

COMPANY REGISTRATION NUMBER 02939840

**THE NEUROLOGICAL ALLIANCE
FINANCIAL STATEMENTS
FOR THE YEAR ENDED
30 JUNE 2015**

Charity Number 1039034

taylorcocks | chartered accountants
chartered tax advisers

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THE NEUROLOGICAL ALLIANCE
FINANCIAL STATEMENTS
YEAR ENDED 30 JUNE 2015

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THE NEUROLOGICAL ALLIANCE

LETTER FROM CHAIR

YEAR ENDED 30 JUNE 2015

Dear Members

At the beginning of the year, I sat down with Chief Executives of the Alliance's member organisations to discuss neurological conditions. More specifically to try and understand if the people and the conditions we represent experienced similar issues. And guess what? We have much more in common than I think many of us initially thought. With so many common issues we agreed that we should be better, collectively, at raising the profile of neurology, to improve services and outcomes for all those we all represent.

This kick started an important piece for the Alliance of work this year – building a stronger voice for neurology.

You told us and people in our *Invisible Patients* report told us:

- It takes too long to get a diagnosis, so people cannot access treatment, services or support quickly enough
- There is a lack awareness and of signposting to relevant information and support at time of diagnosis
- Fewer than 30% of people have been offered care plans
- Where there is no-one to help coordinate services, it is harder to access services
- Commissioners don't know enough about their commissioning responsibilities for neurology, local prevalence, and the needs of those with neurological conditions
- Lack of integration and good community care, in particular community neuro-rehabilitation, can result in people inappropriately needing hospital care
- The majority of patients value research and would be interested in taking part in research projects if offered

The National Audit Office told us that little progress has been made to demonstrate value for money, improve neurology services and outcomes for people with neurological conditions.

Overall, services and outcomes are not improving for the people we represent.

We took these findings and asked you why things aren't happening as they should and we came up with a series of recommendations which we will publish later on in 2015. These recommendations represent our collective 'Ambition for Neurology' and will be our guide for improvement. And when we say 'our' we mean – everyone involved in neurology - the charities, the health care professionals, commissioners, Department of Health, NHS England, Public Health England – we all have to work better together to prevent duplication and fragmentation of our work. We have a collective responsibility to do this.

It has never been more important. The development of new data and intelligence by the Neurology Intelligence Network and the introduction of collaborative commissioning will create opportunities to improve understanding and engagement with neurology by commissioners and other local stakeholders. We have to be prepared as national and local alliances to work with commissioners and other key decision-makers for the good of all those with neurological conditions.

In 2015-16 I hope all members will commit to promoting this stronger pan-neurology voice and developing further joint working opportunities with other neurological partners.

Best wishes

Steve Ford, Chair of Trustees

THE NEUROLOGICAL ALLIANCE
INDEPENDENT EXAMINERS REPORT
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REFERENCE AND ADMINISTRATIVE DETAILS

Registered charity name	The Neurological Alliance
Charity registration number	1039034
Company registration number	02939840
Registered office	Dana Centre 165 Queen's Gate London SW5 5HE
Independent Examiner	A.G. Rich H.W. Fisher & Company Accountants Acre House 11-15 William Road London NW1 3ER
Accountants	Taylorcocks Chartered Accountants & Statutory Auditor Abbey House Hickleys Court South Street Farnham Surrey GU9 7QQ
Bankers	CAF Bank Ltd 25 Kings Hill Avenue Kings Hill West Malling Kent ME19 4JQ

THE NEUROLOGICAL ALLIANCE
INDEPENDENT EXAMINERS REPORT
YEAR ENDED 30 JUNE 2015

The Trustees present their report and independently examined financial statements for the Neurological Alliance for the year 1 July 2014 to 30 June 2015. The report and financial statements have been prepared in accordance with the Companies Act 2006 and the Charities Act 2011. The report and financial statements will be laid before the members of the charity at the Annual General Meeting to be held on 25 November 2015. In preparation of this report, the Trustees had regard for the Charity Commission guidance on public benefit. The Trustees are delighted to report that the year 2014-15 has been a successful one.

1. Our objects

Our principal objectives, as derived from the objects set out in our Articles of Association, are to advance the education of the public in all matters concerning neurological disorders by carrying out research and investigation into preventative procedures, treatment and the needs and care of persons affected by neurological conditions, and publishing the useful results thereof, and the relief of those persons in the United Kingdom of Great Britain and Northern Ireland who are receiving or have received treatment for neurological conditions.

We are the only collective voice for over 80 national and regional organisations working together to make life better for millions of people in England with a neurological condition.

2. What we set out to do in 2014-15

Our vision and mission is to improve the lives of people affected by neurological conditions and work towards their prevention and eradication; and to raise awareness and understanding of neurological conditions to ensure that every person diagnosed with a neurological condition has access to high quality, joined up services and information from their first symptoms, throughout their life.

