



Multiple Sclerosis Society

Annual report and accounts 2010



The Multiple Sclerosis Society of
Great Britain and Northern Ireland

Just a few of the thousands of people putting MS on the map

Antrim

John Coulter

John has MS and receives a lot of support from his local branch in Antrim.



Lanarkshire

Paula Cowan

Paula studied a Master's in MS to better understand the needs of her patients.



Cambridge

Robin Franklin

Robin and his team at the Cambridge Centre for Myelin Repair have discovered a world first in MS research.



Powys

Su Rollinson

Su was instrumental in setting up a therapy clinic in the rural County of Montgomeryshire, Powys.



Kent

Ashleigh and Meg Silver

Meg campaigned for her husband Ashleigh to receive funding for a treatment called functional electrical stimulation (FES).



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Hello and welcome

...to the MS Society annual report and accounts 2010.

It's been another busy and eventful year for staff and volunteers at the Society as we continue our fight to 'beat MS'.

2010 saw the halfway point in the Society's strategy approved by members in late 2007. We took the opportunity to reflect and look at what we need and want to achieve for people with MS in the years ahead.

We were on the right track, so at the end of the year we published our refreshed strategy, setting out a clear and bold vision for the next five years. Our aims remain with only minor modification – funding research, providing information and education, offering support, raising the standards of care and leading the MS agenda – but we recognise the challenges of the current economic circumstances in achieving our ambitions.

Leading the MS agenda was a big part of our work in 2010 as the general election changed the political landscape dramatically. We used it as an opportunity to launch our Manifesto – a document clearly outlining the healthcare and support people with MS need to live full, independent lives. As the new Government has made changes, we are campaigning hard for the rights of people affected by MS – particularly for access to new treatments and services. Elections in Northern Ireland, Cymru and Scotland in early 2011 saw the benefits of clear campaigning messages from the Society.

'Personalisation' has also been a key area of our work over the last year and will remain so in the future. For example, our review of the needs of people with MS showed new options for the way we could assist with respite and short breaks. The Board's decision to stop directly providing respite care was overwhelmingly supported by our members. We are delighted to report the substantial progress in transferring the Society's four respite centres to new providers, and developing our information and support to enable more people with MS to benefit right across the UK.

At the end of 2010 scientists at the Cambridge Centre for Myelin Repair, funded by the MS Society, reported the first steps for repairing damage to myelin. At the start of 2011 we committed to continuing our funding for this vital, world leading centre of MS research.

Our heartfelt thanks goes to every one of our volunteers, staff, donors, MS professionals and the members that support us – your untiring dedication is vital to helping all those affected by MS as we travel along the path to finding a cure.



Pictures: Tony Kennan, CBE
and Simon Gillespie, Chief Executive



Our five aims as a society are:

Research: We will fund and promote research into finding the cause of and cure for MS, and improving care and services for people affected by MS.

Information and education: We will ensure that the MS Society produces up-to-date, accurate and accessible information tailored to meet the needs of people affected by MS and MS professionals.

Support: We will provide support to all people affected by MS.

Raising standards of care: We will raise standards of care for all people living with MS.

Leading the MS agenda: We will work to increase awareness of the devastating impact of MS on people's lives, influence decision-makers, and inform about the help, support and services the MS Society can provide.

Our vision

A world free from the devastating effects of MS

Our mission

To enable everyone affected by MS to live life to their full potential and secure the care and support they need, until we ultimately find a cure

Our strategy

Putting the pieces together to beat MS

£29.1m

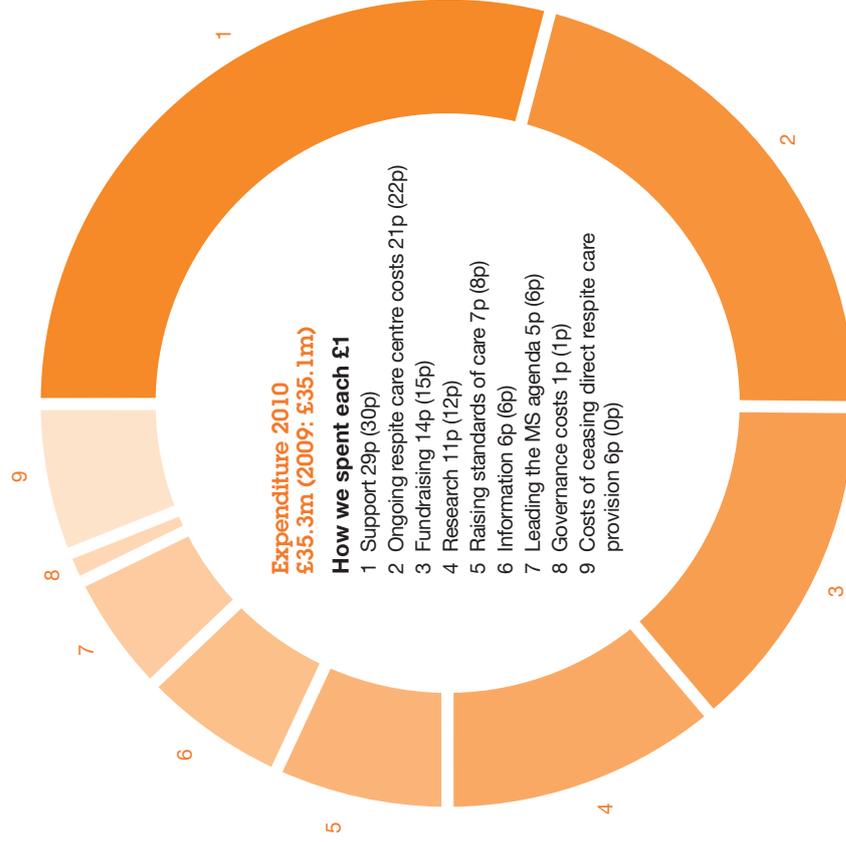
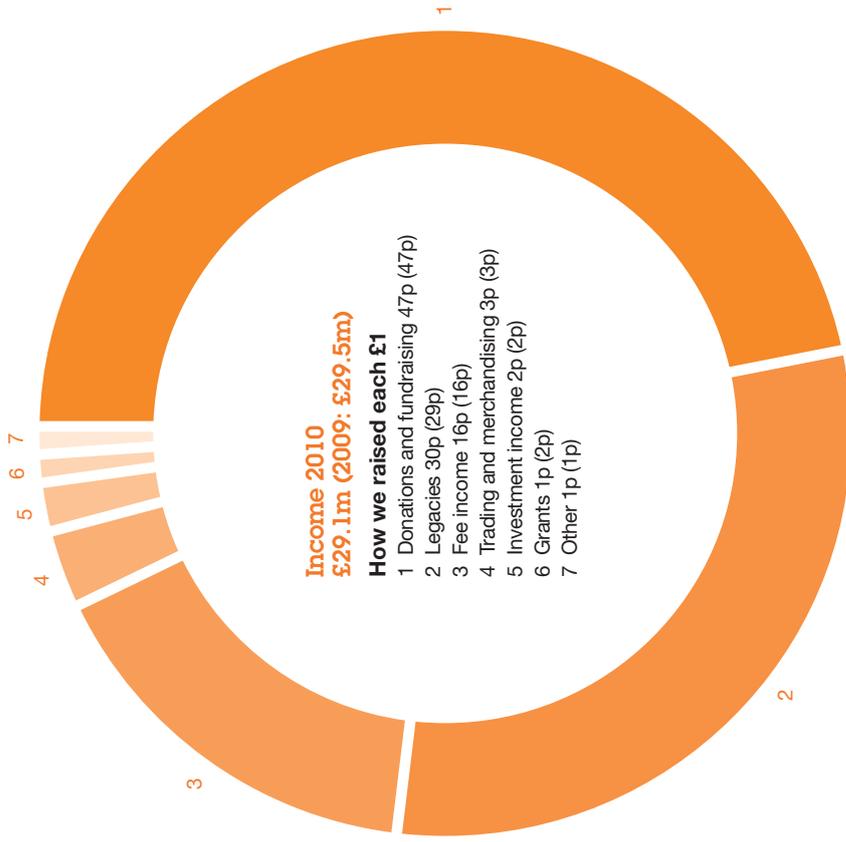
Total income (£)

£35.3m

Total expenditure (£)

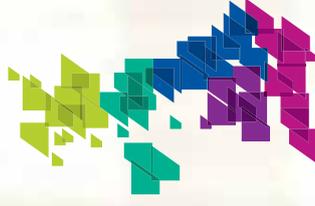
77%

From donations and legacies



Cambridge

Robin Franklin



Robin Franklin and his team at the Cambridge Centre for Myelin Repair are funded by the MS Society. Alongside colleagues from Edinburgh, they have discovered that damage to myelin, the protective sheath around our nerve cells, could potentially be reversed by stimulating the body's own stem cells into action. It is early days, but there's hope this could lead to treatment for people with MS within the next 15 years.

A nation united to beat MS

As Europe's foremost charitable funder of MS research we continued to fund groundbreaking projects in biomedical and care and services research in 2010 to improve diagnosis, treatments and services.



Another first for MS Society research in 2010

Just before the end of the year came exciting results from a groundbreaking study at the Cambridge Centre for Myelin Repair and the Edinburgh Research, both funded by the Society. It was shown that damage to myelin could potentially be reversed using the body's own stem cells.

Led by Professors Robin Franklin (pictured on page 4) from Cambridge University and Charles French-Constant from the University of Edinburgh, researchers identified a molecule that encourages the brain's own stem cells to regenerate myelin. This is one of the most exciting developments in MS research in recent years paid for by the Society. We hope that these results will lead to clinical trials in people with MS in the next five years and a treatment within 15 years.

Research expenditure for 2010

£3.8m

Collaborating with the UK Stem Cell Foundation

With stem cells never far from the headlines, we cemented our position at the forefront of stem cell research by joining forces with the UK Stem Cell Foundation in 2010. The aim of this unique collaboration is to ensure that the latest research findings are translated quickly and effectively into clinical trials for people with MS. Together, we made available £1m in stem cell research.

We have invested a large proportion of this money into three research projects: one being an international collaborative clinical trial looking at the safety and effectiveness of stem cells for the treatment of MS; a second observing how the stem cells of people with secondary progressive MS differ from people without MS; and finally, a study into whether brain stem cells can be used to repair damaged nerve fibres.

We also published a public information booklet about stem cell therapies in MS and professional guidelines on the use of stem cells in clinical trials of MS in the prestigious medical journal, *Nature Reviews Neurology*.

Setting up the MS Register

We began work on our UK MS Register – a unique project which is the first of its kind in the world and should ultimately provide us with a complete picture of MS in the UK. It's being led by a team at the University of Swansea and we've invested nearly £700,000 over three years to make the MS Register a reality.

The Register will collate information from people with MS, clinicians and NHS data to improve our understanding of what it's like to have MS in the UK. The long-term possibilities of what the MS Register could achieve are endless.

The MS Register has the potential to transform the delivery of care and services for people with MS, revolutionising the focus of MS research and opening up new avenues to explore. This work could support future research that could help find the causes of MS and ultimately help find a cure. The information gathered will aid planning and provision, and support accessible and targeted clinical trials for people with MS.

The Register was launched in May 2011 at the start of MS Week, with a campaign urging people with MS to sign up and get involved.

If you would like to get involved in this unique initiative visit www.ukmsregister.org



Colin Charvis launches MS Register in Swansea with Nessa Folks and Paul Robinson.



David Ford from Swansea University is leading the MS Register pilot.

£2.8m

awarded to research grants in 2010

Research Network

We've continued to put people affected by MS at the heart of our research programme through our award-winning Research Network. More than 350 people affected by MS help make decisions on the relevance of specific projects and key research priorities through the Research Network. This year we established the Research Network Steering group, comprising Research Network members, to advise the MS Society on how best to involve people affected by MS in our research programme.

Research Network members completed 82 lay-reviews of research applications and were involved in reviewing applications for the MS Society/UK Stem Cell Foundation and the Cambridge Centre for Myelin Repair research programme.

