

# Preventing Supporting Caring



**For over fifty-five years we, as a community, have worked together for and on behalf of people affected by cancer. We are dedicated to preventing cancer, detecting it early and fighting it at every level.**

**Rhona Nally**  
Cancer Survivor

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**Pauline Williams**  
We Can Quit Facilitator

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**Léa Hearst**  
Cancer Survivor



See our *Strategic Goals in Action* signposts in our Strategic Review section:



See more about:  
**Goal One:** Reducing the Risk of Cancer



See more about:  
**Goal Two:** Improving Lives

**Michael Doyle**  
Volunteer Driver



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See more about:  
**Goal Three:** Leading Excellent and Collaborative Research



See more about:  
**Goal Four:** Informing and Influencing Public Policy

# About Us

**We are a community of survivors, families, patients, friends, nurses, doctors, scientists, professionals, supporters and volunteers.**

For over fifty-five years we, as a community, have worked together for and on behalf of people affected by cancer. We are dedicated to preventing cancer, detecting it early and fighting it at every level.

We strive to ensure that fewer people in Ireland get cancer and that those who do get the best care, treatment, information and support. We listen to them and support them. We provide information, care and help and we fund research and guide policy.

We are a strong and independent advocate for patients and their families.

Our fundraising base and public support strengthens our advocacy role on their behalf.

We want a future without cancer. Each year we learn more about what causes it and how to prevent it. We learn how to improve the quality of life of our patients, their friends and their families, as new treatment options become available. Each year brings new developments and new hope.

2018 has been no different.

**55yrs**



working together for and on behalf of people affected by cancer

 Find out more at [cancer.ie](http://cancer.ie)





# Our Vision

**A future without cancer**

# Our Mission

**To eliminate cancer**



# Our Values

## **Compassionate and Caring**

We are here for everyone affected by cancer in Ireland. From the moment you are diagnosed, right through treatment and beyond we are there for you. We listen, we support, we provide care and practical help. We are a community of cancer patients, families, supporters, survivors, researchers and volunteers.

## **Available and Accessible**

We are determined to help everyone affected by cancer, no matter who you are or where you are from. We know that people living in disadvantaged communities have a greater risk of getting and dying from cancer. We are working collaboratively with these communities to change that.

**4/10**

Cases of cancer are preventable

 Find out more at [cancer.ie](http://cancer.ie)





## **Excellence**

We strive for excellence in all we do. We are in constant contact with people affected by cancer, the medical community and the public. These connections help us to find out what people need and what works best for them. Our services and decisions are informed by best quality knowledge, data and expertise.

## **Collaboration and Partnership**

We believe collaborating and working in partnership is the best way to achieve our vision. We build alliances and work with local communities and global partners to deliver the best results.

## **Transparency and Integrity**

We work to the highest standards of governance and accountability. This means we are honest and ethical in our work and worthy of the ongoing trust and support of our volunteers and donors. Accountability, transparency and cost effectiveness are vital to us.



**Cancer remains one of Ireland's greatest health challenges: on the basis of current projections, some 500,000 Irish people will experience a cancer diagnosis over the next ten years.**

**Dermot  
Breen**





## A message from the Chair

Advancements in cancer research, therapies and care services are ensuring that more people are being cured of their cancers with survival rates exceeding 50% in aggregate, and improving. Nonetheless, the challenge for the future is considerable, and a growing reality for those entrusted to provide the necessary services and care.

Against this backdrop, the Irish Cancer Society's purpose and role becomes ever more important: ensuring that everybody experiencing cancer benefits from the highest standards of diagnosis, care and support; that Irish cancer patients have a "voice" for attention and change; that Government is challenged to recognise and act on what it must do; that medical science is supported to advance standards of diagnosis and care; and that Ireland's consciousness of cancer is continually reinforced.

We derive our mandate from the community of people concerned about cancer, be they patients, survivors, families, carers, medical practitioners, researchers, volunteers or supporters. We are driven by a desire to ensure we meet their needs and exceed their expectations on all fronts, and ensuring that our community is supported by a strong and committed voice for action and change.

Over recent years we have recorded significant progress across our strategic objectives: Reducing the Risk of Cancer; Improving Lives; Leading Excellent Collaborative Cancer Research; and Informing and Influencing Public Policy. Major strides have been made across all objectives, which are outlined in detail in this report. However, considerably more progressive change is demanded if we, as a nation, are to address the significant cancer challenge we are facing.

As an organisation, the Irish Cancer Society has commenced a progressive transition to meet the future challenges. Under new leadership, we have injected fresh professionalism and energy to our activities, are proactively

strengthening our engagement with and support for cancer patients, and accelerating our attention to our broad range of stakeholders. We have commenced investment in new initiatives to enhance our capacity to deliver, and embarked on developing a new strategic vision and direction to position the Society for the future. Combined, these measures will equip the organisation to adopt leadership positions in the emerging environment.

We are continually humbled by the extraordinary support we receive from the Irish public both in terms of volunteering to support our cause and activities, and in raising essential funds. Only 3% of our income arises from State sources. We are thus highly dependent on the support of the Irish public, without which we could not deliver our services. Total income in 2018 amounted to €22.3 million compared to €26.7 million in 2017, a year in which income was significantly enhanced by an exceptional bequest of €6.0 million. The outturn for the year ensures the continued sustainability of the Society in supporting the needs of our beneficiaries.

Essential fundraising activity and performance remained at a high level with continued active engagement of individual volunteers and communities across Ireland, while our corporate partnership programmes were expanded. Our fundraising programmes, while designed to raise funds, also act as important awareness raising platforms for the key issues and needs surrounding cancer.

We remain fully cognisant of the trust that the Irish public places in us to deliver our mandate, and our need to continually strengthen our organisation to sustain that support. Good governance remains a key foundation of the Society, underpinning public trust and goodwill. Governance enhancements during the year, overseen by the Audit and Risk Committee of the Board, include improved compliance reporting, risk assessment and management, and transparency through performance

reporting. The Society also welcomes the publication of the Charities Regulatory Authority Governance Code as a positive step in strengthening governance across the charity sector.

Two important issues continue to concern us. One is the ongoing revelations surrounding failings in the CervicalCheck screening programme, and the other relates to delays in the implementation of the National Cancer Strategy 2017-2023. The shortcomings which have become apparent on both issues are deeply concerning. There is an onus on the health authorities to act responsibly and rapidly to restore patient care standards, recover public confidence, and to invest in cancer care services on the scale required for the future. People dealing with cancer and the many thousands likely to be affected deserve nothing less.

As we progress towards a new era for the Irish Cancer Society, I wish to acknowledge the commitment and compassion of the many thousands of volunteers and supporters across Ireland who enable our work every year. Also I acknowledge the dedicated team of professionals who work at the Society for their outstanding energy and commitment in meeting the needs of so many cancer patients and survivors. I also wish to commend the outstanding voluntary commitment of members of the Board and our committees who provide essential governance and direction for the organisation.

We will continue to be driven by a desire to help those who are and will be affected by cancer, to drive real and lasting change in the standards of cancer services in Ireland, and ensure that Ireland faces up to the challenge that cancer presents.

**Dermot Breen**  
Chairman

**Cancer patients and their families deserve better. They deserve for the Government to match its promises with resources and we will keep pushing until they do.**



**Averil  
Power**

## A message from the CEO

Since I joined the Irish Cancer Society in January 2018, I have had the enormous privilege of meeting people all across Ireland whose lives have been touched by the kindness and dedication of our volunteers, staff, researchers and supporters.

I've met Brian, whose cancer was caught early and cured thanks to a call to our Nurseline. I've met Rhona, who was previously told she had months to live but is still thriving years later thanks to a cancer trial like the ones we fund at Cancer Trials Ireland. I've also met many families whose loved ones were able to spend their final days at home, in the comfort of their own surroundings, thanks to our Night Nursing service. We are delighted to share some of these stories with you in the coming pages.

It has also been fantastic to meet so many incredible volunteers who raise funds for us, drive people to their chemotherapy appointments and provide peer support to patients. I have also met many inspiring patient advocates like Léa, the young mum on our front cover and the late Laura Brennan who have used their voices to help others.

Ireland lost a true hero on 20th March 2019 when Laura died, aged just 26. However, her legacy will live on in the women who will be spared cervical cancer because of her tireless campaigning. Thanks to Laura, Ireland's HPV vaccine rate increased from just 51% to over 70%. The Irish Cancer Society won't give up until we realise her goal of protecting 100% of our girls and boys against HPV.

In 2018, a number of other women affected by cancer became household names, including Vicky Phelan, Lorraine Walsh and the late Emma Mhic Mhathúna and Orla Church. Sorely let down by the system they trusted, these women have campaigned tirelessly to improve the CervicalCheck programme for others.

Your support enabled us to stand shoulder to shoulder with these women and their families from the start. We offered free counselling and advice and set up the 221+ support group with Vicky, Lorraine and Stephen Teap. We also continue to work hard to restore faith in our screening services and ensure the full range of recommendations in the Scally report are implemented.

Our partnership with Movember enabled us to improve outcomes for men with prostate cancer through national research and a specialised prostate cancer nursing service at St James's Hospital Dublin and University Hospital Galway.

We are also lobbying for better public services for all patients through full implementation of the Government's 2017-2026 National Cancer Strategy. 2018, the first full year of this new plan, was supposed to deliver reduced waiting times for cancer tests, surgery and radiotherapy appointments. Unfortunately, a lack of progress meant key targets were missed, causing huge anxiety for patients and their families.

Cancer patients and their families deserve better. They deserve for the Government to match its promises with resources and we will keep pushing until they do.

They also deserve world-class services and support from the Irish Cancer Society.

When Daffodil Day first began in 1986, just three out of ten Irish people survived their cancer diagnosis. Today, six out of ten do. This is thanks in no small part to advancements in cancer research and services we have helped to deliver with the generous support of our donors.

However, we can – and must - do better. Too many people are still

affected by cancers which could have been prevented. Waiting times for some procedures are excessive. Families are struggling to cope with the financial cost of cancer. Cancer survivors aren't getting enough help and support to deal with the long-term impact of their treatment.

Our new 5 year strategy, to be published shortly, will set out how we intend to tackle these challenges through our support services, research and advocacy work.

In developing it, we carried out our largest ever public consultation, extensively reviewed our current work and consulted with leading cancer charities internationally. The result will be an ambitious and forward-thinking plan with a range of exciting new initiatives to ensure more people survive and thrive after cancer.

Realising our ambition will require much greater investment by the Society than ever before. In 2018 we met our fundraising target and finished the year with strong reserves. This will enable us to start some new initiatives straight away. To deliver the rest, we will have to inspire more people to join with us. As only 3% of our funding comes from the State, raising sufficient funds will be a tough challenge. But I am confident we can do it.

As a community of volunteers, donors, supporters, nurses and staff, we have already achieved so much together. Now it's time to take it to the next level.

Because together we are stronger than cancer and we won't give up until it does.



**Averil Power**  
CEO

# Cancer in Ireland

**It was estimated that in 2018 more than 40,000 people in Ireland were diagnosed with cancer or a related tumour.**

More people in Ireland are being diagnosed with cancer now than ever before. Our services and supports are more in demand and this will continue for the foreseeable future. The need for our work in research and advocacy is more important now as we try to find better ways to prevent, diagnose and treat cancer.

We can all do more to reduce our risk of getting cancer. Four in ten cancer cases are preventable. Yet many people are still unaware of cancer risk factors. This highlights the need to raise awareness about the causes of cancer and to provide services that support people to live healthier lives.

Being told you have cancer can be devastating. The good news is that many people go on to live long lives after a diagnosis. There are now more than 200,000 cancer survivors in Ireland. This means that there is a growing need for the support that the Irish Cancer Society provides for survivors.

## Cancer Incidence in Ireland

 **40,000**

There are more than **40,000** new cancer diagnoses each year

 **150**

Every day **150** people are diagnosed with cancer

 **3'**

Every **three** minutes someone is told they have cancer

**150**

people are diagnosed with cancer every day

**4/10**

cancers are preventable

## Did you know?



**Four out of ten** cancer cases are preventable



Being a healthy weight **can prevent cancer**



Not smoking **can prevent cancer**



Sensible alcohol intake **can prevent cancer**



Regular exercise **can prevent cancer**

# 200,000

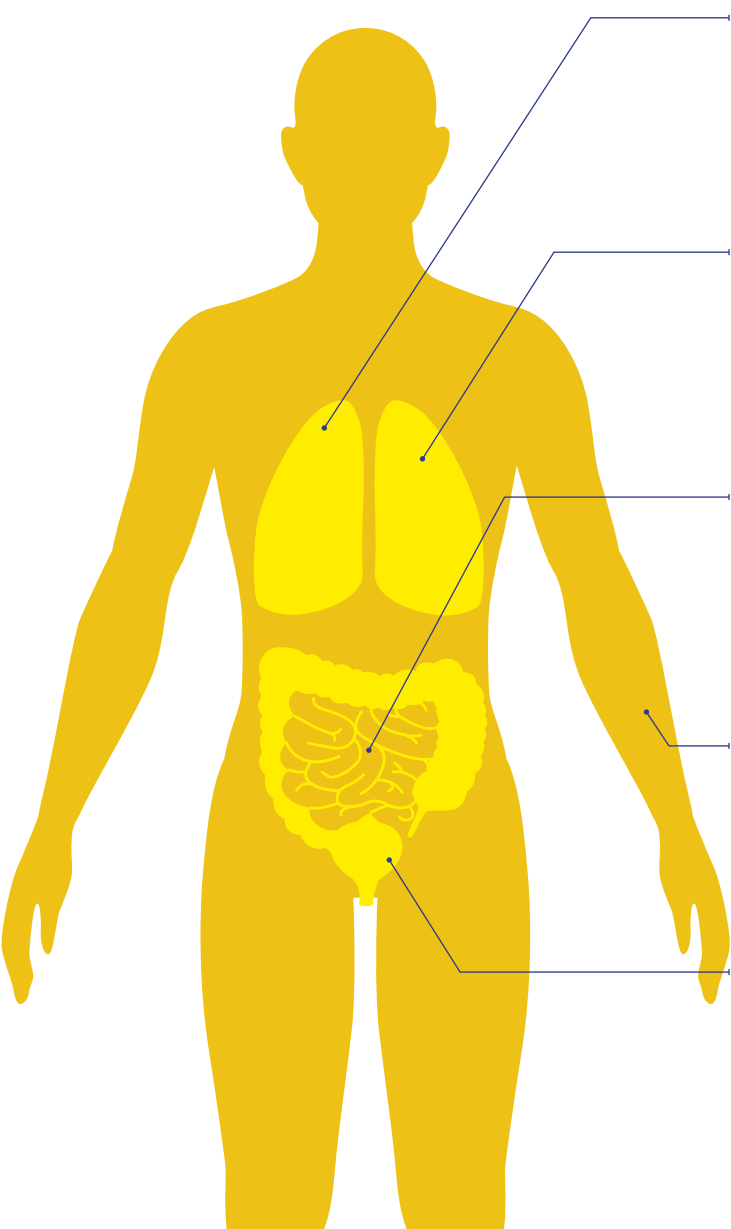
There are now more than 200,000 cancer survivors in Ireland

## Cancer Nurseline



Contact our Cancer Nurseline on Freephone 1800 200 700  
[cancernurseline@irishcancer.ie](mailto:cancernurseline@irishcancer.ie)

Find out more at [cancer.ie](http://cancer.ie)



### Lung Cancer

**2,500**  
New cases each year  
**18%**  
Survival rate

**Who gets it...**  
   
**60%** **40%**

**Prevent it...**  
Don't smoke. Avoid asbestos and radon. If you are concerned about symptoms, consult your GP.

### Breast Cancer

**3,100**  
New cases each year  
**83%**  
Survival rate

**Who gets it...**  
   
**1%** **99%**

**Prevent it...**  
Eat well. Exercise. Cut down on alcohol. Go for screening when called.

### Bowel Cancer

**2,800**  
New cases each year  
**62%**  
Survival rate

**Who gets it...**  
   
**60%** **40%**

**Prevent it...**  
Eat well. Exercise. Cut down on alcohol. Go for screening when called. If you are concerned about changes in your bowel habits, consult your GP.

### Skin Cancer\*

**12,000**  
New cases each year  
**98%**  
Survival rate

**Who gets it...**  
   
**60%** **40%**

**Prevent it...**  
Be smart in the sun. Get noticeable changes in moles checked by your GP.

### Prostate Cancer

**3,500**  
New cases each year  
**92%**  
Survival rate

**Who gets it...**  
   
**100%** **0%**

**Prevent it...**  
Eat well. Exercise. If you are concerned about symptoms, consult your GP.

\*Melanoma & Non-Melanoma

# Report of the Board

## The Board of the Irish Cancer Society presents its report and financial statements for the year ended 31 December, 2018.

