



Always at your side  
Marie Curie Annual Report  
and Accounts 2016 –17



“By the time you arrived, I was beyond exhausted, having only slept for about two hours in the previous two days, terrified that when my husband needed me I would be asleep. You walked in and I remember breaking down in front of you. I poured my heart out and you poured the tea. You brought a comfort that I simply cannot put into words.”

Louise, whose husband Steve was cared for by a Marie Curie Nurse



Every one of us in the UK will be affected at some point by a terminal illness. When that time comes, we all deserve to be confident the right care will be there for us and our families. This report shows how Marie Curie is reaching people when they need us most, helping make every moment count.

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# Our year in numbers

We're here for people living with any terminal illness, and their families. We're here when they're scared. When they're not sure where to turn to. When they need us most.

We're here to provide the care everyone deserves at the end of their life. And this year, we reached more people in more ways than ever before.



Ben Gold/Marie Curie



Kieran Dodds/Marie Curie



Kieran Dodds/Marie Curie

## Marie Curie Nurses

**33,543**

people cared for – a 6% increase from last year

**2,160**

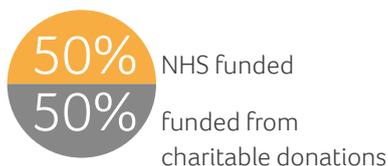
nursing staff

**1.2 million**

hours of care provided

**99%**

of patients said they were likely to recommend us to friends and family



## Marie Curie Hospices

**7,711**

people cared for

**94%**

of people rated our service as 'very good' – the highest possible rating

**99%**

of patients said they were likely to recommend us to friends and family



## Marie Curie Helper and Companion volunteers

**1,339**

households supported

**515**

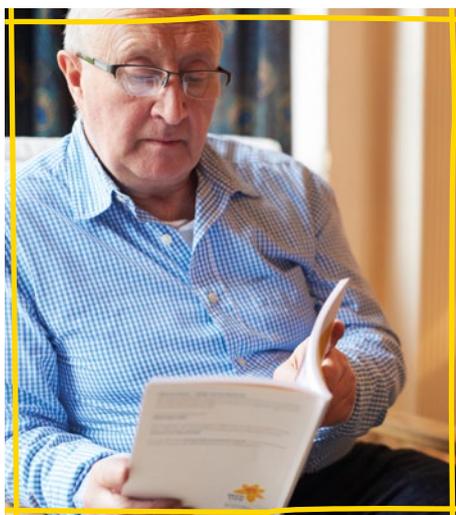
active Helper and Companion volunteers

**3**

new services launched



# More than 50,000 people helped by our services in 2016/17



Ben Gold/Marie Curie

## Information and support

**10,305**  
calls to our Support Line

**99%**  
of callers who provided feedback said they would recommend Marie Curie to others

**1,024**  
web chats

**1 million**  
unique views of information and support topics on our website

**100%** funded from charitable donations



Kieran Dodds/Marie Curie

## Research

**45**  
instances where our researchers influenced policy and practice

**80**  
research papers published in peer-reviewed journals

**2,623**  
people recruited to take part in our research studies

**9**  
research grants funded – our largest number ever in one year

**100%** funded from charitable donations



Pete Jones/Marie Curie

## Policy, campaigning and awareness

**56**  
responses to government consultations across the four nations

**71**  
briefings produced for elected representatives

**88%**  
of people have heard of Marie Curie

**100%** funded from charitable donations

# Report of the Chairman and Chief Executive

At Marie Curie, we believe that the last days of your life are just as important as the first. If you're living with a terminal illness, getting the right care in those days can make all the difference. We're here to provide that care – and our expertise has never been needed more.

## The issue that affects us all

In recent years, our society has been facing a significant challenge. We are living longer and dying with more complex conditions. Our health and social care systems – which are stretched thin – often struggle to keep up with the demand.

According to two separate surveys this year, GPs and nurses say they lack the time to properly care for people with a terminal illness. Record numbers of people are spending their final days in hospital when they neither want nor need to be there, simply because there is no social care package in place to allow them to die at home.

The situation for society is difficult. If things continue the way they are, more and more people will find themselves without the care they desperately need. Marie Curie's mission is to help more people, and those who care for them, in just these circumstances.

## Caring for more people

At Marie Curie, we're determined to rise to the challenge and provide the care everyone deserves at the end of their life.

We are at the forefront of exploring new ways of caring for people that are effective and affordable in our changing world. And we're the UK's leader in research into how to improve palliative and end of life care.

This year, our nurses cared for 6% more people living with a terminal illness, while our hospices across the UK remained firmly at the heart of the communities they serve. On pages 10-11, you can read more about the innovative ways we're providing better care in people's homes and in the community.

## More ways to access support

We launched our information and support services, now in their second year, to meet the needs of more people throughout their journey with a terminal illness.

The growth in numbers of people using our services shows how vital they are – not only for people living with a terminal illness, but for the people who care about them too.

## Changing the conversation

Today, it's increasingly understood that terminal illness means far more than just cancer. So in addition to looking after people with terminal cancer, we seek to provide high-quality palliative care and support to people living with conditions as varied as motor neurone disease, lung disease and Parkinson's.

Through our awareness-raising, our campaigning and our investment in research, Marie Curie has been at the forefront of ensuring that those with any terminal illness receive the support they need and deserve. On page 22, you can



John Varley  
Chairman



Dr Jane Collins  
Chief Executive

hear from Sarah, who is living with motor neurone disease, about the comfort it brings her to know she has the support that's right for her.

### Reaching higher

As we find ourselves serving an increasing number of people each year, we need to make sure that Marie Curie is operating as effectively and efficiently as possible.

This year, we launched Reaching Higher, a transformation programme to enable us better to meet the needs of people living with a terminal illness, and their families, thereby building a stronger and more sustainable Marie Curie for the future.

### Thank you for helping us be there

It is down to the unstinting generosity, commitment, dedication and skill of our supporters, volunteers, partners and staff, to whom we send our heartfelt thanks, that we have been able to support and care for more people this year.

But we look to a future that holds significant healthcare challenges for England, Wales, Scotland and Northern Ireland, in all of which we are active.

In 25 years' time, there will be 100,000 more deaths each year across the UK compared with today. If we're to meet this growing demand and have our nurses serve in people's homes and in communities around the UK, we will urgently need support.

We hope you enjoy reading in this report about the impact that we can make for people living with a terminal illness and their families. We were there for them this year and with your continued support and encouragement, we will be there for them in the years to come.

On behalf of everyone at Marie Curie, I would like to thank John Varley, who stepped down as chairman in June 2017, for his contribution to the charity. Over the last six years he has been a highly effective chairman, playing an important role in ensuring we deliver on our strategic objectives. He is a passionate supporter of the need for good end of life care.

Dr Jane Collins, Chief Executive

# Our aims

This report shows the progress we've made in achieving our aims for the financial year 2016/17, the third year of our five-year strategic plan.



Layton Thompson/Marie Curie

Centre: Simon Rawles/Marie Curie.  
Right: Ben Gold/Marie Curie

## Reach more people and their families living with a terminal illness and inspire more people to support our work

We will be there for people with any terminal illness, as soon as possible after their diagnosis.

We will invest in our fundraising, brand and communications to raise income and awareness of our work.

## Improve the way terminally ill people are cared for across the UK

We will make sure everyone gets the care they deserve at the end of their life.

## Be as efficient and effective as possible

We will invest in our people and technology.

## Our vision

A better life for people and their families living with a terminal illness.

## Our mission

To help people and their families living with a terminal illness make the most of the time they have together by delivering expert care, emotional support, research and guidance.



# Our nurses are reaching more people who need them

Our nurses care for people in their own homes – in the day, through the night, for a full nine-hour shift or in a crisis. And this year, they were there to help more families through their darkest hour.

Our target	Our achievements
Provide nursing and hospice care of the highest standard to more people each year	Our nurses cared for 33,543 people – an increase of 6% on the previous year
	93% of people we cared for rated our service as ‘very good’ – the highest possible rating
	99% of patients said they were likely to recommend us to friends and family

## 6% increase in the number of people our nurses cared for

Most of us would choose to spend our final days at home, and die peacefully in familiar surroundings. Having a Marie Curie Nurse makes this twice as likely.\*

With more people living for longer and with more complex conditions at the end of their lives, our expertise has never been more needed. This year, despite a tough economic climate and increasingly stretched NHS, we cared for more people in their own homes.

### Working together to help people stay at home

Enabling people to die at home relies on the right care being in place at the right time. Our innovative partnership with Northumbria NHS Trust shows the clear benefits of providing joined-up services. The partnership brings together teams of experienced nurses in hospital and community settings. This includes our rapid response service, which gets a Marie Curie Nurse to people’s homes within one hour to

help with urgent care needs such as pain relief. Through the partnership, we are reducing the need for hospital admissions and giving people a greater continuity of care. Our partnership was chosen as a finalist at the National Council for Palliative Care Awards, in the End of Life Champion category.

In Wales, our Cardiff and the Vale Marie Curie Hospice at Home service has helped 192 people get the care they need at the end of their life. By providing flexible, 24-hour care in partnership with local district nurses, GPs and hospice teams, the service helped 94% of its patients in 2016/17 to die in the place of their choice, usually their home.

\* The impact of the Marie Curie Nursing Service on place of death and hospital use at end of life, Chitnis et al, November 2012, Nuffield Trust.



“Mum had had a bad experience in hospital so, for her, staying in her own house was important. I don’t have the words to say how brilliant our Marie Curie Nurse was and how much the support meant to us. She was a shoulder to lean on. It made a huge difference.”

Garry, left, whose mum Thelma was cared for at home by Finola, a Marie Curie Nurse

“If you ask people living with a terminal illness where they want to be during their last days, the vast majority will say at home. We’re on call to help people urgently, and we get to them within the hour. I will always say to the patient and the family, ‘I’m not leaving until this is sorted.’”

Richard, Marie Curie Nurse and member of the rapid response team in Durham



# “If you can have a good death, that’s what Dad had”

Allison’s dad, Ted, was cared for at home by Marie Curie Nurse Alma.

“It’s the responsibility that really takes its toll when you are caring for someone. You are always second-guessing and wondering if there is more that you can do. When Alma was there, the weight was taken off and we could just be with Dad.

The day that Alma arrived, Dad couldn’t swallow anymore. As the morphine wore off, he was becoming distressed. By the time Alma got there, we were all just sitting around him, very stressed and very anxious.

Alma made my dad more comfortable, and arranged to give him the medication he needed. Her no-nonsense, take charge attitude immediately calmed us all.

Mum commented how she had taken charge and Alma said that it was probably because she was ex-military. Mum said:

‘Oh Ted, did you hear that, Alma is ex-forces!’

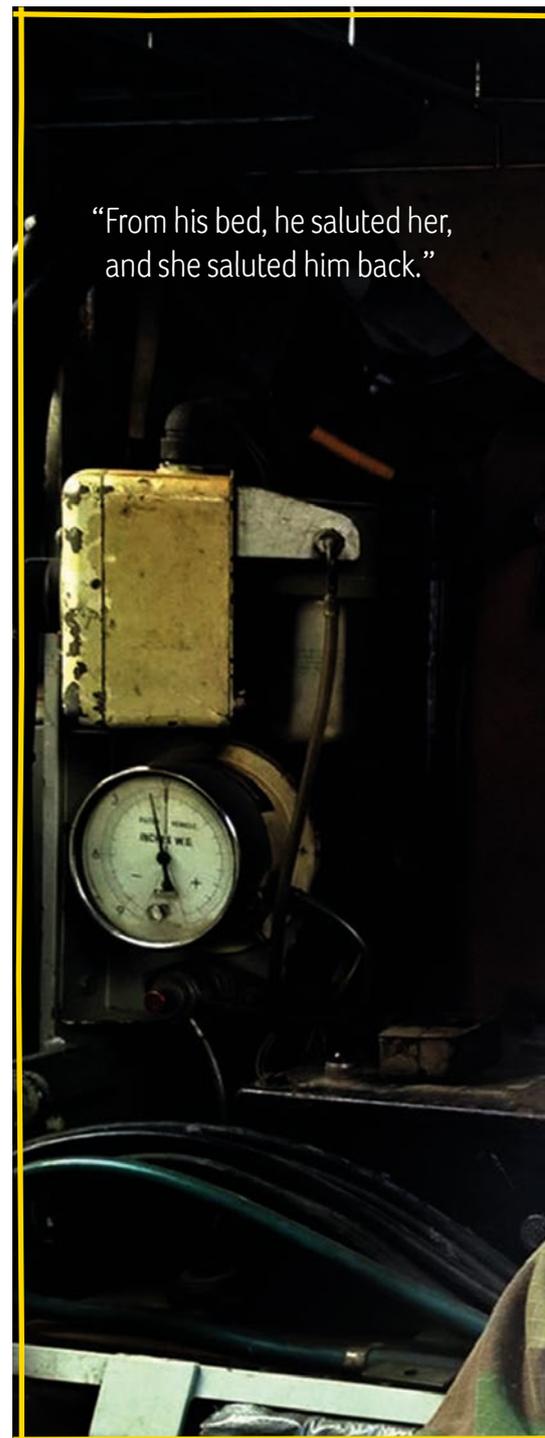
From his bed, he saluted her, and she saluted him back.

On Dad’s last night, we laughed as we thought of all the funny times we’ve had together, all the places we’d lived and the hilarious adventures we’d had as a family.

In that atmosphere, Dad passed away very peacefully.

Alma asked Mum if she wanted to do the last offices with her. So they washed Dad, cut his nails, combed his hair, and gave him a shave. Mum was so pleased that she’d been able to do that for him.

I really don’t know how we would have managed without Alma. She guided us through the night.”



“From his bed, he saluted her, and she saluted him back.”



# Our hospices are at the heart of the local community

Our hospices help people achieve the best possible quality of life for as long as they have left. They offer a range of services for people with a terminal illness and their families, from in-patient stays to day services and bereavement support.

Our target	Our achievements
Provide nursing and hospice care of the highest standard to more people each year	We cared for 7,711 people across our nine hospices – using an updated calculation method this year, this figure is a 1% increase from last year measured on the same basis 94% of people we cared for rated our service as ‘very good’ – the highest possible rating
	Our Newcastle hospice received an ‘outstanding’ Care Quality Commission rating, while our Bradford, Hampstead and Liverpool hospices were all rated ‘good’

We’re proud of the friendly, welcoming atmosphere people encounter when they come to our hospices. Each of our nine hospices is part of its local community – a place people know and trust – and offers the reassurance of specialist, round-the-clock care for people living with any terminal illness.

While many people choose to come to our hospices in their final days, day therapy and outpatient services are also an important part of what we offer. Our day therapies range from counselling and music therapy to guided relaxation. Thanks to significant donations and fundraising efforts, our Newcastle and Cardiff hospices were both able to modernise their day therapy units in 2016, providing more space for physical and complementary therapies.

## Special moments and outstanding care

We work hard to offer truly individual care. Our hospices have hosted weddings, christenings and Christmas parties to allow families to make special memories together. This year, our Newcastle hospice was awarded an ‘outstanding’ rating by the Care Quality Commission, who praised staff for going the extra mile to meet people’s wishes.

**Our nine hospice locations**



“Dad got himself a new car – an automatic – so he could drive himself to the hospice every week. He learned to paint there and loved it. He had physiotherapy in the morning and he’d always have a lovely hot lunch. The hospice gave Dad the will to live.”

Susan, whose dad Stanley attended day therapy at the Marie Curie Hospice, Bradford. Stanley eventually chose to spend his final days at the hospice.



# “The hospice has given me a new lease of life”

Paola is living with terminal breast cancer and visits the Marie Curie Hospice, Hampstead as a day patient, with her nine-year-old twins Sasha and Aron.

“My life’s been transformed really. I was in a wheelchair 18 months ago thinking that I would be dead in a few weeks.

The people at Marie Curie – the physios, the doctors, the nurses – they encouraged me. They suggested that I do an exercise programme once a week.

I started off very gently with a couple of step-ups and sit-ups. Gradually over the next 18 months, my strength returned, my appetite returned, I started to put on some weight, and I started to be able to do some activities of daily living that I couldn’t have done before.

