



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 2024

Company Registration Number 10004003

Charity Number 1165716

Company Address
Fisher House, Mindelsohn Way,
Queen Elizabeth Hospital, Birmingham B15 2GN

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Executive Summary

University Hospitals Birmingham Charity (“the Charity” or “UHB Charity”) exists to support the patients and staff of University Hospitals Birmingham NHS Foundation Trust (“UHBFT”), by funding equipment, facilities, research and patient support that are over and above what can be provided by the NHS.

UHBFT operates four of the largest hospitals in the Birmingham area - the Queen Elizabeth Hospital Birmingham (“QEHB”), Heartlands Hospital, Good Hope Hospital and Solihull Hospital as well as Birmingham Chest Clinic, Solihull Community Services and Umbrella Sexual Health Services.

Together, the hospitals and the Charity care for nearly three million patients a year. Patients are referred to the hospitals’ many centres of excellence from across the UK. We also support the 25,000 staff who work throughout our hospitals.

Our patients and staff are at the heart of everything we do. Since 2010 the Charity has spent over £70 million funding projects to save and improve the lives of our patients and staff. Every day our work makes a real and lasting difference to those visiting and working in our hospitals.

At UHB Charity we support everyone from tiny babies who arrive too soon, brave children undergoing lifesaving treatment, cancer and transplant patients, injured military heroes and older patients suffering with dementia. We even work with our four legged friends, with our Pets in Hospital scheme bringing dogs to visit patients on wards for a cuddle.

Whilst the Charity’s official name reflects the NHS Foundation Trust it is based at, it is known to the public mainly by its four individual hospital brands – QEHB Charity, Heartlands Hospital Charity, Good Hope Hospital Charity and Solihull Hospital Charity.

This is because the public mainly identify with the names of our hospitals rather than the overall NHS Foundation Trust name.

The 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.

The CyberKnife and Tomotherapy machines which were funded by the Charity are providing world class care for radiotherapy patients at QEHB, the Heart in a Box machine and Ann Fox Foundation liver perfusion devices are increasing the numbers of organs suitable for transplant, and Charity funded research is discovering ways to repurpose existing drugs to treat cancer patients.

Fisher House, the “home away from home” for military patients and their families, continues to be a safe haven for the families of our injured and ill heroes so they can be close to each other whilst in hospital.

The Charity also provides similar “home away from home” services for NHS patients, based at QEHB and Heartlands Hospital. These include Karen’s Home from Home which is kindly supported by the Karen Morris Memorial Trust, Millie’s Home from Home which is kindly supported by Millie’s Watch Charitable Trust and Stine’s Home from Home which is kindly supported by The Giles’ Trust.

Our Heartlands Hospital Home from Home is used by parents of babies on the neonatal unit after they entered the world a little early and need some extra care by our specialist teams.

During the year under review we celebrated the first anniversary of the Heartlands Treatment Centre in which we funded a state of the art MRI scanner and decoration of the MRI Suite and children’s recovery room.

We continue to work with a number of local charities, including Libby Mae’s Little Angels, 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 SSAFA and The Royal British Legion for their support of military patients and their families through their ongoing support of £50,000 each per year towards the Fisher House running costs.

This is just a snapshot of the progress the Charity has made during the last year, including being 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. The Charity is always proud to have supported our amazing hospitals this year and we look forward to hitting new highs in excellent patient care.

Chair's Statement

I am immensely privileged to have served seven years as the Chair of Trustees for University Hospitals Birmingham Charity and I am so proud to see the difference the Charity makes to patients, families and staff across our hospitals.

This year it has been my pleasure to be able to visit and see so many of our projects and speak to patients and their families who have told their stories of how the Charity has been able to help them at their time of need, a number of whose stories are told later in this report.

None of that could have been done without the kind and generous support of our donors and fundraisers. Over the past year our fundraising income exceeded £5 million, over 6% up from the previous year even during a time of high inflation and increased costs of living.

Whether you have taken part in one of our events, made a donation, volunteered or joined our weekly lottery, we want to say a huge thank you for helping us reach our total. In whatever way you have chosen to support us, we are very grateful. It means we can continue to change and save lives.

In the year ahead, some of our projects should come to completion and new projects will be launched, all in order to make the patient experience the best it can possibly be.

The Edmonds Transplant Centre is due to be completed in December 2024, a centre at QEHB which will revolutionise the care we can provide to transplant patients. We are extremely grateful to A Edmonds & Co, whose large donation provided the cornerstone of our fundraising.

Our Homes from Home continue to provide accommodation for families to stay close to their loved ones in hospital, and 2024/25 is expected to smash all previous records for total numbers of people staying at our Homes from Home.

In June 2023, we celebrated ten years of Fisher House, our "home away from home" for military patients and their families. We were delighted to welcome a number of the families who have used

the facilities back to a garden party to celebrate the milestone. Over 7,500 patients and family members have used Fisher House since we opened our doors in June 2013 and we have provided over 42,000 free nights of accommodation.

I am pleased to welcome a new trustee, Ameila Godson, to the Charity. Amelia has extensive experience within the NHS, working at one of the county's Integrated Care Boards, helping to give us a much wider understanding of the challenges and opportunities not just for UHBFT but for the wider NHS as a whole.

We also said goodbye to two very long standing Trustees who have made an outstanding and invaluable contribution to the Charity during their tenure.

Ru Watkins, former Chief of Staff for the Royal Centre for Defence Medicine, served as a Trustee for eleven years and was instrumental in the creation of Fisher House. I am delighted that he will continue to be involved as an Ambassador for Fisher House.

David Ritchie was our longest serving Trustee, having served fifteen years, and will be immensely missed for his contribution to the Charity. A governance expert, his skills and knowledge will be hard to replace and I am truly grateful for all the help and support David gave me as Chair personally, as well as his sage advice to the Charity.

All of our fundraising activities are to make progress towards one goal – supporting patients and staff at UHBFT. 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 hospitals and universities across the region, or simply by making a patient's stay in hospital just that little bit more comfortable.

Through your kind and generous support, we can continue to make a difference to the hospitals' 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 to the wider public, and our job is made so much easier because of the tremendous 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 Live and British Forces Broadcasting who all continue to be very supportive in showcasing news stories about the Charity and its support of patients.