In 2013, we agreed an ambitious strategy to match our vision. This strategy: *Towards a Future without Cancer* includes far reaching and comprehensive plans and priorities. It is still guiding us today.

In 2017 the Board took the decision to extend the strategy for a further two years to allow our new CEO, appointed in January 2018, to undertake a full strategic review. A new five year strategy will be published this year.

The targets set in our current strategy, *Towards a Future without Cancer* are still relevant and ambitious and continue to stretch us.

We continued to make progress towards our goals in 2018. Our main achievements and highlights for the year are documented in the following pages.

The strategy continues to be a living plan, allowing us alter our responses in real time, when we have faced challenges. We have been able to adapt and change as we see what is working and, indeed what is not working. We believe we have made good progress on our goals and objectives and we look forward to furthering our ambition this year.





## **In this section...**

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# Strategic Review

## Goal One

### Reducing the Risk of Cancer

**Goal Key:**

-  Complete
-  In Progress
-  Not Complete

Our strategic targets	Status	Progress in 2018	Commentary
1. The establishment of "Cancer Action Communities".		→ Our Cancer Action Community smoking cessation programme expanded to 8 communities in Cork and Dublin. We Can Quit supported 247 women to begin their smoking cessation journey. One hundred and three women had successfully quit at the end of 12 weeks.	» Stopping cancer before it starts is a core goal of the Irish Cancer Society. We know 4 out of every 10 cancers are potentially avoidable. Since 2013 we have changed the way we deliver cancer prevention programmes focusing on delivering novel targeted programmes like We Can Quit and Fit for Work & Life in areas of disadvantage where we know cancer rates are highest. Through these Cancer Action Communities the message of taking action to prevent cancer is getting through to those who need it most.
2. The introduction of innovative, evidence-based cancer prevention programmes for targeted population groups in the area of smoking and lifestyle.		→ Reaching out to those who are out of work, the Fit for Work and Life programme supported 121 participants in communities in Dublin, Monaghan and Limerick, enabling lifestyle change individually and in communities.	» Over the past 5 years we have made significant progress in lowering smoking rates through reducing initiation and helping more smokers to quit. The daily adult smoking rate has fallen from over 20% to 17% and we expect to see rapid progress following the introduction of initiatives like plain packaging. Smoking rates amongst children by 2015 have fallen to 8% (boys) & 7% (girls) and we expect to see both below 7% when the 2018 figures are available.
3. The resourcing and support of communities to become smoke-free environments.		→ We worked with 45 organisations across 18 counties and 459 young people to develop, create and promote their X-HALE films in 2018 supporting their communities to strive towards smoke-free status.	
4. A reduction in smoking prevalence nationally to 15% in adults and 7% in young people by 2017.		→ We strengthened relationships with Cork City Council and other partners through the Cork Cancer Action Network which embeds our cancer prevention message in the health promotion work of partner organisations.	



**Goal Key:**

- ✔ Complete
- ⌚ In Progress
- ⊗ Not Complete

# Goal Two

## Improving Lives

**Our strategic targets**

Status

**Progress in 2018****Commentary**

**1. We will advocate for supports and services to be provided by the Government and HSE which address the identified gaps in statutory services and follow-up care.**



→ The Society's Care, Advice, Support and Education (CASE) nurses fill a gap identified in follow-up care for men diagnosed with prostate cancer. In 2018, 482 men received treatment decision support assistance, along with advice and support for follow-up care.

» We have expanded the way in which cancer patients can reach us for support through investment in enhanced physical infrastructure, (Daffodil Centres), and digital infrastructure, (social media and web channels). This has allowed us to reach a greater number of patients each year over the course of our strategy.

**2. By 2017 80% of people with a cancer diagnosis will be accessing the Irish Cancer Society's Cancer Information Service as a valued source of support.**



→ Over 43,000 people made contact with our Daffodil Centres, up 7% on the previous year. Added to almost 4,000 people who contacted our freephone Cancer Nurseline 1800 200 700 and the tens of thousands who have used our publications and website the Society reached more people impacted by cancer than ever in 2018.

» We have ensured supportive care for cancer patients is a priority area for Government, as reflected in the recommendations regarding survivorship and psycho-oncology in the 2017-2026 National Cancer Strategy. We are now demonstrating and piloting programmes like CASE and Understanding Chemotherapy to demonstrate best practice and to push for progress in these important areas.

**3. Informed by our assessment process, by 2017 we will have overhauled our information, support and community services, as required, to ensure their increased relevance and impact in meeting the identified needs of target populations. The resourcing and support of communities to become smoke-free environments.**



→ Our Real Cost of Cancer report identified transport and parking costs as being a significant challenge for cancer patients. In response our Volunteer Drivers drove 1,515 chemotherapy patients to 12,446 appointments across the country.

**4. Where appropriate, the Society will pilot new services to provide evidence based programmes that will be evaluated and their outcomes published.**



→ During 2018, 1,713 people attended Understanding Chemotherapy sessions in seven cancer treating hospitals. This pilot programme supports both patients and nursing teams in better preparing patients for their treatment.

**Goal Key:**

- ✔ Complete
- ⌚ In Progress
- ⊗ Not Complete

# Goal Three

## Leading Excellent Collaborative Research

**Our strategic targets**

Status

- |  |    |
|--|----|
| 1. Establishing up to five Collaborative Cancer Research Centres by 2017, leading to a greater understanding of cancer patterns in Ireland and the development of strategies which can be tested clinically. | ⊗* |
| 2. Developing a Cancer Research Strategy for Ireland in consultation with other organisations, including the HRB, SFI and ICORG.   | ⌚  |
| 3. Developing research to define and evaluate the factors that help people to survive cancer.  | ⌚  |
| 4. Identifying clear guidelines on how inequalities of access to prevention, screening and treatment in cancer can be resolved.  | ⌚  |

**Progress in 2018**

- The Irish Cancer Society's first Collaborative Cancer Research Centre BREAST-PREDICT has 17 novel drugs currently in pre-clinical testing. Also in development are 7 breast cancer diagnostic tests.
- In 2018 the Society launched two new research awards that were co-funded with other national organisations.
- The Irish Prostate Cancer Outcomes Research (IPCOR) has registered over 5,000 patients across 16 hospitals. It is hoped that information from this study will help improve survival rates for prostate cancer in the future.
- We have collaborated with NCRI to research lifestyle risk factors and cancer incidence in Ireland.
- We have delivered 25 research talks on a variety of topics and subjects across the cancer spectrum.

**Commentary**

» From new treatments to innovative ways to prevent and detect cancers, the impact of cancer research has seen more Irish people survive the disease than ever before.

In 1997 4 in 10 Irish cancer patients were alive 5 years after their diagnosis. Today, that figure is 6 in 10, thanks in large part to huge strides in cancer research. We have invested in two collaborative cancer research centres since 2013 – BREAST-PREDICT and Blood Cancer Network Ireland. The total commitment over the lifetime of the projects is €8.9 million. BREAST-PREDICT's goal is that each breast cancer patient in Ireland should have their treatment plan tailored for their individual cancer. Most women diagnosed with breast cancer now survive, due to earlier diagnosis and improved treatments. Our aim is to better predict which therapies are best for each patient, giving all breast cancer patients the best possible chance at a long and healthy life. Blood Cancer Network Ireland (BCNI) has given blood cancer patients in Ireland the opportunity to be among the first in the world to test new, potentially life-changing drugs and treatments through early-stage clinical trials.

Both centres have made significant contributions to research and it's clear that this model generates leadership capacity and the ability to leverage additional funding. However, such centres are costly and our income did not allow us to fund the additional three centres that were anticipated in the lifetime of this current strategy.

\*Successfully funded two of the five centres. Funding constraints prevented the completion of the planned five centres.

**Goal Key:**

- ✓ Complete
- ⌚ In Progress
- ⊗ Not Complete

# Goal Four

## Informing and Influencing Public Policy

**Our strategic targets**

Status

**Progress in 2018****Commentary**

**1. The Irish Cancer Society's emphasis on reducing cancer risk and supporting survivors and recognising and acknowledging the link between health inequalities and cancer risk, will be clearly visible in a new National Cancer Strategy.**



- In March 2018, after sustained pressure from the Society, Minister Harris ordered a review of parking charges at all public hospitals.
- We successfully lobbied, in partnership with Irish Heart Foundation, for an increase in tobacco tax.
- We successfully campaigned to extend the HPV vaccine to 30,000 boys every year from September 2019.

- » Through the lifetime of our current strategy we have changed the way we advocate. We are listening to patients and focusing more on what is important to them. We are using this feedback to inform our work.
- » Our work on debt collection, car parking charges and in-patient charges reflects this new approach.
- » We use an evidence based approach to define our campaigning. This allows for a longer term, more layered and connected approach to our advocacy work.
- » As well as the patient focussed advocacy work, we have also made significant strides in major health policy areas such as tobacco, vaccines, sunbeds and alcohol cancer labelling.

**2. The new Tobacco Control Strategy will highlight the importance of setting specific, measurable targets to reduce smoking. It will place a particular emphasis on disadvantaged communities.**



- In December we highlighted the ongoing issue of referring cancer patients to debt collectors for unpaid charges.
- Throughout the year we monitored progress on the National Cancer Strategy and held Government to account on its commitment.

**3. There will be widespread public recognition of the link between health inequalities and cancer, and the need to take action at a personal, community and societal level to reduce the risk and prevalence of cancer in Ireland.**



- We published a report in partnership with the National Cancer Registry of Ireland, in relation to the numbers of cancer patients diagnosed in emergency departments. Cancer patients from the most disadvantaged communities are 50% more likely to be diagnosed via emergency presentation than those from more affluent communities. The Society proposed a number of measures to tackle emergency presentation of cancer, especially targeting those from disadvantaged communities.

**Our Strategic Goals**

Our focus in 2018

# Goal One

## Reducing the Risk of Cancer

**Four out of ten cancers cases are preventable. For example, we can watch what we eat, choose not to smoke, limit our alcohol consumption and take regular exercise. Our goal is to reduce the risk of cancer. In support of this goal we run programmes designed to raise awareness of cancer symptoms, increase cancer prevention and to help people to make lifestyle changes that can help reduce their risk of cancer.**

**94**

In 2018, 94 Community and Workplace events were facilitated by volunteers and cancer prevention staff across Ireland. 4,624 people attended these events.



Find out more at [cancer.ie](http://cancer.ie)



# 35,584

**Our X-HALE films were viewed 35,584 times online in 2018**



Find out more about our work at: [www.cancer.ie/xhale](http://www.cancer.ie/xhale)

One of the major risk factors for cancer is smoking. Startlingly, research tells us that about 8% of 10 – 17 year olds in Ireland smoke. In response we developed the award winning X-HALE programme to encourage young people in the communities most affected by smoking, to become smoke-free.

In 2018, we worked with 45 organisations across 18 counties. We helped 459 young people create and promote their smoke-free X-HALE films.

X-HALE won first prize at the 2018 EU Health Awards for NGOs Working to Prevent Tobacco Use. The prize of €20,000 was awarded for the innovative social dimension of this programme and how we approach vulnerable groups. We will re-invest this money in making the 2019 campaign bigger and better than ever.

We know people in disadvantaged communities have higher risks of cancer and poorer chances of survival. We also know things like long term unemployment and poor quality housing are related to less healthy lifestyles. That is why we developed the Fit for Work and Life programme and work with community partners to promote healthy behaviour, raise awareness of cancer and help people in poorer communities to make positive changes to their lifestyles.

Over the year, 108 people graduated from the programme in communities in Monaghan, Limerick and North Dublin.

In 2018 we continued to work with communities where disadvantage is high. 247 women made the decision to become smoke-free and registered with one of our 22 We Can Quit programmes. We Can Quit runs over 12 weeks in parts of Cork and Dublin where smoking rates amongst women are particularly high.

This free programme gives women one-to-one support and free Nicotine Replacement Therapy. Of those 247 women, 144 completed the programme, with 103 women free from tobacco at the end of the 12 weeks – a phenomenal success rate when compared to other smoking cessation programmes. We Can Quit has now been listed in the HSE Tobacco Control plan.

### **Looking forward**

**In 2019 we will continue our work to empower communities to make real changes to reduce their overall risk of getting cancer. We will continue to monitor and evaluate our work to ensure that all our programmes are grounded in research and evidence.**

**P**auline Williams was a smoker for 33 years before her doctor advised her to contact the Irish Cancer Society for support in trying to quit. Pauline took part in the 12-week course with like-minded women. They were all determined to kick the habit for good.

**Pauline  
Williams**



The We Can Quit programme offered Pauline free nicotine replacement therapy, a weekly smoking cessation group and one-to-one support.

*I found it absolutely brilliant because you have the support of the facilitators, the support of the other ladies in the group and the nicotine replacement which the Society actually pays for if you don't have a medical card.*

*You don't have to quit on week one which is really great. You get a quit date a couple of weeks in.*

The reaction of her family and friends to her smoking was a big factor in Pauline's decision to quit.

*Peer pressure is a big thing. Even in my day it was cool to smoke. Nowadays, the culture is starting to change. The ladies in the programme are saying it's their grandchildren begging, "nanny please don't smoke" or the kids wanting them to quit.*

*I believe in it so much that last year I actually trained to be a facilitator, so in January I did my first one.*

Pauline has been off cigarettes for over three years now, something she puts down to her experience with We Can Quit. She's since gone on to train and become a facilitator for the programme, which takes place in Dublin and Cork every year.



# 103

**We Can Quit supported 247 women to begin their smoking cessation journey. One hundred and three women had successfully quit at the end of 12 weeks.**

 Find out more at [cancer.ie](https://www.cancer.ie)

**Peer pressure is a big thing.  
Even in my day it was cool  
to smoke. Nowadays,  
the culture is starting to change...**



See more about:

**Goal One:** Reducing the Risk of Cancer

**Our Strategic Goals**

Our focus in 2018

# Goal Two Improving Lives

**Every day in Ireland, 150 people are diagnosed with cancer. That is one person every three minutes. As a result, there is an enormous need for support and information for patients across the country. The Irish Cancer Society is there to provide support every step of the way.**



# 47,000

In 2018, over 47,000 people received free information and advice from our Cancer Nurseline and Daffodil Centres.

 Find out more at [cancer.ie](http://cancer.ie)





**“It is a place where you feel safe to rant and rave and not be judged as you come to cope and accept what is happening.**

**It’s a place where you can debrief, you are listened to, and guidance is shown to you. It’s where staff see you as you, not someone with ‘cancer’. To be able to ‘drop in’ was amazing. The staff were always friendly and never rushed me. I would be lost without it.”**

Daffodil Centre respondent\*

The Irish Cancer Society’s support services include the Cancer Nurseline, a freephone call service which offers reassurance and practical information from experienced cancer nurses to patients, their loved ones and healthcare professionals. We also have 13 Irish Cancer Society Daffodil Centres, located in hospitals across Ireland, where cancer nurses provide the same cancer information and support through face-to-face interaction. In 2018, over 47,000 people received free information and advice from the Cancer Nurseline and Daffodil Centres.

Night Nursing is end of life care for cancer patients, allowing patients to remain at home for the last days of their lives, surrounded by their families and loved ones. In 2018, the Irish Cancer Society night nurses provided 7,400 nights of care for 1,800 cancer patients.

Local support is available in communities across the country. The Irish Cancer Society works with local cancer support centres to ensure cancer patients have access to counselling. In 2018, 7,000 free sessions were provided to help people cope with the impact of a cancer diagnosis in their lives.

In 2018, more than 1,500 cancer patients were driven to over 12,000 chemotherapy treatments through the Society’s Volunteer Driver Service. The service is for chemotherapy patients who have difficulty getting to and from appointments. In addition we gave nearly €300,000 from the Travel2Care transportation assistance fund to help 1,036 patients towards the cost of traveling to care. This is made available by the National Cancer Control Programme (NCCP).

We provide financial aid to families of children with cancer through the Children’s Fund. In 2018, grants totalling €200,000 were given to families of 226 children who were diagnosed with cancer nationwide.

We are the leading provider of cancer information in Ireland and are a key source of trusted information on a range of topics including cancer types, treatments, side effects and coping with cancer. In 2018, over 350,000 people visited our cancer support pages on [www.cancer.ie](http://www.cancer.ie) and 530,000 cancer information booklets were provided free of charge across the country.

We continue to strive to be a literacy-friendly organisation, presenting the general public with information that is easy to understand. We work closely with the National Adult Literacy Agency and in 2018 we received our third NALA plain English mark for our new ‘Weight and Cancer’ publication.

Our Manual for Men won the 2018 Patient Lifestyle Education Project of the Year category at the Irish Healthcare awards. We developed our manual on the back of the Mechanic Study (2017) which showed that men with lower literacy levels were less likely to look up health information. The Manual for Men gives cancer information in an easy to understand way. It is designed to encourage men to find out what they can do to reduce their risk of cancer as well as how to spot cancer early.