To achieve this, our strategy sets our four goals that guide our activities:

- Neurology is embedded in health and social care services and that improvements in services can be demonstrated
- People with neurological conditions report that their needs are better understood by the general public and professionals with whom they come into contact with
- A five year strategy for neurological research is developed and implemented
- The charity is adequately resourced and financially sustainable.

The annual report of the Trustees will outline the work of the Alliance in 2014-15, covering our national, regional and local work, as well as outlining a key focus on long term sustainability.

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2.1 What we did in 2014-15

2.1.1 A national picture of neurology services

In 2014-15 we set out to determine and provide the neurological community with a national picture on neurology services and outcomes for people who use the services. We did this by working on three key projects:

1. Surveying the patient experience of neurology services. With the support of our members and many other stakeholders, we received nearly 7,000 responses from all over England and covering 60 neurological conditions.
2. Auditing the quality of commissioning of neurology services, using freedom of information requests under the Freedom of Information Act 2000. We submitted a series of nine requests to all clinical commissioning groups and we received 191 responses, representing a 91% response rate. The findings and the patient experience survey were published in [*Invisible patients - revealing the state of neurology services, January 2015*](#).
3. Engaging with the National Audit Office to provide the views and evidence of our members for their progress review of neurology services. In 2012, the Public Accounts Committee set out a series of recommendations which would improve neurology services and value for money, [*Services for people with neurological conditions, February 2012*](#). This second review [*Services for people with neurological conditions progress review, July 2015*](#), assesses progress made against those recommendations.

Overall, these projects informed us that while much has been done to raise the profile of neurology through the introduction of the National Clinical Director for Neurosciences, the Neurology Strategic Clinical Networks, the Compendium of Neurology Data and the Neurology Intelligence Network, so much more needs to be done to improve neurology services, experience and outcomes. We found that:

- Only 14.7% of clinical commissioning groups have assessed local costs relating to the provision of neurology services
- Only 20.4% and 26.2% of clinical commissioning groups respectively have assessed the number of people using neurological services and the prevalence of neurological conditions within their area
- These issues have a significant impact on patients' care, with 58.1% of patients having experienced problems in accessing the services or treatment they need
- 31.5% of respondents had to see their GP five or more times about the health problems caused by their condition before being referred to a neurological specialist
- 71.5% of respondents have not been offered a care plan to help manage their condition
- The National Audit office report found that little progress has been made to demonstrate value for money, improve neurology services and outcomes for people with neurological conditions.

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2.1.2 Develop a collaborative relationship with decision makers

2014-15 has been an important year for communicating the national neurology issues we drew from the *Invisible Patient* report and we have developed strong collaborative relationships with key decision makers in the policy world:

2.1.2a Department of Health, Public Health England and NHS England

We now meet with both the Department of Health and NHS England on at least a six monthly basis, which provides us with a valuable opportunity to update them on the key issues that we currently face and to understand their upcoming work and priorities.

- We meet with Jane Allberry, Deputy Director NHS Clinical Services, and colleagues in the long term conditions team at Department of Health.
- We meet with Martin McShane, NHS England's Director for Long Term Conditions, and representatives from his Long Term Conditions Clinical Policy and Strategy Unit. We have recently been agreed a 'key partner' of NHS England where, on behalf of our members, we have been able to establish and agree a formal opportunity to engage with NHS England and their current programme of work.
- We remain in ongoing email contact with both NHS England and the Department of Health, keeping them up to date with the work of the Alliance and enabling us to be aware of opportunities to promote improvements in neurology services.

We are also involved in the strategy and direction discussions around the Neurology Intelligence Network.

- On a quarterly basis we represent the Alliance at Public Health England's Mental Health, Dementia and Neurology Partnership Board. Here, along with Dr David Bateman, we provide an essential voice for neurology and its priority needs, within the mental health and dementia worlds.
- On a monthly we represent the Alliance at Public Health England's Neurology Leadership Group, along with Department of Health and NHS England. This is a very newly formed group, the ambition of which is provide opportunities to discuss strategy, promote collaborative working and reduce duplication and fragmentation.

We also continue our role as a patient representative on NHS England's Clinical Reference Group for Neurosciences where we have been forthright in our demands for a review of the neurosciences service specification for specialised neurology services.

2.1.2b Richmond Group of charities

With the support from Parkinson's UK and the MS Society, we renewed our membership of the Richmond Group of charities, helping to ensure that the needs of people with neurological conditions are reflected within the group's work programme.

In the last year, the group published two reports

- [What is preventing progress - Time to move from talk to action on reducing preventable illness](#) in which we ensured that secondary prevention was sufficiently prominent and that neurological conditions were included.
- [Vital signs: Taking the temperature of health and care services for people living with long term conditions](#) which included statistics on neurological conditions drawn from our *Invisible Patients* report.

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Additional work streams where neurology has been represented via the Richmond Group:

- Alzheimer's Research UK provided research expertise to support the PROMISE project which will examine the link between lifestyle factors and long-term conditions.
- Parkinson's UK holds a position on of NHS England's National Information Board project, which focuses on public access to health and care data and information.
- We represent the Richmond Group on NHS England's Patient and Public Voice Assurance Group for specialised commissioning.