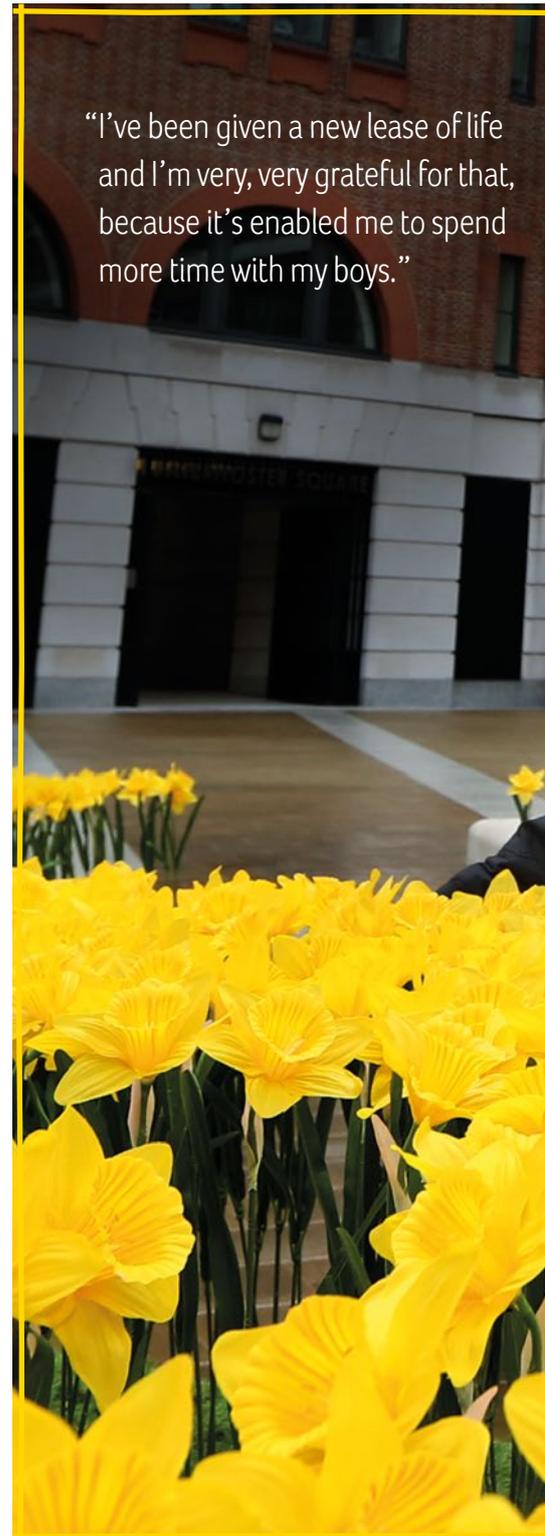
I’ve been given a new lease of life and I’m very, very grateful for that, because it’s enabled me to spend more time with my boys.

Coming to Marie Curie is very nurturing. Everyone here is very friendly to everyone else. The environment is very positive.

The boys come to see Marco, the psychologist. This was the only place I could find that did pre-bereavement counselling. The boys love coming here. It’s very therapeutic for them. And when the time comes, they’ll know Marco and he’ll know them.

I know I don’t have a long-term prognosis, but every day to me is precious now. And I feel that with Marie Curie’s help, I could go on a bit longer.”

“I’ve been given a new lease of life and I’m very, very grateful for that, because it’s enabled me to spend more time with my boys.”





# Our information and support is just a call or click away

When you or someone you love is living with a terminal illness, you need clear, sensitive and accurate information, and support from people who understand what you're going through. We offer a range of ways to access our services – from our Support Line and webchats, to award-winning printed materials and extensive online resources.

Our target	Our achievements
Launch a free information and emotional support service for anyone affected by terminal illness	The Marie Curie Support Line continued to grow, responding to 10,305 calls and 1,024 web chats
	99% of callers who provided feedback said they would recommend Marie Curie to others, 95% felt they got the information they needed, and 90% rated the service as excellent
	There were a total of 1,001,226 unique views of information and support topics on our website

**Winner**  
 Ethical Issues Award,  
 2016 BMA Patient  
 Information Awards  
 for our booklet  
 'When someone dies:  
 Emotional and practical  
 help at a difficult time'.

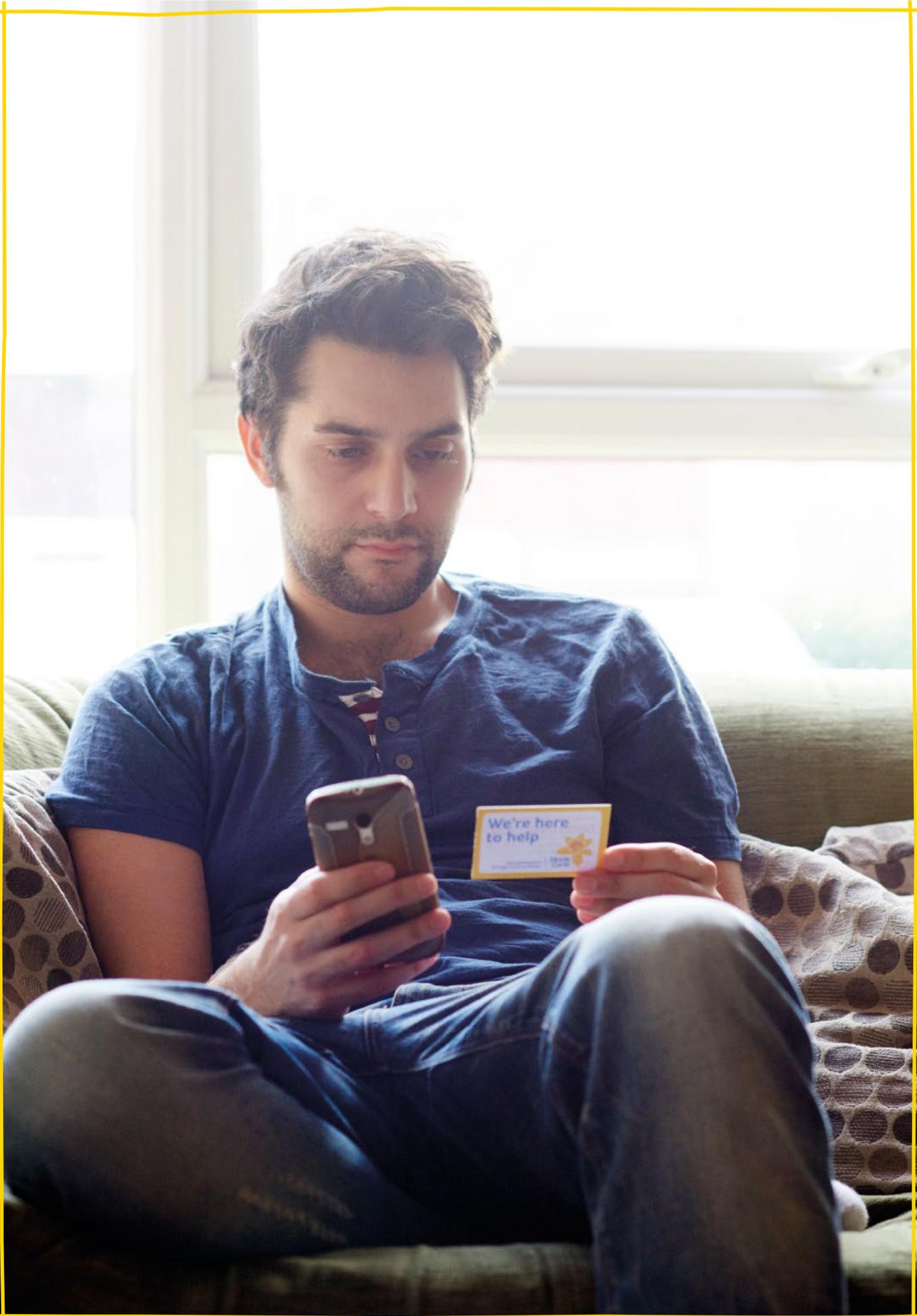
Since launching our services in April 2015, we have seen significant growth in the number of people coming to us for information and support. This year, the information and support pages on our website were viewed more than 1 million times (up from 654,875 in 2015/16). We also produce a range of printed booklets and resources. All our information is now produced according to the Information Standard, of which Marie Curie is a member. The quality of our information was recognised at the 2016 British Medical Association Patient Information Awards, which celebrate accessible, well-designed and clinically-balanced patient information.

The Marie Curie Support Line continues to provide emotional support and practical information for people experiencing one of the most difficult times in life. We answered 10,305 calls this year and completed 1,024 web chats, giving people the option to connect with our trained Support Line staff in a way that suits them.

## Specialist information for healthcare professionals

In January 2017, in recognition that many healthcare professionals could also benefit from more information on palliative and end of life care, we launched our online Palliative Care Knowledge Zone.

Aimed at generalist health and social care professionals caring for people at the end of their lives but without specific training in this field, the Palliative Care Knowledge Zone includes example questions to help start difficult conversations, such as discussing where someone would like to be cared for in their final days. It also houses condition-specific guides developed in partnership with experts such as the British Heart Foundation, British Lung Foundation and Alzheimer's Society. As of May 2017, the Palliative Care Knowledge Zone has been viewed 33,336 times.



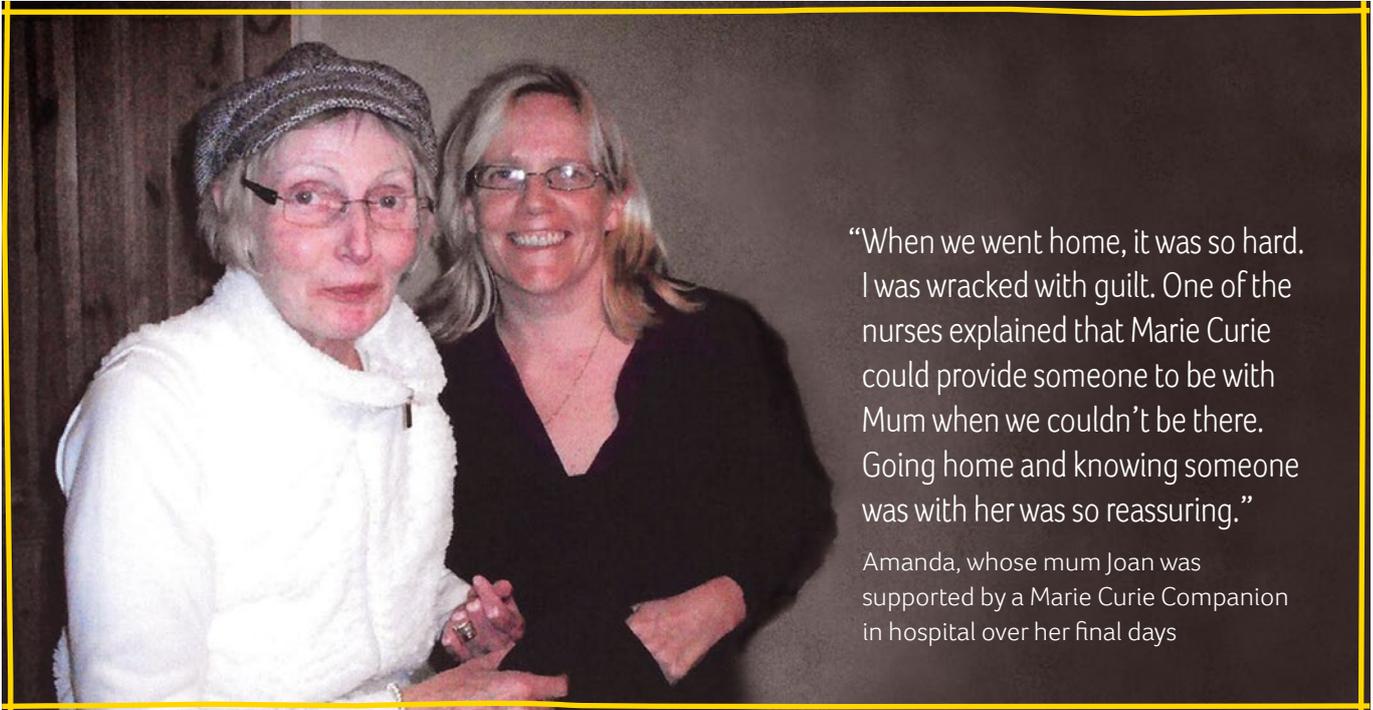
Ben Gold/Marie Curie

# Our Helper and Companion services are there to lean on

A chat over a cup of tea, help getting to an appointment or simply someone to be there when you need them – they’re little things, but when you’re living with a terminal illness, or caring for someone who is, they can mean the world. This year, our trained Helper and Companion volunteers gave their time to help more families than ever before.

Our target	Our achievements
Expand our Helper and Companion services	The number of households being supported by a Marie Curie Helper or Companion volunteer grew from 979 in 2015/16 to 1,339 in 2016/17 – a 37% increase  515 active Helper and Companion volunteers supported people with a terminal illness in 2016/17





“When we went home, it was so hard. I was wracked with guilt. One of the nurses explained that Marie Curie could provide someone to be with Mum when we couldn’t be there. Going home and knowing someone was with her was so reassuring.”

Amanda, whose mum Joan was supported by a Marie Curie Companion in hospital over her final days

## Help at home

Our Helper service matches someone living with a terminal illness with a trained volunteer who can visit them at home on a regular basis, providing companionship for them and respite for any family members who may be caring for them. For people who don’t have family or friends close by, the support of a Helper volunteer can be a lifeline and give them weekly contact with someone not associated with their medical care.

We launched new Helper services in Lothian, Dumfries and Devon, and look forward to supporting patients in Argyll and Bute, Glasgow and Portsmouth in the coming year. In Argyll and Bute in Scotland, our service will address the

challenge of meeting the needs of people living with a terminal illness in a large, rural and sparsely populated region. We’re partnering with local community groups to identify people already volunteering in similar roles who have the skills to be a Helper volunteer.

## Help for people in hospital

Our Companion service at Musgrove Park Hospital in Somerset provides volunteers to support patients who are nearing the end of their lives, and their families, while they’re on the ward. These specially trained volunteers offer comfort and emotional support, as well as practical information such as where relatives can stay locally while they’re visiting a loved one.

**37% more**  
people supported by  
Helper and Companion  
volunteers this year

“The right care is so important when you have a terminal illness. I find hospitals frightening, especially since my speech is so badly impaired. It’s crucial that research is done to make sure palliative care is available to people with MND. It’s not always recognised that we need that holistic approach to care too.”

Sarah is living with motor neurone disease and visits our Hampstead hospice for day therapy services



# Our research is improving care for people with any terminal illness

End of life and palliative care remain under-funded areas of research – despite being such a pressing concern for our ageing population. That’s why we’re committed to funding more research into better ways of caring for people with a terminal illness.

Our target	Our achievements
Double research investment over the strategic plan period	During the year, research funded by Marie Curie resulted in 80* published papers in peer-reviewed journals
	Our researchers influenced policy and practice in 47* instances
	More than 2,623 people took part in research studies we funded, including 55 people from the Marie Curie Hospice, Belfast, who participated in a study about the effectiveness of music therapy in improving the quality of life of palliative care patients
	We funded nine research grants, our largest number ever in one year
Innovate in how we design services and in the partnerships we form	A major collaborative project is underway with the Palliative Care and Engineering departments of Cambridge University and the Health Design Team from Sheffield Hallam University to design new end of life care services

**2,623**  
people  
took part in research  
studies we funded

Marie Curie is the largest charitable funder of palliative and end of life care research in the UK. This year, by working in partnership with the Chief Scientist Office in Scotland and the Motor Neurone Disease Association, we were able to fund nine research grants, our most ever in one year. This includes three new research studies to improve the quality of palliative care people with MND receive.

Our research resulted in 80 peer-reviewed papers appearing in journals. A study led by the Marie Curie Palliative Care Research Department at UCL showed that doctors are often inaccurate in their estimates of how long a person with a terminal illness has left to live. The research led to significant media coverage, including a front-page story in *The Times*.

## Influencing policy and practice

We encourage our researchers to engage with policy makers and practitioners, and in 2016/17 they influenced policy and practice in 47 instances. For example, Professor Miriam Johnson developed a tool to help clinicians better identify the palliative care needs of people with the lung disease idiopathic pulmonary fibrosis (IPF). The tool was recently endorsed by the National Institute for Health and Care Excellence (NICE), meaning it can be used when organisations implement NICE guidelines for the diagnosis and management of IPF.

