

National Association for Colitis and Crohn's Disease

Annual Report and Accounts

**Year ending
31st December 2002**



**NACC, 4 Beaumont House, Sutton Road,
St Albans, Herts, AL1 5HH.**

Registered Charity No 282732

THE TRUSTEES' REPORT

Constitution	1
Objects	1
Policies	1
Review of activities	2
Financial results	7
Reserves	9
Cost of generating funds	9
Investments and property	9
NACC Merchandise Ltd	10
Risk assessment	10
Outlook for 2003	10
Trustees, Officers and Advisers	12

This report and the attached statement of accounts comply with current statutory requirements and the Constitution of NACC and are in the format required by the Charity Commissioners - the Statement of Recommended Practice (SORP 2000) – and charity law.

Constitution

The National Association for Colitis and Crohn's Disease (NACC) is a charitable, unincorporated association registered under charity number 282732.

NACC is governed by a revised constitution adopted at the annual general meeting held on 15th April 2000. The constitution provides for a Council of Trustees consisting of four executive honorary officers plus not less than three and not more than eight ordinary members, elected by the annual general meetings of members. The Trustees have power to co-opt not more than six Advisers as non-voting members of the Council and to appoint a number of committees. A full list of Trustees is given at the end of this Report.

The Trustees are responsible for determining the policy and budget of NACC. The staff led by the Director report to the Trustees. They are responsible for advising the Trustees and carrying through the policy and budget determined by the Trustees.

Objects

NACC's objects, as set out in its constitution, are:

- the relief of those suffering from Ulcerative Colitis, Crohn's Disease or related inflammatory bowel diseases (together generally referred to as IBD) including the support of those who care for them;
- the promotion of the welfare of those suffering from IBD;
- the advancement of education and research into the causes, prevention, treatment and cure of Inflammatory Bowel Disease (IBD) and improvements in the management of the condition, and the publication of the results of such research.

Policies

In relation to the relief of suffering of people who have IBD and the support of those who care for them, NACC's policy is to:

- publish information in the form of booklets, information sheets, quarterly newsletters, videos and through a web-site;
- respond to individual enquiries for information;

- provide information and support relating to Disability Benefits;
- offer support over the telephone through the 'NACC-in-Contact' scheme;
- maintain volunteer-run groups which provide educational and support meetings, local newsletters and a local NACC presence;
- provide a support network for families with children and for young people who have IBD;
- offer individual grants to people who have financial needs arising from their IBD;
- raise funds to support these activities.

In relation to the promotion of the welfare of people who have IBD, NACC's policy is to provide, develop or encourage:

- membership which is open to patients, their families and friends, health professionals and anyone interested in IBD;
- a 'Can't Wait' card which can be shown to retailers when asking for urgent use of private toilet facilities where no public facilities are available;
- awareness of the value of specialist counselling for people with IBD within NHS services;
- improved awareness and understanding of IBD among the general public through media publicity and the wide dissemination of information about IBD;
- effective representation of the needs and views of people who have IBD within the National Health Service, to public authorities and to relevant commercial and voluntary organisations;
- a partnership approach to working with the health professionals involved with IBD;
- good working relationships with other organisations relevant to IBD.

In relation to the advancement of education and research, NACC's policy is to:

- raise funds to provide a minimum of £250,000 annually for research into the medical, social and psychological aspects of IBD;
- make awards for research projects through a peer-review process;
- set aside the full amount of funds required for a project at the time of the award to ensure that there is no financial barrier to its completion;
- ensure the publication of the results of research projects to professional and lay audiences.

Review of Activities in 2002

Activities relating to the relief of suffering of people who have IBD and the support of those who care for them:

Support and information

- ◇ The NACC Information Service is staffed by two part-time Information Officers, each working 24 hours per week. The telephone service is provided on an 0845 (local call rate) number and is available five days per week, from 10.00 am to 1.00 pm. Over the year the Information Staff responded to about 6,000 enquiries by telephone, letter or email.
- ◇ The NACC-in-Contact supportive-listening service is provided by 70 trained volunteers from their home telephones. Their numbers are publicised through a national list and local publicity. 30 of these volunteers also worked on the NACC-in-Contact Support Line through the year, which was available on an 0845 number on Monday, Tuesday and Wednesday evenings each week. 3 or 4 calls were taken on most evenings.
- ◇ The NACC web-site recorded a total of 150,372 user sessions through the year, an increase of 26% on 2001.
- ◇ A new booklet on Surgery for Crohn's Disease will be published early in 2003.

