

Annual Report and Accounts

for the year ended 31 March 2015



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Ex-soldier and longtime QEHB Charity supporter Karl Hinett with wife Beth at the Bupa Great Birmingham Run.



Vinnay Patel, who raised over £300 for the QE Cancer Appeal with his sponsored swim.



Jo from local charity Knitted Knockers, to which QEHB Charity awarded a grant through the Sprinkle Some Magic scheme.



Yvonne Jones, Security Officer at the hospital, following her charity skydive.



Tom Meade, Damian Chana, Kionne Potter and ex-patient Dan Timmins, all of whom cycled 300 miles to fundraise for the QE.

Executive summary

It has been five years since the new Queen Elizabeth Hospital Birmingham opened its doors in June 2010, the first new acute hospital built in Birmingham for over 70 years.

The hospital is now seeing nearly one million patients a year, with patients being referred to the hospital's many centres of excellence from across the UK.

The Queen Elizabeth Hospital Birmingham 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 a teacher to enable patients on the Teenage Cancer Trust's Young Persons Unit to study for GCSEs and A-levels to memory lane cafes for our elderly patients.

For the fourth year in a row, fundraising income has exceeded £3 million, enabling the charity to continue 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 1,300 patients and family members in the two years since it opened in June 2013 and has provided over 7,500 nights' accommodation.

Encouraged by the success of Fisher House, the charity opened another facility for patients and families in December 2014, when Karen's Home from Home was launched, providing 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.

During the year, the charity raised the money to create a Centre for Rare Diseases at the hospital, which will bring together patients, clinicians and researchers in one place to treat and help find cures for many life limiting genetic illnesses and diseases.



Lisa Conley, specialist teacher for the Young Persons Unit, funded by QEHB Charity

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

We are especially grateful to US charity Fisher House Foundation and UK charity Help for Heroes for their support. Without their contributions, 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 Fisher House's running costs.

We are very pleased to have partnered with the leukaemia charity, The Karen Morris Memorial Trust, to launch Karen's Home from Home in Birmingham, which is now the fourth city in the UK to have such a facility. You can read more about this exciting new project 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.

Chairman's statement

As we celebrate the fifth anniversary of the opening of the new Queen Elizabeth Hospital Birmingham, I can't quite believe that this year also marks ten years since I was privileged enough to become a Trustee of Queen Elizabeth Hospital Birmingham Charity.

In that time I have seen many changes, but the one constant has been the wonderful care, treatment and kindness provided to the patients treated by University Hospitals Birmingham NHS Foundation Trust (UHBFT) across the original Queen Elizabeth Hospital, Selly Oak Hospital and now the magnificent new Queen Elizabeth Hospital Birmingham.

I am proud to tell people that I am the Chair of Trustees of the charity supporting the Queen Elizabeth Hospital Birmingham, and so many have been touched in some way by the care provided at UHB, whether as a patient or through a friend or family member who has received treatment here.

Now the hospital is receiving even more patients from outside the West Midlands, as it becomes known as a national and international centre of excellence. The high-profile cases of Malala Yousafzai, the teenage girl shot in Pakistan by the Taliban, and Stephen Sutton, who was treated and sadly passed away on the Teenage Cancer Trust Young Persons Unit, have brought the work of the hospital to many people's attention.

In the past twelve months, Ahmed Nawaz, the survivor of the Pakistani Army School attack, and Allison Heathcote, who received multiple gunshot injuries and tragically lost her husband in the Tunisia terrorist attack, have also been treated at the Queen Elizabeth Hospital Birmingham because of the world-leading reputation of the trauma teams here, developed through the treatment of the UK's military patients at the Royal Centre for Defence Medicine.

But it is because the Queen Elizabeth Hospital Birmingham is so successful and well-respected that the work of the hospital charity is more vital than ever.

Just five years ago, the hospital treated 600,000 patients per year. This year, that number will rise to 1,000,000 patients for the first time.

It is simply not possible for the hospital to care for and treat so many extra patients without the extra resources that the hospital charity provides. I am often asked why people should donate to a hospital charity, when surely the hospital is paid for through taxes?

It is a valid question; and, quite rightly, the costs of your medical treatment and of providing the doctors and nurses at our hospital are all met through general taxation, but I want to share some examples of how your donations are helping our medical staff provide world class care that is over and above what could normally be provided by the NHS.

Before the hospital charity purchased the CyberKnife radiotherapy treatment machine, the NHS treatment for people with brain tumours meant patients had to keep completely still during the course of radiotherapy. Just a millimetre's movement could damage healthy brain tissue. To ensure the patient didn't move, clinicians had to bolt a head clamp onto the patient to restrain them. Patients would have the clamp on for up to ten hours at a time.

I met one patient who had received treatment for a brain tumour and had to have the head clamp. Three years later, a new brain tumour was detected, and his consultant told him he would need radiotherapy again. He told me that he broke down in tears and told his consultant that he couldn't face the head clamp treatment again. When he was told that he would be having treatment on CyberKnife, and would not need any restraints, he wept again, but this time with relief.

The hospital's Outpatients Department is very busy, with thousands of patients a year going through the waiting areas. Whilst the waiting areas are perfectly pleasant and functional, they don't offer much, if anything, in the way of stimulation for patients who have learning disabilities. An Epilepsy Specialist Nurse told us about one of her patients who regularly became distressed whilst waiting for

his appointment, and his mum who knew the importance of her son receiving treatment, but struggled to bring him to hospital.

Through the Sprinkle Some Magic grants scheme, the hospital charity has created a Sensory Room in the Outpatients area for patients who find the hospital environment stressful. When I met the patient's mum after the Sensory Room was open, she told me how now her son looked forward to coming to the "pretty lights room" and that for the first time she could relax when she was in hospital rather than being stressed on her son's behalf.

Teenagers and young adults coming into hospital for cancer treatment face all sorts of obstacles; not just the medical ones, but often how to cope with their normal day-to-day social challenges.

One thing I remember being told by a teenager was that her friends didn't want to come and visit her in hospital as they didn't know what they would talk about, or what they would do in a hospital bedroom. To this young woman, the isolation was one of the worst things about her cancer.

This is why the hospital charity has been running pizza night ever since. Once a week, patients order their favourite pizza, invite their friends over, and the teenagers and young adults meet in the kitchen to socialise over pizza – just as they might at home. I've also seen conversations that the young people have with the nurses during this time that they wouldn't have felt able to have in a more formal environment – I remember one young man who had struggled to discuss his testicular cancer being relaxed enough to talk through his prognosis and future with his nurse over pizza and a can of Coke.

I have many more of these stories, from across the hospital and from the patients and families that have stayed at Fisher House. Every single one of them shows the importance of the charity's support to the patient and their family, but all of them are actually well beyond the scope of regular NHS provision.

Through your 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 the care provided by the NHS, 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 much easier because of the

wonderful support we get from local, regional and national media outlets.

Particular thanks must go to Free Radio, BBC Midlands Today, BBC Radio WM, Heart FM, ITV Central News, Birmingham Mail 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 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 support of both hospital volunteers and the numerous volunteers carrying out their own fundraising the country over.

Notably, we would like to acknowledge all the staff at the hospital who have taken part in bike rides, half marathons, skydives, and in particular the nurses who during International Nurses Week cycled the equivalent of the 1,700 mile journey from Birmingham to Crimea via static bike.

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.

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

Thank you



Brian Hanson

July 2015

An overview

Charitable purpose and public benefit

Queen Elizabeth Hospital Birmingham Charity is the working name of University Hospital Birmingham Charities, the composite name for four charities that are registered with the Charity Commission under the registered charity number 1093989. Details of the structure of these four unincorporated charities can be found later in this Report. 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.

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.



Institute of Translational Medicine



Queen Elizabeth Hospital Birmingham

The Queen Elizabeth Hospital Birmingham provides services to over 900,000 patients every year, from one-off outpatient appointments 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 2015.

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. In 2015, Birmingham Health Partners will open the Institute of Translational Medicine on the UHBFT campus.

Our Key Performance Indicators

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

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 assessed on a traffic light basis – green means the key performance

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

Key Performance Indicators

KPI No.	Status	Aim	KPI	Action
1		To ensure active participation and development of Trustees	75% attendance record for Trustees at Board Meetings	Achieved (80%)
2		Monitor investment performance	Income yield of 4% in 2014/15	Not achieved (3.76%) The income yield from the investments was low in Q3 because of a disinvestment from equities to cash to fund charitable activities. Yield in Q4 was back to the targeted 1% per quarter.
3		Monitor investment performance	Preservation of value of capital compared to FTSE 100 Index	Achieved (6% rise for investments compared to 2.6% rise for FTSE 100 index)
4		Control management of expenses	Cost of generating funds and administration kept to 20% of expenditure	Achieved (12%)
5		Monitor fundraising performance	Meet budgeted income target of £3,350,000	Not achieved (£3,173,000 total income) Underlying income without one off donations for Fisher House project increased.
6		Monitor research projects awarded grants	All research grants provide reports on activity and outcomes. Trustees see grant reviews.	Achieved. Staff ensure all research grant recipients provide a report. Formal grant review reports are tabled to Trustees at least annually.
7		Improve review process of charitable grant applications	Charitable grant applications are submitted with evidence of support from UHBFT. This allows Trustees to be comfortable that ongoing support costs for equipment etc will be met.	Achieved. All grants awarded have evidence of support from UHBFT for any ongoing support costs that are of a non charitable nature.
8		Simplification of charitable funds structure	Fund numbers to not exceed 200 individual funds	Achieved (182 funds)
9		Appropriate use of charitable funds to benefit patients	Proactively seek requests for the charity's funds and use a mixture of fundraising and reserves to provide grants.	Achieved (Grants are using a mix of fundraising income and reserves)
10		Identify fundraising appeals and direct donations in those areas to planned expenditure	Increase in giving to appeal funds	Achieved. Ongoing process of proactively identifying and launching fundraising appeals.

