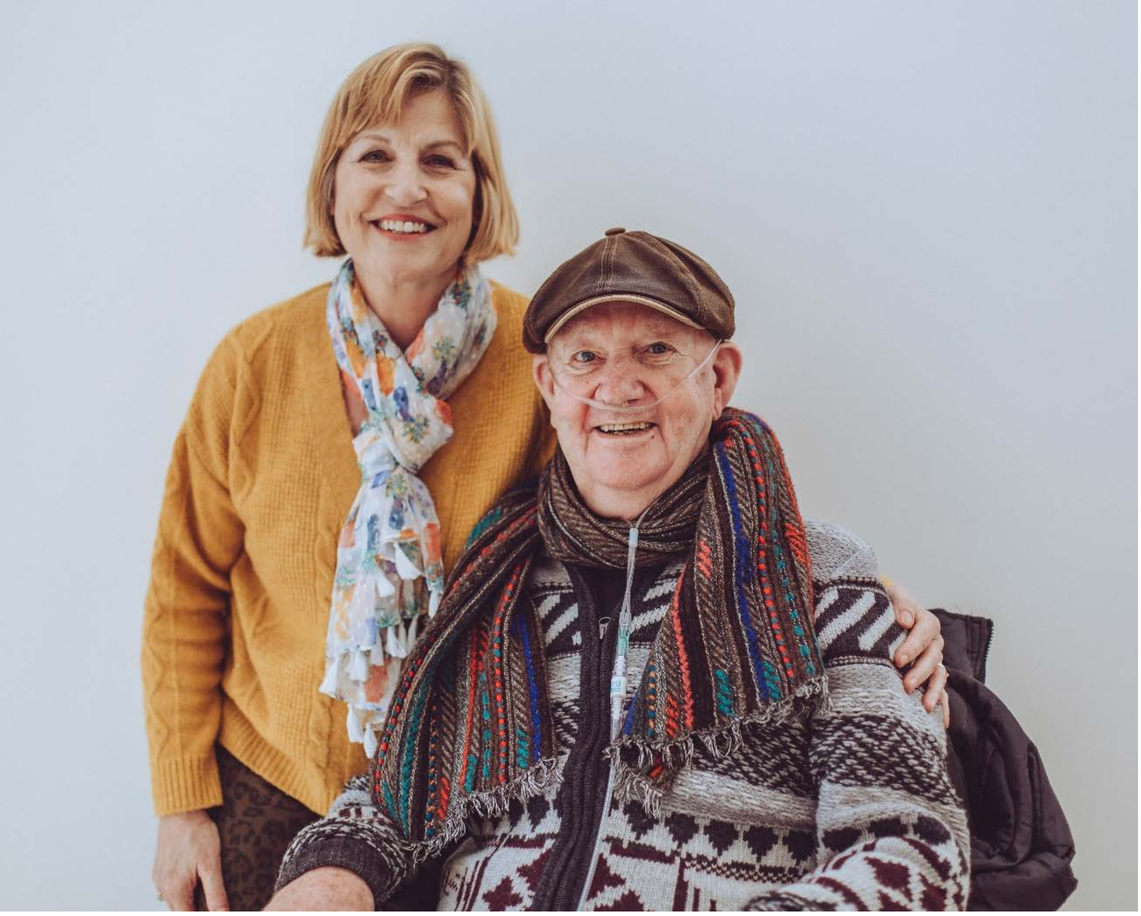
Action for Pulmonary Fibrosis

Trustees' Annual Report and Accounts

For the year ended 30 June 2020



Charity Commission England & Wales Registered Charity Number: 1152399

Action for Pulmonary Fibrosis Report and Accounts

For the year ended 30 June 2020

Contents

'I didn't really feel that I needed support. How wrong was I! The impact on me is tremendous…'

(Dawn, PF Patient)

Photos: Tim Cochrane unless otherwise stated.

What is pulmonary fibrosis?

There are over 70,000 people living with pulmonary fibrosis (PF) in the UK. This life changing condition is usually terminal and causes scarring or stiffening of the lungs, making it hard for oxygen to pass into the body. It leads to increased breathlessness, often with prolonged coughing, making daily life exhausting. Many people need extra oxygen to walk even short distances and do the most basic tasks. PF normally affects people over 50 but early-onset PF also brings its own challenges on family life, work, and prospects.

The most common form is idiopathic pulmonary fibrosis (IPF), which affects around 32,500 people. This is the most progressive form of PF. There are limited treatments available, no cure and no known cause. Life expectancy is three to five years following diagnosis and around 6,000 people die from it every year in the UK.

Covid-19 has brought lung health to the forefront of everyone's mind. As we write this, research is under way to help us better understand if Covid-19 will lead to lung fibrosis for some people so that even more people diagnosed with pulmonary fibrosis will need APF support in the future.

Why we are needed

It takes, on average, over seven months for people with PF to receive the correct diagnosis, with over 20% of patients having to wait a year or more. Once a patient has been diagnosed, they find it difficult to obtain information about the disease. Let alone explain it to others.

Patients and their families often feel lonely and isolated. The debilitating nature of the disease means, as people become more and more breathless, their need for physical and emotional support increases. Yet there is very little dedicated support or understanding about the disease available.

Covid-19 has increased people's feelings of anxiety and isolation. Our Covid-19 Survey completed by approximately 600 patients and carers told us a third of patients and carers felt forgotten:

> **'I felt forgotten and uncared for. I was originally informed by my GP that I didn't meet the criteria for shielding and that simply being on the list wouldn't prevent me from contracting Covid-19. I was devastated and insulted'.**
>
> **(PF Patient)**

Our network of peer support, information and advice offers reassurance and guidance to help individuals and families feel more connected, supported, and able to cope with the many changes that life with PF can bring.

Pulmonary fibrosis eventually affects every aspect of daily life and cuts short people's lives. With your help we can support people living with pulmonary fibrosis and assist research into effective treatments and, ultimately, a cure. This is why Action for Pulmonary Fibrosis exists.

COVID-19

The trustees have considered the impact that the COVID-19 pandemic will have on the charity's current and future financial position.

The expected implications are:

- as we enter a global recession, we expect a fall in average donations from patients and their families.
- community fundraising income, in particular, will reduce as fundraisers are restricted from taking part in group events and activities such as the London Marathon.

The charity is taking the following steps to mitigate the potential threats of COVID-19 to the organisation:

- we are planning on the assumption that there will not be any growth in income for the foreseeable future.
- we will review our financial progress monthly and make changes, as required.
- we have increased our capacity to bring in income from trusts and foundations.

