



**Queen  
Elizabeth  
Hospital  
Birmingham  
Charity**

**ANNUAL REPORT  
AND ACCOUNTS  
2016/17**



over and above 

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love qehb



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Over the past six years, the Charity has spent nearly £25 million, enabling the Charity to run existing activities as well as take on new and exciting projects.

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# EXECUTIVE SUMMARY

**The Queen Elizabeth Hospital Birmingham is one of the UK's busiest and best known hospitals, seeing over one million patients a year. Patients are referred to the hospital's many centres of excellence from across the UK.**

QEHB Charity continues to support the hospital by raising funds to purchase equipment and facilities not normally seen in NHS hospitals, funding research at the University of Birmingham, and providing those little extras that make a stay in hospital just that little bit easier – from pizza night on the Teenage Cancer Trust Young Person's Unit, to memory lane cafes for our elderly patients.

This year saw the Charity incorporate as a charitable company limited by guarantee under the new charity registration number 1165716. Previously, the Charity operated under the Charity registration number 1093989. Throughout this report, when we refer to Queen Elizabeth Hospital Birmingham Charity, we are referring to the history of both charity registration numbers.

Over the past six years, the Charity has spent nearly £25 million, enabling the Charity to run existing activities as well as take on new and exciting projects.

Fisher House, the "home away from home" for military patients and their families, has now been a safe haven for over 2,600 patients and family members in the four years since it opened in June 2013 and has provided over 15,000 nights' accommodation. We estimate that Fisher House has helped to save patients and families over £1.5 million in accommodation and support costs since it opened.

Karen's Home from Home, opened in December 2014, provides accommodation for the families of bone marrow transplant patients who are having their transplant at the Queen Elizabeth Hospital Birmingham – Europe's largest organ transplant centre. Over

two hundred people have benefitted from this two bedroom facility, providing over 1,500 nights' accommodation, and a third property, SACA's Home from Home, is currently being refurbished and will be used for the families of children and teenagers being treated for cancer.

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 Ladies Fighting Breast Cancer, The Get A Head Charitable Trust and the Friends of Queen Elizabeth Medical Centre. In partnership with these organisations, we have continued to fund our ground breaking research programme into repurposing out of patent drugs for new cancer treatments and have appointed Clinical Research Nurses in the fields of brain tumours and skin cancers. You can read more about these projects later in the report.

This is just a snapshot of the progress the Queen Elizabeth Hospital Birmingham Charity has made during the last year, 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.



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“All of our fundraising activities are to progress us towards one goal – supporting patients at University Hospitals Birmingham NHS Foundation Trust.”



Brian Hanson,  
Chairman, QEHB Charity

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# CHAIR'S STATEMENT

**It seems strange to be writing the first ever Chair's statement for the Queen Elizabeth Hospital Birmingham Charity (registered charity 1165716) when I have served as a Trustee of the hospital charity for 14 years and been Chair for the past nine years.**

However, this is because this year has seen a new and exciting stage in the history of the Queen Elizabeth Hospital Birmingham Charity, when it became a fully independent charity on 1 April 2016.

Prior to that, under its old charity registration number, 1093989, the Charity had been an NHS-linked charity, which meant the Charity reported both to the Charity Commission and the Department of Health.

In 2014, the Department of Health announced plans to allow hospital charities to be regulated solely by the Charity Commission if they so wished, in the hope that this would allow hospital charities to demonstrate their independence from the NHS and engage with a wider population of donors and supporters who could see that charitable funding was a true addition to the world class care provided through the NHS.

My fellow Trustees and I discussed with the senior management team at University Hospitals Birmingham NHS Foundation Trust ('UHBFT') what would be the best way forward for the benefit of patients, and as we were all in agreement that it would be best if the Charity became a fully independent charity, we converted on 1 April 2016.

The Charity now operates under a new registration number, but the general public has seen little to no change in the way the Charity is presented. The Charity has continued to be known as Queen Elizabeth Hospital Birmingham Charity and our logo, staff and Trustees remained the same.

Our main reason for undergoing this change was the belief that the new charity structure would really be able to benefit patients by hopefully increasing the amount of money we can raise and spend to provide 'over and above' items for UHBFT.

Being purely regulated by the Charity

Commission allows us to focus on our charitable activities, and to develop new relationships with donors and fundraisers.

I am pleased to say that this approach already seems to be paying dividends, as the Charity's income increased from just under £3 million in 2015/16 to just over £4 million in 2016/17.

Last year I outlined the Charity's approach to handling the personal data of our donors and fundraisers, in view of some of the media coverage surrounding charities and some dubious practices across the sector.

During the past twelve months, there has been additional negative coverage and some large fines for some of the charities that have mishandled the personal data of their donors and fundraisers.

I therefore think it is appropriate again to reassure all our donors and supporters that Queen Elizabeth Hospital 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 new Fundraising Preference Service which launched on 6 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.

The Charity is preparing for the implementation of the General Data Protection Regulation (GDPR) which will apply from May 2018, and already complies with much of the requirements.

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 throughout 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.

Over the past months we have been fortunate enough to be able to work with the organisers of Vélo Birmingham, the city's first 100 mile closed road cycle ride. Even though the ride itself does not take place until September 2017, we already have over one thousand cyclists who have signed up to ride for the hospital charity. This will be our biggest ever mass participation sporting event, and certainly shows the popularity of cycling today!

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 the co-located University of Birmingham, or simply making a patient's stay in hospital just that little bit more bearable.

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 the Queen Elizabeth Hospital Birmingham the world class facility that it is.

It is important that we can get that message out into the public eye, 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, helping us to identify ways we can benefit patients.

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.

The Trustees are also responsible for considering succession planning within the organisation, and I am delighted to announce that when my term of office as Chair of Trustees finishes on 1 February 2018, the current Vice Chair of Trustees, David Mackay, will be stepping up to the role of Chair. I wish him every success and trust he will have as much satisfaction and enjoyment in the role as I have had.

Whilst this report looks back on 2016/17, I also feel it important to note another new and exciting chapter of the hospital charity for 2017/18.



At the request of the board of Heart of England NHS Foundation Trust, the Trustees agreed to merge the hospital charity with the Heart of England NHS Foundation Trust Charitable Funds (registered charity number 1052330) on 1 April 2017.

This means that the hospital charity will now be supporting the patients of Heart of England NHS Foundation Trust, as well as the patients of University Hospitals Birmingham NHS Foundation Trust. This will involve working across Heartlands Hospital, Good Hope Hospital, Solihull Hospital and the Birmingham Chest Clinic, as well as supporting Solihull Community Services.

You can see more about the structure of the enlarged organisation at our website: [qehb.org](http://qehb.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](mailto: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.

*Brian Hanson.*



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# AN OVERVIEW

## **Charitable purpose and public benefit**

Queen Elizabeth Hospital Birmingham Charity is the working name of University Hospitals Birmingham Charity, registered charity number 1165716. It is the official charity of the Queen Elizabeth Hospital in Birmingham, which operates under the University Hospital Birmingham NHS Foundation Trust (UHBFT).

Queen Elizabeth Hospital Birmingham Charity exists for the benefit of patients at UHBFT and provides funding for support that is over and above that provided by core NHS funding.

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 Queen Elizabeth Hospital Birmingham Charity regularly monitor and review the success of the Charity in meeting its key objectives of benefiting patients at UHBFT. 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 Queen Elizabeth Hospital Birmingham Charity is its work in supporting and enhancing UHBFT's outstanding quality of clinical activity, and so this report includes some general information about UHBFT. (Until 1 April 2016, the Charity operated under its previous registered charity number 1093989)

## **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 1,000,000 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'.

UHBFT is within the top 10% of Foundation Trusts when ranked by size of turnover during the year to 31 March 2017.

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 has entered into a strategic alliance with University of Birmingham and Birmingham 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.

### 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.

KPI + status	Aim	KPI	Action
1	To raise funds so the Charity can support patients across UHBFT	Meet budgeted income target of £3,000,000	Achieved (£4,070,000)
2	To spend charitable funds to support patients across UHBFT	Meet budgeted charitable expenditure target of £2,400,000	Achieved (£3,105,000)
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 13p to raise £1 against the charity sector average of 25p. QEHB Charity in the top quartile for minimising costs.
4	To maximise how much per £1 spent is spent on charitable activities	Amount per £1 spent 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. 86p 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 72% from 69%.
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 19% 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 1.1 days per employee against charity sector average of 8.4 days per employee.
8	Manage existing funds effectively	Investment fund total return to match or exceed the WM Charities Index.	Achieved. Total return of 15.59%. The WM Charities Index was terminated in 2016 and so a basic benchmark of RPI+4% has been used in its place for 2016/17 which was 7.1%. A new benchmark will be constructed for 2017/18.

## Plans for the future

The Queen Elizabeth Hospital Birmingham, the first new acute hospital in Birmingham for over 70 years, will help UHBFT to continue to be a focal point for world class medical care, education, training and research.