Plans for the future

The new 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 and a CyberKnife robotic radiosurgery system, the charity is continuing the QE Cancer Appeal in support of Professor Hisham Mehanna's work on accelerated drugs trials in thyroid cancer patients.

Professor Mehanna's work will allow thyroid cancer patients to participate in drugs trials in association with the University of Birmingham much more quickly than through traditional drugs development which can take many years to get to patient trials.

The Queen Elizabeth Hospital Birmingham Charity has identified a need to raise up to £1 million to support UHBFT in this area and has launched a fundraising appeal in association with the Get A-Head Charitable Trust.

2. Ladies Fighting Breast Cancer Appeal

The non-clinical environmental enhancements in the Young Persons Unit at the hospital, and in Fisher House, demonstrate how charitable support can enhance the patient experience.

UHBFT has identified the opportunity for the charity to work alongside the Trust to develop the Breast Cancer Service's non-clinical environment and purchase an additional mobile mammogram vehicle.

The Queen Elizabeth Hospital Birmingham Charity has identified a need to raise up to £1 million to support UHBFT in this area and has launched a fundraising appeal in association with Ladies Fighting Breast Cancer charity.

3. Centre for Rare Diseases

The Queen Elizabeth Hospital is a national centre of excellence for rare and genetic diseases, often affecting children and young adults.

UHBFT has identified the opportunity for the charity to bring together various clinical teams and departments within one physical space to create a "one stop shop" for patients and their families attending for clinics, medical research or patient support groups.

The Queen Elizabeth Hospital Birmingham Charity has identified a need to raise up to £1 million to support UHBFT in this area and has launched a fundraising appeal.

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 £0.25 million each year to run Fisher House. The Friends of Fisher House scheme allows groups, companies and individuals to support Fisher House directly.



Ladies Fighting Breast Cancer fitting a pink bra on the statue outside Birmingham Council House



Laura and Bernadette running for QEHB Charity



Kate Mansbridge and John Molesworth ran the Birmingham Half Marathon

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

You can also visit our website at www.qehb.org, our Cancer Appeal website at www.qecancerappeal.org or our Fisher House website at www.fisherhouseuk.org

If you would like to know more about how we operate, both administratively and for fundraising, please contact the Chairman of the Trustees of the Queen Elizabeth Hospital Birmingham Charity, whose details are at the end of his statement on page seven. Alternatively, you can contact Mike Hammond, the Chief Executive of Queen Elizabeth Hospital Birmingham Charity, at mike.hammond@uhb.nhs.uk or on 0121 371 4852 or by writing to:

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

What we fund

The charity funds projects in four main areas – equipment, research, facilities and training, education & 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 2014/15, Queen Elizabeth Hospital Birmingham Charity spent £1,179,000 on new equipment. (2013/14: £618,000).

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



SimMan 3G trauma simulation mannequin, funded by QEHB Charity

Designated Fund	Equipment	£
Cancer Immunology & Immunotherapy	VECTRA imaging and analysis machine	172,657
QE Eye Appeal	Spectralis HRA + OCT machine	122,000
Brain Surgery Appeal	Vertec VSIII Console system with Stereoscopic camera	89,500
QEHB Charity	3D Printer	82,840
QEHB Charity	Sim Man 3G trauma simulation mannequin	39,959
Burns Unit	Haematology Analyser	31,250
QEHB Charity	Trans-thoracic echocardiogram simulator	29,958
QE Cancer Appeal	Bio-rad equipment	15,995
QE Eye Appeal	Ultrawide field lens attachment for Spectralis machine	13,540

Equipment
Case study
one

Surgeons carry out innovative world-first liver op

Thanks to the support of QEHB Charity, surgeons at the Queen Elizabeth Hospital Birmingham have been able to save a life by transplanting a revived liver from a cardiac death donor into a patient; a world first.

Satpal Mahal, 46 from Walsall, had been suffering from problems with his liver for almost three years. His condition deteriorated and he was put on the waiting list for an anxious two months before the ground-breaking surgery at Queen Elizabeth Hospital Birmingham saved his life.

He explained: "It all happened very quickly. I got the call to say they had an organ for me at 7.30 in the morning, and by 8.30am I was at the hospital ready to undergo surgery.

"The team who looked after me were fantastic. I can't thank them enough for giving me my life back." Surgeons at the hospital were able to successfully revive the organ by pumping oxygenated blood through it using a machine called Organ Assist, which was funded by QEHB Charity.

Mr Thamara Perera, a consultant liver transplant surgeon who was part of the team involved in the operation, explained: "The operation was a huge team effort and there were a lot of people involved.

"By the time the organ reached us it had been travelling for seven hours. Usually, this would have significantly increased the risk of liver failure if the transplant was carried out the conventional way. "Thanks to the machine funded by QEHB Charity we were able to carry out a resuscitation procedure which meant the liver could still be used."

The Organ Assist machine works by constantly pumping blood at body temperature into the liver through two blood vessels in the organ. The blood revitalises the liver by taking out the coldness from being in an ice box and also nourishes it through the oxygenated blood.



Satpal Mahal (Centre) and surgical team

Other transplant centres around the world have carried out the same resuscitation technique on discarded livers, or tested similar procedures on animal models, but the team at Queen Elizabeth – which carries out around 200 liver transplants each year – are the first in the world to successfully transplant a revived liver graft from a cardiac death donor into a patient.

QEHB Charity is currently fundraising to bring another machine called a Normothermic Regional Perfusion machine (NRP) to the hospital. The NRP is a system that keeps the liver, pancreas and kidneys perfused with the donors' own oxygenated blood after circulatory death. This means the organs are healthier and less likely to be damaged than with conventional retrieval after circulatory standstill, thereby increasing the number of potential organ donors and improving the likelihood of a successful transplant.

Mr Perera said: "We are incredibly grateful to everyone who has donated to the Liver Foundation Appeal so far. We are completely dependent upon charitable donations to fund and run the NRP machine, which will be used to benefit so many patients."

Satpal added: "I can't thank the hospital or the charity enough for what they've done for me. I've already started planning different ways I can fundraise for the appeal and I can't wait to get stuck in."

Equipment
Case study
two

Charities unite to bring cutting-edge machine to hospital

Queen Elizabeth Hospital Birmingham Charity joined forces with head and neck charity Get A-Head, to bring a new 3D printer to the Queen Elizabeth Hospital Birmingham.

The cutting-edge machine will be used in the Maxillofacial department of the hospital, to treat patients undergoing reconstructive surgery.

The majority of the work carried out within the Maxillofacial Prosthetics Department is facial prosthetics, although the department covers a wide variety of disciplines, including neurosurgical, paediatrics, burns and plastics and cancer patients.

The 3D printer will greatly improve the hospital experience for patients, by creating a faster turnaround, and reducing theatre times and waiting times. A 3D printed model also allows the department to manufacture various custom-made reconstructive devices for individual patients, giving them a better quality of life after undergoing surgery.

A large donation was made by patient Peter McNeil, who donated £45,000 as a thank you to prosthetists for successfully fitting a prosthetic nose, after the removal of a large tumour.

Peter said: "I thought I'd never be normal again...I couldn't imagine living without my nose.

"The surgeons and prosthetists are miracle workers and I knew straight away that I wanted to do something to help.

"I'm delighted my donation means that more people will be able to benefit from reconstructive surgery.

The surgeons and prosthetists are miracle workers and I knew straight away that I wanted to do something to help.

Peter McNeil

"Losing a nose, eye or any body part doesn't have to mean it's the end of anything."



The new 3D printer

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 will be a much larger research grant than previously awarded by the charity, and will total £1,000,000. An initial grant of £600,000 for the first three years of this project has been awarded by Trustees.

In total Queen Elizabeth Hospital Birmingham Charity made research grants of £806,000 in 2014/15. (2013/14: £845,000). A sample of the grants can be seen in the table below.

Name of researcher	Research Project	£
Hisham Mehanna	Accelerated drugs programme	600,000
Adrian Williams	Nicotinamide as cell replacement therapy in Parkinson’s disease	20,000
Neil Steven	Merkel cell cancer	4,790

Facilities

As well as funding equipment and research, Queen Elizabeth Hospital Birmingham Charity sometimes funds improvements to buildings or even completely new facilities. In 2014/15 the charity spent £51,000 in this category. (2013/14 £1,005,000)

Please note that this figure is an accounting value, not the actual spend in cash. The figure seems low because a lot of the Fisher House running costs were recognised in last year’s accounts when the full value of contracts that last for a number of years were included as a cost to the charity.

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.

In 2014/15, the charity also launched a new project for the families of bone marrow transplant patients, Karen’s Home from Home.



One of the bedrooms for families at Fisher House

Facilities
Case study
one

Fisher House UK

Fisher House, the 'home away from home' for the UK's military patients and their families, marked its first anniversary in June 2014.

The project, a partnership between the Queen Elizabeth Hospital Birmingham Charity, American charity Fisher House Foundation and UK charity Help for Heroes, has provided 5,000 nights of free accommodation to the families of wounded and severely ill troops and veterans in its first year.

On the house's birthday current and previous residents got together with Patrick Hogan, Fisher House Manager, and military staff for drinks, a barbeque and, of course, a slice of birthday cake.



Kerry Ford being interviewed by ITV

Kerry Ford, who is pictured above being interviewed for ITV Central, stayed at Fisher House for 18 months.

