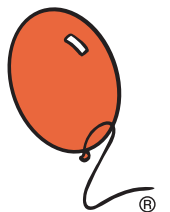




Annual Review
08/09



British Lung Foundation

08/09

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Foreword

The last year has certainly been one of change, internally and externally. We have had a tough time in the financial climate, but have come through it well, with results we are proud of.

Alongside this, we have recruited a whole new team of directors and a chair. This is the first time the BLF has conducted an open process for appointing a chair, and for one who is not a qualified doctor. This acknowledges the need for the BLF to raise its profile in the media and to make the issues surrounding lung disease better known. We are also delighted that Professor Stephen Spiro has been appointed as our Vice Chairman so we can keep the medical knowledge and connections we have grown up with and cherished.

During the year, we have had to adapt our services to the changing economic climate. We have not been able to deliver as much growth as we had planned, but have still continued to expand our activities. This report sets out details of our activities and we hope you find it interesting. We are starting to plan our 25th anniversary, which we will celebrate for a year from June 2010.

The major disappointment of 2008/09 has been the Department of Health (DH) not publishing the National Strategy for Chronic Obstructive Pulmonary Disease (COPD). We have been working on this important document with the DH for a long time and really hoped it would be published by now. We are hoping for, and working towards, its publication next year.

We are also planning to expand our service delivery and undertake new work in the areas of obstructive sleep apnoea and lung cancer in the year ahead.

We always want to achieve quality alongside quantity of service, so we are careful to monitor and evaluate what we do. Many people, both staff and supporters, work very hard to provide our services. This is a good moment to thank them all, particularly Dr Keith Prowse who finished his term as chair in February 2009. He is still helping us on the media enquiries, but at least he can now do this from his house or garden in Shropshire rather than having to keep taking the train!

Ralph Bernard CBE
Chair

Dame Helena Shovelton
Chief Executive



SUPPORT

One person in seven in the UK is affected by lung disease. We are here for every one of them.

One person in seven in the UK is affected by lung disease. Whether it's mild asthma or lung cancer, the British Lung Foundation is here for every one of them.

We support people affected by lung disease through the individual challenges they will face. Support is the focus of many of our activities, including our UK wide network of Breathe Easy support groups and membership scheme.

We help people to understand their condition. We do this by providing comprehensive and clear information on paper, on the web and on the telephone.

And we work for positive change in lung health. We do this by campaigning, raising awareness and funding world-class research.

Left:
Daphne Barton,
North West
Support and
Development
Manager's
retirement party



Right:
BLF Nurse
Programme
Manager Mollie
Jackson talks to
Health Minister
Ann Keen at the
NHS Healthcare
Innovation Expo



Our Head Office is in London, and we have offices in Scotland (which also covers Northern Ireland), Wales and in five English Regions (South West, Midlands, North West, North, and London and South). Our advice service, which includes our telephone Helpline, is based in Liverpool.

The national/regional offices' main role is to provide support to people affected by lung disease, mainly through Breathe Easy support groups. The offices also raise awareness of lung disease and work with health/social/political organisations to improve services for people affected by lung disease. British Lung Foundation Scotland and Northern Ireland and Wales also have a fundraising function.

Breathe Easy support network

England

Throughout England, there are 189 Breathe Easy (BE) groups with a further 27 in development and expressions of interest for another 28 groups. We support over 11,000 BE members. Each year, individual BE groups respond to at least 350 enquiries by phone, 224 letters and 34 emails, on average.

Looking at our impact across the country, the Midlands region has been building partnerships

with the primary care trusts (PCTs), being involved in their discussions and planning of respiratory services, and identifying areas of common interest. In 2009, Derbyshire PCT launched information prescriptions for people with long-term conditions, which suggest the best sources of support and information on specific aspects of living with their conditions. The information prescription for COPD directs people to the BLF's literature and Helpline and gives the order numbers for specific information leaflets.

In the North West we were very sorry to say goodbye to Daphne Barton, Support and Development Manager, who retired after many years of working for the BLF in the North West. She started in 1992, working part-time, mainly doing administrative work and arranging fundraising events. At that time, Trevor Clay had just launched the Breathe Easy Club. Daphne's 17 years were marked with a huge send-off at Liverpool's Anglican Cathedral. We are pleased to welcome Robert Cooper as her successor.

In the London and the South region, we have been working with Islington PCT on a project to raise awareness about COPD and lung cancer in the London Borough of Islington. Our collaborative work has been very successful and the primary care

Throughout England, there are 189 open Breathe Easy (BE) groups with a further 27 in development and expressions of interest for another 28 groups

trust has bought the BLF COPD Self Management Plans and Exercise Diaries. We are also a member of the Respiratory Local Implementation Team (LIT) in collaboration with Barking and Dagenham PCT with a focus on developing services and provision for COPD and asthma patients as well as organising public lung function tests in late 2009. The BLF has been involved with the new COPD patient partnership project in Southwark and Lambeth, which is a consultation and pilot project involving patients with COPD living near King's College Hospital. The aim is to roll out a specialist service in GP cluster clinics for the whole of Southwark and Lambeth funded by the Guy's and St Thomas' Charity for three years. The project started at the beginning of 2008.

