



University Hospitals Birmingham Charity



**Queen Elizabeth
Hospital Birmingham**
Charity



**Heartlands
Hospital**
Charity



**Good Hope
Hospital**
Charity



**Solihull
Hospital**
Charity

Annual Report & Accounts

for the Year ended 31 March 2019

Company Registration Number 10004003

Charity Number 1165716

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

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Executive Summary

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

University Hospitals Birmingham NHS Foundation Trust operates four of the largest hospitals in the Birmingham area - the Queen Elizabeth Hospital Birmingham, Heartlands Hospital, Good Hope Hospital and Solihull Hospital as well as Birmingham Chest Clinic and Solihull Community Services.

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

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

The hospital charity engages with patients, families, donors and supporters across Birmingham and the wider West Midlands, and Trustees want to see an increase in total grants made and total fundraising income.

Over the past ten years, the charity has funded over £50 million of equipment, facilities, research and patient welfare, all of which is over and above what the NHS can fund.

The charity funded CyberKnife and Tomotherapy machines are providing world class care for radiotherapy patients at Queen Elizabeth Hospital Birmingham, the "Heart in a Box" and "Ann Fox Foundation" liver perfusion devices are increasing the numbers of organs suitable for transplant, and this year we have launched the "Man Van" service, offering men's health services across the Midlands.

Fisher House, the "home away from home" for military patients and their families, has now been a safe haven for over 4,700 patients and family members in the six years since it opened in June 2013 and has provided over 25,000 nights' accommodation. 2018/19 was one of the busiest years for the house since it opened, with just under one thousand patients and family members using the house.

Our two NHS family facilities, Karen's Home from Home and SACA's Home from Home (SACA is the name of a charity bike ride from Birmingham to London), continue to build on the success of Fisher House and serve the families of leukaemia and cancer patients and we are in the process of opening a third NHS family facility near Heartlands Hospital.

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

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

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

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

Chair's Statement

Looking back over the past twelve months, I am amazed, as always, at just how generous people are in supporting patients, families and staff across our hospitals.

Our donors and fundraisers are all united by a desire to build on the world class care provided by the NHS across our hospitals, and to help make life that little bit better whilst you are in hospital.

Whether that is by funding equipment, facilities or research, or by supporting patient and staff welfare, our donors and fundraisers are busy jumping out of aeroplanes, abseiling down tall buildings, taking part in 100 mile bike rides or even taking part in tea parties to mark the 70th anniversary of the NHS!

My fellow Trustees and I see a clear link between the hospitals and fundraising, and so we have continued to build the brand strength of our four working names - Queen Elizabeth Hospital Birmingham Charity, Heartlands Hospital Charity, Good Hope Hospital Charity and Solihull Hospital Charity.

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

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

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

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

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

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

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

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

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

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

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

In particular, I would like to thank the Rt Hon Jacqui Smith (Chair of UHBFT) and Dr David Rosser (Chief Executive of UHBFT) for their valuable support of the charity, ensuring that we have good links throughout the hospital and helping us to identify ways we can benefit patients.

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

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

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

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

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

Thank you all for your support



Dave Mackay
Chair

An Overview

Charitable purpose and public benefit

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

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

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

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

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

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

The Trustees of University Hospitals Birmingham Charity regularly monitor and review the success of the charity in meeting its key objectives of benefiting patients at UHBFT. 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.

The Trustees have considered the effect of the withdrawal of the United Kingdom from the European Union and do not anticipate that it will have any material impact on the business of the charity.

A vital role of University Hospitals 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.

Fundraising Regulator

University Hospitals Birmingham Charity subscribes to the voluntary fundraising regulation of the Fundraising Regulator and has paid the full amount of the voluntary levy to the Fundraising Regulator since its inception.

You can find out more about the Fundraising Regulator and the Code of Fundraising Practice at www.fundraisingregulator.org.uk

Information about UHBFT

University Hospitals Birmingham NHS Foundation Trust (UHBFT) is one of the largest teaching hospital trusts in England, serving a regional, national and international population.

It includes Birmingham Heartlands Hospital, the Queen Elizabeth Hospital Birmingham, Solihull Hospital and Community Services, Good Hope Hospital in Sutton Coldfield and Birmingham Chest Clinic. It also runs a number of smaller satellite units, allowing people to be treated as close to home as possible.

UHBFT sees and treats more than 2.2 million people every year across its sites and its hospitals deliver more than 11,000 babies a year, making it one of the largest maternity services in Europe.

UHBFT is a regional centre for cancer, trauma, renal dialysis, burns and plastics, HIV and AIDS, as well as respiratory conditions like cystic fibrosis. It also has expertise in premature baby care, bone marrow transplants and thoracic surgery and has the largest solid organ transplantation programme in Europe.

UHBFT provides a series of highly specialist cardiac, liver and neurosurgery services to patients from across the UK.

World-renowned for trauma care, UHBFT has developed pioneering surgical techniques in the management of ballistic and blast injuries, including bespoke surgical solutions for previously unseen injuries.

As a result of its clinical expertise in treating trauma patients and military casualties, the Queen Elizabeth Hospital Birmingham has been designated both a Level 1 Trauma Centre and host of the UK's only National Institute for Health Research Surgical Reconstruction and Microbiology Research Centre [SRMRC].

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

UHBFT partnered with University of Birmingham and Birmingham Women's & Children's Hospital NHS Foundation Trust to create Birmingham Health Partners, bringing together clinical, scientific and academic excellence across an integrated medical and life sciences campus. Birmingham Health Partners operates the

Institute of Translational Medicine on the UHBFT campus. The Centre for Rare Diseases, supported by the charity, is part of the Institute of Translational Medicine.








Our key performance indicators

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

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

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

Key Performance Indicators

KPI No.	Status	Aim	KPI	Action
1		To raise funds so the charity can support patients across UHBFT	Meet budgeted income target of £5,400,000	Not achieved (£4,499,000). Trustees acknowledged during the year that the target had been overly optimistic and set a secondary target of a minimum of £4,400,000 which was achieved.
2		To spend charitable funds to support patients across UHBFT	Meet budgeted charitable expenditure target of £4,480,000	Achieved [The expenditure of £4,535,000 was slightly higher than our target, which is a positive demonstration of our commitment to spend charitable funds to support patients]
3		To maximise how much per £1 spent is spent on charitable activities	Amount per £1 spent which is spent on charitable activities to be above the charity sector average and to strive to be in the top quartile for maximising charitable expenditure	Achieved. 84p of every £1 spent is spent on charitable activities against the charity sector average of 74p. QEHB Charity is in the top quartile for maximising charitable expenditure.
4		To maximise the amount raised per £1 spent on fundraising costs	To strive to raise at least £5 per £1 spent on fundraising costs	Achieved. Raised £5.39 per £1 spent on fundraising against the charity sector average of £4.
5		To raise awareness of the hospital charity across NHS staff	Staff awareness as measured by the UHBFT staff survey to exceed 70%	Achieved at Queen Elizabeth Hospital Birmingham site (73%) but data not yet available from Heartlands Hospital, Good Hope Hospital and Solihull Hospital.
6		To be an employer of choice	Monitor staff turnover rates with the aim to be lower than the charity sector average	Achieved. Staff turnover 10.5% against charity sector average of 22%.
7		To have a healthy and supportive working environment	Monitor staff absence rates with the aim to be lower than the charity sector average	Achieved. Staff absenteeism of 3.8 days per employee p.a. against charity sector average of 8.4 days per employee p.a. [excluding one member of staff on long term sick. Including that member of staff, staff absenteeism is 7 days per employee p.a.]

Plans for the future

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

1. Ambulatory Care & Diagnostic Centre at Heartlands Hospital

UHBFT has obtained planning permission for a new four storey facility at Heartlands Hospital which will transform the provision of services to patients.

The building will offer world-class facilities and house a range of health services, including outpatients, endoscopy and imaging, which will care for hundreds of thousands of patients each year.

University Hospitals Birmingham Charity has identified the need to raise at least £1,000,000 to support UHBFT in this area.

2. Midwife Led Maternity Unit at Good Hope Hospital

Although UHBFT as a whole sees over 11,000 babies born across its hospitals, one of the largest maternity services in Europe, there is not currently a midwife led maternity unit at Good Hope Hospital.

The charity, learning from the work carried out at other maternity units, would like to create such a unit to support and enable midwife led births, which can be more relaxing and stress-free for baby and parents alike.

University Hospitals Birmingham Charity has identified a need to raise up to £1,000,000 to support UHBFT in this area and has launched a fundraising appeal.

3. Giles' Trust

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

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

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

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

4. Fisher House

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

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

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

We need your support

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

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

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

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

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

What we fund

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

Equipment

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

In 2018/19, Queen Elizabeth Hospital Birmingham Charity spent £233,000 on new equipment. [2017/18: £2,757,000].

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

Designated Fund	Equipment
QE Breast Cancer Appeal	Align Radiotherapy system for breast cancer patients
Good Hope Hospital Charity	Leg press shock wave machine
Heartlands Hospital Charity	MRI Ventilator
Liver Foundation	3D Liver surgery planning tool

Case Study 1 – New lung function machine arrives at Heartlands Hospital

Heartlands Hospital Charity funded a state-of-the-art lung function machine, called the EasyOne Pro, which could change the way that lung diseases are treated at the hospital.

The lung function machine will be used by Gareth Walters, consultant in respiratory medicine, and his team to monitor the lung function of the many patients that they see.

Gareth and the team care for patients with interstitial lung disease, a broad range of diseases that lead to scarring on the lungs and leave patients short of breath. The most common of these diseases is Idiopathic Pulmonary Fibrosis (IPF). The word idiopathic is used for this disease, as we do not know what causes it.

Lung damage from IPF is irreversible, but the symptoms can be treated. In order to receive their treatment, patients at Heartlands Hospital need to have their lung function measured on a regular basis.

Before this new piece of equipment arrived at the hospital, patients such as Colin Dalton had their lung function measured on large equipment within a laboratory.

Thanks to the EasyOne Pro, patients can now be monitored in more comfort, with a more portable machine that adapts to their needs.