She moved to the house when her husband Nobby, a Falklands veteran, suffered complications following surgery.

She said: "If I had to sum up Fisher House I would say it's my safe haven. It's the most wonderful place, making everything so much easier. When I come

It's the most wonderful place, making everything so much easier. When I come through the front door I am immediately calmer and feel I can be 'at home'.

Kerry Ford

through the front door I am immediately calmer and feel I can be 'at home'.

"Nobby and I are so grateful to everyone who has supported the house and continues to do so. It means so much to know that people who you've never met care."

Mike Hammond, Chief Executive of the Queen Elizabeth Hospital Birmingham Charity, said: "To hear stories like Kerry's underlines the importance of continued support for military patients and their families; support which can be needed for years after an injury was sustained.

"Let's also not forget those who need care but haven't been wounded in conflict. We treat Armed Forces personnel for a host of conditions from cancer to road traffic accident injuries and transplants.

Fisher House is a purpose-built two-storey property which is a short walk from the Queen Elizabeth Hospital Birmingham

Catering for people of all abilities, the home is a largely open plan property with wide connecting corridors and wheelchair-accessible lifts. There are 18 en-suite bedrooms for families of patients to stay in as well as communal living facilities including a family room and play area, lounge, kitchen, dining areas and laundry room. Outside is a private garden with space for children to play in and guest parking.

Karen's Home from Home

QEHB Charity has teamed up with the Karen Morris Memorial Trust to bring Karen's Home from Home to the Queen Elizabeth Hospital Birmingham.

The two bedroom facility offers free accommodation to the families of leukaemia patients undergoing treatment at the QE.

The Karen Morris Memorial Trust was set up in 1999 to continue the fundraising initiative of 23-year-old student Karen Morris, who sadly passed away in September 1998, just one year after being diagnosed with chronic myeloid leukaemia.

Sylvia Morris, Karen's mother and Chair of KMMT, said: "We are delighted to be able to bring Karen's Home from Home to Birmingham.

"The QE is truly at the forefront for the treatment of leukaemia. Patients come from a widespread geographic area, often involving long and complicated journeys. Karen's Home from Home Birmingham will help support these patients and their families by

offering comfortable and homely surroundings in a place that is safe and familiar.

"The Home will also offer an escape for patients who are able to leave the hospital ward, even if only for a few hours."

Karen's Home from Home Birmingham, the fourth of its kind (the others being at Hammersmith Hospital in London, the Churchill in Oxford and Addenbrooke's in Cambridge), was formally opened on Tuesday 24 March.

Mike Hammond, Chief Executive at QEHB Charity, said: "We are delighted to be able to offer this free facility to patients and their families at the Queen Elizabeth Hospital Birmingham, thanks to the generous and invaluable support from the Karen Morris Memorial Trust.

"The new facility will have a great positive impact on patients undergoing treatment at the QE and their families."



Karen's Home from Home

Sensory Room

A sensory room designed to offer comfort and support to patients with learning difficulties and epilepsy has been opened in the Outpatients Department of Queen Elizabeth Hospital Birmingham.

Supported by Queen Elizabeth Hospital Birmingham Charity, a new sensory room in Area 1 was designed to provide stimulation for patients with learning difficulties and epilepsy as they wait for clinic appointments.

Fitted with specialist equipment, including an interactive, colour-changing bubble tube, a mirror ball, a fibre optics machine and several projectors, the room will help to calm, intrigue and stimulate patients.

Epilepsy Clinical Nurse Specialist Nicole Toghill oversaw the project, with help from Audrey Kelly and Angela Turland, who work in Area 1 Outpatients. Nicole commented: "We are delighted to open the sensory room after 15 months of hard work.

"The new room will really help patients settle, which will lead to a more positive experience. I'm thrilled we're able to support patients in this way and I would like to say a huge thank you to QEHB Charity for making this wonderful room possible."

As well as naming the room 'IMADgination' after neurologist, Doctor Imad Soryal, in a touching tribute each piece of specialist equipment was named after patients who have sadly lost their lives due to epilepsy.

Doctor Soryal said: "As well as improving the experience for current and future patients, we also wanted to celebrate the memory of those patients who are no longer with us. This is our tribute to them, and to their remarkable families."

One of the specialist pieces of equipment, a 'sparkly' fibre optics machine, was named after learning disability teacher Zoe Mayne, who sadly passed away from 'Sudden Unexpected Death in Epilepsy' (SUDEP)

aged just 36. Paul Hancock, Zoe's partner, said: "It is both moving and fitting that this specialist piece of equipment has been named after Zoe. She never let her epilepsy define her or stop her from living her life to the full, and it's an honour that she has been made such a personal and important part of this fantastic facility."

Mike Hammond, QEHB Charity's Chief Executive said: "We are delighted the sensory room has been opened and we are pleased to be able to support patients with learning difficulties.

"I would like to congratulate Nicole, Angela and Audrey and the rest of the team for their hard work and commitment to providing added extras for patients."



Sensory room

Training, education and patient support

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 provides 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 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 2014/15, Queen Elizabeth Hospital Birmingham Charity spent £773,000 in this category. (2013/14 £736,000).

Training, education and patient support Case study one

Pager system makes life simpler for patients



QuietCall IQ patient pagers

Donations to the charity have helped to bring state-of-the-art patient pagers to the Queen Elizabeth Hospital Birmingham, allowing patients more freedom and independence as they wait for their appointments.

The QuietCall IQ patient pagers have been introduced to the chemotherapy and haematology day unit at the hospital, to allow patients to move away from waiting rooms if clinics are late or doctors are called to an emergency.

The QE is one of the first hospitals in Britain to begin using the state-of-the-art QuietCall IQ patient paging system in a bid to help reduce the stress of waiting times.

Patient pagers are handed out by reception staff and buzz five minutes before the patients are needed for their appointment, giving them time to get back.

Patrick Moore, GP Services Manager at Queen Elizabeth Hospital Birmingham, said: "We worked with the supplier Pager Call Systems to ensure that we provided coverage of all areas that patients may go to whilst waiting.

"The system reaches from the sixth floor right down to the lobby area and even outside. The pagers are a great addition to the department and we're delighted to be able to offer patients a better waiting experience.

"It's important to us that patients get a good balance between excellent medical care and providing a good overall experience at our hospital. Sometimes waiting times are unavoidable so being able to free patients from waiting rooms to relax over a tea or coffee improves their experience during their visit.

"We're very grateful to QEHB Charity for funding these extra innovative pieces of equipment, which really make a big difference to patients, and we plan to implement the system in other departments later this year".

Mike Hammond, Chief Executive of QEHB Charity, said: "These patient pagers are an excellent idea. They really make a difference for patients as it can be frustrating being restricted to a waiting area if there is a delay.

"This way they can go to the café or shop or just step outside for some fresh air and feel their time is being better spent than just sitting in a waiting area".

Training,
education and
patient support
Case study
two

Support groups for patients

Thanks to our wonderful supporters, we have been able to provide support for newly diagnosed patients suffering from rheumatoid arthritis and psoriatic arthritis.

QEHB Charity funded a Rheumatology Patient Education Co-ordinator and Occupational Therapist at the Queen Elizabeth Hospital Birmingham, Fiona Maggs.

Fiona, 52 from Wythall, organises education sessions for patients who have been recently diagnosed with potentially serious types of inflammatory arthritis, such as rheumatoid and psoriatic arthritis. These conditions cause the immune system to become unbalanced leading to joint swelling, pain, stiffness and joint damage.

The education sessions are designed to give patients a basic understanding of their condition as well as a chance to get to know the team at the hospital, and to meet other patients with whom they can share experiences.

Taking place on Thursday mornings from 10am – 12.30pm, each session includes talks from a multidisciplinary team. The team, including a Rheumatology consultant, clinical nurse specialist, physiotherapist, occupational therapist, dietician and pharmacist discuss many aspects of these conditions. Patients are provided with notes and are given information about other resources, including online resources that they and their families can access at home. These groups are also a great opportunity for patients to share feelings and make friends.

Fiona explained: "Being newly diagnosed with rheumatoid arthritis or psoriatic arthritis can be stressful for patients, particularly as the symptoms can be very distressing and can compromise a person's independence.



Fiona Maggs

"We hope that by the end of the sessions, patients gain an understanding of their condition and learn ways in which they can help themselves."

A patient who attended the sessions commented: "It was great to share experiences with the rest of the group and to be among professionals who understood the disease and how it feels to live with it. Overall it was an excellent experience – thank you."

Mike Hammond, Chief Executive at QEHB Charity, said: "This is a wonderful example of how the charity is able to improve care and make life easier for patients thanks to your generous donations.

"With your help we are able to fund research, facilities and equipment that are above and beyond that which is provided by the NHS. This means that as many patients as possible can receive the best possible care."

This is a wonderful example of how the charity is able to improve care and make life easier for patients thanks to your generous donations.

**Mike Hammond,
Chief Executive QEHB Charity**

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 2014/15, 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 www.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.

We also have a number of appeal specific sites that give additional information on major projects. These include the QE Cancer Appeal at www.qecancerappeal.org Fisher House at www.fisherhouseuk.org and most recently the Liver Foundation at www.liverfoundation.org.uk. These specialised websites give donors and fundraisers tailored information on our major appeals.

People taking part in sponsored events can also raise funds through our dedicated Queen Elizabeth Hospital Birmingham Charity pages on the online giving site www.justgiving.com/qehbcharity. Fundraisers supporting Fisher House can use a tailored giving site www.justgiving.com/fisherhouse.

Due to the ongoing support of Vodafone, fundraisers can now use their mobile phones to donate to the charity, either through their own fundraising page or



Dr Bear, the charity's new mascot

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 Vodafone are 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 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.

