



University Hospitals Birmingham Charity



**Queen Elizabeth
Hospital Birmingham**
Charity



**Heartlands
Hospital**
Charity



**Good Hope
Hospital**
Charity



**Solihull
Hospital**
Charity

Annual Report & Accounts

for the Year ended 31 March 2018

Company Registration Number 10004003

Charity Number 1165716

Company Address
5th Floor Nuffield House, Queen Elizabeth Hospital
Birmingham B15 2TH

Contents

Executive summary	2
Chair's statement	4
An overview	6
Charitable purpose and public benefit	6
Information about University Hospitals Birmingham NHS Foundation Trust	6
Information about Heart of England NHS Foundation Trust	6
Our key performance indicators	7
Plans for the future	8
What we fund	9
Equipment	10
Research	10
Facilities	11
Training, education and patient support	12
How we are funded	14
Fundraising	14
Legacies	17
Governance	18
More about who we are and how we work	18
Our history	18
How do we do things?	18
Details of Trustees	18
Trustee recruitment, appointment and induction	19
Charity sub-committees	19
Our staff	19
Remuneration policy	19
Volunteers	20
Grant making structure and policy	20
Charitable expenditure	20
Charity's advisors and agents	20
Wider networks and related parties	21
Administrative Structure as at 31 March 2018	21
External support structure as at 31 March 2018	21
Risk management	22
Investment policy	22
Reserves policy	23
Financial review	23
Statement of Trustees' responsibilities	24
Independent Auditors' report to the Trustees	25
Statement of Financial Activities for year ended 31 March 2018	27
Balance sheet as at 31 March 2018	28
Notes to the financial statements	30

Executive Summary

University Hospitals Birmingham Charity exists to support the patients of University Hospitals Birmingham NHS Foundation Trust, by funding equipment, facilities, research and patient support that is over and above what can be provided by the NHS.

On 1 April 2017, University Hospitals Birmingham Charity merged with Heart of England NHS Foundation Trust Charitable Funds and thus also became responsible for supporting the patients of Heart of England NHS Foundation Trust.

This was in anticipation of the merger of University Hospitals Birmingham NHS Foundation Trust and Heart of England NHS Foundation Trust, which took place on 1 April 2018.

University Hospitals Birmingham Charity therefore works across four of the largest hospitals in the Birmingham area - The Queen Elizabeth Hospital Birmingham, Heartlands Hospital, Good Hope Hospital and Solihull Hospital.

Together, the hospitals see over two million patients a year. Patients are referred to the hospitals' many centres of excellence from across the UK.

The general public identify with the names of the individual hospitals rather than the name of the NHS Foundation Trusts running them, and so the charity has adopted four working names that it is known to the public by – Queen Elizabeth Hospital Birmingham Charity, Heartlands Hospital Charity, Good Hope Hospital Charity and Solihull Hospital Charity.

The merger with Heart of England NHS Foundation Trust Charitable Funds sees the charity having many more opportunities to engage with patients, families, donors and supporters across Birmingham and the wider West Midlands, and Trustees want to see an increase in total grants made and total fundraising income.

Fisher House, the "home away from home" for military patients and their families, has now been a safe haven for over 3,500 patients and family members in the four years since it opened in June 2013 and has provided over 20,000 nights' accommodation. 2017/18 was the busiest year for the house since it opened, with just over one thousand patients and family members using the house.

Our two NHS family facilities, Karen's Home from Home and SACA's Home from Home (SACA is the name of a charity bike ride from Birmingham to London), continue to build on the success of Fisher House and serve the families of leukaemia and cancer patients.

None of this would be possible without the generous support of our fundraisers and donors, and we thank each and every one of them.

In particular, we are especially grateful to US charity Fisher House Foundation and UK charity Help for Heroes for their support. Without their contribution, Fisher House could never have been built, and we are very grateful to Help for Heroes for their ongoing support of £50,000 per year towards the Fisher House running costs.

We are very pleased to have worked with a number of local charities, including Help Harry Help Others, Ladies Fighting Breast Cancer, The Get A Head Charitable Trust, Friends of Queen Elizabeth Medical Centre, Friends of Good Hope Hospital, Friends of Solihull Hospital and Breast Friends Solihull. In partnership with these organisations, we have continued to support ground breaking medical research, provide cutting edge medical equipment, and improve patient experiences across the hospitals.

This is just a snapshot of the progress University Hospitals Birmingham Charity has made during the last year, including becoming a major provider of research grants in the region, and funding services and equipment that are over and above that which the NHS provides.

The report that follows provides full information on the charity's history and background, its structure and governance, its plans for the future, and detailed reports on its revenues and expenditure.

Chair's Statement

I am honoured to be writing my first Chair's statement having been appointed by my fellow Trustees as Chair of University Hospitals Birmingham Charity on 1 February 2018.

I would like to take this opportunity to thank our previous chair, Brian Hanson, for his dedication and service to the charity. Brian has served as a Trustee for fifteen years and had been Chair for ten years. Under his leadership, the hospital charity has grown from strength to strength and I am privileged to become Chair as we enter a new era, having this year merged with Heart of England NHS Foundation Trust Charitable Funds and now serving four of Birmingham's busiest hospitals.

When we talked to donors and fundraisers, they were very keen to understand where their donations were going, and be reassured that they could support an individual hospital especially if they had strong personal reasons for doing so.

Therefore, my fellow Trustees and I have decided to continue to operate under the brands of the individual hospitals, and so the charity has four working names – Queen Elizabeth Hospital Birmingham Charity, Heartlands Hospital Charity, Good Hope Hospital Charity and Solihull Hospital Charity.

Thus, although the charity as a whole operates under a single charity registration number (1165716) and has a single set of accounts, donors and fundraisers can choose to donate to a specific fund within the charity for each hospital.

We believe that reassuring donors and fundraisers where their money is being spent will really be able to benefit patients by increasing the amount of money we can raise and spend to provide "over and above" items across University Hospitals Birmingham NHS Foundation Trust ('UHBFT').

During the year, the hospital charity prepared for the new General Data Protection Regulations that became law in May 2018.

We know that in view of the media coverage surrounding charities and some dubious practices across the sector, that this is another area of importance for our donors and fundraisers.

During the past twelve months, there was ongoing media coverage and large fines for some of the charities that have mishandled the personal data of their donors and fundraisers.

I therefore think it is appropriate to reassure again all our donors and supporters that University Hospitals Birmingham Charity does not, and has never, taken part in these types of activities.

- ▶ We do not sell the names, addresses or data of any of our supporters.
- ▶ We do not share our supporter databases with other charities.
- ▶ We do not use third party fundraising agencies to sign up donors on the street (known as "chugging") or to contact donors at their home or place of work

The charity is registered with the Fundraising Regulator, who is responsible for the Fundraising Preference Service which launched in July 2017, and was a member of its predecessor, the Fundraising Standards Board.

We encourage all our fundraising staff to join the Institute of Fundraising, and our Chief Executive holds MInstF(Cert) status with the Institute.

Your personal data is important to you, and we only want to use it in ways you have asked us to. We only send our newsletters out to people who have asked for them, and you can remove yourself from that mailing list at any time by emailing charities@uhb.nhs.uk.

It is important for Trustees to set the tone for the charity, and we very much want our donors and supporters to be treated in the way we would expect to be treated ourselves. This belief permeates the charity, and I have seen this when I have had the privilege of attending many fundraising events throughout the year, where fundraisers tell me how much they have enjoyed working with the charity, and how they have felt looked after by the fundraising team.

I am always amazed to see what people are prepared to do in order to raise funds for the hospital charity, and the numbers of people that take part in events – from parachute jumps to mud splattered obstacle courses, from half marathons to treks across the Sahara.

This year saw our biggest ever participation event, when over a thousand riders took part in Velo Birmingham, a 100 mile closed road cycle ride, raising over £400,000 for the hospital charity. I would like to thank each and every rider, roadside supporter and donor for what was an amazing event.

We are looking forward to the next Velo Birmingham in May 2019, when again we are fortunate enough to be one of the official charities of the ride.

All of our fundraising activities are to progress us towards one goal – supporting patients at University Hospitals Birmingham NHS Foundation Trust. As you will see in this report, this is done by purchasing cutting edge medical equipment normally available only abroad or in private practice, providing facilities not normally seen in NHS hospitals (such as Fisher House), funding world class research at the hospital and universities across the region, or simply making a patient's stay in hospital just that little bit less stressful.

Through your kind and generous support, we can continue to make a difference to the hospital's patients and families, not by replacing government funding, but by adding to that level of care provided in other NHS hospitals, and helping make our hospitals world class facilities.

It is important that we can get that message out into the public domain, and our job is made so much easier because of the wonderful level of support we get from local, regional and national media outlets.

Particular thanks must go to BBC Midlands Today, BBC Radio WM, Heart FM, Free Radio, ITV Central News, Birmingham Mail, Birmingham Post and British Forces Broadcasting who all continue to be very supportive in carrying news stories about the charity and its support of patients.

Please read through our case studies later in this report, which expand on some of the stories I've mentioned and also give some other good examples of where the charity's support is benefiting patients and their families.

The Trustees are grateful to UHBFT who provide finance administration to the charity through a Service Level Agreement.

In particular, I would like to thank the Rt Hon Jacqui Smith and Dame Julie Moore for their valuable support of the charity, ensuring that we have good links throughout the hospital and helping us to identify ways we can benefit patients.

We were sad to hear of Dame Julie's upcoming retirement at the end of August 2018, and we are particularly grateful for her leadership of the NHS Foundation Trust and her dedicated support of the charity. We were pleased to hear that Dr David Rosser, previously Deputy Chief Executive of the NHS Foundation Trust has been appointed to lead the Trust when Dame Julie retires.

We would also like to acknowledge the valuable support of volunteers, both at the hospital and the numerous volunteers carrying out their own fundraising events across the country.

Notably, we would like to acknowledge the support given by all the staff at the hospital who have taken part in bike rides, half marathons, skydives, and the ever popular hospital cake sales!

The role of Trustee is vitally important to the charity, and I would like to thank all my fellow Trustees for their support and dedication.

You can see more about the hospital charity at our website, www.hospitalcharity.org.

I hope you will enjoy reading this report and hearing a bit more about the projects we have already funded and the stories behind some of our fundraising successes. Please do let me know what you think of the report, either by emailing me at charities@uhb.nhs.uk or writing to me at Queen Elizabeth Hospital Birmingham Charity, 5th Floor Nuffield House, Queen Elizabeth Hospital, Birmingham, B15 2TH.

Thank you all for your support



Dave Mackay
Chair

An Overview

Charitable purpose and public benefit

University Hospitals Birmingham Charity, company number 10004003, registered charity number 1165716, is the official charity of University Hospitals Birmingham NHS Foundation Trust ('UHBFT') and Heart of England NHS Foundation Trust ('HEFT').

It exists for the benefit of patients at UHBFT and HEFT and provides funding for support that is over and above that provided by core NHS funding.

It operates predominantly across four hospitals – Queen Elizabeth Hospital Birmingham, Heartlands Hospital, Good Hope Hospital and Solihull Hospital but also supports UHBFT and HEFT patients wherever they are treated, including regional dialysis clinics, Birmingham Chest Clinic, Solihull Community Services and Umbrella Sexual Health Services.

The charity's income comes from fundraising, donations, charitable grants, legacies and sponsorship. The Trustees oversee charitable expenditure to ensure that funding is for the clear benefit of patients, their families and others using the hospitals.

Under the Charities Act 2011, charities are required to demonstrate that their aims are for the public benefit. The two key principles which must be met in this context are first, that there must be an identifiable benefit or benefits; and secondly, that the benefit must be to the public, or a section of the public.

Charity Trustees must ensure that they carry out their charity's aims for the public benefit, must have regard to the Charity Commission's guidance, and must report on public benefit in their Annual Report.

The Trustees of University Hospitals Birmingham Charity regularly monitor and review the success of the charity in meeting its key objectives of benefiting patients at UHBFT and HEFT. The Trustees confirm, in the light of the guidance, that these aims fully meet the public benefit test and that all the activities of the charity are undertaken in pursuit of its aims.

A vital role of University Hospitals Birmingham Charity is its work in supporting and enhancing UHBFT and HEFT's outstanding quality of clinical activity, and so this report includes some general information about UHBFT, and for the year under review, HEFT, which merged with UHBFT on 1 April 2018.

Information about UHBFT

University Hospitals Birmingham NHS Foundation Trust (UHBFT) is the leading university teaching hospital in the West Midlands. It provides traditional secondary care services to the South Birmingham catchment area. Specialist tertiary care is provided across the wider West Midlands and a proportion of UHBFT's activity is provided to patients who are referred from outside the region.

The Queen Elizabeth Hospital Birmingham provides services to over one million patients every year, from a single outpatient appointment to a heart transplant. UHBFT is a regional centre for cancer, trauma, burns and plastics, and has the largest solid organ transplantation programme in Europe, as well as the largest paediatric radiotherapy practice in the country outside London.

UHBFT also hosts the Royal Centre for Defence Medicine (RCDM), the primary function of which is to provide medical support to military operational deployments. It provides secondary and specialist care for members of the armed forces and incorporates a facility for the treatment of service personnel who have been evacuated from an overseas deployment area after becoming ill or wounded/injured.

RCDM is a dedicated training centre for defence personnel and a focus for medical research and it is a tri-service establishment, meaning that personnel from all three of the armed services work at the hospital. Defence personnel are fully integrated throughout the hospital and treat both military and civilian patients. UHBFT also holds the contract for providing medical services to military personnel evacuated from overseas via the "Aero med service".

The Wellcome Trust Clinical Research Facility (CRF) is also hosted by UHBFT at the Queen Elizabeth Hospital. This development is a joint initiative between UHBFT and the University of Birmingham Medical School.

