



## CONTENTS

4	weicome
8	Why we're here
12	Strategic Report
12	Review of 2021 performance
35 50	Fundraising activities and performance Financial review
<b>55</b>	Financial and management policies
<b>57</b>	Governance and management
<b>59</b>	Risk and safeguarding
60 62	Statement of Trustees' responsibilities Independent auditor's report
66	Financial statements
<b>79</b>	Legal and administrative details



One day in Spring, urged by my mum, I walked into Portsmouth A&E with a high heart rate looking quite pale, but still feeling relatively normal. I was 18. It was Easter Monday and I was due to start my A-level exams that week. I sat in the waiting room and almost walked back out because I felt I should have been revising.

They did some tests, and I knew something was wrong because I got rushed through very quickly. My mum is a nurse, and she'd known something wasn't quite right. I fell asleep in the Majors department and when I woke up, I was told I had leukaemia. They said I was being sent to Southampton General where there was a Teenage Cancer Trust unit. Within the hour I was on my way there in an ambulance, and treatment started about three days after. It was a rollercoaster.

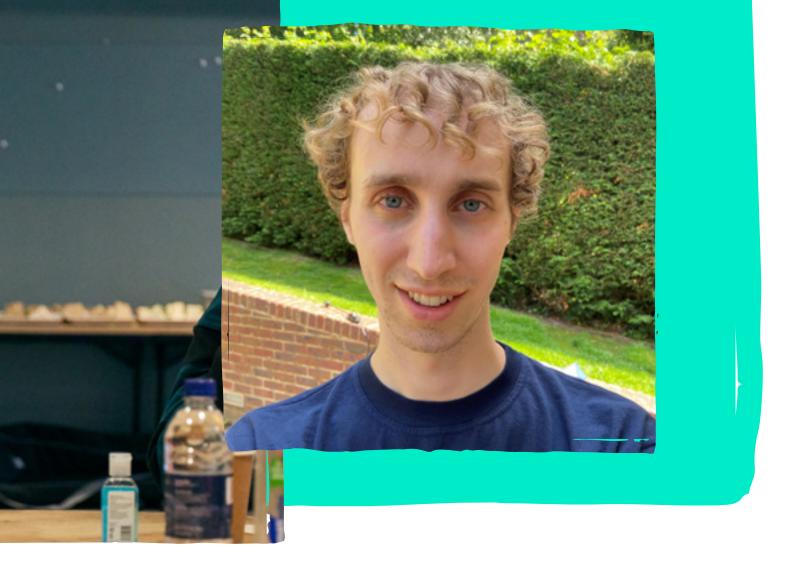
Uneasy thoughts about spending months on a whitewashed ward, with limited visitors, no TV and no fun, were quashed quite quickly after I arrived at

the unit. It didn't feel like a ward at all, more like a very clean university flat!

There was a main lounge with a pool table, games, Sky Sports, and a kitchen where my mum would cook my meals. It was a really good space for the parents to meet each other, and I had all my friends come and visit me. Being in that ward with all the staff was very reassuring, because I knew it was the best place in the world I could be with my condition.

Leonie was my Youth Support Coordinator, and right from the start it was just like talking to an auntie or a friend. I suffered from neutropenic sepsis during the chemo. That was a low point – I literally can't remember it because I was so ill. But Leonie was a real advocate for me, and she wasn't afraid to ask consultants questions I'd be too scared to ask.

After relying on the charity so much during my treatment, joining Teenage Cancer Trust's Youth Advisory Group felt like such a natural thing to do.



I've been able to meet other young people who've been through similar experiences, and I'm hoping to spend more time with them in March at Teenage Cancer Trust's annual concert at the Royal Albert Hall.

I hope the charity has also got something back from me. I wanted to draw on my experiences, good and bad, to help further improve the extraordinary work Teenage Cancer Trust does. I've been sharing my thoughts on post-treatment care, which I'm quite passionate about, as leaving behind a really strong bubble of support when you finish active treatment can be difficult.

I'm due to begin my nursing degree this September. It's really exciting, it's at the University of Southampton and so the placements will be at the same hospital I was treated at. I used to think I would go into graphics, but when I saw all these healthcare professionals doing this amazing work I started thinking, why not become a nurse? You might wonder why I'd ever want to see the inside of a hospital again, but I feel like hospitals are quite magical places – after all, life often begins and ends there. Some of my friends are surprised when I say that, but in a strange way I can look back on my time in hospital with fondness, and I think that's because of all of the people involved.

So I'm thrilled to be opening Teenage Cancer Trust's annual report. I hope it helps you to understand more about their work and why specialist support for young people with cancer is so important.

## Peter Teenage Cancer Trust Youth Advisory Group Member





2021 was another challenging year for young people with cancer – with the pandemic threatening to leave them even more vulnerable and isolated. Ensuring that Teenage Cancer Trust is amplifying their voices, ensuring their needs are not forgotten and delivering the specialist care and support they need and deserve has been more urgent than ever.

We emerged from 2020 able to build back stronger and become more agile and sustainable – continuing to protect our frontline delivery while exploring new opportunities to raise funds, connect with young people and engage our wider stakeholders. In NHS hospitals across the UK our nurses and Youth Support Coordinators continued to deliver expert care when young people and their families needed it the most. They deserve so much thanks and appreciation – a remarkable team.

Everything we do is made possible by donations and we closed out 2021 having raised £16.3m - an increase of £1.3m on what was budgeted, but lower than what we had planned pre-pandemic. This increase on budgeted income led to reserves being 16.1m at year end - funds we are keen to spend through our new strategy on making an even bigger difference to young people with cancer across the UK.

Partnership working, collaboration and relentless focus on purpose are key to us delivering greater impact for young people and we were delighted to start 2021 with the launch of our official partnership with Ellen MacArthur Cancer Trust and Young Lives vs Cancer. We have exciting plans to work together and started our collaboration with a shared #Hand2Hold campaign with Young Lives vs Cancer to ensure that coronavirus restrictions don't stop young

people having family or friends with them at crucial moments in their diagnosis and treatment.

The power of partnerships and sharing expertise is needed globally as well as locally and 2021 saw us host the first all-digital Global Adolescent & Young Adult Cancer Congress, bringing together more people from around the world than ever before to share, learn and collaborate to improve the lives of young people with cancer.

Transforming our work digitally remains essential and this needs us to test, learn, and where necessary, re-evaluate. Not everything we have tried has worked as we intended and we are hugely appreciative of key funders who have supported us with testing and learning in the digital space. Cancelling our virtual Find Your Sense of Tumour conference due to low engagement, and the learning from our pilot of the Connect social media platform, have shown that the ideal balance for the future lies in blended support that offers the best of in-person and digital connection.

Our new website, launched in January 2022, will support us in further digital transformation both for our service delivery, our fundraising and our ability to mobilise campaigns to create change.

The pandemic continued to hit our fundraised income meaning we couldn't deliver our flagship Royal Albert Hall gigs for the second year running and our income is not at the levels we had planned for pre-pandemic. But 2021 – like 2020 – proved that our supporters are unstoppable. When in-person fundraising was impossible, our community rallied, with our virtual February Squats Challenge smashing all expectations to raise a phenomenal £1.5 million.

September saw us deliver the first Ultimate Night Out at The Savoy with the remarkable support of the one and only Gary Barlow - it was wonderful to be back in a room with supporters, united by the power of music to change the lives of young people with cancer. At the heart of these and other new initiatives is our new Fundraising

"Partnership working, collaboration and relentless focus on purpose are key to us delivering greater impact for young people."

Strategy, which the Board approved in July and which will see us significantly increase our net income in the years to come.

The need to increase net income is so that we can scale up our impact and do more for young people with cancer. We ended 2021 stronger than we started. Key to this strength was finalising our new strategy, Putting Young People First. This sets out an ambitious, unifying and huge goal – that by 2040, young people with cancer in the UK will have the best outcomes and quality of life in the world. At the heart of this we will ensure that the needs of young people with cancer are not overlooked, and that specialist, age-appropriate support is accessible to all, with no-one left behind.

Achieving this will rightly demand drive, ambition, evidence, a sustained focus on equity, diversity and inclusion through our organisational strategy, further digital transformation and young people being heard more loudly than ever before both within the charity and in the corridors of power.

It will also need remarkable people – driven by our shared passion for change – not only to be part of the charity but also to support us in increasing our income, to ensure young people with cancer have the best quality of life and outcomes in the world.

Kate Collins, Chief Executive Paul Spanswick, Chair, Board of Trustees

7

## WHY WE'RE HERE

Every day in the UK, seven young people aged 13-24 hear the words "you have cancer". Right at that moment, everything changes – for them, their family and for the life they had planned. Teenage Cancer Trust offers them and their families expert support from the point they're first concerned about cancer.

Without our specialist nurses, support teams and hospital units, young people can feel isolated, receiving treatment either alongside younger children or much older adults. They might never meet another person their age who knows what they're going through.

Teenage Cancer Trust is dedicated to every one of these young people to make sure they receive the very best individual, age-appropriate care and support.

**Our vision:** a world where cancer doesn't stop young people from living their lives.

**Our purpose:** to ensure every young person with cancer has the best treatment, care and support.

#### **OUR VALUES**



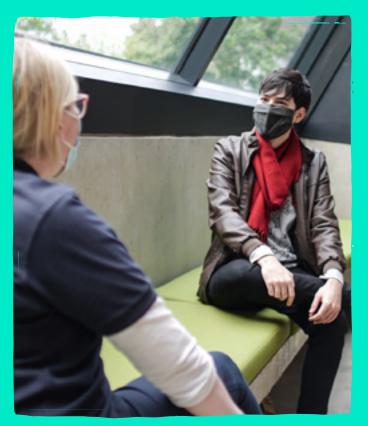
Our values guide and ground our decisions, and help make sure we continue to put young people at the heart of everything we do. In 2021 these values underpinned all our work, from how we worked with young people to the dedication of our remarkable nurses, Youth Support Coordinators, colleagues and volunteers, and our loyal community of fundraisers.

## HOW WE SUPPORT YOUNG PEOPLE WITH CANCER IN THE UK

At Teenage Cancer Trust, we believe that young people with cancer are young people first and cancer patients second. Their lives don't stop and their identity doesn't have to change when they receive a cancer diagnosis. We listen to young people to understand their needs, and then work with them to meet these needs at every stage of their cancer treatment and recovery. Our services fall into the following three areas:

## 1. Providing care and support in partnership, primarily with the NHS

Teenage Cancer Trust offers unique care and support, designed for and with young people. We have a specialist unit in almost every major NHS cancer treatment centre across the UK, where we fund expert nurses, Youth Support Coordinators and Multidisciplinary Team Coordinators to provide the very best care and support for young people facing cancer.



#### 2. Tackling isolation

Having cancer when you're young can be both scary and lonely. We help tackle this by providing accessible, reliable information and bringing young people with cancer together to support each other.

We provide easy-to-understand information about every aspect of living with cancer as a young person – written by cancer experts and reviewed by young people with cancer. As well as our online information, we also offer a printed Young Person's Guide to Cancer.

We run events for young people with cancer to help them regain independence and meet other young people going through something similar. We also give them all the information and support they need at a critical point in their recovery, on topics like exercise, nutrition, fertility and careers.

#### 3. Leading the way

In a health system that was not designed for them, young people with cancer risk being forgotten. And, too often, they don't have a say on matters which affect them or enough influence on their treatment and care.

We drive change for young people with cancer through our policy work in Westminster and all UK governments, and as part of the stakeholder group which supports the All Party Parliamentary Group on Cancer.

Our policy work influences positive change in young people's experiences of cancer for them and their families. From the funding and development of specialist facilities to improving young people's diagnosis, experience and outcomes, our information and expertise help shape decisions made at local and national level.

# OUR YEAR IN MARKET MARK

2021: some standout stats...

## £9.8 MILLION

invested in life changing cancer services

frontline staff were there for young people with cancer



2,200
young people
supported
by our Youth
Support
Coordinators

group activities for young people in hospitals and in the community

368
delegates
attended
our Global
Congress

12,000
people actively supported our campaigns



## STRATEGIC REPORT

### REVIEW OF 2021 PERFORMANCE

## Providing care and support in partnership, primarily with the NHS

We work in partnership with the NHS to provide age-appropriate spaces and specialist staff to support young people with cancer throughout the UK. As the pandemic entered its second year, we continued to prioritise protecting existing frontline services wherever possible.

We were able to maintain our services across 28 Teenage Cancer Trust units – the UK's only specialist network of treatment centres supporting young people with cancer. We also continued to invest in our specialist staff, funding 61 Teenage Cancer Trust Nurses, 34 Youth Support Coordinators and 7 Multi-Disciplinary Team Coordinators.

The staff in our units showed remarkable resilience and resourcefulness in finding ways to adapt services and support young people with

"It's very intense, with some young people you speak to them every day if they need that level of support. To go into someone's life at a time that is so devastating for them, and for them to be so trusting of you, is a real privilege."

*Clare*, Youth Support Coordinator cancer through a year when the pandemic was still having a major impact. As well as providing the best in specialised treatment and care, our nurses acted as unflagging advocates for young people, championing their needs in an NHS under enormous strain – from making sure family and friends could be there with them at key moments, to ensuring access to specialised psychological support when they needed it.

In such a difficult year, our Youth Support Coordinators also played a vital role in breaking down the sense of isolation and supporting young people with cancer to maintain their mental health and wellbeing. With face-to-face activities impossible for much of the year, they worked with a wide range of local and national organisations to provide young people with opportunities to engage online, from virtual social events to music therapy, arts and crafts, exercise classes and wellbeing sessions, and ran activities outdoors when the restrictions allowed. (see p22).

Youth Support Coordinators also engaged young people in one-to-one sessions, by phone, email and online, providing support and addressing any concerns they may have, from anxieties about treatment and procedures to body image and fertility.

These new ways of working prompted us to reevaluate our strategy for reaching more young people, particularly those being treated away from principal treatment centres. In the first year of the pandemic, we took the decision to pause the rollout of our outreach nursing and support service. In 2021 we carried out a review to better



understand the current structure of our funded and adopted staff and their work with young people, in the context of the increased use of digital technology to deliver services.

Based on this learning, and on wider trends and policy developments shaping work with young people with cancer in the UK, we made the decision to maintain our current workforce and instead move towards a mix of face-to-face and digital services, which can respond flexibly based on young people's changing needs.

As well as investing in staff, in 2021 we continued to raise funds for capital investment to provide and maintain age-appropriate spaces for treatment and care.

Our brand new unit at the Royal Hospital for Children and Young People in Edinburgh opened in March 2021 (see p20-21), while the planned refurbishment of our unit at Sheffield Royal Hallamshire Hospital was completed in July.

Thanks to the amazing fundraising achievements of our corporate partner Morgan Stanley, we also achieved our goal of securing funding for a new Proton Beam Therapy Centre at University College Hospital London, and a new Young Adult Unit within the University College Hospital London Grafton Way Building.

Building work on these projects was delayed due to the pandemic and local NHS pressures, but both units were on track to open in the first quarter of 2022.

## ELLIE'S STORY

Throughout 2021, our staff were there for young people like Ellie, who was diagnosed with Hodgkin lymphoma, aged 24.