Company/Organisation	Type of support
Help for Heroes	Fisher House
SSAFA	Fisher House
TroopAid	Fisher House
Warwickshire County Cricket Club	Fisher House
1 Staffords Band of Brothers	Fisher House
Royal Marines Association	Fisher House
JVM Castings	Fisher House
Enterprise Rent A Car	Fisher House
Couch Perry Wilkes	Fisher House
Weoley Castle Working Men's Club	Fisher House
Lloyds Bank	Fisher House
Get A-Head Charitable Trust	QE Cancer Appeal
Stan Bowley Trust	QE Cancer Appeal
Mohammed Akhtar & friends	QE Cancer Appeal
Kevin Giddins & friends	Skin Cancer
Brainwaves Brain Tumour Support Group	Brain Tumours
Tony Fox & friends	Liver Foundation
Paul Cunningham & friends	Liver Foundation
Birmingham Mail & Sunday Mercury	Centre for Rare Diseases
Copt Heath Golf Club	Heart & Lung Transplant
Richardson Brothers Foundation	Neurology
Kay Kendal Leukaemia Fund	Haematology
Help Harry Help Others	The VIP Treatment Appeal
Birmingham Irish Cycle Appeal	The VIP Treatment Appeal
Nisa	Motor Neurone Disease
Shirley Golf Club	Oncology Ward
Ladies Fighting Breast Cancer	Breast Cancer
Lincolnshire Troop Support	Military patients
SPL Trust	Upper GI
Lions Club District 105M	Queen Elizabeth Hospital Birmingham
Bikers for Heroes	Queen Elizabeth Hospital Birmingham
University College Birmingham	Queen Elizabeth Hospital Birmingham
Orion Media	Queen Elizabeth Hospital Birmingham

Fundraising
Case study
one

Worldwide support for our troops

An eclectic mix of beauty queens, oil rig workers, medical military staff, troops at Camp Bastion, gym-goers and university students joined forces to take part in a gruelling 7,160 mile endurance challenge to raise funds for wounded troops.

The Birmingham2Bastion event took place over a 36 hour period, starting at 6am in the foyer of the Queen Elizabeth Hospital Birmingham.

A core team of elite military staff ran, rowed and cycled the distance military staff travel to collect injured troops from Camp Bastion and bring them back to QEHB, the receiving hospital for all British military casualties. The team used static equipment to complete the challenge in under 36 hours. The core team was joined at intervals by Royal Centre for Defence Medicine staff, including Major Andy Kempster who completed one mile in a local swimming pool, a 10 mile run and a 100 mile cycle. Also taking part at the hospital were 12 beauty queens from around the UK, university students and Queen Elizabeth Hospital Birmingham Charity staff.

I was excited to again be part of this fantastic challenge in support of the Queen Elizabeth Hospital Birmingham Charity and proud to be able to make a difference to our Armed Forces and the staff who care for them.

Rachael Barker

Participants from around the world helped to clock up the miles including staff at Camp Bastion, North Sea oil rig workers and Fitness First members.

The event was organised by Sergeant Rebekah Lincoln from the Royal Centre for Defence Medicine,



Former Miss Birmingham, Rachael Barker

in partnership with the University of Birmingham. The £10,240 raised was split between Fisher House, a 'home away from home' for military patients and their families, and the purchase of an Octane Seated Cross Trainer in the Physiotherapy department at the hospital, which will aid the recovery of wounded troops.

Miss England regional director (West Midlands) and former Miss Birmingham, Rachael Barker, said: "I was excited to again be part of this fantastic challenge in support of the Queen Elizabeth Hospital Birmingham Charity and proud to be able to make a difference to our Armed Forces and the staff who care for them. I hope to inspire others to support the wonderful work that the charity does, providing the added extras that make all the difference to patients."

Fundraising
Case study
two

Brothers raise thousands to thank QE

Two brothers have raised thousands to thank the staff at the Queen Elizabeth Hospital Birmingham for saving their mother's life.

Two years ago, 63 year old Jackie, who suffers from Sclerosis, received a live liver transplant that changed her life.

One of Jackie's sons, Andrew, donated his liver in a procedure that involved taking the right hand side (lobe) of his liver and transplanting it into Jackie. Jackie's blood vessels and bile ducts were then connected to the lobe. Following transplantation the lobe regenerated itself, growing to 85% of the size of a normal liver.

To thank the staff who cared so well for their mother, the brothers set their sights on raising as much money as possible for QEHB Charity.



The Chadwick family; Nick, mom, dad and Andrew

In April 2014, 44 year old Nick ran the London marathon, completing the 26.2 mile course in five hours, 30 minutes. Andrew, now fully recovered from the operation, also tackled an endurance challenge,

running three marathons in three days. The pair kindly handed over a cheque for £7,000 as a result of their fundraising efforts.

Andrew said: "It is almost beyond belief that medical science is now advanced enough to carry out things like live donations.

"It's a year since the transplant and our mother is active, happy and making fantastic progress.

It's a year since the transplant and our mother is active, happy and making fantastic progress

Andrew Chadwick

"It feels great to give and change a life and I hope this small contribution will help make more liver donations possible."

Nick added: "What Andrew did was incredible. This is our way of saying thank you to our mum for being so strong, and to everyone who helped keep our family whole."

Chief Executive of QEHB Charity Mike Hammond said: "We're delighted to receive such a generous donation from both Andrew and Nick. It's thanks to their support that we are able to fund extra equipment and resources that aren't provided as standard by the NHS.

"We are currently appealing for £100,000 to enable us to buy a machine which will increase the number of liver transplants we can carry out, therefore helping more patients like Jackie.

"We'd like to thank both Nick and Andrew for their donation and wish Jackie a healthy and happy recovery."

Fundraising
Case study
three

Proud to be supported by Pride of Birmingham

The Queen Elizabeth Hospital Birmingham Charity was proud to be supported by the Pride of Birmingham Awards.

The prestigious event, celebrating the city's most courageous and inspiring people, took place at Town Hall Birmingham in September and helped raise the profile of the Charity's £1m Rare Disease Centre Appeal.



Gaby Roslin with Jane Sutton, Stephen Sutton's mum

Television presenter Gaby Roslin was joined by a host of Birmingham celebrities to present awards including singer Laura Mvula, Black Sabbath's Tony Iommi and chef Glynn Purnell.

Launched by the Birmingham Mail and its sister title the Sunday Mercury, the Rare Disease Centre Appeal aims to develop a centre of excellence which will bring together multi-speciality and multi-disciplinary teams to deliver care of patients with rare diseases. It will

be based within the new Institute of Translational Medicine at the Queen Elizabeth Hospital.

Mike Hammond, Chief Executive of the Queen Elizabeth Hospital Birmingham (QEHB) Charity, explained: "It's wonderful that the 'unsung heroes' of Birmingham will get the recognition they deserve and QEHB Charity is honoured to be supported by this prestigious event.

"Our £1 million appeal is to create a Rare Disease Centre which will give hope to patients with rare conditions and enhance the world-class facilities already offered at the hospital.

"We're working with researchers from the University of Birmingham and clinicians from Birmingham Children's Hospital to create a 'one-stop shop' for patients and their families to come for treatment and advice. Research is vital if we want to find a cure so please help us make the difference."

Dr Graham Lipkin, lead consultant for the initiative, added: "It's wonderful to see such fantastic support for what will be a world-class facility.

"To be able to perform all diagnostics and enable all clinical specialities to see a patient in one clinic will dramatically reduce visits and greatly improve care. In addition patients will have the opportunity to access research – something which is key for patients when surveyed by Rare Disease UK."



Legacies

Historically, legacies have been a major source of funding of Queen Elizabeth Hospital Birmingham Charity. We 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 2015 the charity received generous legacies to the value of £969,000. (2013/14: £336,000). We would like to acknowledge the generous sums received from bequests made by the following people:

Donors

S A Archer

Walter Barber

Lisa Berry

M C Birt

W D Britton

D A Doherty

A M Douglas

B Gardner

Ann Humphrey

Magda Liney

Edward Madden

A L McMahon

B A Shore

K Stone

Marilyn Sutton

Mary Tinsell

R W Trout

B Tyler

L T Wetherell

E L Womack

More about who we are and how we work

The Queen Elizabeth Hospital Birmingham Charity is the working name of University Hospital Birmingham Charities, which itself is the composite name for four charities registered with the Charity Commission of England and Wales under the single number 1093989.

All four charities are unincorporated charitable trusts. The four charities, which are administered by our Trustees, are as follows:

1. University Hospital Birmingham General Charity

Object: "for such purposes relating to hospital services (including research) or to any other part of the health service associated with University Hospital Birmingham". This charity is governed by a scheme sealed on 19 April 1999, as amended by Resolutions on 9 December 2002 and 24 February 2003 and registered with the Charity Commission on 22 January 2003.

2. University Hospital Birmingham Charitable Foundation

Object: "for any charitable purpose or purposes relating to the National Health Service, wholly or mainly for the University Hospital Birmingham NHS Trust". The Declaration of Trust stating these objects was signed on 20 November 1998, amended by a Supplemental Deed on 9 December 2002 and a Resolution on 24 February 2003. This charity was registered with the Charity Commission on 22 January 2003.

