Working for a better life for people living with rheumatoid arthritis
The National Rheumatoid Arthritis Society

Rheumatoid arthritis (RA) can destroy lives and cannot yet be cured. We are the only UK patient-led charity exclusively supporting the approximately 690,000 people in the UK with rheumatoid arthritis, their families and carers.

We are proud of our reputation which is based on providing a comprehensive range of services to those we represent with professionalism and expertise, through collaborative working, careful financial planning and sustainable growth.

Our Mission

We help and support people living with rheumatoid arthritis through:

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

Through better understanding we encourage people to actively take control of their disease, instead of it controlling them, and help them regain a quality of life that many lose.

Our Vision

Working for a better life for people living with rheumatoid arthritis
What is Rheumatoid Arthritis?

RA is a painful and disabling autoimmune disease that can affect people of any age. Three quarters of people are first diagnosed when of working age. It affects the joints, causing inflammation and stiffness and extreme fatigue. It is a systemic disease so can also affect the internal organs, in particular, the heart, lungs and eyes. Approximately 12,000 children in the UK under the age of 16 have Juvenile Idiopathic Arthritis (JIA).

RA is usually confused with osteoarthritis, a quite different condition which is due to wear and tear of joints and more commonly occurs in the older population. This is a source of constant frustration to people with RA.

Approximately 1 in every 100 people in the UK has this devastating disease. RA is more common than more recognised diseases such as leukaemia or multiple sclerosis and part of our mission is to raise awareness and understanding.

I’m a 15 year old girl whose Mum was diagnosed with RA a couple of years ago. I was really just emailing you to say thank you so much for everything you’ve done for her – she was finding it really difficult at the start, and I hated seeing her so down. She’s much better now though, and is way more independent. It’s made a huge change to her life and mine, and I’m honestly really grateful. I’m just really happy that you have managed to do so much for her, so, thanks.
Message from the Chairman of the Board
by Graeme Johnston, Chairman of the Board of Directors

2011 was an astonishing year of achievement. In our tenth anniversary year, we made huge strides in fundraising with the Step Change appeal contributing invaluably once more but joined by some very generous legacies and a marvellous effort from the events team who helped our Members to raise over £100,000 in the year. The financial stability that this brought us is vital in these times of austerity.

For NRAS there is always so much to do and so much more we would like to be able to do. This report explains what we have been up to – but though the challenge to fund our activities in a sustainable way is never ending, we can truly look back on 2011 as a very positive year financially.

On behalf of all of the trustees I would like to record my heartfelt admiration for Ailsa and the wonderful team she has built. We see it as our principal role to help guide her and her team to ensure that the great strides they have made in the last ten years are continued for the benefit of the hundreds of thousands of people we are able to help through our publications, our network of Volunteers, our helpline, our website and all the information it gives, and our advocacy and our tireless campaigning.

“I think that the work done by NRAS and the drive of the Members is truly remarkable and I am greatly honoured to be able to work with such a fine organisation that is doing untold good for those with rheumatoid arthritis.”

Peter C Taylor MA, PhD, FRCP
Norman Collisson Professor of Musculoskeletal Sciences Kennedy Institute of Rheumatology, Nuffield Department of Orthopaedics, Rheumatology and Musculoskeletal Sciences, University of Oxford

1 in 100
The number of people with RA in the UK
Chief Executive’s Report
by Ailsa Bosworth

2011 was our tenth anniversary and I am incredibly proud of what NRAS and the team here have achieved since the charity was launched in October 2001. In ten short years, we have gained an enviable international reputation as an organisation which has made a real and positive difference to people’s lives and to rheumatology.

In spite of an increasingly challenging economic environment, I am delighted to report that we enjoyed our best year ever which was particularly gratifying, as 2011 was our tenth anniversary year. A personal highlight for me was our Members’ Tenth Anniversary lunch which was held in Warwickshire immediately following our Coordinators’ Conference. Many of our Members, Volunteers, Supporters, Friends and partners were there as well as the whole NRAS team and Board of Trustee Directors and it was a very emotional and joyful occasion.

Another highlight was our Biennial Healthcare Champions Awards held in November in the Speaker’s State Rooms in the Palace of Westminster and supported by the Rt Hon Theresa May, Home Secretary, and The Speaker, Mr John Bercow. We had great support at the event from parliamentarians - approximately 30 MPs and Peers came to the event to congratulate our 10 Healthcare Champion Winners from all over the UK who very much enjoyed receiving their awards in this particularly prestigious and splendid venue. The winners were voted for by their patients and it is for this reason that our Healthcare Champion winners so value these awards.