#### **Looking forward**

**In 2019 we will continue to be there for people affected by cancer and their families. We know every cancer experience is different and one-to-one support is vital. We will expand and deliver more services and supports such as chemotherapy education, Volunteer Drivers and our Daffodil Centres.**

**C**aroline Costelloe and her family used our Night Nursing Service to care for their mum at home in her final days.

# Caroline & Charmaine



*My dear mum was diagnosed with pancreatic cancer in March 2016. She had been remarkably healthy prior to this and spent much of her time doing good work for others. She was 73 years young at the time of her diagnosis and very independent.*

*Our mum started on a 21 month journey of chemotherapy, radiotherapy and had a whipple procedure in September 2016. She had the loving support of her family, three daughters and one son. My father had died 15 years prior to this.*

*My sister Charmaine and I brought her to every hospital appointment and cared for her in her own home. These were her wishes. When she got news that the cancer had spread to her lymph nodes*

*and her pain was increasing, she was referred to the palliative care team in Raheny.*

*My sister and I stayed with mum all of the time in her last two months. We were up night and day, one of us maybe getting a couple of hours sleep while the other was on duty.*

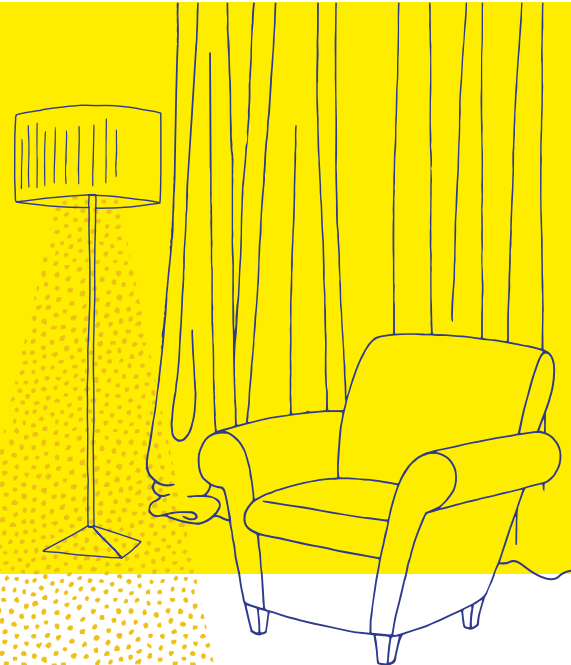
*We had reached breaking point towards the end and this is where God stepped in. After a harrowing weekend with mum we learned that a night nurse would come from the Irish Cancer Society to take over our mum's care from 11pm to 7am.*

*Deirdre arrived at 11pm and from that moment on we had the extra support we needed. We were able to continue*

*to keep mum in her own home of 49 years, with all her belongings around her and her own fire lighting. For mum's remaining nights, we got to recharge our batteries knowing that she was being cared for as we cared for her. We were cared for also; the support, the communication links were great. We felt very much part of mum's care team.*

*I truly do not know how we would have managed without the Irish Cancer Society nurses. Mum died peacefully on the 4th December at a quarter to three in the afternoon. Above all mum's last wishes were met. She remained at home and enjoyed many happy times and we got the opportunity to make happy memories thanks to the great help and support of the Irish Cancer Society.*

**I truly do not know how we would have managed without the Irish Cancer Society nurses.**



**1,800**

**In 2018, the Irish Cancer Society night nurses provided 7,400 nights of care for 1,800 cancer patients.**

**+** Find out more at [cancer.ie](http://cancer.ie)



**P22**

See more about:  
**Goal Two: Improving Lives**

**Our Strategic Goals**

Our focus in 2018

# Goal Three

## Leading Excellent Collaborative Research

**In 2018, the Society funded world-class research on a broad range of topics to achieve our strategic goal of leading excellent collaborative research.**

**Overall, we spent €2.2 million in 2018 on innovative research projects in Ireland. This was also the first year we consulted cancer patients and survivors on what research we should fund.**

**€25m**

Since 2010, we have invested over €25 million in innovative research projects.

 Find out more at [cancer.ie](http://cancer.ie)



Irish Cancer Society BREAST-PREDICT researchers Dr. Lisa Dwane and Dr. Sinead Toomey with RTE's Miriam O'Callaghan

Our support for cancer research in Ireland is driven by the fact cancer care for patients is enhanced by quality cancer research. A close relationship between research and clinical work means better experiences, and hopefully, results for patients. In 2018 we supported 128 researchers in 12 institutions across Ireland. This included the award of our Clinician Research Leadership Award to Associate Professor, Catherine Kelly, a Consultant Medical Oncologist at the Mater Misericordiae Hospital Dublin and Cavan General Hospital.

**Receiving the Irish Cancer Society's Clinician Leadership Award means I will have time to develop cancer trials and increase the number of trials available for people with breast cancer in Ireland.**

Associate Professor, Catherine Kelly

We delivered 25 research talks and celebrated five years of our collaborative cancer research centre: BREAST-PREDICT.

BREAST-PREDICT is a country-wide collaboration between experts in the area of breast cancer research and brings together researchers from six academic institutions across Ireland: UCD, TCD, RCSI, DCU, NUIG and UCC and Cancer Trials Ireland.

BREAST-PREDICT was our first collaborative research centre and has gone from strength to strength since it was established in 2013.

Through BREAST-PREDICT over 3,000 patients have been recruited in nine clinical studies in 13 hospitals across Ireland. Excitingly, some of the research that has emerged from BREAST-PREDICT has resulted in 17 new drugs currently in pre-clinical testing and seven breast cancer diagnostic tests in development.

Through BREAST-PREDICT we have also funded the work of over 50 breast cancer researchers across the country. Our investment of €7.5 million has resulted in the publication of 77 original research articles and 37 review articles.

Additionally, in 2018 seven of the 13 PhD students successfully completed their PhDs and have transitioned to new roles.

We funded 15 new projects including a collaboration with the National Cancer Registry to model the lifestyle risk factors on cancer rates. This research will allow us to determine answers to important questions such as the influence of lifestyle on the incidence of cancer and how this can be changed and improved into the future.

Our investment of €485,000 in Cancer Trials Ireland in 2018 helped them to deliver 180 cancer clinical trials for patients in Ireland.

Cancer Trials Ireland is one of the leading national cancer clinical trials organisations. Its mission is to grow cancer clinical trials and translational cancer research across Ireland.

Over the past 20 years, Cancer Trials Ireland has recruited more than 15,000 patients for more than 350 cancer trials.

More than 500 cancer treating specialists are members of Cancer Trials Ireland. This includes the majority of oncologists and haematologists in Ireland, as well as specialists such as research nurses and translational researchers.

Since the beginning, we have invested substantially in Cancer Trials Ireland, and we are committed to ensuring support for this vital clinical research resource.

#### **Looking forward**

**In 2019 and beyond we will continue to grow patient involvement in Irish cancer research as well as our collaborations with researchers, institutions and organisations across the country.**

**R**hona Nally was living life to the full. She was married with three young children and enjoying her work as a primary school teacher.

**In September 2003 she made a discovery that would change the course of her life.**



**Rhona  
Nally**

*I was married with three young children and working as a primary school teacher. I was feeling well and living my life to the full.*

*Fast forward to September 2003, when, after finding a small lump I was diagnosed with early stage breast cancer. I started a year of treatment – surgery, chemotherapy, radiation. In August 2004, I was getting back to normal life when I developed persistent back pain. I was then diagnosed with metastatic breast cancer. My prognosis was poor and I was devastated. My world and that of my loved ones was completely turned upside down. I grieved for the perceived loss of my future, and the end of my hopes, dreams and aspirations.*

*I started back on treatment, which now included weekly infusions of a new drug, Herceptin. It had recently been licensed for the treatment of metastatic HER2-positive breast cancer in Ireland. Thankfully, I had an excellent response to treatment. My first scans after treatment resumed showed a huge improvement, far better than was expected. I now attend hospital every three weeks for Herceptin infusion, and have regular scans. Fourteen years later I am well, and my cancer is in remission. I quite literally owe my life to cancer research. Twenty years ago, women with HER2-positive disease had the poorest outcomes of all breast cancers. Today, thanks to Herceptin, they have one of the best.*

*There have been huge advances in the treatment of many cancer types thanks to targeted therapies like Herceptin. Every patient with a terminal diagnosis hopes for a new drug to cure their cancer or, failing that, new treatments that will extend their lives.*

*In 2018, an American immunologist received a Nobel Prize for his breakthrough advances in cancer immunotherapy. It was heralded as a revolutionary cancer treatment, with transformative outcomes for cancer patients and a radical new direction for cancer research. I like to think of it as a jigsaw puzzle – with each piece fitted, the next piece becomes easier to find and more of the picture is revealed.*

**I quite literally  
owe my life to  
cancer research.**



**€2.2m**

The Irish Cancer Society  
spent €2.2 million in 2018  
on cancer research  
grants in Ireland.

**+** Find out more at [cancer.ie](http://cancer.ie)



See more about:

**Goal Three:** Leading on Excellent and Collaborative Research

**Our Strategic Goals**

Our focus in 2018

# Goal Four

## Informing and Influencing Public Policy

**We continue to put people at the heart of our work. Through our advocacy we listen to patients and campaign to make their lives better.**

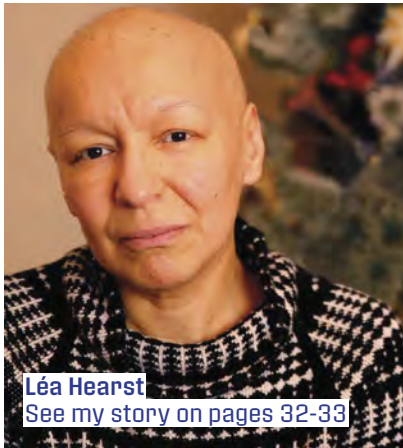
**30,000**

We successfully campaigned to extend the HPV vaccine to 30,000 boys every year from September 2019.

 Find out more at [cancer.ie](http://cancer.ie)



Photo: Gerry Mooney, Irish Independent



**Léa Hearst**  
See my story on pages 32-33

Our advocacy activity is key to making sure patient voices are represented and heard by policy-makers and politicians at all levels. We work to influence policy, legislation and national budgets so that patients are at the heart of cancer services and cancer care. We push Government to take action to improve the quality of life for patients and to make decisions that will help to reduce the number of people getting cancer and improve survival rates.

We offer a trusted voice that responds to what patients need now and supports the development of world-class services well into the future.

In 2018 we highlighted the stark realities of going through a cancer diagnosis and treatment in Ireland.

We sat with Léa (pictured above) and she told us how she was hounded by debt collectors while she was going through chemotherapy for her breast cancer and trying to look after her young son at the same time.

Cancer patients who do not have a medical card or private health insurance face in-patient charges of up to €800 a year for treatment such as chemotherapy or radiotherapy. If the charges are not paid within seven weeks, HSE regulations state that they may be pursued by a debt collection agency.

Also we campaigned to end these unfair charges and this brutal practice of debt collectors chasing cancer patients. We will continue to take action on behalf of patients on these issues.

### **CervicalCheck**

In 2018, following the bravery of Vicky Phelan in speaking out after the settlement of her case against the HSE and a testing laboratory, serious concerns were raised about the CervicalCheck screening programme.

The Society placed the women affected at the heart of our response. We provided emergency funding for additional counselling hours through our affiliated support groups across Ireland.

We worked with Vicky Phelan, Stephen Teap, Lorraine Walsh and other partner organisations to establish a support and advocacy group for women - the 221+ group. We supported Dr. Gabriel Scally in compiling his report on CervicalCheck and promoted its implementation through the CervicalCheck Steering Committee.

We called for legislation to make open disclosure of adverse events mandatory, something the Government acted on through the Patient Safety Bill.

We also pushed for the early establishment of a Cancer Patient Advisory Committee in the Department of Health to inform national policy, so that the voices of cancer patients are listened to by policy-makers and patients' needs are taken into account in cancer care.

### **Park the Charges**

After sustained pressure from the Society, in March 2018, Minister Simon Harris ordered a review of parking charges at all public hospitals.

Later in the year a draft report emerged which included many of the Society's recommendations. We are still fighting for this report to be implemented fully.

In 2018 we also campaigned for the passing of the Public Health Alcohol Bill to highlight the link between alcohol and cancer in labelling and advertising. We also successfully lobbied, in partnership with the Irish Heart Foundation, for an increase in tobacco tax. This brought the price of a pack of cigarettes up to around €12.70.

We ensured that government will extend the HPV vaccine to 30,000 boys every year from September 2019. Vaccinating both boys and girls has the potential to save 130 lives annually. Extension of the programme will provide equal access to the potentially life-saving vaccine, and could help eliminate HPV-associated cancers in Ireland in the future.

### **Looking forward**

**Our key priorities for 2019 include:**

- » Ensuring the National Cancer Strategy is delivered.
- » Evaluating the 'Real Cost of Cancer' for patients in Ireland.
- » Lobbying for reform of our health services through the implementation of Sláintecare.

**We will also focus on reducing out of pocket charges for patients, delivering better supports for cancer survivors, and ensuring the publication of a new Skin Cancer Prevention Plan.**



**I**n December 2018 Léa Hearst, a breast cancer patient, living in Clondalkin, in Dublin helped us highlight the issue of debt collectors being used to chase cancer patients – sometimes for as little as €80.

Léa  
Hearst



Léa, a French native, who had been living and working in Ireland for 15 years, was diagnosed with breast cancer in June 2018 and finished a course of chemotherapy at the end of 2018.

While having treatment, Léa did not have a medical card or private health insurance and lost her job just two months after her diagnosis. Since September 2018, she has received a number of letters from debt collectors and solicitors in relation to payment for the charges she incurred during her treatment. This came as a huge shock to her and caused a great deal of stress at an already difficult and emotional time.

*I'm really grateful the Irish Cancer Society is raising this issue. I was shocked when I started getting calls and letters on a regular basis from a debt collection agency. I found this extremely upsetting in the middle of fighting my cancer. I was very fearful about what it might mean for me if I didn't deal directly with debt collectors. To be charged for basic treatment was hard to take in the first place, but to have that charge sent to a debt collector added a great deal of stress to a very difficult situation.*

Léa went on to have surgery and radiotherapy in early 2019 and is now doing well. She eventually obtained a medical card from the HSE, which is valid for just one year. Léa is a committed and compassionate patient advocate and is still campaigning for fairness in relation to the financial impact of cancer. She is currently writing a book about her experience.

**I was shocked when I started getting calls and letters on a regular basis from a debt collection agency.**

**€800**



Cancer patients who do not have a medical card or private health insurance face in-patient charges of up to €800 a year for treatment such as chemotherapy or radiotherapy.



See more about:

**Goal Four:** Informing and Influencing Public Policy

# Our Volunteers

**Without volunteers, the Society would not be able to support cancer patients and their families.**

Each year we need thousands of volunteers across Ireland to give us their time to make a difference to people with cancer.

Our volunteers work in many different areas, including the Volunteer Driver Service, Daffodil Centres, Irish Cancer Society shops and in our survivor support service. Many of our conferences and community awareness programmes would not happen if we did not have a dedicated and motivated base of volunteers.

Our fundraising volunteers are extremely loyal and committed.

They work with us year after year, rain or shine to support campaigns like Daffodil Day, Colour Dash, Cups Against Breast Cancer and other events. Their generous support has a direct impact on people with cancer and their families.

In addition, the Board and committee members all serve in a voluntary capacity providing critical governance oversight and expertise.



**Our volunteers work with us year after year, rain or shine.**





**M**ichael Doyle from Castleknock is a cancer survivor. He had oesophageal cancer in 2004 and went through major surgery. After his treatment Michael decided he wanted to help people who had been through what he went through. He became a Volunteer Driver with the Irish Cancer Society.