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 Jonathan Brotherton (Chief Executive of UHBFT) and his management team for their valuable support of the Charity, ensuring that we have good links throughout the hospitals and helping us to identify ways we can benefit patients.

I would also like to acknowledge the valuable support of our volunteers, both those in the hospitals and the numerous volunteers carrying out their own fundraising events across the country. As Chair of the Board I would like to express my gratitude to my fellow Trustees and I know we all are very proud to witness the dedication of our own Charity staff and the pride they take in their work.

I hope you will enjoy reading this report and hearing a little 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 University Hospitals Birmingham Charity, Fisher House, Mindelsohn Way, Queen Elizabeth Hospital, Birmingham, B15 2GN. You can see more about the hospital charity via our website, www.hospitalcharity.org.

Thank you all for your support.



David Mackay
Chair of Trustees

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.

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

The Charity operates predominantly across four hospitals – QEHB, 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, UHBFT staff, 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 regularly monitor and review the success of the Charity in meeting its key objectives of benefiting patients at UHBFT. The Trustees confirm, in the light of the guidance, that these aims fully meet the public benefit test and that all the activities of the charity are undertaken in pursuit of its aims.

A vital role of the Charity is its work in supporting and enhancing UHBFT's outstanding quality of clinical activity, and accordingly this report includes some general information about UHBFT.

Fundraising Regulator

The 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

UHBFT is one of the largest teaching hospital trusts in England, serving a regional, national and international population.

It includes Heartlands Hospital, the QEHB, 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 2.5 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 untreatable injuries.

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

The Wellcome Trust Clinical Research Facility is also hosted by UHBFT at QEHB. This development is a joint initiative between UHBFT and the University of Birmingham Medical School.

UHBFT partnered with the 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 £4,500,000	Achieved (£5,163,000).
2		To spend charitable funds to support patients across UHBFT	Meet budgeted expenditure target of £4,647,440	Achieved (£6,112,000). Additional spend was due to the completion of some delayed projects and the early finish of some other projects.
3		To maximise how much per £1 spent is spent on charitable activities	To strive to spend at least 75p per £1 spent on charitable activities which would be better than the charity sector average	Achieved. 81p of every £1 spent is spent on charitable activities.
4		To maximise the amount raised per £1 spent on fundraising costs	To strive to raise at least £4 per £1 spent on fundraising costs which would be better than the charity sector average	Achieved. Raised £4.46 per £1 spent on fundraising.
5		To raise awareness of the Charity across social media channels	Increase in followers on Facebook, Twitter, Instagram, TikTok and YouTube.	Achieved – numbers grew across all social media platforms.
6		To be an employer of choice	Monitor staff turnover rates with the aim to be lower than the charity sector average	Staff turnover 19% against charity sector average of 25%.
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 2.5 days per employee p.a. against charity sector average of 7.1 days per employee p.a.

Plans for the future

The Charity met during the year with UHBFT on a regular basis and, based on these discussions, the Trustees have identified the following areas for support:

1. Birmingham Transplant Centre

UHBFT is Europe's largest solid organ transplant unit but currently the services are spread across the hospital sites.

By consolidating pre-transplant, surgery and post-transplant services in a central location at QEHB, UHBFT aims to provide a better service to patients and families, whilst strengthening the research potential of the unit as it will be easier to introduce new and advanced practices such as Heart in a Box and the Ann Fox liver perfusion machines when all services are based in a single location.

The Charity has identified a need to raise £4,100,000 to support UHBFT in this area by bringing together all of the specialist transplant care available to the patient, taking away a huge amount of stress and therefore speeding up recovery time, and as a result UHBFT will be able to offer even more transplants and therefore save even more lives.

2. The Giles' Trust

QEHB 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 consultant oncologists Sara Meade and Helen Benghiat to fund cutting edge medical equipment for the diagnosis and treatment of brain tumours, and has funded a Clinical Research Nurse 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.

3. Fisher House

Fisher House provides a "home away from home" for military patients and their families. Many of those military personnel served in Iraq and Afghanistan and continue to return to the hospital for more surgery, and personnel who are receiving treatment for illness – from cancer care to transplants.

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

The Charity needs to provide £300,000 each year to run Fisher House and the Friends of Fisher House scheme allows groups, companies and individuals to support Fisher House directly.

4. Homes from Home

University Hospitals Birmingham Charity's Homes From Home appeal provides patients and families with free accommodation near to our hospitals, helping to keep families together during difficult times in their lives.

Our Homes from Home appeal began with Fisher House, our military home from home, and has expanded into providing accommodation at QEHB and Heartlands Hospital for civilian patients who are being treated in one of our specialist units such as the bone marrow transplant unit at QEHB or the Neonatal unit at Heartlands Hospital.

For patients and their families, visiting the hospitals can be a stressful experience without the added pressure of trying to find somewhere to stay to be near a loved one. We provide these homes away from home to alleviate that stress, and make visiting the hospital, under what can be very difficult circumstances, as easy as possible.

We are proud to support patients and their families when they need it the most.

The Charity needs to provide £300,000 each year to run its Homes from Home and the appeal allows groups, companies and individuals to support our Homes from Home 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 the Charity at charities@uhb.nhs.uk

You can also visit our website at www.hospitalcharity.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 the Charity, at mike.hammond@uhb.nhs.uk or on 0121 371 4852 or by writing to:

Mike Hammond
Chief Executive
University Hospitals Birmingham Charity

Fisher House
Mindelsohn Way
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Birmingham
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What we fund

The Charity funds projects in four main areas – equipment, research, facilities, and staff & patient welfare. 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

The Charity is proud to supplement the excellent quality of care on offer to the over two million patients who are treated across UHBFT each year. The Charity provides equipment that is ‘over and above’ core NHS funding. This can mean funding equipment that is on the cutting-edge of modern medicine and so not yet available on the NHS, or funding additional machines that will benefit patients by reducing waiting times.

In 2023/24, the Charity spent £413,000 on new equipment (2022/23: £974,000).