Despite Covid-19, I started to feel like life was happening for me again after I graduated as a junior doctor. I was moving from Glasgow to Northern Ireland to start work in a hospital there and I was excited about my future.

I was on the ferry with my mum when I put my hand to my neck and felt a lump. It didn't feel right. I turned to my mum and said: 'Mum, I think I have cancer'. She said: 'No, don't be silly I'm sure it's nothing'. I agreed that I was probably being a hypochondriac. I started feeling exhausted, but I put that down to being in a new city and working as a junior doctor on a nightshift.

One day I woke up in a pool of sweat. I was also breathless and having chest pains, so I did a Covid test. It came back negative. I had planned to go back to work, but my family insisted I get it checked out, so I called 111 and went into hospital.

I had a biopsy and was told a week later that I had Hodgkin lymphoma.

The team at the Teenage Cancer Trust unit were amazing. Without Nicola, my Youth Support Coordinator, I don't know where I would be. I relied on her a lot, and I couldn't have done it without her. She was my main support because I couldn't see my friends and because my family couldn't visit me when I was in for treatment. I think her role was amplified during Covid as the patients were even more isolated.





Kenn was treated on a Teenage Cancer Trust unit after being diagnosed with alveolar sarcoma, aged 21.

I had a growth in my nose which got quite aggressive. I started getting double vision and I couldn't see out of my right eye.

My mum was with me when the results came back, and we were both quite scared. We just didn't expect it to be cancer.

The Teenage Cancer Trust unit was not what I expected. I'd been in adult wards, and I definitely felt more comfortable at the unit.



"The team at the Teenage Cancer Trust unit were amazing. Without Nicola, my Youth Support Coordinator, I don't know where I would be".

We chatted about everything. Nicola was there for every emotion - when I was laughing and when I was crying. She always knew what to do and say to make me feel normal.

She put on sessions like calligraphy classes which is something I have always had an interest in but had never tried. I really love it now, so that is a positive I have taken from my cancer journey.

You need people even more after treatment. I was really reassured to hear that Nicola can support me for two years post-treatment. I met her for a walk outside as it was clinically safer, and it was great to meet her in a non-clinical environment.

It's really nice that I can still see her as she's been such a massive part of my journey so far, and my journey isn't over.

When I started chemo, it was really tough. But Danielle, the Clinical Nurse Specialist, was there for me. She visited me all the time and really helped me with my anxiety. I could call her any time with questions about the side-effects I was having.

Gemma, the Youth Support Coordinator, helped alleviate the loneliness and boredom. I made a lot of Lego in hospital and Gemma often came and sat with me. We had a laugh and it made it feel less like a hospital setting.

Gemma put on online events and introduced me to other young people on the unit, so I could chat with people my age who were going through the same thing.

I was lucky that I missed a lot of the coronavirus restrictions. There was a bed in my room so my mum could stay overnight. I was so grateful for that as I needed her the most then. Teenage

Cancer Trust gave me the best of both worlds as I could have my mum there with me, and also have Danielle and Gemma for support.

I became really good friends with a lad called Jordan. There were days when I was lying in bed feeling awful, but then I'd hear his voice in the social area and it would encourage me to get up so I could go and join him.

You can struggle to sleep during treatment. Jordan and I started walking around in the middle of the night and tried to scare the nurses. It was nice being able to have a joke while on the unit. Sometimes you have to choose fun.

I also made friends with Safia, whose mum and sister would bring home cooked meals for me whenever they could. It's things like that that give the unit a real community feel.

# COMING THROUGH 2021 TOGETHER

Lead Nurse Louise, Consultant Nurse Nellie, and Youth Support Coordinator Clare told us how they continued to put the needs of young people first in 2021, despite the pandemic.







#### The challenge

Clare: The pandemic has been absolutely relentless and a heavy burden for the patients. There were times when we had patients in rooms next door to each other, each desperate for human contact. Staff would go into each room and facilitate them meeting online so they could play games with each other – but they were unable to meet. That was really hard.

**Nellie:** As a nurse, touch is really important – just being able to hold someone's hand, to hug them or stroke their hair if they're in bed and feeling a bit yucky. We continued to do that, but we were wearing gloves, so you lose some of that human touch. Also, because of the masks, they can't see your face, only your eyes. I adapted so that I could smile with my eyes.

Louise: The combination of cancer, being young, and Covid has created a kind of perfect storm. Before the pandemic, friends used to come in after college to spend time with their mates, or partners would come in and cook tea for their loved one in hospital and then spend time with them in the evening. Due to the pandemic, that spontaneity and flexibility are something that a cohort of young people have not known.

**Nellie:** The thing about our units is, they have the drip stands, they have the beds, but they don't feel like hospitals – more like a home from home. But with the pandemic, it became more like a hospital, because patients had to stay in their rooms and couldn't use the social areas. So mental health was hugely affected.

#### The response

Louise: We've managed to maintain the ability for young people to have a family member, friend or partner with them in hospital. They're tested three times a week in the same way that patients are. We consider parents and other 'plus ones' to be a really crucial part of our team.

**Clare:** We started a programme of virtual events for young people, and there was a really good uptake. We sent out a newsletter of online activities and often there was something happening every day that they could tap into. It was really clear how much young people wanted to meet others in the same situation.

Then in the summer we were able to start doing events in person, which was a real joy, as it was the first time they'd met face to face. We met for lunches outside, did everything from escape rooms to junkyard golf, and we were able to go to the Christmas lights!

**Nellie:** I'm really proud of the fact that we were able to champion young people having carers, usually a parent, with them. Also, almost everything that we wanted to do in terms of social events, we've been able to adapt – we've had to do it all online.

"You're unsure of the impact you're having until after the event, when people come back to you and say, 'I couldn't have done this if you hadn't been there."

Clare, Youth Support Coordinator

"We always come back to, 'Where is the young person in this and what do they need in order to get through their cancer experience?"

Louise, Lead Nurse

#### The results

Louise: We always come back to, 'Where is the young person in this and what do they need in order to get through their cancer experience?' Young people with cancer show us how resilient and adaptable they are every day. What's struck me is their positivity and optimism, a sense that whatever the challenge, it's just one more thing they will take in their stride. There's still laughter in the social space when there's two young people playing pool, it's just that it's behind masks.

Nellie: There are so many negative things about Covid, but the way we've had to adapt in the NHS and how quickly we did it has been a benefit. We've moved services forward and we have looked at how we provide care and treatments – better use of IT and digital apps, and hybrid ways of working, so you have a choice of face to face or virtual appointments.

Clare: The thing I have, that some of the ward staff don't have, is time. If that means sitting with a young person and playing a game, listening to them talk about Marvel, or about their friends, or just about how crap having cancer is, I've got an hour to spend, whereas their ward nurse is rushed off their feet. I know how much they appreciate that, especially in a situation where they've had periods of no visiting at all. So you build really close relationships with the patients.

You know you're doing the best you can, but sometimes you're unsure of the impact you're having until after the event, when people come back to you and say, 'I couldn't have done this if you hadn't been there.'



#### MARIAM'S STORY

Mariam, now 19, had just started an exciting new life at university when she learned she had Hodgkin lymphoma.

I'd just started the biggest chapter of my life, and now that was over. I came out of the room crying my eyes out.

Sian, my Youth Support Coordinator, helped me so much. I talked to her like a friend and she gave me great advice. When my hair fell out, she gave me turbans to wear.

Sian was there for me all of the times when I was so, so poorly and even came to visit me in the emergency unit. One time, I had mouth sores that were so bad I couldn't eat for three days. It hurt to talk, so Sian updated my family for me.

When I rang the bell to mark the completion of my chemo, Sian cried, as she'd seen me so poorly. I didn't think I would make it out the other side, so getting there was a big moment.



#### STRONGER TOGETHER:

### collaborating to better support young people with cancer

Since 2020 it's been clear that families and young people are in need of more support than ever before – more and more are struggling financially and emotionally, with the pandemic causing added stress and worry.

In the face of this increased need and reductions in fundraised income due to the pandemic, it's vital that charities like ours resist the temptation to 'retreat and compete' and instead, focus on how we can collaborate to scale up our reach and impact.

In 2021 we joined in partnership with two other leading youth cancer charities, Young Lives vs Cancer and the Ellen MacArthur Cancer Trust. By joining forces, we can increase our individual impact, reduce duplication and have a shared voice on issues that matter most to children and young people with cancer. The first joint campaign to emerge from the partnership was Teenage Cancer Trust and Young Lives vs Cancer's 'Hand 2 Hold' campaign (see p28).



#### IAM:

#### Supporting the whole person

The pandemic has also further underlined the importance of a holistic approach to care, in which the best in clinical care is matched with support to meet the emotional and psychosocial needs of young people with cancer.

Since 2013 we've been implementing the Integrated Assessment Mapping (IAM) portal, an online self-assessment tool that helps healthcare professionals work together with young people to identify the emotional and clinical support they need as they go through cancer treatment, driving personalised care.

In 2021 we supported three new NHS regions to adopt IAM, bringing the total actively using the platform in the UK to nine. As in the previous year, take up in 2021 continued to be slower than we'd hoped, due to a number of factors, including compatibility of the platform with the variety of different IT and data systems across the NHS.

Our focus in 2022 will be to provide a greater level of support to NHS care teams with

"We make home visits at the stage when we're getting to know young people, what their priorities, life choices and challenges are, so that we can build our response through the whole care team. We often use this as an opportunity to introduce the IAM assessment. IAM has become central to our way of working - young people will, either online or through a conversation with one of our teams, give us their voice, so that we can plan their care and support."

Louise Hooker, Lead Nurse, Wessex Teenage and Young Adult Cancer Service

embedding the use of the platform, including more technical capacity to help register and onboard young people as users.

We are also actively working with policymakers to promote more widespread adoption of the IAM model. The recently published Scottish Children and Young Person's Cancer Strategy 2021-26 includes a commitment to roll out IAM across Scotland, and to be adopted as the standard approach for holistically assessing the needs of young people with cancer.

#### A LASTING LEGACY

The phenomenal legacy of Teenage Cancer Trust ambassador and fundraiser Stephen Sutton continued to bear fruit in 2021 with the opening of a new unit in Edinburgh.

The unit, at the Royal Hospital for Children and Young People, opened in March 2021 and is fully equipped to meet the needs of teenagers and young adults with cancer from Edinburgh and the surrounding areas.



Funds for the new unit were raised by supporters of Stephen Sutton, who died in 2014. After being diagnosed with bowel cancer in 2010, Stephen began fundraising for Teenage Cancer Trust and to date his campaign has raised over £5.5m.

Previously, teenagers and young adults were being treated at the Royal Hospital for Sick Children, Edinburgh, where they received specialist care. The new unit is an improved, age-appropriate environment, with four warm and inviting bedrooms, an isolation bedroom, a 'snug' social area, a study room, a complimentary therapy room, and an outside garden area. There is also a day case room with multiple beds.

Jane Sutton, Stephen's mum, said: "It's fantastic to see that almost seven years on since Stephen passed away, his legacy, and the fundraising in his name, continues to change the lives of young people with cancer for the better.

"Stephen's wish was for every young person with cancer to have the best possible support throughout their treatment and he would be so happy to know the money he raised is being used today, to create a better environment for teenagers and young adults with cancer."



Aidan, aged 15, who is being treated for leukaemia on the unit, said: "There's a lot more space compared to the last ward I was on and the rooms are better equipped. I have more independence here – I don't have to ask the nurses for everything. I can just go to the snug and grab juice and crisps for myself."

Bobby, aged 13, from Dundee, also receiving treatment for leukaemia, was transferred to the new unit for five weeks for the induction stage of his chemotherapy.



"While we were playing, we'd ask each other about what we'd been diagnosed with. It was good for me... chatting to other young people with cancer helped me find out about what was to come".

Bobby, 13

He said: "The unit was lovely, especially the snug with game consoles in. There were a couple of other boys who were in there too. Playing together on the consoles was an icebreaker and naturally helped us start conversations.

"While we were playing, we'd ask each other about what we'd been diagnosed with, and the conversation flowed naturally. It was good for me as my diagnosis was quite recent and chatting to other young people with cancer helped me find out about what was to come, lessened some of my worries, and helped boost me up again."

## TACKLING ISOLATION

Going through cancer diagnosis and treatment can be a lonely and frightening experience, and family and friends don't always have the answers. For many, this sense of isolation has been made even more acute by the pandemic.

To navigate this, young people need reliable information and advice and opportunities to connect with others their own age with experience of cancer, who can understand what they are going through.

### BRINGING YOUNG PEOPLE TOGETHER

Our Youth Support Coordinators are able to focus exclusively on the psychosocial, emotional and wider needs of young people with cancer, providing personalised support in a way that works best for the young people in their care.

Up and down the country, in 2021 our Youth Support Coordinators were a lifeline for young people who would otherwise have suffered disproportionately from isolation during the pandemic. To further boost this work, we made a £100,000 fund available to our Youth Support Coordinators to resource additional activities, peer support sessions and social events to tackle isolation and support wellbeing.

Each Youth Support Coordinator organised a programme of online activity programmes for the young people in their region. When restrictions eased, they brought young people together for much-needed face-to-face interaction, from alternative Olympics to outdoor climbing, picnics and sailing days.

Our Youth Support Coordinators engaged more than 2,200 young people during 2021, organising and facilitating 665 group sessions in hospitals, and more than 550 group activities in the community.

#### THE CONNECT PILOT

The Connect platform was developed rapidly as a pilot project in 2020 to provide a dedicated online community exclusively for young people going through, or recovering from, cancer.

Connect was designed to allow young people with cancer to connect with a community of peers, find support, share their experiences and get professionally sourced and reliable information and advice.

A total of 208 young people piloted Connect in 2021. During the year we carried out an evaluation to assess Connect's long term viability. While running the site is resource-intensive, engagement has been relatively low, and at the end of 2021 we took the decision to pause Connect in its current form.

Developing digital resources for young people is a learning process, and the last 12 months have given us a richer understanding of what young people with cancer need from a digital community.



Sehaasgar, 17, was 14 when he was diagnosed with T cell lymphoblastic lymphoma.

The big thing that affected my mental health was Covid-19, that combined with treatment makes it worse. I couldn't go out and I was really isolated. I felt lost in a way. I didn't know what to do to pass the time and I couldn't find what was right for me.

The thing that helped me was pursuing my personal interests to help me pass the time and to keep me motivated.

Julie, my Youth Support Coordinator, is amazing. Julie knew that I played guitar and she put me forward for the opportunity to record a song. I got to go to the studio, meet the sound engineer and musicians and jam with them. I never expected to get an opportunity like that, so that's one positive that's come out of everything.

I've been to Teenage Cancer Trust events and it's good because you know you're not alone and you can talk to anyone and they understand you. Everyone's friendly and I met people that I still talk to now. It's a great experience.

The nurses are probably a big reason why I'm still alive. Whenever I go into the hospital, they feel like my second family.

## FIND YOUR SENSE OF TUMOUR

Our Find Your Sense of Tumour conferences bring young people with cancer together to hear from experts, share their experiences and forge friendships.

