



## **Endometriosis UK**

### **Annual report and accounts for the year ended 31 March 2018**

**Company no. 2912853**

**Charity no. 1035810**

## Financial statements for the year ending 31 March 2018

### Contents

This Trustee and Directors' report provides an overview of performance in relation to our key objectives and of future plans. It includes key performance data and the stories of some of the women who have been helped by Endometriosis UK in addition to financial summaries and analysis.

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## REPORT OF THE DIRECTORS AND TRUSTEES

### Legal and administrative details

Endometriosis UK is a company limited by guarantee and a registered charity.

### Board of Trustees

Members of the Board of Trustees during the year were as follows:

Angela Style	Chair (appointed as Chair February 2015)
Melissa Longley	Vice Chair (appointed as Vice Chair July 2015)
Amanda Collier BA ACA	Treasurer (appointed as Treasurer January 2016)
Sarah Atkinson	(appointed April 2017)
Andy Glyde	(appointed April 2017)
Sera Miller	(appointed November 2017)
Alice Smith	
Sonya Timms BA MistF	(to July 2017)
Dr Jayne Tullet PhD	(to August 2017)
Dr Veena Rao	
Sanjay Vyas MD FRCOG	

Endometriosis UK has a skills-based Board of Trustees and trustees are recruited in order to ensure that the board has the right mix of skills and knowledge to provide effective governance. The Board of Trustees has a range of skills and experience including voluntary sector management, fundraising, financial management, primary and secondary health care and of living with endometriosis. Trustees are elected each year at the Annual General Meeting. The higher of three or one third of trustees are asked to retire each year and may offer themselves for re-election.

Company Secretary	Emma Cox
Registered Office	8/9 Well Court London EC4M 9DN
Charity number	1035810
Company number	2912853
Auditors	Knox Cropper 8/9 Well Court London EC4M 9DN
Bankers	CAF Bank Limited PO Box 289 Kings Hill West Malling Kent ME19 4TA
Solicitors	Bates Wells and Braithwaite 2 – 6 Cannon Street London EC4M 6YH

## **Medical Advisory Panel**

Sanjay Vyas, Consultant Gynaecologist, North Bristol NHS Trust & President of the BSGE

Dr Kirana Arambage, Senior Registrar Obs and Gynae, John Radcliffe Hospital, Oxford

Dr Christian Becker, Senior Clinical Research Fellow, John Radcliffe Hospital, Oxford

Professor Andrew Horne, Professor of Gynaecology and Reproductive Sciences, Edinburgh University

Dr Uma Marthi, General Practitioner with special interest in women's health, Rochdale

Wendy-Rae Mitchell, Clinical Nurse Specialist, Gynaecology, Royal Surrey Hospital, Guildford

Kevin Philips, Consultant Gynaecologist, Hull and East Yorkshire Hospitals NHS Trust

Dr Veena Rao, General Practitioner with special interest in women's health, Cumbria

## **Report of the Directors and Trustees**

The Directors and Trustees present their report and the audited financial statements for the year ended 31 March 2018.

### **Legal and administrative information**

Endometriosis UK is a registered charity and a company limited by guarantee, governed by the company's memorandum and articles. All the directors of the company serve as trustees of Endometriosis UK. Full legal and administrative details are set out on page 3.

### **Principal objectives and activities**

The principal objectives and activities of Endometriosis UK are:

- To provide support and information services to women with endometriosis;
- To advance the education of the general public and health professionals regarding endometriosis;
- To promote research into the disease.

The following outcomes for 2015 – 19 have been agreed:

1. Better quality of life for women with endometriosis
2. Better healthcare for women with endometriosis
3. Increased public and political awareness of endometriosis in the UK

## About endometriosis

Endometriosis is a gynaecological condition where tissue similar to the lining of the womb grows in other areas of the body, most commonly within the pelvic cavity. This tissue responds to the hormonal cycle in the same way as the lining of the womb, but unlike the lining of the womb there is no way for it to exit the body. It remains within the body where the bleeding forms lesions, cysts and scar tissue (adhesions). An estimated 1.5 million women in the UK have endometriosis - that's 1 in 10 from puberty to menopause who suffer from this disease, although the impact may be felt for life. We do not know the percentage severely disabled by it. There is currently no cure.

Endometriosis can result in inflammation, scar tissue, severe pain, painful sexual intercourse, infertility, bowel and digestive problems, bladder problems and a wide range of other symptoms. None of the symptoms are exclusive to endometriosis and, despite being the second most common gynaecological disease, it can be difficult to diagnose. Currently surgery is the only way of diagnosing it definitively. Endometriosis UK's own patient surveys have found that on average it takes 7.5 years from first symptoms to being diagnosed (January 2011). Whilst this is an improvement on the 2005 survey (11 years of delay), it is still unacceptably long. Additionally there is a general lack of awareness about it: fewer than 50% of people asked in a survey (February 2013) were aware of the condition and even fewer knew what it was.

There is no wholly satisfactory drug therapy and often the treatment is surgery, although for many this has to be repeated. The repercussions can be enormous: it can affect every aspect of a woman's life, from work, ability to conceive, to relationships and overall quality of life. Since the condition is hard to see and problematic to diagnose, women can often feel very isolated - coping with persistent pain, infertility and other unpleasant symptoms can also lead to depression.

Whilst endometriosis is a condition from which women suffer, it also affects partners and family members and all those affected may need support. This is evident from the number of partners and family members who contact the charity. Although in the past it was considered a disease of women aged 30+, increasing numbers of women are reporting that they experienced troublesome symptoms as early as their first period and sometimes even before this. There is no evidence to suggest that this is due to an increase in occurrence of endometriosis, but rather due to the realisation at an earlier age that severe period pain is not normal. Hence younger women are seeking help at an earlier age - something for which the charity's campaigns over many years should take credit. However, without improved diagnosis and treatment the negative outcomes for women of persistent pain, debilitating symptoms and potential infertility still remain.

## FOREWORD

Welcome to our 2017/18 annual report.