Queen Elizabeth Hospital Birmingham Charity meets with UHBFT on a regular basis and, with the help of these discussions, Trustees have identified the following areas for support:

### 1 QE Cancer Appeal

Following the success of the QE Cancer Appeal in funding a Tomotherapy TomoHD system, a CyberKnife robotic radiosurgery system and Professor Hisham Mehanna's work on accelerating drugs trials in thyroid cancer patients, the Charity has been asked to support new radiotherapy equipment for breast cancer patients.

The Align radiotherapy machines will monitor the breathing of left sided breast cancer patients, and turn on the radiation treatment only when the patient's lungs are fully inflated when they breath in, which means the heart will not be subject to radiation from the machines.

We hope that this will reduce future cardiac failure in left sided breast cancer patients from 1 in 20, to less that 1 in 1,000.

The Queen Elizabeth Hospital Birmingham Charity has identified a need to raise up to £400,000 to support UHBFT in this area.

### 2 Brain Tumours

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 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 novel 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.

The Queen Elizabeth Hospital 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.

### 3 Organ Transplants

The Queen Elizabeth Hospital Birmingham is Europe's largest organ transplant centre.

One of the constraining factors in the ability of the hospital to carry out organ transplants is the number of suitable organs that can be used for transplants.

UHBFT has identified a number of technological innovations that could allow the number of organs available for transplant to rise, and to improve the quality of those organs prior to transplantation.

The Charity is working with leading clinicians across the transplant groups, including Mr Aaron Ranasinghe (heart transplant surgeon), Mr Thamara Perera (liver transplant surgeon) and Mr Andrew Ready (kidney transplant surgeon) to identify which equipment would be most beneficial for patients and how they can be funded.

The Queen Elizabeth Hospital Birmingham Charity has identified a need to raise up to £750,000 to support UHBFT in this area and has launched a fundraising appeal for "Heart in a Box", a machine that can keep the heart beating outside of the human body prior to transplant, which has the potential of increasing heart transplants by over 30%.

### 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.

Queen Elizabeth Hospital 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 the Queen Elizabeth Hospital, and how you can play a part, please contact Queen Elizabeth Hospital Birmingham Charity at: [charities@uhb.nhs.uk](mailto:charities@uhb.nhs.uk)

You can also visit our website at: [qehb.org](http://qehb.org) or our Fisher House website: [fisherhouseuk.org](http://fisherhouseuk.org)

If you would like to know more about how we operate, both administratively and for fundraising, please contact the Chairman of the Trustees of the Queen Elizabeth Hospital Birmingham Charity, whose details are at the end of his statement on page 9.

Alternatively, you can contact Mike Hammond, the Chief Executive of Queen Elizabeth Hospital Birmingham Charity, on 0121 371 4852 or [mike.hammond@uhb.nhs.uk](mailto:mike.hammond@uhb.nhs.uk), or by writing to:

Mike Hammond,  
Chief Executive,  
Queen Elizabeth Hospital Birmingham Charity  
5th Floor Nuffield House,  
Queen Elizabeth Hospital,  
Edgbaston,  
BIRMINGHAM B15 2TH



# EQUIPMENT

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 provides world class medical care for its 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 2016/17, Queen Elizabeth Hospital Birmingham Charity spent £542,000 on new equipment. [2015/16: £1,374,000].

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

Designated Fund	Equipment	£
QEHB Charity	NexStim Neurosurgery Brain Navigation System	135,000
QE Breast Cancer Appeal	Digital Mammogram	125,630
	Mobile Mammogram Trailer	121,915
QE Eye Appeal	Spectralis eye-tracking equipment	31,616
QEHB Charity	Mauna Kea Technology	77,315
	Fibrosan machine	59,950

case study

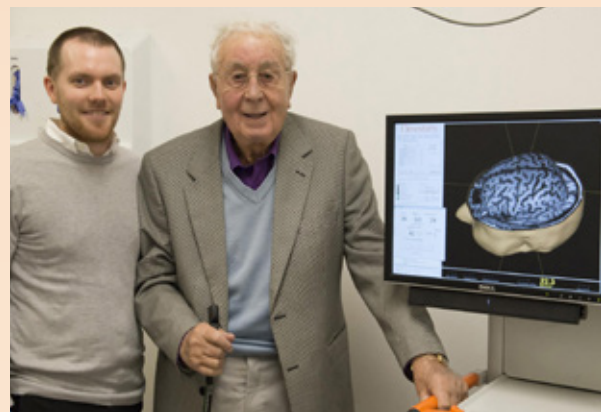
## NexStim neurosurgery brain navigation

Thanks to a generous donation from Sir Doug Ellis (pictured), the Charity bought a NexStim Navigated Brain Stimulation brain scanner – making the QE's neurosurgery department the first in the UK to purchase one.

The innovative device allows doctors to perform a presurgery brain scan on their patients, which they then use during the operation as a 'map' of the patient's brain.

This is much safer and more accurate than the only current alternatives for this type of brain surgery, which include an awake craniotomy, wherein the patient remains conscious, while the surgeon operates on their brain, and is asked to sing or speak throughout so that the doctor knows they haven't 'gone too far'.

Mr Ismail Ughratdar, consultant neurosurgeon at the hospital. said: "Having access to NBS will be an invaluable addition to



neurosurgery at the QE.

"Because the scan is a non-invasive and a relatively quick and easy procedure, this will undoubtedly improve the experiences of patients, both in terms of the safety of the operation and the recovery time required after surgery. It will reduce the risk of strokes or patients losing the ability to speak."

## Birmingham is tickled pink with arrival of new breast cancer screening unit

Ladies Fighting Breast Cancer (LFBC) and Queen Elizabeth Hospital Birmingham (QEHB) Charity are improving breast cancer services in the city, with the arrival of their jointly-funded mobile mammogram unit.

Purchased by the two charities, the new mobile mammogram unit has arrived at Broad Meadow Heath Centre in Kings Norton. This screening facility cost £250,000 and boasts leading x-ray facilities that will be used by hundreds of women a week, helping to not only detect breast cancer earlier but also promote self-examination in the local community.

The new mobile mammogram trailer enables the hospital to take their screening out into local areas like Kings Norton and ensure that women are attending their appointments.

There are so many reasons that people might not attend, from geography and time restraints through to just plain old fear, but

research shows just how important it is to get checked and find these things as early as possible. This screening unit helps make it as convenient as possible for people but also remove some of that fear.

The charities pride themselves on delivering services that are over and above that provided by the NHS and this unit is no different. Its pink exterior makes it the first of its kind in the UK, moving away from the typically cold and sterile screening units, with a welcoming relaxation area complete with a top spec interior, private consultation room, and dual changing rooms.

Attending hospital can be quite daunting for many people, which is why the charities are so pleased to be able to help make it easier than ever for local women to be screened out in their neighbourhoods rather than having to travel to the hospital.

## My Life Dementia Units

Being in hospital can be stressful at any age, but an increasing number of our elderly patients are also suffering from dementia.

The Charity has worked in conjunction with the nursing teams on the elderly care wards to identify equipment that should help support our patients with dementia, and has brought interactive software units to wards throughout the hospital. QEHB Charity is helping to provide comfort and support for patients with dementia, not just on the wards specifically dedicated to elderly care, but wherever in the hospital they may be receiving treatment.

The My Life Software units consist of special touchscreen monitors which patients can use to play games, view popular video clips from days gone by, and create personal interactive 'life stories', using the patient's own photos, with the help of staff and families.

The units also include a useful 'hear me' function to help patients who may struggle

with verbal communication to speak to staff. They are lightweight and portable, making it easy to take the software to the patient.

A stay in hospital for a person living with dementia can be a confusing and potentially frightening experience. The My Life Software has been developed by carers to help patients with dementia communicate and interact with staff and loved ones – they are so valuable to wards at QEHB and the patients being treated there.

While we have a couple of wards at the hospital that specialise in the treatment of elderly patients, many of whom have dementia, the reality is that people with dementia can be admitted to hospital with any condition or injury, meaning frequently they will be staying on a ward that does not specialise in dementia and may be the only person on that ward with the condition.

Because of this, the Charity has provided My Life units across many wards at the hospital.

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# RESEARCH

An important part of the Charity's charitable grants programme is funding research at UHBFT and the University of Birmingham. 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 Accelerated 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.

