, the Charity (Accounts and Reports) Regulations 2008, the Charities and Trustee Investment (Scotland) Act 2005, the Charities Accounts (Scotland) Regulations 2006 (as amended) and the provisions of the Memorandum of Association. They are also responsible for safeguarding the assets of the Charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

**Disclosure of information to auditors**

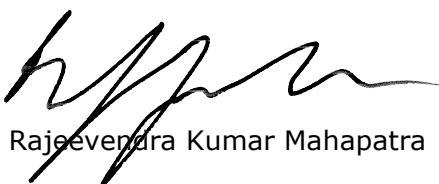
Each of the persons who are Trustees at the time when this Trustees' report is approved has confirmed that:

- so far as that Trustee is aware, there is no relevant audit information of which the charity's auditors are unaware, and
- that Trustee has taken all the steps that ought to have been taken as a Trustee in order to be aware of any relevant audit information and to establish that the charity's auditors are aware of that information.

**Auditors**

The auditors, BKL Audit LLP, have indicated their willingness to continue in office. The designated Trustees will propose a motion reappointing the auditors at a meeting of the Trustees.

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



Rajeevendra Kumar Mahapatra

Date: 12 July 2024



**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF  
NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**Opinion**

We have audited the financial statements of National Axial Spondyloarthritis Society (the 'Charity') for the year ended 31 December 2023 which comprise the Statement of financial activities, the Balance sheet, the Statement of cash flows and the related notes, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the Charity's affairs as at 31 December 2023 and of its incoming resources and application of resources, including its income and expenditure for the year then ended
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice, and
- have been prepared in accordance with Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and in other respects the requirements of the Charities Act 2011.

**Basis for opinion**

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditors' responsibilities for the audit of the financial statements section of our report. We are independent of the Charity in accordance with the ethical requirements that are relevant to our audit of the financial statements in the United Kingdom, including the Financial Reporting Council's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

**Conclusions relating to going concern**

In auditing the financial statements, we have concluded that the Trustees' use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the charity's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

Our responsibilities and the responsibilities of the Trustees with respect to going concern are described in the relevant sections of this report.

**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF  
NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY (CONTINUED)**

**Other information**

The other information comprises the information included in the Annual report other than the financial statements and our Auditors' report thereon. The Trustees are responsible for the other information contained within the Annual report. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon. Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the course of the audit, or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

**Opinion on other matters prescribed by the Companies Act 2006**

In our opinion, based on the work undertaken in the course of the audit:

- the information given in the Trustees' Report for the financial year for which the financial statements are prepared is consistent with the financial statements
- the Trustees' Report has been prepared in accordance with applicable legal requirements.

**Matters on which we are required to report by exception**

In the light of our knowledge and understanding of the Charity and its environment obtained in the course of the audit, we have not identified material misstatements in the Trustees' Report.

We have nothing to report in respect of the following matters in relation to which Companies Act 2006 and the Charities Accounts (Scotland) Regulations 2006 (as amended) require us to report to you if, in our opinion:

- adequate accounting records have not been kept, or returns adequate for our audit have not been received from branches not visited by us, or
- the financial statements are not in agreement with the accounting records and returns, or
- certain disclosures of Trustees' remuneration specified by law are not made, or
- we have not received all the information and explanations we require for our audit, or
- the Trustees were not entitled to prepare the financial statements in accordance with the small companies regime and take advantage of the small companies' exemptions in preparing the Trustees' Report and from the requirement to prepare a Strategic Report.

**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF  
NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY (CONTINUED)**

**Responsibilities of trustees**

As explained more fully in the Trustees' responsibilities statement, the Trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for such internal control as the Trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the Trustees are responsible for assessing the Charity's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the Trustees either intend to liquidate the Charity or to cease operations, or have no realistic alternative but to do so.

**Auditors' responsibilities for the audit of the financial statements**

We have been appointed as auditor under section 44(1)(c) of the Charities and Trustee Investment (Scotland) Act 2005 and under the Companies Act 2006 and report in accordance with the Act and relevant regulations made or having effect thereunder.

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an Auditors' report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud is detailed below:

- Enquiring of management around actual and potential litigation and claims
- Reviewing board meeting minutes of meetings of those charged with governance
- Reviewing financial statement disclosures and testing to supporting documentation to assess compliance with applicable laws and regulations
- Performing audit work over the risk of management override of controls, including testing of journal entries and other adjustments for appropriateness, evaluating the business rationale of significant transactions outside the normal course of business and reviewing accounting estimates for bias.

As part of an audit in accordance with ISAs (UK), we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control

**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF  
NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY (CONTINUED)**

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion of the effectiveness of the charity's internal control
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the Trustees
- Conclude on the appropriateness of the Trustees' use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the charity's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our Auditors' Report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our Auditors' Report. However, future events or conditions may cause the charity to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at: [www.frc.org.uk/auditorsresponsibilities](http://www.frc.org.uk/auditorsresponsibilities). This description forms part of our Auditors' report.

**Use of our report**

This report is made solely to the Charity's trustees, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006, and to the Charity's shareholders, as a body, in accordance with regulation 10 of the Charities Accounts (Scotland) Regulations 2006. Our audit work has been undertaken so that we might state to the Charity's trustees those matters we are required to state to them in an Auditors' report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the Charity and its trustees, as a body, for our audit work, for this report, or for the opinions we have formed.

NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY

INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF  
NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY (CONTINUED)

*BKL Audit LLP*

**BKL Audit LLP**

35 Ballards Lane

London

N3 1XW

Date: 12/07/2024

BKL Audit LLP are eligible to act as auditors in terms of section 1212 of the Companies Act 2006.

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**STATEMENT OF FINANCIAL ACTIVITIES  
FOR THE YEAR ENDED 31 DECEMBER 2023**

	Note	Restricted funds - Branches 2023 £	Restricted funds - All other 2023 £	Unrestricted funds 2023 £	Total funds 2023 £	Total funds 2022 £
<b>Income from:</b>						
Donations and legacies	3	142,944	366,056	359,724	868,724	879,665
Other trading activities	4	9,767	-	89,503	99,270	112,513
Investments	5	156	-	35,469	35,625	29,116
Other income	6	1,532	-	22,501	24,033	5,230
<b>Total income</b>		<b>154,399</b>	<b>366,056</b>	<b>507,197</b>	<b>1,027,652</b>	<b>1,026,524</b>
<b>Expenditure on:</b>						
Raising funds	7	718	-	123,089	123,807	197,412
Charitable activities	9	151,884	455,514	426,995	1,034,393	1,321,334
<b>Total expenditure</b>		<b>152,602</b>	<b>455,514</b>	<b>550,084</b>	<b>1,158,200</b>	<b>1,518,746</b>
<b>Net income/(expenditure) before net losses on investments</b>		<b>1,797</b>	<b>(89,458)</b>	<b>(42,887)</b>	<b>(130,548)</b>	<b>(492,222)</b>
Net losses on investments		-	-	(10,432)	(10,432)	(50,000)
<b>Net income/(expenditure)</b>		<b>1,797</b>	<b>(89,458)</b>	<b>(53,319)</b>	<b>(140,980)</b>	<b>(542,222)</b>
Transfers between funds	20	(23,876)	8,513	15,363	-	-
<b>Net movement in funds</b>		<b>(22,079)</b>	<b>(80,945)</b>	<b>(37,956)</b>	<b>(140,980)</b>	<b>(542,222)</b>
<b>Reconciliation of funds:</b>						
Total funds brought forward		265,269	143,707	770,477	1,179,453	1,721,675
Net movement in funds		(22,079)	(80,945)	(37,956)	(140,980)	(542,222)
<b>Total funds carried forward</b>		<b>243,190</b>	<b>62,762</b>	<b>732,521</b>	<b>1,038,473</b>	<b>1,179,453</b>

The Statement of Financial Activities includes all gains and losses recognised in the year.

The notes on pages 31 to 53 form part of these financial statements.

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**BALANCE SHEET  
AS AT 31 DECEMBER 2023**

	Note	2023 £	2022 £
<b>Fixed assets</b>			
Tangible assets	14	-	332
Investments	16	-	27,000
Investment property	15	<b>655,000</b>	650,000
		<b>655,000</b>	<b>677,332</b>
<b>Current assets</b>			
Debtors	17	<b>38,565</b>	42,464
Cash at bank and in hand		<b>802,951</b>	656,510
		<b>841,516</b>	698,974
Creditors: amounts falling due within one year	18	<b>(162,614)</b>	(196,853)
<b>Net current assets</b>		<b>678,902</b>	502,121
<b>Total assets less current liabilities</b>		<b>1,333,902</b>	1,179,453
Creditors: amounts falling due after more than one year	19	<b>(295,429)</b>	-
<b>Total net assets</b>		<b>1,038,473</b>	1,179,453
<b>Charity funds</b>			
Restricted funds - Branches	20	<b>243,190</b>	265,269
Restricted funds - All other	20	<b>62,762</b>	143,707
Unrestricted funds	20	<b>732,521</b>	770,477
<b>Total funds</b>		<b>1,038,473</b>	1,179,453

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

  
**Rajeevendra Kumar Mahapatra**  
 (Chair of Trustees)

Date: 12 July 2024

The notes on pages 31 to 53 form part of these financial statements.

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**STATEMENT OF CASH FLOWS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

	<b>2023</b>	<b>2022</b>
	<b>£</b>	<b>£</b>
<b>Cash flows from operating activities</b>		
Net cash used in operating activities	<b>99,248</b>	<b>(267,350)</b>
<b>Cash flows from investing activities</b>		
Dividends, interests and rents from investments	<b>35,625</b>	<b>28,209</b>
Proceeds from the sale of tangible fixed assets	<b>-</b>	<b>885</b>
Proceeds from sale of investments	<b>11,568</b>	<b>-</b>
<b>Net cash provided by investing activities</b>	<b>47,193</b>	<b>29,094</b>
<b>Change in cash and cash equivalents in the year</b>	<b>146,441</b>	<b>(238,256)</b>
Cash and cash equivalents at the beginning of the year	<b>656,510</b>	<b>894,766</b>
<b>Cash and cash equivalents at the end of the year</b>	<b>802,951</b>	<b>656,510</b>

The notes on pages 31 to 53 form part of these financial statements



**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

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**1. General information**

The National Axial Spondyloarthritis Society is a CIO incorporated under articles of association dated 29th April 2019 in England & Wales with charity registration number 1183175. It was subsequently registered with the Scottish Charity Regulator on 19th November 2019 with Scottish charity registration number SC049746.