- ◇ The NACC newsletter was published quarterly, using a professional freelance editor working within guidance set by the Publications Committee. The Medical Editor for 2002 was Professor Subrata Ghosh.
- ◇ 23 Information Sheets are available by post and on the NACC Website.

Welfare Fund

- ◇ 143 individual grants were made to people experiencing financial difficulty as a result of their IBD (2001: 110). Most grants were for washing machines, bedding, clothing or recuperative holidays. Applicants must provide supporting evidence of their diagnosis of IBD from a doctor or nurse, of their need for assistance from a social worker or similar professional and must complete a statement of family income and expenses. Applications are considered in confidence by the Welfare Committee. Grants do not exceed £300 and applicants can receive no more than three grants in any five-year period.
- ◇ A special Young Persons' Assistance Fund exists to assist with vocational educational needs arising from IBD.
- ◇ The Disability Benefits Project, which originated through a Community Fund (National Lottery Charities' Board) Grant, was continued through 2002 although the three-year grant ended in June 2001. The aim of the project is to develop information and support which will help people who have IBD to understand and apply for certain Disability Benefits. The main focus of the Project is Disability Living Allowance. The NACC Guide to applying for DLA was first published in 2000 and has been updated when necessary during the year. Many copies have been distributed directly to patients or through health professionals and advice agencies. The Guide gives detailed information for people with IBD and is supported by the DLA Support Line. This service is provided each Tuesday evening by 12 selected and trained volunteers and about 500 callers were helped in 2002. A second group of volunteers received training during the year.

NACC Groups

- ◇ The Association maintained 65-70 active Groups covering most parts of the United Kingdom and providing invaluable opportunities for patients and their families to find out more about IBD and to meet each other informally.
- ◇ The Groups continued to increase the profile of the Association through local publicity and events. They raised significant funds for national activities, particularly for research, but also helped enhance local hospital services for IBD. Contributions to local hospitals have usually been to facilitate a new treatment or service, and many of the Groups have provided financial support for nurses to attend recognised IBD training courses.
- ◇ NACC Groups come together for discussion and briefings twice yearly in the Group Forum, and in some parts of the country there are also once or twice-yearly opportunities to meet at regional level. These meetings provide useful opportunities for exchange of information and the development of mutually supportive links between active volunteers.
- ◇ The effectiveness of Groups has often depended on the commitment of relatively few long-serving volunteers, many of whom have IBD themselves. Identifying and developing sufficient new volunteers to maintain continuity can prove difficult and a number of Groups have ceased to function when existing committee volunteers decided to retire.
- ◇ NACC now has a full-time Group Development Officer, first appointed in 2001, and she has provided ongoing support for existing groups as well as helping new ones get started. 2002 saw the first national Induction Day for new Group volunteers and a programme of training is being established to help local volunteers develop their Groups. Experienced Group

members have been encouraged to take on the role of volunteer Group Support Workers and this will begin after their training day early in 2003.

- ◇ A second Group Working Party met through the summer of 2002 and produced ideas for new opportunities for Group and membership involvement. This Report, 'New Opportunities, More Participation', was put to the NACC Groups for comment and was then approved by the Trustees in early 2003.

Families with children who have IBD

- ◇ NACC has received increasing requests from parents for more information and recognition of their difficulties. The 'Smilie's People' Group originated amongst families in Sheffield and has subsequently broadened to include families from all over the United Kingdom. The Group produces a newsletter and arranges family meetings every few months. Some families travel long distances to attend and any can link to 'Smilie's People' through the Group's newsletter and website if they wish. This year a very successful residential 'family activity' weekend was also arranged.
- ◇ NACC's information sheet giving guidance to teachers on how to help children at school who have IBD continued to be available on request and via the website.
- ◇ A booklet is being prepared to help parents in supporting a child who has IBD.

Young people with IBD

- ◇ Further attempts were made to form a second Young Adults Group to cover Central Scotland. The Group would be modelled on the successful NACC London Young Adults Group.
- ◇ An Information Sheet for Students is available on the NACC website.