Endometriosis UK is a small charity with a big job to do. 1.5 million in the UK have endometriosis, that's 1 in 10 women from puberty to menopause – although the impact of the disease can be lifelong. Too many wait far too long to get diagnosed, the average time is a shocking 7.5 years. On receiving a diagnosis accessing treatment can be challenging. For many, endometriosis can be life-devastating, impacting careers, relationships, fertility and mental health. We have continued to focus our resources on decreasing diagnosis times, raising awareness and supporting those with the disease.

After years of campaigning, September 2017 saw the publication of the first ever NICE (National Institute for Health and Care Excellence) guidelines on [\*Endometriosis: diagnosis and management\*](#). These promise improved care and decreased diagnosis time, but only if they are put into practice. And implementation will be challenging as time and resources will have to be allocated to a disease that has historically been overlooked, at a time the NHS is struggling with funding. But this is a challenge we are determined to succeed at. Gaining understanding of decision makers is vital, and we continued to work with the All Party Parliamentary Group (APPG) on Women's Health, led by Paula Sherriff MP, to raise awareness with MPs of the issues those with endometriosis face and the solutions needed. We are working with partners such as the Royal College of GPs (RCGP), Royal College of Obstetricians & Gynaecologist (RCOG), Royal College of Nursing (RCN), British Society of Gynaecological Endoscopy (BSGE) and NICE, to ensure awareness and understanding of the guidelines with healthcare professionals.

The NICE guidelines are for NHS England and have to be adopted by the NHS in Northern Ireland, Scotland and Wales if they are to apply UK wide. The Welsh Government took a proactive approach, setting up a Welsh Government Endometriosis Task & Finish Group, of which Endometriosis UK was a member, to develop the best guidelines for Wales. We are currently waiting to hear back from the Welsh Government if they will be adopting the recommendations of the Group. We are looking to work with Northern Irish and Scottish governments to ensure adoption of the NICE guidelines too. Whilst the guidelines are a great step forward and, if implemented, will make a real difference to reducing diagnosis and improving treatment and management, there is room for improvement and we are looking to the longer term and how they can be developed in the future.

Reducing diagnosis time is essential. GPs play a key role in navigating a patient through to diagnosis and to do so need to recognise the symptoms of endometriosis, which overlap with other conditions such as fibroids, adenomyosis, heavy menstrual bleeding and Polycystic Ovary Syndrome (PCOS). We were invited onto the Women's Health Steering Group for the RCGP, the first time an external charity has been included on such a group. Working with the RCGP we planned a *Menstrual Wellbeing* project to provide resources, training and awareness for GPs to diagnose and support patients with endometriosis and other menstrual conditions and were delighted when the RCGP approved this as a Spotlight project for 2018/19. The sticking point was funding, and we are very pleased Endometriosis UK's hard work to raise funds was successful and the project is going ahead.

Menstrual Wellbeing is also the theme of our education campaign launched by Alice Smith, our Trustee and Young Ambassador. We want to see Menstrual Wellbeing taught in schools as part of the curriculum, to overcome the stigma and taboo of talking about periods and to ensure all girls and women know what to expect from their periods, what's normal and what isn't. With the current review of Relationship and Sex Education curriculum in England we are campaigning hard to get this included.

March this year saw the launch of a great new book *Endometriosis: the Experts Guide to Treat, Manage and Live Well with your Symptoms* published by Penguin Books. Written by Carol Pearson and Professor Andrew Horne, with input from women with endometriosis and healthcare professionals, we were proud to be involved with its production and endorse the book. Writing a book is a huge amount of work, and we are indebted to Carol and Andrew for their efforts.

We know that big changes can come about for women from connecting with others and being informed and supported as they live with endometriosis. We are so proud of our support services – our helpline and our support groups, both face to face and digital, and online forum – that are a lifeline to so many women. All of our support services are run by volunteers, many of whom are fighting their own battles with endometriosis. To all of our volunteers – a heartfelt thank you.

Although often behind the scenes, research into endometriosis is key to understanding as well as developing new treatments and management for the disease. We work with a range of universities and research consortia as well as with the World Endometriosis Research Foundation to ensure effective Patient Public Involvement (PPI). As a member of the James Lind Alliance priority setting partnership on endometriosis it was good to see the fruition of this two year project with a list of the top 10 unanswered research questions about endometriosis. This work is being used to shape research design and funding bids, and we hope to see an increase in endometriosis research in the UK because of this.

So many people generously gave up their time this year to make a difference to women with endometriosis. This year saw continued growth in our income from community fundraising; a huge thank you to everyone who baked a cake, walked or ran long or short distances, swam the English Channel, put on quizzes and cocktail evenings, organised a ball, and in any of the other wonderful ways our supporters have raised funds and awareness this year. Thanks too to the healthcare professionals who have worked behind the scenes to support us this year, reviewing information, talking to the media, answering queries and keeping us up to date with the medical and research world.

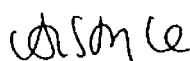
Increased awareness of endometriosis is vital if we want to see diagnosis times reduced and improvements to the quality of life of women with endometriosis. Media coverage of endometriosis has continued to increase this year, especially linked with the NICE guidelines in September, Awareness Week in March, and in February following publication of an essay in Vogue by Lena Duham, an American actress, writer and producer with endometriosis, on her decision to have a hysterectomy at 31. Although Lena's article was clear that everyone's situation is different and that she had other complications, this didn't stop some in the media getting the wrong end of the stick and linking hysterectomy as a cure for endometriosis – which it is not. We spent significant time trying to educate journalists about endometriosis, surgery and other treatments and management, and the long-term health implications of an early menopause. We achieved some great coverage and were able to get this message over, although not in every case.

For the media, case studies are key to provide a 'real life' experience. However, for those telling personal stories it can be difficult and emotional and mean talking about very personal issues. Many, many thanks to those who bravely shared your stories with the media to raise awareness and help others; it is thanks to you that this year more people than ever before have heard of endometriosis.

We continue to build momentum with lots of exciting and ambitious plans for the year ahead. We'll be continuing to campaign to get Menstrual Wellbeing taught in schools. We'll continue to push for implementation of the NICE guidelines across the UK. We'll continue to work with the RCGP and RCOG to develop awareness and training for healthcare professionals, especially to reduce diagnosis time. In conjunction with the World Endometriosis Research Foundation we'll be bringing you our first ever research conference. And we'll be continuing to raise awareness, so women don't suffer in silence. All of this will be a team effort – our staff, volunteers, members, trustees, women with endometriosis, their friends and family, healthcare professionals, researchers – all of those who work so tirelessly as part of Team Endo, making a real difference where it is so desperately needed. Thank you to you all.