**2. Accounting policies**

**2.1 Basis of preparation of financial statements**

The financial statements have been prepared in accordance with the Charities SORP (FRS 102) - Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Charities Act 2011, the Charities and Trustee Investment (Scotland) Act 2005 and the Charities Accounts (Scotland) Regulations 2006 (as amended).

National Axial Spondyloarthritis Society meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy.

**2.2 Income**

All income is recognised once the Charity has entitlement to the income, it is probable that the income will be received and the amount of income receivable can be measured reliably.

The recognition of income from legacies is dependent on establishing entitlement, the probability of receipt and the ability to estimate with sufficient accuracy the amount receivable. Evidence of entitlement to a legacy exists when the Charity has sufficient evidence that a gift has been left to them (through knowledge of the existence of a valid will and the death of the benefactor) and the executor is satisfied that the property in question will not be required to satisfy claims in the estate. Receipt of a legacy must be recognised when it is probable that it will be received and the fair value of the amount receivable, which will generally be the expected cash amount to be distributed to the Charity, can be reliably measured.

Grants are included in the Statement of financial activities on a receivable basis. The balance of income received for specific purposes but not expended during the period is shown in the relevant funds on the Balance sheet. Where income is received in advance of entitlement of receipt, its recognition is deferred and included in creditors as deferred income. Where entitlement occurs before income is received, the income is accrued.

Income tax recoverable in relation to investment income is recognised at the time the investment income is receivable.

Other income is recognised in the period in which it is receivable and to the extent the goods have been provided or on completion of the service.

NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023

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2. Accounting policies (continued)

2.3 Expenditure

Expenditure is recognised once there is a legal or constructive obligation to transfer economic benefit to a third party, it is probable that a transfer of economic benefits will be required in settlement and the amount of the obligation can be measured reliably. Expenditure is classified by activity. The costs of each activity are made up of the total of direct costs and shared costs, including support costs involved in undertaking each activity. Direct costs attributable to a single activity are allocated directly to that activity. Shared costs which contribute to more than one activity and support costs which are not attributable to a single activity are apportioned between those activities on a basis consistent with the use of resources. Central staff costs are allocated on the basis of time spent, and depreciation charges allocated on the portion of the asset's use.

Expenditure on raising funds includes all expenditure incurred by the Charity to raise funds for its charitable purposes and includes costs of all fundraising activities events and non-charitable trading.

Expenditure on charitable activities is incurred on directly undertaking the activities which further the Charity's objectives, as well as any associated support costs.

Grants payable are charged in the year when the offer is made except in those cases where the offer is conditional, such grants being recognised as expenditure when the conditions attaching are fulfilled. Grants offered subject to conditions which have not been met at the year end are noted as a commitment, but not accrued as expenditure.

All expenditure is inclusive of irrecoverable VAT.

2.4 Interest receivable

Interest on funds held on deposit is included when receivable and the amount can be measured reliably by the Charity; this is normally upon notification of the interest paid or payable by the institution with whom the funds are deposited.

2.5 Tangible fixed assets and depreciation

Tangible fixed assets costing £1,000 or more are capitalised and recognised when future economic benefits are probable and the cost or value of the asset can be measured reliably.

Tangible fixed assets are initially recognised at cost. After recognition, under the cost model, tangible fixed assets are measured at cost less accumulated depreciation and any accumulated impairment losses. All costs incurred to bring a tangible fixed asset into its intended working condition should be included in the measurement of cost.

Depreciation is charged so as to allocate the cost of tangible fixed assets less their residual value over their estimated useful lives, using the straight-line method.

Depreciation is provided on the following basis:

Office equipment	-	25% Straight Line
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NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023

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**2. Accounting policies (continued)**

**2.6 Investments**

Fixed asset investments are a form of financial instrument and are initially recognised at their transaction cost and subsequently measured at fair value at the Balance sheet date, unless the value cannot be measured reliably in which case it is measured at cost less impairment. Investment gains and losses, whether realised or unrealised, are combined and presented as 'Gains/(Losses) on investments' in the Statement of financial activities.

Investments held as fixed assets are shown at cost less provision for impairment.

**2.7 Debtors**

Trade and other debtors are recognised at the settlement amount after any trade discount offered. Prepayments are valued at the amount prepaid net of any trade discounts due.

**2.8 Cash at bank and in hand**

Cash at bank and in hand includes cash and short-term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

**2.9 Liabilities and provisions**

Liabilities are recognised when there is an obligation at the Balance sheet date as a result of a past event, it is probable that a transfer of economic benefit will be required in settlement, and the amount of the settlement can be estimated reliably.

Liabilities are recognised at the amount that the Charity anticipates it will pay to settle the debt or the amount it has received as advanced payments for the goods or services it must provide.

Provisions are measured at the best estimate of the amounts required to settle the obligation. Where the effect of the time value of money is material, the provision is based on the present value of those amounts, discounted at the pre-tax discount rate that reflects the risks specific to the liability. The unwinding of the discount is recognised in the Statement of financial activities as a finance cost.

**2.10 Financial instruments**

The Charity only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value with the exception of bank loans which are subsequently measured at amortised cost using the effective interest method.

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**2. Accounting policies (continued)**

**2.11 Fund accounting**

General funds are unrestricted funds which are available for use at the discretion of the Trustees in furtherance of the general objectives of the Charity and which have not been designated for other purposes.

