

Annual report and accounts

for the year ended 31 March 2026



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Independent Auditor's Report to the Members of Liver UK

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Chairman

Sir Alastair King DL

Chief Executive Officer

Pamela J Healy OBE

Trustees

Sally Benatar QPM (ceased 22 September 2025)
Wim Bushell (ceased 16 March 2026)
Georgina Catt
Dr Ahmed Elsharkawy (ceased 8 March 2026)
Diana Gornall
Sarah Gosiewska (appointed 5 May 2025; ceased 21 January 2026)
Dr Anastasios Grammatikopoulos (appointed 1 January 2026)
Sarah Howard (appointed 11 September 2026)
Sir Alastair King DL (Chair)
Toby McMaster (ceased 22 September 2025)
Mark Oldfield (appointed 11 September 2026)
Professor Steve Ryder
Victoria Sheriff
Professor Richard Thompson (ceased 20 June 2025)
Professor Douglas Thorburn
Graham Warner (Treasurer)
Lisa Woodcock (appointed 5 May 2025)

Principal and Registered Office

1st Floor Offices, Venta Court,
20 Jewry Street, Winchester SO23 8FE

Company Registration Number

02227706

Charity Registration Number

298858 (E&W), SC042140 (Scotland)

Bankers

CAF Bank, PO Box 289,
West Malling, Kent ME19 4TA

NatWest, 2 Tavern Street,
Ipswich, Suffolk IP1 3BD

Flagstone Investment Management, 1st Floor,
Clareville House, 26-27 Oxendon Street
London SW1Y 4EL

Investment managers

Brewin Dolphin, 12 Smithfield Street,
London EC1A 9BD

Auditor

Goldwins Limited
Statutory Auditor, Chartered Accountants,
75 Maygrove Road, West Hampstead,
London, NW6 2EG

Chair's welcome



Welcome to Liver UK's annual report and accounts for 2025 to 2026.

This has been a landmark year for our organisation. Most significantly, we relaunched as Liver UK, creating a stronger, united voice for everyone affected by liver disease and liver cancer across the UK. As Liver UK, we are here for everyone – at every stage of life, with every type of liver disease – ensuring that no one faces liver disease alone.

Alongside our new identity, we launched our new strategy, *Building Momentum, Changing Lives*, setting out how we will improve liver health through support, early detection, better treatment and championing research. Our vision is a future where fewer people develop liver disease, more people are diagnosed early, and everyone receives the care and support they need.

Throughout the year, we were here for people affected by liver disease across the UK through our trusted information, support and campaigning. More than 1.7 million people accessed our website for expert liver health information, often finding us through online searches at the moment they needed answers most. For those needing more personalised support, our helpline provided the time, expertise and reassurance that busy NHS services are not always able to offer, while our support groups and online communities connected people with others who truly understand the realities of living with liver disease, helping to ensure that no one faces it alone.

Through campaigns including Love Your Liver, Liver Cancer Awareness Month and Yellow Alert, we raised awareness, challenged stigma and encouraged more people to take action for their liver health.

We also strengthened our work with policymakers, healthcare professionals and researchers to drive systemic improvements in diagnosis, treatment and care, helping to put liver health firmly on the national agenda.

On behalf of the Board of Trustees, I would like to thank our staff, volunteers, supporters, healthcare partners and donors. Your commitment makes our work possible and helps create a life-changing community of hope and expert help for everyone affected by liver disease.

As we look ahead, there is still much to do, but we face the future with confidence and determination. Together, we are building momentum, changing lives, and creating a better future for people of all ages affected by liver disease and liver cancer.

Thank you for being part of our journey.

Alastair King

Sir Alastair King DL

Dr Ahmed Elsharkawy

The team at Liver UK and the liver-related community in general were deeply saddened by the passing of Dr Ahmed Elsharkawy earlier this year. Ahmed was one of our trustees and a passionate advocate for people affected by liver disease.

Ahmed brought extraordinary commitment, insight and compassion to everything he did. As a consultant hepatologist, he worked tirelessly to improve the lives of patients through earlier diagnosis and better treatments.

As a trustee, Ahmed was a thoughtful and principled member of our Board. He was generous with his time, supportive of colleagues and unwavering in his focus on what mattered most – better care, greater awareness and better futures for patients and families affected by liver disease.

Those who knew and worked with Ahmed will remember not only his expertise and integrity, but also his warmth, humour and kindness.

Ahmed leaves a lasting legacy in the progress made towards improved management and care for liver disease, with a particular passion for improving diagnosis and outcomes for people with viral hepatitis.

He will be greatly missed by everyone at Liver UK and across the liver community.

Our thoughts are with his family, friends and colleagues at this very sad time.



About Liver UK

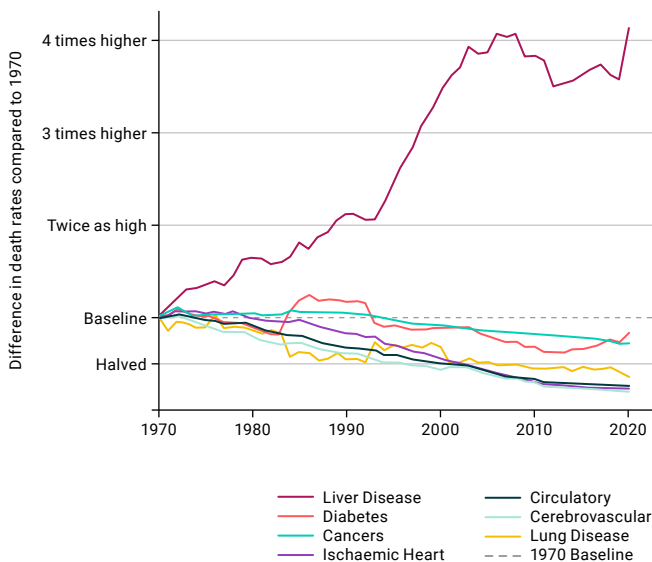
Liver UK is the leading liver charity, working across all four nations of the UK to save lives and improve liver health. We support everyone affected by liver disease and liver cancer, of every age and with every type of liver condition.

Liver UK is the new name of the British Liver Trust. In 2024, the British Liver Trust and Children's Liver Disease Foundation came together, bringing decades of expertise, support and campaigning into one organisation. In 2026, we adopted the new name Liver UK, reflecting our shared ambition to create one strong voice for liver health.

We're here to make sure no one faces liver disease alone. We provide trusted information and emotional support, while campaigning for better prevention, earlier diagnosis, and improved treatment and care.

Working alongside patients, families, clinicians and researchers, we're driving change and creating a future where liver disease is better understood, diagnosed earlier and treated more effectively – so more people can live long, healthier lives.

Acceleration in liver disease death rates compared with other major diseases



Three quarters of people with cirrhosis are only diagnosed at crisis point, when they develop potentially life-threatening symptoms of late-stage disease

Almost three quarters (73%) of people with a liver condition have experienced stigma



In our survey, 67% of people felt that childhood liver disease had a negative effect on mental health



1 in 4 people diagnosed with alcohol-related liver disease in hospital die within 60 days

The number of people dying prematurely from liver disease and liver cancer has increased by almost two-thirds (64%) in the last 20 years

Liver cancer deaths in England and Wales increased by

41%

between 2013 and 2024

Building a stronger identity and strategy for 2026–2032



A new chapter as Liver UK

The British Liver Trust and Children's Liver Disease Foundation officially merged in April 2024. But this was just the beginning of our journey. Throughout 2025-2026, we have been working towards the next major milestone: bringing the charity together under a new name and identity, alongside the launch of a new website.

The transition to Liver UK represents far more than a change of name. It marks the public introduction of a stronger, unified organisation with the scale, authority and ambition to tackle the UK's growing liver disease crisis.

By coming together under a single name, we can speak with one strong, consistent voice. This will help us strengthen our services, improve the support we provide, and make our campaigning for better prevention, diagnosis and treatment even more impactful.

Our new name is accompanied by a new logo and visual identity, designed to reflect who we are as a unified organisation and the diverse community we work with.

How we developed the new brand

The rebrand has been a collaborative process, involving people from across the charity and our wider community.

We began in 2025 with an extensive programme of research and engagement, speaking to supporters, clinicians, people with lived experience of liver disease and other key stakeholders. This included three focus groups, an online survey, patient advisory group meetings and stakeholder interviews. Through our surveys alone, we heard from nearly 700 people.

This early engagement was essential in helping us understand how people see us, what matters most to them, and how we can communicate more clearly, confidently and inclusively. It provided the foundation for developing a brand and messaging that reflect our purpose, values and ambitions.

Following this initial research and engagement phase, we moved into the second stage: developing our new visual identity, including the name, logo, and overall look and feel of the brand. Stakeholder involvement continued throughout this stage with supporters, clinicians and people with lived experience helping to shape, test and challenge our thinking.



What happens next

The development of the new brand identity has now brought us into the final stage: implementation.

Alongside rolling out the new identity across our communications, materials, services and platforms, we are also developing a new website for Liver UK. The new website will bring our information, support and resources together in one accessible, user-friendly place, making it easier for people to find the help and information they need.

Together, these changes will help us create a consistent and recognisable presence for Liver UK, both online and across everything we do.

We will continue to work with our community throughout this process, making sure the final result reflects the people we support, our shared values and everything we stand for.

Our strategy for better liver health

Liver disease and liver cancer are among the UK's fastest-growing health challenges. They affect people of all ages and can strike anyone, at any point in their lives. Liver disease is now one of the four leading causes of death among people aged 20 to 64, affecting thousands of families across the UK every year.

We are determined to change this.

In January 2026, we launched our new strategy – *Building momentum, Changing lives*, which marks a pivotal moment in our journey as an organisation. Our vision for 2026 to 2032 builds on the momentum we have created and sets out how we will make a lasting difference to people's lives.

We have identified four strategic pillars where we believe we can have the greatest impact. These are underpinned by a set of enablers – the ways we will work together, strengthen our organisation and turn our vision into reality.

Our approach closely aligns with the Government's 10-year NHS plan, supporting a shift in focus from sickness to prevention, from hospital to community, and from analogue to digital. The launch of the NHS England liver disease transformation programme also creates a once-in-a-generation opportunity to drive meaningful, lasting change.

Our new strategy sets out how we will ensure that everyone, whatever their age or condition, can access the information, care, and support they need to live well and enjoy a better quality of life.

We will campaign for a healthier environment that helps prevent liver damage before it begins. We will push for earlier diagnosis and faster access to treatment, while working in partnership to raise standards of care and reduce inequalities nationwide. And we will raise awareness so that more people understand liver disease – its causes, risks, impact and how it can be prevented. By doing so, we will challenge the stigma that too often surrounds liver disease and make sure people know where to turn for help.

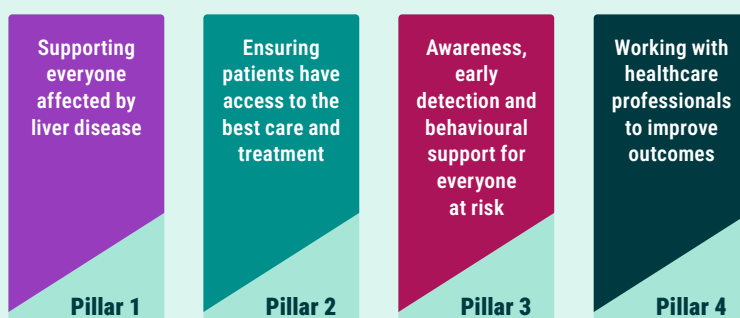


These ambitious plans will help more people understand their risk and ultimately save lives."

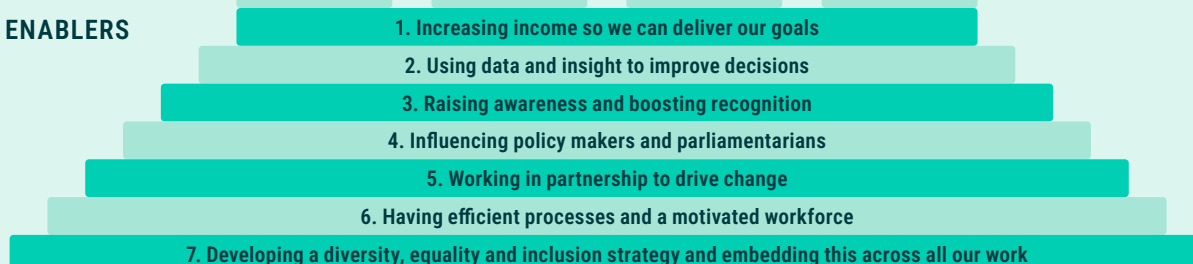
Sara, one of our supporters, whose dad Stephen was told he had a fatty liver in 2014 but was given no treatment or advice. Tragically he passed away from fatty liver disease in 2024.

Our strategy sets out a clear path towards a future where liver disease is prevented wherever possible, diagnosed earlier, treated effectively and no longer carries the stigma it does today. The opportunity for change is here – and we are ready to lead it.