We look forward to continuing to work with people affected by MS to help shape our research programme in future years.

Going forward

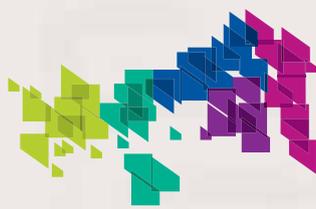
In 2011 we plan to commit £3.6m on research grants which are both of a high quality and relevant to those living with the condition. Our ultimate aim is to find a cure for MS.

We will continue to build our collaborative funding and partnership portfolio in 2011 to maximise the impact of our research spend.



Lanarkshire

Paula Cowan



Paula has enhanced her physiotherapy qualifications by studying a Master's in MS over three years at Leeds Metropolitan University. Paula received a bursary from the MS Society to fully fund her course. By studying a range of topics she is now able to understand her patients' needs even better and takes a holistic approach to treatment – looking at the overall picture.

An answer for every question

Professionals and individuals can access all the information they need from the MS Society in print, online, at an event or over the phone. It is vital we make sure that everyone affected by MS has access to the knowledge they need to live their lives as they want to.

Informing people

Every year, the MS Society holds dozens of information and education events, on a variety of topics, for people living with MS, their friends, family and carers, as well as for professionals.

In 2010, we put on a series of well-attended 'Living with MS' information days, which were held across the UK.

Attendees were able to learn about strategies for coping with MS and to share their own knowledge and experiences with other people affected by the condition. The events offered

workshops covering issues such as living with fatigue, managing pain and exercise and rehabilitation. One attendee said, "Good practical explanations which raised confidence in solving the difficulties created by the illness."

Medical professionals, including neurologists, physiotherapists and psychologists, were on hand to give practical advice, as well as to provide information on the latest research into treatments and progress on a cure for MS.



BBC's Hairy Bikers and nominees at MS Society Awards

MS Society Awards

Our prestigious MS Society Awards celebrated their second year in 2010, with a star studded ceremony held in April at the Royal Garden Hotel in London. Finalists celebrated their achievements with a host of celebrities, including the BBC's Hairy Bikers, plus MS Society volunteers and staff members.

In 2010 our events have reached over 1,000 people affected by MS

1,000

Online information

More and more people affected by MS are now able to access information and support online from home. To reflect this, we're changing the way that we communicate. In 2010 we produced four expert-led films, viewed more than 12,000 times and hosted week-long online Q&A sessions on topics including stem cell research, improving MRI understanding and staying in work with MS.

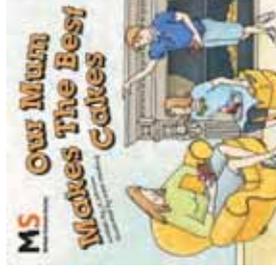
Online library catalogue

People affected by MS now have instant access to a wealth of information produced by the MS Society and other organisations. We launched a new web-based library catalogue, featuring hundreds of Society publications and articles. All will be easily accessed via our new website.



Publications

In 2010 our publications review continued, with a total of 19 titles updated to meet the accredited information standards. In addition to the rolling schedule of reviews, we produced four new titles, one of which originated from the Society's Research funding programme titled: 'Working yet worried'. Other new publications included 'Multiple Sclerosis - a quick guide', for staff in hospitals and care settings, 'Our mum makes the best cakes', an illustrated book designed to help young children understand MS and



its effects on their family. 'Multiple Sclerosis, an introduction to MS and the MS Society' is available in English and 12 other languages widely spoken in the UK.

Information points

In 2010 we increased visibility of our information products and publications by funding 21 new information points. These are located in hospital neurological departments, GP surgeries, rehabilitation centres and MS Therapy Centres. They carry our full range of publications.

Education

The MS Society provides bursaries for professionals who wish to enhance their knowledge and practice with a MS-specific qualification.

Courses funded include all the MS courses at Leeds Metropolitan University, plus the specialist module at Birmingham City University. Graduates of these courses leave with the tools to provide better support to people with MS.

Our professional network had a membership boost of 16 per cent in 2010. Network members now total 3,000. All are health and social care professionals with a shared interest in improving services for people with MS.

Going forward

New website

The new website will launch in late summer 2011. Users will be able to personalise their own content by selecting their interests and location.

16%

Our professional network had a membership boost of 16 per cent in 2010



Antrim

John Coulter



John is a member of the MS Society's Antrim Branch in Northern Ireland. He was diagnosed with Secondary Progressive MS in 2000. John receives support from his branch to do things that he wouldn't normally be able to. With his branch he got on the water and tried sailing with Belfast Lough Sailability, who support people to sail whatever their age or disability. This is just one example of the many ways the Society supports people affected by MS.

Helping hands throughout the UK

MS is such an individual condition, affecting people's lives in so many different ways, that those affected need support that's tailored to their needs. The MS Society recognises this. In 2010 we began moving towards a more flexible and personalised approach to support people with MS to maximise choice and control in their lives.



Laura McCrum, Kerry Gilchrist and John Coulter are members of the Antrim branch.

Getting personal

We put our new personalised support ethos into practice, by working alongside volunteers to develop greater local support. We piloted this approach in the West of England.

The pilot offered people with MS a team of support volunteers instead of just one Support Officer. This new flexible approach to supporting people affected by MS will allow us to reach out to a greater number of those in

need. Over 100 volunteers were recruited and given an in-depth, four day training programme and accompanying toolkit.

We will be implementing these changes across the UK over the next two years following extremely positive evaluation. We'll also be introducing e-learning to enable people in remote locations, or with barriers to attending training, to take part in the programme too.

The MS Society has 9,000 volunteers working across the UK

9,000

Providing telephone support

The Helpline continued to offer emotional support and information to anyone affected by MS in the UK. Our well-trained staff and volunteers answered questions on a range of topics, including: symptoms, diagnosis, benefits, employment, treatments, discrimination, research and health and social care.

We provide free legal advice through our partnership with the Disability Law Service. In 2010 they responded to 916 enquiries, a number that's expected to rise with recent legislative changes.



Giving grants

During 2010, over 2,000 grants with a total value of £1.4m were awarded by the Society to benefit people affected by MS.

Grants were provided for essential items such as aids and equipment, home or car adaptations and top-up funds for respite care breaks.



12,827

A total of 12,827 people accessed our services in 2010

Volunteers

Our volunteers continued to make a difference in 2010, offering practical help to people affected by MS – for example by driving minibuses or running support groups – and by fundraising.

To help volunteers run branches and support groups as effectively as possible, we developed a brand-new committee handbook, 'Making it Work'.

Going forward

The short breaks and activities fund

Launched in May 2011, following a pilot in Scotland, Wales and Northern Ireland, the Short Breaks and Activities (SBA) fund is our new way of providing short breaks, respite care and holidays. It gives people affected by MS access to greater support, whatever their short break needs and wherever they're based.

Grants can be considered for respite care, either in the home or at a care centre or similar, an activity (or series of activities), experience, short break or holiday for someone with MS and/or their carer. The grants also cover the salary costs for a professional carer to have a break or help someone with MS do so. This could be in their home or elsewhere. Travel, accommodation and disability equipment hire costs during a break can be funded as well as some alternative or complementary therapies.



We've helped carers too. Our Young Carers Fund provided grants for school trips, driving lessons, sports equipment and musical instruments, and our Carer's Opportunities Fund contributed towards course fees and opportunities for personal development, for adult carers. We also helped former carers whose caring role has recently come to an end and wished to undertake training to assist them to return to work.



HomeNetwork

Our award-winning HomeNetwork Volunteer Programme set the benchmark for the provision of high quality emotional support and information. Thanks to this programme, we have now trained a total of 28 volunteers – who either have MS themselves or a very close connection to it – to work as helpline volunteers. Their personal experiences and understanding of MS mean that they bring an extra dimension to the role, as well as knowledge, empathy and understanding.



POWYS

Su Rollinson



Su Rollinson, a volunteer of the MS Society's Montgomeryshire branch, was instrumental in setting up a therapy clinic for people with neurological conditions in the rural County of Montgomeryshire, Powys. The clinic provides services closer to home. It offers physiotherapy, speech and language and diet services, occupational therapy and more, once a month. As a result, treatment is faster and more convenient, and people get to meet others with MS as well.

Together we are stronger

We continue to nurture and maximise a large number of successful partnerships across many disciplines. These collaborations influence the way services and support are commissioned and delivered effectively for people with MS and other neurological conditions.

Respite care decision

In June 2010, following a year-long respite care review and consultation process, our Board announced that by November 2011 the Society will no longer directly provide residential respite care.

After consulting people with MS and their carers, alongside other stakeholders, it became clear that people affected by MS want more individualised services providing choice and control, and that the respite care provided by the Society met the needs of only a minority of people. We were, in effect, creating our own postcode lottery with an inequitable distribution of our resources across the UK.

In 2011, substantial progress has been made to transfer our four respite care centres to new providers. See page 15 to read about how we will support people affected by MS in the future with respite care and taking short breaks.



Su Rollinson at Newtown hospital with the therapy centre team.

Palliative care

We've been working hard across the UK to emphasise the importance of palliative care in neurology. It plays a crucial part in helping people with advanced MS, by relieving pain and improving quality of life.

The MS Society Palliative and End of Life Care Programme aims to improve national and local standards of palliative and end of life care for people with MS. We've worked in partnership with the National Council of Palliative Care and other voluntary organisations.

Our work has led to partnerships with local hospices, staff and volunteers UK wide. We teamed up with Neurological Commissioning Support (NCS) to produce a DVD by Amanda Waring, titled "Can you see me?", which was released in May 2010. In November, we held an MS Palliative and End of Life Care Conference to support health and social care professionals to improve their knowledge on palliative and end of life care issues.



The amount awarded to NCS by the Department of Health in 2011

£340k



Neuronavigator

To help health and social care commissioners access the information they need to plan neurology services effectively, NCS designed and developed a purpose-made website called Neuronavigator.

It has helped commissioners and clinicians develop business cases for effective use of resources. It was also a key supporting factor in securing £50,000 from Hertfordshire Strategic Health Authority to fund a clinical co-ordinator for rare neurological conditions.

Going forward

As part of our commitment to increase options for more personalised care and support for people with MS we will continue our work to transfer the four MS Society residential respite care centres and Helen Ley Court to new providers in 2011 who will continue to offer services to people with MS.

Everyone affected by MS has the right to access quality and specialist health and social care services, therefore we will continue local and national work to improve care and make sure everyone can benefit from good services. This includes support from a specialist MS nurse or other specialist MS practitioner.

We will work with care providers to share our expertise on responding to the needs of people affected by MS, and promote good practice and innovation in service development and delivery.

15

We have developed 15 national partnerships to help raise standards of care

Influencing locally

In 2010 we were given a fantastic opportunity to influence and improve neurology services in England through the ongoing work of NCS.

Working with two other charities – Parkinson's UK and the Motor Neurone Disease Association (MNDA) – NCS aims to improve the local commissioning of health and social care services. This is to make sure that people affected by a long-term neurological condition have a say in the way their services are provided. Spring 2011 saw the incorporation of NCS as a separate company, with

all three charities becoming equal shareholders. We're already seeing results. This includes improved planning of health and social care for people with a long-term neurological condition in a number of areas around the country.

In 2011, the Department of Health awarded NCS a grant of £340,000 over a three year period. This is for projects to support clinical commissioning groups to better understand how they can plan and schedule the right services for those people living with a neurological condition locally.

Joined up thinking

There's increasing evidence that exercise has many benefits for people with MS. However, even in the early stages of the condition, many people with MS become less active.

To address these issues, the MS Society joined forces with Oxford Brookes University to devise an innovative distance learning course in exercise rehabilitation for people with long-term neurological conditions. The course is aimed at fitness instructors and health care professionals. Following a pilot study, which showed promising results, it's hoped that the course could become more widely available during 2011.

This situation is not helped by the fact that there's little understanding – either in the health and social care system or in the general leisure industry – of how to support those who want to exercise.