Emma Cox (CEO)



Angela Style (Chair)

September 2018

## KEY ACHIEVEMENTS

### SUPPORT FOR PEOPLE LIVING WITH ENDOMETRIOSIS

- ✓ Increased support groups across the UK
- ✓ Developed our Helpline
- ✓ Developed our online discussion forum
- ✓ Held four *Living with Endometriosis* information days

### INFORMATION & RESEARCH

- ✓ *Endometriosis: the Experts Guide to Treat, Manage and Live Well with your Symptoms* written by Carol Pearson and Professor Andrew Horne, published by Penguin Books
- ✓ Member of the James Lind Alliance Endometriosis Priority Setting Partnership, seeking to identify the top 10 unanswered research questions about endometriosis
- ✓ Improved information management and reach through website and social media
- ✓ Partnered with Universities and Research Consortia across the UK to support Public and Patient Involvement (PPI) in a range of projects
- ✓ Supported the Work Foundation report *More than “women’s issues”: women’s reproductive and gynaecological health at work*

### CAMPAIGNING

- ✓ Won agreement from the Royal College of GPs (RCGP) to deliver a *Menstrual Wellbeing* Spotlight project, to raise awareness and knowledge with GPs – and raised the funds so the project can happen
- ✓ Member of the Welsh Government Endometriosis Task & Finish Group
- ✓ Supported the launch of the first NICE guidelines on endometriosis
- ✓ Contributed to the development of NICE Quality Standards for endometriosis care
- ✓ Launched a campaign to get Menstrual Wellbeing included in the Relationship & Sex Education curriculum
- ✓ Worked with the All Party Parliamentary Group (APPG) on Women’s Health to increase awareness of endometriosis with Governments and decision makers
- ✓ Achieved high profile coverage for endometriosis including on radio, TV, in a range of national newspapers and magazines, and online
- ✓ Supported participation in the Worldwide EndoMarch throughout the UK, with events taking place in Glasgow, Cardiff (in partnership with FTWW), Belfast, and London

### RESOURCING

- ✓ Developed our volunteer support
- ✓ Developed new fundraising and income streams
- ✓ Engaged more supporters through successful new fundraising events and campaigns
- ✓ Highly successful Pink Pants month in September, including 98 Pink Pants Tea Parties and Cross London event with supporters walking 24 miles across the capital





## 'Listen to women': UK doctors issued with first guidance on endometriosis

Disease, which causes crippling pain and can lead to infertility, affects 176 million women worldwide and currently takes seven to eight years to diagnose

change.org

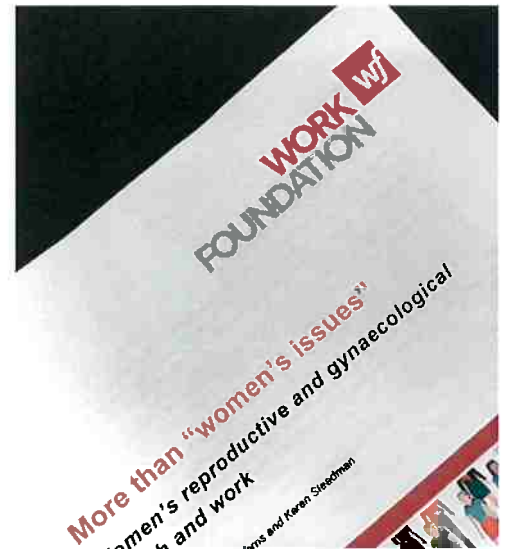


Stop treating periods like a dirty secret; t...  
 17K supporters



## Stop treating periods like a dirty secret; teach menstrual wellbeing in schools

17,069 have signed. Let's get to 25,000!



## Endometriosis

The Experts' Guide to Treat, Manage and Live Well with Your Symptoms

Prof Andrew Horne & Carol Pearson



Victoria Derbyshire @VictoriaLIVE

'If I had known more about endometriosis when I was younger I might have had children.'

More on the condition: [bbc.in/2omiM6X](http://bbc.in/2omiM6X)



Safina Akhtar @VictoriaLIVE



## SUPPORT FOR PEOPLE LIVING WITH ENDOMETRIOSIS

### Highlights

- ✓ Maintained 32 support groups across the UK, with 216 support group meetings held during the year and directly supporting 5,000 people
- ✓ Developed plans and launched 6 new groups:
  - Tyrone & Fermanagh
  - Leicester
  - York
  - Frimley Hospital
  - Royal Free Hospital (London)
  - University College Hospital (London)
- ✓ Supported and trained 112 volunteers who ran our Support Groups, Helpline, and our online forum Health Unlocked
- ✓ Held 14 online support group meetings, double the number in the previous year
- ✓ Increased Health Unlocked membership, our online forum, by 1,033 new members taking the total of signed up members to over 31,000
- ✓ Increased the availability of our Helpline resulting in 608 calls answered, an 18% increase on the previous year
- ✓ Helpline review and improvements, resulting in service provided on more days per month
- ✓ Worked with BSGE centres in London, Wakefield, Oldham and Poole to deliver four *Living with Endometriosis* information events

### Future Plans

- ✓ Open 9 Support Groups in areas where we have identified there are gaps in provision:
  - Aberdeen
  - Wakefield
  - Poole
  - Oldham
  - Oxford
  - Newcastle
  - Suffolk
  - Cornwall
  - Leeds
- ✓ Analyse trends of Helpline calls and recruit volunteers to do shifts where call volumes are higher, therefore answering more calls. Although we increased the calls answered, due to demand we were only able to connect calls from a third of individuals who called our helpline
- ✓ Identify the most common enquiries received and develop resources to ensure the most up to date support and information is available
- ✓ Ensure continued effective support and training of volunteers and ensure they feel valued for their contribution, including on NICE guidelines and Quality Standards, and in new GDPR protocols, ensuring we are keeping our beneficiaries safe

**A big THANK YOU to all our amazing volunteers**

"I just wanted to send an email in the hope you will be able to pass it on to the lady I spoke to on the helpline earlier today. I just wanted to let you know I spoke to a really lovely lady called Gemma, who was incredibly helpful and easy to talk to. She gave me lots of information and food for thought...I would just like to thank her for her time and help"



"I think the support from the Sheffield group is wonderful and I'm really glad I found a support group like this. Since going to the group meetings I have learnt a lot and feel I have been able to support others with new diagnosis. My partner and friends think it has helped me accept what I have and found ways to cope better. It's nice knowing that I'm not alone in this big Endo world. Thank you!"