Gareth said: "Until recently, there have only been two treatments that we can give to patients with IPF, but there are a number of trials coming up that we would hope to enter patients into. The EasyOne Pro will allow us to do this."

"The machine is more flexible than the usual respiratory physiology lab-based lung function machine and we can use that to the patient's benefit. The machine allows us to measure spirometry, lung volumes and gas transfer measurements which previously we were only able to do in the laboratory.

"We are very grateful to Heartlands Hospital Charity for supplying us with this machine and we hope to get a large number of patients into trials in the coming months and years which hopefully will improve the outcomes for patients who have IPF."

Colin Dalton has IPF and has been a patient at Heartlands Hospital for the past six years. He said: "The big difference from a patient point of view is the flexibility of it. From the point of view that the surroundings you're in are less artificial.

"You can sit and be in a more comfortable position; the equipment is user-friendly which makes a big difference. With the old equipment you have to adjust yourself to the equipment and not the other way around."

Sian Averill, Fundraising Manager at Heartlands Hospital Charity, said: "Heartlands Hospital Charity is proud to have been able to fund the EasyOne Pro, which will make a huge difference to patients. Not only will it improve things for patients in the short term, as it is easier to use than the previous equipment, but the research trials that patients will take part in could change the way we treat these diseases."

Case Study 2 – Patient receives life saving liver transplant

Gemma Jolly has received a life-saving liver transplant at the Queen Elizabeth Hospital Birmingham thanks to a new machine which has been funded through charitable donations.

The OrganOx machine helps to clean a donated liver ready for transplantation, increasing the chances of the recipient's body accepting the new liver, and increasing the number of organs that will be considered for transplant. This incredible piece of equipment came to QEHB thanks to the Ann Fox Foundation who raise money in memory of Ann who passed away following a liver transplant.

Gemma was diagnosed with auto-immune hepatitis in 1997, and following the birth of her children George and Harrison in 2001 and 2006 her liver began to fail. Gemma said: "The doctors tried all sorts of medication and tablets, but they just couldn't get in under control."

After being transferred to the care of QEHB in 2004, the doctors

realised that her liver was being eaten away, and she became progressively more ill.

In 2015, Gemma was admitted to intensive care and doctors told her to fear the worst. Gemma's husband Mike said: "I was advised to tell our boys that she wasn't going to make it. That was the worst thing I've had to do as a dad."

Gemma was put on the transplant list and received her first liver transplant in May 2016. She said: "I was in and out of hospital for eight months before, spending more time at hospital than at home. This was really hard for the boys, they found it really difficult.

"I had my transplant, which was initially a success, but after six months or so things started to go wrong."

Mike said: "I noticed that her eyes were jaundiced and she was admitted for tests and the doctors said that the only way forward was to have another transplant."

Gemma was added to the waiting list once again, however things got steadily worse for her, and her liver failed completely. Speaking of what it feels like to have a failing liver, Gemma said: "It makes you feel really tired and lethargic, you don't want to do anything. I was working in an infant school with children with special educational needs. Sadly I lost my job due to budget cuts and so I began working in Tesco. My colleagues at Tesco have been amazing throughout my illness."

Gemma continued to live with her condition, but was unable to live the life that she had become accustomed to. Then, in October 2018, Gemma was admitted to hospital with severe jaundice.

She said: "Mr Thamara Perera came to visit me on the ward and he asked whether I'd be interested in signing up for a process whereby I would have a transplant using a brand new piece of equipment at the hospital. It was a no-brainer for me, Mr Perera carried out my first transplant and he explained it really well.

Mike said: "We had actually seen Mr Perera on TV as part of the Surgeons programme on BBC Two where he was explaining the new machine, and how it works to keep livers in good condition before they're transplanted."

Gemma continued: "Mr Perera explained about Ann Fox's family and told us about their fundraising that had made it possible for the machine to come to the hospital."

Despite the presence of the machine, Gemma was still in need of a suitable organ. Then, on 7 November 2018 a liver was found.

"It's a mixture of emotions" Gemma said, "It's hard to get your head around the fact that someone has got to go through loss so that you can have something from it. This is difficult to process."

She knew what to expect from the operation, saying: "When it's your second transplant you're considered a high risk and this plays on your mind a bit and you know what to expect with the operation and the recovery process.

"Before I went into surgery, Mr Perera told me that if it weren't

for the machine then I wouldn't have been able to have that liver as it took a long time to come over, and by looking at it they wouldn't have considered it suitable."

Gemma's new liver was placed inside the OrganOx machine where it was then cleaned, and the fatty deposits were washed away, ready for it to be transplanted. This process can take up to four hours, but in Gemma's case it was ready within forty minutes.

Mike said: "Mr Perera told us that it was a beautiful liver. This was such a relief to hear. We got the call at 6am to say that they had a liver for Gemma, but the surgery wasn't until 7:30 that night."

Gemma's surgery was a great success and she was up out of bed and sitting in her chair within two hours of waking up. She said: "It's hard to explain but I feel totally different. I feel ready to get up and go. I want to get back into teaching, I miss the kids and I miss the challenges.

"It's good to be able to plan for the future again, life goes on hold when you're unwell. We're starting to plan a nice holiday abroad with the boys, they deserve it after everything they've been through."

Mike, who works as a night time manager and route planner working 12 hour night shifts five days per week, said: "It's been a big part of our married life, we got married in 2001 and she had it then. It's been a challenge for the whole family, thankfully we've had lots of people looking out for us, especially my colleagues who have been amazing and helped us look after the kids."

Reflecting on her experience at QEHB, Gemma said: "The hospital is fantastic, I couldn't speak highly enough of them, the staff have been absolutely brilliant. It blows you away what they can do, we're so grateful."

Mike said: "We're both incredibly grateful for the fundraising that allowed Gem to have an operation that she otherwise wouldn't have had."

Gemma added: "From the bottom of our hearts, we thank you. I've got my life back, and my boys have got their mum back."

Justine Davy, Head of Fundraising at QEHB Charity, said: "Gemma's story is an incredibly moving one, I'm so glad that she now has the liver that she so desperately needed and that her life can now get back to normal.

"We are incredibly proud to have been able to provide this amazing equipment that is already saving lives at the hospital. The Ann Fox Foundation has been instrumental in raising the money needed to purchase the equipment. It is wonderful that the family of a liver transplant patient, who sadly didn't make it, have been able to gift Gemma and her family with the gift of life."

Research

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

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

In total University Hospitals Birmingham Charity made research grants of £1,653,000 in 2018/19. (2017/18: £1,597,000). Some of our research grants are outlined in the case studies below.

Case Study 1 – Artificial Intelligence for Brain Tumours

Artificial Intelligence, or AI, is an area of computer science that deals with giving machines the ability to mimic human intelligence through the power of coding. The use of artificial intelligence is being trialled across the globe, particularly in scientific research. QEHB Charity has awarded a grant of £113,000 to fund ground-breaking research into AI for brain tumours.

There are around 11,000 new brain tumour patients diagnosed in the UK alone each and every year, and sadly that number is rising. There are a number of treatments for aggressive brain tumours; however, there is more research to be done to improve the overall quality of a patient's life.

Vijay Sawlani, Consultant Neuroradiologist at QEHB, along with PhD student Markand Patel are aiming to find out if AI can provide additional and more accurate information for doctors to understand what is happening to a patient's brain tumour.

After surgery or chemo-radiation treatment, brain tumours initially appear to increase in size to the human eye. This gives the overall impression to the doctor that the treatment is not working.

However, in a number of cases the increased size is temporary, and is down to the treatment itself, rather than the actual tumour growth. This temporary growth is known as 'pseudoprogression' and is thought to be related to dying tumour cells. MRI scans help to determine if the treatments are working however it is not possible for doctors to differentiate between pseudoprogression and growth of a tumour.

As a result of uncertainties, patients are often treated for a further three months. Ongoing treatments can take a huge toll both emotionally and physically on patient, it can also delay patients from entering clinical trials for newer therapies if the tumour is indeed growing.

Recent advances in technology means that AI can now be used to discover new information and patterns about brain tumours that are not visible to the human eye.

In other words, computers will be able to recognise what is a dying tumour and what is a growing one.

This type of AI aims to provide information about tumours earlier and more accurately than is currently possible, as a result potentially saving countless lives in the process.

Cathryn Worth, Fundraising Manager for Queen Elizabeth Hospital Birmingham Charity, said: "The hospital charity is committed to provide this outstanding artificial intelligence for our patients here at QEHB. Donations to the hospital charity mean that cancer patients will receive the highest quality of care that is currently available as it will be at the forefront of modern scientific technology."

Case Study 2 – Maxillofacial team star in BBC TV series Surgeons: at the edge of life

BBC Two television programme Surgeons: at the Edge of Life followed the maxillofacial team, who have benefited from a number of research projects funded by the hospital charity, including the funding of the first Biomechanical Engineer post in this speciality.

The programme followed two operations at QEHB, which are right on the forefront of what is possible in modern medicine.

The first operation was undertaken by Consultant Maxillofacial surgeon Tim Martin and his operating partner Sat Parmar. The patient, former police officer Loretta suffered from a rare disease, which was destroying the bones and muscles in one side of her face, causing her mouth to fuse shut.

The team arrive at a diagnosis of tumefactive fibroinflammatory disease, a rare disease with only 50 documented cases worldwide. Tim and Sat are the first UK surgeons to operate on this disease.

This is a vital operation, as Loretta is at risk of a fatal stroke. Tim's only option is to remove the diseased area of Loretta's face, and then conduct a facial reconstruction.

This procedure involves radical surgery to the entire left-hand side of Loretta's face, and means that she will lose a section of her upper jaw, as well as facial muscles that have become tough and hard.

Removing the diseased area will help to save Loretta's life but could leave her badly disfigured, and so the team set out to fill in the cavity left in her face with a section of bone and muscle removed from her hip.

QEHB has its own on-site maxillofacial prosthetics laboratory, where technicians have adapted the latest 3D design techniques to transform patient scans into bespoke 3D-printed cutting guides. This means that surgeons can cut out the correct amount of bone from the face, and also cut a graft from the hip bone which will slot into the hole in the face with total precision. This accuracy has transformed success rates for surgery, and achieves better cosmetic results for patients.