Kent

Ashleigh and Meg Silver



Ashleigh has Primary Progressive MS. Since his wife Meg campaigned for funding for a treatment called functional electrical stimulation (FES), Ashleigh can now walk more safely and easily. The couple were in limbo for months after being told FES was a suitable treatment. By escalating her complaint from the Primary Care Trust to her MP and then the Health Minister, Meg won Ashleigh the right to treatment.

We influence, lead and take action UK-wide

People affected by MS tell us they expect the MS Society to speak up and be heard, and to lead the MS agenda on their behalf. We do this by ensuring we have a regular media presence, by fostering a strong brand and vibrant online communities, and by campaigning hard on issues important to people affected by MS.

Campaigning

2010 was an extraordinary year, with massive changes to the political landscape, which brought huge challenges and opportunities for the Society across the UK.

With the election of the new coalition Government in May 2010 came sweeping changes to benefits, healthcare and support services. Our priority was making sure our voice was heard so that people affected by MS could continue to have access to high quality healthcare, services and support to help them manage their MS and live independently, whatever their needs and location.

In February 2010 we launched our first UK-wide Manifesto, urging the new Government to stamp out inequality by acting on 10 important areas, including improving access to vital

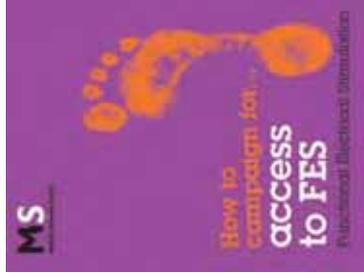
treatments, support and benefits, supporting MS specialists and reforming the social care system.

We lobbied intensively through 2010 for NICE to update the MS Clinical Guideline, which defines the healthcare people with MS should have access to. Now in 2011, it has finally agreed to do so.

Working together, staff and volunteers launched our first campaigns guide in 2010 providing advice on how to get funding for Functional Electrical Stimulation, a device to help with walking. We also produced a guide for people having problems accessing Sativex, a newly licensed drug for spasticity, in England and Wales. To date, our campaign guides have been downloaded over 3,500 times. Our Campaigns Network is helping people

Our campaigns network now has more than 7,000 members

7,000



Cover of 'How to campaign for access to FES'

campaign at a local level by enabling information sharing. The Network now has more than 7,000 members, 4,000 of whom are online. We continue to deliver training, support and tools to help people campaign on a wide range of issues.



Chief Executive of the Liberal Democrats congratulates the MS Society on their award-winning stand at the Liberal Democrat Conference.

Influencing locally

We have significantly increased our profile in parliaments and assemblies, and through our membership of groups like the Neurological Alliance and the Disability Benefits Consortium (DBC) we have magnified our message.

As part of the DBC – a coalition of more than 50 organisations campaigning for a fairer benefits system – we have successfully influenced the decisions made by the Department of Work and Pensions (DWP) on benefits issues. In 2010, we led on an

important survey into disabled people's experiences of the benefits system. Over a third of the 6,000 responses came from people with MS. We also submitted evidence to a major independent review of the assessment for Employment Support Allowance (ESA).

Both of these have influenced the Government to recognise the need for changes, in particular to make assessments fairer for people with fluctuating conditions such as MS.



Going forward

A glimpse of the future

The groundwork laid in 2010 opened the door to significant opportunities for raising awareness and influencing Government policy in 2011 and beyond.

We were invited to chair a review group in 2011 to make recommendations to improve benefits assessments for people with fluctuating conditions. We're working closely with parliamentarians and civil servants on the Welfare Reform Bill and Health and Social Care Bill, as a leading voice in the sector.

Taking our message to politicians

Party Conference season is an important time for us, as it gives us a focus for lobbying politicians, councillors and party members, and provides key opportunities for raising awareness.

In 2010 our stand helped us highlight the hidden symptoms of MS at all the major party conferences, even winning an award for 'the stand that best conveyed its message' at the Liberal Democrat Conference.

We spoke to more than 70 MPs and councillors and secured valuable media coverage, including Deputy Prime Minister Nick Clegg's visit to our stand being screened live on several TV news channels and news websites.

Raising awareness in the media

Major health reforms dominated the headlines in 2010 as new MS drugs were licensed and groundbreaking MS research published.

Throughout it all, the MS Society called on for expert comment. Over the course of the year, media coverage involving the Society helped the charity raise vital awareness of the condition. We had multiple appearances on flagship news programmes such as BBC Breakfast, GMTV and BBC Radio 4's You and Yours to coverage in national newspapers, online and in magazines read by millions.

2010 saw an MS social network explosion, with a doubling in the numbers of users on the Society's Facebook and Twitter networks. We were named overall winners for our work with social media during 2010 at the ARMC Science Communication awards.

10,142

By the end of 2010 we had a total of 10,142 fans on our Facebook page

Funding our strategy

2010 was a challenging year for the UK economy but, thanks to a combination of a balanced fundraising portfolio and a sustained fundraising effort by staff and volunteers UK wide, the MS Society managed to weather the recession and maintain its income.

The Society generates income both nationally and locally. We receive funding from individual legacies, branch fundraising activities, appeals and newsletters, events, trusts and corporate partnerships. It is only through the activities of many thousands of individuals that our income is achieved.

In 2010 Cake Break raised £300,000 and continues to be popular with individuals, groups and branches, thus increasing income year on year. Amongst our corporate partnerships, Bibendum Wine made the MS

Society their chosen charity partner in 2008 and has since raised over £40,000. We've had high profile support from the BBC's Hairy Bikers and JLS star Oritsé Williams, who was himself a young carer for his mother who has MS. In 2010 Oritsé and his bandmates took the time to meet other young carers at JLS shows around the UK, even giving one lucky fan his hat.

Fundraising activities took place across the UK and for the first time further afield with cycle events in New York and across Europe.



MS Society supporters cycled 54 miles from Chester to Liverpool, raising £3,000.



On 5 June 2010 'The Flying Granny', aka 83 year old Isobel Craigie from Ballater (pictured above), took to the skies once again. This time her skydive from 10,000 feet raised an outstanding £12,000. Isobel is an inspirational fundraiser and has so far donated over £40,000 to MS Society Scotland through her aerial adventures, as well as with some more down-to earth activities like jam sales, baking and knitting.

We would like to thank all our donors for their contributions, large and small, to the Society. Every penny counts in our fight to Beat MS.



Oritsé Williams meets young carer Harvey at a JLS concert in Swindon.

Thank you

The generosity of each and every supporter and donor is vital to us, but we'd like to thank the people and the organisations who made a substantial contribution during 2010.

Aimee Bishop	Hollister Ltd	Dr Rose Wheeler
Alice Woodbridge	Hugo Fenwick	Simon Cowley
Andrew Gilchrist	ICCM	Simon Eckett
Andrew Langdale	Isobel M Craigie	Simon Irwin
Andrew Poynter	Janne Sedgwick	Ste Churchill Henwood
Andri Camberis	Joffy Connolly	Steve Keppe
Awareness	Johnstons of Elgin	Structured Finance Management Ltd
Bangor Golf Club	Josh Chappell	Susan M Hope
Barbara Lupton	Kingston Smith LLP	Susanna Stranders
Bayer Schering Pharma AG	Len Williamson	Terry Cable
Betsy McNeill	Lisa Field	Teva Pharmaceuticals Ltd
BGC Partners	Mabel Peckenharn-Walsh	The Amalur Foundation
Bibendum Wine Ltd	Mark Dunhill	The Band Trust
Biogen Idec Limited	Mark Whitehead	The Betty Lawes Foundation
BP McKeefry	Mary Wightman	The Bill Butlin Charitable Trust
Bruce Thomas	Max Lloyd	The Emily Hughes-Hallett Fund
Cantor Fitzgerald	Merck Serono Ltd	The H B Allen Charitable Trust
Caroline Paterson	Michael Connelly	The John Coates Charitable Trust
Colin Hely Hutchinson	Michael Pearson	The Kirby Laing Foundation
Colin Woods	Moirra Jones	The Laurence Misener Charitable Trust
Crossland Tankers	Muriel Esme Anderson	The P F Charitable Trust
Darren Bright	Nicholas Cheate	The Peacock Charitable Trust
Dave Myers and Si King	Nick Maclean	The Rayne Foundation
Donald Forrester	Nigel Sale	The Redfern Charitable Trust
Charitable Trust	Norah Garlick	The Scott-Davidson Charitable Trust
EDF Energy plc	Olly Comyn	The Swire Charitable Trust
Eric Taylor	Oritsé Williams	Tom W Jackson
Foresters Friendly Society	PGA European Tour	Tullio Salvatore
Freight Investor Services	Portadown Male Voice Choir	Westfield Contributory Health Scheme
G R Wright & Sons Ltd	R J Johnson and Mrs S J Johnson	
Gavin Stewart	Robert Graham-Campbell	
Giles Deatry	Robert Kyprianou	
Healthcare at Home Ltd	Roddy Boulton	
Heather Ensor		

Meet the Trustees

The MS Society is governed by a board of volunteer trustees elected by our members. Most of the trustees have MS themselves or have a very close connection with MS.

They are responsible for the Society's strategy, policies, finances, legal accountability and ultimately everything that the Society does on behalf of people affected by MS.

You can read the trustees' report on the Society's work in 2010 over the coming pages – but before you do that – get to know the names and faces of our Board and find out about a few of our Trustees.

John Litchfield

My first involvement with the MS Society was shortly after my wife Linda was diagnosed with MS. My local branch in Maidenhead provided great support to help us come to terms with this news. They were always there for us when we needed them. I became branch chair for six years and in this time I became aware of the Society's diverse range of activities. I am now committed to ensuring local support is provided for people affected by MS, alongside everything else the Society provides. My two years as a Trustee have enabled me to meet many of the Society's members and to realise the great and varied work volunteers do to deliver our strategy. I am privileged to be in a position where I can help shape the future of the Society. My personal goal is to ensure disability does not mean exclusion or denial of the right to lead a full life.

Stuart Nixon

Living with MS for 35 years and a Society volunteer for 14 years I have developed an understanding of the issues facing those living with MS. This understanding, informed by time and listening to others, gives the thoughts of many to the Board. I am passionate that people with MS should live life to the full and share the opportunities open to all, through work, education and leisure. I'm committed to ensuring the Society promotes this agenda. As our research commitment increases we must maintain and increase the quality and breadth of work supported, not only to find a cure, but for all the challenges that MS brings. As a Trustee, I am an ambassador for the Society and the MS community, making their voices heard in all situations.

Gideon Schulman

Since being first diagnosed I made a conscious decision that MS would not dictate my life. My ambitions remain but the way I do things and time frames have changed. I believe that MS is far from a disability but is an addition to your life experience which can be used as strength to build on skills such as tenacity and resilience. As a Trustee I have obligations to the Society to act as a guardian. I stand on the platform wanting to see the Society as global leader and driver of the MS agenda within awareness, support, research, information and as advocates.

Marsali Craig

I live in Aberdeen where everybody thinks they know someone with MS – but few people really understand much about it. One of the biggest challenges facing the MS Society is to communicate just how many people do have MS to the wider community. The introduction of our Register should help this – and just how the condition can have a devastating effect on their lives. I want to play a greater role in representing people affected by MS and increase society's understanding of why it is in everybody's interest to provide support to beat MS.

Pictures left to right: John Litchfield, Gideon Schulman, Stuart Nixon, Dave Denholm, Peter Mallaburn, Ian Douglas, Martin Stevens, Siobhan Gilmour, Marsali Craig, Paul Pavia, John Miller, Claire Ball, Carolyn Hearney, Tony Kennan.



MS
Multiple Sclerosis Society

The Board of Trustees presents its report, together with the Society's financial statements for the year ended 31 December 2010. The Society's report and financial statements will be laid before the members of the Society at the Annual General Meeting to be held on 10 September 2011.