\* Figures from January to December 2016

# Our campaigning and awareness-raising is helping more people get support

Every five minutes someone in the UK dies without the support they need. We can't let that continue. That's why we're working hard to raise awareness of the issues surrounding terminal illness and keeping the care and support we offer at the front of people's minds.

Our target	Our achievements
Increase our role in influencing the policy environment across the UK	We influenced Scotland's new mental health strategy, arguing for it to include palliative care, dying, death and bereavement
	Our campaigning work to improve equity of access to end of life care and gather people's experiences of it more effectively was referenced in the Welsh Government's refreshed End of Life Care Delivery Plan
	Catherine McKinnell, MP for Newcastle North, met with one of our Helper volunteers and the person she was supporting. As a result, she tabled a debate on end of life care services which led to the Government reaffirming its commitment to improving these services throughout England
	The Northern Ireland Permanent Secretary for Health agreed to sponsor our proposal for a public services innovation project on a public health approach to end of life care
Transform our brand	Over a third of people now associate Marie Curie with any kind of terminal illness*
	Marie Curie remains a highly trusted charity – over 70% of those asked in January 2017 said they trusted us 'a great deal' or 'quite a lot'***

## We're keeping terminal illness firmly on the political agenda

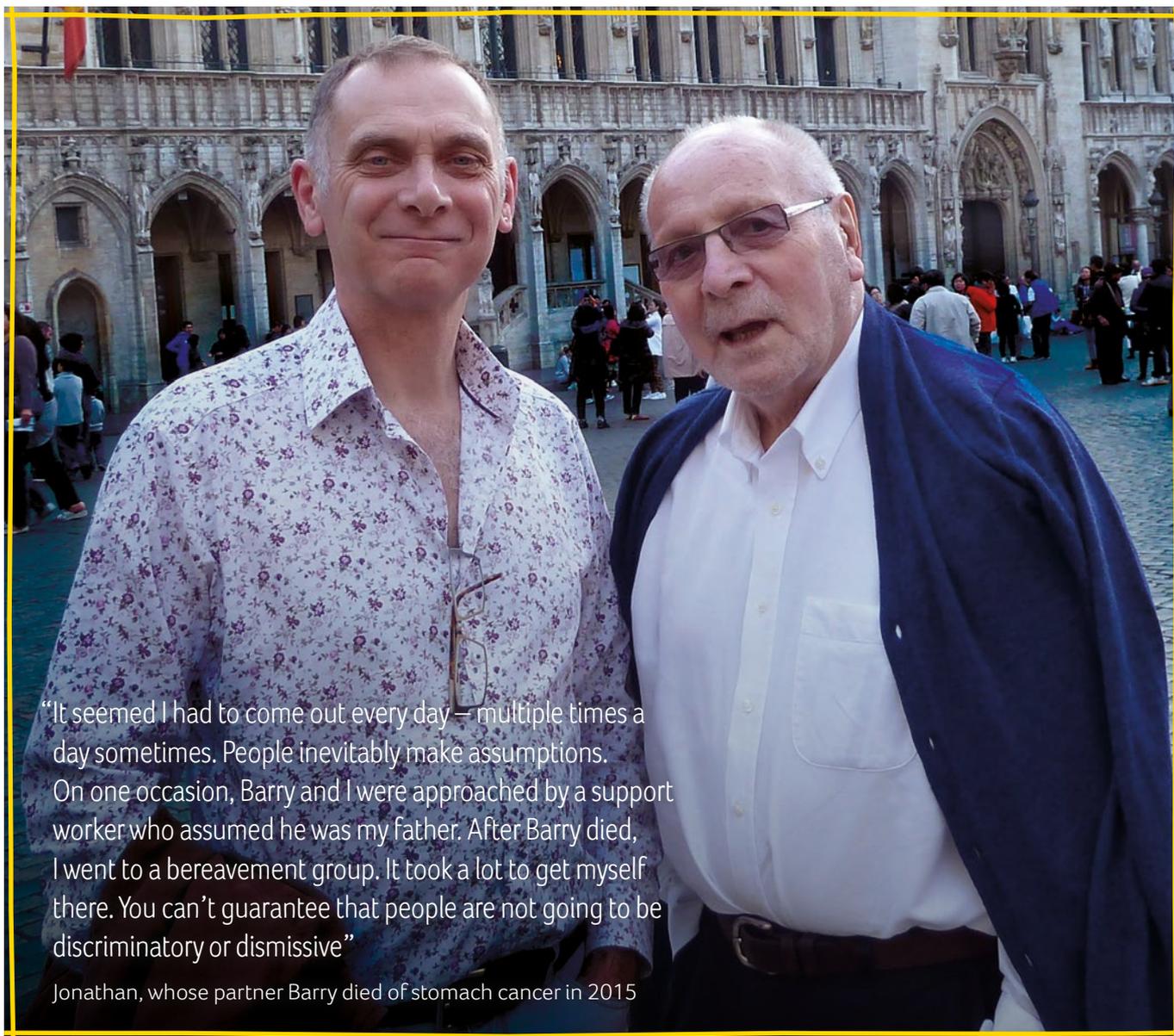
This year, we:

- responded to 56 government consultations across the four nations of the UK
- produced 71 briefings and held 13 events for elected representatives in the Parliaments and Assemblies of the UK
- reinforced our role as a thought leader through lecture series and policy events in each of the nations
- hosted visits by 28 elected representatives to Marie Curie services across the UK.

## Tackling the issues facing LGBT people at the end of life

In June 2016, we published 'Hiding who I am', a report based on Marie Curie-funded research by Dr Richard Harding which showed that nearly three-quarters (74%) of terminally ill LGBT people in the UK are not confident that services would be sensitive to their needs. The researchers have produced 10 recommendations for health and social care providers, aimed at improving palliative care for the LGBT community.

\* nfpSynergy quarterly surveys of 1,000 people over 16 (January 2017).  
 \*\*\* nfpSynergy asked "Please indicate how much you trust each of these charities: Marie Curie?" A great deal + quite a lot, January 2017



“It seemed I had to come out every day – multiple times a day sometimes. People inevitably make assumptions. On one occasion, Barry and I were approached by a support worker who assumed he was my father. After Barry died, I went to a bereavement group. It took a lot to get myself there. You can’t guarantee that people are not going to be discriminatory or dismissive”

Jonathan, whose partner Barry died of stomach cancer in 2015

**88%**  
of people have heard  
of Marie Curie\*

Alongside this work, Marie Curie has engaged with decision-makers to shed light on the issues and bring about change:

- 30 MPs attended a drop-in event we held in Westminster.
- We organised lectures by Dr Richard Harding in Westminster and the Welsh Senedd.
- We linked up with Northern Ireland LGBT organisation The Rainbow Project and have become their first Diversity Champion from the charity sector.

## Reaching and inspiring more people

Two years ago we launched our new brand identity communicating that we care for people with any terminal illness, through the night and in their own home.

Since the launch we have been running a successful TV, radio and digital brand campaign called ‘Light in the darkest hours’ to help build awareness and understanding of Marie Curie.

Awareness, understanding and willingness to support Marie Curie has improved among women aged 45 and over – a key audience for us. The campaign has also boosted association of Marie Curie with terminal illness, family support and home nursing significantly.

# Our volunteers are helping us be there for more people

Our volunteers give their time in a wide variety of roles – from making sure their local Marie Curie Shop runs effectively to visiting people living with a terminal illness at home. Without them, our work simply wouldn't be possible, so we've been working hard to make sure we support our volunteers effectively.

## Our amazing volunteers help us by:

- fundraising in their local communities
- helping out in Marie Curie Shops
- supporting staff, patients and their families at Marie Curie Hospices
- putting on spectacular special events, such as our series of 'Brain Game' corporate auction quizzes
- acting as Patrons to raise awareness and funds
- visiting people with a terminal illness as Helper volunteers
- supporting people in hospital in their final days as Companions
- sharing their experiences of terminal illness as part of our Expert Voices Group
- sitting on our Development Boards to raise money for a specific hospice or area of the country
- assisting with admin or projects at our offices.

**400%**  
increase in Helper  
volunteer applications

We currently have 9,600 volunteers giving their skills and energy to help people living with a terminal illness. We've done a lot of work this year to identify the volunteers who are actively helping us on a regular basis. We've also focused on improving the way we support them.

How we've improved the way we work with volunteers:

- We've streamlined our recruitment checking processes which means volunteers are able to get started quicker.

- We're running new national volunteer recruitment campaigns to find the right people for more specialised volunteering roles.

As a result, our internship recruitment increased by 260% and our Helper volunteer applications are up by 400% – with 306 new Helper volunteers starting with us this year.

“How do I serve my cup of tea? Always with a smile! I enjoy the whole routine of preparing the tea trolley. But I also like the variety of chatting to the different people I meet at the hospice. My first husband, Bryan, who had cancer, was cared for here. I’ve been volunteering for almost 10 years now, and I think I’ll continue doing it for a while more!”

Beryl, who volunteers at the Marie Curie Hospice, Liverpool



# Our supporters make our work possible

The people, companies and charitable trusts that support us have a lot to be proud of – it’s thanks to them that we’re reaching more people. Here’s how they made a difference in 2016/17.

Our target	Our achievements
Invest in fundraising to make sure our resources match our ambitions.	We raised £5 million more in net voluntary income than last year – an increase of 6%
	We received £33.2 million from people leaving gifts in their Wills – the highest amount ever for our charity
	Shop profits fell by £0.3 million compared to 2015/16, to £1.4 million. High levels of competition and lower textile prices were the key factors. We’re implementing plans to increase the income our shops generate



Brian Morrison/Marie Curie

“The hospice team cared for my mum with compassion and dignity, and also gave me the support I needed. Preparing for the future is not easy. That’s why I decided to leave a gift in my Will to Marie Curie so they can continue to be there for the people who need them.”

Peter Gilbert, whose mum, Florence, was cared for at our Belfast hospice

## Supporting regularly

The regular gifts we receive every day from generous members of the public are the lifeblood of our charity. This year, 45,579 new supporters agreed to support us regularly, pledging £5.9 million per annum via direct debit.

## Supporting our nurses

Between November 2016 and February 2017, we ran fundraising campaigns at Manchester Victoria, Edinburgh Haymarket and Oxford railway stations, encouraging travellers to support a local Marie Curie Nurse by joining their ‘team’. Each eight-week campaign saw more than 600 people signing up to give a regular donation.

## Support for the future

Gifts left to Marie Curie in Wills make up around one third of our voluntary income. In 2016/17, we received £33.2m from 1,523 gifts in our supporters’ Wills, including the largest gift in a Will we’ve ever received.

## Support through events

Our successful series of ‘Brain Game’ corporate quiz evenings went from strength to strength. The four existing events (London, Housebuilder, West Midlands and Glasgow) were joined by a new Yorkshire event, and together they were attended by 2,198 people and raised an incredible £784,000 towards local nursing and hospice services.

“Making a regular donation to Marie Curie helps ease the grief we feel after my sister’s passing. We know that the money we donate goes towards funding the great work Marie Curie staff do when families are most in need.”

Steve and Diane Johns, Marie Curie supporters

## Supporting the Great Daffodil Appeal

In March 2017, more than 23,000 volunteers, including 384 fundraising groups, collected in their local communities as part of the Great Daffodil Appeal.

We launched the appeal by unveiling our Garden of Light – an outdoor installation of 2,100 illuminated daffodils, each representing a Marie Curie Nurse, and featuring audio extracts from letters of thanks from families for the care they received. The garden toured London, Edinburgh and Belfast throughout March.

In addition, we ran a campaign across TV, radio and digital encouraging people to donate and wear a daffodil. 40% of our key audience said they had donated during the appeal, an increase of 14% versus our last comparable campaign in 2015.

As of August 2017, the Great Daffodil Appeal has raised £6.6 million, including almost £550,000 from our collection weekend with Morrisons, with more expected.



## A new direction for Marie Curie Shops

It's a challenging time for Marie Curie Shops, but we're making changes to enhance our customers' experience, as well as introducing new ideas to widen our reach:

- As part of the Great Daffodil Appeal, some of our shops displayed memory windows where people could donate to add a memory of a loved one.

This raised an extra £4,000 over the Mother's Day weekend.

- We are running a gift shop two days a week at the Marie Curie Hospice, West Midlands.
- We are providing more development opportunities for our shop staff and volunteers, to make our shops great places to work.



Peter Bolter/Marie Curie

£1.1 million  
raised by Superdrug



## Support from our corporate partners

We're proud to work with companies across the UK to create partnerships with real impact. Through their generosity, and the enthusiasm and commitment of their staff, we're able to reach more people and their families living with terminal illnesses across the UK. This year our partners raised over £4.6 million to support our work.

### How our corporate partners helped this year:

- £500,000 donated by the National Garden Scheme
- 912 Marie Curie Nurses trained by Barclays Digital Eagles staff to use new tablet devices, enabling them to connect with other nurses and access information and resources
- £1.1 million raised by Superdrug
- £168,000 raised by the employees of Southern Health and Social Care Trust in Northern Ireland, mostly through a series of 'Southern Trust does Strictly Come Dancing' events

## Support through partnership

We work with a number of philanthropists and charitable trusts and foundations, helping them achieve their charitable aims by enabling them to support Marie Curie's work. This year, they gave generously towards all areas of our work – nursing, hospices, volunteering, information and support, and research.

### This year, the support of our philanthropic partners has helped:

- fund 123 full days of our specialist hospice care, benefitting thousands of people
- provide much needed equipment at our hospices – from beds to syringe drivers for giving medication
- fund the work of a specialist children's bereavement counsellor at our Liverpool hospice
- answer 3,000 calls to our Support Line.

# Our people drive us forward

It's thanks to the commitment and expertise of our staff and volunteers that we're able to do all that we do for people living with a terminal illness, and their families. This year, we began a major improvement programme to help them achieve more for Marie Curie, whatever their role.

Our target	Our achievements
Value our people and support them in doing their jobs well	<p>94% of staff are proud to tell people that they work for Marie Curie – 9% higher than last year and the benchmark average</p> <p>73% of staff said they would recommend Marie Curie as an employer – 11% higher than the benchmark average and 16% up on the previous year</p> <p>We made significant improvements to our recruitment and induction processes</p>
Invest in expertise and equipment so we are communicating effectively with all our people	<p>We gave all Marie Curie nursing staff handheld devices, to improve the way we provide information</p> <p>We put in place a new patient administration system in four of our hospices. This means clinicians can access patient data from the NHS</p> <p>We launched a major initiative called Reaching Higher to improve the efficiency and effectiveness of our corporate services</p>

In 2016, we began a programme of transformation called Reaching Higher. Its scope is to make planned improvements to our caring services, as well as the internal systems and processes that support our front-line services and our vital fundraising activity.

In line with our strategy, Reaching Higher will help us to improve the care we provide, reach more people who need us and build a stronger and more sustainable Marie Curie for the future.



Ben Gold/Marie Curie

# Our targets for 2017/18

Our five-year strategic plan 2014-19 sets out our overarching strategic objectives. Here are our priorities for 2017/18.

We will reach more people and their families living with a terminal illness

- Improve the operation of existing services, partner with others in new ways and develop closer integration between our home nursing services and our hospices.
- Build on our information and support service to grow the number of calls and web chats that we deliver.
- Extend the support our volunteers offer through our Helper and Companion services.
- Prioritise the quality of our services, maintaining our excellent score for the number of people saying they are likely to recommend us to their friends and families, and ensuring we meet our rigorous standards of clinical quality.

We will inspire more people to support our work

- Invest in our fundraising activities, to raise awareness of our work and the levels of need, and promote the ways in which people can help us.
- Review and develop our retail network.
- Seek to ensure sustainable funding, while continuing to meet the very best standards of practice in the way that we work with all of our supporters.
- Make sure that every one of our supporters has a positive experience, whether they are raising funds, donating, volunteering or participating in our events.
- Continue to promote our brand.