3. The Butler-Lines House of Rest and Recreation for Nurses

Object: "for the benefit of members and retired members of the nursing and midwifery staff of the University Hospitals Birmingham who in the opinion of the Trustees are in need, by assisting them to obtain rest or convalescence". The charity is governed by a scheme dated 2 September 1955 and was registered with the Charity Commission on 22 January 2003. The Charity Commission approved the amendment of the charity's objects on 4 January 2012 to remove a restriction to only benefit female members of the nursing and midwifery staff. The Charity Commission also gave permission for the Trustees to expend the permanent endowment of the charity which totals £51,000. The charity spent these funds on the social and recreational facilities at the hospital in 2013/14. The charity did not apply for this charity to be removed from the register during the year but will do so in the forthcoming year.

4. Queen Elizabeth Hospital General Fund

Object: "for any charitable purpose or purposes relating to the National Health Service wholly or mainly for the Queen Elizabeth Hospital". The charity is governed by a Declaration of Trust dated 17 February 1997 and amended by a Supplemental Deed dated 10 October 2005. It was registered with the Charity Commission on 5 July 2005.

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.

How do we do things?

Queen Elizabeth Hospital Birmingham Charity can have up to seven unpaid Trustees who make up the Board of Trustees. They decide policy and make sure it is implemented. 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 2015 was Brian Hanson.

Detailed in the table below are all the Trustees who held office during the financial year to 31 March 2015.

Trustees who were in office throughout the year to 31 March 2015	Date of first appointment	Date when appointment expires
Brian Hanson	1 May 2005*	30 April 2016
Peter Mayer	1 July 2008*	30 June 2016
Andrew Pemberton	1 July 2008*	30 June 2016
David Ritchie	19 April 2009*	22 March 2017
Michael Seabrook	1 February 2012*	31 January 2019
David Mackay	18 April 2012*	17 April 2019
Ru Watkins	16 November 2012	15 November 2016

*Brian Hanson is in his fourth appointment term. Peter Mayer, Andrew Pemberton, David Ritchie, Michael Seabrook and David Mackay are in their second appointment terms.

Details of Trustees

Brian Hanson is a retired consultant metallurgist. He is a member of the Dental Hospital Planning Committee and a member of the Research Strategy 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 Chair of the West Midlands Local Stroke Research Network.

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 remains as a Trustee on the Peugeot Advanced Pension Plan. 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.

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, Steelite International Holdings Limited, MC Trustees Limited, 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

The Trustees are each appointed by the Appointments Commission under Section 51 of the National Health Service Act 2006 under which Trustees are appointed by the Secretary of State for Health.

Trustees are recruited following public advertisement. All potential Trustees must be interviewed and recommended by a panel consisting of two Trustees of Queen Elizabeth Hospital Birmingham Charity and one external assessor. 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, 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 QEHB Charity belongs) runs regular conferences for Trustees.

Future trustee recruitment and appointments

In March 2014, the Department of Health issued a review of the regulation and governance of NHS Charities. This notified Section 51 Trustees of NHS Charities of HM Government's intention to place legislation before Parliament to remove the ability to appoint Trustees of NHS Charities under Section 51 of the National Health Services Act 2006.

Section 51 Trustees, which applies to the Trustees of Queen Elizabeth Hospital Birmingham Charity, have to engage with their associated NHS Foundation Trust to

decide whether to revert to corporate trustee status, where the NHS Foundation Trust acts as the Trustee of the hospital charity, or to convert to an independent charity no longer regulated by the Department of Health in addition to the Charity Commission.

The Trustees are in dialogue with UHBFT to determine which route is in the best interests of the charity's beneficiaries, with the intention to have made and implemented the decision by 31 March 2016.

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 were no formal meetings of sub-committees during the year 2014/15.

Queen Elizabeth Hospital Birmingham Charity's Staff

The charity directly employs eight members of staff.

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.

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 used to have one expendable endowment fund (Butler-Lines) which has now been spent, and has no permanent 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 13-15).

During the financial year under review, Queen Elizabeth Hospital Birmingham Charity made grants

totalling £3,182,000. (2013/14: £3,576,000)

It should be noted that the construction costs of Fisher House were capitalised as an asset rather than as expenditure. The costs will then be 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 from 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

- Deloitte & Touche LLP: 4 Brindleyplace, Birmingham B1 2HZ (internal auditors until 11 August 2014)
- Baker Tilly LLP: St Philips Point, Temple Row, Birmingham B2 5AF (internal auditors from 11 August 2014)
- Mazars LLP, 45 Church Street, Birmingham B3 2RT (external auditors)
- Barclays Bank: Colmore Row, Birmingham B3 2BY (bankers)
- Robert Powell & Co: 40 George Road, Birmingham B15 1PL (chartered surveyors)
- Schroder & Co Limited: 5th Floor, 31 Gresham Street, London EC2V 7QA (investment managers)
- Shakespeare Martineau Solicitors: 1 Colmore Square, Birmingham B4 6AA (solicitors)

Wider networks and related parties

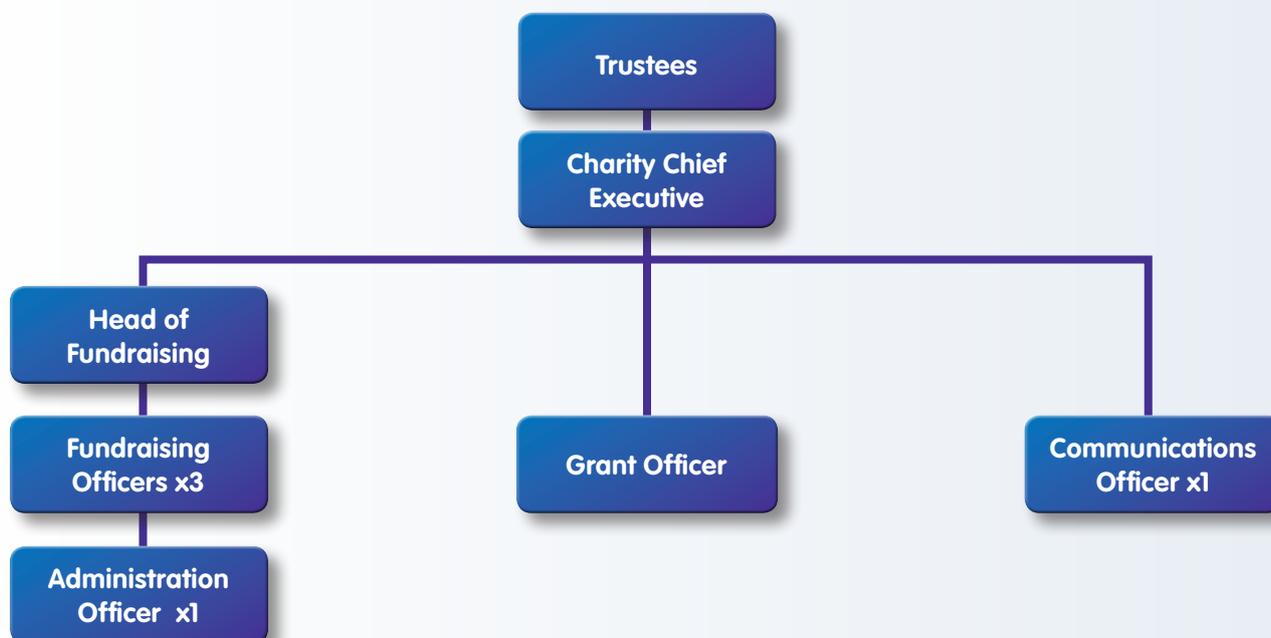
Queen Elizabeth Hospital Birmingham Charity is one of some 290 NHS-linked charities in England and Wales. A number of the larger NHS-linked charities have, for a number of years, joined together to form the Association of NHS Charities.

As a member, we have the opportunity to discuss matters of common concern and exchange information and experiences, join together with fellow members 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.

Administrative Structure as at 31 March 2015



External support structure as at 31 March 2015



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.

New internal auditors, Baker Tilly LLP were appointed on 11 August 2014 and the first piece of work they carried out with Trustees was a review of the Risk Register and controls.

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 3.76% (2013/14: 4.04%) and rose in value by 6.0%, well in excess of the 2.6% 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.

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

The Trustees have adopted the following investment policy:

i) The charity's aims in investing its funds

"The Trustees recognise that donors to the charity expect their donations to be spent on charitable activities relating to the work of UHBFT in a timely manner. The Trustees therefore wish to invest those funds to generate a financial return on capital, whilst minimising the risk to capital. The

income thus generated will be used to further the aims and objectives of the charity."

ii) The balance between capital growth and income generation

"The Trustees' main concern is preservation of capital. However, whilst taking that into consideration, the need for capital growth is not a main priority. Thus, within the constraints of capital preservation, the Trustees prefer income generation over capital growth."

iii) Consideration of risk

"The Trustees desire a low to medium risk investment portfolio. Charitable funds should be spent in a timely manner, thus investments that require a long period of investment are not to be recommended."

iv) The timing of returns

"The Trustees need to draw a steady cash stream from their investments during the year. The investment policy should enable the funding of the cash requirements provided by the Trustees."

v) Special preferences – e.g. ethical investments

"The Trustees wish to invest solely their cash holdings in organisations protected by the UK regulatory authorities. In addition, the Trustees do not wish to invest directly in tobacco securities because of the proven link between smoking and

poor health which would make such investments contrary to the charity's objectives. Any investment manager should provide the Trustees with their Socially Responsible Investment policy prior to investing in equities to enable the Trustees to give approval of such policy."

vi) Review of the policy statement

"This investment policy statement will be reviewed by the Trustees on an annual basis."

vii) The way in which the investment discretion will be exercised

"The Trustees delegate the day to day management of the investments to the investment manager subject to the policy above. The investment manager should be able to demonstrate how the investments made on behalf

of the charity meet the policy requirements and should present to the Trustees on an annual basis their plans for the year ahead."

viii) Reserves policy

"Once the Trustees have formally agreed any charitable grant, the funds covering that grant will be moved into a cash account. In addition to those funds necessary to cover any agreed grants, the charity wishes to hold in a cash reserve a sum equal to six months expenditure of its general funds to allow the charity to meet its obligations in the event of a failure to raise any new charitable funds.

