24 hours a day 365 days a year...




www.mariecurie.org.uk

Marie Curie Cancer Care

Contents

Website: www.mariecurie.org.uk

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Marie Curie Cancer Care reached 31,799 patients over the financial year 2010/11.

What we do

Marie Curie Cancer Care is a UK charity dedicated to the care of people with terminal cancer and other illnesses. Over the financial year 2010/11, we reached a total of 31,799 patients.

Marie Curie Nurses

We are best known for our network of 2,000 Marie Curie Nurses, who work in the homes of terminally ill patients across the UK, providing practical care and support. Over the year, our nurses provided 1.2 million hours of nursing to 23,406 patients, along with support for their families.

Marie Curie Hospices

Our nine Marie Curie Hospices across the UK provide expert care and the best quality of life for people with cancer and other illnesses. We are the biggest provider of hospice beds outside the NHS, and we are expanding outpatient and day services at all our hospices. Our hospices reached 8,393 people in 2010/11.

There are Marie Curie Hospices in Belfast, Bradford, Edinburgh, Glasgow, Hampstead (London), Liverpool, Newcastle, Penarth (near Cardiff) and Solihull.

Research

Marie Curie Cancer Care is a leader in research into the best ways of caring for people with terminal illnesses, and how care could be improved in future. We have our own research teams, and we fund external research programmes.

Campaigning for patients

We campaign for more patients to be able to be cared for and die in their place of choice. Research shows around 64 per cent of people would like to die at home if they had a terminal illness, with a sizeable minority opting for hospice care.

Our funding

All our services are always free to patients and their families, thanks to the generous support of the public. We fund our nursing services and hospices in 50/50 partnership with the NHS.

Find out more about what we do.
www.mariecurie.org.uk

Chief Executive Thomas Hughes-Hallett

24 hours a day, we put patients and families first

Chief Executive
Thomas Hughes-Hallett writes:

I am delighted to welcome you to Marie Curie Cancer Care's *Impact Report* for the financial year 2010/11. In the pages that follow, you can see how the charity performed against its targets and, more importantly, how we continue to make a difference for patients at the end of their lives and their families. The report highlights many successes, as well as a few areas where we need to redouble our efforts. We have also included the personal stories of some of the people we helped, as well as the personal experiences of nursing and hospice staff.

2010/11 was a good year for us, despite the difficult and uncertain economic and healthcare environment in which we were operating. We are proud to have cared for 31,799 patients through the Marie Curie Nursing Service and at our nine Marie Curie Hospices.

We continued to develop our services to ensure that we will be able to meet the needs of patients and families in the future. We know that whatever happens in the NHS, people at the end of their lives will need high quality care, and we are determined to play our part in providing it.

Our commitment to continue to improve care for everyone with a terminal illness drives our investment in palliative care research – work which focuses on investigating how the needs of patients and their families can better be met. As well as publishing significant results, we launched our new Marie Curie Palliative Care Research Programme, funding £1 million in new research on a competitive basis.

Despite the recession, Marie Curie Cancer Care continued to enjoy considerable fundraising success, and ended the year in a strong financial position. We held our best-ever Great Daffodil Appeal and Blooming Great Tea Party; our shops achieved record levels of profit; and we had partnerships with companies and organisations from the Football League to the Rank Group.

All this was thanks to the unstinting generosity of the public. We are very grateful that, even in a recession, people are prepared to put their hands in their pockets because they believe in our work. We also owe thanks to our ever-growing team of volunteers.

Over the pages that follow, you can see how your support is helping us to put patients and families first.

Our video guides can help carers look after terminally ill patients at the end of their lives.
www.mariecurie.org.uk/filmguides

The care she needed was 24/7

Sophie Ellis was 18 when she died of cancer. For almost 12 months she and her family were supported by the Marie Curie Nursing Service, in particular, Marie Curie Nurse Teresa Letimier. Sophie's mother Lynn describes the difference Teresa made.

Lynn Ellis with daughter Sophie

"My daughter Sophie was very outgoing, but also very private regarding her illness. I don't know if it was about protecting others from seeing what she looked like, but she didn't really like people being in her room.

"Sophie didn't really like institutions such as hospitals – she appreciated what they did, but wanted to be cared for at home. She'd had constant pain for five years to a greater or lesser degree, and as a Registered Nurse myself, I wanted her to be at home too.

"Teresa, the Marie Curie Nurse, came when the cancer spread to Sophie's spine and she became paralysed from the waist down. For four to five months she was confined to the house, and the care she needed was constant, 24/7.