Ben Gold/Marie Curie

We will improve the way terminally ill people are cared for across the UK

- Maintain our spending on palliative care research grants, continuing to be the largest charitable funder of palliative and end of life care research in the UK.
- Use our knowledge and expertise to improve care, for example by building on our Palliative Care Knowledge Zone to provide information and support for health and social care professionals who work in palliative care but are not considered specialists.
- Lay the foundations for the future of innovative and tailored palliative and end of life care through the Marie Curie Design to Care programme.
- Campaign to remove barriers to end of life care for LGBT people.
- Highlight hidden challenges of palliative cancer care and the differences in support for people with different types of cancer.
- Promote awareness of the growth in the need for palliative care and how the level of resources and how they are deployed impacts on how and where people die.

We will manage our charity as effectively and efficiently as possible

- Respond to the pressure of fast-growing need and the challenges of raising enough funds by continually improving the reach, reliability and cost-effectiveness of our services.
- Bring together all of our internal service teams to ensure consistent, proportionate, effective and efficient support for volunteers and employees.
- Make sure that Marie Curie continues to be a great place to work and maintain high levels of volunteer and employee engagement.
- Continue to build our portfolio of learning and development opportunities for employees, enabling the development of our nursing services and hospices.

# Where we get our income

This year, the combined efforts of our supporters, along with income from the NHS, helped us raise £142.2 million\*.

## **Legacies £33.2 million**

Gifts left in Wills were our biggest source of income in 2016/17.

## **Individual giving £32.3 million**

This is made up of generous donations from members of the public.

## **NHS funding – nurses £24.2 million**

We receive funding from the NHS for the care they commission from Marie Curie Nurses.

## **Investment and other income £2.1 million**

We received income from the funds we have invested, along with grants received from organisations like the Big Lottery Fund and other income.

## **Corporate/trusts £11.4 million**

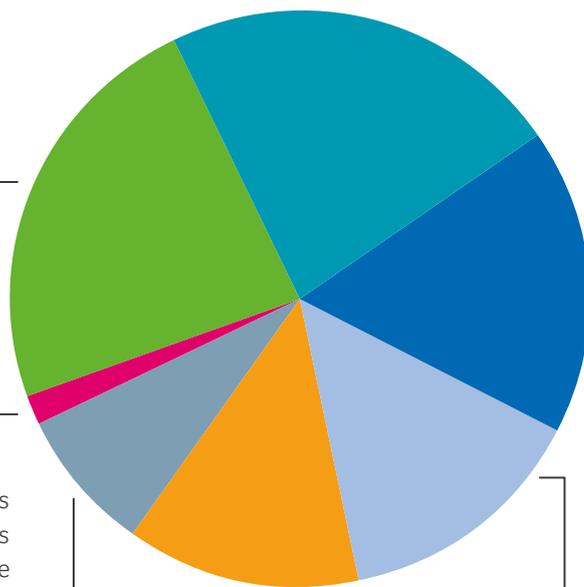
This is money raised through the generous contributions of our corporate partners, their staff and customers, and charitable trusts.

## **NHS funding – hospices £18.8 million**

The NHS contributes towards the cost of care provided in our hospices.

## **Community fundraising £20.1 million**

Volunteers helped us raise money in their local communities through a huge range of fundraising activities.



\*Total excludes retail activities

# How we spend our funds

We spent £149.5 million\* on our core activities: crucial caring services, vital research into terminal illness, campaigning to improve end of life care and improving awareness of our activities and generating future income.

**Nurses**  
**£50.4 million**

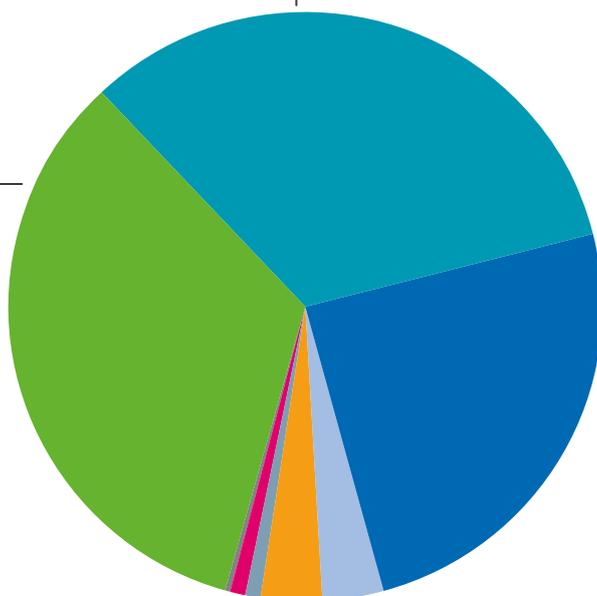
Our nurses provide crucial care for people in their homes, day and night (page 10).

**Hospices**  
**£49.4 million**

Our nine hospices provide a full range of palliative care services, including in-patient care, outpatient services and homecare visits (page 14).

**Generating future income**  
**£37.0 million**

We invest in our fundraising activities to ensure we can raise vital funds to support our charitable work (page 28).



**Investment management**  
**£0.1 million**

**Marie Curie Helper**  
**£1.3 million**

This service offers face-to-face support from trained volunteers for people living with a terminal illness, and their families (page 20).

**Information and support**  
**£1.4 million**

We provide practical information and emotional support over the phone, via the web and through booklets (page 18).

**Research and development**  
**£4.8 million**

We carry out and fund research into better ways to care for people living with a terminal illness (page 22).

**Policy, information and awareness**  
**£5.0 million**

We campaign for changes that will benefit people with a terminal illness and seek to increase awareness of who we are and what we do, so we can support more people (page 24).

# How we fundraise

Without the support of the public we would not be able to provide our vital services. We believe that it is essential that we are clear and open about how we raise our funds – it's how we build and maintain the trust of our supporters and stakeholders, whose generous support enables us to do what we do.

## Ways to support us

We offer existing and potential supporters a broad range of ways to support our charity. Supporters raise money for us through many activities, including public collections and events like our famous Blooming Great Tea Party.

Supporters can sign up for regular giving through a variety of methods. These include face-to-face fundraising in a public place, for example on a high street; or at a private site such as a shopping centre.

We also develop opportunities for people to raise money for us by participating in exciting challenge events, overseas treks, our raffle programme and more.

We are also supported by a number of charitable trusts and foundations, as well as philanthropic gifts from major donors.

## Corporate partners

Marie Curie works with a number of corporate partners. These partnerships encourage their employees' fundraising to support existing activity and also raise valuable funds from cause-related marketing and other promotional activities.

## Fundraising agencies

Some of our other fundraising activity is conducted on our behalf by carefully-selected professional fundraising agencies. We don't use agencies for street fundraising, but we do work with an agency to carry out door-to-door fundraising as this is a cost-effective way for us to manage the activity we

undertake each year. We also work with agencies to telephone existing supporters to talk about their donation and, on some occasions, to ask for a further donation.

We work very closely with our agencies to ensure they represent our work and our organisation to the highest standards. None of our fundraisers, whether employed by us or one of our agencies, are paid on a commission basis.

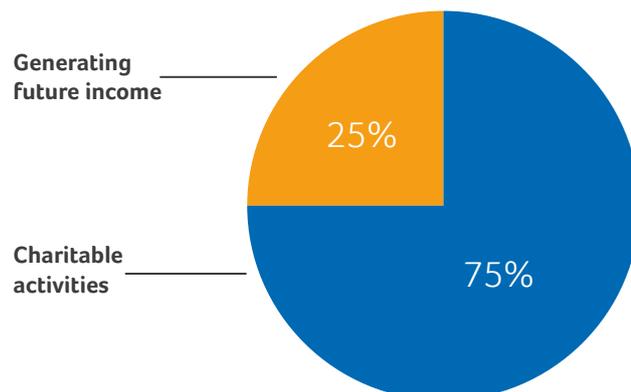
## How we spend a £1 donation

We're committed to using our supporters' generous donations effectively, with the aim of providing as much care and support to as many people as possible. We spend some of the income raised on generating future income. This is to make sure that we can carry on providing care and support in the future.

Without investment in fundraising, we'd have a lot less overall to spend on helping people with a terminal illness and their families each year and we wouldn't be able to keep providing the same levels of care and support in the future.

For every £1 we spend:

- 75p goes on delivering and improving care and support for people with terminal illnesses
- 25p goes on generating future income.



# How we manage our fundraising

## Regulation

Marie Curie is registered with the new Fundraising Regulator and committed to adhering to the Code of Fundraising Practice. Marie Curie contributed to the costs of establishing the new Regulator.

We have had no adjudications and have had no significant failures to comply with these standards. We review compliance through audit, mystery shopping or monitoring feedback and take corrective action where required.

## Standards and monitoring

Marie Curie is committed to following the highest ethical standards and to ensuring a quality supporter experience. We have detailed policies and procedures in place that in many cases go beyond the minimum requirements for the sector, and we regularly monitor ourselves and our agencies through a range of methods (eg seed lists, regular internal audits, mystery shopping, call listening etc) to ensure that all Marie Curie fundraisers and those who work on our behalf are aware of and are adhering to our high standards.

## Complaints

We report our complaints on a calendar year basis to align with the Fundraising Regulator's requirements. The number of complaints received for the 12 months to 31 December 2016 regarding fundraising was 1,438. This compares to 1,465 for the previous year.

The level of our complaints was lower than the benchmark rate for 16 out of the 25 areas reported on by the Fundraising Standard Board in 2015. The nine remaining areas were less than 0.4% over the benchmark reported.

## Managing communications

Most people who donate money to us want to know how their money is making a difference. So we ask whether they would like us to keep in touch with them so we can update them on our work and how they've helped us.

From time to time we ask supporters if they would like to support us further – for example by increasing their donation or by taking part in a particular event.

We ask supporters their preferences as to how we communicate with them. We give them the option to let us know if they prefer less contact or no longer wish to hear from us, and always respect their wishes.

We do not sell or exchange lists of data with any other charities or companies. For further details please see our privacy policy at [mariecurie.org.uk/privacy](http://mariecurie.org.uk/privacy)

## Protecting the public

All Marie Curie fundraisers, including agency staff acting on our behalf, receive detailed training in how to identify and protect people in vulnerable circumstances. If we encounter someone showing signs of distress, confusion or vulnerability our fundraisers are trained to politely end the conversation and refuse any donation offered in such circumstances. In the unlikely event of a donation being taken in such circumstances, we refund the donation.

## Our fundraising promise

As a charity, we believe you need to feel that we're using our resources effectively. That's why we make these promises to you.

**We promise** to provide information about our work and our finances so you can see how your money is being spent and what a difference you're making to people living with a terminal illness.

**We promise** to communicate with you in a way that suits you. If you tell us you'd prefer less contact or don't want us to hear from us at all, we'll respect your wishes.

**We promise** to check at the start of every conversation, on the phone or in person, that you're happy to speak to us.

**We promise** never to sell your data to any third party. We will not share your details with other charities.

**We promise** to adhere to all industry guidelines and regulations and require others acting on our behalf to do the same. We'll take appropriate action promptly if we find any failure to meet our standards. We will regularly monitor the activities and compliance of our suppliers, including for the protection of vulnerable people.

**We promise** to make it easy for you to tell us your contact preferences and we're here to talk to you about our work or answer any questions.

# Financial review

This year saw the charity's income rise by £2.9 million (2%) to £159.1 million.

Fundraising income was lifted by an increase of £4.5 million from legacies including a single legacy of £5 million. Retail income was 4.6% lower, reflecting trends in the charity retail sector due to competition and lower textile prices.

Total expenditure was unchanged at £165 million. Within the total, the charity was able to lower the cost of generating income and increase the expenditure on charitable activities.

Net expenditure before gains and losses for the year on unrestricted funds was £4.5 million (2015/16 – net expenditure £7.1 million), which was lower than budgeted. The deficit reflects deliberate planning by our trustees to support the expansion of our services and investment in brand and infrastructure development.

Income	2016/17 £m	2015/16 £m	2014/15 £m
Fundraising	97.1	94.4	92.7
NHS	43.1	41.9	41.8
Other statutory income	0.4	0.7	1.9
Retail	17.0	17.8	18.3
Other	1.5	1.4	1.8
<b>Total</b>	<b>159.1</b>	<b>156.2</b>	<b>156.5</b>

Expenditure on charitable activities			
Hospices	49.4	47.9	48.0
Nurses	50.5	47.7	48.1
Helper	1.3	1.0	0.9
Information and support	1.4	2.1	1.4
Research and development	4.8	4.7	3.8
Policy, information and awareness	5.0	6.5	3.8
<b>Total</b>	<b>112.4</b>	<b>109.9</b>	<b>106.0</b>

## Charitable activities

Income from the NHS towards the cost of Marie Curie Nursing Services increased by 3%, as more care was commissioned from Marie Curie Nurses compared with the previous year and patient numbers rose by 6%. The main areas of expansion were Scotland and London and the south-east. Expenditure on our nursing services increased in line with the higher activity

and also included the costs of a review to deliver efficiency savings in future years.

Income from the NHS for hospices was £0.1 million higher, with no significant changes in an individual hospice. Expenditure on hospices rose by 3%, mainly due to the cost of using agency staff to fill vacancies.

Expenditure on Marie Curie Helper increased by 25%. The Portsmouth service started during 2016/17 and there was the full year impact of the seven new services launched in 2015/16. Expenditure on information and support fell to £1.4 million following the launch costs incurred in the preceding two years.

Expenditure on policy, information and awareness fell by £1.5 million following lower expenditure on the campaign to highlight the work of Marie Curie Nurses in the community and promote the need for palliative care.

Expenditure on research and development was £4.8 million. Expenditure in 2016/17 included a new funding commitment of £2.2 million to Cardiff University for the next five years. Expenditure in 2015/16 included new funding commitments of £3.0 million to UCL to fund staff for the next five years and to fund a specific programme of work for the next three years. Both years include expenditure on research leads based in the charity's hospices.

## Fundraising and retail

Overall, voluntary income increased by £2.7 million to £97.1 million – a rise of 2.8%.

Costs of generating voluntary income decreased by 8% following a restructuring of some fundraising teams and reduced activity in some fundraising channels and events.

Sales of donated goods by the charity's chain of shops were 4.6% lower than in the previous year. This reflects trends in the general charity retail sector and includes the impact of reductions in the price of rag recycling and high levels of competition. Net profit from retail activities fell by £0.3 million from the previous year, to £1.4m.

## Investments and pensions

Marie Curie's investment portfolio rose in value by £5.3 million compared with a decrease of £1.5 million in the previous year. The return on the charity's investment portfolio was 16.0%, which

was below the benchmark set by the Investment Committee of 16.7%.

The Marie Curie Cancer Care Defined Benefit Pension Scheme had a surplus of £1.9 million at March 2017 compared with a surplus of £0.9 million at March 2016. This was a result of a good return on investments and the special contributions of £0.7 million pa that were agreed in 2015 to reduce the deficit. These offset an actuarial loss on liabilities arising from the lower discount rate. An updated full actuarial valuation as at 31 March 2017 is currently being prepared.

## Result

The total net deficit before investment gains and losses was £6.0 million – compared with £9.1 million in 2015/16.

With hospices in nine major locations and nursing services that cover most of the UK, Marie Curie's activities are a key part of the health infrastructure of the UK. The charity has also continued to extend the Marie Curie Helper service and information and support services.

In order to meet the growing needs of people living with a terminal illness, the Board of Trustees decided to invest some of the charity's reserves and accept a deficit position for a period, as part of the strategic plan to grow services.

Voluntary fundraising income is increasing, although the shops trading environment remains challenging. In 2015/16 the charity started a review of its processes and cost base, which has started to deliver some savings and is projected to deliver more in 2017/18. Consequently it is projected that the charity will return to a surplus position, although the environment remains uncertain.

The trustees have approved the use of the General Fund to fund the deficit until this time. The trustees are carefully monitoring the charity's expenditure and progress in developing income and will take any action needed if there is any significant risk to the charity's financial position and ability to support its core activities.

## Reserves

All charities are required to consider how much they need to hold in reserves. The extent varies depending on the scale and nature of the charity's activities.

Marie Curie provides a range of critical health services upon which communities across the UK are dependent. To fund these services it is reliant on a number of fluctuating income streams from donations, legacies, shop profits and investment income.