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

Reserves policy

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

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

The Trustees calculate the reserves as that part of

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 2015 were £10.545 million. The total level of unrestricted reserves is analysed as follows:

	£
Total funds available at year end 31 March 2015	10,545,000
Less:	
Fisher House capital asset	2,979,000
Restricted funds	48,000
Designated funds	7,142,000
Total free reserves	376,000

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
Total target reserve requirement:	150,000

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

The 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.

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



Queen Elizabeth Hospital Birmingham

Financial review

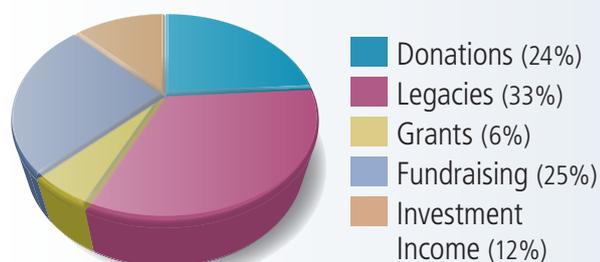
The full 2014/15 Statement of Financial Activities and Balance Sheet are set out on pages 37 to 43.

Income during the year (primarily from donations,

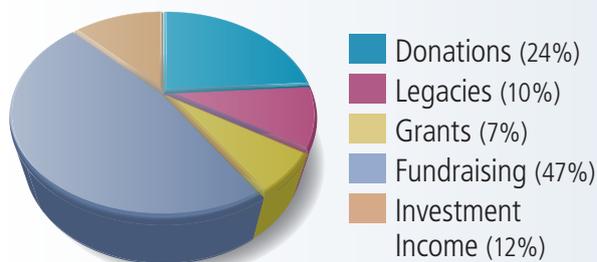
legacies, fundraising and investment income) amounted to £3.17 million (2013/14: £3.52m) and expenditure in the year was £3.63 million. (2013/14: £4.12 million)

1. Overall Income

2014/15 Income

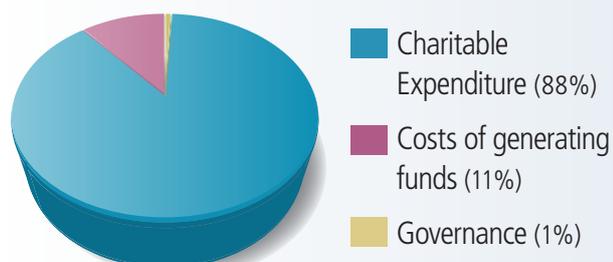


2013/14 Income

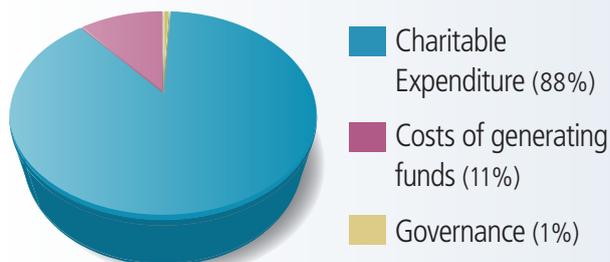


2. Overall Expenditure

2014/15 Expenditure

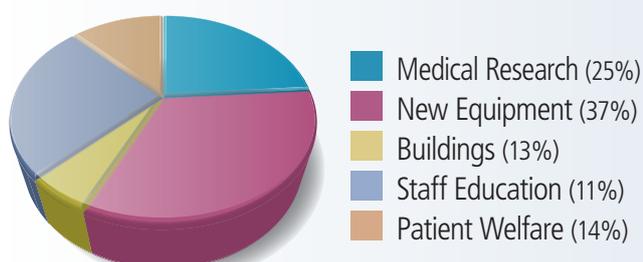


2013/14 Expenditure

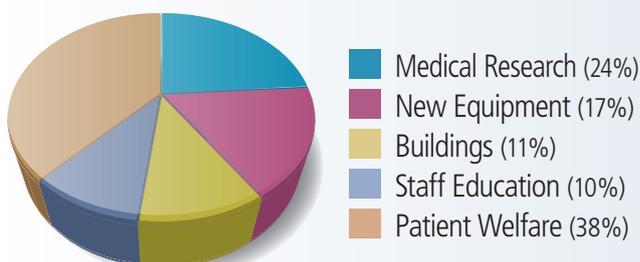


3. Breakdown of Charitable Expenditure

2014/15 Expenditure



2013/14 Expenditure



Statement Of Trustees' Responsibilities in Respect of the Trustees' Annual Report and the Financial Statements

Under charity law, the Trustees are responsible for preparing the Trustees' Annual Report and the Financial Statements for each financial year which show a true and fair view of the statement of affairs of the charity and of the charity's excess of income over expenditure for the period.

In preparing this Annual Report and the Financial Statements, generally accepted accounting practice requires that the Trustees:

- Select suitable accounting policies and then apply them consistently;
- Make judgements and estimates that are reasonable and prudent;
- State whether applicable UK accounting standards and the Statement of Recommended Practice have been followed, subject to any material departures disclosed and explained in the Financial Statements;
- State whether the Financial Statements comply with the trust deeds, 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 in its activities.

The Trustees are required to act in accordance with the trust deeds of the charity, within the framework of trust law. They are responsible for keeping proper accounting records, sufficient to disclose at any time, with reasonable accuracy, the financial position of the charity at that time, and to enable the Trustees to ensure that, where any statements of accounts are prepared by them under s132(1) of the Charities Act 2011, those statements of accounts comply with the requirements of the regulations under that provision. They have general responsibility for taking such steps as are reasonably open to them to safeguard the assets of the charity and to prevent and detect fraud and other irregularities.

The Trustees confirm that they have met the responsibilities set out above and complied with the requirements for preparing the Trustees' Annual Report and the Financial Statements. The Financial Statements set out in pages 38 to 54 have been compiled from and are in accordance with the financial records maintained by the Trustees.

By Order of the Trustees

Signed:

Chairman* 
.....
B Hanson

Trustee 
.....
D Mackay

Date 12/08/15.....

Date 12/08/15.....

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

Independent auditor's report to the Trustees of Queen Elizabeth Hospital Birmingham Charity

We have audited the financial statements of Queen Elizabeth Hospital Birmingham Charity for the year ended 31 March 2015 which comprise Statement of Financial Activities, the Balance Sheet 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).

Respective responsibilities of trustees and auditors

As explained more fully in the Trustees' Responsibilities Statement set out on page 38, the Trustees are responsible for the preparation of the financial statements which give a true and fair view.

We have been appointed as auditor under section 144 of the Charities Act 2011 and report in accordance with regulations made under section 154 of that Act.

Our responsibility is to audit and express an opinion on the financial statements in accordance with applicable law and International Standards on Auditing (UK and Ireland). Those standards require us to comply with the Auditing Practices Board's Ethical Standards for Auditors. This report is made solely to the charity's trustees as a body. Our audit work has been undertaken so that we might state to the charity's trustees those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charity and the charity's trustees as a body for our audit work, for this report, or for the opinions we have formed.

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 website at 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 2015 and of its incoming resources and application of resources, for the year then ended;
- Have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- Have been prepared in accordance with the requirements of the Charities Act 2011.

Matters on which we are required to report by exception

We have nothing to report in respect of the following matters where the Charities Act 2011 requires us to report to you if, in our opinion:

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

Signed Mazars LLP

Date 11/11/15

Mazars LLP,

Chartered Accountants and Statutory auditors
45 Church Street, Birmingham, B3 2RT
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 2014

	Note	Unrestricted Funds £000	Restricted Funds £000	2014-15 Total Funds £000	2013-14 Total Funds £000
Incoming resources					
<i>Incoming resources from generated fund</i>					
Voluntary income:	3				
- Donations		738	2	740	838
- Legacies		969	0	969	336
- Grants		191	0	191	263
Activities for generating funds:					
- Fundraising Events		753	6	759	1,646
- Other		5	0	5	18
Investment Income	9.3	345	0	345	364
<i>Incoming resources from charitable activities</i>					
Course / Conference Fees	4	164	0	164	51
Total incoming resources		3,165	8	3,173	3,516
Resources expended					
<i>Costs of generating funds</i>					
Costs of generating voluntary income:	1.5				
- Costs of Fundraising Office		198	0	198	245
Costs of Activities for Generating Funds:					
- Costs of Fundraising Events		162	0	162	224
Investment management costs		26	0	26	34
Cost of Maintaining Investments		2	0	2	4
Total Costs of Generating Funds		388	0	388	507
<i>Charitable Activities</i>					
<i>Grant funding of Activities</i>					
Medical Research	6	806	0	806	845
Purchase of New Equipment		1,178	1	1,179	618
New Building and Refurbishment		(39)	0	(39)	15
Staff Education and Welfare		348	0	348	345
Patient Education and Welfare		425	0	425	391
Grants to other Bodies		0	0	0	0
Fisher House Running Costs		90	0	90	990
Fisher House Depreciation Costs		373	0	373	372
Total Charitable Expenditure		3,181	1	3,182	3,576
<i>Governance costs</i>	5	55	0	55	41
Total resources expended		3,624	1	3,625	4,124
Net incoming/(outgoing) resources before Transfers		(459)	7	(452)	(608)
Gross transfer between funds		0	0	0	0
Net incoming/(outgoing) resources before other recognised gains and losses		(459)	7	(452)	(608)
Gains/(Losses) on revaluation and disposal of investment assets		360	0	360	139
Net movement in funds		(99)	7	(92)	(469)
Total funds brought forward					
31 March 2014		10,596	41	10,637	11,106
Total Funds carried forward at 31 March 2015		10,497	48	10,545	10,637