"I hardly ever went out. Sophie needed me more than others – not least for things like her personal care. When Teresa came it gave me a break, which was so important. She initially visited one morning a week and then two mornings. This meant I could go out and maybe have a cup of coffee, knowing Sophie was being properly looked after.

"Having Teresa there meant I could get to the supermarket. A couple of times she called while I was out to say 'Sophie needs you'. But there was no panic about it, I could come home and know she'd be ok. I think they chose Teresa specially, because she too had teenage children and understood how teenagers are.

"Teresa became my friend. I can honestly say that it would have been incredibly difficult without her, and that I could not have managed.

"She held my hand for an hour after Sophie died. I said to her: 'I don't think I can cope'. She gently said: 'You will'. She was so lovely.

"As my husband was trying to deal with his own emotions I needed Teresa to help me cope with how I was feeling. As far as the journey we had with Sophie is concerned, Marie Curie Nurses were totally invaluable."

Marie Curie Nurses reached 23,406 patients over the year.

To find out more about our nurses and nursing service:
www.mariecurie.org.uk/nurses

7am: Nurse Ayodele finishes the night shift

"You can see the relief in their faces when you arrive"

Ayodele David joined the Marie Curie Nursing Service four years ago. Her description of how she feels about what she does is studded with warm words: love, respect, reward, laughter.

"I work roughly 16 nights a month, and that works well for my family," says Ayodele. "I'm here when my nine-year-old son comes home from school, and I'm here to wake him up in the morning. He thinks I'm a stay-at-home mum!"

But while her son is asleep, Ayodele is out, delivering care and support which one of her patients sums up with yet more precious words. "Each time I ring he says, 'Here comes my gold dust'," says Ayodele. "Once you've built up the trust with the family, they can relax – you can see the relief in their faces when you arrive, and the appreciation in the way they say thank you when you leave."

Working in the diverse London borough of Hillingdon, Ayodele meets a wide range of people from many different cultures, and that in itself is a learning experience. "Some things you may think strange, but if you are in someone else's house, you have to respect it," says Ayodele. "For instance, in some Muslim homes they don't want you to wear shoes, but for safety reasons we have to wear them. It's all about showing respect, explaining why you have to do things and coming to an agreement."


Ayodele David

The small things build trust – showing an ID badge, introducing yourself properly, and waiting to be invited to sit down. Ayodele's professionalism also helps her through the tough bits – seeing mothers her own age with terminal illness is particularly hard for her, and coping with weeks such as one when three patients died on consecutive nights.

"You know that when you leave the house you have to try to unwind, but it's instinct to reflect back and go over what happened. All you can do is know you've done your best to give someone the best holistic care possible, and take comfort in that as you walk away."

The most memorable shift Ayodele recalls is one where the client died laughing. "He'd been reminiscing about the past – it was a perfect way of dying," she reflects.

"I am so glad I joined Marie Curie. The nurses practise what they preach – they listen and respect each other. We feel the love and feel part of a team – and that's what's important."

Find out more about our hospice day services at
www.mariecurie.org.uk/hospices




Day and outpatient services at Marie Curie Hospices are a major area of growth. All nine Marie Curie Hospices offer day services, as well as in-patient care. Services and therapies available vary depending on local needs.

Photos above show a range of services at different Marie Curie Hospices.

10am: artistic benefits

Barrie Rawnsley is working on a bright circus picture. "My daughter's pregnant at the moment, and this is for her," he says. "I've a short life expectancy, and I thought I'd give her something for the future."

Barrie is one of 16 students attending an art class at the Marie Curie Hospice, Bradford. Most have not held a paintbrush since they left school, and all have a serious illness. "What matters is the comradeship," Barrie says. "Even if you're feeling a bit down, there's always something to lift you up."

Art Tutor Steve Davis works his way around the group, giving tips and encouragement, and exchanging banter.

"I try to give patients the wherewithal to do something. I teach technique. The rest comes from them," he says. Motivation is high in preparation for an exhibition at the city's Industrial Museum.

The class has recently been expanded to three sessions a week – and its contribution is highly valued by the hospice's specialist team.

"There's a therapeutic aspect to belonging to the group," Day Therapy Manager Jean Gordon says. "For patients' self-esteem, it's good to produce something. Art distracts them from their illness – it's an absorbing thing to do."

The art class is just one aspect of the hospice's wide range of day services. "We run groups for patients with heart failure and chronic obstructive pulmonary disease," Jean says. "These are about helping patients cope with their illness and plan for the future, and preventing acute admission to hospital."

Barrie Rawnsley

Patients attending day therapy benefit from sessions of Reiki and Reflexology with volunteer therapists. Also popular are activities ranging from armchair exercises to sessions on the hospice Wii.