Our strategic pillars



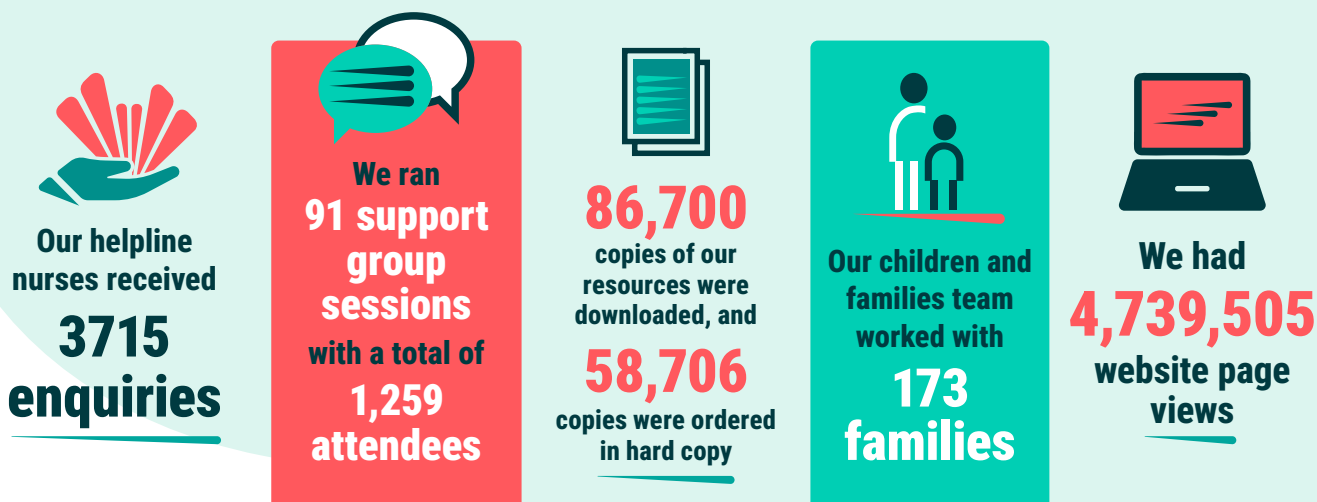
OUR ENABLERS



Support for everyone

Supporting people affected by liver disease is at the heart of everything we do. Now, as one organisation, we're able to support people throughout their lives and across every type of liver disease. Whether through trusted information resources, support groups, our nurse-led helpline or one-to-one support, we're here for everyone affected by liver disease or liver cancer.

Throughout 2025/26, we've been there with vital information and support for adults, young people, children and families:



Achieving PIF TICK accreditation for our information production process

Giving people access to clear, trustworthy health information is a vital part of how we support those affected by liver disease. We were therefore delighted to achieve PIF TICK accreditation in February 2026.

PIF TICK is the UK's only independently assessed quality mark for print and online health information. We achieved this accreditation following a rigorous assessment against 10 quality criteria. This demonstrates that our health information is evidence-based, clear, accessible, jargon-free, up-to-date and produced to the highest standards.

Awarded by the non-profit Patient Information Forum (PIF), PIF TICK is increasingly recognised as the benchmark for trusted health information. As concerns grow about the availability of accurate health information online, this accreditation provides independent assurance that our resources are reliable, evidence-based and developed through robust processes. Many NHS organisations and other healthcare providers now choose to link

only to information from PIF TICK-accredited organisations. The World Health Organization (WHO), NHS England and the Academy of Medical Royal Colleges have all highlighted PIF TICK as an example of good practice.

We will maintain our PIF TICK accreditation through annual assessments, ensuring our health information continues to meet the highest quality standards.



"We are thrilled to welcome Liver UK to our ever-growing community of accredited PIF TICK members. Accurate, accessible, evidence-based information is key to increasing patient empowerment and improving health outcomes."

Dan Wills, PIF TICK Manager

Expert advice and peer support

Our virtual support groups bring together people affected by liver disease in a welcoming, confidential environment where they can connect, share experiences and support one another. They are a vital source of support for people who are unable to travel or who live in remote areas, ensuring that no one has to face liver disease alone.

Throughout the year, our adult virtual support groups have welcomed a range of expert speakers to provide information and guidance on topics relevant to different liver conditions.



In January 2026, our online transplant support group welcomed transplant psychologist Lucy Gorvin from the Royal Free Hospital, London, who delivered a presentation on survivor's guilt following transplantation. This is a sensitive topic area that frequently arises during support group discussions. The session was attended by 29 transplant patients and prompted an open and emotional discussion.



Supporting a young person to stay in education

Kate, our Children's and Families Officer, plays a vital role in supporting children, young people and families affected by childhood liver disease. Education support is a key part of her role, helping children and young people stay engaged with learning while managing their health.

One mum contacted Liver UK after her son was diagnosed with a serious liver condition shortly after starting college. Frequent hospital stays left him struggling with coursework and the college initially suggested he withdraw and defer his studies for a year.

We worked with the young person, his mum and the college in an advocacy and mediation role, bringing everyone together to explore alternatives while keeping his voice at the centre. Following several meetings, an agreement was reached for him to remain on his course through a part-time timetable. We also provided funding for a laptop so he could study from hospital or home when unable to attend college.

This flexible approach meant he avoided losing a year of education, gradually caught up with missed work and maintained connections with friends. It also helped reduce isolation, rebuild his confidence and improve his overall wellbeing.

His mum told us:



He is doing really well. He's not only managing college, he's thriving. He's caught up with everything he'd fallen behind in, which at the time the college said would be impossible. The impact on his mental health has been fantastic."

This case highlights the vital difference that tailored education support can make, helping young people living with childhood liver disease remain in education, regain confidence and thrive despite the challenges of their diagnosis.



Nurse helpline



In 25/26 the helpline received

3715
calls and
emails



Top 3

reasons for contacting our
nurses were symptoms,
alcohol related liver
disease and blood tests

On average, calls
lasted around

16
minutes

Our nurse team spent

2,339
hours
handling enquiries

We have
seen an
increase in
calls from
carers
and
relatives

"I've contacted Liver UK's nurse-led helpline a few times to provide some clarity on my situation, and they've offered great advice about what questions to ask at my appointments. Just having someone you can talk to who understands and who knows about medical environments can be extremely useful"

Rachael

Improving access to expert liver cancer support

Thanks to funding from Macmillan Cancer Support, we've expanded our helpline team by welcoming a liver nurse specialist who will focus on liver cancer.

Every day in the UK, 17 people are diagnosed with liver cancer. It has one of the lowest survival rates of any cancer, largely because it is often diagnosed at a late stage.

For people facing a liver cancer diagnosis, access to specialist advice, information and emotional support can make a real difference. Yet many patients tell us they struggle to access the care and support they need. Our new nurse specialist is helping to bridge that gap, ensuring that more people can receive expert, compassionate support when they need it most.

Karen Mercer joined the team in July 2025, bringing more than 30 years of NHS experience. As our nurse specialist focusing on liver cancer, she provides expert advice and emotional support to people affected by liver cancer, while also strengthening the knowledge and confidence of the wider nursing team.

Reflecting on her first year with the charity, Karen highlights the unique role our helpline plays in supporting people alongside NHS services:

"I joined the nurse-led helpline after working in a variety of NHS Hospitals for 30 years. Throughout my NHS career, I've seen waiting times increase significantly, and I've been struck by how isolated many patients can feel, particularly after receiving a diagnosis.

Many callers tell us their hospital appointments feel too short and they don't have time to ask all the questions they have. Our helpline provides the time and space to answer those questions and connect callers with additional sources of information and support, ensuring they never have to face their diagnosis alone."

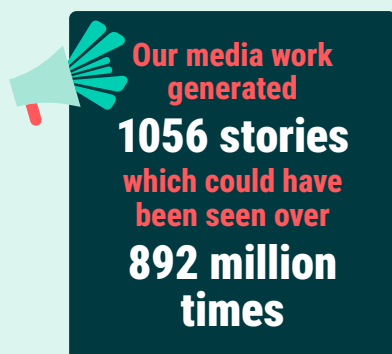


Raising awareness and reducing stigma

Liver disease is a growing healthcare crisis, yet too many people remain unaware of the scale of the problem. This lack of awareness can lead to late diagnosis, missed opportunities for prevention and persistent stigma.

Liver UK is committed to raising awareness of the impact of liver disease and liver cancer through our extensive media work. In 2025-26 we used our website, social media channels and media coverage to bring these issues to the forefront of public conversation.

By amplifying our message, we aim to improve public understanding, encourage earlier diagnosis and prevention, and challenge the stigma surrounding liver disease and liver cancer.



Campaigns that make a difference

Liver UK runs a range of awareness campaigns throughout the year, helping to keep liver disease and liver health in the spotlight, raise awareness of the issues affecting people living with liver disease, and encourage people to take action to protect their liver health.



In October 2025, a record 45 buildings across 27 towns and cities took part in our **Light up for Liver** campaign, illuminating green to shine a spotlight on liver cancer. From the University of Glasgow to the Royal Liver Building in Liverpool, BT Tower in London and Rochester Cathedral in Kent, landmarks across the UK lit up green to raise awareness and show support for people affected by liver cancer.

Love Your Liver Month is our annual campaign to raise awareness of the risk factors for liver disease and encourage people to take steps to improve their liver health. During Love your Liver month in January 2026, 4,152 people completed our online health screener.

Big Yellow Friday is another much-loved event in the charity calendar, and 2026 was no exception. This annual day brings people together across the UK to raise vital awareness and funds for children and young people affected by childhood liver disease. On 13th March 2026, supporters went all out to make a difference. The day got off to a fantastic start with a Big Yellow Coffee Morning hosted by Rick Stein's restaurant in Winchester. Schools, workplaces and community groups across the country then embraced the yellow theme, with 27 Big Yellow Friday events held nationwide.

Alicia, whose daughter's school all wore yellow and did a special assembly, said:



There is no greater reward than making an impact. Luna's entire school have gained important knowledge that can truly make a difference in the world."



Together, supporters raised more than £20,000 to help children, young people and families affected by childhood liver disease.

We also support a range of other national and international awareness campaigns throughout the year, including **Global Fatty Liver Day, Alcohol Awareness Week, Organ Donation Week**, and **Rare Disease Day**. Through our social media channels, patient stories and other communications, we share trusted information, amplify the voices and experiences of people affected by liver disease, and encourage greater understanding of liver health.

New campaign shines a light on rare and lesser-known liver diseases

Rare liver diseases affect tens of thousands of adults and children across the UK. Conditions such as autoimmune hepatitis, primary biliary cholangitis (PBC), primary sclerosing cholangitis (PSC), biliary atresia and Alagille syndrome can have life-changing and, in some cases, life-limiting consequences. Yet many people face delayed diagnosis, limited access to specialist care, and a lack of understanding about what it means to live with a rare liver disease.

Childhood liver disease is particularly complex, with many different conditions and, in most cases, no cure. Children often need lifelong specialist care, and many will require a liver transplant. Families can feel isolated and may struggle to access the support, information and services they need.

On Rare Disease Day 2026, we launched our *No One Left Behind* campaign to shine a light on these often-overlooked conditions. The campaign aims to improve understanding of rare liver diseases, increase awareness among healthcare professionals, and ensure patients and families can access the information and support they need.

As part of the campaign, we undertook filming and photography to creating a bank of high-quality case study content, alongside a dedicated campaign webpage. Patient advocates also shared their stories through social media and national and regional media, bringing the realities of living with a rare liver condition to a wider audience. Their personal experiences highlighted the daily challenges, uncertainty and isolation that can accompany these diseases.

Among those who kindly shared their experiences was Kirsty, mum to Harrison, who has Alagille syndrome. She explained:

It's a rare condition, there is no quick fix. Doctors can't deal with it, we have to see consultants. It's appointment after appointment. You have to just keep going and enjoy what life you have."



The campaign achieved significant reach from the outset. On Rare Disease Day alone, the campaign webpage attracted more than 6,000 views. We also secured more than 40 pieces of coverage across national, regional and broadcast media, with a combined audience reach in the tens of millions.

Through *No One Left Behind*, we will continue to promote earlier recognition of rare liver diseases, strengthen education and awareness among healthcare professionals, and provide clear, trusted information and support for patients and families. By amplifying the voices of those living with rare liver disease, we can build greater understanding, encourage earlier diagnosis and ensure that no one is left behind.

Tackling stigma in liver disease

Stigma is one of the biggest barriers to improving liver health. It stops too many people from seeking help, accessing support and receiving the care they need.

In 2025, Liver UK worked with leading liver specialists to publish an important commentary on the causes and impact of stigma in liver disease – and, crucially, what can be done to reduce it. The article was published in a special edition of *Frontline Gastroenterology* to coincide with the British Association for the Study of the Liver (BASL) annual meeting.

While deaths from many major diseases have fallen over recent decades, deaths from liver disease continue to rise. Many of these deaths could be prevented if people felt able to seek help earlier and had access to the right care and support.

There are many barriers to early diagnosis and treatment, but stigma affects every stage of the patient journey. In our 2022 stigma survey, 73% of people told us they had experienced stigma, and almost 1 in 3 said it had stopped them from seeking help.

Our article explains how stigma can stop people recognising their own risk, delay conversations with their GP, and make it harder to attend appointments. It can also affect how services are designed and funded, making support harder to access. It may even slow progress in medical research.

Publishing this commentary helps raise awareness among specialist doctors, nurses, and researchers. It also reaches the wider healthcare professionals working in gastroenterology departments across the UK.

Encouragingly, there is growing evidence that stigma can be reduced. One of the most powerful approaches is ensuring the voices of people with lived experience are heard - including the many individuals who have shared their stories with Liver UK. One such person is Isobel, who generously agreed to feature in the article.

Stigma is not a new issue, but it is finally getting the attention it deserves. By bringing together evidence, expert insight and lived experience, this commentary keeps stigma at the centre of discussions about improving liver care.

Improving the safety of AI-generated health information

Millions of people now use the internet as their first source of health information. AI-generated search summaries are becoming an increasingly common way for people to find answers to health questions. While these tools can make information easier to access, inaccurate or incomplete information can have serious consequences for people making decisions about their health.

Working alongside the Patient Information Forum (PIF), Macmillan Cancer Support, the British Heart Foundation and other leading health organisations, we helped raise national and international awareness of the risks posed by inaccurate AI-generated health summaries in online search results.