"Thank you so much for reaching out to me, at a time when I am really struggling with this condition this level of support means more than I can explain. Having the support and understanding from so many women on this forum is invaluable to me. Thank you."



## INFORMATION & RESEARCH

### Highlights

- ✓ Active member of the [James Lind Alliance Priority Setting Partnership on Endometriosis](#), working to identify the top 10 unanswered research questions about endometriosis
- ✓ Partnered with Universities and Research Consortia across the UK to support Public and Patient Involvement (PPI) in a range of research projects
- ✓ Publication of *Endometriosis: the Experts Guide to Treat, Manage and Live Well with your Symptoms* written by Carol Pearson and Professor Andrew Horne
- ✓ Four *Living with Endometriosis* information days held
- ✓ Continuing development of website, with over 412,000 unique users visiting our website during the year
- ✓ Continued to grow our social media presence

### Future Plans

- ✓ To hold a scientific research conference for those with endometriosis, families & friends
- ✓ Develop information pack on work and employment
- ✓ Improve provision of online information

## CAMPAIGNING

### Highlights

- ✓ Worked in partnership with a range of journalists to raise awareness, including significant radio, TV, print and online media coverage
- ✓ Won agreement from RCGP to undertake a project on Menstrual Wellbeing, to raise awareness and knowledge with GPs, and secured funds to take this forward
- ✓ Built on relationships with BSGE, RCOG, RCN and NICE
- ✓ Invited to contribute to development of NICE Quality Standards to support implementation of the new NICE guidelines on endometriosis; submitted comments representing the views of both women with endometriosis and healthcare professionals at both stages of the Quality Standards development
- ✓ Increased impact of and participation in Endometriosis Awareness Week, held in March
- ✓ Supported participation in the Worldwide EndoMarch throughout the UK, with events taking place in Glasgow, Cardiff (in partnership with FTWW), Belfast, and London

### Future Plans

- ✓ Increase public awareness through a programme of annual campaigns
- ✓ Continuing our campaign to get *Menstrual Wellbeing* taught in schools
- ✓ Working in partnership with RCGP to reduce diagnosis time through training, education and awareness for GPs
- ✓ Build relationships with key partners including BSGE, RCGP and RCOG to agree improved diagnosis, using the publication of new NICE guidelines
- ✓ Strengthening relationships with key decision-makers and opinion formers from media, parliaments and national assemblies and voluntary sector



Victoria Derbyshire @VictoriaLVE Follow

'Gender bias means Endometriosis - which only affects women - doesn't have the pro research and funding' - Andrew Horne