One-to-one appointments with the hospice's professional team run alongside the art classes. Patients can see a consultant physician in palliative care, the physiotherapy and social work teams and the chaplain (available to those of all faiths and none). Many sessions are part of individually planned programmes of therapy – but consultations can quickly be arranged to address particular concerns. It's also common for people to be admitted temporarily as in-patients to tackle a particular problem, such as pain control.

Volunteers are an integral pert of the team with a range of important roles in supporting patients and families.

"It's very much about helping patients to stay as independent as possible for as long as possible," Jean says.

Main picture: Trish Wagstaff

Photo Dave Edwards

12:30 – taking on a zipwire challenge

Jumping off a 100 foot platform and hurtling across the river Trent on a zipwire isn't everyone's idea of fun. But for Trish Wagstaff, 80, it was the ideal way of raising money for Marie Curie Cancer Care.

Trish is one of tens of thousands of people who support Marie Curie Cancer Care's fundraising, which brought in £74 million over the financial year.

"I think of fundraising as the oxygen that helps the candle of nursing burn," Director of Fundraising Fabian French says. "To expand nursing, we're asking for everyone's help in making sure that oxygen is as plentiful as possible.

"Marie Curie has to raise over £70 million every year to pay for the caring services the charity provides. And we have ambitious plans to grow the amount even higher."

Over the last year, the charity has boosted income from its Great Daffodil Appeal to a record level, with street collections bringing in almost £2 million, and other daffodil activities a further £3.7 million. The charity's Blooming Great Tea Party has also lived up to its name, with supporters organising thousands of parties across the UK.

The charity receives around £5 million in reply to its appeals for support by post, over the phone and online. And it now has over 110,000 donors supporting its work by Direct Debit.

Marie Curie also receives a small number of large donations from wealthy individuals, often to fund specific projects. "We are very grateful for their support," Fabian says.

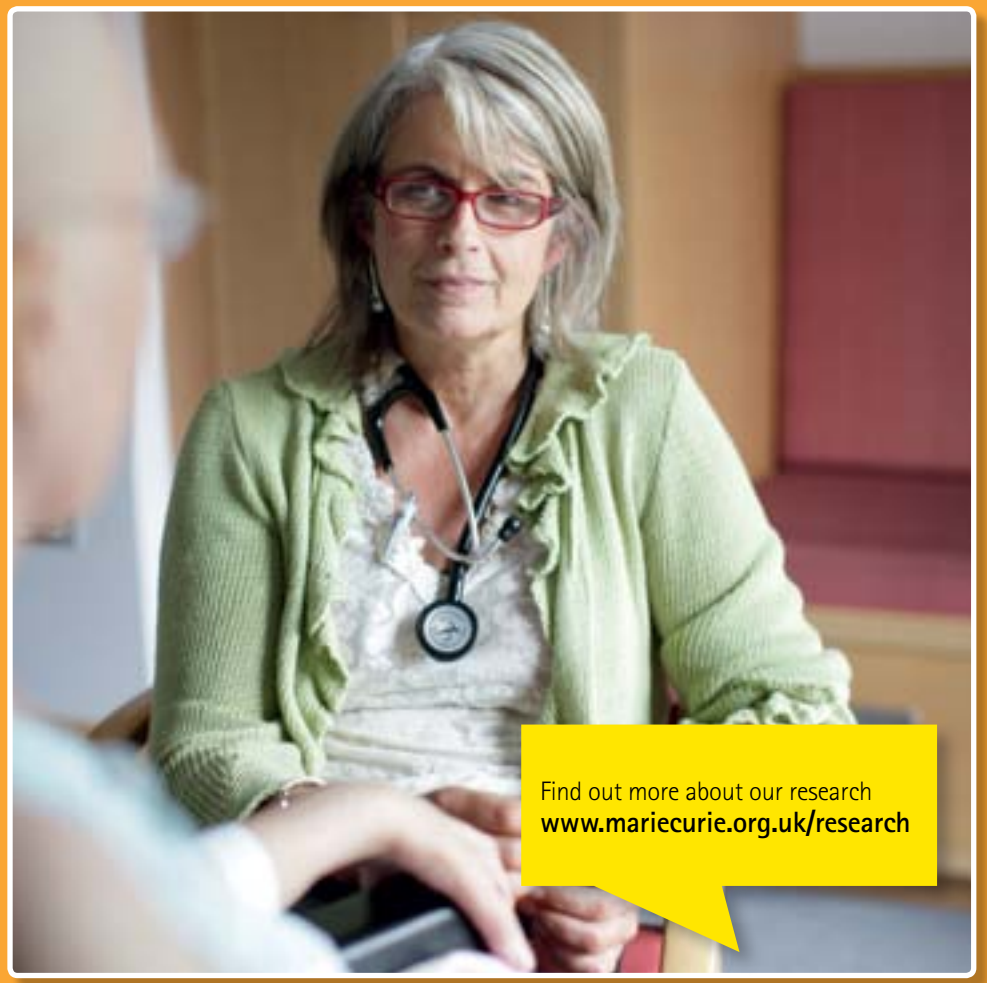
Companies and commercial organisations are generous supporters. Highlights of the year included fundraising campaigns by the staff of Homeserve, The Football League and the Rank Group. The charity has enjoyed the continued support of the National Gardens Scheme.