'Lockdown shut down my life. The isolation really hit. I didn't really feel that I needed support. My support group thought differently and recommended me for a Support line call. At first, I really didn't think it would make any difference. How wrong was I! It's a lifeline. I so look forward to our weekly calls. Thank you APF for everything you are doing to support people like me.'

(Dawn, PF Patient)

Our vision, mission, and values

Our vision

APF's vision is to find a cure and for everyone affected by pulmonary fibrosis to have a better future.

Our mission

We provide support to families, raise awareness of the disease, campaign and educate to improve access to the highest standard of care for people living with all forms of pulmonary fibrosis. We are committed to funding research to improve quality of life for people living with pulmonary fibrosis today and tomorrow.

Our values drive everything we do:

Patient led: we empower and are led by patients who are at the heart of everything we do.

Caring and compassionate: we respect and understand the needs of patients and carers and help them to get the support they need.

Striving for excellence: we work with integrity and professionalism in all that we do.

Open and approachable: we ensure people affected by PF feel able to turn to us for advice and support in their time of need.

Ambitious to improve the lives of people affected by PF and **bold** in the ways we do this.

We may not be able to sit together just now, but with good support, it can feel like we are.

Trustees, staff, and advisors

Charity Trustees:

Mr Stephen Jones* (Chair)	
Mr Howard Almond*	
Mrs Elizabeth Bray**	
Mrs Wendy Dickinson**	appointed 2 May 2020
Dr Simon Hart	re-appointed 19 October 2019
Prof Gisli Jenkins	
Dr Rebecca Lang**	
Mr Stephen Morgan-Hyland**	
Dr Helen Parfrey	re-appointed 19 October 2019

* living with PF
** family member of someone with PF

In keeping with the charity's ethos of being patient led, over 60% of trustees have been personally affected by pulmonary fibrosis either as a patient or family member. Our trustees also include medical professionals, who are leaders in pulmonary fibrosis care and research.

Chief Executive Officer
Louise Wright

Registered Office and Principal Address
Stuart House
East Wing
St John's Street
Peterborough
PE1 5DD

Registered Charity
1152399

Principal Advisors

Bankers:
CAF Bank Limited
25 Kings Hill Avenue
Kings Hill
West Malling
Kent
ME19 4JQ

Auditors:
Godfrey Wilson Limited
Chartered Accountants and statutory auditors
5th Floor Mariner House, 62 Prince Street
Bristol
BS1 4QD

Introduction from Chair and Chief Executive

Our financial year runs from July 2019 until June 2020. This year it feels like we are reporting on a year of two parts.

Covid-19 has had a devastating impact on the lives of people affected by pulmonary fibrosis. Pulmonary fibrosis patients and their families generally experience strong feelings of isolation and anxiety, which is heightened by the lack of awareness of the disease and the poor average life expectancy of just 3-5 years from diagnosis. Covid-19 exacerbated these feelings, with patients and their families having to live very restricted lives, resulting in challenging mental health issues.

'I'm scared like many other people with IPF and I'm worried as a very vulnerable person I won't be able to go out until the end of 2020. It's really hard.'

(PF Patient)

APF has risen to address these new challenges in line with our values and focussed on our vision.

This year we have invested in new staff and support structures to ensure our sustainability and to increase our support for patients as the charity continues to grow. We have also increased the number of volunteers and mobilised support group leaders, telephone ambassadors and community fundraisers to reach more and more people affected by the disease. We would like to take this opportunity to thank each and every one who inspired us with their resilience and commitment to our work.

Some highlights this year include the launch of our #ListenToOurLungs campaign aimed at raising GP awareness of pulmonary fibrosis. It reached millions of viewers across TV and press and resulting in a partnership with the Royal College of GPs.

We also successfully campaigned for people with pulmonary fibrosis to be included in the extremely vulnerable list as lockdown hit, ensuring access to vital support and supplies as people with pulmonary fibrosis were unable to leave their homes.

We helped support group leaders move their face-to-face meetings online when lockdown hit. More than 30 support groups now meet virtually. We launched our coronavirus hub reaching 5,000 people from April to June 2020.

We understand that for people affected by pulmonary fibrosis the coming year will be hard, but APF is well placed to rise to the challenge and support more and more people, while continuing to invest in research towards a cure.

Steve Jones (Chair of Trustees)
Louise Wright (Chief Executive)

Report of the Board of Trustees

Support and Information

Support Groups

Peer support can make the world of difference to patients and their families living with pulmonary fibrosis. With the launch of the Harlow Support Group in February, the number of support groups rose to 77.

To support this growing network, we appointed two Regional Support Coordinators in England, and set up a Scotland Action Group to address patient and carer issues in Scotland. These include legal aspects such as potential need for APF to register with the independent regulator and registrar of charities in Scotland (OSCR). At the time that Covid-19 struck, over 10 new communities were beginning to set up groups, with two on the verge of starting.

Understandably, health professionals became absorbed by responding to the challenges brought by Covid. At the same time, patients and their families felt overwhelmed by the practical realities of ‘lockdown shielding’: lack of access to vital treatments and tests such as lung function and oxygen assessments, and the emotional toil of battling for online shopping slots or not receiving their shielding letters. As groups could no longer meet in person, we responded rapidly by setting up UK and regional support group leaders’ virtual meetings, to share news, coordinate problem-solving efforts and provide peer support. We also supported group leaders to help their members connect online and in other more traditional ways.

The new Princess Alexandra PF Support Group started in Harlow in February 2020

Shared interest groups

Two new groups are enabling people with shared interests to connect. The transplant support group (PF-Tx) is a forum for anyone with PF who has had a transplant or is waiting to have one. It provides a space for mutual support and the opportunity to hear from transplant specialists and others.

The Carers' Focus Group offers peer support on the challenges facing carers who can feel very isolated. They worry about a lack of health appointments for the person they support and feel they have to 'battle' for everything. Insights from this group will help us to strengthen our information and support service for carers over the coming year.

'We meet via Zoom every 2 weeks which helps to put people's minds at rest and also, we receive practical advice from each other about hospital trips, medication, shielding, dealing with anxieties about going out, we have had guest speakers from the hospital and APF, which have all been useful and informative. We can ask for help and advice via the whatsapp group very easily and quickly you never feel isolated regarding getting support and advice very quickly.'