In total Queen Elizabeth Hospital Birmingham Charity made research grants of £1,352,000 in 2016/17. (2015/16: £1,024,000). Some of our research grants are outlined in the case studies below.

case study

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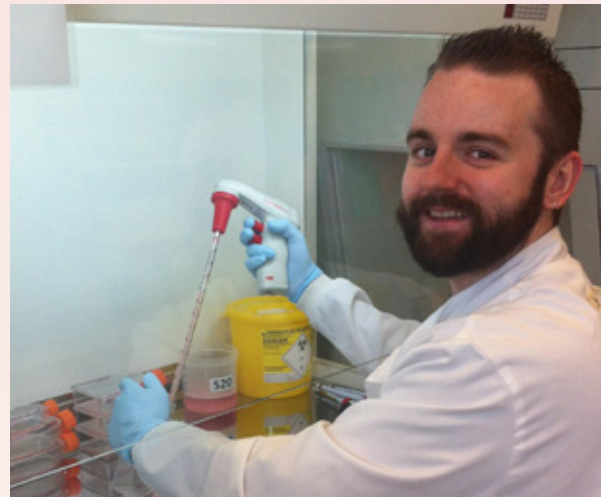
## Liver Research Fellow

QEHB Charity has funded a new Research Fellow, Dr Daniel Patten, who is undertaking vital research to help liver patients access treatment before their diseases develop.

Now in-post as a QEHB Charity-funded Research Fellow at the University of Birmingham, Daniel, who lives with his fiancée Amy, has recently started to study a relatively rare form of cancer, known as neuroendocrine tumours (NETs), which often originate in the gut and liver.

He said: "Liver inflammation is a key driving force in all chronic liver diseases; however, the processes involved are still not fully understood. I am currently continuing work on a promising project which has potentially identified a new target for limiting inflammation of the liver and slowing the progression of chronic disease. I have also started working on a new project which aims to increase our knowledge of NETs.

"NETs usually occur in older patients and are typically slow to spread to other parts of the body, so the research world hasn't previously viewed this condition as a priority, compared to more aggressive cancers. Nevertheless, the condition is often very debilitating to the patients and we are trying to increase our scientific knowledge of liver-originating NETs, by finding out what the tumours consist of and



which types of cells are present. The end goal is to identify therapeutic targets for patients and to find ways of preventing the tumours from developing."

"I'm very grateful to QEHB Charity for funding my position, and to everyone who has donated. Without their help, I wouldn't be able to support patients with my research. When experiments work and you get to see something that no one has seen before, there is no greater feeling. Added to this is the knowledge that you are one step closer towards benefitting patients whose diseases, before this research, would have been very difficult to treat."



# AcceleraTED research programme

case study

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 licenced 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.

By 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 could receive new treatments within the next two years, speeding up the process of recovery for patients and cutting the cost to the NHS.

As part of the AcceleraTED 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 33-year-old who has studied and lived in Birmingham for the past 13 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.



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# FACILITIES

As well as funding equipment and research, Queen Elizabeth Hospital Birmingham Charity sometimes funds improvements to buildings or even completely new facilities. In 2016/17 the Charity spent £378,000 in this category. (2015/16 £311,000)

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 bone marrow transplant patients through Karen's Home from Home, which is kindly funded by the Karen Morris Memorial Trust.

case study

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## Charities unite to provide families of blood cancer patients with Karen's Home from Home

When someone you love needs to spend an extended period of time in hospital, often far from home, the last thing you want to have to worry about is where you're going to stay in order to be with them during their treatment. QEHB Charity and the Karen Morris Memorial Trust teamed up to provide the families of patients with blood cancer, such as leukaemia, with free-to-use accommodation a short walk from the Queen Elizabeth Hospital Birmingham, opening Karen's Home from Home.

The Karen Morris Memorial Trust was set up in 1999 to continue the fundraising legacy of Karen Morris, a 23-year-old student at Warwick University, who passed away in September 1998 following a year-long battle with chronic myeloid leukaemia. The KMMT aims to provide Karen's Homes from Home for leading haematology departments across the UK, with QEHB's (based down the road at Elizabeth Court) being the fourth such home.

Since it opened in December 2014, many patients and their families have benefitted from the facilities. D Houghton, from Stoke on Trent, said of Karen's Home from Home: "I used your apartment in Birmingham when my husband was in the hospital for a stem cell transplant. He had acute myeloid leukaemia. I was in the apartment for three of the six



weeks he was in hospital and it made a great difference – beautiful, well-equipped and, most importantly, close to the hospital."

Sylvia Morris, Karen's mother and chairperson of KMMT, added: "While nothing can ease the pain of losing my Karen, feedback from users of our facilities really is a source of encouragement and strength for our work to continue Karen's legacy."

## Fisher House UK

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

Families and patients stay all year round – even at Christmas.

The wife of an Afghanistan veteran who lost both legs while serving his country has stayed at Fisher House a lot during her husband's treatments.

Lance Corporal Callum Brown, from Ayr, Scotland, was serving in the British Army when he was deployed to Afghanistan in 2010, at the age of just 22. One day, 28 January 2011, just before he was due to take two weeks' leave before returning to finish his tour, Callum's life was changed when he was out on foot patrol in Helmand.

Walking down a roadside as part of his patrol, Callum unintentionally trod on a hidden roadside bomb, an IED (Improvised Explosive Device). The bomb exploded with devastating force, and Callum sadly lost both of his legs as a result, sustaining other injuries including a shattered pelvis in the same blast.

Thanks to the bravery of his fellow soldiers, Callum was able to be flown from Camp Bastion to the Queen Elizabeth Hospital Birmingham, where the Royal Centre for Defence Medicine is based.

Over the following six years he has had to return countless times to receive treatment, both for the serious injuries he sustained and an infection he later developed as a result.

Supporting Callum over the last six years along with the rest of his family has been his wife, 28-year-old Laura Brown (pictured), who married Callum while he was still recovering in hospital in April 2011.

Laura says: "We've been in hospital a lot over the last six years – this is the third time this year alone, and we've been in nine weeks so far on this occasion. Since Fisher House has been around, I can stay there now while Callum's in hospital, and both of our parents and other family members are able to come and stay with me when they can as well.



"It feels really homely; it's a beautiful house but having the staff and other residents there to support you is really important too. After a difficult day, there's someone to talk to, and when Callum's having a hard time it helps so much.

"When he's feeling up to it, Callum comes down from the ward sometimes too and it's just so nice to spend time together in a home setting rather than in a hospital ward. It gives you a sense of normality in a way."

The couple spent Christmas in Birmingham, as Callum's treatments couldn't be put on hold, and this is the first year they will celebrate the holiday in Fisher House.

Laura continues: "I think it's so important for military families to be able to stay together while their loved one is recovering from a life-changing illness or injury. Obviously it's a long way to travel from Scotland to Birmingham and back, and having Fisher House available just means there's one less thing to worry about.

"Christmas time in particular is family time, and without Fisher House I honestly don't know if we'd be able to see each other at Christmas – I suppose I'd have to stay in a hotel. When you sit back and think about it, I really don't know what I'd do without Fisher House."

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# 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 that the Charity does not fund statutory training – that is, training that the NHS should provide to all staff.

Queen Elizabeth Hospital 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 2016/17, Queen Elizabeth Hospital Birmingham Charity spent £658,000 in this category. (2015/16 £362,000).

*case study*

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## Trees 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.

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.qehb.org/trees](http://www.qehb.org/trees)).

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# End of life Clinical Nurse Specialist

case study

When caring for patients with a life-limiting illness in their last days of life it is important for staff to feel confident when speaking sensitively and appropriately about death and supporting patients and families through an incredibly difficult time.

QEHB Charity is now funding a Clinical Nurse Specialist in End of Life Care, Fiona Dakin, whose role is to work with clinical and non-clinical staff across the Trust to enhance their skills. Fiona provides guidance and support to help improve staff members' confidence when it comes to communicating sensitive and, at times, devastating information. This means empowering staff to feel comfortable having difficult conversations and using the words 'death' and 'dying', recognising when families need additional support, and ensuring that staff are up-to-date with End of Life Care training resources.

Fiona has worked at the QE for 23 years, previously having worked as a site manager and prior to that as Lead Nurse for Urgent Care & Acute Pain. In her new role, she draws on her experience, knowledge and skills to work alongside nurses and doctors in the ward areas. When necessary, she can also signpost staff to resources like the Specialist Palliative

Care Team and the Chaplaincy to ensure that the physical, psychological and spiritual needs of the patient are all met.

Fiona says "I'm really enjoying working with ward teams to improve and enhance care for patients with life-limiting illnesses. Obviously it's an immeasurably difficult time for the person who is dying and for their loved ones, and it can be hard for staff too, who want to be able to support those in their care in the best way but might not have the confidence to have those conversations. It's very rewarding being able to empower staff across the Trust to develop their End of Life Care knowledge and skills.

"It's not just about caring for a patient in the last few days of their life – we want to encourage people to have these conversations as early as possible."

Mike Hammond, Chief Executive at QEHB Charity, added: "We know that when it comes to caring for someone who is nearing the end of their life, there's only one chance to get it right, for them and for their loved ones. We're really pleased to be able to fund Fiona for the benefit of patients and families, and hopefully help to make an impossibly difficult situation a little bit easier."



# HOW WE ARE FUNDED

The Queen Elizabeth Hospital Birmingham Charity continues to use money donated in previous years to provide the level of grants made in 2016/17, 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.