Together, we identified examples of AI-generated overviews that presented health information in ways that could mislead, confuse or falsely reassure people, particularly in relation to medical

tests. We warned that inaccurate or incomplete information could delay diagnosis, discourage people from seeking care and ultimately put lives at risk.

Our joint campaign attracted widespread media coverage, including in *The Guardian*, and was reported by hundreds of news outlets around the world. This helped bring global attention to the need for stronger safeguards and greater accountability for AI-generated medical information.

The campaign has already contributed to positive change, with Google updating its AI-generated summaries relating to liver blood tests.

While this is an important step forward, it also highlights the need for continued scrutiny, collaboration and public education to ensure that people can access accurate, trustworthy health information when seeking advice online.

Improving early diagnosis

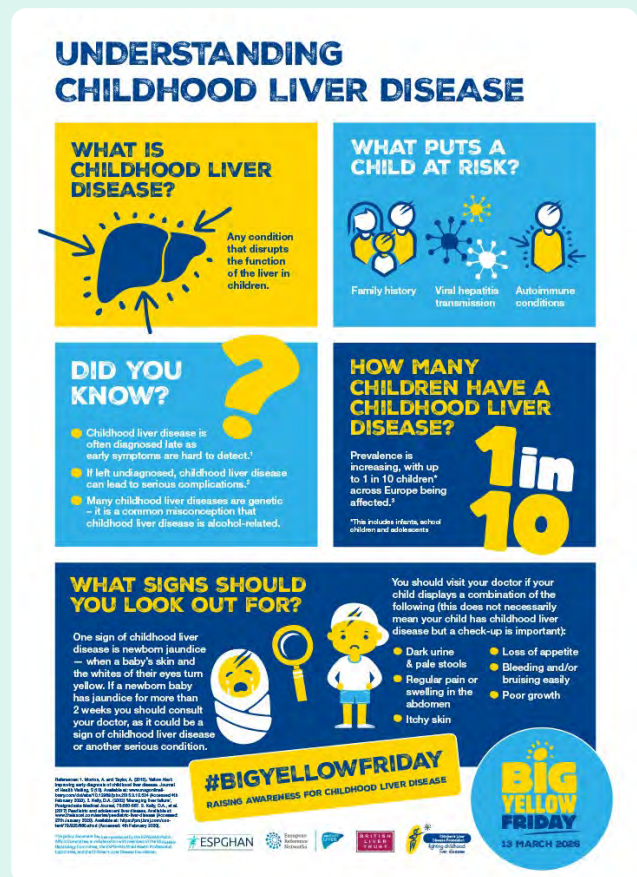
Big Yellow Friday goes Europe-wide

To mark Big Yellow Friday 2026, Liver UK joined forces with the European Society for Paediatric Gastroenterology, Hepatology and Nutrition (ESPGHAN) to launch the campaign across Europe for the first time, shining a spotlight on childhood liver disease across the continent.

Together, Liver UK and ESPGHAN launched a united call to action, urging policymakers to prioritise childhood liver disease by raising awareness, investing in research and improving care for children and young people.

The campaign called for 4 key commitments:

- **Deliver public awareness and education campaigns to improve understanding of childhood liver disease.**
- **Increase investment in research to drive the development of treatments for rare paediatric liver conditions.**
- **Ensure every child with liver disease has access to specialist paediatric liver care.**
- **Strengthen and improve the transition from paediatric to adult services.**



To extend the campaign's reach, an infographic highlighting the key facts about childhood liver disease and the signs and symptoms to look out for was translated into 12 languages, including Spanish, French, Greek, Hebrew and Italian. This makes trusted health information accessible to more families and healthcare professionals across Europe. Building on this first campaign, the two organisations plan to continue their collaboration to support better outcomes for children living with liver disease across Europe.



Love Your Liver roadshow

In 2025/26

our mobile unit covered
4451 miles

we visited
12 new places
including Durham, Slough,
Folkestone and Dumbarton

we held
36
roadshows
that raised awareness
of the risk factors and
provided liver scans

4045 people
had a free liver scan

over **250 people**
had a scan that indicated
they might have liver damage
and needed further tests



The Love Your Liver mobile unit
entered the workshop
for its transformation into
Liver UK

Advocating for better liver care in Northern Ireland

In September 2025, we brought our Love Your Liver roadshow to Stormont, the seat of Northern Ireland's Assembly, to raise awareness of liver disease and highlight the importance of prevention, early diagnosis and timely intervention.

The event provided a valuable opportunity to engage with Members of the Legislative Assembly (MLAs), patients and clinicians about the urgent action needed to improve liver health across Northern Ireland. Patients from the Royal Victoria Hospital Liver Support Group attended alongside local liver specialists, sharing both their lived experiences and clinical expertise.

Throughout the day, we met with more than 30 MLAs, MPs, councillors and members of the media. Many also took part in a quick, non-invasive liver scan, with our team screening 88 politicians and staff members in total.

We were particularly pleased to welcome the full Health Committee, including Chairperson Philip McGuigan MLA, Deputy Chairperson Danny Donnelly MLA, Alan Chambers MLA, Linda Dillon MLA, Diane Dodds MLA, Órlaithí Flynn MLA, Nuala McAllister MLA, Colin McGrath MLA and

Alan Robinson MLA. Ministers Paul Given MLA, Dr Caoimhe Archibald MLA and Liz Kimmins MLA also visited the roadshow to show their support.

Northern Ireland currently has no dedicated liver disease pathways, leaving many patients without clear routes to early diagnosis and treatment. During the event, we urged MLAs to support our call for a meeting with Health Minister Mike Nesbitt MLA, NHS leaders and clinicians to discuss how existing liver scanning machines can be used more effectively and how new pathways can make early diagnosis routine.

Pamela Healy, Chief Executive of Liver UK, who attended the event said:

Northern Ireland is facing a liver disease crisis, with premature liver disease deaths doubling in the last 2 decades. We were pleased to welcome all the MLAs and staff, and particularly all the Health Committee members."



Taking liver health screening into the workplace

In August 2025, Liver UK launched a new initiative to bring liver disease experts, screening and liver scanning directly into workplaces across the UK. The programme is designed to improve liver health awareness and identify more people at risk of developing liver disease.

Around one in three people in the UK is at risk of developing liver disease, which affects more people of working age than any other major disease. Love Your Liver workplace events give employers a practical way to support employee wellbeing by raising awareness of liver health in a supportive, accessible environment.

Liver UK offers a range of Love Your Liver workplace events, from online awareness sessions and in-person wellbeing events to comprehensive screening and scanning days using Liver UK's mobile unit equipped with non-invasive liver scanners. Every event can be tailored to suit different budgets, locations and organisational needs.

Jonathan Worsfold, Director of Service Delivery at Liver UK said:

Workforce health has never been higher up the agenda and our Love Your Liver screening and scanning events offer a vital opportunity for employers to ensure their colleagues are aware of liver disease risk factors and how to love their liver back to health."

In October 2025, we hosted four Love Your Liver events at energy giant EDF, scanning almost 700 workers. Thirty-eight people were referred for further medical support, with our team working until midnight on two days to ensure nightshift workers could also take part.

Angela Young, Occupational Health and Wellbeing Manager at EDF said:

When we arranged the first event the interest among our workers was immediate. Scanning appointments were booked out within a couple of hours and everyone was asking if we could do it again."

Roadshow case study

I've been overweight for many years and weighed 26 stone at my heaviest. I tried losing weight, but it never came to anything, which I regret. Intermittent fasting is too rigid for me, and while Slimming World is really good, I would go for naughty food when I was down. It wasn't doing me any good, so I knew I had to sort out my headspace.

I have other health conditions, such as type 2 diabetes and fibromyalgia, and my husband is my carer, but he's got arthritis, and I didn't want to be so bad that he had to do everything for me.

When I saw the Love Your Liver unit in Southend High Street, I wanted to know what it was all about as I'm a very inquisitive person. If I hadn't, I wouldn't have found out just how bad my liver was.

I filled in the at-risk checker and then had the FibroScan, which Kirsty, the nurse, carried out for me. It was very quick and easy and my score was 30.2. Kirsty explained what that meant and gave me a letter to take to my GP.

The GP referred me to a gastroenterologist, which took six months and for an ultrasound, which took four. In the meantime, I was back at Slimming World and my diabetic nurse had put me on Mounjaro so I was three-and-a-half stone lighter by the time I had the scan.

It showed I had an enlarged liver and spleen, but the results were better than they had been at the unit. My blood tests were better too.

I now go to the gym two or three times a week and really enjoy it, but pace myself a bit because of the fibromyalgia. I'm carrying on with Slimming World too and can get into smaller clothes now and everyone's been saying that I look good. I've also had counselling and getting my liver sorted will help bring my anxiety down.

I've now lost four stone and hope to weigh 14 stone in a year's time. Getting on the Love Your Liver unit and changing my mind and my health was the best thing I could have done."

**Lesley, who attended our
Love Your Liver event in Southend**



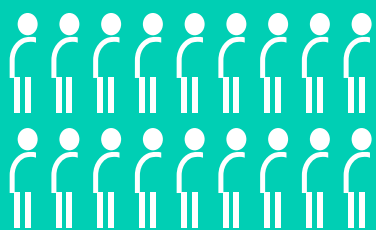
Driving change in healthcare and policy

Our Policy and Public Affairs team made great progress during 2025/2026, delivering a range of high-profile events, engagement activities and parliamentary debates to raise the profile of liver disease and liver cancer.

It has also been a landmark year for liver and wider health policy. NHS England began work on its Liver Transformation Programme, while the Government published its 10-year Health Plan, setting out its vision for the future of the NHS.

Liver UK has played an influential role in shaping these developments through evidence-based advocacy, stakeholder engagement and parliamentary activity. None of this would be possible without the support of our volunteers and campaigners, who continue to champion our cause by writing to MPs, speaking at events and sharing their personal stories.

We held face-to-face meetings with
18 MPs



We tabled
40 parliamentary questions
across all Parliaments



We held the first ever
debate on fatty liver
disease

Over
700 supporters

wrote to their MP
to encourage them to
support our

*'Make early diagnosis
routine campaign'*

Campaigning that delivers results

Following sustained campaigning by Liver UK, we welcomed the publication of the first-ever Men's Health Strategy in November 2025. The strategy includes new investment to tackle alcohol harm, a major driver of health inequalities and liver disease. It also confirms the government will work with partners, including Liver UK, to raise awareness, reduce stigma, and improve early diagnosis.

The Policy and Public Affairs team also campaigned in support of the Rare Cancers Bill, which became law in March 2026. The legislation marks an important step forward in strengthening the policy framework for rare cancers, including liver cancer. It aims to drive innovation in treatments, increase research into rare cancers and improve access to clinical trials for patients across the UK.

Liver UK will continue working with policymakers, clinicians and the wider liver community to ensure that people affected by liver disease and liver cancer benefit from the opportunities these pieces of legislation create.



A strong first year for the APPG on Liver Disease and Liver Cancer

The All-Party Parliamentary Group (APPG) on Liver Disease and Liver Cancer, run by Liver UK, has had a successful and impactful first year.

One of its most significant achievements was securing a high-profile parliamentary debate on fatty liver disease. The debate called for greater NHS preparedness ahead of the introduction of new medications and helped raise awareness of one of the UK's fastest-growing public health challenges.

APPG Co-Chairs Dr Beccy Cooper MP and Lorraine Beavers MP also visited liver units at the Royal Free Hospital and Worthing Hospital. They met patients and NHS staff to hear about the challenges facing liver services and the innovative work being done to improve outcomes for people with liver disease and liver cancer.

The Co-Chairs also wrote a series of opinion pieces for leading policy publications, helping to raise the profile of liver health among policymakers and other key decision-makers.

In February 2026 the APPG held its first Annual General Meeting, where members reflected on a successful first year and set priorities for the coming year to keep liver disease and liver cancer high on the parliamentary agenda.

The APPG agreed five priorities for the year ahead:

- 1. Making liver disease and liver cancer a priority as national health plans are implemented.**
- 2. Improving access to new treatments and ensuring equitable access to clinical trials.**
- 3. Promoting early detection through clear local pathways and wider use of non-invasive liver checks.**
- 4. Protecting the Liver Transformation Programme as NHS England evolves.**
- 5. Campaigning for a comprehensive national alcohol strategy to reduce alcohol-related harm, including looking at preventative measures such as minimum unit pricing (MUP).**



With strong parliamentary leadership, growing political engagement and a clear plan for the future, the APPG is well placed to build on its early success and continue driving improvements for everyone affected by liver disease and liver cancer.



Making liver disease a local priority

Liver disease is one of the few major causes of death that continues to rise, putting increasing pressure on patients, families and the NHS. Yet many cases could be prevented or managed more effectively through earlier diagnosis. Raising awareness of liver disease and making early diagnosis routine are key to saving lives, improving patient outcomes and reducing pressure on health services.

In February 2026, Liver UK launched constituency liver disease profiles covering more than 500 English parliamentary constituencies. The profiles provide a snapshot of the local impact of liver disease, including mortality rates, hospital admissions and estimated NHS costs. They also support our *Make Early Diagnosis of Liver Disease Routine* campaign.

Developed as clear, accessible and engaging resources, the profiles help start conversations with MPs about the impact of liver disease in their constituencies. The profiles show why liver disease is an important local issue and outline the practical steps MPs can take to support

earlier diagnosis, save lives, reduce hospital admissions and lower costs to the NHS.

The profiles are also being shared with healthcare professionals, giving clinicians a valuable resource to raise awareness and advocate for better liver health in their local areas.

All constituency profiles are available on the new Liver UK website, where supporters are encouraged to look at their local data and engage with their MP in support of earlier diagnosis.



