REGISTERED COMPANY NUMBER: 02143917 (England and Wales) REGISTERED CHARITY NUMBER: 327493

Trustees' Report and

Audited Financial Statements for the Year Ended 31 March 2023

for

CHILDHOOD EYE CANCER TRUST (A COMPANY LIMITED BY GUARANTEE)

Knox Cropper LLP
Chartered Accountants and Statutory Auditors
65 Leadenhall Street
London
EC3A2AD

CHILDHOOD EYE CANCER TRUST

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CHILDHOOD EYE CANCER TRUST

Reference and Administrative Details for the Year Ended 31 March 2023

TRUSTEES

Ian Ellington - Chairman
Gemma Boggs - Treasurer
Lisa Brown
Elizabeth Coleman
Alex Brebbia
Andrea Bonzano
Matthew Holt
Rob Downes
Damian Yeo (appointed 11.6.22)
Michelle Boothroyd (appointed 30.7.22)

COMPANY SECRETARY

Rose-Marie Sexton

REGISTERED OFFICE

The Royal London Hospital, Whitechapel Road, London,

E1 1FR

REGISTERED COMPANY NUMBER

02143917 (England and Wales)

REGISTERED CHARITY NUMBER

327493

INDEPENDENT AUDITORS

Knox Cropper LLP, Chartered Accountants and Statutory Auditors, 65 Leadenhall Street, London, EC3A 2AD

CHILDHOOD EYE CANCER TRUST (REGISTERED NUMBER: 02143917)

Trustees' Report for the Year Ended 31 March 2023

The trustees who are also directors of the charity for the purposes of the Companies Act 2006, present their report with the financial statements of the charity for the year ended 31 March 2023. The trustees have adopted the provisions of Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019).

OBJECTIVES AND ACTIVITIES

Objects of the Charity

The Childhood Eye Cancer Trust is a charity dedicated to helping anyone affected by retinoblastoma (Rb), a type of eye cancer that affects babies and young children, mainly under the age of six. We have been supporting families since 1987.

Around one child a week is diagnosed with Rb in the UK or 50 a year. It accounts for 3% of childhood cancers in the UK and 10% of cancers in babies under one. Around 45% of cases are heritable and this carries with it an increased risk of developing tumours in other parts of the body in later life.

The Charity was originally founded to provide support and information to those affected by Rb. In 1994 we merged with another charity that was funding research projects specifically related to Rb, and in 2004 we changed our name to the Childhood Eye Cancer Trust. As we grew, so did our aims and objectives and we began to run campaigns aimed at raising awareness among health professionals and the public in order to achieve the earliest possible diagnosis for children affected.

Our aims are to:

- Provide support and information to families and individuals affected by Rh
- Raise funds to support research into issues concerned directly with Rb.
- Raise awareness of Rb among health professionals and others.
- Influence policy to improve service delivery for those affected by Rb.

Objectives, Strategies for Achievement and Public Benefit

During the period of this report, we have continued to successfully deliver on our three core goals of support, research, and awareness.

The Trustees have reviewed the Charity's core goals and have reaffirmed that these remain the focus of all activity.

The Trustees are aware of the public benefit guidance published by the Charity Commission. We have considered the objectives of the Charity and have given regard to how these objectives and the associated activities meet the public benefit criteria of advancing health, saving lives and the relief of those in need by reason of ill health.

We are the only dedicated UK-wide charity providing support to people affected by Rb and we believe that they benefit from our services in the following ways:

Main Objectives

Support: To ensure that everyone affected by Rb in the UK has access to support and information according to their need.

- Our Head of Support and two Support Workers offer support to all families and individuals affected by Rb.
- This is provided on the wards and in clinics at the two specialist centres for Rb in the UK: Birmingham Women's and Children's Hospital and The Royal London Hospital. On non-clinic days, support is provided via telephone, video call, email, and social media.
- Support is also provided through the delivery of a programme of quarterly face to face or virtual meetings for families, teens and young adults, and adults.

 Additionally, our team provide signposting to organisations for financial grants, benefits advice, therapeutic and psychological support, visual impairment support, holidays, travel expenses, white goods, and other items.

Our Support Workers also assist with applications for Blue Badges, Disability Living Allowance and Carer's Allowance, as well as supporting families with housing applications.

The support team collaborates with the wider CHECT team with stories from members for CHECT publications, information leaflets and social media.

Awareness - healthcare professionals: To save lives and minimise the impact of visual impairment by ensuring that healthcare professionals know about Rb and its symptoms, listen to concerned parents and make urgent referrals where necessary. We provide:

- Targeted activities to healthcare professionals associated with children aged six and under.
- Distribution of resources that help early diagnosis and referral.
- Media campaigns and articles for specialist healthcare professional journals and magazines.
- Working with healthcare professionals to develop and implement standard referral protocols for those with suspected Rb.

Awareness - public: To increase awareness of Rb and its signs and symptoms amongst parents and carers so as to promote the seeking of medical advice as soon as possible. We do this by:

- Ensuring information for parents about the symptoms of Rb is available in all relevant NHS
 publications and on all NHS information websites.
- Media activity regarding the condition including the signs and symptoms and how / where to seek help.
- Developing relationships with organisations able to reach large sections of the public with a view to raising awareness.
- Regular and sustained social media activity with information and advice accessible on the charity's website.
- Promoting knowledge of the possible longer-term impact of having had Rb as a child with regard to genetics and other cancers.
- Information campaigns targeted towards people affected by Rb as a child.

Research: Proactively engaging in the advancement of knowledge of Rb, its treatment and its impact. We do this by:

- Supporting and funding clinical, psychosocial, and scientific research relating to Rb.
- Working through the Scientific Advisory Committee to identify and support suitable projects from a wide range of sources.
- Encouraging applications from the international research community.
- Supporting multi-centre and international collaboration including the sharing of experience, knowledge, and data.

Influencing: Working with other organisations to bring about improvements in the way in which services are delivered both in the UK and internationally. We:

- Work with the treatment centres in the UK, the NHS National Commissioning Group, National Artificial Eye Service, and other umbrella bodies who provide services to people affected by Rb.
- Proactively seek partnerships with other charities and organisations.

Research Grant Making Policy

We award grants to groups or individuals who wish to pursue research projects or audits to advance the knowledge of Rb and related issues.

Applications go before the Scientific Advisory Committee (SAC) which is made up of a CHECT Trustee plus experts from research and Rb-related fields. We also have three lay members representing families and the adult Rb community within the SAC.

This committee evaluates the validity and appropriateness of the proposals using an agreed scoring matrix, seeking peer review for large projects and where necessary for other reasons, before making recommendations to the Board for funding.

Grant recipients are required to provide six-monthly progress reports and present a final report to the Board on the conclusion of the project before disseminating the findings and learning through presentations and publications.

Volunteers

30 volunteers (including Trustees and SAC members) generously gave their time to support us throughout the year.

Whether it was one off or ongoing support, we would like to thank each and every one of our volunteers for their invaluable contribution to our work.

ACHIEVEMENT AND PERFORMANCE

Charitable activities

Support

Whilst one of our core priorities is the delivery of support to the parents and carers of children affected by Rb, we have extended this to encompass anyone affected, including teenagers whose unique needs are very different to those of a young child or baby, and adults, many of whom are living with the late effects of the treatment they received for Rb as a child. Membership of CHECT is open to anyone affected by retinoblastoma (as well as their friends and family), supporters of CHECT and health professionals, and we do not charge a fee.