2.2 What next in 2015-16?

In response to our work and findings in 2014-15, we will commit to:

1. Publishing, in collaboration with Dr David Bateman, National Clinical Director for Neurology, our collective ambitions for neurology, a Five Year Ambition for Neurology, which will act our guide to improve services.
2. Updating Neuronumbers and publishing a directory of neurological conditions which will provide annually updated information on neurological conditions and services.
3. Working closely with Dr Bateman, Public Health England, Department of Health and NHS England and parliamentarians to:
 - Push, with the support of our members, for a full review of neurology services by the Public Accounts Committee
 - Clarify the commissioning responsibility of neurology services between NHS England and clinical commissioning groups.
 - We will do so through our membership of the Neurosciences Clinical Reference Group and the Specialised Services Patient and Public Voice Assurance Group
 - Influence the provision of neurology data through the Neurology Intelligence Network and deliver products that will influence commissioners and improve neurology services for all.
 - We will do this through our role on the Mental Health Dementia and Neurology Intelligence Network Partnership Board and the Neurology Leadership Group
 - Help shape what better community care looks like to keep people out of hospital.
 - We will do this by working with NHS England, on this their only priority project for neurology services
 - Ensure that neurology receives greater local by attention by calling for more incentives in the accountability architecture and improved provision of data for clinical commissioning groups
4. Undertaking a second patient experience survey and commissioning audit to measure and evaluate improvements to neurology services and outcomes.

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3. Our structure, governance and management

3.1 Trustees selection

We are governed by a Board of Trustees, made up of a minimum of three and a maximum of 13 people nominated and elected by our members, and recommended by our Trustees.

In advance of each Annual General Meeting (AGM), all members are invited to send in their nominations for the Board. Details of the Trustee candidates are then circulated to all members and votes are made by ballot at the AGM or sent in advance to the Chair using a proxy form; each member organisation is entitled to one vote, placed at the AGM.

After completing a three year term, each Trustee will stand down from the Board. Trustees who have completed only one term may stand for re-election; those who have served two consecutive terms must stand down for one year before they may stand again for the Board.

In joining the Alliance Board, all new Trustees undertake a tailored induction programme. The Trustees, who are also directors for the purpose of the Companies Act, and who served during the year are listed in section 5.1.

The Board has established two sub committees each with specific functions:

- The Human Resources Committee advises the Trustees and the Alliance on all matters relating to Human Resources, including recruitment and development of staff
- The Fundraising Advisory Committee advises the Trustees on all matters relating to our fundraising strategy.

3.2 Structure

We are a company limited by guarantee (no 2939840) and a registered charity (no 1039034). We are governed by Articles of Association and Byelaws (both of which were updated in 2011). Our main activity is to secure the highest standards of care and treatment for every person affected by a neurological condition.

Our Board of Trustees is responsible for our governance and strategy and meets every quarter. Our Chief Executive is responsible for implementing the strategy and reports on its progress at the Board meetings. The Chief Executive reports directly to and is supervised by the Chair. They speak and meet regularly to discuss Alliance business.

Communication, both formal and informal, between Trustees and staff is frequent and effective.

3.2.1 Staff

Arlene Wilkie	Chief Executive and Company Secretary
Alex Massey	Senior Policy and Campaigns Advisor

HR support from Parkinson's UK is gratefully received.

3.2.2 Members

Full membership is open to national voluntary organisations who represent patients, service users, families and carers (non-statutory, non-profit) organisations, who, in addition to the full benefits of membership, will have a right to vote at the AGM, have the right to nominate a trustee and an opportunity to influence our strategic direction. Subscriptions are income assessed.

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- Full affiliate membership is open to Regional Neurological Alliance’s operating on a non-statutory, non-profit basis. Affiliate members will pay a subscription rate which is not income assessed.
- Associate status is open to non-profit organisations, including professional associations and statutory authorities, who will play an active part in the Alliance but do not have the right to nominate a trustee or vote at the AGM. Subscriptions are income assessed.
- Regional Associations of Neurological Organisations are also associates. They are staff led groups and will pay a subscription rate which is not income assessed.
- Corporate supporter status is open to for-profit organisations, who cannot vote at the AGM or nominate a trustee.
- Reciprocal partners are normally umbrella organisations whose aims and objectives match well with those of the Alliance. They can’t vote or influence our strategic direction.