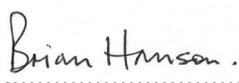
The notes at pages 43 to 46 form part of these Financial Statements
All operations are continuing

Balance Sheet as at 31 March 2015

	Note	Unrestricted Funds £000	Restricted Funds £000	Total at 31 March 2015 £000	Total at 31 March 2014 £000
Fixed Assets					
Investments	9	8,037	48	8,085	7,551
Fisher House	9.1	2,979	0	2,979	3,352
Programme Related Asset	9	90	0	90	63
Total Fixed Assets		11,106	48	11,154	10,966
Current Assets					
Current assets held for sale	10	24	0	24	24
Debtors	10	496	0	496	128
Cash at bank and in hand		2,611	0	2,611	3,369
Total Current Assets		3,131	0	3,131	3,521
Creditors: Amounts falling due within one year	11	706	0	706	737
Provisions for liabilities and charges	12	1,560	0	1,560	1,654
Total Current Liabilities		2,266	0	2,266	2,391
Net Current Assets		865	0	865	1,130
Total Assets less Current Liabilities		11,971	48	12,019	12,096
Amounts falling due after one year Provisions for liabilities and charges	12	1,474	0	1,474	1,459
Total Net Assets		10,497	48	10,545	10,637
Funds of the Charity					
Income Funds:					
Restricted	14	0	48	48	41
Unrestricted	15	10,497	0	10,497	10,596
Total Funds		10,497	48	10,545	10,637

The notes at pages 43 to 46 form part of these Financial Statements

Signed:

Chairman 
Brian Hanson

Trustee 
D Mackay

Date 12/08/15

Date 12/08/15

Notes to the Financial Statements

These Financial Statements for the year ended 31 March 2014 have been prepared under s132(1) of the Charities Act 2011 and applicable regulations.

1. Accounting Policies

1.1 Accounting Convention

The Financial Statements have been prepared under the historic cost convention, with the exception of investments and assets held for sale which are included at market value. The Financial Statements have been prepared in accordance with the Statement of Recommended Practice for Charities (SORP 2005) issued in March 2005 and with applicable UK Accounting Standards

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). The charity has no permanent endowment funds and no expendable endowments.

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 Notes 14 and 15.

1.3 Incoming Resources

All incoming resources, with the exception of legacies, are included in the Statement of Financial Activities when the charity is legally entitled to the income and the amount can be quantified with reasonable accuracy.

Legacies are accounted for as incoming resources either upon receipt or where the receipt of the legacy is reasonably certain; this will be once confirmation has been received from the representatives of the estate(s) that payment of the legacy will be made or property transferred and once all conditions attached to the legacy have been fulfilled.

Legacies which have been notified but not recognised as incoming resources, where material, have not been included in the Statement of Financial Activities but are disclosed in Note 10 to the Financial Statements with an estimate of the amount receivable.

Any incoming resources from the investment of endowment funds are wholly restricted.

1.4 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.

Provisions are included for grants payable where approval has been given by the Trustees before the 31 March 2014.

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

1.5 Allocation of Overhead and Support Costs

Overhead and support costs have been allocated between Costs of Generating Funds, Charitable Activities and Governance Costs. Costs which are not wholly attributable to an expenditure type have been

apportioned. 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 shown in the second stage allocation disclosed in Note 6.
- c) Governance Costs comprise all costs identifiable as wholly or mainly attributable to ensuring the public accountability of the charity and its compliance with regulation and good practice. These costs include costs related to statutory audit together with an apportionment of overhead and support costs.

1.6 Fixed Assets

a) Investment Fixed Assets

Investment fixed assets are shown as market value.

Quoted stocks and shares are included in the balance sheet at bid price, ex-dividend.

Other investments are included at Trustees' best estimate of market value.

b) Property Fixed Assets

Fisher House is held at cost less depreciation over a 10 year term as per Note 9.1.

c) Programme Related Asset

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

1.7 Current Assets held for sale

Current assets held for sale comprise of:

Property assets shown at market valuation. The last professional valuation was completed in March 2011 by Michael Wyldbore-Smith FRICS of external advisors Robert Powell & Co.

1.8 Realised Gains and Losses

All gains and losses 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 (or 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 Pensions

Most employees are members of a defined contribution pension scheme. Contributions are chargeable to the Statement of Financial Activities in the period in which they are related to.

Past and present employees are covered by the provisions of the NHS Pension Scheme. Details of the benefits payable under these provisions can be found on the NHS Pensions website at www.nhsbsa.uk/pensions. The scheme is an unfunded, defined benefit scheme that covers NHS employers, GP practices and other bodies, allowed under the direction of the Secretary of State, in England and Wales. The scheme is 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, the scheme is accounted for as if it were a defined contribution payable to the scheme for the accounting period.

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 recent valuations follows:

a) Accounting valuation

A valuation of the scheme liability is carried out annually by the scheme actuary as at the end of the reporting period. This utilises an actuarial assessment for the previous accounting period in conjunction with updated membership and financial data for the current reporting period, and are accepted as providing suitably robust figures for financial reporting purposes. The valuation of the scheme liability as at 31 March 2014 is based on valuation data as at 31 March 2013, updated to 31 March 2014 with summary global member and accounting data. In undertaking this actuarial assessment, the methodology prescribed is 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 Pensions Scheme (England and Wales) Pension Accounts, published annually. These accounts can be viewed on the NHS Pension website. 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 scheme (taking into account its recent demographic experience), and to recommend the contribution rates.

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

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

c) Scheme provisions

The NHS Pension Scheme provided defined benefits, which are summarised below.

The list is an illustrative guide only, and is not intended to detail all the benefits provided by the scheme or

the specific conditions that must be met before these benefits can be obtained:

The Scheme is a "final salary" scheme. Annual pensions are normally based on 1/80th for the 1995 section and of the best of the last three years pensionable pay for each year of service, and 1/60th for the 2008 section of reckonable pay per year of membership. Members who are practitioners as defined by the Scheme Regulations have their annual pensions based upon total percentage earnings over the relevant pensionable service.

With effect from 1 April 2008 members can choose to give up some of their annual pension for an additional tax free lump sum, up to a maximum amount permitted under HMRC rules. This new provision is known as "pension commutation".

Annual increases are applied to pensions in payment at rates defined by the Pensions (Increase) Act 1971, and are based on changes in retail prices in the twelve months ending 30 September in the previous calendar year. From 2011–12 the Consumer Price Index (CPI) will be used instead of the Retail Prices Index (RPI).

Early payment of a pension, with enhancement, is available to members of the scheme who are permanently incapable of fulfilling their duties effectively through illness or infirmity. A death gratuity of twice final year's pensionable pay for death in service, and five times annual pension for death after retirement is payable.

For early retirements other than those due to ill health the additional pension liabilities are not funded by the Scheme. The full amount of the liability for the additional costs is charged to the employer.

Members can purchase additional service in the NHS pension scheme and contribute to money purchase AVC's run by the Scheme's approved providers or by other Free Standing Additional Voluntary Contributions (FSAVC) providers.

2. Related Party Transactions

Patients of University Hospitals Birmingham NHS Foundation Trust are the main beneficiary of the charity. The charity has made revenue and capital payments to the NHS Foundation Trust and these are detailed in Note 6.2.

University Hospitals Birmingham NHS Foundation Trust provides financial and administration service to the charity by agreement with the Trustees. The charges made by the NHS Foundation Trust are at a fair open market rate and are included in the overhead and support costs detailed in Note 5.

No Trustee received honoraria or emoluments in the year and the Trustees have not purchased trustee indemnity insurance.

Trustee expenses were reimbursed as detailed below, and these were incurred wholly in fulfilment of charity business.

Trustee expenses reimbursed	2014-15	2013-14
	£	£
Travel and parking re-imbursments	0	0
Travel and parking direct payment to third parties	48.4	320
	48.4	320
Total number of Trustees who claimed	1	7

3. Analysis of Voluntary Income

	Unrestricted Funds £000	Restricted Funds £000	Total 2015 £000	Total 2014 £000
Donations from individuals	535	2	537	645
Donations from companies	203	0	203	193
Legacies	969	0	969	336
Grants	191	0	191	263
	1,898	2	1,900	1,437

4. Incoming Resources from Charitable Activities

This is income received directly from activities in the furtherance of the charities objects. The income was derived from the provision of training courses in both the current and previous years.