## Fundraising

Queen Elizabeth Hospital 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 [qehb.org](http://qehb.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.

Since 1 April 2017, our website has also featured information on the hospitals we support at Heart of England NHS Foundation Trust. The website is also available at [heft.org.uk](http://heft.org.uk).

Our Fisher House specific website is at [fisherhouseuk.org](http://fisherhouseuk.org). We would welcome feedback on our websites from donors and fundraisers.

You can also follow the Charity on social media – on Twitter @QEHBCharity and on Facebook at [facebook.com/qehbcharity](https://facebook.com/qehbcharity).

People taking part in sponsored events can also raise funds through our dedicated Queen Elizabeth Hospital Birmingham Charity pages on the online giving site: [justgiving.com/qehbcharity](http://justgiving.com/qehbcharity).

Fundraisers supporting Fisher House can use a tailored giving site: [justgiving.com/fisherhouse](http://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 Queen Elizabeth Hospital Birmingham Charity and can be contacted by email at [charities@uhb.nhs.uk](mailto: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 Queen Elizabeth Hospital 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.

# Our supporters

## Queen Elizabeth Hospital Birmingham

- ★ Birmingham Publicity Association
- ★ Weightmans

## The Giles' Trust

- ★ Stine and Ashley Giles
- ★ Sir Doug Ellis

## Breast Cancer

- ★ Ladies Fighting Breast Cancer

## Cancer Immunology & Immunotherapy Centre

- ★ The Parnell family

## Fisher House

- ★ Help for Heroes
- ★ SSAFA
- ★ TroopAid
- ★ Warwickshire County Cricket Club
- ★ Royal Marines Association
- ★ 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
- ★ BAE Systems Ltd
- ★ Henry Wong Cantonese Restaurant

## Karen's Home from Home

- ★ Karen Morris Memorial Trust

## SACA's Home from Home

- ★ Sikh Arts & Cultural Association (SACA)

## Neurology

- ★ Nisa

## citizenAID

- ★ TyTek Medical
- ★ Royal College of Surgeons Edinburgh
- ★ British Medical Association

## Elderly Care

- ★ TSB Bank
- ★ Santander Foundation
- ★ Birmingham Pragati Mandal
- ★ Birmingham Hospital Saturday Fund
- ★ Guru Nanak Nam Ladies Jatha
- ★ Persimmon Homes

## QEHB Cancer Appeal

- ★ Get A Head Charitable Trust
- ★ Stan Bowley Trust
- ★ Mohammed Akhtar and friends

## QEHB Fighting Skin Cancer

- ★ Kevin Giddins and friends

## Liver Foundation UK

- ★ Tony Fox and friends
- ★ Paul Cunningham and friends

## Radiotherapists endure mud, sweat and tears for QEHB Charity

A team of sporty radiotherapists at QEHB bravely tackled an extreme endurance challenge to raise money for QEHB Charity.

The team, which includes radiographers Chris Sharpe, Brogan Hadland, Alice Stanford, Helen Joyce, Hayley Carruthers, Perrie Mortiboys, Katie Thorpe, Nawaaz Ibrahim and Harrison Smith, competed in the X-Runner Wild Warrior, in Derby.

The 10k obstacle race included over 70 obstacles, from balance beams and giant walls, to cargo nets and fire.

Chris Sharpe, who has worked at QEHB for just over a year, said: "We all work in QEHB's radiotherapy department, so we decided to raise money specially for patients on our department, to help improve their overall experience whilst at hospital."



## Henry Wong

Generous Cantonese restaurant Henry Wong of Harborne kindly announced Fisher House, a 'home away from home' for military patients and their families based at the QE, as its chosen charity for 2016/17.

Help from businesses like Henry Wong of Harborne is integral to the running of Fisher House, as it solely relies on funds from charitable donations.

It was a perfect fit for Henry Wong of Harborne owner, Parm Rai, who has a long history in supporting Birmingham-based charities.

Commenting; "First and foremost I wanted to support a charity local to the restaurant in Harborne. Mike Hammond from Fisher House regularly visits Henry Wong and has, on occasion, brought along some of his patients to dine with us, as part of their reintegration to society.

"I, like many, feel indebted to these military personnel who have literally laid their lives on



the line for us, so I could think of no worthier charity to support this year."

The restaurant held three special menu and wine-tasting events where the whole restaurant was given over to guests supporting Fisher House, and raised over £17,000



## Law firm raises over £9,000

In 2015, the Birmingham office of national law firm Weightmans selected QEHB Charity to be its charity partner for 18 months, and during this time the firm has been busy raising money in a variety of ways, including an intense WOLF run, daring skydives, office raffles and a fun-filled summer fayre!

Teams from Weightmans also regularly volunteered and sold official merchandise at QEHB Charity atrium stands to raise money for the hospital.

The generous group came to the end of their period of support in November 2016 by which time they had raised over £9,000 in total.



Thank you to everyone at Weightmans for their fantastic continued support, which is helping us to continue to support patients at QEHB. Well done Weightmans!

case study

## Legacies

Historically, legacies have been a major source of funding of Queen Elizabeth Hospital 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.

Queen Elizabeth Hospital 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 Queen Elizabeth Hospital Birmingham Charity can recognise their vital support.

We are delighted to report that in the year to 31 March 2017 the Charity received generous legacies to the value of £997,000. (2015/16: £308,000). We would like to acknowledge the generous sums received from bequests made by the following people:

**Eric Begent**  
**Donald Bretell**  
**P V Cattell**  
**Hazel Chiles**  
**Sheila Collingwood**  
**Violet Dalley**  
**J Ellard**  
**F J Ernest**  
**Margaret Freeth**  
**Muriel Greenwood**  
**Doreen Holmes**  
**Stephen Howitt**  
**Peter Jones**  
**Lucy Mann**  
**Mary Porter**  
**Kenneth Roome**  
**Peter Rudd**  
**Doreen Slater**  
**R W Trout**  
**S Ward**  
**L T Wetherell**  
**W Whitburn**  
**Iain Wilson**  
**J F Wright**

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# GOVERNANCE

## **More about who we are and how we work**

The Queen Elizabeth Hospital Birmingham Charity is the working name of University Hospitals Birmingham 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 2016.

All activities, assets and liabilities transferred to the Charity from the old charity, University Hospital Birmingham Charities, registered charity number 1093989. The Trustees remained the same.

## **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, form the base of the charitable monies held within the umbrella group University Hospital Birmingham Charities, now known as Queen Elizabeth Hospital Birmingham Charity.

The Section 11 Trustees appointed following the Special Trustees became Section 22 Trustees in accordance with the Health and Social Care (Community Health and Standards) Act 2003, following the successful bid by the University Hospitals Birmingham NHS Trust for Foundation status in July 2004. As a result of the National Health Services Act 2006, appointment of Trustees for NHS-linked charities of Foundation Trusts is now dealt with under Section 51 of that Act and our Trustees are known as ‘Section 51’ Trustees.

From 1 April 2016, Trustees will no longer be appointed under Section 51 of the National Health Services Act 2006 and will be Trustees of a fully independent charity.

### How do we do things?

Queen Elizabeth Hospital 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 Queen Elizabeth Hospital Birmingham Charity.

The Chairman 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. The Chairman of Trustees throughout the financial year to 31 March 2017 was Brian Hanson. Detailed in the table below are all the Trustees who held office during the financial year to 31 March 2017.

Trustees who were in office throughout the year to 31 March 2017	Date of first appointment	Date when appointment expires
Brian Hanson	1 April 2016	31 March 2020
Peter Mayer	1 April 2016	31 March 2020
Andrew Pemberton	1 April 2016	31 March 2020
David Ritchie	1 April 2016	31 March 2020
Michael Seabrook	1 April 2016	31 March 2020
David Mackay	1 April 2016	31 March 2020
Ru Watkins	1 April 2016	31 March 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

**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 Age UK Birmingham 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 Non Executive Director at several companies, including West Midlands Enterprise Ltd, Gateley (Holdings) plc and Springboard Corporate Finance Limited.

**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.

**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

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 2017, UHBFT has not nominated any Trustees.

All potential Trustees must be interviewed and recommended by a panel consisting of two Trustees of Queen Elizabeth Hospital 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 Queen Elizabeth Hospital 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 Queen Elizabeth Hospital Birmingham Charity and to make recommendations to the Board of Trustees.

There is one formal sub-committee – the Finance Sub-Committee – which met once during the year 2016/17.

### Queen Elizabeth Hospital Birmingham Charity's Staff

The Charity directly employs thirteen members of staff as at 31 March 2017 (twelve as at 31 March 2016), equivalent to 10.1 full time employees (10.2 as at 31 March 2016).

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 QEHB 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 awarded the Charity Chief Executive a salary of £65,000 per annum in February 2013. The Charity Chief Executive's salary has not been increased since that date.