Over the last year, the South West region has played a successful role in the transition of the provision of oxygen to a different supplier. The aim was to ensure as smooth a transition as possible – this being the third change in as many years, there was much concern. Staff were involved in monthly regional meetings and, at times, weekly teleconferences, and patients took on the role of user representatives at the monthly local cluster meetings. We facilitated a strong patient voice at the meetings through staff briefings to the 14 user representatives; they then took the issues to the meetings with the Department of Health, the primary care trusts and Air Liquide.

In terms of awareness-raising, the BLF ran the first 'Love your Lungs' campaign in South Tyneside and established a successful BE group in this 'hot spot' area. The project used the BLF's charter to determine its effectiveness. Also, our COPD Self Management Plans became an integral part of the pilot in improving patient care. We are involved in a research project to develop information prescriptions for COPD at the same trust that links to the Integrated Care Pilot programme. Over 35,000 copies of our COPD Self Management Plan were purchased by NHS trusts regionally, including an order of 12,000 to NHS Hull.

Over 35,000 copies of our COPD Self Management Plan were purchased by NHS trusts regionally



Scotland

It's been a busy and exciting year in Scotland. With funding from the Scottish Government, we have been facilitating the establishment of Managed Clinical Networks (MCNs) in all the health boards. We have helped over £600,000 flow into the management of these networks. We have also established a national steering group for MCNs, chaired by Michael Bews, which meets quarterly. It brings together the leaders and managers from all the MCNs to share experience and establish best practice. The MCNs provide us with top-level communications at the health boards. This has been a blessing because this year the Scottish NHS has started work on establishing COPD standards, that we campaigned so hard for two years ago. Establishing the standards has not only meant serving on committees to represent our patients, but it has required tapping into the wealth of knowledge and experience from our clinical friends on different boards.

This year has also seen a Government review of the oxygen at home service, which we served on. There has been a trial of the oxygen concentrators with an ambulatory canister attached, known as 'homefill'. The results of the trial showed that the patient loved it. This was influential at the review board and moved opinion towards using many more oxygen concentrators in the home service and far fewer oxygen cylinders.

Activity in our 20 Breathe Easy groups has fluctuated as might be expected with the health of key members. Group membership in Scotland comprises only 1 per cent of diagnosed COPD patients. We wanted to reach out to non-BE lung patients, so we have collaborated with the NHS to develop a survey for distribution in late 2009. The aim is to find out what support services non-BE members would value. We hope the information will help us design new services. Working with Chest Heart and Stroke Scotland, we recruited people from our BE groups to be trained as patient representatives. The first cohort is now appearing on the MCNs to good effect. In the coming year, we are looking at ways to ensure the process is sustainable and have a way of keeping the patient representatives well briefed on the issues under discussion.

Head of BLF
Wales Chris
Mulholland
with First
Minister Rhodri
Morgan



Northern Ireland

The main success story for the Northern Ireland region this year is that we have recruited a BLF Nurse for the Northern Health Board.

The NI NHS is reorganising moving from five health boards to one strategic health authority. The NI respiratory strategy has been developed and is due for publication in the near future. This document is expected to help inform the development of our strategy in NI. While preparing for a grant application to the NI lottery, the process demanded the existence of a local advisory committee. This resulted in the establishment of an emerging NI committee of three people. In the coming year, we will review our strategy for our work in NI.

Wales

First Minister Rhodri Morgan pledged his support for people with lung disease and had a spirometry test at BLF Wales' 'Meet the Patients' event held at the National Assembly for Wales during Breathe Easy Week this year. The Health Minister, Edwina Hart MBE, met with Respiratory Alliance Wales to determine key priorities in services. The alliance is a group managed by BLF and comprises representatives from the All Wales Respiratory Nurse group, Asthma UK Cymru, Chartered Society

of Physiotherapists, Community Pharmacy Wales, Welsh Thoracic Society, as well as GPs and industry.

Breathe Easy groups in Wales have continued to go from strength to strength, working hard to reach out to their communities, campaigning for better services and fundraising to support both national and local projects. There are 21 Breathe Easy groups throughout Wales and more than 900 individuals are actively in touch with their local Breathe Easy group.

Resources for those who would like information in Welsh have expanded both in terms of printed and online materials. The Helpline is now accessible to Welsh speakers due to the Language Line. Work is ongoing to ensure that all of our publications have a translated version. Following our success in securing funds for oxygen assessment services, our campaigning for an end to the postcode delivery of services has been emphasised through the Respiratory Alliance, a loose coalition of organisations with an interest in lung disease. This work will be taken forward as a priority by the new local health boards who are responsible for both primary and secondary care services.

Breathe Easy groups in Wales have continued to go from strength to strength

The BLF Helpline has received 15,085 calls from 8,935 people – a 4 per cent increase on the number of people from 2007/08

Helpline advice and support

The BLF Helpline has received 15,085 calls from 8,935 people – a 4 per cent increase on the number of people from 2007/08. Over half of the calls were from people wanting information and advice about their lung condition and treatment and 10 per cent from people wanting advice on the welfare benefits that they are entitled to claim. Eighty per cent were first-time callers.

We saw a 23 per cent increase in the number of people contacting the Helpline for advice about welfare benefits.