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

Designated Fund	Equipment
Skull base surgery	Karl Storz endoscopic surgery system
Breast Cancer	Hologic Localizer probes
Solihull Orthodontics	Intraoral scanner
Solihull Ophthalmology	Heidelberg Spectralis OCT
Haematology & Oncology	Occura electric fully reclining chairs
Haemodialysis	Fresenius body composition monitor
Heart & Lung Transplantation	Spirometers
Physiotherapy	Syrebo robotic glove

Case study 1: Robotic glove helps stroke patients

UHBFT treats many patients who have a stroke. Many of them make good recoveries but some are left with very severe weakness following their stroke.

The impact of a Stroke can be devastating, especially the more severe strokes where people are not able to move their arm at all. For people who are mildly or moderately affected by a stroke we have a range of good therapeutic interventions that can help them recover. However, when someone is more severely affected then there are less options available.

This can lead to stroke survivors feeling abandoned when they are discharged from hospital. They are reliant on family or carers to carry out passive stretches to maintain their range of movement but that can be difficult due to time constraints, and it doesn't promote the recovery of movement.

The physiotherapists are aware that following a stroke many patients and their therapists concentrate on regaining the ability to walk or transfer. In comparison less attention and input is put

on arm and hand recovery. There are also barriers to effective arm and hand rehabilitation, such as time, cognitive ability and pain.

The Charity has funded a robotic glove to give hope to stroke survivors that they might be able to recover hand movement and function as well as reduce the risk of their hand becoming tight and painful.

By using the robotic glove as an adjunct to the patient's usual therapy input at an early stage, it will reduce the risk of some post stroke complications such as pain and stiffness, as well as encouraging the return of movement.

The Robotic glove also has the ability to provide mirror therapy whereby one hand copies the other, encouraging neuroplasticity in the brain, and resistance training when people's hand function is improving. This means that a wide range of patients are able to benefit from the robotic gloves.

Patients with other neurological conditions such as spinal cord injury will also benefit from repetitive task specific exercises using the robotic glove.

Patient feedback has been extremely positive.

One patient said "I think this equipment is absolutely excellent, already I feel my fingers moving a lot easier, whereby when I do it manually I'm pressing them in with my [other] hand and this...well... I think is absolutely brilliant."

The physiotherapists report that it is easy to set up and use and can be used both in a hospital clinic setting and at home.

Case study 2: Localizer probes provide support to breast cancer patients

Previously, breast cancer patients undergoing surgery at QEHB or Solihull Hospital would have to attend a breast unit in a different location for a wire to be implanted to help identify the tumour during surgery, and then be transported to the operating theatre.

Thanks to generous donations, the Charity has provided new Localizer probes for the breast surgeons, so that patients attending either hospital for surgery no longer need to have the wires implanted, and can instead have a small marker inserted at the operating theatre.

The surgeon can then use the Localizer probe whilst in the operating theatre to exactly locate where the tumour should be removed and the healthy tissue left alone.

As well as being far more comfortable for the patients, this also decreases the time taken to carry out the operation, meaning that more breast cancer patients can now be seen for surgery.

Recovery time is quicker for the patients, as the procedure is now less invasive,

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 each that can be used over 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.

Research is the first step in medicine moving forward and we are proud to be part of the fight against life limiting and ending illnesses.

During 2023/24 the Charity awarded £1,073,000 in new medical research grants (2022/23 £566,000).

Facilities

As well as funding equipment and research, the Charity sometimes funds improvements to buildings or completely new facilities. In 2023/24, the Charity spent £1,935,000 in this category (2022/23 nil).

The Charity's Homes from Home appeal helps to provide patients and families with free accommodation near to our hospitals, helping to keep families together during difficult times in their lives. Our Homes from Home appeal began with Fisher House, and is now provided at QEHB and Heartlands Hospital for the families of premature babies, children with cancer, brain tumour patients and leukaemia patients amongst others.

Case Study 1: This year, we spoke to a family who had used Fisher House in 2022. In their own words, they describe how Fisher House helped them in their time of need

Owain joined the Royal Navy in 2013 as a minewarfare specialist and was based in Faslane, Scotland. In 2021, following a promotion, he undertook a leadership course, which included a gruelling assault course and other physically demanding tasks.

It therefore came as a huge shock to us when just a few months later, Owain was diagnosed with cancer the day before our wedding. Owain was diagnosed with Ewing's sarcoma, a rare form of cancer.

From our home in South Wales, the closest specialist centre was the Queen Elizabeth Hospital Birmingham. Early treatment of chemotherapy and radiotherapy took place closer to home, but Owain needed a major operation and that was to be done at the QEHB.

We were impressed by Fisher House from the start when we stayed there for Owain's first appointment with the surgeon. Owain had only just been discharged from a four week stay in our local hospital, where he had been extremely poorly after his latest stint of chemotherapy. His immune system was on the floor and we were nervous about taking Owain outside his home safety bubble as this was January 2022 and COVID was still a big concern especially in health care settings.

We relayed this to Fisher House and they made sure that we had two rooms on the ground floor slightly on their own so we wouldn't have to come into contact with anyone else if we didn't want to and also so Owain wouldn't have to go up and down stairs. A simple thing but it was so important to us.

When we went back to Fisher House for subsequent appointments and then for a longer stay whilst Owain had his operation, we were given the same room to stay in on each occasion. Again, a seemingly simple thing that meant a lot to us. It offered a degree of familiarity and certainty at a very uncertain and difficult time.

From mid June to early August, Owain's parents and I spent a total of seven weeks at Fisher House, whilst Owain had his operation and post-operative care.

On the day of Owain's operation, Patrick checked in on us a couple of times in the afternoon, whilst we waited to hear from the hospital. By the time that ITU phoned to say that Owain was out of surgery and was stable, it was well into the evening.

I asked if we could come up and see him. They asked how faraway we were, so I said we were in Fisher House and could be on the ward within 10 minutes. They said I could come.

I cannot describe how much of a godsend staying in Fisher House was in that moment. If we had been further away, I know they would have said to wait until tomorrow.

In the course of the operation, Owain had been given 10 units of blood and was in surgery for seven hours. To be able to sit by his bedside that night meant everything to us.

In the weeks that followed, Owain's parents and I tag teamed being in Fisher House and visit Owain (again covid restrictions meant only one visitor per day). As Owain grew in strength, he was allowed to come down to Fisher House for a few hours every couple of days.