Activities relating to the promotion of the welfare of people who have IBD:

Membership

- ◇ Membership remained at a very similar level to 2001. The figure at the close of the year was 29,770 (2001: 29,873). The number of new members joining during the year was lower at 3,891 (2001: 4,491) and the proportion ceasing membership was 13.4% (2001: 15.8%). Of those who were members on the 31st December 2002, just over half had joined in connection with Crohn's disease and slightly less than half in connection with Colitis. A reduced subscription is available on request to anyone who cannot afford the normal subscription because they are on a low income.
- ◇ New members were each provided with a pack of information booklets and all members received their annually-renewed 'Can't Wait' card, quarterly newsletters and the opportunity to be in touch with a NACC Group if they wished.

Increasing awareness

- ◇ NACC employed a part-time Media Agency (Healthcare Solutions) through the first half of 2002 to gain more recognition and awareness of IBD through the lay media.
- ◇ Colitis and Crohn's Week in 2002 focused on IBD Research. NACC launched a new fundraising appeal called *Step by Step towards a Cure* and published a Review of NACC-funded Research in IBD. NACC Groups also actively contacted the regional and local media

and a significant amount of media coverage was obtained. There was also a very successful local radio day reaching audiences of over 3 million people.

- ◇ NACC also linked with the ABPI to launch the booklet '*Target Crohn's and Colitis*' which provided an overview and update on pharmaceutical developments in the treatment of IBD. A successful launch meeting was held attended by journalists, pharmaceutical representatives, NACC members and some key contacts from the voluntary sector and politics.

Representation

- ◇ No further national work was possible this year on publicising the 'Can't Wait' Card scheme to interested retailers. Several NACC Groups have managed to emulate the Peterborough Group by setting up an arrangement with their local police whereby NACC members could park for short periods, without fear of a parking ticket, if they needed to use public toilets in a hurry.
- ◇ NACC was invited to provide evidence to the National Institute for Clinical Excellence (NICE) in connection with their appraisal of infliximab (Remicade). A detailed survey of members' experiences was undertaken and the findings submitted to support the view that infliximab should be available within the NHS where the patient and physician felt it was the appropriate treatment. NACC representatives also attended the Appraisal Meeting and then submitted further comment in response to the Provisional Appraisal Determination. This helped to ensure a positive recommendation from NICE.
- ◇ NACC Medical Advisers undertook a literature review to update NACC's information on mortality and morbidity from IBD. This information will be supplied to insurance companies to ensure they are using current data in their assessments.

Links with health professionals

- ◇ NACC arranged display stands at the British Society of Gastroenterology Meeting in Glasgow and at the conference of the Royal College of Nursing Gastroenterology Group. NACC has a representative on the IBD Section Committee of the BSG and continues to have close liaison with the developing group of specialist IBD nurses.
- ◇ The number of gastroenterologists and surgeons formally linked to NACC as Medical Advisers is close to 100. Each NACC Group has at least one appointed Medical Adviser.

Links with IBD and voluntary sector organisations

- ◇ NACC has continued to be closely involved with EFCCA - the European Federation of Crohn's and Colitis Associations - and regularly exchanges information with other overseas IBD organisations. Links to these were included in the NACC web-site and NACC information is regularly being reproduced overseas in newsletters and as translated booklets.
- ◇ NACC has maintained communication with other IBD patients' organisations in the UK, particularly the Crohn's in Childhood Research Appeal (CICRA) and The Ileostomy and Pouch Association (*ia*).
- ◇ Membership or affiliation was also maintained with the Long-term Medical Conditions Alliance, the Association of Medical Research Charities, the Continence Foundation, RADAR and the Disability Alliance.

Activities relating to the advancement of education and research:

Research

- ◇ Grants are made following nationally-publicised advertisements. Applications are considered by members of either the Medical or Social & Psychological Research Committees, comprising academic and medical specialists as well as lay NACC representatives. External specialist referees are asked to comment confidentially on applications. Grants are made for periods of up to three years, with reports normally required at annual intervals. Funds are set aside for the total cost of the project in the year of award.
- ◇ The costs of administering the research awards are kept to a minimum and are included in the Grant support costs shown on page 3 of the Accounts. In 2002 the administration costs of the NACC Research Awards were 6.6 % of grants expenditure.
- ◇ £120,000 was set aside as a separate fund for a special research project entitled the Patient-Professional Partnership Project., which will look at the views of patients and health professionals on what improvements in health services would make most difference to the care of IBD patients. Unfortunately an application to the Department of Health to fund a Project Coordinator was not successful and therefore it was not possible to begin the project in 2002.
- ◇ 30 applications were received for the annual peer-reviewed Medical Research Awards. Six grants were awarded in March 2002 totalling £241,756.
- ◇ The Social and Psychological Research Awards Committee made three awards totalling £157,985. The awards covered IBD in Adolescence using Life Stories, the Integration of Patients' Concerns into Treatment and Managing IBD at work.
- ◇ NACC received a Community Fund (previously National Lottery Charities' Board) Award in 2000 to fund research at Newcastle University into 'The effects of patient self-management on the symptoms of ulcerative colitis'. Work on this grant is proceeding satisfactorily.