**Michael  
Doyle**



*I was always a very independent fella going on about my life. I was busy with work and I was heavily involved with the local golf club. I loved gardening and looking after my grandchildren... I never even thought about getting old or being sick, so when I got diagnosed with oesophageal cancer my whole world tilted.*

*After waking up from the surgery, I remember the surgeon saying: 'You're going to be okay, Michael, but you won't be playing first team again!' I didn't know what he meant at the time, but it turned out that the surgery was so invasive I would never fully recover from it. Going through treatment was the first time I had to be looked after... I soon realised how*

*lucky I was to have Anne, my wife, who was there with me at every treatment. She put her life on hold just to be with me. We got tremendous support from family and friends and I never felt alone.*

*In waiting rooms, I met loads of other patients and saw that not everyone was as lucky as me.*

*After I retired, I was looking for ways to give back. I started to actively look into ways of donating my extra free time. I was a monthly donor to the Society for years, but after I heard about the Volunteer Driver Service, I thought 'this would be just perfect for me'.*

*The other day, I was taking a nurse to chemo. She was in her late thirties,*

*a single mother of two young children... for me, it's a no-brainer. I just have to drive and sit in a coffee shop for a few hours, but it meant so much to her. And to me too! I mean, I've never done anything as rewarding and fulfilling as this job.*



# 12,446

**The Irish Cancer Society's Volunteer Drivers drove 1,515 people to their chemotherapy appointments last year - making over 12,000 journeys.**

**I heard about the Volunteer Driver service, I thought this would be just perfect for me.**



See more about:  
**Goal Two: Improving Lives**

# Fundraising Review

**The commitment and dedication of our fundraising volunteers makes everything we do possible. As an organisation we are wholly reliant on the public's generosity, with only 3% of our income coming from the State.**

## 2018 Objectives

- » Raise €17 million from the public through donations, legacies and fundraising campaigns.
- » Raise €4 million through our network of charity shops.
- » Continue to diversify our income base and grow new sources of income.

## How we did

In 2018 we achieved our key goal of raising €17 million from the public through donations, legacies and campaign income. We also raised €4 million through our network of shops. In reaching this target, we continued to diversify our fundraising income base across multiple streams and audiences in order to avoid reliance on any single income source. In 2018 we saw an increase in our digital income as a result of the rollout of the Facebook donation feature.

In 2018 we raised funds through the following means:

## Fundraising Campaign Income

Through fundraising campaigns such as Daffodil Day, Relay For Life, and Cups Against Breast Cancer, communities across Ireland came together united in the fight against cancer by holding events and selling merchandise in their communities and workplaces.

Celebrating its 31st year, Daffodil Day took place on Friday, 23 March 2018 and was proudly supported by Boots Ireland. Thousands of volunteers tirelessly worked to turn the country yellow in the name of hope throughout March, generating almost €3.3 million to support free care and services for people affected by cancer and life-saving cancer research happening across Ireland. A further €500k was raised from our Corporate Partnerships on Daffodil Day.

In 2018, from Midleton to Letterkenny, Castlebar to Wexford and places in between, 16 Relay For Life events took place. Communities were brought together for 24 hours to celebrate, remember and fight back. Relay For Life generated €460k and continues to grow with more communities and teams being recruited each year.







Supporters of all fitness levels challenged themselves to tackle cancer one step at a time at physical endurance events such as Colour Dash, marathons in New York, Boston, and all over Europe, and expeditions trekking across Peru and Tanzania. These brave women and men collectively raised a phenomenal €941k.

### Community Fundraising

Complementing our campaigns are the scores of individuals across Ireland who, each year, partner with the Irish Cancer Society. By organising a wide range of vibrant, fun and impactful community events, these supporters allow us to deliver more services locally and fund more research. Beyond making our work possible, these events foster a sense of community spirit and raise cancer awareness.

They also help build awareness of the Irish Cancer Society community in villages and towns across the country.

From steam and vintage rallies in Innishannon and Kilcullen to cross-county walking challenges such as the Moylagh JFK 50-mile Challenge, individuals across Ireland organised events in their communities to raise awareness and much needed funds in the fight against cancer. In 2018 our community-led fundraisers collectively generated a phenomenal €1 million to support us in achieving our fundraising goal.

### Committed Giving

Monthly donations represented a significant source of total income for the Society in 2018, providing a reliable base from which to plan ongoing service delivery and other charitable activities. The Society is privileged and inspired that people share our determination to make a long-term commitment to supporting people affected by cancer and to investing in more research to effectively address the devastating cancer problem in Ireland.

# €17m

In 2018 we achieved our key goal of raising €17 million from the public through donations, legacies and campaign income.

- 01 In 2018 over 9,200 people came out to our Colour Dash fun runs in Cork, Dublin, Galway, and Limerick, sponsored by Aldi Ireland.
- 02 Leading racehorse trainer Jim Bolger and Champion National Hunt Jockey Davy Russell at Hurling for Cancer Research.





- 01 Averil Power, Miriam O'Callaghan, James Gilleran and Bernadette Lavery.
- 02 Cancer survivors Valerie, Sarah, and Kay celebrating 5 years of our BREAST PREDICT collaborative cancer research centre with Miriam O'Callaghan.
- 03 Cancer survivors and volunteers launch Relay For Life across the country.
- 04 An Taoiseach Leo Varadkar shows his support for Daffodil Day.

### Corporate Fundraising

Our corporate partnerships continue to be a critical way for us to raise funds. Our corporate partnership programme offers companies across Ireland a great way to get involved and share in our mission.

In 2018 Boots Ireland was the main corporate sponsor of our Daffodil Day campaign, with Boots stores holding events across the country during the month of March. Boots, their staff, customers, family and friends have been supporting our work since 2012. Over that time they have raised close to €1.5m.

Centra stores across Ireland organised events and community walks and sold merchandise to raise awareness and life-saving funds to support breast cancer care and research. Other Pink Partners supporting our breast cancer campaign included Dairygold, CPL Fuels, ghd, Henry Schein, Inglot, and the Little Greene Paint Company.

We benefitted from Aldi Ireland's community support programme in 2018. Through a combination of sponsoring our Colour Dash events, staff donations and merchandise sales, Aldi and its staff helped raise over €1.1 million since 2016.

We were very fortunate to have been selected as Charity of the Year in 2018 by a number of organisations, including ESB Trading, LotusWorks, Valeo Vision Systems, and Munster Rugby.

### 2019 Priorities

Fundraising underpins everything that we do. It's vital we continue to invest in new initiatives to protect future and long-term income.

In 2019 we aim to:

- » Increase our fundraising income so we can reach more people living with cancer.
- » Continue to diversify our funding base, grow the number of regular givers and make additional investments in technology.



For a full listing of our corporate fundraising partners, visit [cancer.ie/corporate-partners](http://cancer.ie/corporate-partners)





02



03



04

# Financial Review

**2018 was a strong year for the Irish Cancer Society. With the help of its valued supporters, volunteers and employees, the Society raised €22.3m.**

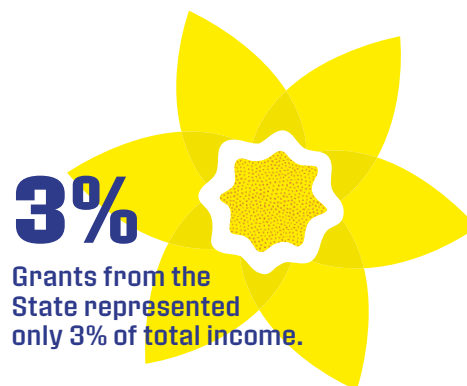
In 2018, the Society's total income was €22.3 million (2017: €26.7 million), a decrease of 16.5% on prior year. 2017 income included a large exceptional bequest of €6m. Excluding this bequest, the Society's income increased by €1.6 million (7.7%) compared to 2017. The Society's total expenditure was €20.0 million in 2018 (2017: €20.4 million), a decrease of 2.1% on prior year.

## INCOME

**The vast majority of 2018 income came from the generous support of the public, through fundraising campaigns, donations, bequests and charity shop sales. Grants from the State represented only 3% of total income.**

### Donations and Legacies

Income from donations and legacies in 2018 was €4.5 million. This was €4.3 million lower than 2017, due to the large bequest of €6 million in that year. The Society achieved an increase in online donations of €0.7 million in 2018 as a result of social media-led donations.



## Income

	2018	2017
Donations and legacies	€4.5m	€8.8m*
Fundraising campaign income	€12.7m	€12.7m
Trading activities	€3.7m	€3.8m
Charitable activities	€1.4m	€1.4m
<b>Total Income</b>	<b>€22.3m</b>	<b>€26.7m</b>

\* Includes once-off €6 million bequest



**Fundraising Campaign Income**

Income from fundraising campaigns of €12.7 million was in line with 2017. Community Daffodil Day performed well, totalling €3.3 million (2017: €3.1 million), a 4% increase on 2017. This was due to an increase in activity-based fundraising events as well as a strong street sales performance. Community events also performed well, contributing €3.0 million in 2018 (2017: €2.9 million). This was due to an increased focus on both challenge and local function events. In 2018, individual giving decreased 7% year over year. This will be a focus for the Society, with an additional investment programme planned for 2019.

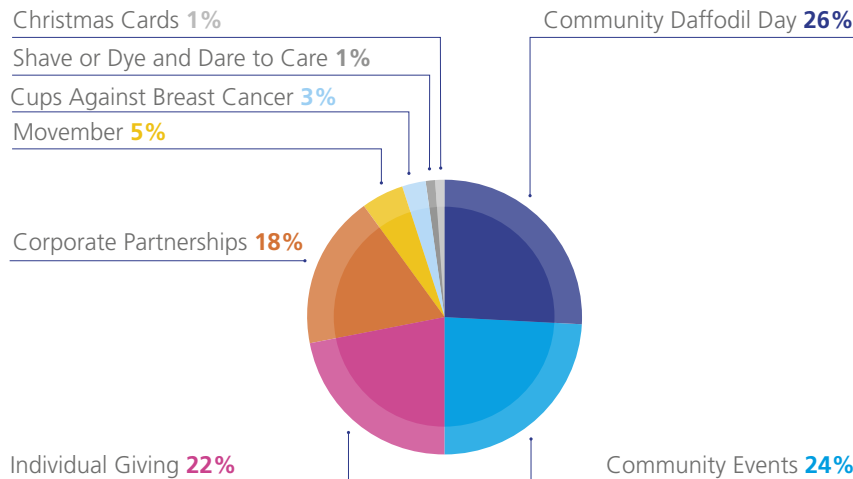
**Trading Activities**

Income from the network of 20 (2017: 21) charity shops decreased by €119k (3.1%) compared to 2017. However on a like-for-like basis (excluding a shop closed by the Society in December 2017), 2018 trading income was in-line with 2017. Trading income on a like-for-like basis was expected to exceed 2017 income. However the impact of Storm Emma resulted in the closure of all shop locations for a number of days.

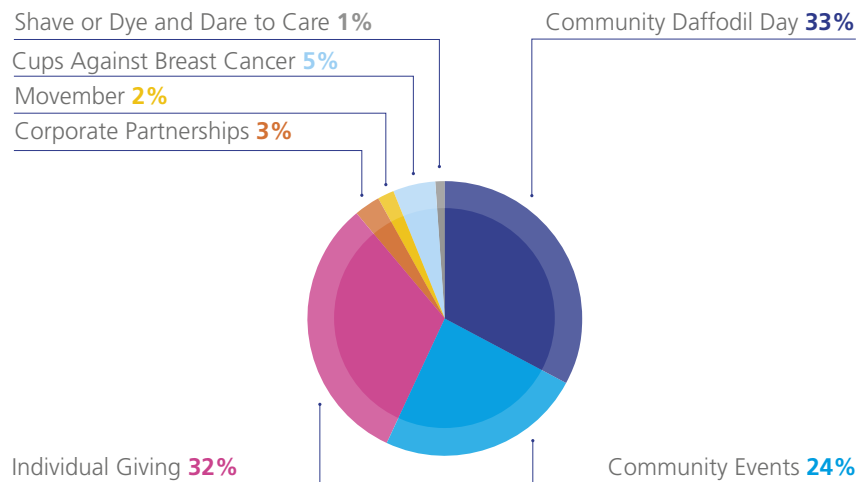
**Charitable Activities**

Income from charitable activities of €1.4 million was in line with 2017. This income includes grants to support the Travel2Care and Night Nursing programmes and reimbursements for night nursing services provided. Income from government agencies represents 3% of total income (2017: 3%).

**2018 Fundraising Campaign Income**



## 2018 Fundraising Campaign Direct Expenditure



### EXPENDITURE

**In 2018 the Society invested €20.0 million (2017: €20.4 million) in furtherance of its goals.**

For every euro spent by the Society, 74c (2017: 74c) went on charitable activities (not including trading activities). A further 26c (2017: 26c) was spent by the Society to raise money to fund its charitable activities.

#### Charitable activities

Expenditure in relation to charitable activities in 2018 was €12.7 million (2017: €12.8 million), a decrease of €189k (1.5%) in relation to 2017. This was mainly due to a number of research commitments being deferred until 2019.

#### Fundraising activities

€4.4 million was spent on fundraising activities (2017: €4.6 million) which was broadly in line with 2017 expenditure.

For every euro spent on fundraising activities the Society raised €3.90 in fundraising campaign income and donations and legacies (2017: €3.40 not including €6 million bequest). This is a 15% increase on 2017.

#### Support Costs

Support costs are costs which cannot be directly attributed to a particular activity and have been allocated accordingly. These include costs relating to facilities and ICT, CEO function, finance, human resources and governance costs. These services play a crucial role in providing core organisational support in the delivery of the Society's charitable goals. The total support costs for the year were €2.5 million (2017: €2.5 million).

Trading activities spend was €2.9m, which was a decrease of €79k (2.7%) on 2017. The decrease was mainly due to the closure of a shop in December 2017.

## Expenditure

	2018	2017
Charitable Activities	€12.7m	€12.8m
Fundraising Activities	€4.4m	€4.6m
Trading Activities	€2.9m	€3.0m
<b>Total Expenditure</b>	<b>€20.0m</b>	<b>€20.4m</b>

## FINANCIAL POSITION AND RESERVES POLICY

As the Society relies almost entirely on fundraised income, it needs to hold adequate reserves so it can react to challenging economic times and unexpected opportunities to improve the lives of those affected by cancer.

An adequate and working reserve policy provides essential accountability to the Society's beneficiaries, public supporters, and other stakeholders and assures them that the Society's activities are sustainable. The Society's reserves policy is framed to ensure there is no liquidity risk. The Society has a policy of holding funds on deposit with its bankers, or investing in highly-rated money market funds, to ensure cash is available to meet liabilities as they arise.

The available resources at 31 December 2018 were €24.4 million (2017: €22.2 million). Of this, €0.6 million (2017: €0.3 million) was held in restricted funds, as the funds were donated for specific purposes. €1 million (2017: €7 million) was held in designated funds and €22.8 million (2017: €14.9 million) was held in unrestricted funds.

### Designated Funds

The €1 million fund at the year end relating to research was held to protect currently committed research programmes from future unexpected variations in income. The time horizon on research programmes is typically 3-5 years.

### Investment Policy and Performance

The investment policy supports the reserves policy. The Society requires working capital and adequate appropriately-accessible reserves to provide a buffer from income fluctuations.

The Society seeks to maintain an amount equivalent to approximately six months of annual expenditure in cash and investments. However the actual amount maintained in cash and investments will vary depending on short and medium-term needs, as well as on income forecasts and the prevailing investment climate.

It is the Society's policy not to invest, directly or indirectly in tobacco, alcohol or sunbed companies. Investments are made within ethical guidelines, balancing risk and return, with capital preservation taking precedence over potential return. The Society's aim is to ensure that its investments maintain their capital value in real terms across the investment cycle. The majority of the Society's investments are held in funds which can be converted to cash very quickly.

A review of both the reserves and investment policies is conducted every year.

At 31 December 2018 the Society held 10 months of expenditure (based on budgeted expenditure) in cash and investments. The Society is currently working on a new five year strategy, and it was decided to hold this level in cash and investments to allow expenditure on new programmes under the new strategy.

During 2018 the Society's invested funds yielded an average return of -2.7% (2017: 4.8%). The Directors are satisfied with this return given the prevailing market conditions which were challenging, particularly in December 2018. The (loss)/gain on investments was (€116k) (2017: €240k).

## ACCOUNTING RECORDS

The Directors have taken the following measures to secure compliance with the requirements of sections 281 to 285 of the Companies Act 2014 with regard to the keeping of accounting records: the employment of appropriately qualified accounting personnel and the maintenance of computerised accounting systems. The Society's accounting records are maintained at the Society's registered office at 43/45 Northumberland Road, Dublin 4.

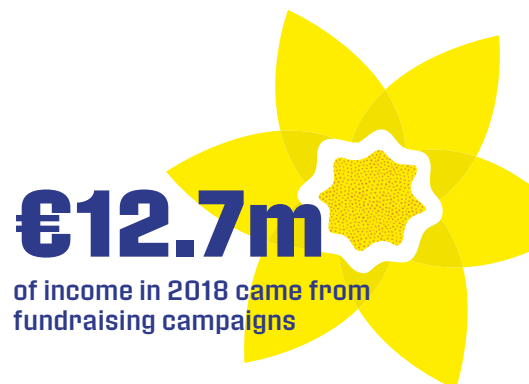
## DISCLOSURE OF INFORMATION TO AUDITORS

In the case of each of the persons who are Directors at the time the Directors' report and financial statements are approved;

- » So far as the director is aware, there is no relevant audit information of which the Society's auditors are unaware; and
- » Each director has taken all steps that ought to have been taken by the director in order to make himself/herself aware of any relevant audit information and to establish that the Society's auditors are aware of that information.