This was something that was first suggested to us by Patrick and Julie in Fisher House and when we asked up on the ward, they were happy to allow it. It was so important to Owain and helped boost his morale as his stay seemed to continually extend, but also helped physically prepare him for coming home.

In these few hours out of hospital, Owain was able to sit in the garden and have some fresh air and sunshine, as well as some home cooked food. I know that Owain would say that best of all he was able to cuddle up with his wife.

Fisher House was our port in the storm. The calm and welcoming oasis at a very difficult time. It meant that we, as a family, could be there for Owain without having to think about the cost and logistics of accommodation especially as Owain's hospital stay extended and extended. We could simply focus all our energy on being there for Owain.

Sadly, the success of the operation was short lived and within two months of coming home, we were given the worst news. The cancer was back and there weren't any other treatment options. Owain died just a month later.

I will forever be grateful for the support that Fisher House gave us enabling us to spend precious time with Owain in what turned out to be his final few months.

Case Study 2: Heartlands Home from Home supporting families of our neonatal patients

Beverley and Jonathan Watson live in Lincoln but when baby Taylor was born five weeks premature his lungs weren't formed enough and he needed specialist care so he was transferred 90 miles away to Heartlands Hospital neonatal unit.

Jonathan wrote the following words:

"When your child is busy growing in mummy's tummy thoughts go through your head about things going wrong but you never really think it will happen to your family.

Beverley was taken to surgery for an emergency C-Section at Lincoln Hospital. I managed to arrive at the ward just in time to get some scrubs on and get into the room when Taylor arrived and we were once again proud parents.

Unfortunately, we could tell something wasn't quite right as he was struggling to breath. Taylor was five weeks premature, his lungs weren't fully developed yet and he needed further assistance. He took a further turn and had to be transported to Heartlands Hospital in Birmingham.

I can't explain the feeling of seeing your little baby with all these tubes keeping him alive. I'd kept it relatively together until that point but something inside me broke. I looked at Bev and could tell she clearly felt the same.

Following assessments by the Specialist team, we were told Taylor would need to be in for several days. It suddenly dawned on us we'd have to pay for a number of days in a hotel.

Then it happened, we were told the hospital charity had somewhere for us to stay for free and within walking distance from our baby boy on the neonatal ward.

We couldn't believe our luck as we were already struggling financially and even though we were ready to spend everything we had to stay by Taylor's side, to be told that we wouldn't have to pay was a huge relief.

I wasn't expecting much but wow was I amazed by what we were given; the flat was beautiful with plenty of room for a family. All the work of an amazing charity.

This felt like the turning point for us as another day later Taylor started to improve, and we could finally celebrate the joy of our new addition.

It made think about those families who have loved ones on these wards for months and have had to travel even further than we had. So to think there are now facilities for them to use that would massively impact their financial burden during one of the scariest and most stressful times in their lives is incredible.

It's hard to show just how much gratitude we have towards University Hospitals Birmingham Charity who made it possible to stay at our son's side. Had it not been for your kind work we would have been in considerable financial debt. Thank you so, so much"

The Lead Nurse for Family Integrated Care, Laura Wheeler, said, "It makes such a difference to families having the Home away from Home. It can be a really traumatic time for parents whose babies are in need of urgent care because they are sick or born prematurely. Having a place to stay within two minutes of the Neonatal ward takes the stress away and means parents can be with their loved ones all hours of the day."

Case Study 3 – Building the new Edmonds Transplant Centre

Work has begun on the new 'Edmonds Transplant Centre', as it will be known, which will become a national centre of excellence for organ transplantation.

To mark its 150th anniversary, A Edmonds & Co Ltd is delighted to be partnering with the Charity to help develop the Transplant Centre for patients going through life-saving treatment at QEHB.

The Edmonds Transplant Centre will further cement Birmingham's reputation as a leader in transplantation. The QEHB is the most active transplant centre in Europe with world leading surgeons and cutting edge equipment, but we want to take that further.

The ability to enhance patient experience by bringing this new centre to Birmingham will enable patients to focus on themselves and ensure they are in the best position possible to make the surgery a success and then focus on their recovery.

Birmingham carries out all the major organ transplants - heart, lung, liver and kidney. The Centre will allow patients to visit just one area of the hospital, bringing all the specialist care to them, including pre-transplant consultations, additional fitness classes before surgery - this has been proven to increase the likelihood of a successful transplant, patient support groups, and rehabilitation classes after surgery. It will also be home to world leading surgeons and researchers who are at the forefront of research and technology extending the success of transplantation.

David Edmonds, Managing Director at A Edmonds & Co Ltd said, "A Edmonds & Co Ltd has been in Birmingham since 1870 and always supports local causes. It gives us great pleasure as a Birmingham employer to be able to provide funding for the local hospital thanks to the support of our staff and customers."

The Edmonds Transplant Centre will be a state-of-the-art centre, acting as a one-stop centre for patients throughout their treatment journey from pre-operation to post-op rehabilitation and patient support.

We are proud to help our patients from across the country and indeed all over the world who come to the Queen Elizabeth Hospital for their transplants.

Training, education and staff & patient support and welfare

The fourth area of grant making is in the area of training, education and staff & patient support and welfare though it is important to note is that the Charity does not fund statutory training which is training that the NHS should provide to all staff.

The Charity funds courses and conference fees for staff to attend events that will bring knowledge back into the hospitals 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, Pets in Hospital visits, to memory lane cafes and activities for elderly patients.

Over the past year, the Charity has provided additional support for projects to support staff with their mental health including mindfulness and psychological support and wellbeing officers for Junior Doctors.

This was possible thanks to the generous support of donors and fundraisers who raised money specifically to support staff across our hospital sites.

In 2023/24, the Charity spent £963,000 in this category. [2022/23 £1,117,000].

Case Study One: Providing a bright new space for elderly patients to make memories last

Queen Elizabeth Hospital Birmingham Charity has been working with staff on the Elderly Care Ward at Queen Elizabeth Hospital Birmingham to brighten up the patient day room on the unit. The ward looks after elderly patients with a range of medical and complex needs, and the team provides incredible care to ensure their stay on the ward is as comfortable as possible.