Professor Andrew Horne, helped draw up guidelines on Endometriosis #VictoriaLVE

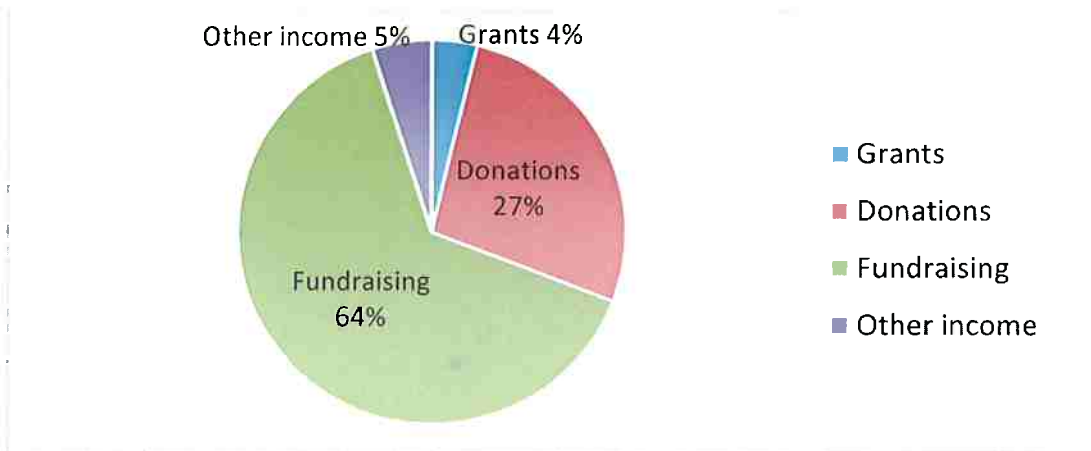


## RESOURCING

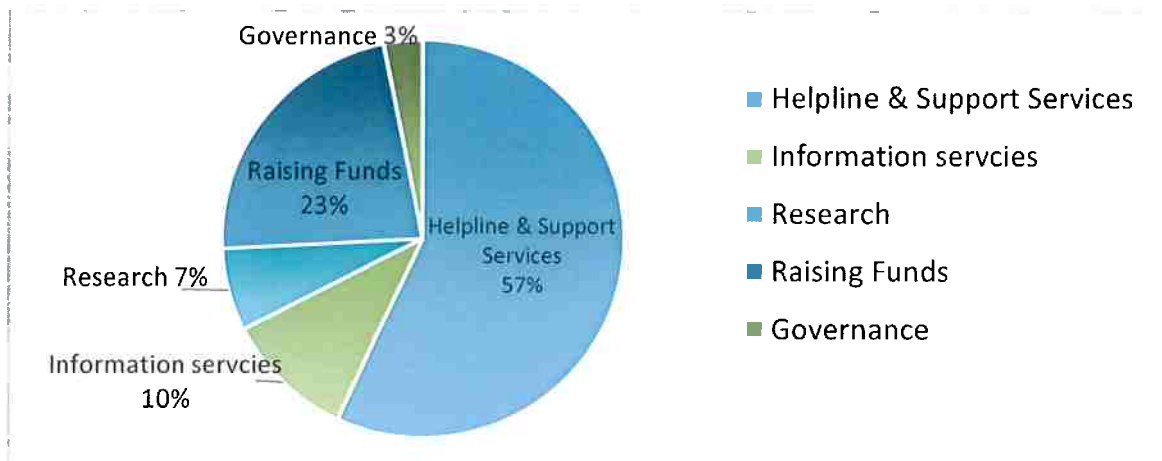
### Highlights

- ✓ Built on our resourcing strategy for our *Empowering Women* strategy
- ✓ Developed approaches for funding from trusts and companies
- ✓ Support for a wide range of events run by our fabulous volunteers, including the Lincoln Ball, Primrose Ball in Leeds, Endo Ball in Solihull and Gala Dinner in London
- ✓ Developed new fundraising events - Endo the Night; Manchester Half Marathon – and expanded people taking part in existing events eg X-London Challenge, British 10k, Brighton Marathon, Santa run.

### Income



### Expenditure



### Future Plans

- ✓ Develop and implement a 3-year fundraising strategy
- ✓ Improve our membership offer and grow our membership
- ✓ Continued investment in volunteer training, support and development
- ✓ Develop relationships with charitable trusts & corporates to secure new funding
- ✓ Improve online donation function on website and social media

## SUPPORTERS

### Highlights

- ✓ Many events and challenges were completed during the year by our intrepid supporters
- ✓ 98 *Pink Pants Tea Parties* were held throughout the UK in September, raising funds plus awareness of endometriosis
- ✓ 35 supporters walked 24 miles across the capital, raising awareness and funds
- ✓ Over £125,000 raised through events and donations by our fabulous supporters



Imperial College  
London

Home College and Campus Science Engineering Health Business

### Department Operations Manager Dr Emma Watson sets off to swim the Channel

by Victoria Murphy  
24 October 2017



Endometriosis affects 1 in 10 women, including Emma. The 28 women pictured demonstrate that probably another 28 in ESE have endometriosis.

- Share this
- Tweet this
- Share on reddit
- Share on LinkedIn
- Google Plus
- Print this story

### FUTURE PLANS

- ✓ Expanding participation in events
- ✓ Develop exciting new events
- ✓ Secure high profile ambassadors
- ✓ Attract more members and supporters

## **GOVERNANCE**

### **FINANCIAL**

The trustee board oversees the charity's finances. To support the Board, a Finance Committee meets regularly, chaired by Treasurer Amanda Collier who is a qualified accountant and Senior Manager at PwC.

The year 2017/18 ended with a surplus of £65,000, following a surplus of £90,000 in 2016/17 and a deficit of £31,000 in 2015/16. We were able to post a surplus as a result of careful management of costs and planned investment delivered in this year. The Trustees were keen to secure income streams to ensure that we are in a place to develop and execute our plans – ambitious plans for a small charity. Through both managing costs and developing our fundraising, the trustees carefully monitored finances over the year to ensure the year ended with unrestricted reserves that comfortably met our reserves policy. The Trustees, and Finance Committee working closely with the CEO, will look for opportunities to develop further fundraising opportunities.

### **RESERVES**

Our reserves policy is to achieve unrestricted reserves equivalent to 3-6 months' operating costs. Reserves level at 31 March 2018 were 9 months operating costs. Staff and Trustees carefully monitor cash flow position and reserves. Whilst building reserves has proved to be challenging in the current economic climate, our fundraising plans, combined with hard work and generosity of all our donors, have helped us achieve and maintain our reserves target. At the year end, the charity has unrestricted reserves totalling £177,000.

Having sufficient reserves allows us to execute our plans for and deliver future projects, with a focus on decreasing diagnosis times, raising awareness and supporting those with endometriosis. It also enables us to leverage further income, for example some funders are happier to part fund activities that the organisation has already raised some money for. Having sufficient reserves allows us to make the most of these opportunities.

### **PUBLIC BENEFIT STATEMENT**

The Trustees confirm that they have complied with the duty set out under section 4 of the Charities Act 2006 to have due regard to the Charity Commission's guidance on public benefit 'Charities and Public Benefit' in developing the objectives for the year and in planning activities.

### **RISK**

The charity reviewed risk during 2017/18, covering the key aspects of our work including finance, governance and management, operational and external factors. Material risks were identified, reviewed and mitigated by the trustees and this will continue in the year ahead.



## ACKNOWLEDGEMENTS

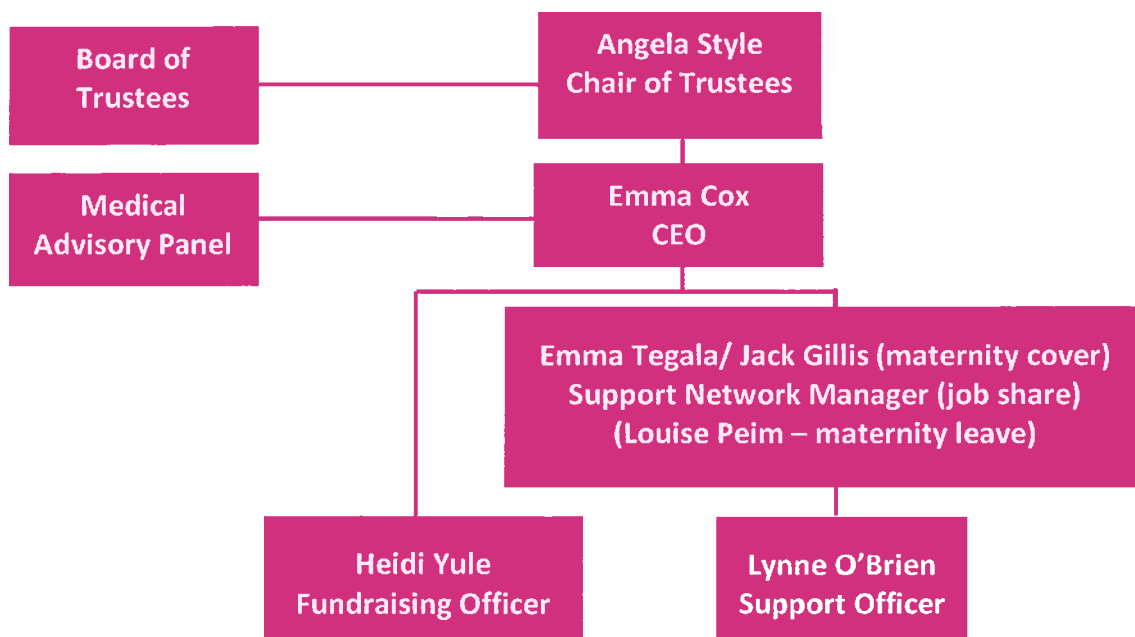
Our work depends on the time and knowledge kindly offered to us by our volunteers, fundraisers, speakers, health experts and clinical advisors. Without them we would not be able to reach and support the people we do. We would like to thank them all for their on-going support and generosity. All those volunteers who have given up their time to support other women with endometriosis - through the Helpline, Support Groups, Health Unlocked moderators - receive a special vote of thanks. Huge thanks as well to everyone involved in running an event as part of Endometriosis Awareness throughout March and everyone who baked cakes or ran or walked or gave up chocolate (or sponsored others for doing so) or were involved in other fundraising projects to raise money to support the charity. Particular thanks too to Kaye Sedgwick for her brilliant designs. And a very heartfelt thank you to those who told their stories to the media to raise awareness, which can be such a hard and emotional thing to do yet is vital in raising awareness and helping others.