(Trevor, support group member and PF patient)

Support Line

Having a life-changing health condition can feel overwhelming. Knowing there is someone to turn to for specialist advice can provide vital reassurance, reduce anxiety, and help someone to take the next steps they need. Our Support Line responded to 311 new enquiries, by telephone, email, and social media. Some 60% of enquiries were from carers and family members, and 40% from patients. We advised, and/or signposted callers to helpful support, on a range of issues, including support at diagnosis, coping with isolation, issues around coronavirus such as face coverings, how to manage debilitating cough and breathlessness, mental health and anxiety, oxygen, palliative care, later in life issues, financial benefits, and questions to ask the GP/health professionals to access treatments. A quarter of the enquiries required more complex and repeat contact by the ILD specialist nurse, particularly to manage significant health challenges.

Telephone Support Volunteers

Thanks to funding from the Mark Benevolent Fund and the February Foundation, as part of our Covid-19 response, we were able to set up the new Telephone Support Volunteers service. It offers a friendly listening ear for an hour or so each week to any patients or carers who are feeling isolated or anxious at this time. The first 11 volunteers were recruited, trained and partnered with others considering becoming a volunteer. Working with the ILD Specialist Nurse, the team are building a network of support for the people they call. Training included an overview of the service, practical aspects, safeguarding and wellbeing. Our peer support volunteers, all have lived experience of Pulmonary Fibrosis in the family and are here to offer a friendly listening ear. Each volunteer is linked with an APF supervisor and offered regular peer support to ensure their wellbeing too.

Information

The internet can be a frightening place for someone newly diagnosed with a life changing condition such as pulmonary fibrosis. Finding clear, helpful information can provide an island of security amid uncertainty. Our new website has made information easier to find, and we have created new information and news updates about helpful treatments, services, and support which we will develop further this year.

Targets 2019/20	Outcomes 2019/20	Targets 2020/21
Support new groups to set up	Established 5 new support groups, bringing the total to 77. Set up new UK and regional leaders' meetings	Support groups through the challenges of Covid-19 and beyond via online visits and leaders' meetings, and peer support initiatives
4 newsletters per annum to share patient news	4 newsletters distributed to all groups with positive feedback	4 newsletters per annum
Increase reach of Support Line service to more than 200 patients and carers	Supported over 300 patients and carers via Support Line	Further develop Support Line - peer support and advisory service - to support more than 400 patients and carers
Increase our web traffic and social media engagement	Web traffic > 4,000 visitors per month (+25% on 2018/19) Social media engagement to continue to grow	Web traffic > 6,000 visitors per month (+50% on 2019/20) Social media engagement to continue to grow
		Develop the role of peer volunteers with personal experience of PF/IPF

'I don't know what I'd have done without the support group – it's been a lifeline'.

(Bob, whose dad has PF)

Research

Over the last 10 years, there has been a rapid expansion of research into the causes of pulmonary fibrosis and to identify possible treatments. Scientists now have a better understanding of the biological processes and environmental 'triggers' involved in lung fibrosis and are beginning to unravel the genetic basis of the disease. Two antifibrotic medicines for IPF patients (pirfenidone and nintedanib) have been released, which slow the progress of IPF and may extend life by about two years.

Despite the grave prognosis for people affected by pulmonary fibrosis, there is hope. New anti-scarring drugs are in the pipeline and other treatments are being developed for the debilitating IPF cough, which affects 70% of patients. Moreover, new genetic insights into the disease raise the prospect of precision medicine using targeted interventions tailored to patients with specific genetic or molecular abnormalities.

While much of this research has focussed on idiopathic pulmonary fibrosis (IPF), there is increasing interest in other types of progressive pulmonary fibrosis. These include chronic hypersensitivity pneumonitis (for example farmer's lung and bird-keeper's lung); occupational lung scarring diseases (such as asbestosis) and auto-immune related lung disease linked to rheumatoid arthritis and other diseases.

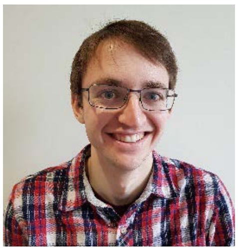
Although pulmonary fibrosis is a deadly disease and is killing more and more people each year, increased collaboration among doctors, scientists (in universities and pharmaceutical companies) and patient advocacy groups, is leading to real improvements in outcomes for patients with this devastating disease. As a charity, which is led by patients and leading clinicians, we are making an important contribution to these efforts.

APF's vision is to find a cure for pulmonary fibrosis, so that everybody affected by the disease has a better future. There are three strands to our programme:

- **Funding innovative research projects** by university-based researchers, which aim to improve our understanding of the causes of pulmonary fibrosis and are likely to lead to improved treatments. We appointed two APF Mike Bray Research Fellows in 2018/19: Dr Richard Allen, University of Leicester, who is researching the genetics of IPF and Dr Phil Molyneaux, Imperial College London researching the role played by bacteria in IPF disease progression. Both fellowships are for three years. Year 1 progress is reported in the table, below.

- **Collaborating with university researchers**, to ensure that patients' views are taken into account at all stages of selected major research projects, from design though implementation to dissemination of research results. In 2019/20 we contributed, in this way, to two major National Institute of Health Research (NIHR) funded projects at the University of Nottingham (on biomarkers to assess disease progression in progressive pulmonary fibrosis) and the University of East Anglia (on gastric reflux and IPF).

- **Contributing to research programmes and clinical trials of pharmaceutical companies** by participating in patient advisory groups and conferences; advising on the design of clinical trials, from a patient perspective; and helping researchers to understand the pulmonary fibrosis patient's 'journey'.

Research Fellow	**Summary of progress in Year 1**
Dr Richard Allen 	**Genetic determinants of IPF Progression** • Completed the largest genetic analysis of IPF disease risk, which was published in a leading journal. • Ongoing analysis to identify the common genetic variants associated with IPF disease progression.
Dr Phil Molyneaux 	**Role of bacteria in IPF progression**[1] • Good progress made in characterising the bacteria in the lungs and airways and their impact on metabolism, immunity and disease. • Next steps to characterise the relationship between the gut and the lung in IPF and to determine the impact of antifibrotic interventions in IPF.

As Covid-19 saw a pause in clinical trials on PF, APF took stock and reviewed how best we could support the race for a cure. We decided to start a review of research into pulmonary fibrosis to be completed in 2021. As ever, patients and their carers will be at the heart of this work.

'We are still seeing patients referred to us far too late in their journey; we need to see people much earlier, from diagnosis'.

(Ellie, ILD Respiratory Nurse)

---

[1] Scientific title: *Microbiome, Metabolism and Macrolides in IPF.*

Education

Pulmonary fibrosis patients experience late diagnosis (average time of diagnosis after initial doctor's appointment is over 7 months) and a general lack of understanding by health care professionals of the complexity of care and treatments they require. Current levels of care often do not meet national guidelines (e.g., NICE Quality Standard 79 on IPF, 2015). We are committed to raising healthcare professionals' awareness of the disease through conferences, round table events and training.