The hospital charity funded the refurbishment of the patients' day room, transforming it from a cold, clinical environment, into a bright and welcoming space with vibrant art on the walls and a jukebox with 50s diner inspired décor.

Staff have nicknamed the new room 'Peaches Diner' and are hoping it provides patients with a place to come and relax, have a cup of tea, listen to music and spend time with their families, other patients, and staff members.

Ward Manager, Stacey Fream, said, "The new day room enables patients to walk to the day room, ensures they eat and drink well, and helps them to socialise with other patients and staff. I have also seen a positive change in staff morale on the ward, as everyone is happy to be a part of this wonderful change and enjoy sharing these precious moments with their patients. It is wonderful to receive such positive feedback from the patients, relatives and staff."

As well as the new day room, the ward also holds a breakfast club, a 'knit and natter' group and a weekly exercise class. Clare Redmond, Physiotherapy Assistant at Queen Elizabeth Hospital Birmingham said, "Our exercise classes encourage movement, create a social environment and gives our patients a sense of accomplishment! Being able to help improve their physical and mental wellbeing is very rewarding."

Collette Hoult's father, Reginald Knight, was a patient on the Elderly Care Ward and regularly spent time in the day room. Collette said, "Peaches Diner was an escape away from the acutely unwell area and all the alarms on the ward. It allowed my dad to relax and feel more like a person than a patient. He also enjoyed taking part in the various activities, particularly the music therapy and sensory stimulation."

Case Study Two: Sprinkle Some Magic

The Charity continues to provide grants of up to £1,000 for smaller projects supporting patient and staff well being.

One such project is Strictly not Rehab - dance sessions for cardiac rehabilitation patients to help with their recovery.

Lorraine, one of the cardiac rehabilitation volunteers explained the importance of these sessions: "I've been with Strictly Not Rehab since the beginning of the programme.

Our patients love it as it's also a great social activity for them. Whilst at the sessions, they can talk with the medical staff and ask the physios questions.

They're all cardiac patients, so by being here together they get to talk to other patients who are in a similar boat to themselves. It's just a really lovely programme and we really see the difference it makes to our patients."

One dancer said "I initially came along to support my husband who was a cardiac patient.

It was so helpful to meet the other carers who attend and be able to share my anxieties surrounding his health and talk to people who really understand what I'm going through.

Even though my husband has sadly passed away, I keep coming to stay healthy, but also to see my friends."

How we are funded

The Charity is delighted to receive donations to support its work from generous individuals, companies, community groups, staff, patients and families. These donations help the Charity to continue making grants and supplementing money donated in previous years.

We would like to say a huge thank you to everyone who has fundraised, donated, volunteered, or taken part in one of our many events over the past year. It is only with your help and support that we are able to do so many amazing things to support patients, families and staff across the Trust.

Fundraising

The 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.

You can follow the Charity on social media:

Twitter @UHBCharity

Facebook @UHBCharity

Instagram @uhbcharity

TikTok @uhbcharity_

Linkedin @UniversityHospitalsBirminghamCharity

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

University Hospitals Birmingham Charity
www.justgiving.com/uhbcharity

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
Joseph & Lena Randall Charitable Trust	QEHB Charity
Clarissa Greenfield	UHB Charity
Friends of Good Hope Hospital	Good Hope Hospital
Little Aston Golf Club Ladies Section	Good Hope Hospital
Friends of Solihull Hospital	Solihull Hospital
Balsall Common Lions	Solihull Hospital
Solihull Lions	Solihull Hospital
Rotary Club of Solihull St Alphage	Solihull Hospital
Friends of Queen Elizabeth Medical Centre	Queen Elizabeth Hospital Birmingham
Grace Leahy	Queen Elizabeth Hospital Birmingham
Guru Nanak Nam Ladies Jatha	Queen Elizabeth Hospital Birmingham
Home Instead	Queen Elizabeth Hospital Birmingham
The Birmingham District Nursing Charitable Trust	Children's Appeal
The Lord Mayor of Birmingham's Charity	Children's Appeal
Dumbreck Charity	Children's Appeal
Hobson Charity	Children's Appeal
Morrisons Foundation	Children's Appeal
Bond Wolfe Charitable Trust	Children's Appeal
Upper GI Support Group	QEHB Upper GI Fund
A Edmonds & Co Ltd	Edmonds Transplant Centre
Garfield Weston Foundation	Edmonds Transplant Centre
William A Cadbury Charitable Trust	Edmonds Transplant Centre
Sue Boston	Edmonds Transplant Centre
Lisa Chapman	Edmonds Transplant Centre
Eveson Charitable Trust	Heartlands Treatment Centre MRI Scanner
Millie's Watch	Homes Away from Home
Edward Cadbury Charitable Trust	Homes Away from Home
The Eric W Vincent Trust	Homes Away from Home
Baron Davenport's Charity	Homes Away from Home
Sikh Arts & Cultural Association (SACA) Bike Ride	Homes Away from Home

Donor	Area of support
G J W Turner Trust	Homes Away from Home
George Cadbury Fund	Homes Away from Home
Warwickshire Masonic Charitable Association	Homes Away from Home
Karen Morris Memorial Trust	Karen's Home from Home Trust
BBC Children in Need	Teenage Cancer Trust Young Person's Unit
Quilter Foundation	Teenage Cancer Trust Young Person's Unit
Sue Cressman	Breast Cancer
Pink Ribbon Foundation	Breast Cancer
Royal British Legion	Fisher House
SSAFA	Fisher House
Armed Forces Covenant Fund Trust	Fisher House
The Army Benevolent Fund	Fisher House
Royal Navy & Royal Marines Charity & Greenwich Hospital	Fisher House
Royal Air Force Benevolent Fund	Fisher House
Veterans' Foundation	Fisher House
Red Arrows Trust	Fisher House
Henry Wong Harborne	Fisher House
Brian Shaw Memorial Trust	Fisher House
Limoges Charitable Trust	Fisher House
The Online Property Agency	Neonatal – newborns in need
The Thompson Family Charitable Trust	Eden Suite
Stan Bowley Trust	Cyberknife
Stine & Ashley Giles	The Giles' Trust
Maggie Bate	The Giles' Trust
Cassidy Group	The Giles' Trust
Brian Travers & friends	The Giles' Trust
Tony Fox BEM, family & friends	The Ann Fox Foundation
Hilary Awdry Charitable Trust	Bereavement Services
Sarbit Johal	Renal Department
Rowlands Trust	Paediatric Diabetes
Provincial Grand Lodge of Lincolnshire	4Trauma4Patients

Case Study one - Hospital charity and Michelin Star chefs host outstanding fine-dining event at University College Birmingham

Queen Elizabeth Hospital Birmingham Charity teamed up with local Michelin Star chefs alongside stars of The Great British Menu and BBC MasterChef Professionals to host a spectacular charity fine-dining experience at University College Birmingham.