In September 2008, the Helpline set up a pilot counselling service. This offered a course of counselling sessions over the telephone to people who are living with a lung condition. The pilot ran for six months aiming to prove the benefits of counselling, and 21 people received support. The feedback indicated a great success. As a result, the pilot was extended and it is hoped that funding will enable this service to run full-time.

The Helpline team has been working towards the Telephone Helpline Association accreditation this year. This accreditation system is specifically designed for assessing telephone helplines in the education, health or social welfare fields. Its 12 criteria, each with up to nine sections, look at issues such as how the Helpline is publicised, how calls are answered, selection, training and supervision of staff, and evaluation and monitoring. The assessment process took over six months to complete, and included a thorough review of the Helpline's policies and procedures, staff interviews with an assessor, and the collection of evidence to prove that the Helpline met each of the 12 criteria.

The benefits of having this accreditation include:

- showing callers to the Helpline that we provide a quality service.
- demonstrating that we are committed to continuous improvement in service.
- giving people increased confidence in the service, which would then lead to more people accessing our specialist support.
- giving us the opportunity to review our systems and procedures against a recognised benchmark.
- helping to give us a framework for planning future strategy and action.
- demonstrating to funders who may be keener to fund a service that meets recognised standards.

In November 2008, Mr J from Merseyside contacted the Helpline for advice on the benefits that he was entitled to. As a result of our advice, he made a successful claim for Disability Living Allowance and was awarded an additional £70.35 per week.

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British Lung Foundation Nurses

The BLF Nurse programme was launched in February 2006 with an initial commitment to fund nurses in five English regions, and another five in Glasgow to facilitate expansion of the Early Supported Discharge scheme. Since then, numbers have grown rapidly as a result of high demand from PCTs, so that there are now a total of 43 BLF specialist respiratory nurses providing care in a variety of service settings mostly delivering care in the community.

The BLF Nurses are increasingly providing innovative care in new settings and substantial support to other healthcare professionals

Although some of these nurses were initially pump-primed by the BLF, most are now BLF 'badged' nurses employed and funded by the PCT or health board, with the BLF branding providing features and facilities that can add value to the nurse and the service they provide. The BLF anticipate possibilities for some expansion over the coming financial year, particularly in response to the Clinical Strategy for COPD for England. We know that many PCTs will want to be at the forefront of any changes the strategy may bring and are reviewing their community respiratory services in preparation. Training community and practice staff to meet the requirements of the strategy is one of the big challenges for PCTs.

The long-term aim of the BLF Nurse is to improve the health status of patients with severe respiratory disease by providing a customised service of care and both formal and informal educational programmes for healthcare professionals, patients and carers. The BLF Nurses are increasingly providing innovative care in new settings and substantial support to other healthcare professionals. With funding from the Burdett Fund for Nursing, King's College Hospital has evaluated the BLF Nurse programme, which is now published.

The findings show:

- Clear benefits in patient care with the real problem being that because of the lack of funding the respiratory nurses are spread too thinly.
- Savings from reducing length of stay and avoiding unnecessary admissions.
- An important role for nurses in providing specialist education, and the potential for them to become formal educators. They also have an important and beneficial impact on their colleagues through education and advice-giving.
- A major role for them is as an information resource for patients and carers and in self-care development.
- It outlines the different models eg. continuing care, palliative care, and specialist treatment support, which PCTs might find useful in developing care pathways.

Our nurses also form a growing community of respiratory specialists, with networking opportunities to share best practice provided by us through four BLF-funded study days a year. We provide access to a network of national and local BLF events, including Breathe Easy conferences, and the opportunity to connect up with patients and carers in approximately 220 local Breathe Easy groups. We have secured funding from the King's Fund for a palliative care respiratory nurse in London, which we believe to be the first in the country. As well as providing care to patients with end-stage respiratory disease, the nurse will assist with a research project, which is designed to identify the verbal and non-verbal triggers for end of life discussions and care, and place of care.