Having piloted an online version of the event in 2020, we planned to deliver virtual events for under-18s and over-18s in October and November 2021 respectively.

However, registration for the events was slow. Feedback from young people and professionals alike indicated that, after many months of online activity, a degree of digital fatigue had set in, leaving young people less likely to engage with online events.

We therefore made the difficult decision to cancel these conferences, instead using the digital tools and materials created for them in smaller group sessions regionally. Looking to 2022, we'll be building on this learning to develop a new hybrid event, combining the best aspects of our faceto-face and digital conferences, to deliver an experience that's as engaging and exciting as possible. This will ensure that young people can continue to benefit from face-to-face contact, while providing access to expert information and support even if they can't attend in person.

## PROVIDING INFORMATION YOUNG PEOPLE CAN TRUST

There is now a greater need than ever for reliable, easily accessible information and advice for young people with cancer. Without this – particularly in the context of social media – young people may fall prey to inaccurate and misleading information, including some myths and untruths which may be harmful.

With three decades of experience supporting young people with cancer, we aim to meet this need by becoming the leading provider of trusted information for young people and their families.

In February 2021, following a rigorous assessment process, we were accredited for the first time with the Patient Information Forum's PIF Tick, the only UK quality mark for approved, trustworthy health information.

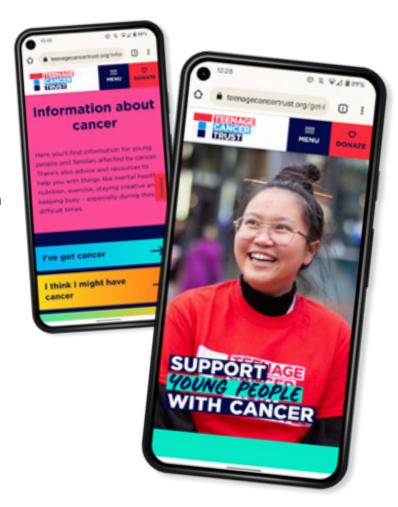
To further strengthen our capacity to act as a trusted resource, we recruited a dedicated Clinical Information Lead, tasked with rolling out a comprehensive information programme to meet the needs of young people and their families affected by cancer.

The role worked closely throughout the year with young people and healthcare professionals to develop age-appropriate information covering a broad range of clinical and non-clinical support topics. All of the information produced was reviewed by experts and by young people with experience of cancer, to ensure that it is accessible and meets their needs.

Content produced by the Clinical Information Lead was used across written, audio and video formats and social media. As well as clinical information, this included advice and resources to help young people with mental health, nutrition, exercise, staying creative and keeping busy during Covid.

## A ONE STOP RESOURCE FOR YOUNG PEOPLE WITH CANCER

Our website is a key source of information and support for young people with cancer. However, our previous site was seven years old and it was hard for visitors to find the information they needed, reducing traffic, constraining our reach and, most importantly, limiting our ability to help young people with cancer.



In 2021 we designed and built a new website from the ground up, with comprehensive input and feedback from young people with experience of cancer. The site, which went live in January 2022, offers a much more dynamic and engaging user experience. As the hub of our digital ecosystem, it will serve as a one stop source for young people and their families, with first class information and advice on all aspects of diagnosis, treatment and recovery.

The voices of young people themselves are at the forefront of the new site, meaning they will become our journalists by providing advice and stories about the effects of cancer on every aspect of their lives.

The site is also designed to support people fundraising for the charity, with a new donation system, new events platform and improved personalisation and connectivity.

In the coming months and years we will work to further refine and enrich this platform, with engaging multimedia content and more digital products and services to support young people.



## YOUTH ADVISORY GROUP

Our Youth Advisory Group (YAG) was created in 2018 to directly involve young people as active participants in the life of the charity and help ensure that their voices are heard throughout our work.

In 2021 there were 23 active members, aged between 16 and 28, all with experience of cancer as a teenager or young adult. They came from across the UK, with different diagnoses and backgrounds to reflect the diversity of the group they represent.

We listen to what they have to say and look to involve them in every big decision we make. We do that because no one knows better than those who have been through it. And they don't just tell us what they think – they directly shape the support we provide to young people.

During the year they were involved in critical activities and consulted on a variety of different issues, from helping recruit members of our senior leadership team to giving feedback to help make our services better, helping shape our new strategy, contributing to our policy work and speaking at events.

This year the group decided to focus particularly on how young people continue to be supported after their treatment ends, drawing on their experiences to help inform the charity's future approach to post-treatment care.

For Youth Advisory Group members, as well as making a difference for young people like themselves, being part of the group also means they get to develop teamwork, creative and communication skills by coming up with ideas, giving feedback and working alongside different people from the charity, including our Chief Executive, Kate.



"In telling my story, helping to change the narrative, it helps the next person who looks like me have a less lonely experience. Being a part of YAG means that a charity for young people has young minds behind it to help make important decisions. It helps to be a part of the change you wish to see."

Angel,
Youth Advisory Group member



#### **GLOBAL CONGRESS**

As health professionals around the world continue to grapple with the challenges of the global pandemic, it's more important than ever that those working in teenage and young adult cancer care have the opportunity to come together to share, learn and collaborate.

Over two days in December 2021, we hosted the Global Adolescent & Young Adult (AYA) Cancer Congress, welcoming 368 delegates from 23 countries and more than 100 speakers from around the world, to share the latest in good practice, innovation, and research.

The conference - the product of a partnership between Teenage Cancer Trust, Canteen Australia and Teen Cancer America - was originally due to take place in London in 2020, but the outbreak of coronavirus forced a postponement and in 2021 we took the event entirely online.

"The highlight was the amount of content that was directly from the young adults. For me, listening to their experiences, thoughts and feelings was really powerful."

Conference delegate



This gave us the opportunity to bring a more diverse range of people and perspectives together, and in greater numbers than ever before – from nurses, doctors and health service directors to AYA advocates, social workers and allied health professionals across many different fields.

Over two days of sessions, the conference addressed the key issues facing adolescent and young adult cancer care – from genomics and clinical trials, to the experience of LGBTQ+ young people, tackling healthcare inequalities, and the development of AYA cancer programmes in middle- and low-income countries.

The needs and voices of young people with experience of cancer were placed at the heart of the event, including their active involvement in planning, delivering sessions as speakers and creating posters.

"The best thing for me was the play at the end of day one 'The other side of the hurricane' - it was amazing and really brought so much of what we learn about AYA cancers to life."

Conference delegate

#### **CAMPAIGNS**

In 2021, as young people with cancer continued to feel the impact of the coronavirus pandemic, we launched two major campaigns, each focusing on the psychological and emotional wellbeing of young people during diagnosis, treatment and beyond.

#### **Hand 2 Hold**

Even under normal circumstances, going through cancer diagnosis and treatment can be a scary and isolating experience for many young people.

Throughout 2020, as the coronavirus pandemic gripped the UK, it had become clear that the crisis was making this sense of isolation far worse. Having to go to appointments and treatment alone was one of the biggest concerns for young people with cancer. Some were being told they had cancer without family members or friends present, or facing days of treatment without visitors.



While Teenage Cancer Trust's nurses and Youth Support Coordinators do all they can to provide comfort and support at such moments – whether it's accompanying young people to appointments, helping them share updates with their family, or providing emotional and holistic support – there can be no substitute for having a family member or friend by your side.

Extra precautions are needed during the pandemic to protect the most vulnerable, but these have been applied inconsistently across the UK. In some places, having that crucial 'hand to hold' is allowed, whereas in others, it's not.

In February 2021, alongside Young Lives vs Cancer, we launched the Hand 2 Hold campaign, calling on UK Governments to ensure a common approach across all cancer services so that, whenever safe and possible, young people will be allowed to have a parent or other family member, friend, or partner with them at key moments during diagnosis and treatment. We asked our supporters, parliamentarians and the wider public to help raise awareness of the issue. As a result, 4,592 people pledged their support for young people with cancer and more than 40 MPs and elected members backed the campaign on social media.

In May, at a cross-party parliamentary event we delivered alongside Young Lives vs Cancer, MPs and Peers heard from Amy, who was treated on a Teenage Cancer Trust unit during the pandemic and spoke about the importance of having family and friends there to support her.

#### AM4, 25

As I was diagnosed with breast cancer during the height of the Covid-19 pandemic, I had my diagnosis and treatment alone.

I had to go to the ultrasound alone. When the radiographer said that it wasn't a cyst, I burst into tears. They said there was an 80 percent chance it was breast cancer. I was so upset that one of the nurses said: 'I wish I could give you a hug'. She held my hand as that was the most she could do.

I was taken for a biopsy and a mammogram and I was so upset and crying so much that they led me through the back routes of the hospital because they didn't want to lead me through the main corridors.

Less than a week after my first GP appointment, I was diagnosed with breast cancer. Two weeks later I had a mastectomy. Again, I had to go in alone and my dad couldn't even walk me into the waiting room, despite the fact that he had self-isolated with me. We said goodbye in the parking lot. We were hugging and crying a lot. I'd never had major surgery or gone under aesthetic and it was

such a scary thing.
I was walking
into the biggest
surgery of my life
completely by
myself.



My Youth Support

Coordinator, Franki, had gotten in touch with me before I started chemo. She wasn't able to come and see me because of Covid-19, but she called me every couple of weeks to see how I was doing. It helped to have someone who I could speak to about cancer, or we'd have a general chat. She still calls me now and it's nice to know that I can talk to her too.

Before the pandemic, Franki used to organise events where young people with cancer could get together and support each other. That moved to online sessions and it was good to be able to meet other young people in similar circumstances.

I think it is so important for everyone to have someone with them during their cancer journey, but perhaps more so for younger people. For a lot of young people diagnosed with cancer, it will be the biggest thing in their life to date.

#### SOPHIE,24

My leukaemia relapsed just before the first coronavirus lockdown. I was told I needed CAR-T therapy and would have to be treated at the Christie in Manchester, 70 miles away from home.

My mum drove me to Manchester, we got to the door of the hospital and I had my suitcase because it was going to take around five weeks for me to have the CAR-T. My mum was crying, I was crying and she had to leave me at the door and drive off. I was struggling alone with this suitcase. My mum was terrified leaving me, because she was probably thinking, 'I can't be there to comfort her,' and, if things went wrong, would I be walking back out of the hospital?

Together with Young Lives vs Cancer, we produced four different guidance documents for young people – one for each UK Nation – to help young people get the best experience possible while they navigate the process of cancer diagnosis and treatment. We also met with all four Health Ministers for England, Wales, Scotland and Northern Ireland to discuss the guidance we had produced and how to cascade it through NHS Trusts so that it can be made available to every young person.

One year on from the launch of the campaign, we're pleased to report that real progress has been made. Most young people with cancer can now have at least one person with them when attending appointments or receiving treatment. But the picture remains patchy, with some hospitals still not getting the balance right, and some young people still falling through the gaps. We'll continue to raise awareness and lobby for change as the pandemic continues.

#### **#NotOK**

Facing cancer when you're young can devastate your mental health. Hearing those three words, 'You have cancer', can turn your world upside down. Suddenly you're surrounded by clinicians dedicated to making you well and getting your body through the rigours of treatment – but what about your mind?



The psychological impact of cancer can leave young people struggling with their mental health well into their adult lives. In a pre-pandemic study of young people's mental health during cancer treatment, 90% reported suffering from anxiety, 83% felt loneliness, 70% faced depression, and 42% experienced panic attacks. Since then the coronavirus pandemic has made the situation even worse, with many young people feeling more isolated and anxious than ever before.

The fact is, psychological support during cancer treatment is just as important as the treatment itself. Friends and family members aren't always sure how to help, and while our nurses and Youth Support Coordinators do amazing work every day to support young people emotionally, many will need additional support from a specialist psychologist.

Right now, that support isn't always available. Access is inconsistent from service to service and in different parts of the country, leaving young people at the mercy of a postcode lottery.

In spring 2021 we surveyed 121 young people with experience of cancer. Just over half said their mental health and wellbeing had been very poor (17%) or poor (35%). While 57% felt they had

## ANDREW'S STORY

After Andrew was diagnosed with leukaemia aged 19, his mental health deteriorated. Fortunately he was able to share his feelings and get help.

#### Trigger warning: this story discusses suicidal thoughts.

Before cancer, my mental health had always been fine. I was still a teenager, working out a lot and enjoying university life in Glasgow. I thought I was invincible.

I started to lose weight, get night sweats and have painful joints. I was barely able to get out of bed by the time I finally decided to go to my GP.

I was diagnosed with leukaemia. I went back to Edinburgh to be with my family and had a biopsy. Two days later I started my treatment on the Teenage Cancer Trust unit there.

A couple of months into treatment my mental health started to deteriorate. I was naive about how severe my form of cancer was. My initial two months of treatment didn't work as planned, so I changed to a more intensive, daily treatment. My body was breaking down in front of me and I had the sudden realisation that this would be my life for the next seven months, followed by another two and a half years of maintenance treatment.

I really thought, 'I'm not sure if I can do this.' I thought about giving up and committing



suicide. I was referred to a psychologist who gave me some good coping mechanisms. I was just really sad and I needed someone to sympathise with me and say, 'We know it sucks and we know it's bad, but you will get through it.'

I didn't want to burden my mum by saying that I wanted to commit suicide. Luckily, my Youth Support Coordinator Nicola and my Clinical Nurse Specialist Fiona were there for me. I knew that I could open up to them and talk honestly about how I was feeling.

The experience of having cancer was horrific, but if Teenage Cancer Trust hadn't been there, it would have been so much harder. Every time I thought about giving up and calling it a day, Nicola and Fiona made sure that I didn't make any rash decisions and that I carried on.

I'm already feeling so much better physically now my treatment has finished and that has really improved my mental health. I hope I can show other people that there is light at the end of the tunnel. Don't be afraid to talk to people and make sure the help you get works for you.

needed to see a psychologist in the previous six months, more than a third had been unable to, or had reduced access.

Psychologists also told us they were 'firefighting' due to the high demand on 'limited resource'.

Almost 9 in 10 surveyed said they thought current national provisions for young people with cancer were insufficient.

We launched our #NotOK campaign in June 2021, calling on UK Governments to commit to meeting the psychological needs of all young people with cancer by providing them with timely, high-quality support wherever they live, right from the point of diagnosis.

In the first phase of the campaign, 2,265 people emailed their MP or elected member to call for better mental health provision for young people with cancer. More than 30 politicians lent their support, backing the campaign on social media, writing to the then Minister with responsibility for cancer, Jo Churchill, and tabling parliamentary questions.

At the end of 2021, #NotOK was selected by the UK membership network Charity Comms as one of the top campaigns of the year, noting that it 'stood out' among other powerful campaigns across the charity sector.

In phase two of #NotOK, 6,898 people pledged their support for our call for ring-fenced funding to make sure every young person with cancer can get the psychological help they need. We also met with the Northern Ireland Health Minister, Robin Swann, MLA to discuss the additional resources that are needed.

In tandem with this work, our Chief Executive Kate Collins, in her role as Chair of the Children and Young People's Cancer Coalition, has been sitting on the Psychosocial Support Task and Finish Group, which was set up by NHS England to draft new recommendations for the provision of better psychosocial support for people affected by cancer. Kate's involvement has helped to ensure that the needs and voices of children and young people with cancer are represented throughout the process.

