



National
Cancer
Registry
Ireland

ANNUAL REPORT

THE NATIONAL CANCER REGISTRY

2024

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FOREWORD FROM THE CHAIRPERSON



Dr Robert O'Connor
Chairperson

It is with great honour that I present the National Cancer Registry of Ireland's Annual Report for 2024, my first as Chairperson. At the outset, I wish to express profound gratitude to my predecessor, Dr Jerome Coffey, whose leadership and vision have set a strong foundation for our ongoing work.

The year 2024 marked the first year of implementing our new strategic plan—a key milestone in the ongoing evolution of the Registry as we further our mission of providing excellent data insights for better cancer outcomes across Ireland.

Our data continue to tell an important story about cancer in our nation. While rates of cancers in specific age groups remain largely unchanged—with some encouragingly in decline—we observe that the overall numbers continue to grow as our population ages. Cancer occurs more commonly in older individuals, and as more people live longer lives, the Registry faces the challenge of monitoring and analysing this expanding dataset.

We are witnessing positive trends in cancer management, with more people being cured or living longer with their illness. These developments drive our vision and mission as we work to enhance the insights that cancer data can provide, despite the increasing demands brought by larger volumes of information, greater needs for detailed analysis, and requirements to deliver findings more rapidly and efficiently.

Throughout this evolution, we maintain our unwavering commitment to protecting the integrity and security of the sensitive data entrusted to our organisation, continuing to employ the most modern methods to ensure the safety of the information we manage.

I am deeply grateful to my fellow board members who diligently undertake their governance and oversight roles on behalf of the Department of Health and the community we seek to serve. Their expertise and dedication ensure that the Registry continues to operate with the highest standards of accountability and effectiveness. Our activities are also greatly augmented by the work of the Advisory Council, which provides valuable insights from leaders in key technical fields, further enhancing our mission and impact.

I would particularly like to acknowledge the outstanding contributions of our Director, Professor Murray, and the entire NCRI team who have embraced our strategic evolution with vigour and passion. Their commitment to excellence in data collection, analysis, and reporting forms the backbone of our organisation's success.

As we move forward, the National Cancer Registry of Ireland remains steadfast in its commitment to providing the evidence base needed to inform policy, improve services, and ultimately enhance outcomes for all those affected by cancer in Ireland.

Robert O'Connor

MESSAGE FROM THE DIRECTOR



Prof Deirdre Murray
Director

I am pleased to present our Annual Report, reflecting on the National Cancer Registry's accomplishments in 2024 and highlighting the significant initiatives and advancements that have defined our journey. We faced new challenges, adopted innovative strategies, and collaborated with international partners to improve our cancer data collection and analysis. The ongoing support from the Department of Health has strengthened our staff team, enhancing our capabilities. The commitment and resilience of our team have been crucial in fostering positive change and establishing the NCRI as the independent, expert and trusted source of cancer data and trends in Ireland.

As we look ahead, our commitment to enhancing our operations and impact aligns perfectly with our strategic plan. We are excited to embark on several key initiatives that will support a culture of continuous learning and development.

Our research department is poised for integration and growth, with ongoing NCRI research and analysis forming the backbone of our initiatives. We will actively collaborate with key research agencies, partners, and networks to foster innovation and leverage shared knowledge.

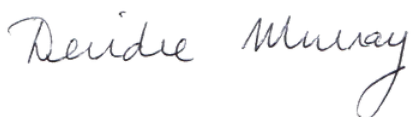
A critical development will be the establishment of a 'Secure Research Area' that allows external researchers to access and work on NCRI datasets while ensuring stringent controls over data security and governance.

We will capitalise on national and international projects to enhance automation and scalability, ensuring the integrity of our data collection and processing. Our commitment to data protection will see ongoing assessments and refinements of our security policies and processes.

Increasing the visibility and brand recognition of the NCRI remains a priority. We will engage with key audiences and stakeholders through targeted outreach initiatives, thereby enhancing our community presence and stakeholder engagement. Our website will undergo a significant upgrade to create a more user-friendly experience that supports our diverse stakeholders. To drive efficiency, we will streamline administrative tasks through innovative technology solutions and process redesigns, ensuring that our resources are optimised for maximum impact.

As we expand our capabilities, we will assess and potentially expand our use of cloud-based services. This strategic decision will be coupled with efforts to enhance our capacity by developing expertise, expanding our personnel, and investing in tools and technology aimed at fostering greater efficiency and innovation.

Together, these initiatives will pave the way for a brighter future at NCRI, positioning us as a leader in research while delivering on our core mission and statutory responsibilities.

A handwritten signature in cursive script, reading "Deirdre Murray". The ink is dark and the signature is fluid, with a large, stylized 'M' at the end.

ABOUT THE NCRI

Establishment

The National Cancer Registry Board (the “Board”) was established by Statutory Instrument 19 of 1991, “The National Cancer Registry Board (Establishment) Order, 1991” (the “Order”) under the Health (Corporate Bodies) Act, 1961. The Board discharges all of its statutory responsibilities through the National Cancer Registry (“NCRI”). The Order was amended three times:

- in 1996 by S.I. No. 293/1996 (the National Cancer Registry Board (Establishment) Order, 1991 (Amendment) Order 1996);
- in 2009 by the Health (Miscellaneous Provisions) Act 2009;
- in 2011 by S.I. No. 418/2011 (the Finance (Transfer of Departmental Administration and Ministerial Functions) Order 2011).

Statutory Functions

The statutory functions of the Board, as set out in the Order, are to:



Collect

Identify, collect, classify, record, store and analyse information relating to the incidence and prevalence of cancer and related tumours in Ireland.



Analyse

Collect, classify, record and store information in relation to each newly diagnosed individual cancer patient and in relation to each tumour which occurs.



Promote

Promote and facilitate the use of the data thus collected in approved research projects and in the planning and management of services.



Publish

Publish an annual report based on the activities of the Registry.



Advise

Furnish advice, information and assistance in relation to any aspect of such service to the Minister for Health.

The National Cancer Registry Board

The Board is a statutory body established in 1991 under the Order as an agency of the Department of Health and Children (as it was at the time). The Board has a full membership of seven who are appointed by the Minister for Health. The Board members as at 31 December 2024 were:



Dr Robert O'Connor
Board Chair



Prof Mark Lawler
Board Member



Ms Mary Bourke
Board Member



Ms Ellen Farrell
Board Member



Mr Niall Murphy
Board Member



Ms Cathy Enright
Board Member

Dr Jerome Coffey resigned as Board Chair in June 2024 and Dr Robert O' Connor was appointed new Board Chair in November 2024.

What does the NCRI do?

The NCRI works on behalf of the Department of Health and collects information from all hospitals in Ireland on the number of persons diagnosed with cancer and the types of cancer they have. NCRI also follows up the numbers dying from their cancer or from other causes. All patient personal and private information is removed before summary cancer statistics are prepared and made available to the public and health professionals through our annual cancer report and other reports on our website.

How are the numbers reported?

Collecting and checking all this information is performed by a combination of manual and electronic processes. Our staff collect cancer diagnosis information and then use an agreed system of coding (The International Classification of Diseases) to group the cancers into different types. After a process of collating diverse information from Irish hospitals and validation for accuracy, the annual cancer report is published following analysis of de-identified data.

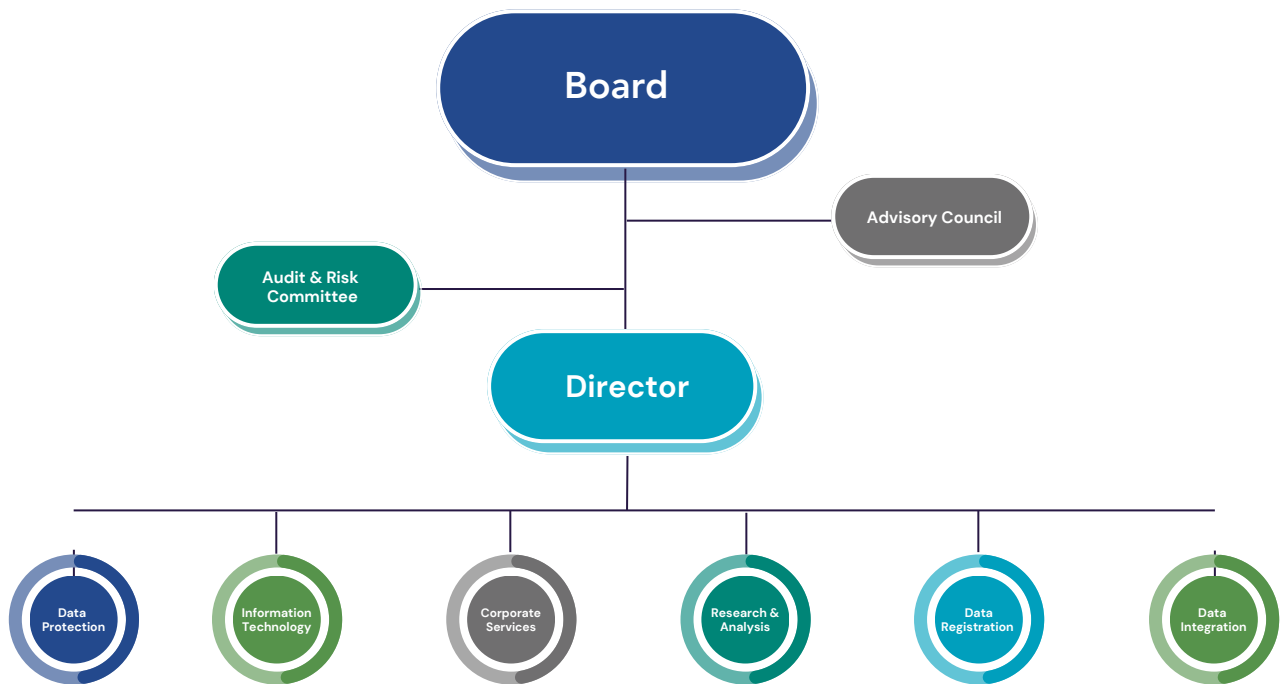
How many people were diagnosed with cancer?

- On average, 41,654 cancers or related tumours were diagnosed each year during 2020-2022.
- The figure most often quoted in international comparisons ('all invasive cancer, excluding NMSC') averaged 24,207 cases (12,925 males and 11,282 females) diagnosed annually during 2020-2022, or 58% of all registered tumours. These are life-changing invasive cancers which often require extensive treatment.
- 24% of all registered cancers (almost 1 in 4) were non-melanoma skin cancers.
- Approximately 18% (almost 1 in 5) of these were non-invasive neoplasms (in situ carcinomas, tumours of uncertain behaviour and benign brain and CNS tumours).

How many people die of cancer?

On average during 2020-2022 there were 9,797 deaths per year from invasive cancer (5,246 in males and 4,551 in females) during the period 2020-2022, or 10,041 deaths per year across all tumour types.

Organisational Chart



Our people

The NCRI's dedicated, award-winning team is the cornerstone of its mission to improve cancer outcomes through comprehensive data collection and analysis. Comprising skilled professionals from diverse backgrounds, NCRI's staff exemplifies a commitment to quality, collaboration, and trust. Their expertise and passion drive NCRI's initiatives, enabling the organisation to provide valuable insights that support cancer research and public health initiatives. The NCRI takes pride in nurturing a supportive work environment that empowers people to grow and excel in their roles. The eight member Senior Management Team leads a team of approximately 50 full-time and part-time staff members who are located throughout Ireland.



NCRI Senior Management Team 2024

Advisory Council

The Advisory Council serves as a vital consultative body for NCRI, providing expert guidance and strategic direction to enhance its initiatives and operations. It is composed of a wide range of stakeholders, including healthcare professionals, researchers, and patient representatives. By leveraging the collective expertise of its members, the council helps to strengthen the impact of NCRI in producing excellent data insight for better cancer outcomes. This collaborative approach strengthens the impact of NCRI's initiatives and ensures that the data insights generated are relevant and actionable. The Advisory Council's commitment to fostering innovation and collaboration is essential in navigating the complexities of cancer control treatment, making it an important asset to the organisation.