## AUDITORS

The auditors, Deloitte Ireland LLP, Chartered Accountants and Statutory Audit Firm, continue in office in accordance with Section 383(2) of the Companies Act 2014.



**A**fter losing his Dad Noel to cancer, Aaron Dooley decided to become a fundraiser for the Irish Cancer Society. This is his story.



**Aaron  
Dooley**



*My father, Noel Dooley, taught me many lessons in life. But the most important lessons he taught me were to not take life too seriously, to laugh a lot and cry a little, to enjoy the moment, to always take the positive from a negative situation, and above all else to treat people with respect. You see, we all take our own unique paths in life, we all have struggles along the way that no one else sees. But it is these struggles that make and shape us into the people in which we become.*

*After losing my Dad to cancer I found myself in this struggle, caught up in the pain and suffering of his absence, realising I lost not only a man who was my father, but my best friend.*

*But looking back and remembering all he taught and done for me makes me feel lucky and grateful that I had a gentleman for a father, a father of 11 children, who taught us right from wrong, a teacher of his own class.*

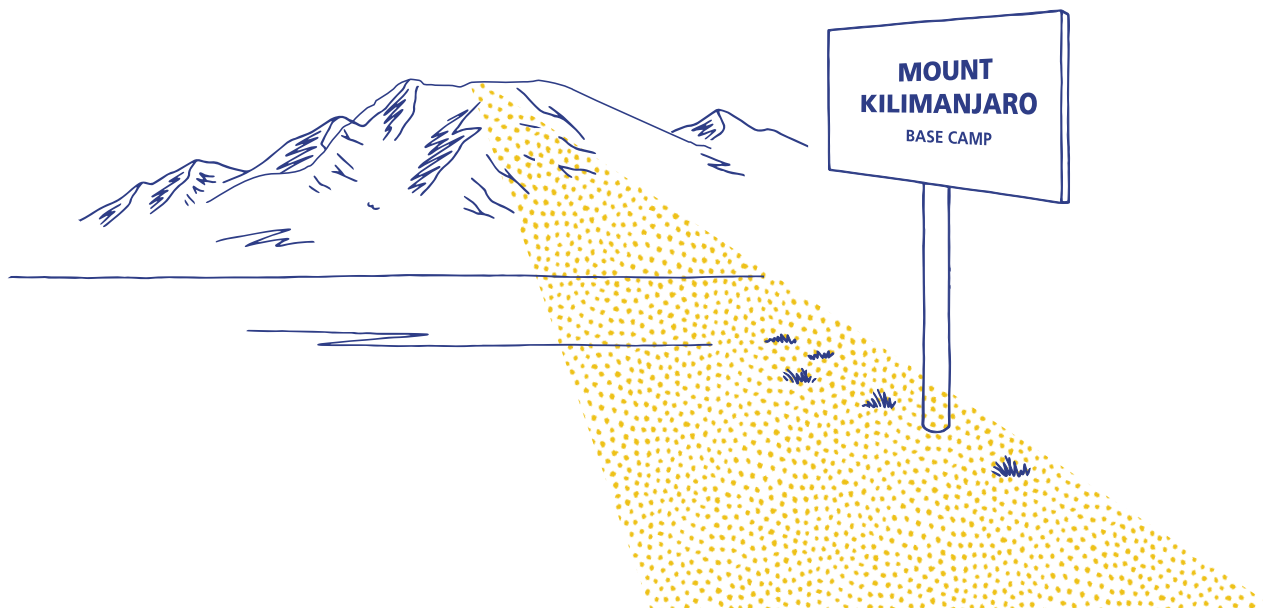
*In memory of my Dad, I decided to hold a fundraiser/raffle night in the Glenside Pub Churchtown where he was known and loved by all the local community. All the staff and owners are like family to us and we are forever grateful for all they've done throughout the years for my Dad and on this fundraiser night. It was beautiful to see all my family and friends there alongside his co-workers and friends, sharing stories and precious memories.*

*With a live ballad band on the night playing his favourite songs and nothing but laughter and joy from all he loved, I know we done him proud.*

*Together we raised just over €3,000 for the Irish Cancer Society and come August I will be taking on the Kilimanjaro summit in memory of him and in hopes of raising more money for this amazing charity.*

*They say the tougher the climb, the more beautiful the view, so I look forward to taking this challenge head on in order to take in the beautiful view on top of the highest freestanding mountain in the world, with him, by my side, in spirit.*

**After losing my Dad to cancer I found myself in this struggle, caught up in the pain and suffering of his absence, realising I lost not only a man who was my father, but my best friend.**



# Structure, Governance and Management

## ORGANISATIONAL STRUCTURE

The Irish Cancer Society is a company limited by guarantee and registered as a charity with the Charities Regulatory Authority. The Society is governed by its Constitution which provides for a member-based organisation with the following charitable aims:

- » to foster, promote and advance the relief, cure, treatment, prevention, lessening and alleviation of cancer or any disease of an allied or similar nature.
- » to promote research devoted to the study of the origin and causes, relief, cure, treatment, prevention, lessening and alleviation of cancer, or any disease of an allied or similar nature.

## MEMBERS

There are currently 41 members, 8 of whom are Directors. Each member guarantees to contribute up to one euro twenty-seven cent (€1.27) to the Society's debts, liabilities and costs in the event of it being wound up.

## BOARD OF DIRECTORS

The Society has a voluntary Board of Directors which meets at least six times a year. The Directors are responsible for the governance of the organisation. Day-to-day operational management is delegated to the Chief Executive Officer, Averil Power, who is supported by the Senior Management Team ("Management") comprising Head of Finance and IT, Head of Fundraising, Head of Services and Strategic Implementation, Head of Research, and Head of HR and Volunteering. Matters such as policy, strategic planning and budgets are drafted by Management for consideration and approval by the Board, which then monitors the implementation of these plans.

The Board manages its work through a number of committees, comprising Directors and external volunteers, each of which is chaired by a Director of the Board. The Society values the benefits of having committee members of varying backgrounds, expertise and experience. Each director signs a conflict of interest policy annually.

Directors and committee members do not receive fees for their contribution to the Society; out of pocket expenses may be claimed. Each year one third of Directors are subject to retirement by rotation. In 2018 Fergus Brennan, Sean Dorgan and Prof. Liam Grogan offered themselves for re-election and were duly re-elected. On 1st January 2018 Prof. Ray Stallings resigned from the Board.

Director nomination and recruitment is overseen by the Governance and Nominating Committee. Each new director undertakes an induction programme, which includes an overview of the Society's activities and core operations. Induction is provided by Management and topics covered include the strategic plan, overview of services, research, fundraising, finance and human resources.

The Board reviewed the efficiency and effectiveness of its operations for 2018. A broader governance review is scheduled for late 2019.

The following Board and committee meetings were held in 2018:

<b>Meetings held</b>	
Board of Directors	<b>7</b>
Finance Committee	<b>9</b>
Audit and Risk Committee	<b>3</b>
Governance and Nominating Committee	<b>2</b>

The following table shows attendance at 2018 Board meetings and dates of appointment:

<b>Attendance</b>		
Dermot Breen	7 of 7	<b>09 Dec 08</b>
Fergus Brennan	6 of 7	<b>28 Apr 16</b>
Dr Sinead Brennan	5 of 7	<b>01 Sep 16</b>
Geraldine Clarke	5 of 7	<b>23 Jul 15</b>
Andrew Craig	5 of 7	<b>01 Jul 17</b>
Kieran Crowley	6 of 7	<b>02 Oct 14</b>
Sean Dorgan	6 of 7	<b>26 Jun 14</b>
Prof Liam Grogan	5 of 7	<b>22 Nov 12</b>
Dr Cormac Kilty	5 of 7	<b>19 Feb 15</b>
Dr Helen McAvoy	6 of 7	<b>01 Sep 16</b>
Willie O'Reilly	6 of 7	<b>29 Jun 11</b>

## **BOARD COMMITTEES**

### **Finance Committee**

The Finance Committee exercises, on behalf of the Board, supervisory oversight of all aspects of the Society's financial performance. It monitors financial performance and oversees management of the investment portfolio on an ongoing basis. It also reviews the annual budget for recommendation to the Board.

### **Audit and Risk Committee**

The Audit and Risk Committee assists the Board in fulfilling its responsibilities by independently reviewing the annual financial statements and the effectiveness of the Society's internal controls. It also monitors the effectiveness of the Society's risk management, and provides an assessment of risk processes and policies to the Board.

### **Governance and Nominating Committee**

The Governance and Nominating Committee maintains oversight of the governance and effectiveness of the Society's Board and its committees. The committee oversees the nomination, recruitment, induction and on-going training, as necessary, of the Directors and makes recommendations on its areas of responsibility to the Board.

**The Board has 5 other committees which meet on an ad hoc basis as the need arises.**

### **Cancer Prevention Committee**

The Cancer Prevention Committee provides service, policy and research advice to the Society to guide its provision of services and inform its advocacy efforts to improve cancer prevention and early detection.

### **Cancer Support Committee**

The Cancer Support Committee provides service, policy and research advice to the Society to guide its provision of services and inform its advocacy efforts to improve supportive care for people affected by cancer.

### **Research Advisory Committee**

The Research Advisory Committee reviews and evaluates the research activities and investments of the Society to ensure that they are achieving the objectives set out in the Society's strategic plan.

### **Fundraising Oversight Committee**

The Fundraising Oversight Committee reviews specific projects relevant to the Society's fundraising strategy.

### **Fundraising Advisory Committee**

The Fundraising Advisory Committee provides advice and oversight of the Society's fundraising activities.

From time to time the Board may establish a working group of Directors and members of the senior management team for a specific purpose. In 2018 working groups related to a legacy donation and strategy development met during the year.

## **COMMITMENT TO BEST PRACTICE IN CORPORATE GOVERNANCE**

The Board operates to the highest governance standards and codes of conduct. A strong governance culture ensures that the Society is best placed to deliver on its mission and achieve its objectives. This is achieved by a continual focus on the Society's statutory and regulatory obligations, regular risk reviews, and by promoting a compliance-centric culture throughout the organisation.

The Board welcomed the publication of the Charities Regulatory Authority Governance Code in 2018. The Board is committed to compliance with the code by the required 2020 deadline.

## DIRECTORS' COMPLIANCE STATEMENT

The Directors acknowledge that they are responsible for securing compliance by the company of its Relevant Obligations as set out in Section 225 of the Companies Act. The Directors further confirm that there is a Compliance Policy Statement in place setting out the company's policies which, in the Directors' opinion, are appropriate to ensure compliance with the company's Relevant Obligations.

The Directors also confirm that appropriate arrangements and structures are in place which, in the opinion of the Directors, are designed to secure material compliance with the company's Relevant Obligations. For the year ended 31 December 2018 the Directors, with the assistance of the Audit and Risk Committee, have conducted a review of the arrangements and structures in place.

### Risk Management Roles and Responsibilities

The Society's risk management process is supported by its governance structure. Whilst the Directors are responsible for ensuring there is effective risk management and an appropriate internal control environment, Management are responsible for the day-to-day operation of its risk processes.

As part of the risk management process an annual risk review is undertaken. The aim of the review is to ensure that the Society is not exposed to an unacceptable level of preventable risk and to identify risk mitigation strategies. In 2018 a more detailed review was undertaken by Management which was overseen by the Audit and Risk Committee. Management commits to monitoring the level of risks on an ongoing basis and reporting on this regularly to the Board.

The following are the top five risks identified in 2018, in order of significance.

### 1. Fundraising Risk:

The risk that the Society will not meet its financial targets; particularly failing to raise sufficient income to deliver on its strategy and meet the increased demand for services.

#### Mitigation measures

- » Regular Finance Committee oversight of financial trends and performance.
- » Continual investment in fundraising to maintain and develop existing and new income sources.
- » Development of a broad portfolio of fundraising streams of income to diversify risk.

### 2. Information Security Risk:

The risk of a cybersecurity attack and data theft.

#### Mitigation measures

- » Mandatory GDPR and IT security training for staff.
- » Regular review of data protection policies, procedures and systems.
- » Regular review of the Society's data recovery policies.

### 3. Reputational Risk:

The risk of reputational damage to the Society or the charity sector caused by an event either within or outside the Society's control.

#### Mitigation measures

- » Regular engagement with The Wheel and Charities Institute Ireland (CII) to ensure the sector is mindful of its reputation.
- » Regular Board and sub-committee oversight of compliance processes and requirements.
- » Proactive encouragement of good governance in partner organisations.

### 4. Services Provision Risk:

Risk that the Society's resources will not be sufficient to meet increased demand for services due to a greater level of cancer diagnosis.

#### Mitigation measures

- » A strong strategic planning process, to identify future demands and priorities.
- » Active monitoring of service users' needs and requirements.

### 5. People Risk:

The risk that the Society will not be able to attract and retain talent at all levels including staff and Directors.

#### Mitigation measures

- » Regular performance reviews.
- » Commitment to a flexible working environment.
- » Regular Board evaluations.

The Board is satisfied that systems and processes are in place to monitor, manage and mitigate the Society's exposure to its major risks.

**Directors’ Responsibility Statement**

The Directors are responsible for preparing the Directors’ report and the financial statements in accordance with the Companies Act 2014.

Irish company law requires the Directors to prepare financial statements for each financial year. Under the law, the Directors have elected to prepare the financial statements in accordance with FRS 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland issued by the Financial Reporting Council (“relevant financial reporting framework”). Under company law, the Directors must not approve the financial statements unless they are satisfied that they give a true and fair view of the assets, liabilities and financial position of the company as at the financial year end date and of the surplus or deficit of the company for the financial year and otherwise comply with the Companies Act 2014.

In preparing those financial statements, the Directors are required to:

- » select suitable accounting policies for the company financial statements and then apply them consistently;

- » make judgments and estimates that are reasonable and prudent;
- » state whether the financial statements have been prepared in accordance with the applicable accounting standards, identify those standards, and note the effect and the reasons for any material departure from those standards; and
- » prepare the financial statements on the going concern basis unless it is inappropriate to presume that the company will continue in business.

The Directors are responsible for ensuring that the company keeps or causes to be kept adequate accounting records which correctly explain and record the transactions of the company, enable at any time the assets, liabilities, financial position and profit or loss of the company to be determined with reasonable accuracy, enable them to ensure that the financial statements and Directors’ report comply with the Companies Act 2014 and enable the financial statements to be audited. They are also responsible for safeguarding the assets of the company and hence for taking reasonable steps for the prevention

and detection of fraud and other irregularities.

Legislation in Ireland governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions. The Directors are responsible for the maintenance and integrity of the corporate and financial information included on the company’s website.

Approved by the Board and signed on its behalf by:



**Dermot Breen**  
Director



**Andrew Craig**  
Director

Date: 6 August 2019



# Our Board

**Our Board of Directors strive to improve the lives of people affected by cancer. We asked each of them the following question:**

**What inspired you or motivated you to join the Board?**



## **Dermot Breen, Chairman**

Dermot has been Director of the Society since 2008 and was appointed Chairman in 2016. He has had an extensive career in public affairs and business management at executive and Board levels. He is currently a member of the Governing Body of University College Cork, Senate of the National University of Ireland, and engaged in business mentoring.

**“I have been inspired to help others through my experiences as a cancer survivor, and a desire to contribute business and communications leadership and expertise to the Society.”**



## **Fergus Brennan**

Fergus is a retired Chartered Accountant with a career in finance and senior management in the Jones Group PLC, Aer Lingus Group and Lufthansa Technik Group companies in Ireland.

He holds a number of non-executive directorships across the aviation sector.

**“ With so many of my friends undergoing cancer treatment, I wanted to assist the Society in whatever way I could.”**



### **Dr Sinead Brennan**

Sinead is a Radiation Oncologist in St. Luke's Hospital, Rathgar and in St. James Hospital, Dublin.

She is Chair of the Head and Neck DSSG at Cancer Trials Ireland.

**“I am inspired by the work of the Irish Cancer Society which helps Irish cancer patients and their families on their cancer journey and aims to improve cancer outcomes in Ireland by working towards a future where people no longer die from cancer.”**



### **Geraldine Clark**

Geraldine Clarke is a practising solicitor, and is head of Gleeson McGrath Baldwin Solicitors' Litigation Department.

She has extensive experience in all aspects of commercial and general litigation practicing in the areas of banking, intellectual property, employment, EU law, product liability and general contract disputes.

Geraldine is a past President of the Law Society and is the Founding Director of the Irish Centre for European Law.

**“I've always admired the services the Irish Cancer Society provides and it's a privilege to be involved in their work.”**



### **Kieran Crowley**

Kieran Crowley is a Chartered Accountant and a Chartered Director.

He is a Business Consultant advising Board and business owners on change, risk management, strategy and governance, with experience as a Board member in many companies.