Members

Action Duchenne	www.actionduchenne.org
Action for Dystonia, Diagnosis, Education and Research	www.actionfordystonia.co.uk
Action for M.E.	www.actionforme.org.uk
Alzheimer’s Research UK ¹	www.alzheimersresearchuk.org
Ann Conroy Trust	www.annconroytrust.org.uk
Ataxia -Telangiectasia Society ²	www.atsociety.org.uk
Ataxia UK	www.ataxia.org.uk
Batten Disease Family Association	www.bdfa-uk.org.uk
Brain and Spine Foundation	www.brainandspine.org.uk
Brain Research Trust	www.brt.org.uk
Brain And Spinal Injury Centre ¹	www.basiccharity.org.uk
British Acoustic Neuroma Association	www.bana-uk.com
British Polio Fellowship	www.britishpolio.org.uk
Cavernoma Alliance UK	www.cavernoma.org.uk
CMT United Kingdom	www.cmt.org.uk
Cure Parkinson's Trust	www.cureparkinsons.org.uk
Different Strokes	www.differentstrokes.co.uk
Dystonia Society	www.dystonia.org.uk
Epilepsy Action	www.epilepsy.org.uk
Epilepsy Society	www.epilepsysociety.org.uk
Fighting Strokes ²	www.fightingstrokes.org
GAIN (Guillain-Barré and Associated Inflammatory Neuropathies) charity	www.gaincharity.org.uk
Headway – the brain injury association	www.headway.org.uk
Hemihelp	www.hemihelp.org.uk
Huntingdon’s Disease Association ²	www.hda.org.uk
I Have ITH Foundation	www.ihaveiih.com
Joint Epilepsy Council of the UK and Ireland ²	www.jointepilepsycouncil.org.uk
Migraine Trust	www.migrainetrust.org
Motor Neurone Disease Association	www.mndassociation.org
Multiple Sclerosis Society	www.mssociety.org.uk
Multiple Sclerosis Trust	www.mstrust.org.uk

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Multiple System Atrophy Trust	www.msatrust.org.uk
Myaware	www.myaware.org
National ME Centre	www.nmec.org.uk
National Tremor Foundation	www.tremor.org.uk
Nerve Centre Kirklees ²	www.thenervecentrekirklees.org.uk
Neurosupport ²	www.neurosupport.org.uk
Pain Concern	www.painconcern.org.uk
Parkinson's UK	www.parkinsons.org.uk
Polio Survivors Network	www.poliosurvivorsnetwork.org.uk
PSP Association	www.pspeur.org
Sudep Action	www.sudep.org
Sue Ryder	www.sueryder.org
Tourettes Action	www.tourettes-action.org.uk
Transverse Myelitis Society	www.myelitis.org.uk
Trigeminal Neuralgia Association UK	www.tna.org.uk
Tuberous Sclerosis Association	www.tuberous-sclerosis.org
UK Acquired Brain Injury Forum	www.ukabif.org.uk

Associates

Association of British Neurologists	www.theabn.org
British Paediatric Neurology Association	www.bpna.org.uk
Chartered Society of Physiotherapists	www.csp.org.uk
Division of Neuropsychology (British Psychological Society) ¹	www.bps.org.uk/networks-and-communities/member-microsite/division-neuropsychology
Forward M.E.	www.forward-me.org.uk
The Encephalitis Society ²	www.encephalitis.info
The National Hospital for Neurology and Neurosurgery Development Foundation	www.nationalbrainappeal.org
Royal Hospital for Neuro-disability	www.rhn.org.uk
Stoke Mandeville Spinal Research (formally The Stoke Mandeville Spinal Foundation)	http://lifeafterparalysis.com
Association of Independent Healthcare Organisations (formally Independent Healthcare Advisory Services)	www.independenthealthcare.org.uk
South West Alliance of Neurological Organisations	www.swano.org
Yorkshire and Humberside Association of Neurological Organisations	www.yhano.org.uk

Corporate supporters

Abbvie	www.abbvie.co.uk
Allergan ²	www.allergan.co.uk
Britannia Pharmaceuticals ²	www.britannia-pharm.co.uk
Genzyme	www.genzyme.co.uk
Merk Serono	www.merckserono.co.uk
Novartis	www.novartis.co.uk
UCB	www.ucb.co.uk

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Regional Neurological Alliances

Black Country Neurological Alliance	www.blackcountryneuroalliance.org.uk
Buckinghamshire Association of Neurological Organisations ²	www.bucksvoice.net/bano
Cornwall Alliance of Neuro-Domain Organisations ²	www.candoweb.org
Cumbria Neurological Alliance	www.cumbrianeurologicalalliance.wordpress.com
Gloucestershire Neurological Alliance	www.glosna.org.uk
Greater Manchester Neurological Alliance ²	www.gmneuro.org.uk
Hampshire Neurological Alliance	www.hantsneuroalliance.hampshire.org.uk
Hounslow and Richmond Neurological Partnership	
Lancashire and South Cumbria Neurological Alliance	www.lascna.co.uk
Lincolnshire Neurological Alliance	www.lincolnshire-neurological-alliance.org.uk
Merseyside and Cheshire Neurological Alliance	www.neurosupport.org.uk
Northern Neurological Alliance	www.northernna.org.uk
Oxfordshire Neurological Alliance	www.oxna.org.uk
Staffordshire Neurological Alliance ¹	www.staffsneurologicalalliance.org.uk
Swindon and Wiltshire Neurological Alliance	www.swna.org.uk
Tees Valley, Durham, and North Yorkshire Neurological Alliance	www.na-tvdny.org.uk
West Berkshire Neurological Alliance	www.wbna.org.uk