Audit & Risk Committee

The Audit and Risk Committee is a formal subcommittee of the Board, tasked with a critical responsibility in safeguarding the integrity, transparency, and accountability of the organisation's operations. This committee plays a crucial role in overseeing the financial reporting process, ensuring that all financial statements are accurate, reliable, and in compliance with established accounting standards. Additionally, the committee assesses the effectiveness of internal controls, identifying any weaknesses that could expose the organisation to financial or operational risks. It also ensures compliance with relevant laws and regulations, thereby protecting NCRI from potential legal and regulatory challenges. Furthermore, the committee evaluates the various risks associated with NCRI's activities, including financial, operational, and reputational risks, and develops strategies to mitigate these risks effectively. By fulfilling these responsibilities, the Audit and Risk Committee not only enhances the organisation's overall governance framework but also instils confidence among stakeholders regarding the soundness of NCRI's operations and its commitment to ethical practices.

VISION, MISSION & VALUES

NCRI's vision, mission and core values are crucial to the way it functions. They communicate NCRI's purpose, provide insight into what it hopes to achieve and reflect its core principles and ethics.

Vision and Mission



Our vision

Excellent data insight for better cancer outcomes.



Our mission

To collect, analyse and disseminate comprehensive information to improve cancer outcomes.

Core Values



Respect

We treat everyone with dignity, empathy and courtesy.



Trust

We act with integrity and honour our commitments.



Enthusiasm

We are passionate about and take great pride in our work.



Collaboration

We foster open communication, actively listen to others and work cooperatively with colleagues and stakeholders.



Confidentiality

We safeguard sensitive and personal information in line with best practice.



Quality

We are committed to continuous improvement to deliver accurate, informative and timely cancer data.

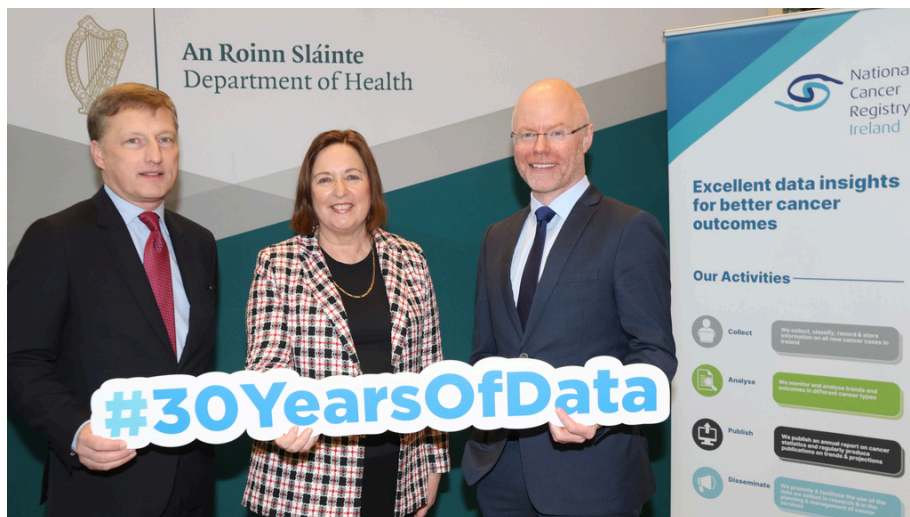
STRATEGY

Overview

NCRI's corporate strategy sets out a clear direction for the future and outlines measures to advance its mission and vision. The strategy encourages innovation and enhances operational efficiency. Through its strategy, NCRI reaffirms its role as Ireland's trusted source for cancer data, providing critical insights that drive advancements in cancer care and enhance patient outcomes.

New Strategy

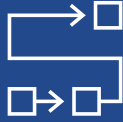
In 2024 the NCRI launched its 2024-2026 strategy. At the heart of this strategy is the vision of excellent data insights for better cancer outcomes.



Strategic Objectives

The 2024-2026 strategy establishes five strategic objectives which are detailed below.

1



Capture a comprehensive picture of the patient data journey.

2



Be the independent, expert and trusted source of cancer data trends.

3



Enhance research capabilities and develop vibrant and collaborative research networks in Ireland and internationally.

4



Be at the forefront of informing health information regulation and in the deployment of digital health initiatives.

5



Enhance organisational capabilities through investment and strengthened governance.

2024 IN NUMBERS

Snapshot

55,500

Tumours registered

24,200

Invasive tumours registered

35

Sources from which we receive data electronically

95%

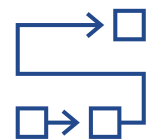
% of tumours registered electronically

107

Locations from which we collect data

88,884

Death certs received from CSO and fully matched



11

Peer review publications

200+

Data requests processed

3

Reports published

76

Media articles that quoted NCRI data

24

Infographics published

31

Press releases and news articles published

12

Events, workshops, and presentations

219

Social media posts



7

Parliamentary questions answered

10

Staff newsletters sent



2

Major awards received

9

New hires

54

Employees

4

Staff retired

31%

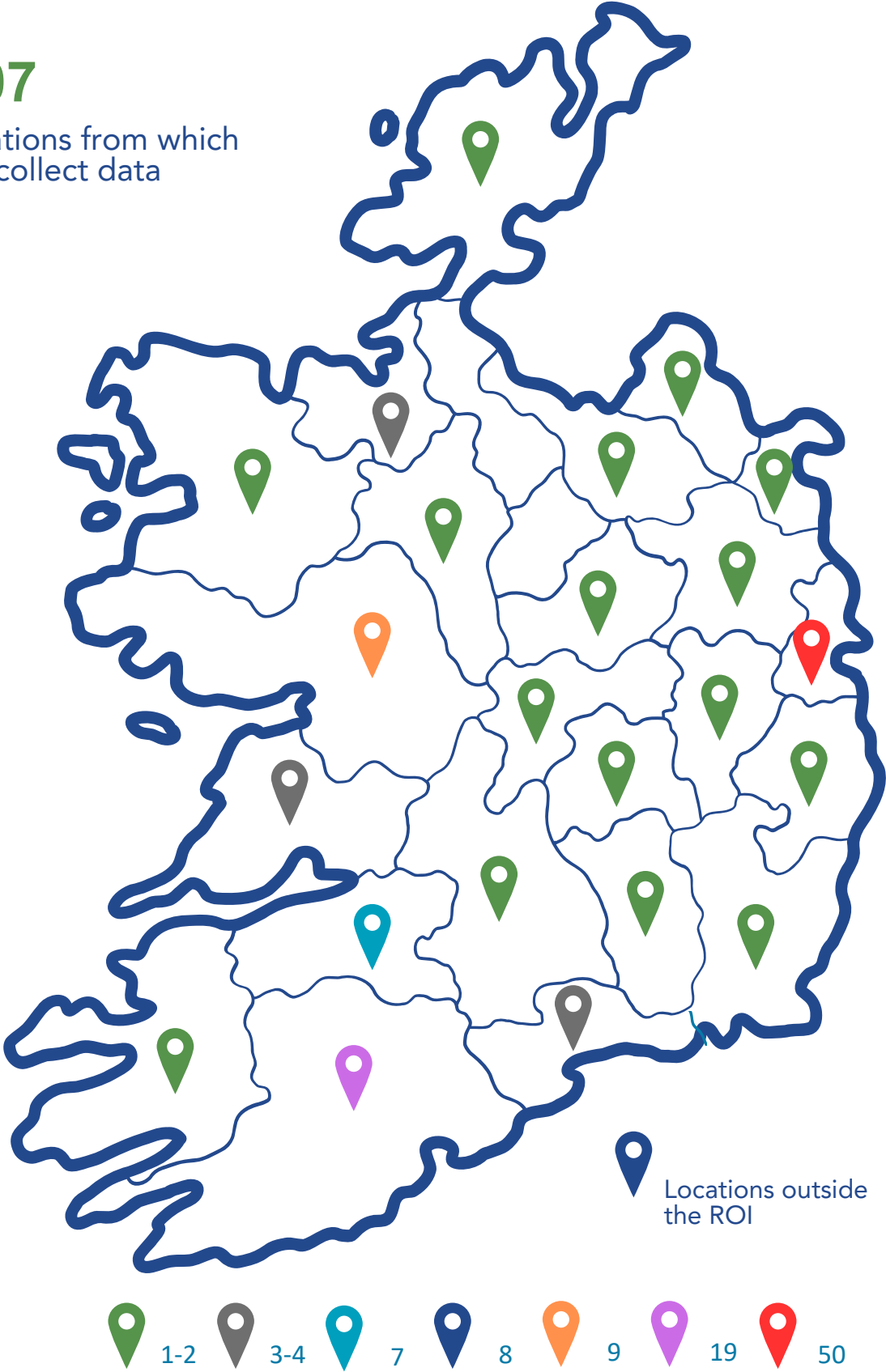
Internal comms % improvement (as per GPTW survey)



Locations from which the NCRI collects data

107

locations from which we collect data



ACHIEVEMENTS

Celebrating 30 Years of Data Collection

In 2024 the NCRI celebrated 30 years of data collection. During the past 30 years Ireland has made significant advances in the control of cancer, transforming diagnosis, treatment, and survivorship for patients nationwide. Cancer data collection, analysis and research has been, and will continue to be, fundamental to these advances.

