A better life for people living with rheumatoid arthritis

Annual Review

1st April to 31st December 2010

National Rheumatoid Arthritis Society
Chief Executive’s Report

By Ailsa Bosworth, NRAS Chief Executive

This year has seen unprecedented change being proposed to the health service and the benefits system – and all this taking place against an uncertain economic climate. This is creating anxiety for many of our Members and the need for some of our services has never been greater. I am proud to say that in these challenging times, the team has responded by working harder than ever and NRAS has made tremendous progress in spite of the difficulties we and the whole voluntary sector face. NRAS has expanded its work in the areas of Helpline, Fundraising, Volunteer Network, Membership and Campaigning and this Annual Review highlights the work of the different parts of the charity. As you will see we have also invested in improving our website and data management to create long term efficiency savings.

There have been many highlights this year, but a personal one was when my husband, Brian Bickerstaffe, and I were invited to attend the Queen’s Garden Party in July, for my work in founding and running NRAS. The rain held off and we had an enjoyable day in spite of wearing an airboot as I was having major foot surgery the following day!

The publication of the Coalition Government’s White Paper on the health service has meant that NRAS has been particularly busy this year lobbying Parliamentarians in Westminster to ensure the level of care for people with rheumatoid arthritis gets the priority it deserves. We have also been working hard in the devolved nations We produced our ‘Burden of RA’ report identifying the cost of loss of productivity in RA and held a Parliamentary drop-in event in June to garner support from MPs.

There are many highlights this year, but a personal one was when my husband, Brian Bickerstaffe, and I were invited to attend the Queen’s Garden Party in July, for my work in founding and running NRAS. The rain held off and we had an enjoyable day in spite of wearing an airboot as I was having major foot surgery the following day! 

An employment lawyer spoke at each of our WorkWise Workshops aimed at keeping people with rheumatoid arthritis in work. Here is Adish Farkhad at the Greenwich Workshop

by the Rheumatology Futures Group) and the new NICE Guidelines for Adults with RA, both published in July 2009. We also started work in collaboration with the British Society for Rheumatology to develop similar commissioning standards pan London and have had very positive meetings with the London SHA.

2009 was, for NRAS, the Year of RA as many key events and reports such as the publication of the NICE RA Guidelines gave us unprecedented tools to drive up standards of care and identify areas where things were not working well, such as the management of flares. In 2010 we carried out a survey to find out, one year on, what had changed. Our findings were highlighted in a special report which was launched in Parliament at the end of 2010. Unsurprisingly, we found that little had changed and our report calls for action in four key areas which we shall be pursuing into 2011.

Again this year we gave considerable support and input to many academic research studies.

Another incredibly busy year, so much more to do …
The National Rheumatoid Arthritis Society (NRAS) is the only UK patient-led charity exclusively dedicated to supporting the approximately 690,000 people in Britain with rheumatoid arthritis (RA), as well as their families, carers and the healthcare professionals who treat them. We also provide information and support for families living with Juvenile Idiopathic Arthritis (JIA).

The charity has an excellent reputation based on professionalism, expertise, collaborative working, sound achievement, careful financial planning and rapid, but sustainable, growth.

“Since joining NRAS I have been given the opportunity to meet and help fellow sufferers in a number of different ways. I get a tremendous sense of fulfilment from this. I have also been able to work through my own feelings about my RA and have finally been able to come to terms with it. Being part of the NRAS family has given me a sense of purpose and direction. In short, it has been one of the best decisions I have ever made.”

Our Vision
A better life for people living with rheumatoid arthritis

Our Mission
The National Rheumatoid Arthritis Society (NRAS) helps and supports people living with rheumatoid arthritis (RA) and their healthcare professionals by:

- Providing information, education, support and advocacy
- Raising public awareness of rheumatoid arthritis
- Raising the priority of rheumatoid arthritis with politicians and policy makers
- Campaigning for good care and services for all
- Facilitating networking and encouraging self-management
- Raising NRAS funds to work towards our vision

What is Rheumatoid Arthritis?
Rheumatoid arthritis (RA) is a painful and disabling, autoimmune disease that can affect people of any age, and three quarters of people are first diagnosed when of working age. Approximately 12,000 children in the UK under the age of 16 have Juvenile Idiopathic Arthritis.

Unfortunately, RA is often confused with osteoarthritis, a quite different condition which is due to wear and tear of joints and more commonly occurs in the older population.

Approximately 1 in every 100 people in the UK has RA. It is a lot more common than leukaemia or multiple sclerosis, for example, and is a systemic disease meaning it can affect the whole body including internal organs such as the lungs, heart and eyes (although thankfully this is not the case for everyone).

People with the disease can feel isolated and suffer from depression. Being a Member of NRAS or talking to our Helpline or with one of our Telephone Support Volunteers can give them support, information, hope and reduce feelings of isolation.

“I could not manage without the NRAS information and invaluable lovely people answering the phones and really caring. THANK YOU!”