Fundraising activities:

- ◇ NACC's Assistant Director worked half-time on fundraising throughout 2002 and it was agreed that he would work three days per week in 2003 and focus solely on fundraising.
- ◇ A 'Caring for Colitis and Crohn's' Appeal document was prepared and sent to many trusts, companies and to members. A total of £71,000 was raised, but the appeal also had a significant value in raising members' awareness of these parts of NACC's work.
- ◇ Over £120,000 was claimed during the year under Gift Aid as a result of a determined drive to inform members of the scheme. Over half of the NACC membership have now signed ongoing Gift Aid declarations and this is contributing about £50,000 annually to NACC's income.
- ◇ Income from the NACC affinity Credit Card, which is publicised with support from Sir Steven Redgrave, the Olympic Oarsman, provided almost £5,000 to the NACC Research Fund.
- ◇ Support was received for national and local NACC activities from the majority of the pharmaceutical companies involved in IBD. In most cases this represented reimbursement of the costs of meetings or printing of publications.
- ◇ NACC members' subscriptions and donations, together with Group fund-raising provided 59% of the Association's income in 2002.
- ◇ Legacy income in 2002 was £66,090, the majority of which was for IBD Research.

Contribution of volunteers:

- ◇ NACC encourages the active involvement of members as volunteers in all of its activities. At Group level several hundred members undertake support, publicity and fundraising as well as the necessary organisation for a voluntary network of 65-70 Groups throughout the United Kingdom.
- ◇ NACC is committed to providing some national services through volunteers, notably NACC-in-Contact and the Disability Living Allowance Support Line. These volunteers, about 85, have undergone selection and training for their roles, work to defined policies and procedures and receive regular support. NACC has developed an innovative use of the Public Service Telephone Network using 0845 technology to present a national service number whilst enabling volunteers to provide the service from their own homes.
- ◇ An increasing number of volunteers assist NACC through participation in managing and advisory committees, and in ad hoc working groups. Wherever practicable, the Trustees advertise these opportunities in the NACC newsletter and invite members to apply with a CV. Candidates are then invited for interview before appointment to a committee. This process has enabled the Association to benefit more effectively from the pool of knowledge and expertise that exists within the membership.
- ◇ Over 50 members also help directly by offering to tell their stories to the media to assist in raising awareness and understanding of IBD among the public. These members are recruited through the NACC newsletter, using a questionnaire that enables them to outline their 'story' and set limits on the types of media that they are willing to participate in.
- ◇ Many members also give generously of their time to respond to questionnaires which assist IBD research projects, the planning of NACC services and, notably in 2002, the preparation of NACC's evidence to the National Institute of Clinical Excellence relating to their appraisal of infliximab.

Financial results

The accounts for 2002 are in the format required by the Charity Commissioners – the Statement of Recommended Practice (SORP 2000). This calls for the use of certain terms that require clarification:

Restricted funds – refer to income that has been specified for a particular purpose by the donor, e.g. NACC's Research and Welfare Funds;

Unrestricted funds – refer to donations, grants or other income that has not been specified for a particular purpose by the donor;

Designated funds – refer to unrestricted income that the Trustees have decided to allocate for specific purposes; such funds may subsequently be reallocated by the Trustees.

The figures in the following paragraphs are taken from the Consolidated Statement of Financial Activities ('the SOFA') and from the Notes to the accounts.

Overall position

The overall financial result for the year is shown in the SOFA on page 3 of the accounts. This reports the total income, expenditure and resources relating to all aspects of NACC's activities in the year: including the work of the charity at the national level, of its Groups at the local level and the contribution from its trading company, NACC Merchandise Ltd.