Structure and governance

At the 2010 Annual General Meeting members voted to become an incorporated charitable company with a single constitution. This trustees' report encompasses the final year of the charity (The Multiple Sclerosis Society of Great Britain and Northern Ireland) and outlines the governance arrangements for the new charitable company (Multiple Sclerosis Society).

Legal Status

The Multiple Sclerosis Society of Great Britain and Northern Ireland was formed under a Charter of Constitution dated 26 November 1953 and is a registered charity, number 207495. On 6 July 2010 the MS Society registered with OSCR as a cross-border charity, number SCO41628. The charity incorporated on 1 February 2011 and is registered as a company limited by guarantee in England and Wales, number 07451571. The charity number of the incorporated charity is 1139257.

Our Objects

Our objects remain the same and are (a) to support and relieve people affected by multiple sclerosis (MS), (b) to encourage people affected by MS to attain their full potential as members of society by improving their conditions of life, and (c) to promote research into MS and allied conditions and to publish the results.

Our Structure

The Board of Trustees is the governing body of the whole Society. Its principal role is to establish the policies, systems and procedures of the charity and to ensure the effective and equitable use of the Society's resources in pursuit of its objects. The rules which it may make include those relating to electoral processes, the supervision and accountability of officers and committees (at branch, regional and national levels) and codes of conduct.

Honorary Officers

The Chair of the Society is elected by the Board and may serve for one term of five years. The Honorary Treasurer is appointed by the Board for a three year term of office and may serve for two consecutive terms before a break of at least one year.

The Board elects from its own number, at its first meeting following each AGM, a Vice Chair and an Assistant Treasurer to serve for a term of one year. A trustee holding either of these roles can serve a maximum of three years before a break of at least one year. In addition the Board may elect a second Vice Chair if it considers it appropriate.

Trustee Induction

Each new Trustee receives an induction to the MS Society, which includes the objects of the MS Society, the Vision and Mission, briefings on key responsibilities of Trustees and how the Board works, the structure and workings of the MS Society, its staff and volunteers, finance, and health and safety. Trustees receive ongoing support from the MS Society to ensure they are best placed to carry out their duties, including an annual Board Weekend to discuss organisational strategy, and regular feedback on the MS Society's work. Trustees are encouraged and supported in visiting branches and maintaining regular contact with people affected by MS and other members of the Society, as well as representing the MS Society at external events.

Board Delegation

The Board delegates the exercise of certain powers in connection with the management and administration of the Society through the Scheme of Delegation which is available on our website. The Board has three sub-committees:

Finance Committee provides detailed oversight, on behalf of the Board of Trustees, of the financial affairs of the MS Society, ensuring the financial viability of the charity, efficient, effective and proper use of its resources and safeguarding its assets. The Finance Committee also oversees the work of the Society's Investment Committee which is made up of independent professionals and Trustees.

Audit and Risk Committee provides detailed oversight, on behalf of the Board, of the charity's systems for internal control and risk management.

Governance Committee provides a forum for the chairs of national Councils and the Chair of the Society which, on behalf of the Board, address governance issues across the UK, and ensure that the distinct voice of members in the nations is factored into the Board's decision making processes. The Governance Committee also oversees the work of the Remuneration Committee which monitors the performance of the Chief Executive.

Chief Executive

The Chief Executive is responsible for the day-to-day management of the charity's affairs and for implementing policies agreed by the Board. The Chief Executive is assisted by a group of senior managers and manages the Society's staff and volunteers across all four nations. The Board approves the delegation of financial authority through the Chief Executive to the Society, with specific limits imposed within an approved scheme of delegation.

Relationship between the MS Society and its subsidiaries

Multiple Sclerosis Society owns the entire share capital of MSS (Trading) Limited, a company limited by guarantee registered in England and Wales. The principal activities of MSS (Trading) Limited include the sale of greeting cards, novelties and promotional activities for the benefit of the Society. MS Society Nominees Limited, a company limited by guarantee without share capital, holds the title deeds of the Society's property portfolio.

Public benefit

We have complied with the duty in s.4 of the Charities Act 2006 to have due regard to the public benefit guidance published by the Charity Commission in determining achievements against our aims for 2010 and in planning our activities for 2011.

The MS National Centre (MSNC) in London provides support across the organisation and coordinates cooperation between constituent parts of the Society across the four nations of the United Kingdom.

The Society has 300 branches offering information, support and a wide range of activities across the United Kingdom, Isle of Man and Channel Islands. In Cymru and Northern Ireland national councils are in place. A council was established in England in January 2011 and work is underway to recruit members to the Scotland Council which should be in place by January 2012.

Our Membership

Membership is open to any individual with an interest in the Society's work. The Society has approximately 39,000 members. Members are entitled to attend general meetings of the Society and to vote at general meetings. They receive the Society's magazine (MS Matters) six times a year.

MS Groups and Contacts

Support groups exist for Asians affected by MS (Asian MS), people currently or formerly working in the Armed Forces (Mutual Support) and GLAMS who work with lesbian, gay, bisexual and trans people (LGBT). We also work in partnership with support groups external to the MS Society including Rishon, an organisation for Jewish people affected by MS, and The Shane Project, an organisation for African and Caribbean people affected by MS.

Board of Trustees

The Board of Trustees is responsible for the overall governance, policy and work of the Society. Trustees are volunteers and are directly elected by the membership on the basis of one member, one vote. The Board may also co-opt one further Trustee. Trustees are elected to serve a term of three years and may be elected to serve a further consecutive term of three years, before a break of at least one year. The Board may not prevent any member from standing for Trusteeship, provided they are entitled to under law and the Society's rules. No Trustee can simultaneously hold more than one other elected office in a branch, region or national council.

Grant making policy

The Society awards several types of grants to meet the Society's objectives. The major types are:

Support Grants

The Society provides financial assistance to individuals with MS, their families and carers. These grants help with the cost of home adaptations, mobility aids, short breaks, respite care and many other requests where statutory funding falls short of an assessed need. Funded by local donations,

administered through our volunteer branch network and complemented with centrally held funds, the Society awarded over £1.4m in support grants in 2010.

Research Grants

The Society provides grants for basic and applied research in the areas of cure, cause and quality of life. These grants cover projects, PhDs, junior and senior fellowships. The Society currently prioritises research in the areas of nerve damage and repair, and symptom research – particularly fatigue. Just under £2.8m was committed to research grants in 2010.

Respite care decision

In June 2010 our Board announced that the Society will, by November 2011, no longer directly provide residential respite care. The decision was made after a year-long Respite Care Review and consultation process, during which people with MS and their carers contributed their views alongside those of a range of other stakeholders. The results showed that overwhelmingly people would like more individualised services. It was clear that the respite care provided by the Society was part of our own postcode lottery contributing to an inequitable distribution of services and that this needed to be addressed. The Board has prioritised working with other organisations; supporting current users to find suitable alternatives where necessary; developing alternative models for support in terms of personalised respite care or short breaks of personalised respite care or short term grants providing financial support through a new grants programme.

Objectives and achievements

Research

What the Society said it would do

- Spending on research grants to be £3.4m in 2010. Conduct review of grant application for continuation funding for the Cambridge Centre for Myelin Repair.
- MS Register – Establish governance, identify pilot sites, agree preliminary design.
- Commission two projects relating to social and economic research into the impact of MS.
- Continue to involve people affected by MS in all aspects of developing our research portfolio.
- Develop research collaborations including stem cell treatments.

What the Society did

- Spent £3.6m on research grants and committed an additional £2.8m in research grants (See note 15 to the accounts).
- Launched a unique collaboration with the UK Stem Cell Foundation to make up to £1m available for stem cell research in the UK.
- MS Society-funded research showed that damage to myelin can be reversed using stem cells. This research was conducted at the Cambridge Centre for Myelin Repair and the Edinburgh Centre for Translational Research.
- Conducted a review of the grant application for continuation funding for the Cambridge Centre for Myelin Repair in 2010 and a further £2.1m was made available to the MS Society Cambridge Centre for Myelin Repair for a further five years. (The first year's funding was approved in 2011).
- MS Register review was completed with governance, pilot sites and agreed design in place for the official launch in 2011.
- Set up the Research Network Steering Group to advise the MS Society Research Team on which direction the Research Network should take and how the MS Society research programme should involve people with MS.
- MS Society in Scotland hosted a global scientific summit on Vitamin D and MS.

What the Society plans to do in the future

- Launch the UK MS Register.
- Commit an additional £3.6m on research grants.
- Continue to build on our collaborative and funding partnership portfolio to maximise the impact of our research spend.
- Continue to promote the MS Society research programme to both researchers and people affected by MS through publications such as Research Matters and events such as MS Frontiers.

Information and Education

What the Society said it would do

- Review up to 26 MS Society titles.
- Review up to 11 MS Essentials fact sheets.
- Hold newly diagnosed days, awareness events and information days.
- Produce awareness films and Q&A sessions.
- Award information provider grants across the UK.
- Support redevelopment of Society's website.
- Disseminate information through publications and the web.

What the Society did

- Reviewed 19 MS Society titles.
- Reviewed 8 MS Essentials fact sheets.
- Reached over 1,000 people affected by MS and 500 MS Professionals through 18 information events for people affected by MS.
- Produced four expert-led awareness films and hosted week-long online Q&A sessions on stem cells, retaining work, understanding MRI and the tissue bank.
- Funded 21 new information points where professionals and people with MS can access MS Society information products.
- Disseminated information through publications and the web.
- Undertook consultation of 1,500 people including staff, members, people affected by MS and healthcare professionals for the development of the new website.
- Published MS Essentials 8(w) giving people affected by MS tailored advice about social services in Wales.

Volunteers and staff

Volunteers

The Society has approximately 9,000 committed and active volunteers across the UK, many of whom are directly affected by MS. Their personal commitment has been the cornerstone of the Society's success in supporting its aims. We will continue to improve support and develop our volunteers, promoting volunteering actively to all sections of the community and embedding best practice in volunteering management.

We estimate that our volunteers give around a million hours to the Society each year. This is based on 9,000 volunteers giving up their time volunteering across the breadth of the organisation. Contributions by volunteers include acting as trustees and council members, fundraising, providing expert professional advice, working to support and care for individuals affected by MS, and delivering services through our branches. The efforts of our volunteers are worth, in financial terms, at least £6m but are worth much more in terms of the skills, care, devotion and commitment to the MS Society and its work for people with MS.

Staff

The Society aims to be an organisation where staff members enjoy working and where they feel supported and developed. Staff are kept fully informed of the organisation's strategy and objectives, and individual performance is formally reviewed at least twice a year. Learning and development is an integral part of the staff appraisal process.

The Society is dedicated to attracting and retaining a talented and diverse workforce and aims to be an exemplary employer of people with MS and other disabilities. The Society's commitment to non-discrimination is embedded in its policies, procedures and practices.

What the Society plans to do in the future:

- Develop a programme of work to ensure that people with MS can interact with well informed professionals to achieve the best quality outcomes for themselves.
- Offer a more personalised approach to provide information and support, when, where and how it suits the individual.
- Form partnerships with health boards on education provision.
- Develop and support the Society's new website.

Support

What the Society said it would do

- Develop and extend its approach to supporting individuals.
- Review and update volunteering resources and implement a learning and development programme.
- Develop a UK wide approach to branch profiles.
- Maintain and develop the Helpline.
- Provide access to specialist legal advice to people with MS.
- Website redevelopment including accessible information on local services.

What the Society did

- Delivered the MS Support pilot in the west of England.
- Published a new committee handbook titled, 'Making it Work' as a resource for volunteers.
- Developed contracts with local Citizens Advice Bureaus to ensure that people with MS have access to advice and advocacy.
- Encouraged the development of a wide range of local support groups.
- Trained 28 new helpline volunteers with MS or a very close connection to it as part of the HomeNetwork Volunteer programme.

What the Society plans to do in the future

- Roll out the MS Support programme to provide consistent local support to people affected by MS across the UK.
- Offer individual support grants to those in need to improve their quality of life, mobility, care and support needs.
- Encourage take up of the Short Breaks and Activities Fund across the UK.
- Provide local support and development with branch and volunteer networks through area teams.