Talking to an NRAS Telephone Support Volunteer like Tanya Andrews can give support, information, hope and reduce feelings of isolation.
Volunteer Network
Providing information, education & support
NRAS Volunteers in demand in so many ways

The NRAS Volunteer Network has grown in so many ways over the last year, not least in the number of NRAS Groups across the UK, but also in being recognised as an essential source of ‘patient input’ into many different academic studies on a wide variety of aspects of living with rheumatoid arthritis.

NRAS Groups
Since April 2010 the number of NRAS Groups has increased from 28 to 35, a 25% increase in just 9 months.

“The meeting was helpful and will help to shape our new INBANK project very positively. Thanks for all your help with the recruitment and co-ordination. We really appreciate it.”
Dr Will Dixon, MRC Clinician Scientist/Senior Lecturer, Arthritis Research UK Epidemiology Unit, University of Manchester

These local groups offer a forum for regular support, information and ongoing education, improving self-management skills and coping strategies as well as a social network for people living with RA. With the growing concerns about NHS cuts these local patient groups are proving instrumental at giving attendees a collective voice; thus ensuring that rheumatology services do not slip back to “old ways”. It is imperative to all those who have RA that these departments do not revert to being the “poor relation” departments of a hospital that was often the case prior to the advent of modern biologic therapies which have revolutionised the treatment of this disease.
**Telephone Peer to Peer Support Volunteers**

From April to December 120 volunteer calls were arranged. Approximately 50% of all volunteer calls were on the topics of methotrexate and biologic treatments – being able to talk to someone who is already taking a particular medication, and doing well on it, can relieve the person’s anxiety about taking toxic treatments.

In a recent audit of a one month period of calls some of the comments made were as follows;

“absolutely brilliant”, “I felt reassured by the call”, “the call was encouraging and very helpful”.

81% of those audited said that they rated the comfort of talking to the Volunteer as excellent or very good. 78% rated the usefulness of the call as excellent or very good.

“I attended the new launch meeting in Brentwood last night and I have to say it totally lifted my spirits … I am new to the area … it has been quite hard finding my way around … Well last night was a breath of fresh air. I became a member with NRAS through … good friends with Ailsa Bosworth. Ailsa then emailed me (details of) the NRAS (Group meeting) and what it was about and here I am. You did a wonderful job last night and the two consultants were so inspiring. I just want to thank you so so much.”

**“Until I went on the self-management programme, everything about RA seemed like gloom and doom. On the course for the first time I met other people with RA and found many ways to start taking control of my condition and feeling positive about myself and my life”**

**Volunteer Activities**

NRAS Volunteers have in this period of time participated in a wide range of activities such as giving media interviews, presenting to industry representatives and health professionals, helping to educate trainee medical students, participating in medical and market research, as well as office work at NRAS in Maidenhead. The great value NRAS Volunteers bring can be seen from these comments from organisers of these activities.

“NRAS is an excellent organisation which gives empowerment to their clients to be able to live life to the full within the boundaries of their RA through intelligent dialogue and encouragement.”

“To hear first-hand the disabling effect arthritis has on small aspects of life and even post joint replacement that mobility and ability to perform certain tasks remains limited. It was useful to get a real insight into the main problems faced in day to day life. This will help in how I can try help/support my patients better in the future. Overall the lecture highlighted how many different factors an RA patient will have to cope with as opposed to just ‘disease activity’.”

First year medical student who attended talk given by an NRAS volunteer Carolyn Calcutt at King’s College Medical School.

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**Co-ordinators’ Conference September 2010 in Maidenhead**

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The NRAS Helpline aims to improve the lives of those affected by rheumatoid arthritis by providing support and information to help reduce the fear and feelings of isolation associated with this disease, as well as helping people self-manage more effectively. We achieve this by offering support and up to date information across a range of topics to those with RA, their families, friends and carers. Most of the contact to the Helpline is by phone, however, we get many emails and of course some do put pen to paper and write to us. This year 82% of calls came from women, the majority (55%) being between 45 and 65 years of age, and 20% of callers were below the age of 45.

The amount of information and support needed is increasing, so we added to the Helpline team with the appointment of Laura Sando as Helpline and Self-Management Coordinator. During the period April 2010 to December 31 2010 the Helpline received 2084 contacts - 1724 calls and 360 emails.

The most discussed topics related to concerns about DMARDs, particularly the side effects of methotrexate, access to, and information about the biologic therapies, the need for support in relation to their disease and the difficulties faced by those with RA due to the lack of awareness and understanding of RA by their families, colleagues, friends and the general public. Calls were received from throughout the UK and also some from overseas. 23% of calls came from the London area. 70% of calls came as a result of visiting the website, or were from Members or previous callers to the Helpline.

During this period a helpline audit was conducted and the overall response was very positive with over 90% of participants rating their call and the information sent as excellent or good. The majority (91-100%) felt that the call was treated respectfully and any subsequent actions were dealt with promptly. They felt more confident about dealing with their RA and said that they would recommend the service to their friends. Here is a typical quote from one of the participants.