UHBFT partnered with University of Birmingham and Birmingham Women's & Children's Hospital NHS Foundation Trust to create Birmingham Health Partners, bringing together clinical, scientific and academic excellence across an integrated medical and life sciences campus. Birmingham Health Partners operates the Institute of Translational Medicine on the UHBFT campus. The Centre for Rare Diseases, supported by the charity, is part of the Institute of Translational Medicine.

Information about HEFT

Because University Hospitals Birmingham Charity merged with Heart of England NHS Foundation Trust Charitable Funds a year before the two NHS Foundation Trusts merged, the hospital charity has been working across HEFT for a year.

Heart of England NHS Foundation Trust (HEFT) consists of three hospitals – Heartlands Hospital, Good Hope Hospital and Solihull Hospital, as well as Birmingham Chest Clinic and Solihull Community Services.

Seeing just over a million patients per year across the sites, HEFT was one of the largest NHS foundation trusts in the country, with over 2,700 inpatient beds.

HEFT specialises in treating patients suffering from a wide range of illnesses including heart and kidney disease, cancer, HIV and AIDS, as well as respiratory conditions like cystic fibrosis.

HEFT also provides expertise in premature baby care, bone marrow transplants and thoracic surgery.

HEFT has large paediatric and maternity services, with over 11,000 babies being born across HEFT and over 100,000 children being seen as patients each year.

This is an exciting area for development in the charity’s strategy, as the area of paediatric and maternity services is a new one for the charity.

HEFT merged with UHBFT on 1 April 2018.








Our key performance indicators

The Trustees reviewed the charity’s business plan during the last twelve months, and developed a series of eight key performance indicators to clarify if the charity is performing against its business plan.

These key performance indicators are assessed on a traffic light basis – green means the key performance indicator is being met, yellow means it is not met but plans are in place to rectify this and red means the key performance indicator is not being met and needs immediate action or constant monitoring

These key performance indicators are discussed with, and reviewed by, our internal auditors.

Key Performance Indicators

KPI No.	Status	Aim	KPI	Action
1		To raise funds so the charity can support patients across UHBFT	Meet budgeted income target of £4,550,000	Achieved [£4,664,000]. This figure excludes the transfer of assets of Heart of England NHS Foundation Trust Charitable Funds awarded as a charitable grant.
2		To spend charitable funds to support patients across UHBFT	Meet budgeted charitable expenditure target of £3,900,000	Achieved [£6,732,000]
3		To minimise the cost per £1 raised	Cost per £1 raised to be below the charity sector average and to strive to be in the top quartile for minimising costs	Achieved. Costs 5p to raise £1 against the charity sector average of 25p. QEHB Charity in the top quartile for minimising costs. (If the transfer of assets from Heart of England NHS Foundation Trust Charitable Funds is excluded, this figure is 15p to raise £1 which would still be in the top quartile)
4		To maximise how much per £1 spent is spent on charitable activities	Amount per £1 spent which is spent on charitable activities to be above the charity sector average and to strive to be in the top quartile for maximising charitable expenditure	Achieved. 91p of every £1 spent is spent on charitable activities against the charity sector average of 74p. QEHB Charity in the top quartile for maximising charitable expenditure.
5		To raise awareness of the hospital charity across NHS staff	Increase in staff awareness as measured by the UHBFT staff survey	Achieved. Awareness rose to 73% from 72%. This just relates to Queen Elizabeth Hospital Birmingham site, and awareness needs to be raised significantly at Heartlands Hospital, Good Hope Hospital and Solihull Hospital.
6		To be an employer of choice	Monitor staff turnover rates with the aim to be lower than the charity sector average	Achieved. Staff turnover 12.5% against charity sector average of 22%.
7		To have a healthy and supportive working environment	Monitor staff absence rates with the aim to be lower than the charity sector average	Achieved. Staff absenteeism of 1.3 days per employee p.a. against charity sector average of 8.4 days per employee p.a.

Plans for the future

University Hospitals Birmingham Charity met during the year with UHBFT and HEFT on a regular basis and, with the help of these discussions, Trustees have identified the following areas for support:

1. Partnership Learning Centre & Education Centre, Good Hope Hospital

Good Hope Hospital in Sutton Coldfield is a centre of excellence for clinical skills training, and the charity is working with UHBFT to upgrade the facilities on site to ensure Good Hope Hospital can offer the very best in training skills.

University Hospitals Birmingham Charity has identified the need to support UHBFT with up to £700,000 from charitable funds.

2. Childrens' wards and outpatients areas across Heartlands, Good Hope and Solihull

The childrens' wards, accident & emergency and outpatients areas across Heartlands, Good Hope and Solihull see over 100,000 children every year but the facilities are not child friendly and enhancing of the treatment provided.

The charity, learning from the work carried out at Birmingham Children's Hospital, would like to enhance these areas to be more child friendly, welcoming and relaxing for children and parents alike.

University Hospitals Birmingham Charity has identified a need to raise up to £900,000 to support UHBFT in this area and has launched a fundraising appeal.

3. Giles' Trust

The Queen Elizabeth Hospital Birmingham is a national centre of excellence for the diagnosis, treatment of, and research into brain tumours.

The charity is working with Professor Garth Cruickshank and Professor Colin Watts to fund cutting edge medical equipment for the diagnosis and treatment of brain tumours, and is funding a Clinical Research Nurse who will be able to increase the number of patients taking part in clinical research trials by recruiting appropriate patients and administering the new treatments.

The charity is delighted to be working with former England cricketer Ashley Giles and his wife Stine Giles in the area of brain tumour research, under the banner of The Giles' Trust.

University Hospitals Birmingham Charity has identified a need to raise up to £400,000 to support UHBFT in this area and has launched a fundraising appeal in the name of The Giles' Trust.

4. Fisher House

Fisher House provides a "home away from home" for military patients and their families.

Fisher House receives no funding from the NHS or the Ministry of Defence and relies on charitable donations.

University Hospitals Birmingham Charity needs to provide £250,000 each year to run Fisher House. The Friends of Fisher House scheme allows groups, companies and individuals to support Fisher House directly.

We need your support

We will be seeking the community's support in raising the funds required for the above major projects. If you would like to learn more about our ambitious plans to support Queen Elizabeth Hospital Birmingham, Heartlands Hospital, Good Hope Hospital and Solihull Hospital, and how you can play a part, please contact University Hospitals Birmingham Charity at charities@uhb.nhs.uk

You can also visit our website at www.hospitalcharity.org or our Fisher House website at www.fisherhouseuk.org

If you would like to know more about how we operate, both administratively and for fundraising, please contact Mike Hammond, the Chief Executive of University Hospitals Birmingham Charity, at mike.hammond@uhb.nhs.uk or on 0121 371 4852 or by writing to:

**Mike Hammond,
Chief Executive,
Queen Elizabeth Hospital Birmingham Charity**

5th Floor Nuffield House,
Queen Elizabeth Hospital,
Edgbaston,
BIRMINGHAM B15 2TH

What we fund

The charity funds projects in four main areas – equipment, research, facilities and training, education and patient support. In this section of the report we give some more information together with some case studies as real life examples of what we fund.

Equipment

UHBFT and HEFT provide world class medical care for their patients within the NHS. However, the charity can provide equipment that is over and above core NHS funding that may be either cutting edge medical equipment not currently available within the NHS, or additional machines that will be of direct patient benefit, through reducing waiting times or giving a more individual service to patients who don't have to share equipment.

In 2017/18, Queen Elizabeth Hospital Birmingham Charity spent £2,757,000 on new equipment. [2016/17: £542,000].

Some of the major items of equipment purchased are detailed below.

Designated Fund	Equipment	£
QE Breast Cancer Appeal	DIBH Radiotherapy Equipment	284,400
QEHB Charity	Heart in a Box machine (initial payment)	97,500
Heartlands Hospital Charity	Faxitron	95,742
Heartlands Hospital Charity	MRI Ventilator	31,000
Get A Head	Portable ultrasound	29,950
QEHB Charity	Portable ultrasound	28,500
Critical Care	Adjustable electric bedside chairs	23,496
Liver Foundation	Synapse 3D liver planning tool	22,670
Good Hope Hospital Charity	"Sherlock" Siterite 8 console	19,990

Case Study 1 Heart in a Box arrives at the Queen Elizabeth Hospital Birmingham

Heart in a Box, a revolutionary machine that could increase the number of heart transplants carried out at the Queen Elizabeth Hospital Birmingham (QEHB) by up to 50% has arrived at the hospital following a successful fundraising campaign.

The machine keeps a retrieved heart alive outside of the body, by pumping blood around it, and irrigating it ready for transplantation. This radically increases the amount of time that surgeons have to perform the transplant, compared with the more traditional method of storing the heart in ice.

Heart in a Box is now ready and waiting for its first use at QEHB, following the £265,000 campaign by QEHB Charity to raise funds for the machine. Heart Research UK generously donated an incredible £132,500 towards the Heart in a Box campaign, with the rest of the money being raised by QEHB Charity's fantastic supporters.

The arrival of Heart in a Box was marked with a special event, put on by QEHB Charity and Heart Research UK, to thank some of the inspirational fundraisers who helped to raise money for this important cause. Justine Davy, Head of Fundraising for QEHB Charity said: "I am immensely proud of all of the hard work and dedication of our fundraisers who have helped to bring Heart in a Box to the hospital. I am delighted that the machine is now at the hospital, ready to help the incredible heart team to save more lives than ever before. Huge thanks go to Heart Research UK in the West Midlands, and all of their supporters for their wonderful donation that helped make the campaign such a huge success."

John Lloyd, Regional Executive at Heart Research UK in the Midlands, said: "The Organ Care System has the potential to allow surgeons to carry out up to 50% more heart transplants every year. This new technology will increase the number of suitable organs and the chance of survival for so many patients.

"Heart Research UK has always been committed to make surgery safer, and 'heart in a box' will help patients live healthier, happier and longer lives in the Midlands and nationwide."

Present at the event was Sarah Codling, 31 year old mother of one from Woodgate Valley, who received a heart transplant at QEHB in 2015. Since her heart transplant, Sarah has worked tirelessly to fundraise for heart patients at the hospital, and was delighted that heart in a box is now at the hospital.

Sarah said: "Heart in a Box is an astonishing piece of technology, I am really proud to have played my part in helping to fundraise for it. Since my heart transplant, I've wanted to give something back to the amazing hospital that saved my life. I know that Heart in a Box will completely change the way that heart transplants are carried out at QEHB, and the heart team will be able to change even more lives in the future."

Case Study 2 Deep Inspiration Breath Hold technique improves care for breast cancer patients

QEHB Charity has bought two new pieces of imaging equipment for the Radiotherapy Department, which cost in total £400,000.

The equipment will allow doctors at QEHB to offer a new technique called Deep Inspiration Breath Hold (DIBH) to patients undergoing radiotherapy for left sided breast cancer.

DIBH allows doctors to take advantage of a patient holding their breath, which moves the breast away from the heart during treatment delivery, minimising the dose to surrounding areas and protecting the heart. This system will revolutionise treatment for patients with left-sided breast cancer.

Ben Allen, Technical Lead Radiographer at QEHB said: "This new equipment allows the radiographers and the patients to be confident in the DIBH treatment delivery and ensures we are delivering the radiotherapy exactly as we plan to.

"It is a patient friendly system and is extremely quick and easy to use, minimising the time the patient needs to lie on the treatment couch whilst ensuring the highest quality delivery of DIBH."

Case Study 3 Faxitron improves care at Heartlands Hospital

One of Heartlands Hospital Charity's first purchases was a Faxitron machine.

When a surgeon is removing cancerous tissue, one of the major concerns is that all the cancer has been removed, with a minimal amount of healthy tissue removed.

When samples of tissue have to be sent to another laboratory for testing, this can either lengthen surgery time whilst the surgeon waits for results, or leads to the surgeon removing additional healthy tissue to give a wider margin of error.

The Faxitron machine allows the tissue removed to be tested immediately within theatre, meaning the surgeon can be more confident they have removed all the cancerous tissue and no more healthy tissue than necessary.

The charity was delighted to be able to purchase this machine with a £95,000 grant.

Research

An important part of the charity's charitable grants programme is funding research at UHBFT and HEFT and associated universities. The charity funds research into any field of medicine carried out at UHBFT and gives grants of a maximum of £70,000 for up to two years. The intention of these pump priming research grants is often to help clinicians develop their research sufficiently to then apply for larger national grants but with an emphasis on delivering patient benefits in the short to medium term, rather than blue sky medical research.

The AccelerateTED drugs programme led by Professor Hisham Mehanna was the largest research grant ever awarded by the charity, and will total £1,000,000. The grant will be spent over a number of years. For the year under review, expenditure was £200,000.

In total University Hospitals Birmingham Charity made research grants of £1,597,000 in 2017/18. [2016/17: £1,352,000]. Some of our research grants are outlined in the case studies below.

Case Study 1 AccelerateTED research programme

Drug development through pharmaceutical companies using the conventional approaches can take up to 15 years before they reach patients, and have a 90% failure rate.

Due to these difficulties, a team of eager researchers at the University of Birmingham decided to set up an accelerated drug treatment programme, using drugs originally licensed

for other indications, in order to look into and identify if these drugs could be used as treatments in the field of head and neck cancer.

Now in the fifth year of a five year grant, working with a team at the Institute of Head and Neck Studies and Education, led by Professor Hisham Mehanna, Chair of Head and Neck Surgery, patients at the Queen Elizabeth Hospital Birmingham are receiving new treatments as part of the research programme, speeding up the process of recovery for patients and cutting the cost to the NHS.