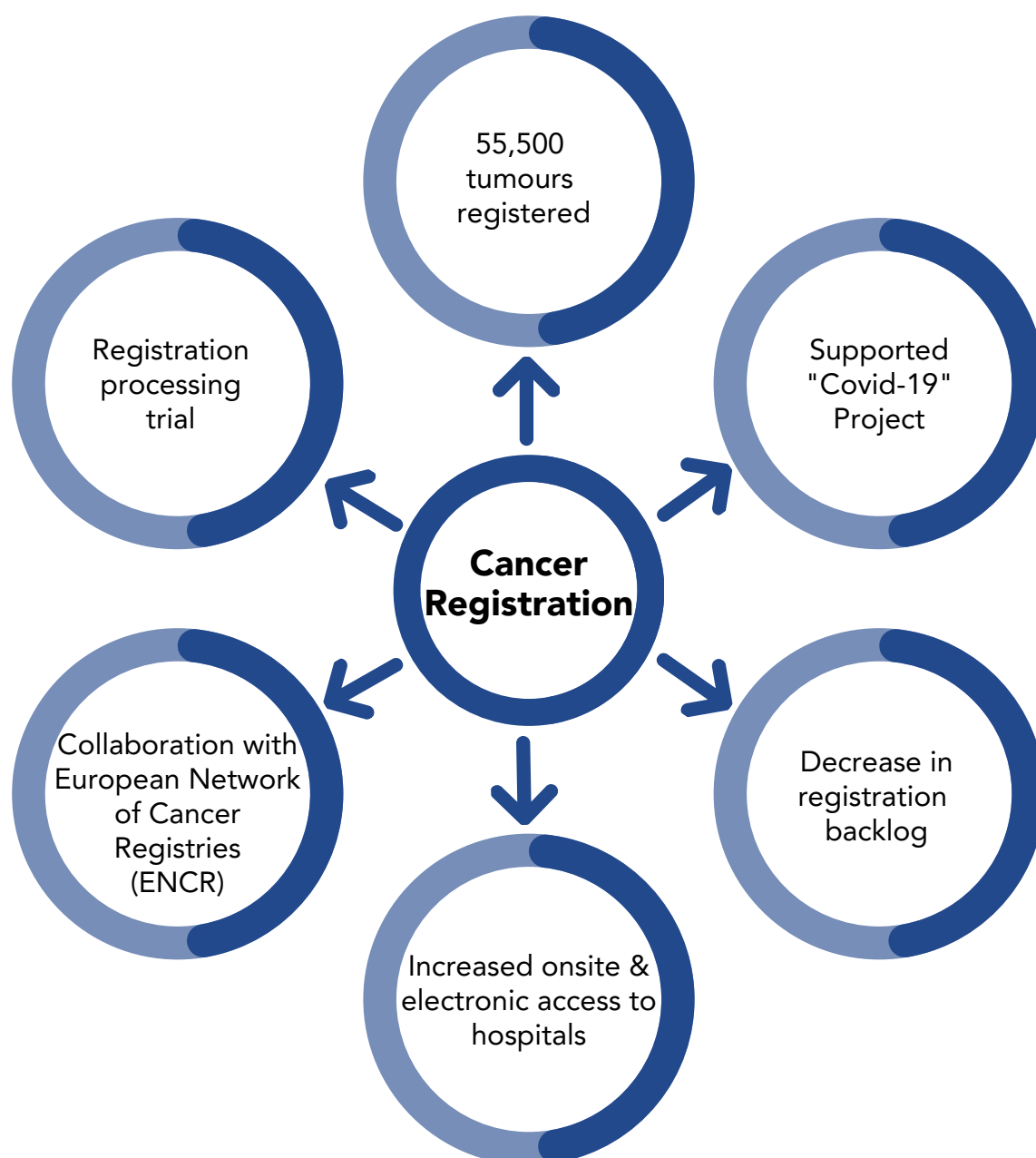


Awards

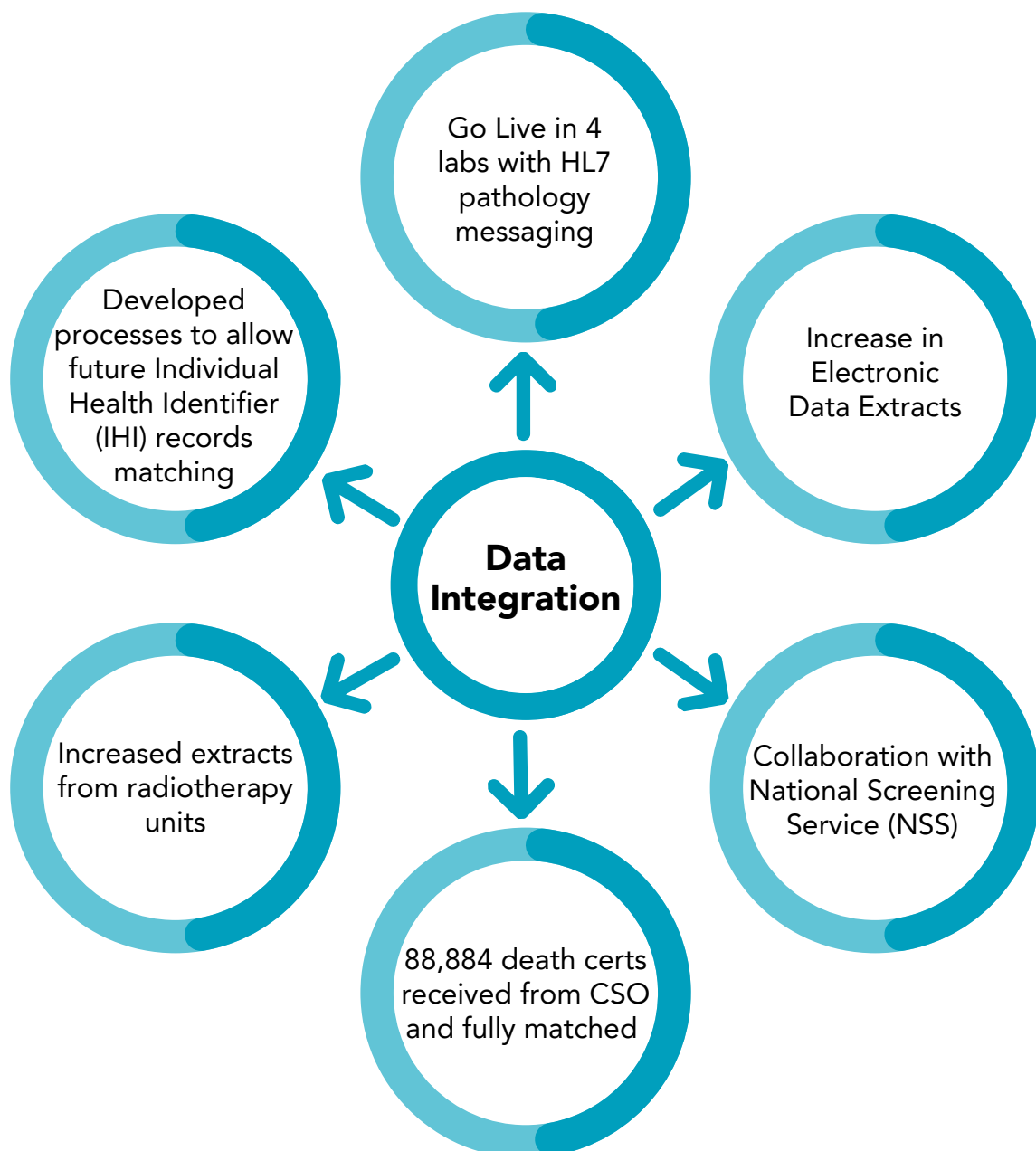
In 2024, NCRI proudly achieved recognition as a Great Place to Work™, reflecting its commitment to fostering a positive workplace culture. Additionally, NCRI received the prestigious IBEC Keep Well Mark, underscoring its focus on promoting health and well-being within the organisation. These accolades affirm NCRI's ongoing efforts to create an exceptional environment for its team and stakeholders.



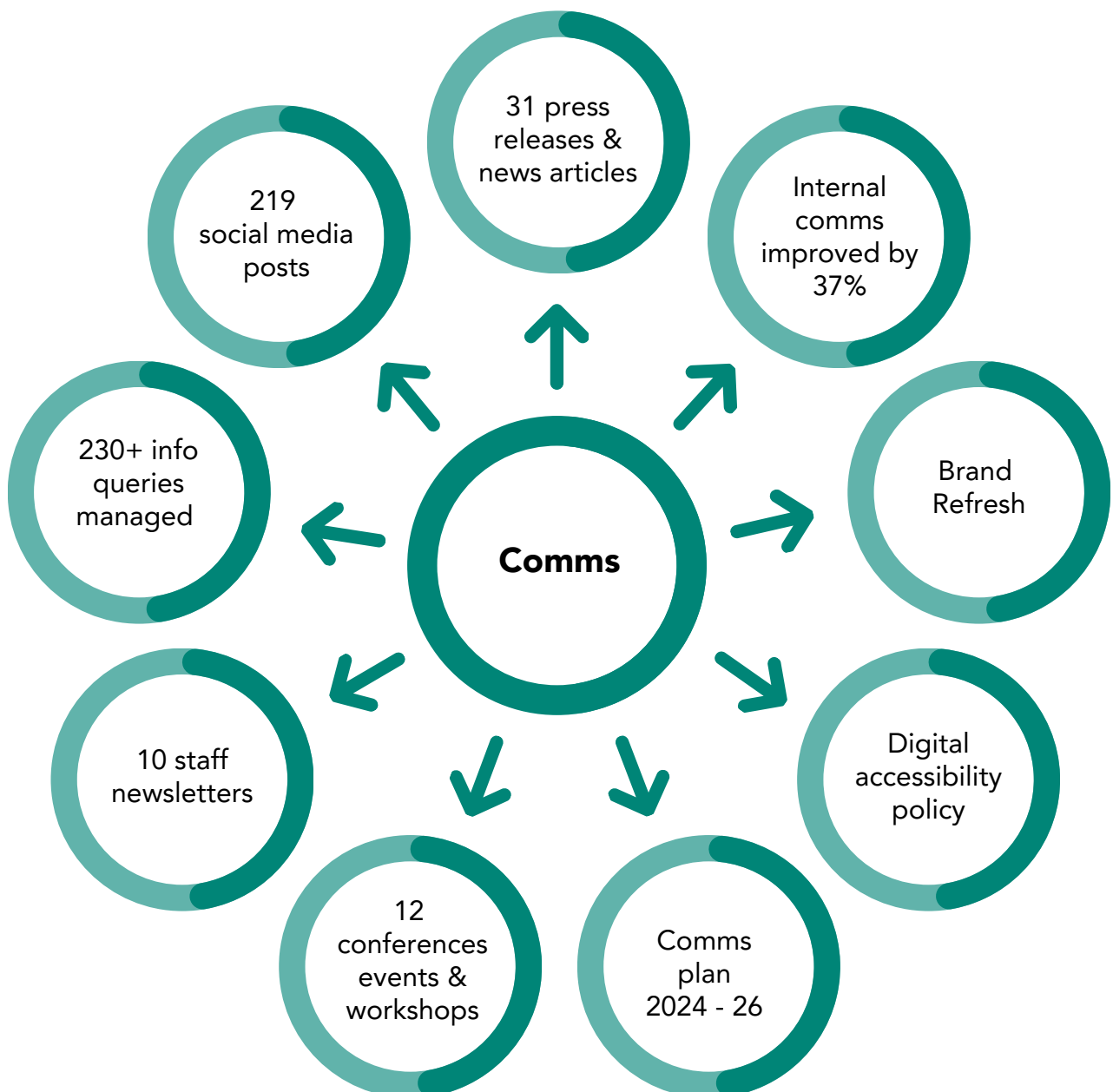
CANCER REGISTRATION



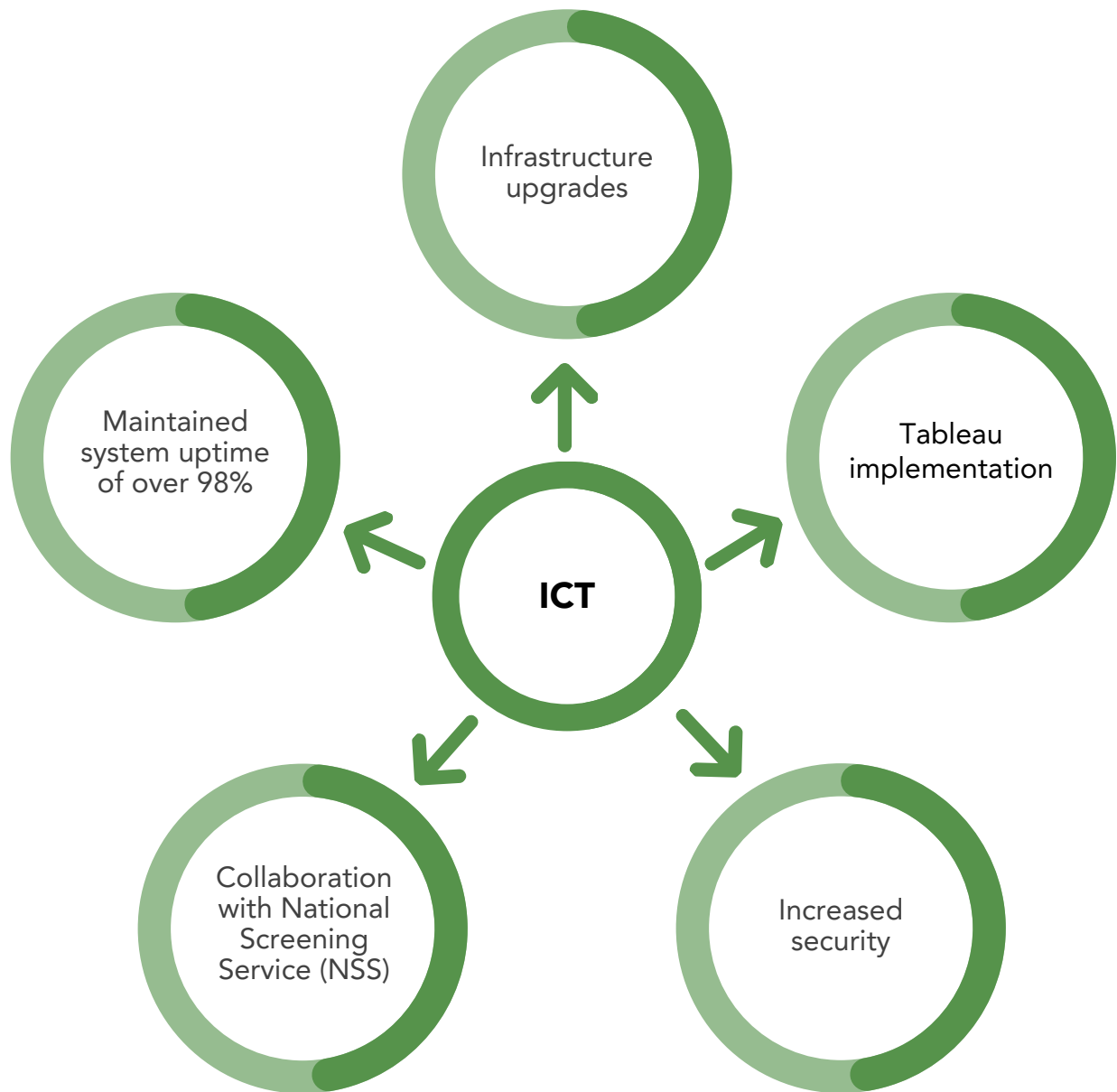
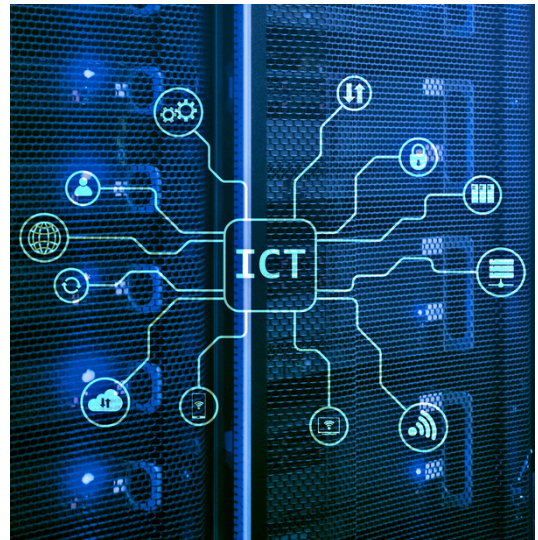
DATA INTEGRATION