Reciprocal members

National Voices	www.nationalvoices.org.uk
Neurological Alliance of Ireland	www.nai.ie
Neurological Alliance of Scotland	www.scottishneurological.org.uk
Neurological Alliance of Wales	www.walesneurologicalalliance.org.uk
Pain UK	www.painuk.org
Specialised Healthcare Alliance	www.shca.info

¹. New members in 2014-15

². Ceased members in 2014-15

3.2.3 The way we work

As a membership organisation, our whole ethos is to work in partnership. We work across the neurological community to identify common priorities for people affected by a condition and then seek to influence, shape and support policy development to reduce inequalities, enhance their outcomes and, where possible, help them live for longer and in better health. Our activities are therefore based on a clear and shared sense of purpose. We work with the Trustees and the Policy Group to determine our strategy and plans.

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3.2.3a The Policy Group

Any member of the Alliance can take be part of the Policy Group. The Group's purpose is to:

- Make recommendations to Alliance Trustees on Alliance policy and activity, ensuring that these reflect the needs and objectives of its member organisations
- Build collective ownership of the Alliance beyond staff and Trustees and to promote team-working across the member organisations
- Provide a forum for policy and campaigns staff of member organisations to share information and provide mutual support
- More closely align member organisations' priorities with the collective needs of the Alliance
- Ensure that all member organisations, large and small, can contribute to the work of the Alliance.

3.2.3.1ai Policy Group leads

Sarah Vibert	Head of Development and Policy at Epilepsy Society, Chair
Lotte Good	Senior Policy and Campaigns Officer, Sue Ryder, Vice Chair
John Kell	Policy Manager, Motor Neurone Disease Association, Vice Chair

3.3 Risk management

The Trustees have assessed the major risks to which the charity is exposed, and are satisfied that systems are in place to mitigate exposure to major risks. A risk management strategy, reviewed annually, is in place.

3.3.1 Insurance and regional groups

The Trustees reviewed our relationship with affiliated regional groups who use the Neurological Alliance name and/or logo. It was their view that, although the risks are small, the financial and legal and reputational implications of an incident are significant and that, as unfortunately the likelihood of people resorting to litigation is increasing, health organisations do need to have insurance. Areas of concern include health and safety, safeguarding and data protection. Our lawyers advised if an incident arises at an organisation bearing either the name or the logo of the Neurological Alliance, a litigant might potentially attempt to pursue a claim against the Neurological Alliance.

As a result the Trustees requested that each affiliated organisation, along with holding a constitution and becoming an incorporated organisation (or on an annual basis, the member must nominate an individual to hold membership rights) take one of the following two alternatives:

1. The organisation ensures that it holds insurance that covers the group depending on what they do – this may include public liability, employee and professional liability insurance. The organisation would have to provide evidence of this on an annual basis during the membership renewal process. The Trustees understand that there is a cost implication for this and reduced the membership fee of any local or regional Neurological Alliance to a nominal £1 on presentation of an up-to-date insurance certificate.
2. The organisation changes its name so it does not include the phrase "Neurological Alliance" and also stops using the Neurological Alliance logo if it is currently doing so.

If the affiliated organisation is unable to do either option 1 or 2, their membership of the Alliance will regrettably be terminated.

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3.3.2 Accommodation

At the beginning of July, the Alliance was served notice by the Science Museum from the Dana Centre where it has been based since 2009. This was unexpected as the lease held by the Dana Alliance with the Science Museum, which included provision for the Neurological Alliance, was due to expire in November 2018. Parkinson's UK has generously offered two spaces at their offices, free of charge, as of the 4th December. The trustees will review the long accommodation situation for the Alliance in 2016.

4. Public benefit

Our work benefits people affected by a neurological condition and those who represent them. Sections 1 and 2 of this report set out our objectives, reports on our activities and successes, and set out our plans for the current financial year.

The Trustees consider that they have complied with their duty in s4 of the Charities Act 2011 to have due regard to the guidance on public benefit published by the Charity Commission. The Trustees have considered this matter and concluded:

- That the aims of the organisation continue to be charitable
- That the aims and the work done give identifiable benefits to the charitable sector and both indirectly and directly to individuals in need
- That the benefits are for the public, are not unreasonably restricted in any way and certainly not by ability to pay
- That there is no detriment or harm arising from the aims or activities.

5. Reference and administrative details

The Alliance is a registered charity (1039034) and company limited by guarantee (2939840) registered in England. The Alliance's registered office is the Dana Centre, 165 Queen's Gate, London SW7 5HD.