Driving innovation in early diagnosis

Too many people with liver disease are diagnosed only after significant and often irreversible liver damage has occurred. Improving early detection is therefore one of the most important opportunities to save lives and improve outcomes. During the year over 700 of our supporters used a template letter to write to their MP to ask them to engage with their local health board. We also held meetings with ICBs and equivalent bodies across the devolved nations.

During the year, Liver UK also worked closely with clinicians, NHS England's Liver Disease Transformation Programme and other partners to develop the strategic case for the wider adoption of automated reflex testing for liver disease. This innovative approach uses routine liver blood tests to automatically trigger additional investigations where needed, helping to identify liver disease earlier and more consistently from a single blood sample.

Current pathways can be complex and variable, with abnormal liver blood test results often

requiring multiple GP appointments, repeat blood tests and further referrals before a diagnosis is reached. Evidence reviewed through this work suggests that automated reflex testing could help address these challenges by reducing delays, standardising care, supporting GPs with clearer decision-making and identifying more people with clinically significant liver disease at an earlier stage.

Importantly, automated testing has the potential to reduce health inequalities by improving access to timely diagnosis and reducing the burden of repeat appointments, particularly for people who face barriers to accessing healthcare. It could also help ensure that people at greatest risk are identified sooner and referred for specialist care when needed.

If adopted more widely across the NHS, this could represent a significant step forward in making early diagnosis of liver disease routine. Liver UK will continue to work with clinicians, policymakers and NHS leaders to help drive this important change.

Driving Parliamentary action on MASLD

In October 2025, MPs from across the UK took part in the first-ever parliamentary debate on MASLD and MASH in Westminster Hall. Secured by Dr Beccy Cooper MP, Co-Chair of the All-Party Parliamentary Group on Liver Disease and Liver Cancer, which is run by Liver UK, the debate marked a significant milestone in raising the profile of liver disease in Parliament.

The debate provided a platform to highlight the growing burden of metabolic dysfunction-associated steatotic liver disease (MASLD), commonly known as fatty liver disease, and to present Liver UK's policy recommendations. Responding on behalf of the government, the Minister for Health, Karin Smyth MP, praised Liver UK for its "fantastic campaigning and briefing, which has clearly paid dividends".

Dr Cooper was a passionate advocate for people living with liver disease, drawing attention to the substantial yet often overlooked impact of MASLD and the increasing risks posed by rising levels of excess weight and obesity across the UK.

MASLD affects up to 1 in 4 people and is a leading cause of serious liver damage. The debate helped raise awareness of the condition while reinforcing the urgent need to ensure the NHS is prepared to deliver the new generation of medicines for fatty liver disease as they become available.



We want to get out of hospitals and into the community, and a lot of work around fatty liver disease can be done in the community. We also need to use data properly to target people and to look at the digital ways in which we can identify high-risk people."

Dr Simon Opher, MP for Stroud



Partnering on research and involving patients

Progress in liver disease research depends on collaboration. No single organisation can tackle the growing burden of liver disease alone.

That is why we work closely with researchers, universities, NHS organisations, funders and industry partners to help drive forward research that has the potential to improve lives. Research not only advances scientific understanding, it creates opportunities for better diagnosis, more effective treatments and, ultimately, improved outcomes for people affected by liver disease.

Just as importantly, people with lived experience must have a voice in shaping research. Through patient and public involvement (PPI), patients, families and carers help ensure that research addresses the questions that matter most to those living with liver disease. Their insights strengthen study design, improve patient information, support recruitment and help researchers communicate findings in ways that are meaningful and accessible.

Throughout the year, we continued to support research teams by raising awareness of clinical studies, connecting researchers with people affected by liver disease and championing patient involvement at every stage of the research journey. By bringing together scientific expertise and lived experience, we are helping to build a stronger research community that delivers real benefits for patients now and in the future.

The MATCH trial – an innovative new treatment for cirrhosis

This year we supported the pioneering MATCH trial, which explored whether macrophage cell therapy could offer a new treatment option for people living with liver cirrhosis. Cirrhosis is one of the most advanced forms of liver disease, yet treatment options remain limited, with liver transplantation often the only curative option.

Macrophages are specialised immune cells that play an important role in repairing damaged tissue and supporting liver health. The MATCH trial, led by Professor Stuart Forbes and colleagues in Scotland, was the first study to investigate whether these cells could be used as a therapy for cirrhosis.

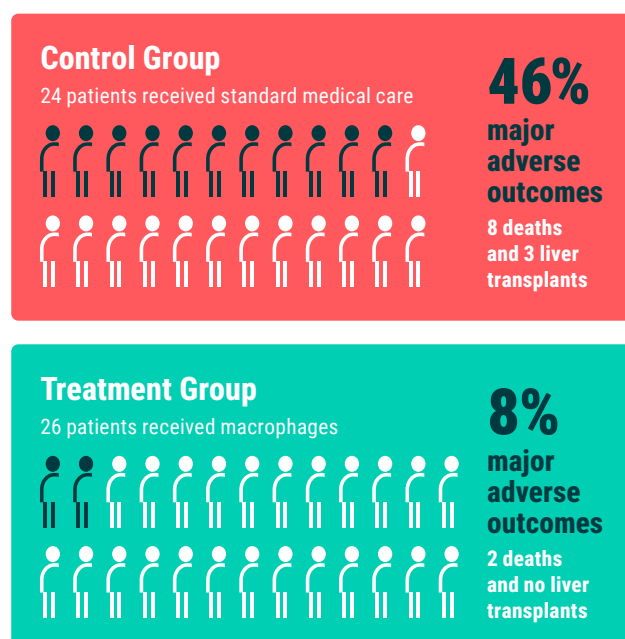
Fifty people took part in the study across three hospitals. Participants were randomly assigned to receive either standard care or macrophage therapy. For those receiving treatment, immune cells were collected from their blood, developed into macrophages in a specialist laboratory and then returned to the same person.

The results were encouraging. Researchers found no evidence of serious treatment-related side effects, suggesting the therapy was safe. Long-term follow-up also indicated better outcomes for those who received macrophage therapy. After three years, 22 of the 26 people in the treatment group were alive and had not

required a liver transplant, compared with 13 of 24 people in the standard care group.

While further research is needed, the study represents an important step forward in the search for new treatments for cirrhosis and offers hope for people living with advanced liver disease. Liver UK is continuing to work with researchers and involve patients on this new innovative approach.

Results after 3 years



Improving liver health after menopause

During the year we helped raise awareness and recruit patients for a new study investigating ways to improve liver health in women after menopause. The research, led by Imperial College London and funded by the National Institute for Health Research (NIHR), focuses on metabolic dysfunction-associated steatotic liver disease (MASLD), commonly known as fatty liver disease.

Hormonal changes after menopause can increase the risk of a range of health conditions, including MASLD. As rates of fatty liver disease continue to rise, there is growing interest in developing interventions that specifically address the needs of patient groups who may face increased risk.

The study is investigating kisspeptin, a naturally occurring hormone that plays a key role in regulating reproductive hormones. Emerging evidence suggests that kisspeptin may have broader health benefits, including effects on metabolism, bone health and the accumulation

of fat in the liver. Researchers hope to establish whether the hormone could help improve liver function and overall health in post-menopausal women with signs of MASLD.

This research is particularly important because it recognises that liver disease can affect different groups in different ways. By investigating novel treatment options tailored to specific patient needs, researchers are helping to build a more personalised approach to liver care. The findings could contribute to improved management of MASLD and a better understanding of how hormonal changes influence liver health.

We are proud to help share information about studies such as this, supporting recruitment and ensuring patients have opportunities to participate in research that may shape future treatment options. Through greater awareness and engagement, we can help accelerate the search for new solutions for people affected by liver disease.

Improving early detection – the DIALS trial

This year, we were delighted to play a key role in the DIAGnosis of Liver diseaSe in primary care (DIALS) trial, a landmark £3.4 million NIHR-funded study that aims to improve the early detection of liver disease in the community. The study is the largest liver research project ever undertaken in the NHS and will involve more than 40,000 people across the UK.

Too often, liver disease is diagnosed at a late stage, when opportunities for prevention and effective treatment have already been missed. DIALS will test the most effective ways to identify people at increased risk of liver disease through primary care, helping ensure that patients receive support and treatment before serious liver damage develops. Participants at higher risk, including those living with obesity, type 2 diabetes or harmful alcohol use, will be offered non-invasive tests through their GP to help detect liver disease earlier.

As a partner in the project, we are helping to ensure that the patient voice remains central throughout the study. Our director sits on the Steering Group, providing strategic patient insight and supporting the wider dissemination of findings. We have also recruited and supported people with lived experience to take part in patient workshops, helping researchers understand what matters most to patients and how the study can maximise participation and impact. Patient representatives are embedded within the governance structure of the project, ensuring lived experience helps shape decision-making at every stage.

By combining world-leading clinical expertise with meaningful patient involvement, DIALS has the potential to transform how liver disease is identified across the UK, leading to earlier diagnosis, better outcomes and fewer lives lost to preventable liver disease.

Understanding the impact of childhood liver disease

Families and young people living with childhood liver disease face complex challenges that affect daily life, education and wellbeing. In July 2025, we surveyed 325 people to better understand these experiences and the support that makes the greatest difference.

Respondents were affected by a wide variety of liver conditions, with biliary atresia the largest group (29%). This diversity gave us a broad picture of life with childhood liver disease, including the experiences of the 2% still living without a diagnosis.

The findings included some encouraging messages. Most respondents were satisfied with the medical care they or their child received, although many felt that communication could be improved.

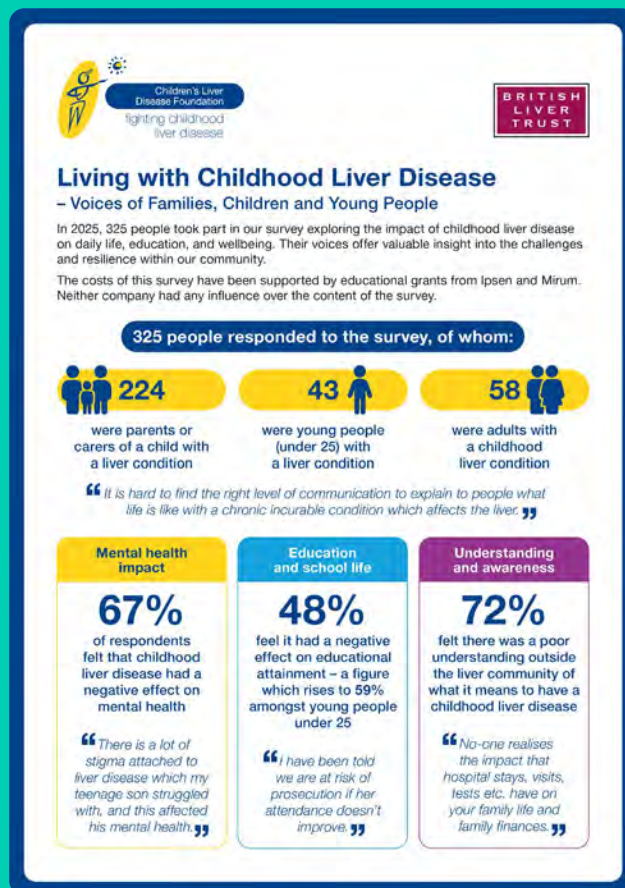
However, life beyond the hospital tells a different story:

67% said childhood liver disease had a negative impact on mental health

48% felt it had negatively affected educational attainment, rising to **59%** among under-25's

72% felt there is poor understanding of childhood liver disease outside the liver community.

There is a lot of stigma attached to liver disease which my teenage son struggled with, and this affected his mental health."



These findings highlight the emotional, practical and social pressure many families face. Childhood liver disease affects far more than physical health, influencing confidence, friendships, education and mental wellbeing, while placing considerable strain on parents, siblings and family life.

The findings reinforce the importance of the emotional and practical support provided by Liver UK, and the urgent need for greater awareness across education, public services and the wider community.

We will work closely with parents, young people and families to explore how we can respond to these issues and advocate for the changes needed to improve the lives of everyone affected by childhood liver disease.

No-one realises the impact that hospital stays, visits, tests etc. have on your family life and family finances."

I have been told we are at risk of prosecution if her attendance doesn't improve."

Our volunteers

At Liver UK, we're proud of our dedicated volunteers, who provide invaluable support to our organisation and people affected by liver disease. They are a valued part of our team and help us make a real difference.

We currently have 90 volunteers, including 10 young people, supporting us in many ways. They provide administrative support, help develop patient information, support fundraising events, offer peer support and help shape the future of the charity.

Volunteers also play a vital role in our Love Your Liver campaigns, helping engage the public, distribute information and ensure events run smoothly. They also extend our reach into local communities by delivering patient information to GP surgeries and health centres.

Every contribution matters and helps us reach and support more people. Volunteering can also be rewarding for the individual. It can provide a sense of purpose, help people develop new skills and support future employment opportunities. It's also a great way to meet people, build friendships and connect with others.

Our volunteers make a real difference to Liver UK and the people we support, and we're incredibly grateful for everything they do.

"The older I get, I realise how incredibly fortunate I am to enjoy good health and I just wanted a way to give something back. I enjoy being a volunteer for Liver UK because they provide such a positive way to encourage people and enable them to live a more healthy lifestyle"

Patricia, volunteer

"It was while I was at the Royal Edinburgh liver unit that I met Fiona, the transplant social worker, and she told me about the liver patient support groups run by Amy from Liver UK.

I find it easy to talk to people and Fiona and Amy saw this and said that I should think about being a peer mentor. They encouraged me, and from there I became a volunteer on the hospital liver unit. Now, once a week, I visit the liver patients who are there for assessment, and I talk to them, and give them a pack of patient information from Liver UK.