This incredible work has been made possible thanks to donations to QEHB Charity who have funded 3D software and printers to enable the team to become one of the world-leading prosthetics labs.

The Charity funded a Biomechanical Engineer post within the team, which supplemented the existing digital expertise within the team and made available the specialist service to other specialities within the Trust that could benefit from working with the maxillofacial team. Heather Goodrum took up this post in 2018 and has since been working hard to increase the number of patients who benefit from the incredible work of the maxillofacial team across the hospital.

Justine Davy, Head of Fundraising at QEHB Charity, said: "QEHB Charity is proud to support the maxillofacial team in their work, and the BBC Two programme is an incredible example of the impact that generous donations to the Charity can make."

Facilities

As well as funding equipment and research, University Hospitals Birmingham Charity sometimes funds improvements to buildings or even completely new facilities. In 2018/19 the charity spent £1,318,000 in this category. (2017/18 £1,214,000)

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

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

Case Study 1 – New cancer centre officially opens at Solihull Hospital

The new Haematology and Oncology Day Unit at Solihull Hospital has opened. Solihull Hospital Charity raised £150,000 towards the unit, helping individuals that are currently receiving cancer treatments.

The new facility provides more peace and comfort for the patients that receive treatments and is a far lighter and brighter environment for them. Previously, patients from Solihull were required to travel to Ward 19 at Heartlands Hospital which treats over 8,000 patients annually, across 17 chemotherapy spaces.

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

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

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

To celebrate the opening of the Haematology and Oncology Day Unit, local celebrities came to show their support and gratitude, one of which was Tony Iommi. Tony, lead guitarist for Black Sabbath was diagnosed with Non-Hodgkin's Lymphoma

back in 2012. Iommi is a patron to Ward 19 at Heartlands and regularly shows his support for the doctors and nurses who treat those with cancer.

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

Case Study 2 – Mother reflects on the difference that Fisher House has made to her family

Ciaran Daniel was diagnosed with leukaemia whilst serving in the Royal Navy, on HMS Dragon, in Dubai undertaking a range of work including anti-smuggling operations. Ciaran had shown no signs of being unwell, until he spotted some blood in his urine and presented himself to the doctor on board the ship.

The doctor sent him for tests at a hospital in Dubai, and he was then evacuated to the Queen Elizabeth Hospital Birmingham for urgent treatment.

In the five months since his diagnosis, Ciaran has celebrated his 20th birthday, and has received specialist treatment for his rare form of leukaemia, known as B-type acute lymphoblastic leukaemia.

Ciaran's parents, Jill and Paul, live just outside Hull, East Yorkshire with Ciaran's brother Connor. When they received the call to say that Ciaran had been diagnosed with leukaemia and was to be flown to Birmingham for treatment, it came as a huge shock to them. The couple weren't aware that they could stay in Fisher House, the home away from home for military patients and their families, which has provided free accommodation for forces families since 2013.

Jill said: "We weren't aware of Fisher House before, the day that it all transpired we got the phone calls and were in contact with the Royal Navy and they said that they would meet us at Fisher House.

"I was panicking, thinking that I was going to have to find somewhere near to the hospital, on a bus route. It was a great surprise for us when we found out about it."

Jill and Paul, who both served in the Royal Navy and met at the Northwood base in 1991, have stayed at Fisher House since Ciaran's diagnosis. Jill said: "Either myself or Paul have been staying at Fisher House since Ciaran was admitted, always making sure that one of us is with him in case he's ill."

Speaking of Fisher House, Jill said: "The house itself is amazing, we could not have asked for more. When Ciaran was on the ward he was able to come and have tea with us, if he was well-enough, and being so close to the hospital means that if he's taken ill he can be back on the ward in no time at all.

"The house has been a godsend; just walking in for the first time was incredible. We've got to know so many people from around the world who have been staying here, and we've got to know a few people who are going through similar treatments, which is really important.

“It’s been great for Ciaran too, as he’s been able to talk to people in the forces who have been going through similar treatments. The community feel is amazing.

“For me, it’s the small things, like people sharing their breakfast items if you’ve run out of something, or joining someone for a glass of wine in the evenings after I’ve come back from the ward. You’re able to detach from the hospital environment.”

Ciaran is receiving his treatment on the Teenage Cancer Trust Young Person’s Unit at the hospital; a specialised ward that treats teenagers and young adults aged 16-24. After spending the initial 47 days of his treatment on the ward, Ciaran is now staying at Fisher House, heading up to the ward almost daily for his treatment. At weekends, Ciaran has sometimes been able to return home.

Speaking of the reaction that the family’s friends and relatives have had to Fisher House, Jill said: “Everyone who has come to see us at Fisher House has immediately wanted to fundraise to support it. One of Paul’s friends from the Navy is running the Cardiff half marathon for Fisher House, and a team from Paul’s work at BT are taking on the Three Peaks Challenge in June.”

Ciaran’s friends and colleagues from HMS Dragon raised almost £5,000 for Fisher House, inspired by Ciaran’s time at the house.

Ciaran’s prognosis is positive, and he is about to start a new round of treatment. After this, Jill hopes that he will only need monthly treatments, meaning that the family can return home. She said:

“Hopefully we will only need to travel down for one night at a time, so we can get back to normal life at home, but it’s wonderful knowing that Fisher House is there and waiting for us.”

“We have been very fortunate”, Jill said, “Ciaran’s consultant was keen for him to continue his treatment here at the Queen Elizabeth as he felt we would receive the best care here, and without Fisher House it wouldn’t have been possible to spend time with him.

“We just couldn’t have done it, if you think of the cost of renting a flat it just wouldn’t have worked. We spoke to Patrick at Fisher House and he said that we could stay for as long as we needed to.”

Looking to the future, Ciaran is hoping to go back to his job in the Royal Navy after his treatment. It was a lifelong ambition of Ciaran’s to follow in his parents’ footsteps and join the Navy.

Jill said: “He knew he could apply when he was 15 years and 9 months old, and he asked me to help with his application. I didn’t think he’d get in straight away but within just a few months he’d been accepted! Paul and I are incredibly proud of him.”

Training, education and patient support and welfare

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

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

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

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

In 2018/19, Queen Elizabeth Hospital Birmingham Charity spent £1,331,000 in this category. [2017/18 £1,165,000].

Case study 1 – New bra service for breast cancer patients

The hospital charity has launched a new service for breast cancer patients.

The Charity’s aim is to continue supporting women who have had surgery for breast cancer by providing them with special bras. The Amoena bra is part of a beautifully feminine collection that aids recovery care and helps to speed up post-surgery healing along with helping towards a woman’s psychological recovery.

The scheme, referred to as ‘Bra first’ runs across QEHB and Birmingham Women’s Hospital and has been funded by donations to QEHB Charity. There are two types of bra in the scheme, one type specially made for patients who have received reconstructive surgery and the other for women who have received either a single or double mastectomy.

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

The team of surgeons behind Bra First acknowledged that they had not been able to provide their patients with special bras following surgery due to concerns over cost.

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

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

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

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

Case study 2 – Frailty wards receive reminiscence goodies

Thanks to donations of patients and their relatives, Good Hope Hospital Charity has been able to fund a trolley full of reminiscence items and new equipment for the Frailty Ward at Good Hope Hospital.

Lisa Smith who works on the Frailty Ward at Good Hope Hospital, wanted to buy a Reminiscence Trolley for the patients who are treated on the ward.

The trolley includes various items suitable for older patients who suffer from dementia. The items in the trolley range from wartime items such as books and gas masks, chocolate and sweets packages from when they were younger, and picture books of Birmingham throughout the years.

Items that patients with dementia can pick up and look through can help them feel more positive and can encourage them to talk about things they remember and improve their mood.

Lisa, Senior Sister at Good Hope Hospital, said: "The Reminiscence Trolley is of amazing use to us and the patients. The bits inside it can be given to patients to look through and can even help improve their mood and encourage them to talk about things in the past that they remember that made them happy.

"We are really grateful to everyone who donates to the hospital charity and allows us to purchase things like this; they really are of a great benefit to the patients.

As well as the trolley, the hospital charity was also able to purchase a brand new piece of equipment for the ward which helps staff with patients who may have tripped or fallen over.

The HoverJack® Air Patient Lift is like a mattress which is placed on the floor where a patient has fallen or tripped and they are lifted gently onto it. Once they are on it, the HoverJack is pumped with air slowly which lifts them up to bed level where they can then safely be lifted into bed. This reduces the risk of further injury and distress, and allows the patient to be examined in bed for any injury after falling.

Laura Power, Fundraising Manager at Good Hope Hospital Charity, said: "We are so happy that everything purchased for the Frailty ward helps patients every day whether it is helping them think of positive memories, or assisting them if they have fallen.