At the end of 2021, #NotOK was selected by the UK membership network Charity Comms as one of the top campaigns of the year, noting that it 'stood out' among other powerful campaigns across the charity sector.

As a result of the campaign, after meeting with eight remarkable young people with cancer to hear their experiences, in early 2022 the Cabinet Secretary for Health and Social Care in Scotland, Humza Yousaf MSP, made a public commitment to prioritise ensuring all young people can access specialist psychological support in Scotland.

We've made great progress, but there's more to be done. We'll continue fighting to ensure that the right support is in place for all young people right across the UK.

#### **Evidencing our impact**

Leading the way as an advocate for young people with cancer requires a rigorous research and evidence based approach, so that we can identify their needs and capture, measure and evaluate the impact of our services.

In 2021 we established an in-house Research and Evidence team to support the organisation to better understand the needs of young people with cancer, provide insight to inform our future plans and activities, and demonstrate the difference we make.

The team is now leading a working group identifying data and metrics to measure our impact in line with our new organisational objectives. We are also working closely with two Teenage Cancer Trust-funded researchers, based at St James's University Hospital, Leeds and University College London Hospitals, who this year were involved in a number of cutting edge research projects, from collecting UK pilot data on young people's mental health after cancer to launching a research programme on fertility among young people with cancer across 25 hospitals.



Chloe was 20 when she was diagnosed with thyroid cancer. She had to have both thyroid glands removed but didn't need chemotherapy or radiotherapy. Chloe had been told she had the 'good type of cancer' which made her feel guilty and stopped her asking for psychological support.

I didn't feel like I could ask for help. I would have felt like a fraud. You feel like you don't deserve it, and that they should be spending their time helping people who had had chemotherapy or radiotherapy instead. It was a throwaway comment, but those four words really messed things up for me. Because it all happened so quickly and because I had surgery rather than going into hospital for chemotherapy or radiotherapy, I don't think I had time to get my head around it and get closure.

Three years later it's still sinking in. Seeing a counsellor or a psychologist would have helped me get that closure. If I'd got that help, I would have had a more positive outlook overall and been in a much better place.



## FUNDRAISING ACTIVITIES AND PERFORMANCE

If 2020 was about adapting to a new and uncertain fundraising environment in the wake of the coronavirus pandemic, 2021 was about learning to thrive in it.

In common with other charities, the pandemic continued to hit us hard in 2021, particularly affecting key areas such as corporate giving, philanthropy, and music and entertainment. But it was also a catalyst for innovation, encouraging us to be bold, diversify and explore new opportunities.

Despite the ongoing challenges of the pandemic, we raised £15.43m in 2021, exceeding our already ambitious target of £14.97m. Virtual challenges and other new initiatives raised £2.9m, an exciting foundation from which to rebuild and deliver long-term sustainable growth.

The year got off to a flying start when our largest ever online fundraising event, the February Squats Challenge, was met with an astounding response, with 30,000 people taking part. The event outstripped all our expectations to raise £1.6 million, showing just what is possible when we use digital technology to mobilise our loyal community of supporters.

We also began to test the fundraising potential of the online gaming community with our first ever gaming marathon challenge event. In October, 40 gamers – including young people with experience of cancer (see inset) – live-streamed their favourite games for 12 hours, inspiring fellow gamers to support the cause. This is a major growth area and we now plan to hold further game-a-thons on a larger scale in 2022.

The music industry continued to struggle in 2021 due to coronavirus, and we were once again forced to cancel our flagship Royal Albert Hall gigs, which have since resumed in 2022. Nevertheless, we continued to enjoy tremendous support from our friends in the industry, who raised money for us in whatever way they could.

#### MILES, YOUTUBER AND FIFA STREAMER

Playing video games and streaming online is a really good way to make friends, learn new skills and help others who may be in need of some interaction.

I supported the fundraiser facilitated by Teenage Cancer Trust as they were a charity that helped me so much when I had cancer. I was diagnosed with blood cancer when I was just 14 and it was tough. I was on a young person's unit where I could play games and take my mind off my treatment by just being with other young people and getting immersed in fun activity, which helped me immensely.

Hosting your own fundraising stream is a great way to raise vital funds for these specialised young people's hospital units to continue to exist.

Over the summer we were thrilled to partner with Chris Evans' CarFest, whose lineup included our Honorary Patron Roger Daltrey CBE, as well as The Charlatans, Marc Almond, James Blunt and many more fantastic artists, and was accompanied by the release of a live album, with the partnership raising a total of £150,000 for Teenage Cancer Trust.

In September we began to build on the heritage of our Royal Albert Hall gigs with our first special one-off music event, the Ultimate Night Out with Gary Barlow. Hosted by Rob Brydon, the evening saw Gary perform live for a select audience of 140 people and raised £200,000. We were also incredibly proud to welcome rising young singersongwriter Ruby Walvin to perform onstage (see Ruby's story, opposite).

Ruby featured in another fundraising first in September, when Absolute Radio's Andy Bush and Richie Firth interviewed her for their nonstop 24-Hour Jukebox. The on-air fundraising marathon, with live performances from Manic Street Preachers and The Vaccines, raised £50,000 for young people with cancer. Andy and Richie also spoke to Chloe, who was treated on a Teenage Cancer Trust unit after being diagnosed with Hodgkin lymphoma at just 16 years old.

Also championing our cause were the Heavy Metal Truants, an intrepid collective of cycling enthusiasts led by Iron Maiden manager





Rod Smallwood and rock music journalist Alexander Milas. Switching to a virtual challenge, a global horde of 260 metal fans clocked up 37,917 miles – roughly the circumference of the Earth – in just 12 days, raising over £200,000 for their five partner charities. When coronavirus restrictions lifted, The Truants also took on Scotland, cycling through wind, rain and sunshine, and once again didn't disappoint, raising a whopping £108,000 for Teenage Cancer Trust alone.

Innovations aside, traditional community fundraising remains a cornerstone of our income, and without the loyalty and tenacity of our amazing supporters we could not have sustained our frontline, NHS-run services across the UK, on which so many young people with cancer depend.

As soon as restrictions began to ease, young people in our units, their friends, families, and wider communities, threw themselves into a dizzying array of challenges, from singing, skating and baking to bike rides, quiz nights and sponsored head shaves. In total, 4,012 individual supporters raised a stunning £3.2m – £495,000 in excess of our community fundraising target for the year.



#### RUB4, 25

I didn't sing for eight months after my treatment started as I felt too ill and it was mentally painful.

During chemo, I developed septic arthritis in my shoulder, so I needed an operation and I couldn't play the guitar afterwards. It made me feel like I'm not a musician anymore and that cancer had taken that from me.

Lois, my Youth Support Coordinator, listened to my songs and told me how good I am. She shared my music with the nurses, and I felt like they were all rooting for me to start writing again. That boosted my confidence and has given me encouragement.

Not being able to play guitar after my operation was gutting. When I finally picked it up properly and was able to play again, it was a bittersweet moment – I hadn't played or sung for months – and I was worried that I wouldn't be any good

anymore. But it was an amazing feeling and made me realise how far I'd come.

During treatment I'd jotted down lyrics here and there about what was happening to me. As I had to shield at home during the pandemic, I had more time on my hands, and I started to put them together to music. My new single, The Game, is the result. It's about how overcoming obstacles in life is like overcoming different levels on a game.

Because I was treated on a Teenage Cancer Trust unit I met and made friends with lots of other young people with cancer, and not all of them survived. It makes me really upset when people refer to people with cancer as having lost their battle. We have no control over what happens to us, whether we live or die. We just play the game as best we can and that is what the song is about, but really anyone going through struggles in life will be able to identify with the lyrics.

**37** 



Our corporate partners also continued to be there for young people with cancer in 2021.

Our amazing partnership with Morgan Stanley ended on a high in September with the news that it had raised over £1.4 million, smashing the original target of £1m. The money raised will help develop a brand new unit for young people at University College London Hospitals NHS Foundation Trust (UCLH). The partnership has also funded four specialist nurses and four Youth Support Coordinators for London and the South East, meaning for the first time we'll soon be able to fully support every young person with cancer in the region.

Meanwhile, two long term partners, Domino's Pizza Group and online fashion retailer MandM Direct, celebrated big milestones, having now raised £5 million and £2 million respectively to ensure that cancer doesn't stop young people from living their lives.

Our year ended on a high with the launch of our Christmas fundraising appeal in partnership with Hello! magazine, supported by our Honorary Patrons, Their Royal Highnesses Princesses Beatrice and Eugenie and Sarah, Duchess of York.

The five-week appeal included front cover coverage featuring four young people who shared their moving stories with Princesses Beatrice and Eugenie and the Duchess of York at a private meeting.

The appeal was a major profile-raising opportunity for the charity, with Hello! boasting a magazine readership of 533,000 people, 2 million Facebook followers and 15 million unique website users in the UK.

We also benefited from a Christmas charity partnership with out-of-home media company Clear Channel, which generously donated a large commitment of outdoor advertising space during December 2021 and January 2022. Going into 2022, this further boosted our brand profile and raised awareness of the voices of young people with cancer.

We'd like to thank every trust, foundation, company and individual who made a donation or

raised money for us this year, whether large or small – you are truly incredible, and we're determined to make sure your support has the biggest possible impact for young people with cancer.

During 2021 we began work on our new five-year fundraising strategy. We're focused on using analysis and insights to deepen our understanding of our supporters, so that we can give them everything they need to help realise our ambitious new goal – ensuring that young people with cancer in the UK have the best outcomes and quality of life in the world by 2040.

## ALTOGETHER UNSTOPPABLE: OUR AMAZING PARTNERS

Our Altogether Unstoppable Awards, held in December, were an opportunity to celebrate and recognise the phenomenal contribution our amazing partners made to Teenage Cancer Trust throughout 2021.

Once again members of our Youth Advisory Group helped to judge the nominations, alongside members of our Senior Leadership Team, ahead of the virtual event which was attended by our partners from around the UK.

## Altogether UNSTOPPABLE

This year's winners were:

#### SPIRITED

Winner: Valley Fest

Highly Commended:

- Aldi (Atherstone RDC)
- New Look
- Morgan Stanley IED & FID Giving Back

#### DETERMINED

Winner: Sophie Spencer from Aldi

Highly Commended: Gemma and Tom from The Highbourne Group

#### KIND

**Winner: Morgan Stanley** 

Highly Commended: Jo Harding from Aldi

#### UNITED

Winner: Domino's Pizza Group

Highly Commended: Higgs LLP

#### DIVERSE

Winner: Principality Building Society Highly Commended: Dobbies Garden Centres

#### GIFT IN KIND

Winner: Aldi Buying Team

Highly Commended: Domino's Pizza Group

CAUSE RELATED MARKETING

Winner: Dr.PAWPAW

HOT OFF THE MARK

**Winner: MTS Cleansing Services** 

#### TEENAGE CANCER TRUST LEGEND

Winner: Stuart Chappell from Parker Building Supplies

Highly Commended:

- Dave Morris from Santander
- Lauryn Baker Halsall from Sykes Cottages
- James Harper from Principality Building Society

#### SPECIAL RECOGNITION

**Winner: Highbourne Group** 

- Andertons Music
- MandM Direct

#### **OUR APPROACH TO FUNDRAISING**

This year, as with every year, we've seen incredible dedication and commitment from our supporters, and we work tirelessly to make sure their support changes the lives of young people with cancer.

We continued to focus on our Fundraising Principles to guide our work and help supporters understand exactly what to expect from us.

We work in partnership with our fundraisers, supporting them with resources and advice to make sure their fundraising is safe and legal. In 2021 this meant a particular emphasis on making sure their events were Covid secure and could be held in a way that protected everyone involved.

We also work hard with all our fundraising staff to make sure that any vulnerable supporters – in particular – are treated with respect and care, and in line with our Fundraising and Adults in Vulnerable Circumstances Policy.

We're committed to ethical fundraising and are members of the Fundraising Regulator and Chartered Institute of Fundraising, and adhere to the Fundraising Regulator Code of Fundraising Practice.

In 2021, we engaged an agency to carry out telephone fundraising on our behalf. We worked closely with the agency to build up a good understanding of our organisation to ensure this was carried out in line with our values, and closely monitored the way calls were carried out.

## THANK YOU

## We're extremely grateful to all our supporters in 2021 including:

#### **Trusts, Foundations and companies**

Accor

Amazon Smile

**Andertons Music** 

Anne Duchess of Westminster's Fund

Arnold Clark

Aldi

Bawbags

BBC Children in Need

City Plumbing Supplies

Daisychain Benevolent Trust Fund

Community Foundation Northern Ireland

Derwent

**Dignity Funeral Homes** 

**Dobbies Garden Centre** 

Domino's Pizza Group

Dr. Martens

Dr. PAWPAW

**EBM Charitable Trust** 

Elizabeth & Prince Zaiger Trust

Esti Software Ltd

**Garfield Weston Foundation** 

Goldman Sachs Gives

H G Construction Ltd

**Hodge Foundation** 

Kavli Trust

M and M Direct

Middlesborough Crematorium

Moondance Foundation

Morgan Stanley

Mrs Waterhouse Charitable Trust

New Look

Richard Mackay Charitable Trust

Royal Bank of Canada

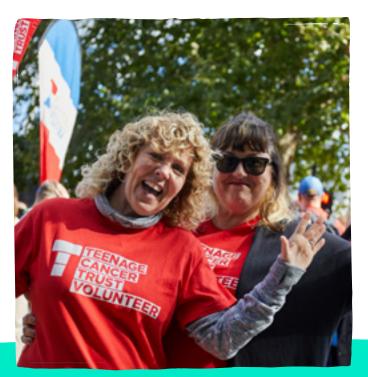
Royal Shakespeare Company

Three Ells Trust

Waterloo Foundation

Wilko

In 2021 we received 188 complaints, out of a total of 210,776 interactions with our supporters.



We are working to actively encourage wider and more open communication with our supporters and wider stakeholders. We plan to change how we record complaints in 2022, to make it easier for all parts of the organisation to log complaints and learn from what our supporters are telling us. It is likely that we will see more complaints in the future as we make it easier for people to feed back to us if there is something that isn't working.

Teenage Cancer Trust relies wholly on public donations. We receive no NHS funding or government funding. The fundraising efforts carried out by individuals and companies on our behalf are vital to ensure we're there for the young people who need us.

YOU'RE ALL LEGENDS - THANK YOU.

#### **Generous individual supporters**

Matt and Anna Bianco
The Carole and Geoffrey Lawson Foundation
Peter and Lana de Savary
The Desmond Foundation
Anthony and Tina Hene
Nicky and Philip – in loving memory of Corrine
and Alan Slavin
David Sullivan

...and thank you to every individual who has given anonymously.

#### **Founders' Circle Members**

Baroness Ros Altmann and Paul Richer Philip and Hilarie Barden Chester and Sha Barnes Terry and Rita Brady The Coffer Foundation Stanley and Rita Davis Andy and Grainne Fletcher David and Roswitha Guest Ronnie and Loretta Harris Steve and Sherry McCrystal Cathy Payne and William Davies David and Barbara Peacock Sir Robin and Lady Saxby Paul and Kate Spanswick Mike and Jessica Tomkins Martin and Maria Vella The Hon Giles Wigoder and Livy Sandler Nigel and Linda Wray

## CHALLENGE ACCEPTED

Once again, our supporters proved they're unstoppable in 2021...