“Really good helpline worker, reassurance and advice, made me feel better.”

Over this period more than 40,000 items of information were requested by individuals and health professionals. The most requested publications were the Newly Diagnosed and Managing Well booklets (approx 34% of all requests) as well as those on the topics of work and benefits.

A new publication was published in April 2010 to address some of the questions arising from the use of biologic treatments for RA. The booklet looks at all the currently prescribed biologic drugs and describes each one in detail and also gives background information about

The NRAS Helpline supports people throughout Britain and overseas

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<td>East of England</td>
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Members Glynn Evans, Penny Cavanna, Jill Hibbitt, Mr & Mrs Turner and Norman Coombs in consultation about our new publication: The NRAS Members’ Care Plan
the role of NICE in their prescription, the criteria used to allow patients access to them and an understanding of the usual sequence in which these drugs are prescribed. This has proved to be a very useful and important part of our information resources and has been widely requested and well received.

“I have just read the whole publication through and it is truly excellent. Just what’s required for patients, relatives, nurses and doctors who are not specialised in the area.”
Consultant Rheumatologist

Biologics... the story so far brings together a wealth of information about the use of biologic drugs in people who have RA

Other new publications during this period include the updated RAise it with your Doctor, replacing the Explaining your Symptoms booklet, which aims to help patients communicate more fully with their healthcare providers and to ensure that they get the most out of their consultations. The booklet also has a diary section where users can keep a record of their levels of pain and fatigue and notes relating to their condition.

The new RAise it with your doctor booklet has proved to be very popular

As part of the ongoing drive to raise greater awareness of RA and the need for early referral, an ‘S Factor’ campaign was launched, targeted at the general public, in order to encourage them to seek help earlier if they have been experiencing early morning Stiffness, Swollen joints or having pain when Squeezing across the knuckles (the 3 ‘Ss’). To run in tandem with this campaign, a DVD was developed to show the possible outcomes of a delay in getting a diagnosis and featured Jean Burke, an NRAS Member and Volunteer, and Dr Graham Davenport, a GP with a special interest in musculoskeletal health representing the Royal College of GPs, who reinforced the need for early referral by GPs to specialist care. This has been viewed widely on our website and we hope will encourage visitors to the website to act more promptly.

New information sheets on a range of topics such as rheumatoid nodules, Felty’s Syndrome and recent additions to the range of biologic treatments, eg tocilizumab and certolizumab pegol, have been produced and added to the website.

An important part of the Helpline team’s work during this period has been preparation for the Information Standard accreditation. Accreditation was gained in early 2011 and will serve to reassure our readers of the reliability and quality of the information we produce.

The importance of self-management for people with long term conditions is well recognised and NRAS is very pleased to confirm that the NRAS RA Self-Management Programme has now come to the end of its pilot phase and preparations are in place for its roll out in 2011. The feedback from those who took part in the pilot courses has been very encouraging and initial analysis of the six month follow-up data is very positive in showing the sustained benefit derived from attending this programme.

There are long term financial gains to the NHS from people taking greater control and responsibility for their disease through decreased GP visits, outpatient visits and individuals having more confidence to deal with flares. Therefore, the return on investment by commissioning this Programme is expected to be rapid and over the course of a year if a unit were to run at least 2 or 3 courses, financial savings to the NHS are likely to accrue.

The 10 most requested publications this year

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<td>Newly Diagnosed</td>
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<td>Managing Well</td>
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<td>Fatigue</td>
<td>16%</td>
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<tr>
<td>When an Employee has RA (Emp. booklet)</td>
<td>12%</td>
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<td>Biologic Drugs explained</td>
<td>9%</td>
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<tr>
<td>Benefits explained</td>
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<td>I want to work (Emp. booklet)</td>
<td>7%</td>
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<tr>
<td>Disease Activity Score explained</td>
<td>7%</td>
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<tr>
<td>Disability Living Allowance explained</td>
<td>7%</td>
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<td>RAise it with your DoctorE and EYE</td>
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Dr Graham Davenport discusses the importance of early referral for people with symptoms of stiffness, swelling and pain

A Gift in Your Will Supports our Future

NRAS Annual Review 2010
This year NRAS has been very busy lobbying Parliamentarians in Westminster and the devolved nations as well as key officials from the Department of Health. We have been working with local NHS healthcare professionals and NHS managers to ensure that good standards of care are implemented in the midst of all of the service redesign issues.

Raising the profile of rheumatoid arthritis and of NRAS

Our campaigning and lobbying activity has raised the profile of rheumatoid arthritis and of NRAS with Parliamentarians and the Department of Health. This has been achieved in a number of ways, including having 41 one-to-one meetings with MPs including the Secretary of State for Health, Andrew Lansley. In Scotland we met with 11 MSPs, including Nicola Sturgeon MSP Deputy First Minister and Cabinet Secretary for Health & Well Being, and William Scott, Head, Long Term Conditions Unit.