How we are funded

University Hospitals Birmingham Charity continues to use money donated in previous years to provide the level of grants made in 2018/19 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

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

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

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

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

Twitter @QEHBCharity
 Facebook www.facebook.com/qehbcharity

Twitter @HHospCharity
 Facebook www.facebook.com/hhospcharity

Twitter @GHHCharity
 Facebook www.facebook.com/ghhcharity

Twitter @SHospCharity
 Facebook www.facebook.com/shospcharity

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

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

Heartlands Hospital Charity
www.justgiving.com/heartlandshospital

Good Hope Hospital Charity
www.justgiving.com/goodhopehospital

Solihull Hospital Charity
www.justgiving.com/solihullhospital

Fisher House
www.justgiving.com/fisherhouse

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

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

Donor	Area of support
Johnny & Lesley Hoo	Prostate Cancer
Peter Bache	Prostate Cancer
Gordon Giltrap	QEHB Charity
Friends of Good Hope Hospital	Good Hope Hospital
Friends of Solihull Hospital	Solihull Hospital
Friends of Queen Elizabeth Medical Centre	Queen Elizabeth Hospital Birmingham
Sutton Coldfield Charitable Trust	Good Hope Hospital – Children’s Outpatients
Sutton Coldfield Town Council	Good Hope Hospital – Children’s Outpatients
Sir Doug Ellis	Good Hope Hospital – Children’s Outpatients
Sophie & Jordan Langstaff, family & friends	Good Hope Hospital – Bereavement Unit
Alan Miller Charitable Trust	Neonatal Unit Heartlands Hospital
Adrian & Paula Bates	Neonatal Unit Heartlands Hospital
Ideas in Action	Neonatal Unit Heartlands Hospital
TSB Sheldon	Heartlands Hospital – Children’s Outpatients
Big Lottery Fund	Heartlands Hospital – Children’s Outpatients
Carl Ikeme	Heartlands Hospital – Ward 19
Grant Carroll and the London White Collar Boxing Academy	Queen Elizabeth Hospital Birmingham - Adrenal tumour research
Nicola Riggs	Centre for Rare Diseases
Natalie Quiroz	Queen Elizabeth Hospital Birmingham Critical Care

Donor	Area of support
Sarah Worthington	Queen Elizabeth Hospital Birmingham Critical Care
Naomi Dobson	Queen Elizabeth Hospital Birmingham Critical Care
Amazon UK	Solihull Haematology & Oncology Centre
Birmingham Irish Cycle Appeal	Solihull Haematology & Oncology Centre
Tony Iommi	Solihull Haematology & Oncology Centre
Breast Friends Solihull	Solihull Haematology & Oncology Centre
ABA Cranes	Solihull Haematology & Oncology Centre
Jaguar Land Rover	Solihull Haematology & Oncology Centre
Get A Head Charitable Trust	Solihull Haematology & Oncology Centre, QE Cancer Appeal
Help Harry Help Others	Solihull Haematology & Oncology Centre
Lions Solihull	Solihull Haematology & Oncology Centre
Philip Baldwin	Solihull Haematology & Oncology Centre
HSBC	Solihull Haematology & Oncology Centre
Help for Heroes	Fisher House
SSAFA	Fisher House
TroopAid	Fisher House
Warwickshire County Cricket Club	Fisher House
Royal Marines Association	Fisher House
MacRobert Trust	Fisher House
ABF The Soldiers Charity	Fisher House
353 Charity	Fisher House
Royal Navy & Royal Marines Charity	Fisher House
Royal Air Force Benevolent Fund	Fisher House
The MacRobert Trust	Fisher House
The Lt Dougie Dalzell MC Memorial Trust	Fisher House
Veterans' Foundation	Fisher House
Spitfire MCC	Fisher House
Andrew Jacks	Fisher House
BAE Systems Ltd	Fisher House
Henry Wong Cantonese Restaurant	Fisher House
Stan Bowley Trust	QE Cancer Appeal
Ladies Fighting Breast Cancer	QE Breast Cancer Appeal
Solvay Oldbury	Elderly Care

Donor	Area of support
Sunrise Senior Living	Elderly Care
Kevin Giddins & friends	QE Fighting Skin Cancer
Penny Birch	QE Fighting Skin Cancer
Roger Calow, Sue Winwood, David Wallis & Mark Preece	QE Fighting Skin Cancer
Stine & Ashley Giles	The Giles' Trust
Maggie Bate	The Giles' Trust
Pauline Richold	Organ Transplants
Tony Fox BEM, family & friends	The Ann Fox Foundation
Karen Morris Memorial Trust	Karen's Home from Home
Sikh Arts & Cultural Association (SACA) Charity Bike Ride	SACA's Home from Home

Case Study 1 – Lily raises a coffee cup to the Pancreatic Foundation

One of our youngest fundraisers, 12-year-old Lily Bradley, has raised a coffee cup to the Pancreatic team here at the Queen Elizabeth Hospital Birmingham after treating her mom.

After Lily's mom, Christy, was admitted to QEHB to get an intraductal papillary mucinous neoplasm (IPMN) removed from her pancreas, she decided to want to raise money for the ward that helped her. As well as this, Christy also ended up having a splenectomy which removes the spleen.

After being cared for at QEHB, Christy's 12-year-old daughter decided she wanted to give something back to the staff that helped her mom through a really tough time. Lily decided to hold a coffee morning and a bake sale on two separate days at Erdington Methodist Church to raise money for the Pancreatic Foundation within QEHB Charity.

Lily's coffee morning and bake sale raised an incredible £2,222.73 for the Pancreatic Foundation and will be used to provide added extras for the staff, patients and families on the wards that Lily's mom, Christy, was treated on. Lily said: "My mom had an operation and was looked after on Ward 726 and I am very grateful for all of the people who had taken care of her, that is why I am raising money as a token of thanks and so it helps other people who are in my mom's position."

Talking about the treatment she had, Christy said: "My stay was far less stressful than I had imagined. The staff on ward 726 were fabulous and I felt in safe hands with both the surgeons and the anaesthetist, and the nurses were amazing.

"All of the staff were willing to take time to talk and reassure me and my family, everything was so well explained and thorough including information given on discharge."

After around eight weeks after surgery, Christy unfortunately had complications and was taken back into hospital, it was discovered that she had developed a pseudocyst, similar to a cyst but it has no wall or lining, in her pancreas.

Christy said: "I am still under the surgical team after having a stent fitted; they have all been fantastic and have the time to deal with issues no matter how small. I am very grateful for the quality of care I received at QEHB.

"Lily was just so happy to have me home and see me get better, so she decided she wanted to raise some money as a way of saying thank you and in the hope that it would help others have the same positive experience as I did."

Lily's bake sale was such a huge success and will really help the Charity fund even more added extras for patients just like her mom. We aim to go over and above what the NHS can fund to provide the very best care at the hospital.

Case Study 2 – Couple hold ball for Good Hope Hospital's bereavement services

Sophie and Jordan Langstaff tragically lost their twin baby boys in 2018 at Good Hope Hospital and have since dedicated their time to raising money for the bereavement services at the hospital that treated them.

Fraser James was born on 15 May and passed away shortly after being born, and Parker James was born two days later and also passed away after being born. The couple were able to keep their sons close thanks to the CuddleCot which keeps the baby cool, allowing parents to spend longer with them after they have been born.

After this incredibly difficult time, Sophie and Jordan were taken to the Snowdrop Suite, Good Hope's Bereavement Suite, where parents can spend time with their babies and receive specialist support from the staff on the ward.

The couple decided to host a ball after being at Good Hope Hospital to help raise money to improve the bereavement services offered at the hospital which raised an incredible amount of over £40,000!

The Butterfly Ball, held at the Abbey Hotel in Malvern, was immensely popular and welcomed 200 guests for an evening of entertainment, an auction, raffle, dinner, a night's stay at the hotel and breakfast in the morning.

Lisa Perks, Sophie's mum, helped organise the ball, and talking about the night, she said: "The support and hard work leading up to the event by our friends and family was unbelievable. The room looked amazing for our guests, thanks to the hard work again of our friends and family.

"Sophie and Jordan have been completely overwhelmed by the love and support that has been shown to them over the last year since the twins were born. The pain of losing their twin boys will never leave them but their fundraising for the bereavement suite will now ensure that parents having to go through this heartbreaking experience in the future, can now do so in a more private and appropriate facility at Good Hope Hospital."

The money they have raised will be going towards a new delivery suite for parents who sadly know that they are going to experience a stillbirth or neonatal death. Mothers going through this currently have to give birth on the traditional delivery suite surrounded by other mothers who may be giving birth to

healthy babies. The Charity wants to support those who go through this in the best way possible and make sure that they have the best care at the hospital.

Talking about the evening, Sophie said: "The evening was a huge success and with the help of everyone in attendance we managed to totally exceed all expectations and raise a huge amount of money! Both myself and Jordan are massively grateful to everyone for their extremely generous contributions and know that thanks to them, the Bereavement Suite will become a reality.

"It will provide grieving parents the chance to give birth in a comfortable environment, and will most importantly, give them the time they need to make precious memories that will certainly last a lifetime!"

Case Study 3 – Andrew's journey home

Lt Col Andrew Jacks is a Consultant ophthalmic surgeon in the Royal Army Medical Corps (RAMC). Whilst deployed in Afghanistan, Andrew wanted to use his time to fundraise for Fisher House.

Lt Col Jacks decided to fundraise via a static bike ride calling his challenge 'Andrew's journey home'. His aim was to cycle 3,500 miles, the approximate distance from Kabul, Afghanistan to his home in London, he pledged to cycle over 60 miles a day to ensure he achieved his epic challenge!

Andrew said: "I have served in the Royal Army Medical Corps since 1986, and since 2002 I have worked at the Royal Centre for Defence Medicine based at the Queen Elizabeth Hospital Birmingham. I was deployed to Afghanistan for three months treating eye injuries in the Craig Joint Theatre Hospital.

The Craig Joint hospital is the only hospital of its type in Afghanistan and treats injured coalition soldiers. I wanted to raise money for Fisher House UK - the military 'home away from home' based on the site of QEHB where military patients and their families can stay free of charge."

Fisher House offers a great deal of comfort to patients and their families during such a difficult time whilst their loved ones are in hospital. Since its opening in 2013 Fisher House has provided accommodation to over 4,500 people. Due to the world-class care carried out at the Queen Elizabeth Hospital Birmingham, and the lessons learnt from the battlefield, servicemen and women often survive injuries today that they would have died from just a few years ago. But injuries sustained can be life-changing for both them and for their families.

During uncertain times, families want to be with their loved ones and Fisher House is here for them: a 'home away from home' within walking distance of the hospital, providing a safe space for families to adjust and recover during this difficult time.

Sophie Carroll, Senior Fundraising Officer at QEHB Charity said: "Huge thanks go to Lt Col Andrew Jacks for his tremendous effort in completing the 3,500 mile static bike challenge and raising an astonishing £13,000 to support Fisher House. It sounded extremely tough. However his efforts will help to offer a home away from home for military patients and their families at Fisher House. Thank you!"

Legacies

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

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

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

During the year, we launched a free will writing service in association with Bequeathed, an online will writing service.