Marie Curie Shops are celebrating a record year of profits – totalling £2.1 million – and the charity is planning to expand their number from 168 to 200.

Many people who get involved support the charity throughout their lives – and often after they have died. Legacies are a vital stream of income – and over the year, a record number of people pledged that they would leave the charity a gift in their wills.

Through its network of local fundraising groups, Marie Curie Cancer Care is increasing its fundraising presence in communities across the UK. Recently, the charity's Kirby Moorside Fundraising Group celebrated 12 successful years of fundraising, whilst the Ilkley group raised £18,000 in its first year.

"Fundraising groups are going to be a major area of growth over the next few years," Fabian said. "We are keen to encourage people to get involved locally."






Dr Louise Jones

Dr Joe Low

3pm: researchers look for answers

- How can we improve care of the dying in hospitals and nursing homes?
- What issues are faced by teenagers and young adults with a serious illness?
- How can we improve the care of people with dementia who are dying?

These are just three of the questions being asked by Marie Curie Cancer Care's researchers.

The charity focuses its investigations on palliative care research – work which will improve the care provided to patients – rather than seeking to find cures.

Acting Head of Research Dr Louise Jones said: "We're aiming to increase our knowledge and understanding of the experiences of people in the last year of their lives, and of their families. From that, we can improve care."

Typically researchers work by talking to people about their experiences.

"Sometimes patients and carers tell us their stories. Often, we ask them to complete questionnaires to find out about their health in general, their psychological health, and their quality of life," Dr Jones said.

"We also look at the relative costs and benefits of new approaches – it's not just about saving money, it's about using money more wisely." The charity carries out its own work at Marie Curie funded research centres at University College London and Liverpool University, and at the Welsh Cancer Trials Unit in Cardiff. Marie Curie also awards £1 million in grants for research projects every year. Applications are scrutinised by an independent panel of experts, with the best chosen for funding.

Acceptance linked to well-being

If you have advanced cancer, are you better off accepting the situation and getting on with your life?

That's the question a group of Marie Curie researchers are tackling. Dr Joe Low and colleagues at our research centre at UCL and the Marie Curie Hospice, Hampstead want to find out whether a form of psychotherapy called acceptance and commitment therapy (ACT) could benefit people with serious illnesses.

Working with patients with advanced cancer at the Marie Curie Hospice, Hampstead, they used questionnaires to evaluate people's ability to accept their illness, and their psychological health. They also carried out physical tests, measuring patients' ability to walk 10 metres, as well as to sit and stand.

The researchers found that patients with high acceptance had better physical and psychological function than those with low acceptance.

They are now designing further research to test the effectiveness of sessions of ACT therapy.

Impact Report

This Impact Report shows our overall aims for the three year period from 2008 to 2011 and whether we achieved them.

It is important to note that the aims for the Strategic Plan for this period were established in 2007 when the prospects for growth and the state of the economy and public finances were considerably better than was the reality in the period. The credit crunch and subsequent recession has had a significant effect on the activities of the charity.

We have still achieved growth in the key areas of patient care and fundraising. Although not at the level expected in the original strategic plan, the growth in nursing and hospice care is extremely creditable in the circumstances.

Each area of our work is broken down, showing our overall aims for the three year period and our achievements against those targets.

Fully achieved Part achieved Not achieved

As in our strategic plan for 2008-2011, we have grouped our activities into four headings:

- Delivering growth
- Improving lives
- Securing the future
- Our finances

Delivering growth

By 2011 we will care for more people with cancer and increase significantly the care we provide for people with other illnesses.

Three year aims 2008-11

- We will be on track to double the number of patients we care for at home to 35,000 by 2013.
- We will be on track to double the hours of care we provide for patients at home to 2 million by 2013.

Three year achievements

The number of patients we care for at home has increased by 17% to over 23,400 over the three year period.

The hours of care we provided for patients at home increased by 13% to 1.3 million over the three year period.

Analysis

Marie Curie Cancer Care's ability to grow the activity of its nursing service is dependent on securing agreement with the NHS in each area of the UK on how much nursing should be provided. The cost is shared equally between the NHS and Marie Curie.