We have successfully sought support from MPs to table 73 Parliamentary Questions (PQs). The topics covered in the PQs included questions on Employment Support Allowance (ESA), rheumatoid arthritis and its treatments, devolved nations’ activity and employment issues generally. Our parliamentary events have resulted in two Early Day Motions and helped secure a Health Debate on rheumatoid arthritis services in both the English and Scottish Parliaments.

Working towards good standards of care for everyone

We have worked closely with the East of England Strategic Health Authority (SHA) to ensure understanding of how NHS organisations are implementing Government policy. With NRAS representation on three Boards at the East of England SHA, rheumatoid arthritis now has recognition as a priority disease.

As mentioned in Ailsa's CEO report in this Annual Review, NRAS has driven this agenda and has involved the National Ankylosing Spondylitis Society (NASS), healthcare professionals, NHS managers and commissioners. This work has resulted in the publication in the Health Service Journal of 'The 10 Key Standards of Care'. We are now working to produce similar results in the London area.

Our efforts in putting together the "Self Management Programme" over the last year stem from the belief that the economic burden of the disease can be greatly reduced with greater patient education programmes that will allow them to better understand the disease and therefore improve their management of it.

Economic Burden of RA report

NRAS commissioned the 'Economic Burden of RA' report which found the costs to the UK economy of rheumatoid arthritis arising from productivity losses totalled almost £8 billion per year, yet the NHS only spends £700 million annually on care for people with RA.

The Health Service Journal published 'The 10 Key Standards of Care' as a result of our work.
Rheumatoid arthritis and the work place Parliamentary event
This ‘drop in’ event took place in June in Westminster and focused on RA and the work place and explored the fact that the disease affects not just the health of constituents, but the health of the economy. The event attracted 38 MPs who agreed to support our objectives for 2010.

World Arthritis Day, Westminster
NRAS, together with our Members’, health professionals and MPs have been working together for years to raise awareness of RA and of what needs to be done to improve patient outcomes.

This year, the theme of World Arthritis Day was ‘Let’s Work Together’ so it was very appropriate that people from different walks of life had been lending support to our campaign for improvements in services.

Members of NRAS had written to the Prime Minister, David Cameron describing their experiences of living with rheumatoid arthritis and on this day we marched on Downing Street to present these letters to him.

World Arthritis Day, Scotland
This event saw multi-disciplinary team members educating MSPs on how the ‘team approach’ could make a real difference to the treatment of rheumatoid arthritis.

‘Rheumatoid Arthritis One Year On’ Report
2009 saw the production of many major publications that could help improve care. We commissioned a survey to find out - one year on - how these policy developments had changed services that impacted on patient care. The results showed some fantastic work within the NHS, which needed to be protected in the current economic climate. It also showed that there were inconsistencies and inadequacies in the service some were receiving, which needed to be improved.

‘Rheumatoid Arthritis One Year On’ report showed that there were inconsistencies and inadequacies in the level of service some people were receiving

National Rheumatoid Arthritis Society Members and MPs ask the Prime Minister for national coordination on rheumatoid arthritis to mark World Arthritis Day 2010.
Sarah Wallace (NRAS Member),
David Amess MP, Bob Russell MP, Lynn Love (Director of Operations, NRAS), Graham Stringer MP, Altsa Bosworth (Chief Executive, NRAS), Professor David Scott (Professor of Rheumatology & Chief Medical Advisor to NRAS), Helen Copeland (NRAS Member) and Jean Burke (NRAS Member)
Membership
Providing information, education & support

NRAS Members receive support, information and contact with other Members with rheumatoid arthritis. Having access to our services when needed can enable Members to better manage their disease and improve their quality of life. It can also help to reduce feelings of isolation which are commonly felt by those with RA.

“I love being a Member of NRAS. It has certainly helped reduce my feelings of isolation.”

In addition to people with rheumatoid arthritis, we also offer professional membership to rheumatology healthcare professionals. Professional Members receive a comprehensive pack of NRAS publications and supplies of publications for their clinics so that any patients with RA can benefit from them.

Communication with Members
Members receive a magazine 3 times a year containing up to date information across a range of topics, Members’ experiences and the work of NRAS. The magazine is supplemented by a bimonthly e-newsletter keeping Members up to date with current events and news.

“The NRAS Members’ magazine provides Members with information on existing treatments and those in development, people’s experiences of living with RA and much more

“It is a wonderful and informative service and magazine, keep up the good work!!!”

Welcome calls have been made to all new Members this year to ensure they have received all the information and help they needed when they joined NRAS. The calls have been very well received.

Members with RA have access to an online forum that is highly valued as a source of information and support. This year forum guidelines were updated to bring our guidelines in line with other charities and to help everyone gain the most from use of the forum.