People ask me questions that they don't have the courage to ask the doctors, because they think the questions are too silly. But there are no silly questions, and I'm just pleased to be in a position where I can help. I volunteer because I want to give something back, plus I really enjoy helping people."

John



"I really want to raise awareness of liver disease and make a difference because my dad died of MASLD aged just 62. When the charity invited me and my step-mum Dorothy to be part of their Liver Health Awareness event in Westminster we immediately said yes.

Richard, the policy manager introduced me to the MPs and told them about my dad. I explained that we needed more awareness of liver disease and also showed them the map which illustrates which regions in the UK have a pathway for early detection of liver disease. It was a very positive experience and I could see the MPs were really receptive to what I was saying. I can't oversell how important sharing your story is because we brought a personal, human aspect to the message and, as a result, I genuinely believe that liver disease will be higher up on their agenda."

Sara



I was diagnosed with liver disease in early September 2018 after an emergency hospital admission. I was bewildered and fearful about the future. Thankfully I was told about Liver UK by a friend. The information and support provided by the charity was a real game-changer.

Liver UK is a fantastic charity which does extremely important work. As I got better, I started thinking about volunteering for the charity at the grassroots level.

Volunteering at the Love Your Liver roadshows in Wales was a great experience. It was good to talk to people waiting for the screening from a non-professional's perspective about how important the liver is.

As a volunteer I was able to discuss liver disease in a very general way and many people seemed to relate to what I was saying. I felt what I had to say was helpful and the feedback I received was really good for my personal growth."

Phil



I was diagnosed with autoimmune hepatitis and cirrhosis when I was 20 years old and nothing prepared me for being told I had liver scarring and might need a liver transplant in the future.

This sense of isolation and insecurity continued to some extent throughout my early twenties, when I experienced repeated flares of AIH. Aged 25, I suffered an esophageal bleed and was placed on a variceal banding programme to avoid reoccurrence.

Around this time, I had something of a mindset shift. I realised that life cannot be taken for granted, and I made a commitment to make the most of each day whilst I am healthy enough to do so.

I have volunteered with Liver UK for many years now and am part of the Patient Advisory Group (PAG) who provide opinions on key issues impacting the charity's work. I've also been lucky enough to volunteer as a patient representative on various research projects to improve the quality of life for liver disease patients."

Kirsty



When I was 17, my liver suddenly started to fail. It was a total shock because I had never had any problems with my liver before. I was then diagnosed with autoimmune liver disease. My mum contacted Liver UK, and that's how I found out about the support available for young people.

I was introduced to Louise, Michelle and Kate and became part of a really supportive group of young people who either had a liver condition like me or had been through a transplant.

When I turned 18, I was asked if I would like to become a volunteer with the Children and Young People's Team as a peer ambassador. In this role, I support the team with the monthly young people's hangouts along with chatting with younger members of the community online. I also recently went through a liver transplant and was able to share my experience with other young people in real time.

I really enjoy my role. The community was there for me when I was diagnosed, and it made such a difference knowing I wasn't alone. I wanted to be there for other young people who might be facing the same uncertainty and challenges."

Dec



What our staff do

The impact of Liver UK is made possible by our people. As a charity focused on delivering services and support directly to those affected by liver disease, our staff are our greatest asset and our most significant investment, with approximately 76% of our costs relating to the people who deliver our work. Their expertise, compassion and commitment enable us to reach more people than ever before. However, like many charities, we continue to face increasing financial pressures as the cost of employing and retaining skilled staff rises, underlining the need for sustainable funding to protect and grow these vital services.

Lots of people have questions about liver disease. They could be worried they may be at risk, have just been diagnosed, or have been living with a liver condition for many years. Whatever their situation, finding reliable answers can feel increasingly complex.

My role in the patient information team is to make sure trusted, clear, and practical information is available when people need it most. We work with medical experts, patients, and families, as well as drawing on the latest scientific evidence and clinical guidelines. By bringing these sources together, we can provide trusted answers and signpost people to support.

Most importantly, working with patients and families helps to make sure our information is not only accurate, but also accessible and genuinely useful for those who need it.”

Kirsty, Patient Information Officer



As Liver UK’s Policy and Public Affairs Manager, my role is to make sure the voices of people affected by liver disease are heard where decisions are made – in Parliament, by government and across the NHS. I work with MPs, ministers and officials to advocate for earlier diagnosis, a stronger liver workforce, and fair access to care wherever someone lives. Much of my work happens behind the scenes: building relationships, gathering evidence, holding policy roundtables and making the case for change long before it reaches a headline. But I never lose sight of why it matters. Every statistic in our reports represents a person – someone diagnosed too late, or a family living with the consequences of a system that isn’t set up to catch liver disease early enough. Seeing policy change translate into real improvements in care is what makes this work worthwhile.”

Richard, Policy and Public Affairs Manager



As a Liver UK helpline nurse, I speak to people every day who are frightened, confused or simply looking for someone who understands. My role is to provide expert, evidence-based information, while offering the empathy and reassurance that can make all the difference. I help people understand their diagnosis, treatment options and how to manage life with liver disease, and I support families and carers who often need guidance too. Patients are often waiting for NHS appointments or leave consultations with questions they did not have time to ask. We can give people the time and space to talk things through. Being there when people need support most is a privilege and a vital part of improving lives."

Faye, Helpline Nurse



In admin, I'm the person behind the scenes helping to keep everything running smoothly. From sharing important health information, to answering calls from people who are frightened, confused or simply looking for advice about their health, every day is different.

Alongside this, I support all the teams across the organisation with day-to-day office needs, managing the stock of all our published materials and helping to organise and prepare for all of our events throughout the year. I really enjoy being part of a team where the work we do has a genuine impact."

Tonia, Senior Administration Officer



I'm part of the communications team at Liver UK and my work is focussed on children, families and young people affected by liver disease. My role is both to communicate with the families we support and to explain the need for our work to the wider public. This means I have the pleasure of getting to know countless families and young people so that I can tell their stories. Parents often tell us that it was the stories of other children on our website which brought them hope in the early days following diagnosis. Many people do not understand the reality of childhood liver disease until they hear someone's experience. Creating that understanding with the help of our wonderful families is a real privilege."

Mairead, Communications Manager



British Transplant Games 2025

Supporting our adults, families, children and young people, and celebrating the gift of organ donation.

We were delighted to attend the 2025 British Transplant Games in Oxford, spending four days connecting with transplant recipients, their families, supporters and the wider transplant community.

The Games provide a unique opportunity to celebrate the life-changing impact of organ donation and transplantation, bringing together transplant recipients, donor families and supporters through sport, shared experiences and community.

In 2025, more than 2,500 people registered to take part in 26 sporting events, including athletics, swimming, and cycling. Athletes ranged in age from just 2 to 89 years old, demonstrating the breadth of the transplant community and the possibilities that transplantation can offer. We also witnessed the moving spectacle of more than 2,000 people taking part in the Donor Run through the beautiful grounds of Blenheim Palace.

The Games aim to demonstrate the benefits of transplantation and encourage transplant recipients to regain fitness, confidence and wellbeing. They also play an important role in raising public awareness of the need for more people to join the NHS Organ Donation Register and talk to their families about their wishes. At the heart of the Games is the opportunity to thank and celebrate donor families and recognise the extraordinary gift of life they have made possible.

Our presence at the Games enabled us to engage directly with the people and families we support:

We connected with more than **200 individuals**, including over **60 families**

We shared **61 social media posts**, generating **1,428 reactions, comments and shares**

We saw a **127% increase in Facebook views** during the Games period

We initiated **10 new support interventions** following conversations held at the games



These figures only tell part of the story. The Games gave us valuable opportunities to listen to people's experiences, identify support needs and strengthen relationships with our community. The positive response to our presence highlighted how important it is for people to have access to support in spaces where they feel understood and connected.

For us, the Transplant Games are about much more than sport. They are an opportunity to be present alongside our community, listen to what matters to them, celebrate their achievements and provide meaningful support when it is needed.



Thank you for your support

This is our annual opportunity to say a big thank you to everyone. People that donate. People who fundraise and take on challenges, organise events, support us through their workplace, fund our projects and choose to support us and make our work possible.

Your support means we can be there when people need clear, trusted information and reassurance. It helps us to raise awareness of liver health, reach more people who may be at risk and campaign for better prevention, earlier diagnosis, treatment and care.

Throughout 2025/26 we continued to fundraise across a diverse range of income sources, from individual donations and community fundraising to corporate partnerships, trusts, foundations and grants. Every contribution, whatever its size, plays an important part in sustaining our services, helping us reach more people and to continue to drive change.

One of the highlights of the year was Big Yellow Friday. In 2026, supporters across the country came together to raise just under £23,000.

Among those taking part this year was long-standing supporter Emma Nuttall, who supports Big Yellow Friday every year. In 2026, Emma and her family held an afternoon tea, raising an amazing £756.

For Emma, supporting Liver UK is personal. When her daughter Nellie-Mae was admitted to hospital, our information helped the family make sense of what doctors were investigating, understanding her tests and blood results and learn more about what the condition might mean for their daughter. That experience inspired Emma and her family to give something back and help ensure other families have somewhere to turn to.

Our supporters also took on some extraordinary challenges during the year. At the 2025 London Marathon, 21 runners represented Liver UK, together raising an incredible £44,203.

Every one of them exceeded their fundraising target. Behind the total were months of training, countless miles, generous friends and families and a huge amount of determination. We are so grateful to every member of the team.

Whether you made a donation, awarded a grant, organised a fundraiser, joined Big Yellow Friday, ran a marathon, played our lottery, supported us through your workplace or found your own way to help, you have made a real difference.

Because of you, people and families affected by liver disease have somewhere trusted to turn for information, support and understanding. It also enables us to raise awareness, influence change and work towards a future where fewer people develop preventable liver disease and everyone affected receives the care and support they deserve.

To everyone who supported us during 2025/26 - thank you



Financial review

Financial performance

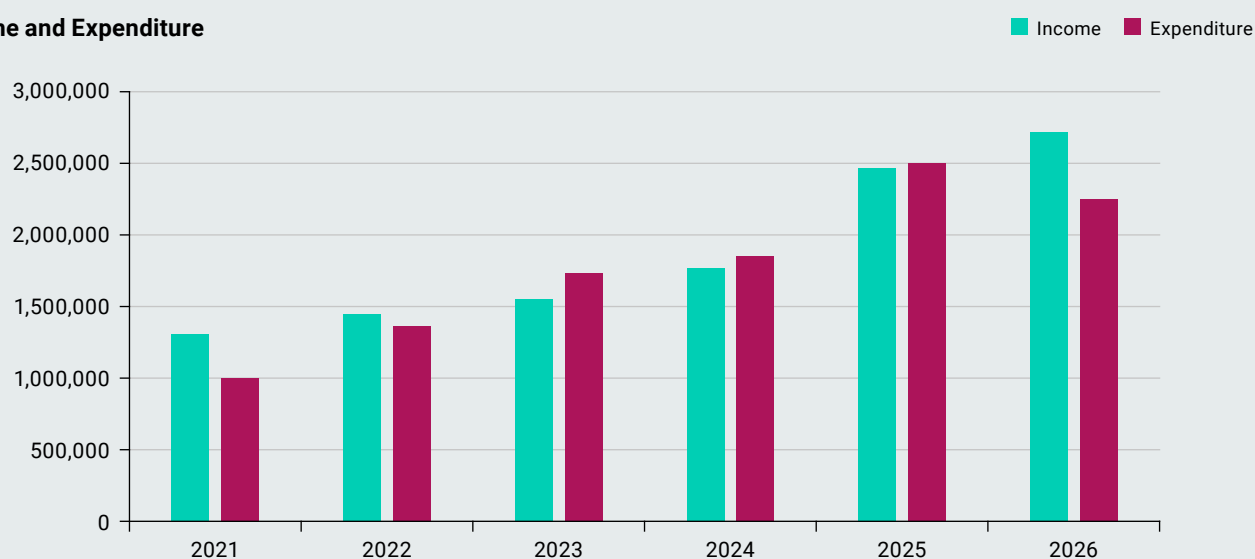
Liver UK ended the year to 31 March 2026 with a surplus of £456,328, compared with a deficit of £8,710 in 2025. Income rose by 9% to £2.70 million (2025: £2.48 million), while expenditure fell by just under 10% to £2.25 million (2025: £2.49 million).

After several years of planned investment-led growth and following the merger with the Children's Liver Disease Foundation in April 2024, the focus in 2025/26 was on consolidating the combined organisation and strengthening its financial position. Total funds carried forward increased to £1.36 million (2025: £903,315), giving the charity a strong base from which to begin delivering its new 2026–2032 strategy.

A significant one-off unrestricted donation made a substantial contribution to the year's surplus, so the headline result should not be viewed as a recurring operating position. Once exceptional income and planned one-off costs, including rebrand expenditure, are taken into account, the charity's underlying business-as-usual activities were broadly at break-even. This is consistent with the Trustees' aim of balancing ambition and charitable impact with a sustainable ongoing cost base.

The charity will continue to broaden its sources of income, invest carefully in the new strategy and maintain close control of expenditure. Although the stronger year-end reserves position provides greater flexibility, the Trustees recognise that a significant part of the year's income was exceptional.

Income and Expenditure



Income

Income for the year totalled £2.70 million, compared with £2.48 million in 2024/25. Both years included significant one-off items: a £410,000 unrestricted donation in 2025/26 and £488,097 of net assets transferred on the merger with the Children's Liver Disease Foundation in 2024/25. Excluding these items, underlying income increased by approximately 15%, from £2.00 million to £2.29 million. Donations and legacies continued to provide the large majority of the charity's income, contributing £2.52 million (2025: £2.35 million), or 93% of the total. Legacy income more than doubled to £239,190 (2025: £105,563), although the timing and value of legacies remain difficult to predict. Other grants and donations increased to £2.28 million (2025: £1.76 million), helped by the significant one-off donation and the continued generosity of individuals, charitable trusts, companies and other partners.