In 2002 there was an overall deficit of £15,667 (2001 deficit: £861), which includes a further unrealised loss of £97,339 in the value of investments due to the fall in the stock market.

Restricted Funds

The figures discussed in the following paragraphs are drawn from Notes 8, 15 and 23 to the accounts.

Research Fund

The national Research Fund received £328,123 in donations and investment income; in addition NACC Groups transferred a further £121,891 from their fundraising. The Fund's total income was therefore £450,014 and the total for Resources expended was £473,419, producing a deficit of £23,405 for the year (2001: £76,412 surplus).

Resources expended include £389,802 grant expenditure, £25,758 grant support costs and £57,859 unrealised loss on investments attributable to the Research Fund. The costs of administering the research grants amounted to 6.6% of grant expenditure.

The sum of £490,783 was carried forward for distribution in 2003.

Welfare Fund

NACC received £24,479 in donations and investment income for Welfare and NACC Groups transferred a further £6,225 from their funds. The Fund's total income was therefore £30,704. Grants awarded and support costs mounted to £36,624, producing an overall deficit of £5,920 for the year (2001: £1,280 surplus).

£53,528 was carried forward to 2003. The costs of administering the welfare grants amounted to 5.8% of grant expenditure.

National projects

The 'Self-management' research project is being undertaken within the University of Newcastle and the Northumbria Healthcare Trust. It is funded through a Community Fund grant which is being managed by NACC.

Other project 'funds' relate to the receipt and application of specific restricted grants or donations.

Unrestricted and designated funds

The figures discussed in the following paragraphs are drawn from the SOFA and Notes 15 and 22 to the accounts.

Designated funds have been created to hold money set aside by the Trustees for particular purposes. These are to support projects or developments not included within the Association's normal annual budget, to cover any potential liabilities arising from the office lease, to meet the annual depreciation costs of the capital expenditure on premises and equipment, and to hold unrestricted legacy funds for future allocation to specific projects.

The Trustees' policy is to maintain a clear distinction between ongoing expenditure, which they aim to cover from dependable sources of income, and 'one-off' projects or new developments, which are funded from special fundraising or from legacy income that may vary unpredictably from year to year.

Total unrestricted income from national and Group activities was £812,730 (2001: £727,407). Expenditure was £718,485 resulting in an operating surplus of £94,245 overall. There were net

transfers of £57,895 out of Unrestricted funds, mainly Group unrestricted income transferred to the national Research and Welfare Funds, reducing the surplus to £36,350.

There was an additional charge of £39,480 in respect of the unrealised loss on investments attributable to the Unrestricted funds, producing a net deficit of £3,130 on Unrestricted funds across all activities (*2001: £135,341 surplus*).

NACC Groups

There were accounts from over 70 Groups, with three outstanding. In aggregate, their accounts show total income raised as £273,714, local expenditure amounting to £88,413 and transfers to National Funds totalling £171,291. Group transfers to National Funds represented 62.6% of their total income.

Reserves

Unrestricted Funds

The Trustees' current policy is to aim to build up uncommitted reserves in the national General Reserve Fund to a level equivalent to six months' normal running costs. This is in order to safeguard and underwrite NACC's continuing activities in the event of a temporary reduction in income. At the year-end, free reserves were only £147,810, representing just under 3 months of current General Fund expenditure and well below the target figure.

Restricted Funds.

These funds have been given for specific aspects of NACC's work and cannot be utilised to respond to a shortfall in NACC's General Income. The reserves of the Welfare Fund equate to 1.5 times current annual expenditure on individual grants due to a significant legacy received some years ago. The funds held in the Research Fund will enable NACC to make further awards in 2003/4.

Cost of generating funds.

The revised SORP format identifies the Cost of generating funds separately and this is being seen as one indicator of a charity's efficiency. For NACC, these costs amounted to £134,386 which, as a percentage of total incoming resources to all funds, is 9.7% (*2001: 8.1%*).

Investments and property

The Trustees have power to invest and deal with NACC's funds. Some years ago they agreed a policy to maximise the return on those funds and, in order to achieve this, to invest long-term funds in two Charities Aid Foundation unit trusts, one geared towards income and the other geared towards capital growth. The Trustees monitor the income from these investments quarterly and their valuations half-yearly.