As part of the AccelerateTED research grant, QEHB Charity has funded a Research Fellow, Nikos Batis, who is running and analysing the data from hundreds of experiments that the team undertakes to find out if re-purposed drugs can be used to treat certain types of cancer.

Nikos, a 34-year-old who has studied and lived in Birmingham for the past 14 years, joined the programme after completing a PhD in Pharmacology and Neuroscience. He said: "Cancer is indiscriminate. It affects people of all ages and all races and indirectly, the patient's loved ones. This appeal is about speeding up treatment by matching existing drugs, which have already been approved in other conditions like arthritis, to cancers where they have not been tried before.

"Drugs that have been used to fight cholesterol or epilepsy, for example, could help fight cancer – we just need to test them out, which is why we need your support."

Since the program began two and a half years ago the team has made exciting discoveries.

Nikos explained: "We have now reached a point where we have screened thousands of drugs. What's more, we have established that nine of these drugs have shown strong results against cancer cells in the laboratory. The results are so strong that we are now planning to start human clinical studies in people suffering from cancer, to prove how effective they are against cancer."

If the team can prove that re-purposed drugs can be used to treat head and neck cancers, the programme can be rolled out to test other cancers, including thyroid, oesophageal cancer and lung cancer.

Case Study 2 Research Nurse joins brain tumour team thanks to The Giles' Trust

The Giles' Trust, a fund within the hospital charity, was set up by Stine Giles and her husband, former England cricketer Ashley, to raise money to fund vital research into brain tumours at Queen Elizabeth Hospital Birmingham (QEHB). The Giles' Trust now funds a research nurse to work alongside Professor Cruickshank at the hospital.

Stine set up The Giles' Trust after receiving successful treatment for brain tumours at the Queen Elizabeth Hospital Birmingham. Stine said: "After I had brain tumours successfully treated for the second time I decided that I wanted to give something back. I set up The Giles' Trust with the help of the hospital charity and I'm delighted that we're now in the position to be able to fund a research nurse to work here at QEHB."

Donna Gillen, a nurse with a background in treating patients with cancer and who spent five years working at The Alfred Hospital in Melbourne has taken up the post and is excited by what the role entails. Donna said: "I am quickly settling into the role, there is a lot to learn and I am excited about the two trials that are being set up. These trials will help to increase our understanding of brain tumours and could change the way that we treat people with tumours."

Donna will play a key role in the drugs trial as a link between the patients and the hospital, informing and educating patients about the trial. Donna said: "I am there to provide advice for patients who come onto the drug trial. It is important that they are able to ask all of the questions that they want to when they're in hospital but also when they're at home and have a question to ask."

Stine agreed that this is immensely important, saying: "When I was in that position I had so many questions to ask. You've got a lot of decisions to make in a short amount of time and a whole new language to learn. Donna will be able to take time to talk with the patients about their options, providing this care is so important."

Facilities

As well as funding equipment and research, University Hospitals Birmingham Charity sometimes funds improvements to buildings or even completely new facilities. In 2017/18 the charity spent £1,214,000 in this category. (2016/17 £378,000)

Fisher House is the charity's largest commitment under this category, and the costs of building Fisher House have been capitalised and will be spread out over a period of ten years in the accounts.

The charity also provides accommodation for the families of leukaemia and cancer patients through Karen's Home from Home [kindly by the Karen Morris Memorial Trust] and SACA's Home from Home [kindly supported by the SACA Charity Bike Ride].

Case Study 1 Solihull Haematology & Oncology Unit

Solihull Hospital Charity awarded a grant of £170,000 to support the creation of a new Haematology and Oncology Day Unit at Solihull Hospital.

The new facility provides more peace and comfort for the patients that receive treatments and is a far lighter and brighter environment for them. Previously, patients from Solihull were required to travel to Ward 19 at Heartlands Hospital which treats over 8,000 patients annually, across seventeen chemotherapy spaces.

The new chemotherapy centre will see a ward at Solihull Hospital renovated to a state of the art facility with up to 31 new chemotherapy spaces, increasing the number of patients that can be seen by 170%.

Consultant haematologist Dr Shankara Paneesha, who works at Ward 19, said: "It is important for our patients to be able to access services in the most comfortable way possible. The new unit at Solihull Hospital will provide a convenient and comfortable environment for patients to receive their treatment,

which is a great step forward."

The Charity helped to provide the unit with newly refurbished equipment to tailor individual treatment pathways for patients.

To celebrate the opening of the Haematology and Oncology Day Unit, local celebrities came to show their support and gratitude, one of which was Tony Iommi. Tony, lead guitarist for Black Sabbath was diagnosed with Non-Hodgkin's Lymphoma back in 2012. Iommi is a patron to Ward 19 at Heartlands and regularly shows his support for the doctors and nurses who treat those with cancer.

Justine Davy, Head of Fundraising at Solihull Hospital said: "The Charity is delighted to have been able to provide a substantial contribution towards this Unit. With the generosity of its supporters, the Charity has been able to fund this amazing facility as well as the quality of care and overall attention to detail that makes the patient's time here as comfortable as possible"

Case Study 2 Fisher House UK

Over the past five years since it opened in 2013, Fisher House has accommodated over three thousand military patients and their families, allowing family members to be close by to their loved ones whilst they are in hospital.

Pat and Sue are housekeepers at Fisher House and have worked there since it opened in 2013. As well as keeping Fisher House spotless, Pat and Sue are friendly faces who are always around, offering residents someone to chat to and helping to make Fisher House feel even more homely.

Sue and Pat have been a key part of the fabric of life in Fisher House for the past five years. Both Pat and Sue worked within the NHS before Fisher House opened. Pat had worked at the old Selly Oak site on the Alexandra Wing, where military patients were treated, for ten years before making the move to Fisher House.

Speaking of making the move to Fisher House, Pat said: "I felt as if I wanted to give something back, having worked on the Alexandra Wing for ten years I wanted a change, and when I saw that Fisher House was opening I knew I wanted to work there!"

Over the five years that Pat and Sue have worked at Fisher House, they have met and come to know hundreds of residents, and both love this aspect of their job. Pat said: "Our longest-staying resident was here for nearly 18 months and in that time you create a bond and a friendship with the resident. We've got lovely memories of working in Fisher House, we've had tearful and we've had happy days but it's the good times that you remember more than the bad times.

Sue spoke of the pride that she feels when welcoming new residents into the house, saying: "I love the amazed look that people often have when they walk into Fisher House. They just don't expect it to be the way it is. Working at Fisher House, I don't feel like I'm staff, I feel like I'm part of a team that is helping to create something special."

Fisher House offers accommodation to military patients and their families at any time that they are receiving treatment at

the hospital. This means that many people stay at the house on multiple occasions.

Sue and Pat have learnt a lot from these families over the years, and Pat said: "Working in Fisher House strengthens your belief in people and families. Many of the families who stay in Fisher House have been through a lot of turmoil, and the strength that they show throughout gives you hope for yourself."

When contemplating the future, both Pat and Sue see themselves staying on to help even more families in their time of need. Sue said: "The families who stay here make our job so enjoyable. It's nice to get up in the morning knowing we're coming into work, knowing that we're going to make a difference. I'm incredibly proud to work at Fisher House and I don't think that I'll ever want to leave!"

Fisher House relies entirely on donations to remain open, and Pat had some advice for anyone who was considering donating to Fisher House, saying: "Come and have look at what we do here at Fisher House, if you donate you can feel proud that you have done something to give back to those who serve in our military, and their families."

Training, education and patient support and welfare

The fourth area of grant making is in the area of training, education and patient support and welfare. It is important to note is that the charity does not fund statutory training – that is, training that the NHS should provide to all staff.

University Hospitals Birmingham Charity funds courses and conference fees for nursing staff to attend events that will bring knowledge back into the hospital for the benefit of patients.

The charity has also funded a range of patient information films on subjects as wide ranging as cardiac rehabilitation exercise, breast reconstruction information and paediatric radiotherapy.

In addition, the charity funds a number of patient welfare initiatives, from pizza night on the Teenage Cancer Trust Young Persons Unit, to memory lane cafes and activities for elderly patients.

In 2017/18, Queen Elizabeth Hospital Birmingham Charity spent £1,165,000 in this category. [2016/17 £658,000].

Case study 1 – Post breast reconstruction bra support service

QEHB Charity is supporting women who have had surgery for breast cancer by providing them with special bras that help to speed up post-surgery recovery, both physical and psychological.

The scheme, being referred to as 'Bra first' runs across QEHB and the Birmingham Women's Hospital and has been funded by donations to QEHB Charity.

There are two types of bra in the scheme, one type specially made for patients who have received reconstructive surgery and the other for women who have received either a single or double mastectomy.

The bras for patients who have received reconstructive surgery

are different from conventional bras in that they take pressure off the suture lines, helping them to heal. The second type of bra includes within it a pouch for gel prosthetics, allowing women who have received a mastectomy to have a restored sense of self.

The team of surgeons behind the scheme had realised that patients had not been able to provide their own special bras following surgery due to concerns over cost or worry surrounding having their surgery.

The bra scheme, supported by QEHB Charity, will provide a free, specially made bra in the correct size for all patients who have had breast cancer surgery. This service will include a visit from a nurse to help with measuring and fitting and a velvet bag for the bra to be presented in.

QEHB surgeon, and star of BBC Two's Surgeon's programme, Kate Nelson said: "My colleagues and I in the breast reconstruction team have seen the effect that breast surgery has on patients. We thought it would be a great idea to provide each patient with a properly-fitted bra that will aid their recovery, ease pain and increase self-confidence.

"I am delighted that QEHB Charity has been able to fund this initiative, thanks to the generous donations from the Charity's supporters, patients will benefit from properly fitted bras long into the future."

Senior Fundraiser at QEHB Charity, Rachel Learmonth, said: "The Charity is delighted to be able to support this wonderful scheme to the benefit of breast cancer patients at the hospital. QEHB Charity's aim is to go 'over and above' for patients and this scheme certainly does this, improving patient welfare and helping to restore a sense of normality to their lives after a traumatic period."

Case study 2 Green spaces at the QE

With all the vital, life-saving work that occurs on a daily basis at the Queen Elizabeth Hospital Birmingham, it can be easy to overlook the environmental factors that can have an impact on wellbeing when coping with recovery, rehabilitation or grief.

Regardless of the high standard of care provided by staff at the Queen Elizabeth Hospital

Birmingham, staying in hospital or visiting a family member there can be stressful and difficult to deal with.

Having a quiet space to reflect and relax away from the wards can be invaluable when it comes to wellbeing - not just for patients and their families, but for the staff who treat them.

We are lucky at the QE to have a lot of green space available throughout the site and the charity has been working alongside UHBFT and its partners to transform these areas through a new Community Orchards and Gardens Project.

A number of walking routes give people the opportunity to get fresh air and exercise, even when visiting patients or using the hospital.

A variety of new trees has been, and will continue to, be planted around the site.

Queen Elizabeth Hospital Birmingham Charity has now appointed a Green Spaces Coordinator in association with The Conservation Volunteers who will coordinate volunteer activities, encourage community interaction with the site, and launch the Green Gym initiative, which will see patients who have been prescribed a fitness regime be able to carry out those activities within the green spaces of the hospital site rather than within a gym environment.

These trees will require love and care as they continue to grow and bear fruit, and so the charity has also launched a Sponsor the Trees Appeal which allows people to support this project financially (www.hospitalcharity.org/trees).

How we are funded

University Hospitals Birmingham Charity continues to use money donated in previous years to provide the level of grants made in 2017/18 but in order to continue making those grants in future years, the charity relies on new income coming into its funds from generous individuals, companies, community groups, staff, patients and their families.

Please can we issue a massive thank you to everyone who has fundraised, donated, shaken buckets or taken part in one of our many events over the last year. It is only with your help and support that we can continue to fund our projects for the benefit of patients at UHBFT and HEFT.

Fundraising

University Hospitals Birmingham Charity organises events and supports many more fundraisers organising their own events throughout the year.

Fundraisers can download the charity’s fundraising toolkit from our website www.hospitalcharity.org which is packed with hints and tips for your fundraising, as well as the charity’s registration form. Sponsorship and Gift Aid forms are also available from the website.

Our Fisher House specific website is at www.fisherhouseuk.org. We would welcome feedback on our websites from donors and fundraisers.

You can also follow the charity on social media for each of the four hospitals we support:

Twitter @QEHBCharity
 Facebook www.facebook.com/qehbcharity

Twitter @HHospCharity
 Facebook www.facebook.com/hhospcharity

Twitter @GHHCharity
 Facebook www.facebook.com/ghhcharity

Twitter @SHospCharity
 Facebook www.facebook.com/shospcharity

People taking part in sponsored events can also raise funds through our dedicated charity pages on the online giving site JustGiving:

Queen Elizabeth Hospital Birmingham Charity
www.justgiving.com/qehbcharity

Heartlands Hospital Charity
www.justgiving.com/heartlandshospital

Good Hope Hospital Charity
www.justgiving.com/goodhopehospital

Solihull Hospital Charity
www.justgiving.com/solihullhospital

Fisher House
www.justgiving.com/fisherhouse

Fundraisers can use their mobile phones to donate to the charity, either through their own fundraising page or via the main charity donation code. To donate £5 to the charity, fundraisers and donors can text QEHB01 £5 to 70070. The whole £5 goes to the charity as mobile phone provider Vodafone is covering the costs as part of their corporate social responsibility programme. Thousands of pounds have been donated to the hospital charity via this method over the past twelve months.

The Fundraising team would be delighted to speak to anyone who is considering taking part in an event, or organising their own fundraising, for any of our hospital charity funds and can be contacted by email at charities@uhb.nhs.uk or by telephone on 0121 371 4852.