Raising Standards of Care

What the Society said it would do

- Extend Neurological Commissioning Support.
- Conclude the respite care review and implement the Board's decision.
- Improve collaboration with MS Therapy Centres.
- Implement palliative and end of life care strategy.
- Continue to extend our ability to influence services at a local level.
- Develop and implement carers strategy.
- Support development of new MS Specialist practitioner posts.
- Northern Ireland to campaign for greater access to neuro-physiotherapy.

What the Society did

- Developed Neuronavigator tools to support commissioners to better understand and cost services appropriate for people with long term neurological conditions and MS in particular.
- MS Society Board decided to move away from direct provision of residential respite and long term care and to seek alternative providers to continue high quality provision for people with MS and carers.
- Focused on developing a new approach to short breaks across the UK - promoting choice and control particularly with reference to short breaks.
- Worked in partnership with the MS National Therapy Centres to share best practice and develop local services.
- Worked with Health Boards in Scotland to implement the Clinical Standards for Neurological Health Services.
- Worked closely with the Montgomeryshire branch to support the development of a multi disciplinary therapy clinic in Newtown, Powys.
- Northern Ireland Neurological Conditions network was established.

What the Society plans to do in the future

- Ensure smooth transfer of residential respite care centres and Helen Ley Court to new providers.
- Improve access to personalised respite care and short breaks.
- Influence and improve health and social care provision through service development work in area teams.
- Develop Service Development toolkit to support local staff in their work.
- Identify and protect specialist MS posts that may be at risk.

Leading the MS Agenda

What the Society said it would do

- Continue to implement an effective political events plan.
- Coordinate local and national campaigning in line with the manifesto commitments.
- Develop and lead on policy areas affecting people with MS.
- All Party Parliamentary Group to focus on critical issues, such as MS specialists and respite care.
- Develop and launch proposals related to access to drugs.
- Generate stronger brand identification and loyalty.
- Increase membership and supporter base.

What the Society did

- Launched the first UK wide MS Society Manifesto.
- Submitted evidence to the major independent review of the Work Capability Assessment (WCA) for Employment Support Allowance.
- Initiated and led on running a DBC survey of disabled people's experiences of the benefits system. Of over 6,000 responses, 2,003 people with MS responded.
- Secured time to promote our key messages to over 30 parliamentarians, including the Deputy PM Nick Clegg, Health Secretary Andrew Lansley MP, several Ministers and Shadow Ministers, and Chairs of backbench health committees at the Party Conferences.
- Produced a campaign guide for access to Sativex in England and Wales.
- Developed the work of the Society's Policy Forum in Scotland.

What the Society plans to do in the future

- Continue to implement effective political events.
- Coordinate local and national campaigning in line with the manifesto commitments.
- Develop and lead on policy areas affecting people with MS.
- All Party Parliamentary Group for MS to focus on critical issues, such as NHS, social care and welfare reform.
- Continue to campaign for access to MS treatments and an update of the MS clinical guideline.
- Develop fundraising campaigns that engage members and donors across the UK.

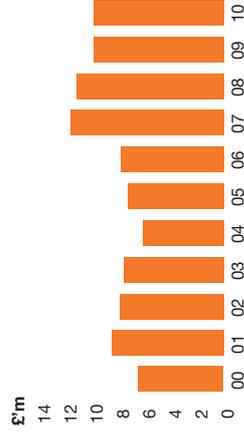
Financial Review and results for the year

Income

The Society continues to receive most of its income from generous donations from the general public; the Society does not receive any significant public sector funding other than funding clients for respite care provision.

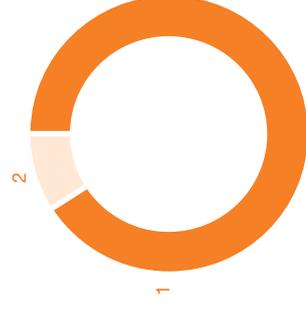
In 2010, 77% of income came from voluntary sources. Once the respite care centres are transferred to other organisations, the percentage of income from voluntary funding will increase significantly.

Legacies 2000 to 2010



Voluntary income in 2010 was very slightly down on 2009 at £22.2m (1% lower than 2009). Total income was also marginally lower at £29.1m (£29.5m in 2009). There were no other significant movements in income in 2010 compared to 2009.

2010 Income (excluding respite care centres)



- 1 Voluntary funding £22m (91%)
- 2 Other income £2.3m (9%)

Expenditure

Costs of generating funds

Costs to generate funds fell slightly in 2010 by 4% to £5.0m from £5.2m in 2009, which compares favourably with the percentage change in donations and fundraising.

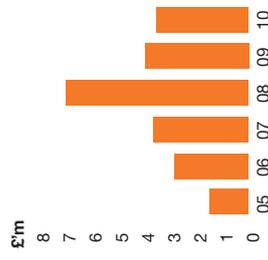
Charitable activities

The Society's activities are designed to have maximum impact for people with MS. Our work is based on solid evidence and robust planning. We seek to meet the needs, hopes and aspirations of people with MS by involving them in every aspect of our work.

The Society has continued to run a deficit in line with the planned strategy of reducing the Society's reserves to its policy level. Before the costs of the respite care centres, expenditure was 8% lower than in 2009 with the longer term aim of bringing expenditure in line with income by 2012.

Research expenditure in 2010 was £3.8m (£4.2m in 2009).

Research expenditure



The Society produces up-to-date, accurate and accessible information on MS issues, tailored to meet the needs of people affected by MS and professionals working with people affected by MS. Spending on information in 2010 was similar to 2009. A major upgrade of the Society's website will be completed in 2011.

The Society's support expenditure includes grants to people affected by MS and during 2010 the Society piloted its new 'Short Breaks and Activities Fund'. This fund was set up following the Society's consultation exercise, with people affected by MS, into respite care. The fund can consider grants for people with MS and their carers to help them access a broad range of short breaks and respite care. It can include grants to cover the cost of a professional carer and/or disability equipment linked to having a break.

Grants are administered through the Society's branches and at its national offices. The Society's 300 branches across the UK provide a large amount of support to people affected by MS. Branches provide information about MS and local services, the chance to meet others affected by MS and to help those who would like to fundraise for the Society or take part in a range of other activities.

Total expenditure on support fell slightly in 2010 to £10.1m from £10.7m in 2009.

Raising the standards of care expenditure is about improving the standards of care offered to people affected by MS by the National Health Service and other local statutory bodies. A decision has been made to reduce direct funding for MS Specialists. We will campaign with local health bodies to encourage them to retain the services of specialist support for people with MS. Total spend on raising standards of care therefore fell from £2.9m in 2009 to £2.3m in 2010.

In leading the MS agenda, the Society invests in publishing information, campaigning on issues important to people affected by MS, promoting our website and maintaining a positive media profile for the Society and its work. These activities raise awareness of MS issues on political, public and policy agendas. Expenditure fell in 2010 to £1.6m.

Statement of Trustees' responsibilities and corporate governance

Responsibility of the Board

The Trustees have overall responsibility for ensuring that the Society has an appropriate system of controls, financial and otherwise.

The Trustees are responsible for

- keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the funds held on trust and to enable them to ensure that the accounts comply with requirements in the Charities Act 1993;
- establishing and monitoring a system of internal control; and
- establishing arrangements for safeguarding the assets and for taking reasonable steps for the prevention and detection of fraud and corruption.

The Trustees are required under the Charities Act 1993 to prepare an annual statement of accounts that give a true and fair view of the Society's incoming trust funds and application of trust funds during the year and of its financial position, as at the year end, in accordance with Regulation 8 of the Charities (Accounts and Reports) Regulations 2008 and with the Society's constitution. In preparing those accounts, the Trustees are required to:

- select suitable accounting policies and apply them on a consistent basis;
- make judgments and estimates which are reasonable and prudent;
- state whether applicable accounting standards have been followed;
- prepare the financial statements on a going concern basis.

Risk and Internal Control

As part of the Society's risk management process, the Trustees acknowledge their responsibility for the Society's system of internal control and for reviewing its effectiveness. The Trustees recognise that such a system is designed to manage (and not eliminate) risk of failure to achieve the Society's objectives, and can only provide reasonable (not absolute) reassurance against material misstatement or loss.

The Board of Trustees delegates powers to the Finance and Audit and Risk Committees, as detailed above under Board Delegation.

Systems of financial control designed to mitigate risk include a five year strategic plan, an annual business plan and annual budget, regular consideration by the Trustees of actual results compared to budget, forecasts and reserve levels, formal delegation of authority to spend within clearly defined limits, and the identification and management of risks. The Trustees have appointed a firm of auditors to carry out internal audit reviews across the Society based on a three year audit plan; these reports comment on the systems of internal control. The Trustees are satisfied that the Society's internal controls comply with the guidelines issued by the Charity Commission, CC8.

The major identified risks of the Society and mitigating strategies are detailed on the next page.

Major risks identified

High quality research applications turned down due to lack of funding resulting in reputational impact for MS Society, motivational impact for research community and PR issues with members.

Failure to generate sufficient funds. Failure to invest in fundraising to ensure sufficient funds can be raised in the future.

Respite care review – failure to manage change, including implementation of the Board decision.

Our reputation in providing excellent care services is tarnished due to H&S incident or failure to meet external quality requirements. Unable to speak with authority on provision of services or be recognised as beacons of good practice. Ability to provide services could be limited if H&S incidents were to affect reputation. Risk on our on-going monitoring procedures resulting in a drop in standards or a significant incident.

Failure to train volunteers adequately and monitor their performance ensuring that they maintain the high standards required by the Society and protecting the Society's reputation.

Failure to ensure H&S/risk management procedures are developed and implemented, resulting in increased physical risk to staff, volunteers and people affected by MS.

Reserves

In planning and budgeting for its activities, the Society considers the level of reserves held in order to strike a balance between the development of its services and the need for prudent management of our working assets and commitments, as well as providing for contingencies.

The Society has used the SORP definition of reserves i.e. "the term 'reserves' describes that part of a charity's income funds that is freely available. This definition of reserves therefore normally excludes permanent endowment funds, expendable endowment funds, restricted funds and any part of unrestricted funds not readily available for spending..." (SORP 2005 Appendix 1 GL51).

Mitigating strategies

Emphasis on collaborative funding. Provision for limited grant round in 2011 with possible second round/larger round if funds are available.

Fundraising strategy. Reinstatement of investment in legacy marketing.

Clear project plans at all stages; regular horizon scanning; involvement of people with MS, families and carers. Unambiguous proposals for the future direction of the Society.

Clear lines of accountability through to Head of Care Services and Head of Health and Safety; trained risk management officers in place in each care centre; regulation 26 inspections; appointment of quality and clinical governance manager to oversee practice and implement internal quality audit programme; external regulation of services.

Ensuring volunteers are equipped and trained to provide information and support; ensuring all new volunteers attend an introductory course and update courses. Development of learning and development opportunities.

Programme in place for safety/risk management systems. It will take several years to cover all activities and roll out across the UK.

Included within the reserves is a proportion of the restricted funds where the restriction is broad and for on-going activities.

Reserves are held for working capital requirements, over and above amounts accrued in our accounts, and to cover or ameliorate any financial contingency. In calculating the level of reserves that should be retained, the Society has taken into account its large branch network; its care centres; its varied objectives and its devolved governance structure. The Board has concluded that reserves amounting to not less than 10 weeks and not more than 14 weeks planned consolidated expenditure shall be maintained by the Society; that the assets representing these reserves may be held in bank deposits and/or longer term

investment accounts managed by competent professionals; and that this policy will be reviewed annually by the Board.

Current Position: The policy objectives require reserves of between £5.7m to £7.9m. Actual reserves on 31 December 2010 were £6.2m. These reserves are invested in a professionally managed equity and bond portfolio (for more details see note 11) and in various bank deposits (controlled by national offices, branches and MSNC).