To enable the charity to make commitments to each community to provide its key hospice and nursing services, it needs to maintain a level of reserves so that it can continue its operations in the event that an unforeseen shortfall in voluntary income or increase in costs creates an imbalance of funding. The trustees calculate the amount that is required to be held based on the assessment of the risks affecting the income and expenditure of the charity. In assessing the amount of reserves required to be held, the risk of a shortfall in income or an increase in cost is estimated and a sum is held to cover the potential shortfall for each element of the charity's income and expenditure. The risk weightings range from 2% to 25% depending on the nature of the activities.

Based on these calculations, the trustees estimate that a total of £42.0 million of unrestricted reserves is required. This represents approximately three months of the charity's operating expenditure for 2017/18. The level of available unrestricted reserves (comprising the General Fund, and the Capital Investment Fund) at 31 March 2017 was £46.9 million, which is above the target level.

This is a change from previous years when only the General Fund was compared to the benchmark. The Capital Investment Fund is designated by Marie Curie for future expenditure to modernise Marie Curie Hospices and other capital projects, but is not committed as at the year end. This fund is therefore available to be included in the assessment of required reserves, but once expenditure

has been incurred, will not be available in future years.

Marie Curie has operated at a deficit in 2016/7 and is budgeting to make a smaller deficit in 2017/18 (arising from a focus on increased income generation and a number of cost saving initiatives, including the restructuring of support services and a review of procurement across the organisation). This deficit will need to be funded by the reserves in the short term until the deficit is eliminated and reserves recover.

In addition to the Capital Investment Fund, the trustees have set up further designated funds to underpin the charity's medium-term investment programme which will require funding:

- The Hampstead Capital Fund is for capital projects at this hospice and has been set aside from a specific legacy.
- The Palliative Care Development Fund has been almost fully used to support the charity's commitments to developments in palliative care. Full details are shown in Note 15 to the financial statements.

## Investments

Marie Curie invests the funds held in its General, Designated and Restricted Funds in order to obtain a return. The investments are managed according to the powers defined in the charity's constitution by independent investment managers appointed by the trustees. Investment managers have been instructed not to directly invest in any organisation predominantly involved in the production of tobacco products.

The amounts held in the Capital Investment Fund and the Palliative Care Development Fund are held for future expenditure and are invested in cash investments. The restricted funds of the charity are also invested in cash investments.

The trustees assess the working capital requirements of the charity and, with advice from investment advisers, the Investment Committee determines the asset allocation for the General Fund.

The majority of the charity's investment fund is managed on a discretionary basis by Newton Investment Management Limited. These investments comprise investments in UK and international equities and fixed interest securities. Marie Curie's property investments were invested in the Charities Property Fund. The hedge fund investments are in the Forester Diversified Fund of Funds. The investment in the Nyes Ledge Capital Horizon Fund was sold during the year.

The net reduction in the investment portfolio was £3.3 million during 2016/17. It was reduced in order to fund the development of the charity's activities.

The performance of the charity's fund is targeted to achieve a return over the medium term in excess of a blended benchmark calculated from published indices appropriate for each asset class. The return from the total portfolio over the year ended 31 March 2017 was 16.0%, which was below the blended benchmark of 16.7%. Marie Curie is closely monitoring the performance of its investment managers.

#### Asset allocation as 31 March 2017

	Actual £m	Actual %	Target %
UK equities	9.0	23.4	17.5%-27.5%
International equities	13.9	36.3	23%-40%
Fixed income	2.0	5.2	4%-7%
Global bonds	5.3	13.9	7.5%-17.5%
Property	3.0	7.8	5%-8%
Hedge funds	5.1	13.4	13.5%-18.5%
Cash	-	-	0%-10%
<b>Total</b>	<b>38.3</b>	<b>100.0</b>	

#### Fixed assets

The majority of Marie Curie's fixed assets comprise the land, buildings, furniture and equipment at the nine hospices. Other assets include the interior fittings and equipment at the charity's shops, IT systems and office equipment. Capital expenditure for the year was £2.9 million (2015/16 – £4.0 million). A summary of changes to fixed assets during the period is set out in Note 7 to the financial statements.

#### Grant-making policies

Marie Curie provides research grants to develop understanding and improve effectiveness of palliative care. Applications are subject to peer review by experts in the field. Grant recipients are required to submit annual progress reports.

# Employees and volunteers

Information is disseminated to all staff and many volunteers at all locations through briefings, meetings, newsletters and the charity's intranet. The charity consults staff and volunteers on key issues. Methods include an annual survey and an employee forum.

Marie Curie is committed to being a diverse and inclusive charity, providing equal opportunities for employees and volunteers. We aim to demonstrate support for all employees and volunteers, valuing each individual's contribution regardless of age, gender, gender identity, sexual orientation, marital status, civil partnership status, disability, nationality, race, religion or belief.

Appropriate arrangements have been made for the recruitment of people with disabilities, as well as the continued employment and training, career development and promotion of people with disabilities currently employed by the charity. Should any staff become disabled, every effort is made to continue their employment and, where necessary, to provide reasonable adjustments and support.

Pension schemes are available to employees, details of which are set out in Note 18 to the financial statements.

Every year volunteers support the charity in a wide range of roles in our hospices, shops, offices and research units, and through our Helper service. Volunteers also play a crucial part in our diverse fundraising events and initiatives, particularly the Great Daffodil Appeal held in March each year. Volunteers make what we do possible and we are very grateful to each and every volunteer for the time and skills contributed to the charity and its work.

## Remuneration policy

The talented staff we employ, alongside our skilled and committed volunteers, are vital in providing the high-quality care we offer to people living with any terminal illness, and their families.

Marie Curie is a large and complex organisation with more than 4,400 staff and 9,600 volunteers helping to provide this care and support. It is, therefore, essential that we are able to attract and retain people with the right skills, talents and insight, so we can run the charity as efficiently and effectively as possible. To do so, we review our salaries annually and seek to offer suitably competitive levels of reward and appropriate recognition for all our staff, in line with the guiding principles outlined below:

- Any award must be affordable and reflect the overall financial position of the charity.
- Pay should be at or above the median market rate.
- For registered nursing staff on Marie Curie pay scales, pay should be within the range of the NHS Agenda for Change rates.
- We work towards rewarding achievement rather than paying annual increments in recognition of longevity.
- Where appropriate, we will defend our ability to attract and retain staff who have the skills and abilities we need.
- We will meet our statutory obligations in respect of pay.

To help us achieve this, we will continue to review labour market information within appropriate sectors and regularly benchmark our roles to ensure our approach is consistent with our peers'. The basic salaries paid to all our employees, including the Executive Team and the Chief Executive, are reviewed at the end of each financial year to ensure we are remunerating competitively and consistently against the relevant sectors. No individual performance bonuses are paid.

Marie Curie uses a job evaluation system to ensure a fair and transparent process in determining all job performance levels. These are then benchmarked against similar jobs in other charities and relevant organisations.

# Governance

## Legal structure

Marie Curie is a company limited by guarantee (incorporated on 3 May 1952, registered number 00507597) and a registered charity in England and Wales (charity number 207994) and Scotland (charity number SC038731).

## Subsidiary undertakings

The charity's principal subsidiary undertakings as at 31 March 2017 were all wholly owned and registered in England and Wales. Details are included in Note 19 to the financial statements. Some of the funds required to support the operations of the charity are raised by means of trading activities through a wholly owned subsidiary, Marie Curie Trading Limited.

## Board of Trustees

The Board of Trustees is legally responsible for directing the affairs of the charity.

Trustees are the directors of the company and serve for renewable terms of three years. The Board comprised 16 trustees as at 31 March 2017, with a wide range of skills and experience including clinical and professional expertise.

The Board meets at least six times each year to regularly review and direct Marie Curie's strategy, budget and performance.

Day-to-day management of the charity is delegated through the Chief Executive to the Executive Team and other members of senior management. Specific responsibilities are also delegated to a number of committees. Certain matters are reserved for Board approval, including changes to strategy and budget.

## New and retired trustees

The Board of Trustees is delighted to welcome five new trustees – Rachel Burman, Steve Carson, John Compton, Richard Flint and Patricia Lee.

The Board of Trustees would like to thank Sarah Beaver, Andrew Marsden, Caroline Stirling and Alan Shannon who stepped down after many years of dedicated service as trustees.

## Appointments and training

Advised by the Nominations Committee, the Board of Trustees appoints all new trustees and committee members. Trustees are recruited through a process of advertisement, application and interviews and based on selection criteria, which ensures a broad range of relevant skills and experience. An induction programme is offered to all new trustees and further updates and training are provided as required. This includes a visit to a Marie Curie Hospice and meetings with the Chief Executive, members of the Executive Team and other senior management as appropriate.

## Public benefit

The trustees have taken account of the Charity Commission's general guidance on public benefit when reviewing the charity's aims, objectives and planning.

## Committees

The **Audit and Risk Committee** meets at least three times a year to review the charity's annual financial statements, internal financial control and risk management systems and external and internal audit matters.

The **Clinical Governance Trustees Committee** meets four times a year to review strategy for clinical services and research and oversee clinical governance, risk management, quality and safety, including being assured that services meet the needs of patients, applicable quality standards and regulatory compliance requirements.

The **Investment Committee** meets four times a year to review the investment strategy and monitor the returns achieved by Marie Curie's investments and the performance of the charity's investment managers.

The **Nominations Committee** meets at least once a year and on an ad hoc basis to review the composition of the Board and Committees, diversity and succession planning, and nominations for new appointments.

The **Retail Committee** meets four times a year and advises on the charity's shops and other trading activities.

The Board of Trustees is also advised by **National Advisory Boards** in Scotland, Wales and Northern Ireland, each of which is chaired by a trustee.

Please see pages 72-73 for a full list of trustees and independent members of committees.

## Executive Team

Responsibility for the day-to-day management of the charity is delegated by the Board of Trustees to the Chief Executive and Executive Team, which includes making recommendations to the Board of Trustees about strategy, budget and planning. The Executive Team meets formally as Executive Committee monthly. Please see page 73 for further information about the Executive Team.

## Auditors

In accordance with Section 489 of the Companies Act 2006, a resolution proposing that KPMG LLP be re-appointed as auditor of the charity will be put to the Annual General Meeting.

# Principal risks and uncertainties

The Board of Trustees has overall responsibility for risk management for Marie Curie and its subsidiaries, which includes ensuring that there are reasonable procedures in place for the prevention and detection of major risks, including fraud and other irregularities. Our risk management frameworks are designed to mitigate (not eliminate) risks and to provide reasonable (not absolute) assurance against material errors or loss.

Processes in place for effective risk management include:

**Planning and performance:** The charity operates a comprehensive annual planning and budgeting process. Performance is monitored through the use of activity and financial targets and reported to the Board of Trustees, which compares actual results against activity targets. A phased budget allows trustees and the Executive Committee to link financial performance with resource and activity levels.

**Risk reviews:** The charity has risk management policies and procedures through which risks arising from the existing operations and strategic development are identified and managed. Risks are assessed by the Executive Team (top down) and by senior

managers (bottom up) to identify and analyse risks on relevant activities. Risks are assessed according to the impact on the charity and their likelihood of occurrence. Procedures and controls are in place and are regularly enhanced to manage the risk. Key charity-wide strategic and operational risks are reviewed and monitored by the Executive Team which is chaired by the Chief Executive. The Audit and Risk Committee reviews a number of key risks at each meeting and regular updates are reported to the Board of Trustees by the Chief Executive. Systems implemented to mitigate key risks are continually monitored and improved.

**Internal audit:** Internal controls are subject to scrutiny by the charity's Internal Audit Department, which carries out a programme of cyclical reviews throughout the charity. The Audit and Risk Committee reviews and approves the internal audit plan, which is aligned to major risks. Regular reports from Internal Audit are reviewed by the Audit and Risk Committee and Executive Team on the effectiveness of controls, progress against the audit plan and recommendations from audits.

An overview of major risks are shown in the table below:

## Risk

## Management

**Service quality:** Patients suffer harm or ineffective treatment

- Robust clinical governance processes and oversight
- High-quality training for staff
- Audit and compliance visits
- Reviewing and acting upon patient and carer feedback, incidents and complaints and trends

**Services:** Marie Curie services may be impacted by changes in NHS commissioning, health policy and competition pressures

- Engagement with the NHS
- Review of policy of each of the national governments
- Review of service effectiveness
- Piloting and development of new services
- Diversification and geographical spread of services

**People:** Failure to recruit and retain the required skills and talent to deliver our services and strategy

- People strategy and planning
- Development programmes
- Regular staff and volunteer surveys and responses
- Benchmarking of salaries and benefits

**Financial:** The charity is reliant on voluntary income to support critical healthcare services, which is subject to increased competition and changes in market conditions, regulation and behaviours

- Campaigns to maintain awareness of palliative care and investment in fundraising activities
- Diversified income streams
- Monitoring of market, trends, income and expenditure and regular financial planning and review
- Financial reserves enable services to be maintained even if fundraising income fluctuates

**Reputation:** Incidents or events may damage or negatively impact the charity's reputation or operations (eg fraud, non-compliance, security, major incidents)

- Preventative policies and procedures
- Mechanisms to detect, investigate, report, respond
- Monitoring of feedback, complaints, incidents, trends
- Support from specialist resource

**Data and information security:** Loss of personal data or confidential information (including patient data) may have an impact on patients, supporters and the charity

- Oversight of strategy, policies, incidents and trends
- Security audits
- Mandatory training of staff
- Information security reviews

## Statement of responsibilities of the trustees

The trustees (who are also the directors for the purposes of company law) are responsible for preparing the Trustees' Annual Report and Strategic Report and the financial statements in accordance with applicable law and regulations.

The charity together with its subsidiary undertakings forms a group. Company and charity law requires the trustees to prepare financial statements for each financial year. Under that law the trustees have prepared the group and parent company financial statements in accordance with UK Accounting Standards and applicable law (UK Generally Accepted Accounting Practice), including FRS 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland.

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 charitable company and of the group's excess of expenditure over income for that period.

In preparing each of the group and charitable company financial statements, the trustees are required to:

- select suitable accounting policies and then apply them consistently
- make judgements and estimates that are reasonable and prudent
- state whether applicable UK accounting standards have been followed subject to any material departures disclosed and explained in the financial statements
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the group and the charitable company will continue its activities.

The trustees are responsible for keeping adequate and proper accounting records. These must be sufficient to show

and explain the charitable company's transactions. They should disclose with reasonable accuracy at any time the financial position of the charitable company and enable it to ensure that its financial statements comply with the Companies Act 2006 the Charities and Trustee Investment (Scotland) Act 2005, and regulation 8 of the Charities Accounts (Scotland) Regulations 2006 (as amended). The trustees have a general responsibility for taking such steps as are reasonably open to it to safeguard the assets of the group and to prevent and detect fraud and other irregularities.

The trustees are responsible for the maintenance and integrity of the corporate and financial information included on the charitable company's website. Legislation in the UK governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

In so far as the trustees are aware, there is no relevant audit information of which the charity's auditor is unaware and they have taken all the steps that they ought to have taken to make themselves aware of any relevant audit information and to establish that the charity's auditor is aware of that information.

This confirmation is given and should be interpreted in accordance with the provisions of s.416 of the Companies Act 2006.

**The Report of the Board of Trustees and the Strategic Report are approved on behalf of the Board of Trustees.**



Interim Chairman  
15 August 2017

# Independent auditor's report to the trustees and members of Marie Curie

We have audited the financial statements of Marie Curie for the year ended 31 March 2017, set out on pages 50 to 71. The financial reporting framework that has been applied in their preparation is applicable law and UK Accounting Standards (UK Generally Accepted Accounting Practice) including FRS 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland.

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 charity's trustees, as a body, in accordance with section 44 (1)(c) of the Charities and Trustee Investment (Scotland) Act 2005 and regulation 10 of the Charities Accounts (Scotland) Regulations 2006. Our audit work has been undertaken so that we might state to the charitable company's members and the charity's 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 charity, its members as a body and its trustees as a body, for our audit work, for this report or for the opinions we have formed.

## Respective responsibilities of trustees and auditor

As explained more fully in the Statement of Trustees' Responsibilities set out on page 48, 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.

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 regulations made under those Acts. Our responsibility is to audit the

financial statements in accordance with applicable law and International Standards on Auditing (UK and Ireland). Those standards require us to comply with the Auditing Practices Board's Ethical Standards for Auditors.