As well as the many individuals to whom the charity is very grateful for their support, we would also like to mention some of the companies and organisations that have supported University Hospitals Birmingham Charity over the past twelve months. We have so many generous supporters we cannot mention them all by name, but they all make a real difference to the care we can give our patients. Our case studies show just some of the ways people have supported the charity.

Donor	Area of support
Birmingham Publicity Association	Queen Elizabeth Hospital Birmingham
Joseph & Lena Randall Charitable Trust	
Blakemore Foundation	
Heart Research UK	Heart in a Box Appeal
Five Rivers Restaurant	
Cook & Wolstenholme Trust	
Sarah Codling	
Louise King	
Ryan Chapman	
Handsworth Boys School	
Amazon UK	Solihull Haematology & Oncology Centre
Birmingham Irish Cycle Appeal	
Tony Iommi	
Breast Friends Solihull	
ABA Cranes	
Jaguar Land Rover	
Get A Head Charitable Trust	
Help Harry Help Others	
Lions Solihull	
Philip Baldwin	
HSBC	

Donor	Area of support
Help for Heroes	Fisher House
SSAFA	
TroopAid	
Warwickshire County Cricket Club	
Royal Marines Association	
MacRobert Trust	
ABF The Soldiers Charity	
353 Charity	
Royal Navy & Royal Marines Charity	
Royal Air Force Benevolent Fund	
The MacRobert Trust	
The Lt Dougie Dalzell MC Memorial Trust	
Spitfire MCC	
Lord Mayor of Birmingham's Charity	
BAE Systems Ltd	
Henry Wong Cantonese Restaurant	
Stan Bowley Trust	QE Cancer Appeal
Joseph Hopkins Charity	
Mohammed Akhtar & friends	
Kevin Giddins & friends	QE Fighting Skin Cancer
Stine & Ashley Giles	The Giles' Trust
Sir Doug Ellis	
Tony Fox & friends	Liver Foundation
Paul Cunningham & friends	
The Parnell family	Cancer Immunology & Immunotherapy Centre
Karen Morris Memorial Trust	Karen's Home from Home
Sikh Arts & Cultural Association (SACA) Charity Bike Ride	SACA's Home from Home
TSB Bank	Elderly Care
Santander Foundation	
Birmingham Pragati Mandal	
Birmingham Hospital Saturday Fund	
Guru Nanak Nam Ladies Jatha	
Persimmon Homes	
William Adlington Cadbury Charitable Trust	
Jarman Charitable Trust	Friends of Queen Elizabeth Medical Centre
The Florence Shaw Trust	Military Patients
The Patrick Trust	Renal Patients
Richardson Brothers Foundation	Neurology

Donor	Area of support
George Henry Collins Charity	HEFT Children's Appeal
The Eric W Vincent Trust	VIP Treatment Appeal
NET Patient Foundation	Neuro Endocrine Tumours
Robert Gaddie Memorial Fund	Heartlands Research & Development Centre
Holly Trust	Good Hope Hospital Coloproctology Research

Case Study 1 Over one thousand cyclists take to the roads and ride for Queen Elizabeth Hospital Birmingham Charity in Birmingham's first 100 mile close road cycle ride

On Sunday 24 September 2017, Birmingham saw its first ever 100 mile close road cycle ride – Velo Birmingham. Over 15,000 cyclists had registered for the event, and over a thousand of those had chosen to ride in the Queen Elizabeth Hospital Birmingham Charity colours – the largest team in the whole ride.

From complete novices to seasoned sportive riders, from doctors, nurses, patients and big city lawyers, the team came from far and wide, all with their own reasons for riding for the hospital charity.

In total, the riders raised over £400,000 to support many different areas across the hospital, and the charity is looking forward to the return of Velo Birmingham in May 2019.

Stuart Turner took on Velo to raise funds for the Renal Unit at QEHB after his wife, Rachael, was diagnosed with a degenerative kidney disease. When Rachael required a kidney transplant, in 2012, Stuart was found to be a match and gave his wife the ultimate present; a kidney. Stuart raised over £1,000 for the Unit, thank you Stuart!

Another brave fundraiser is Christine McAteer, who decided to challenge herself to Velo after having been knocked off her bike by a van in 2015. Fortunately Christine's injuries were not life threatening and she was able to get back on her bike, and raise funds for the team that cared for her.

Christine said: "Velo surpassed my expectations, it was given me back my love of cycling and now I have amazing memories of all the beautiful countryside and the wonderful support from the people of Birmingham, Staffordshire, Worcestershire, Sandwell and Dudley."

Steve Whitehouse rode to raise funds for the Teenage Cancer Trust Young Person's Unit at QEHB as his 18 year old niece was undergoing chemotherapy.

He said: "What a fantastic day it was and a pleasure to take part and contribute to your fantastic charity which more than ever is close to my family's hearts."

Chris Jones said: "It was easily the most satisfying cycle event I've ever completed which was made even better by my being really proud to wear your colours."

Stevie Durrant said: "What an absolutely awesome day; perfect weather; good company and it was great to see so many QEHB riders who were so well supported throughout the day."

As well as individual supporters, a number of businesses also entered teams to raise funds for QEHB. Thank you to NEC Group's Ian Taylor and Martin Clarke, Oxford Biosystems, Bidfood, Mills & Reeve and RSM.

For QEHB eye-doctor Alastair Denniston and his brother Richard, Vélo Birmingham was a particularly special challenge. Richard has been blind since shortly after birth and was the inspiration for his brother's career which has led him to become an Ophthalmology consultant at QEHB.

As a cycling enthusiast, Alastair wanted to take on the Vélo Birmingham challenge for QEHB Charity but didn't want to take it on alone. Alastair and Richard decided to take on the cycling challenge together and, thanks to their trusty tandem bike and a lot of hard work and training, made it through the 100 mile course in an incredible time of 7:34.

Together with Alastair's colleagues from the eye department at QEHB, the team beat their incredible fundraising target of £30,000 which will go towards a new scanner that the team want to bring to the hospital.

The scanner, which is the latest generation of OCT scanners that enable earlier detection of diseases such as macular degeneration, glaucoma and diabetic eye disease, and helps guide treatment, will be of benefit for patients as well as staff at the hospital.

Case Study 2 CuddleCot comfort for bereaved families

A West Midlands family raised £4,000 to purchase a CuddleCot for the bereavement suite at Good Hope Hospital, in memory of their daughter Willow.

Sam Phillips and her partner Carl were at a routine 28 week scan, when they discovered that their daughter Willow had no heartbeat.

Sam delivered Willow two days later and thanks to a piece of equipment called a 'CuddleCot', Sam and Carl were able to spend five days with their daughter, giving them and their families valuable time with her. They spent the five days in the Snowdrop Suite, an area at Good Hope Hospital for families who are experiencing early miscarriage, still birth, or neonatal death.

The CuddleCot cooling mat is placed under the cot or Moses basket and allows the family to spend time with their family, without distressing trips to and from the mortuary.

Sam and Carl were determined to raise money for more CuddleCots, so organised a sponsored walk around Sutton Park with their families and friends – raising £4,000 to purchase a new one.

They found the stillbirth very traumatic, but were grateful for the time they had with Willow and raising this money, they feel like her life has meant something.

Sam said: "We were devastated to lose Willow, but spending time on the Snowdrop Suite, where it was so peaceful, gave us time to grieve for our daughter. I am proud that we've been able to help other families who have lost a child."

Sam and Carl presented Clare Beesley and Sarah Lane, bereavement midwives, with the CuddleCot.

Samantha Howell, Senior Fundraiser at Good Hope Hospital Charity, said: "We would like to say a heartfelt thanks to Sam and Carl for their very generous donation. It is humbling that, even after experiencing such a great and personal loss, they are able to help other people through their generous gift."

Case Study 3 Woman who had two liver transplants in five days walks 1,000 miles for QEHB Charity

After a period of ill health, Valerie Pinfold, 50, from Chipping Norton, was diagnosed with Primary Biliary Cholangitis (PBC), a disease where the immune system attacks the bile ducts in the liver causing a build-up of scar tissue, dramatically reducing liver function.

After eight years Valerie's condition rapidly deteriorated. By January 2015 she was on the transplant list for a new liver. Valerie was extremely fortunate as just one month later she received the call telling her that a liver had been found and that she needed to make her way to the Queen Elizabeth Hospital in Birmingham as soon as possible.

"You live your life waiting for the call, but when I got it, although I had a bag packed ready, it was still a shock" Valerie explained. In the early hours of the morning Valerie underwent surgery, but in a cruel twist of fate, the liver failed. The desperate search for a new liver began. Valerie's daughters, Robyn, 25, and Leah, 23 were told that the doctors had just 72 hours to find a suitable liver. Just before the 72 hours were up, thankfully a liver was found.

Throughout this traumatic period between the two liver transplants Valerie had to be placed in an induced coma, meaning she had no idea of the danger she was in. Whilst the second transplant was deemed a success, due to the sheer amount of blood that she had lost, Valerie's life was once again hanging by a thread.

Leah said: "The doctors told my sister and I that the next few hours were crucial. We were asked to make a very difficult decision as to whether to let our mum have a tube put into her throat to help her to breathe, but to our great relief, she woke up herself just in time so we didn't have to make that decision."

Valerie explained "When I came to, I didn't believe the doctors at first when they told me that I'd had two liver transplants. I can remember thinking that maybe I was in hospital because I had fallen down the stairs."

Valerie began to recover, but unfortunately in the days following the operation she developed pneumonia and was forced to return to Intensive Care. The rehabilitation process was long and difficult for Valerie, especially after having been bed-bound for such a long time. The strength she should have had as a fit and healthy fifty year old had been lost to the cruel illness.

"I think one of the difficult moments for me was being pushed around by my daughters in a wheelchair in the hospital, I looked around at everyone else rushing around and thought to myself "I'll never be able to do that again"

But Valerie Pinfold had far from given up, as two years later she set herself the challenge of walking 1,000 miles in 2017, and now, Valerie has walked over 1,000 miles and raised a staggering £1,030 for the Liver Unit and Critical Care Unit.

Legacies

Historically, legacies have been a major source of funding of University Hospitals Birmingham Charity. Whilst the number and value of legacies has fallen over recent years, we continue to have an active legacy programme with the aim to continue receiving legacies into the future.

Legacies are used, in accordance with donors' wishes, to support research; to fund capital projects; to allow continued investment in equipment; and to support UHBFT's patients, their families and staff.

University Hospitals Birmingham Charity is very grateful to those donors who have considered us in their will, and we would encourage anyone considering bequeathing a legacy to contact the Chief Executive to discuss their plans, how they would like to support the work of UHBFT and how University Hospitals Birmingham Charity can recognise their vital support.

We are delighted to report that in the year to 31 March 2018 the charity received generous legacies to the value of £576,881. (2016/17: £97,000). We would like to acknowledge the generous sums received from bequests made by the following people:

Donor	Donor
James Ayres	Trevor Ballinger
Doris Briney	Brenda Capener
Gwendoline Clarke	David Crackle
Monica Degg	Maureen Gibson
Sheila Green	Alan Gubbins
Violet Lackey	Harold Lloyd
James Matthews	Luciano Melito
Janet Munnoch	E L Perry
Kim Pickford	Doreen Potts
Beatrice Pritchard	Martin Purdy
Mary Rickards	Ruby Smart
Reginald Trout	Gladys Turvey
Anthony Williams	Anne Wright
Janet Wright	Joyce Young

Governance

More about who we are and how we work

University Hospitals Birmingham Charity has four working names to reflect the four hospitals it operates over: Queen Elizabeth Hospital Birmingham Charity, Heartlands Hospital Charity, Good Hope Hospital Charity and Solihull Hospital Charity.

The charity made the decision to take advantage of the guidance published by the Department of Health on “How NHS charities can convert to independent status” and converted to a new charitable company limited by guarantee on 1 April 2017.

Previously, the charity operated under the name of University Hospital Birmingham Charities, charity registration number 1093989 as an unincorporated trust.

Our history

The teaching hospitals of Birmingham, originally amalgamated as the United Birmingham Hospitals, had charitable funds managed by the Special Trustees for the Former United Birmingham Hospitals Trust Funds. When the hospitals were split into separate trusts, the decision was made to split the charitable funds in the same way. The Special Trustees were dissolved by Statutory Instrument on 1 April 2001. An apportionment of their funds, together with corporate funds, were transferred to University Hospital Birmingham Charities.

On 1 April 2017, the charity became a charitable company limited by guarantee, fully independent from the Department of Health who are no longer responsible for the appointment of Trustees.

How do we do things?

University Hospitals Birmingham Charity can have up to fifteen unpaid Trustees who make up the Board of Trustees. They decide policy and make sure it is implemented. University Hospitals Birmingham NHS Foundation Trust has the right to nominate up to a third of the Trustees.

Day to day management is delegated to the Charity Chief Executive who is responsible for carrying out the decisions of the Trustees and working with professional external advisors and the representatives of UHBFT who provide services to University Hospitals Birmingham Charity.

The Chair of the Trustees, who is elected by the Trustees, chairs meetings and takes an active role working with the Charity Chief Executive in the daily management of Queen Elizabeth Hospital Birmingham Charity. In the financial year to 31 March 2018 the Chair of Trustees was Brian Hanson until 31 January 2018, and then Dave Mackay from 1 February 2018.

Detailed in the table below are all the Trustees who held office during the financial year to 31 March 2018.

Trustees who were in office throughout the year to 31 March 2018	Date of first appointment*	Date when appointment expires
Brian Hanson	23 February 2016	22 February 2020
Peter Mayer	23 February 2016	22 February 2020
Andrew Pemberton	23 February 2016	22 February 2020
David Ritchie	23 February 2016	22 February 2020
Michael Seabrook	23 February 2016	22 February 2020
David Mackay	23 February 2016	22 February 2020
Ru Watkins	23 February 2016	22 February 2020

*All the Trustees previously served as Trustees under the old charity registration number. They were all appointed as Trustees for the new charity registration number for a four year period.