Last year I reported that 2010 had seen unprecedented change being proposed to the health service and the benefits system. At the beginning of 2011 the Health and Social Care Bill was introduced taking forward ‘Equity and Excellence: Liberating the NHS’. Many proposals outlined in the Bill are already being implemented in spite of the fact that at the end of December it had not been passed by Parliament.

NRAS has played a major role in contributing to the round of government consultations and listening exercises over the proposed legislative changes, both unilaterally and collaboratively, with partners such as the British Society for Rheumatology, the Arthritis & Musculoskeletal Alliance and the Primary Care Rheumatology Society.

Whilst the final outcome of the Bill is still in debate, we will continue to campaign to represent the best interests of people living with RA as we get to grips with the change in commissioning structures. We support the Government’s initiative to focus more on clinical outcomes and the concept of devising and monitoring adherence to Quality Standards. The concept of empowering service users through more shared decision-making and patient feedback within the system is a positive step forward. However, we do have concerns about a number of issues in regard to the changing NHS landscape in England and we will work hard with the musculoskeletal (MSK) community to ensure that rheumatoid arthritis and MSK are adequately prioritised in the Long Term Conditions agenda.

We enter 2012 with a financially challenging year ahead, however, I am confident that we are now in a strong position to deal with any unforeseen hurdles and we will work steadfastly to improve the lives of those living with RA.
Our Members
making you feel part of the society

Our Members say that being part of NRAS gives them a sense of belonging, making them feel part of a group and not alone in facing the daily challenges of living with rheumatoid arthritis. The information and support available can help them better manage their disease and improve their quality of life.

Members have access to the Members’ online forum providing a safe place to talk about the daily difficulties of living with RA and for many, it provides a lifeline at times of stress and anxiety, reducing the feelings of isolation with the disease. The opportunity to take part in surveys, research and focus groups is another Member benefit, and one which feedback has shown is highly valued.

Membership continues to grow year on year ensuring our voice becomes louder and awareness of this often misunderstood disease is more widely raised.

The NRAS magazine is published three times a year, keeping Members informed of developments in treatment, NRAS activities and Members’ personal stories. In 2011 we changed the format of the magazine, following feedback from Members, to increase its readability and include more real life stories. Monthly e-newsletters keep Members up to date with current news, activity and events. Non-members can sign up for a short e-news update giving them more information about the charity and highlighting to them the benefits of joining the society and becoming a full Member.

A new Member benefit, the NRAS Members’ Care Plan, was introduced in March 2011 and facilitates increased involvement in decisions about the care people with RA receive. This booklet enables people with RA to record details of their own personal treatment plans and encourages positive self management.

As part of our tenth birthday celebrations during the year, and to celebrate the wonderful things our Members do to support NRAS, we nominated a ‘Member of the Month’ each month. The nomination was awarded to someone who had made special efforts on behalf of NRAS during 2011. Each month’s winner received a certificate and letter of thanks from all at NRAS. Member of the Month photographs were published on the NRAS’ Facebook page.

I did not know anything about RA until I was diagnosed. It is lovely to find a support network like NRAS. The help and support I personally have received is fantastic.

KEY ACHIEVEMENTS
in 2011

- Introduction of the Members’ Care Plan to help engage Members in a more pro-active way with their own care and to facilitate shared-decision making
- Increase in healthcare professional members, thereby encouraging collaborative working to the benefit of people with RA
- A new format for our Members’ magazine to improve its readability

OBJECTIVES
for 2012

- To increase the number of Members to ensure we are reaching more people with RA
- To target the rheumatology units we do not currently work with and encourage take up of healthcare professional membership
- To work more closely with Members and encourage them to take an active role in helping us to promote the work of the Society
Members Case Study
an inside story

RA can be a very isolating disease. Many of its symptoms, such as pain and fatigue, are ‘hidden’ from public view and often misunderstood. Being a Member of NRAS has opened up opportunities to communicate with others who live with RA and the problems it brings with it. Being able to share our experiences broadens our perspective and knowledge of living with a chronic condition.

I had often considered starting a local RA support group but it was a daunting prospect; where do you start? When I heard that NRAS were launching a new group the chance to become a group coordinator was grasped with enthusiasm. This is a great way to unite people with similar problems. We have organised events, and meetings with various speakers. From small beginnings our group has grown and we now have a core of regular returning attendees and additional Volunteers.

So, I am no longer on the ‘scrap heap’ of working life! NRAS has provided me with an opportunity to do something which not only keeps me occupied but provides me with a goal; something which increases my self-esteem and also supports others in my local community. These activities help me to focus on a more positive aspect of long term disease and hopefully this spirit reaches out to fellow group members.

Lyn Wilson, NRAS Member and Coordinator of the NRAS Blackpool Group

NRAS has almost 4,000 members
External Affairs & Volunteer Network
a network of Members and Volunteers

Our network of Members and Volunteers is crucially important to our work and without them we could not have achieved what we have done. Our Volunteers are recognised as the incredibly valuable force they are, not just by NRAS but by the wider rheumatology community, representatives of which frequently telephone us to ask for their help and input.