We set our ambitious growth plans of a 20% annual increase back in 2007, before the onset of the recession. Growth in the first year was strong, but financial pressures on the NHS have meant that it has been reluctant to increase its commitment to new services and has been carefully managing its expenditure on nursing services. This has resulted in lower than expected growth in the second year and the first decline in the hours of care provided for many years in 2010/11.

Marie Curie developed new Rapid Response and Multi-visit services to enable a nurse to support more than one patient in a single shift. These services are extremely cost effective, and this has meant that overall the service has cared for more patients in 2010/11 than the previous year despite the fact that the funding has not increased.

In the circumstances, the growth of 17% in patient numbers over the three year period represents a significant achievement.

Delivering growth

By 2011 we will care for more people with cancer and increase significantly the care we provide for people with other illnesses.

Three year aims 2008-11

- We will increase the number of patients using our hospices by 50%.
- We will increase the number of people supported at our hospices by 50%.

Three year achievements

The number of patients using our hospices increased by 11% over the three year period.

The non in-patient activity, which is the number of daycare attendances, homecare visits and outpatient attendances, increased by 113% over the three year period.

Analysis

There has been very significant growth in daycare, homecare and outpatient services at our hospices, with the number of patients increasing as well as the care provided to each person. This has been achieved by the hospices with virtually no increase in funding.

January 2010 saw both the completion of the new Marie Curie Hospice, Glasgow and the achievement of planning permission for a new hospice in the West Midlands.

Construction of our new hospice for the West Midlands commenced in June 2011, slightly later than envisaged at the time the strategic plan was set, due to the length of time taken to secure planning permission.

Delivering growth

By 2011 we will identify and harness new sources of income, and achieve growth in the most cost effective way.

Three year aims 2008-11

- We will be on track to increase our fundraising contribution to £65 million.
- We will increase our income from organisations, trusts and major donors.
- We will double the number of people who give regularly to 120,000.
- We will increase statutory funding by 55% to £41 million.

Three year achievements

Net fundraising income in 2010/11 at £50 million was lower than our target but is 10% higher than in 2007/08.

Income from trusts and major donors increased by 90% from 2008.

A total of 109,000 donors were giving regularly by March 31, 2011.

Income from the NHS for the Marie Curie Nursing Service fell slightly to 49% of total costs, and income from the NHS for Marie Curie Hospices remained at 46%, below our target of 55%.

Analysis

Both fundraising income and NHS income have been affected by the recession. The objective of £65 million was set in 2007 – prior to the recession – and the charity was on target after achieving its highest ever fundraising income in 2008/09. However the impact of the recession has meant that our fundraising income has fallen. The total achieved – £50 million – is creditable in the circumstances; is higher than the revised budget that we set before the start of the year; and represents a 10% increase on the £47 million achieved in 2007/08.

Improving lives

By 2011 the quality of life of patients, carers and families will continue to be improved.

Three year aims 2008-11

- We will increase significantly our investment in palliative care research and development.
- We will increase adoption of our innovations in end of life care throughout the UK.
- We will increase the number of patients who are able to die at home.
- We will increase the number of collaborative activities we undertake.

Three year achievements

The charity increased the support given to its palliative care research institutes at UCL and University of Liverpool; awarded new funding to the Wales Cancer Trials Unit; and launched a new national grant programme with £1 million available each year for palliative care grants.

A total of 19 sites covering 15% of the population of the UK have been supported by the Delivering Choice Programme which develops end of life care services with support from the charity. Over 10% of all care provided by Marie Curie is based on the new services that have been developed in the three year period.

The number of patients we care for at home has increased by 17% to more than 23,400 over the three year period.

We have collaborations underway with British Heart Foundation (supporting heart failure patients), Cancer Research UK (palliative care grant administration) and St Mungo's (end of life care for homeless people).

Analysis

The increased support to the Marie Curie palliative care research institutes was in addition to maintaining the £3 million provided for palliative care research grants over three years and £500,000 made available with the support of the Dimbleby Cancer Care Fund.

Improving lives

We will campaign for patients and communities experiencing inequity in end of life care and lack of choice in place of care and place of death.

Three year aims 2008-11

- We will work together with commissioners to achieve a 10% reduction in hospital deaths nationally for cancer patients.
- The amount of government funding available for all end of life care in Scotland, Northern Ireland, Wales and England will be increased.

Three year achievements

Marie Curie Cancer Care has successfully influenced the development of end of life policies in England, Scotland, Wales and Northern Ireland. The Chief Executive of the charity has undertaken an independent review of funding for end of life care in England.