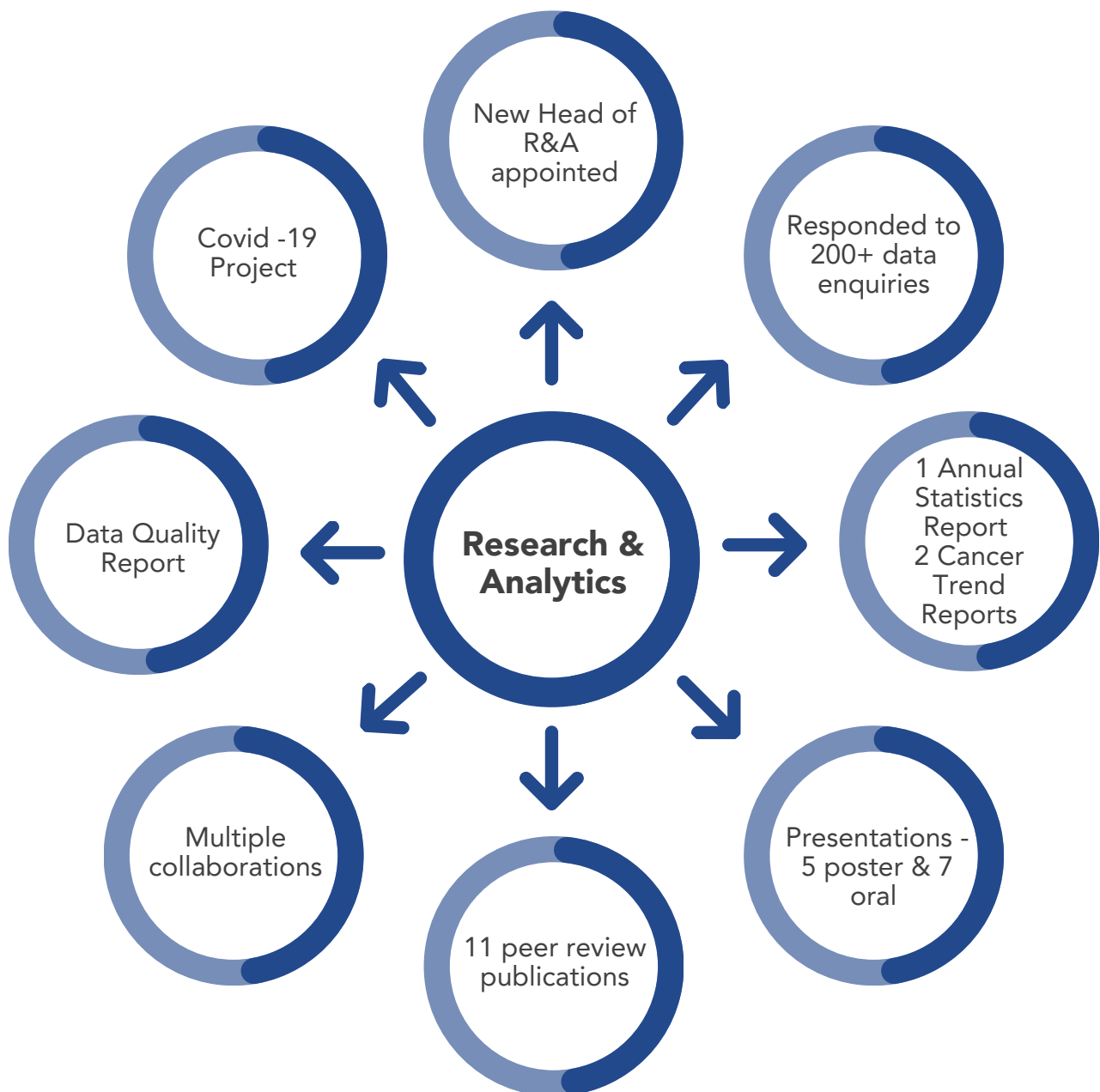
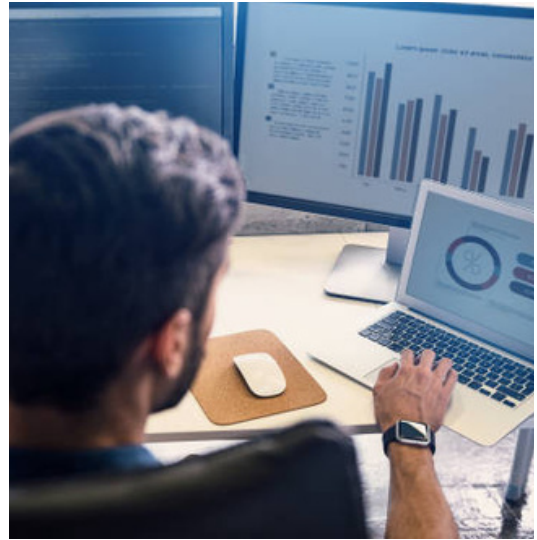
COMMUNICATIONS