5.1 Trustees and the nominating organisation

Suzanne Dobson	Tourette's Action (appointed November 2014)
Steve Ford	Parkinson's UK (Chair)
Paul King	Dystonia Society UK (Treasurer) (resigned June 2015)
Sally Light	Motor Neurone Disease Association (Vice-Chair)
Sue Millman	Ataxia UK (Vice-Chair; Treasurer) (resigned November 2014)
Caroline Morrice	Guillain-Barre and Associated Inflammatory Neuropathies (appointed November 2014)
Nick Rijke	MS Society
Mike Smeeton	Sue Ryder (appointed November 2014)
Angus Somerville	Royal Hospital for Neuro-disability (resigned January 2015)
Amanda Swain	UK Acquired Brain Injury Forum
Simon Wigglesworth	Epilepsy Action (Treasurer)
David White	Cavernoma Alliance UK

5.2 Professional advisors

Bankers	CAF Bank Ltd, PO Box 289, West Malling, Kent, ME19 4TA
Accountants	Taylorcocks Chartered Accountants & Statutory Auditors, Abbey House, Hickleys Court, South Street, Farnham, Surrey, GU97QQ
Independent Examiners	HW Fisher & Company, Acre House, 11-15 William Road, London, NW1 3ER

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6. Finances

6.1 Investment

Article 5.1.23 empowers the Alliance, with advice from a financial expert, to invest the funds of the Alliance as it sees fit, with consideration of the the suitability of investments and the need for diversification.

6.2 Subscriptions

Subscription rates are determined by the organisational income of each member and associate. Subscriptions for affiliate members are at a fixed rate.

6.3 Reserves policy

The Trustees will seek to ensure a minimum reserve of three months planned expenditure in order that we can deliver our core activities in the event of a significant shortfall in income. At the end of the reserves equal to six months of planned expenditure was held.

6.4 Financial position

Income from membership subscriptions grew by 21.4% in the year to £91,867 (2013-14: £75,687). Overall there is a deficit of £71,917 (surplus of £75,055 in 2013-14) for the year which is primarily caused by spending the corporate funding raised in the previous year. The corporate funding is continuing, with each company donating £10,000, however the timing of this income has meant that none was received in the year ended 30th June 2015. Further funding will be received in the year ended 30th June 2016.

There are two restricted funds. Firstly the corporate funding referred to above and the specific donations received to enable the charity to renew its membership of the Richmond Group as referred to in note 2.1.2b.

Our office accommodation is kindly provided free of charge by the European Dana Alliance for the Brain, an initiative of the Dana Foundation.

6.5 Independent Examiners

H.W. Fisher and Company continues as the organisation's Independent Examiner and a resolution proposing its reappointment will be put to the Annual General Meeting.

6.6 Small company provisions

This report has been prepared in accordance with the provisions applicable to companies entitled to the small companies exemption.

On behalf of the Board of Trustees

Steve Ford
Chair, Board of Trustees Date:

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I report on the accounts of the Neurological Alliance for the year ended 30 June 2015, which are set out on pages 17-23.

Respective responsibilities of Trustees and examiner

The Trustees (who are also directors of the Neurological Alliance for the purposes of company law) are responsible for the preparation of the accounts. The Trustees consider that an audit is not required for this year under section 144(2) of the Charities Act 2011 (the 2011 Act) and that an independent examination is needed.

Having satisfied myself that the charity is not subject to audit under company law and is eligible for independent examination, it is my responsibility to:

- (i) examine the accounts under section 145 of the 2011 Act;
- (ii) to follow the procedures laid down in the general Directions given by the Charity Commission under section 145 (5)(b) of the 2011 Act; and
- (iii) to state whether particular matters have come to my attention.

Basis of independent examiner's report

My examination was carried out in accordance with the general Directions given by the Charity Commission. An examination includes a review of the accounting records kept by the charity and a comparison of the accounts presented with those records. It also includes consideration of any unusual items or disclosures in the accounts, and seeking explanations from you as Trustees concerning any such matters. The procedures undertaken do not provide all the evidence that would be required in an audit, and consequently no opinion is given as to whether the accounts present a "true and fair view" and the report is limited to those matters set out below.

Independent examiner's statements

In connection with my examination, no matter has come to my attention:

- (a) which gives me reasonable cause to believe that in any material respect the requirements:
 - (i) to keep accounting records in accordance with section 386 of the Companies Act 2006; and
 - (ii) to prepare accounts which accord with the accounting records and comply with the accounting requirements of the section 396 of the Companies Act 2006 and with the methods and principles of the Statement of Recommended Practice: Accounting and Reporting by Charities have not been met; or
- (b) to which, in my opinion, attention should be drawn in order to enable a proper understanding of the accounts to be reached.