At the beginning of the planning period the Department of Health provided additional funding of £286 million for end of life care, and around £3 million was allocated in both Scotland and Wales. No further increases have been secured in this year.

Analysis

Marie Curie continues to be influential in end of life care policy. However, the pressure on public finances has meant that it is difficult to secure increases in funding for end of life care.

Improving lives

We will make sure that patients and their families have a better understanding of all services to which they are entitled.

Three year aims 2008-11

- We will widen access to our services.
- There will be a 30% increase in awareness of our services amongst patients, families, carers and healthcare professionals.
- We will increase public knowledge of our hospices in their catchment areas.
- We will ensure that the patients we care for in our hospices reflect their local population.

Three year achievements

We have completed and evaluated a pilot of Marie Curie Helpers in Somerset and the service will be offered in Bristol, Liverpool, Nottingham and East London. We have launched a pilot project for patient self-referral in Derbyshire, slightly later than planned.

Following our advertising campaign in the spring, public awareness is over 40% higher than in 2007/08.

Hospice impact reports were published for a number of our hospices.

We are continuing to research the needs of different patient groups in the population around each of our hospices.

Analysis

The Marie Curie Helper project provides trained volunteers to provide practical support to patients in their homes.

The Derbyshire self-referral pilot was launched later than planned. For the first time patients and families will be able to contact the Marie Curie Nursing Service directly to request care rather than being referred by the NHS.

Securing the future

Our patients, families, staff, supporters, volunteers, commissioners and other stakeholders will be able to access the information they need, simply and directly.

Three year aims 2008-11

- We will identify and deliver all the information our staff need to enable them to work effectively.
- We will develop a wide range of online services for the public and healthcare professionals.
- We will attract 100,000 unique visitors a month to our website.

Three year achievements

In the three year period we have undertaken a major survey of staff requirements and launched a number of initiatives including online information and cascading information through team meetings.

Our new website was launched in the period with updated information on our services and new facilities such as online registration for events.

The number of unique visitors to our website was over 90,000 in March 2011.

Analysis

Since the strategic plan was developed in 2008 the importance of social media such as Twitter and Facebook has increased. The charity has more than 250,000 fans on Facebook and is continuing to grow its Twitter following (over 6,000).

Securing the future

We will show how we value our people by improving their working lives.

Three year aims 2008-11

- We will be an employer of choice and ensure that staff turnover continues to be lower than that of other national charities.
- We will increase access to learning opportunities, including e-learning, for our staff and volunteers.
- We will continue to develop our volunteer network.

Three year achievements

We have completed most of the work needed to improve our performance in areas highlighted by staff, including communications and difficulty getting things done.

Over 50% of the charity's training is delivered online.

Volunteer Advisory Boards have been established for Scotland, Wales and Northern Ireland. Our hospices have benefited from the establishment of Development Boards to assist with fundraising activities.

Analysis

The Volunteer Advisory Boards for Scotland, Wales and Northern Ireland involve senior figures from each country advising the charity on relevant issues. This is important as the policies of each of the countries are becoming increasingly divergent.

Our finances

Three year aim 2008-11

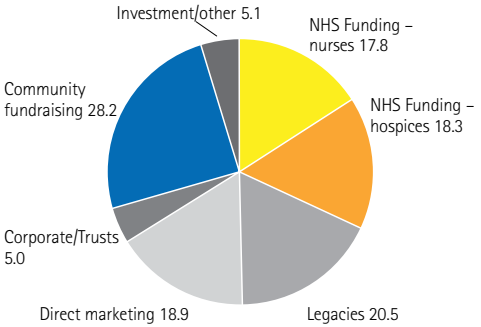
- Increase income to fund our planned growth in core services and our capital investment programme.

Three year achievements

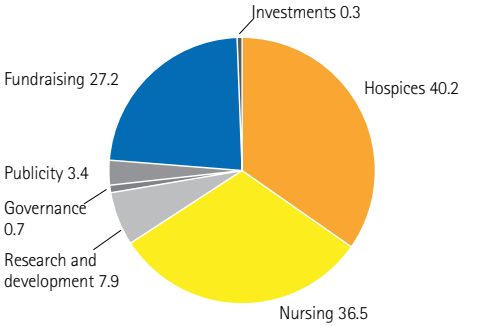
The funds raised were sufficient to meet our expenditure requirements each year. Although fundraising income fell in the second year, economies were made in a number of areas of the budget to ensure that the amounts raised were adequate. In the third year of the planning period fundraising income excluding legacies recovered, increasing by 4%. This was sufficient to generate a small surplus in the final year of the strategic planning period.