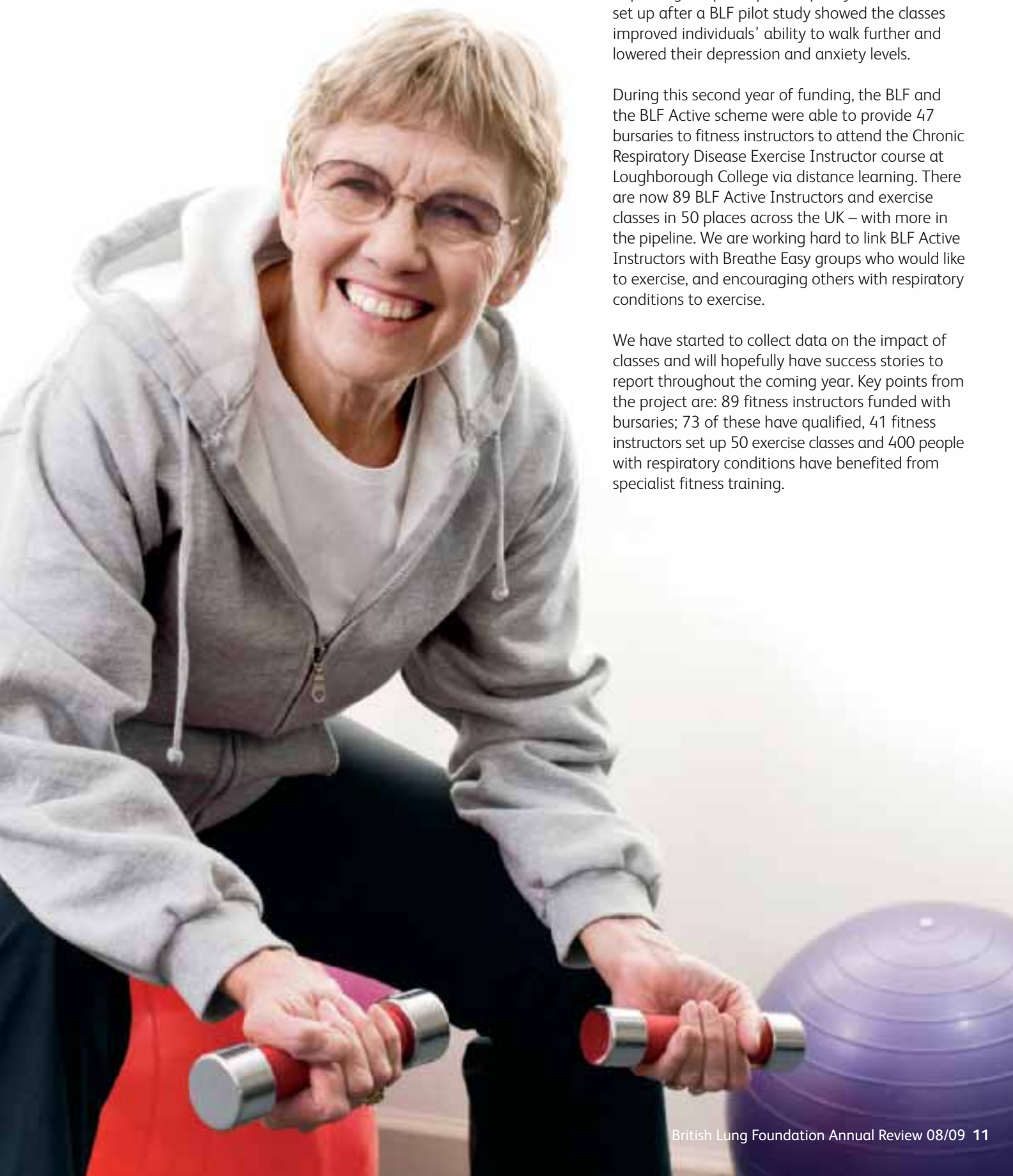
Our nurses also form a growing community of respiratory specialists, with networking opportunities to share best practice provided by us through four BLF-funded study days

BLF Active

The BLF Active scheme, launched in 2007 with funding from Air Products, trains fitness instructors to deliver exercise classes specifically for people with chronic lung disease with the aim of improving the participants' quality of life. It was set up after a BLF pilot study showed the classes improved individuals' ability to walk further and lowered their depression and anxiety levels.

During this second year of funding, the BLF and the BLF Active scheme were able to provide 47 bursaries to fitness instructors to attend the Chronic Respiratory Disease Exercise Instructor course at Loughborough College via distance learning. There are now 89 BLF Active Instructors and exercise classes in 50 places across the UK – with more in the pipeline. We are working hard to link BLF Active Instructors with Breathe Easy groups who would like to exercise, and encouraging others with respiratory conditions to exercise.

We have started to collect data on the impact of classes and will hopefully have success stories to report throughout the coming year. Key points from the project are: 89 fitness instructors funded with bursaries; 73 of these have qualified, 41 fitness instructors set up 50 exercise classes and 400 people with respiratory conditions have benefited from specialist fitness training.





CHANGE

Breathe Easy Week 2009 was one of the BLF's most successful PR campaigns.

Communications

The past 12 months have seen a major reorganising of the BLF's communications activity. The Public Affairs and Information and Publications departments have been amalgamated into one Communications directorate, which comprises: press relations, public affairs, campaigning, liaison with Breathe Easy groups, publications, website and membership.

Campaigning

Breathe Easy Week 2009 was one of the BLF's most successful PR campaigns. Ex-*Coronation Street* star and BLF celebrity ambassador Liz Dawn conducted numerous radio interviews with the BLF Chief Executive, appeared on two TV talk shows, met Andy Burnham MP, the Secretary of State for Health and was interviewed for the *Daily Mail*. Liz was interviewed by presenter Lorraine Kelly live on *GM:TV* and spoke about COPD, Breathe Easy Week and her role as special ambassador. She was also a live guest on popular daytime panel show *Loose Women* the next day when she talked about life after *Coronation Street* and her experience of living with COPD. The week finished on a high point with a BLF presence at the NHS Healthcare Innovation Expo at the Excel Centre in London's

Ex-Coronation Street star and BLF celebrity ambassador Liz Dawn conducted numerous radio interviews with the Chief Executive, appeared on two TV talk shows, and met Health Minister Lord Darzi



BLF Director of Communications David Horton (second right) and Press and Campaigns Manager, Katherine Huntly (second left) collect the *Data Strategy* magazine Grand Prix Award.