Maintaining the enthusiasm and momentum of volunteer groups can be challenging, yet we have seen very few cease to operate during the year. 2011 saw the launch of eight new groups across the UK, which are becoming well established and will continue to offer much needed support and information in their localities.

The annual NRAS Group Coordinators’ Conference in June took place in Warwickshire this year to coincide with the tenth birthday NRAS luncheon. Attended by 32 Group Coordinators, the day and a half of presentations, interactive discussions and networking led to the Volunteers returning to their groups feeling invigorated and enthused.

116 peer to peer support calls were matched during the year with the top five topics being general support, newly diagnosed, concerns about methotrexate, concerns about biologic therapies and coping with a young family.

In addition to networking with the general public and patients, we have participated in, and presented at, numerous health industry events including IMID (Immune Mediated Inflammatory Diseases) Summit in Stockholm, RCN (Royal College of Nursing) rheumatology conference in Manchester, Patients’ Association workshop, BSR/British Health Professionals in Rheumatology (BHPR) Conference, Brighton, European League Against Rheumatism (EULAR) conference, London, ERAN (Early Rheumatoid Arthritis Network) annual conference and a rheumatology awareness raising meeting for GPs in Somerset.

What a friendly group of people they are! I feel a little better already!
In the early and established stages of RA, educational sessions are vital in understanding and accepting the potential impact of this long-term chronic condition. As healthcare professionals, directing those with RA and their families to additional sources of reliable and credible information is essential and invaluable.

NRAS fulfils these criteria excellently providing detailed booklets, a website, helpline and opportunities to build local support groups. These resources allow patients to continue building their knowledge at a pace they can cope with and prepare them for encounters on their journey with RA.

Working closely with NRAS coordinators and a patient group over the last 18 months has allowed the formation of a group that has thrived in the last year.

Our NRAS group (Mid Somerset) has given those with RA, their family, carers, friends, and healthcare professionals an opportunity to come together side by side in a friendly informative environment to provide a network of support.

As a Rheumatology Specialist Nurse I believe that at local support groups we can all learn from each other how to improve the lives of those with RA.

Teresa Jewell, Rheumatology Specialist Nurse, Taunton & Somerset NHS Trust
NRAS Helpline and Publication Services providing support and information

The NRAS helpline aims to provide those with RA, their family and carers with the support and information necessary to better understand their disease and the treatments used, help them to self manage more effectively and reduce the fear and feelings of isolation associated with this disease. Another important role is helping people to navigate the health and benefits systems which can be very confusing, especially when first diagnosed.

Information is provided both on the NRAS website as well as in printed form and over 40,000 packs of information, tailored to the needs of the individual, were sent out during the course of the year.

Visits to the NRAS area on the HealthUnlocked website grew substantially in 2011 with almost 20,000 visits in November and December. Peer to peer support is playing a major part on this new platform which we know, from feedback, is being warmly welcomed by the many visitors to this area. HealthUnlocked creates health-focused, online communities for patient organisations. With years of experience in the health sector and NHS they are experienced in developing easy-to-use web-technology for patient support. NRAS was one of the early adopters of this platform amongst patient organisations in the UK and we plan to develop this further in 2012 and build on the strong international following with contributions from people from over 90 countries that has become established.

The most common issues we are contacted about continue to be for general support, help with being newly diagnosed, drug treatments, and benefits. This is also the case for publications, where the most requested titles are Newly Diagnosed, Fatigue, Beyond Tiredness and our Employer and Employee Guides.

During 2011 all our publications were loaded on to the website in downloadable format and we are seeing an increasing number of people choosing to download directly rather than have the information posted to them, which is a considerable cost saving to NRAS. We saw a substantial increase in visits to the information and publications area of the website throughout the year, and we anticipate that this trend will continue. Over 340,700 visits were made by 224,900 unique visitors with over 1,650,000 pages viewed.

“I have had need to contact NRAS a few times recently. The people who answered the phone have endless patience, good knowledge and really helped me put things into perspective. Thanks everyone.”

KEY ACHIEVEMENTS in 2011

- Gaining accreditation to the Information Standard kitemark
- Improved website information and functionality for those seeking help
- Increased activity on the HealthUnlocked platform demonstrating we are reaching more people with RA

OBJECTIVES for 2012

- To increase the number of people accessing our peer to peer telephone support service
- To investigate the possibility of SMS text messaging providing increased ways to contact the NRAS Helpline
- To embark on a new publication addressing the emotional impact of RA
- To continue to develop the information available on the website
I am Tanya and I have been a telephone volunteer for many years. It was my consultant who suggested I might like to do it, as he knew I had a positive outlook which he thought could be helpful to others. To be honest I was a little bit nervous at first and didn’t know what to expect.