The surplus in 2010/11 and the increase in the value of the charity's investments raised the level of the charity's reserves so that they are in the required target range set by the trustees.

Income 2010/11 £ million



Expenditure 2010/11 £ million



Figures exclude shops, capital appeals and gains on disposal of fixed assets.

Summary Consolidated Statement of Financial Activities

For the year ended 31, March 2011

	Unrestricted £'000	Restricted £'000	2011 £'000	2010 £'000
Incoming resources				
Voluntary income	55,768	18,220	73,988	77,110
Incoming resources from charitable activities	36,498	2,620	39,118	36,645
Activities for generating funds: Retail sales of donated and purchased goods	9,338	5,646	14,984	15,301
Investments and other income	2,119	-	2,119	2,419
Profit on disposal of fixed assets	2,321	-	2,321	-
Total incoming resources	**106,044**	**26,486**	**132,530**	**131,475**
Resources expended				
Cost of generating voluntary income	25,433	1,806	27,239	26,630
Fundraising trading: cost of goods sold	8,617	4,286	12,903	14,601
Publicity	3,398	-	3,398	2,935
Investment management costs	265	-	265	(115)
	37,713	**6,092**	**43,805**	**44,051**
Net incoming resources for charitable application	**68,331**	**20,394**	**88,725**	**87,424**
Hospices	27,326	12,853	40,179	38,089
Nursing	33,524	2,944	36,468	34,781
Research & development	5,941	1,938	7,879	10,004
Cost of charitable activities	**66,791**	**17,735**	**84,526**	**82,874**
Governance costs	695	-	695	704
Total resources expended	**105,199**	**23,827**	**129,026**	**127,629**
Net income for the year	**845**	**2,659**	**3,504**	**3,846**
Gain on investments	2,836	-	2,836	10,826
Actuarial losses on defined benefit pension scheme	(131)	-	(131)	581
Net movement on funds	**3,550**	**2,659**	**6,209**	**15,253**

Summary Consolidated Balance Sheet as at March 31, 2011

	2011 £'000	2010 £'000
Assets & liabilities		
Fixed assets	42,644	43,164
Investments	75,142	69,260
Net current assets	8,772	7,828
Provisions and creditors due after more than one year	(9,588)	(9,211)
Defined benefit pension scheme liability	(3,421)	(3,701)
	113,549	**107,340**
Funds		
Restricted funds	15,537	12,878
Designated funds	51,985	50,197
Defined benefit pension scheme liability	(3,421)	(3,701)
General fund	49,448	47,966
	113,549	**107,340**

Independent Auditors' Statement

to Marie Curie Cancer Care ("the charity")

We have examined the summarised financial statements of Marie Curie Cancer Care for the year ended March 31, 2011 which comprise the Summary consolidated statement of financial activities and the Summary consolidated balance sheet set out on page 28 which are contained within the charity's non-statutory Impact Report ("Impact Report"). The summarised financial statements are a non-statutory account prepared for the purpose of inclusion in the Impact Report.

This statement is made, on terms that have been agreed with the charity, solely to the charity, in order to meet the requirements of Accounting and Reporting by Charities: Statement of Recommended Practice (revised 2005). Our work has been undertaken so that we might state to the charity those matters we have agreed to state to it in such a statement 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 for our work, for this statement, or for the opinions we have formed.

Respective responsibilities of trustees and auditors

The board of trustees has accepted responsibility for the preparation of the summarised financial statements. Our responsibility is to report to the charity our opinion on the consistency of the summarised financial statements on page 28 of the Impact Report with the full statutory annual financial statements. We also read the other information contained within the Impact Report and consider the implications for our report if we become aware of any apparent misstatements or material inconsistencies with the summarised financial statements.

Basis of opinion

We conducted our work in accordance with Bulletin 2008/3 *The auditor's statement on the summary financial statement in the United Kingdom* issued by the Auditing Practices Board. Our report on the charitable group's full statutory annual financial statements for the year ended March 31, 2011 describes the basis of our statutory opinion on those financial statements.

Opinion

In our opinion, the summarised financial statements set out on page 28 of the Impact Report are consistent with the full statutory Report and Accounts for Marie Curie Cancer Care for the year ended March 31, 2011.

MG Fallon
for and on behalf of KPMG LLP,
Chartered Accountants
1 Forest Gate
Brighton Road
Crawley RH11 9PT
August 10, 2011

Analysis

These summarised financial statements are a summary of information extracted from the statutory Annual Report and Accounts for the year ended March 31, 2011. They may not contain sufficient information to allow for a full understanding of the financial affairs of the charity. For further information, the full annual accounts, the auditors' report on these accounts and the Report of the Council should be consulted. Copies of these can be obtained from the Company Secretary at 89 Albert Embankment, London SE1 7TP.