Docklands on Thursday 18 and Friday 19 June. Liz Dawn met Andy Burnham MP, the Secretary of State for Health; Lord Darzi; and Chief Executive of the NHS, David Nicholson.

Significant progress has been made in the BLF's campaign to end the additional charges and restrictions for people on oxygen when they travel by plane. As a direct result of this campaign both Emirates and Thomson have dropped all charges for people who need supplementary oxygen. A political consensus has also developed that people with a lung condition should not have to pay extra: a supportive Early Day Motion that was tabled by Nick Ainger MP has been signed by 243 other MPs, a large number of parliamentary questions have been tabled in Westminster and Brussels, and the European Commissioner has confirmed that this issue will be investigated in a soon to be published report on access to air travel for disabled people. All these developments would not have been possible without the hundreds of Breathe Easy members who have written to their MP about this issue and their willingness to share their story in the media.

The British Lung Foundation worked with data research company Experian to identify where people were most likely to live with undiagnosed chronic

obstructive pulmonary disease (COPD) in the UK. The charity and Experian did this by using hospital admission data combined with lifestyle data to create a model for how many people at risk of COPD could be found in each primary care trust. Based on this work, the BLF launched a pilot 'Love your Lungs' campaign in South Tyneside, as it was shown to be the top 'hot spot' in the country with people living there being 62 per cent more likely to be admitted to hospital with COPD than the UK average.

We are delighted that the BLF won two *Data Strategy* magazine Awards for the this campaign, which made innovative use of demographic data to help find people with undiagnosed lung disease. The first was for the best use of research data by a charity and the second was the Grand Prix Award, making the charity the overall winner of the awards, which were held at the Lancaster Hotel, London.

Our 'Love your Lungs' campaign aimed to raise awareness of the early symptoms of COPD and encourage those at risk to have a lung function test. It included outbound calls to 5,000 people living in at-risk postcodes in South Tyneside to offer information and encourage them to attend four lung function testing events at venues where they were most likely to shop and spend their time.

We are delighted that the BLF won two *Data Strategy* magazine Awards for the 'Love your Lungs' campaign



The campaign achieved a 300 per cent increase in those at risk from COPD having lung function tests, and the minimum saving from preventing each admission to Accident and Emergency is estimated at £10,000.

As a result of the calls, 1,822 people requested information about improving their lung health, 1,176 requested future contact and 65 were referred to the BLF Helpline. Over 2,850 people attended the events, with 657 tested and 135 referred to their GP (over 23 per cent). A total of 94 were referred to smoking cessation programmes. The campaign achieved a 300 per cent increase in those at risk from COPD having lung function tests, and the minimum saving from preventing each admission to Accident and Emergency is estimated at £10,000.

The judges of the Grand Prix Award said: "This project drove through what could have been impossible. We sensed the passion involved and had no doubt that it merited the highest award."



BLF publications

The BLF publishes clear and comprehensive health and medical information for people affected by lung disease. We produce over 60 leaflets, booklets and information sheets covering a wide range of subjects relating to lung disease and respiratory health. We also produce special reports for healthcare professionals and health policy makers on different aspects of lung health. Over the year, we distributed 1.357 million – an annual increase of nearly 40 per cent.

Making BLF patient information readily available for people affected by lung disease remains a priority for the charity. Publications can be ordered using the BLF website or by calling or writing to the charity. We also work hard to distribute patient information in hospitals and respiratory clinics, where patients might expect to access it. Over the year, we delivered 65 leaflet display boards to hospitals across the country, taking the total in use to around 350.

The medical content of BLF patient leaflets and booklets is reviewed by healthcare professionals and patients every two years to ensure the information provided remains accurate, comprehensive and up to date. The review is required under the Department of Health's new certification scheme, The Information Standard, which the BLF is applying for.

The BLF's new COPD Self Management Plan was launched in June 2007 and is promoted for sale among primary care organisations across the UK. They are selling well, with 35,037 plans now ordered by the NHS.

Website and online activity

It has been a very busy year for the BLF's website, www.lunguk.org, which was relaunched in November 2007 offering more information and additional functionality. Importantly, the site incorporates a content management system (CMS), which allows staff to update the information about their own departmental activities. This devolved approach enables us to refresh published material in a timely and efficient way, making for a more dynamic and responsive website. Also, the new site can do many more things, such as running online polls, message boards and video streaming.

Supporters can now make both one-off and regular donations, join the membership scheme, and contribute to the cost of publications via the website, which is increasing in importance as a marketing channel and income generator for the charity. In June 2009, the new forum for COPD patients and carers went live after a three-month trial. The forum, which incorporates areas on sarcoidosis and obstructive sleep apnoea, is now open to the public via the website enabling self-registration.

We are also finalising policies on Breathe Easy websites (linking with, monitoring, branding issues), standardising and managing regional and national sections of the BLF website, and rolling out a house style for website copy.

Membership

Support for the BLF membership scheme continues to grow. By the end of June 2009, we had over 3,500 members. The majority of members are patients and carers, and around 5 per cent are healthcare professionals. Membership enables people who care about lung disease to belong to the BLF and to add their voice to the only UK charity working for everyone with a lung condition. Through regular communication, we keep members informed of the latest BLF news and developments in respiratory care. Membership is especially valuable for people who are more housebound because of their condition. We are delighted that the relaunch of the BLF PenPals scheme has been successful with over 500 new people matched.