The NRAS Members’ Forum provides Members with the opportunity to communicate with each other from the comfort of their own home

“Like the day to day information and guidance from people living with RA. I get a realistic understanding of the condition and the drugs from other members.”
From the Members’ Forum

Membership growth
Membership is growing month on month, and during the period 1 April to December 31 2010, 187 Members joined of whom 69 were health professionals.

Membership satisfaction survey
A membership satisfaction survey was carried out this year seeking Members’ views on NRAS membership. This was similar to the survey we sent to Members in 2008 and our aim was to see if Members’ views had changed over the 2 years and to see in what ways we could make NRAS membership more rewarding.

The survey results show that Members think a great deal of their NRAS membership, and feel they have benefited substantially from the support and information we have on offer.

“I like the day to day information and guidance from people living with RA. I get a realistic understanding of the condition and the drugs from other members.”
From the Members’ Forum
Members’ Involvement

Members are keen to support their charity and are generous in helping in many different ways.

We consult and communicate with our Members on a regular basis and this year we were delighted to have Members’ input into many projects, including contributing towards a greater understanding of the pathway someone with rheumatoid arthritis takes from time of diagnosis and the creation of a care plan for Members.

Members’ Award

In November 2010 we launched the NRAS Person of the Year award and invited our Members to make their nominations based on the people that make a difference to their daily lives; specifically people who go the extra mile to offer support and encouragement to them when times are hard. Members sent in dozens of heart warming stories about their personal experiences and we had a tough time deciding who to give the first award to.

In the end, we decided that Alan Magson (pictured here with his wife Julie) should be the first person to receive the title. Whilst his wife was struggling to come to terms with a particularly bad set of circumstances relating to her RA, complications and her diabetes, Alan had shown his amazing dedication and support to her in many ways too great to mention here, not least by overcoming his long term built in dread of needles to perform her required injections.

Top five ways being an NRAS Member has helped

| Increased my understanding of rheumatoid arthritis | 78% |
| Feel better informed | 77% |
| Have improved knowledge | 76% |
| Learnt about new treatments | 66% |
| Feel less isolated | 55% |
The new website, which went live in December 2009, has become an invaluable resource for people with RA, their families, friends and carers and health professionals with an interest in RA. The website aims to provide high quality, up-to-date information on all aspects of living with the disease and to give visitors information on all the services provided by NRAS, and the activities in which it is involved.

“I just visited your site for information on Rheumatoid Arthritis and was very relieved to find just about everything I could ever want to know about this autoimmune disease I am suffering from. Thank you for being there.”

During the nine month period between 1 April and 31 December we had over 1 million page views on the site and 190,000 visits, averaging about 21,000 visitors each month. The website had a particularly busy month in October due to World Arthritis Day on the 12th and we also ran an online banner campaign on the Daily Mail website to coincide with this to raise greater awareness.

On average, each visitor that came to our website spent over 5 minutes browsing the site and viewed over 5 pages. We had visitors from all over the world, with the most popular countries being the UK, India, USA and South Africa.

64% of the visitors came from searching on Google so we continually ensure that our keywords and our Google Ads are up to date and running effectively.

During the period, 60% of all visitors to the website were new visitors, and 40% were people who had come to the site previously.

The new website is now integrated with our database which allows the website user to register and pay the deposit for a fundraising event.
order publications online, update contact information, become a Member and make a donation. We have been fortunate to have Osato Ejakhegbue work with us for a year on our database as part of the Rank Foundation programme ‘Time to Shine’.

26% of all publication orders between April and December were made online and nearly 200 people either joined the organisation or renewed their membership online during this time.

We have found that the number of people using mobile devices such as iPhones, iPads and Blackberrys to access the website has increased, averaging over 500 visits each month. We have noticed that this number has climbed steadily and continues to do so.

We are frequently looking for ways in which we can improve and update the website to ensure that our visitors can easily find the relevant information, support and advocacy. We are very fortunate to have support from many people who help us make this possible, including our Medical Advisors who regularly write new articles for us.

Social Networking
The website is now also linked to several social networking sites to keep our supporters up to date with charity news, events and other useful information.

We have tried hard to embrace all of the new tools that these social media have provided and keep the website “current”. We have even started blogging!

Above: Ordering publications online is simple and easy on the new NRAS website. New articles on our website include topics such as ocular manifestations of rheumatoid arthritis and osteoporosis
Raising Income

2010 was a challenging year for the charity in light of the economic climate but saw us continue to build on our established income streams of events, trusts and grants, community activity, regular giving, online income, corporate support, in memoriam donations and legacies. This year we have particularly concentrated on increasing regular giving by encouraging donors to become Friends of NRAS or give via Payroll Giving.

In July we held our first NRAS 10K Run at Hughenden Manor in West Wycombe which proved to be very popular and will now become a regular annual event. We were particularly well supported by people taking part in challenge events such as the Yorkshire 3 Peaks Challenge in which 18 people climbed the 3 highest peaks in Yorkshire in 12 hours and the Great North Run which saw 24 runners take to the streets of Newcastle to raise funds for NRAS. Other events included the Hadrian’s Wall Trek, the Royal Parks Half Marathon, abseiling, bungee jumping and the Lands End to John O’Groats bike ride. Event income for the year was £59,458.