## Scope of the audit of the financial statements

A description of the scope of an audit of financial statements is provided on the Financial Reporting Council's website at [frc.org.uk/auditscopeukprivate](http://frc.org.uk/auditscopeukprivate)

## Opinion on financial statements

In our opinion the financial statements:

- give a true and fair view of the state of the group's and the charitable company's affairs as at 31 March 2017 and of the group's incoming resources and application of resources, including its income and expenditure, for the year then ended
- have been properly prepared in accordance with UK Generally Accepted Accounting Practice; and
- have been prepared in accordance with the Companies Act 2006, the Charities and Trustee Investment (Scotland) Act 2005 and regulation 8 of the Charities Accounts (Scotland) Regulations 2006 (as amended).

## Opinion on other matter prescribed by the Companies Act 2006

In our opinion the information in the Trustees' Annual Report, which constitutes the Strategic Report and the Directors' Report for the financial year is consistent with the financial statements.

Based solely on the work required to be undertaken in the course of the audit of the financial statements and from reading the Strategic report and the Directors' report:

- we have not identified material misstatements in those reports; and

- in our opinion, those reports have been prepared in accordance with the Companies Act 2006.

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

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

- the charitable company has not kept adequate and proper accounting records or returns adequate for our audit have not been received from branches not visited by us; or
- the charitable company 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.



Lynton Richmond  
(Senior Statutory Auditor)  
for and on behalf of KPMG LLP,  
Statutory Auditor

Chartered Accountants  
KPMG LLP is eligible to act as an auditor in terms of section 1212 of the Companies Act 2006

15 Canada Square, London E14 5GL  
United Kingdom

15 August 2017

# Consolidated statement of financial activities

(Incorporating the Consolidated Income and Expenditure Account) for the year ended 31 March 2017

	Note	2017			2016		
		Unrestricted funds £'000	Restricted funds £'000	Total funds 2017 £'000	Unrestricted funds £'000	Restricted funds £'000	Total funds 2016 £'000
<b>Income from:</b>							
<b>Generated funds</b>							
Donations and legacies	2	79,142	17,952	97,094	77,322	17,103	94,425
Retail sales of donated and purchased goods		10,943	6,013	16,956	11,618	6,149	17,767
Investments	3	1,027	-	1,027	1,053	-	1,053
		91,112	23,965	115,077	89,993	23,252	113,245
<b>Charitable activities</b>	4	43,276	302	43,578	42,044	567	42,611
<b>Other income</b>							
Net gain on disposal of fixed assets		42	-	42	-	-	-
Other income		425	-	425	366	-	366
<b>Total income</b>		<b>134,855</b>	<b>24,267</b>	<b>159,122</b>	<b>132,403</b>	<b>23,819</b>	<b>156,222</b>
<b>Expenditure on:</b>							
<b>Raising funds</b>							
Cost of generating voluntary income		32,151	1,438	33,589	35,167	1,210	36,377
Publicity		3,365	-	3,365	2,922	-	2,922
Fundraising trading: cost of goods sold		11,019	4,623	15,642	11,469	4,615	16,084
Investment management costs		104	-	104	89	-	89
		46,639	6,061	52,700	49,647	5,825	55,472
<b>Net incoming resources available for charitable application</b>		<b>88,216</b>	<b>18,206</b>	<b>106,422</b>	<b>82,756</b>	<b>17,994</b>	<b>100,750</b>
<b>Expenditure on charitable activities</b>							
Hospices		37,093	12,345	49,438	34,487	13,368	47,855
Nurses		44,754	5,692	50,446	42,134	5,563	47,697
Helper		198	1,061	1,259	734	277	1,011
Information and support		1,299	101	1,400	2,141	-	2,141
Research and development	5D	4,325	483	4,808	3,908	783	4,691
Policy, information and awareness		5,041	-	5,041	6,468	-	6,468
<b>Total charitable expenditure</b>		<b>92,710</b>	<b>19,682</b>	<b>112,392</b>	<b>89,872</b>	<b>19,991</b>	<b>109,863</b>
<b>Total expenditure</b>	5	<b>139,349</b>	<b>25,743</b>	<b>165,092</b>	<b>139,519</b>	<b>25,816</b>	<b>165,335</b>
<b>Net (expenditure)/income for the year before investment gains</b>		<b>(4,494)</b>	<b>(1,476)</b>	<b>(5,970)</b>	<b>(7,116)</b>	<b>(1,997)</b>	<b>(9,113)</b>
Gains/(losses) on investments	8	5,282	-	5,282	(1,485)	-	(1,485)
<b>Net (expenditure)/income for the year</b>		<b>788</b>	<b>(1,476)</b>	<b>(688)</b>	<b>(8,601)</b>	<b>(1,997)</b>	<b>(10,598)</b>
<b>Other recognised gains</b>							
Actuarial gains on defined benefit pension scheme	18	193	-	193	1,169	-	1,169
<b>Net movement in funds</b>		<b>981</b>	<b>(1,476)</b>	<b>(495)</b>	<b>(7,432)</b>	<b>(1,997)</b>	<b>(9,429)</b>
<b>Reconciliation of funds</b>							
Total funds at 1 April	15	77,402	23,918	101,320	84,834	25,915	110,749
<b>Total funds at 31 March</b>		<b>78,383</b>	<b>22,442</b>	<b>100,825</b>	<b>77,402</b>	<b>23,918</b>	<b>101,320</b>

All of the charity's activities are continuing. There were no gains or losses other than those shown above.

The notes on pages 53 to 71 form part of these financial statements.

# Balance sheets

for the year ended 31 March 2017

	Note	Group		Charity	
		2017 £'000	2016 £'000	2017 £'000	2016 £'000
<b>Fixed assets</b>					
Tangible assets	7	49,080	52,766	49,080	52,766
Investments	8	52,414	50,607	52,800	51,073
		<b>101,494</b>	<b>103,373</b>	<b>101,880</b>	<b>103,839</b>
<b>Current assets</b>					
Stocks	9	126	265	42	154
Debtors	10	10,902	10,731	10,912	10,733
Investments	11	14,381	9,377	14,381	9,377
Cash at bank and in hand		687	5,750	601	5,505
		<b>26,096</b>	<b>26,123</b>	<b>25,936</b>	<b>25,769</b>
<b>Creditors:</b>					
Amounts falling due within one year	12a	(20,982)	(20,870)	(21,875)	(21,723)
<b>Net current assets</b>		<b>5,114</b>	<b>5,253</b>	<b>4,061</b>	<b>4,046</b>
<b>Total assets less current liabilities</b>		<b>106,608</b>	<b>108,626</b>	<b>105,941</b>	<b>107,885</b>
<b>Creditors:</b>					
Amounts falling due after more than one year	12b	(7,144)	(7,821)	(7,144)	(7,821)
Provision for liabilities and charges	14	(519)	(432)	(519)	(432)
<b>Net assets (excluding pension asset)</b>		<b>98,945</b>	<b>100,373</b>	<b>98,278</b>	<b>99,632</b>
Defined benefit pension asset	18	1,880	947	1,880	947
<b>Net assets (including pension asset)</b>	<b>15</b>	<b>100,825</b>	<b>101,320</b>	<b>100,158</b>	<b>100,579</b>
<b>Funds</b>					
Restricted funds	15	22,442	23,918	22,442	23,918
Designated funds	15	41,533	41,767	41,533	41,767
		<b>63,975</b>	<b>65,685</b>	<b>63,975</b>	<b>65,685</b>
<b>Free reserves</b>					
Pension reserve	15	1,880	947	1,880	947
General funds	15	34,970	34,688	34,303	33,947
		<b>100,825</b>	<b>101,320</b>	<b>100,158</b>	<b>100,579</b>

Approved by the Board of Trustees on 15 August 2017



T Breedon, Honorary Treasurer

The notes on pages 53 to 71 form part of these financial statements  
Company number: 00507597

# Consolidated cash flow statement

for the year ended 31 March 2017

	Note	2017 £'000	2016 £'000
<b>Cash flows from operating activities:</b>			
Net cash used in operating activities		(1,502)	(6,935)
<b>Cash flows from investing activities:</b>			
Dividends received		663	651
Interest received		124	193
Capital expenditure		(2,875)	(3,953)
Sales of tangible fixed assets		55	0
Investment purchases		(9,831)	(7,520)
Investment sale proceeds		15,306	11,590
Decrease in invested cash		(2,000)	3,870
<b>Net cash provided by investing activities</b>		<b>1,442</b>	<b>4,831</b>
<b>Change in cash and cash equivalents in the reporting period</b>		<b>(59)</b>	<b>(2,104)</b>
Cash and cash equivalents at 1 April		15,127	17,231
<b>Cash and cash equivalents at 31 March</b>		<b>15,068</b>	<b>15,127</b>
<b>Analysis of cash and cash equivalents</b>			
		2017 £'000	2016 £'000
Cash at bank and in hand		687	5,750
Money market and other deposits		14,381	9,377
		<b>15,068</b>	<b>15,127</b>
<b>Note A:</b>			
<b>Reconciliation of net expenditure to net cash flow from operating activities</b>			
		2017 £'000	2016 £'000
Net income/(expenditure) for the year		(688)	(10,598)
Adjustments for:			
Depreciation		6,548	5,290
Gain on disposal of fixed assets		(42)	-
Losses/(Gains) on investments		(5,282)	1,485
Pension funding adjustment		(740)	(705)
Dividends receivable		(667)	(648)
Interest receivable		(133)	(154)
(Increase) in stocks		139	(4)
(Increase)/Decrease in debtors		(158)	(1,418)
(Decrease) in creditors and provisions		(479)	(183)
<b>Net cash (outflow) from operating activities</b>		<b>(1,502)</b>	<b>(6,935)</b>

# Notes to the financial statements

for the year ended 31 March 2017

## 1. Accounting policies

The principal accounting policies are summarised below.

### (a) Basis of preparation

The financial statements have been prepared in accordance with 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) – (Charities SORP (FRS 102)), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Companies Act 2006. The financial statements have been prepared under the historical cost convention with the exception of investments stated at market value.

The charity meets the definition of a public benefit entity under FRS 102. The charity has availed itself of paragraph 3 (3) of Schedule 4 of the Companies Act 2016 and adapted the Companies Act formats to reflect the special nature of the charity's activities.

No material uncertainties that may cast significant doubt about the ability of the charity to continue as a going concern have been identified by the trustees and therefore these accounts have been prepared on a going concern basis.

The preparation of the financial statements in accordance with Charities SORP (FRS102) requires the trustees to make judgements, estimates and assumptions that affect the application of policies and reported amounts in the financial statements. Judgements made that could have a significant effect on the financial statements and estimates are disclosed in note 1 (l).

### (b) Group accounts

The charity owns 100% of the share capital of two companies – Marie Curie Trading Limited and Marie Curie Developments Limited. The consolidated statements include the financial statements of these companies which have been consolidated on a line by line basis. No Statement of Financial Activities (SOFA) or Income and Expenditure Account of the charity has been presented as permitted by Section 408 of the Companies Act 2006.

### (c) Investments

Investments listed on a recognised stock exchange are included in the balance sheet at market value. Unrealised gains and losses arising during the year are included in the Statement of Financial Activities. Investment income is the amount received by the charity in the year.

### (d) Stocks

Stocks of bought in goods are stated at the lower of cost and net realisable value. As it is not practical to value items donated for resale on receipt because of the volume of low value items, they are not recognised in the financial statements until they are sold.

### (e) Depreciation

Tangible fixed assets costing more than £2,500 (£1,000 in the charity's shops) are capitalised and included at cost. Freehold land is not depreciated. Depreciation is not provided on assets in the course of construction or on investment properties. Depreciation is provided on all other tangible fixed assets using a straight line basis as follows:

Freehold buildings	25 years
Long leasehold buildings	25 years
Short leasehold buildings improvements	Over the period of the lease or 10 years, whichever is the shorter
Leasehold shops improvements	Over the period of the lease or 10 years, whichever is the shorter
Furniture, equipment and IT servers	25-33 % per annum

# Notes to the financial statements

for the year ended 31 March 2017

## (f) Incoming resources

All income is included when the charity is entitled to the income, the amount can be quantified and receipt of the funds is probable.

### Legacy income

Legacy income is recognised when it is probable that it will be received. Pecuniary legacies are recognised when probate is granted. Residuary legacies are recognised when either probate has been granted, the estate accounts have been approved and any conditions have been fulfilled or if the charity has received notification from executors of their intention to make a distribution.

### Events

Income from major events is recognised in the period in which the event takes place. Income received in advance is included in deferred income.

### Investment income

Investment income is accounted for on an accruals basis.

### Gifts in kind

Gifts in kind are valued at their realised amount, or the amount equivalent to an alternative commercial supply, and are included in the Consolidated Statement of Financial Activities when sold. No amounts are included for services donated by volunteers.

## (g) Resources expended

All expenditure is accounted for on an accruals basis and allocated to the appropriate heading in the accounts. Specific accounting policies are as follows:

### Grants payable

The total sum awarded during the year is expensed in the SOFA, where a constructive obligation exists, notwithstanding that a proportion will be disbursed in subsequent accounting periods.

### Fundraising costs

Fundraising and publicity expenditure have been shown separately. Fundraising expenditure represents the total costs of fundraising, excluding only direct costs of specific events organised by third parties, which are netted off against the income from those events.

### Support costs

The costs of functions which support more than one of the charity's activities have been allocated to those activities based on the cost driver such as time spent or floor space.

### Governance costs

Governance costs are the costs associated with the governance arrangements of the charity. These costs include external and internal audit, legal advice for trustees and costs associated with constitutional and statutory requirements.

## (h) Pensions

For defined benefit pension schemes the amounts charged in expenditure are the current service costs and gains and losses on settlements and curtailments. They are included as part of staff costs. Past service costs are recognised immediately in the profit and loss account if the benefits have vested. If the benefits have not vested immediately, the costs are recognised over the period until vesting occurs. The interest losses are recognised in the 'Other recognised gains and losses'.

Defined benefit schemes are funded, with the assets of the scheme held separately from those of the charity, in separate trustee-administered funds. Pension scheme assets are measured at fair value and liabilities are measured on an actuarial basis using the projected unit credit method and discounted at a rate equivalent to the current rate of return on a high-quality corporate bond of equivalent currency and term to the scheme liabilities.

# Notes to the financial statements

for the year ended 31 March 2017

The actuarial valuations are obtained every three years and are updated at each balance sheet date. The resulting defined benefit asset or liability is presented separately after other net assets on the face of the balance sheet. For defined contribution schemes the amount charged to the Consolidated Statement of Financial Activities in respect of pension costs and other post-retirement benefits is the contributions payable in the year. Differences between contributions payable in the year and contributions actually paid are shown as either accruals or prepayments in the balance sheet.

## (i) Leased assets

Rentals payable under operating lease contracts are charged on a straight line basis over the lease life to the Statement of Financial Activities.

## (j) Funds

**Restricted funds** comprise funds subject to specific restrictions imposed by donors and funders. The purposes and uses of the restricted reserves are set out in Note 15 to the financial statements. Income received from capital appeals is included under restricted voluntary income and the related costs, including depreciation, are charged against that income.

**Designated funds** comprise funds which have been set aside at the discretion of the Board of Trustees for specific purposes. The purposes and uses of the designated funds are set out in Note 15 to the financial statements. Funds contained within the designated fund comprise:

- (1) Tangible Fixed Asset Fund which represents the value of general funds invested in fixed assets.
- (2) Capital Investment Fund which represents funds held to contribute towards the renewal of the charity's hospices.
- (3) A designated fund for the Hampstead hospice that has been funded from a specific legacy and will be used towards the renewal of that hospice.
- (4) Palliative Care Development Fund. These funds support future innovative projects which either research or develop palliative care, or ensure more patients are offered the choice of being cared for at home.

The **General Fund** is an unrestricted fund which is available to meet possible shortfalls in revenue and unforeseen increases in expenditure.

## (k) Provisions

Provisions are recognised when there is a legal or constructive financial obligation, that can be reliably estimated and for which there is an expectation that payment will be made.

## (l) Accounting estimates and judgements

In preparing the financial statements, the trustees are required to make estimates and judgements. The matters below are considered to be the most important in understanding the judgements made and the uncertainties that could impact the amounts reported in the financial statements.