### Volunteers

Many hundreds of volunteers, including Fund Advisors, contribute to the work of Queen Elizabeth Hospital 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 Queen Elizabeth Hospital Birmingham Charity's designated funds.

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

Queen Elizabeth Hospital Birmingham Charity wishes to thank all its volunteers for their contribution to its ongoing work.

### Grant making structure and policy

The charitable funds that Queen Elizabeth Hospital 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 Queen Elizabeth Hospital 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).

Queen Elizabeth Hospital Birmingham Charity has no endowment funds.

- b **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.
- c **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 180 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 Queen Elizabeth Hospital 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 14 to 20).

During the financial year under review, Queen Elizabeth Hospital Birmingham Charity made grants totalling £3,203,000. (2015/16: £3,448,000)

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 Queen Elizabeth Hospital 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)

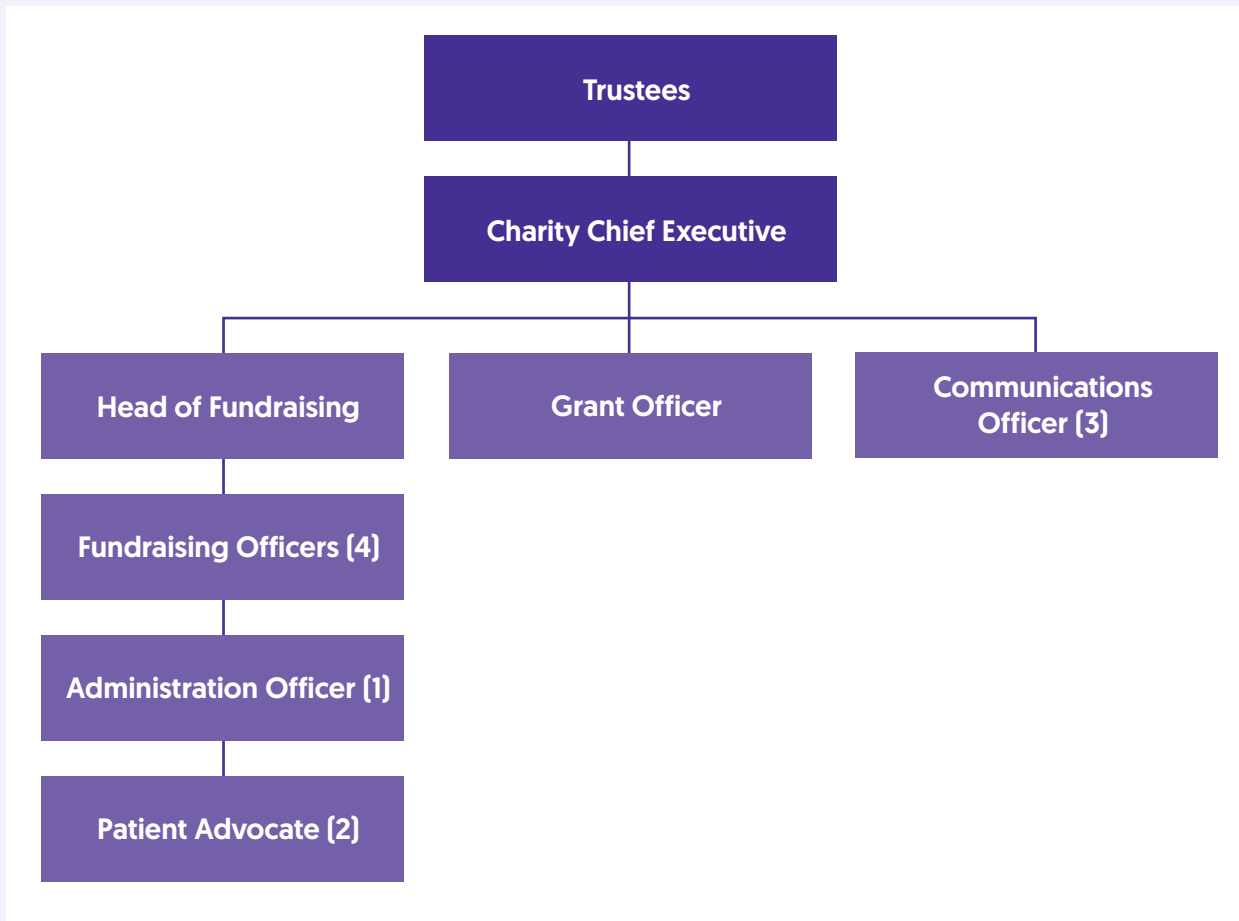
### Wider networks and related parties

Queen Elizabeth Hospital 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.

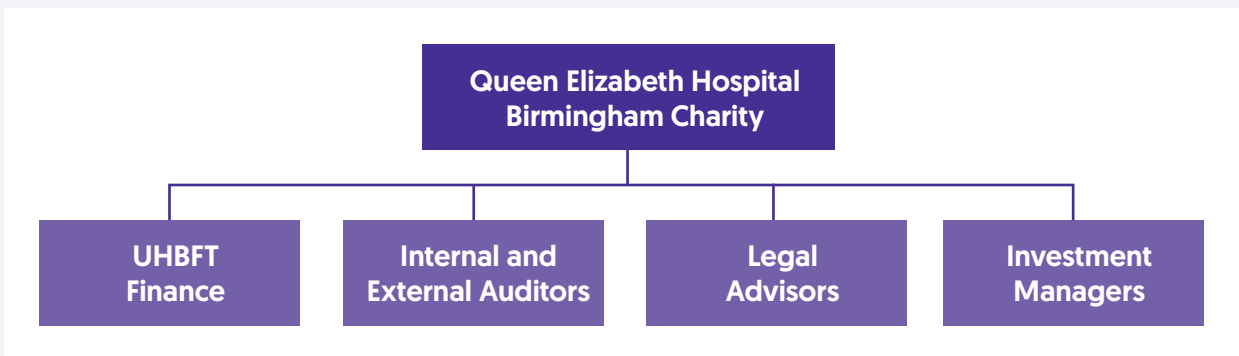
As a member, we have the opportunity to discuss matters of common concern and exchange information and experiences, join together with others to lobby government departments and others, and to participate in conferences and seminars which offer support and education for our staff and Trustees.

Queen Elizabeth Hospital 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 Queen Elizabeth Hospital Birmingham Charity and the community they serve.

**Administrative Structure as at 31 March 2017**



**External support structure as at 31 March 2017**



### Risks policy

A Risk Register, identifying the major risks to which Queen Elizabeth Hospital Birmingham Charity is exposed, and an action plan of controls to mitigate those risks is in place.

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 an income of 4% per annum and retain capital value as benchmarked against the FTSE 100 Index.

The portfolio achieved an income of 5.39% (2015/16: 4.25%) and rose in value by 8.0%, compared to the 15% rise in the value of the FTSE 100 Index.

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 and patient support.

The Trustees calculate the reserves as that part of Queen Elizabeth Hospital 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 Queen Elizabeth Hospital Birmingham Charity at the year ending 31 March 2017 were £10.189 million.

The total level of unrestricted reserves is analysed as follows:

	£
Total funds available at year end 31 March 2017	10,189,000
Less:	
Fisher House and other programme related capital assets	2,465,000
Restricted funds	57,000
Designated funds	7,480,000
<b>Total free reserves</b>	<b>187,000</b>

Trustees calculated the level of required or target free reserves after reviewing Queen Elizabeth Hospital 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*	150,000
<b>Total target reserve requirement</b>	<b>150,000</b>

\*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.

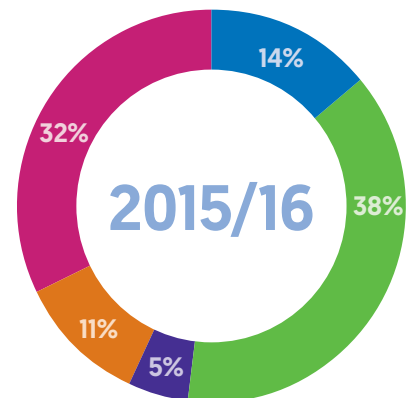
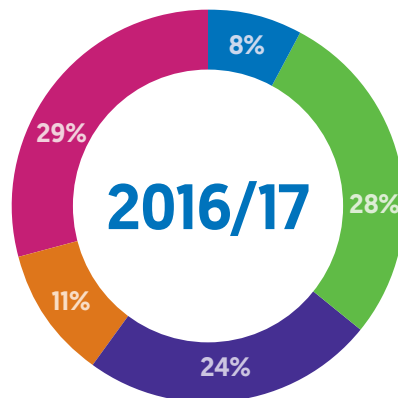
# FINANCIAL REVIEW

The full 2016/17 Statement of Financial Activities and Balance Sheet are set out on pages 39 to 40. Income during the year (primarily from donations, legacies, fundraising and

investment income) amounted to £4.07 million (2015/16: £2.92m) and expenditure in the year was £3.63 million. (2015/16: £3.91 million)