Income from charitable activities rose by 17.8% to £114,941 (2025: £97,569). This comprised £82,750 from hire of the Love Your Liver unit, £25,810 from health events and patient involvement activities, and £6,381 from publication sales.

The charity also recognised £38,705 of sponsorship income within other trading activities, which was a new income category in 2025/26. Taken together, charitable and trading activities generated £153,646, reflecting further progress in developing earned income alongside voluntary fundraising.

Investment income was £29,859 (2025: £35,907), and net investment gains were £6,704 (2025: £2,779). These figures reflect changes during the year in the balance between cash, deposit accounts and listed investments.



Expenditure

Total expenditure fell to £2.25 million (2025: £2.49 million). Charitable activities accounted for £1.64 million, or 72.7% of the total (2025: £1.90 million and 76.3%). Expenditure on raising funds was £616,537, or 27.3% (2025: £591,672 and 23.7%).

The 4.2% increase in fundraising expenditure reflects continued investment in the staff, systems and activity needed to sustain and diversify the charity's future income. This supports the organisation's longer-term ability to provide services, raise awareness and influence improvements in liver health.

Charitable expenditure was 13.9% lower than in the previous year. This was mainly due to the planned consolidation of the organisation during 2025/26, including three redundancies and a wider reduction in staffing levels through staff turnover and the selective non-replacement of vacant posts. The resulting reduction in staff costs was the main factor behind the overall decrease.

The charity nevertheless continued to invest across each of its main programme areas:

- Awareness and communications: £541,262 (2025: £493,437)
- Children and young people's support: £310,842 (2025: £424,975)
- Peer support and outreach: £283,597 (2025: £314,218)
- Helpline: £208,105 (2025: £272,149)
- Policy: £158,461 (2025: £230,742)
- Patient information: £135,653 (2025: £167,639)

Staff costs continue to be the largest area of expenditure at £1.72 million (2025: £1.88 million), reflecting the people-led nature of the charity's services and activities. This includes frontline staff delivering our helpline, support and outreach services, alongside those working in patient information, policy, awareness and fundraising. The average number of employees during the year was 43, compared with 48 in 2024/25.

Support and governance costs reduced by 11.2% to £474,753 (2025: £534,582). The main savings came from lower audit and IT support costs, following the appointment of a new audit provider and the agreement of more favourable pricing for the existing IT support provision. These costs cover the infrastructure needed to run the charity effectively, including finance, people, data, technology, premises, insurance and governance.

Fundraising

The charity raises income through individual giving, community and event fundraising, charitable trusts and foundations, legacies and corporate partnerships. Most fundraising is carried out by employed staff, supported by volunteers and members of the public. No professional fundraisers or commercial participants were used during the year.

The Director of Fundraising and Partnerships leads the fundraising strategy, which is agreed by the Chief Executive and Trustees. Fundraising carried out on the charity's behalf is overseen by the fundraising team, with guidance and support provided to volunteers and supporters. Performance, expenditure and activity are reviewed through the charity's usual management and governance arrangements.

The charity is registered with the Fundraising Regulator, is a member of the Chartered Institute of Fundraising and follows the Code of Fundraising Practice. There were no failures to comply with fundraising standards and no fundraising complaints were received during 2025/26.

The charity is committed to treating supporters fairly and with respect. Staff and volunteers are expected to recognise when someone may be in vulnerable circumstances and to respond appropriately. The charity does not use fundraising methods that intrude unreasonably on privacy, involve persistent approaches or place undue pressure on anyone to donate.

Reserves

At 31 March 2026, the charity held total funds of £1,359,643 (2025: £903,315). This comprised restricted funds of £261,823 and unrestricted funds of £1,097,820.

Restricted funds reduced during the year as balances brought forward, particularly those relating to children's services, were used to support the continued delivery of those services.

The current reserves policy is to hold free reserves equivalent to between three and six months of expenditure. In light of the inherent volatility of the charity's income, the Board has adopted a target of six months of business-as-usual expenditure with effect from 31 March 2027.

Business-as-usual expenditure is defined as the recurring cost of delivering the charity's core services and central infrastructure. It includes established services supported by restricted funding, as these are delivered largely through permanent staff and shared infrastructure rather than separate, time-limited projects. It excludes material, separately approved and time-limited strategic expenditure.

There were no designated funds at the year end. After deducting £32,808 of tangible fixed assets, free reserves were £1,065,012, equivalent to approximately 5.9 months of actual business-as-usual expenditure during 2025/26.

The approved 2026/27 budget provides for a planned use of reserves, principally to fund time-limited strategic investment in the new strategy. Free reserves are therefore expected to reduce over the coming year. The Trustees will keep the position under review, balancing delivery of the strategy with the need to maintain financial resilience and intend to rebuild reserves towards the six-month target over subsequent years.

Principal risks and uncertainties

The Trustees oversee risk management. The risk register is maintained by the Senior Management Team, reviewed regularly by the Audit and Risk Committee and considered by the Board, which also reviews the effectiveness of the controls in place throughout the year.

The principal risks are:

- Income and financial sustainability – Voluntary income can fluctuate significantly, affecting the charity's ability to sustain services and deliver its plans. This is managed through a broad mix of income sources, prudent budgeting, close monitoring and appropriate reserves.
- Clinical governance and service delivery – The charity's liver health activities carry important clinical and regulatory responsibilities. Changes in requirements, or gaps in governance, could affect service delivery and confidence in the organisation. Controls include clear accountability, specialist advice, staff training, and quality assurance including oversight from a clinical advisory group.
- Data protection and information security – A data breach could harm individuals, disrupt services and damage trust. The charity manages this through policies, training, access controls, supplier assurance, incident reporting and investment in its systems.
- People, governance and organisational capacity – Limited staff capacity or gaps in specialist Trustee skills could slow delivery or weaken oversight. This is managed through workforce planning, targeted Trustee recruitment, phased delivery and regular Board review.

Going concern

The Trustees have reviewed the charity's budgets, cash flow forecasts, reserves and principal financial risks for a period of at least twelve months from the date on which the financial statements are approved.

At 31 March 2026, the charity held £1.24 million in cash and short-term deposits and had net current assets of £1.33 million. Current forecasts indicate that the charity has sufficient liquidity to meet its obligations as they fall due and that unrestricted reserves will remain above the minimum required under the reserves policy.

The Trustees have therefore concluded that there are no material uncertainties that cast significant doubt on the charity's ability to continue as a going concern. The financial statements have been prepared on this basis.

Investment policy

The charity's approach to investments gives priority to protecting capital and ensuring that funds remain accessible, while also seeking a reasonable return.

Cash is spread across a range of low-risk current and deposit accounts offering different notice periods and interest rates. This allows the charity to earn interest while retaining sufficient access to funds for its day-to-day needs.

During the year, the charity realised its listed investment portfolio and recognised a net gain of £6,704. There were no fixed asset investments at 31 March 2026 (2025: £225,892).

Deposit accounts classified as current asset investments totalled £540,803 (2025: £342,049), with a further £699,577 held as cash at bank and in hand (2025: £361,481). The Trustees continue to review interest rates, liquidity requirements and the charity's exposure to individual financial institutions.

Structure, governance and management

Liver UK is a charitable company limited by guarantee and governed by its Memorandum and Articles of Association. The Board of Trustees is responsible for strategy, governance and oversight, with day-to-day management delegated to the Chief Executive and Senior Management Team. The Audit and Risk Committee supports the Board in overseeing finance, risk and governance.

Trustees are recruited according to the skills and experience required by the Board and receive appropriate induction and ongoing development. Key management remuneration is reviewed with regard to responsibilities, affordability and appropriate external benchmarks.

The charity has no subsidiaries or related organisations requiring disclosure. The Trustees have had regard to the Charity Commission's guidance on public benefit when reviewing the charity's aims and planning its activities.

Statement of trustees' responsibilities

The trustees (who are also the directors of Liver UK for the purposes of company law) are responsible for preparing the trustees' report and the financial statements in accordance with the United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice) and applicable law and regulations.

Company law requires the trustees to prepare financial statements for each financial year. Under company law the trustees must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the charitable company and of its incoming resources and application of resources, including its income and expenditure, for that period. In preparing these financial statements, the trustees are required to:

- select suitable accounting policies and apply them consistently;
- observe the methods and principles in the Charities SORP;
- make judgements and estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements; and
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in business.

The trustees are responsible for keeping adequate accounting records that are sufficient to show and explain the charitable company's transactions and disclose with reasonable accuracy at any time the financial position of the charitable company and enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

Disclosure of information to auditor

So far as each Trustee is aware, there is no relevant audit information of which the auditor is unaware, and each Trustee has taken all steps they ought to have taken to make themselves aware of any relevant audit information and to establish that the auditor is aware of it. This Trustees' report incorporates the Directors' report required by the Companies Act 2006 and has been prepared in accordance with the provisions applicable to companies subject to the small companies regime. The Trustees' report was approved by the Board on 21 September 2026 and signed on its behalf by:

Alastair King

Sir Alastair King DL
Trustee

Independent Auditor's Report to the Members of Liver UK

Opinion

We have audited the financial statements of Liver UK (the 'charitable company') for the year ended 31 March 2026 which comprise the Statement of Financial Activities, the Balance Sheet, Statement of Cash Flows and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102: The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 31 March 2026 and of its income and expenditure for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice;
- have been prepared in accordance with the requirements of the Companies Act 2006.

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the financial statements section of our report. We are independent of the charitable company in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions relating to going concern

In auditing the financial statements, we have concluded that the trustees' use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the charitable company's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

Our responsibilities and the responsibilities of the directors with respect to going concern are described in the relevant sections of this report.

Other information

The trustees are responsible for the other information. The other information comprises the information included in the annual report other than the financial statements and our auditor's report thereon. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

Opinions on other matters prescribed by the Companies Act 2006

In our opinion, based on the work undertaken in the course of the audit:

- the information given in the trustees' report (incorporating the directors' report) for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the trustees' report (incorporating the directors' report) have been prepared in accordance with applicable legal requirements.

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the Trustees' Annual Report.

We have nothing to report in respect of the following matters in relation to which the Companies Act 2006 requires us to report to you if, in our opinion:

- adequate accounting records have not been kept or returns adequate for our audit have not been received from branches not visited by us;
- the financial statements are not in agreement with the accounting records and returns;
- certain disclosures of trustees' remuneration specified by law are not made; or
- we have not obtained all the information and explanations necessary for the purposes of our audit.

Responsibilities of the trustees

As explained more fully in the trustees' responsibilities statement, the trustees are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as they determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

Our responsibilities for the audit of the financial statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud are set out below.

In identifying and assessing risks of material misstatement in respect of irregularities, including fraud and non-compliance with laws and regulations, our procedures included the following:

- We enquired of management, which included obtaining and reviewing supporting documentation, concerning the charitable company's policies and procedures relating to:
- Detecting and responding to the risks of fraud and whether they have knowledge of any actual, suspected, or alleged fraud;
- The internal controls established to mitigate risks related to fraud or non-compliance with laws and regulations.
- We inspected the minutes of meetings of those charged with governance.
- We reviewed the financial statement disclosures and tested these to supporting documentation to assess compliance with applicable laws and regulations.
- In addressing the risk of fraud through management override of controls, we tested the appropriateness of journal entries and other adjustments, assessed whether the judgements made in making accounting estimates are indicative of a potential bias and tested significant transactions that are unusual or those outside the normal course of business.

Because of the inherent limitations of an audit, there is a risk that we will not detect all irregularities, including those leading to a material misstatement in the financial statements or non-compliance with regulation. The risk is also greater regarding irregularities occurring due to fraud rather than error, as fraud involves intentional concealment, forgery, collusion, omission or misrepresentation.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at: [www.frc.org.uk/auditorsresponsibilities]. This description forms part of our auditor's report.

Use of our report

This report is made solely to the charitable company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006. Our audit work has been undertaken so that we might state to the charitable company's members those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company's members as a body, for our audit work, for this report, or for the opinions we have formed.

Nabeel Shahzad

Nabeel Shahzad (Senior Statutory Auditor)

for and on behalf of
Goldwins Limited
Statutory Auditor
Chartered Accountants
75 Maygrove Road
West Hampstead
London NW6 2EG

Date: 22 September 2026

Statement of Financial Activities for the Year Ended 31 March 2026

(Including Income and Expenditure Account)

	Note	Unrestricted funds £	Restricted funds £	Total 2026 £	Total 2025 £
Income from:					
Donations and legacies	3	1,637,837	882,739	2,520,576	2,349,867
Charitable activities	4	114,941	-	114,941	97,569
Other trading activities	5	38,705	-	38,705	-
Investment income	6	29,859	-	29,859	35,907
Total Income		1,821,342	882,739	2,704,081	2,483,343
Expenditure on:					
Raising funds	7	616,537	-	616,537	591,672
Charitable activities	7	594,285	1,043,635	1,637,920	1,903,160
Total Expenditure		1,210,822	1,043,635	2,254,457	2,494,832
Net gains on investments	14	6,704	-	6,704	2,779
Net income/(expenditure) for the year	9	617,224	(160,896)	456,328	(8,710)
Net movement in funds		617,224	(160,896)	456,328	(8,710)
Reconciliation of funds					
Total funds brought forward		480,596	422,719	903,315	912,025
Total funds carried forward	20	1,097,820	261,823	1,359,643	903,315

All of the above results are derived from continuing activities.