“NRAS has been a huge help to me since I got involved. If a personal challenge for myself can go on and help others with RA then it makes all the effort worthwhile.”

Joanne Connors, a Member and Volunteer, who did 2 abseils in a month to raise funds for NRAS

NRAS was chosen as Charity of the Year by 6 different organisations – Toft Golf Club, Brenchley Choral Society, The National Association of Couriers, Chafes Solicitors, Grove Park Music Festival and Minehead Golf Club – raising a total of £10,167. The Mayor of Tunbridge Wells, who took office in May, has chosen NRAS as his Mayoral Charity of the Year and to date has raised £13,357. This support will continue to May 2011 when his year as Mayor ends.

We have received support from companies including Abbott Laboratories, Albany Software Ltd, Goff & Crawford Ltd, Mars Chocolate UK Ltd, MSD, NAPP, Pfizer, Roche, Royal & Sun Alliance Insurance plc, Sanofi Aventis, Sovereign Housing Group Ltd and UCB.

Supporters around the country have helped us during the year by taking part in a huge variety of activities from asking for donations in lieu of gifts for birthdays and anniversaries, taking part in local runs, swimming challenges, holding Christmas concerts, running stalls at local fêtes, opening their gardens to the public and selling hand-made craft items and cards. Support from local communities not only raises funds but also awareness of both the disease and the work NRAS does so a big thank you to all those people who helped in this way and raised £14,662 towards our work.

Online fundraising was a new income stream for this year and has been very successful, raising £8,536 from being the featured charity at the eBay checkout twice during the year and from donations through Recycle4Charity for mobile phones and printer cartridges, GiveACar for donations of scrap cars, The Giving Machine used for purchasing goods online and EveryClick being used as a search engine online. The NRAS Facebook page now has 2,072 fans and continues to grow in popularity. Members and supporters use the page to communicate and it has proved to be a very effective way for us to keep our supporters up to date with what is happening within the charity.

The Yorkshire 3 Peaks Team who raised £11,588 in September by completing the challenge in under 12 hours
The following trusts have kindly supported us in 2010.

- CHK Charities Ltd
- The City Bridge Trust
- The Dunhill Medical Trust
- The Kirby Laing Foundation
- Lloyds TSB Foundation for England & Wales
- The MacRobert Trust
- The Rank Foundation
- The Henry Smith Charity
- Keith & Joan Mindelsohn Charitable Trust
- The Englefield Charitable Trust
- The Daisie Rich Trust
- The John Jarrold Trust
- Baron Davenport’s Charity
- Carr Ellison Family Fund
- B G S Cayzer Charitable Trust
- The Godinton Charitable Trust
- E C Graham (Belford) Charitable Trust
- Lillie Johnson Charitable Trust
- Selwood Charitable Trust
- The Rothley Trust
- James Beattie Charitable Trust
- The 1989 Willan Charitable Trust
- William Webster Charitable Trust
- The Joicey Trust
- The Hadrian Trust
- The Tyneside Charitable Trust
- The Lady Hind Trust

In Memoriam donations continued to rise, reaching £39,954, and we have continued to develop Tribute Funds as a way of In Memoriam donors being able to make regular contributions in memory of a loved one. Legacy income totalled £40,060 and at the end of the year we were informed we had been left the gift of a property in a Will.

The Step Change Appeal, now in its final year, raised £300,000 this year, bringing the total to date to £1,009,683. 54 trusts donated during 2010 with 11 making a commitment to more than one year of funding. The transfer of this external appeal to NRAS will take place during 2011 enabling us to continue to build on the strong roots which the appeal has laid down for future growth.

We have started to concentrate on ways in which to recruit regular givers and enrolled with a Payroll Giving agency in the last quarter of the year and have continued to promote Friends of NRAS to build our base of regular donors. There has been a 30% growth in the number of Friends this year, which now total 67. These sources of income are important to provide strong foundations for the charity to build on and are a more reliable funding stream, enabling us to forecast and plan more accurately for the coming year.

NRAS branded Christmas cards were successfully sold again in 2010. There was a 15% increase in the number of people ordering cards and an 18% increase in the number of packs sold. We also increased the choice of designs from 5 to 6 and hope to expand the range of goods offered in 2011. The majority of cards were purchased by Members of NRAS, demonstrating good support from our user base, but we need to expand this in the coming year to secure sales from wider sources.

“We’re delighted with how well this year went and not only have we raised a great amount of money but so many more people now know what rheumatoid arthritis is, which is so important.”