Restricted funds are funds which are to be used in accordance with specific restrictions imposed by donors or which have been raised by the Charity for particular purposes. The costs of raising and administering such funds are charged against the specific fund. The aim and use of each restricted fund is set out in the notes to the financial statements. Due to the significant nature of branches on the accounts, the Restricted branch fund is displayed separately throughout the accounts.

Investment income, gains and losses are allocated to the appropriate fund.

**3. Income from donations and legacies**

	<b>Restricted Funds - Branches 2023 £</b>	<b>Restricted funds - All other 2023 £</b>	<b>Unrestricted funds 2023 £</b>	<b>Total funds 2023 £</b>
Donations	12,393	9,500	137,086	<b>158,979</b>
Legacies	1,000	100	78,343	<b>79,443</b>
Charity grants	-	356,456	63,288	<b>419,744</b>
Subscriptions	129,551	-	81,007	<b>210,558</b>
	<u>142,944</u>	<u>366,056</u>	<u>359,724</u>	<u><b>868,724</b></u>

	<i>Restricted Funds - Branches 2022 £</i>	<i>Restricted funds - All other 2022 £</i>	<i>Unrestricted funds 2022 £</i>	<i>Total funds 2022 £</i>
Donations	6,822	37,241	112,084	156,147
Legacies	-	-	72,657	72,657
Charity grants	-	413,583	54,346	467,929
Subscriptions	102,899	-	80,033	182,932
	<u>109,721</u>	<u>450,824</u>	<u>319,120</u>	<u>879,665</u>

Charity grants includes Pharmaceutical Industry grants of £419,744 (2022: £466,536) and other grants of £Nil (2022: £1,393).

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**4. Income from other trading activities**

**Income from fundraising events**

	<b>Restricted Funds - Branches 2023 £</b>	<b>Unrestricted funds 2023 £</b>	<b>Total funds 2023 £</b>
Fundraising events	9,767	89,503	<b>99,270</b>

	<i>Restricted Funds - Branches 2022 £</i>	<i>Restricted funds 2022 £</i>	<i>Unrestricted funds 2022 £</i>	<i>Total funds 2022 £</i>
Fundraising events	5,296	221	106,996	112,513

**5. Investment income**

	<b>Restricted funds - Branches 2023 £</b>	<b>Unrestricted funds 2023 £</b>	<b>Total funds 2023 £</b>
Rental income	-	31,985	<b>31,985</b>
Bank Interest	156	3,484	<b>3,640</b>
	<u>156</u>	<u>35,469</u>	<u><b>35,625</b></u>

	<i>Unrestricted funds 2022 £</i>	<i>Total funds 2022 £</i>
Rental income	28,023	28,023
Bank Interest	186	186
Profit on disposal of fixed assets	907	907
	<u>29,116</u>	<u>29,116</u>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**5. Investment income (continued)**

**6. Other incoming resources**

	<b>Restricted Funds - Branches 2023 £</b>	<b>Unrestricted funds 2023 £</b>	<b>Total funds 2023 £</b>
Other Income	1,532	22,501	<b>24,033</b>
	1,532	22,501	<b>24,033</b>

	<i>Restricted Funds - Branches 2022 £</i>	<i>Unrestricted funds 2022 £</i>	<i>Total funds 2022 £</i>
Other Income	3,082	2,148	5,230
	3,082	2,148	5,230

**7. Expenditure on raising funds**

**Fundraising trading expenses**

	<b>Restricted funds - Branches 2023 £</b>	<b>Unrestricted funds 2023 £</b>	<b>Total funds 2023 £</b>
Expenditure on raising donations and legacies	-	7,444	<b>7,444</b>
Staging fundraising events	718	2,235	<b>2,953</b>
Fundraising for membership	-	936	<b>936</b>
Staff remuneration	-	66,281	<b>66,281</b>
General fundraising expenditure	-	21,964	<b>21,964</b>
Allocated centrally incurred fundraising and governance costs	-	24,229	<b>24,229</b>
	718	123,089	<b>123,807</b>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**7. Expenditure on raising funds (continued)**

**Fundraising trading expenses (continued)**

	<i>Restricted funds - Branches 2022 £</i>	<i>Unrestricted funds 2022 £</i>	<i>Total funds 2022 £</i>
Expenditure on raising donations and legacies	-	15,292	15,292
Staging fundraising events	355	7,936	8,291
Fundraising for membership	-	1,529	1,529
Staff remuneration	-	118,368	118,368
General fundraising expenditure	-	26,442	26,442
Allocated centrally incurred fundraising and governance costs	-	27,490	27,490
	<u>355</u>	<u>197,057</u>	<u>197,412</u>

**8. Analysis of grants**

	<b>Grants to Institutions 2023 £</b>	<b>Grants to Individuals 2023 £</b>	<b>Total funds 2023 £</b>	<i>Total funds 2022 £</i>
Grants, A Connected and Supportive Community	1,003	179	<b>1,182</b>	-
Grants, Empower, Inform and Inspire	-	300	<b>300</b>	-
	<u>1,003</u>	<u>479</u>	<u><b>1,482</b></u>	<u>-</u>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**9. Analysis of expenditure on charitable activities**

**Summary by fund type**

	<b>Restricted funds - Branches 2023 £</b>	<b>Restricted funds - All other 2023 £</b>	<b>Unrestricted funds 2023 £</b>	<b>Total 2023 £</b>
Every Patient Every Time	-	345,248	189,381	<b>534,629</b>
A Connected and Supportive Community	151,884	64,676	63,291	<b>279,851</b>
Empower, Inform and Inspire	-	45,590	174,323	<b>219,913</b>
	<u>151,884</u>	<u>455,514</u>	<u>426,995</u>	<u><b>1,034,393</b></u>