A recent membership survey showed 95 per cent of members always read *Breathing Space* magazine and 92 per cent rated it as 'excellent' or 'good' at keeping members up to date with BLF news. Health and medical articles were the most popular features among readers, together with those on lifestyle advice. Based on the results, we have shifted the editorial focus of *Breathing Space* to include more health and medical content.

We get approximately 60,000 website visits per month with around 175,000 web page views

Support for the BLF membership scheme continues to grow. By the end of June 2009, we had over 3,500 members

Research

It has been a challenging year for BLF research. In the current financial climate, ensuring that our investment into research will gain maximum value for people living with lung disease has required innovation, adaptation and flexibility in the way we fund science. The past few years have seen a dramatic change in the world's economy. This has resulted in people becoming understandably keener to influence how their donations are spent. Increasingly, donors are specifying that their research donations must be used for a particular purpose, usually for research into a specific disease. The consequence is that we are now receiving more restricted funding for research into specific disease areas and less funding for 'general' research with no such restriction.

During the first half of the year, many outstanding grants were awarded to exceptional scientists. However, the Scientific Committee was unable to fund several top-ranked applications because unrestricted funds were not available, and the available disease-specific funds did not match the subject areas of these applications. To address this frustrating situation, a working group was set up to review the structure and function of the BLF Scientific Committee, and the mechanisms it employs to call for and award research grants. The group has devised a system that is fairer, less labour-intensive for applicants and evaluators alike, and results in a lower proportion of unsuccessful applicants. Under this system, BLF grants are offered only when we are confident that funding is available to award top rank applications, and the application and evaluation process has been streamlined.

The system, started in January 2009, has proved successful and efficient in awarding the Mick Knighton Mesothelioma Research Fund Grant and a Pulmonary Fibrosis Project Grant. This ability to adapt to changing circumstances has enabled us to continue confidently investing our funds in world-class research. We have also continued to grow our relationship with the Medical Research Council, building on our previously-awarded joint studentship awards by agreeing to offer a joint fellowship award where the BLF will invest 25 per cent to the MRC's 75 per cent investment. This is an excellent way for the BLF to gain added value to our research spend.

Twenty travel fellowship awards of £750 were also made over the year. These awards, sponsored by Allen & Hanburys, helped exceptional junior scientists attend world-class research conferences in the US and Europe. And, for the first time, the BLF Research team has submitted abstracts of the findings of BLF survey work to one of these conferences: the European Respiratory Society in Vienna in September 2009. These were successful and this is the first time that BLF work has been recognised at an international respiratory science conference.

Finally, the Research team has also set up an ongoing programme of site visits to all BLF grant-holders. This has enabled us to build our relationship with grant-holders, learn more about the work they're doing and ensure that grants are running smoothly.



Grants Awarded

Research Fellowship Award F08/1

Dr Emmanuel Xystrakis, King's College London

Lay title: Study of the potential of vitamin D to improve current treatments for asthma

Amount awarded: £120,000

Duration: 36 months

TB Funds Award TB08/2

Dr Ajit Lalvani, Imperial College London

Lay title: Developing new tools to manage TB by understanding how the body fails to control TB in the setting of HIV infection

Amount awarded: £249,949

Duration: 36 months

TB Funds Award TB08/3

Dr Melanie Newport, University of Sussex

Lay title: Finding new drugs for tuberculosis: boosting natural immunity to kill TB

Amount awarded: £249,297

Duration: 24 months

Trevor Clay Memorial Grant TC08/5

Julia Bott, Surrey Primary Care Trust

Lay title: Does using oxygen during pulmonary rehabilitation give added benefit to those people whose oxygen levels drop only on exertion?

Amount awarded: £15,000

Duration: 24 months

Trevor Clay Memorial Grant TC08/6

Ms Janelle Yorke, University of Salford

Lay title: Development of a questionnaire to measure quality of life for people with pulmonary fibrosis

Amount awarded: £14,614

Duration: 14 months

Trevor Clay Memorial Grant TC08/7

Dr Diana Bilton, Royal Brompton Hospital NHS Trust

Lay title: Do physiotherapy joint and muscle movement techniques improve posture, pain, secretion clearance, lung measurements or quality of life during an inpatient stay for a chest infection in adults with cystic fibrosis?

Amount awarded: £13,948

Duration: 12 months

Trevor Clay Memorial Grant TC08/9

Dr Chris Ward, Newcastle University

Lay title: Gastro-oesophageal reflux disease (GORD) and its role in the development of chronic lung dysfunction after lung transplant

Amount awarded: £5,600

Duration: 12 months

Mick Knighton Mesothelioma

Research Fund Award MK09/1

Dr Sam Janes, University College London

Lay title: Treating malignant mesothelioma with stem cells

Amount awarded: £101,618

Duration: 18 months

Pulmonary Fibrosis Project Grant PF09/2

Dr Nik Hirani, University of Edinburgh

Lay title: The switch from normal lung healing to abnormal lung scarring – what is the cause and can it be modified?