Conferences and round tables

We attended the Interstitial Lung Disease Inter-Disciplinary Network (ILD-IN) Conference in October, the Pulmonary Fibrosis Foundation (USA) Summit in November and the British Thoracic Society (BTS) winter meeting in December. At these meetings, we shared information on our work and discussed key issues affecting people with pulmonary fibrosis in the UK with clinicians and researchers.

Dr Richard Allen, an APF Fellow won the British Lung Foundation Early Career Investigator Award for his work funded by our fellowship at the BTS Winter Meeting 2019.

Between March and May 2020 three conferences and one round table event were postponed or cancelled. These included a conference of patients and doctors to be jointly organised with the Royal Society of Medicine and the first ever European Pulmonary Fibrosis Patient Summit planned for April 2020. The European Summit was planned by the EU-IPFF (European IPF and Related Disorders Federation) which APF helped to found in 2016. Thirty UK patients and family members were to attend with part funding by APF. This summit was postponed and will be held as a virtual event in 2021.

Reaching General Practitioners

During the year, we co-developed an on-line training module for GPs with the Royal College of Physicians. It aims to improve GPs understanding of the signs and symptoms of pulmonary fibrosis and available treatments. This remained on track to be launched during IPF Week in September 2020.

We continue to work with the Task Force for Lung Health, a grouping of over 30 professional bodies and lung health charities, on a range of issues, including improving access to antifibrotic medicines, diagnosis, and pulmonary rehabilitation. We are also active in European networks, including the EU-IPFF, a grouping of patient organisations and the European Lung Foundation.

Education Targets and Outcomes

Targets 2019/20	Outcomes 2019/20	Targets 2020/21
Review future of HCP education	Delayed	Review future of HCP needs
Attend 4 UK and other European conferences	Attended 3 conferences	Attend 4 virtual conferences.
Run two round table discussions to highlight patient concerns and increase best practice	Delayed	Attend two round table discussions to highlight patient concerns and increase best practice.
		Launch RCGP Training Module

Campaigning and Awareness

Campaigning

In September 2019 we launched #ListenToOurLungs, a campaign aimed at GPs to improve timely diagnosis and care. Families affected by pulmonary fibrosis engaged over 100 GP surgeries across the UK to improve understanding of the disease. The month also resulted in a partnership with the Royal College of GPs and a state-of-the-art training module specifically aimed at GPs to be launched September 2020 and kindly funded by Galapagos NV.

Dr Helen Parfrey, APF Trustee and consultant respiratory physician at Royal Papworth Hospital says:

'Idiopathic pulmonary fibrosis (IPF) is an uncommon condition and an average GP practice may only look after a few patients with this incurable lung disease. We have worked with the RCGP (UK) to develop a state-of-the-art eLearning course. It follows through a typical IPF patient journey and highlights the clinical signs and symptoms, how to refer for investigations and anti-fibrotic therapies. This is a fantastic educational resource that we hope will empower GPs to have a better understanding of IPF and its current treatments as well as how they can best support patients living with this lung disease.'

During Carers Week in June 2020, we launched our first online Carers' Forum for those who care and support people with pulmonary fibrosis. Seventeen carers across the UK were founding members. The forum aims to provide mutual support and to develop the support that APF offers to carers across the UK.

Raising Awareness

The #ListenToOurLungs campaign also aimed to raise awareness of pulmonary fibrosis among the general public. Interviews with APF Trustee Dr Helen Parfrey were broadcast on Channel 5 News, and articles were published in the MailOnline, The Sunday Express, Daily Telegraph and Saga Magazine. These were spearheaded by celebrity DJ, Janice Long. This high-profile support meant pulmonary fibrosis was in media reaching millions of people. We thank Janice Long for her wonderful and much appreciated support.

Lack of awareness of pulmonary fibrosis among the general public also adds to the anxiety and confusion felt by patients and their families. This is especially the case at the time of diagnosis but continues as the disease progresses. Raising awareness of the disease remains a high priority for patients, families, and our fundraisers.

Covid-19 meant people living with pulmonary fibrosis and members of their household had to shield from March 2020 and faced issues of access to essential supplies, healthcare, and mental health support services. These all rose sharply.

We published articles on lung fibrosis linked to Covid-19 in The Guardian's health section, Open Access Government and had stories in the regional press, radio, and BBC News. Many of these stories were generated by patients and their families across the UK and highlighted key issues of importance to them.

Patients and their families told us trusted information was critical to managing their health and so we launched our new website in April 2020, tripling our online health related information.

Targets 2019/20	**Outcomes 2019/20**	**Targets 2020/21**
Run two campaigns that address key issues for patients and their families	#ListenToOurLungs aimed at GPs – reaching over 100 GP surgeries and partnering with the RCGP on a training module #Carers' Week saw us set up our first online carers' forum reaching 17 carers from across the UK	Launch GP Training module Run two campaigns that address key issues for patients and their families
Several national papers (on and offline) picking up APF stories	APF stories ran in several national and local newspapers (e.g., Daily Mail, Daily Express) and in Daily Mail Online as well as national news C5 and BBC News.	National media (on and offline) picking up more APF stories

Everything we do is about enabling quality of life.

Fundraising

'We have decided to do the APF skydive. It's important for me to do something extreme to show others life goes on after a bad diagnosis. My family, close friends and I will carry on raising funds for APF for as long as I am able to.'

(Charlie, PF patient and APF fundraiser)

Funds raised and donated by our incredible supporters have enabled APF to grow its services throughout 2019-20, provide vital information and support during the COVID-19 pandemic, and continue our research efforts to find new treatments and find a cure.

The COVID-19 pandemic has impacted our fundraising with many mass events being cancelled or postponed. As a result, during the final quarter of 2019-20, we saw a significant drop in income from community-based activities. However, we have been overwhelmed with the number of supporters who have taken on new fundraising challenges to raise much needed funds for APF throughout lockdown and beyond. We are truly grateful for every penny raised and donated.

Our special thanks to the George Vet Group who raised over £45,000 in memory of their friend and colleague, Tim Hirst, making this the largest amount raised for APF through a single event!

Targets 2019/20	Outcomes 2019/20	Targets 2020/21
Increase our income to support our growing work	Income grew by 24%	• Diversify income to reduce reliance on community fundraising. • Launch major fundraising appeal to support three-year research strategy

'I'm running for Action for Pulmonary Fibrosis because my Dad no longer can.'

(APF Supporter)

Structure, governance, and management

Action for Pulmonary Fibrosis was registered with the Charity Commission in England and Wales as a Charitable Incorporated Organisation (CIO) in June 2013. The governing document is the Constitution, which was approved by the trustees on 28 May 2013.