	<i>Restricted Funds - Branches 2022 £</i>	<i>Restricted funds - All other 2022 £</i>	<i>Unrestricted funds 2022 £</i>	<i>Total 2022 £</i>
Every Patient Every Time	-	492,734	180,078	672,812
A Connected and Supportive Community	126,688	87,018	209,034	422,740
Empower, Inform and Inspire	-	53,979	171,803	225,782
	<u>126,688</u>	<u>633,731</u>	<u>560,915</u>	<u>1,321,334</u>

**10. Analysis of expenditure by activities**

	<b>Activities undertaken directly 2023 £</b>	<b>Grant funding of activities 2023 £</b>	<b>Support costs 2023 £</b>	<b>Total funds 2023 £</b>
Every Patient Every Time	445,170	-	89,459	<b>534,629</b>
A Connected and Supportive Community	263,757	1,182	14,912	<b>279,851</b>
Empower, Inform and Inspire	161,836	300	57,777	<b>219,913</b>
	<u>870,763</u>	<u>1,482</u>	<u>162,148</u>	<u><b>1,034,393</b></u>



**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**10. Analysis of expenditure by activities (continued)**

	<i>Activities undertaken directly 2022 £</i>	<i>Support costs 2022 £</i>	<i>Total funds 2022 £</i>
Every Patient Every Time	603,911	68,901	672,812
A Connected and Supportive Community	362,638	60,102	422,740
Empower, Inform and Inspire	166,683	59,099	225,782
	<u>1,133,232</u>	<u>188,102</u>	<u>1,321,334</u>

**Analysis of direct costs**

	<b>Every Patient Every Time 2023 £</b>	<b>A Connected and Supportive Community 2023 £</b>	<b>Empower, Inform and Inspire 2023 £</b>	<b>Total funds 2023 £</b>
Staff costs	235,262	40,892	152,275	<b>428,429</b>
Other staff costs	10,045	1,264	804	<b>12,113</b>
Courier & distribution of materials	1,835	3,791	2,841	<b>8,467</b>
Literature, brochures and information	7,494	4,500	4,590	<b>16,584</b>
Promotion of activities and materials	2,348	54,797	808	<b>57,953</b>
Organising professional events	99,275	6,219	343	<b>105,837</b>
External technical providers	87,237	2,391	175	<b>89,803</b>
Attending professional events	1,674	-	-	<b>1,674</b>
Branch network expenditure	-	149,903	-	<b>149,903</b>
	<u>445,170</u>	<u>263,757</u>	<u>161,836</u>	<u><b>870,763</b></u>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**10. Analysis of expenditure by activities (continued)**

**Analysis of direct costs (continued)**

	<i>Every Patient Every Time 2022 £</i>	<i>A Connected and Supportive Community 2022 £</i>	<i>Empower, Inform and Inspire 2022 £</i>	<i>Total funds 2022 £</i>
Staff costs	212,784	162,848	135,682	511,314
Other staff costs	5,301	1,000	268	6,569
Courier & distribution of materials	928	4,123	1,389	6,440
Literature, brochures & information	36,750	25,432	16,073	78,255
Promotion of activities and materials	8,855	21,472	2,364	32,691
Organising professional events	62,057	21,075	-	83,132
External technical providers	247,874	-	10,907	258,781
Attending professional events	29,362	-	-	29,362
Branch network expenditure	-	126,688	-	126,688
	<u>603,911</u>	<u>362,638</u>	<u>166,683</u>	<u>1,133,232</u>

**Analysis of support costs**

	<i>Every Patient Every Time 2023 £</i>	<i>A Connected and Supportive Community 2023 £</i>	<i>Empower, Inform and Inspire 2023 £</i>	<i>Total funds 2023 £</i>
Staff costs	38,666	6,444	24,972	70,082
Depreciation	159	27	103	289
Other staff costs	1,996	333	1,290	3,619
Premises costs	7,239	1,206	4,674	13,119
Travel & accommodation expenses	796	133	514	1,443
IT and Communications	12,425	2,071	8,025	22,521
Office costs	2,409	402	1,556	4,367
Insurance, legal & professional	11,910	1,985	7,692	21,587
Other support costs	669	112	432	1,213
Bank charges & interest	7,427	1,238	4,797	13,462
Governance costs	5,763	961	3,722	10,446
	<u>89,459</u>	<u>14,912</u>	<u>57,777</u>	<u>162,148</u>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**10. Analysis of expenditure by activities (continued)**

**Analysis of support costs (continued)**

	<i>Every Patient Every Time 2022 £</i>	<i>A Connected and Supportive Community 2022 £</i>	<i>Empower, Inform and Inspire 2022 £</i>	<i>Total funds 2022 £</i>
Staff costs	16,970	19,484	26,398	62,852
Depreciation	1,837	1,405	1,188	4,430
Other staff costs	1,428	1,091	924	3,443
Premises costs	21,956	16,791	14,207	52,954
Travel & accommodation expenses	586	450	379	1,415
IT and communications	8,442	7,357	4,562	20,361
Office costs	2,690	2,058	1,740	6,488
Conference costs	660	504	427	1,591
Insurance, legal & professional	8,844	6,763	5,723	21,330
Other support costs	146	113	94	353
Bank charges & interest	303	232	196	731
Governance costs	5,039	3,854	3,261	12,154
	<u>68,901</u>	<u>60,102</u>	<u>59,099</u>	<u>188,102</u>