Amount awarded: £149,845

Duration: 30 months

In the current financial climate, ensuring that our investment into research will gain maximum value for people living with lung disease has required innovation, adaptation and flexibility in the way we fund science.



FUNDRAISING

£3.5 million in donations has been received, enabling us to continue our life-changing work.

A fundraising challenge

Despite the difficult economic backdrop and uncertainty surrounding charitable giving over the past year, a great deal of progress has been made and good results achieved. Through a range of fundraising programmes and activities, a significant £3.5 million in donations has been received, enabling us to continue our life-changing work.

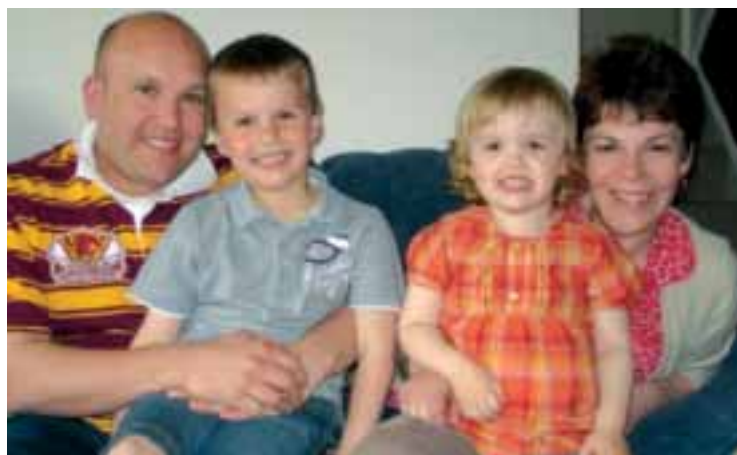
This year, we set out to increase our number of supporters and income across a wide variety of fundraising activities, while keeping our expenditure low – a difficult challenge in the current climate. Through careful cost control and maximising opportunities where possible, we managed to raise £4.00 for every £1 we spent on fundraising, which was an improvement on the previous year.

Most importantly this means that for every £1 donated by our supporters at least 90 pence went towards our charitable activity.

"If donors are going to invest in this they can rest assured that they are investing in an element of medicine that is neglected and ignored and they are going to be helping a lot of people that don't stand much of a chance of getting any help. I think the BLF and their donors are looking out for the people that are often forgotten. It's quite a noble thing for them to be doing really because there are many people that need help."

Kate Crees, Hannah Crees' mother

Crees family



Events

Runs continue to be the favourite in our programme and the London Marathon was another great success, yielding our largest team yet. Development is underway to make our events calendar even bigger and better for 2010.

"I decided to run the London Marathon in memory of a friend who sadly passed away from a lung disease the year before. I wanted to raise as much money as I could and was really pleased to have raised £2,835 for the British Lung Foundation. It was a personal honour to run in memory of my friend and to raise awareness of the BLF and the work they do."

Tony Davies, London Marathon '09

"I get so much out of raising money for the BLF. When raising money I can say: 'It is for the Pete Croft Breath of Life Fund.' It feels personal and drives me, but also I think of all those people that are going through what my Dad went through."

Madeline Croft, Pete Croft's daughter

Everyday support

Each year, an amazing amount of money is raised by our supporters. Whether it's through raffle tickets, Christmas cards, regular donations or remembering us in their will, it's all vital support that we can't do without.

Supporters from across Wales have been busy helping raise vital funds. In addition to those who abseiled, ran or walked, and organisations such as the Swansea Bay Business Club who gave us generous donations, we have been fortunate to receive a second Lottery grant which enabled us to reach out into many more communities. There have been a number of fundraising initiatives in Wales including a 'Love your Lungs' walk, Mid Wales walk and most notably Czech Wrecks.

We now have over 1,000 Breath of Life tribute funds, which enable people to remember and celebrate a loved one's life as well as creating a real connection with the work of the BLF.

Each year, an amazing amount of money is raised by our supporters

Dame Helena
Shovelton,
Chief Executive
BLF with
Aisling
Burnand,
Chief Executive
BioIndustry
Association

Partnership working

We would like to thank our trusts and foundations that have supported a variety of programmes and work, from funding the first UK palliative care respiratory nurse in Wandsworth through to helping us reach more people out in the community first-hand through our Breathe Easy support network.

Once again, our corporate supporters have continued to show unfailing support by partnering with us on a range of initiatives such as the work we've been doing on the Clinical Strategy for COPD, BLF Active and funding vital medical research into lung cancer.

There is no doubt that the year ahead will be another challenge, but through careful planning, efficiencies of working, creativity and energy, we hope to ensure that the BLF has a solid foundation of income to sustain it and meet its objectives in the coming year.



As we enter into our 25th anniversary year we will continue to rely on the generosity, support and commitment of thousands of people across the UK.

Without this financial support we would not be able to do the things that we need to do, and make a difference to so many men, women and children with lung problems. For this we are grateful to each and every one of you.

Finance

Income

Income was £5,405,682 (2008: £4,753,929) up by £651,753 (13.7%) from 2007/2008. The greatest increase was in income for activities in relation to Breathe Easy and patient support, up by £308,570. The total income of the Breathe Easy groups of £518,807 (2007/2008 £473,000) is included in this total.