All trustees have direct experience of IPF, either as patients, carers, family members or medical doctors.

The Board of Trustees meets formally four times a year to review the charity's progress, formulate general policy and strategy and ensure adherence to charity regulations.

Reports are received on the charity's work during the quarter. An annual plan and budget for activities for the coming period are agreed. The quarterly meetings are supported by regular telephone and online communication.

The Board contracts with professional advisers as necessary, for advice and guidance on legal and financial issues.

Appointment of New Trustees

The Board of Trustees regularly reviews the skills and experience of its members and considers if changes are needed to face new and emerging challenges.

The Board appoints new members to strengthen the board and where necessary to replace a member who leaves. To date this has been done by personal contact and through contacts made directly to the charity.

It remains a requirement that all new trustees have a personal connection to pulmonary fibrosis.

New appointments are considered and agreed by all trustees at a meeting of the board or by electronic communication. A process is in place which includes receipt of a formal application, providing personal details and outlining the skills and experience which the applicant can bring to APF. This is reviewed by all trustees.

Stage two is a meeting with the candidate and at least three trustees to discuss the application and provide information about the Board and its work. The result of this meeting is shared with all trustees. Provided there are no objections, the prospective trustee is then invited to attend a trustee meeting prior to confirmation of appointment.

Once the appointment is agreed an induction process takes place which provides the new trustee with further background information on the charity, roles and responsibilities and current activities.

Organisational Structure

A Chief Executive Officer was appointed in December 2018, after which a full strategic review took place. A staffing structure was proposed which has since been implemented.

The work of the Finance and Operations sub-group of trustees was reviewed during the year and re-established as a Finance and Risk Committee, reporting to the Board. The agreed Terms of Reference include overseeing and monitoring the finances and budgets of the charity, risks, policies, and remuneration of staff. The committee, which includes three trustees and the CEO, meets quarterly prior to the Board meeting.

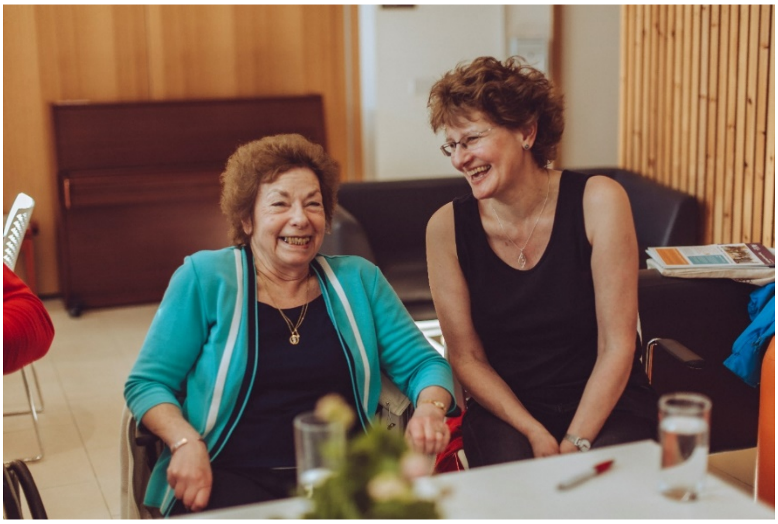
Action for Pulmonary Fibrosis is registered with the Fundraising Regulator.

Risk Management

Responsibility for risk management lies with trustees and a risk register has been established which is reviewed regularly by the Finance and Risk Committee. Risks identified are minimal and controls are in place to manage them.

Public Benefit Statement

The charity trustees have complied with their duty, to have due regard to the guidance on public benefit published by the Charity Commission, in exercising their powers or duties. Charity activities and support provided are available to all those affected by pulmonary fibrosis.



‘Thank you for all the work you have done for patients/carers with PF. Your support and energy to help those of us dealing with this awful condition and giving carers a voice has been invaluable, especially in this difficult year.’

(Dee, PF carer)

Financial Review

The charity is in a strong financial position. Total income for the year was £785,047 and total expenditure was £505,302. Details are set out in the attached accounts.

Our income for the year was slightly higher than budgeted, despite the Covid-19 Pandemic and late recruitment of fundraising staff. This was largely due to increases in the following income streams: Community, In Memory and Legacies, during the first part of the financial year.

Expenditure was lower than budgeted by £250K due to some underspend and planned activities being cancelled, or completed virtually, due to Covid-19.

The majority of funds still come from individual fundraisers and memorial donations. The sustainability of this income depends on our active fundraising and communications programme, which informs our community of the charity's work and achievements. In a small number of cases, donations are made specifically for research. This is recognised in the accounts.

Research continues to be a major focus for charity activity and following the excellent progress of the two Fellowships awarded last year, a further allocation of £500,000 has been designated to support research. This was noted above.

Going Concern

The trustees consider that the charity will continue as a going concern for a period of at least 12 months, from the date on which these financial statements are approved.

Although the Covid-19 pandemic may impact on future fundraising, the charity had strong cash reserves at the year end which may be utilised if the need arises. The trustees therefore consider it appropriate to adopt the going concern basis for the preparation of the accounts, as detailed in note 1(b) to the financial statements.

Reserves Policy

A Reserves Policy has been established which requires a minimum of 50% of projected annual core expenditure to be retained separately as Reserves. It is reviewed annually at the July 2020 trustee meeting. The projection of increased operational costs for the coming year resulted in agreement to increase the balance on the Reserves account to meet the requirements of the Policy. This was carried out and the Reserves Account balance has been increased to £278,725 since the year end (£225,023 at 30 June 2020).

The charity also held general funds of £221,306 at year end, which was above the required reserves. With a changing fundraising landscape, these funds provide the charity with additional security over its future in the immediate term. Should they not be required in the next financial year then we intend to allocate these funds to research.

Statement of responsibilities of the trustees

The trustees are responsible for preparing the trustees' report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102: The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

The law applicable to charities in England and Wales 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 charity and the incoming resources and application of resources, including the net income or expenditure, of the charity for the year. 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 Charities SORP;
- make judgements and accounting estimates that are reasonable and prudent;
- state whether applicable accounting standards and statements of recommended practice have been followed, subject to any material departures disclosed and explained in the financial statements; and
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charity will continue in operation.

The trustees are responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the charity and which enable them to ensure that the financial statements comply with the Charities Act 2011, the Charity (Accounts and Reports) Regulations 2008 and the provisions of the constitution. The trustees are also responsible for safeguarding the assets of the charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

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

The trustees are members of the charity but this entitles them only to voting rights. The trustees have no beneficial interest in the charity.