You can find out more about the service by visiting www.hospitalcharity.org/bequeathed

We are delighted to report that in the year to 31 March 2019 the charity received generous legacies to the value of £1,009,000. [2017/18: £947,000]. We would like to acknowledge the generous sums received from bequests made by the following people:

Donor	Donor
James Ayres	Mr Bradley
Brenda Capener	Monica Degg
J Ellard	F J Ernest
Margaret Freeth	Maureen Gibson
Mr Graham	Muriel Greenwood
Helena Hassell	Nora Haynes
P Hornby	D Hunt
Peter Jones	Violet Iris Lackey
S Marsden	James Matthews
Mary Metcalfe	Jack Nicholls
E L Perry	Barbara Joan Porter
Mary Porter	Doreen May Potts
Mr Purdy	Mary Pretoria Rickards
Margaret Ann Rigby	Nova Jacquelines Smart
Edna Olive Stockham	R W Trout
L T Wetherell	W Whitburn
Winifred White	Anthony Williams
Beatrice May Woodall	Maureen Worn
Anne C Wright	J F Wright
Joyce Young	

Governance

More about who we are and how we work

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

The charity made the decision to take advantage of the guidance published by the Department of Health on “How NHS charities can convert to independent status” and converted to a new charitable company limited by guarantee on 1 April 2018.

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

Our history

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

On 1 April 2018, the charity became a charitable company limited by guarantee, fully independent from the Department of Health who are no longer responsible for the appointment of Trustees.

How do we do things?

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

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

The Chair of the Trustees, who is elected by the Trustees, chairs meetings and takes an active role working with the Charity Chief Executive in the daily management of Queen Elizabeth Hospital Birmingham Charity. In the financial year to 31 March 2019 the Chair of Trustees was Dave Mackay.

Detailed in the table below are all the Trustees who held office during the financial year to 31 March 2019.

Trustees who were in office throughout the year to 31 March 2019	Date of first appointment*	Date when appointment expires
Brian Hanson	23 February 2016	22 February 2020
Peter Mayer	23 February 2016	22 February 2021
Andrew Pemberton	23 February 2016	22 February 2022
David Ritchie	23 February 2016	22 February 2020
Michael Seabrook	23 February 2016	22 February 2022
David Mackay	23 February 2016	22 February 2023
Ru Watkins	23 February 2016	22 February 2023

*All the Trustees previously served as Trustees under the old charity registration number and were appointed as Trustees under the new charity registration number.

Details of Trustees

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

Brian Hanson is a retired consultant metallurgist who has served on numerous patient councils across the West Midlands.

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

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

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

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

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

Trustee recruitment, appointment and induction

Trustee recruitment is carried out by the hospital charity.

Trustees are recruited following public advertisement, or are nominated by University Hospitals Birmingham NHS Foundation Trust, who have the right to nominate up to a third of the Trustees. As at 1 April 2019, UHBFT has not nominated any Trustees.

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

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

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

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

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

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

Charity Sub-Committees

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

There are two formal sub-committees – the Board Performance Committee and the Finance & Risk Committee - which both met four times during the year 2018/19.

For 2019/20 it has been agreed that these two sub-committees will be combined into a single Finance & Board Performance Committee.

University Hospitals Birmingham Charity's Staff

The charity directly employs eighteen members of staff as at 31 March 2019 (sixteen as at 31 March 2018), equivalent to 16.2 full time employees (13.2 as at 31 March 2018) across the four hospital sites

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

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

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

Remuneration policy

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

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

Having considered the above points, Trustees did not increase the Charity Chief Executive's salary in the year under review.

Volunteers

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

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

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

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

Grant making structure and policy

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

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

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

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

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

- a. Endowment funds – the donor has expressly provided that the investment income of the fund may be applied for a specific charitable purpose.
Endowment funds are further split between expendable endowments (where the Trustees have the discretion to spend the capital) and permanent endowments (where Trustees have no discretion to spend the capital).
University Hospitals Birmingham Charity has no endowment funds.
- 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 500 such funds.

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

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

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

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

Charitable expenditure

Details of our major expenditure in the areas of equipment, medical research, facilities and training, education and patient support, are given elsewhere in this report (see pages 10-15).

During the financial year under review, University Hospitals Birmingham Charity made grants totalling £4,535,000. (2017/18: £6,436,000)

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

Charity's advisors and agents

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

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

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

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

Details of our other advisors can be found below.

Other advisors

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

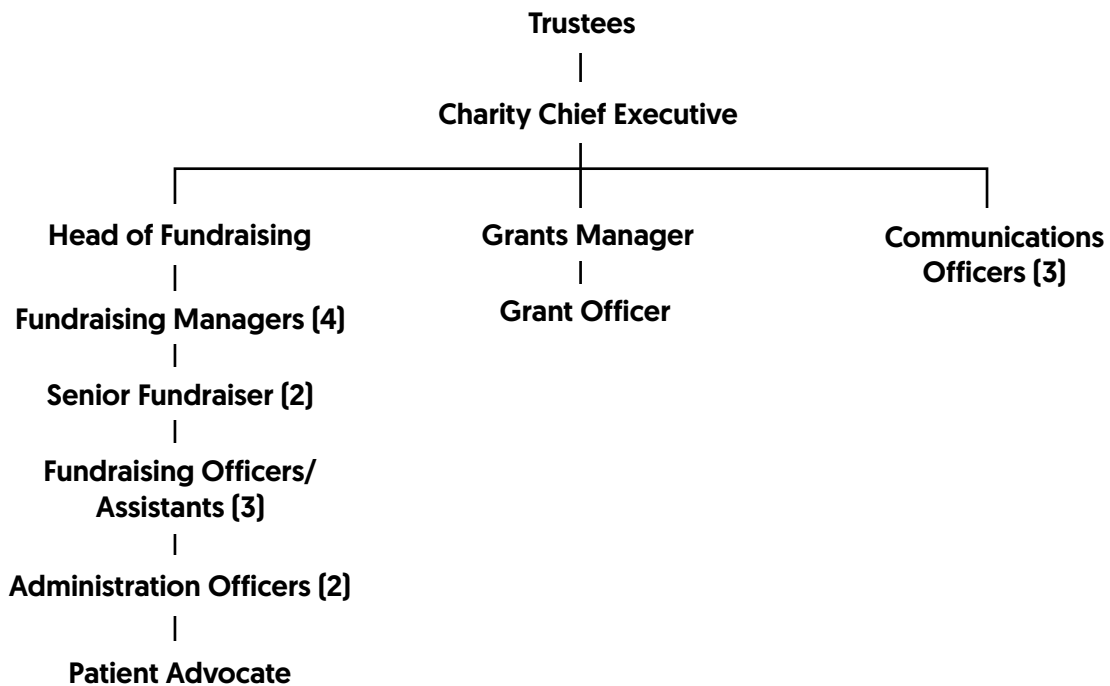
Wider networks and related parties

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

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

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

Administrative Structure as at 31 March 2019



External support structure as at 31 March 2019



Risks policy

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

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

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

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

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

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

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

Investment policy

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

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

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

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

The Trustees have adopted the following investment policy:

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

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

Reserves policy

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

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

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

The total funds of University Hospitals Birmingham Charity at the year ending 31 March 2019 were £14.857 million. The total level of unrestricted reserves is analysed as follows:

	£
Total funds available at year end 31 March 2019	14,857,000
Less:	
Restricted funds	1,115,000
Designated funds (including Fisher House and Homes away from Home)	13,166,249
Total free reserves	575,751

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

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

	£
Provision for six month’s general fund expenditure requirements*	400,000
Total target reserve requirement:	400,000

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

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

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

Financial review

The full 2018/19 Statement of Financial Activities and Balance Sheet and accompanying notes to the accounts are set out on pages 42 to 56.

Income during the year amounted to £4.499 million (2017/18: £12.89m) and expenditure in the year was £5.369 million. (2017/18: £8.15 million)

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

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

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

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

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

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

Statement as a disclosure to our auditors

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

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

Approved by Trustees on 21 August 2019

and signed on their behalf by:



David Mackay (Chairman)

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

Opinion

We have audited the financial statements of University Hospitals Birmingham Charity (the 'parent charity') and its subsidiaries (the 'group' for the year ended 31 March 2019 which comprise of the Consolidated Statement of Financial Activities, the Charity Statement of Financial Activities the Consolidated Balance Sheet, the Charity Balance Sheet, the Consolidated Statement of Cash Flows and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including FRS 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland" (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the group's and of the parent charity's affairs as at 31 March 2019 and of the group's and the parent charity's income and expenditure the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

Basis of opinion

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

The impact of uncertainties due to Britain exiting the European Union on our audit

The Trustee's view on the impact of Brexit is disclosed on page 7.

The terms on which the United Kingdom may withdraw from the European Union are not clear and it is therefore not currently possible to evaluate all the potential implications to the Charity's trade, customers, suppliers and the wider economy.

We considered the impact of Brexit on the group and charity as part of our audit procedures, applying a standard firm wide approach in response to the uncertainty associated with the group and charity's future prospects and performance.

However, no audit should be expected to predict the unknowable factors or all possible implications for the Company and this is particularly the case in relation to Brexit.

Conclusions relating to going concern

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

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

Other information

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

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

Opinion on other matters prescribed by Companies Act 2006

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

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

Matters on which we are required to report by exception

In light of the knowledge and understanding of the group and the parent charity and its environment obtained in the course of the audit, we have not identified material misstatements in the Strategic Report or the Director' Report included within the Trustees' Report.

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

- adequate and proper accounting records have not been kept, or returns adequate for our audit have not been received from branches not visited by us; or
- the parent charity financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specific by law are not made; or
- we have not received all the information and explanations we require for our audit

Responsibilities of trustees

As explained more fully in the trustees' responsibilities statement set out on page 25 of the accounts, the trustees (who are also the directors of the parent charity for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of the financial statements that are free from material misstatement, whether due to fraud or error.