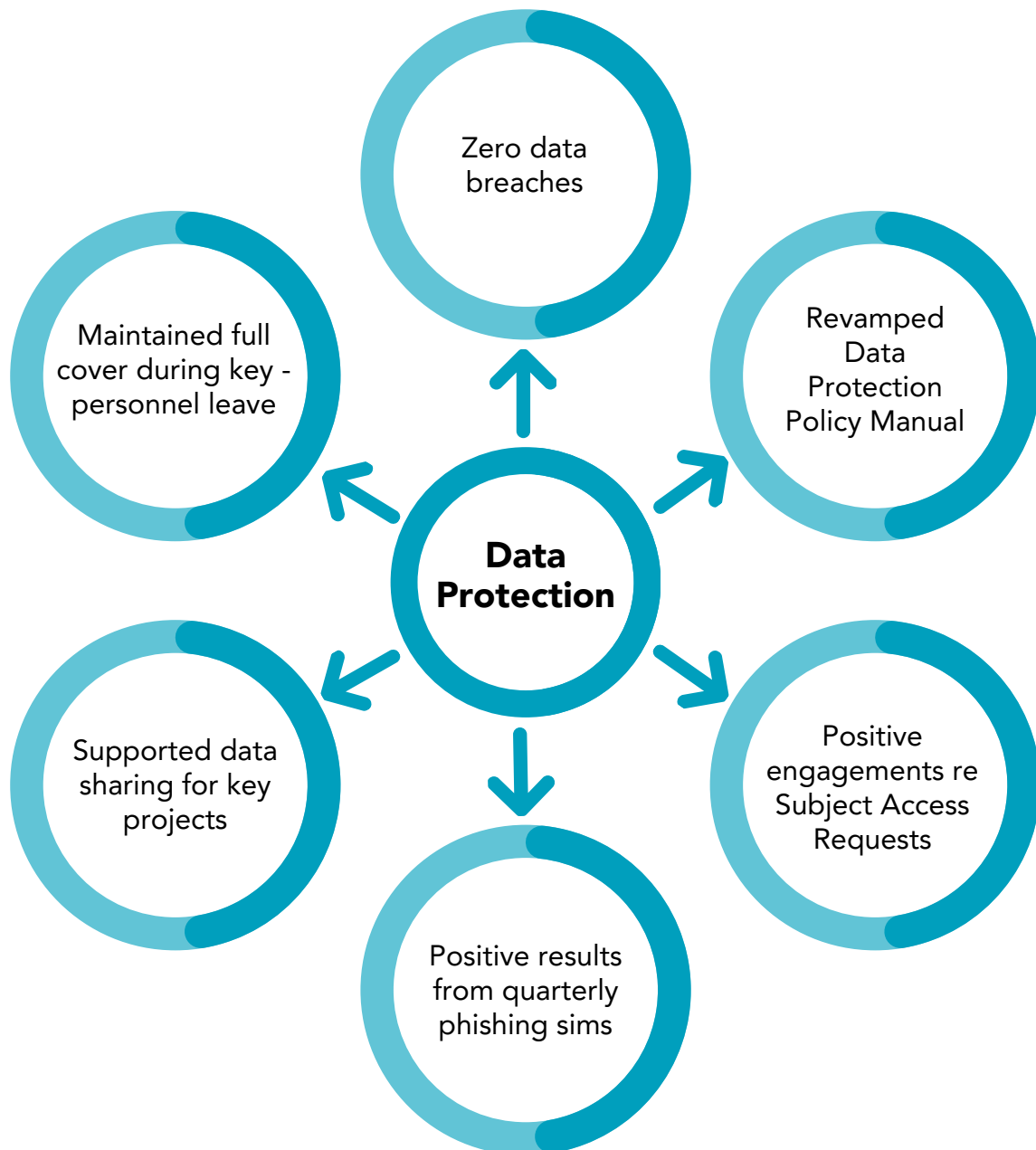
INFORMATION & COMMUNICATION TECHNOLOGY



RESEARCH & ANALYTICS



DATA PROTECTION



COLLABORATIONS AND OUTPUTS

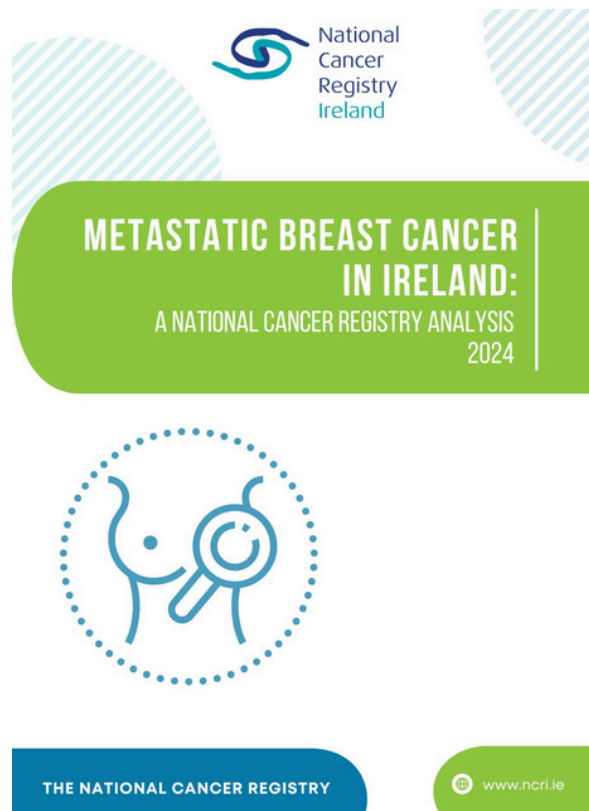
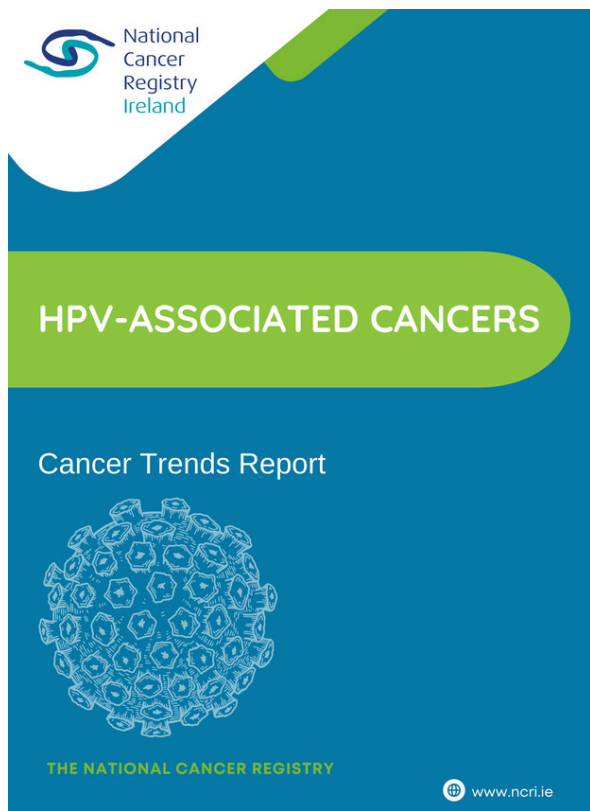
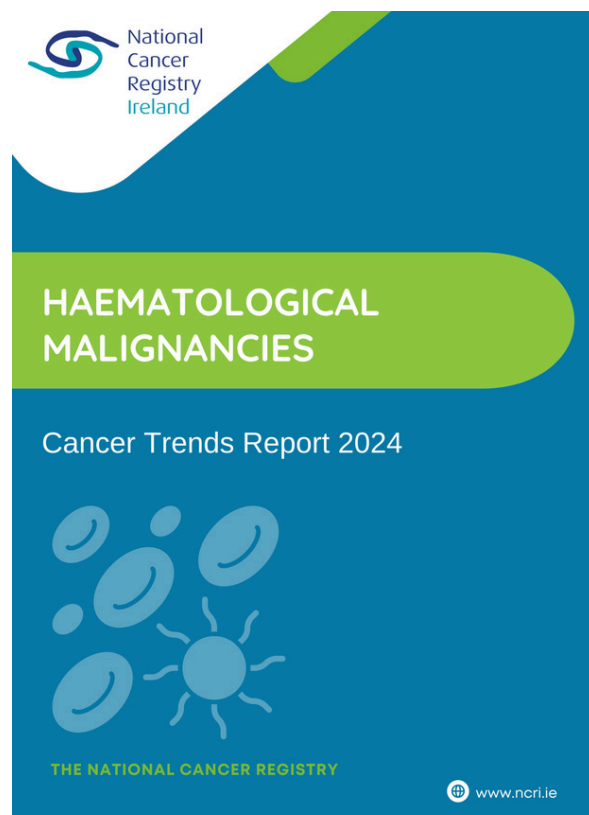
Collaborations

Collaboration is a core value of the National Cancer Registry, fostering partnerships that enhance data sharing, research initiatives, and collective efforts to advance cancer prevention and control. During 2024 NCRI contributed to several national and international projects to help improve cancer registration, advance research, and improve national and international cancer outcomes.



Reports Published in 2024

As part of its mission to disseminate comprehensive information to improve cancer outcomes NCRI produces many types of reports and publications throughout the year.



Peer Reviewed Articles in 2024

A collection of peer-reviewed scientific papers published in various journals by NCRI staff during 2024:

1. Botta L, Capocaccia R, Bernasconi A, et al. Estimating cure and risk of death from other causes of cancer patients: EURO CARE-6 data on head & neck, colorectal, and breast cancers. *Eur J Cancer*. 2024;208:114187. doi:10.1016/j.ejca.2024.114187
2. Zhang M, Kelly C, McCarthy T, et al. Examining the COVID-19 impact on cancer surgery in Ireland using three national data sources. *Glob Epidemiol*. 2024;8:100159. doi:10.1016/j.gloepi.2024.100159
3. Morgan E, O'Neill C, Bardot A, et al. Collecting Long-Term Outcomes in Population-Based Cancer Registry Data: The Case of Breast Cancer Recurrence. *JCO Glob Oncol*. 2024;10:e2400249. doi:10.1200/GO-24-00249
4. Bambury N, Zhang M, McCarthy T, et al. Impact of the COVID-19 pandemic on electronic referrals to rapid access clinics for suspected breast, lung and prostate cancers in Ireland. *Eur J Public Health*. 2024;34(5):908-913. doi:10.1093/eurpub/ckae092
5. Millar SR, Mohamed MB, Mykytiv V, et al. Blood Cancer Network Ireland (BCNI) and National Cancer Registry Ireland (NCRI) collaboration: challenges and utility of an Enhanced Blood Cancer Outcomes Registry (EBCOR) pilot. *Ir J Med Sci*. Published online July 20, 2024. doi:10.1007/s11845-024-03756-9
6. Sexton GP, Hintze JM, Walsh P, et al. Epidemiology and management of oral cavity squamous cell carcinoma in Ireland. *Am J Otolaryngol*. 2024;45(3):104235. doi:10.1016/j.amjoto.2024.104235
7. Keogh RJ, Harvey H, Brady C, et al. Dealing with digital paralysis: Surviving a cyberattack in a National Cancer center. *J Cancer Policy*. 2024;39:100466. doi:10.1016/j.jcipo.2023.100466
8. McFeely O, Walsh PM, Desmond R, et al. Incidence of cutaneous T-cell lymphoma in the Republic of Ireland between 1994 and 2019. *J Eur Acad Dermatol Venereol*. 2024;38(2):e145-e147. doi:10.1111/jdv.19497

Infographics developed in 2024

Infographics are a way of presenting information about cancer in a simple and interesting way. NCRI produces infographics on a regular basis to coincide with report launches, important cancer awareness dates and cancer related events.

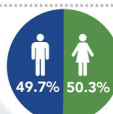


CANCER IN IRELAND 2024



44,073 Registered tumours per year

24,207 Invasive cancers per year
*excl NMSC



Male/ Female split for all registered cancer cases

29%

of deaths in Ireland are attributed to cancer

1 in 5

Cancer deaths are caused by lung cancer



Most Common Invasive Cancers

*excl NMSC



Prostate



Breast

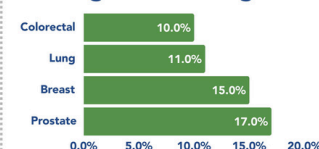


Lung



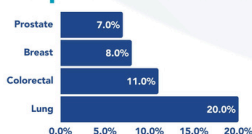
Colorectal

Ranking & Percentages



9,797 Deaths per year

Top causes of cancer death



1 in 23

of the population is a cancer survivor

>50%

increase in cancer survivors vs a decade ago

1 in 2

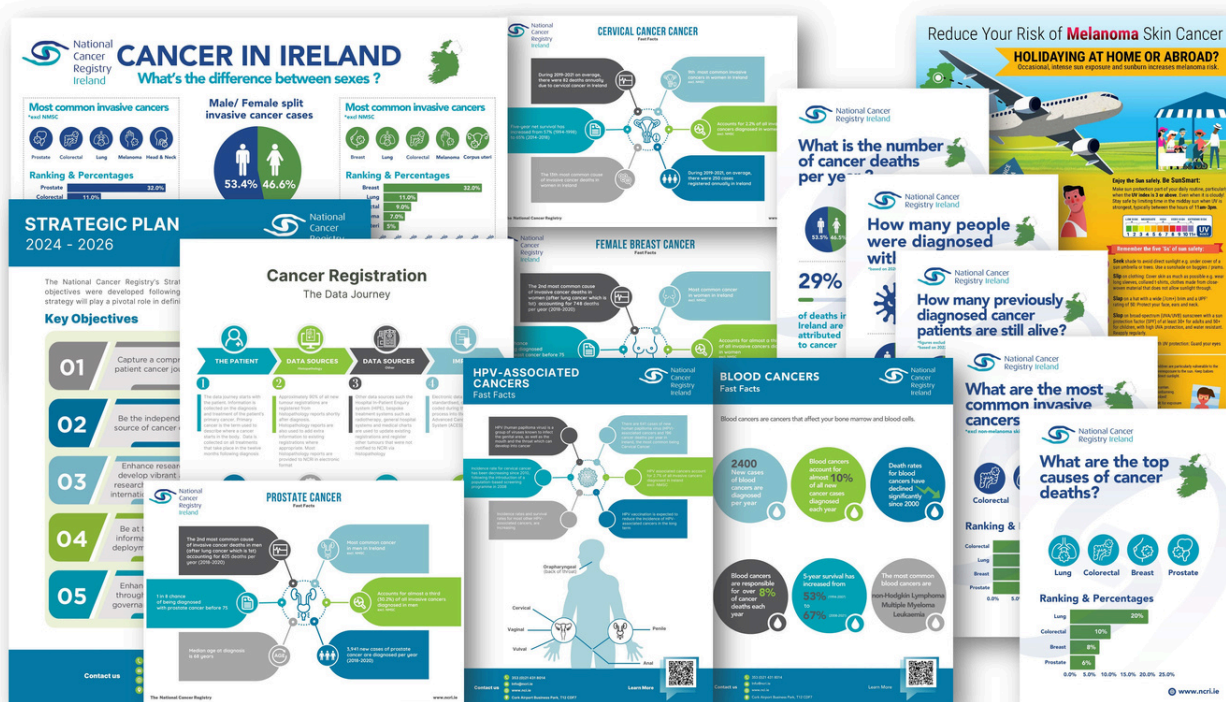
Lifetime risk of developing cancer

*excl NMSC



2020 - 2022 cases (tumours), deaths, survival and lifetime risk

www.ncri.ie



CORPORATE STATEMENT

1. Performance Delivery & Oversight

In accordance with the Code of Practice for the Governance of State Bodies 2016 (the “**Code of Practice**”), the NCRI has written oversight and performance delivery agreements with the Department of Health, which clearly define the respective roles and responsibilities of the Department and the NCRI and the terms of this relationship. The Agreements also set out the arrangements for the effective governance, funding and general administration of the NCRI in accordance with the Code of Practice. No derogations or exceptions from the Code of Practice have been agreed with the Department of Health.

In line with the requirements of the Code of Practice, an appropriate assessment of the principal risks of the NCRI was carried out including a description of these risks and associated mitigation strategies and controls.

2. Expenditure

The NCRI fully complied with the Public Spending Code throughout 2024.