In 2022/23, 100% of families were offered support following a diagnosis of Rb in the UK. As well as face to face, email, and telephone, we continue to use virtual platforms to support our members.

There has been an increase in the number of face-to-face sessions delivered with almost 1,300 sessions delivered across both treatment hospitals at inpatient and outpatient clinics.

During the year, we conducted a detailed members' support services survey. This vital exercise has gifted us with invaluable feedback to ensure that our service developments are coproduced with those who continue to access our support to best respond to ongoing needs.

Face to face and remote support

The main areas that people sought support from CHECT in 2022/23 included:

- Practical and emotional support.
- Direct financial support and assistance with welfare applications.
- Detailed information about Rb including genetics, screening, fertility, and late effects of Rb.
- Signposting to other specialist organisations.
- Work and employment support.
- Housing support*.

*There was an increased number of families with housing concerns and homelessness, including a rise in the numbers of those coming from abroad to seek treatment for their child. This often requires enhanced practical, financial, emotional, and social support.

We also continue to receive around 15% of our enquiries from non-members. These mainly consist of international patients requesting advice as well as UK based parents who have symptom concerns in their child.

Our "Would You Recognise It?" leaflet continues to be a vital resource for people to take along to these initial investigative appointments with clinicians.

Social media support

Social Media is still an important source of support resources and information, with members contacting CHECT and our raising awareness on newer platforms, like TikTok and Instagram. As well as our main public-facing Facebook page, we have two closed groups for members which are for parents of children with Rb and adults who have had Rb, both of which have seen an increase in membership in the period.

Financial Support

In 2022/23 we provided 68 CHECT support grants totaling £12,000 to families and individuals to help with the costs associated with an Rb diagnosis and ongoing treatment - for example travel to and from hospital

as well as occasionally helping to buy some specialist equipment for those with a visual impairment.

The demand for support grants has dramatically increased in line with the cost-of-living crisis and our team continue to work in partnership with other organisations to offer as much financial support as possible.

Support Events

In 2022/23, we organised 5 face-to-face support events:

- Family Days: 3 events in Oxford, Newcastle, and Wrexham this included the presentation of our CHECT Champions award to some incredibly brave and deserving children.
- Teenage and Young Adult Day: 1 event in Birmingham.
- Adult Day: 1 event in Liverpool.

Hospital organised events were also attended by our support team.

The support service also delivered online events:

- Family support: 3 events.
- · Teen and Young Adults: 2 events.
- Adults: 3 events.

These virtual events provided opportunities for peer-to-peer support and connected members with clinicians and speakers from other organisations including the RNIB and Thomas Pocklington Trust.

Pip the Penguin

In February 2023 we produced our first enucleation support toy. Pip the Penguin, named by our membership, is now being used as a support tool for families and clinicians to normalise and explain the enucleation process.

Teenage and Young Adult (TYA) Support

TYA who had Rb as children can face specific challenges around self-esteem. We are increasingly looking at ways to support this group, to provide specialist support to meet need and facilitate invaluable peer support.

We have a specific group for TYAs, and they created a new website which launched in the autumn of 2022. The group populates the site with stories and information appropriate to their audience. This group also participated in a 'social media take-over' of CHECT's platforms to raise awareness in Teenage and Young Adult Cancer Awareness month.

Adults (Beyond Rb)

For some people, the effects of Rb are lifelong. We continue to respond to the needs of adults who were affected by Rb as children.

We have a specific Beyond Rb group, the membership of which has grown via Facebook and the introduction of a WhatsApp Group, with high levels of attendance at online support events. The group have been heavily involved in the production of our new suite of adult patient information and resources.

This includes a "My Rb Summary" document, which is a critical resource as it allows individuals to document their treatment summary and side effects, as well as gaining knowledge to minimise cancer risk and remain vigilant for changes, particularly in those who have had facial radiotherapy or who have genetic Rb. It will also be a guide for clinicians who review these patients in primary care settings and late effects clinics.

Partnerships

Collaboration and partnership development is a vital activity in the enhancement of our support provision.

Ongoing partnership continues with immense gratitude via organisations such as Family Fund, Young Lives vs Cancer and the Gavin Glynn Foundation. Both Support Workers continue to offer activities to children and young people indirectly through partners such as Barretstown, the Ellen MacArthur Trust, Over the Wall Camps and VICTA.

New partnerships have enhanced support for people affected by Rb and include Love Oliver who financially and practically support families travelling from Scotland for treatment; and Free Kicks who gift our members experiences and free events tickets.

Feedback

"CHECT has been a tower of strength to us since our 5-week-old baby was diagnosed with Rb. Right from the word 'go', where we were lying in pieces, a face-to-face support worker was in our room on the ward to make us aware how help could be provided. We've gradually picked ourselves up but have continued to receive enormous help from CHECT in terms of people regularly checking in with us at appointments to contacting us when we are home, assisting with adapting to living with a child with cancer, disability needs such as parking badges and coordinating different families so that they can support one another. In a world which could have been very isolating, they made sure this did not happen." (Father of a newly diagnosed baby).

"Thank you so much for your help, what would we do without you." (Mum of a child on active treatment)

"I really appreciated your help with referring me to the Late Effects Clinic. It has been a worrying time but feeling much better about everything now." (Adult email)

"Thank you so much for encouraging me to contact my GP and optician. I took the red reflex leaflet with me." (Worried mum)

Awareness

Rb is a rare disease which means that most people are not aware of it. Sadly, this frequently leads to a delay in a diagnosis being made and, because Rb is a fast-growing cancer, quick access to treatment can be vital in order to save a child's eyes, sight and life.

Raising awareness of Rb among both healthcare professionals and the public is therefore important in helping to drive early diagnosis and as such remains a key part of our work.

We are incredibly grateful to the healthcare professionals who volunteer their time on our Health Care Professionals Focus Group, bringing their expertise and experience to enrich this awareness programme. Quite simply, much of this work wouldn't be possible without their generous input.

Pathways to Diagnosis

In 2012, as part of its aim to reduce the delays in diagnosis of retinoblastoma experienced by some families in the UK, CHECT began to collect information from parents called 'Pathways to Diagnosis'.

This information is gathered by our Support Workers during the course of their conversations with families and focuses on whether the families had any prior awareness of retinoblastoma; the signs they noticed in their child's eyes that prompted them to seek help; and the actions taken by the healthcare professionals they consulted.

It became apparent that the range of experience was huge: from families who were referred to one of the two specialist Rb centres in the UK within days of noticing their child's symptoms; to families who spent over six months and numerous visits to various healthcare professionals before anyone recognised the significance of what they were reporting or carried out the appropriate tests and made appropriate referrals. Recording these experiences in a quantitative way allowed CHECT to refine messages and information to address those areas where it was most needed: not only to alert parents of young children, but also GPs,

health visitors and opticians to the main signs and symptoms of Rb, and the need for urgent examination and onward referral.

In 2022 the total number of pathways collected was 38.