David Jukes, Mayor of Tunbridge Wells, who has chosen NRAS as his charity for the Mayoral year

Albany Software chose to support NRAS in 2010.
An employee who has RA asked for us to be considered
Financial review
We have changed the year end date from 31st March to 31st December and these are the figures, for the newly constituted NRAS, for the 9 months 1st April 2010 to 31st December 2010.

The income reached £573,725. The subscription income has been reduced by £24,129 which is the amount received, in advance, for 2011 and Life Memberships. Life Memberships are spread over 20 years from date of receipt.

The income does include a Legacy of £40,061. The Trusts & Foundations income has been reduced by £6,325.00 as the income from Rank is wholly for 2011.

The investments have increased in Capital value by £5,133.00 equating to 4.5% and we have received interest of £4,341.00, a return of 3.72%.

Summarised statements
These summarised statements are not the full statutory financial statements but a summary of information relating to both the statement of financial activities and the balance sheet of the charity and may not contain sufficient information to allow for a full understanding of the financial affairs of the charity. For further information please refer to the full statutory financial statements, the Trustees’ Report and the Auditor’s Report. Copies can be obtained from Peter Rogers, Financial Controller, National Rheumatoid Arthritis Society, Unit B4 Westacott Business Centre, Westacott Way, Littlewick Green, Maidenhead, Berkshire SL6 3RT.

The full annual financial statements, from which these summary financial statements are derived and on which the auditors gave an unqualified opinion, were approved on 21 June 2011 and have been submitted to the Charity Commission.

On behalf of the Board of Trustees

Mr Graeme Johnston (Chair)

Auditor’s Statement to the Trustees of the National Rheumatoid Arthritis Society
We have examined the summarised financial statements set out on the following pages.

Respective responsibilities of Trustees and Auditors
You are responsible as Trustees, for the preparation of the summarised financial statements. We have agreed to report to you our opinion on the summarised financial statement’s consistency with the full financial statements, on which we reported to you on 21 June 2011.

Basis of opinion
We have carried out the procedures necessary to ascertain whether the summarised financial statements are consistent with the full financial statements from which they have been prepared.

Opinion
In our opinion the summarised financial statements are consistent with the full financial statements for the year ended 31 December 2010.

Chartered Accountants & Registered Auditors
2 Lake End Court, Taplow Road, Taplow, Maidenhead, Berkshire, SL6 OJQ

21 June 2011

Total Income - £573,725
- Subscriptions £34,004
- Legacies £40,061
- In Memoriam £39,954
- Donations & Grants £82,713
- Events £59,458
- Corporate (Pharmaceutical companies 14% of total income) £82,531
- Trusts & foundations £230,375 (Step Change Appeal 32% of total income)
- Investment £4,629

Total Expenditure - £549,763
- Volunteer Network £109,953
- Membership £98,957
- Campaigning £87,962
- Governance £43,981
- Fundraising £115,450
- Helpline & Publications £93,460

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Summarised Statement of Financial Activities
For the year ending 31 December 2010

Unrestricted  Restricted  Total Funds

£     £      £

Incoming Resources
Incoming resources from generated funds
Voluntary income 555,596 13,500 569,096
Activities for generating funds
Investment income 4,829 - 4,829
Total incoming resources 566,225 13,500 573,725

Resources expended
Costs of generating voluntary income 115,450 - 115,450
Charitable activities 376,832 13,500 390,332
Governance costs 43,981 - 43,981
Total resources expended 536,263 13,500 549,763

Net movement in funds 23,961 - 23,961

Reconciliation of funds
Total funds introduced 343,981 - 343,981
Transfer between funds
Gains on investment assets
Total funds carried forward 367,942 - 367,942

Summarised Balance Sheet
31 December 2010

Unrestricted  Restricted  Total Funds

£     £      £

Fixed assets
Tangible assets 72,957
Investments 121,592 194,549

Current Assets
Debtors 18,022
Cash at bank and in hand 220,412 238,434

Liabilities
Creditors falling due within one year 59,908 59,908

Net Current assets 178,526

Net assets 373,075

The funds of the charity
Restricted funds
Unrestricted income funds
Revaluation Reserve 5,133
General fund 367,942 373,075