Total funds held on 31 December 2010 amounted to £27.4m (2009: £31.9m). Restricted funds (including endowments) amounted to £8.5m (2009: £12.9m). Included within the unrestricted funds of the Society are £12.7m of tangible assets; these have been shown in the accounts as designated funds.

Going Concern

We have set out above a review of financial performance and the charity's reserves position. We have adequate financial resources and are well placed to manage the business risks. Our planning process, including financial projections, has taken into consideration the current economic climate and its potential impact on the various sources of income and planned expenditure. We have a reasonable expectation that we have adequate resources to continue in operational existence for the foreseeable future. We believe that there are no material uncertainties that call into doubt the charity's ability to continue. The accounts have therefore been prepared on the basis that the charity is a going concern.

Investment Policy

During 2009 the Society started to consolidate its investment portfolios. In early 2010 the investment portfolio held by Brewin Dolphin, representing MS Society Scotland's investments, was transferred into the main portfolio held by Barings. In May 2011 Barings sold its private client division, including management of the Society's investment portfolio, to SG Hambros Bank Ltd.

The main portfolio is monitored against a total return of consumer price inflation plus 5%. During 2010 the portfolio achieved a total annual return of 13.8% against a benchmark of 8.4%. Bonds must be of investment grade. There is one mandatory exclusion placed on the equity portfolio (see Socially Responsible Investment policy below).

The performance review of the Society's investment funds is delegated to the Investment Committee which meets quarterly in London.

Reports are made to the Finance Committee and Board of Trustees following each meeting. The Board of Trustees carries out an annual review of the investment principles under which the managers operate and the terms of reference under which the Investment Committee operates.

Overall the Society received investment income in 2010 of £0.51m (2009: £0.68m) from the investment portfolios and a net investment gain of £1.8m in 2010 (2009: £2.4m).

Socially Responsible Investment

The Society has adopted a Socially Responsible Investment position to ensure that its investments do not conflict with its vision and mission, and that minimises the risk of stakeholder alienation and damage to the Society's reputation.

With this in mind there are areas where the MS Society wishes to exercise discretion with its investments. Examples of the areas that are of particular interest to the Society include disability rights, residential care, and financial services and insurance, typically areas which are of concern to people affected by MS. In 2007, the Society took the decision to disinvest from tobacco companies. The Society may direct an Investment Manager to withdraw from investment in particular companies if it becomes aware of serious and persistent poor performance in the areas outlined above. The Society will endeavour to apply these principles where practical, and will work in partnership with the Investment Manager to implement the policy, but it is the responsibility of the Society to identify any specific stocks that are to be embargoed.

Auditors

On 1 October 2010, Horwath Clark Whitehill LLP changed its name to Crowe Clark Whitehill LLP. Crowe Clark Whitehill LLP has indicated its willingness to be reappointed as statutory auditor.

Accounts

The Society's consolidated accounts appear on pages 39 to 52 of this report.

Ian Douglas, Treasurer 21 July 2011

Independent Auditors' Report to the Trustees of the Multiple Sclerosis Society

We have audited the financial statements of the Multiple Sclerosis Society for the year ended 31 December 2010 set out on pages 39 to 52. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice). This report is made solely to the charity's trustees, as a body, in accordance with section 44 of the Charities Act 1993 and section 44(1c) of the Charities and Trustee Investment (Scotland) Act 2005. Our audit work has been undertaken so that we might state to the charity's trustees 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 charity and the charity's trustees as a body, for our audit work, for this report, or for the opinions we have formed.

Respective responsibilities of trustees and auditor

As explained more fully in the Statement of Trustees' Responsibilities, the trustees are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view.

We have been appointed as auditor under section 43 of the Charities Act 1993 and section 44(1c) of the Charities and Trustee Investment (Scotland) Act 2005 and report in accordance with those Acts.

Our responsibility is to audit and express an opinion on the financial statements in accordance with applicable law and International Standards on Auditing (UK and Ireland). Those standards require us to comply with the Auditing Practices Board's Ethical Standards for Auditors.

Scope of the audit of the financial statements

An audit involves obtaining evidence about the amounts and disclosures in the financial statements sufficient to give reasonable assurance that the financial statements are free from material misstatement, whether caused by fraud or error. This includes an assessment of: whether the accounting policies are appropriate to the charity's circumstances and have been consistently applied and adequately disclosed; the reasonableness of

significant accounting estimates made by the trustees; and the overall presentation of the financial statements.

In addition, we read all the financial and non-financial information in the Trustees' Report and the Annual Review to identify material inconsistencies with the audited financial statements. If we become aware of any apparent material misstatements or inconsistencies we consider the implications for our report.

Opinion on financial statements

In our opinion, the financial statements:

- give a true and fair view of the state of the charity's affairs as at 31 December 2010 and of its incoming resources and application of resources, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Charities Act 1993 and the Charities and Trustee Investment (Scotland) Act 2005 and Regulation 8 of the Charities Accounts (Scotland) Regulations 2006.

Matters on which we are required to report by exception

We have nothing to report in respect of the following matters where the Charities Act 1993 or the Charities Accounts (Scotland) Regulations 2006 (as amended) requires us to report to you if, in our opinion:

- the information given in the Trustees Annual Report is inconsistent in any material respect with the financial statements; or
- sufficient accounting records have not been kept; or
- the financial statements are not in agreement with the accounting records and returns; or
- we have not received all the information and explanations we require for our audit.

Crowe Clark Whitehill LLP
Statutory Auditor
London

22 July 2011

Crowe Clark Whitehill LLP is eligible to act as an auditor in terms of section 1212 of the Companies Act 2006.

	Notes	Unrestricted funds £'000	Restricted funds £'000	Endowment funds £'000	2010 Total £'000	2009 Total £'000
Incoming resources						
Incoming resources from generated funds						
Voluntary income						
Donations and fundraising		10,911	2,625	-	13,536	13,719
Legacies receivable		6,334	2,377	-	8,711	8,689
Activities for generating funds						
Trading and merchandising		1,032	-	-	1,032	999
Investment income	3	432	78	-	510	677
Incoming resources from charitable activities						
Fees receivable		4,553	-	-	4,553	4,803
Grants and other service contract income		267	217	-	484	459
Other income		187	-	-	187	136
Income from operating activities		23,716	5,297	-	29,013	29,482
Gain on disposal of fixed assets		47	-	-	47	50
Total incoming resources		23,763	5,297	-	29,060	29,532
Resources expended	4					
Costs of generating funds						
Costs of generating voluntary income						
Fundraising		3,691	-	-	3,691	3,554
New donor acquisition		709	-	-	709	1,031
Trading and merchandising						
Investment management costs		493	-	-	493	540
Investment management costs						
Cost of generating funds		57	8	-	65	59
Cost of generating funds		4,950	8	-	4,958	5,184
Charitable activities						
Research		1,938	1,867	-	3,805	4,240
Information		2,170	38	-	2,208	2,002
Support		8,148	1,986	-	10,134	10,719
Raising standards of care		2,000	317	-	2,317	2,927
Leading the MS agenda		1,611	8	-	1,619	2,137
Governance costs		461	-	-	461	397
Expenditure before respite care costs	4	21,278	4,224	-	25,502	27,606
Costs relating to respite care						
Ongoing respite care centre costs		7,277	245	9	7,531	7,538
Costs of ceasing direct provision		2,291	-	-	2,291	-
Total resources expended	4	30,846	4,469	9	35,324	35,144
Net (outgoing)/incoming resources before other recognised gains and losses		(7,083)	828	(9)	(6,264)	(5,612)
Transfers between funds	16	5,561	(2,338)	(3,223)	-	-
Other recognised gains and losses						
Gains on investment assets		1,398	348	26	1,772	2,428
Net movement in funds		(124)	(1,162)	(3,206)	(4,492)	(3,184)
Reconciliation of funds						
Total funds at 1 January		19,020	9,266	3,637	31,923	35,107
Total funds at 31 December	16	18,896	8,104	431	27,431	31,923

There are no other unrealised gains or losses which do not appear on the SOFA. All the above results are derived from continuing activities.

	Notes	Consolidated 2010	2009	Charity 2010	2009
		£'000	£'000	£'000	£'000
Fixed assets					
Tangible assets	9	8,399	15,050	8,399	15,050
Investments	11	18,392	16,736	18,392	16,736
		26,791	31,786	26,791	31,786
Current assets					
Tangible assets to be disposed		5,095	–	5,095	–
Stocks		4	18	4	18
Debtors	12	1,923	2,463	1,979	2,479
Short term investments		2,000	4,000	2,000	4,000
Cash at bank and in hand		1,532	4,954	1,454	4,911
		10,554	11,435	10,532	11,408
Creditors:					
Amounts falling due within one year	13	9,566	9,979	9,544	9,952
Net current assets		988	1,456	988	1,456
Total assets less current liabilities		27,779	33,242	27,779	33,242
Creditors: Amounts falling due after one year	14	348	1,319	348	1,319
Net assets		27,431	31,923	27,431	31,923
Funds					
Endowment funds	16	431	3,637	431	3,637
Restricted income funds		8,104	9,266	8,104	9,266
Unrestricted income funds					
– Designated for tangible assets		12,687	11,723	12,687	11,723
– General funds		6,209	7,297	6,209	7,297
Total unrestricted funds		18,896	19,020	18,896	19,020
Total funds		27,431	31,923	27,431	31,923

These financial statements were approved and signed on behalf of the Trustees on 21 July 2011.
The notes on pages 42 to 52 form part of these financial statements.

Ian Douglas
Treasurer

	2010	2009
	£'000	£'000
Net cash (outflow) from operating activities	(5,019)	(7,567)
Returns on investments and servicing of finance	504	895
Capital expenditure and financial investments	(907)	(1,203)
Cash (outflow) before management of liquid resources	(5,422)	(7,875)

Management of liquid resources

Decrease in cash held as short term investments	2,000	1,561
Decrease in cash in the period	(3,422)	(6,314)

Analysis of net funds

	At 1 Jan 2010	Cash flow	At 31 Dec 2010
	£'000	£'000	£'000
Cash at bank and in hand	4,954	(3,422)	1,532
Cash held as a short term investment	4,000	(2,000)	2,000
	8,954	(5,422)	3,532

Cash flow statement notes

A. Reconciliation of changes in resources to net cash (outflow) from operating activities

	2010	2009
	£'000	£'000
Net resources (expended)	(6,264)	(5,612)
Eliminating the effect of:		
– Investment income receivable	(401)	(474)
– Interest receivable	(109)	(203)
– Profit on sale of fixed assets	(47)	(50)
– Depreciation	2,626	1,188
Adjusting for changes in:		
– Decrease in stock	14	6
– Decrease in debtors	546	755
– (Decrease) in creditors	(1,384)	(3,177)
Net cash from operating activities	(5,019)	(7,567)

B. Returns on investments and servicing of finance

Investment income received	419	631
Interest received	85	264
Returns on investments and servicing of finance	504	895

C. Capital expenditure and financial investments

Purchase of fixed assets	(1,095)	(1,244)
Sale of fixed assets	72	53
Purchase of investments	(2,524)	(7,642)
Sale of investments	2,640	7,630
Capital expenditure and financial investments	(907)	(1,203)

1. Accounting policies

a). Basis of preparation

The accounts are prepared under the historical cost convention with the exception of investments which are stated at market value. They comply with the requirements of the Charities Act 1993 and are in accordance with applicable accounting standards.

The financial statements have been prepared in accordance with the Statement of Recommended Practice (SORP) "Accounting and Reporting by Charities" published in March 2005, and applicable United Kingdom law and accounting standards. The financial statements have been prepared on a going-concern basis as discussed in the trustees' report on page 37.

These are consolidated accounts representing the accounts of the Society ("The Society") and its subsidiary company (see page 51 for company details). The results of the subsidiary company have been consolidated on a line by line basis. The Society's accounts include the accounts from the MS National Centre, National Offices of Cymru, Scotland and Northern Ireland; the respite care centres; the trading company; the branches and the regions.