In 2022 we saw the best referral rates recorded since 2012: 73% of children with Rb receiving appropriate urgent referrals, and 3% waiting more than six months. This is against the eleven-year average of 48% urgent referrals and 10% waiting more than six months. Urgent referrals by GPs in particular are showing an encouraging upward trend, with 66% of GPs who saw a child with Rb in 2022 making the appropriate urgent referral, vs the survey average of 42%. And looking back to 2012 when the survey started, just 28% of GPs made the appropriate urgent referral. White eye continues to be the most common sign, with another record year for parents spotting the glow in a photo (37% vs survey average of 18%). This is significant because white eye may be visible via flash photography earlier than it would be observable with the naked eye, contributing to earlier diagnoses.

Although Pathways to Diagnosis is designed to be a snapshot, or an indicator of trends in diagnosis in the UK, it is a key part of the resources we use to help CHECT achieve its aim of raising awareness of Rb in order to aid earlier diagnosis.

Public awareness

It's often parents or carers who spot the signs of Rb - whether that's a white eye seen in a family photo, a squint, or another symptom – so public awareness is an important area of our work to help ensure a swift diagnosis. We use traditional and digital media to reach parents and other members of the public and raise awareness of Rb.

Media:

Previous research carried out by, or on behalf of, CHECT has shown that many people first hear about Rb after reading an article. During the reporting period we received over 83 mentions in the media, including 29 national pieces, giving an opportunity to see/hear of many millions (1.8 billion) across all media outlets.

Digital:

We continue to adapt the CHECT website to ensure that it is easy to navigate and contains relevant and useful information to visitors. The most visited pages remain our white eye and signs and symptoms and 'what causes retinoblastoma' pages. We have added an 'events' page to the website, so that we can publish the details of our upcoming support events. And, we have launched CHECT TYA – a new website aimed at teenagers and young adults who have had retinoblastoma. The website includes blogs written by our members, information and advice and helpful links.

Social Media:

Social Media is a key tool to raise the awareness of Rb. In the period our Instagram followers increased by 23%, our Facebook followers by 2.1% and our Twitter followers by 4%. We reached over 1 million people on Facebook, 174k people on Instagram and over 135k people on Twitter. We launched a TikTok channel, which has over 180 followers, and an Instagram channel for CHECT TYA which has over 170 followers.

Ongoing communication:

- We send out monthly newsletters and emails filled with updates relating to support, awareness, research, fundraising, stories, and events. In 2022/23, the open rates averaged 43,2%.
- We produce two editions of our magazine, InFocus, every year this is distributed both digitally and in-print. We offset the carbon footprint for printing.
- We maintain a blog with content, including news, events, real life stories, research, and articles.

Inclusivity

We have created a Inclusivity Working Group to ensure that the charity is fully accessible and represents all those we support.

In the period outputs include:

• We are translating our signs and symptoms posters into the five most commonly spoken languages

- in the United Kingdom. To date, through the generous support of Planet Languages, we have translated these into Polish and Romanian.
- We have looked at our awareness material with the view of making it more inclusive and included a child from a non-white ethnicity in our signs and symptoms imagery.
- We have now included the option of having our pronouns in our email signatures.
- We now add image descriptions where appropriate to our social media posts, to make our posts more accessible for those unable to view the pictures.
- We also use case studies from a range of Rb experiences, including those who are blind, those who
 have lost an eye(s) to Rb, and also those who have experienced differing levels of, or no visual
 impairment, as a result of their Rb.

Research

The period saw the completion of projects by Dr Jesse Berry ('Comparing blood to aqueous humor as a liquid biopsy for retinoblastoma: determining the superiority of the aqueous humour as a source of tumour DNA'), Professor Majlinda Lako ('Assessing the feasibility of pluripotent stem cell derived retinal organoids as a model system to test the safety and efficacy of chemotherapeutic agents in retinoblastoma') and a joint-funded project with Fight for Sight led by Dr Amy Gerrish ('Further investigation into intra-ocular fluid as a liquid biopsy in retinoblastoma').

Dr Jesse Berry

The main finding from the research is that aqueous humour (or AH, taken from the eye) has a higher amount and likelihood of finding circulating DNA compared to the blood, and so would work better as a 'liquid biopsy' for retinoblastoma. However, it has also found that important information relating to an increased risk of metastatic disease may be found in the blood. Although this is rare in the UK, it is the most dreaded outcome in the care of children with Rb. Thus, this research provides additional evidence that evaluating the blood is important and, in the future, may be used to guide any additional chemotherapy treatments the child may need.

Professor Majlinda Lako

This team successfully developed lab-grown cell models called organoids, which can be used to test existing and new chemotherapeutic drugs. In this way, the models can be used to find those treatments which are least likely to cause sight loss, whilst effectively treating the retinoblastoma, as well as testing for optimal doses prior to clinical trials.

Dr Amy Gerrish

This project showed that the analysis of cell-free DNA within fluid taken from the eye can be used as an alternative to tumour tissue, or 'liquid biopsy' 1) for the diagnosis of non-heritable retinoblastoma; and 2) to identify those tumours that are more resistant to treatment. Not only can this information be found from the one combined genetic test (important, as there is limited ocular fluid available for testing), but the team has also determined the optimal time point for ocular fluid collection to maximise results. This will be essential to facilitate implementation into clinical service, which is planned within the next 24 months.

CHECT continues to support three ongoing projects:

Laboratory / Basic science

Professor Shin-Ichi Ohnuma: Evaluation of PRELP function using retinoblastoma samples.

Previous research by Professor Ohnuma has found that whilst PRELP protein is highly expressed in normal retinal tissues, it is not expressed in retinoblastoma. Preliminary data from cell cultures indicate that administration of PRELP to the established laboratory retinoblastoma cell lines inhibited cancer progression. Now, this team wants to confirm that these results have clinical application, by applying PRELP protein to the human retinoblastoma tissues and examining the effect on retinoblastoma development. The advantage of

such an approach over some current methods is that only affected cells will be impacted by the treatment, with no expected toxicity to surrounding normal, unaffected retinal cells, thereby preserving more of the child's vision.

Clinical

Dr Zerrin Onadim: Eloise Patterson Project: Study of records held at The Royal London Hospital and Childhood Cancer Research Group on retinoblastoma patients Phase 2.

This project is initially funded via a donation from the Greendale Foundation, inspired by a young adult who has previously had retinoblastoma, Eloise Patterson. Phase I (collection of clinical and mutation data and linking to Public Health England records) is now complete. This will provide complete information on type of Rb, type of mutation, treatment, follow-up data on second primary tumours and causes of any deaths.

We were delighted that the Greendale Foundation provided further support to allow for an additional phase to be delivered - Phase II (statistical analysis to estimate risks, which it is hoped could potentially lead to earlier diagnosis and treatment of these second cancers in current - and future - Rb populations), due to complete by the end of 2023.

Psychosocial

Dr Bob Phillips: Developing an evidence-based psycho-educational intervention for teenagers and young adults who have had retinoblastoma.

There is little guiding evidence about the specific challenges that teenagers who have had retinoblastoma face as they transition towards adulthood. Understanding the psycho-educational needs of teenagers and young adults as they transition is essential if we are to offer effective interventions to support them. This PhD studentship aims to develop an evidence-based intervention for teenagers and young adults with retinoblastoma that offers relevant, accessible, and effective psycho-educational support.

In 2022/23 we continued our objective of delivering an annual research award.

Professor Seigel

'A retinal organoid platform for retinoblastoma drug development' will start in July 2023 and builds upon previous CHECT-funded research.