3. Diversity & Inclusion

Equality, Diversity and Inclusion (ED&I) continued to be an organisational priority in 2024, reflected in all our culture, actions and behaviours, including several initiatives:

- Diversity and Inclusion in the workplace training.
- Reporting on Disability Awareness - we reported to the National Disability Authority in 2024 that 4% of our workforce had declared a disability in the preceding 12 months.
- Reporting on Gender Pay Gap.
- IBEC KeepWell Mark for our commitment to employee wellbeing.
- Great Place to Work® certified in 2024.

As at 31 December 2024, the Board had six members: three male board members (50%) and three female board members (50%), with one position vacant. The Board therefore did meet the Government target of a minimum of 40% representation of each gender in the membership of State Boards in 2024.

4. Public Sector Equality & Human Rights

Section 42 of the Irish Human Rights and Equality Commission Act 2014 requires a public body, in the performance of its functions, to have regard to the need to eliminate discrimination, promote equality of opportunity and treatment of its staff and the persons to whom it provides services, and protect the human rights of its members, staff and the persons to whom it provides services.

The NCRI's strategic objective of enhancing its organisational capabilities through investment and strengthened governance ensures its compliance with its public sector duty under the Act.

5. Energy Consumption

In November 2021, the Government launched the Climate Action Plan. The Plan commits Ireland to a legally binding target of net-zero greenhouse gas (GHG) emissions no later than 2050, and to an absolute reduction of 51% in GHG emissions by 2030, (against a 2016-2018 baseline).

The oversight and monitoring of our Climate Action Strategy is a priority for the Board and Senior Management Team of the NCRI. To ensure the inclusion, integration, and realisation of the climate action goals of the NCRI, key roles have been established throughout the organisation.

NCRI Consumption & Compliance

The main energy users at the National Cancer Registry are air conditioning and heating. Other uses include lighting, office equipment and catering. All of these are powered by electricity and there is no consumption of gas or fossil fuels for any purpose. It is not possible to apportion electricity consumption between these various uses, as they come off the same supply. In 2024, the National Cancer Registry consumed 56 MWh of energy (2023 – 63 MWh), all electrical.

6. Official Languages Act 2003 (as amended)

The NCRI continues its work in fulfilling its obligations under the Official Languages Act 2003 (as amended).



National
Cancer
Registry
Ireland

National Cancer Registry Board

Financial Statements

For the Year Ended 31st December 2024

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Information

Business Address

Building 6800, Cork Airport Business Park,
Kinsale Road, Cork, T12 CDF7

Bankers

Allied Irish Banks plc, 66 South Mall, Cork, T12 Y822

Auditor

Comptroller and Auditor General, 3A Mayor Street Upper, Dublin, D01 PF72

Solicitors

RDJ LLP, 85 S Mall, Centre, Cork, T12 TP8D

Governance Statement and Board Members' Report

1. Governance

The Board of the National Cancer Registry was established under the National Cancer Registry Board Establishment (Order) 1991. The functions of the Board are set out in section 4 of this Act. The Board is accountable to the Minister for Health and is responsible for ensuring good governance and performs this task by setting strategic objectives and targets and taking strategic decisions on all key business issues. The regular day-to-day management, control and direction of the National Cancer Registry are the responsibility of the Director and the senior management team. The Director and the senior management team must follow the broad strategic direction set by the Board and must ensure that all Board members have a clear understanding of the key activities and decisions related to the entity, and of any significant risks likely to arise. The Director acts as a direct liaison between the Board and management of the National Cancer Registry.

2. Board Responsibilities

The work and responsibilities of the Board are set out in the Governance Framework, which also contain the matters specifically reserved for Board decision. Standing items considered by the Board include:

- declaration of interests,
- reports from committees,
- financial reports/management accounts,
- performance reports, and
- reserved matters.

Section 21 of the National Cancer Registry Board Establishment (Order) 1991 requires the Board of the National Cancer Registry to keep, in such form as may be approved by the Minister for Health with consent of the Minister for Public Expenditure and Reform, all proper and usual accounts of money received and expended by it. In preparing these financial statements, the Board of the National Cancer Registry is required to:

- select suitable accounting policies and apply them consistently,
- make judgements and estimates that are reasonable and prudent,
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that it will continue in operation, and
- state whether applicable accounting standards have been followed, subject to any material departures disclosed and explained in the financial statements.

The Board is responsible for keeping adequate accounting records which disclose, with reasonable accuracy at any time, its financial position and enables it to ensure that the financial statements comply with Section 21 of the National Cancer Registry Board Establishment (Order) 1991. The maintenance and integrity of the corporate and financial information on the National Cancer Registry's website is the responsibility of the Board.

The Board is responsible for approving the annual plan and budget. Evaluation of the Registry's performance by reference to the annual plan and budget is carried out on an ongoing basis.

The Board is also responsible for safeguarding its assets and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities. Except for the non-compliance with the requirements of FRS102 in relation to retirement benefit entitlements, the Board considers that the financial statements of the National Cancer Registry give a true and fair view of the financial performance and the financial position of the National Cancer Registry as at 31 December 2024.

3. Board Structure

The Board consists of a chairperson and six ordinary members, all of whom are appointed by the Minister for Health. The members of the Board were appointed for varying periods - the table below details the appointment dates for current members:

Name	Role	First Appointment	Reappointment	Resignation	Tenure Expires
Dr Jerome Coffey	Chairperson	13/06/2017	15/02/2021	19/06/2024	
Dr Robert O'Connor	Chairperson	18/10/2024	15/02/2025		14/02/2029
Dr Robert O'Connor	Board Member	12/04/2019	05/04/2022	Tfr. to Chair	
Prof Mark Lawler	Board Member	15/07/2021			14/07/2025
Ms Mary Bourke	Board Member	15/07/2021			14/07/2025
Ms Ellen Farrell	Board Member	04/05/2022			03/05/2026
Mr Niall Murphy	Board member	16/01/2023			15/01/2027
Ms Cathy Enright	Board Member	11/01/2024			10/01/2028
1 position vacant at 31/12/2024					

Key Personnel Changes

The Chairperson of the Board resigned during the year and in accordance with the National Cancer Registry Board Establishment (Order) 1991 the Minister appointed a chairperson. As the new chairperson was an existing member of the Board, a recruitment process with a closing date of 18 February 2025 was put in place.

Audit & Risk Committee

The Board has established the Audit and Risk Committee, comprising of three Board members and one independent member. The role of the Audit and Risk Committee (ARC) is to support the Board in relation to its responsibilities for issues of risk, control and governance and associated assurance. The ARC is independent from the financial management of the Registry. The ARC ensures that the internal control systems, including audit activities, are monitored actively and independently. The ARC report to the Board after each meeting includes their appraisal of risk management systems. The ARC presents its opinion on the adequacy of internal control systems to the Board annually.

The members of the Audit and Risk Committee during 2024 were: Ms. Ellen Farrell (Chairperson), Ms. Mary Bourke, Mr. Niall Murphy and Mr. Cormac McSweeney (external member).

There were four meetings of the ARC in 2024, however the December meeting was not quorate. This meeting was conducted as an information and planning meeting, and no decisions were taken.

4. Schedule of Attendance and Fees

A schedule of attendance at the Board and Committee meetings for 2024 is set out below. No fees are paid to Board members for meetings.

Name		Board	ARC
No of Meetings		6	4*
Dr Jerome Coffey		4/4	N/A
Dr Robert O'Connor		6/6	N/A
Prof Mark Lawler		3/6	N/A
Ms Ellen Farrell		6/6	4/4
Ms Mary Bourke		5/6	3/4
Mr Niall Murphy		5/6	3/4

* The December meeting of the Audit and Risk Committee (ARC) was not quorate.

5. Disclosures Required by Code of Practice for the Governance of State Bodies (2016)

The Board is responsible for ensuring that the National Cancer Registry has complied with the requirements of the Code of Practice for the Governance of State Bodies 2016. The following disclosures are required by the Code:

5.1 Employee Short-Term Benefits Breakdown

Employees' short-term benefits in excess of €60,000 are detailed in note 4 to the financial statements.

5.2 Consultancy Costs

Consultancy costs as detailed in note 13 of the financial statements include the cost of external advice to management and excludes outsourced 'business-as-usual' functions.

5.3 Legal Costs and Settlements

There was €0 in 2024 (€0 in 2023) in expenditure in the reporting period in relation to legal costs, settlements and conciliation and arbitration proceedings relating to contracts with third parties. This does not include expenditure incurred in relation to general legal advice received by the National Cancer Registry which is disclosed in Consultancy Costs above.

5.4 Hospitality Expenditure

Expenditure of €1,908 was incurred on Board and Staff hospitality in 2024 (€0 in 2023).

5.5 Travel and Subsistence Expenditure

The Income & Expenditure and Retained Revenue Reserves Statement includes the following Travel and subsistence expenditure:

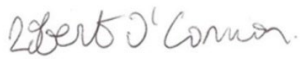
	Domestic	International	Total
Employees	€14,981	€4,557	€19,538
Board	€664	€0	€664
	€15,645	€4,557	€20,202

6. Statement of Compliance

The Board has adopted the Code of Practice for the Governance of State Bodies (2016) and has put procedures in place to ensure compliance with the Code.

The National Cancer Registry Board was in full compliance with the Code of Practice for the Governance of State Bodies for 2024.

On behalf of the Board



Dr Robert O'Connor
Chairperson

Date: 15th April 2025



Ellen Farrell
Board Member

Date: 15th April 2025

Statement on Internal Control for the year ended 31st December 2024

1. Scope of Responsibility

On behalf of the National Cancer Registry Ireland (NCRI), I acknowledge the Board's responsibility for ensuring that an effective system of internal control is maintained and operated. This responsibility takes account of the requirements of the Code of Practice for the Governance of State Bodies (2016).

2. Purpose of the System of Internal Control

The system of internal control is designed to manage risk to a tolerable level rather than to eliminate it. The system can therefore only provide reasonable, and not absolute, assurance that assets are safeguarded, transactions authorised and properly recorded, and that material errors or irregularities are either prevented or detected in a timely way.

The system of internal control, which accords with guidance issued by the Department of Public Expenditure, National Development Plan Delivery and Reform has been in place in the NCRI for the year ended 31 December 2024 and up to the date of approval of the financial statements.

3. Capacity to Handle Risk

The NCRI has an Audit and Risk Committee (ARC) comprising three Board members and one external member, with financial and audit expertise. The Committee met four times in 2024.

The National Cancer Registry has an established outsourced internal audit function which is adequately resourced and conducts a programme of work agreed with the ARC.

A risk management policy and procedure has been approved by the Board, which sets out NCRI's risk appetite, the risk management processes in place, and the roles and responsibilities of staff in relation to risk. The policy has been issued to all staff who are expected to work within the NCRI's risk management policies, to alert management on emerging risks and control weaknesses and assume responsibility for risks and controls within their own area of work.

4. Risk and Control Framework

NCRI has implemented a risk management system which identifies and reports key risks and the management actions being taken to address and, to the extent possible, to mitigate those risks.

A risk register is in place which identifies the key risks facing the NCRI and these have been identified, evaluated, and graded according to their significance. The risks are regularly reviewed, as appropriate, by various levels within the organisation including management, the ARC, and the Board. These assessments are used to plan and allocate resources to ensure risks are managed to an acceptable level.

The risk register details the controls and actions needed to mitigate risks and responsibility for operation of controls assigned to specific staff. I confirm that a control environment containing the following elements is in place:

- procedures for all key business processes have been documented,
- financial responsibilities have been assigned at management level with corresponding accountability,
- there is an appropriate budgeting system with an annual budget which is kept under review by senior management,
- there are systems aimed at ensuring the security of the information and communication technology systems,
- there are systems in place to safeguard the assets.

Throughout 2024, in line with government policy, most of NCRI's staff operated to a blended working model of working from both home and office. NCRI has established systems and controls that facilitate dispersed and remote working. Potential security and control threats were monitored and addressed on an ongoing basis. NCRI has been able to continue its operations without disruption and with minimal changes to its risk and control processes.