The income from the investments has been satisfactory, producing a return of approximately 4.8% in the year. However, in line with stock-market investments world-wide, over the last twelve months the value of the equity-based investments has fallen considerably, producing an unrealised loss of £97,339, as shown in the SOFA. The Trustees do not foresee a need to realise these investments in the near future and are confident that the unrealised loss will be recovered once the stock market itself recovers.

NACC has a 15-year lease on its office accommodation in St Albans, which is now held in the name of NACC Nominees Ltd. The Directors of the company are the NACC Trustees.

NACC Merchandise Ltd

NACC Merchandise Ltd recorded a net profit of £3,338 in the year (2001: £4,438 loss). The main activity of the company continues to be the sale of NACC Christmas Cards to members through mail order. This was the most successful year for this scheme so far. In addition, the company received £12,964 donations for NACC given with Christmas Card orders which was passed direct to the charity.

Risk assessment

The Council of Trustees, with input from the Director and staff, has conducted a review of the risks to which NACC is exposed and, in particular, the Trustees considered:

- the type of risks the charity faces;
 - the level of risks which they regard as acceptable;
 - the likelihood of the risks concerned materialising;
 - NACC's ability to reduce the incidence and impact of risks that have been identified;
- and
- the costs of operating particular controls relative to the benefit obtained.

Following this review, the Trustees have introduced a formal risk management process to assess business risks and implement risk management strategies. NACC's Committees and management have been made aware of the need to communicate quickly to the Trustees any significant new or increased risks as and when they arise together with proposals as to how the Trustees can respond to them.

Further, it will be the responsibility of the Committees and management, when proposing new projects, to consider the risks associated therewith and to conduct at least annual reviews of the areas for which they are responsible.

Outlook for 2003

The Trustees have given priority over recent years to the implementation of national services for people with IBD and to the development of the charity's Groups. The Trustees recognise that a higher level of income will be needed to help sustain these activities and to enable NACC to develop other important areas of work. NACC's Assistant Director will now be working solely on fundraising from January 2003.

Objectives agreed by the Trustees for 2003 are:

1. Further improvements to our Information Service and to our Booklets and Information Sheets.
2. Extending the availability of the NACC-in-Contact Service.
3. Starting to implement the plan for Membership and Group Development
4. Adding to the NACC website facilities to support proposed membership and volunteer developments.
5. Increasing support for the NACC Can't Wait Card and Parking Card schemes.
6. Publishing the report of the NACC Review of MAP as a possible cause of Crohn's Disease.
7. Developing fundraising across a variety of income sources in support of NACC's Services.
8. Holding a Trustee Planning Day to begin development of a Strategic Plan for NACC for 3-5 years ahead.

Acknowledgements

The Trustees would like once again to record their thanks and appreciation to all those who continue to make NACC's work possible - the volunteers in the NACC Groups, medical advisers and, not least, Richard Driscoll and his staff team at St Albans.

Approved by the Trustees at a Council meeting and authorised to be signed by the Chairman on their behalf.



Bradley Brown
Chairman
3rd April 2003

The Trustees wish to acknowledge the substantial support for national activities given by the following companies and charitable trusts. (in alphabetical order):

The Ian Askew Charitable Trust, Bergqvist Charitable Trust, Card Aid, The Catenian Association, The Chapman Charitable Trust, Celltech Pharmaceuticals Ltd., Chelmsford Leisure Connections, Community Fund (formerly National Lottery Charities Board), Cooper Gay Charitable Trust, The Coulthurst Trust, David Evans Memorial Trust, The Delves Charitable Trust, Ferring Pharmaceuticals Ltd., J A Harris and Co., The Hospital Savings Association Charitable Trust, The Hulse Charitable Trust, Inverforth Charitable Trust, Kirby Laing Foundation, John Lewis Partnership, The George John Livanos Charitable Trust, Lloyds TSB (City), Lloyds TSB Foundation (England and Wales), The Lynn Foundation, Mercers' Company, Pennies from Heaven, Proctor and Gamble Pharmaceuticals, Round Table (Herts), Schroder Charitable Trust, Sharegift, Shire Pharmaceuticals Ltd., Sir James Roll Charitable Trust, The Basil Samuel Charitable Trust, Sir Samuel Scott of Yews Trust, The Charles and Elsie Sykes Trust, The Epigoni Trust, The N. Smith Charitable Settlement, The Sobell Foundation, The Thompson Family Charitable Trust, TR Golden Charitable Trust, Tubney Charitable Trust, David Uri Memorial Trust, The Weinstock Fund, Elizabeth and Prince Zaiger Trust.