Our thanks go to all members of our Scientific Advisory Group, both lay and professional, who volunteer their time to make CHECT's research programme possible, and thus support our aim of improving the lives of everyone affected by retinoblastoma in the future.

ACHIEVEMENT & PEFORMANCE

Fundraising

Fundraising Policy

CHECT does not use fundraising services or external professional fundraisers to undertake its fundraising activities. Additionally, no data is shared with or sold to any external agencies. The charity does not purchase external lists of potential individual donors or undertake direct mail appeals to such lists.

The charity issues a biannual newsletter and a monthly e-newsletter / blog (both of which can be easily unsubscribed from) that share information about the charitable work and fundraising activities undertaken.

The charity occasionally invites individuals to attend events but does not exert undue pressure to attend or to donate. It does not approach or pressure vulnerable people to support its work. A complaints policy is in place and is accessible on the charity's website (www.chect.org.uk). The charity adheres to the Fundraising Code of Practice issued by the Fundraising Regulator.

Any fundraising events carried out on behalf of the charity that we are aware of are supported and monitored by the Fundraising Manager. Any marketing materials and approaches are checked that they comply with the Fundraising Code of Practice and details of income and expenditure are recorded by the Fundraising Manager. Income is acknowledged and grateful thanks are sent, typically with a letter and certificate.

Community and Events

We are incredibly grateful and always overwhelmed by the passion and dedication of our supporters, who go to such lengths to raise vital funds for us through the events and sponsored challenges they organise.

Highlights include:

- In May, Clare Collins and a group of friends (some of whom had never cycled before) tackled a ride from Leeds to Inkersall, near Chesterfield. They arrived an hour ahead of schedule to a crowd of well-wishers sitting in the sunshine and received a huge cheer, as well as raising £5,987.
 Natasha and Alex Finney held a Charity Night jointly for CHECT and Bolton Wanderers In The Community, With a magician, raffle and auction, each charity received a gift of £2,100.
- Joshua Young and six friends took on the National 3 Peaks in 24 hours in June. They faced difficult conditions but battled through, completing the challenge in 22:28 hours, raising £2,113.
- Dean and Kellie Ascheri have been raising funds for CHECT for over 15 years, firstly by staging football matches and then by holding their Annual Golf Day, which son Luca now helps to organise. In 2022 they raised £2,235, bringing their total to over £30,000.
- Oliver Lea cycled from London to Paris over four days in September, to raise funds and awareness for CHECT. He achieved his aim and raised £2,930.
- Former Chair of the Board of Trustees, Phillip Moore, undertook the New York Marathon in November, raising £4,611.
- For the 27th year Roisin Lynch, her friends and family braved the cold waters of Donegal for their Annual Christmas Day Swim for CHECT, raising £3,217. Since 1995, the Lynch family have raised a total of over £45,000 from this much-anticipated event.
- Festus Fearon and his running group, Cool Runnings, took on the challenge of the Liverpool Half Marathon in March and have raised over £5,150 for CHECT.
- In October a total of 11 runners ran the post-Covid restricted London Marathon raising £39,000.

Charity of the Year Partnerships

A huge thank you to the groups and organisations who chose us to be their Charity of the Year. We are very grateful to Next Warehousing and Twenty Essex for announcing that they will be supporting us in 2023.

Corporate Support

We are very grateful for the continued support we receive from longstanding supporters Hancock & Wood and AJF Commercial Business Sales.

Vision Express

CHECT has been a proud partner of Vision Express since 2010, and the company has played an invaluable role in helping us to raise awareness of Rb, as well as generating significant funds to support our work. Vision Express was the first optician in the UK to roll out a protocol to ensure a quick and effective referral if Rb is suspected.

Continuing our joint charity partnership with Vision Express and the Macular Society, Vision Express colleagues held two months of fundraising in September and October, undertaking a creative variety of events and activities to raise funds for the two charities.

The charity partnership also saw the launch of another initiative - the Marvin the Mole soft toy. After appearing in Vision Express adverts, Marvin proved to be such a hit with the public that the high street optician brought him to life as a fluffy mascot, going on sale both online and in stores in March 2022. 100% of all profits raised from the sale of Marvin go to help those affected by retinoblastoma and people living with macular disease.

Vision Express colleagues, and Marvin, contributed an amazing £124,468 to be shared between the two charities during the period.

Birmingham Optical

Now into the seventh year of our partnership with Birmingham Optical, we are enormously grateful to everyone in the company for all their continued support through fundraising and awareness raising activities.

Highline Contracts

We are very grateful to all at Highline for holding their second Annual Golf Day, raising £3,250.

Alta Advisers Ltd

We are extremely grateful to Alta Advisers Ltd for choosing to donate £5,000 to CHECT. We were nominated by a staff member, who has a close friend who's relative was diagnosed with Rb.

CField Construction

We are very grateful to CField Construction and all their staff members for challenging themselves to collectively take 20,000,000 Steps in February 2023. As a result, they raised a fantastic £10,526 for CHECT.

Sackers and Partners LLP

We are grateful to law firm Sackers and Partners LLP, who generously make their fantastic meeting spaces available to us. As we have no meeting space of our own, this has been an invaluable asset to us.

Individual Giving

We are extremely grateful to all those who support us with a regular gift through a monthly pledge or Give As

You Earn, as well as to those who so generously make a one-off donation to our charity.

We understand that the economic situation is difficult for many and are very grateful to all who donate to our charity.

Trusts & Foundations

2022/23 income from charitable trusts and foundations exceeded £222k and we are extremely grateful to every trust and foundation that supported CHECT's work so generously in the period.

In particular we express our gratitude to the Clive Richards Foundation who fully funded a groundbreaking research project, and match funded the Christmas Appeal. We would also like to thank the Greendale Foundation for many years of extremely generous support.

Other funders included the Adobe Foundation; the Eveson Trust; the February Foundation; the Childwick Trust; the Hobson Charity; the David Family Foundation; the Lawson Trust; the Jessica Mathers Trust and the Ulverscroft Foundation.

We are enormously grateful to every one of the trusts and foundations that have so kindly and generously supported CHECT's work over the past year and send our thanks to them all.

In Memoriam

Trustees and staff would like to thank and offer sincere condolences to families and friends who have given in memory of a loved one during the year and are grateful to those who have kindly remembered us in their will

FINANCIAL REVIEW

Reserves Policy

CHECT maintains its reserves under two categories: (a) unrestricted (general) reserves, which are available for general use in pursuance of the charity's objectives, and (b) restricted reserves, which are for specifically earmarked purposes such as medical research or support to families belonging to a particular area. The unrestricted funds of the Charity as of 31 March 2023 totaled £444,946. The Trustees have determined that the Charity should hold at least six months of running expenses in reserve. This figure represents the amount required to run the charity for six months excluding winding up costs and any special projects. Based on this calculation, the required value of reserves for the year 2023-24 is £280,903. The reserves held as on 31 March 2023 represent 9.4 months of budgeted expenditure which is predicted at current levels to reduce to 6.7 months at the end of the coming financial year.

The Trustees review the Charity's reserves policy on a regular basis. The reserves position is reported at every board meeting.