The Great Brummie Menu event was supported by former chef, Matt Davies and raised an incredible £14,755.

Matt suffered severe burns and lost the use of his arm nearly seven years ago and was treated by Burns and Plastics Surgeon, Colonel Mark Foster at Queen Elizabeth Hospital Birmingham. Matt is incredibly grateful for the care he has received and has been fundraising for the hospital charity ever since.

Matt said, "Colonel Mark Foster has been with me through this journey for nearly seven years and over 60 operations. I am hugely indebted to him and the incredible team at Queen Elizabeth Hospital Birmingham. Without them, I wouldn't be here today. Working with the hospital charity I have been able to raise money to help others going through their treatment journey."

The Great Brummie Menu saw some of Birmingham's most exciting chefs prepare a six-course tasting menu. Michelin Star chefs cooking on the night included: Luke Tipping from Simpsons, Adam Bennett from The Cross (Warwickshire) and Jonathan Howe from Lumiere (Gloucestershire), joined by The Great British Menu star, Thom Bateman from The Flintock (North Staffordshire) and BBC Masterchef Professionals Champion, Louisa Ellis.

Michelin Star chef, Jonathon Howe said, "Matt has always been a figure who gives back and does everything he can to support the hospitality industry, and being part of this event is our way of supporting him and what he has been through."

Michelin Star chef, Luke Tipping added, "What has happened to Matt and how he has coped with his injuries really resonates with me. By taking part in this event I have helped the charities Matt is passionate about and I am so honoured to be able to give something back and support such a fantastic man."

Case study two – Brain tumour survivor supports others

Keri Hemming is a long standing fundraiser and a brain tumour survivor.

Keri was diagnosed with a brain tumour in 2014 and was referred to the team at QEHB where she underwent surgery to remove as much of the tumour as possible.

Unfortunately, in 2018 Keri was told the tumour was gradually growing and the decision was made to operate again.

Doctors used a new machine, the Nexstim brain scanner, to help pinpoint the exact location of the tumour to the millimetre.

The scanner had been funded through donations to The Giles' Trust, the brain tumour fund within the Charity, including a very kind and generous donation from the late Sir Doug Ellis OBE, former chairman of Aston Villa FC. This amazing piece of equipment means surgery is much safer and more accurate, and also improves the recovery time.

Keri was introduced to The Giles’ Trust during her treatment, she said “I was overwhelmed by the work it does to help people like me and my family. You don’t realise the difference its funding makes until you are there, needing life-saving treatment.”

Keri has been supporting the charity ever since, and regularly holds fundraising events. To date Keri has raised an incredible £13,500 for The Giles’ Trust.

Case study three – Solihull paediatric team conquer Snowdon

Rachel, who is a matron for paediatrics based at Solihull Hospital and the surrounding community, took her team on the Charity’s Snowdon challenge.

She said “We had a great time completing the Sunrise Snowdon event. Sarah and I had taken part in the challenge previously and were keen to go again. Our colleague Kerry and her mum joined us as well as a personal challenge but also to help us fundraise for our service. It was really well organised and although it was hard work and tiring, it was really good fun too – and we saw an amazing sunrise!

“We are always keen to raise money for our Children’s Community Nursing service so we can provide additional resources for children with complex and palliative care needs and moderate to severe learning disabilities.

“We have purchased sensory and developmental toys for our support workers to use with them, made ‘reminder’ fridge magnets of what to take to hospital in an emergency and created ‘teddies with tubes’ to support children’s understanding of some of the procedures they have to go through. Everything we do is to make their lives a little bit easier, a little bit more fun and a little bit more inclusive. This year we are looking at the Three Peaks Challenge and wondering if our knees can cope.”

Legacies

Gifts in wills are a much valued and major source of funding for the Charity.

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, families and staff.

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

The Charity has partnered with organisations to offer free and discounted wills for supporters.

Find out more about this new service by visiting www.hospitalcharity.org/ways-to-help/gifts-in-wills

We are delighted to report that in the year to 31 March 2024 the Charity received generous legacies to the value of £622,000. [2022/23: £654,000]. We would like to acknowledge the generous sums received from bequests made by the following people:

Donor	Donor
Robin Darby	Susan Davies
Patricia Guest	Heather Holt
Pauline Jeffries	Sheila Johnson
Barbara Jones	Georgina Kennett
Dorothy Kennings	David Lawrence
Dorothy Lucas	Sheila Malkin
Molly Melhuish	Rosemary Morrell
Nellie Murphy	Kenneth Price
Iris Ridley	Martin Ryan
Sarah Ann Stanton	Bernard Talbot
Maria Thompson	Kathleen Turner
Robin Valk	Arthur Wassall
Hazel Withers	Eileen Woods

Legacy donations can help to make a huge difference to our patients, their families and our staff and we are very grateful to everyone who has left a gift in their will.

Governance

More about who we are and how we work

In addition to the Charity’s registered name, University Hospitals Birmingham Charity, there are four working names to reflect the four hospitals it operates from: 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 23 February 2016.

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 and 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 23 February 2016, the Charity became a charitable company limited by guarantee and fully independent from the Department of Health who are no longer responsible for the appointment of Trustees.

On 1 April 2017, the Heart of England NHS Foundation Trust Charitable Fund merged with University Hospitals Birmingham Charity and the Charity took on responsibility for charitable activities across Heartlands, Good Hope and Solihull hospitals in addition to QEHB. This happened alongside the merger of Heart of England NHS Foundation Trust with University Hospitals Birmingham NHS Foundation Trust.

How do we do things?