Auditors
Godfrey Wilson Limited were appointed as auditors to the charity during the year and have expressed their willingness to continue in that capacity.

Approved by the trustees on 6 February 2021 and signed on their behalf by

Steve Jones

Stephen Jones – Chair

Independent auditors' report

To the members of

Action for Pulmonary Fibrosis

Opinion

We have audited the financial statements of Action for Pulmonary Fibrosis (the 'charity') for the year ended 30 June 2020 which comprise the statement of financial position, balance sheet and statement of cash flows, and the related notes to the financial statements, including a summary of significant accounting policies.The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102: The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- give a true and fair view of the state of the charity's affairs as at 30 June 2020 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; and
- have been prepared in accordance with the requirements of the Charities Act 2011.

Basis for opinion

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

Conclusions relating to going concern

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

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

Other information

The 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 auditor’s report 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.

Independent auditors' report

To the members of

Action for Pulmonary Fibrosis

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.

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the charity and its environment obtained in the course of the audit, we have not identified material misstatements in the trustees' report. We have nothing to report in respect of the following matters in relation to which the Charities Act 2011 requires us to report to you if, in our opinion:

- sufficient accounting records have not been kept;
- the financial statements are not in agreement with the accounting records and returns; or
- we have not obtained all the information and explanations necessary for the purposes of our audit.

Responsibilities of the trustees

As explained more fully in the trustees' responsibilities statement set out in the trustees' report, the trustees 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 they 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 charity'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 charity or to cease operations, or have no realistic alternative but to do so.

Our responsibilities for the audit of the financial statements

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

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

Independent auditors' report

To the members of

Action for Pulmonary Fibrosis

Use of our report

This report is made solely to the charity's trustees, as a body, in accordance with section 144 of the Charities Act 2011 and the regulations made under section 154 of that Act. Our audit work has been undertaken so that we might state to 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's trustees as a body, for our audit work, for this report, or for the opinions we have formed.

Alison Godfrey

Date: 10 February 2021

GODFREY WILSON LIMITED
Chartered accountants and statutory auditors
5th Floor Mariner House
62 Prince Street
Bristol
BS1 4QD

Action for Pulmonary Fibrosis

Statement of financial activities

For the year ended 30 June 2020

	Note	Restricted £	Unrestricted £	**2020 Total £**	2019 Total £
Income from:					
Donations and legacies	3	-	673,638	**673,638**	626,826
Charitable activities	4	104,800	-	**104,800**	-
Investments		-	6,609	**6,609**	4,820
Total income		104,800	680,247	**785,047**	631,646
Expenditure on:					
Raising funds		-	94,977	**94,977**	91,117
Charitable activities		79,293	331,032	**410,325**	833,034
Total expenditure	6	79,293	426,009	**505,302**	924,151
Net income / (expenditure) and net movement in funds	9	25,507	254,238	**279,745**	(292,505)
Reconciliation of funds:					
Total funds brought forward		-	760,263	**760,263**	1,052,768
Total funds carried forward		25,507	1,014,501	**1,040,008**	760,263

All of the above results are derived from continuing activities. There were no other recognised gains or losses other than those stated above. Movements in funds are disclosed in note 17 to the accounts.

Action for Pulmonary Fibrosis

Balance sheet

As at 30 June 2020

	Note	£	2020 £	2019 £
Current assets				
Debtors	12	**13,925**		34,932
Current asset investments	13	**1,113,208**		875,159
Cash at bank and in hand		**163,113**		281,540
		1,290,246		1,191,631
Liabilities				
Creditors: amounts falling due within 1 year	14	**250,238**		287,512
Net current assets			**1,040,008**	904,119
Creditors: amounts falling due after more than 1 year	15		**-**	(143,856)
Net assets	16		**1,040,008**	760,263
Funds	17			
Restricted funds			**25,507**	-
Unrestricted funds				
Designated funds			**793,195**	145,683
General funds			**221,306**	614,580
Total charity funds			**1,040,008**	760,263

Approved by the trustees on 6 February 2021 and signed on their behalf by

Steve Jones

Stephen Jones - Chair

Statement of cash flows

As at 30 June 2020

	2020	2019
	£	£
Cash provided by operating activities:		
Net movement in funds	**279,745**	(292,505)
Adjustments for:		
Investment income	**(6,609)**	(4,820)
Decrease / (increase) in debtors	**21,007**	(11,921)
Increase / (decrease) in creditors	**(181,130)**	411,773
Net cash provided by operating activities	**113,013**	102,527
Cash flows from investing activities:		
Investment income	**6,609**	4,820
Net cash provided by investing activities	**6,609**	4,820
Increase in cash and cash equivalents in the year	**119,622**	107,347
Cash and cash equivalents at the beginning of the year	**1,156,699**	1,049,352
Cash and cash equivalents at the end of the year	**1,276,321**	1,156,699

Analysis of cash and cash equivalents

Current asset investments	**1,113,208**	875,159
Cash at bank and in hand	**163,113**	281,540
Cash and cash equivalents at the end of the year	**1,276,321**	1,156,699

The charity has not provided an analysis of changes in net debt as it does not have any long term financing arrangements.

1. Accounting policies

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 in 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).

Action for Pulmonary Fibrosis meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy notes.

b) Going concern basis of accounting

The accounts have been prepared on the assumption that the charity is able to continue as a going concern. However, the COVID-19 pandemic has had a profound impact on the global economy, and may in turn have affected the charity. The trustees have considered the impact of this issue on the charity’s current and future financial position. The charity holds unrestricted, general reserves of £221,306, designated reserves that can be drawn down if necessary of £793,195 and a cash balance of £163,113. The combined value of cash and current asset investments at 30 June 2020 was £1.28m. The trustees consider that the charity has sufficient cash reserves to continue as a going concern for a period of at least 12 months from the date on which these financial statements are approved.

c) Income

Income is recognised when the charity has entitlement to the funds, any performance conditions attached to the items of income have been met, it is probable that the income will be received and the amount can be measured reliably.

Income from the government and other grants, whether 'capital' grants or 'revenue' grants, is recognised when the charity has entitlement to the funds, any performance conditions attached to the grants have been met, it is probable that the income will be received and the amount can be measured reliably and is not deferred.