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

Auditor's responsibilities for the audit of the financial statements

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

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

Use of the audit report

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

Nicola Wakefield (Senior Statutory Auditor)
For and on behalf of Mazars LLP
Chartered Accountants and Statutory Auditor
45 Church Street
Birmingham, B3 2RT
Date

Consolidated Statement of Financial Activities (including consolidated Income and Expenditure account) for the year ended 31 March 2019

	Note ref.	Unrestricted funds £000	Restricted funds £000	Total funds £000	Prior Year 2018 £000
Income and endowments from:					
Donations and legacies	3	2,820	2	2,822	11,732
Charitable activities	3.1	1,030	1	1,031	857
Other Trading Activities					
UHB Trading CIC	2.2	14	0	14	0
Investments	10.2	633	0	633	302
<i>Total</i>		4,497	3	4,500	12,891
Expenditure on:					
<i>Raising funds:</i>					
UHB Charity	6.1	822	0	822	709
UHB Trading CIC	2.2	12	0	12	0
<i>Charitable activities:</i>					
Medical Research		1,644	10	1,654	1,597
Purchase of New Equipment		226	7	233	2,757
New Building and Refurbishment		764	0	764	750
Staff Education and Welfare		943	0	943	700
Patient Education and Welfare		388	0	388	465
Fisher House Running Costs		162	0	162	91
Depreciation Costs		392	0	392	373
<i>Total</i>		5,353	17	5,370	7,441
Net (Expenditure) / Income before gains and losses on investments		(856)	(14)	(870)	5,450
Other recognised gains and losses					
Unrealised gains (losses) on investments		78	0	78	(249)
Realised gains (losses) on investments		0	0	0	259
Transfers between funds	16	169	(169)	0	0
Net movement in funds for the year		(609)	(183)	(792)	5,460
Reconciliation of funds:					
Total funds brought forward		14,351	1,298	15,649	10,189
Total funds carried forward		13,742	1,115	14,857	15,649

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

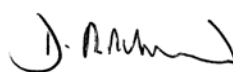
Approved and authorised for issue by the Board and signed on their behalf.

Signed:



Trustee Dave Mackay

Date: 21 August 2019



Trustee David Ritchie

Date: 21 August 2019

The notes at pages 33 to 44 form part of these accounts.

Company Statement of Financial Activities for the year ended 31 March 2019

	Note ref.	Unrestricted funds £000	Restricted funds £000	Total funds £000	Prior Year 2018 £000
Income and endowments from:					
Donations and legacies	3	2,820	2	2,822	11,732
Charitable activities	3.1	1,030	1	1,031	857
CIC Trading Income	2.2	2	0	2	0
Investments	10.2	633	0	633	302
<i>Total</i>		4,485	3	4,488	12,891
Expenditure on:					
<i>Raising funds:</i>	6.1	822	0	822	709
<i>Charitable activities:</i>	6				
Medical Research		1,644	10	1,654	1,597
Purchase of New Equipment		226	7	233	2,757
New Building and Refurbishment		764	0	764	750
Staff Education and Welfare		943	0	943	700
Patient Education and Welfare		388	0	388	465
Fisher House Running Costs		162	0	162	91
Depreciation Costs		392	0	392	373
<i>Total</i>		5,341	17	5,358	7,441
Net (Expenditure) / Income before gains and losses on investments		(856)	(14)	(870)	5,450
Other recognised gains and losses					
Unrealised gains (losses) on investments		78	0	78	(249)
Realised gains (losses) on investments			0	0	259
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Net movement in funds for the year		(609)	(183)	(792)	5,460
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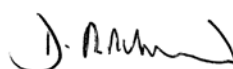
Approved and authorised for issue by the Board and signed on their behalf.

Signed:



Trustee Dave Mackay

Date: 21 August 2019



Trustee David Ritchie

Date: 21 August 2019

The notes at pages 33 to 44 form part of these accounts.

Consolidated Balance Sheet as at 31 March 2019

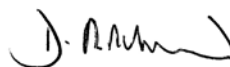
	Note ref.	Unrestricted funds £000	Restricted funds £000	Total funds £000	Prior Year 2018 £000
Fixed assets:					
Investments	10	13,369	1,115	14,484	14,433
Tangible Fixed Assets	10.4	1,580	0	1,580	1,862
Program Related Asset	10.3	265	0	265	231
<i>Total fixed assets</i>		15,214	1,115	16,329	16,526
Current assets:					
Stock	2.2	20	0	20	20
Assets held for sale	11.1	11	0	11	18
Debtors	11.2	957	0	957	583
Cash at bank and in hand	11.3	2,986	0	2,986	4,879
<i>Total current assets</i>		3,974	0	3,974	5,500
Liabilities:					
Creditors: Amounts falling due within one year	12	824	0	824	1,361
Provisions for liabilities: Amounts falling due within one year	14	3,531	0	3,531	3,901
<i>Net current assets/liabilities</i>		(381)	0	(381)	238
<i>Total assets less current liabilities</i>		14,833	1,115	15,948	16,764
Provisions for liabilities: Amounts falling due after more than one year	14	1,091	0	1,091	1,115
<i>Total net assets or liabilities</i>		13,742	1,115	14,857	15,649
The funds of the group:					
Restricted income funds	17.1	0	1,115	1,115	1,298
Unrestricted funds	17.2	13,742	0	13,742	14,351
<i>Total funds</i>		13,742	1,115	14,857	15,649

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

Signed: 

Trustee Dave Mackay

Date: 21 August 2019



Trustee David Ritchie

Date: 21 August 2019

The notes at pages 33 to 44 form part of these accounts.

Balance Sheet as at 31 March 2019

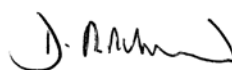
	Note ref.	Unrestricted funds £000	Restricted funds £000	Total funds £000	Prior Year 2018 £000
Fixed assets:					
Investments	10	13,369	1,115	14,484	14,433
Tangible Fixed Assets	10.4	1,580	0	1,580	1,862
Program Related Asset	10.3	265	0	265	231
<i>Total fixed assets</i>		15,214	1,115	16,329	16,526
Current assets:					
Assets held for sale	11.1	11	0	11	18
Debtors	11.2	987	0	987	583
Cash at bank and in hand	11.3	2,976	0	2,976	4,879
Stock	11.4	0	0	0	20
<i>Total current assets</i>		3,974	0	3,974	5,500
Liabilities:					
Creditors: Amounts falling due within one year	12	824	0	824	1,361
Provisions for liabilities: Amounts falling due within one year	14	3,531	0	3,531	3,901
<i>Net current assets/liabilities</i>		(381)	0	(381)	238
<i>Total assets less current liabilities</i>		14,833	1,115	15,948	16,764
Provisions for liabilities: Amounts falling due after more than one year	14	1,091	0	1,091	1,115
<i>Total net assets or liabilities</i>		13,742	1,115	14,857	15,649
The funds of the charity:					
Restricted income funds	17.1	0	1,115	1,115	1,298
Unrestricted funds	17.2	13,742	0	13,742	14,351
<i>Total charity funds</i>		13,742	1,115	14,857	15,649

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

Signed: 

Trustee Dave Mackay

Date: 21 August 2019



Trustee David Ritchie

Date: 21 August 2019

The notes at pages 33 to 44 form part of these accounts.

Consolidated Statement of Cash Flows

		2018/19	2017/18
		£000	£000
Cash flows from operating activities:			
Net cash used in / provided by operating activities	Table A	(2,418)	7,932
Cash flows from investing activities:			
Dividends, interest and rents from investments	10.2	633	302
Proceeds from the sale of property, plant and equipment		0	0
Purchase of property, plant and equipment	10.3	(108)	0
Proceeds from sale of investments	10	0	7,916
Purchase of investments	10	0	(15,958)
Net cash provided by (used in) investing activities		525	(7,740)
Change in cash and cash equivalents in the reporting period		(1,893)	192
Cash and cash equivalents at the beginning of the reporting period		4,879	4,687
Change in cash and cash equivalents due to exchange rate movements		0	0
Cash and cash equivalents at the end of the reporting period	Table B	2,986	4,879

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

		2018/19	2017/18
		£000	£000
Net movement in funds for the period		(792)	5,460
Adjustments for:			
Depreciation charges	10.4	390	372
(Gains) losses on investments		(78)	(10)
Dividends, interest and rents from investments	10.2	(633)	(302)
(Increase)/Decrease in Stock	11.4	0	(20)
(Increase) in debtors	11.2	(374)	(171)
(Decrease) / Increase in creditors	12	(537)	892
(Decrease) / Increase in provisions	14	(394)	1,711
Net cash (used in) provided by operating activities		(2,418)	7,932

Table B: Analysis of cash and cash equivalents

		2018/19	2017/18
		£000	£000
Cash in hand	11.3	2,986	4,879
Total cash and cash equivalents		2,986	4,879

Notes to the Accounts

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

1 Accounting Policies

1.1 a) Basis of preparation and assessment of going concern

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2015) - (Charities SORP (FRS 102)) and the Companies Act 2006.

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

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

1.2 Group Financial Statements

Group financial statements consolidate the results of the charity and its wholly owned subsidiary UHB Trading CIC on a line-by-line basis. A separate income statement and balance sheet for the subsidiary is presented in note 2.2

1.3 Structure of Funds

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

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

The major funds held in each of these categories are disclosed in Note 17.

1.4 Income

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

For legacies, entitlement is taken as the earlier of the date on which either: the charity is aware that probate has been granted, the estate has been finalised and notification has been made by the executor(s) to the Charity that sufficient funds exist to enable a distribution to be made, all conditions within the legacy have been fulfilled or are within the Charity's control or when a distribution is received from the estate. Receipt of a legacy, in whole or in part, is only considered probable when the amount can be measured reliably and the charity has been notified of the executor's intention to make a distribution. Where legacies have been notified to the charity, or the charity is aware of the granting of probate, and the criteria for income recognition have not been met, then the legacy is treated as a contingent asset and disclosed if material (see note 13).

1.5 Donated Goods and Services - Role of Volunteers

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

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

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

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

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

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

1.6 Expenditure and Irrecoverable VAT

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

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

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

1.7 Allocation of Overhead and Support Costs

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

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

Investments

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

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

Tangible Assets

Fisher House is held at cost less depreciation over a 10 year term as per note 10.4

Man Van - this mobile unit is depreciated over the deemed useful life of 3 years

Programme Related Asset

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

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

Current Assets held for sale

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

1.9 Gains and Losses

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

1.1 Debtors

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

1.11 Cash at bank and in hand

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

1.12 Creditors and provisions

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

NHS Pension Scheme

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

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

a) Accounting valuation

A valuation of scheme liability is carried out annually by the scheme actuary (currently the Government Actuary's Department) as at the end of the reporting period. This utilises an actuarial assessment for the previous accounting period in conjunction with updated membership and financial data for the current reporting period, and is accepted as providing suitably robust figures for financial reporting purposes. The valuation of scheme liability as at 31 March 2019, is based on valuation data as 31 March 2018, updated to 31 March 2019 with summary global member and accounting data. In undertaking this actuarial assessment, the methodology prescribed in IAS 19, relevant FReM interpretations, and the discount rate prescribed by HM Treasury have also been used.