As well as our funders below, we would like to thank each and every person who has made a donation this year or encouraged other people to donate. We would also like to thank our small and dedicated staff team and offer particular thanks to members of the staff team who moved on to pastures new in 2017/18.

- ✓ Hologic
- ✓ Edith Murphy Foundation
- ✓ Albert Hunt Trust

## ABOUT US

### Meet the Endometriosis UK Governance and staff team



### HOW TO GET INVOLVED

- ✓ [Volunteer](#)
- ✓ [Join as a Member](#)
- ✓ [Campaigning](#)
- ✓ [Fundraising](#)
- ✓ [Donate](#)
- ✓ [Sign up to our eNewsletter](#)

Find more information on how to get involved on our website: <https://www.endometriosis-uk.org/get-involved>

### CONTACT

Endometriosis UK  
46 Manchester Street, London W1U 7LS

Tel: 020 7222 2781

Registered Charity 1035810

Helpline: 0808 808 2227

[www.endometriosis-uk.org/contact-us](http://www.endometriosis-uk.org/contact-us)

Twitter [@EndometriosisUK](https://twitter.com/EndometriosisUK)

Instagram [endometriosis.uk](https://www.instagram.com/endometriosis.uk)

Facebook [www.facebook.com/endometriosis.uk.org](https://www.facebook.com/endometriosis.uk.org)

## Endometriosis UK

### Report of the Directors and Trustees (continued)

#### STATEMENT OF TRUSTEES RESPONSIBILITIES

The trustees (who are also the directors of Endometriosis UK for the purposes of company law) are responsible for preparing the Report of the Trustees and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice), including Financial Reporting Standard 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland".

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

- select suitable accounting policies and then apply them consistently
- observe the methods and principles in the Charity SORP
- make judgements and estimates that are reasonable and prudent
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in business.

The trustees are responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the charitable company and to enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

In so far as the trustees are aware:


- there is no relevant audit information of which the charitable company's auditors are unaware; and
- the trustees have taken all steps that they ought to have taken to make themselves aware of any relevant audit information and to establish that the auditors are aware of that information.


#### AUDITORS

The auditors, Knox Cropper, will be proposed for re-appointment at the forthcoming Annual General Meeting.

This report has been prepared in accordance with the special provisions of Part 15 of the Companies Act 2006 relating to small companies.

Approved by order of the board of trustees on 10<sup>th</sup> September 2018 and signed on its behalf by:

  
.....  
Angela Style (Chair)

  
.....  
Amanda Collier (Trustee)

## **INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE ENDOMETRIOSIS UK**

### **Opinion**

We have audited the financial statements of the Endometriosis UK (the 'charitable company') for the year ended 31 March 2018 which comprise the statement of financial activities, the balance sheet 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).

In our opinion, the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 31 March 2018 and of its 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.

### **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 are independent of the charitable company in accordance with the ethical requirements that are 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. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

### **Conclusions relating to going concern**

We have nothing to report in respect of the following matters in relation to which the ISAs (UK) require us to report to you where:

- the trustees' use of the going concern basis of accounting in the preparation of the financial statements is not appropriate; or
- the trustees have not disclosed in the financial statements any identified material uncertainties that may cast significant doubt about the company's ability to continue to adopt the going concern basis of accounting for a period of at least twelve months from the date when the financial statements are authorised for issue.

### **Other information**

The other information comprises the information included in the annual report, other than the financial statements and our auditor's report thereon. The trustees are responsible for the other information.

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.

In connection with our audit of the financial statements, 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.

### **Opinions on other matters prescribed by the Companies Act 2006**

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

- the information given in the trustees' report, which includes the directors' 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 directors' report included within the trustees' report has been prepared in accordance with applicable legal requirements.

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

In the light of the knowledge and understanding of the charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the directors' report included within the trustees' report.

We have nothing to report in respect of the following matters in relation to which the Companies Act 2006 requires us to report to you if, in our opinion:

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

### **Responsibilities of trustees**

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

In preparing the financial statements, the trustees are responsible for assessing the 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 company or to cease operations, or have no realistic alternative but to do so.

### **Auditor's responsibilities for the audit of the financial statements**

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.

A further description of our responsibilities for the audit of the financial statements is located on the

Financial Reporting Council's website at: <https://www.frc.org.uk/auditors/audit-assurance/auditor-s-responsibilities-for-the-audit-of-the-fi/description-of-the-auditor-responsibilities-for> . 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. Our audit work has been undertaken, so that we might state to the charitable company's members 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 and the charitable company's members as a body, for our audit work, for this report or for the opinions we have formed.