5. Ongoing Monitoring and Review

Formal procedures have been established for monitoring control processes and control deficiencies are communicated to those responsible for taking corrective action, to management and to the Board, where relevant, in a timely way. I confirm that the following ongoing monitoring systems are in place:

- key risks and related controls have been identified, and processes have been put in place to monitor the operation of those key controls and report any identified deficiencies,
- reporting arrangements have been established at all levels where responsibility for financial management has been assigned, and
- there are regular reviews by senior management of periodic and annual performance and financial reports which indicate performance against budgets/forecasts.

6. Procurement

I confirm that NCRI has procedures in place to ensure compliance with current procurement

rules and guidelines and that during 2024 the NCRI complied with those procedures.

7. Review of effectiveness

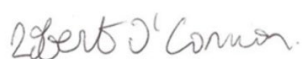
I confirm that NCRI has procedures to monitor the effectiveness of its risk management and control procedures. NCRI's monitoring and review of the effectiveness of the system of internal control is informed by the work of the internal and external auditors, the ARC which oversees their work and senior management within NCRI who are responsible for the development and maintenance of the internal control framework.

I confirm that the Board conducted an annual review of the effectiveness of the internal controls for 2024. This was considered by the Board on 15 April 2025.

8. Internal control issues

Notwithstanding that the one of the four Audit and Risk Committee Meetings was not quorate, I am satisfied that the Audit and Risk Committee fully discharged its role. No weaknesses in internal control were identified in relation to 2024 that require disclosure in the financial statements.

Signed on behalf of the Board of the National Cancer Registry



Dr Robert O'Connor
Chairperson

Date: 15th April 2025



Ard Reachtaire Cuntas agus Ciste Comptroller and Auditor General

Report for presentation to the Houses of the Oireachtas

National Cancer Registry Board

Qualified opinion on the financial statements

I have audited the financial statements of the National Cancer Registry Board for the year ended 31 December 2024 as required under the provisions of section 5 of the Comptroller and Auditor General (Amendment) Act 1993. The financial statements have been prepared in accordance with Financial Reporting Standard (FRS) 102 — *The Financial Reporting Standard applicable in the UK and the Republic of Ireland* and comprise

- the statement of income and expenditure and retained revenue reserves
- the statement of financial position
- the statement of cash flows, and
- the related notes, including a summary of significant accounting policies.

In my opinion, except for the non-compliance with the requirements of FRS 102 in relation to retirement benefit entitlements referred to below, the financial statements give a true and fair view of the assets, liabilities and financial position of the National Cancer Registry Board at 31 December 2024 and of its income and expenditure for 2024 in accordance with FRS 102.

Basis for qualified opinion on financial statements

In compliance with the directions of the Minister for Health, the National Cancer Registry Board accounts for the costs of retirement benefit entitlements only as they become payable. This does not comply with FRS 102 which requires that the financial statements recognise the full cost of retirement benefit entitlements earned in the period and the accrued liability at the reporting date. The effect of the non-compliance on the National Cancer Registry Board's financial statements for 2024 has not been quantified.

I conducted my audit of the financial statements in accordance with the International Standards on Auditing (ISAs) as promulgated by the International Organisation of Supreme Audit Institutions. My responsibilities under those standards are described in the appendix to this report. I am independent of the National Cancer Registry Board and have fulfilled my other ethical responsibilities in accordance with the standards.

I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my opinion.

Report on information other than the financial statements, and on other matters

The National Cancer Registry Board has presented certain other information together with the financial statements. This comprises the annual report, the governance statement and Board members' report, and the statement on internal control. My responsibilities to report in relation to such information, and on certain other matters upon which I report by exception, are described in the appendix to this report.

I have nothing to report in that regard.

Mark Brady
For and on behalf of the
Comptroller and Auditor General

30 April 2025



Ard Reachtaire Cuntas agus Ciste

Comptroller and Auditor General

Responsibilities of Board members

As detailed in the governance statement and Board members' report, the Board members are responsible for

- the preparation of annual financial statements in the form prescribed under section 21 of the National Cancer Registry Board (Establishment) Order 1991
- ensuring that the financial statements give a true and fair view in accordance with FRS 102
- ensuring the regularity of transactions
- assessing whether the use of the going concern basis of accounting is appropriate, and
- 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.

Responsibilities of the Comptroller and Auditor General

I am required under section 5 of the Comptroller and Auditor General (Amendment) Act 1993 to audit the financial statements of the National Cancer Registry Board and to report thereon to the Houses of the Oireachtas.

My objective in carrying out the audit is to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement due to fraud or error. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with the ISAs will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with the ISAs, I exercise professional judgment and maintain professional scepticism throughout the audit. In doing so,

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

- I conclude on the appropriateness of the use of the going concern basis of accounting and, based on the audit evidence obtained, on whether a material uncertainty exists related to events or conditions that may cast significant doubt on the National Cancer Registry Board's ability to continue as a going concern. If I conclude that a material uncertainty exists, I am required to draw attention in my report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify my opinion. My conclusions are based on the audit evidence obtained up to the date of my report. However, future events or conditions may cause the National Cancer Registry Board to cease to continue as a going concern.
- I evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

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

I report by exception if, in my opinion,

- I have not received all the information and explanations I required for my audit, or
- the accounting records were not sufficient to permit the financial statements to be readily and properly audited, or
- the financial statements are not in agreement with the accounting records.

Information other than the financial statements

My opinion on the financial statements does not cover the other information presented with those statements, and I do not express any form of assurance conclusion thereon.

In connection with my audit of the financial statements, I am required under the ISAs to read the other information presented and, in doing so, consider whether the other information is materially inconsistent with the financial statements or with knowledge obtained during the audit, or if it otherwise appears to be materially misstated. If, based on the work I have performed, I conclude that there is a material misstatement of this other information, I am required to report that fact.

Reporting on other matters

My audit is conducted by reference to the special considerations which attach to State bodies in relation to their management and operation. I report if I identify material matters relating to the manner in which public business has been conducted.

I seek to obtain evidence about the regularity of financial transactions in the course of audit. I report if I identify any material instance where public money has not been applied for the purposes intended or where transactions did not conform to the authorities governing them.

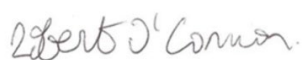
**Statement of Income and Expenditure and Retained Revenue Reserves
For the year ended 31st December 2024**

	Notes	2024 €	2023 €
Income			
Department of Health	2	4,434,839	4,266,628
Retirement Benefit Contributions		91,177	95,519
Other Income	3	145,076	231,371
Total Income		<u>4,671,092</u>	<u>4,593,518</u>
Expenditure			
Staff Costs	4	3,777,060	3,510,223
Administration Expenses	5	978,623	955,947
Travel and Subsistence		20,202	43,124
Total Expenditure		<u>4,775,885</u>	<u>4,509,294</u>
Surplus for the year before appropriations		(104,793)	84,224
Transfer (to)/from capital account	9	21,091	(23,388)
Surplus for the year after appropriations		(83,702)	60,836
Balance brought forward at 1st January		270,296	209,460
Balance carried forward at 31st December		<u>186,594</u>	<u>270,296</u>

The Statement of Income and Expenditure Retained Revenue Reserves include all gains and losses recognised in the year.

The Statement of Cash Flows on page 14 and notes on pages 15 - 25 form part of these financial statements.

On behalf of the Board:



Dr Robert O'Connor
Chairperson



Ellen Farrell
Board Member

Date: 15th April 2025

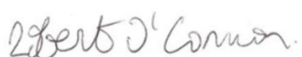
Date: 15th April 2025

Statement of Financial Position
As at 31st December 2024

	Notes	2024 €	2023 €
Property Plant & Equipment	6	<u>189,280</u>	<u>210,370</u>
Current Assets			
Receivables and Prepayments	7	282,883	167,633
Cash and Cash Equivalents		<u>270,262</u>	<u>370,712</u>
Total Income		<u>553,145</u>	<u>538,345</u>
Current Liabilities			
Revenue & Payroll Deductions		102,860	99,779
Other Payables		73,913	37,033
Accruals		173,286	113,924
Grants received in advance	8	<u>16,492</u>	<u>17,312</u>
Total Expenditure		<u>366,551</u>	<u>268,048</u>
Net Current Assets		<u>186,594</u>	<u>270,297</u>
Total Net Assets		<u>375,874</u>	<u>480,667</u>
Representing:			
Capital Account		189,280	210,371
Retained Revenue Reserves		<u>186,594</u>	<u>270,296</u>
		<u>375,874</u>	<u>480,667</u>

The Statement of Cash Flows on page 14 and notes on pages 15 - 25 form part of these financial statements.

On behalf of the Board:



 Dr Robert O'Connor
 Chairperson

Date: 15th April 2025



 Ellen Farrell
 Board Member

Date: 15th April 2025

Statement of Cash Flows
For the year ended 31st December 2024

	2024	2023
	€	€
Net Cash Flows from Operating Activities		
Excess Income Over Expenditure	(83,702)	60,836
Depreciation and Impairment of Fixed Assets	141,929	205,240
Transfer from / (to) Capital Account	(21,091)	23,388
(Increase) / Decrease in Receivables	(115,250)	51,989
Increase / (Decrease) in payables	98,503	40,146
Net Cash flow from Operating Activities	20,389	381,599
Cash Flows from Investing Activities		
Payments to acquire Property, Plant & Equipment	(120,839)	(228,628)
Net Cash Flows from Financing Activities	-	-
	(120,839)	(228,628)
Net Increase / (Decrease) in Cash and Cash Equivalents	(100,450)	152,971
Cash and cash equivalents at 1 January 2024	370,712	217,741
Cash and cash equivalents at 31 December 2024	270,262	370,712

Notes to the Financial Statements For the year ended 31st December 2024

1. Accounting Policies

The basis of accounting and significant accounting policies adopted by the National Cancer Registry Board are set out below. They have all been applied consistently throughout the year and for the preceding year.

a) General Information

The National Cancer Registry Board (the Registry) was established by the Minister for Health in 1991 under S.I No 19/1991 – The National Cancer Registry Board (Establishment) Order, 1991. The Registry was set up to record information on all cancer cases occurring in Ireland and has been collecting such data since 1994. Its functions were laid down in legislation in 1991, with an amendment in 1996 and are as follows:

- To identify, collect, classify, record, store and analyse information relating to the incidence and prevalence of cancer and related tumours in Ireland.
- To collect, classify, record and store information in relation to each newly diagnosed individual cancer patient and in relation to each tumour which occurs.
- To promote and facilitate the use of the data thus collected in approved research projects and in the planning and management of services.
- To publish an annual report based on the activities of the Registry.
- To furnish advice, information, and assistance in relation to any aspect of such service to the Minister.

NCR is a Public Benefit Entity (PBE).

b) Statement of Compliance

The financial statements of NCR for the year ended 31 December 2024 have been prepared in accordance with Financial Reporting Standard (FRS) 102 (the financial reporting standard applicable in the UK and Ireland) as promulgated by Chartered Accountants Ireland and modified by the directions of the Minister in relation to superannuation. In compliance with the directions of the Minister, the Board accounts for the costs of superannuation entitlements only as they become payable. [See Accounting Policy (i)].

This basis of accounting does not comply with Financial Reporting Standard 102 which requires such costs to be recognised in the year the entitlements are earned.

c) Basis of Preparation

The financial statements are prepared under the accruals method of accounting and under the historical cost convention in the form approved by the Minister for Health with the concurrence of the Minister for Public Expenditure and Reform, in accordance with Section 21 of National Cancer Registry (Establishment) Order 1991.