**“The Society has thousands who volunteer to make things better for their friends and family hit with cancer, and that's why I do it too”.**

## Our Board Continued

## What inspired you or motivated you to join the Board?



### Sean Dorgan, MRIA

Sean was formerly Secretary General of two Government Departments, Chief Executive of Chartered Accountants Ireland and CEO of IDA Ireland.

He holds a number of directorships currently.

**“I know how the Society can help when someone is facing the often frightening diagnosis of cancer.”**



### Professor Liam Grogan

Liam is a Consultant Medical Oncologist in Beaumont Hospital and is an Honorary Clinical Associate Professor in the Royal College of Surgeons in Ireland.

**“I became involved in the Society to support its independent voice and caring hand guiding cancer patients on their journey.”**



### Cormac G. Kilty PhD

Cormac is a Biotech Entrepreneur retired from executive functions; managing a biotech investment portfolio and involved with two Angel Investment groups in Ireland.

He was voted one of the top 100 influential Ireland-US business leaders by 'Business and Finance' in 2007 and 2008 and was awarded the U.S.-Ireland Biolink award for contribution to Irish Life Sciences in 2007.

**“Our research funding is a major contributor in training our oncology researchers for Ireland.”**





### **Dr Helen McAvoiy**

Helen is Director of Policy with the Institute of Public Health in Ireland focussing on progressing the government's health inequality agenda in Ireland and Northern Ireland.

Helen has a primary medical degree and a Masters in Health Promotion and worked for several years in both hospital and general practice.

**“I am delighted to have this opportunity to guide and support this wonderful charity through my contribution to an increasingly diverse Board. I am particularly motivated by the Society's commitments to cancer prevention and to fighting for fairness in the cancer journey of vulnerable people.”**



### **Willie O'Reilly**

Willie O'Reilly is former Group Commercial Director at RTÉ.

He was previously Chief Executive of Today FM, President of the Institute of Directors and a director of the Health Service Executive.

He is a Council member of the Royal Victoria Eye and Ear Hospital.

**“I am delighted to be able to play some small part in the fight against cancer.”**



### **Andrew Craig**

Andrew retired after 30 years as a partner in PWC where he worked with a number of Ireland's largest global companies and he also held a number of important leadership roles in PWC. Andrew is a Fellow of the Institute of Chartered Accountants in Ireland is now a business advisor and non-executive director.

**“I intended to become involved in a not for profit organisation after retiring from PWC and I was very impressed with the people and work of the Irish Cancer Society and I am sharing my experience by chairing the Audit and Risk Committee.”**

# Financial Statements





## **In this section...**

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## Independent auditor's report to the members of Irish Cancer Society

### REPORT ON THE AUDIT OF THE FINANCIAL STATEMENTS

#### Opinion on the financial statements of Irish Cancer Society (the 'company')

In our opinion the financial statements:

- » give a true and fair view of the assets, liabilities and financial position of the company as at 31 December 2018 and of its incoming resources and application of resources, including its income and expenditure for the financial year then ended; and
- » have been properly prepared in accordance with the relevant financial reporting framework and, in particular, with the requirements of the Companies Act 2014.

The financial statements we have audited comprise:

- » the Statement of Financial Activities;
- » the Balance Sheet;
- » the Statement of Cash Flows; and
- » the related notes 1 to 27, including a summary of significant accounting policies as set out in note 1.

The relevant financial reporting framework that has been applied in their preparation is the Companies Act 2014 and FRS 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland" issued by the Financial Reporting Council ("the relevant financial reporting framework").

#### Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (Ireland) (ISAs (Ireland)) and applicable law. Our responsibilities under those standards are described below in the "Auditor's responsibilities for the audit of the financial statements" section of our report.

We are independent of the company in accordance with the ethical requirements that are relevant to our audit of the financial statements in Ireland, including the Ethical Standard issued by the Irish Auditing and Accounting Supervisory Authority, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

#### Conclusions relating to going concern

We have nothing to report in respect of the following matters in relation to which ISAs (Ireland) require us to report to you where:

- » the directors' use of the going concern basis of accounting in preparation of the financial statements is not appropriate; or
- » the directors have not disclosed in the financial statements any identified material uncertainties that may cast significant doubt about the company's ability to continue to adopt the going concern basis of accounting for a period of at least twelve months from the date when the financial statements are authorised for issue.

#### Other information

The directors are responsible for the other information. The other information comprises the information included in the Reports and Financial Statements for the financial year ended 31 December 2018 other than the financial statements and our auditor's report thereon. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

#### Responsibilities of directors

As explained more fully in the Directors' Responsibilities Statement, the directors are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view and otherwise comply with the Companies Act 2014, and for such internal control as the directors determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the directors are responsible for assessing the company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the directors either intend to liquidate the company or to cease operations, or have no realistic alternative but to do so.

## Independent auditor's report to the members of Irish Cancer Society

### Auditor's responsibilities for the audit of the financial statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion.

Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (Ireland) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with ISAs (Ireland), we exercise professional judgment and maintain professional scepticism throughout the audit.

We also:

- » Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- » Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the company's internal control.
- » Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the directors.

- » Conclude on the appropriateness of the directors' use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the company's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of the auditor's report. However, future events or conditions may cause the entity (or where relevant, the group) to cease to continue as a going concern.
- » Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that the auditor identifies during the audit.

This report is made solely to the company's members, as a body, in accordance with Section 391 of the Companies Act 2014. Our audit work has been undertaken so that we might state to the company's members those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the company and the company's members as a body, for our audit work, for this report, or for the opinions we have formed.

### REPORT ON OTHER LEGAL AND REGULATORY REQUIREMENTS

#### Opinion on other matters prescribed by the Companies Act 2014

Based solely on the work undertaken in the course of the audit, we report that:

- » We have obtained all the information and explanations which we consider necessary for the purposes of our audit.
- » In our opinion the accounting records of the company were sufficient to permit the financial statements to be readily and properly audited.
- » The financial statements are in agreement with the accounting records.
- » In our opinion the information given in the directors' report is consistent with the financial statements and the directors' report has been prepared in accordance with the Companies Act 2014.

#### Matters on which we are required to report by exception

Based on the knowledge and understanding of the company and its environment obtained in the course of the audit, we have not identified material misstatements in the directors' report.

We have nothing to report in respect of the provisions in the Companies Act 2014 which require us to report to you if, in our opinion, the disclosures of directors' remuneration and transactions specified by law are not made.



**Emer O'Shaughnessy**

for and on behalf of

Deloitte Ireland LLP  
Chartered Accountants  
and Statutory Audit Firm  
Deloitte & Touche House  
Earlsfort Terrace, Dublin 2

Date: 7 August 2019

## Statement of Financial Activities (incorporating an Income and Expenditure Account) for the Financial Year ended 31 December 2018

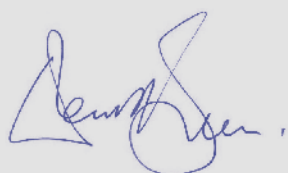
	Notes	2018 Unrestricted	2018 Restricted	2018 Designated	2018 Total	2017 Unrestricted	2017 Restricted	2017 Designated	2017 Total
		€'000	€'000	€'000	€'000	€'000	€'000	€'000	€'000
<b>INCOME:</b>									
Donations and legacies	3(a)	3,741	785	-	4,526	7,885	941	-	8,826
Fundraising campaign income	3(b)	10,045	2,594	-	12,639	10,188	2,500	-	12,688
Trading activities	3(c)	3,677	-	-	3,677	3,796	-	-	3,796
Investments	3(d)	41	-	-	41	17	-	-	17
Charitable activities	3(e)	789	650	-	1,439	720	686	-	1,406
<b>Total income</b>		<b>18,293</b>	<b>4,029</b>	<b>-</b>	<b>22,322</b>	<b>22,606</b>	<b>4,127</b>	<b>-</b>	<b>26,733</b>
<b>EXPENDITURE:</b>									
Charitable activities	4	8,975	3,688	-	12,663	8,849	4,003	-	12,852
Fundraising activities	5	4,430	-	-	4,430	4,241	340	-	4,581
Trading activities		2,892	-	-	2,892	2,971	-	-	2,971
<b>Total expenditure</b>		<b>16,297</b>	<b>3,688</b>	<b>-</b>	<b>19,985</b>	<b>16,061</b>	<b>4,343</b>	<b>-</b>	<b>20,404</b>
Net (loss)/gain on investments	13	(116)	-	-	(116)	240	-	-	240
<b>Net income/(expenditure)</b>	9	<b>1,880</b>	<b>341</b>	<b>-</b>	<b>2,221</b>	<b>6,785</b>	<b>(216)</b>	<b>-</b>	<b>6,569</b>
Taxation	10	-	-	-	-	-	-	-	-
Transfers between funds	8	6,000	-	(6,000)	-	(6,000)	-	6,000	-
<b>Net movement in funds</b>		<b>7,880</b>	<b>341</b>	<b>(6,000)</b>	<b>2,221</b>	<b>785</b>	<b>(216)</b>	<b>6,000</b>	<b>6,569</b>
<b>RECONCILIATION OF FUNDS:</b>									
Funds balances brought forward		14,911	302	7,000	22,213	14,126	518	1,000	15,644
<b>Funds balances carried forward</b>		<b>22,791</b>	<b>643</b>	<b>1,000</b>	<b>24,434</b>	<b>14,911</b>	<b>302</b>	<b>7,000</b>	<b>22,213</b>

There are no other recognised gains or losses for the financial year except for those listed above. All income and expenditure derives from continuing operations.

## Balance Sheet as at 31 December 2018

	Notes	2018 €'000	2017 €'000
<b>Fixed Assets</b>			
Tangible assets	12	9,510	9,792
<b>Total Fixed Assets</b>		<b>9,510</b>	9,792
<b>Current Assets</b>			
Investments	13	5,228	5,378
Stocks		52	152
Assets held for sale	14	537	-
Debtors: Amounts falling due within one year	15	1,394	867
Cash at bank and in hand		11,739	10,826
<b>Total Current Assets</b>		<b>18,950</b>	17,223
<b>Creditors: Amounts falling due within one year</b>	16	<b>(3,206)</b>	(3,851)
<b>Net current assets</b>		<b>15,744</b>	13,372
<b>Total assets less current liabilities</b>		<b>25,254</b>	23,164
<b>Creditors: Amounts falling due after more than one year</b>			
Long term liabilities	16	(820)	(951)
<b>NET ASSETS</b>		<b>24,434</b>	22,213
<b>Funds:</b>			
Restricted income funds		643	302
Designated income funds		1,000	7,000
Unrestricted income funds		22,791	14,911
<b>TOTAL FUNDS</b>		<b>24,434</b>	22,213

The financial statements were approved and authorised for issue by the board of directors on 6 August 2019 and signed on its behalf by:



**Dermot Breen**  
Director



**Andrew Craig**  
Director

## Statement of cash flows for the financial year ended 31 December 2018

	Notes	2018 €'000	2017 €'000
<b>Cash flows from operating activities:</b>			
Net cash generated by operating activities	19	873	6,251
<b>Cash flows from investing activities:</b>			
Deposit interest received		8	2
Purchase of fixed assets		(118)	(187)
<b>Net cash flow from investing activities</b>		<b>(110)</b>	<b>(185)</b>
<b>Increase in cash and cash equivalents</b>		<b>763</b>	<b>6,066</b>
Cash and cash equivalents at 1 January		16,204	10,138
Cash and cash equivalents at 31 December		16,967	16,204
<b>Analysis of cash and cash equivalents</b>			
Bank and cash		11,739	10,826
Cash equivalents		5,228	5,378
Cash and cash equivalents at 31 December		16,967	16,204



## Notes to the Financial Statements for the Financial Year ended 31 December 2018

### 1. ACCOUNTING POLICIES

#### General Information

The purpose of the Irish Cancer Society is to improve the lives of those affected by cancer.

The Irish Cancer Society is a not-for-profit company limited by guarantee with a charitable status. It is incorporated in the Republic of Ireland. The address of its registered office is 43/45 Northumberland Road, Dublin 4.

#### Statement of Compliance

The financial statements of the Society for the year ended 31 December 2018 have been prepared in accordance with "the Financial Reporting Standard applicable in the United Kingdom and the Republic of Ireland" ("FRS 102"), Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the FRS 102 (effective 1 January 2015) (Charities SORP - FRS 102), and in accordance with the Irish statute comprising the Companies Act 2014.

#### Basis of Preparation

The financial statements have been prepared on a going concern basis, under the historical cost convention, modified to include the revaluation of investments to fair value. The financial statements have been prepared in accordance with Financial Reporting Standard 102, the financial reporting standard applicable in the UK and Republic of Ireland ("FRS102"), and voluntarily in accordance with the Statement of Recommended Practice, as applicable to charities preparing their accounts in accordance with FRS102 (issued by the Charity Commission for England and Wales, "the Charities SORP"). The presentation and functional currency of these financial statements is Euro.

#### Going Concern

The financial statements have been prepared on a going concern basis. The Directors have reviewed the 2018 Statement of Financial Activities and Balance Sheet, the approved 2019 budget, and the latest financial information, and are satisfied that the Society has adequate resources to continue in operational existence for the foreseeable future, and as a result are satisfied that there are sufficient resources to manage any operational or financial risks. There is no material uncertainty that affects this assumption.

#### Income

Income is analysed in the Statement of Financial Activities under the following headings:

- » Donations and legacies
- » Fundraising campaign income
- » Trading activities
- » Investments
- » Charitable activities

Income is recognised when the Society becomes entitled to the funds, receipt is probable and the amount can be quantified with reasonable accuracy. Where income has not yet been received, but all criteria for recognition have been satisfied, the income is accrued as a debtor on the Balance Sheet. Where income has been received in advance, it is deferred as a creditor on the Balance Sheet until the relevant conditions are met.

Income arising from tax rebates is recognised on confirmation from the tax authorities of the amount and when there is certainty of receipt.

#### Donations and legacies

Donations are recognised when received.

Income arising from legacies is recognised when it becomes probable that funds will be received; i.e. where there is a grant of probate, the executors have established that there are sufficient assets in the estate and any conditions attached are within the control of the Society.

Donations-in-kind are recognised as income when received. Donations-in-kind are valued at open market value or at a reasonable estimate of the gross value to the Society.

#### Fundraising campaign income

Fundraising campaign income is recognised when received, or when all criteria for recognition have been satisfied.

#### Trading activities

Income from trading activities includes retail income from the sale of donated goods through shops. Goods donated for resale are accounted for when they are sold rather than when they are donated because the high volume of low value items makes valuation impractical.

#### Charitable activities

Grants from government agencies and other entities are recognised as income when the Society is legally entitled to the income and has committed to fulfilling any conditions contained in the relevant funding agreements.

#### Expenditure

Expenditure is analysed between charitable activities, fundraising activities and trading activities. The costs of each activity are separately disclosed and analysed according to their major components.

Expenditure is recognised when a legal or constructive obligation exists as a result of a past event, a transfer of economic benefits is required in settlement and the amount of the obligation can be reliably measured.

Support costs, which cannot be attributed directly to one activity, are allocated to activities in proportion to estimated benefits received.

## Notes to the Financial Statements for the Financial Year ended 31 December 2018

(continued)

### 1. ACCOUNTING POLICIES (CONTINUED)

#### Expenditure (continued)

Governance costs, which are included within support costs, consist of direct expenditure and overhead costs incurred in relation to the strategic, as opposed to day-to-day management of the charity, and in relation to compliance with constitutional and statutory requirements. Costs related to audit and organisational risk management are also included in this category.

Redundancy and termination payments are recognised when there is a demonstrable commitment that cannot be realistically withdrawn.

#### Charitable Activities

Costs of charitable activities include costs of research programmes, provision of night nursing support, patient information and support, and advocacy work, together with related support costs. All costs of charitable activities are recognised on an accruals basis.

Research grant costs are recognised in full in the year in which the commitment is made where there is an expectation that the full amount committed will be fully expended. When this is not certain, the costs are recognised over the term of the contract. Research grants are paid over the term of the grant agreement, and the outstanding balances at year-end are held under creditors on the Balance Sheet and split between current and long-term liabilities.

Expenditure in the form of grants to local partners are recognised on an accrual basis.

#### Fundraising activities

Fundraising activities comprise expenditure incurred on fundraising, including the costs of advertising, producing publications, printing and mailing fundraising material, staff costs and an appropriate allocation of support costs. All fundraising activities costs are recognised on an accruals basis.

#### Leases

Expenditure relating to operating leases where substantially all the benefits and risks of ownership remain with the lessor is recognised on an accruals basis.

#### Fund Accounting

The Society maintains the following funds.

##### *Restricted funds*

Represents income that can only be used for a particular purposes such restrictions are imposed by the donor or by the nature of the fundraising appeal.

##### *Unrestricted funds*

Represents income that can be used by the Society without restrictions. These funds are available to spend at the discretion of the Society in furtherance of its charitable objectives.