When I had the first phone call from NRAS asking me to make my first call, I was both excited and apprehensive. I had completed the training day and now it was time to put all I had learned into action. I don’t know why I worried, the lady I spoke to was lovely and thanked me so much for my help, which made me feel wonderful.

During my time as a Volunteer I have spoken to many different people, each wanting different things. Some have lots of questions or want help with coping strategies, others just want to talk to someone they know fully understands the situation they are in. The people I have telephoned have always been so lovely and appreciate my time, it’s great to know I am able to help someone just a little bit, and that I am giving a little back!

I think the reason it’s so rewarding is that the people I speak to are in a similar situation to me. NRAS does a fantastic job at matching people up to ensure everyone feels comfortable. If I am unable to make a call for any reason, there is no pressure at all, I can just say no, and no one minds.

If anyone reading this is thinking they would like to be a Volunteer, I would say go for it, you will not regret it, and I can almost guarantee you will wish you had done it ages ago.

Tanya Andrews, NRAS Telephone Volunteer

I think the reason it’s so rewarding is that the people I speak to are in a similar situation to me.

The number of contacts made to the NRAS helpline in 2011: 2,874
The Things you Do

Without your support we would not be able to carry on supporting people with rheumatoid arthritis.
Without your support we would not be able to carry on supporting people with rheumatoid arthritis.

1. NRAS Team – Great North Run
2. Ailsa Bosworth – Welsh Event
3. NHS Forum Listening Event
4. Ailsa & Anne Begg
5. The NRAS Skydive
6. Sara Chamberlain Cycling
7. NRAS 10k Run
8. NRAS Weston-super-Mare Group’s RAise It Day
9. Marie Fincher Walk
10. Taunton Group
11. Bolton Group
12. NRAS Noticeboard
13. Run to the Beat
14. Coordinators
Fundraising
raising funds for our vital work

The support from our Members, Volunteers and Supporters in this special anniversary year has been incredible. People have run, walked, swum, cycled and skydived to raise funds for us. Our Tea for 10 fundraising initiative was a great success, raising over £4,000, with individuals and NRAS groups organising a huge variety of tea parties.

For the first time our income exceeded £1m. This was due to increased activity supporting our tenth year and an increased income from legacies - an income stream we hope to continue to develop in 2012. We have also received support from corporate and Charity of the Year nominations, often instigated through nominations by staff as their charity of choice.

Our 4-year Step Change appeal ended on 31 December and we are confident that it will achieve its target of £1.4m by first quarter of 2012 when outstanding bids are realised. The appeal has enabled us to make the ‘step change’ in development targeted at the start of the Appeal in August 2007, and has positioned us to be able to take the charity forward from a sound base in the coming years. We continue to be well supported by trusts and foundations and this income stream forms a major part of our fundraising income.

Regular giving, in the form of payroll giving, Friends of NRAS and Tribute funds has increased steadily and is an important source of income, enabling us to plan for the future. With no government funding we are reliant on our Supporters to enable us to continue to be here for all those who live with rheumatoid arthritis.

Our event income reached £118,175
Tea for 10 raised £4,326 and engaged many of our Members in fundraising
NRAS Groups raised £3,333 from various activities to celebrate our tenth year and raise awareness of RA and the support we can offer
We received £336,751 in legacy income, the highest in our history to date

Thank you for your reply, and information. You have been a great help to me, and I can’t thank you enough, the websites will be of great use to me, it’s made me see a light at the end of my tunnel, and that there is help out there for people like me.

KEY ACHIEVEMENTS
in 2011

- Our event income reached £118,175
- Tea for 10 raised £4,326 and engaged many of our Members in fundraising
- NRAS Groups raised £3,333 from various activities to celebrate our tenth year and raise awareness of RA and the support we can offer
- We received £336,751 in legacy income, the highest in our history to date

OBJECTIVES
for 2012

- To raise £850,000, in a difficult climate, to ensure we can continue to provide our services to an ever wider audience
- To expand our regular giving to attract more long term donors to engage with our work and help us plan for the future
- To raise £40,000 to enable evaluation work to begin on the planning of a support service for children and young people with Juvenile Idiopathic Arthritis (JIA)
- To expand our events programme to include the Great Swim series of challenges
I’ve been raising money for NRAS because my wife, whom I have been with for nearly 8 years, has been suffering with RA since the age of 17, and has now lived more than half her life with it. It’s a horrible illness and although a lot of people think of arthritis as an old age illness, RA most certainly isn’t.