Details of Trustees

David Mackay worked for West Bromwich Building Society for 33 years, retiring in 2008 as Managing Director of West Bromwich Mortgage Company. He is a Fellow of the Institute of Sales & Marketing Management. David has served as a Board Member of the Black Country Chamber of Commerce & Industry, and as Chair of Governors at Howley Grange Primary School.

Brian Hanson is a retired consultant metallurgist. He is a member of the Dental Hospital Planning Committee and Chair of the Clinical Governance Committee at Birmingham Community Healthcare NHS Trust. He is also Chair of the Patient Council at UHBFT.

Dr Peter Mayer was a former consultant in Geriatric and Stroke Medicine at UHBFT and South Birmingham Primary Care Trust from 1977 until 2007 and was also an Honorary Senior Clinical Lecturer in the Department of Geriatrics at the University of Birmingham during the same period. Peter is Chair of Birmingham & District Nursing Charitable Trust and Honorary President of the Institute of Ageing and Health.

Andrew Pemberton is a qualified Chartered Accountant. He had a 27-year career with Peugeot Motor Company retiring in 2007 as Director-Service for Peugeot UK. Andrew has been a member of Balsall Common Lions club for 25 years and currently volunteers with the Lions organisation nationally.

David Ritchie worked at a senior level in Government for a number of years, latterly as Regional Director, Government Office for the West Midlands. He was also Chair of the Oldham Independent Review into the causes of the Oldham Race Riots in 2001 and has served as a non-executive director for University Hospitals Birmingham NHS Foundation Trust. He is currently Chair of Trustees for The Robin Centre

Michael Seabrook was a practising solicitor after he was admitted in 1976 and a partner at Eversheds from 1986 until he retired in 2011. He was a corporate lawyer for over thirty years, advising venture capitalists and management teams. He is also a Director of Solihull Moors Football Club CIC.

Ru Watkins was Chief of Staff for the Royal Centre for Defence Medicine from 2010 to 2012. Prior to that role, Ru had commanded infantry soldiers in Bosnia and Kosovo and then a number of Communications roles within the Ministry of Defence. He is a Fellow of the Royal Society of Arts and of the Chartered Institute of Management. He led the first UK expeditions to conquer the Miette Mountains in Canada and navigate the Monkey River in Belize. He is now Chief Executive of Noah's Ark Children's Hospice in Barnet.

Trustee recruitment, appointment and induction

Trustee recruitment is carried out by the hospital charity. Trustees are recruited following public advertisement, or are nominated by University Hospitals Birmingham NHS Foundation Trust, who have the right to nominate up to a third of the Trustees. As at 1 April 2018, UHBFT has not nominated any Trustees.

All potential Trustees must be interviewed and recommended by a panel consisting of two Trustees of University Hospitals Birmingham Charity and the Charity Chief Executive. Candidates must show knowledge of, and an interest in, UHBFT and the community it serves and be willing to give the time necessary.

Trustees are also selected to give University Hospitals Birmingham Charity a good mix of appropriate professional skills, such as finance, investment and law. All Trustees are appointed for a fixed term of up to four years, which is renewable.

Performance measures adopted by the Board include amongst other things a measure of the attendance level of Trustees. All measures are monitored regularly by the Board of Trustees.

New Trustees are provided with an induction pack comprising governing documents, and policies and procedures, and if they have not had previous dealings with UHBFT, a tour of the hospital.

Training courses are offered to the Trustees, in charity law and administration and the roles and responsibilities of Trustees, as part of their ongoing professional development.

Our auditors and solicitors provide much useful material and the Association of NHS Charities (to which we belong) runs regular conferences for Trustees.

Charity Sub-Committees

The Trustees have the power to establish committees to provide scrutiny of aspects of University Hospitals Birmingham Charity and to make recommendations to the Board of Trustees.

There are two formal sub-committees – the Board Performance Committee and the Finance & Risk Committee - which both met twice during the year 2017/18.

University Hospitals Birmingham Charity's Staff

The charity directly employs sixteen members of staff as at 31 March 2018 (thirteen as at 31 March 2017), equivalent to 13.2 full time employees (10.1 as at 31 March 2017) across the four hospital sites

The Charity Chief Executive is responsible for delivering the strategic objectives set by the Trustees and has delegated day to day responsibility for running the charity.

Finance administration services are provided by UHBFT under a service level agreement and individually named members of staff are responsible for providing those services, but the staff are employed by UHBFT.

External and internal auditors, legal advisors, investment managers and representatives of the NHS, amongst others, complement the staff in support of the Board of Trustees.

Remuneration policy

The Trustees consider the following when setting remuneration levels for the Charity Chief Executive and any other senior executives.

1. The goal of the charity's remuneration policy is to offer fair pay to attract and keep appropriately qualified staff to lead, manage, support and deliver the charity's aims.
2. Trustees are ultimately responsible for setting remuneration levels for the charity's most senior staff. At University Hospitals Birmingham Charity, this applies to the Charity Chief Executive.
3. To set appropriate pay and rewards requires making informed judgments and following the charity's governance and constitutional arrangements.
4. In deciding top levels of pay and rewards, Trustees will consider the purposes, aims and values of the charity, and its beneficiaries' needs.
5. Trustees will consider how increasing pay, particularly at senior levels, would be perceived by employees, donors and beneficiaries.
6. Trustees will make an assessment of the charity's and senior staff's performance against expectations, both short and long term.
7. Trustees will seek information on pay policies and practices in other organisations that could help guide a decision on whether a level of pay is fair.

Having considered the above points, Trustees increased the Charity Chief Executive's salary to £80,000 per annum in February 2018 from £65,000 per annum. This was the first increase in the Charity Chief Executive's salary since February 2013 and recognised his increased responsibilities following the merger with HEFT Charitable Funds.

Volunteers

Many hundreds of volunteers, including Fund Advisors, contribute to the work of University Hospitals Birmingham Charity and we are very grateful to them all.

Members of the public as well as Fund Advisors organise fundraising events for us during the year and some members of the public also volunteer within UHBFT on projects that are funded from University Hospitals Birmingham Charity's designated funds.

It is not possible, due to the nature of such volunteering, for University Hospitals Birmingham Charity to quantify in terms of hours the contribution of all its volunteers.

University Hospitals Birmingham Charity wishes to thank all its volunteers for their contribution to its ongoing work.

Grant making structure and policy

The charitable funds that University Hospitals Birmingham Charity manage, and from which grants are made, are held as endowment funds (expendable or permanent), restricted funds and unrestricted funds (designated or wholly unrestricted).

It is the Trustees' policy to ensure that all grants made from these funds are used in accordance with the purposes of the individual fund and University Hospitals Birmingham Charity's purposes and aims.

Individual funds' purposes include research, equipment and patient and staff welfare.

Day to day operational policy guidelines, which deal with such matters as expenditure on travel when on charitable business, are issued to Fund Advisors and regularly reviewed.

The definitions of endowment, restricted and unrestricted funds are detailed below:

- a. Endowment funds – the donor has expressly provided that the investment income of the fund may be applied for a specific charitable purpose.
Endowment funds are further split between expendable endowments (where the Trustees have the discretion to spend the capital) and permanent endowments (where Trustees have no discretion to spend the capital).
University Hospitals Birmingham Charity has no endowment funds.
- a. Restricted funds – the donor has provided for the entire donation to be used for a specified purpose or has been given assurance that the donation is destined for a particular purpose.
- a. Unrestricted funds – funds which are neither endowment nor restricted.

These are held either as designated (earmarked) funds (where the donor has made known their non-binding wishes) and wholly unrestricted funds which are for use at the Trustees' discretion.

Unrestricted funds are held under the umbrella of the General Fund; there are currently just over 400 such funds.

All of the different types of funds have Fund Advisors who facilitate local decision-making and offer expertise in the particular area of the fund.

The Fund Advisors have delegated powers and responsibility to authorise expenditure in line with the purpose of the fund and to manage projects and activities on a day to day basis within certain limits.

For expenditure in excess of these limits they make recommendations to the Charity Chief Executive and Trustees.

All University Hospitals Birmingham Charity's restricted and unrestricted funds can be spent at any time. Grants from these funds are applied for by Fund Advisors.

Charitable expenditure

Details of our major expenditure in the areas of equipment, medical research, facilities and training, education and patient support, are given elsewhere in this report (see pages 7-13).

During the financial year under review, University Hospitals Birmingham Charity made grants totalling £6,436,000. (2016/17: £3,105,000)

It should be noted that the construction costs of Fisher House were capitalised as an asset rather than as expenditure. The costs are spread over a ten year period. This will show in charitable expenditure over the coming years.

Charity's advisors and agents

Representatives of senior management of UHBFT attend Board Meetings and receive copies of Board papers.

There is also regular contact with senior UHBFT management, including the Chief Executive of UHBFT, both formally and on an informal basis.

Fund Advisors to University Hospitals Birmingham Charity are clinicians, ward sisters and other staff of UHBFT who are in regular contact with patients.

The Finance Department of UHBFT provides financial and administrative support to the charity under a Service Level Agreement.

Details of our other advisors can be found below.

Other advisors

- ▶ RSM: St Philips Point, Temple Row, Birmingham B2 5AF (internal auditors)
- ▶ Mazars LLP, 45 Church Street, Birmingham B3 2RT (external auditors)
- ▶ Barclays Bank: Colmore Row, Birmingham B3 2BY (bankers)
- ▶ Schroder & Co Limited: 12 Moorgate, London EC2R 6DA (investment managers)
- ▶ Shakespeare Martineau Solicitors: 1 Colmore Square, Birmingham B4 6AA (lawyers)
- ▶ Withers LLP: 16 Old Bailey, London EC4M 7EG (lawyers)

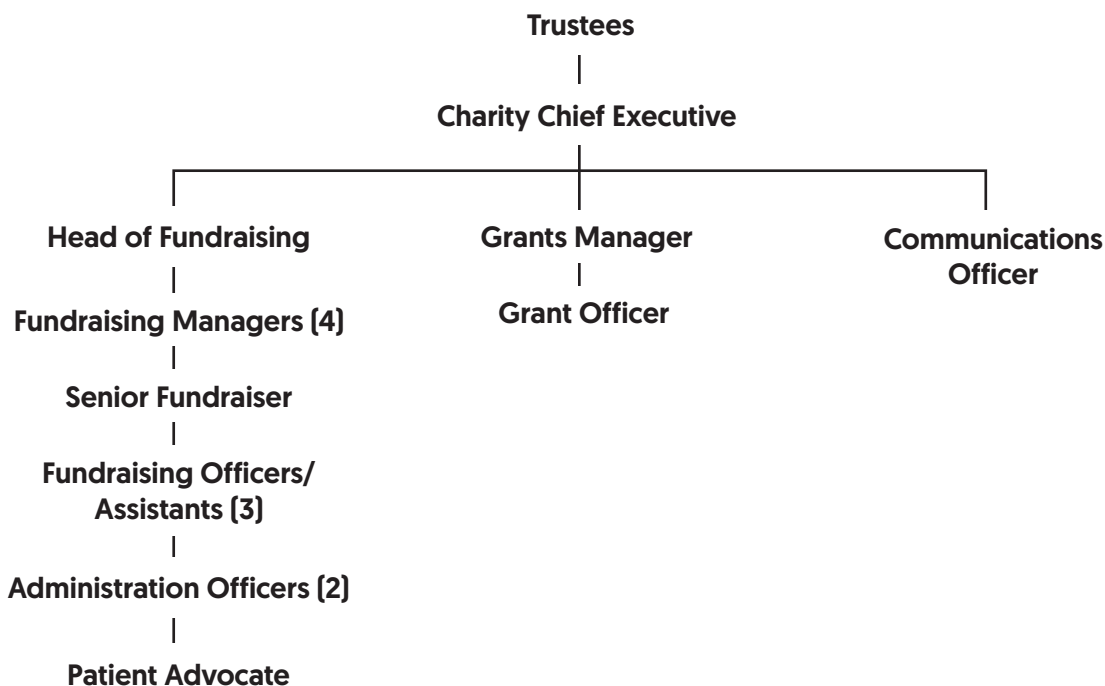
Wider networks and related parties

University Hospitals Birmingham Charity is one of some 290 NHS-linked charities in England and Wales. A number of the larger NHS-linked charities have, for a number of years, joined together to form the Association of NHS Charities.

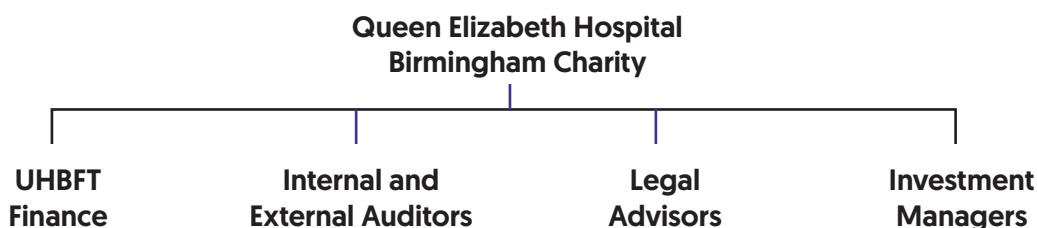
As a member, we have the opportunity to discuss matters of common concern and exchange information and experiences, join together with others to lobby government departments and others, and to participate in conferences and seminars which offer support and education for our staff and Trustees.