##### *Designated funds*

These are funds set aside at the discretion of the Directors for specific purposes. Any transfers to and from designated funds are approved by the Directors.

#### Tangible Fixed Assets

Tangible assets are recognised when a resource is controlled by the Society as a result of a past event or transaction, it is probable that the expected future economic benefits associated with the asset will flow to the Society, and the historical or fair value can be reliably measured.

Tangible fixed assets are stated at cost less accumulated depreciation, and the carrying values are reviewed annually for impairment. Depreciation is provided for on all tangible fixed assets at rates calculated to write off the cost or valuation, less estimated residual value, of each asset on a straight-line basis over its expected useful life, as follows:

Freehold premises:	2.0% per annum
Fixtures and fittings:	10.0% per annum
Motor vehicles:	25.0% per annum
Furniture and equipment:	20.0% per annum
Computer equipment:	33.3% per annum

Residual value represents the estimated amount which would currently be obtained from disposal of an asset, after deducting estimated costs of disposal, if the asset were already of the age and in the condition expected at the end of its useful life.

#### Investments

Listed investments are included on the Balance Sheet at fair value, which is their closing bid price on the current or previous trading day.

Unlisted investments are included on the Balance Sheet at their fair value. For unlisted funds this is based on the Society's share of the net asset value of the investments using the latest available performance data. Investments in subsidiaries are recorded at cost on the balance sheet.

Investments are classified as current assets on the Balance Sheet as they can be converted to cash within three months.

Realised gains and losses on disposals in the year and unrealised gains and losses on investments at the Balance Sheet date are included in the Statement of Financial Activities for the relevant underlying funds. All investment income is treated as unrestricted.

## Notes to the Financial Statements for the Financial Year ended 31 December 2018

(continued)

### 1. ACCOUNTING POLICIES (CONTINUED)

#### Stock

Goods purchased for resale are stated at the lower of cost and estimated selling price less costs to complete and sell, which is equivalent to the net realisable value. Cost is defined as invoice price.

Unsold donated items are not included in closing stock since their cost is nil and their value is difficult to ascertain until sold.

#### Assets Held For Sale

Gifted properties awaiting sale are valued at their fair value, which is their expected sale price, less costs of sale. Properties awaiting sale are valued by an independent valuer who holds a relevant professional qualification and has relevant experience in relation to both the class and location of the asset.

#### Cash and Cash Equivalents

Cash and cash equivalents include cash in hand, deposits with banks requiring less than three months' notice of withdrawal, and investments.

#### Financial Instruments

Financial assets and financial liabilities are recognised when the Society becomes a party to the contractual provisions of the instrument. Financial liabilities are classified according to the substance of the contractual arrangements entered into.

The financial instruments are recognised and measured in accordance with Section 11 and Section 12 of FRS 102.

All financial assets and liabilities are initially measured at transaction price (including transaction costs), except for those financial assets classified as at fair value through profit or loss, which are initially measured at fair value (which is normally the transaction price excluding transaction costs), unless the arrangement constitutes a financing transaction. If an arrangement constitutes a financing transaction, the financial asset or financial liability

is measured at the present value of the future payments discounted at a market rate of interest for a similar debt instrument.

Financial assets and liabilities are only offset in the Balance Sheet when, and only when there exists a legally enforceable right to set off the recognised amounts and the Society intends either to settle on a net basis, or to realise the asset and settle the liability simultaneously.

#### Trade and Other Debtors

Trade and other debtors are recognised at the settlement amount due after any discount offered. Prepayments are valued at the amount prepaid net of any trade discounts due.

#### Trade and Other Creditors

Creditors and provisions are recognised where the Society has a present obligation resulting from a past event that will probably result in the transfer of funds to a third party and the amount due to settle the obligation can be reliably measured or estimated. Creditors and provisions are normally recognised at their settlement amount after allowing for any trade discounts due and at their present value where the time value of money is deemed significant.

#### Retirement Benefits

The Irish Cancer Society operates a defined contribution ("DC") pension scheme. Contributions payable to this scheme are charged to the Statement of Financial Activities in the period to which they relate. Amounts not yet remitted at the year-end are included in accruals on the Balance Sheet. The assets of the plan are held separately from the Society in independently administered funds.

#### Taxation

The Society has been granted exemption under Sections 207 and 208 of the Taxes Consolidation Act 1997.

### 2. CRITICAL ACCOUNTING JUDGEMENTS AND KEY SOURCES OF ESTIMATION UNCERTAINTY

In the application of the Society's accounting policies, which are described in note 1, the Directors are required to make judgements, estimates and assumptions about the carrying amounts of assets and liabilities that are not readily apparent from other sources. The estimates and associated assumptions are based on historical experience and other factors that are considered to be relevant. Actual results may differ from these estimates.

The estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognised in the period in which the estimate is revised if the revision affects only that period, or in the period of the revision and future periods if the revision affects both current and future periods.

The following are the critical judgements that the Directors have made in the process of applying the Society's accounting policies and that have the most significant effect on the amounts recognised in the financial statements.

Valuation of freehold premises:

An impairment review is performed on an annual basis whereby the net realisable value is compared to the value-in-use to establish if an impairment is required. Appropriate assumptions relating to future cashflows and interest rates are used in arriving at a value-in-use.

## Notes to the Financial Statements for the Financial Year ended 31 December 2018

(continued)

### 3. INCOME

#### a) Donations and legacies

	2018	2018	2018	2017
	Unrestricted	Restricted	Total	Total
	€'000	€'000	€'000	€'000
Donations	1,296	155	1,451	709
Legacies	2,445	630	3,075	8,117
<b>Total</b>	<b>3,741</b>	<b>785</b>	<b>4,526</b>	<b>8,826</b>

Donations include general contributions, social media led event donations, tribute gifts in memory, and donations in lieu of wedding favours.

#### b) Fundraising campaign income

Community Daffodil Day	3,242	10	3,252	3,137
Community events	2,356	614	2,970	2,867
Individual giving	2,425	390	2,815	3,041
Corporate partnerships	1,763	551	2,314	2,108
Movember	-	584	584	779
Cups Against Breast Cancer	11	431	442	395
Shave or Dye and Dare to Care	160	14	174	310
Christmas cards	88	-	88	51
<b>Total</b>	<b>10,045</b>	<b>2,594</b>	<b>12,639</b>	<b>12,688</b>

Community events include local fundraising, challenge events and Relay for Life.

#### c) Trading activities

Shop income	3,665	-	3,665	3,784
Other trading activities	12	-	12	12
<b>Total</b>	<b>3,677</b>	<b>-</b>	<b>3,677</b>	<b>3,796</b>

#### d) Investments

Investment income	33	-	33	12
Deposit interest	8	-	8	2
Other income	-	-	-	3
<b>Total</b>	<b>41</b>	<b>-</b>	<b>41</b>	<b>17</b>

**Notes to the Financial Statements for the Financial Year ended 31 December 2018**  
(continued)

**3. INCOME (CONTINUED)**

**e) Income from charitable activities**

	2018	2018	2018	2017
	Unrestricted	Restricted	Total	Total
	€'000	€'000	€'000	€'000
NCCP Travel to Care	-	500	500	300
Other State income	34	150	184	403
Total government grants	34	650	684	703
Night nursing reimbursements				
Malignant	50	-	50	39
Non-malignant	702	-	702	663
Total reimbursements	752	-	752	702
Other	3	-	3	1
<b>Total</b>	<b>789</b>	<b>650</b>	<b>1,439</b>	<b>1,406</b>

## Notes to the Financial Statements for the Financial Year ended 31 December 2018

(continued)

### 4. ANALYSIS OF EXPENDITURE ON CHARITABLE ACTIVITIES

The table below analyses direct and support costs. Direct costs are the delivery costs of an activity including direct salaries. Support costs are analysed in note 6.

	2018	2018	2018	2017
	Unrestricted	Restricted	Total	Total
	€'000	€'000	€'000	€'000
<b>Reduce the Risk of Cancer</b>				
Cancer prevention campaigns & literature	372	59	431	394
Cancer action communities	57	-	57	47
Youth advocacy	40	-	40	36
Operating costs	479	-	479	451
Total direct and operating costs	948	59	1,007	928
Support costs	259	-	259	257
Total Reduce the risk of cancer	1,207	59	1,266	1,185
<b>Improve Lives - Survivorship</b>				
Support group affiliation	466	-	466	463
Volunteer drivers	234	76	310	273
Travel2Care (NCCP)	-	308	308	384
Prostate awareness and support	42	219	261	271
Financial support	142	62	204	167
National conference for cancer survivors	61	-	61	107
Survivors supporting survivors	15	-	15	8
Operating costs	322	15	337	339
Total direct and operating costs	1,282	680	1,962	2,012
Support costs	259	-	259	257
Total Survivorship	1,541	680	2,221	2,269

**Notes to the Financial Statements for the Financial Year ended 31 December 2018**  
(continued)

**4. ANALYSIS OF EXPENDITURE ON CHARITABLE ACTIVITIES (CONTINUED)**

	2018	2018	2018	2017
	Unrestricted	Restricted	Total	Total
	€'000	€'000	€'000	€'000
<b>Improve Lives - Information &amp; Support</b>				
Night nursing	1,915	1,086	3,001	2,969
Daffodil centres	853	211	1,064	863
Public and patient awareness	577	-	577	693
Cancer Nurseline	226	56	282	290
Patient literature	136	-	136	121
Professional support	25	-	25	26
Operating costs	195	-	195	196
Total direct and operating costs	3,927	1,353	5,280	5,158
Support costs	930	-	930	933
Total Information and support	4,857	1,353	6,210	6,091
<b>Research</b>				
Clinical research grants	783	350	1,133	790
Biomedical research grants	95	567	662	1,277
Other research grants	68	295	363	444
Operating costs	-	384	384	368
Total direct and operating costs	946	1,596	2,542	2,879
Support costs	134	-	134	133
Total Research	1,080	1,596	2,676	3,012
Grants are analysed in note 7.				
<b>Advocacy</b>				
Operating costs	156	-	156	162
Support costs	134	-	134	133
Total Advocacy	290	-	290	295
<b>Total expenditure on charitable activities</b>	<b>8,975</b>	<b>3,688</b>	<b>12,663</b>	<b>12,852</b>

## Notes to the Financial Statements for the Financial Year ended 31 December 2018

(continued)

### 5. FUNDRAISING ACTIVITIES

Costs comprise the following:	2018	2018	2018	2017
	Unrestricted	Restricted	Total	Total
	€'000	€'000	€'000	€'000
Daffodil Day	685	-	685	773
Individual giving	654	-	654	572
Community events	494	-	494	408
Cups Against Breast Cancer	112	-	112	113
Corporate partnerships	51	-	51	44
Movember	48	-	48	340
Shave or Dye and Dare to Care	11	-	11	75
Total fundraising campaign costs	2,055	-	2,055	2,325
Donations	22	-	22	15
Legacies	29	-	29	10
Total donations and legacies costs	51	-	51	25
Operating costs	1,481	-	1,481	1,376
Total direct costs	3,587	-	3,587	3,726
Investment management costs	66	-	66	84
Support costs	777	-	777	771
Total	4,430	-	4,430	4,581



## Notes to the Financial Statements for the Financial Year ended 31 December 2018

(continued)

### 6. SUPPORT COSTS

Support costs are the costs of personnel and associated overheads of the chief executive, finance, human resources functions, infrastructural support of facilities and information technology. Also included are the governance costs comprising the external annual audit and other legal and regulatory compliance.

Support costs are allocated across the Society's activities to fairly represent the cost of delivering those activities. The costs have been allocated on a headcount basis and are apportioned as follows:

- » 58% to Improve Lives / Reduce Risk
- » 31% to Fundraising
- » 11% to Research and Advocacy

	2018	2018	2018	2018	2017
	Improve Lives / Reduce Risk	Research and Advocacy	Fundraising	Total	Total
	€'000	€'000	€'000	€'000	€'000
Facilities and ICT	834	166	470	<b>1,470</b>	1,343
Finance	294	49	147	<b>490</b>	534
Human Resources	180	30	90	<b>300</b>	286
CEO function	140	23	70	<b>233</b>	322
<b>Total</b>	<b>1,448</b>	<b>268</b>	<b>777</b>	<b>2,493</b>	<b>2,485</b>

Included in the support costs are the following governance costs:

	2018	2017
	€'000	€'000
Legal and professional fees	-	14
Audit fees	<b>29</b>	29
Strategic management	-	6
<b>Total</b>	<b>29</b>	<b>49</b>

**Notes to the Financial Statements for the Financial Year ended 31 December 2018**

(continued)

**7. RESEARCH GRANTS**

Expenditure on the following grants was charged in 2018:

<b>Recipient</b>	<b>Project Description</b>	<b>€'000</b>
Molecular Medicine Ireland	The Irish Prostate Cancer Outcomes Research collaboration	<b>350</b>
Dr. Emer Guinan	Exercise prescription in patients with bone metastases. Collaboration with the All Ireland Institute of Hospice and Palliative Care (AIHPC)	<b>31</b>
National Cancer Registry Ireland	Developing an evidence base to inform the National Cancer Strategy at the National Cancer Registry	<b>94</b>
Dr. Deirdre Connolly	Examining the impact of a social prescribing service for individuals living with and beyond cancer	<b>20</b>
Prof Juliette Hussey	Preoperative exercise to improve fitness in patients undergoing complex surgery for cancer in the lung or oesophagus. Co- fund with the Health Research Board as part of the MRCG/HRB Joint Funding Scheme	<b>150</b>
Dr. Gerard Brien	Understanding underlying disease mechanisms in Ewing sarcoma	<b>230</b>
Rebecca O'Brien	Investigation of the role of the complement cascade in the radioresistance of rectal cancer	<b>135</b>
Dr. Cathal Cadogan	Medicines optimisation for patients living with cancer and receiving palliative care. Collaboration with the All Ireland Institute of Hospice and Palliative Care	<b>31</b>
Dr Claire Meaney	Computational evaluation of morphologic tumour tissue features as diagnostic and prognosis predictors of lung cancer. Co-fund with the HRB as part of the NCI Cancer Prevention Fellowship Program Reintegration Grant	<b>12</b>
University College Dublin	PhD Fees Contingency	<b>2</b>
Stephanie Maher	Summer Studentship	<b>3</b>
Katherine Kelly	Summer Studentship	<b>3</b>
Prof. Michael O'Dwyer	Blood Cancer Network Ireland (BCNI) collaboration with Science Foundation Ireland	<b>183</b>
Prof. John Quinn & Prof. Peter O Gorman	BCNI support resource role	<b>100</b>

**Notes to the Financial Statements for the Financial Year ended 31 December 2018**  
(continued)

**7. RESEARCH GRANTS (CONTINUED)**

<b>Recipient</b>	<b>Project Description</b>	<b>€'000</b>
Cancer Trials Ireland	Core and strategic funding for 2018 : supporting cancer clinical trials	<b>485</b>
Peter O’Gorman	Clinical Research Award	<b>150</b>
Dr Catherine Kelly	Clinician Research Leadership Award 2018	<b>150</b>
Mobility	Total mobility grants 2018	<b>28</b>
Irish Association for Cancer Research	Support of National Cancer Research Network	<b>15</b>
Refunds	Prior years Grants unused and returned	<b>(14)</b>
Operating Costs	Management of tenders, review and oversight	<b>384</b>
Support and central costs	(Note 4)	<b>134</b>
<b>Total</b>		<b>2,676</b>

The research grants paid by the Society during the year funded 128 researchers in Ireland (2017: 110).

**8. ANALYSIS OF CHARITABLE FUNDS**

**a) Analysis of Movement in Designated Funds**

The designated fund comprises amounts allocated by the Directors from unrestricted income.

€6m relating to a large legacy was received in 2017. These funds were transferred from the designated fund to the general unrestricted fund in 2018. The Board has decided that these funds should be used to meet the growing demand for cancer services and new initiatives under the five-year strategic plan 2020-2024.

The €1m fund relating to research is held to protect currently committed research programmes from future unexpected variations in income.

	<b>Opening Balance as at 01/01/2018 €'000</b>	<b>Income/ Expenditure 2018 €'000</b>	<b>Transfers 2018 €'000</b>	<b>Closing Balance as at 31/12/2018 €'000</b>
Research	<b>1,000</b>	-	-	<b>1,000</b>
Other	<b>6,000</b>	-	<b>(6,000)</b>	-
<b>Total</b>	<b>7,000</b>	-	<b>(6,000)</b>	<b>1,000</b>

## Notes to the Financial Statements for the Financial Year ended 31 December 2018

(continued)

### 8. ANALYSIS OF CHARITABLE FUNDS (CONTINUED)

#### b) Analysis of Movement in Restricted Funds

Restricted funds are funds received where the donor has specified how the funds are to be used.