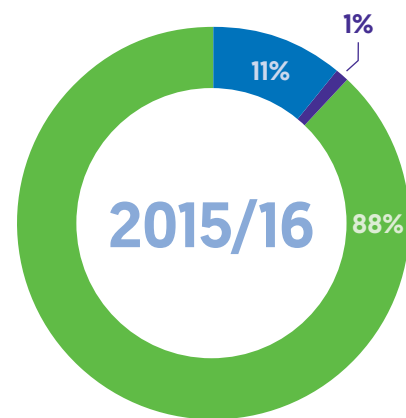
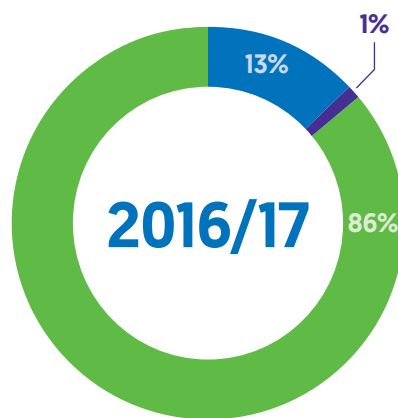
## Overall income

- Investment income
- Donations
- Legacies
- Grants
- Fundraising



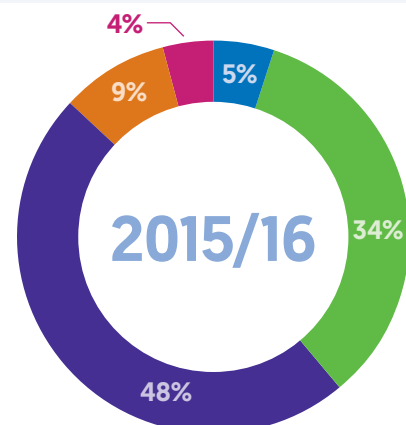
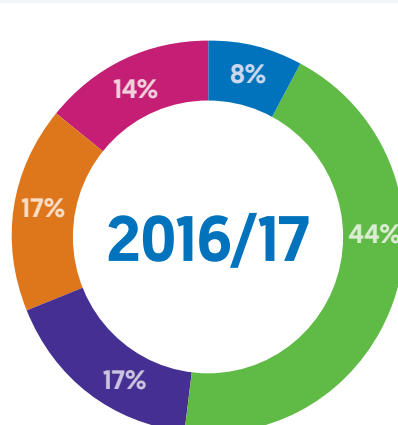
## Overall expenditure

- Costs of generating funds
- Charitable expenditure
- Governance



## Breakdown of charitable expenditure

- Patient welfare
- Medical research
- New equipment
- Buildings
- Staff education



# 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.

### 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.

.....

By order of the board of trustees

Signed:

Chairman\*  .....

Trustee  .....

Date **16 August 2017** .....

Date **16 August 2017** .....

\*The board may authorise another Trustee to sign in place of the Chairman.

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

We have audited the financial statements of University Hospital Birmingham Charity for the year ended 31 March 2017 which comprise the Statement of Financial Activities, the Balance Sheet, the Statement of Cash Flows and the related notes. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice), including FRS 102 "The Financial Reporting Standard in the UK and Republic of Ireland".

## Respective responsibilities of trustees and auditor

As explained more fully in the Trustees' Responsibilities Statement set out on page 36, 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.

Our responsibility is to audit and express an opinion on the financial statements in accordance with applicable law and International Standards on Auditing (UK and Ireland). Those standards require us to comply with the Auditing Practices Board's (APB's) Ethical Standards for Auditors. This report is made solely to the Charity'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 Charity'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 Charity and the Charity's members as a body for our audit work, for this report, or for the opinions we have formed.

## Scope of the audit of the financial statements

A description of the scope of an audit of financial statements is provided on the Financial Reporting Council's web-site at [www.frc.org.uk/auditscopeukprivate](http://www.frc.org.uk/auditscopeukprivate).

## Opinion on the financial statements

In our opinion the financial statements:

- give a true and fair view of the state of the Charity's affairs as at 31 March 2017 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.

## 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 the financial statements are prepared is consistent with the financial statements; and
- the Trustees' Report has been prepared in accordance with 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 Trustees' Report.

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

- adequate accounting records have not been kept, or returns adequate for our audit have not been received from branches not visited by us; or

- the financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of Trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit; or
- the trustees were not entitled to take advantage of the small companies exemption in preparing the Trustees' Report.

Ian Holder FCA (Senior Statutory Auditor)  
for and on behalf of Mazars LLP, Mazars LLP,  
Chartered Accountants and Statutory Auditor,  
45 Church Street  
Birmingham , B3 2RT

**Signed**

.....

**Date**

.....

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


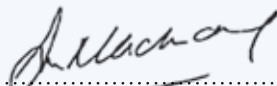
# Statement of Financial Activities for the year ended 31 March 2017

	Note	Unrestricted funds £000	Restricted funds £000	Total funds £000	Prior Year 2016 £000
<b>Income and endowments from:</b>					
Donations and legacies	3	2,871	1	<b>2,872</b>	1,809
Charitable activities	3.1	844	40	<b>884</b>	757
Investments	9.2	314	0	<b>314</b>	354
<b>Total</b>		<b>4,029</b>	<b>41</b>	<b>4,070</b>	<b>2,920</b>
<b>Expenditure on:</b>					
Raising funds:	5.1	525	0	<b>525</b>	466
Charitable activities:	5				
Medical Research		1,352	0	<b>1,352</b>	1,024
Purchase of New Equipment		515	27	<b>542</b>	1,374
New Building and Refurbishment		5	0	<b>5</b>	239
Staff Education and Welfare		421	0	<b>421</b>	362
Patient Education and Welfare		237	0	<b>237</b>	4
Fisher House Running Costs		175	0	<b>175</b>	72
Fisher House Depreciation Costs		373	0	<b>373</b>	373
<b>Total</b>		<b>3,603</b>	<b>27</b>	<b>3,630</b>	<b>3,914</b>
<b>Net income/(expenditure) for the reporting period before gains and losses on investments</b>	Table A	<b>426</b>	<b>14</b>	<b>440</b>	<b>(994)</b>
Unrealised gains (losses) on investments		701	0	<b>701</b>	(960)
Realised gains (losses) on investments		26	0	<b>26</b>	431
<b>Net movement in funds for the year</b>		<b>1,153</b>	<b>14</b>	<b>1,167</b>	<b>(1,523)</b>
<b>Reconciliation of funds:</b>					
Total funds brought forward		8,979	43	<b>9,022</b>	10,545
<b>Total funds carried forward</b>		<b>10,132</b>	<b>57</b>	<b>10,189</b>	<b>9,022</b>

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.

Trustee		Trustee	
Date	<b>16 August 2017</b>	Date	<b>16 August 2017</b>

The notes at pages 42 to 54 form part of these accounts.

## Balance Sheet as at 31/03/2017

	Note	Unrestricted funds £000	Restricted funds £000	<b>Total funds £000</b>	Prior Year 2016 £000
<b>Fixed assets:</b>					
Investments	9	6,318	57	<b>6,375</b>	7,700
Fisher House	9.4	2,234	0	<b>2,234</b>	2,607
Program Related Asset	9.3	231	0	<b>231</b>	90
<b>Total fixed assets</b>		<b>8,783</b>	<b>57</b>	<b>8,840</b>	<b>10,397</b>
<b>Current assets:</b>					
Assets held for sale	10.1	24	0	<b>24</b>	24
Debtors	10.2	412	0	<b>412</b>	516
Cash at bank and in hand	10.3	4,687	0	<b>4,687</b>	2,119
<b>Total current assets</b>		<b>5,123</b>	<b>0</b>	<b>5,123</b>	<b>2,659</b>
<b>Liabilities:</b>					
Creditors:	11	469	0	<b>469</b>	1,021
Amounts falling due within one year					
Provisions for liabilities:	13	2,612	0	<b>2,612</b>	2,443
Amounts falling due within one year					
<i>Net current liabilities</i>		<b>2,042</b>	<b>0</b>	<b>2,042</b>	<b>(805)</b>
<i>Total assets less current liabilities</i>		<b>10,825</b>	<b>57</b>	<b>10,882</b>	<b>9,592</b>
Provisions for liabilities: Amounts falling due after more than one year	13	693	0	<b>693</b>	570
<b>Total net assets or liabilities</b>		<b>10,132</b>	<b>57</b>	<b>10,189</b>	<b>9,022</b>
<b>The funds of the Charity:</b>					
Restricted income funds	16.1	0	57	<b>57</b>	43
Unrestricted funds	16.2	10,132	0	<b>10,132</b>	8,979
<b>Total charity funds</b>		<b>10,132</b>	<b>57</b>	<b>10,189</b>	<b>9,022</b>

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

Trustee   
 Date **16 August 2017**

Trustee   
 Date **16 August 2017**

The notes at pages 42 to 54 form part of these accounts.