4,012

amazing supporters around the UK raised a total of £3.2m through head shaves, virtual quiz nights and other challenges

16,000 people hit the floor for 3,000 push ups in November, raising £721,000

**4,900** runners each clocked up 100 miles in August, raising

£280,000



30,000 people smashed it in our February Squats Challenge, raising

£1.6m

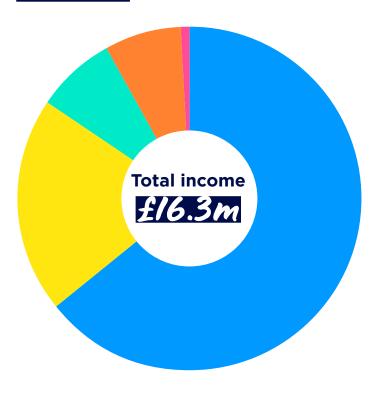
£1.4m

was raised by the amazing staff at Morgan Stanley for vital services in London and the South East



## HOW WE RAISED AND SPENT MONEY IN 2021

#### INCOME



£10.5m (64.4%)

**Donations and public fundraising** 

£3.3m (20.2%)

**Corporate partnerships** 

£1.2m (7.4%)

**Music and events** 

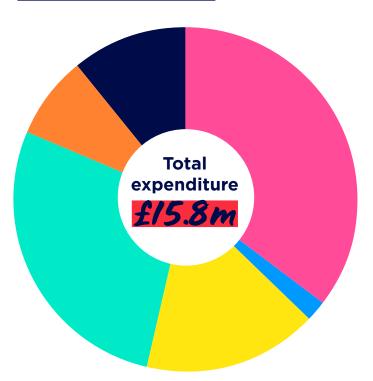
£1.2m (7.4%)

**Trusts and foundations** 

**£0./m** (0.6%)

**Coronavirus Job Retention Scheme** 

#### **EXPENDITURE**



£2.6m (16.5%)

**Before diagnosis** 

£4.4m (27.8%)

Supporting young people during treatment

£1.2m (7.6%)

Supporting young people after treatment

£1.7m (10.8%)

**Underpinning our services** 

£5.6m (35.4%)

**Fundraising** 

£0.3m (1.9%)

**Trading** 





## OUR NEW STRATEGY

We launched our two-year strategy Putting Young People First internally at the end of 2021, setting out our big goal, purpose and priorities for the future.

As we look to the future, healthcare systems and the treatment of cancer will continue to evolve and improve. It will be critical that our support from point of concern through treatment and into life post-cancer is fit for the future.

For the first time, we are setting ourselves a Big Goal: that by 2040 young people with cancer in the UK will have the best outcomes and quality of life in the world. Why? Because they

deserve nothing less. Cancer is a biological bully – young people get some of the rarest and most aggressive cancers and although survival rates have improved, they still lag behind some other European countries.

That is not acceptable, and it must change. We're stepping up to play our part and we know that the network of clinicians, experts, partners and supporters who back our work are standing fully beside us and the young people we support.

#### Our strategic objectives to 2024 are to:



Focus on equity, making our services accessible to all young people with cancer, with no-one left behind.

#### By 2024:

- We will be collecting and using data to ensure we know who we reach through our services and who we currently don't.
- We will use this data to track, understand and improve the reach and impact of our services.
- We will understand the difference societal inequity has on the experience and outcomes of young people with cancer.
- We will be using this evidence to shape our own services and advocate for improvements to the healthcare system.

#### **Because of this:**

Young people with cancer who currently receive little or no age-appropriate support outside of their standard clinical care, will have an improved experience through access to a suite of support offers from Teenage Cancer Trust.



Provide the best care and support through consistent, sustainable, high-quality facilities in NHS hospitals and specialist staff to meet young people's unique needs.

#### By 2024:

- We will continue to offer our current high-quality service provision for young people in treatment and post-treatment for cancer.
- We will have a clear plan to ensure our units are fit for the future, adaptable to changing treatments, responding to young people's emerging needs and meeting agreed quality standards.
- We will have scoped and planned our capital investment in NHS hospital units over the next five years, recognising and responding to distinct local needs.
- We will have extended our network of nurses, youth workers and other specialist teenage and young adult cancer staff, through both direct funding and adoption.
- Our frontline staff will be better supported through an enhanced professional network and deeper connections to Teenage Cancer Trust, to make maximum use of their influence and expertise.

#### **Because of this:**

Every young person with cancer will be identified by the local teenage and young adult multidisciplinary team coordinator, will have the opportunity to access specialist ageappropriate support and have their voice heard in shaping our future facilities and services.

## 3.

Tackle the isolation of cancer for young people by providing the information, professional and peer-to-peer connections they need.

#### By 2024:

- We will have a clear vision for, and be implementing, a blended service provision which is informed by young people's needs during and after treatment.
- We will be the definitive UK source of clinically accurate, age-appropriate information for young people with cancer and their family and friends.
- We will have developed and be implementing a digital strategy for our service offers
- We will have agreed our flagship post-treatment offers and piloted hybrid delivery to reach as many young people as possible.

#### **Because of this:**

Young people will know who to turn to – 24/7 – to access information and support and more will be able to benefit from our once-in-a-lifetime flagship activities including Find Your Sense of Tumour and the Ultimate Backstage Experience.



Lead the way, using our expertise, our reach, our partnerships and our platforms to amplify the voices of young people and ensure their needs are met.

#### By 2024:

- We will be driving improvements in treatment and care, based on the experiences of young people and international best practice, influencing policy where it matters most.
- We will be confidently and effectively advocating for a defined model of great treatment, care and support for all young people with cancer.
- We will be seen as the UK authority in teenage and young adult cancer, by increasing the expert clinical leadership of the organisation.
- We will have taken strides on the cultural transformation required to become an organisation that is driven by data, evidence and insight.

#### **Because of this:**

Young people with cancer will be shaping developments in treatment and care, using their experience to inform future services.

## In order to achieve our four strategic objectives, we have five enabling goals:

**Focus on need:** Use evidence and insights to ensure we continue to satisfy the needs of our customers and communities.

**Increase our relevance & influence:** Connect with young people, amplify their voices and deploy our expertise to drive positive change.

**Increase our financial confidence & sustainability:** Diversify and balance our fundraising so that our net income grows, and we are more financially confident.

**Be a great place to work:** Take an inclusive, people-centred approach to attract, develop, empower and retain our colleagues.

**Move forward together:** Agree priorities, align delivery and embrace technology to enable teams to be more efficient and effective.

#### **Equity, diversity and inclusion**

In tandem with our goal of achieving equity of access for all young people with cancer, we are determined to embed equity, diversity and inclusion throughout our organisational strategy, including our approach to our people and culture.

In 2021 we published our first Equity, Diversity and Inclusion statement, setting out how we will ensure that as an organisation we move towards an equity-based approach in everything we do.

We need a broad range of diverse voices around the table, making, informing and challenging decisions across the charity to help us better understand and meet the needs of all young people with cancer.

We recognise that to achieve this our structures, decision-making and how we work day-to-day will need to change. We are now holding ourselves accountable at all levels of the charity to embed equity, diversity and inclusion into how we think, behave and act, so we can better meet the needs of all young people with cancer and their families.





## The consolidated statement of financial activities set out on page 67 shows the financial results for Teenage Cancer Trust and its trading subsidiary.

In another challenging year in which coronavirus restrictions continued to significantly impact many of our core fundraising streams, we have nonetheless achieved some remarkable results.

Our flagship fundraising events at the Royal Albert Hall had to be cancelled for a second successive year and other areas such as corporate giving, philanthropy and music and entertainment were adversely affected against our budgeted income.

However, our fundraising teams produced some stunning results with virtual challenges and other online fundraising events, such as the February Squats Challenge, which raised £1.5m. The charity overachieved against its income target and made significant savings against budgeted expenditure. Some of these savings are down to cost efficiencies while others relate to the delivery of services – including capital expenditure - which were not possible in the context of an NHS still dealing with the acute impacts of Covid-19.

After a period of understaffing we have strengthened our finance team and are developing more robust and insightful organisational budgeting and forecasting processes. This will enable us to effectively deploy our resources in order to make the maximum positive difference for young people with cancer.

As the table below shows, despite the ongoing impact of coronavirus and our inability to run our shows at the Royal Albert Hall for a second year, the results have again been much more positive than anticipated.

## FINANCIAL BUDGET AND RESULTS IN SUMMARY

	Actual results 2021	Actual results 2020
Income	£16.3m	£15.6m
Expenditure	£15.8m	£15.0m
Net surplus	£0.6m	£0.7m
Reserves at 31 December	£16.1m	£15.5m



Actual results generated a surplus of £589,000 (2020: £665,000). Our actual income of £16.3m was some £0.7m above previous year following significant overperformances in Public and Community Fundraising, as well as Trust Income. Total expenditure was £0.8m more than previous year, reflecting the additional costs of fundraising during the year.

The trading company generated a surplus of £310,000 (2020: £318,000). This was achieved by generating income of £643,000 (2020: £679,000) and incurring costs of £333,000 (2020: £361,000). The surplus will be passed to the charity as a qualifying charitable donation.

#### Reserves

In 2020 the Board agreed that unrestricted reserves were not to fall below £10m, to provide the charity with the resources it would need to rebuild back from the pandemic.

This level of reserves was within the agreed reserves policy, but despite the immediate pressures, we were reluctant to allow reserves to fall too far, in recognition that the road back from coronavirus would be long and complex. It would

not just be a matter of building back to 2019 levels of activity, but a need to rethink ways of working, renew strategies and invest in new and ambitious ways of delivering services and raising money in a world still facing the ongoing impact of the pandemic.

All of these would need a rapid and broad adoption of digital technologies and investment in data competencies to support this expansion.

In the event, the surplus for the year added to the already robust reserves position, leaving year end reserves of £16.1m. This is an extremely positive position to be in and gives the charity real choices and opportunities to build back stronger and develop a new ambitious strategy that retains the heart of our core services alongside the best of the new digital ways of working.

For 2022 the Board have signed off a budget which will allow investment in new and diverse fundraising streams to increase the sustainability of the portfolio, as well as digital solutions and data competencies so that the charity can become a robust, resilient and impactful organisation, that will ensure the provision of the very best care for young people with cancer.

#### PRINCIPAL RISKS AND UNCERTAINTIES

The Trustees have developed a risk framework that clearly differentiates between the different types of risk that we face. These are:

- Strategic risks, which impact our ability to deliver our strategy.
- Operational risks, which are risks associated with internal operations, processes and ways of working.
- Project risks, which are associated with the delivery of individual projects.
- Event risks, linked to specific events.

The Trustees are responsible for the governance of the charity's strategic risks. These must all be understood and managed if the charity is to achieve long-term success.

### At 31 December 2021, the strategic risks and their management strategies were:

Risk	Management strategy
Data, Evidence and Impact – the risk that we do not have the skills and	Implement the new purpose-driven strategy to 2024 that has data needs embedded within it
technology to measure and evidence the impact of the work that we do	<ul><li>Continue to develop an impact and outcomes framework linked to strategy</li></ul>
	<ul> <li>Invest in a strong and skilled data team and establish data steering group</li> </ul>
	Ensure work of Research and Evidence team is aligned to data goals
Financial sustainability – the risk that each year we spend more than we raise, gradually eroding financial resilience	<ul> <li>Implement the new purpose-driven strategy to 2024 that has financial sustainability and financial confidence as a core goal</li> </ul>
	<ul> <li>As part of the Strategy to 2024, implement the diversified fundraising strategy for sustainable growth including innovation and digital development</li> </ul>
	<ul> <li>Refresh brand proposition and develop compelling case for support</li> </ul>
	<ul><li>Continue effective planning, budgeting and forecasting</li></ul>

People and skills - the risk of not having the right people, skills and resources in place to meet organisational needs

- Launch and begin to embed our new Equity, Diversity & Inclusion Strategy and significantly increase our focus on building organisational diversity and inclusion.
- Continue our focus on being a great place to work with a healthy culture where colleagues can thrive and be their whole selves.
- Ensure robust recruitment policy and processes
- Implement new HR system and online recruitment platform
- Develop and implement a reward and retention strategy

Business Continuity - the risk that the charity is unable to continue to operate effectively in the event of a major disruptive event

- Review, update and test business continuity plan and IT disaster recovery plan
- Ensure sufficient cyber-security protection
- Maintain effective crisis communications plans

Reputation - the risk of negative public opinion about the charity amongst key stakeholder audiences that has a direct negative impact on the charity's ability to achieve its goals.

- Maintain appropriate policies to ensure good governance, conduct, compliance and safeguarding
- Ensure effective incident reporting
- Renew social media policy and ensure effective monitoring
- Continue effective media relations and crisis communications process

Ukraine crisis

We have considered the impact of the crisis in the Ukraine and have not identified any additional risks. We will be monitoring the impact of the crisis in Ukraine as part of our risk management moving forwards.

For the full details of our risk policy and risk management framework see page 59. This is the end of the charity's strategic report as required by the Companies Act.

#### **OUR WORK IN SCOTLAND**

Teenage Cancer Trust is registered with the office of the Scottish Charity Regulator (OSCR) (registration number SC039757). In Scotland, we deliver specialist teenage and young adult cancer services in hospitals in Glasgow and Edinburgh as well as various regional hospitals across the country.

In March, our new unit at the Royal Hospital for Children and Young People opened (pg 20-21), providing a state-of-the-art environment for the care of young adults with cancer from Edinburgh and the surrounding areas.

In addition to our Edinburgh service, in 2021 Teenage Cancer Trust also provided specialist cancer facilities and staff in Glasgow, at the Royal Hospital for Children and The Beatson West of Scotland Cancer Centre.

The charity also has two regional fundraisers working across Scotland.



# FINANCIAL AND MANAGEMENT POLICIES

#### **RESERVES POLICY**

#### **Restricted funds**

Our policy is to spend restricted funds as soon as we can. We hold onto them until we can spend them according to our supporters' wishes, and in the rare event that's not possible, our Trustees contact the supporter to ask if their donation can be transferred to our unrestricted funds or if they would prefer it to be returned to them.

#### **Unrestricted funds**

During the year, the Trustees reviewed the reserves policy to ensure it was robust and effective and able to support the charity as it rebuilds after the coronavirus pandemic. There are many factors that need to be considered when agreeing the appropriate level of reserves, but in the end it is a matter of judgement. The risk factors that would indicate the need to maintain a significant level of reserves include:

- the charity has a limited number of income streams and very little in the way of recurring income. The reliability of income year on year is therefore quite low. Reserves may therefore be needed to fill any shortfall in budgeted income;
- the charity is planning for steady strategic growth which will require ongoing investment in new services, skills and innovation in order to succeed. Some of the funds needed for this will come from reserves;
- particularly in the wake of the pandemic and the uncertain economic outlook, the Trustees' appetite for financial risk has reduced and is currently very low, thus increasing the minimum

reserves level that they are prepared to accept; and

the demand for services is growing, particularly due to the complications caused by the pandemic and the financial constraints of the NHS. This means that the need for the NHS to find strong, purposeful partners in the charity sector has never been greater. To become such a reliable partner will take ongoing investment in areas such as impact, information governance; compliance and brand recognition. Again some of the funding for this will come from reserves.