Under the Society's financial rules, branches and regions whose income is greater than £25,000 and/or reserves greater than £50,000, must have their books independently examined by a qualified accountant who should be a member of one of the Institutes of Chartered Accountants or of the Association of Chartered Certified Accountants. Where income is greater than £100,000 this report needs to be signed off by a registered auditor. The independent examiner is required to sign off an 'Agreed upon Procedures Report' (APR) for the branch. Branches are asked to submit accounts for the 12 months to the end of October with income and expenditure estimated for the final two months of the year. These estimates are netted with the resulting balance included within income or expenditure and are checked by comparing the closing bank balances at 31 October and 31 December. The resulting net balance will be added or deducted from the following year's income or expenditure.

A summary of branch returns included in the accounts (including regions and support groups)

	Total	APR submitted	Only returns submitted	Failed to submit return
Required to submit APR report	74	56	17	1
Not required to submit APR report	246	-	246	-
	320	56	263	1

The following branch had not submitted their return: Isle of Wight.

b). Funds

The different funds are defined as follows

Endowment funds
Permanent endowment: where a donor specifies only income arising from a donation can be used and the income may also be restricted towards a particular purpose.
Expendable endowment: An expendable endowment fund is a fund that must be invested to produce income. Depending on the conditions attached to the endowment, the Trustees will have a legal power to convert all or part of it into an income fund which can then be spent.

Restricted income funds
 Restricted income funds are subject to specific restrictions imposed by the donor or by the nature of the appeal.

General funds/unrestricted income funds
 General funds are unrestricted income funds available to the Society for its general purposes and include funds designated for a particular purpose. The use of designated funds remains at the discretion of Trustees.

c). Incoming resources

All income is accounted for when the Society has entitlement, there is certainty of receipt and the amount is measurable.

- Legacies: entitlement is the earlier of the estate account being finalised or cash received.
- Donated services and facilities: are included at the value to the charity where this can be quantified. No amounts are included in the financial statements for services donated by volunteers.
- Gifts donated for resale are included as income when they are sold at the price they are sold for.
- Grants: where related to performance and specific deliverables are accounted for as the charity earns the right to consideration by its performance. Where the grant is received in advance of performance, its recognition is deferred and included in creditors. Where entitlement occurs before the grant is received, it is accrued in debtors.

d). Resources expended

All expenditure is accounted for on an accruals basis and includes irrecoverable VAT where applicable. The Society makes research grants after evaluating the merits of each grant application and by peer review of grant applications. Each grant commitment is dependent on the satisfactory outcome of a review which, for most grants, is carried out annually. Consequently, for these grants, the Society commits expenditure up to the next date when a review will be done. Expenditure is allocated to relevant activity categories on a basis that is consistent with the use of the resource.

- Cost of generated funds includes all costs relating to activities where the primary aim is to raise funds along with an apportionment of support costs.
- Charitable activities includes all costs relating to activities where the primary aim is part of the objects of the Society along with an apportionment of support costs.
- Governance costs includes the cost of trustee expenses, arranging the annual general meeting, audit fees and an apportionment of support costs.

Support costs consisting of Human Resources department (HR), Facilities and Information Technology (IT) are apportioned based on the number of staff (full time equivalents) working on core activities. Finance costs and general management costs are apportioned based on direct costs on core activities.

e). Tangible assets and depreciation

Tangible assets are included at cost and depreciation is provided on a straight line basis, in order to write off the assets over their useful lives. Assets below £2,000 are not capitalised.

The depreciation rates are as follows:

Freehold land	Nil
Freehold buildings	2%
Assets under construction	Nil
Leasehold buildings	Remaining term of lease
Computer equipment	33 $\frac{1}{3}$ %
Motor vehicles	25%
Fixtures and equipment	20%

Fixed assets are subject to review for impairment where there is an indication of a reduction in their carrying value. Any impairment is recognised in the Consolidated Statement of Financial Activities in the year in which it occurs.

f). Investments

Investments are stated at market value. It is the Society's policy to keep valuations up to date such that when investments are sold there is no gain or loss arising to previous years. As a result the SOFA includes those unrealised gains and losses arising from the revaluation of the investment portfolio throughout the year. Investment property valuations are undertaken every five years and between valuations the Trustees undertake a review to consider whether there is a material change since the last valuation.

g). Stocks

Stocks are valued at the lower of cost and net realisable value. Stock is held for resale.

h). Leasing

All operating leases and rental expenses are charged to the SOFA as incurred.

i). Pension costs

The Society has a defined contribution scheme with the amount charged to the SOFA in respect to pension costs being the contribution payable in the year.

j). Taxation

The Multiple Sclerosis Society of Great Britain and Northern Ireland has charitable status and is thus exempt from taxation of its income and gains falling within Section 505 of the Taxes Act 1988 or Section 256 of the Taxation of Chargeable Gains Act 1992 to the extent that they are applied to its charitable objectives. No material tax charges have arisen in its subsidiaries and no provision is required for deferred taxation.

2. Analysis of consolidated results between the National Centre, National Offices, Trading company, Branches and Care Centres

	MS National Centre	MSS Scotland	MSS N. Ireland	MSS Cymru	MSS Trading Co.	UK Branches	UK Care Centres	Total
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
Incoming resources	14,425	1,851	611	109	350	6,983	4,731	29,060
Cost of generating funds								
Fundraising	2,929	416	103	58	-	177	8	3,691
New donor acquisition	680	29	-	-	-	-	-	709
Trading and merchandising	-	-	-	-	201	222	70	493
Investment management costs	53	4	-	-	-	8	-	65
Charitable activities								
Research	3,617	188	-	-	-	-	-	3,805
Information	1,679	176	29	79	-	245	-	2,208
Support	4,245	517	138	77	-	5,157	-	10,134
Raising standards of care	1,549	355	344	69	-	-	-	2,317
Leading the MS agenda	1,328	186	42	63	-	-	-	1,619
Ongoing respite care centre costs	-	-	-	-	-	-	7,531	7,531
Costs of ceasing direct provision of respite care	-	-	-	-	-	-	-	2,291
Governance costs	420	37	-	-	4	-	-	461
Total resources expended	16,500	1,908	656	346	205	5,809	9,900	35,324
Subsidy to care centres	(2,075)	(57)	(45)	(237)	145	1,174	(5,169)	(6,264)
Other transfers between entities	(1,462)	(774)	-	-	-	-	2,236	-
Gift aid – trading profits	(94)	138	41	7	(32)	(85)	25	-
Gift aid – trading profits	113	-	-	-	(113)	-	-	-
Net (outgoing)/ incoming resources	(3,518)	(693)	(4)	(230)	-	1,089	(2,908)	(6,264)
Gains on investment assets	1,103	303	(3)	-	-	369	-	1,772
Net movement in funds	(2,415)	(390)	(7)	(230)	-	1,458	(2,908)	(4,492)
Balance Sheet								
Fixed assets	5,041	23	620	-	-	2,715	-	8,399
Investments	15,254	-	-	-	-	3,138	-	18,392
Net current assets	(14,013)	(1,005)	644	69	242	10,114	4,937	988
Long term liabilities	(348)	-	-	-	-	-	-	(348)
Transfers between entities	(3,941)	3,127	(457)	(796)	(129)	2,277	(81)	-
Gift aid of trading profits	113	-	-	-	(113)	-	-	-
Net assets	2,106	2,145	807	(727)	-	18,244	4,856	27,431
Funds at 1/1/2010	4,521	2,535	814	(497)	-	16,786	7,764	31,923
Change in net assets	(2,415)	(390)	(7)	(230)	-	1,458	(2,908)	(4,492)
Funds at 31/12/2010 carried forward	2,106	2,145	807	(727)	-	18,244	4,856	27,431

The above figures represent the analysis of the Society's activities. The results of branches and care centres are aggregated from returns which have been audited or examined locally. Homelands Trust is included in branches. The turnover for the charity i.e. excluding MSS (Trading) Ltd was £28.7m (2009 £29.1m) and the net movement in funds in the charity was £4.5m (2009 £3.2m).

3. Investment income

Investment income receivable
Interest receivable from short term deposits

	2010	2009
	£'000	£'000
	401	474
	109	203
	510	677

4. Expenditure

	Grants Institutional	Grants Individuals	Other Costs	Direct Costs	Support Costs Apportioned	2010	2009
	£'000	£'000	£'000	£'000	£'000	£'000	£'000
Fundraising	-	-	3,063	-	628	3,691	3,554
New donor acquisition	-	-	666	-	43	709	1,031
Trading and merchandising	-	-	493	-	-	493	540
Investment management costs	-	-	58	-	7	65	59
Research	2,780	-	626	-	399	3,805	4,240
Information	-	-	1,837	-	371	2,208	2,002
Support	2	1,402	7,210	-	1,520	10,134	10,719
Raising standards of care	173	-	1,911	-	233	2,317	2,927
Leading the MS agenda	-	-	1,313	-	306	1,619	2,137
Ongoing respite care centre costs	-	-	7,531	-	-	7,531	7,538
Costs of ceasing direct provision of respite care	-	-	2,291	-	-	2,291	-
Governance costs	-	-	420	-	41	461	397
	2,955	1,402	27,419	3,548	3,548	35,324	35,144

All grants were awarded within the UK. A full list of grants given to institutions is available from the MS National Centre, 372 Edgware Road, London NW2 6ND.

Analysis of Support Costs apportioned

	Management	HR Costs	Finance	IT Support	Facilities	Total
	£'000	£'000	£'000	£'000	£'000	£'000
Fundraising	67	93	91	206	171	628
New donor acquisition	19	-	24	-	-	43
Investment management costs	1	1	1	2	2	7
Research	94	35	127	78	65	399
Information	38	56	51	123	103	371
Support	79	263	108	583	487	1,520
Raising standards of care	38	28	53	62	52	233
Leading the MS agenda	30	46	40	103	87	306
Governance costs	11	3	15	7	5	41
	377	525	510	1,164	972	3,548

Method of apportionment

¹ Apportioned on the number of full time staff equivalents.

² Apportioned based on total direct costs. Doesn't include management and finance costs that could be directly allocated to direct costs.

Analysis of governance costs

	2010	2009
	£'000	£'000
Fees payable to the Charity's auditors for the audit of the 2010 annual accounts	75	57
Fees payable to the Charity's auditors for the audit of MSS Scotland annual accounts for 2008 and 2009	30	21
Internal audit	48	59
Trustee expenses (Note 5)	26	26
AGM related costs and other governance costs	241	192
Apportionment of support costs (above)	41	42
Total governance costs	461	397

5. Staff costs and Trustee expenses

Total staff emoluments for the year were as follows:

Salaries	2010	2009
National Insurance	£'000	£'000
Pension	13,115	13,041
	1,135	1,142
	474	501
	14,724	14,684

The average number of individuals employed by the Society during the year was as follows:

	Full time staff equivalents	
	2010	2009
	Number	Number
Charitable activities	196	235
- Respite care centres	203	212
- Other		
Generating funds	2	2
- Respite care centres	42	40
- Other	2	2
Governance	445	491

The number of employees whose emoluments as defined for taxation purposes (basic pay, vehicle and medical insurance) amounted to over £60,000 in the year was as follows:

	2010	2009
	Number	Number
£60,001-£70,000	-	2
£70,001-£80,000	3	2
£80,001-£90,000	1	2
£90,001-£100,000	1	-
£110,001-£120,000	-	1
£130,001-£140,000	1	-

All of the employees whose emoluments were greater than £60,000 are members of a defined contribution pension scheme and the Society paid contributions of £46k (2009: £44k) for these employees.

No trustees received emoluments during 2010 (2009 nil)

Trustee expenses relating to 14 Trustees (15 in 2009)	2010	2009
Travel	£'000	£'000
Accommodation	16	15
	10	11
	26	26

6. Taxation

The Society has charitable status and is thus exempt from taxation of its income and gains falling within Section 505 of the Taxes Act 1988 or Section 256 of the Taxation of Chargeable Gains Act 1992 to the extent that they are applied to its charitable objectives. No material tax charges have arisen in its subsidiaries and no provision is required for deferred taxation. Irrecoverable VAT has been charged against the relevant expenditure.