University Hospitals Birmingham Charity works closely with, and provides the majority of its grants to, UHBFT and the University of Birmingham, the hospital's main research partner. Although the Trustees are careful to consult with representatives of these organisations through their board meetings and other, less formal contacts, they retain their independence to act in the best interests of University Hospitals Birmingham Charity and the community they serve.

Administrative Structure as at 31 March 2018



External support structure as at 31 March 2018



Risks policy

A Risk Register, identifying the major risks to which University Hospitals Birmingham Charity is exposed, and an action plan of controls to mitigate those risks is in place and is tabled at each Trustee Board meeting.

The Risk Register and controls are reviewed by our internal and external auditors.

A Fraud and Corruption policy was updated and adopted by the Board of Trustees in August 2007.

A written policy on the acceptance and refusal of donations was updated and adopted by the Board of Trustees in March 2011.

Internal auditors, RSM have carried out a review of the Risk Register and controls in the year under review.

The Trustees have identified the following principal risks to the Charity, with the details of how they are managing these risks:

Risk	Mitigation
The hospital charity not having a significant profile within the hospital itself	Advertising sites within the hospital, permanent presence within the hospital, direct meetings with doctors, nurses and management
A lack of charitable projects to fundraise for	Working directly with doctors, nurses and management to identify ways the hospital charity can help to benefit patients. Planning of fundraising appeals well in advance
Managing the funds and assets of the hospital charity effectively	Charity Chief Executive formally reports at each Trustee meeting. UHBFT Chief Financial Officer presents quarterly finance reports to Trustees. Investment Managers present to Trustees on an annual basis

Investment policy

The charity's long term investments are managed by Schroders & Co Limited. The investments are held in the Schroders Charity Multi Asset Fund.

The Board of Trustees monitors investment performance and receive regular reports from the investment manager.

During the financial year under review the investment portfolio was targeted to deliver a return of RPI+4% including both capital value and income paid out. The portfolio achieved a return of 8.98% against the target of 7.4% [RPI for the year was 3.4%]

The move to the Schroders Charity Multi Asset Fund was to reduce volatility and generate a sustainable rate of income from the investments, and the Trustees note the portfolio is performing to those requirements over the long term.

The investment policy and investment performance is reviewed at each quarterly Trustee Board meeting.

The Trustees have adopted the following investment policy:

- i. The charity's aims in investing its funds
"The Trustees recognise that donors to the charity expect their donations to be spent on charitable activities relating to the work of UHBFT in a timely manner. The Trustees therefore wish to invest those funds to generate a financial return on capital, whilst minimising the risk to capital. The income thus generated will be used to further the aims and objectives of the charity."
- ii. The balance between capital growth and income generation
"The Trustees main concern is preservation of capital. However, whilst taking that into consideration, the need for capital growth is not a main priority. Thus, within the constraints of capital preservation, the Trustees prefer income generation over capital growth."
- iii. Consideration of risk
"The Trustees desire a low to medium risk investment portfolio. Charitable funds should be spent in a timely manner, thus investments that require a long period of investment are not to be recommended."
- iv. The timing of returns
"The Trustees need to draw a steady cash stream from their investments during the year. The investment policy should enable the funding of the cash requirements provided by the Trustees."
- v. Special preferences – e.g. ethical investments
"The Trustees wish to invest solely their cash holdings in organisations protected by the UK regulatory authorities. In addition, the Trustees do not wish to invest directly in tobacco securities because of the proven link between smoking and poor health which would make such investments contrary to the charity's objectives. Any investment manager should provide the Trustees with their Socially Responsible Investment policy prior to investing in equities to enable the Trustees to give approval of such policy."
- vi. Review of the policy statement
"This investment policy statement will be reviewed by the Trustees on an annual basis."
- vii. The way in which the investment discretion will be exercised
"The Trustees delegate the day to day management of the investments to the investment manager subject to the policy above. The investment manager should be able to demonstrate how the investments made on behalf of the charity meet the policy requirements and should present to the Trustees on an annual basis their plans for the year ahead."
- viii. Reserves policy
"Once the Trustees have formally agreed any charitable grant, the funds covering that grant will be moved into a cash account. In addition to those funds necessary to cover any agreed grants, the charity wishes to hold in a cash reserve a sum equal to six months expenditure of its general funds to allow the charity to meet its obligations in the event of a failure to raise any new charitable funds."

There is no need to set aside any reserves against the earmarked funds as if no income was received, no expenditure would be made.”

Reserves policy

The reserves policy is reviewed annually and is now incorporated into the investment strategy to help our investment advisors manage our funds in the most appropriate way.

The reserves policy was established by the Board of Trustees as part of their plans to provide long term support to UHBFT for equipment, medical research, facilities and training, education & patient support.

The Trustees calculate the reserves as that part of University Hospitals Birmingham Charity’s unrestricted income funds that are freely available after taking account of designated funds which have been earmarked for specific purposes, unrealised gains or losses and certain funds, which on the basis of prudence do not form part of the reserves.

The total funds of University Hospitals Birmingham Charity at the year ending 31 March 2018 were £15.649 million. The total level of unrestricted reserves is analysed as follows:

	£
Total funds available at year end 31 March 2018	15,649,000
Less:	
Fisher House and other programme related capital assets	2,093,000
Restricted funds	1,298,000
Designated funds	11,782,000
Total free reserves	476,000

Trustees calculated the level of required or target free reserves after reviewing University Hospitals Birmingham Charity’s annual income and expenditure level and taking into account medium term commitments.

The target reserves ensure stability of grant funding to UHBFT. The target reserves are calculated as follows:

	£
Provision for six month’s general fund expenditure requirements*	300,000
Total target reserve requirement:	300,000

*The figure for six month’s general fund expenditure requirements are those costs the charity would incur, including redundancy costs, if fundraising income ceased and Trustees had to wind up the charity’s activities.

The available reserves are above the target range and the Trustees believe these are sufficient and at a prudent level.

The Trustees note that there is still a large balance of designated funds within the charity and have set plans to continue to spend these balances on the areas appropriate to donors’ wishes.

Financial review

The full 2017/18 Statement of Financial Activities and Balance Sheet and accompanying notes to the accounts are set out on pages 30 to 41.

Income during the year (including the transfer of assets from Heart of England NHS Foundation Trust Charitable Funds as grant income, otherwise primarily from donations, legacies, fundraising and investment income) amounted to £12.89 million (2016/17: £4.07m) and expenditure in the year was £7.44 million. (2016/17: £3.63 million)

Statement of Trustees' responsibilities in respect of the Trustees' Annual Report and the Financial Statements

The charity trustees (who are also the directors of the University Hospitals Birmingham Charity for the purposes of company law) are responsible for preparing a trustees' annual report and financial statements in accordance with the applicable law and United Kingdom Accounting Standards.

Company Law requires the charity trustees to prepare financial statements for each year which give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of resources, including the income and expenditure, of the charitable company for that period. In preparing these financial statements, the trustees are required to:

- select suitable accounting policies and then apply them consistently;
- make judgements and estimates that are reasonable and prudent;
- state whether the financial statements comply with applicable accounting standards and statements of recommended practice, subject to any material departures disclosed and explained in the financial statements;
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charity will continue its activities.

The trustees are responsible for keeping proper accounting records that disclose with reasonable accuracy at any time the financial position of the charity and to enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charity and hence taking reasonable steps for the prevention and detection of fraud and other irregularities.

The Trustees are responsible for the maintenance and integrity of the corporate and financial information included on the charitable company's website. Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

Statement as a disclosure to our auditors

In so far as the Trustees are aware at the time of approving our trustees' annual report:

- there is no relevant information, being information needed by the auditor in connection with preparing their report, of which the group's auditor is unaware, and
- the trustees, having made enquiries of fellow directors and the company auditor that they ought to have individually made, have each taken all steps that they are obliged to take as a director in order to make themselves aware of any relevant audit information and to establish that the auditor is aware of that information.

Approved by Trustees on 15 August 2018 and signed on their behalf by:



David Mackay (Chairman)

Independent auditor's report to the members of University Hospital Birmingham Charity

Opinion

We have audited the financial statements of University Hospital Birmingham Charity (the 'charity') for the year ended 31 March 2018 which comprise Statement of Financial Activities, the Balance Sheet, the 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 FRS 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 charity's affairs as at 31 March 2018 and of its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

Basis of opinion

We conducted our audit in accordance with the International Standards of 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 charity 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

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

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

Other information

The trustees are responsible for the other information. The other information comprise 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.

Independent auditor's report to the members of University Hospital Birmingham Charity (cont')

Opinion on other matters prescribed by Companies Act 2006

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

- the information given in the Trustees' Report for the financial year for which includes the Strategic Report and the Directors' Report prepared for the purposes of company law, for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the Strategic Report and the Directors' Report included within the Trustees' Report has been prepared in accordance with the applicable legal requirements.

Matters on which we are required to report by exception

In light of the knowledge and understanding of the charity and its environment obtained in the course of the audit, we have not identified material misstatements in the Strategic Report or the Director' Report included within the Trustees' 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 and proper accounting records have not been kept, or returns adequate for our audit have not been received from branches not visited by us; or
- the financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specific by law are not made; or
- we have not received all the information and explanations we require for our audit

Responsibilities of trustees

As explained more fully in the Trustees' responsibilities statement set out on page 24, the trustees (who are also the directors of the charitable company for the purposes of company law) 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 the trustees determine is necessary to enable the preparation of the 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 charity'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 charity or to cease operations, or have no realistic alternative but to do so.

Auditor's responsibilities for the audit of the financial statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors 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.

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.uk/auditorsresponsibilities. This description forms part of our auditor's report.

Use of the audit report

This report is made solely to the 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 company's members those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the company and the company's members as a body for our audit work, for this report, or for the opinions we have formed.



Lee Cartwright (Senior Statutory Auditor)
For and on behalf of Mazars LLP
Chartered Accountants and Statutory Auditor
45 Church Street
Birmingham, B3 2RT
Date 27 September 2018

Statement of Financial Activities for the year ended 31 March 2018

	Note ref.	Unrestricted funds £000	Restricted funds £000	Total funds £000	Prior Year 2017 £000
Income and endowments from:					
Donations and legacies	3	10,052	1,680	11,732	2,872
Charitable activities	3.1	854	3	857	884
Investments	9.2	302	0	302	314
<i>Total</i>		11,208	1,683	12,891	4,070
Expenditure on:					
Raising funds:	5.1	709	0	709	525
Charitable activities:	5				
Medical Research		1,597	0	1,597	1,352
Purchase of New Equipment		2,715	42	2,757	542
New Building and Refurbishment		750	0	750	5
Staff Education and Welfare		699	2	700	421
Patient Education and Welfare		465	0	465	237
Fisher House Running Costs		91	0	91	175
Fisher House Depreciation Costs		373	0	373	373
<i>Total</i>		7,398	43	7,441	3,630
Net Income/(Expenditure) for the reporting period before gains and losses on investments		3,810	1,640	5,450	440
Unrealised gains (losses) on investments		(249)	0	(249)	701
Realised gains (losses) on investments		259	0	259	26
Transfers between funds	15	399	(399)	0	0
Other recognised gains and losses					
gains (losses) on revaluation of fixed assets					
Net movement in funds for the year		4,219	1,241	5,460	1,167
Reconciliation of funds:					
Total funds brought forward		10,132	57	10,189	9,022
Total funds carried forward		14,351	1,298	15,649	10,189

The statement of financial activities includes all gains and losses recognised in the year. All income and expenditure derive from continuing activities.

Approved and authorised for issue by the Board and signed on their behalf.

Signed:




Trustee
Dave Mackay

Trustee
Andy Pemberton

Date:
15 August 2018

Date:
15 August 2018

The notes at pages 30 to 41 form part of these accounts.

Balance Sheet as at 31 March 2018

	Note ref.	Unrestricted funds £000	Restricted funds £000	Total funds £000	Prior Year 2017 £000
Fixed assets:					
Investments	9	13,135	1,298	14,433	6,375
Fisher House	9.4	1,862	0	1,862	2,234
Program Related Asset	9.3	231	0	231	231
<i>Total fixed assets</i>		15,228	1,298	16,526	8,840
Current assets:					
Assets held for sale	10.1	18	0	18	24
Debtors	10.2	583	0	583	412
Cash at bank and in hand	10.3	4,879	0	4,879	4,687
Stock	10.4	20	0	20	0
<i>Total current assets</i>		5,500	0	5,500	5,123
Liabilities:					
Creditors: Amounts falling due within one year	11	1,361	0	1,361	469
Provisions for liabilities: Amounts falling due within one year	13	3,901	0	3,901	2,612
<i>Net current assets/liabilities</i>		238	0	238	2,042
<i>Total assets less current liabilities</i>		15,466	1,298	16,764	10,882
Provisions for liabilities: Amounts falling due after more than one year	13	1,115	0	1,115	693
<i>Total net assets or liabilities</i>		14,351	1,298	15,649	10,189
The funds of the charity:					
Restricted income funds	16.1	0	1,298	1,298	57
Unrestricted funds	16.2	14,351	0	14,351	10,132
<i>Total charity funds</i>		14,351	1,298	15,649	10,189

Approved and authorised for issue by the Board and signed on their behalf.

Signed: 
 Trustee Dave Mackay

Date: 15 August 2018


 Trustee Andy Pemberton

Date: 15 August 2018

The notes at pages 30 to 41 form part of these accounts.