*Kevin Lally*

Kevin Lally (Senior Statutory Auditor)  
For and on behalf of Knox Cropper, Statutory Auditor  
8/9 Well Court  
London  
EC4M 9DN

*10<sup>th</sup> September 2018*

Knox Cropper is eligible to act as an auditor in terms of Section 1212 of the Companies Act 2006.

**ENDOMETRIOSIS UK**

**STATEMENT OF FINANCIAL ACTIVITIES  
(INCORPORATING THE INCOME AND EXPENDITURE ACCOUNT)**

**FOR THE YEAR ENDED 31<sup>ST</sup> MARCH 2018**

	Notes	Restricted Funds £	Unrestricted Funds £	Total 2018 £	Total 2017 £
<b>INCOME FROM</b>					
Grants and Donations	3	-	82,027	82,027	163,790
Activities for generating funds	4	-	183,843	183,843	146,982
Interest		-	55	55	47
Other Income		-	168	168	-
<b>TOTAL</b>		-	266,093	266,093	310,819
<b>EXPENDITURE ON</b>					
Raising funds	4	-	47,483	47,483	49,666
Charitable activities	5	7,500	145,246	152,746	171,248
<b>TOTAL</b>		7,500	192,729	200,229	220,914
<b>Net (Expenditure)/Income before transfers</b>	2	(7,500)	73,364	65,864	89,905
Transfers between funds		-	-	-	-
Net Movement in Funds		(7,500)	73,364	65,864	89,905
<b>Reconciliation of Funds</b>					
<b>BALANCES BROUGHT FORWARD 01/04/2017</b>		21,700	103,945	125,645	35,740
<b>BALANCES CARRIED FORWARD 31/03/2018</b>		14,200	177,309	191,509	125,645

All income and expenditure has arisen from continuing activities. The notes form part of these financial statements.

**ENDOMETRIOSIS UK**

**BALANCE SHEET**

**AS AT 31<sup>ST</sup> MARCH 2018**

	Notes	2018	2017
		£	£
<b>FIXED ASSETS</b>	9	401	1,053
<b>CURRENT ASSETS</b>			
Debtors	10	26,178	15,469
Cash at Bank and In Hand	11	<u>186,084</u>	<u>120,570</u>
		212,262	136,039
Creditors : Amounts Falling due within one year	12	<u>(21,154)</u>	<u>(11,447)</u>
<b>NET ASSETS</b>		<u>191,108</u>	<u>124,592</u>
		<u>191,509</u>	<u>125,645</u>
<b>FUNDS</b>			
Restricted Funds	14	14,200	21,700
Unrestricted Funds : General Reserve	15	177,309	103,945
		<u>191,509</u>	<u>125,645</u>

The financial statements have been prepared in accordance with the special provisions of Part 15 of the Companies Act 2006 relating to small companies and with the Financial Reporting Standard 102.

Approved on 15<sup>TH</sup> September 2018 and signed on behalf of the board



Angela Style (Director)



Amanda Collier (Director)

Company Registration Number: 2912853



**ENDOMETRIOSIS UK**  
**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 31ST MARCH 2018**

**1. ACCOUNTING POLICIES**

**a. Basis of Preparation of Accounts**

The financial statements of the charitable company, which is a public benefit entity under FRS 102, have been prepared in accordance with the Charities SORP (FRS 102) "Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2015)" and the Companies Act 2006. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy note.

**b. Tangible Fixed Assets and Depreciation**

Tangible fixed assets are stated at cost less depreciation.

Depreciation is provided on a straight-line basis as follows:

Office Equipment: 25% on Cost

**c. Income and Expenditure**

All relevant income and expenditure is stated excluding recoverable Value Added Tax.

**d. Grants and Donations**

Grants and donations are recorded in the accounts when the Charity is unconditionally entitled to the amounts receivable, including the attributable gift aid when applicable.

**e. Going Concern**

The trustees consider that there are no material uncertainties about the Charity's ability to continue as a going concern.

**2. NET INCOME**

	<b>2018</b>	<b>2017</b>
	£	£
Net Income is arrived at after charging		
Auditors' remuneration	2,100	2,100
Depreciation of fixed assets	652	1,439
Directors' Reimbursed expenses:		
Travel and Subsistence	636	346
	2,388	3,925

**ENDOMETRIOSIS UK**

**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 31ST MARCH 2018**

**3. GRANTS AND DONATIONS**

	<b>2018</b>	<b>2017</b>
	£	£
Hologic	5,000	-
Edith Murphy Foundation	4,000	-
Albert Hunt Trust	1,000	-
Department of Health	-	65,403
Garfield Weston	-	15,000
Takeda	-	14,200
NHS Manchester	-	5,100
Donation for Research	-	7,500
	10,000	107,203
Other Donations	72,027	56,587
	82,027	163,790

**4. ACTIVITIES FOR GENERATING FUNDS**

<b>Income</b>		
Challenge Events	51,632	31,373
Membership fees	9,049	8,334
Publications and Events	4,120	17,864
Other Fundraising Activities (See Note below)	119,042	89,411
	183,843	146,982
<b>Expenditure</b>		
Challenge Events	1,657	3,667
Costs of generating voluntary income	28,040	35,659
Other	17,786	10,340
	47,483	49,666

Note: Other Fundraising Activities represent members and supporters raising funds on behalf of the charity.

**5. CHARITABLE ACTIVITIES**

	2018			2017
	Direct Costs	Support Costs (Refer Note 6)	Total	Total
	£	£	£	£
Helpline and Support Services (Refer Note a)	78,914	35,165	114,079	65,524
Information Services (Refer Note b)	16,159	7,033	23,192	18,402
Research (Refer Note c)	10,786	4,689	15,475	-
Regional Development (Refer Note d)	-	-	-	75,261
Pilot Advocacy and Support Service (Refer Note e)	-	-	-	12,061
	105,859	46,887	152,746	171,248

Note a: Helpline and Support Services relate to providing services to women for the relief of endometriosis.

Note b: Information Services relate to advancing the education of the general public and health professionals regarding endometriosis.

Note c: Research relates to activities to support research into endometriosis to improve understanding, treatment and management of the disease.