7. Net movements in funds

Net movement in funds is arrived at after charging:	2010	2009
- Depreciation of tangible fixed assets	£'000	£'000
- Profit on disposal of fixed assets	2,626	1,188
- Fees payable to the Charity's auditors for the audit of the Charity's annual accounts	47	50
- Fees payable to the Charity's auditors for other services to the group:	71	53
- The audit of the Charity's subsidiary pursuant to legislation	4	4
- The audit of MSS Scotland pursuant to legislation	30	21

8. Related party transactions

The Society had no related party transactions during 2010 and 2009. The Society has taken advantage of the exemption under FRS 8, Related Party Disclosures, not to disclose transactions between group entities that have been eliminated on consolidation in these financial statements.

9. Tangible assets

Consolidated and Charity

	Freehold Land and Buildings £'000	Leasehold Property £'000	Computers £'000	Fixtures £'000	Motor Vehicles £'000	Total £'000
Cost						
Balance at 1 January 2010	16,102	1,517	911	5,667	4,304	28,501
Additions	21	-	256	410	408	1,095
Disposals	(14)	-	(21)	(59)	(564)	(658)
Transfer to current assets	(8,458)	(15)	(148)	(2,885)	(320)	(11,826)
Balance at 31 December 2010	7,651	1,502	998	3,133	3,828	17,112

Accumulated depreciation

Balance at 1 January 2010	3,496	536	662	4,832	3,925	13,451
Charge for year	1,717	28	166	418	297	2,626
Disposals	-	-	(20)	(59)	(554)	(633)
Transfer to current assets	(3,718)	(15)	(147)	(2,607)	(244)	(6,731)
Balance at 31 December 2010	1,495	549	661	2,584	3,424	8,713

Net book value at 31 December 2010 6,156 953 337 549 404 **8,399**

Net book value at 31 December 2009 12,606 981 249 835 379 15,050

10. Capital commitments

There were no capital commitments as at 31 December 2010 or 31 December 2009.

11. Investments

Consolidated and Charity

Market value at 1 January	2010	2009
Acquisitions at cost	£'000	£'000
Disposals proceeds	16,736	14,296
Gains/(losses) on investment assets	2,524	7,642
Market value at 31 December excluding movement in cash held	(2,874)	(6,025)
Movement in cash held	1,772	2,428
	18,158	18,341
	234	(1,605)
	18,392	16,736

In addition to the above the charity balance sheet includes an investment of £2 in MSS (Trading) Ltd (Note 18).

Represented by

Assets held at Market Value

Property investment	2010	2009
Investments listed on a Stock Exchange	£'000	£'000
Unlisted securities	290	182
Cash held as part of portfolio	15,557	14,747
	671	167
	1,874	1,640
	18,392	16,736

Included within 'investments listed on a Stock Exchange' are investment assets outside the UK of £2.1m (2009: £891k). All other investments are investment assets in the UK.

The basis of the valuation

The property investment was valued by Peter Davey MRICS of James & Son, Poole, Dorset BH15 1DX in 2010 on the basis of open market value. The Trustees have subsequently reviewed this valuation and believe that there has been no material change.

16. Statement of funds (continued)

	At 1/1/2010 £'000	Income £'000	Expenditure £'000	Transfers £'000	Investment Gains £'000	At 31/12/2010 £'000
Endowment funds						
Expendable endowment - large legacy ¹⁰	3,000	-	(3,000)	-	-	-
Helen Ley Home Endowment ¹¹	231	-	(9)	(222)	-	-
Margaret Hutchinson Memorial Fund	236	-	-	(1)	26	261
- Borders area						
Derby branch endowment	10	-	-	-	-	10
Homelands Trust (Land) ³	160	-	-	-	-	160
Total endowment funds	3,637	-	(9)	(3,223)	26	431
Total funds	31,923	29,060	(35,324)	-	1,772	27,431

¹ Research funds includes monies given for specific research projects as well as monies given for general research.

² MS specialists relates to monies being given to hospitals to part fund the employment of MS professionals including MS Nurses.

³ The Homelands Trust was established as the result of a legacy to the Society and has been treated as a special trust. It exists to provide holiday respite, primarily for people with MS resident in Fife. It is registered as a charity, charity no: SC027281 and has its own trustees.

⁴ Relates to funds to be spent at the respite care centre. Transfer of funds represents monies given for building alterations which have been undertaken.

⁵ Relates to alterations and extensions to Helen Ley which have been undertaken.

⁶ Relates to alterations and extensions to Woodlands which have been undertaken.

⁷ Money given for use at the Leuchie respite care centre.

⁸ Relates to a legacy given to the Cardiff branch for respite care at the Dany-Graig respite care centre.

⁹ Geographic restrictions arise where a donor has specifically asked that a legacy be used in a certain area or spent by a particular branch.

¹⁰ The Society received a large legacy of £3m during 2007 which was treated as an expendable endowment. The trustees of the Society have now decided to transfer the £3m into unrestricted funds.

¹¹ The Helen Ley endowment - a review has been undertaken of all paperwork and there is no evidence for treating this as a permanent endowment.

Note: The funds of the charity include £2 (2009: £2) relating to the total funds of MSS (Trading) Ltd.

17. Analysis of net assets between funds

	Unrestricted funds £'000	Restricted & Endowment funds £'000	Total funds £'000
Fund balances at 31 December 2010 are represented by			
Tangible fixed assets	7,593	806	8,399
Investments	15,598	2,794	18,392
Current assets	5,600	4,954	10,554
Current liabilities	(9,547)	(19)	(9,566)
Long-term liabilities	(348)	-	(348)
	18,896	8,535	27,431

18. MSS (Trading) Limited

The Society has a wholly owned trading subsidiary which is registered in England and Wales, MSS (Trading) Limited raises funds via commercial activities and sponsorship. Any taxable profits made by MSS (Trading) Limited are donated to the Society under Gift Aid.

A summary of the trading results which have been consolidated on a line by line basis are shown below.

	2010 £'000	2009 £'000
MSS (Trading) Ltd		
Profit and loss account		
Turnover	353	377
- Sales to branches	3	37
- Sales to third parties	350	340
Cost of sales	(198)	(241)
Gross profit	155	136
Administration	(39)	(36)
Interest receivable	-	1
Interest payable	(3)	(3)
Net profit before taxation and gift aid	113	98
Gift aid donation to Multiple Sclerosis Society	(113)	(98)
Taxation	-	-
Retained profit carried forward	-	-

Called up share capital

	2010 £	2009 £
Authorised:		
1,000 ordinary shares of £1 each	1,000	1,000

Allotted, called up and fully paid:

2 ordinary shares of £1 each	2	2
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19. Pharmaceutical industry

The Society is aware of public interest in the relationship between charities and the pharmaceutical industry. The Society welcomes financial or material support from the industry if:

- the terms of the offer of support comply with the Association of British Pharmaceutical and Allied Industries Code of Practice (2006).
- the terms are within the guidelines of the Charity Commission.
- the offer does not compromise the Society's reputation and independence.
- the arrangements fall within the Society's guidelines per Policy Position Statement 1 – Working with Industry. Link: http://www.msociety.org.uk/get_involved/policy_campaigns/policy_parliamentary_work/policy_positions/index.html

Below are all donations received over £50,000 in aggregate:

Name of Company	2010		2009	
	£	£	£	£
Bayer Schering Pharma AG	65,852	88,500		
Biogen Idec Limited	69,852	179,950		
Merck Serono Limited	5,100	214,000		
Teva Pharmaceuticals Ltd	106,272	191,008		

These amounts are primarily used for funding MS Nurse specialists and the holding of the MS Society Awards.

20. Pension funds

Defined contribution schemes

The MS Society contributes towards a number of Defined Contribution Schemes. The cost of these schemes is charged to the SOFA and amounted to £474k (2009: £501k). They did not give rise to any provisions/reserves. At the end of the year £37k (2009: £40k) was owed to the pension provider.

21. Neurological Commissioning Support

Neurological Commissioning Support (NCS) is a unique, joint venture between the Motor Neurone Disease Association, the Multiple Sclerosis Society of Great Britain and Northern Ireland and Parkinson's UK.

The purpose of NCS is to improve the health, well-being and social care related outcomes for people with long term neurological conditions through providing consultancy and other services to help improve the way services are commissioned. The joint venture was set up in late 2007/early 2008 after an initial study by the MS Society. Each partner to the agreement has an equal share/responsibility for any deficits or surpluses arising from its activities.

Amounts recognised in these accounts for NCS are not material. In April 2011 a joint venture company was set up called Neurological Commissioning Support Limited.

22. Respite care centres

On the 9 June 2010 following an extensive review of the needs of people affected by MS, the Board of Trustees decided to no longer operate respite care centres. The Society is in the process of transferring the respite care centres to other providers. All the new providers plan to continue to offer services to people with MS.

Founder

Sir Richard Cave[†]
KCVO, CB, KCSG, DL

Vice-Presidents

R T Stone FCA, DL
John Walford OBE

Chairman

Tony Kennan CBE

Vice-Chair

Stuart Nixon

Honorary Treasurer

Ian Douglas

Assistant Honorary Treasurer

John Litchfield

Bankers

Barclays Bank
1 Churchill Place
London EH14 5HP

Auditors

Crowe Clark Whitehill LLP
St. Bride's House
10 Salsbury Square
London EC4Y 8EH

Solicitors

Cobbetts LLP
58 Mosley Street
Manchester M2 3HZ
Howard Kennedy
Harcourt House
19 Cavendish Square
London W1M 9AB

Investment Managers

SG Hambros Bank Limited
Norfolk House
31 St. James's Square
London SW1Y 4JR

Trustees

Clare Ball
Marsali Craig (from Jan 11)
Amanda Cox (until Dec 10)
David Denholm
Ian Douglas
Siobhan Gilmour
Caroline Green (until Dec 10)
Carolyn Heaney
Judith Illsley (until Dec 10)
Tony Kennan CBE (Chair)

John Litchfield

Dr Peter Mallaburn (from Jan 11)
John Miller

Stuart Nixon

Paul Pavia

Gideon Schulman (from Jan 11)

Martin Stevens (from Jan 11)

Steve Whitaker (until Dec 10)

Chief Executive

Simon Gillespie

Executive Group

Susan Farrington
Director of information and education
Patricia Gordon
Director, MS Society Northern Ireland

Roma Grant (until Jan 11)
Interim head of governance
Shuna Kennedy
(Mar-Sept 10)
Interim director of fundraising and marketing

Sherine Krause
(until March 10)
Director of fundraising and marketing

Patricia Mbasani
Head of human resources

David McNiven
Director, MS Society Scotland
Jacqui Penahver (from Jan 11)
Head of chief executive's office

Judi Rhys

Director, MS Society Cymru
Neil Spence
Director of corporate services

Jayne Spink
Director of policy and research

Nicola Tallett (from Sept 10)
Director of fundraising and marketing

Barbara Williams
Director of operations

The members of the Finance, Audit and Risk, Governance and Investment Committees can be found on the Society's website.

MS Society

MS National Centre
372 Edgware Road
London NW2 6ND
020 8438 0700

MS Society Scotland

Ratho Park
88 Glasgow Road
Ratho Station
Newbridge EH28 8PP
0131 335 4050

MS Society Cymru

Temple Court
Cathedral Road
Cardiff CF11 9HA
029 2078 6676

MS Society Northern Ireland

The Resource Centre
34 Annadale Avenue
Belfast BT7 3JJ
028 90 802 802

www.mssociety.org.uk
info@mssociety.org.uk
Helpline 0808 800 8000

The Multiple Sclerosis Society of
Great Britain and Northern Ireland
is a charity registered in
England and Wales (207495)
and Scotland (SC041628)

In 2011 the MS Society became
the Multiple Sclerosis Society
Registered charity nos.
1139257/SC041990
Registered as a limited company
by guarantee in England and
Wales 07451571