The following accounting policies have been applied consistently in dealing with items which are considered material in relation to NCR's financial statements.

d) Revenue

Oireachtas Grants

Revenue Grants are recognised on a cash receipts basis. Capital grants are transferred to a Capital Account and amortised over the same period as the related fixed assets are depreciated.

e) Research Grants

Research grants are recognised in the period in which the corresponding expenditure is incurred and are accounted for as Other Income.

f) Property, Plant & Equipment

Property, plant, and equipment is stated at cost less accumulated depreciation, adjusted for any provision for impairment. Assets acquired receive a full 12 month's depreciation charge in the year of acquisition. Depreciation is provided on all property, plant, and equipment, other than freehold land and artwork, at rates estimated to write off the cost less the estimated residual value of each asset on a straight-line basis over their estimated useful lives, as follows:

- (i) Fixtures and Fittings: 20% per annum
- (ii) Office Equipment: 20% per annum
- (iii) Computer Hardware: 25% per annum
- (iv) Computer Software: 33% per annum

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

If there is objective evidence of impairment of the value of an asset, an impairment loss is recognised in the Statement of Income and Expenditure and Retained Revenue Reserves in the year.

g) Operating Leases

Rental expenditure under operating leases is recognised in the Statement of Income and Expenditure and Retained Revenue Reserves over the life of the lease.

h) Employee Benefits

Short term benefits such as holiday pay are recognised as an expense in the year, and benefits that are accrued at year-end are included in the Other Payables figure in the Statement of Financial Position.

i) Retirement Benefits

By direction of the Minister no provision has been made in respect of accrued benefits payable in future years under the Nominated Health Agencies Superannuation Scheme and its Spouses and Children Scheme (NHASS) and the Single Public Sector Pension Scheme (SPSPS).

Contributions from employees who are members of the NHASS are credited to the Statement of Income and Expenditure and Retained Revenue Reserves when received. Retirement Benefit payments are charged to the Statement of Income and Expenditure and Retained Revenue Reserves when payable.

All new entrants to the public service with effect from 1 January 2013 are members of the SPSPS, where all employees' pension deductions are paid over to the Department of Public Expenditure, National Development Plan Delivery and Reform. Pension payments under the scheme are charged to the statement of income and expenditure and retained revenue reserves when paid.

j) Critical Accounting Judgements and Estimates

The preparation of the financial statements requires management to make judgements, estimates and assumptions that affect the amounts reported for assets and liabilities as at the reporting date and the amounts reported for revenues and expenses during the year. However, the nature of estimation means that actual outcomes could differ from those estimates. The following judgements have had the most significant effect on amounts recognised in the financial statements.

k) Capital Accounting

In accordance with the accounting standards prescribed by the Minister, expenditure on fixed asset additions is charged to the Revenue Income and Expenditure Account or the Capital Income and Expenditure Account, depending on whether the asset is financed by capital or revenue funding. Computer/ICT Equipment over €2,000 and other Equipment over €7,000 which are funded from Revenue will also be treated as a fixed asset.

l) Depreciation and Residual Values

The Directors have reviewed the asset lives and associated residual values of all fixed asset classes, and the useful economic life and residual values of fixtures and fittings and have concluded that asset lives, and residual values are appropriate.

2. Department of Health

	2024	2023
	€	€
Revenue Grant (Vote 38, Subhead B.1)	4,314,000	4,038,000
Capital Grant (Note 9)	120,839	228,628
	<u>4,434,839</u>	<u>4,266,628</u>

3. Other Income

	2024	2023
	€	€
Research Grants		
Covid Effects	34,368	59,507
HRB (CARG)	-	28,813
BCNI	-	40,923
Orion	3,015	-
Aspire	36,066	-
	<u>73,449</u>	<u>129,243</u>
Non-Research Grant		
National Screening Service (NSS)	71,627	102,128
	<u>145,076</u>	<u>231,371</u>

See Note 8 below for the related movements and balances.

4. Staff Costs

	2024	2023
	Number	Number
<i>The average numbers of employees during the year were:</i>		
Director	1	1
Research & Analysis, Administration & IT	28	26
Cancer Data Registrar	23	24
	<u>52</u>	<u>51</u>
Whole time equivalent numbers at 31st December	<u>50.21</u>	<u>50.86</u>

4. Staff Costs (cont/d)	2024	2023
	€	€
Aggregate Employee Benefits		
Staff Short-term benefits	3,038,877	2,821,368
Termination benefits	-	-
Employer's contribution to social welfare	314,827	290,870
Retirement Benefit costs	423,356	397,985
	<u>3,777,060</u>	<u>3,510,223</u>
Staff Short-term benefits		
Basic Pay	3,777,060	3,510,223
Overtime	-	-
Allowances	-	-
Total	<u>3,777,060</u>	<u>3,510,223</u>

Further information on key management personnel is included in note 12. Employee Single Public Service Pension Scheme contributions paid over to the Department of Public Expenditure, National Development Plan Delivery and Reform in 2024 were €59,397. (2023 €43,166)

Note: For the purposes of this disclosure, short-term employee benefits in relation to services rendered during the reporting period include salary, overtime allowances and other payments made on behalf of the employee but exclude employer's PRSI.

Director's Remuneration (all short-term excl. Employers PRSI)	2024	2023
	€	€
Current Post Holder (started on 9/6/2021)	146,913	137,601
	<u>146,913</u>	<u>137,601</u>
Directors Expenses		
Current Post Holder	10,403	12,257
	<u>10,403</u>	<u>12,257</u>

Following an open recruitment process, the current Director assumed responsibility for the role in June 2021, under a secondment arrangement with the HSE for a period of five years. NCRI reimburse the HSE for the Director's Gross Pay and Employers PRSI costs. The current post holder did not receive any Performance Related Reward in 2024.

Board Members Remuneration and Expenses

Board members do not receive fees. Travel and Subsistence Costs of €663 were incurred by Board members for attendance at Board meetings in 2024. Costs of €541 were incurred in 2023.

4. Staff Costs (cont/d)

No. of Employee's Breakdown by salary band at end December

	<u>2024</u>	<u>2023</u>
Less than €60K	24	38
Between €60K - €70K	19	10
Between €70K - €80K	6	2
Between €80K - €90K	1	1
Between €90K - €100K	2	1
Between €100K - €110K	1	0
Between €110K-€120K	0	0
Between €120K-€130K	0	0
Between €130K-€140K	0	1
Between €140K-€150K	1	0
Total	<u>54</u>	<u>53</u>

5. Administration Expenses	2024	2023
	€	€
Office Consumables	5,956	6,732
Courier and delivery charges	793	1,494
Books and periodicals	1,131	2,040
C&AG Audit fee	14,300	14,300
Other Audit fees	18,450	7,560
Recruitment	53,622	47,919
Training & Conference fees (ROI)	16,035	20,216
Training & Conference fees (Outside ROI)	18,642	4,250
Rent & service charges	193,994	202,924
Insurance	16,037	12,910
Building repairs & maintenance	1,156	2,689
Light and heat	18,975	25,563
Licences, Subscriptions & Support	274,637	212,031
Printing, postage and stationery	2,411	1,740
Telephone, fax and Internet	48,479	46,907
Legal and professional fees	78,450	89,829
Bank Charges	1,333	1,209
Sundry expenses	21,212	7,413
Cancer Benchmarking Project	30,988	30,900
Information Technology Consumables	20,091	12,081
Depreciation on computer equipment	141,931	205,240
Total Administration Expenses	978,623	955,947

6. Property, Plant and Equipment

	Computer Equipment €	Fixtures & Fittings €	Office Equipment €	Total €
Cost				
At 1st January 2024	1,616,675	304,663	27,545	1,948,883
Additions	120,839	-	-	120,839
Disposals	-	(27,512)	(16,602)	(44,114)
At 31st December 2024	1,737,514	277,151	10,943	2,025,608
Depreciation				
At 1st January 2024	1,406,305	304,663	27,545	1,738,513
Charge for the year	141,929	-	-	141,929
On Disposals	-	(27,512)	(16,602)	(44,114)
At 31st December 2024	1,548,234	277,151	10,943	1,836,328
Net Book Values				
At 31st December 2024	189,280	-	-	189,280
At 31st December 2023	210,370	-	-	210,370

Computer Equipment includes Computer Software with a net book value of €69,889 as at 31st Dec 2024 and €105,841 at 31st Dec 2023.

7. Receivables and Prepayments

	2024 €	2023 €
Receivables - Other	22,768	450
Prepayments	260,115	167,183
	282,883	167,633

8. Grants received in Advance / (Arrears)

	Opening at 1st January €	Income Received €	T/f to I&E A/C €	Closing at 31st December €
Project Donor				
RCSI /ICS (Covid Effects)	(11,658)	27,220	(34,368)	(18,806)
OriOn	0	13,231	(3,015)	10,216
NSS	28,970	53,000	(71,627)	10,343
Aspire	0	50,805	(36,066)	14,739
Total	17,312	144,256	(145,076)	16,492

Grant Donors are:

Health Research Board (HRB)

Irish Cancer Society (ICS)

Blood Cancer Network Ireland (BCNI)

National Screening Service (NSS)

National Screening Service (NSS)

Royal College of Surgeons in Ireland (RCSI)

The amount due at 31st December 2024 from RCSI re the RCSI/ICS (Covid Effects) project is €18,806.

9. Capital Account

	2024 €	2023 €
Balance at 1 January	210,371	187,260
Transfer to / (from) Income and Expenditure account		
Capital Grants Received from Department of Health (Vote 38 subhead L1)	120,839	228,628
Amount of amortisation in line with asset depreciation	(141,930)	(205,240)
Transfer to / (from) Income and Expenditure account	(21,091)	23,388
Write off Balance on Disposals	-	(278)
Balance at 31 December	189,280	210,371

10. Operating Lease Rentals

	2024	2023
	€	€
Lease Rentals Charged to Income and Expenditure	138,282	147,600
The Board has the following commitments under operating leases which expire:		
Within one year	139,540	139,330
Within two to five years	582,959	570,035
After five years	455,819	607,235

The Board carries out its business from a premises at Cork Airport Business Park, a new lease was entered into on 5th March 2018 which commenced on 1st December 2017 for a period of 10 years. In consideration of agreeing to extend the lease for an additional five years to 30th November 2032 NCRI became entitled to a rent free period of six (6) months commencing on 1 April 2024.

11. Additional Superannuation Contribution/Pension Related Deduction

In accordance with the Financial Emergency Measures in the Public Interest Act 2009, a pension related deduction for public servants became effective from 1 March 2009. This was replaced on 1st January 2019 by the Additional Superannuation Contribution (ASC). The deduction when collected is remitted monthly by the National Cancer Registry to the Department of Health. The total of the monthly payments remitted to the Department for the period for ASC from January to December 2024 was €76,357. The comparative amount for 2023 was €77,157.

12. Related Party Transactions

Key Management Personnel Compensation

Key Management Personnel comprise the Board, Director, and the Senior Management Team. The total short term remuneration benefits for 2024 were €645,978 (incl. Employers PRSI). The comparative figure for 2023 was €668,254 (incl. Employers PRSI). No remuneration is payable to the Board.

The NCR adopts procedures in accordance with the guidelines issued by the Department of Public Expenditure, National Development Plan Delivery and Reform covering the personal interests of board members. In the normal course of business, the NCR may approve grants or enter contractual arrangements with entities in which NCR board members are employed or are otherwise interested. In cases of potential conflict of interest, Board members do not receive board documentation or otherwise participate in or attend discussions regarding these transactions. A register of disclosures is maintained. No related party transactions were incurred in 2024.

13. External Consultants and Advisor Fees

Included in Legal and Professional fees (note 5), the following expenditure was incurred on external consultants.

	2024	2023
	€	€
Procurement	2,664	-
Data Protection	-	745
Strategy	-	54,410
Legal	3,009	3,130
	<u>5,673</u>	<u>58,285</u>

14. Capital Commitments.

There are no capital commitments.

15. Events after the Reporting Date

Going concern - The National Cancer Registry Board considers that, as the entity provides a public service that is funded by moneys provided by the Exchequer, via its parent department the Department of Health, it is appropriate to prepare these financial statements on a going concern basis.

16. Approval of Financial Statements

The Board approved the financial statements on 15th April 2025.