### Legacy income

Legacy income requires judgement about the probability of receipt which affects the timing of income recognition. As at March 2017, the amount accrued for legacy income was £1,547,815.

### Cost allocation

Support costs are allocated to charitable activities. Judgement is required in determining and applying the cost drivers appropriate for each support activity.

### Actuarial assumptions

The defined benefit pension scheme has been valued by a qualified independent actuary in accordance with FRS 102. Significant judgement is required in a number of areas, including future changes in salaries and inflation, mortality rates and the selection of appropriate discount rates.

# Notes to the financial statements

for the year ended 31 March 2017

## 2. Donations and legacies

	Unrestricted funds £'000	Restricted funds £'000	Total funds 2017 £'000	Unrestricted funds £'000	Restricted funds £'000	Total funds 2016 £'000
Donations, events and other voluntary income	54,650	9,232	63,882	55,744	9,946	65,690
Legacies	24,492	8,720	33,212	21,578	7,157	28,735
	<b>79,142</b>	<b>17,952</b>	<b>97,094</b>	<b>77,322</b>	<b>17,103</b>	<b>94,425</b>

## 3. Investment income

	Unrestricted funds £'000	Restricted funds £'000	Total funds 2017 £'000	Unrestricted funds £'000	Restricted funds £'000	Total funds 2016 £'000
Listed investments	667	-	667	648	-	648
Cash investments	133	-	133	154	-	154
Property fund	146	-	146	176	-	176
Other investments	81	-	81	75	-	75
	<b>1,027</b>	<b>-</b>	<b>1,027</b>	<b>1,053</b>	<b>-</b>	<b>1,053</b>

## 4. Incoming resources from charitable activities

	Unrestricted funds £'000	Restricted funds £'000	Total funds 2017 £'000	Unrestricted funds £'000	Restricted funds £'000	Total funds 2016 £'000
NHS funding for Nurses	24,177	-	24,177	23,147	-	23,147
NHS funding for Hospices	18,836	-	18,836	18,757	-	18,757
NHS grants						
- NHS England capital grants	-	-	-	-	11	11
- Transforming Your Care (N Ireland)	-	8	8	-	47	47
Other NHS funding	115	-	115	0	-	0
Voluntary Action Fund	-	-	-	-	10	10
Big Lottery Fund	-	267	267	-	272	272
Other income	148	27	175	140	227	367
	<b>43,276</b>	<b>302</b>	<b>43,578</b>	<b>42,044</b>	<b>567</b>	<b>42,611</b>

Funding from the Big Lottery includes £46,629 for Marie Curie Helper service in Northern Ireland and £52,380 for Marie Curie Helper service in Argyll and Bute, £65,512 for the Diversity – Reducing Barriers project in Wales and £102,713 for a carers project in Wales.

# Notes to the financial statements

for the year ended 31 March 2017

## 5. Expenditure

	Direct costs £'000	Support costs £'000	Total 2017 £'000	Total 2016 £'000
<b>Cost of raising funds</b>				
Fundraising	29,976	3,613	33,589	36,377
Publicity	2,842	523	3,365	2,922
Retail activities	14,512	1,130	15,642	16,084
Investment management costs (Note C)	71	33	104	89
	<b>47,401</b>	<b>5,299</b>	<b>52,700</b>	<b>55,472</b>
<b>Charitable activities</b>				
Hospices	45,207	4,231	49,438	47,855
Nurses	45,245	5,201	50,446	47,697
Helper	1,011	248	1,259	1,011
Information and support	922	478	1,400	2,141
Research and development (Note D)	4,121	687	4,808	4,691
Policy, information and awareness	4,735	306	5,041	6,468
	<b>101,241</b>	<b>11,151</b>	<b>112,392</b>	<b>109,863</b>
<b>Total</b>	<b>148,642</b>	<b>16,450</b>	<b>165,092</b>	<b>165,335</b>

### Allocation of support costs

	Executive, Legal and Strategy £'000	Governance (Note A) £'000	Finance £'000	HR and Training £'000	IT £'000	Facilities and Property £'000	Total 2017 £'000	Total 2016 £'000
Hospices	209	66	361	1,252	1,900	443	4,231	3,343
Nursing	218	68	345	1,689	2,755	126	5,201	4,666
Helper	0	0	33	57	158	0	248	152
Information and support	9	3	33	38	395	0	478	283
Research and development	105	33	82	127	316	24	687	615
Policy, information and awareness	113	36	16	45	79	17	306	276
<b>Total charitable activities</b>	<b>654</b>	<b>206</b>	<b>870</b>	<b>3,208</b>	<b>5,603</b>	<b>610</b>	<b>11,151</b>	<b>9,335</b>
Fundraising	174	55	525	915	1,726	218	3,613	3,719
Publicity	35	11	33	107	317	20	523	534
Retail activities	9	3	181	225	237	475	1,130	1,007
Investment management costs	0	0	33	0	0	0	33	29
<b>Total support costs allocated</b>	<b>872</b>	<b>275</b>	<b>1,642</b>	<b>4,455</b>	<b>7,883</b>	<b>1,323</b>	<b>16,450</b>	<b>14,624</b>

# Notes to the financial statements

for the year ended 31 March 2017

Support costs have been allocated across activities based on time spent by the central departments in supporting the various activities of the charity.

<b>Note A</b>	<b>2017</b>	<b>2016</b>
	<b>£'000</b>	<b>£'000</b>
<b>Governance costs</b>		
Internal audit	178	204
External audit fees (Note B)	85	93
Trustees' travel and meeting expenses (Note 16)	4	7
Trustees' indemnity insurance	6	7
Legal costs	0	6
	<b>273</b>	<b>317</b>

<b>Note B</b>	<b>2017</b>	<b>2016</b>
	<b>£'000</b>	<b>£'000</b>

Net incoming resources for the year is stated after charging;

#### **Fees payable to the charity's auditor for:**

– the audit of these financial statements - charity	65	62
– the audit of financial statements of subsidiaries pursuant to legislation	10	11
– other audit services	11	20
	<b>86</b>	<b>93</b>

#### **Amounts paid under operating leases**

– land and buildings	4,821	4,900
– plant and machinery	827	937
	<b>5,648</b>	<b>5,837</b>

<b>Depreciation of owned assets</b>	<b>6,548</b>	<b>5,290</b>
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#### **Note C**

Investment managers' fees costs include a management charge linked to the value of funds managed and also a performance-related fee based on their performance against the target return.

#### **Note D**

	<b>2017</b>	<b>2016</b>
	<b>£'000</b>	<b>£'000</b>
<b>Research and development</b>		
Palliative care research costs	3,906	3,614
Development costs	902	1,077
	<b>4,808</b>	<b>4,691</b>

# Notes to the financial statements

for the year ended 31 March 2017

	2017 £'000	2016 £'000
Grant funding of activities:		
– Marie Curie Palliative Care Research Institute at the University of Liverpool	(3)	-2
– Marie Curie Palliative Care Research Unit at UCL	(122)	2,723
– Marie Curie Palliative Care Research Centre at Cardiff University	2,091	(49)
– Other recipients	1,011	-66
Activities undertaken directly	1,144	1,470
Support costs	687	615
	<b>4,808</b>	<b>4,691</b>

Palliative care research costs include the cost of new research grants awarded in 2017 to the Marie Curie Palliative Care Research Centre at Cardiff University (£2.2 million) and an extension to the funding for the Marie Curie National Grant Programme (£1.0 million). The expenditure shown includes underspends against previously committed amounts which have now been released. Both years also include expenditure on the charity's own research facilitators who are based in the charity's hospices. Development costs include work in partnership with the NHS in Northern Ireland, Hereford, Fife and Lothian.

## 6. Taxation

The charity is registered for VAT but only part of the VAT incurred is recoverable. The amount of VAT paid but not recoverable in the year was £2,089,552 (2016:£2,220,154).

The charity is considered to pass the tests set out in Paragraph 1 Schedule 6 Finance Act 2011 and therefore it meets the definition of a charitable company for UK corporation tax purposes. Accordingly, the charity is potentially exempt from taxation in respect of income or capital gains received within categories covered by Chapter 3, Part 11 Corporation Tax Act 2011 or Section 256 of the Taxation Chargeable Gains Act 1992, to the extent that such income or gains are applied exclusively to charitable purposes. Its subsidiaries have not incurred a tax charge as they gift aid all profits to the charity.

## 7. Group tangible fixed assets

	Freehold land and buildings £'000	Leasehold land and buildings Long £'000	Leasehold land and buildings Short £'000	Furniture equipment and motor vehicles £'000	Total £'000
<b>Cost</b>					
<b>At 1 April 2016</b>	<b>72,937</b>	<b>3,527</b>	<b>7,476</b>	<b>23,217</b>	<b>107,157</b>
Additions at cost	661	-	38	2,176	2,875
Disposals	(96)	-	(309)	(107)	(512)
<b>At 31 March 2017</b>	<b>73,502</b>	<b>3,527</b>	<b>7,205</b>	<b>25,286</b>	<b>109,520</b>

# Notes to the financial statements

for the year ended 31 March 2017

## Depreciation

<b>At 1 April 2016</b>	<b>28,372</b>	<b>1,876</b>	<b>6,395</b>	<b>17,748</b>	<b>54,391</b>
Provided in the year	2,634	127	368	3,419	6,548
Disposals	(93)	-	(324)	(82)	(499)
<b>At 31 March 2017</b>	<b>30,913</b>	<b>2,003</b>	<b>6,439</b>	<b>21,085</b>	<b>60,440</b>

## Net book value

<b>At 31 March 2017</b>	<b>42,589</b>	<b>1,524</b>	<b>766</b>	<b>4,201</b>	<b>49,080</b>
<b>At 31 March 2016</b>	<b>44,565</b>	<b>1,651</b>	<b>1,081</b>	<b>5,469</b>	<b>52,766</b>

The freehold and leasehold properties consist of nine Marie Curie Hospices, administrative offices and shops. The cost of freehold land included above is £1,588,242 (2016: £1,588,242).

Freehold land and buildings for the group and the charity include assets in the course of construction at a cost of £NIL (2016: £NIL). The cost of additions for the group and the charity to assets in the course of construction during the year amounted to £NIL (2016: NIL).

## Capital commitments

	2017 £'000	2016 £'000
Capital expenditure authorised and contracted for	58	236
Capital expenditure authorised but not contracted for	1,914	5,963

## 8. Investments

	Listed investments £'000	Property and unlisted investments £'000	Money market deposits £'000	Consolidated total £'000	Investment in subsidiaries (Note 19) £'000	Charity total £'000
<b>Group and charity</b>						
Market value at 1 April 2016	<b>38,512</b>	<b>76</b>	<b>12,019</b>	<b>50,607</b>	<b>466</b>	<b>51,073</b>
Movements in deposits	-	-	2,000	2,000	-	2,000
Additions at cost	9,831	-	-	9,831	-	9,831
Disposals at book value	(13,169)	-	-	(13,169)	(80)	(13,249)
Unrealised gains	3,134	-	11	3,145	-	3,145
<b>Market value at 31 March 2017</b>	<b>38,308</b>	<b>76</b>	<b>14,030</b>	<b>52,414</b>	<b>386</b>	<b>52,800</b>
<b>Historic cost at 31 March 2017</b>	<b>26,229</b>	<b>76</b>	<b>14,030</b>	<b>40,335</b>	<b>386</b>	<b>40,721</b>
Historic cost at 31 March 2016	29,615	76	12,019	41,710	466	42,176

# Notes to the financial statements

for the year ended 31 March 2017

<b>Gains/(losses) on investments</b>	<b>2017</b>	<b>2016</b>
	<b>£'000</b>	<b>£'000</b>
Realised gains	2,137	477
Unrealised (losses)/gains included in market value	3,145	(1,962)
	<b>5,282</b>	<b>(1,485)</b>

<b>Listed investments</b>	<b>2017</b>	<b>2016</b>
	<b>£'000</b>	<b>£'000</b>
UK	14,259	14,465
Non UK	24,050	24,047
	<b>38,309</b>	<b>38,512</b>

No investment represented more than 5% of the portfolio of the group or the charity by market value. Investment properties include a £75,400 holding in an unlisted property company, together with the charity's share of a leasehold property.

## 9. Stocks

	<b>Group</b>		<b>Charity</b>	
	<b>2017</b>	<b>2016</b>	<b>2017</b>	<b>2016</b>
	<b>£'000</b>	<b>£'000</b>	<b>£'000</b>	<b>£'000</b>
Inventory for resale	84	111	-	-
Daffodils	42	154	42	154
	<b>126</b>	<b>265</b>	<b>42</b>	<b>154</b>

## 10. Debtors

	<b>Group</b>		<b>Charity</b>	
	<b>2017</b>	<b>2016</b>	<b>2017</b>	<b>2016</b>
	<b>£'000</b>	<b>£'000</b>	<b>£'000</b>	<b>£'000</b>
Trade debtors	2,457	1,862	2,457	1,862
Taxation recoverable	2,803	2,539	2,803	2,539
Prepayments	3,184	2,508	3,194	2,518
Legacy debtors	1,548	2,913	1,548	2,913
Amounts due from subsidiary undertakings	-	-	-	0
Other debtors	910	909	910	901
	<b>10,902</b>	<b>10,731</b>	<b>10,912</b>	<b>10,733</b>

# Notes to the financial statements

for the year ended 31 March 2017

The charity has been notified of legacies with an estimated value of £28.2 million (2016: £21.2 million) which have not been recognised as income at 31 March 2017 because no notification of impending distribution or approval of estate accounts has been received and the values are uncertain. This amount has been treated as a contingent asset.

## 11. Current asset investments

	Group		Charity	
	2017 £'000	2016 £'000	2017 £'000	2016 £'000
Bank deposits and liquidity funds	<b>14,381</b>	<b>9,377</b>	<b>14,381</b>	<b>9,377</b>

## 12. Creditors

	Group		Charity	
	2017 £'000	2016 £'000	2017 £'000	2016 £'000
<b>(a) Amounts falling due within one year</b>				
Interest free loans	130	130	130	130
Trade creditors	3,342	4,728	3,331	4,692
NHS contract obligations	1,439	1,650	1,439	1,650
Palliative care research grants	2,728	2,924	2,728	2,924
Grants awarded for scientific research	-	73	-	73
Tax and social security creditors	3,180	1,963	3,180	1,681
Accruals	7,265	6,641	7,269	6,938
Deferred income (Note 13)	2,396	2,205	2,396	2,205
Pensions and other payroll	502	556	502	556
Amounts due to subsidiary undertakings	-	-	900	874
	<b>20,982</b>	<b>20,870</b>	<b>21,875</b>	<b>21,723</b>

NHS contract obligations comprises amounts paid on account by the NHS for services from the Marie Curie Nursing Service which have been carried forward.

	Group		Charity	
	2017 £'000	2016 £'000	2017 £'000	2016 £'000
<b>(b) Amounts falling due after more than one year</b>				
Loan from British Heart Foundation for new Glasgow hospice	-	1,850	-	1,850
Palliative care research grants	7,144	5,890	7,144	5,890
Investment managers' performance fee	-	81	-	81
	<b>7,144</b>	<b>7,821</b>	<b>7,144</b>	<b>7,821</b>

The Caring Together project at Glasgow hospice has been completed and met its objectives. Accordingly, the loan from British Heart Foundation has been released to income. The investment managers' fees are partly performance related. The amount payable is based on the four-year average compared to the benchmark.

# Notes to the financial statements

for the year ended 31 March 2017

## 13. Deferred income

	Group		Charity	
	2017 £'000	2016 £'000	2017 £'000	2016 £'000
Caring services	908	721	908	721
Fundraising events	941	845	941	845
Other	547	639	547	639
	<b>2,396</b>	<b>2,205</b>	<b>2,396</b>	<b>2,205</b>

Fundraising events deferred income includes amounts received in advance in respect of events which had not taken place by the balance sheet date.