**11. Auditors' remuneration**

	<b>2023 £</b>	<b>2022 £</b>
Fees payable to the Charity's auditor for the audit of the Charity's annual accounts	<b>9,000</b>	9,000
Fees payable to the Charity's auditor in respect of: All non-audit services not included above	<b>3,000</b>	3,000
	<u><b>3,000</b></u>	<u>3,000</u>

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**12. Staff costs**

	<b>2023</b>	<i>2022</i>
	<b>£</b>	<b>£</b>
Wages and salaries	<b>409,135</b>	462,676
Social security costs	<b>39,509</b>	46,171
Contribution to defined contribution pension schemes	<b>60,339</b>	65,319
	<b>508,983</b>	574,166
	<b>508,983</b>	574,166

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

	<b>2023</b>	<i>2022</i>
	<b>No.</b>	<b>No.</b>
Employees	<b>12</b>	13
	<b>12</b>	13
	<b>12</b>	13

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

	<b>2023</b>	<i>2022</i>
	<b>No.</b>	<b>No.</b>
In the band £100,001 - £110,000	<b>1</b>	1

Key management personnel consists of the CEO, Head of Communications and Fundraising, Head of Information and Support Services, Head of Policy and Health Services and the Head of Finance and Administration. The total employee remuneration and benefits of the key management personnel of the Charity were £259,185 (2022: £332,882). Please note that the Head of Communications and Fundraising left the organisation in June 2023.

**13. Trustees' remuneration and expenses**

During the year, no Trustees received any remuneration or other benefits (2022 - £NIL).

During the year ended 31 December 2023, expenses totalling £103.99 were reimbursed or paid directly to 1 Trustee (2022 - £67.50 to 2 Trustees). These expenses were in relation to travel expenses.

NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023

14. Tangible fixed assets

	Office equipment £
<b>Cost or valuation</b>	
At 1 January 2023	18,073
At 31 December 2023	<u>18,073</u>
<b>Depreciation</b>	
At 1 January 2023	17,741
Charge for the year	332
At 31 December 2023	<u>18,073</u>
<b>Net book value</b>	
At 31 December 2023	<u>-</u>
<i>At 31 December 2022</i>	<u>332</u>

15. Investment property

	Freehold investment property £
<b>Valuation</b>	
At 1 January 2023	650,000
Gain / (loss) on revaluation	5,000
At 31 December 2023	<u>655,000</u>

Investment property comprises residential flats let. The fair value of the investment property has been arrived at on the basis of a valuation carried out by an independent valuer with reference to market evidence of transaction prices for similar properties and a formal valuation made post the year end.. The valuation was made on an open market value basis.

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**16. Fixed asset investments**

	<b>Other fixed asset investments £</b>
At 1 January 2023	27,000
Disposals	(27,000)
<b>Net book value</b>	
At 31 December 2023	-
<i>At 31 December 2022</i>	<u>27,000</u>

**17. Debtors**

	<b>2023 £</b>	<b>2022 £</b>
<b>Due within one year</b>		
Trade debtors	21,057	8,840
Other debtors	6,410	24,655
Prepayments and accrued income	11,098	8,969
	<u>38,565</u>	<u>42,464</u>

**18. Creditors: Amounts falling due within one year**

	<b>2023 £</b>	<b>2022 £</b>
Bank loans	3,532	-
Trade creditors	97,757	116,434
Other taxation and social security	5,557	6,181
Other creditors	-	26,475
Accruals and deferred income	55,768	47,763
	<u>162,614</u>	<u>196,853</u>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**19. Creditors: Amounts falling due after more than one year**

	2023 £	2022 £
Bank loans	<u>295,429</u>	<u>-</u>

**20. Statement of funds**

**Statement of funds - current year**

	Balance at 1 January 2023 £	Income £	Expenditure £	Transfers in/out £	Gains/ (Losses) £	Balance at 31 December 2023 £
<b>Unrestricted funds</b>						
General Funds - all funds	<u>770,477</u>	<u>507,197</u>	<u>(550,084)</u>	<u>15,363</u>	<u>(10,432)</u>	<u>732,521</u>
<b>Restricted Funds - Branches</b>						
Branches	<u>265,269</u>	<u>154,399</u>	<u>(152,602)</u>	<u>(23,876)</u>	<u>-</u>	<u>243,190</u>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**20. Statement of funds (continued)**

	Balance at 1 January 2023 £	Income £	Expenditure £	Transfers in/out £	Gains/ (Losses) £	Balance at 31 December 2023 £
<b>Restricted funds - All other</b>						
Branch Development Fund	7,992	-	(1,335)	4,083	-	10,740
Fergus Rogers Fund	2,052	-	(300)	-	-	1,752
Aspiring to Excellence	42,234	121,000	(154,623)	-	-	8,611
Cimzia Select Programme	150	-	-	-	-	150
Ophthalmology / Gastroenterology project	855	-	(837)	-	-	18
Self Management Programme	21,067	40,962	(43,957)	-	-	18,072
Gold Standard Delay to Diagnosis	35,316	177,694	(199,739)	-	-	13,271
APPG	517	26,400	(26,229)	-	-	688
NASS Voices	3,493	-	(9,113)	5,620	-	-
Round Table	11,900	-	(3,600)	(1,190)	-	7,110
Health Inequalities	18,131	-	(15,781)	-	-	2,350
	<u>143,707</u>	<u>366,056</u>	<u>(455,514)</u>	<u>8,513</u>	<u>-</u>	<u>62,762</u>
<b>Total of funds</b>	<u><u>1,179,453</u></u>	<u><u>1,027,652</u></u>	<u><u>(1,158,200)</u></u>	<u><u>-</u></u>	<u><u>(10,432)</u></u>	<u><u>1,038,473</u></u>



NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023

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20. **Statement of funds (continued)**

Branch Network Funds

The Branch Network Funds support the local activities of NASS Branches, which offer regular physiotherapy or hydrotherapy sessions led by qualified instructors. Each Branch raises its funds and decides how to utilise them for specific activities. In the event of a branch ceasing operations, any remaining funds will be reclassified as unrestricted funds. A portion of these funds may be directed into the Branch Development Fund, to support our branches' continuous growth and development.

Branch Development Fund

The Branch Development Fund is created through donations from local NASS Branches. It aims to ensure the establishment and promotion of all Branches, and it provides start-up grants to new Branches and funds for ordering promotional materials such as posters and leaflets.

Fergus Rogers Fund

The Fergus Rogers Fund was established in memory of Fergus Rogers to assist people with axial SpA in purchasing specific items that can improve their quality of life. It is used to provide support for those in financial need to obtain essential items recommended by their healthcare professionals.

Aspiring to Excellence Fund

The Aspiring to Excellence Fund supports a multi-year quality improvement program to transform healthcare for people with axial SpA. The fund facilitates strategic partnerships between NASS, BRITSpA, and the NHS transformation unit, bringing together rheumatology teams and service improvement experts. It is utilised for various activities, including recruitment to the program, learning sessions, online coaching, podcasts, and the development of an audit tool to track the time to diagnosis.

Ophthalmology / Gastroenterology Project Fund

The Ophthalmology/Gastroenterology Project Fund supports the Gold Standard time to diagnosis program and its efforts to improve the identification and referral of suspected axial SpA in Ophthalmology and Gastroenterology. It finances the involvement of clinical associates from both specialities in gathering intelligence and understanding the current landscape. Additionally, the fund covers the development of educational materials, audits, posters, surveys, and policy reports.

The Self-Management Programme

The Self-Management Fund covers the costs of NASS's Supported Self-Management Program, which equips people with axial SpA with the skills and tools to manage their symptoms confidently. It supports various aspects of the program, including online resources, self-management sessions, and regional events held in conjunction with local NHS rheumatology departments.

Delay to Diagnosis - Gold Standard Fund

The Delay to Diagnosis - Gold Standard Fund is utilised to implement The Gold Standard Time to Diagnosis program for axial SpA. It supports various activities such as producing campaign impact reports, conducting economic analysis, delivering landscape reports, reviewing the use of MRI in diagnosis, and running public awareness campaigns.

NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023

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20. Statement of funds (continued)

Good Boost Fund

The Good Boost Fund was received from Innovate UK for the project 'Transforming older adult disability through virtual, peer-led community rehabilitation.' It finances the development of an online community for older adults with axial SpA. It covers staff salaries, platform development, and volunteer recruitment to lead virtual groups.

APPG (All Party Parliamentary Group) for Axial Spondyloarthritis Fund

The APPG Fund is established to oversee the implementation of the National Institute for Health and Care Excellence (NICE) guidelines for Spondyloarthritis and its Quality Standard. It supports the functioning of the parliamentary group. It is used to conduct meetings, national inquiries, and parliamentary receptions to engage with MPs on axial SpA NHS services.

NASS Voices

The NASS Voices Fund supports regional events to facilitate interactions between local people with axial SpA and their rheumatology healthcare professionals. It helps cover the costs of venue payments and other expenses for organising these events.

Round Table

The Round Table Fund supports wider policy work and national discussions on axial SpA in the UK. Although there was no activity in 2022, the fund is carried forward to continue its purpose in 2023.

Health Inequalities Fund

The Health Inequalities Fund finances a qualitative study focusing on people's experiences with axial SpA through the lens of sex, gender, and gender identity. It covers expenses related to recruitment for focus groups and data collection.

Members Day Fund

The Members Day Fund facilitates the annual Members Day and AGM events held in different towns/cities across the UK. It covers the costs of organising these events, including venue arrangements, speaker fees, workshops, and other activities for attendees.

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**20. Statement of funds (continued)**

**Statement of funds - prior year**

	<i>Balance at 1 January 2022 £</i>	<i>Income £</i>	<i>Expenditure £</i>	<i>Transfers in/out £</i>	<i>Gains/ (Losses) £</i>	<i>Balance at 31 December 2022 £</i>
<b>Unrestricted funds</b>						
General Funds - all funds	1,103,462	457,380	(757,972)	17,607	(50,000)	770,477
<b>Restricted Funds - Branches</b>						
Branches	298,771	118,099	(127,043)	(24,558)	-	265,269

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**20. Statement of funds (continued)**