	Opening Balance as at 01/01/2018 €'000	Income 2018 2018 €'000	Expenditure 2018 €'000	Transfers 2018 €'000	Closing Balance as at 31/12/2018 €'000
Breast cancer	-	775	(625)	-	150
Prostate cancer	126	615	(565)	-	176
Travel2Care grants (state)	-	500	(308)	-	192
Research	100	1,246	(1,246)	-	100
Nursing	-	804	(804)	-	-
Paediatric cancer	-	62	(62)	-	-
Survivorship	31	25	(31)	-	25
Reduce the risk	45	2	(47)	-	-
<b>Total</b>	<b>302</b>	<b>4,029</b>	<b>(3,688)</b>	<b>-</b>	<b>643</b>

**Breast Cancer:** to fund information, advice, research and support services for women and men affected by breast cancer.

**Prostate Cancer:** to fund information, advice, research and support services for men affected by prostate cancer.

**Travel2Care:** to fund financial assistance for patients who travel to hospital appointments.

**Research:** to fund vital cancer research programmes to deliver new hope and supports for patients, enabling new therapies, and building an advanced cancer research infrastructure which will enhance the country's cancer care capabilities into the future.

**Nursing:** to fund support to patients who need end-of-life care through a home nursing service and to fund advice and guidance through the Cancer Nurseline and Daffodil Centres.

**Paediatric cancer:** to fund research and support services (including financial support) for children affected by cancer.

**Survivorship:** to fund a support network for cancer survivors through annual conferences, peer-to-peer educational and wellbeing programmes in affiliated cancer support centres, and funding counselling for survivors.

**Reduce the Risk:** to fund programmes aimed at raising awareness and sharing information on how to avoid cancer.

#### c) Analysis of Movement in Unrestricted Funds

Unrestricted funds are funds received where the donor has not specified how the funds are to be used.

	Opening Balance as at 01/01/2018 €'000	Income 2018 €'000	Expenditure 2018 €'000	Transfers 2018 €'000	Gains/ (Losses) 2018 €'000	Closing Balance as at 31/12/2018 €'000
General fund	14,911	18,293	(16,297)	6,000	(116)	22,791

## Notes to the Financial Statements for the Financial Year ended 31 December 2018

(continued)

### 8. ANALYSIS OF CHARITABLE FUNDS (CONTINUED)

#### d) Analysis of Net Assets Between Funds

	Restricted Funds	Designated Funds	General Funds	Total	Total
				2018	2017
	€'000	€'000	€'000	€'000	€'000
Tangible fixed assets	-	-	9,510	9,510	9,792
Current assets	643	1,000	17,307	18,950	17,223
Current liabilities	-	-	(4,026)	(4,026)	(4,802)
<b>Total</b>	<b>643</b>	<b>1,000</b>	<b>22,791</b>	<b>24,434</b>	<b>22,213</b>

In respect of prior year:

	Restricted Funds	Designated Funds	General Funds	Total	Total
				2017	2016
	€'000	€'000	€'000	€'000	€'000
Tangible fixed assets	-	-	9,792	9,792	10,001
Current assets	302	7,000	9,921	17,223	10,795
Current liabilities	-	-	(4,802)	(4,802)	(5,152)
<b>Total</b>	<b>302</b>	<b>7,000</b>	<b>14,911</b>	<b>22,213</b>	<b>15,644</b>

### 9. NET INCOME/ (EXPENDITURE) FOR THE FINANCIAL YEAR

	2018	2017
	€'000	€'000
This is stated after charging:		
Depreciation	400	395
Auditor's remuneration:		
» Audit of financial statements	29	30
» Other assurance services	4	9
» Tax advisory services	-	1
» Other non- audit services	-	-
Directors' remuneration	-	-
Operating lease charge	670	690

The Directors all serve in a voluntary capacity and do not receive any remuneration.

## Notes to the Financial Statements for the Financial Year ended 31 December 2018

(continued)

### 10. TAXATION

No charge to corporation taxation arises as the Society has been granted exemption under Sections 207 and 208 of the Taxes Consolidation Act 1997.

### 11. EMPLOYEES AND REMUNERATION

The Society employs staff to deliver on its strategy, raise income and provide infrastructure and support. Staff costs are allocated to a number of activities as follows:

#### Charitable Activities:

Delivery of cancer information and support services (e.g. Daffodil Centre and Cancer Nurseline nurses). Delivery of cancer survivorship services (e.g. Volunteer Drivers Programme, Cancer Support Groups Affiliation). Running cancer prevention campaigns and projects (e.g. X-Hale and We Can Quit). Managing and investing in research. Delivery of advocacy targets and communications messages.

#### Fundraising:

Running national campaigns (including Daffodil Day, Shave or Dye, Dare to Care, Colour Dash races and Paint it Pink), events (Women's Mini Marathon and treks), community activities (local fundraising walks, fun runs and Relay for Life events), corporate partnerships (sponsorship, charity of the year and employee fundraising) and supporter fundraising (donor and regular giving appeals).

#### Charity Shops:

Operating and managing the Society's national network of 20 charity shops (2017: 21).

#### Support Activities:

Providing infrastructure to support the Society's operations and to ensure legal and regulatory compliance.

The average number of persons, excluding night nurses, employed by the Society during the financial year is set out below:

	<b>2018</b>	2017
	<b>Number</b>	Number
Charitable activities	<b>57</b>	55
Fundraising	<b>25</b>	25
Charity shops	<b>45</b>	45
Support	<b>23</b>	23
<b>Total</b>	<b>150</b>	148

#### Night Nursing:

In addition to the staff numbers above, the Society also employs night nurses to provide free end of life care in patients' homes. 194 (2017: 209) nurses were employed on a sessional basis based on demand with an average of 73 nurses working per week (2017: 72).

## Notes to the Financial Statements for the Financial Year ended 31 December 2018 (continued)

### 11. EMPLOYEES AND REMUNERATION (CONTINUED)

The aggregate payroll costs, excluding night nursing, were as follows:

	2018	2017
	€'000	€'000
Salaries	6,417	6,060
Social welfare costs	679	638
DC pension scheme employer contributions (note 20)	410	377
Permanent health, life assurance and DC pension scheme costs	96	133
Other compensation costs	-	13
<b>Total</b>	<b>7,602</b>	<b>7,221</b>

Included in the remuneration figures above are redundancy costs for two people totalling €51,889 (2017: €40,297 for two people).

In addition to the salaries above, the Society incurred €2,762,803 (2017: €2,735,580) in night nursing salaries.

Employee remuneration (excluding pension, redundancy and end-of-contract holiday pay) exceeding €70,000:

	2018	2017
	Number	Number
€70,000 - €80,000	4	3
€80,001 - €90,000	-	1
€90,001 - €100,000	6	6
€100,001 - €110,000	1	-
€100,001 - €120,000	-	-
€120,001 - €130,000	-	-
€130,001 - €140,000	1	1
> €140,000	-	-

Key management personnel is defined as the CEO and the 6 (2017: 6) members of the senior management team. The total emoluments (including benefits, pension and redundancy) paid in regard to the senior management team in 2018 was €826,382 (2017: €780,681).

In 2018 the CEO was paid an annual salary of €125,000 (2017: €135,000). Due to the requirement for extensive work-related travel, including weekends, the CEO received an annual car allowance of €10,000 in 2018; in 2017 the previous CEO had the use of a company car. The Society also contributed 15% of salary to the defined contribution pension scheme.

#### Director expenses:

Directors receive no remuneration for their services. Out-of-pocket expenses incurred in connection with their duties may be claimed. The amount claimed in 2018 was €Nil (2017: €Nil).

## Notes to the Financial Statements for the Financial Year ended 31 December 2018

(continued)

**12. TANGIBLE ASSETS**

	Freehold Premises	Computer Fixtures & Fittings	Motor Vehicles	Furniture & Equipment	Equipment & Software	Total
	€'000	€'000	€'000	€'000	€'000	€'000
<b>Cost:</b>						
At 01/01/2018	13,258	182	19	520	1,162	15,141
Additions	-	-	-	13	105	118
Disposals	-	-	-	(6)	(48)	(54)
<b>At 31/12/2018</b>	<b>13,258</b>	<b>182</b>	<b>19</b>	<b>527</b>	<b>1,219</b>	<b>15,205</b>
<b>Depreciation:</b>						
At 01/01/2018	3,668	145	19	487	1,030	5,349
Charge for financial year	265	9	-	15	111	400
Disposals	-	-	-	(6)	(48)	(54)
<b>At 31/12/2018</b>	<b>3,933</b>	<b>154</b>	<b>19</b>	<b>496</b>	<b>1,093</b>	<b>5,695</b>
<b>Net book amounts:</b>						
<b>At 31/12/2018</b>	<b>9,325</b>	<b>28</b>	<b>-</b>	<b>31</b>	<b>126</b>	<b>9,510</b>
Net book amounts: At 31/12/2017	9,590	37	-	33	132	9,792

Included in freehold premises is a property that is used for trading activities; a section of this property that is currently surplus to operational requirements is rented to a third party on a short-term commercial basis. The rental income from this property in 2018 was €12,000 (2017: €12,000) and is included under other trading activities in note 3. The other 19 shops are held on a leasehold basis.

**13. CURRENT ASSET INVESTMENTS**

	2018	2017
	€'000	€'000
Investment Funds:		
At 1 January	<b>5,378</b>	5,195
(Loss)/gain on investments	<b>(116)</b>	240
Income – legacy	-	15
Investment income	<b>33</b>	12
Management fees	<b>(67)</b>	(84)
At 31 December	<b>5,228</b>	5,378

Investment funds are included in the accounts at fair value and any fluctuations are accounted for in the Statement of Financial Activities.



**Notes to the Financial Statements for the Financial Year ended 31 December 2018**  
(continued)

**14. ASSETS HELD FOR SALE**

	31/12/2018	31/12/2017
	€'000	€'000
Balance at 1 January	-	-
Bequeathed property additions	537	-
Balance at 31 December	537	-

Included in assets held for sale at the year end is one house which was donated to the Irish Cancer Society during the year.

**15. DEBTORS: AMOUNTS FALLING DUE WITHIN ONE YEAR**

	2018	2017
	€'000	€'000
Trade and other debtors	267	104
Accrued income	705	395
Prepayments	422	368
Total	1,394	867

All trade debtors are due within the Society's normal terms.

**16. CREDITORS**

**Amounts falling due within one year:**

	2018	2017
	€'000	€'000
Trade and other creditors	556	474
Accruals	508	734
Funds held in trust	50	-
Payroll taxes	245	250
Instalments due on research grants payable	1,847	2,393
Total	3,206	3,851

Funds held in trust relate to an amount of €150k that was received from the Department of Health in 2018. The Irish Cancer Society agreed to manage these funds on behalf of the Cervical Check Patient Support Group. These funds are ring-fenced for use by the group. The balance outstanding at the year end was €50k. It is expected the Society will establish a company specifically to administer the funds.

**Amounts falling due after more than one year:**

	2018	2017
	€'000	€'000
Instalments due under research grants payable	820	951

## Notes to the Financial Statements for the Financial Year ended 31 December 2018

(continued)

### 17. GRANT COMMITMENTS AND PROVISIONS

	31/12/2018	31/12/2017
	€'000	€'000
Balance at 1 January	3,344	3,890
New grants awarded	2,172	2,733
Refunds	(14)	(222)
Payments	(2,835)	(3,057)
Balance at 31 December	2,667	3,344

Classified as:

	31/12/2018	31/12/2017
	€'000	€'000
Due within 1 year	1,847	2,393
Due after 1 year	820	951
Balance at 31 December	2,667	3,344

### 18. FINANCIAL INSTRUMENTS

The carrying values of the Society's financial assets and liabilities are summarised by category below:

	2018	2017
	€'000	€'000
<b>Financial Assets</b>		
Measured at fair value through profit or loss		
Current asset listed investments (see note 13)	5,228	5,378
Measured at undiscounted amount receivable		
Trade and other debtors (see note 15)	267	104
Total	5,495	5,482
<b>Financial Liabilities</b>		
Measured at undiscounted amount payable		
Trade and other payables (see note 16)	3,273	3,818

The Society's income, expense, gains and losses in respect of financial instruments are summarised on the following page.

**Notes to the Financial Statements for the Financial Year ended 31 December 2018**  
(continued)

	2018	2017
	€'000	€'000
<b>Fair value gains and (losses)</b>		
On financial assets measured at fair value through statement of financial activity	<b>(116)</b>	240

**19. CASH FLOW STATEMENT**

**Reconciliation of changes in net income to cash generated by operations**

	2018	2017
	€'000	€'000
<b>Net income for the financial year</b>	<b>2,221</b>	6,569
<b>Adjustments for:</b>		
Depreciation	<b>400</b>	396
Decrease in creditors	<b>(776)</b>	(350)
Decrease in stock	<b>100</b>	17
Increase in assets held for sale	<b>(537)</b>	-
Increase in debtors	<b>(527)</b>	(379)
Deposit interest	<b>(8)</b>	(2)
Cash generated by operations	<b>873</b>	6,251

**20. RETIREMENT BENEFIT SCHEMES**

**Defined Contribution Scheme**

The Society operates a defined contribution pension scheme for all qualifying employees. The assets of the scheme are held separately from those of the organisation in an independently administered fund. The organisation made contributions of €410,294 (2017: €377,251) during the financial year. The amount outstanding at the financial year end was €74,571 (2017: €63,278). The outstanding balances are held on the Balance Sheet under creditors.

**21. CONSTITUTION**

The liability of the members of the Society to contribute towards its assets is limited to an amount not to exceed the sum of €1.27 in each case.

## Notes to the Financial Statements for the Financial Year ended 31 December 2018

(continued)

### 22. OPERATING LEASES

The future minimum lease payments under operating leases for each of the following periods:

At 31 December the Society had total commitments under operating leases in relation to charity shops premises, storage and office space:

	2018	2017
	€'000	€'000
Within one year	562	545
Between one and five years	1,707	1,623
More than five years	852	1,198
<b>Total</b>	<b>3,121</b>	<b>3,366</b>

### 23. RELATED PARTY TRANSACTIONS

A member of the senior management team, the Head of Research, is a director of the following two organisations:

- a) Cancer Trials Ireland: a cancer clinical trials network. During 2018 the Society provided a research grant of €485k to Cancer Trials Ireland (2017: €435k).
- b) The Medical Research Charities Group (MRCG): the national umbrella group of medical research and patient support charities. During 2018 the Society paid an annual membership fee to MRCG of €1,200 (2017: €1,200).

No personal benefits arose from the above transactions.

### 24. FINANCIAL ASSETS

As the Society's subsidiary Irish Cancer Society Research Limited did not trade during 2018 and has no net assets, consolidated financial statements have not been prepared.

### 25. COMPARATIVES

Certain prior year amounts have been reclassified for consistency with the current year presentation.

### 26. POST BALANCE SHEET EVENTS

There have been no events subsequent to the year-end that require any adjustment to, or additional disclosure in, the 2018 financial statements.

### 27. APPROVAL OF FINANCIAL STATEMENTS

These financial statements were approved by the Board on 6 August 2019.

## Reference and Administrative Details

### REFERENCE

Within this document the Irish Cancer Society is referred to as the Society and the Company.

### COMPANY NUMBER

20868

### CHARITY REGULATOR NUMBER

20009502

### REVENUE CHARITY NUMBER

5863

### REGISTERED OFFICE

43/45 Northumberland Road, Dublin 4

### COMPANY DIRECTORS

Dermot Breen  
Fergus Brennan  
Dr. Sinead Brennan  
Geraldine Clarke  
Andrew Craig  
Kieran Crowley  
Sean Dorgan  
Prof. Liam Grogan  
Dr. Cormac Kilty  
Dr. Helen McAvoy  
Willie O'Reilly

### CHAIRMAN

Dermot Breen

### CHIEF EXECUTIVE

Averil Power

### COMPANY SECRETARY

Eamonn O'Dwyer (resigned 07 January 2019)  
Conor King (appointed 07 January 2019)

### BANKERS

AIB Bank, 9 Terenure Road, Rathgar, Dublin 6

### SOLICITORS

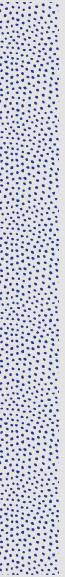
Hayes Solicitors, Lavery House, Earlsfort Terrace, Dublin 2

### INVESTMENT ADVISERS

Investec Wealth & Investment, The Harcourt Building,  
Harcourt Street, Dublin 2

### AUDITORS

Deloitte Ireland LLP, Chartered Accountants and Statutory  
Audit Firm, Deloitte and Touche House, Earlsfort Terrace,  
Dublin 2





**For over fifty-five years  
we, as a community, have  
worked together for  
and on behalf of people  
affected by cancer.**

**Irish Cancer Society**  
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