For legacies, entitlement is taken as the earlier of the date on which either: the charity is aware that probate has been granted, the estate has been finalised and notification has been made by the executor to the Trust that a distribution will be made, or when a distribution is received from the estate. Receipt of a legacy, in whole or in part, is only considered probable when the amount can be measured reliably and the charity has been notified of the executor's intention to make a distribution. Where legacies have been notified to the charity, or the charity is aware of the granting of probate, and the criteria for income recognition have not been met, then the legacy is treated as a contingent asset and disclosed if material.

d) Interest receivable

Interest on funds held on deposit is included when receivable and the amount can be measured reliably by the charity; this is normally upon notification of the interest paid or payable by the bank.

e) Funds accounting

Unrestricted funds are available to spend on activities that further any of the purposes of the charity. Designated funds are unrestricted funds of the charity which the trustees have decided at their discretion to set aside to use for a specific purpose. Restricted funds are donations which the donor has specified are to be solely used for particular areas of the charity's work or for specific projects being undertaken by the charity.

f) Expenditure and irrecoverable VAT

Expenditure is recognised once there is a legal or constructive obligation to make a payment to a third party, it is probable that settlement will be required and the amount of the obligation can be measured reliably.

Irrecoverable VAT is charged as a cost against the activity for which the expenditure was incurred.

g) Grants payable

Grants payable are charged in the year in which the offer is conveyed to the recipient except in those cases where the offer is conditional, such grants being recognised as expenditure when the conditions attached have been fulfilled. Grants offered subject to conditions at the year end are noted as commitment but are not accrued as expenditure.

h) Allocation of support and governance costs

Support costs are those functions that assist the work of the charity but do not directly undertake charitable activities. Governance costs are the costs associated with the governance arrangements of the charity, including the costs of complying with constitutional and statutory requirements and any costs associated with the strategic management of the charity's activities. These costs have been allocated between cost of raising funds and expenditure on charitable activities on the basis of staff time spent on each of these areas. In the prior period an estimate was used, but in the current period a more thorough analysis of staff time by role was possible as there was a more significant number of employees. The percentages used were as follows:

	2020	**2019**
Raising funds	16%	25%
Charitable activities	84%	75%

i) Debtors

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

j) Current asset investments

Current asset investments consists of short term cash deposits with a maturity date of less than one year from the balance sheet date held for investment purposes rather than to meet short term cash commitments as they fall due.

k) 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.

l) Creditors
Creditors and provisions are recognised where the charity has a present obligation resulting from a past event that will probably result in the transfer of funds to a third party and the amount due to settle the obligation can be measured or estimated reliably. Creditors and provisions are normally recognised at their settlement amount after allowing for any trade discounts due.

m) Financial instruments
The charity only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value with the exception of bank loans which are subsequently recognised at amortised cost using the effective interest method.

n) Pension costs
The charity operates a defined contribution pension scheme for its employees. There are no further liabilities other than that already recognised in the SOFA.

o) Accounting estimates and key judgements
In the application of the charity's accounting policies, the trustees are required to make judgements, estimates and assumptions about the carrying values of assets and liabilities that are not readily apparent from other sources. The estimates and underlying assumptions are based on historical experience and other factors that are considered to be relevant. Actual results may differ from these estimates.

The estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognised in the period in which the estimate is revised if the revision affects only that period, or in the period of the revision and future periods if the revision affects both current and future periods.

There are no key sources of estimation uncertainty that have a significant effect on the amounts recognised in the financial statements.

2. Prior period comparatives: statement of financial activities

	Restricted £	Unrestricted £	**2019 Total £**
Income from:			
Donations and legacies	9,466	617,360	**626,826**
Investments	-	4,820	**4,820**
Total income	9,466	622,180	**631,646**
Expenditure on:			
Raising funds	-	91,117	**91,117**
Charitable activities	39,817	793,217	**833,034**
Total expenditure	39,817	884,334	**924,151**
Net expenditure and net movement in funds	(30,351)	(262,154)	**(292,505)**

3. Income from donations and legacies

	Restricted £	Unrestricted £	**2020 Total** **£**
Legacies	-	25,000	**25,000**
Donations from individuals and fundraising	-	648,638	**648,638**
Total income from donations and legacies	-	673,638	**673,638**

Prior year comparative:

	Restricted £	Unrestricted £	**2019 Total** **£**
Legacies	-	43,505	**43,505**
Donations from individuals and fundraising	9,466	573,855	**583,321**
Total income from donations and legacies	9,466	617,360	**626,826**

4. Income from charitable activities

	Restricted £	Unrestricted £	**2020 Total** **£**	2019 Total £
Corporate grants	82,500	-	**82,500**	-
Trusts and foundations	22,300	-	**22,300**	-
Total income from charitable activities	104,800	-	**104,800**	-

5. Government grants

The charitable incorporated organisation received no government grants during the year (2019: £nil).

6. Total expenditure

	Raising funds £	Charitable activities £	Support and governance costs £	**2020 Total** **£**
Staff costs (note 10)	20,191	105,937	76,088	**202,216**
Freelance costs (note 10)	20,328	33,377	16,968	**70,673**
Travel and subsistence	-	-	16,313	**16,313**
Grants payable (note 7)	-	2,800	-	**2,800**
Training costs	-	33,094	-	**33,094**
Patient surveys	-	4,588	-	**4,588**
Fundraising costs	17,420	-	-	**17,420**
Marketing and communications	3,778	56,027	-	**59,805**
Premises costs	-	-	26,852	**26,852**
Admin costs	-	-	53,338	**53,338**
Other staffing costs	-	-	7,260	**7,260**
Governance costs	-	-	10,943	**10,943**
Sub-total	61,717	235,823	207,762	**505,302**
Allocation of support and governance costs	33,260	174,502	(207,762)	-
Total expenditure	**94,977**	**410,325**	**-**	**505,302**

Prior year comparative:

	Raising funds £	Charitable activities £	Support and governance costs £	**2019 Total** **£**
Staff costs (note 10)	-	10,590	32,315	**42,905**
Freelance costs (note 10)	15,566	51,126	24,193	**90,885**
Travel and subsistence	-	-	19,912	**19,912**
Grants payable (note 7)	-	588,566	-	**588,566**
Training costs	-	1,000	-	**1,000**
Patient surveys	-	25,057	-	**25,057**
Fundraising costs	24,435	-	-	**24,435**
Marketing and communications	4,823	39,996	-	**44,819**
Admin costs	7,393	-	50,718	**58,111**
Other staffing costs	-	-	12,054	**12,054**
Governance costs	-	-	16,407	**16,407**
Sub-total	52,217	716,335	155,599	**924,151**
Allocation of support and governance costs	38,900	116,699	(155,599)	-
Total expenditure	**91,117**	**833,034**	**-**	**924,151**

Support costs are those functions that assist the work of the charity but do not directly undertake charitable activities. They are distinct from costs incurred to support those affected by Pulmonary Fibrosis, which are included under charitable activities.