Investment Policy

Funds surplus to immediate requirements are to be invested in interest bearing accounts without risk to the capital. Such accounts are to be those offered by institutions covered by the Financial Services Compensation Scheme (FSCS). Funds required for immediate, operational, requirements are held with CAF Bank Ltd

FINANCIAL PERFORMANCE

The total incoming resources of the Charity were £646,954, which was an increase of £207,079 on 2021-22's total income of £439,515. Total resources expended during the year increased accordingly to £604,841 (2021-22: £481,748).

Overall, the Charity has recorded a surplus for the year of £41,753 compared to a deficit of £42,233 in 2021-22. As at 31 March 2023, this has resulted in net assets increasing from £403,193 at the preceding year end to £444,946. This is entirely comprised of unrestricted funds (2021-22: unrestricted funds of £400,652 and restricted funds of £2,541).

Anticipating that the charity would be operating in a very challenging financial climate it was planned to operate on a deficit budget in 2022/23.

FUTURE PLANS

Our vision continues to be the go-to charity in the United Kingdom for anyone affected by Rb.

Our mission is to lessen the impact of retinoblastoma by driving early diagnosis, funding research, and offering lifelong support now for future generations.

Our focus over the coming period is to continue to deliver on the objects of the charity, and in particular to:

- Always place those that we support at the centre of everything that we do.
- To increase our impact by delivering incremental improvements in the delivery of our Support, Research, Awareness, and Influence activity.
- To increase the levels of funds raised in an ethical and sustainable manner.
- To live within our financial means by being mindful of expenditure and protecting the pennies on the pound spent on charitable activity.
- To be digitally enabled, focussed and savvy.
- To proactively seek alliances and partnerships to allow us to widen our reach, outputs, and impact.
- To be a caring and inclusive employer with a happy and focussed team.

Support

The delivery of lifelong levels of support is the key focus of the Charity with a focus on creating a support pathway that identifies the key stages of the Rb journey – research, pre diagnosis, diagnosis, treatment, follow up, end of life.

We will weave our information, practical, social, financial, and emotional support into the above and work towards widening the offer of both the direct and indirect (partnership) delivered services.

We have increased the frequency of both online and face to face events, ensuring to offer an event in each of the UK's regions annually and quarterly online events for TYA, family and Beyond Rb groups. Overall, we can see an increase in interest and need from our members for these events.

We continue to provide finances to ensure the value of our support grants provides a more significant level of financial support to individual families.

We will continue to grow our collaboration with third parties such as the Ellen McArthur Cancer Trust, Barretstown, Guide Dogs, Over the Wall Camps and VICTA, allowing more children and young people to experience events that can increase confidence and resilience.

We are also setting up more partnerships with other organisations and regionally based charities to offer members grants, treats and short breaks. These include football tickets from Free Kicks Foundation and various holiday parks, including a CenterParcs break.

Research

Research will continue to be a vital focus for us and our members. We were delighted to be able to make an award to Professor Gail Seigel for her project "A retinal organoid platform for retinoblastoma drug development" which commences in July 2023.

We will continue to manage and support the existing projects referenced earlier and continue our commitment to research via another call for projects and a further investment during 2023-24 and beyond.

Awareness

The raising of awareness around the signs and symptoms of Rb with both the public and the medical profession remains a vital function.

Using the "Pathways to Diagnosis" as the guide, we will be focusing on key areas and moments in the diagnostic pathway to ensure that the right people have the right knowledge and information at the right time.

We are investing more in digital media and are creating engaging content to aid in the raising of awareness.

Influence

We will continue to liaise with the different organisations involved in a child and family's journey to make sure the voice of our membership is heard and helps influence all, to deliver the best and most effective experience to all families.

Through partnership and alliance working we will look to use our position to positively influence policy to improve the pathways and associated levels of support for all those affected by Rb.

STRUCTURE, GOVERNANCE AND MANAGEMENT

Governing document

The Childhood Eye Cancer Trust (CHECT) ('the Charity') is a charitable company limited by guarantee ('the Company'), incorporated on 14th July 1987 and a registered charity. The Company was established under a Memorandum of Association, which established the objects and powers of the Company and is governed under its Articles of Association. The directors of the Company are also charity trustees for the purposes of charity law and are known as the Board of Trustees ('the Board'). The maximum number of trustees is 15.

The Companies Articles were amended in 2008 with regards to the number of terms Trustees may serve. In October 2022, the Articles were further amended to remove the requirement for Trustees to be re-elected periodically. This was because, noting the size and nature of the Charity it is difficult to identify sufficient numbers of appropriately qualified and experienced candidates to fill such positions with the process also being administratively cumbersome. Amendments to the Articles were also made to allow Society, General and Board of Trustee meetings to be held remotely.

Organisational structure

The Board meets six times a year and at the beginning of each meeting, the trustees are requested to declare any conflicts of interest. No conflicts of interest were declared during this financial year. The Board's performance and trustees' skills are reviewed periodically and where possible new trustees are recruited to meet any needs or gaps identified. The Charity is a signatory to the NCVO's Good Governance Code for the voluntary and community sector.

To assist in the effectiveness and smooth running of the Charity, the Board continues to resource two sub-committees to help oversee certain aspects of the Charity's work. Sub-committees are currently set up for: finance and risk and for research (Scientific Advisory Committee).

The day-to-day management of the Charity is delegated to the CEO, supported by the staff team. At the close of the year, staffing consisted of ten staff: a chief executive (four days a week); a head of finance & operations (four days a week); an operations manager (full time); two fundraising managers and one fundraising officer (full time); a head of support (full time) and two support workers — one in London (four days a week) and one in Birmingham (four days per week); an information & research manager (three days per week).

The Childhood Eye Cancer Trust is no— affiliated with any other charitable organisation and has no related parties except as shown in the notes to the accounts. The Charity is a member of the Association of Medical Research Charities, the National Institute of Health Research, and other charities with similar aims to CHECT working within the field of eye health, childhood cancers, genetic disorders, and rare disease.

Induction and training of new trustees

New trustees are provided with information about their role and responsibilities as recommended by the Charity Commission and the National Council for Voluntary Organisations (NCVO). This includes: the trustee role description and person specification relevant to the role; the Charity's polices relevant to the Board including the confidentiality policy; and the eligibility requirements for becoming a trustee. They are also supplied with a copy of the Memorandum and Articles of Association, the strategic development plan and the chief executive's report and minutes from three previous board meetings.

Trustee roles are advertised on the CHECT website and on occasion, using external recruitment organisations. Enquiries are also occasionally received from members. A selection panel made up of the CEO, the Chair and another trustee or a member of the charity considers the application and the suitability of the applicant using agreed criteria identified on the person specification and the role description. The prospective trustee is then invited to observe a board meeting prior to appointment and standing for election which is voted on and approved by the board.

Induction meetings covering the background to current matters take place with the chief executive and key members of the staff team. Training on matters relevant to the role and responsibilities of trustees is encouraged and the Board subscribes to literature pertinent to good governance. All trustees are required to sign: a contract setting out their responsibilities; a confidentiality agreement; the conflict-of-interest policy; and confirmation of their eligibility to serve as a director. They are also asked to undergo Disclosure and Barring Service (DBS) checks. The majority of trustees have personal experience of retinoblastoma and its impact but individuals with other key skills are also recruited to the Board to ensure an appropriate balance to meet the needs of the Charity.

Risk management

The trustees regularly assess the risks to the Charity and maintain a comprehensive risk register which includes plans to mitigate or manage the risks identified.