Statement of Cash Flows

		2017/18	2016/17
		£000	£000
Cash flows from operating activities:			
Net cash provided by operating activities	Table A	7,932	343
Cash flows from investing activities:			
Dividends, interest and rents from investments	9.2	302	314
Proceeds from the sale of property, plant and equipment		0	0
Purchase of property, plant and equipment	9.3	0	(141)
Proceeds from sale of investments	9	7,916	2,515
Purchase of investments	9	(15,958)	(463)
Net cash provided by (used in) investing activities		(7,740)	2,225
Change in cash and cash equivalents in the reporting period			
Cash and cash equivalents at the beginning of the reporting period		4,687	2,119
Change in cash and cash equivalents due to exchange rate movements		0	0
Cash and cash equivalents at the end of the reporting period	Table B	4,879	4,687

Table A: Reconciliation of net income/(expenditure) to net cash flow from operating activities

		2017/18	2016/17
		£000	£000
Net movement in funds for the period		5,460	1,167
Adjustments for:			
Depreciation charges	9.4	372	373
(Gains) losses on investments		(10)	(727)
Dividends, interest and rents from investments	9.2	(302)	(314)
(Increase)/decrease in Stock	10.4	(20)	0
(Increase)/decrease in debtors	10.2	(171)	104
Increase/(decrease) in creditors	11	892	(552)
Increase/(decrease) in provisions	13	1,711	292
Net cash provided by (used in) operating activities		7,932	343

Table B: Analysis of cash and cash equivalents

		2017/18	2016/17
		£000	£000
Cash in hand	10.3	4,879	4,687
Total cash and cash equivalents		4,879	4,687

Notes to the Accounts

The company was incorporated as a company limited by guarantee on 1st April 2016. It is registered in England.

1 Accounting Policies

1.1 a) Basis of preparation and assessment of going concern

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 (FRS 102) (effective 1 January 2015) - (Charities SORP (FRS 102)) and the Companies Act 2006.

University Hospitals Birmingham Charity meets the definition of a public benefit entity as defined by FRS 102. Assets and liabilities are initially recognised at historic cost or transaction value with the exception of investments which are included at market value.

The Trustees consider that there are no material uncertainties about the Charity's ability to continue as a going concern. There are no material uncertainties affecting the current year's accounts.

1.2 Structure of Funds

Where there is a legal restriction on the purpose to which a fund may be put, the fund is classified either as an *endowment fund*, where the donor has expressly provided that only the income of the fund may be applied, or as a *restricted income fund* where the donor has provided for the donation to be spent in furtherance of a specified charitable purpose. Endowment funds, where the capital is held to generate income for charitable purposes, are sub-analysed between those where the Trustees have the discretion to spend the capital, *expendable endowment*, and those where there is no discretion to expend the capital, *permanent endowment*.

Those funds which are neither endowment nor restricted income funds, are *unrestricted income funds* which are sub-analysed between *designated (earmarked) funds* where the donor has made known their non-binding wishes or where the Trustees, at their discretion, have created a specific fund for a specific purpose, and *wholly unrestricted funds* which are wholly at the Trustees' unfettered discretion.

The major funds held in each of these categories are disclosed in Note 16.

1.3 Incoming Resources

All incoming resources are recognised in the Statement of Financial Activities when the charity has entitlement to the income, any performance conditions have been met, it is probable that the income will be received and the amount can be quantified with reasonable accuracy.

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(s) to the Charity that sufficient funds exist to enable a distribution to be made, all conditions within the legacy have been fulfilled or are within the Charity's control 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 and the charity has been notified of the executor's intention to make a distribution. 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 (see note 12).

1.4 Donated Goods and Services - Role of Volunteers

Due to the nature of the role of volunteers it is not possible to quantify the monetary value of their varied contributions but an outline of the activities they perform freely is explained below:-

It should be noted that all Trustees / Company Directors give their time and skills freely to run the Charity .

Fund Advisors - there are about 600 UHB NHSFT staff who, through delegated Trustee Authority make recommendations as to how the charity's designated funds are spent to benefit the patients of the hospital. These funds are designated (or earmarked) by the trustees to be spent for a particular purpose or in a particular ward or department in accordance with the purpose of the donation. Each fund advisor has delegated power to authorise up to £1,000 of expenditure from the relevant designated fund. Fund advisors wishing to recommend in excess of £1,000 require authority from the Charity Chief Executive who has Trustee delegated authority to spend up to £10,000, requests in excess of this amount up to £30,000 require the authority of the Charity Chairman and requests over this value require full Trustee Board approval.

Fund Raisers - there are many volunteers locally who actively support the fundraising for the charity by directly raising funds, using collection tins as well as volunteers who undertake sponsored activities and collect through online support pages. Activities include, cycling, skydiving and walking. The charity also has a team of regular volunteers, totalling circa 25, who on a weekly basis man a stall in the hospital atrium

There is a regular volunteer gardening group for Fisher House totalling circa 15 people.

Donated Goods - Goods or service donated in order to help the charity raise funds by onwards sale or auction are recognised at market or face value where it is readily available or Trustees best estimate. The charity are not holding any such assets at the balance sheet date.

1.5 Resources Expended and Irrecoverable VAT

All expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all costs related to the category. All expenditure is recognised once there is a legal or constructive obligation to make a payment to a third party.

Included within provisions are the values of unpaid grants awarded by the trustees at the balance sheet date. These grants are considered individually with regards to the timings of the requirements to allow the provisions to be split between amounts considered expendable within one year and amounts expendable after one year.

Irrecoverable VAT is charged against the category of resources expended for which it was incurred.

1.6 Allocation of Overhead and Support Costs

Overhead and support costs which are not wholly attributable to an expenditure type have been apportioned between Costs of Raising Funds and Charitable Activities. The analysis of overhead and support costs and the basis of allocation is shown in note 5.

- a) Costs of Generating Funds are all costs attributable to generating income for the charity other than income arising from charitable activities, and represent fundraising costs together with investment management fees.
- b) Costs of Charitable Activities comprise all expenditure identified as wholly or mainly incurred in the pursuit of the charitable objects of the charity. These costs, where not wholly attributable, are apportioned and in addition to direct costs include an apportionment of overhead and support costs as disclosed in note 5.1.

1.7 Fixed Assets

Investments

Investments are stated at market value as at the balance sheet date. The Statement of Financial Activities includes the net gains and losses arising on revaluation and disposals throughout the year.

Exceptionally, where the size or nature of a holding of securities is such that the disposal of those securities would have a material effect on the quoted market price, a separate disclosure by way of note would advise of the adjustment to the market price and valuation necessary to reflect this situation. Currently the Charity does not hold any investments of this type.

Property Fixed Assets

Fisher House is held at cost less depreciation over a 10 year term as per note 9.4

Programme Related Asset

The programme related asset No 2 Elizabeth Court (50% share) is carried at market valuation as at 31st January 2015, provided by Cottons Chartered Surveyors of Birmingham.

In February 2017 the Charity acquired a further programme related asset, No 7 Elizabeth Court (100% share).

Current Assets held for sale

Current assets held for sale comprise of property assets shown at market value. The last professional valuation was completed in March 2011 by Michael Wyldbore-Smith FRICS of external advisors Robert Powell & Co.

1.8 Gains and Losses

All gains and losses on investments are taken to the Statement of Financial Activities as they arise. Realised gains and losses on investments are calculated as the difference between sales proceeds and opening carrying value (purchase price if later). Unrealised gains and losses are calculated as the difference between the market value at the year end and the opening market value (or purchase price if later).

1.9 Debtors

Debtors are measured at their recoverable amount, there are currently no provisions for bad or doubtful debts.

1.10 Cash at bank and in hand

Cash at bank and in hand includes cash and any short term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

1.11 Creditors and provisions

Creditors and provisions are recognised where the charity has a present obligation resulting from a past event that will probably result in the transfer of funds to a third party and the amount due to settle the obligation can be measured or estimated reliably.

1.12 Pensions

NHS Pension Scheme

Past and present employees are covered by the provisions of the two NHS Pension Schemes. Details of the benefits payable and rules of the Schemes can be found on the NHS Pensions website at www.nhsbsa.nhs.uk/pensions.

Both are unfunded defined benefit schemes that cover NHS employers, GP practices and other bodies, allowed under the direction of the Secretary of State in England and Wales. They are not designed to be run in a way that would enable NHS bodies to identify their share of the underlying scheme assets and liabilities. Therefore, each scheme is accounted for as if it were a defined contribution scheme: the cost to the NHS body of participating in each scheme is taken as equal to the contributions payable to that scheme for the accounting year.

In order that the defined benefit obligations recognised in the financial statements do not differ materially from those that would be determined at the reporting date by a formal actuarial valuation, the FReM requires that "the period between formal valuations shall be four years, with approximate assessments in intervening years". An outline of these follows:

a) Accounting valuation

A valuation of scheme liability is carried out annually by the scheme actuary (currently the Government Actuary's Department) as at the end of the reporting period. This utilises an actuarial assessment for the previous accounting year in conjunction with updated membership and financial data for the current reporting period, and is accepted as providing suitably robust figures for financial reporting purposes. The valuation of scheme liability as at 31 March 2018, is based on valuation data as 31 March 2017, updated to 31 March 2018 with summary global member and accounting data. In undertaking this actuarial assessment, the methodology prescribed in IAS 19, relevant FReM interpretations, and the discount rate prescribed by HM Treasury have also been used.

The latest assessment of the liabilities of the scheme is contained in the scheme actuary report, which forms part of the annual NHS Pension Scheme (England and Wales) Pension Accounts. These accounts can be viewed on the NHS Pensions website and are published annually. Copies can also be obtained from The Stationery Office.

b) Full actuarial (funding) valuation

The purpose of this valuation is to assess the level of liability in respect of the benefits due under the schemes (taking into account their recent demographic experience), and to recommend contribution rates payable by employees and employers.

The last published actuarial valuation undertaken for the NHS Pension Scheme was completed for the year ending 31 March 2012.

The Scheme Regulations allow for the level of contribution rates to be set by the Secretary of State for Health, with the consent of HM Treasury, and consideration of the advice of the Scheme Actuary and appropriate employee and employer representatives as deemed appropriate.

The next actuarial valuation is to be carried out as at 31 March 2016. This will set the employer contribution rate payable from April 2019 and will consider the cost of the Scheme relative to the employer cost cap. There are provisions in the Public Service Pension Act 2013 to adjust member benefits or contribution rates if the cost of the Scheme changes by more than 2% of pay. Subject to this 'employer cost cap' assessment, any required revisions to member benefits or contribution rates will be determined by the Secretary of State for Health after consultation with the relevant stakeholders.

National Employment Savings Trust Scheme (NEST)

The Charity also contributes to the National Employment Savings Trust Scheme (NEST), a defined contribution pension scheme.

A defined contribution pension scheme is a post-employment benefit plan under which the Charity pays fixed contributions into a separate entity and will have no legal or constructive obligation to pay further amounts. Contributions are therefore charged to the SOFA in the year in which they become payable in accordance with the rules of the scheme.

2 Prior Year Comparators

The primary statements provide prior year comparators in total. The comparators can be found within the relevant notes to the accounts and derive from the charity's 2016/17 results prior to its conversion to company limited by guarantee.

2.1 Related party transactions and trustees' expenses and remuneration

Patients of University Hospitals Birmingham NHS Foundation Trust are the main beneficiary of the charity. The charity has made charitable grants to University Hospital NHS Foundation Trust and these are detailed in note 7.

University Hospitals Birmingham NHS Foundation Trust provides a financial services and administration service to the charity by agreement with the Trustees. The charges made by the NHS Foundation Trust are set at a fair open market rate and are included in the overhead and support costs detailed in note 5.1.

None of the trustees or parties related to them, has undertaken any transactions with University Hospitals Birmingham Charity or received any benefit from the charity in payment or kind.

None of the trustees have been paid any remuneration or received any other benefits from an employment with University Hospitals Birmingham Charity or any related entity and the trustees have not purchased trustee indemnity insurance.

During the year expenses for one trustee were paid directly to a third party to the value of £10.50. (2016/17 nil).

Trustee	Accomodation	Travel	Training	Total
2017/18				
One Trustee(s)	-	10.50	-	10.50
2016/17				
Zero Trustee(s)	-	-	-	0.00

The value of unclaimed expenses incurred by Trustees wholly and necessarily in the course of executing their Trustee duties have been calculated at £303.99 (£449.44 in 2016/17) This figure was derived by using the postcode distance Trustees have travelled to discharge their duties at the charity at a re-imburement rate of £0.25 pence per mile.

3 Income from Donations and Legacies

	2017/18			2016/17		
	Unrestricted Funds	Restricted Funds	Total 2018	Unrestricted Funds	Restricted Funds	Total 2017
	£000	£000	£000	£000	£000	£000
Donations from individuals	1,545	1	1,546	1,366	1	1,367
Donations from companies	917	0	917	262	0	262
Legacies	947	0	947	1,131	0	1,131
Grants	6,643	1,679	8,322	112	0	112
	10,052	1,680	11,732	2,871	1	2,872

3.1 Income from Charitable Activities

	2017/18			2016/17		
	Unrestricted Funds	Restricted Funds	Total 2018	Unrestricted Funds	Restricted Funds	Total 2,017
	£000	£000	£000	£000	£000	£000
Income from Fundraising Events	854	3	857	844	40	884

4 Allocation of Support Costs and Overheads

Support and overhead costs are allocated between fundraising activities and charitable expenditure. The basis of allocation is the number of transactions processed.