Within this context, the Trustees have agreed that reserves are needed:

- to ensure continuity of service provision to beneficiaries if income falls below budget;
- to cover the current funding gap. Although the results for 2021 show a surplus of £589k, the budget for the year was a deficit of £3.1m. The improved result was because income far exceeded expectations and spending was further curtailed due to capital expenditure delays and the challenge of delivering on Service budgeted spend. However, service costs are expected to increase in the coming years and therefore we may need to use reserves to fund this excess of costs until income grows sufficiently. The ability to cover this shortfall ensures that beneficiaries are not impacted. However, it is accepted that this is not sustainable in the long term; and
- to invest in a variety of strategic initiatives to ensure the future of the charity. These include:
   investment in a range of new service initiatives to meet the unmet needs of young people with cancer and their families;

- **2.** diversification of fundraising streams to mitigate the risk of income falling and drive steady and sustainable growth for the future;
- **3.** investment in digital, data and technological skills and resources to ensure efficiency and that the needs of supporters and beneficiaries are met: and
- **4.** investment in core teams such as finance, technology, people, learning and development to ensure that the charity has the skills and capacity to support its strategic vision.

Based on this analysis, the Trustees agreed that the charity should hold reserves to cover the equivalent of at least six months of expenditure, but preferably between six and nine months' worth of expenditure. At 31 December 2021, reserves amounted to £16.1m. This is well within the parameters (six to nine months of expenditure) of the agreed reserves policy. However, the budget for 2022 has an excess of expenditure over income of £2.2m. If realised this will mean that reserves will fall to £13.9m by the end of the year. This equates to eight months of expenditure and remains within the agreed parameters.

During 2021 the Board agreed that the financial strategy for 2022 and beyond was to improve the long term financial viability of the charity by investing unused funds into an investment portfolio, and along with the remaining working funds this would cover the forecast of at least six months expenditure.

Within this context, the Trustees will carefully consider any business cases that require further use of these reserves, weighing up the balance between each opportunity and the potential risk involved.

#### **Investment policy**

At the end of 2021 the Board approved the financial objective of an investment portfolio to maintain the real value of assets whilst generating a stable and sustainable total return distribution. It was agreed that the investment portfolio was to be invested with a medium to long-term horizon of five years using reserves that were not intended to be spent within five years. An amount of £8m has been agreed and placed with Cazenove Capital in March 2022.

#### **Employees**

Teenage Cancer Trust operates an equity, diversity and inclusion policy and an equal opportunities policy.

Our Remuneration Committee is responsible for overseeing the charity's pay and reward structures and approving annual pay increases.

The long-term success and performance of Teenage Cancer Trust is directly linked to the talents, motivation and accomplishments of our employees, and we recognise the importance of developing people and building our capability as an organisation. We do this by recruiting great people, by building high levels of relevant skills and knowledge through our learning and talent programme and by providing a stimulating and rewarding work environment.

#### **Pensions**

The pension benefits offered by Teenage Cancer Trust consist of a defined contribution scheme into which Teenage Cancer Trust will contribute up to 5% of gross salary (dependent on employee contribution) to assist employees in reaching their target pension.

## GOVERNANCE AND MANAGEMENT

#### **GOVERNING DOCUMENT**

Teenage Cancer Trust is a company limited by guarantee and governed by its Memorandum and Articles of Association, which were last modified on 28 July 2014. It is registered as a charity with the Charity Commission and the Office of the Scottish Charity Regulator.

#### **Objective**

The objective of Teenage Cancer Trust is: 'The relief of sickness in young persons with cancer and related diseases'.

#### **Public benefit**

The principal beneficiaries of the work of Teenage Cancer Trust are the teenagers and young adults with cancer who are treated either on our specialist units within NHS hospitals or via our Nursing and Support Services. Secondary beneficiaries of the work of Teenage Cancer Trust are the families and friends of the young people with cancer. The Trustees have referred to the Charity Commission's general guidance on public benefit when reviewing the aims and objectives and planning future activities. In particular, the Trustees consider how the planned activities will contribute to the aims and objectives they have set.

#### **The Board**

The Board of Trustees is responsible for the strategic governance of the charity. In the year ending 31 December 2021, the number of Trustees serving on the Board was ten, with a further appointment approved in February 2022 (2020: eight).

The Board of Trustees meets six times a year and is responsible for setting our overall strategy. At each meeting the Board receives written reports on all aspects of our work. The Board operates

an equal opportunities recruitment policy and Trustees are required to have demonstrable experience in the areas identified by a skills audit.

New Trustees follow a similar induction process to that of all new staff. Although modified as a result of social distancing measures, all new Trustees spend time with senior members of staff and fellow Trustees, virtually visit a unit and meet funded staff. Trustees also undergo safeguarding training and generally gain an understanding of all aspects of our work. We provide ongoing training as needed, and Trustees are also required to gain a full understanding of the role's legal obligations. Trustees are initially appointed for four years.

Following this initial term all Trustees can be reappointed for a further four years – up to a maximum of three consecutive terms – by a majority decision of the other Trustees. Two of our Trustees have served more than nine years. They have been reappointed following a rigorous review of the composition of the Board which is reviewed every year.

During the year the Trustees and Senior Leadership Team used the findings from an assessment of performance against the Charity Governance Code to implement changes and improve the impact and performance of the Board. In May 2021 the Board formally agreed to adopt the Charity Governance Code to guide and support the ongoing development of the charity's governance practices.

At the end of the year, we recruited a new Trustee, Vimi Grewal-Carr, to ensure further diversity of skill and experience. Vimi will join the Board in February 2022.

The Board keeps a register of interests for Trustees, which is available to the public upon request at **hello@teenagecancertrust.org.** 

## DIRECTORS' INDEMNITIES

As permitted by the Articles of Association, the Trustees have the benefit of an indemnity which is a qualifying third part indemnity provision as defined by Section 234 of the Companies Act 2006. The indemnity was in force throughout the last financial year and is currently in force. The Company also purchased and maintained throughout the financial year Directors' and Officers' liability insurance in respect of itself and its Directors.

## GOVERNANCE STRUCTURE

The Board delegates certain areas of governance to committees. These committees bring together Trustees with relevant professional experience, who then make recommendations to the Board. The committees active in 2021 were:

- the Finance and Audit Committee, to meet with the auditors before and after the main audit and to meet monthly with the Director of Finance and Corporate Operations to consider monthly results and related matters arising.
- the Risk and Safeguarding Committee, which meets four times a year and is responsible for reviewing strategic risks and ensuring we have robust risk management and safeguarding practices in place throughout the charity. Their remit also includes reviewing incidents, complaints and the policy framework;
- the Remuneration Committee, which is responsible for overseeing our pay and reward structures and approving annual pay increases; and
- the People and Culture Committee, which is responsible for providing strategic governance on key people policies and plans, ensuring that they contribute effectively to organisational business needs and also meet the needs of our people.

#### **Chief Executive**

■ The Board delegates the running of the charity to the Chief Executive, who is responsible for delivering the agreed strategy and ensuring the charity adheres to its policies. The Chief Executive is assisted by the Senior Leadership Team, who report to her and meet weekly.

#### **Advisory groups**

Along with our staff, funded staff and Trustees, we also have several advisory groups who input into many different projects and are fundamental in shaping our work. We want to thank everyone who has supported our work in this way over the last year. These groups include:

#### **Youth Advisory Group**

Our panel of young people with first-hand experience of cancer and our services are a part of every big decision we make, from recruitment to shaping our strategy. In 2021 our Youth Advisory Group members were: Adam, Alice, Angel, Caitlin, Chloe, Chloe, Conor, Craig, Debora, Evanne, Fiza, Isaac, James, Joanna, Kira, Lisa, Molly, Natalia, Tash, Niamh, Peter, Tegan.

#### **Corporate Board**

Launched in September 2019, the Corporate Board is a group of 16 business leaders who have committed to support Teenage Cancer Trust through introductions to potential corporate partners, as well as strategic advice and expertise to ensure the team is as successful as possible.

In 2021 the Corporate Board comprised of the following members: Gary Adey (Chair), Jonathan Allan, Gareth Barker, Simon Coble, Fabian DePrey, Steph Docherty, Vimi Grewal-Carr, Paul Lockstone, Steve McCrystal, David Noyes, Shaun Pulfrey, Phil Smith, Fiona Spooner, Mike Tomkins, David Wheldon, Mark Woods.

## RISK AND SAFEGUARDING

The Risk and Safeguarding Committee comprises two Trustees. They meet four times a year with senior members of staff who represent relevant aspects of the charity's work, including the Director of Finance and Corporate Operations (who is the executive lead on risk management) and the charity's designated safeguarding lead.

#### **RISK**

The Trustees have a formal risk management process in place to assess major risks. This process:

- identifies the risks we face;
- prioritises them according to how likely they are to occur and how much impact they could have; and
- ensures, where appropriate, that adequate measures are in place to minimise their impact.

Overall responsibility for ensuring this process is carried out effectively lies with the Board of Trustees. Risk management practices, including incident reporting, are embedded throughout all operations. They form an integral part of business decisions and underpin strategic thinking. Risk management is also the main driver for the development of the policy and procedures framework, which covers all areas of operations. All projects and events are risk assessed at the planning stage, and this plays a key role in determining whether the event or project should go ahead.

Details of the most significant risks facing the charity and its subsidiary are outlined on pages 52-53 together with the associated strategies for managing each risk. Each quarter, progress against the strategy is formally measured and reviewed, and the most significant risks to our strategic goals are identified and reported to the Trustees.

#### **SAFEGUARDING**

The Trustees have overall responsibility for ensuring we have proper safeguarding procedures and policies in place to ensure the safety and protection of the children and vulnerable adults we work with. They have due regard to the guidance issued by the Charity Commission and have all read the Department of Education's guidance document, 'Safeguarding for Trustees'.

We've implemented the following safeguarding policies and procedures:

- the appointment of a Trustee with overall responsibility for safeguarding and a safeguarding lead;
- safe recruitment policies including DBS (Disclosure and Barring Service) checks for all staff;
- safeguarding training for all Trustees and staff, in line with their roles and responsibilities – repeated every two years; and
- robust risk and safeguarding assessment practices, so that individual events are always managed in a way that protects young people, staff and volunteers.

The Safeguarding Policy has been reviewed and there have been no major changes since the review last year.

# STATEMENT OF TRUSTEES' RESPONSIBILITIES

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

Company and charity law requires the Trustees to prepare financial statements for each financial year. Under company law the Trustees must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the group and parent charity and of the incoming resources and application of resources, including income and expenditure, for the year.

In preparing those financial statements the Trustees are required to:

- select suitable accounting policies and apply them consistently;
- observe the methods and principles in the Charities SORP;
- make judgements and accounting estimates that are reasonable and prudent;
- state whether applicable accounting standards have been followed, subject to any material departures disclosed and explained in the financial statements; and
- 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 and proper accounting records. These must be sufficient to show and explain the charity's transactions and disclose with reasonable accuracy at any time the financial position of the group and parent charity. The Trustees should also ensure that the financial statements comply with the Charities and Trustee Investment (Scotland) Act 2005, regulations 6 and 8 of the Charities Accounts (Scotland) Regulations 2006 (as amended) and with the requirements of the Companies Act 2006. The Trustees are also responsible for safeguarding the assets of the group and parent charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

Additionally, the Trustees are responsible for the maintenance and integrity of the corporate and financial information included on the charity's website. Legislation in the United Kingdom governing the preparation and dissemination of the financial statements and other information included in annual reports may differ from legislation in other jurisdictions.

#### **Going concern**

The charity's financial position has been outlined on page 50 of this report. The Trustees have assessed projected income to the end of June 2023 and related plans for expenditure and use of reserves.

They have considered the charity's reserves position, strategic risks, the various income streams on which the charity relies, the liquidity of its assets and hence the charity's ability to withstand a fall in income. Based on this information, the Trustees have concluded that Teenage Cancer Trust and its subsidiary The Teenage Trust (Trading) Limited have adequate resources to continue activities for the foreseeable future. Accordingly, they continue to adopt the going concern basis in the preparation of these accounts.

#### **Auditors**

BDO LLP was re-appointed as auditors in the year in accordance with the Companies Act 2006.

#### **Related parties**

None of the Trustees of the charity receives any remuneration or other benefit from their work with the charity.

#### Trustees' awareness statement

Each of the Trustees has confirmed that, so far as they are aware, there is no relevant audit information of which the charity's auditors are unaware. They have also done everything they should have done, as a Trustee, to make themselves aware of any relevant audit information and to ensure the charity's auditors are aware of it. The Report of the Trustees (incorporating the Strategic Report) was approved by the Board of Trustees on 9 June 2022 and authorised to be signed on its behalf by:

#### **Paul Spanswick**

Chair of the Board



## INDEPENDENT AUDITOR'S REPORT

#### INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS AND TRUSTEES OF TEENAGE CANCER TRUST

#### Opinion on the financial statements

In our opinion, the financial statements:

- give a true and fair view of the state of the Group's and of the Parent Charitable Company's affairs as at 31 December 2021 and of the Group's incoming resources and application of resources 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 the requirements of the Companies Act 2006, the Charities and Trustee Investment (Scotland) Act 2005 and regulations 6 and 8 of the Charities Accounts (Scotland) Regulations 2006, as amended in 2010.

We have audited the financial statements of Teenage Cancer Trust ("the Parent Charitable Company") and its subsidiary ("the Group") for the year ended 31 December 2021 which comprise the Consolidated Statement of Financial Activities, the Consolidated and Charity balance sheets, the Consolidated Statement of Cash Flows and notes to the financial statements, 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).

#### 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 Auditor's responsibilities for the audit of the financial statements section of our report. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

#### Independence

We remain independent of the Group and the Parent Charitable Company in accordance with the ethical requirements relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements.

#### Conclusions related 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 Group and the Parent Charitable Company'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.

#### Other information

The Trustees are responsible for the other information. The other information comprises the information included in the Annual Report and Accounts, other than the financial statements and our auditor's report thereon. The other information comprises: the Chairman and Chief Executive's Statement and the Report of the Trustees (including the Strategic 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 audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. 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.

#### Other Companies Act 2006 reporting

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

- the information given in the Trustees' Report, which includes the Directors' Report and the Strategic report prepared for the purposes of Company Law, for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the Strategic report and the Directors' Report, which are included in the Trustees' Report, have been prepared in accordance with applicable legal requirements.

In the light of the knowledge and understanding of the Group and the Parent Charitable Company and its environment obtained in the course of the audit, we have not identified material misstatement in the Strategic report or the Trustee's report.

We have nothing to report in respect of the following matters in relation to which the Companies Act 2006 and the Charities and Trustee Investment (Scotland) Act 2005 requires us to report to you if, in our opinion;

- proper and adequate accounting records have not been kept by the Parent Charitable Company, or returns adequate for our audit have not been received from branches not visited by us; or
- the Parent Charitable Company financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of Directors' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit.