Risks identified as red on the risk register are reviewed by the Finance and Risk Committee at each of their meetings and in detail twice a year. Their discussions are reported at each Board meeting, who in turn undertake a detailed review annually. The Chief Executive reviews on a monthly basis after which any concerns are discussed with the Chair of the Finance & Risk Committee.

The trustees are satisfied that there are systems and arrangements in place to manage the risks identified as far as possible.

STATEMENT OF TRUSTEES' RESPONSIBILITIES

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

Company law requires the trustees to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of resources, including the income and expenditure, of the charitable company for that period. In preparing those financial statements, the trustees are required to select suitable accounting policies and then apply them consistently; observe the methods and principles in the Charity SORP; make judgements and estimates that are reasonable and prudent; and prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in business.

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

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

AUDITORS

The auditors, Knox Cropper LLP, will be proposed for re-appointment at a forthcoming Board Meeting.

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

Approved by order of the board of trustees on 27 November 2023 and signed on its behalf by:

Ian Ellington - Trustee

REPORT OF THE INDEPENDENT AUDITORS TO THE MEMBERS OF CHILDHOOD EYE CANCER TRUST

Opinion

We have audited the financial statements of Childhood Eye Cancer Trust (the 'charitable company') for the year ended 31 March 2023 which comprise the Statement of Financial Activities, the Balance Sheet, the Cash Flow Statement, and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice), including Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland'.

In our opinion the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 31 March 2023 and of its
 incoming resources and application of resources, including its income and expenditure, for the year then
 ended:
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice, including Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and the Republic of Ireland'; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

Basis for Opinion

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

Conclusions Relating to Going Concern

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

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

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

Other Information

The trustees are responsible for the other information. The other information comprises the information included in the annual report, other than the financial statements and our Report of the Independent Auditors thereon.

Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

REPORT OF THE INDEPENDENT AUDITORS TO THE MEMBERS OF CHILDHOOD EYE CANCER TRUST

Opinions on Other Matters Prescribed by the Companies Act 2006

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

- the information given in the Report of the Trustees, which includes the Directors' Report prepared for the
 purposes of company law, for the financial year for which the financial statements are prepared is
 consistent with the financial statements; and
- the Report of the Trustees has been prepared in accordance with applicable legal requirements.

Matters on Which we are Required to Report by Exception

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

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

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

Responsibilities of Trustees

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

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

Auditor's Responsibilities for the Audit of the Financial Statements

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

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

REPORT OF THE INDEPENDENT AUDITORS TO THE MEMBERS OF CHILDHOOD EYE **CANCER TRUST**

- The charitable company is required to comply with both company law and charity law as applicable in England and Wales and, based on our knowledge of its activities, we identified that the legal requirement to accurately account for restricted funds was of key significance.
- We gained an understanding of how the charitable company complied with its legal and regulatory framework, including the requirement to properly account for restricted funds, through discussions with management and a review of the documented policies, procedures, and controls.
- The audit team, which is experienced in the audit of charities, considered the charitable company's susceptibility to material misstatement and how fraud may occur. Our considerations included the risk of management override.
- Our approach was to check that all restricted income was properly identified and separately accounted for and to ensure that only valid and appropriate expenditure was charged to restricted funds. This included reviewing journal adjustments and unusual transactions.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at www.frc.org.uk/auditorsresponsibilities. This description forms part of our Report of the Independent Auditors.

Use of our Report

This report is made solely to the charitable company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006. Our audit work has been undertaken so that we might state to the charitable company's members those matters we are required to state to them in an auditors' report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and the charitable company's members as a body, for our audit work, for this report, or for the opinions we have formed.

Richard Billinghurst FCA (Senior Statutory Auditor) for and on behalf of Knox Cropper LLP 65 Leadenhall Street London

EC3A 2AD

01/12/2023

Date:

CHILDHOOD EYE CANCER TRUST (REGISTERED NUMBER: 02143917) STATEMENT OF FINANCIAL ACTIVITIES (INCORPORATING AN INCOME AND EXPENDITURE ACCOUNT) FOR THE YEAR ENDED 31 MARCH 2023

	Notes	Unrestricted funds	Restricted funds £	2023 Total funds £	2022 Total funds £
INCOME AND ENDOWMENTS FROM:					
Donations and Legacies	2	553,401	86,309	639,710	436,899
Other Trading Activities	3	1,077	-	1,077	841
Investment Income	4	5,807	-	5,807	1,775
Total		£560,285	£86,309	£646,594	£439,515
EXPENDITURE ON:					
Raising Funds	5	169,066	-	169,066	135,198
Charitable activities	6				
Medical Research and Grant Making		61,392	-	61,392	69,256
Awareness Raising		107,647	-	107,647	85,895
Family Support and Information		163,356	88,850	252,206	171,098
Influencing		14,530	-	14,530	20,301
Total		£515,991	£88,850	£604,841	£481,748
NET INCOME/(EXPENDITURE)		44,294	(2,541)	41,753	(42,233)
RECONCILATION OF FUNDS		44,294	(2,541)	41,733	(42,233)
		400 652	2 544	402 402	445 426
Total Funds Brought Forward		400,652	2,541	403,193	445,426
TOTAL FUNDS CARRIED FORWARD		£444,946	£-	£444,946	£403,193

CONTINUING OPERATIONS

All income and expenditure has arisen from continuing activities.

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CHILDHOOD EYE CANCER TRUST (REGISTERED NUMBER: 02143917)

BALANCE SH	IEET AT 31 MAI	RCH 2023 2023	2022
	Notes	£	£
FIXED ASSETS			
Tangible Assets	14	465	937
CURRENT ASSETS			
Debtors	15	10,388	10,513
Cash at Bank and in Hand		628,831	626,088
		639,219	636,601
CREDITORS			
Amounts Falling Due Within One Year	16	(188,017)	(180,655)
NET CURRENT ASSETS		451,202	455,946
TOTAL ASSETS LESS CURRENT LIABILITIES		451,667	456,883
CREDITORS			
Amounts Falling Due After More Than One Year	17	(6,721)	(53,690)
NET ASSETS		444,946	403,193
FUNDS			
Unrestricted funds	20	444,946	400,652
Restricted funds			2,541
TOTAL FUNDS		£444,946	£403,193

These financial statements have been prepared in accordance with the provisions applicable to charitable companies subject to the small companies' regime.

The financial statements were approved by the Board of Trustees on and were signed on its behalf by:

lan Ællingtor∕√Tru

27 November 2023

CHILDHOOD EYE CANCER TRUST (REGISTERED NUMBER: 02143917) CASH FLOW STATEMENT FOR THE YEAR ENDED 31 MARCH 2023

	Notes	2023	2022
		£	£
Cash flows from operating activities:			
Cash Generated from Operations (see below)		(2,487)	(58,410)
Finance Costs Paid	22	(580)	(391)
Net Cash (Used in)/Provided by Operating Activities		(3,067)	(58,801)
Cash Flows from Investing Activities:			
Interest Received		5,807	1,693
Net Cash Provided by Investing Activities		5,807	1,693
Change in Cash and Cash Equivalents in reporting period		2,740	(57,108)
Cash and cash equivalents at beginning of reporting period		626,088	683,196
Cash and cash equivalents at end of reporting period		£628,831	£626,088

1. Accounting Policies

Basis of preparing the financial statements

The financial statements of the Charity, which is a public benefit entity under FRS 102, have been prepared in accordance with the Charities SORP (FRS 102) 'Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102)', Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' and the Companies Act 2006. The financial statements have been prepared under the historical cost convention.