There were no other recognised gains or losses other than those stated above.

The attached notes form part of these financial statements.

Balance Sheet as at 31 March 2026

Company registration number: 02227706

	Note	2026 £	2026 £	2025 £	2025 £
Fixed assets					
Tangible assets	13		32,808		50,801
Investments	14		-		225,892
			32,808		276,693
Current assets					
Investments	15	540,803		342,049	
Debtors	16	336,950		179,424	
Cash at bank and in hand		699,577		361,481	
		1,577,330		882,954	
Creditors: Amounts falling due within one year	17	(250,495)		(256,332)	
Net current assets			1,326,835		626,622
Net assets			1,359,643		903,315
Funds:					
Restricted funds	20		261,823		422,719
Unrestricted funds	20		1,097,820		480,596
Total funds			1,359,643		903,315

The financial statements have been prepared in accordance with the provisions applicable to companies subject to the small companies regime.

The financial statements on pages 38 to 55 were approved by the trustees, and authorised for issue on 21st September 2026 and signed on their behalf by:

Graham Warner

Graham Warner
Trustee

Statement of Cash Flows for the Year Ended 31 March 2026

	Note	2026 £	2026 £	2025 £	2025 £
Net cash provided by/(used in) operating activities	21		280,842		167,942
Cash flows from investing activities:					
Interest / rent / dividends from investments		29,859		35,907	
Purchase of tangible fixed assets		(6,447)		(18,081)	
Acquisition of fixed asset investments		-		(236,572)	
Disposal of fixed asset investments		232,596		13,459	
Cash (used in) investing activities			256,008		(205,287)
Change in cash and cash equivalents in the year			536,850		(37,345)
Cash and cash equivalents at the beginning of the year			703,530		740,875
Cash and cash equivalents at the end of the year	22		1,240,380		703,530

Notes to the Financial Statements for the Year Ended 31 March 2026

1. Accounting policies

Basis of preparation

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (Charities SORP FRS 102), Charities and Trustee Investment (Scotland) Act 2005, regulation 8 of the Charities Accounts (Scotland) Regulations 2006 (as amended) and the Charities Act 2011 and the Companies Act 2006.

The charity changed its name from British Liver Trust to Liver UK following a special resolution passed by the trustees on 8th June 2026, which was formally registered at Companies House on 20th July 2026 and the charity's registrations with the Charity Commission for England and Wales and the Office of the Scottish Charity Regulator (OSCR) were subsequently updated.

Public benefit entity

The charitable company meets the definition of a public benefit entity under FRS 102.

Going concern

The trustees consider that there are no material uncertainties about the charitable company's ability to continue as a going concern. The trustees do not consider that there are any sources of estimation uncertainty at the reporting date that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next reporting period.

Income

Income is recognised when the charity has entitlement to the funds, any performance conditions attached to the income have been met, it is probable that the income will be received and that the amount can be measured reliably.

Income from government and other grants, whether 'capital' grants or 'revenue' grants, is recognised when the charity has entitlement to the funds, any performance conditions attached to the grants have been met, it is probable that the income will be received and the amount can be measured reliably and is not deferred. Income received in advance for the provision of specified service is deferred until the criteria for income recognition are met.

Income from charitable activities includes income recognised as earned (as the related goods or services are provided) under contract.

Donations are recognised on a receivable basis when receipt is probable, and the amount can be reliably measured. For legacies, entitlement is taken as the earlier of the date on which either: the charity is aware that probate has been granted, the estate has been finalised and notification has been made by the executor to the charity that a distribution will be made, or when a distribution is received from the estate. Receipt of a legacy, in whole or in part, is only considered probable when the amount can be measured reliably. Where legacies have been notified to the charity, or the charity is aware of the granting of probate, and the criteria for income recognition have not been met, then the legacy is treated as a contingent asset and disclosed if material.

Interest on funds held on deposit is included when receivable and the amount can be measured reliably by the charity; this is normally upon notification of the interest paid or payable by the bank.

Fund accounting

Unrestricted income funds are general funds that are available for use at the trustees' discretion in furtherance of the objectives of the Charity. In accordance with their reserves policy, trustees take a risk based approach to reserves management and designate funds from the unrestricted funds to meet defined strategic objectives. Restricted income funds are those donated for use in a particular area or for specific purposes, the use of which is restricted to that area or purpose.

Expenditure

Expenditure is recognised once there is a legal or constructive obligation to make a payment to a third party, it is probable that settlement will be required and the amount of the obligation can be measured reliably. Expenditure is classified under the following activity headings:

- Costs of raising funds comprise of trading costs and the costs incurred by the charitable company in inducing third parties to make voluntary contributions to it, as well as the cost of any activities with a fundraising purpose.
- Expenditure on charitable activities includes the costs of delivering services and activities undertaken to further the purposes of the charity and their associated support costs.
- Other expenditure represents those items not falling into any other heading.
- Expenditure includes attributable VAT which cannot be recovered.

Allocation of support and governance costs

Support costs are those functions that assist the work of the charity but do not directly undertake charitable activities. Support costs include back office costs, finance, personnel, payroll and governance costs which support the charitable activities.

Governance costs include the costs attributable to the Charity's compliance with constitutional and statutory requirements, including audit, strategic management and Trustees' meetings and reimbursed expenses.

These costs have been allocated between cost of raising funds and expenditure on charitable activities.

Leases

Leases in which substantially all the risks and rewards of ownership are retained by the lessor are classified as operating leases. Rentals payable under operating leases are charged in the Statement of Financial Activities on a straight line basis over the lease term.

Tangible fixed assets

Individual fixed assets costing £500 or more are initially recorded at cost, less any subsequent accumulated depreciation and subsequent accumulated impairment losses.

Depreciation is provided on tangible fixed assets for the entire year, regardless of when an asset is purchased, so as to write off the cost or valuation, less any estimated residual value, over their expected useful economic life as follows:

Asset class	Depreciation method and rate
Furniture and Equipment	20% straight line basis
Software	33% straight line basis

Fixed asset investments

Investments were previously held in a discretionary portfolio managed by Brewin Dolphin. Investments are stated at market value at the balance sheet date. All investments are unrestricted. Investments comprise cash deposits held for investment purposes in deposit accounts with access greater than 90 days. There is a planned programme to draw on these deposits to fund our growth.

Investments are included at their market value at the balance sheet date. Realised and unrealised gains and losses are recognised in the Statement of Financial Activities. Investment income is recognised when receivable.

Debtors

Trade debtors are amounts due from customers for merchandise sold or services performed in the ordinary course of business.

Trade debtors are recognised initially at the transaction price. They are subsequently measured at amortised cost using the effective interest method, less provision for impairment. A provision for the impairment of trade debtors is established when there is objective evidence that the charity will not be able to collect all amounts due according to the original terms of the receivables.

Cash at bank and in hand

Cash and cash equivalents comprise cash on hand and call deposits, and other short-term highly liquid investments that are readily convertible to a known amount of cash and are subject to an insignificant risk of change in value.

Current asset investments

Investments comprise cash deposits held for investment purposes in deposit accounts with access greater than 90 days. There is a planned programme to draw on these deposits to fund our growth.

Creditors

Trade creditors are obligations to pay for goods or services that have been acquired in the ordinary course of business from suppliers. Accounts payable are classified as current liabilities if the Charity does not have an unconditional right, at the end of the reporting period, to defer settlement of the creditor for at least twelve months after the reporting date. If there is an unconditional right to defer settlement for at least twelve months after the reporting date, they are presented as non-current liabilities.

Financial instruments

The charity only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value with the exception of bank loans which are subsequently measured at amortised cost using the effective interest method.

Pensions

The charitable company operates a defined contribution pension scheme. Contributions payable to the charitable company's pension scheme are charged to the Statement of Financial Activities as they become payable in accordance with the rules of the scheme.

Accounting estimates

Estimates and judgements are continually evaluated and are based on historical experience and other factors, that are believed to be reasonable under the circumstances and there is sufficient information provided to prepare a reasonable estimate. The critical accounting estimate and area of judgement made within these accounts relates to legacies.

Legacy income is accrued when the conditions of entitlement, certainty and measurement are all present. Entitlement is achieved when confirmation is received from the Executor that probate has been granted and that Liver UK has been named as the beneficiary. Certainty is met when the executor confirms that probate is sufficient to cover the bequest and that there are no challenges to the will or any other circumstances where the resultant bequest could be significantly diminished. Measurement is achieved through either having a clear statement from the Executor of the value of the bequest or being able to reasonably estimate this from the will and probate.

2. Detailed comparatives for the statement of financial activities

	Unrestricted funds	Restricted funds	Total funds
	2025	2025	2025
	£	£	£
Income from:			
Donations and legacies	839,950	1,509,917	2,349,867
Charitable activities	97,569	-	97,569
Investment income	35,907	-	35,907
Total income	973,426	1,509,917	2,483,343
Expenditure on:			
Raising funds	591,672	-	591,672
Charitable activities	583,461	1,319,699	1,903,160
Total expenditure	1,175,133	1,319,699	2,494,832
Net gains on investments	2,779	-	2,779
Net income/(expenditure) for the year	(198,928)	190,218	(8,710)
Transfers between funds	5,901	(5,901)	-
Net movement in funds	(193,027)	184,317	(8,710)
Reconciliation of funds:			
Total funds brought forward	673,623	238,402	912,025
Total funds carried forward	480,596	422,719	903,315

3. Income from donations and legacies

	Unrestricted	Restricted	Total	Total
	2026	2026	2026	2025
	£	£	£	£
Legacies	239,190	-	239,190	105,563
Net assets from Children's Liver Disease Foundation	-	-	-	488,097
Other grants & donations	1,398,647	882,739	2,281,386	1,756,207
	1,637,837	882,739	2,520,576	2,349,867

4. Income from charitable activities

	Unrestricted	Restricted	Total	Total
	2026	2026	2026	2025
	£	£	£	£
Sale of publications	6,381	-	6,381	3,400
Income from Unit Hire	82,750	-	82,750	65,823
Health events, PPI etc	25,810	-	25,810	28,346
	114,941	-	114,941	97,569

5. Income from other trading activities

	Unrestricted	Restricted	Total	Total
	2026	2026	2026	2025
	£	£	£	£
Sponsorships	38,705	-	38,705	-
	38,705	-	38,705	-

6. Income from investments

	Unrestricted	Restricted	Total	Total
	2026	2026	2026	2025
	£	£	£	£
Interest receivable on bank deposits	26,917	-	26,917	26,236
Income receivable from investments	2,942	-	2,942	9,671
	29,859	-	29,859	35,907

7. Expenditure

	Direct costs	Staff costs	Support costs	Total 2026
	£	£	£	£
Charitable activities:				
Awareness & comms	207,349	250,257	83,656	541,262
Children & Young People's support	11,653	224,233	74,956	310,842
Helpline	5,247	152,036	50,822	208,105
Patient information	21,774	85,349	28,530	135,653
Peer support & outreach	14,200	201,905	67,492	283,597
Policy	4,281	115,553	38,627	158,461
	264,504	1,029,333	344,083	1,637,920

Fundraising	94,955	390,912	130,670	616,537
	359,459	1,420,245	474,753	2,254,457

	Direct costs	Staff costs	Support costs	Total 2025
	£	£	£	£
Charitable activities:				
Awareness & comms	209,136	212,927	71,374	493,437
Children & Young People's support	8,149	312,181	104,645	424,975
Helpline	6,629	198,861	66,659	272,149
Patient information	40,863	94,949	31,827	167,639
Peer support & outreach	21,412	219,296	73,510	314,218
Policy	13,697	162,556	54,489	230,742
	299,886	1,200,770	402,504	1,903,160

Fundraising	65,571	394,023	132,078	591,672
	365,457	1,594,793	534,582	2,494,832

8. Analysis of support and governance costs

	Total 2026 £	Total 2025 £
Support costs:		
Staff cost	302,174	283,973
Rent	39,186	33,965
Depreciation	24,440	23,224
Information and communication technology	22,912	77,589
Office costs	49,814	42,536
Insurance	11,133	14,659
Employee health and life insurance	11,678	10,455
Travel and subsistence	333	13,063
Governance costs	13,083	35,118
	474,753	534,582
Governance costs:		
Audit	10,000	15,885
Auditor other	-	5,774
Companies House	84	34
Trustee recruitment	220	350
Legal and professional	-	15
Other	2,779	13,060
	13,083	35,118

Of the total expenditure, £1,210,822 was unrestricted (2025: £1,175,133) and £1,043,635 was restricted (2025: £1,319,699).

9. Net income / (expenditure) for the year

This is stated after charging:	2026 £	2025 £
Depreciation of tangible fixed assets	24,440	5,774
Loss on disposal of fixed assets	-	727
Operating lease rental of property	38,720	36,268
Auditor's remuneration:		
audit fees	10,000	14,400
Other non-audit services	-	4,110

10. Analysis of staff costs, trustee remuneration and expenses, and the cost of key management personnel

Staff costs were as follows:

	2026	2025
	£	£
Salaries and wages	1,447,113	1,592,253
Social security costs	147,427	142,635
Pension costs	127,879	143,878
	1,722,419	1,878,766

Included in salaries and wages are termination and redundancy benefits paid to three employees during the year, totalling £12,983 (2025: £nil). These costs consist of statutory redundancy and payments in lieu of notice (PILON). At the balance sheet date, nothing was outstanding for these payments.

The following number of employees received employee benefits (excluding employer pension and national insurance contributions) during the year between:

	2026	2025
	No.	No.
£60,000 to £69,999	1	-
£70,000 to £79,999	1	1
£80,000 to £89,999	1	-
£90,000 to £99,999	1	1

The total employee benefits of the key management personnel of the charity including the employer's pension and national insurance contributions during the year was £447,406 (2025: £435,375).