#### **Responsibilities of Trustees**

As explained more fully in the Statement of Trustees' responsibilities, 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 being satisfied that they give a true and fair view, and for such internal control as the Trustees determines 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 Group's and the Parent Charitable Company'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 Group or the Parent Charitable Company or to cease operations, or have no realistic alternative but to do so.

#### Auditor's 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 Acts 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 auditor's 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.

Extent to which the audit was capable of detecting irregularities, including fraud

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:

- We enquired of management, and the Finance and Audit Committee, including obtaining and reviewing supporting documentation, concerning the group's policies and procedures relating to:
  - Identifying evaluating and complying with laws and regulations and whether they were aware of any instances of non-compliance;
  - o detecting and responding to the risks of fraud and whether they have knowledge of any actual, suspected or alleged fraud; and
  - o the internal controls established to mitigate risks related to fraud or non-compliance with laws and regulations.
- We obtained an understanding of the legal and regulatory frameworks that are applicable to the Company. These include, but are not limited to, compliance with the Companies Act 2006, UK GAAP, the Charities and Trustee Investment (Scotland) Act 2005, regulations 6 and 8 of the Charities Accounts (Scotland) Regulations 2006, as amended in 2010 and tax legislation.
- We evaluated management's incentives and opportunities for fraudulent manipulation of the financial statements (including the risk of override of controls), and determined that the principal risks were related to posting inappropriate journal entries to manipulate financial results and management bias in accounting estimates.

#### Audit response to risks identified

- We reviewed the financial statement disclosures and tested to supporting documentation to assess compliance with relevant laws and regulations discussed above;
- We performed analytical procedures to identify any unusual or unexpected relationships that may indicate risks of material misstatement due to fraud;
- We read minutes of meetings of those charged with governance;
- We enquired about any correspondence with HMRC and serious incident reports filed with the Charity Regulators; and
- In addressing the risk of fraud through management override of controls, we tested the appropriateness of journal entries and other adjustments; assessed whether the judgements made in making accounting estimates such as accrual for gift aid income and allocation of support costs, are indicative of a potential bias; and evaluated the business rationale of any significant transactions that are unusual or outside the normal course of business.

Our audit procedures were designed to respond to risks of material misstatement in the financial statements, recognising that the risk of not detecting a material misstatement due to fraud is higher than the risk of not detecting one resulting from error, as fraud may involve deliberate concealment by, for example, forgery, misrepresentations or through collusion. There are inherent limitations in the audit procedures performed and the further removed non-compliance with laws and regulations is from the events and transactions reflected in the financial statements, the less likely we are to become aware of it.

A further description of our responsibilities for the audit of the financial statements is located at the Financial Reporting Council's ("FRC's") website at:

https://www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditor's report.

#### Use of our report

This report is made solely to the Charitable Company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006, and to the Charitable Company's trustees, as a body, in accordance with the Charities and Trustee Investment (Scotland) Act 2005. Our audit work has been undertaken so that we might state to the Charitable Company's members and trustees those matters we are required to state to them in an auditor's 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 Charitable Company, the Charitable Company's members as a body and the Charitable Company's trustees as a body, for our audit work, for this report, or for the opinions we have formed.

Fiona Condron

Fiona Condron (Senior Statutory Auditor)
For and on behalf of BDO LLP, statutory auditor
Gatwick, UK
21 June 2022

BDO LLP is a limited liability partnership registered in England and Wales (with registered number OC305127).





#### **CONSOLIDATED STATEMENT OF FINANCIAL ACTIVITIES**

(Incorporating an income and expenditure account) For the year ended 31 December 2021

		Unrestricted	Restricted		Unrestricted	Restricted	
	Note	funds	funds	Total funds	funds	funds	Total funds
		2021	2021	2021	2020	2020	2020
		£000s	£000s	£000s	£000s	£000s	£000s
INCOME FROM:							
Donations and legacies		13,909	1,681	15,590	11,754	2,032	13,786
Income from Coronavirus Job Retention							
Scheme		58	-	58	1,130	-	1,130
Trading activities		643	-	643	679	-	679
Interest earned on cash deposits		2	2	4	31	2	33
Income from charitable activities		47	-	47	_	_	_
TOTAL INCOME	-	14,659	1,683	16,342	13,594	2,034	15,628
EVDENDITUDE	-						
EXPENDITURE							
Cost of raising funds							
Fundraising activities		5,573	-	5,573	5,058	-	5,058
Trading activities	_	333	-	333	361	-	361
Total cost of raising funds	4	5,906	-	5,906	5,419	-	5,419
Expenditure on charitable activities							
Before diagnosis	4	1,336	1,247	2,583	2,476	_	2,476
During treatment	4	4,334	81	4,415	2,333	2.071	4,404
After treatment	4	1,165	_	1,165	1,113	63	1,176
Underpinning our services	4	1,684	-	1,684	1,453	35	1,488
TOTAL EXPENDITURE	-	14,425	1,328	15,753	12,794	2,169	14,963
Not in a superference with one of the superference	-	•	•	<u> </u>		·	·
Net income/(expenditure) before other	•	004	255	500	000	(405)	005
recognised gains and losses	6	234	355	589	800	(135)	665
Net movement in funds	-	234	355	589	800	(135)	665
Total funds brought forward		14,693	847	15,540	13,893	982	14,875
	_			· 			
Total funds carried forward	_	14,927	1,202	16,129	14,693	847	15,540
	-						

All activities in the current and prior years arise from continuing operations in the current year and prior year.

All gains and losses are included above.

For the purposes of the Companies Act, net income of £589k (2020: £665k) is total income of £16,342k (2020: £15,628k) less gifts in kind of £356k (2020: £779k) minus total expenditure of £15,753k (2020: £14,963k) less gifts in kind of £356k (2020: £779k).



#### CONSOLIDATED AND CHARITY BALANCE SHEETS (Company Number: 03350311) As at 31 December 2021

	Note	Group	Group	Charity	Charity
		2021	2020	2021	2020
		£000s	£000s	£000s	£000s
Fixed assets		178	-	178	-
Tangible fixed assets	8 _	178	-	178	-
Current assets					
Stock		8	8	-	-
Debtors	10	3,488	1,934	3,864	2,526
Cash held in deposit accounts		1,045	1,043	1,045	1,043
Cash at bank and in hand		13,630	15,464	13,205	14,806
	_	18,171	18,449	18,114	18,375
Cuaditana, amagusta falling dua within ana					
Creditors: amounts falling due within one year	11	(2,220)	(2,909)	(2,166)	(2,838)
•	_		, ,		,
Net current assets		15,951	15,540	15,948	15,537
Total net assets	=	16,129	15,540	16,126	15,537
Represented by:					
Funds and reserves					
Restricted funds		1,202	847	1,202	847
Unrestricted funds		1,202	047	1,202	047
General fund		14,927	14,693	14,924	14,690
Total funds	16	16,129	15,540	16,126	15,537
	_				

Teenage Cancer Trust has taken advantage of the exemption afforded by section 408 of the Companies Act 2006 not to provide a separate Statement of Financial Activities for the charity. The results for the charity for the year were:

Total income £16,009k (2020: £15,267k); Total expenditure £15,420k (2020: £14,602k); and Overall surplus of £589k (2020: £665k).

Chair of the Trustees Paul Spanswick



#### **CONSOLIDATED STATEMENT OF CASH FLOWS**

#### For the year ended 31 December 2021

	Note	2021 £000s	2020 <b>£000s</b>
Cash flows from operating activities			
Surplus for the financial period		589	665
Investment income and bank interest		(4)	(33)
Depreciation	8	-	14
Decrease in stock		-	5
Increase in debtors	10	(1,554)	(39)
(Decrease)/Increase in creditors	11	(689)	917
Net cash (used in)/generated by operating activities		(1,658)	1,529
		<u></u>	
Cash flows from investing activities			
Interest received and investment income		4	33
Purchase of fixed assets		(178)	-
Net cash (used in)/provided by investing activities		(174)	33
Net (decrease)/ increase in cash and cash equivalents		(1,832)	1,562
Cash and cash equivalents at beginning of year		16,507	14,945
Cash and cash equivalents at end of year		14,675	16,507
Cash and cash equivalents comprise:			
Cash held in deposit accounts		1,045	1,043
Cash at bank and in hand		13,630	15,464
		14,675	16,507
			, ,



#### **1 ACCOUNTING POLICIES**

The principal accounting policies adopted in the preparation of the financial statements are summarised below and have been consistently applied throughout the year and to the preceding period.

#### a) BASIS OF PREPARATION

The financial statements have been prepared in accordance with the Statement of Recommended Practice: Accounting and Reporting by Charities (SORP 2019), for 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 and the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102), the Companies Act 2006, the Charities Accounts (Scotland) Regulations 2006 (as amended) and the Charities and Trustee Investment (Scotland) Act 2005.

The charity meets the definition of a public benefit entity as defined by FRS 102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy note(s).

#### b) GOING CONCERN

In the recovery phase from the pandemic the Trustees will continue to scrutinise financial plans supporting the emerging strategic planning for 2022 and beyond. The charity performed well in 2021 and the reserves were enhanced by £589k to £16.1m. The strength of liquidity was maintained in the year.

The Trustees approved a budget for 2022 which showed a deficit of £2.2m which would reduce reserves to £13.9m by the end of the year. This still maintains reserves within the parameters of the agreed reserves policy.

During the year Trustees will closely monitor progress against the plan and review monthly forecasts so that any concerns can be identified in good time.

Given these measures, management's forecasts for the next twelve months, and the liquidity of cash, the Trustees consider it appropriate for the financial statements to be prepared on a going concern basis and have not identified any material uncertainties relating to this.

#### c) PARENT COMPANY DISCLOSURE EXEMPTIONS

In preparing the separate financial statements of the parent company, advantage has been taken of the following disclosure exemptions available in FRS 102:

- no cash flow statement has been presented for the parent company; and
- no disclosure has been given for the aggregate remuneration of the key management personnel of the parent company
  as their remuneration is included in the totals for the group as a whole.

#### d) SCOPE OF CONSOLIDATED ACCOUNTS

The group financial statements consolidate the accounts of the charity and its subsidiary undertaking, The Teenage Trust (Trading) Limited. The transactions, assets and liabilities of this company have been consolidated with those of Teenage Cancer Trust as they are ultimately controlled by the Trustees of the charity.

#### e) INCOME

#### **Fundraising activities**

Income is recognised in the period in which Teenage Cancer Trust is entitled to receipt of that income and when the amount can be measured with reasonable accuracy.

Legacy income is recognised when entitlement to the legacy exists - this is when the executors have informed the charity that a payment which can be measured reliably may be made following the agreement of the estate's accounts. A discount is applied where there is any uncertainty of any sales achieving its expected sale price.

Gift Aid is accounted for as income in the same period as the donation to which it relates.

## REPORT AND ACCOUNTS 31 DECEMBER 2021



#### Gifts in kind

Gifts in kind over £10,000 are recognised as both income and expenditure and are included in the statement of financial activities at its fair market value that would have been charged if purchased from the donor.

#### Income from trading activities

Income from fundraising events received in advance is recognised at the time of the event. Other fundraising income is recognised when it falls due.

#### Investment income

Investment income comprises interest receivable and is recognised on an accruals basis. Interest is receivable from short-term, fixed rate deposits.

#### **Volunteers**

Teenage Cancer Trust benefits greatly from the involvement and enthusiastic support of its many volunteers. In accordance with FRS 102 and the Charities SORP, the economic contribution of general volunteers is not recognised in the accounts.

#### f) EXPENDITURE

Expenditure is accounted for on an accruals basis and is classified in the following categories:

- cost of raising funds; and
- charitable activities.

Cost of raising funds includes expenditure incurred on fundraising activities.

Charitable activities include expenditure directly relating to the delivery of the services (including staff costs) provided by the charity.

Grants to fund hospital units or other projects are recognised in the accounts at the date of commitment once approved by the Trustees and communicated to the recipient.

#### Allocation of support and governance costs

Support costs are those functions that assist the work of the charity but do not directly undertake charitable activities. Support costs include back office costs, finance, technology, personnel, payroll and governance costs which support the charity's activities. These costs have been allocated between cost of raising funds and expenditure on charitable activities based on staff time spent on each area of work.

Governance costs represent the costs of governance arrangements including setting the strategic directions of the charity. Governance costs also include external audit, legal advice for Trustees and costs associated with constitutional and statutory requirements.

#### g) INTANGIBLE FIXED ASSETS AND DEPRECIATION

All assets costing more than £1,000 and with an expected useful life exceeding one year are capitalised.

Depreciation is calculated to write off the cost less estimated residual value of all intangible fixed assets by equal instalments over their expected useful lives.

The rates generally applicable are:

HR system development 25% on costWebsite implementation 25% on cost

#### h) LEASED ASSETS

Payments in respect of operating leases are charged to the statement of financial activities on a straight line basis over the lease term.

#### i) STOCK

Stock is stated at the lower of cost and net realisable value after making due allowance for obsolete and slow moving items.

#### j) DEBTORS

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

### REPORT AND ACCOUNTS 31 DECEMBER 2021



#### k) INVESTMENTS

Investments comprise of shares in the Trading subsidiary (note 9).

#### I) CREDITORS AND PROVISIONS

Creditors and provisions are recognised where the charity has a present obligation resulting from a past event that will probably result in the transfer of funds to a third party and the amount due to settle the obligation can be measured or estimated reliably.

Creditors and provisions are normally recognised at their settlement amount after allowing for any trade discounts due.

#### m) 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.

#### n) PENSION COSTS

Contributions to employees' personal pension plans are charged to the statement of financial activities in the year in which they become payable. These costs have been allocated between cost of raising funds and expenditure on charitable activities based on staff time spent on each area of work in line with the underlying salary.

#### o) TERMINATION PAYMENTS

Termination payments are recognised as an expense in the statement of financial activities immediately.

#### p) FUND ACCOUNTING

The general fund comprises those monies which may be used towards meeting the charitable objectives of the charity at the discretion of the Trustees.

Designated funds are monies set aside out of the general fund and designated for specific projects.

Restricted funds are monies raised for, and their use restricted to, a specific purpose, or donations subject to donor imposed conditions.

#### q) SIGNIFICANT MANAGEMENT JUDGEMENTS AND KEY SOURCES OF ESTIMATION AND UNCERTAINTY

The preparation of the financial statements requires management to make judgements, estimates and assumptions that affect the application of policies and reported amounts of assets and liabilities, income and expenses. The estimates and associated assumptions are based on historical experience and various other factors that are believed to be reasonable under the circumstances, the results of which form the basis of making the judgements about carrying values of assets and liabilities that are not readily apparent from other sources. Actual results may differ from these estimates.

Estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognised in the period in which the estimate is revised and in any future periods affected.

However, management do not consider there to be any material judgements or estimation and uncertainty requiring disclosure other than judgement in relation to Going Concern, which is discussed at Note 1b.