The Charity can have up to fifteen unpaid Trustees who make up the Board of Trustees. They decide policy and make sure it is implemented. UHBFT 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 the 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 the Charity. In the financial year to 31 March 2024 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 2024.

Trustees who were in office during the year to 31 March 2024	Date of first appointment	Date when appointment expires (or expired if in year)
Ru Watkins*	23 February 2016	22 August 2023
David Ritchie*	23 February 2016	22 February 2024
Michael Seabrook*	23 February 2016	22 February 2026
David Mackay*	23 February 2016	22 February 2026
Joanne Eales	21 August 2019	31 August 2026
Stan Baldwin	21 August 2019	31 August 2026
Hannah Woodall-Pagan	24 August 2022	31 August 2025
Alexia Binns	24 August 2022	31 August 2025
Amil Khan	24 August 2022	31 August 2025
Amelia Godson	22 November 2023	22 November 2024

*Trustees marked with an asterisk 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.

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.

Joanne Eales is a qualified Chartered Accountant specialising in accountancy services to SME businesses. She has served as a parish councillor on Lickey & Blackwell Parish Council and has been Treasurer for the parents’ associations at Bromsgrove Preparatory School and Bromsgrove School.

Stan Baldwin is a Governor at UHBFT representing Solihull & Meriden. He has extensive public sector experience including nine years’ service as a Non-Executive Director of the Birmingham and Solihull Mental Health Foundation Trust. His

previous posts have included Principal of Community Education with the City of Birmingham and Chief Executive of Wyre Forest District Council. Stan is currently Vice-Chair of Governors at Solihull College and University Centre.

Hannah Woodall-Pagan is Company Secretary at Severn Trent Plc. Hannah has extensive listed company experience, gained in a number of senior leadership roles spanning the FTSE100 and FTSE250. She is responsible for providing governance advice and guidance to the Board and senior management, as well as leading the Company Secretariat function and is a chartered company secretary, being a Fellow of the Chartered Governance Institute.

Alexia Binns is an experienced solicitor who has a Corporate Governance Certificate accredited by the Association of Corporate Governance Practitioners. In her previous role as Head of Legal Procurement at the Birmingham Organising Committee for the 2022 Commonwealth Games Ltd she led on the legal elements of procurement and strategic planning in relation to the same. She has a background in providing proactive advice and mentoring colleagues to develop their potential.

Amil Khan is the Director of Remembering Srebrenica, a national organisation part-funded by the Department for Levelling Up, Housing and Communities and supported by the Foreign, Commonwealth and Development Office. The charity promotes Srebrenica Memorial Day to honour the victims and educate people about the consequences of hatred and intolerance to help build more cohesive communities here in the UK. Amil is a Trustee of the Warwickshire Cricket Foundation and a Trustee of United by 2022, the official legacy charity of the Birmingham 2022 Commonwealth Games.

Amelia Godson is Deputy Chief Transformation Officer at NHS Coventry & Warwickshire Integrated Care Board. A registered nurse, Amelia held management positions at Guy's and St Thomas' NHS Foundation Trust and University College London Hospitals NHS Foundation Trust for eleven years before moving to UHBFT to take up the post of Deputy Chief Operating Officer. After five years at UHBFT, Amelia took her current post at NHS Coventry & Warwickshire Integrated Care Board, the body responsible for commissioning health and care services on behalf of people in Coventry & Warwickshire.

Ru Watkins [term of office finished on 22 August 2023] 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.

David Ritchie [term of office finished on 22 February 2024] 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 UHBFT.

Trustee recruitment, appointment and induction

Trustee recruitment is carried out by the Charity.

Trustees are recruited following public advertisement, or are nominated by UHBFT, who have the right to nominate up to a third of the Trustees. As at 31 March 2024, UHBFT has nominated two Trustees (Stan Baldwin and Amelia Godson).

All potential Trustees must be interviewed and recommended by a panel consisting of at least two Trustees of the 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 the 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 (now known as NHS Charities Together and of which we are a member) runs regular conferences for Trustees.

Charity Sub-Committees

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

As at 31 March 2024 there are three sub-committees – the Performance & Finance Committee which met four times during the year 2023/24; the Nominations Committee which met once during the year 2023/24; and the Grant Review Committee which met twice during the year 2023/24.

The Charity's Staff

The Charity directly employs 26 members of staff as at 31 March 2024, equivalent to 22 full time employees 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 retain 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, which in the case of the Charity currently applies only 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, and the outstanding contribution made by the Charity Chief Executive since his appointment, Trustees awarded the Charity Chief Executive a salary increase of 7.00% in the year under review.

Volunteers

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

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

The Charity thanks all its volunteers for their contribution to its ongoing work.

Grant making structure and policy

The charitable funds that the 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 the 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).
 - The 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 the 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, the Charity made grants totalling £6,112,000. [2022/23: £4,288,000]

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 the 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]
- ▶ Dains, Paradise Circus, 2 Chamberlain Square, Birmingham B3 3AX [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

The Charity is one of some 250 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 NHS Charities Together (formerly known as the Association of NHS Charities) which now has every NHS charity as a member.