## 14. Provision for charges and liabilities

### Group and charity

	At 1 April 2016	Additional provisions made	Amounts used	Amounts released	At 31 March 2017
	£'000	£'000	£'000	£'000	£'000
Dilapidations	135	13	-	(28)	120
Rent	203	35	(3)	(49)	186
Staff costs and other liabilities	94	151	-	(32)	213
	<b>432</b>	<b>199</b>	<b>(3)</b>	<b>(109)</b>	<b>519</b>

Dilapidations relate to properties where there is a legal responsibility to pay for these costs at the end of the lease period. Rent relates to amounts that may become due once rent reviews are completed on individual properties.

## 15. Funds

### Group and charity

	Note	At 1 April 2016	Income	Expenditure	Gains and losses	Transfers	At 31 March 2017
		£'000	£'000	£'000	£'000	£'000	£'000
<b>Restricted funds</b>							
<b>(Group and charity)</b>							
Hospices and other Capital Fund	i	22,209	-	(1,078)	-	147	21,278
Major capital appeals	ii	21	-	-	-	-	21
Hospices - revenue	iii	444	17,416	(17,005)	-	(147)	708
Nurses	iii	48	6,063	(6,003)	-	-	108
Helper	iii	951	152	(1,061)	-	-	42
Information and support	iii	-	102	(102)	-	-	-
Palliative care research		245	534	(494)	-	-	285
<b>Total restricted funds</b>		<b>23,918</b>	<b>24,267</b>	<b>(25,743)</b>	<b>-</b>	<b>-</b>	<b>22,442</b>

# Notes to the financial statements

for the year ended 31 March 2017

<b>Designated funds (group and charity)</b>	Note	At 1 April 2016	Income	Expenditure	Gains and losses	Transfers	At 31 March 2017
		£'000	£'000	£'000	£'000	£'000	£'000
Tangible Fixed Asset Fund	iv	30,556	-	-	-	(2,755)	27,801
Capital Investment Fund	v	10,889	-	-	-	1,051	11,940
Hampstead Capital Fund	v	-	-	-	-	1,674	1,674
Palliative Care Development Fund	vi	322	-	(204)	-	-	118
<b>Total designated funds</b>		<b>41,767</b>	<b>-</b>	<b>(204)</b>	<b>-</b>	<b>(30)</b>	<b>41,533</b>
<b>General Funds (Group)</b>							
General Fund	vii	34,688	134,855	(139,145)	5,282	(710)	34,970
Pension scheme surplus/ (deficit)	viii	947	-	-	193	740	1,880
<b>Total general funds</b>		<b>35,635</b>	<b>134,855</b>	<b>(139,145)</b>	<b>5,475</b>	<b>30</b>	<b>36,850</b>
<b>Consolidated Funds</b>		<b>101,320</b>	<b>159,122</b>	<b>(165,092)</b>	<b>5,475</b>	<b>-</b>	<b>100,825</b>
General funds (Charity)		33,947	133,233	(137,419)	5,282	(740)	34,303

## The above funds carried forward at 31 March 2017 represent:

- (i) Grants and donations received from hospice and other capital appeals which have been invested in capital projects. The expenditure in the year represents the amount by which the capital expenditure has been depreciated.
- (ii) The net proceeds from the capital appeals. The balance at the end of the year represents the capital appeal funds which have been received for which expenditure has not yet been incurred.
- (iii) Funds restricted for Marie Curie Hospices, Marie Curie Nurses, Marie Curie Helper and information and support. A transfer is made to the Hospice Capital Fund in respect of expenditure on capital projects funded by the income.
- (iv) The net book amounts already invested in tangible fixed assets, other than those covered by restricted funds (see (i) above).
- (v) The amount that has been put aside to contribute towards major capital projects to be undertaken in the next five to 10 years to replace or upgrade facilities at the charity's hospices. The principal movements are expenditure on hospice refurbishment and equipment in the year and the creation of a designated fund for the Hampstead hospice that has been funded from a specific legacy.
- (vi) The amount that has been put aside for future innovative projects in the research or development of palliative care.
- (vii) The General Fund is the working capital of the charity and represents the net amount that the Board of Trustees has available to meet possible shortfalls in funding and increases in costs.
- (viii) The actuarial valuation of the defined benefit pension scheme at 31 March 2017 for the purposes of FRS 102 showed a net asset of £1.9 million.

# Notes to the financial statements

for the year ended 31 March 2017

The consolidated deficit of total income less revenue expenditure is attributable to the deficit for the year dealt with in the separate accounts of:

	2017 £'000	2016 £'000
The charity	(1,660)	(10,229)
Intra-group profit	1,165	798
Intercompany charges for fixed assets written off	-	2
	(495)	(9,429)

The parent charity's gross income for the year was £155.7 million and its expenditure was £163.4 million.

## Analysis of net assets between funds

	Unrestricted funds £'000	Restricted funds £'000	Total 2017 £'000	Total 2016 £'000
Tangible fixed assets	27,802	21,278	49,080	52,766
Investments	66,795	-	66,795	59,984
Stocks	126	-	126	265
Debtors	10,902	-	10,902	10,449
Creditors and cash	(29,122)	1,164	(27,958)	(23,091)
Defined benefit pension scheme surplus	1,880	-	1,880	947
<b>Total net assets</b>	<b>78,383</b>	<b>22,442</b>	<b>100,825</b>	<b>101,320</b>

## 16. Staff

	2017 £'000	2016 £'000
<b>i) Remuneration</b>		
Wages and salaries	83,659	82,533
Social security costs	6,910	6,404
Other pension costs	4,595	4,747
<b>Total Marie Curie staff</b>	<b>95,164</b>	<b>93,684</b>
Contracted staff	10,881	11,183
<b>Total remuneration</b>	<b>106,045</b>	<b>104,867</b>

Contract staff includes costs for nurses, consultants, other medical staff and health professionals employed by the NHS for whom the charity reimburses the NHS for the time spent working at the charity. These people are not employed by the charity and so are not included in the analysis of staff employed. The total amount of termination payments in the year was £157,761 (2016: £763,393).

# Notes to the financial statements

for the year ended 31 March 2017

## ii) Average number of employees

	2017 Number	2016 Number
Hospices	995	994
Nurses	2,191	2,176
Research	25	21
Information and support	6	1
Fundraising	296	335
Publicity	37	43
Shops	529	561
Support	195	183
	<b>4,274</b>	<b>4,314</b>
<b>Comprising</b>		
Full time	1,390	1,412
Part time	2,884	2,902
	<b>4,274</b>	<b>4,314</b>

## iii) Remuneration of higher paid staff

	2017 Number	2016 Number
£60,000 – £70,000	19	13
£70,000 – £80,000	7	7
£80,000 – £90,000	6	5
£90,000 – £100,000	3	5
£100,000 – £110,000	2	2
£110,000 – £120,000	2	-
£120,000 – £130,000	1	1
£130,000 – £140,000	1	2
£140,000 – £150,000	1	1
£150,000 – £160,000	-	-
£160,000 – £170,000	1	2
Included in the above are the following number of medical practitioners	7	7

Contributions of £109,544 (2016: £140,602) were made to the NHS Pension Scheme and the Universities Superannuation Schemes, all defined benefit schemes, for 10 (2016: 12) higher paid employees. Contributions amounting to £176,302 (2016: £168,962) were made to defined contribution schemes, for 30 (2016: 23) higher paid employees.

The total remuneration of key management including any employer pension contributions was £1,139,918 (2016: £1,273,600).

The salary of the Chief Executive in 2016/17 was £168,317 (2015/16: £168,317). The Chief Executive does not receive any pension contributions from the charity.

## iv) Board of Trustees members' expenses

No trustees received any remuneration in the year. Nine trustees were reimbursed £4,009 in total for travel expenses (2015: £6,597). The charity maintains liability insurance covering members of the Board of Trustees in their capacity as directors and other officers of the charity.

# Notes to the financial statements

for the year ended 31 March 2017

## 17. Lease commitments

The charity had annual operating lease commitments as follows:

	2017 £'000	2016 £'000
<b>Land and buildings</b>		
Within one year	426	660
Between two and five years	1,885	1,822
Over five years	1,952	1,643
	<b>4,263</b>	<b>4,125</b>
<b>Other</b>		
Within one year	42	106
Between two and five years	481	325
	<b>523</b>	<b>431</b>

## 18. Pensions

### Schemes available to employees

The current scheme available to the employees is a stakeholder pension scheme which was started in January 2004. The charity has paid contributions totalling £2,512,643 (2016: £2,690,395) into this scheme. Contributions to other defined contribution schemes amounted to £NIL (2016: NIL). At 31 March 2017 four employees participated in the Universities Superannuation Scheme which is a multi-employer defined benefit pension scheme. At the last actuarial valuation as at 31 March 2014 the assets were sufficient to cover 89% of the benefits that had accrued to members. Marie Curie meets the employer costs required by the scheme which amounted £38,304 (2016: £41,959). The employer contribution rate is currently 14% but may increase due to the scheme funding level. At 31 March 2017 516 employees participated in the NHS Pension Schemes which are statutory unfunded defined benefit schemes. The pension cost charge for these schemes amounted to £2,023,392 (2016: £1,978,911).

### Closed schemes

Between 1 September 1994 and 31 December 2003 the charity operated a defined contribution scheme. This scheme is now closed. Prior to 1 September 1994 the charity operated a defined benefit pension scheme (closed to new members) which is funded in advance by contributions from members at the rate set in the rules and from the charity. The assets are held in a trust separate from the charity.

### FRS102 disclosures

A full actuarial valuation of the defined benefit pension scheme was carried out at 31 March 2014 and resulted in an actuarial deficit of £5.7 million. On the basis of this valuation the trustees of the scheme and the charity agreed the employer contribution rate of 28.7% from 1 July 2015 and past service deficit recovery payments of £720,000 per annum until April 2024.

The valuation has been updated to 31 March 2017 by a qualified independent actuary to take account of the requirements of FRS102 in order to assess the liabilities of the scheme at that date. Scheme assets are stated at their market values at the respective balance sheet dates. At 31 March 2017 there was a net asset which has been recognised on the basis that it is recoverable against the future deficit recovery payments.

# Notes to the financial statements

for the year ended 31 March 2017

	2017 £'000	2016 £'000
Present value of funded defined benefit obligation	(25,785)	(22,868)
Fair value of scheme assets	27,665	23,815
<b>Net asset/(liability)</b>	<b>1,880</b>	<b>947</b>

## The movement in the defined benefit pension scheme deficit is as follows:

	2017 £'000	2016 £'000
<b>Liability at 1 April</b>	<b>947</b>	<b>(927)</b>
Net finance charge	43	(18)
Current service cost	(44)	(34)
Employer's contributions	741	757
	<b>1,687</b>	<b>(222)</b>
Remeasurement gains	193	1,169
<b>Asset/(liability) at 31 March</b>	<b>1,880</b>	<b>947</b>

## Movements in present value of defined benefit obligation

	2017 £'000	2016 £'000
<b>At 1 April</b>	22,868	24,134
Current service cost	44	34
Interest cost	735	733
Remeasurement losses and (gains)	3,341	(1,041)
Contributions by members	3	5
Benefits paid	(1,206)	(997)
<b>At 31 March</b>	<b>25,785</b>	<b>22,868</b>

## Movements in fair value of scheme assets

	2017 £'000	2016 £'000
<b>At 1 April</b>	23,815	23,207
Interest credit on scheme assets	778	715
Remeasurement gains	3,534	128
Contributions by employer	741	757
Contributions by members	3	5
Benefits paid	(1,206)	(997)
<b>At 31 March</b>	<b>27,665</b>	<b>23,815</b>

# Notes to the financial statements

for the year ended 31 March 2017

## Expense recognised in the Statement of Financial Activities

	2017 £'000	2016 £'000
Interest on defined benefit pension plan obligation	(735)	(733)
Interest credit on scheme assets	778	715
<b>Net finance charge</b>	<b>43</b>	<b>(18)</b>
Current service cost	(44)	(34)
<b>Total</b>	<b>(1)</b>	<b>(52)</b>

	2017 £'000	2016 £'000
<b>Remeasurement gain/(loss) charged to the Consolidated Statement of Financial Activities</b>		
Remeasurement gains - return on scheme assets	3,534	128
Remeasurement (losses)/gains - actuarial (losses)/gains	(3,341)	1,041
<b>Total</b>	<b>193</b>	<b>1,169</b>

<b>The fair value of the scheme assets was as follows:</b>	2017 £m	%	2016 £m	%
Equities	8.7	31.5%	7.0	29.5%
Corporate bonds	4.4	15.9%	4.1	17.1%
Gilts	14.6	52.9%	12.8	54.0%
Cash	(0.1)	-0.3%	(0.1)	-0.6%
<b>Total net assets</b>	<b>27.7</b>	<b>100.0%</b>	<b>23.8</b>	<b>100.0%</b>

There is no investment in the charity's own financial instruments nor does the charity occupy any property owned by the scheme. Principal actuarial assumptions (expressed as weighted averages) at the year end were as follows:

	2017	2016
Discount rate	2.4%	3.3%
Inflation (RPI)	3.5%	3.1%
Future salary increases	4.0%	3.6%
Rate of increases in pensions in payment (LPI )		
maximum 5%	3.3%	3.0%
minimum 4% maximum 5%	4.3%	4.2%
maximum 2.5%	2.2%	2.1%

# Notes to the financial statements

for the year ended 31 March 2017

<b>Life expectancies used to determine benefit obligations are as follows:</b>	<b>2017</b>	<b>2016</b>
Future life expectancy of male aged 65 at balance sheet date	20.5	20.4
Future life expectancy of male aged 65 20 years after the balance sheet date	22.2	22.1
Future life expectancy of female aged 65 at balance sheet date	22.8	22.7
Future life expectancy of female aged 65 20 years after the balance sheet date	24.7	24.6

The charity expects to contribute approximately £740,000 to the scheme for the 2017/18 financial year (2016/17 - £741,000).

## 19. Subsidiary undertakings

The charity has the following subsidiary undertakings which were wholly owned and registered at 89 Albert Embankment, London, SE1 7TP.

**Marie Curie Trading Limited** - The company undertakes trading activities for the benefit of the charity that it cannot carry out itself as an exempt charity, including the sale of new goods such as Christmas cards, and certain events. The company made a profit of £1,165,511 for the year ended 31 March 2017 (2016: £799,761) which will be paid to the charity by means of a payment under Gift Aid.

**Marie Curie Developments Limited** - The company undertakes construction projects for the charity. The company made a profit of NIL for the period ended 31 March 2017 (2016: £139) which will be paid to the charity by means of a payment under Gift Aid.

**Cancer Care (UK) Limited** - The company is limited by guarantee and was dormant throughout the period ended 31 March 2017. The net assets at 31 March 2017 were £20,000.

**Marie Curie Ventures Limited** - The company was dormant throughout the period ended 31 March 2017.

A summary of the results of the subsidiaries is set out below:

<b>Marie Curie Trading Limited</b>	<b>2017</b>	<b>2016</b>
	<b>£'000</b>	<b>£'000</b>
Turnover	3,518	3,502
Cost of sales	(1,483)	(1,859)
Gross profit	2,035	1,643
Other expenses	(857)	(827)
Interest payable	(13)	(16)
Payment to the charity under Gift Aid	(1,165)	-
<b>Retained profit for the year</b>	<b>-</b>	<b>800</b>
Net current assets	320	1,200
Liabilities - Debenture held by the charity	(320)	(400)
<b>Net assets</b>	<b>-</b>	<b>800</b>

# Notes to the financial statements

for the year ended 31 March 2017

At 31 March 2017 the amount due from the charity to Marie Curie Trading Limited was £161,794 (2016: £836,949). The debenture loan is secured by a first floating charge and is subject to interest calculated at 3% above the base rate.

## Marie Curie Developments Limited

	2017 £'000	2016 £'000
Turnover	-	49
Cost of sales	-	(47)
<b>Gross profit</b>	<b>-</b>	<b>2</b>
Other expenses	-	(2)
Payment to the charity under Gift Aid	-	(0)
<b>Retained profit for the year</b>	<b>-</b>	<b>-</b>
Net current assets	10	10
<b>Net assets</b>	<b>10</b>	<b>10</b>

At 31 March 2017 the amount due from the charity to Marie Curie Developments Limited was £8,117 (2016: £42,686 due to the charity).

The charity charges its subsidiaries a proportion of event overheads and staff costs incurred by the charity amounting to NIL (2016: £550,344).

## 20. Related parties

During the year, trustees made donations totalling £950.

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