Staff numbers

The average number of employees (head count based on number of staff employed) during the year was 43 (2025: 48).

No Trustees received any remuneration or other benefits from the charity during the year (2025: £nil).

11. Pension and other schemes

The Charity operates a defined contribution pension scheme. The pension cost charge for the year represents contributions payable by the Charity to the scheme and amounted to £127,879 (2025: £143,878).

Contributions totalling £18,395 (2025: £19,140) were payable to the scheme at the end of the year and are included in creditors.

12. Taxation

The charitable company is exempt from corporation tax as all its income is charitable and is applied for charitable purposes.

13. Tangible fixed assets

	Furniture and equipment	Total
	2026	2026
	£	£
Cost		
At the start of the year	126,984	126,984
Additions in year	6,447	6,447
Disposals in year	(14,870)	(14,870)
At the end of the year	118,561	118,561
Depreciation		
At the start of the year	76,183	76,183
Charge for the year	24,440	24,440
Eliminated on disposals	(14,870)	(14,870)
At the end of the year	85,753	85,753
Net book value		
At the end of the year	32,808	32,808
At the start of the year	50,801	50,801

All of the above assets are used for charitable purposes.

14. Fixed asset investments

	2026	2025
	£	£
Listed investments	-	225,892
	2026	2025
	£	£
Listed investments		
Market value at the beginning of the year	225,892	-
Investments transferred on merger	-	223,459
Additions	-	13,113
Disposals	(232,596)	(13,459)
Net gain on revaluation	6,704	2,779
Market value at the year end	-	225,892

15. Current asset investments

	2026	2025
	£	£
Deposit accounts	540,803	342,049

16. Debtors

	2026	2025
	£	£
Trade debtors	69,204	3,370
Other debtors	6,000	8,829
Accrued income	185,410	87,615
Prepayments	67,507	79,610
	328,121	179,424

Other debtors due after more than one year	8,829	-
	336,950	179,424

17. Creditors: amounts falling due within one year

	2026	2025
	£	£
Research grants (note 18)	28,673	30,424
Trade creditors	36,651	90,125
Other creditors	1,097	253
Deferred income	48,250	-
Accrued expenses	61,352	77,845
Taxation and social security	33,617	35,297
Pension scheme creditor	18,395	19,140
VAT payable	22,460	3,248
	250,495	256,332

Deferred income

	2026	2025
	£	£
Balance at the beginning of the year	-	-
Amount released to income in the year	-	-
Amount deferred in the year	48,250	-
Balance at the end of the year	48,250	-

18. Research grants

The following research projects have previously been granted funds by Children's Liver Disease Foundation, which from 1 April 2024 became part of Liver UK. The following amounts represent the balance of accrued funding remaining unspent at the year end.

	2026	2025
	£	£
2016 CDLF grant – Professor David Wraith, University of Birmingham: Development of biomarkers and novel therapeutics in autoimmune hepatitis type 2	28,673	30,424

This has been paid in full after the year end.

19. Analysis of net assets between funds

Current period

	Unrestricted funds	Restricted funds	Total funds
	2026	2026	2026
	£	£	£
Tangible fixed assets	32,808	-	32,808
Fixed asset investments	-	-	-
Net current assets	1,065,012	261,823	1,326,835
Net assets at the end of the year	1,097,820	261,823	1,359,643

Previous reporting period

	Unrestricted funds	Restricted funds	Total funds
	2025	2025	2025
	£	£	£
Tangible fixed assets	50,801	-	50,801
Fixed asset investments	-	225,892	225,892
Net current assets	429,795	196,827	626,622
Net assets at the end of the year	480,596	422,719	903,315

20. Movements in funds

	At 1 April 2025	Income and gains	Expenditure and losses	Transfers	At 31 March 2026
	£	£	£	£	£
Restricted funds					
Adult or general services:					
Adult Outreach England	-	29,500	(19,658)	-	9,842
Adult Outreach Scotland	-	27,750	(27,750)	-	-
Alison Brind Bursary	-	2,444	(324)	-	2,120
Helpline	-	28,068	(28,068)	-	-
Hep B	-	13,300	(8,300)	-	5,000
Liver Cancer UK	10,431	61,974	(72,405)	-	-
Love your Liver roadshows	51,475	93,629	(60,475)	-	84,629
Love your Liver Stoke	40,000	-	(10,000)	-	30,000
LYL Unit	2,933	-	(2,933)	-	-
MacMillan nurse	-	37,931	(37,931)	-	-
MASD	-	93,100	(93,100)	-	-
National Lottery England	-	94,123	(91,852)	-	2,271
National Lottery Scotland	-	17,448	(14,557)	-	2,891
Patient Information	-	35,500	(32,000)	-	3,500
Policy - inc Foundation	-	65,000	(65,000)	-	-
PSC / Cholangiocarcinoma research	18,392	535	(1,382)	-	17,545
UK Liver Alliance	13,188	26,500	(39,688)	-	-
	136,419	626,802	(605,423)	-	157,798
Specific funds for children's services:					
Awards for All - England	8,407	-	(8,407)	-	-
Awards for All – Scotland children 2024-25	8,416	-	(8,416)	-	-
Awards for All – Scotland children 2025-26	-	19,990	(12,846)	-	7,144
Biliary Atresia Research	5,451	-	(2,743)	-	2,708
Children's general services	263,926	225,197	(398,200)	-	90,923
Christopher RJ Tromans Fund	100	5,750	(2,600)	-	3,250
Family and young people events	-	-	-	-	-
Yellow alert	-	5,000	(5,000)	-	-
	286,300	255,937	(438,212)	-	104,025
Total restricted funds	422,719	882,739	(1,043,635)	-	261,823
Unrestricted funds	480,596	1,828,046	(1,210,822)	-	1,097,820
Total funds	903,315	2,710,785	(2,254,457)	-	1,359,643

20. Movements in funds (continued)

	At 1 April 2024	Income and gains	Expenditure and losses	Transfers	At 31 March 2025
	£	£	£	£	£
Restricted funds					
Adult or general services:					
Adult Outreach England	-	116,887	(116,887)	-	-
Adult Outreach Scotland	13,500	43,955	(57,455)	-	-
Adult Outreach Wales	4,646	-	(4,646)	-	-
Helpline	-	53,000	(53,000)	-	-
Hep B	-	24,224	(24,224)	-	-
Liver Cancer UK	-	66,124	(55,693)	-	10,431
Liver transplant support groups	2,199	-	(2,199)	-	-
Love your Liver roadshows	111,627	120,786	(180,938)	-	51,475
Love your Liver Stoke	50,000	-	(10,000)	-	40,000
LYL Unit	13,787	-	(4,953)	(5,901)	2,933
MacMillan nurse	-	43,172	(43,172)	-	-
Patient Information	-	30,000	(30,000)	-	-
Patient survey	7,464	3,000	(10,464)	-	-
Policy role	-	40,000	(40,000)	-	-
PSC / Cholangiocarcinoma research	21,564	-	(3,172)	-	18,392
UK Liver Alliance	11,333	26,500	(24,645)	-	13,188
Wales Cross-party Working Group	2,282	-	(2,282)	-	-
	238,402	567,648	(663,730)	(5,901)	136,419
Specific funds for children's services:					
Awards for All - England	-	19,825	(11,418)	-	8,407
Awards for All – Scotland children	-	21,588	(13,172)	-	8,416
BBC CiN 21-24	-	19,372	(19,372)	-	-
Biliary Atresia Research - Frances Wilson-Barnes	-	5,451	-	-	5,451
Children's general services	-	831,277	(567,351)	-	263,926
Christopher RJ Tromans Fund	-	2,300	(2,200)	-	100
CLDF provision of information and support services	-	33,390	(33,390)	-	-
Family and young people events	-	1,000	(1,000)	-	-
Yellow alert	-	8,066	(8,066)	-	-
	-	942,269	(655,969)	-	286,300
Total restricted funds	238,402	1,509,917	(1,319,699)	(5,901)	422,719

20. Movements in funds (continued)

Unrestricted funds:

General

Unrestricted income fund	546,609	976,205	(1,175,133)	132,915	480,596
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Designated

Legacy equalisation fund	127,014	-	-	(127,014)	-
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Total Unrestricted funds	673,623	976,205	(1,175,133)	5,901	480,596
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Total funds	912,025	2,486,122	(2,494,832)	-	903,315
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Purpose of restricted funds:

Adult Outreach England

Donations have been received, largely from charitable trusts, for the promotion and development of support groups for liver patients and relatives/carers in England, together with raising awareness of liver health and promoting early detection.

Adult Outreach Scotland

Donations have been received, largely from charitable trusts, for the promotion and development of support groups for liver patients and relatives/carers in Scotland, together with raising awareness of liver health and promoting early detection. The outreach work is supported by the National Lottery Community fund.

National Lottery

Adult outreach work is supported by the National Lottery Community fund. Programmes 'Scotland: Improving Lives' and 'RC England Wide'.

Adult Outreach Wales

Funding has previously been provided by the Welsh government for the promotion and development of support groups for liver patients and relatives/carers in Wales, together with raising awareness of liver health and promoting early detection. Further funding has been received from charitable trusts and will be utilised towards the same aims.

Helpline

Donations have been received in support of the Nurse-led Helpline.

Liver Cancer UK

Donations have been received to support people affected by liver cancer and campaigning work to improve early diagnosis and drive up standards of care.

Liver transplant support groups

This funding was a grant from Payce-Chiesi Copadi Ltd for peer support groups for those going through liver transplant.

Love Your Liver Roadshows

Funds are raised both nationally and regionally, normally from charitable trusts. Regionally raised funds are generally for specific roadshows and allocated towards the roadshows in that area. The roadshows raise awareness of liver disease and its prevention, as well as promoting early detection and community diagnosis. The funds held at 31 March are therefore for specific upcoming roadshows.

Love your Liver Stoke

These funds were donated by Dr Alison Brind to pay for the Love Your Liver Roadshow to visit the Stoke area, where she practised, during the years 2024 to 2028.

Macmillan Nurse

The charity received grant payments to fund a Nurse role focused on Cancer support. This role was employed June 24 to January 25, and monthly grant payments were claimed in arrears in support of the employment costs of this role.

Patient Information

This represents funding for the production and dissemination of information on liver health and liver conditions.

Patient Survey

This funding was provided to undertake a survey of patients living with liver disease and was in progress before and after the year end.

Policy role

This represents funding for the production and dissemination of information on liver health and liver conditions.

PSC / Cholangiocarcinoma research

This represents donations for research into a Quality of Life tool for people living with PSC in partnership with University College London. The use of the remaining funds is in discussion.

UK Liver Alliance

We received funding from British Association for the Study of the Liver and British Society for Gastroenterology to chair and act as the secretariat for the UK Liver Alliance, bringing together all the voices of the liver community.

Wales Cross-party Working Group

This funding was provided to facilitate the functioning of a cross-party working group in Wales. The funding was received before the year end to 31 March 2021, but the formation of the group was delayed by COVID-19, so the group was formed in the year to 31 March 2022 with regular ongoing meetings.

Children's General Services

These funds include the general reserves of the Children's Liver Disease Foundation (CLDF) which joined with Liver UK as at 1 April 2024. Donations received in year collected through CLDF branded campaigns, donation platforms or web pages are treated as restricted for the purpose of supporting Children's General Services. These funds are to be used specifically for Children in accordance with CLDF's charitable objectives prior to its closure.

CLDF specific restricted funds

Awards for All - England & Scotland - funding was received from the National Lottery to fund support services for Children living with liver disease and their families.

Children in Need

Funded a Children & Family Officer post. This role worked directly with patients and families providing emotional and practical support.

CLDF Provision of Information and Support Services

Patient Advocacy and facilitating patient engagement – During 2021 an application was made to companies for funding to support the costs of the provision of the information and support services. These funds were spent in full by year end.

21. Reconciliation of net income / (expenditure) to net cash flow from operating activities

	2026	2025
	£	£
Net income for the reporting period	456,328	(8,710)
(as per the statement of financial activities)		
Depreciation	24,440	23,951
Gain on investments	(6,704)	(2,779)
Interest received	(29,859)	(35,907)
(Increase) / decrease in stocks	-	6,086
(Increase) / decrease in debtors	(157,526)	104,937
Increase / (decrease) in creditors	(5,837)	80,364
Net cash provided by / (used in) operating activities	280,842	167,942

22. Analysis of cash and cash equivalents

	At 1 April 2025	Cash flows	Other changes	At 31 March 2026
	£	£	£	£
Cash at bank and in hand	361,481	338,096	-	699,577
Deposits (less than three months)	342,049	198,754	-	540,803
Total cash and cash equivalents	703,530	536,850	-	1,240,380

23. Operating lease commitments

Total future minimum lease payments under non-cancellable operating leases are as follows:

	Property 2026	Equipment 2026	Property 2025	Equipment 2025
	£	£	£	£
Less than 1 year	35,200	961	35,200	961
1 - 5 years	140,800	480	-	1,441
Over 5 years	26,617	-	-	-
	202,617	1,441	35,200	2,402

24. Charity status

The charity is limited by guarantee, incorporated in England & Wales, and consequently does not have share capital. Each of the trustees is liable to contribute an amount not exceeding £1 towards the assets of the charity in the event of liquidation.

25. Related party transactions

There are no related party transactions to disclose for the year (2025: none).



Liver UK is the new name for the British Liver Trust and Children's Liver Disease Foundation.
Liver UK is a company limited by guarantee. Company registration number: 02227706.
Charity registration number: 298858 (England and Wales), SC042140 (Scotland)