5. Support Costs and Overheads

5.1 Analysis of Expenditure

	Unrestricted Funds £000	Restricted Funds £000	Total 2014 £000	Total 2013 £000
Salaries & pension	100.1	0.0	100.1	99.6
Travel	0.4	0.0	0.4	0.6
Training	5.0	0.0	5.0	0.1
Office costs	3.2	0.0	3.2	3.9
Stationery	3.7	0.0	3.7	13.1
Insurance	3.5	0.0	3.5	0.5
Annual Report	0.3	0.0	0.3	2.4
Trustees training & expenses	0.1	0.0	0.1	0.3
Internal Audit	0.0	0.0	0.0	(15.2)
External Audit	9.4	0.0	9.4	9.3
Bank charges	0.1	0.0	0.1	0.2
Finance SLA	111.8	0.0	111.8	111.8
Other	6.6	0.0	6.6	11.4
	244.2	0.0	244.2	238.0

5.2 Governance Costs (defined in note 1.5c)

	Total £000	Allocate to Governance £000	Residual to Apportion £000	Basis of Allocation
Salaries & pension	100.1	17.7	82.4	Allocated on time
Travel	0.4	0.1	0.3	Proportionate to Salaries
Training	5.0	5.0	0.0	Governance
Office costs	3.2	0.6	2.6	Proportionate to Salaries
Stationery	3.7	0.6	3.1	Proportionate to Salaries
Insurance	3.5	3.5	0.0	Governance
Annual Report	0.3	0.3	0.0	Governance
Trustees training & expenses	0.1	0.1	0.0	Governance
Internal Audit	0.0	0.0	0.0	Governance
External Audit	9.4	9.4	0.0	Governance
Bank charges	0.1	0.0	0.1	Charitable Expenditure
Finance SLA	111.8	11.1	100.7	Allocated on time
Other	6.6	6.6	0.0	Governance
	244.2	55.0	189.2	

Support Costs attributable to Charitable Expenditure £157.7K and Costs of Generating Funds £31.5K have been apportioned on the basis of the number of individual transactions undertaken by the charity

6. Analysis of Charitable Expenditure

6.1 Charitable Expenditure

Grants were made in favour of beneficiaries and expenditure was incurred by the charity, either with third parties in pursuance of those grants, or reimbursed expenditure incurred by beneficiaries.

	Grant Funded Activity £000	Support Costs £000	Total 2015 £000	Total 2014 £000
Medical Research	748	58	806	845
Purchase of New Equipment	1,155	24	1,179	618
Building and Refurbishment	(40)	1	(39)	15
Staff Education and Welfare	311	37	348	345
Patient Education and Welfare	393	32	425	391
Fisher House Running Costs	84	6	90	990
Fisher House Depreciation Costs	373	0	373	372
	3,024	158	3,181	3,576

6.2 Grants

The charity does not make grants directly to individuals.

The grants made by the charity are detailed in the following analysis.

Institution Receiving Support	Total 2015 £000	Total 2014 £000
University Hospitals Birmingham NHS Foundation Trust	2,019	1,460
SSAFA & BB Fisher House Running Costs	0	1,066
University of Birmingham	1,001	857
Giles Duley Trust	0	16
University of Aston	4	4
	3,024	3,403

7. Analysis of Employees' Costs

	Total	Total
	2015	2014
	£000	£000
Salaries and wages	213	174
Social security costs	18	14
Other pension costs	15	14
	246	202

Pension costs are split as follows:

Defined Contribution Scheme	4	2
NHS Pensions Defined Benefit Scheme	11	12
	15	14

Outstanding contributions at year end were:

Defined Contribution Scheme	1	0
NHS Pensions Defined Benefit Scheme	0	0
	7.9	6.0

Two members of staff were recruited and one member of staff left during the year.

One employee had emoluments in the range of £60,000–£70,000 (2014 one). Retirement benefits are accruing to this member of staff under the NHS Defined Benefit Pensions Scheme (see Note 1.9).

8. Auditor's Remuneration

The external auditor's remuneration of £9,428 (2013/14 £9,600) related solely to statutory audit work. The charity did not commission any additional work during the year from the external auditor (2013/14 £nil).

9. Analysis of Fixed Assets

Movements during the year

	2015	2014
	Total	Total
	£000	£000
Market value at start of year	7,551	7,448
Less: Disposals at carrying value	(1,975)	(1,870)
Add: Acquisitions at cost - Programme Related Asset	2,166	1,806
Net (loss)/gain on revaluation	343	167
Market value at end of year	8,085	7,551
Historic Cost	7,186	6,804
Programme Related Asset		
Add: Acquisitions at cost - Programme Related Asset	63	63
Additions	33	0
Net (loss)/gain on revaluation	(6)	0
Market Value 31 March 2015	90	63
Historic Cost	93	63

9.1 Fisher House

	Freehold	2015
	Property	Total
	£000	£000
Cost		
At 1 April 2014	3,724	3,724
Additions	0	0
Disposals	0	0
At 31 March 2015	3,724	3,724
Accumulated Depreciation		
At 1 April 2014	372	372
Charge for the year	373	373
Disposals	0	0
At 31 March 2015	745	745
Net Book Values		
At 31 March 2015	2,979	2,979
At 31 April 2014	3,352	3,352

9.2 Market value at 31 March 2015

	Held in UK £000	Held outside UK £000	2014 Total £000	2013 Total £000
Schroders Charity Multi Asset Fund	8,068	0	8,068	7,534
Other investments	17	0	17	17
	8,085	0	8,085	7,551

The Multi Asset Fund represents 99.79 % of the investments held.

9.3 Total gross income from:

	Held in UK £000	Held outside UK £000	2015 Total £000	2014 Total £000
A. Fixed Asset Investments				
Investments listed on a recognised Stock Exchange	310	0	310	246
B. Current Assets				
Interest earned on cash deposits during the year	35	0	35	118
	345	0	345	364

10. Analysis of Current Assets (Debtors)

	2015 Total £000	2014 Total £000
Amounts falling due within one year:		
Trade debtors	5	15
Accrued income	491	113
Total debtors falling due within one year	496	128

Accrued income includes legacies receivable of £383,438 at 31 March 2015 (£74,000 at 31 March 2014).

	2015 Total £000	2014 Total £000
Current Assets Held for Sale comprise		
Leasehold properties	24	24
	24	24

11. Analysis of Current Liabilities

	2015 Total £000	2014 Total £000
Amounts falling due within one year:		
Trade creditors	596	520
Accruals	110	217
Total creditors falling due within one year	706	737

12. Provisions for Liabilities and Charges

	Charitable Provisions £000	Other Provisions £000	2015 Total £000	2014 Total £000
Movements during the year				
Provisions at the start of the year	3,113	0	3,113	3,399
Add: New provisions charged in the year	1,293	0	1,293	2,345
Less: Provisions released in the year	(1,103)	0	(1,103)	(2,370)
Change in value of brought forward provisions	(269)	0	(269)	(261)
Provisions outstanding at end of year	3,034	0	3,034	3,113
Timing of Commitments				
Provisions payable within one year	1,560	0	1,560	1,654
Provisions payable after more than one year	1,474	0	1,474	1,459
Provisions outstanding at end of year	3,034	0	3,034	3,1139

Provisions included in the Financial Statements relate to grants payable that have been approved by the Trustees but not yet paid.

13. Commitments

Trustees have entered into future commitments as follows:

	2015 Land & Buildings £000	2015 Other £000	2014 Land & Buildings £000	2014 Other £000
Expiring:				
Within 1 Year	0	112	0	112
2–5 Years	0	0	0	0
Over 5 Years	0	0	0	0

Analysis of Charitable Funds

14. Restricted Funds

	Balance 31 March 2014 £000	Incoming Resources £000	Resources Expended £000	Transfers £000	Gains and (Losses) £000	Balance 31 March 2015 £000
A Hear & Now	32	0	0	0	0	32
B Get A-Head	9	8	(1)	0	0	16
	41	8	(1)	(0)	0	48

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.

15. Unrestricted and Designated (Earmarked) Funds

	Balance 31 March 2014 £000	Incoming Resources £000	Resources Expended £000	Transfers £000	Gains and Losses £000	Balance 31 March 2015 £000
A Centre for Rare Diseases	44	51	(143)	650	0	602
B Fisher House	503	161	(106)	2	0	560
C AcceleraTED Research Prog	500	50	(154)	(12)	0	384
D QEHB Charity	681	620	(752)	(164)	0	384
E Research Fund – Oncology	271	1	(3)	0	0	268
F Heart Surgery & Transplantation	6	11	(25)	186	0	178
G Endocrine Research Fund	181	0	(5)	0	0	176
H Staff Fundraising	84	344	(364)	98	0	162
I Genito-Urinary Medicine Services	169	0	(16)	0	0	153
J Liver Foundation	193	27	(40)	(38)	0	142
K RCDM	81	50	(17)	26	0	140
L Diabetes Research Project	103	50	(31)	10	0	132
M The VIP Treatment	3	122	(2)	0	0	123
N Online Fundraising	65	91	0	(37)	0	119
O Ladies Fighting Breast Cancer	56	27	0	35	0	118
P Liver Research & Transplant	113	21	(17)	0	0	117
Q Get A-Head	5	251	(144)	0	0	112
R Bone Marrow Unit	117	0	(4)	(2)	0	111
S Other earmarked funds	6,651	1,289	(1,800)	0	0	6,140
All Funds Unrealised Gain/(Loss)	770	0	0	(754)	360	376
	10,596	3,165	(3,624)	(0)	360	10,497

Unrestricted and Designated (Earmarked) Funds continued

The Trustees set a closing balance of £110,000 or above as the threshold for reporting material designated funds. In the interests of accountability and transparency a summary of all Designated Funds is available upon written request. The objects of the material Designated Funds are as follows:

- A Support for the Centre for Rare Diseases.
- B Fisher House
- C AccelerateD – Drugs Trial programme
- D 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.
- E Research Fund – Welfare & Amenities for oncology patients and staff.
- F Heart Surgery & Transplantation
- G Endocrine related research including clinical and laboratory research.
- H Staff fundraising projects
- I Support for the Genito-Urinary Medicine Services unit.
- J Support for the Liver Unit.
- K Support for the Royal Centre for Defence Medicine.
- L Diabetes research projects
- M VIP Treatment Centre
- N Online fundraising projects
- O Ladies Fighting Breast Cancer
- P Support for experimental liver research and clinical development of liver transplantation.
- Q Head & Neck Research & Patient Welfare projects
- R Support for the Bone Marrow Transplant Team.
- 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.



**Queen
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Charity