NRAS is a charity that has always been there when my wife and I have needed help. They have set up groups around the country and are continuing to spread the word, supporting all those who suffer from this horrible illness, giving information to friends and family. They have people with RA working with them and are a great source of support.

The money I have raised over the last three years has come from running in various half marathons. To some this is simple, to me it is agony! At 17 stone it’s a lot of weight to carry round, and the pain I feel in the days after it are the closest I hope I ever feel to what my wife and all the other RA sufferers feel every day. My fundraising in 2012 will be even more important as, after a long time of trying, we have finally discovered we are expecting our first child, and the support NRAS has given us during this time has been invaluable.

Darren Smith, NRAS Fundraiser
Campaigning
raising the priority of RA with politicians and policy makers

In 2011 we produced new research to augment the evidence base around the need to improve the care of people with RA, we joined new coalitions and undertook collaborative work to advance and maximise our influence across more policy areas, we sought out new ways to involve our members directly in advocacy, and we responded to major legislation passing through the UK Parliament.

Working in partnership with National Voices, the Arthritis and Musculoskeletal Alliance (ARMA), Patients in the National Institute for Health and Clinical Excellence (NICE), and independently, NRAS raised awareness of the impact of the health reforms on people with RA. We also responded to consultations including NICE’s approach to consulting the public and the case for an RA Quality Standard.

We have been active in helping to shape the Welfare Reform Bill taking part in face-to-face discussions with Department of Work and Pensions officials involved in developing the new Personal Independence Payment, contributed to Disability Benefits Consortium briefings and made a joint submission to the Work and Pensions Select Committee about the future of the Disability Living Allowance and took part in two sessions of a separate Work Foundation inquiry into work in the UK and Scottish Parliament. NRAS also took part in the inaugural meeting of a new Cross Party Group on Arthritis and Musculoskeletal Conditions launched by Helen Eadie MSP and Jim Eadie MSP in the Scottish Parliament and put in place funding to launch a new NRAS Scottish Campaigns Network, which is due to launch in 2012.

In November our biennial Healthcare Champions awards ceremony was held in the Speaker’s Apartments at the House of Commons. Over 120 people attended, including 30 politicians. Our founder patron, The Home Secretary, Rt Hon Theresa May MP presented the awards and The Speaker, Rt Hon John Bercow MP welcomed guests to the event.

Building on the Key Standards of Care work undertaken in 2010 with the East of England Strategic Health Authority, we have worked closely with a group of clinicians and the London Strategic Health Authority throughout the year to replicate this pilot exercise across London. The work was completed in the Autumn and the British Society for Rheumatology will now help to promote these standards more widely as with minor adaptation to meet the needs of local populations they can be used widely across the UK.

Published new research on adherence to clinical guidelines for the use of physiotherapy in the treatment of RA and attracted national media coverage
Conducted our first live ministerial webchat with the Health Minister, Paul Burstow MP, at the Department of Health
Staged our Biennial Healthcare Champion awards ceremony in the State Apartments at the Houses of Parliament
Joined new coalitions to augment our influence over health and social care policy in England

KEY ACHIEVEMENTS in 2011

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- Conducted our first live ministerial webchat with the Health Minister, Paul Burstow MP, at the Department of Health
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OBJECTIVES for 2012

- Develop our members campaigning voice by launching our first Campaigns Network in Scotland, producing new e-campaigning tools and an expert patient commissioning pack
- Conduct new research on the impact of cuts to RA services resulting from the Nicholson Challenge in England in comparison to Scotland, Wales and Northern Ireland
- Launch a new RA Charter for patients, commissioners and providers, and encourage good quality services for people with RA across the UK
On World Arthritis Day on 12 October 2011 we launched a new report, RA and Physiotherapy, with the Chartered Society for Physiotherapy, which explored adherence to clinical guidelines.

The report uncovered shocking new data about the poor referral rates for physiotherapy encountered by RA patients within the UK. This report spurred a number of politicians to table parliamentary questions on the subject and an early day motion was tabled which attracted around 50 signatures.

To coincide with the launch of this report we held our first ever live Ministerial webchat with the Minister for Long Term Conditions, Paul Burstow MP. Signalling our intention to give Members more opportunities to get involved in direct campaigning, we worked with the Department of Health to stage the event and received around 40 questions from participants during the session, which helped us gather new information about the direction of the Government’s long term conditions policy.

“I don’t pretend to be an expert on every condition, though I do understand the devastating impact which rheumatoid arthritis can have on people if it is not identified promptly or managed effectively.”