Going concern

The trustees consider that the Charity's cash at the date of approval of the financial statements and its projected cash flows for the following year are sufficient such that the Charity remains a going concern for the foreseeable future, being a period of at least 12 months from the date of approval of these financial statements. In making this judgement, the trustees and senior management team have considered future agreed funding and the anticipated impact of external factors on future funding and expenditure.

Critical accounting judgements and key sources of estimation uncertainty

The preparation of financial statements in accordance with generally accepted accounting practice requires management to make estimates and judgements that affect the reported amounts of assets and liabilities at the reporting date and the reported amounts of revenues and expenses during the reporting period. The critical judgements and estimates are reflected in these accounting policies.

Income

All incoming resources are included in the Statement of Financial Activities when the Charity is entitled to the income and the amount can be quantified with reasonable accuracy. The following specific policies are applied to particular categories of income when appropriate:

- Voluntary income is received by way of grants, donations and gifts and is included in full in the Statement of
 Financial Activities when receivable. Grants, where entitlement is not conditional on the delivery of a specific
 performance by the Charity, are recognised when the Charity becomes unconditionally entitled to the grant.
- Donated services and facilities are included at the value to the Charity only where this can be quantified. The value of services provided by volunteers has not been included in these accounts. Donated goods are measured at fair value and included within income.
- Investment income is included when receivable.

Expenditure

Expenditure is recognised on an accrual basis as a liability is incurred. Expenditure includes any VAT that cannot be fully recovered, and is reported as part of the expenditure to which it relates:

- Costs of generating funds comprise the costs associated with attracting voluntary income.
- Charitable expenditure comprises those costs incurred by the Charity in the delivery of its activities and services for its beneficiaries. It includes both costs that can be allocated directly to such activities and those costs of an indirect nature necessary to support them.
- Governance costs include those costs associated with meeting the constitutional and statutory requirements of the Charity and include audit fees and costs linked to the strategic management of the Charity.
- All costs are allocated between the expenditure categories of the Statement of Financial Activities on a basis
 designed to reflect the use of the resource. Costs relating to a particular activity are allocated directly, others
 are apportioned on an appropriate basis e.g. time or estimated usage basis as set out in the notes to these
 accounts.

1. Accounting Policies - continued

Tangible fixed assets

Tangible fixed assets are stated at cost less accumulated depreciation. The cost of minor additions or those costing below £250 are not capitalised. Depreciation is provided at rates calculated to write off the cost of each asset over its expected useful life, which in all cases is estimated at 4 years.

Cash at bank and in hand

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

Debtors

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

Creditors

Creditors are recognised at their settlement amount, after allowing for any trade discounts due.

Financial instruments

The Charity only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value.

Employee benefits

Short-term benefits are recognised as an expense in the period in which the service is received. Termination benefits are accounted for on an accrual basis and in line with FRS 102. The Charity operates a defined contribution pension scheme. Contributions are charged to the Statement of Financial Activities in the period to which they relate and are allocated between activities and funds based on the use of the resource i.e. where employees spend their time.

Taxation

The Charity is exempt from corporation tax on its charitable activities.

Fund accounting

Unrestricted funds can be used in accordance with the charitable objectives at the discretion of the trustees. Restricted funds can only be used for particular restricted purposes within the objects of the Charity. Restrictions arise when specified by the donor or when funds are raised for particular restricted purposes. Further explanation of the nature and purpose of each fund is included in the notes to the financial statements.

Hire purchase and leasing commitments

Rentals paid under operating leases are charged on a straight-line basis over the period of the lease.

2. Donations and Legacies

	Unrestricted funds £	Restricted funds £	Total 2023 £	Total 2022 £
Grants				
Grants from Trusts & Foundations	135,481	86,309	221,790	102,336
Government Grants				33,425
	135,481	86,309	221,790	135,761
Donations:				
General Donations	79,887	-	79,887	42,309
Standing Orders	21,782	-	21,782	20,497
In Memoriam	12,511	-	12,511	7,587
GAYE	5,549	-	5,549	6,607
Collecting Tins	1,149	-	1,149	451
Community Donations	2,434	-	2,434	2,819
Other Corporate Donations	101,654	-	101,654	55,193
London Marathon	39,075	-	39,075	48,172
Great North Run	9,747	-	9,747	5,686
Digital Fundraising Campaign	-	-	-	14,627
Other Running Events and walks	66,251	-	66,251	2,626
Other events, Sporting Activities and Community Fundraisers	72,881	-	72,881	84,552
,	412,920		412,920	291,126
Legacies	5,000	-	5,000	10,012
Total Income from Donations and Legacies	£553,401	£86,309	£639,710	£436,899

The Trustees would like to thank all the members and supporters who have contributed their time and effort to raising money for the Trust.

3. Other Trading Activities

	2023 Total £	2022 Total £
Christmas Cards	310	376
Merchandise Sales	767	465
	£1,077	£841

4. Investment Income

	2023 Total £	2022 Total £
Divided Income Bank Interest	5,807 £5,807	82 1,693 £1,775
5. Raising Funds		
Raising Donations and Legacies	2023 Total £	2022 Total £
Staff Costs Fundraising Costs	99,822 8,171	79,638 9,474

6. Charitable Activities

Support Costs

	Direct Costs (see note 7)	Grant Funding of Activities (see note 8)	Support Costs (see note 9)	2023 Total £
Medical Research and Grant Making	10,218	43,500	7,674	61,392
Awareness Raising	65,106	-	42,541	107,647
Family Support and Information	150,883	13,335	87,988	252,206
Influencing	7,741	-	6,789	14,530
·	£233,948	£56,835	£144,992	£435,775

61,073

£169,066

46,086

£135,198

7. Direct Costs of Charitable Activities

	2023 Total £	2022 Total £
Staff Costs Newsletter Costs Awareness Campaign Other Direct Costs Leaflets and Printing	209,805 3,075 - 21,068	133,867 4,134 90 7,875 100
	£233,948	£146,066

8. Grants Payable

	2023	2022
	Total	Total
	£	£
Medical Research and Grant Making	43,500	50,000
Family Support and Information	13,335	9,797
	£56,835	£59,797

CHILDHOOD EYE CANCER TRUST (REGISTERED NUMBER: 02143917)
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023

9. Support Costs

Support costs are allocated to activities on the basis of staff time. Governance costs of £3,038 are included in support costs.