	2017/18			2016/17		
	Unrestricted Funds	Restricted Funds	Total 2018	Unrestricted Funds	Restricted Funds	Total 2017
	£000	£000	£000	£000	£000	£000
Salaries & Pension	141.3	0	141.3	104.1	0	104.1
Travel	0.0	0	0.0	0.2	0	0.2
Training	2.3	0	2.3	0.8	0	0.8
Office Costs	6.0	0	5.9	5.8	0	5.8
Stationery	7.2	0	7.2	2.5	0	2.5
Insurance	1.8	0	1.7	4.0	0	4.0
Annual Report	0.0	0	0.0	0.0	0	0.0
Trustee training and Expenses	0.0	0	0.0	0.0	0	0.0
Professional fees	0.0	0	0.0	5.1	0	5.1
Internal Audit	10.7	0	10.7	10.7	0	9.8
External Audit	12.9	0	12.9	10.5	0	10.5
Bank Charges	0.2	0	0.2	0.0	0	0.0
Finance SLA	134.2	0	134.1	134.2	0	134.2
Other	18.2	0	18.2	4.1	0	4.1
	334.8	0.0	334.5	282.0	0.0	282.0

All support costs have been allocated to unrestricted funds due to minimal restricted transactions on the basis of the number of transactions processed and is shown at note 6 of these accounts.

4.2 Governance Costs

Calculated governance costs for 2017/18 are £82k (2016/17 £68k). They relate to costs associated with the governance of operating the charity and include such items as Statutory Audit, Company registration and legal costs as well as an apportionment of remuneration and financial services costs for time spent on governance issues.

5 Analysis of Charitable Expenditure

The charity, under a Scheme of Delegation, either incurred expenditure with third parties in pursuance of grants or reimbursed expenditure incurred by beneficiaries. The charity did not undertake any direct charitable activities during the year.

Support costs attributable to Charitable Expenditure have been apportioned between categories on the basis of the number of individual transactions undertaken by the charity.

	2017/18			2016/17		
	Grant Funded	Support	Total	Grant Funded	Support	Total
	Activity	Costs	2018	Activity	Costs	2017
	£000	£000	£000	£000	£000	£000
Medical Research	1,523.2	73.3	1,597	1,260.9	91.0	1,352
Purchase of New Equipment	2,688.6	68.3	2,757	499.9	41.6	542
Building and Refurbishment	748.6	1.6	750	3.6	1.7	5
Staff Education and Welfare	597.9	102.3	700	359.7	61.4	421
Patient Education and Welfare	426.4	38.8	465	197.1	39.4	237
Fisher House Running Costs	78.9	11.6	91	163.0	12.4	175
Fisher House Depreciation Costs	372.4	0.3	373	372.4	0.3	373
	6,436.0	296.2	6,732	2,856.6	247.7	3,105

5.1 The remaining £38.3k support costs (£34.3k 2016/7) have been allocated to the Costs of Raising Funds on the basis of the number of transactions.

	2017/18			2016/17		
	Grant Funded	Support	Total	Grant Funded	Support	Total
	Activity	Costs	2018	Activity	Costs	2017
	£000	£000	£000	£000	£000	£000
Costs of Raising Funds	319.7	38.3	358	195.4	34.3	230
Costs of Fundraising Events	311.0	0.0	311	282.8	0.0	283
Investment Management Costs	40.0	0.0	40	12.8	0.0	13
	670.7	38.3	709	491.1	34.3	525

6 Grants

The charity does not make grants to individuals.

The Trustees operate a Scheme of Delegation under which Fund Advisors manage day to day disbursements in accordance with protocols set out by the Trustees. Funds disbursed in this way represent ongoing activity which is not possible to segment into individual grant awards.

Institution Receiving Support	2017/18	Total	2016/17	Total
	Number of Grants		Number of Grants	
		2018		2017
		£000		£000
University Hospitals Birmingham NHS Foundation Trust	*	5,734	*	2,132
University of Birmingham	*	702	*	625
		6,436		2,757

* As per Scheme of Delegation

7 Analysis of staff costs and remuneration of key management personnel

	Total	Total
	2018	2017
	£000	£000
Salaries and wages	367	256
Social security costs	33	23
Other pension costs	23	17
	423	296
Pension Costs are split as follows		
Defined Contribution Scheme	10	5
NHS Pensions Defined Benefit Scheme	14	12
	24	17
Outstanding contributions at year end were:		
Defined Contribution Scheme	1	1
NHS Pensions Defined Benefit Scheme	0	0
	1	1
Average full time equivalents of employees in the year:	14.0	8.9
Average head count during the year:	18.0	11.0

Excluded from the above are two Heart of England Trust employees for whom the charity has received charges of £34k due to them being engaged in Charity work.

- 7 The key management personnel comprise the Trustees (unpaid) and the Charity Chief Executive who was paid a salary of £80,000 plus pension contributions of £11,449. No other members of staff were paid in excess of £60,000.

8 Auditor's Remuneration

The external auditor's remuneration of £12,900 (2017: £10,050) related solely to statutory audit work. The charity did not commission any additional work from the auditor (2016/17 nil).

9 Analysis of Fixed Asset Investments Movements during the year

	2018	2017
	Total	Total
	£000	£000
Market value at start of year	6,375	7,700
Add transfer fr HEFT charity	8,060	
Less: Disposals at carrying value	(7,651)	(2,468)
Add: Acquisitions at cost	7,898	463
Net losses on revaluation	(249)	680
Market value at end of year	14,433	6,375
Historic cost at year end	5,913	7,759
Proceeds from the sale of investments in year	7,910	2,515

9.1 Market value at 31 March

	Held	2018	Held	2017
	in UK	Total	in UK	Total
	£000	£000	£000	£000
Schroders Multi Asset Fund	14,416	14,416	6,358	6,358
Other Investments	17	17	17	17
	14,433	14,433	6,375	6,375

9.2 Total gross income from

	2017/18	2016/17
	Total	Total
	£000	£000
a) Fixed Asset Investments		
Investments listed on a recognised Stock Exchange	283	286
b) Current Assets		
Interest earned on cash deposits in the year	19	28
	302	314

All investments are held within the UK

9.3 Programme Related Asset - Elizabeth Court

	2018	2018	2018	2017
	Flat 7	Flat 2	Total	Total
Market Value at start of Year	141	90	231	90
Additions	0	0	0	141
Net (Loss) Gain on revaluation	0	0	0	0
	141	90	231	231
Historic Cost	141	63	204	204

9.4 Fisher House - Leasehold Property	2018	2017
	Total	Total
	£000	£000
COST	3,724	3,724
Additions	0	0
Disposals	0	0
	<u>3,724</u>	<u>3,724</u>
ACCUMULATED DEPRECIATION		
As at 1st April 2017	1,490	1,117
Charge for the year	372	373
Disposals	0	0
Depreciation as at 31st March 2018	<u>1,862</u>	<u>1,490</u>
Net Book Value as at 31st March 2018	<u>1,862</u>	<u>2,234</u>

All investments are held within the UK

10 Analysis of Current Assets (Debtors)

10.1 Amounts falling due within one year:	2017/18	2016/17
	Total	Total
	£000	£000
Assets held for sale (Leaseholds)	<u>18</u>	<u>24</u>

10.2 Amounts falling due within one year:	2017/18	2016/17
	Total	Total
	£000	£000
Trade debtors	90	78
Accrued income	399	246
Prepayments	94	88
Total debtors falling due within one year	<u>583</u>	<u>412</u>

10.3 Cash at Bank and in Hand	2017/18	2016/17
	Total	Total
	£000	£000
Cash	<u>4,879</u>	<u>4,687</u>

10.4 Stock held for sale	2017/18	2016/17
	Total	Total
	£000	£000
Stock	<u>20</u>	<u>0</u>

11 Creditors	2017/18	2016/17
	Total	Total
	£000	£000
Amounts falling due within one year:		
Trade creditors	1,132	288
Accruals	229	181
Total creditors falling due within one year	<u>1,361</u>	<u>469</u>

12 Contingent assets – legacy income

As at 31 March the charity had been notified of eleven legacies, the value of which cannot be ascertained with accuracy, all being a share of a residue amount.

13 Liabilities and Provisions	Charitable Expenditure	Other Expenditure	2018 Total	2017 Total
Movements during the year	£000	£000	£000	£000
Opening Provisions	3,305	0	3,305	3,013
Add: New provisions charged in the year	4,556	0	4,556	1,855
Less: Provisions released in the year	(1,871)	0	(1,871)	(1,439)
Change in value of brought forward provisions	(974)	0	(974)	(124)
Provisions outstanding at end of year	<u>5,016</u>	<u>0</u>	<u>5,016</u>	<u>3,305</u>
Provisions Payable within one year	3,901	0	3,901	2,612
Provisions payable after more than one year	1,115	0	1,115	693
Provisions outstanding at end of year	<u>5,016</u>	<u>0</u>	<u>5,016</u>	<u>3,305</u>

Provisions included in the accounts relate to grants payable, (charitable expenditure for both years) which have been approved by the Trustees but not yet paid.

14 Commitments

Trustees have entered into arrangements with future commitments as follows:

	2018 Land & Buildings	2018 Other	2017 Land & Buildings	2017 Other
	£000	£000	£000	£000
Expiring within a year				
Finance SLA	<u>0</u>	<u>134</u>	<u>0</u>	<u>134</u>
	<u>0</u>	<u>134</u>	<u>0</u>	<u>134</u>
Expiring between 2 - 5 years	0	0	0	0

15 Transfers Between Funds

There have been two transfers between funds during the year, one from the restricted Hollier Legacy fund for £430k, which relates to a grant made for the Partnership Learning Centre and Education Centre, and one into Get Ahead for £31k to cover a salary sponsorship (2016/17 nil).

16 Analysis of Charitable Funds**16.1 Restricted Funds**

	Balance 1 April 2017 £000	Incoming Resources £000	Resources Expended £000	Transfers £000	Gains and Losses £000	Balance 31 March 2018 £000
A Hear and Now	22	1	(1)	0	0	22
B Get Ahead	35	3	(30)	31	0	39
C Hollier Legacy		1,679	(11)	(430)		1,237
Total Restricted Funds	57	1,683	(43)	(399)	0	1,298

The objects of the restricted funds are as follows

- A** For the cochlear implant programme.
- B** Funds used to purchase wital equipment, education and research into cancer and other head and neck diseases.
- C** To fund a lecture room to be names in memory of Harry Hollier and the training and education of junior doctors at Good Hope Hospital.

16.2 Unrestricted and Designated (Earmarked) Funds

The Trustees set a balance (opening or closing) of £110,000 or above as the threshold for reporting material designated funds. In the interest of accountability and transparency a summary of all designated funds is available upon written request.

	Balance 1 April 2017 £000	Incoming Resources £000	Resources Expended £000	Transfers £000	Gains and Losses £000	Balance 31 March 2018 £000
(Earmarked) Funds						
A Friends of QE Medical Centre	324.8	0.3	(1.7)	18.2		341.6
B Oncology Research Fund	281.4	0.3	(1.0)	0.0		280.7
C Prostate Cancer	256.3	32.0	(0.4)	(14.7)		273.2
D Fisher House	250.4	244.4	(97.2)	27.8		425.4
E Online Fundraising	237.4	828.9	(9.4)	(960.6)		96.3
F Birmingham Inst Glaucoma Res	211.5	127.1	(38.7)	(233.6)		66.3
G AcceleraTED Research Prog	192.9	50.0	(260.1)	200.3		183.1
H QEHB Charity	186.2	181.8	(67.6)	(8.7)		291.7
I Endocrine Research Fund	171.4	0.0	(1.6)			169.8
J Rare Diseases Centre	168.8	6.0	(35.9)	(20.3)		118.6
K Diabetes Research Project	144.8		(17.1)	(130.8)		(3.1)
L Liver Foundation	126.1	0.5	(30.0)	43.0		139.6
M Heart Surgery & Transplantation	119.0	9.3	(7.0)	(34.4)		86.9
N Genito-Urinary Medicine Services	117.5	0.0	(2.8)	(0.2)		114.5
O Inherited Metabolic Disease	111.4	12.8	(2.4)	3.3		125.1
P Uro-Oncology Research	108.5	5.0	(0.6)			112.9
Q Ward 19 CharityFund Heartlands	0.0	317.5	(49.0)	348.3		616.8
R Good Hope Midwifery Led Unit	0.0			350.0		350.0
S Solihull General Management	0.0	249.0	(91.5)	(78.5)		79.0
T Renal Unit	0.0	174.4	(10.2)	(37.5)		126.7
U Bacteriology	0.0	132.2	(7.6)			124.6
V Other earmarked funds	6,547.2	8,837.0	(6,665.8)	927.5		9,645.9
All Funds Unrealised Gain/(Loss)	575.0				10.0	585.0
	10,131	11,209	(7,398)	399	10	14,351

**Unrestricted and Designated
(Earmarked) Funds - *continued***

The objects of the material designated funds are as follows:-

- A Funds Raised for the QE Medical Centre.
- B Research Fund - Welfare & Amenities for oncology patients and staff.
- C Funds raised to support Prostate Cancer.
- D Fisher House; Forces and Families Centre.
- E Online fundraising projects.
- F Glaucoma research projects.
- G AccerleraTED - Drugs Trial programme.
- H QEHB Charity Funds are those funds for which a donor has not expressed any specific non-binding wish and the unrestricted income accruing to the charity. These funds are applied for any charitable purpose to the benefit of the patients of University Hospitals Birmingham.
- I Endocrine related research including clinical and laboratory research.
- J Support for the Centre for Rare Diseases
- K Diabetes research projects.
- L Support for the Liver Unit.
- M Heart Surgery & Transplantation.
- N Support for the Genito-Urinary Medicine Services unit.
- O Support for the Inherited Metabolic Disease unit.
- P Support of research projects & equipment for the neurology team.
- Q For the support of haematology and oncology services at HGS.
- R To create a midwife led unit at Good Hope Hospital.
- S To support patients and Solihull Hospital.
- T To support the renal service at HGS.
- U To support the bacteriology service at HGS.
- V Other Designated Funds related to other wards and clinical departments within the University Hospitals Birmingham NHS Foundation Trust for which donors have indicated their non-binding wishes when making their generous gifts.