Note d: Regional Development is funded by the Department of Health, Innovation and Excellence in Development Fund (IESD)

Note e: Pilot Advocacy and Support Service is funded by Awards for All

**ENDOMETRIOSIS UK**

**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 31<sup>ST</sup> MARCH 2018**

**6. SUPPORT COSTS**

	<b>Helpline and Support Services</b>	<b>Information Services</b>	<b>Research</b>	<b>2018 Total</b>	<b>2017 Total</b>
					£
Staff Costs	2,622	525	350	3,497	3,051
Office Costs	2,710	542	361	3,613	2,821
Premises Costs	19,002	3,800	2,534	25,336	24,329
Accounting	7,701	1,540	1,027	10,268	10,172
Other	3,130	626	417	4,173	4,748
	<u>35,165</u>	<u>7,033</u>	<u>4,689</u>	<u>46,887</u>	<u>45,121</u>

**Governance costs included in Support Costs comprise:**

	<b>2018</b>	<b>2017</b>
	£	£
Trustee Expenses	636	346
Audit Fee	2,100	2,100
Salaries and other costs	3,497	3,051
	<u>6,233</u>	<u>5,497</u>

**7. STAFF COSTS**

Wages and Salaries (including temporary staff)	85,764	102,133
Social Security Costs	2,671	3,049
Employer Pension	550	45
	<u>88,985</u>	<u>105,227</u>
The average number of staff employed during the year was:	<u>5</u>	<u>7</u>

No member of staff earned in excess of £60,000.

All employees are working part time.

The CEO represents the key management personnel. This is a 3 day/week post and the total remuneration for the year was £33,383.

**8. DIRECTORS**

**Emoluments of the Directors**

Total emoluments as directors	-	-
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All Directors are also trustees and do not receive any benefits or remuneration for their services. Their reimbursed expenses are set out in note 2.

**ENDOMETRIOSIS UK**

**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 31ST MARCH 2018**

9. **TANGIBLE FIXED ASSETS**

		<b>Office Equipment £</b>
<b>Cost</b>		
At 1 <sup>st</sup> April 2017		12,756
Additions		-
Written off		(10,595)
At 31 <sup>st</sup> March 2018		<u>2,161</u>
<b>Depreciation</b>		
At 1 <sup>st</sup> April 2017		11,703
Charged for the year		652
Written off		(10,595)
At 31 <sup>st</sup> March 2018		<u>1,760</u>
<b>Net Book Value</b>		
At 31 <sup>st</sup> March 2018		<u>401</u>
At 31 <sup>st</sup> March 2017		<u>1,053</u>

10. **DEBTORS**

	<b>2018</b>	<b>2017</b>
	£	£
Prepayments	14,960	10,498
Accrued income and other debtors	11,218	4,796
VAT	-	175
	<u>26,178</u>	<u>15,469</u>

11. **CASH AT BANK AND IN HAND**

Bank Balances	<u>186,084</u>	<u>120,570</u>
	<u>186,084</u>	<u>120,570</u>

12. **CREDITORS: Amounts falling due within one year**

Accruals	9,600	3,700
Other Creditors	9,446	6,116
Social security costs	1,832	1,631
VAT	276	-
	<u>21,154</u>	<u>11,447</u>

**ENDOMETRIOSIS UK**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31ST MARCH 2018**

**13. SHARE CAPITAL**

The company is limited by guarantee and therefore does not have any share capital. The liability of the members on the winding up of the company will not exceed £1.

**14. RESTRICTED FUNDS**

	Balance 31/03/17 £	Incoming Resources £	Resources Expended £	Transfers £	Balance 31/03/18 £
Takeda	14,200	-		-	14,200
Donation for Research	7,500	-	(7,500)	-	-
	21,700	-	(7,500)	-	14,200

Restricted funds represent donations and grants restricted for use on particular areas of the charity's work.

The grant received from Takeda for production of a new information leaflet which is currently being developed.

**15. UNRESTRICTED FUNDS**

	Balance 31/3/17 £	Net Incoming Resources £	Allocation Released £	Transfers £	Balance 31/3/18 £
General Reserve	103,945	73,364	-	-	177,309
	103,945	73,364	-	-	177,309

**16. COMMITMENTS UNDER OPERATING LEASE**

The company has a licence agreement at its premises for £2,037 per month (with a two month notice period) with an inflationary increase from December each year. The other operating lease commitments for the office equipment are as follows:

	Other	
	2018 £	2017 £
Falling due within one year	826	826
Falling due between one and five years	2,064	2,890
Falling due later than five years	-	-
	2,890	3,716

**17. ANALYSIS OF NET ASSETS BETWEEN FUNDS**

	Restricted £	Unrestricted £	Total £
Tangible Fixed Assets	-	401	401
Net Current Assets	14,200	176,908	191,108
	14,200	177,309	191,509

**18. GOING CONCERN**

The trustees have reviewed the financial position of the Charity, and in particular the level of reserves, and on the basis of current projections, they are satisfied that the Charitable Company remains a going concern for the foreseeable future.

19. RELATED PARTY TRANSACTIONS

There were no related party transactions in the year.

**ENDOMETRIOSIS UK**

**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 31ST MARCH 2018**

**20. COMPARATIVE FIGURES FOR THE STATEMENT OF FINANCIAL ACTIVITIES AS REQUIRED BY FRS 102**

	<b>Restricted Funds £</b>	<b>Unrestricted Funds £</b>	<b>Total 2017 £</b>
<b>INCOME FROM</b>			
Grants and donations	107,203	56,587	163,790
Charitable activities	-	146,982	146,982
Interest	-	47	47
Other income	-	-	-
Total	<u>107,203</u>	<u>203,616</u>	<u>310,819</u>
<b>EXPENDITURE ON</b>			
Raising funds	-	49,666	49,666
Charitable activities	97,564	73,684	171,248
Total	<u>97,564</u>	<u>123,350</u>	<u>220,914</u>
Net income before transfers	9,639	80,266	89,905
Transfers between funds	3,725	(3,725)	-
Net movement in funds	<u>13,364</u>	<u>76,541</u>	<u>89,905</u>
Balance brought forward	8,336	27,404	35,740
Balance carried forward 31/03/2017	<u>21,700</u>	<u>103,945</u>	<u>125,645</u>