7. Grants payable

	Grants to institutions £	Grants to individuals £	**2020 Total £**
Travel grants (2 individuals)	-	1,500	**1,500**
Support groups:			
Worthing Support Group	500	-	**500**
Luton and Dunstable University Hospital	500	-	**500**
Harlow Support Group	300	-	**300**
	1,300	1,500	**2,800**

Prior year comparative

	Grants to institutions £	Grants to individuals £	**2019 Total £**
Travel grants (8 individuals)	-	7,250	**7,250**
Research:			
University of Leicester	280,171	-	**280,171**
Imperial College, London	299,645	-	**299,645**
Support groups:			
Boston and East Holland Support Group	300	-	**300**
Bolton Support Group	400	-	**400**
East Kent Support Group	300	-	**300**
Northamptonshire Support Group	500	-	**500**
	581,316	7,250	**588,566**

8. Grants commitments

	2020 **£**	2019 £
Grant commitments brought forward	**408,400**	-
Grants committed during the period (note 7)	**2,800**	588,566
Grants paid during the period	**239,518**	(180,166)
Grant commitments carried forward	**242,318**	408,400

9. Net movement in funds

This is stated after charging:

	2020 **£**	2019 £
Trustees' remuneration	**Nil**	Nil
Trustees' reimbursed expenses (see note 18)	**9,715**	15,333
Independent examiner's remuneration:		
▪ Audit / independent examination (including VAT)	**4,500**	2,580
▪ Other services (including VAT)	**3,702**	5,166

10. Staff costs and numbers

Staff costs were as follows:

	2020 **£**	2019 £
Salaries and wages	**196,875**	41,500
Pension costs	**5,341**	1,405
Freelance staff	**70,673**	90,885
	272,889	133,790

One employee earned between £60,000 and £70,000 during the year (2019: no employees earned more than £60,000).

The key management personnel of the charity comprise the trustees and Chief Executive. The total employee benefits of the key management personnel were £69,854 (2019: £35,750, in post from December 2018).

	2020 **No.**	2019 No.
Average head count	**5**	1

11. Taxation

The charity is exempt from corporation tax as all its income is charitable and is applied for charitable purposes.

12. Debtors

	2020 **£**	2019 £
Accrued income	**10,165**	20,999
Prepayments	**3,760**	13,933
	13,925	34,932

13. Current asset investments

	2020 **£**	2019 £
Short term deposits	**1,113,208**	875,159

14. Creditors: amounts due within 1 year

	2020 **£**	2019 £
Trade creditors	**1,264**	18,037
Accruals	**4,500**	2,580
Tax and social security	**-**	1,849
Other creditors	**2,156**	502
Grant commitments (note 8)	**242,318**	264,544
	250,238	287,512

15. Creditors: amounts after 1 year

	2020 **£**	2019 £
Grant commitments (note 8)	**-**	143,856

16. Analysis of net assets between funds

	Restricted funds £	Designated funds £	General funds £	**Total funds £**
Current assets	25,507	1,035,513	229,226	**1,290,246**
Current liabilities	-	(242,318)	(7,920)	**(250,238)**
Net assets at 30 June 2020	**25,507**	**793,195**	**221,306**	**1,040,008**

Prior year comparative	Restricted funds £	Designated funds £	General funds £	**Total funds £**
Current assets	-	554,083	637,548	1,191,631
Current liabilities	-	(264,544)	(22,968)	(287,512)
Long term liabilities	-	(143,856)	-	(143,856)
Net assets at 30 June 2019	-	145,683	614,580	760,263

17. Movements in funds

	At 1 July 2019 £	Income £	Expenditure £	Transfers between funds £	**At 30 June 2020** **£**
Restricted funds					
Boehringer Ingelheim	-	52,000	(26,493)	-	**25,507**
COVID-19	-	18,800	(18,800)	-	**-**
D'Oyly Carte	-	3,500	(3,500)	-	**-**
Galapagos	-	30,500	(30,500)	-	**-**
Total restricted funds	-	104,800	(79,293)	-	**25,507**
Unrestricted funds					
Designated funds					
Research fund	453	-	-	567,719	**568,172**
Reserve fund	145,230	-	-	79,793	**225,023**
Total designated funds	145,683	-	-	647,512	**793,195**
General funds	614,580	680,247	(426,009)	(647,512)	**221,306**
Total unrestricted funds	760,263	680,247	(426,009)	-	**1,014,501**
Total funds	760,263	785,047	(505,302)	-	**1,040,008**

Purposes of restricted funds

Boehringer Ingelheim	Support groups and newsletter.
COVID-19	Restricted towards APF's activities in response to Covid-19 including support groups and new Support Line Ambassador service. This includes set up costs, volunteer costs (training etc) and staff salary costs involved in this work (i.e. Debra and team).
D'Oyly Carte	Restricted to support groups.
Galapagos	GP Training Module on IPF – paid to the RCGP.

17. Movements in funds

Purposes of designated funds

Research fund	A principal objective of Action for Pulmonary Fibrosis is to support and fund Research into the disease. Trustees have agreed to designate a further £500,000 for research to fund further research projects, following the successful launch of our Mike Bray Fellowships in 2018/19.
Reserve fund	The Reserve Fund has been established, in line with the charity's reserves policy, to retain a minimum of 50% of projected annual core expenditure separately as reserves. This is reviewed annually.

Prior year comparative

	At 1 July 2018 £	Income £	Expenditure £	Transfers between funds £	**At 30 June 2019** **£**
Restricted funds					
Boehringer Ingelheim	16,064	-	(16,064)	-	**-**
Roche Products Limited	1,515	-	(1,515)	-	**-**
Research fund	12,772	9,466	(22,238)	-	**-**
Total restricted funds	30,351	9,466	(39,817)	-	**-**
Unrestricted funds					
Designated funds					
Research fund	557,314	-	(557,578)	717	**453**
Reserve fund	145,051	-	-	179	**145,230**
Total designated funds	702,365	-	(557,578)	896	**145,683**
General funds	320,052	622,180	(326,756)	(896)	**614,580**
Total unrestricted funds	1,022,417	622,180	(884,334)	-	**760,263**
Total funds	1,052,768	631,646	(924,151)	-	**760,263**

18. Related party transactions

Trustees' reimbursed expenses comprised the following payments during the year:

	2020 **£**	2019 £
Subsistence	**547**	1,163
Travel expenses	**8,751**	13,075
Other expenses (gifts, stationery and postage)	**417**	1,095
	9,715	15,333

All expenses were incurred in the course of the organisation's charitable activities.

The trustees are not aware of any other related party transactions during the period.