	Raising Donations and Legacies £	Medical Research and Grant Making £	Awareness Raising £	Family Support and Information £	Influencing £	Total Activities 2023 £	Total Activities 2022 £
Salaries	37,385	4,698	26,041	53,860	4,156	126,140	119,905
Premises Rent	3,381	423	2,355	4,874	376	11,409	15,958
Premises Costs	•	•		•		•	3,435
Insurance	396	50	276	571	44	1,337	662
Repairs & Maintenance	188	24	131	271	21	635	10,714
Communications and Stationery	8,257	1,038	5,752	11,897	918	27,862	7,151
Meetings, Seminars and Staff	494	62	344	711	55	1,666	4,887
Training							
Travel and Subsistence	269	34	187	387	29	906	314
Recruitment	6,341	797	4,417	9,135	705	21,395	6,762
Accountancy Fees	2,177	274	1,516	3,136	242	7,345	12,433
Sundries	1,011		704	1,456	112	3,410	928
Depreciation of Tangible Fixed	140	18	26	201	16	472	473
Assets							
Bank Charges	172	21	120	247	19	579	391
Auditors' Remuneration	862	108	601	1,242	96	2,909	2,760
	£61,073	£7,674	£42,541	£87,988	£6,789	£206,065	£186,773

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10. Net Income (Expenditure)

	2023	2022
	Total	Total
	£	£
Auditors Remuneration	2,909	2,760
Depreciation – Owned Assets	472	473
Other Operating Leases		15,958
Auditors' Remuneration – Non Audit Services	3,151	3,000

11. Trustees' Remuneration and Benefits

There were no trustees' remuneration or other benefits for the year ended 31 March 2023 nor for the year ended 31 March 2022.

Trustees Expenses

During the current year £129 of expenses were reimbursed to the Trustees (2022:NIL).

12. Staff Costs

	2023 Total £	2022 Total £
Wages and Salaries	369,537	297,615
Social Security Costs Other Pension Costs	26,338 7,401	26,360 9,435
Interim Fees Payable	32,491	9,435
	£435,767	£333,410

Included within wages and salaries are the direct costs of the interim CEO. The average monthly number of employees during the year was as follows:

	2023 Total	2022 Total
Average Number of Employees	10	9

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

	2023	2022
	Total	Total
	£	£
£60 000 - £70 000	_	1

13. Comparatives For the Statement of Financial Activities

13. Comparatives For the Statement of Fi	mancial Activitie	5	
	Unrestricted Fund £	Restricted Funds £	Total Funds £
INCOME AND ENDOWMENTS FROM Donations and Legacies	381,438	55,461	436,899
Other Trading Activities Investment Income	841 1,775	-	841 1,775
Total	384,054	55,461	439,515
EXPENDITURE ON Raising Funds	135,198	-	135,198
Charitable Activities Medical Research and Grant Making Awareness Raising Family Support and Information Influencing	69,256 85,895 117,836 20,301	- - 53,262 -	69,256 85,895 171,098 20,301
Total	428,486	53,262	481,748
NET INCOME /(EXPENDITURE)	(44,432)	2,199	(42,233)
RECONCILIATION OF FUNDS Total Funds Brought Forward	445,084	342	445,426
TOTAL FUNDS CARRIED FORWARD	400,652	2,541	403,193

14. Tangible Fixed Assets

	Computer and Office Equipment £
COST	
At 1 April 2022 and 31 March 2023	28,428
DEPRECIATION	
At 1 April 2022	27,491
Charge for Year	472
At 31 March 2023	27,963
NET BOOK VALUE	
At 31 March 2023	£465
At 31 March 2022	937

15. Debtors: Amounts Falling Due Within O	15	Debtors:	Amounts	Falling	Due	Within	One '	Year
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· ·	2023	2022
	Total	Total
	£	£
Trade Debtors	123	526
Other Debtors	2,792	2,792
Prepayments and Accrued Income	7,473	7,195
-	£10,388	£10,513
16. Creditors: Amounts Falling Due Within One Year		
	2023	2022
	Total	Total
	£	£
Trade Creditors	32,096	56,879
Pension Creditor	7,948	1,726
Deferred Income	14,668	8,006
Accruals	134,029	114,044

Included within Accruals is £79,936 for research grants awarded but expected to be drawn down within 12 months of the year end (2022: £107,048).

Deferred income relates to donations received in respect of future events, all of which is released in the following financial year.

17. Creditors: Amounts Falling Due After One Year

	2023	2022
	Total	Total
	£	£
Accruals and Deferred Income	£6,721	£53,690

Accruals reflect grants awarded but not expected to be drawn down until more than 12 months after the current year end.

18. Leasing Agreements

Minimum lease payments under non-cancellable operating leases fall due as follows

	2023	2022
	Total	Total
	£	£
Within One year		10,080

In August 2023 a two year lease was signed for office space and this lease includes a 6 month notice period for either party to end the agreement.

19. Analysis of Net Assets Between Funds

	Unrestricted Fund £	Restricted Funds £	2023 Total Funds £	2022 Total Funds £
Fixed Assets	469	-	469	937
Current Assets	634,216	5,000	639,216	636,601
Current Liabilities	(183,018)	(5,000)	(188,018)	(180,655)
Long Term Liabilities	(6,721)	-	(6,721)	(53,690)
	£444,946	£-	£444,946	£403,193

Included within restricted funds is the restricted Hobson grant which was received during the year but is restricted to activities in 2023/24.

20. Movement In Funds

	Λ.	Net lovement in	
	At 1.4.22	Funds	At 31.3.23
	£	£	£
Unrestricted Funds			
General Fund	400,652	44,294	444,946
Restricted Funds			
Family Support	2,541	(2,541)	-
TOTAL FUNDS	£403,193	£41,753	£444,946

Net movement in funds, included in the above are as follows:

	Incoming Resources £	Resources Expended £	Movement in Funds £
Unrestricted Funds General Fund	560,285	(515,991)	44,294
Restricted Funds Family Support	86,309	(88,850)	(2,541)
TOTAL FUNDS	646,594	(604,841)	41,753

20. Movement In Funds - continued

Comparatives for Movement in Funds		Net	
	Movement in		
	At 1.4.21	Funds	At 31.3.22
Unrestricted Funds	£	£	£
General Fund	445,084	(44,432)	400,652
Restricted Funds			
Family Support	342	2,199	2,541
TOTAL FUNDS	445,426	(42,233)	403,193

Comparative net movement in funds, included in the above are as follows:

	Incoming Resources £	Resources Expended £	Movement in Funds
Unrestricted Funds General Fund	384,054	(428,486)	(44,432)
Restricted Funds Family Support	55,461	(53,262)	2,199
TOTAL FUNDS	439,515	(481,748)	(42,233)

Purposes of Restricted Funds

Medical Research Available for research into various projects that promote the

objects of the Charity

Support To provide support and information to families and individuals

affected by retinoblastoma.

Kent Travel A fund to provide eligible families living in Kent with one-off travel

grants for financial assistance with travel to UK clinics.

21. Related Party Disclosures

There were no related party transactions for the year ended 31 March 2023.

22. Reconciliation of Net (Expenditure)/Income To Net Cash Flow From Operating Activities

	2023 Total £	2022 Total £
Net (Expenditure)/Income for the reporting period (as per the Statement of Financial Activities)	41,752	(42,233)
Adjustments for:		
Depreciation Charges	472	473
Interest Received	(5,807)	(1,693)
Finance Costs	580	391
Decrease in Debtors	125	989
(Decrease) in Creditors	(39,609)	(16,337)
Net Cash (used in)/provided by operations	£(2,487)	£(58,410)

23. Analysis Of Changes In Net Funds

At 1.4.22	Cash Flow	At 31.3.23	
£	£	£	
626,088	2,740	628,828	
£626,088	£2,740	£628,828	
	£ 626,088	£ £ £ 626,088 2,740	£ £ £ £ 626,088 2,740 628,828

24. Capital Commitments

At the year end the Board had agreed to commit to £79,965 of research expenditure in 2024/2025.