Paul Burstow MP, Minister for Long Term Conditions

NRAS met with 47 politicians from across the UK in 2011
NRAS Groups
thoughout the uk

Many people find meeting others living with RA from their own localities to be of great benefit. NRAS groups are a great source of ongoing information and education. How else will you know about local services available to you? Wouldn’t it be nice to meet some of your rheumatology health professionals in a non-clinical setting? How would it feel to be able to influence future rheumatology service provision by being part of a strong patient voice in your area?
NRAS groups aim to encourage better disease self management via informative guest speakers as well as offering opportunities to widen your social circle and activities.

There are 38 NRAS Groups in total with 1,818 registered attendees

Key: The figures in the individual circles show the number of NRAS Groups by region

If you are unable to find something near you or if you are interested in becoming an NRAS Volunteer Group Co-ordinator and would like information about setting up a group in your area then please call Clare, Sue or Maimie on 0845 458 3969 or email the Volunteer Network at volunteers@nras.org.uk.
Trusts
the following trusts have kindly supported us throughout 2011

- The BAND Trust
- The Louis Baylis Charitable Trust
- The Colonel T R Broughton’s Charitable Trust
- The C M F Charitable Trust
- B G S Cayzer Charitable Trust
- The City Bridge Trust (Restricted Funding towards our work in London)
- The Sir Jeremiah Colman Gift Trust
- The D’Oyly Carte Charitable Trust
- The Dickinson Dees Charitable Trust
- The W E Dunn Charitable Trust
- The E C Graham (Belford) Charitable Trust
- The E C Graham (Cumbrian) Charitable Trust
- The Freemasons’ Grand Charity
- The Lady Hind Trust
- The Hospital Saturday Fund
- The Iliffe Family Charitable Trust
- The Inchrye Trust
- The Sir James Knott Trust
- The Mrs F B Laurence Charitable Trust
- The Lennox & Wyfold Foundation
- Lloyds TSB Foundation for England and Wales
- The Madeline Mabey Trust
- The MacRobert Trust
- Mrs Maud Van Norden’s Charitable Foundation
- The Norman Family Charitable Trust
- The Gerald Palmer Eling Trust Company
- The Sir John Priestman Charity Trust
- The Rank Foundation
- The Rayne Foundation
- The Daisie Rich Trust
- The Ridley Family Fund
- The Rothley Trust
- The Rothschild Foundation
- The Schroder Foundation
- The Shrewsbury Trust
- The Henry Smith Charity
- The Sir Jules Thorn Charitable Trust
- The James Weir Foundation
- The Michael and Anna Wix Charitable Trust
- The Woodcote Trust

Corporate Support
the following companies have supported our work in 2011

- Norseland Ltd
- BP Foundation
- Steria Recruitment
- Mars Chocolate UK
- John Lewis plc
- Waitrose plc
- The Cooperative Stores
- Abbott Pharmaceuticals
- Roche Products Ltd
- UCB Pharmaceuticals
- Pfizer
- Merck Sharpe and Dohme

For every £1 we raise, 17p will go towards raising the next £1.
NRAS Finances
review of the year

As was the case in 2010, 2011 was a year in which costs were largely kept in line with budget but unlike the previous year revenue performance proved better than forecast due to generous and unexpected legacies. Throughout the year, a tight grip was kept on expenditure, avoiding automatically replacing resources where “natural wastage” occurred and only spending where it was deemed essential in order to maintain service levels. All income is regarded as unrestricted unless stated otherwise.

Basis of Accounting
The accounting policies remain unchanged.

Principal Funding Sources
The total income for the year was £1,013,975. Legacy income was just over £336,000 and Events £123,983. Corporate funding contributed £103,038. The Appeal contributed £242,450 but this ceased on 31st December leaving only pledges of £222,950 to come in during 2012 & 2013. This position reinforces the already identified need for the charity, because of the loss of the appeal, to continue to be more proactive and effective in its fundraising activities in order to reduce any reliance on unpredictable legacies. It is the intention of the Trustees to achieve an annual surplus without undue reliance on legacy income.

Resources Expended
Total resources expended on charitable activities were comparable to 2010 showing the charity is trying to cut its costs.

Investment policy
Investments are with professional fund managers as permitted by the relevant acts and the Charity Commission guidelines. Reports are received on a quarterly basis.

The overriding aim is to maintain the real value of Capital through long term investment.

Over the course of 2011 the portfolio was managed by M&G, COIF and J P Morgan.

The portfolio produced a total return of 5.7% with a capital reduction of 6.1%.

Reserves Policy
In respect of reserves held at 30 December 2011 we plan to invest monies recognising the need to meet the trustee’s requirement of keeping about 6 months running costs in reserve. The major part of the reserve came in during the latter part of the year.