Fundraising showed growth in corporate income to £929,302 (2007/2008 £516,065), but other fundraising activities showed smaller growth or falls in income: in memoriam up by £62,639, individual giving down by £158,512, trusts by £113,203, events by £102,765 and legacies by £102,765. Investment income reduced by £116,233.

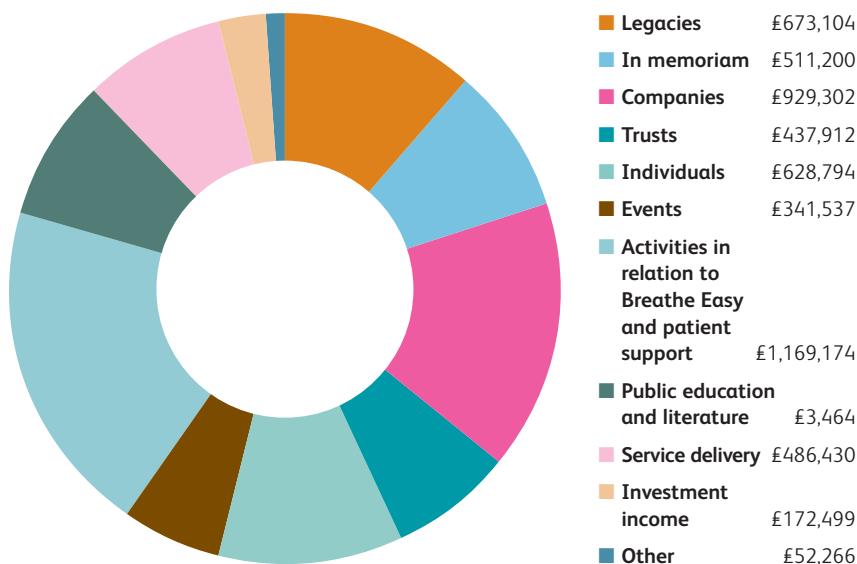
In response to the falls in certain income streams, the BLF is developing a trading company to deliver services that would benefit people with lung disease. In its first year, this contributed £486,430. This comprised the sale of COPD Self Management Plans and Exercise Diaries, together with the awareness-raising events both in the COPD 'hot spots' and workplaces.

Expenditure

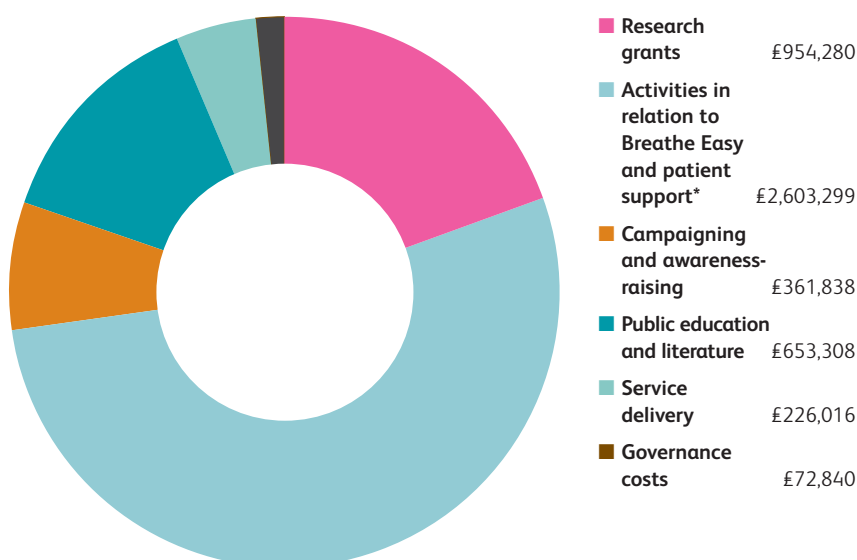
Expenditure totalled £5,763,660 (2007/2008 £5,462,284), an increase of some £301,376 (5.5%). The costs of generating voluntary income include direct fundraising costs, salaries and overheads of fundraising staff. These costs were £892,079, a significant saving on the previous year's figure of £1,126,402, and equated to 16.5p for every £1 raised (2007/2008 23.7p).

Expenditure on charitable activities increased by 12.4% to £4,871,581 (2007/2008 £4,335,882). Such expenditure equated to 90.1p for every £1 raised (2007/2008 91.2p). Charitable activities includes the expenditure of Breathe Easy groups, and the expenditure on salaries and overheads of staff involved in delivering our charitable objectives.

This summarised information has been taken from our audited financial statements. These financial highlights may not contain sufficient information to allow a full understanding of the financial affairs of the charity. Copies of the Trustees' Annual Report and the audited financial statements are available from our offices, our website (www.lunguk.org) and from our page on the Charity Commission website, www.charity-commission.gov.uk.



Total income £5,405,682



Total charitable expenditure £4,871,581

*This figure includes the expenditure of all the BE groups

Thank you to everyone who has volunteered, donated or taken part in an event during 2008/09. Your support is greatly appreciated.

Trusts, foundation and statutory supporters

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LOTTERY FUNDED



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**Love
your
lungs™**

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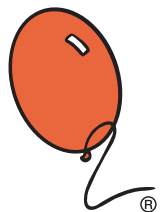
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