# Statement of Cash Flows

	Note	2016/17 £000	2015/16 £000
<b>Cash flows from operating activities:</b>			
<b>Net cash provided by operating activities</b>	<b>Table A</b>	<b>343</b>	<b>(702)</b>
<b>Cash flows from investing activities:</b>			
Dividends, interest and rents from investments	9.2	314	354
Proceeds from the sale of property, plant and equipment		0	0
Purchase of property, plant and equipment	9.3	(141)	0
Proceeds from sale of investments	9	2,515	3,947
Purchase of investments	9	(463)	(4,089)
<b>Net cash provided by (used in) investing activities</b>		<b>2,225</b>	<b>212</b>
<b>Change in cash and cash equivalents in the reporting period</b>		<b>2,568</b>	<b>(490)</b>
<b>Cash and cash equivalents at the beginning of the reporting period</b>		<b>2,119</b>	<b>2,611</b>
<b>Cash and cash equivalents at the end of the reporting period</b>	<b>Table B</b>	<b>4,687</b>	<b>2,119</b>
<b>Table A:</b>			
Reconciliation of net income/(expenditure) to net cash flow from operating activities		<b>£000</b>	2015/16 £000
<b>Net movement in funds for the period</b>		<b>1,167</b>	<b>(1,523)</b>
<b>Adjustments for:</b>			
Depreciation charges	9.4	373	372
(Gains) losses on investments		(727)	529
Dividends, interest and rents from investments	9.2	(314)	(354)
(Increase)/decrease in debtors	10.2	104	(20)
Increase/(decrease) in creditors	11	(552)	315
Increase/(decrease) in provisions	13	292	(21)
<b>Net cash provided by (used in) operating activities</b>		<b>343</b>	<b>(702)</b>
<b>Table B:</b>			
Analysis of cash and cash equivalents		<b>£000</b>	2015/16 £000
Cash in hand	10.3	4,687	2,119
<b>Total cash and cash equivalents</b>		<b>4,687</b>	<b>2,119</b>

# Notes to the Accounts

## 1 Accounting Policies

### 1.1 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.

Queen Elizabeth Hospital 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 400 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](http://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 2017, is based on valuation data as 31 March 2016, updated to 31 March 2017 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 changed 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 2015/16 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 Queen Elizabeth Hospital 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 Queen Elizabeth Hospital Birmingham Charity or any related entity and the trustees have not purchased trustee indemnity insurance.

During the year no expenses for trustees were paid directly to a third party (2015/16 nil). The value of unclaimed expenses incurred by Trustees wholly and necessarily in the course of executing their Trustee duties have been calculated at £449.44 (£640.50 in 2015/16). This figure was derived by using the postcode distance Trustees have travelled to discharge their duties at the Charity at a re-imbursment rate of £0.25 pence per mile.

<b>Trustee</b>	<b>Accomodation</b>	<b>Travel</b>	<b>Training</b>	<b>Total</b>
<b>2016/17</b>				
Zero Trustee(s)	—	—	—	<b>0.00</b>
<b>2015/16</b>				
Zero Trustee(s)	—	—	—	<b>0.00</b>

### 3 Income from donations and legacies

	2016/17 funds			2015/16 funds		
	Unrestricted £000	Restricted £000	Total £000	Unrestricted £000	Restricted £000	Total £000
Donations from individuals	1,366	1	<b>1,367</b>	920	0	<b>920</b>
Donations from companies	262	0	<b>262</b>	374	0	<b>374</b>
Legacies	1,131	0	<b>1,131</b>	425	0	<b>425</b>
Grants	112	0	<b>112</b>	90	0	<b>90</b>
	<b>2,871</b>	<b>1</b>	<b>2,872</b>	<b>1,809</b>	<b>0</b>	<b>1,809</b>

#### 3.1 Income from Charitable Activities

	2016/17 funds			2015/16 funds		
	Unrestricted £000	Restricted £000	Total £000	Unrestricted £000	Restricted £000	Total £000
Income from fundraising events	<b>844</b>	<b>40</b>	<b>884</b>	<b>752</b>	<b>5</b>	<b>757</b>

## 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.

### 4.1 Analysis of Expenditure

	2016/17 funds			2015/16 funds		
	Unrestricted £000	Restricted £000	Total £000	Unrestricted £000	Restricted £000	Total £000
Salaries and Pension	104.1	0	<b>104.1</b>	101.3	0	<b>101.3</b>
Travel	0.2	0	<b>0.2</b>	0.2	0	<b>0.2</b>
Training	0.8	0	<b>0.8</b>	2.4	0	<b>2.4</b>
Office Costs	5.8	0	<b>5.8</b>	3.3	0	<b>3.3</b>
Stationery	2.5	0	<b>2.5</b>	6.6	0	<b>6.6</b>
Insurance	4.0	0	<b>4.0</b>	3.8	0	<b>3.8</b>
Annual Report	0.0	0	<b>0.0</b>	0.0	0	<b>0.0</b>
Trustee training and expenses	0.0	0	<b>0.0</b>	0.0	0	<b>0.0</b>
Professional fees	5.1	0	<b>5.1</b>	22.6	0	<b>22.6</b>
Internal Audit	10.7	0	<b>10.7</b>	9.7	0	<b>9.8</b>
External Audit	10.5	0	<b>10.5</b>	10.2	0	<b>10.2</b>
Bank Charges	0.0	0	<b>0.0</b>	0.2	0	<b>0.2</b>
Finance SLA	134.2	0	<b>134.2</b>	111.8	0	<b>111.8</b>
Other	4.1	0	<b>4.1</b>	2.7	0	<b>2.7</b>
	<b>282.0</b>	<b>0.0</b>	<b>282.0</b>	<b>274.9</b>	<b>0.0</b>	<b>274.9</b>

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 2016/17 are £68k (2015/16 £69.9k). 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.

	2016/17			2015/16		
	Grant funded activity £000	Support costs £000	Total 2016 £000	Grant funded activity £000	Support costs £000	Total 2015 £000
Medical research	1,260.9	91.0	<b>1,352</b>	938.6	85.4	<b>1,024</b>
Purchase of new equipment	499.9	41.6	<b>542</b>	1,338.6	35.6	<b>1,374</b>
Building and refurbishment	3.6	1.7	<b>5</b>	237.6	1.2	<b>239</b>
Staff education and welfare	359.7	61.4	<b>421</b>	298.7	63.3	<b>362</b>
Patient education and welfare	197.1	39.4	<b>237</b>	-41.1	45.5	<b>4</b>
Fisher House running costs	163.0	12.4	<b>175</b>	58.4	13.4	<b>72</b>
Fisher House depreciation costs	372.4	0.3	<b>373</b>	372.4	0.3	<b>373</b>
	<b>2,856.6</b>	<b>247.7</b>	<b>3,105</b>	<b>3,203.2</b>	<b>244.7</b>	<b>3,448</b>

**5.1** The remaining £34.3k support costs (£30.2k 2015/16) have been allocated to the Costs of Raising Funds on the basis of the number of transactions.

	2016/17			2015/16		
	Grant funded activity £000	Support costs £000	Total 2016 £000	Grant funded activity £000	Support costs £000	Total 2015 £000
Costs of raising funds	195.4	34.3	<b>230</b>	189.7	30.2	<b>220</b>
Costs of fundraising events	282.8	0.0	<b>282</b>	232.2	0.0	<b>232</b>
Investment management costs	12.8	0.0	<b>13</b>	14.4	0.0	<b>14</b>
	<b>491.1</b>	<b>34.3</b>	<b>525</b>	<b>436.3</b>	<b>30.2</b>	<b>466</b>



## 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.

	2016/17		2015/16	
	Number of grants	Total 2017 £000	Number of grants	Total 2016 £000
<b>Institution Receiving Support</b>				
University Hospitals Birmingham	*	2,132	*	2,214
NHS Foundation Trust				
University of Birmingham	*	625	*	987
	<b>0</b>	<b>2,757</b>	<b>0</b>	<b>3,201</b>

\* As per Scheme of Delegation

## 7 Analysis of staff costs and remuneration of key management personnel

	Total 2017 £000	Total 2016 £000
Salaries and wages	256	243
Social security costs	23	21
Other pension costs	17	16
	<b>296</b>	<b>280</b>
<b>Pension Costs are split as follows</b>		
Defined Contribution Scheme	5	5
NHS Pensions Defined Benefit Scheme	12	12
	<b>17</b>	<b>17</b>
<b>Outstanding contributions at year end were:</b>		
Defined Contribution Scheme	1	2
NHS Pensions Defined Benefit Scheme	0	0
	<b>1</b>	<b>2</b>
Average full time equivalents of employees in the year:	<b>8.9</b>	8.7
Average head count during the year:	<b>11.0</b>	9.5

The key management personnel comprise the Trustees (unpaid) and the Charity Chief Executive who was paid a salary of £65,000 plus pension contributions of £9,294. No other members of staff were paid in excess of £60,000.