A Gift in Your Will Supports our Future NRAS Annual Review 2010
## NRAS Advisors

### Medical Advisors

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<thead>
<tr>
<th>Region</th>
<th>Advisors</th>
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<tbody>
<tr>
<td>Wales</td>
<td>Professor David G I Scott MD FRCP</td>
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<td></td>
<td>Professor Peter Maddison MD FRCP &amp; Dr Stefan Siebert MBBCh MRCP PhD</td>
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<td></td>
<td>Dr David Marshall &amp; Dr Asad Zoma</td>
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<tr>
<td>Scotland</td>
<td>Professor Iain B McInnes MD PhD</td>
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<td></td>
<td>Dr Andrew Barnji MB BS(Hons) FRCP</td>
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<td></td>
<td>Dr Deborah Bax MBChB MD FRC</td>
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<td></td>
<td>Dr Robin Butler MD FRCP</td>
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<td></td>
<td>Professor Kuntal Chakravarty FRCP (USA) DGM (London)</td>
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<td></td>
<td>Dr Christopher Deighton MBBS BMedSci MD FRCP</td>
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<tr>
<td></td>
<td>Dr John Halsey MB BS FRCP</td>
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<td></td>
<td>Dr Charles Hutton FRCP MBChB</td>
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<td></td>
<td>Dr Christopher Kelsey MSc MB FRCP</td>
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<td>Dr Patrick D W Kiely MBBS BSc PhD FRCP</td>
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<td></td>
<td>Dr Gulam Patel MA FRCP; Dr Philip Platt MD FRCP</td>
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<td></td>
<td>Dr Richard Reece MB BCH MRCP FRCP</td>
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<td></td>
<td>Professor Peter C Taylor MA PhD FRCP</td>
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<td></td>
<td>Dr Richard Watts MA DM FRCP</td>
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<tr>
<td>Northern Ireland</td>
<td>Dr Andrew Cairns MD MSc MFSEM(UK) FRCP FRCPI</td>
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<tr>
<td>England</td>
<td>Dr David Marshall &amp; Dr Asad Zoma</td>
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<td>Dr Richard Watts MA DM FRCP</td>
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### Paediatric Medical Advisors

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<tr>
<td>Wales</td>
<td>Professor Tauny Southwood BM BS FRCPCH</td>
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<tr>
<td></td>
<td>Dr Gavin Cleary MBChB BSc MSc MRCP(UK) MRCPCH</td>
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<tr>
<td></td>
<td>Dr Clarissa Pilkington MBBS BSc MRCP</td>
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<tr>
<td></td>
<td>Dr Helen Venning BmedSci BM BS MRCP FRCP(LON) FRCPCH</td>
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<td></td>
<td>Dr Janet McDonagh MD MRCP</td>
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<td></td>
<td>Dr Janet Gardner-Medwin MRCP PhD</td>
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<td></td>
<td>Dr Susan Wyatt BSc DCH MRCP FRCPCH</td>
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<tr>
<td></td>
<td>Dr Athimalaipet Ramanan MBBS MRCP</td>
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<tr>
<td>Scotland</td>
<td>Avril Stewart RGN RSCN &amp; Liz Mclvor RGN RSCN MSc</td>
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<tr>
<td>N Ireland</td>
<td>Elaine Wylie RGN BSc(Hons) PGDip</td>
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### NRAS Nurse Advisors

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<tr>
<td>England</td>
<td>Diane Home RGN MSc</td>
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<tr>
<td>Wales</td>
<td>Suzanne MorriSS RGN MSc</td>
</tr>
<tr>
<td>Scotland</td>
<td>Avril Stewart RGN RSCN &amp; Liz Mclvor RGN RSCN MSc</td>
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<tr>
<td>N Ireland</td>
<td>Elaine Wylie RGN BSc(Hons) PGDip</td>
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### NRAS Allied Healthcare Advisors

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<th>Specialty</th>
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<tbody>
<tr>
<td>Occupational Therapy</td>
<td>Dr Alison Hammond PhD MSc BSc(Hons) DipCOT</td>
</tr>
<tr>
<td>Physiotherapy</td>
<td>Cathy Cameron MCSP</td>
</tr>
<tr>
<td>Podiatry</td>
<td>Robert Field BA(Hons) PGDip BSc(Hons)</td>
</tr>
<tr>
<td>Dietary</td>
<td>Dorothy J Pattison PhD RD</td>
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**Gloria Lawson, Director of NRAS,**

*has had rheumatoid arthritis for more than 20 years*
When I was asked to become a trustee of NRAS in the middle of 2009 I was impressed by what I found in an organisation that up until then I only knew as a Member. I have found out so much more since becoming Chairman and I am very proud of what NRAS has become and the good it does in supporting, educating and campaigning on behalf of us, the Members, and the wider RA patient community. It is also highly regarded by health professionals for the sterling work it does.

NRAS became incorporated with effect from 1 April 2010. Members were informed prior to 31 March and re-assured that there would be no change to the services and benefits they enjoyed. At the same time we chose to bring our financial year in line with the calendar year, hence this review is for the first financial ‘year’ of the new charity, covering the nine months from 1 April to 31 December 2010.

On behalf of the Board of Directors I would like to thank the NRAS team, our Health Professional Advisors, Members, Volunteers and Supporters for another year of committed effort which has allowed NRAS to continue to grow as the leading rheumatoid arthritis organisation in the field of patient support, in spite of the economic climate and changing NHS.

“I would encourage you to make use of the outstanding patient support material and networks provided by NRAS. No one understands the subjective burden of rheumatoid better than those who have lived with this condition and experienced both the problems, the benefits of management regimes that really make a difference and the type of support and encouragement that offers best opportunity for optimum outcomes. NRAS excel in all these areas and can ably help you.”

Professor Peter Taylor (Consultant Rheumatologist)