The annual accounts were approved by Council on July 5, 2011. The accounts have been audited by a qualified auditor, KPMG LLP, who gave an audit opinion which was unqualified and did not include a statement required under section 498 (2) and (3) of the Companies Act 2006.

AH Doggart,
Honorary Treasurer

Our thanks

Our heartfelt thanks go to all supporters who helped to make our work possible over the year. A selection of companies, organisations and individuals who made substantial contributions is listed below.

The 3 Ts Charitable Trust
The Adint Charitable Trust
The John Armitage Charitable Trust
The John Atcheson Foundation
Atkin Charitable Foundation
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The BAND Trust
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The Alice Ellen Cooper-Dean Charitable Foundation
Croydon Relief In Need Charities
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Peter and Janet Davies
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Dorridge Fun Run
The Duchy Health Charity
The Clore Duffield Foundation
The Houghton Dunn Charitable Trust
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Ernest Jones
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The Rt Hon Lord Forsyth of Drumlean
The Foundation for Sport and The Arts
Steve Fountain
The Hugh Fraser Foundation
The Freemasons' Grand Charity
Payne-Gallwey Charitable Trust
Mr Arnold Gardiner
GE Capital
Giveacar
Richard Gladwin
Harry and Gylla Godwin Charitable Trust
The Raisa Gorbachev Foundation
Hugh Grant
Great British Card Company Limited
GVA Grimley
Hampton Fuel Allotment Charity
The Happy Charitable Trust
Peter Harrison Foundation
Ms J Hayward
Patrick Heren & Fiona Cadwallader
Homeserve plc
The Dorothy Howard Charitable Trust
HSBC Bank plc
The Albert Hunt Trust
The Ingram Trust
John James Bristol Foundation
John Lewis plc
The Jordan Charitable Foundation
Cath Kidston Ltd
The Kirby Laing Foundation
Leathbond Limited
Leeds Building Society
The Lennox and Wyfold Foundation
Ling Design Ltd
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Mark and Liza Loveday
Pru Macleod
Copley May Foundation
Patrick McKenna
Mitchells & Butlers plc
Mrs HE Mitchell Charitable Trust
The Moffat Charitable Trust
The George A Moore Foundation
William Morrison
The National Gardens Scheme
Newhall Publications Ltd
Newman's Own Foundation
NHBC
The Noon Foundation, established by Lord Noon
Paperchase Products Ltd
Richard Parks
The JGW Patterson Foundation
The Peacock Charitable Trust
Pears Foundation
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Prudent Publishing
Premier Foods Group Ltd
The Rank Group plc
The Rayne Foundation
Redburn Partners
Reed Learning
Reed Business Information Ltd
The Robertson Trust
The Royal Air Force Benevolent Fund
The Royal Bank of Scotland Group plc
Goldman Sachs Group Inc.
Scarborough Group Foundation
Dr G Seymour
Shaylor Group plc
David and Joanne Smith
The Henry Smith Charity
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Sony UK
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Thales UK
Mr P Thompson
Tracks Publishing Ltd
The Constance Travis Charitable Trust
The John and Lucille Van Geest Foundation
The Waterloo Foundation
Wesleyan Assurance Society
The Garfield Weston Foundation
Hugh Williams-Preece
Zurich Community Trust

ngs gardens open for charity

Every year, more than 3,700 gardens, listed in the Yellow Book, open to the public as part of the National Gardens Scheme (NGS). The NGS has supported Marie Curie Cancer Care for 14 years, and donated £550,000 to the charity raised by garden openings in 2010.

For more details see **www.ngs.org.uk**

Volunteering opportunities

Volunteers are vital to the work of Marie Curie Cancer Care. They take on a huge range of roles, including running our shops, visiting patients in their homes, providing bereavement support, publicising the charity, administration and fundraising.

More than 21,200 people volunteer to help with the Great Daffodil Appeal every year, and the charity is recruiting Marie Curie Fundraising Groups nationwide.

All Marie Curie Trustees and Patrons are unpaid volunteers.

For more details of volunteering opportunities in your area, call 0800 716 146 or email volunteering@mariecurie.org.uk

For more information

If you would like to know more about how you can help Marie Curie Cancer Care provide more care to more patients, please contact us:

Freephone: 0800 716 146
email: info@mariecurie.org.uk
Visit: www.mariecurie.org.uk

Charity reg no. 207994 (England & Wales), SC038731 (Scotland)

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Marie Curie Cancer Care provides high quality nursing, totally free, to give people with terminal cancer and other illnesses the choice of dying at home, supported by their families.

Marie Curie Cancer Care

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