A G Rich
Chartered Accountant
C/o H W Fisher & Company Accountants
Acre House
11-15 William Road, London, NW1 3ER

Dated:

THE NEUROLOGICAL ALLIANCE

**STATEMENT OF FINANCIAL ACTIVITIES (INCORPORATING THE
INCOME AND EXPENDITURE ACCOUNT)**

YEAR ENDED 30 JUNE 2015

	Note	Unrestricted Funds £	Restricted Funds £	Total Funds 2015 £	Total Funds 2014 £
INCOMING RESOURCES					
Incoming resources from generating funds:					
Voluntary income	2				
Donations		1,503	4,750	6,253	1,477
Dept of Health Grants		-	-	-	87,300
Corporate Support		-	-	-	80,000
Activities for generating funds					
Subscriptions		91,867	-	91,867	75,687
Investment income	3	-	-	-	120
Miscellaneous		-	-	-	0
TOTAL INCOMING RESOURCES		93,370	4,750	98,120	244,584
RESOURCES EXPENDED					
Charitable activities	4	117,164	44,956	162,120	162,239
Governance costs	4	7,917	-	7,917	7,290
TOTAL RESOURCES EXPENDED		125,081	44,956	170,037	169,529
NET INCOMING/(OUTGOING) RESOURCES FOR THE YEAR					
		(31,711)	(40,206)	(71,917)	75,055
Transfers between funds					
		-	-	-	-
RECONCILIATION OF FUNDS					
Total funds brought forward		106,548	40,206	146,754	71,699
TOTAL FUNDS CARRIED FORWARD		74,837	-	74,837	146,754

The Statement of Financial Activities includes all gains and losses in the year and therefore a statement of total recognised gains and losses has not been prepared. It also complies with the requirements for an income and expenditure account under the Companies Act 2006.

All of the above amounts relate to continuing activities.

The notes on page 19 to 23 form part of these financial statements.

THE NEUROLOGICAL ALLIANCE

BALANCE SHEET

30 JUNE 2015

	Note	2015 £	£	2014 £
FIXED ASSETS				
Tangible assets	7	-	-	-
CURRENT ASSETS				
Debtors	8	990		24,947
Cash at bank		77,728		132,870
		<hr/>		<hr/>
		78,718		157,817
CREDITORS: Amounts falling due within one year	9	(3,881)		(11,063)
		<hr/>		<hr/>
NET CURRENT ASSETS			74,837	146,754
			<hr/>	<hr/>
TOTAL ASSETS LESS CURRENT LIABILITIES			74,837	146,754
			<hr/>	<hr/>
NET ASSETS			74,837	146,754
			<hr/> <hr/>	<hr/> <hr/>
FUNDS				
Restricted income funds	10		-	40,206
Unrestricted income funds	11		74,837	106,548
			<hr/>	<hr/>
TOTAL FUNDS			74,837	146,754
			<hr/> <hr/>	<hr/> <hr/>

The company is entitled to the exemption from the audit requirement contained in section 477 of the Companies Act 2006, for the year ended 30 June 2015. No member of the company has deposited a notice, pursuant to section 476, requiring an audit of these accounts.

The directors acknowledge their responsibilities for ensuring that the company keeps accounting records which comply with section 386 of the Act and for preparing accounts which give a true and fair view of the state of affairs of the company as at the end of the financial year and if its incoming resources and application of resources, including its income and expenditure, for the financial year in accordance with the requirements of sections 394 and 395 and which otherwise comply with the requirements of the Companies Act 2006 relating to accounts, so far as applicable to the company.

The Trustees approved the financial statements on 2015 and signed on its behalf by:

Steve Ford
Chair, Board of Trustees

Simon Wigglesworth
Treasurer, Neurological Alliance

Company Registration Number: 02939840

The notes on pages 19 to 23 form part of these financial statements.

THE NEUROLOGICAL ALLIANCE
NOTES TO THE FINANCIAL STATEMENTS
YEAR ENDED 30 JUNE 2015

1. ACCOUNTING POLICIES

Basis of preparation

The accounts have been prepared under the historical cost convention.

The accounts have been prepared in accordance with applicable accounting standards, the Statement of Recommended Practice, '*Accounting and Reporting by Charities*', issued in March 2005 and the Companies Act 2006.

Income

Income represents subscriptions, revenue grants, corporate support and donations receivable.

Subscription income is invoiced annually in advance and recognised on receipt in the year to which it relates.

Corporate support represents amounts invoiced in the year.

Grants towards revenue expenditure and general donations are treated as income when they are receivable, and allocated over the period to which they relate.

Resources expended

Resources expended are included in the Statement of Financial Activities on an accruals basis inclusive of any VAT that cannot be recovered. Certain expenditure is directly attributable to specific activities and has been included in those cost categories. Where costs are attributable to more than one activity, those costs are apportioned on the basis of the time spent on those activities.

Governance costs are those incurred in connection with the administration of the charity and compliance with constitutional and statutory requirements.

Tangible fixed assets

Tangible fixed assets are stated at cost less depreciation. All assets have been fully depreciated in previous years.

Funds accounting

Unrestricted funds are those funds that can be used in accordance with the charitable objects at the discretion of the Trustees.

Restricted funds are those funds that can only be used for particular restricted purposes within the objects of the charity. Restrictions arise when specified by the donor or when funds are raised for particular restricted purpose.