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

b) Full actuarial (funding) valuation

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

The last published actuarial valuation undertaken for the NHS Pension Scheme was completed for the year ending 31 March 2016. The results of this valuation set the employer contribution rate payable from April 2019. The Department of Health and Social Care have recently laid Scheme Regulations confirming that the employer contribution rate will increase to 20.6% of pensionable pay from this date.

The 2016 funding valuation was also expected to test the cost of the scheme relative to the employer cost cap set following the 2012 valuation. Following a judgement from the Court of Appeal in December 2018 Government announced a pause to that part of the valuation process pending conclusion of the continuing legal process.

National Employment Savings Trust Scheme (NEST)

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

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

2 Prior Year Comparatives

The primary statements provide prior year comparators in total. The individual comparators for the charity can be found within the relevant note to the accounts. No prior year comparators are available for the UHB Trading CIC as 2018/19 was the first year of operation.

2.1 Related party transactions and trustees' expenses and remuneration

Patients of University Hospitals Birmingham NHS Foundation Trust are the main beneficiary of the charity. The charity has made charitable grants to University Hospital NHS Foundation Trust and these are detailed in note 6.2.

During the year the Charity Chief Executive provided support to the Birmingham Women's and Childrens Hospital Charity between 7th August and 31st December 2018, two payments amounting to £4,620 were recieved in this regard.

University Hospitals Birmingham NHS Foundation Trust provides a financial services and administration service to the charity by agreement with the Trustees. The charges made by the NHS Foundation Trust are set at a fair open market rate and are included in the overhead and support costs detailed in note 6.1.

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

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

During the year no expenses for any trustee were paid directly to a third party. (2017/18 £10.50).

	Trustee	Accomodation	Travel	Training	Total
2018/19					
One Trustee(s)		-	-	-	0.00
2017/18					
Zero Trustee(s)		-	10.50	-	10.50

The value of unclaimed expenses incurred by Trustees wholly and necessarily in the course of executing their Trustee duties have been calculated at £502.08 (£303.99 in 2017/18) This figure was derived by using the postcode distance Trustees have travelled to discharge their duties at the charity at a re-imbusement rate of £0.25 pence per mile.

- 2.2 The Charity opened a wholly owned trading subsidiary in August of 2018. 'UHB Trading CIC' which gift aids all its profits to the charity. UHB Trading CIC is a community interest company limited by guarantee, registered in England and Wales No. 11334657 which sells branded merchandise and generates incme from commercial exploitation of the charity's brands. As the Charity controls the Company its accounts have been consolidated into those of the charity. UHB Trading CIC stand alone trading results for their first year 2018/19 are shown below

UHB Trading CIC Income Statement

Turnover	
Operating Income	14,053
Expenditure	
Cost of Sales	(8,175)
Gross profit	5,878
Administration Expenses	(3,017)
Interest receivable	0
Interest Payable	(947)
Profit for the year	1,914
Gift Aid Donation to UHB Charity	(1,914)
Retained Profit	-

UHB Trading CIC Statement of Position

Assets Employed	
Current Assets	
Stock	19,720
Debtors	0
Cash in Hand and at Bank	10,280
	30,000
Current Liabilities	
Creditors and Accruals	(30,000)
Net Assets	0
Financed by	
Reserves	0

3 Income from Donations and Legacies

	2018/19			2017/18		
	Unrestricted Funds £000	Restricted Funds £000	Total 2019 £000	Unrestricted Funds £000	Restricted Funds £000	Total 2018 £000
Donations from individuals	1,186	1.5	1,188	1,545	1	1,546
Donations from companies	508	0	508	917	0	917
Legacies	1,008	0.5	1,009	947	0	947
Grants	118	0	118	6,643	1,679	8,322
	2,820	2	2,822	10,052	1,680	11,732

3.1 Income from Charitable Activities

	2018/19			2017/18		
	Unrestricted Funds £000	Restricted Funds £000	Total 2019 £000	Unrestricted Funds £000	Restricted Funds £000	Total 2018 £000
Income from Fundraising Events	1,030	1	1,031	854	3	857

4 Loan Interest Receivable

	Capital	Interest on loan Calculated Repayment	Outstanding
23/08/2018 loan and Stock granted	49,720	712	50,432
14/01/2019 stock paid	(19,720)		30,712
21/02/2019 Interest		(946)	29,766
31/03/2019 interest		234	30,000

5 Allocation of Support Costs and Overheads

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

5.1 Analysis of Expenditure	2018/19			2017/18		
	Unrestricted Funds £000	Restricted Funds £000	Total 2019 £000	Unrestricted Funds £000	Restricted Funds £000	Total 2018 £000
Salaries & Pension	125.7	0	125.7	141.3	0	141.3
Travel	0.3	0	0.3	0.0	0	0.0
Training	0.4	0	0.4	2.3	0	2.3
Office Costs	1.4	0	1.4	6.0	0	6.0
Stationery	5.1	0	5.1	7.2	0	7.2
Insurance	6.0	0	6.0	1.8	0	1.8
Subscriptions	3.8	0	3.8	0.0	0	0.0
Trustee training and Expenses	0.1	0	0.1	0.0	0	0.0
Professional fees	0.0	0	0.0	0.0	0	0.0
Internal Audit	14.0	0	14.0	10.7	0	9.8
External Audit	11.2	0	11.2	12.9	0	12.9
Bank Charges	0.2	0	0.2	0.2	0	0.2
Finance SLA	134.2	0	134.2	134.2	0	134.2
Other	12.8	0	12.8	18.2	0	18.2
	315.2	0.0	315.2	334.8	0.0	334.8

All support costs have been allocated to unrestricted funds due to minimal restricted transactions on the basis of the number of transactions processed and is shown at note 6.1 of these accounts.

5.2 Governance Costs

Calculated governance costs for 2018/19 are £85k (2017/18 £82k). They relate to costs associated with the governance of operating the charity and include such items as Statutory Audit, Company registration and legal costs as well as an apportionment of remuneration and financial services costs for time spent on governance issues.

6 Analysis of Charitable Expenditure

Expenditure on charitable activities was £4,536k (2018: £6,733k) of which £17k was restricted (2018: £43k).

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

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

	2018/19			2017/18		
	Grant Funded	Support	Total	Grant Funded	Support	Total
	Activity	Costs	2019	Activity	Costs	2018
	£000	£000	£000	£000	£000	£000
Medical Research	1,591.8	61.7	1,654	1,523.2	73.3	1,597
Purchase of New Equipment	168.8	64.5	233	2,688.6	68.3	2,757
Building and Refurbishment	762.8	1.6	764	748.6	1.6	750
Staff Education and Welfare	845.0	98.3	943	597.9	102.3	700
Patient Education and Welfare	346.4	41.3	388	426.4	38.8	465
Fisher House Running Costs	151.4	10.4	162	78.9	11.6	91
Fisher House Depreciation Costs	391.5	0.3	392	372.4	0.3	373
	4,257.7	278.1	4,536	6,436.0	296.2	6,733

6.1 The remaining £36.3k support costs (£38.3k 2017/8) have been allocated to the Costs of Raising Funds on the basis of the number of transactions. Due to the minimal level of transactions on Restricted funds all costs are assigned to Unrestricted funds. (2018 nil)

	2018/19			2017/18		
	Grant Funded	Support	Total	Grant Funded	Support	Total
	Activity	Costs	2019	Activity	Costs	2018
	£000	£000	£000	£000	£000	£000
Costs of Raising Funds	360.0	36.3	396	319.7	38.3	358
Costs of Fundraising Events	402.7	0.0	403	311.0	0.0	311
Investment Management Costs	23.1	0.0	23	40.0	0.0	40
	785.8	36.3	822	670.7	38.3	709

6.2 Grants

The charity does not make grants to individuals.

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

Institution Receiving Support	2018/19	Total	2017/18	Total
	Number of Grants		Number of Grants	
		2019		2018
		£000		£000
University Hospitals Birmingham NHS Foundation Trust	*	3,562	*	5,734
University of Birmingham	*	696	*	702
		4,258		6,436

* As per Scheme of Delegation

7 Analysis of staff costs and remuneration of key management personnel

	Total	Total
	2019	2018
	£000	£000
No Staff costs are contained within the Trading Company		
Salaries and wages	429	367
Social security costs	38	33
Other pension costs	25	23
	492	423
Pension Costs are split as follows		
Defined Contribution Scheme	11	10
NHS Pensions Defined Benefit Scheme	14	14
	25	24
Outstanding contributions at year end were:		
Defined Contribution Scheme	2	1
NHS Pensions Defined Benefit Scheme	0	0
	2	1
Average full time equivalents of employees in the year:	16.0	14.0
Average head count during the year:	18.0	18.0

- 8 The key management personnel for both the Charity and the UHB Trading CIC comprise the Trustees (unpaid) and the Charity Chief Executive who was paid a salary of £80,000 plus pension contributions of £11,504. No other members of staff were paid in excess of £60,000.

9 Auditor's Remuneration

The external auditor's remuneration of £11,160 (2018: £12,900) related solely to statutory audit work. The charity did not commission any additional work from the auditor (2017/18 nil).