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<th>TOTAL INCOME</th>
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- Donations £138,605
- Events £123,983
- Corporates £103,038
- Legacies £336,752
- Subscriptions £41,970
- Trusts £29,609
- NRAS Appeal £217,450
- Merchandising £3,824
- Investment Income £5,870
- Cost of generating voluntary income £245,094
- Staff costs £224,447
- Campaigning £13,950
- Patience in focus £1,420
- Conferences £4,026
- Support costs £266,960
- Registration fees and subscriptions £2,885
- Governance costs £39,502

5% 33% 28% 0.6% 0.3% 0.5% 0.6% 3.0% 0.6% 0.5% 0.3% 0.5%

21.6% 13.8% 12.4% 4.2% 10.3% 33.6%
# Summarised Statement of Financial Activities

for the year ending 31 December 2011

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<th>Unrestricted</th>
<th>Restricted</th>
<th>Total Funds year end 31.12.11</th>
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<td><strong>Incoming resources</strong> - From generated funds</td>
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<tr>
<td>Voluntary income</td>
<td>973,452</td>
<td>18,000</td>
<td>991,452</td>
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<tr>
<td>Activities for generating funds</td>
<td>3,824</td>
<td>-</td>
<td>3,824</td>
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<tr>
<td>Investment income</td>
<td>5,870</td>
<td>-</td>
<td>5,870</td>
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<tr>
<td><strong>Total incoming resources</strong></td>
<td>983,146</td>
<td>18,000</td>
<td>1,001,146</td>
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<tr>
<td><strong>Resources expended</strong> - Costs of generating funds</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Costs of generating voluntary income</td>
<td>245,094</td>
<td>-</td>
<td>245,094</td>
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<tr>
<td><strong>Charitable activities</strong></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Staff costs</td>
<td>214,663</td>
<td>9,784</td>
<td>224,447</td>
</tr>
<tr>
<td>Campaigning</td>
<td>13,950</td>
<td>-</td>
<td>13,950</td>
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<tr>
<td>Patients in focus</td>
<td>1,420</td>
<td>-</td>
<td>1,420</td>
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<tr>
<td>Conferences</td>
<td>4,026</td>
<td>-</td>
<td>4,026</td>
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<tr>
<td><strong>Support costs</strong></td>
<td>258,744</td>
<td>8,216</td>
<td>266,960</td>
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<tr>
<td>Registration fees and subscriptions</td>
<td>2,885</td>
<td>-</td>
<td>2,885</td>
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<tr>
<td>Governance costs</td>
<td>39,502</td>
<td>-</td>
<td>39,502</td>
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<tr>
<td><strong>Total resources expended</strong></td>
<td>780,503</td>
<td>18,000</td>
<td>798,284</td>
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<tr>
<td><strong>Net incoming resources</strong></td>
<td>202,862</td>
<td>-</td>
<td>202,862</td>
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<tr>
<td><strong>Other recognised gains/losses</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gains/losses on investment assets</td>
<td>(7,114)</td>
<td>-</td>
<td>(7,114)</td>
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<tr>
<td><strong>Net movement in funds</strong></td>
<td>195,748</td>
<td>-</td>
<td>195,748</td>
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<tr>
<td><strong>Reconciliation of funds</strong></td>
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<tr>
<td>Total funds brought forward</td>
<td>373,075</td>
<td>-</td>
<td>373,075</td>
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<tr>
<td><strong>Total funds carried forward</strong></td>
<td>568,823</td>
<td>-</td>
<td>568,823</td>
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</tbody>
</table>

---

# Summarised Balance Sheet

31 December 2011

<table>
<thead>
<tr>
<th>Unrestricted Funds £</th>
<th>Restricted Funds £</th>
<th>13.12.11 Total Funds £</th>
<th>13.12.10 Total Funds £</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fixed assets</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Tangible assets</td>
<td>80,179</td>
<td>80,179</td>
<td>72,957</td>
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<tr>
<td>Investments</td>
<td>114,478</td>
<td>114,478</td>
<td>121,592</td>
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<tr>
<td>Current assets</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stocks</td>
<td>5,304</td>
<td>5,304</td>
<td></td>
</tr>
<tr>
<td>Prepayments and accrued income</td>
<td>19,122</td>
<td>19,122</td>
<td>18,022</td>
</tr>
<tr>
<td>Cash at bank and in hand</td>
<td>559,167</td>
<td>559,167</td>
<td>220,412</td>
</tr>
<tr>
<td><strong>Total assets</strong></td>
<td>583,593</td>
<td>583,593</td>
<td>338,437</td>
</tr>
<tr>
<td>Creditors</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Amounts falling due within one year</td>
<td>(209,427)</td>
<td>-</td>
<td>(209,427)</td>
</tr>
<tr>
<td>Net current assets</td>
<td>374,166</td>
<td>-</td>
<td>374,166</td>
</tr>
<tr>
<td><strong>Total assets less current liabilities</strong></td>
<td>568,823</td>
<td>-</td>
<td>568,823</td>
</tr>
<tr>
<td><strong>Net assets</strong></td>
<td>568,823</td>
<td>-</td>
<td>568,823</td>
</tr>
<tr>
<td>Funds</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unrestricted funds</td>
<td>-</td>
<td>-</td>
<td>568,823</td>
</tr>
<tr>
<td>Restricted income funds</td>
<td>-</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td><strong>Total funds</strong></td>
<td>-</td>
<td>-</td>
<td>568,823</td>
</tr>
</tbody>
</table>
NRAS Advisors