**Statement of funds - prior year (continued)**

	<i>Balance at 1 January 2022 £</i>	<i>Income £</i>	<i>Expenditure £</i>	<i>Transfers in/out £</i>	<i>Gains/ (Losses) £</i>	<i>Balance at 31 December 2022 £</i>
<b>Restricted funds - All other</b>						
Branch Development Fund	4,592	-	(600)	4,000	-	7,992
Fergus Rogers Fund	2,052	-	-	-	-	2,052
Aspiring to Excellence	149,638	115,938	(223,342)	-	-	42,234
Cimzia Select Programme	150	-	-	-	-	150
Ophthalmology / Gastroenterology project	9,205	-	(8,350)	-	-	855
Self Management Programme	15,241	49,972	(44,146)	-	-	21,067
Gold Standard Delay to Diagnosis	120,584	200,838	(286,106)	-	-	35,316
Good Boost	165	9,752	(9,917)	-	-	-
APPG	3,922	27,600	(31,005)	-	-	517
NASS Voices	1,993	2,000	(500)	-	-	3,493
Round Table	11,900	-	-	-	-	11,900
Health Inequalities	-	18,459	(328)	-	-	18,131
Members Day	-	26,486	(29,437)	2,951	-	-
	<u>319,442</u>	<u>451,045</u>	<u>(633,731)</u>	<u>6,951</u>	<u>-</u>	<u>143,707</u>
<b>Total of funds</b>	<u><u>1,721,675</u></u>	<u><u>1,026,524</u></u>	<u><u>(1,518,746)</u></u>	<u><u>-</u></u>	<u><u>(50,000)</u></u>	<u><u>1,179,453</u></u>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**21. Summary of funds**

**Summary of funds - current year**

	<b>Balance at 1 January 2023 £</b>	<b>Income £</b>	<b>Expenditure £</b>	<b>Transfers in/out £</b>	<b>Gains/ (Losses) £</b>	<b>Balance at 31 December 2023 £</b>
General funds	770,477	507,197	(550,084)	15,363	(10,432)	732,521
Restricted funds- Branches	265,269	154,399	(152,602)	(23,876)	-	243,190
Restricted funds	143,707	366,056	(455,514)	8,513	-	62,762
	<u>1,179,453</u>	<u>1,027,652</u>	<u>(1,158,200)</u>	<u>-</u>	<u>(10,432)</u>	<u>1,038,473</u>

**Summary of funds - prior year**

	<i>Balance at 1 January 2022 £</i>	<i>Income £</i>	<i>Expenditure £</i>	<i>Transfers in/out £</i>	<i>Gains/ (Losses) £</i>	<i>Balance at 31 December 2022 £</i>
General funds	1,103,462	457,380	(757,972)	17,607	(50,000)	770,477
Restricted Funds- Branches	298,771	118,099	(127,043)	(24,558)	-	265,269
Restricted funds	319,442	451,045	(633,731)	6,951	-	143,707
	<u>1,721,675</u>	<u>1,026,524</u>	<u>(1,518,746)</u>	<u>-</u>	<u>(50,000)</u>	<u>1,179,453</u>

**NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023**

**22. Analysis of net assets between funds**

**Analysis of net assets between funds - current year**

	<b>Restricted Funds - Branches 2023 £</b>	<b>Restricted funds - All other 2023 £</b>	<b>Unrestricted funds 2023 £</b>	<b>Total funds 2023 £</b>
Investment property	-	-	655,000	<b>655,000</b>
Current assets	243,190	62,762	535,564	<b>841,516</b>
Creditors due within one year	-	-	(162,614)	<b>(162,614)</b>
Creditors due in more than one year	-	-	(295,429)	<b>(295,429)</b>
<b>Total</b>	<b>243,190</b>	<b>62,762</b>	<b>732,521</b>	<b>1,038,473</b>

**Analysis of net assets between funds - prior year**

	<i>Restricted funds - Branches 2022 £</i>	<i>Restricted funds - All other 2022 £</i>	<i>Unrestricted funds 2022 £</i>	<i>Total funds 2022 £</i>
Tangible fixed assets	-	-	332	332
Fixed asset investments	-	-	27,000	27,000
Investment property	-	-	650,000	650,000
Current assets	265,269	143,707	289,998	698,974
Creditors due within one year	-	-	(196,853)	(196,853)
<b>Total</b>	<b>265,269</b>	<b>143,707</b>	<b>770,477</b>	<b>1,179,453</b>

NATIONAL AXIAL SPONDYLOARTHRITIS SOCIETY

NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2023

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

	2023 £	2022 £
Net expenditure for the year (as per Statement of Financial Activities)	<b>(140,980)</b>	(542,222)
<b>Adjustments for:</b>		
Depreciation charges	332	5,402
(Gains)/losses on investments	10,432	77,000
Dividends, interests and rents from investments	(35,625)	(28,209)
Decrease in debtors	3,899	72,597
Increase in creditors	261,190	148,082
<b>Net cash provided by/(used in) operating activities</b>	<b>99,248</b>	(267,350)

**24. Analysis of cash and cash equivalents**

	2023 £	2022 £
Cash in hand	802,951	656,510
<b>Total cash and cash equivalents</b>	<b>802,951</b>	656,510

**25. Analysis of changes in net debt**







	At 1 January 2023 £	Cash flows £	At 31 December 2023 £
Cash at bank and in hand	656,510	146,441	802,951
Debt due within 1 year	-	(3,532)	(3,532)
Debt due after 1 year	-	(295,429)	(295,429)
	<b>656,510</b>	<b>(152,520)</b>	<b>503,990</b>





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