10 Analysis of Fixed Asset Investments Movements during the year

	2019 Charity £000	2019 Group £000	2018 Total £000
Market value at start of year	14,433	14,433	6,375
Add transfer fr HEFT charity	0	0	8,060
Transfer from Assets held for resale	7	7	
Less: Disposals at carrying value	0	0	(7,651)
Add: Acquisitions at cost	0	0	7,898
Net losses on revaluation	44	44	(249)
Market value at end of year	<u>14,484</u>	<u>14,484</u>	<u>14,433</u>
Historic cost at year end	<u>5,920</u>	<u>5,920</u>	<u>5,913</u>
Proceeds from the sale of investments in year	0	0	7,910

10.1 Market value at 31 March - All held in the UK

	2019 Charity £000	2019 Group £000	2018 Total £000
Schroders Multi Asset Fund	14,392	14,392	14,416
Other Investments	92	92	17
	<u>14,484</u>	<u>14,484</u>	<u>14,433</u>

10.2 Total gross income from

	2018/19 Total £000	2017/18 Total £000
a) Fixed Asset Investments		
Investments listed on a recognised Stock Exchange	608	283
b) Current Assets		
Interest earned on cash deposits and inter co. loan in the year	<u>25</u>	<u>19</u>
	<u>633</u>	<u>302</u>

10.3 Programme Related Asset - Elizabeth Court

All assets relate to the Charity

	2019 Charity	2019 Group	2018 Total
Freehold Property			
Market Value at start of Year	141	231	231
Additions	0	0	0
Net (Loss) Gain on revaluation	29	34	0
	<u>170</u>	<u>265</u>	<u>231</u>
Historic Cost	204	204	204

10.4 Tangible Fixed Assets	Total		Fisher House		Man Van		2018 Total £000
	2019	2019	2019	2019	2019	2019	
	Charity £000	Group £000	Charity £000	Group £000	Charity £000	Group £000	
COST	3,724	3,724	3,724	3,724	0	0	3,724
Additions	108	108	0	0	108	108	0
Disposals	0	0	0	0	0	0	0
	<u>3,832</u>	<u>3,832</u>	<u>3,724</u>	<u>3,724</u>	<u>108</u>	<u>108</u>	<u>3,724</u>
ACCUMULATED DEPRECIATION							
As at 1st April 2018	1,862	1,862	1,862	1,862	0	0	1,490
Charge for the year	390	390	372	372	18	18	372
Disposals	0	0	0	0	0	0	0
Depreciation as at 31st March 2019	<u>2,252</u>	<u>2,252</u>	<u>2,234</u>	<u>2,234</u>	<u>18</u>	<u>18</u>	<u>1,862</u>
Net Book Value as at 31st March 2019	<u>1,580</u>	<u>1,580</u>	<u>1,490</u>	<u>1,490</u>	<u>90</u>	<u>90</u>	<u>0</u>

11 Analysis of Current Assets (Debtors)

11.1 Amounts falling due within one year:

	2018/19 Charity £000	2018/19 Group £000	2017/18 Total £000
Assets held for sale (Leaseholds)	<u>11</u>	<u>11</u>	<u>18</u>

11.2 Amounts falling due within one year:

	2018/19 Charity £000	2018/19 Group £000	2017/18 Total £000
Trade debtors	145	145	90
Accrued income	807	807	399
Prepayments	5	5	94
Inter Company balance Due	30	0	0
Total debtors falling due within one year	<u>987</u>	<u>957</u>	<u>583</u>

11.3 Cash at Bank and in Hand

	2018/19 Charity £000	2018/19 Group £000	2017/18 Total £000
Cash	<u>2,976</u>	<u>2,986</u>	<u>4,879</u>

11.4 Stock held for sale

	2018/19 Charity £000	2018/19 Group £000	2017/18 Total £000
Stock	<u>0</u>	<u>20</u>	<u>20</u>

12 Creditors

	2018/19 Charity £000	2018/19 Group £000	2017/18 Total £000
Amounts falling due within one year:			
Trade creditors	484	484	1,132
Accruals	340	340	229
Total creditors falling due within one year	<u>824</u>	<u>824</u>	<u>1,361</u>

13 Contingent assets – legacy income

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

14 Liabilities and Provisions	Charitable Expenditure	Other Expenditure	2019 Total	2018 Total
Movements during the year	£000	£000	£000	£000
Opening Provisions	5,016	0	5,016	3,305
Add: New provisions charged in the year	2,798	0	2,798	4,556
Less: Provisions released in the year	(2,539)	0	(2,539)	(1,871)
Change in value of brought forward provisions	(653)	0	(653)	(974)
Provisions outstanding at end of year	<u>4,622</u>	<u>0</u>	<u>4,622</u>	<u>5,016</u>
Provisions Payable within one year	3,531	0	3,531	3,901
Provisions payable after more than one year	1,091	0	1,091	1,115
Provisions outstanding at end of year	<u>4,622</u>	<u>0</u>	<u>4,622</u>	<u>5,016</u>

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

15 Commitments

Trustees have entered into arrangements with future commitments as follows:

	2019 Land & Buildings	2019 Other	2018 Land & Buildings	2018 Other
	£000	£000	£000	£000
Expiring within a year				
Finance SLA	<u>0</u>	<u>137</u>	<u>0</u>	<u>134</u>
	<u>0</u>	<u>137</u>	<u>0</u>	<u>134</u>
Expiring between 2 - 5 years	0	0	0	0

16 Transfers Between Funds

There have been two transfers between funds during the year, one from the restricted Hollier Legacy fund for £150k, which relates to a grant made for the Partnership Learning Centre and Education Centre, and one from the restricted Get Ahead fund for £20k being a grant to the Solihull Chemotherapy Day Unit Fund (2017/18 £399k).

17 Analysis of Charitable Funds**17.1 Restricted Funds**

	Balance 1 April 2018 £000	Income £000	Expenditure £000	Transfers £000	Gains and Losses £000	Balance 31 March 2019 £000
A Hear and Now	21.0	2.0	0.0	0.0	0.0	23.0
B Get Ahead	40.0	1.0	(17.0)	(19.0)	0.0	5.0
C Hollier Legacy	1,237.0	0.0	0.0	(150.0)	0.0	1,087.0
Total Restricted Funds	1,298.0	3.0	(17.0)	(169.0)	0.0	1,115.0

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.
- C To fund a lecture room to be named in memory of Harry Hollier and the training and education of junior doctors at Good Hope Hospital.

17.2 Unrestricted and Designated (Earmarked) Funds

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

	Balance 1 April 2018 £000	Income £000	Expenditure £000	Transfers £000	Gains and Losses £000	Balance 31 March 2019 £000
(Earmarked) Funds						
A Hollier Education Centre Upgrade	991.0	25.0	(594.6)	(270.8)	0.0	150.6
B Ward 19 CharityFund Heartlands	878.0	100.4	(271.7)	0.3	0.0	707.0
C HGS General Charity Fund	544.3	3.9	(205.0)	(276.5)	0.0	66.7
D Richard Salt Refurbishment	510.6	0.0	(56.8)	0.0	0.0	453.8
E Fisher House	425.4	186.4	(84.0)	(239.8)	0.0	288.0
F Midwifery Led Unit	350.0	3.3	(5.2)	250.0	0.0	598.1
G Friends of QE Medical Centre	341.6	0.0	(3.4)	13.5	0.0	351.7
H QEHB Charity	291.7	163.9	(130.3)	(149.3)	0.0	176.0
I Oncology Research Fund	280.7	0.2	(1.4)	(29.7)	0.0	249.8
J Prostate Cancer	273.2	35.2	(5.6)	(108.2)	0.0	194.6
K AccelerateTED Research Prog	183.1	0.0	(189.2)	0.0	0.0	(6.1)
L Heartlands Hospital Charity	174.6	26.4	(16.8)	(54.6)	0.0	129.6
M Endocrine Research Fund	169.8	0.0	(3.6)	0.0	0.0	166.2
N Heart Transplants	156.9	44.9	0.0	0.0	0.0	201.8
O Liver Foundation	139.6	1.0	(46.3)	46.1	0.0	140.4
P Renal Unit	126.7	9.7	(23.2)	0.0	0.0	113.2
Q Inherited Metabolic Disease	125.1	1.0	(3.4)	0.0	0.0	122.7
R Bacteriology	124.6	(3.7)	(19.6)	13.1	0.0	114.4
S Rare Diseases Centre	118.6	11.6	(0.6)	0.0	0.0	129.6
T Genito-Urinary Medicine Services	114.5	0.1	(14.0)	0.0	0.0	100.6
U Uro-Oncology Research	112.9	1.1	(15.1)	(39.0)	0.0	59.9
V QE Fighting Skin Cancer	77.0	27.8	(9.3)	23.5	0.0	119.0
W Good Hope Hospital Charity	25.2	13.7	(35.9)	117.3	0.0	120.3
X Heartlands Hospital Childrens Fund	7.5	107.2	(0.3)	172.2	0.0	286.6
Y Birmingham Hospitals Childrens Fund	3.8	6.4	(7.9)	254.3	0.0	256.6
Other earmarked funds	7,219.2	3,717.3	(3,597.6)	449.0	0.0	7,787.9
All Funds Unrealised Gain/(Loss)	585.0	0.0	0.0	0.0	78.0	663.0
	14,351	4,483	(5,341)	171	78	13,742
UHB Trading CIC	0	14	-12	-2	0	0
Consolidated Total	14,351	4,497	(5,353)	169	78	13,742

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

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

- A Upgrade of the Education Centre
- B For the support of haematology and oncology services at HGS.
- C HGS 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 Heartlands, Good Hope and Solihull Hospitals.
- D Richard Salt Refurbishment Programme
- E Fisher House; Forces and Families Centre.
- F To create a midwife led unit at Good Hope Hospital.
- G Funds Raised for the QE Medical Centre.
- H QEHB Charity Funds are those funds for which a donor has not expressed any specific non-binding wish and the unrestricted income accruing to the charity. These funds are applied for any charitable purpose to the benefit of the patients of University Hospitals Birmingham.
- I Research Fund - Welfare & Amenities for oncology patients and staff.
- J Funds raised to support Prostate Cancer.
- K AccerleraTED - Drugs Trial programme.
- L Heartlands 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 Heartlands Hospital.
- M Endocrine related research including clinical and laboratory research.
- N Heart Surgery & Transplantation.
- O Support for the Liver Unit.
- P Support for the Renal Unit at HGS
- Q Support for the Inherited Metabolic Disease unit.
- R To support the bacteriology service at HGS.
- S Support for the Centre for Rare Diseases
- T Support for the Genito-Urinary Medicine Services unit.
- U Support of research projects & equipment for the Urology team.
- V Support for the Skin Cancer Dept
- W Good Hope Hospital 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 Good Hope Hospital.
- X Support for the Childrens' Unit at Heartlands Hospital
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.