#### NOTES TO THE ANNUAL REPORT AND CONSOLIDATED FINANCIAL STATEMENT

#### For the year ended 31 December 2021

#### 2 NET INCOME OF TRADING SUBSIDIARY

The charity has one wholly owned trading subsidiary, The Teenage Trust (Trading) Limited, which is incorporated in the United Kingdom and which organises and holds fundraising events in support of Teenage Cancer Trust. The subsidiary company passes its taxable surplus to Teenage Cancer Trust under the qualifying charitable donations.

A summary of the subsidiary company's trading results for the		2021	2020		
				£000s	£000s
Income				643	679
Expenditure			-	(333)	(361)
Surplus	Canaar Trust			310	318
Amount paid under qualifying charitable donation to Teenage Retained surplus for the period	Cancer Trust		<u>-</u>	(310)	(318)
3 GIFTS IN KIND			_	2021	2020
				£000s	£000s
Production/Editing/ Consultancy for Unseen				-	307
General Free Marketing				298	449
Shopping vouchers				25	23
Challenge tops & vests			_	33	-
			=	356	779
4 ANALYSIS OF EXPENDITURE			Support &		
	Direct	Direct staff	governance	Total	Total
	costs	costs	costs	2021	2020
	£000s	£000s	£000s	£000s	£000s
Cost of raising funds					
Fundraising activities	1,480	3,018	1,075	5,573	5,058
Trading activities	333	-	-	333	361
	1,813	3,018	1,075	5,906	5,419
Direct charitable expenditure					
Before diagnosis					
- Raising awareness	686	1,417	480	2,583	2,476
During treatment	686	1,417	480	2,583	2,476
During treatment					
<ul> <li>Building, running and maintaining new and existing units</li> </ul>	556	408	125	1,089	1,193
<ul> <li>Funding and development of NHS nursing</li> </ul>					
and support staff	3,029	57	18	3,104	2,981
- Direct support to young people during					
treatment	64	115	43	222	230
After treatment	3,649	580	186	4,415	4,404
- Support (events) for young people after					
treatment	249	687	229	1,165	1,176
	249	687	229	1,165	1,176
Underpinning our services					
- Policy	143	512	165	820	706
- Quality, impact and safeguarding	3	163	45	211	259
- Professional training and development	81	228	53	362	247
- Research, management and development of					
the specialism	103	153	35	291	276
	330	1,056	298	1,684	1,488
Total charitable expenditure	4,914	3,740	1,193	9,847	9,544
TOTAL EXPENDITURE IN THE YEAR TO 31					
DECEMBER 2021	6,727	6,758	2,268	15,753	14,963
Total expenditure in the year to 31 December 2020	6,056	6,987	1,920	14,963	



5 SUPPORT & GOVERNANCE COSTS	2021	2020
	£000s	£000s
Office costs	632	628
Finance and professional fees	89	61
Information technology	651	496
Human Resource costs including recruitment, training and welfare	193	124
Marketing	79	67
Other costs	3	17
Governance costs	621	527
	2,268	1,920
ANALYSIS OF GOVERNANCE COSTS	2021	2020
	£000s	£000s
Audit	33	30
Other direct costs	102	80
Staff costs (See note 7)	402	359
Support costs	84	58
Total for the charity	621	527
based on the amount of time staff spend working in each area.  6 NET INCOME  This is stated of the charging.	2024	2020
This is stated after charging:	2021 £000s	2020
Staff costs	7,094	£000s 7,106
Auditors' remuneration - audit	7,094	7,108
Auditors' remuneration - tax and other	6	30
Operating lease rentals	470	470
Depreciation	-	14
25,755,816.1		
7 STAFF COSTS		
	2021	2020
Staff costs including non payroll costs during the period were as follows:	£000s	£000s
Salaries and wages	5,974	6,052
Social security costs	645	618
Other pension costs & benefits	475	436
- · · · · · · · · · · · · · · · · · · ·	7,094	7,106
Temp and non payroll costs	66	240
Staff agets allegated to Cayamanaa (Sag note E)	7,160	7,346
Staff costs allocated to Governance (See note 5) Direct staff cost (See note 4)	(402) 6,758	(359) 6,987
Direct stail cost (See Hote 4)	0,750	0,907

During the year to 31 December 2021 the charity incurred termination payments amounting to £15k (2020: £257k). This amount is made up of payment in lieu of notice £8k, holiday pay £3k and termination payments of £4k which were recognised in the accounts period that the final salaries were paid.

The number of employees at 31 December 2021 was 152 (2020: 137) made up of 143 full time staff (2020: 124) and 9 part-time staff (2020: 13).

In the year to 31 December 2021, the average full time equivalent number of staff was 146 (2020: 152).

Staff numbers per function were as follows:	2021	2020
	Number	Number
Fundraising	69	72
Charitable activities - before diagnosis	31	33
Charitable activities - during treatment	12	13
Charitable activities - after treatment	15	17
Charitable activities - underpinning services	19	17
	146	152



#### 7 STAFF COSTS contd

During the year, the number of employees with remuneration within the following salary brackets (including taxable benefits, but excluding employer pension contributions), was as follows:	2021	2020
	Number	Number
£60,000-£69,999	4	4
£70,000-£79,999	2	2
£80,000-£89,999	2	1
£110,000-119,999	-	1
£120,000-129,999	1	-

Pension contributions paid to higher paid employees in the year amounted to £104k (2020: £71k).

#### Remuneration paid to key management personnel

Key management personnel comprises of the Chief Executive and Senior Management Team of six directors (2020: six directors). The total remuneration, including employer's national insurance contributions and pension contributions, paid to the Key Management Personnel in the year was £728k (2020: £664k).

The Chief Executive's salary, excluding pension contributions is 2.93 times the average salary.

8 INTANGIBLE FIXED ASSETS	Website Development	HR system development	Total
	£000s	£000s	£000s
Charity and group			
Cost at 1 January 2021	<u> </u>	-	
Additions in the year	157	21	178
Depreciation			
At 1 January 2021	-	-	-
Charge in the year	-	-	-
At 31 December 2021	<u> </u>	-	
Net book value at 31 December 2021	157	21	178
Net book value at 31 December 2020	-	-	-

#### 9 INVESTMENTS

Charity	Shares in group undertakings £
Cost or valuation At 1 January 2021 At 31 December 2021	2 2
Market value at 31 December 2021	2
Market value at 31 December 2020	2

The charity's investment in its subsidiary company represents the cost of the called up ordinary share capital of the Teenage Trust (Trading) Limited, a company registered in England and Wales. The principal activity of the company during the period was the organisation and holding of fundraising events to raise monies for Teenage Cancer Trust.

At 31 December 2021 the aggregate of the share capital and reserves of The Teenage Trust (Trading) Limited amounted to £2,591 (2020: £2,591) and the retained surplus for the year ended 31 December 2021 was £nil (2020: £nil).



10 DEBTORS				
	Group	Group	Charity	Charity
	2021	2020	2021	2020
	£000s	£000s	£000s	£000s
Trade debtors	158	29	15	6
Amount owed by subsidiary company	-	-	591	1,202
Taxation recoverable	10	-	10	-
Prepayments and other debtors	3,320	1,905	3,248	1,318
	3,488	1,934	3,864	2,526
11 CREDITORS AMOUNTS FALLING DUE WITHIN ONE YEAR				
	Group	Group	Charity	Charity
	2021	2020	2021	2020
	£000s	£000s	£000s	£000s
Trade creditors	510	755	507	755
Social security costs and other taxes	195	192	167	165
Grants payable (see note 13)	-	73	-	73
Other creditors	51	81	51	71
Accruals and deferred income	1,464	1,808	1,441	1,774
	2,220	2,909	2,166	2,838
12 DEFERRED INCOME				
	Group	Group	Charity	Charity
	2021	2020	2021	2020
	£000s	£000s	£000s	£000s
Balance as at 1 January 2021	474	154	460	138
Amount released to income earned from charitable				
activities	(380)	(46)	(366)	(33)
Amount deferred in the year	` 43 <sup>°</sup>	366	42	355
Balance as at 31 December 2021	137	474	136	460

Deferred income comprises income received in respect of events taking place after 31 December 2021.

#### 13 GRANT COMMITMENTS

As at 31 December 2021 the charity had entered into the following funding commitments:	2021	2020
Charity and Group	£000s	£000s
As at 1 January 2021	73	367
New in the year	-	-
Payments in the year	(73)	(294)
As at 31 December 2021		73
Disclosed as: Falling due within one year		73



#### 14 ANALYSIS OF NET ASSETS BETWEEN FUNDS

	General	Restricted funds	Total 2020
As at 31 December 2021	£000s	£000s	£000s
Funds are represented by:			
Tangible fixed assets	178	-	178
Current assets	16,969	1,202	18,171
Creditors: amounts falling due within one year	(2,220)	-	(2,220)
Total net assets	14,927	1,202	16,129
	General	Restricted funds	Total 2020
As at 31 December 2020	£000s	£000s	£000s
Funds are represented by:			
Tangible fixed assets	-	-	-
Current assets	17,602	847	18,449
Creditors: amounts falling due within one year	(2,909)	-	(2,909)
Total net assets	14,693	847	15,540

#### 15 ANALYSIS OF CHANGES IN NET FUNDS

	As at 1 January 2021	Cashflows	As at 31 December 2021
	£000s	£000s	£000s
Cash and cash equivalents	16,507	(1,832)	14,675

#### 16 FUND MOVEMENTS

	As at 1 January 2021	Income	Expenditure	As at 31 December 2021
Current year	£000s	£000s	£000s	£000s
General fund	14,693	14,659	(14,425)	14,927
Total consolidated unrestricted funds	14,693	14,659	(14,425)	14,927
Restricted funds  Morgan Stanley supporting front line services in London				
and South East	440	219	(279)	380
Outreach Nursing in Wales  Non disclosed donor supporting front line services in	101	33	-	134
Southampton and the Channel Islands	57	404	(112)	349
Funds with income and expenditure less than £100k	249	1,027	(937)	339
Total consolidated restricted funds	847	1,683	(1,328)	1,202
Total funds	15,540	16,342	(15,753)	16,129

Restricted funds come from various donors and are allocated to the unit, area of our work or region in which the donor has requested they are spent. Restricted funds are expended at the earliest possible opportunity. 65% of the restricted funds at the year end are expected to be expended within the following year.



16

#### NOTES TO THE ANNUAL REPORT AND CONSOLIDATED FINANCIAL STATEMENT

#### For the year ended 31 December 2021

6 FUND MOVEMENTS contd	As at 1 January 2020	Income	Expenditure	As at 31 December 2020
Previous year	£000s	£000s	£000s	£000s
General fund	13,893	13,594	(12,794)	14,693
Total consolidated unrestricted funds	13,893	13,594	(12,794)	14,693
Restricted funds  Morgan Stanley supporting front line services in London and South East  Non disclosed donor supporting front line services in	529	211	(300)	440
Southampton and the Channel Islands	139	-	(82)	57
Children with Cancer UK supporting front line services nationally through early stages of the pandemic YSC Activities in North West Outreach Nursing in Wales	:	1,001 103 101	(1,001) (70)	- 33 101
Funds with income and expenditure less than £100k	314	618	(716)	216
Total consolidated restricted funds	982	2,034	(2,169)	847
Total funds	14,875	15,628	(14,963)	15,540

#### 17 OPERATING LEASE COMMITMENTS

At 31 December 2021, the charity and group had the following total future minimum lease payment commitments under non-cancellable operating leases:

	2021	2021	2020	2020
	Land and buildings £000s	Other £000s	Land and buildings £000s	Other £000s
Operating lease payments due:				
Within less than one year	511	3	511	4
Within one to two years	375	-	511	1
Within two to five years	-	-	375	-

#### 18 LIABILITY OF MEMBERS

The charity is constituted as a company limited by guarantee. In the event of the charity being wound up members, being the number of Trustees at the time, are required to contribute an amount not exceeding £1.

#### 19 TAXATION

Teenage Cancer Trust is a charity within the meaning of Para 1 Schedule 6 Finance Act 2010. Accordingly the company is potentially exempt from taxation in respect of income or capital gains within categories covered by Chapter 3 of Part 11 of the Corporation Tax Act 2010 or Section 256 of the Taxation of Chargeable Gains Act 1992, to the extent that such income or gains are applied exclusively to charitable purposes.

The subsidiary company makes qualifying donations of all taxable profit to The Teenage Cancer Trust. No corporation tax liability on the subsidiary arises in the accounts.

No tax charge arose in the period (2020: £nil).

#### **20 RELATED PARTY TRANSACTIONS**

No Trustee received any remuneration for their services during the period (2020: £nil).

No Trustee expenses were reimbursed during the period (2020: £nil).

No Trustee or any party connected with a trustee had any beneficial interest in any contract with the charity or its subsidiary during the period.

During the period, The Teenage Trust (Trading) Limited transferred its taxable profit of £310k (2020: £318k) to the charity under qualifying charitable donations and paid the charity a management charge of £161k (2020: £175k). There were no other transactions between the parent company and the subsidiary. Further, The Teenage Trust (Trading) Limited received £58k (2020: £1,130k) in respect of payments under the Coronavirus Job Retention Scheme on behalf of the charity. These are included in the intercompany halance.

As at 31 December 2021, The Teenage Trust (Trading) Limited owed the charity £591k (2020: £1,202k) (note 10).



#### **LEGAL AND ADMINISTRATIVE DETAILS**

#### **Teenage Cancer Trust**

Company registration number: 03350311; Charity registration number: 1062559;

Scottish Charity registration number: SC039757.

Registered Office: 3rd Floor, 93 Newman Street, London, W1T 3EZ

#### Constitution

Teenage Cancer Trust, 'the charity', is constituted as a company limited by guarantee and is registered for charitable purposes with the Charity Commission and the Office of the Scottish Charity Regulator (OSCR). The charity's governing document is the Memorandum and Articles of Association.

#### **Chair of Trustees**

Paul Spanswick

#### **Board of Trustees**

Vimi Grewal-Carr (appointed 10 February 2022)

Ronald Harris

Caren Hindmarsh

**Andrew Hughes** 

Sue Morgan (appointed 4 May 2021)

Richard Rosenberg

Jeremy Seigal

Varda Shine

Jeremy Shute

Richard Waterworth (appointed 11 February 2021)

#### **Chief Executive**

Kate Collins

#### **Senior Leadership Team**

Paul Brown Director of Marketing & Communications (resigned 5 May 2022)

David Crosby Interim Director of Services & Impact (resigned 31 July 2021)

Jill Long Director of Finance & Corporate Operations

Paul McKenzie Director of Fundraising

Louise Soanes Chief Nurse

Karen Turnbull Director of People & Culture

Tracy Webb Director of Services & Impact (appointed 19 July 2021)

#### **Bankers**

Barclays Bank plc, 21 Hanover Square, London W1S 1JW

The Royal Bank of Scotland plc, Commercial Banking, Charing Cross Commercial Centre, 3rd Floor, Cavell House, 2a Charing Cross Road, London WC2H 0NN

#### **Auditors**

BDO LLP, 2 City Place, Beehive Ring Road, Gatwick, West Sussex, RH6 0PA

#### **Solicitors**

IBB Solicitors, Capital Court, 30 Windsor Street, Uxbridge, UB8 1AB