## 8 Auditor's Remuneration

The external auditor's remuneration of £10,050 (2016: £10,200) related solely to statutory audit work. The Charity did not commission any additional work from the auditor (2015/16 nil).

## 9 Analysis of Fixed Asset Investments

### Movements during the year

	Total 2017 £000	Total 2016 £000
Market value at start of year	7,700	8,085
Less: Disposals at carrying value	(2,468)	(3,949)
Add: Acquisitions at cost	463	4,089
Net losses on revaluation	680	(525)
Market value at end of year	<u>6,375</u>	<u>7,700</u>
Historic cost at year end	<u>5,913</u>	<u>7,759</u>
Proceeds from the sale of investments in year	2,515	3,947

### 9.1 Market value at 31 March

	2016/17		2015/16	
	Held in UK £000	Total 2017 £000	Held in UK £000	Total 2016 £000
<b>Institution Receiving Support</b>				
Schroders Multi Asset Fund	6,358	6,358	7,683	7,683
Other Investments	17	17	17	17
	<u>6,375</u>	<u>6,375</u>	<u>7,700</u>	<u>7,700</u>

### 9.2 Total gross income from

	2016/17 total £000	2015/16 total £000
<b>a) Fixed Asset Investments</b>		
Investments listed on a recognised Stock Exchange	286	334
<b>b) Current Assets</b>		
Interest earned on cash deposits in the year	28	20
	<u>314</u>	<u>354</u>

All investments are held within the UK

### 9.3 Programme Related Asset – Elizabeth Court

	2017		2016	
	Flat 7	Flat 2	Total	Total
<b>Freehold Property</b>				
Market Value at start of Year	0	90	90	90
Additions	141	0	141	0
Net (Loss) Gain on revaluation	0	0	0	0
	<u>141</u>	<u>90</u>	<u>231</u>	<u>90</u>
Historic Cost	141	63	204	63

## 9.4 Fisher House – Leasehold Property

	2017 total £000	2016 total £000
<b>COST</b>	<b>3,724</b>	3,724
Additions	0	0
Disposals	0	0
	<u>3,724</u>	<u>3,724</u>
<b>ACCUMULATED DEPRECIATION</b>		
As at 1st April 2016	1,117	745
Charge for the year	373	372
Disposals	0	0
	<u>1,490</u>	<u>1,117</u>
Depreciation as at 31st March 2017		
	<u>2,234</u>	<u>2,607</u>
Net Book Value as at 31st March 2017		

All investments are held within the UK

## 10 Analysis of Current Assets (Debtors)

### 10.1 Amounts falling due within one year

	2016/17 Total £000	2015/16 Total £000
Assets held for sale (Leaseholds)	<u>24</u>	<u>24</u>

### 10.2 Amounts falling due within one year

	2016/17 Total £000	2015/16 Total £000
Trade debtors	78	27
Accrued income	246	404
Prepayments	88	85
<b>Total debtors falling due within one year</b>	<u>412</u>	<u>516</u>

### 10.3 Cash at Bank and in Hand

	2016/17 Total £000	2015/16 Total £000
<b>Cash</b>	<u>4,687</u>	<u>2,119</u>

## 11 Creditors

### Amounts falling due within one year

	<b>2016/17 Total</b>	2015/16 Total
	<b>£000</b>	£000
Trade creditors	<b>288</b>	851
Accruals	<b>181</b>	170
Total creditors falling due within one year	<b>469</b>	1,021

## 12 Contingent assets – legacy income

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

## 13 Liabilities and Provisions

### Movements during the year

	<b>Charitable</b>	<b>Other</b>	<b>2016</b>	2015
	<b>Expenditure</b>	<b>Expenditure</b>	<b>Total</b>	Total
	<b>£000</b>	<b>£000</b>	<b>£000</b>	£000
Opening Provisions	3,013	0	<b>3,013</b>	3,034
Add: New provisions charged in the year	1,855	0	<b>1,855</b>	1,951
Less: Provisions released in the year	(1,439)	0	<b>(1,439)</b>	(1,919)
Change in value of brought forward provisions	(124)	0	<b>(124)</b>	(53)
Provisions outstanding at end of year	<u>3,305</u>	<u>0</u>	<u><b>3,305</b></u>	<u>3,013</u>
Provisions Payable within one year	2,612	0	<b>2,612</b>	2,443
Provisions payable after more than one year	693	0	<b>693</b>	570
Provisions outstanding at end of year	<u>3,305</u>	<u>0</u>	<u><b>3,305</b></u>	<u>3,013</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:

	2017		2016	
	Land & Buildings £000	Other £000	Land & Buildings £000	Other £000
Expiring within a year	0	134	0	134
	<b>0</b>	<b>134</b>	0	134
Expiring between 2–5 years	0	0	0	0

## 15 Transfers Between Funds

There have been no transfers between funds during the year (2015/16 nil).

## 16 Analysis of Charitable Funds

### 16.1 Restricted funds

	Balance 1 Apr 2016	Incoming Resources	Resources Expended	Transfers	Gains and Losses	Balance 31 Mar 2017
	£000	£000	£000	£000	£000	£000
<b>A</b> Hear and Now	22	0	(0)	0	0	<b>22</b>
<b>B</b> Get Ahead	21	41	(27)	0	0	<b>35</b>
Total Restricted Funds	43	41	(27)	0	0	<b>57</b>

The objects of the restricted funds are as follows

**A** For the cochlear implant programme.

**B** Funds used to purchase vital equipment, education and research into cancer and other head and neck diseases.

### 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 Apr 2016	Incoming Resources	Resources Expended	Transfers	Gains and Losses	Balance 31 Mar 2017
	£000	£000	£000	£000	£000	£000
<b>A</b> Friends of QE Medical Centre	0.0	339.5	(14.4)	(1.0)	0.0	<b>324.1</b>
<b>B</b> Oncology Research Fund	282.7	0.3	(1.6)	0.0	0.0	<b>281.4</b>
<b>C</b> Prostate Cancer	2.5	253.8	0.0	0.0	0.0	<b>256.3</b>
<b>D</b> Fisher House	491.6	209.2	(110.3)	(340.1)	0.0	<b>250.4</b>
<b>E</b> Online Fundraising	167.0	120.0	0.0	(50.0)	0.0	<b>237.0</b>
<b>F</b> Birmingham Inst Glaucoma Res	152.0	126.0	(11.0)	(55.0)	0.0	<b>212.0</b>
<b>G</b> AccelerateTED Research Prog	252.1	50.0	(209.2)	100.0	0.0	<b>192.9</b>
<b>H</b> QEHB Charity	162.0	117.9	(64.3)	(28.2)	0.0	<b>187.4</b>
<b>I</b> Endocrine Research Fund	172.0	0.0	(0.3)	(0.2)	0.0	<b>171.5</b>
<b>J</b> Rare Diseases Centre	309.0	43.6	(93.3)	(90.0)	0.0	<b>169.3</b>
<b>K</b> Diabetes Research Project	162.0	4.0	(21.0)	0.0	0.0	<b>145.0</b>
<b>L</b> Liver Foundation	99.0	2.5	(20.0)	45.0	0.0	<b>126.5</b>
<b>M</b> Heart Surgery & Transplantation	206.0	59.5	(13.6)	(132.9)	0.0	<b>119.0</b>
<b>N</b> Genito-Urinary Medicine Services	137.0	0.0	(19.0)	0.0	0.0	<b>118.0</b>
<b>O</b> Inherited Metabolic Disease	132.0	1.3	(21.1)	(0.2)	0.0	<b>112.0</b>
<b>P</b> Neurology fund	115.0	0.0	0.0	(20.0)	0.0	<b>95.0</b>
<b>Q</b> QE Fighting Skin Cancer	122.0	28.0	(6.0)	(78.0)	0.0	<b>66.0</b>
<b>R</b> RCDM	124.0	6.0	(56.0)	(50.0)	0.0	<b>24.0</b>
<b>S</b> Other earmarked funds	6,043.0	2,667.5	(2,942.0)	701.0	0.0	<b>6,469.5</b>
All Funds Unrealised Gain/(Loss)	(153.0)	0.0	0.0	0.0	728.0	<b>575.0</b>
	8,978	4,029	(3,603)	0	728	<b>10,132</b>

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 Chronic Disease Resource Centre.
- 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** Support for the skin cancer department.
- R** Support for the Royal Centre for Defence Medicine.
- S** 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.

## 17 Post balance sheet events

As at 1st April 2017 the charitable funds of Heart of England Charity (RCN 1052330) are transferring their charitable funds under a deed to the University Hospitals Birmingham Charity (RCN 1165716). The value of the transfer is £8,266,177.



**Queen  
Elizabeth  
Hospital  
Birmingham  
Charity**