Trustees, Officers and Advisers

From 1st January 2002 to the date of signing of this Report and Accounts, the honorary officers, trustees and committee members were as follows:

Life Presidents:

Professor Lennard-Jones
Lady Bingley (*appointed April 2002*)

Vice-Presidents:

Margaret Chandler
Rod Mitchell

Council of Trustees:

Honorary officers:

Bradley Brown (*Chairman*)
Dr Stephen Kane (*Vice-Chairman to April 2002*)
Elaine Steven (*Vice-Chairman from April 2002*)
Maureen Lakeman (*Honorary Secretary*)
Peter Barnes (*National Treasurer*)

Elected Trustees:

John Adler (*January 2002 to February 2003*)
Lady Bingley (*until April 2002*)
Jefferson Cann (*from April 2002*)
Gillian Hamer-Hodges (*until April 2002*)
Jane Rippon
Dr Gillian Thomas (*until April 2002*)
Nigel Westwood (*from January 2002*)
Susanne Wood

Group Forum Committee:

Gillian Hamer-Hodges (*Chairman to April 2002*)
Nigel Westwood (*Chairman from April 2002*)
Norma Richardson (*Secretary*)
Peter Arthur
Alan Dinsdale (*until October 2002*)
Estelle Farber
Theresa Findlay (*until October 2002*)
Ian Sadler
Elaine Steven
Ian Toye (*until October 2002*)

Medical Advisers Committee:

Dr Peter McIntyre (*Chairman*)
Professor David Rampton (*Vice-Chairman*)
Dr Simon Travis (*Secretary*)

Publications Committee:

Bradley Brown (*Chairman*)
Clare Garcia
Glenys Davies
Alan Dinsdale
Maureen Lakeman
Dr Peter McIntyre
Peter Cartwright (*until December 2002*)
Richard Driscoll

Medical Research Awards Committee:

Co-opted Advisers:

Professor Derek Jewell (*to April 2002*)
Dr Peter McIntyre
Dr Simon Travis
Professor David Rampton (*from April 2002*)

Family and Young People's Committee:

Norma Richardson (*Chairwoman*)
Bradley Brown
Chris Corker
Laura Crawley
Gillian Hamer-Hodges
Sarah Longes
Ruth Tilley
Richard Driscoll

Welfare Committee:

Bradley Brown (*Chairman*)
Lady Bingley
Dr Martin Gay
Jacqueline Hockey
Susan Read (*until February 2003*)
Susanne Wood

NACC-in-Contact Committee:

Jane Rippon (*Chairman*)
Denise Cann (*Vice-Chairman*)
Dawn Carter
Gloria Fleming (*Contact Organiser*)
Stella Leigh (*Training Organiser*)
Susan Read (*from January 2003*)
Julia Reed
Elaine Steven (*from July 2002*)
Annette Welch (*from January 2003*)
Richard Driscoll

Social, Psychological and Health Services Research Awards Committee:

Professor Ian Bouchier (*Chairman to April 2002*)
Professor Michael Langman (*Chairman from October 2002*)
Dr Jane Bower
Bradley Brown (*ex-officio NACC Chairman*)
Alan Dearlove (*from October 2002*)
Dr Alastair Forbes
Professor Chris Hawkey
Professor Humphrey Hodgson (*to April 2002*)
Professor Derek Jewell (*to April 2002*)
Dr Peter McIntyre
Bharat Odedra (*from October 2002*)
Dr David Rampton
Professor Jonathan Rhodes
Dr Simon Travis
Professor Brendan Whittle
Richard Driscoll

Lady Bingley (*Chairwoman*)
Bradley Brown (*ex officio National Chairman*)
Joanna Brame
Stephanie Brewster)
Su Hurrell
Professor Stanton Newman
Dr Lynne Quine
Professor Ian Robinson
Dr Jon Shaffer
Professor Tricia Sloper
Dr Gillian Thomas
Susanne Wood
Richard Driscoll
Peter Cartwright (*until December 2002*)

***Directors of trading subsidiary,
NACC Merchandise Ltd:***

Rodney Mitchell (*Chairman*)
Peter Barnes (*Company Secretary*)
Bradley Brown

Auditors:

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