THE NEUROLOGICAL ALLIANCE
NOTES TO THE FINANCIAL STATEMENTS
YEAR ENDED 30 JUNE 2015

2. VOLUNTARY INCOME

	Unrestricted Funds £	Restricted Funds £	Total Funds 2015 £	Total Funds 2014 £
Donations				
Donations	1,503	4,750	6,253	1,477
Grants receivable				
Department of Health	-	-	-	87,300
Corporate Support	-	-	-	80,000
	<u>1,503</u>	<u>4,750</u>	<u>6,253</u>	<u>168,777</u>

3. INVESTMENT INCOME

	Total Funds 2015 £	Total Funds 2014 £
Bank interest receivable	-	120
	<u>-</u>	<u>120</u>

4. COSTS OF CHARITABLE ACTIVITIES BY ACTIVITY

	Staff Costs £	Depreciation £	Other costs £	Total 2015 £	Total Funds 2014 £
Policy development	-	-	40,819	40,819	136,821
Members activities	109,877	-	11,424	121,301	25,418
	<u>109,877</u>	<u>-</u>	<u>52,243</u>	<u>162,120</u>	<u>162,239</u>
Governance	-	-	7,917	7,917	7,290
	<u>109,877</u>	<u>-</u>	<u>60,160</u>	<u>170,037</u>	<u>169,529</u>

5. NET INCOMING RESOURCES FOR THE YEAR

This is stated after charging:

	2015 £	2014 £
Staff pension contributions	4,800	6,520
Depreciation	-	-
	<u>4,800</u>	<u>6,520</u>

THE NEUROLOGICAL ALLIANCE
NOTES TO THE FINANCIAL STATEMENTS
YEAR ENDED 30 JUNE 2015

6. STAFF COSTS AND EMOLUMENTS

Total staff costs were as follows:

	2015	2014
	£	£
Wages and salaries	96,068	96,998
Social security costs	9,009	9,063
Other pension costs	4,800	6,520
	<u>109,877</u>	<u>112,581</u>

The average number of employees during the year was 2 (2014; 2).

One employee received remuneration of more than £60,000 during the year (2014 - One). No trustee received any emoluments in the year (2014: Nil). No Trustees received out of pocket expenses in the year (2014: £166) for travelling to board or trustee meetings.

7. TANGIBLE FIXED ASSETS

	Computer equipment £	Office equipment £	Total £
COST			
At 1 July 2014	-	98	98
Additions	-	-	-
	<u>-</u>	<u>98</u>	<u>98</u>
At 30 JUNE 2015	<u>-</u>	<u>98</u>	<u>98</u>
	<u>-</u>	<u>98</u>	<u>98</u>
DEPRECIATION			
At 1 July 2014	-	98	98
Charge for the year	-	-	-
	<u>-</u>	<u>98</u>	<u>98</u>
At 30 JUNE 2015	<u>-</u>	<u>98</u>	<u>98</u>
	<u>-</u>	<u>98</u>	<u>98</u>
NET BOOK VALUE			
At 30 JUNE 2015	<u>-</u>	<u>-</u>	<u>-</u>
	<u>-</u>	<u>-</u>	<u>-</u>
At 30 JUNE 2014	<u>-</u>	<u>-</u>	<u>-</u>

THE NEUROLOGICAL ALLIANCE
NOTES TO THE FINANCIAL STATEMENTS
YEAR ENDED 30 JUNE 2015

8. DEBTORS

	2015	2014
	£	£
Prepayments	990	947
Corporate support debtors	-	24,000
	<u>990</u>	<u>24,947</u>

9. CREDITORS: Amounts falling due within one year

	2015	2014
	£	£
Trade creditors	433	5,269
Other creditors and accruals	3,448	5,652
Deferred income	-	142
	<u>3,881</u>	<u>11,063</u>

10. RESTRICTED INCOME FUNDS

	Balance at 1 July 2014	Incoming resources	Outgoing resources	Transfer to Unrestricted Funds	Balance at 30 June 2015
	£	£	£	£	£
Richmond Group	-	4,750	4,750	-	-
Corporate Support	40,206	-	40,206	-	-
Restricted funds	<u>40,206</u>	<u>4,750</u>	<u>44,956</u>	<u>-</u>	<u>-</u>

The restricted income funds are fully explained in note 6.4 of the Trustees Report.

11. UNRESTRICTED INCOME FUNDS

	Balance at 1 July 2014	Incoming resources	Outgoing resources	Transfer from Restricted Funds	Balance at 30 June 2015
	£	£	£	£	£
General funds	106,548	93,370	125,081	-	74,837

THE NEUROLOGICAL ALLIANCE
NOTES TO THE FINANCIAL STATEMENTS
YEAR ENDED 30 JUNE 2015

12. ANALYSIS OF NET ASSETS BETWEEN FUNDS

	Tangible fixed assets £	Net current assets £	Total £
Restricted income funds	-	-	-
Unrestricted income funds	-	74,837	74,837
	<hr/>	<hr/>	<hr/>
Total funds	-	74,837	74,837
	<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/>

THE NEUROLOGICAL ALLIANCE
NOTES TO THE FINANCIAL STATEMENTS
YEAR ENDED 30 JUNE 2015