experts in the field

Medical Advisors
Chief Advisor
Professor David G I Scott MD FRCP

Wales
Dr Stefan Siebert MBCh MRCP PhD
Dr Yasmeen Ahmed PhD FRCP

Scotland
Professor Iain B McInnes MD PhD
Dr David Marshall MB ChB
Dr Asad Zoma MB ChB

England
Dr Andrew Bamji MB BS(Hons) FRCP
Dr Robin Butler MD FRCP
Professor Kuntal Chakravarty FRCP FACP(USA) DGM(London)
Dr Christopher Deighton MBBS BMedSci MD FRCP
Dr Christopher Kelsey MSc MB FRCP
Dr Patrick D W Kiely MBBS BSc PHD FRCP
Dr Gulam Patel MA FRCP
Dr Philip Platt MD FRCP
Dr Richard Reece MB BCh MRCP FRCP
Professor Peter C Taylor MA PhD FRCP
Dr Richard Watts MA DM FRCP
Dr Lesley J Kay BM BCh

Paediatric Medical Advisors
Chief Advisor
Professor Tauny Southwood BM BS FRCPCH
Dr Gavin Cleary MBChB BSc MSc MRCP(UK) MRCPCH
Dr Clarissa Pilkington MBBS BSc MRCP
Dr Helen Venning BmedSci BM BS MRCP FRCP(LON) FRCPCH
Dr Janet McDonagh MD MRCP
Dr Janet Gardner-Medwin MRCP PhD
Dr Susan Wyatt BSc DCH MRCP FRCPCH
Dr Athimalaipet Ramanan MBBS MRCP

NRAS Nurse Advisors

England
Diane Home RGN MSc

Wales
Suzanne Moriss RGN MSc

Scotland
Liz McIvor RGN RSCN MSc

N Ireland
Elaine Wylie RGN BSc(Hons) PGDip

NRAS Allied Healthcare Advisors

Occupational Therapy
Dr Alison Hammond PhD MSc BSc(Hons) DipCOT

Physiotherapy
Cathy Cameron MCSP

Podiatry
Robert Field BA(Hons) PGDip BSc(Hons)

Dietary
Dorothy J Pattison PhD RD
NRAS People
the whole of our team

**Founder Patron**
The Rt Hon Theresa May MP,
*Secretary of State for the Home Department*
*and Minister for Women and Equality*

**Patron (Medical)**
Professor Gabriel Panayi ScD MD FRCP,
*Emeritus Professor of Rheumatology,*
*King’s College, London*

**Celebrity Patrons**
Nicky Cambell
Juliette Kaplan
Dee Thresher

**Directors**
Mr Graeme Johnston (Chair)
Mrs Sue Ball
Mr Chris Bennett
Mrs Wendy Garwood
Mr Andrew Kennedy
Mr Mark Liddell
Ms Di Skingle

**NRAS Team in the Office**
Ailsa Bosworth
*Chief Executive and Founder*
Peter Rogers
*Financial Controller & Company Secretary*
Tracey Hancock
*Director of Development*
Clare Jacklin
*Director of External Affairs*
Jamie Hewitt
*Government Affairs Manager*
Deborah Flitter
*PA to Chief Executive*
Lorraine Tanner
*Helpline Manager*
Mary Tarn
*Membership Supervisor*
Gail Slobodzian
*Helpline & Membership Administrator*
Vicky Backhurst
*Helpline & Information Coordinator*
Sarah Kate Ball
*Help Line and Self Management Coordinator*
Maimie Hume
*Volunteer Network Supervisor*
Sue Phillips
*Volunteer Network Coordinator*
Ruth Gosart
*Fundraising Web Coordinator*
Oliver Hoare
*Trust and Grants Fundraiser*
Val Eyre
*Events Fundraiser*
Sam Beaton
*Executive Assistant*
Tameena Hussain
*Publications & Information Assistant*
Jill Lucking
*Helpline Information Assistant*
Thank you so much for sending me your booklet. I have had RA for nearly 20 years and actually cried with relief at your detailed information. I thought that I was very alone and did not connect the lumps on my elbows or dry eyes with my condition. Neither my GP nor specialist told me of this. It is good to know of organisations like yourselves and look forward to being a member.