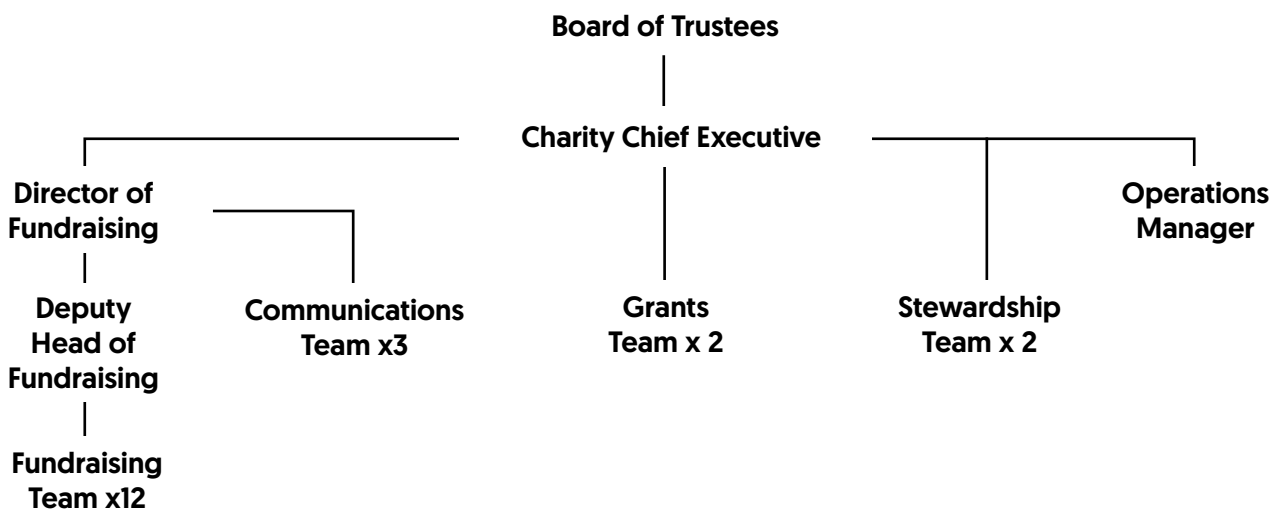
As a member, we have the opportunity to discuss matters of common concern and exchange information and experiences, join together with others to lobby government departments and others, and to participate in conferences and seminars which offer support and education for our staff and Trustees.

NHS Charities Together led on the national COVID-19 fundraising campaign which raised over £150 million, including the over £38 million fundraising of Captain Sir Tom Moore.

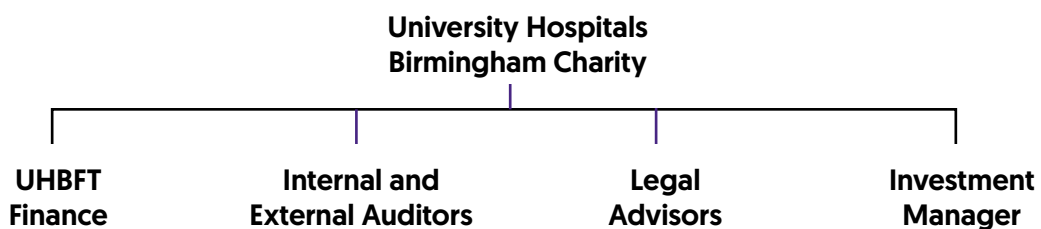
We are very grateful to NHS Charities Together for the ability to participate in their grant making programmes that have distributed the fundraising, with the Charity receiving over £1 million in grants from the COVID-19 fundraising campaign.

The Charity works closely with, and provides the majority of its grants to, UHBFT and the University of Birmingham, UHBFT’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 the Charity and the communities they serve.

Administrative Structure as at 31 March 2024



External support structure as at 31 March 2024



Risks policy

A Risk Register, identifying the major risks to which the 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

Risk	Mitigation
The Charity not having a significant profile within the hospitals themselves	Advertising sites within the hospital, permanent presence within the hospital, direct meetings with doctors, nurses and management
A lack of charitable projects for which to fundraise	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 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 Cazenove Charity Responsible Multi Asset Fund.

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

The move to the Cazenove Charity Responsible 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 wish to screen their investments in such a way that investments avoid harm through environmental, social and governance integration and screening, investments benefit stakeholders through responsible activities, and investments contribute to solutions through influence and investing for impact. Investment portfolios should exclude sectors such as tobacco, alcohol, pornography, gambling and those that have a high impact on climate change. 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 the 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 the Charity at the year ending 31 March 2024 were £16,551,000. The total level of unrestricted reserves is analysed as follows:

	£
Total funds available at year end 31 March 2024	16,551,000
Less:	
Restricted funds	1,400,000
Designated funds (including Fisher House and Homes away from Home)	12,447,895
Unrealised investment movements	2,170,500
Total free reserves	532,605

Trustees calculated the level of required or target free reserves after reviewing the 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*	500,000
Total target reserve requirement:	500,000

*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 at the target range to be at a sufficient and 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 2023/24 Statement of Financial Activities and Balance Sheet and accompanying notes to the accounts are set out on pages 43 to 56.

Income during the year amounted to £5.163 million (2022/23: £4.686m) and expenditure in the year was £6.112 million. (2022/23: £4.313 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 Group and parent charitable company and of the income and expenditure, of the charitable company and Group for that period. In preparing these financial statements, the trustees are required to:

- observe the methods and principles of the Charities SORP (FRS 102);
- select suitable accounting policies and apply them consistently;
- make judgements and estimates that are reasonable and prudent;
- state whether the financial statements comply with applicable UK accounting standards (FRS 102) and statement 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 Group will continue its activities.

The trustees are responsible for keeping proper accounting records that are sufficient to show and explain the Group and the Charities transactions and that disclose with reasonable accuracy at any time the financial position of the Group and 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 group and 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 auditors in connection with preparing their report, of which the charitable group's auditors are unaware, and
- the trustees, having made enquiries of fellow directors that they ought to have individually made and have each taken all steps that they are obliged to take as a Trustee in order to make themselves aware of any relevant audit information and to establish that the charitable group's auditors are aware of that information.

Approved by Trustees on 14 August 2024 and signed on their behalf by:



David Mackay
(Chairman)



Mike Seabrook
(Trustee)

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 charitable company') and its subsidiary (the 'group') for the year ended 31 March 2024 which comprise the Consolidated Statement of Financial Activities, the Consolidated Balance Sheet, the Consolidated Statement of Cash Flows and the related 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 Financial Reporting Standard 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 charitable company's affairs as at 31 March 2024 and of the Group's incoming resources and application of resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

Basis of opinion

We conducted our audit in accordance with International Standards on 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 Group in accordance with the ethical requirements that are relevant to our audit of the financial statements in the United Kingdom, including the Financial Reporting Council's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions relating to going concern

In auditing the financial statements, we have concluded that the Trustees' use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the Group's or the parent charitable company's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

Our responsibilities and the responsibilities of the Trustees with respect to going concern are described in the relevant sections of this report.

Other information

The other information comprises the information included in the Annual Report other than the financial statements and our Auditor's Report thereon. The Trustees are responsible for the other information contained within the Annual Report. 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. 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 course of 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 this gives rise to a material misstatement in the financial statements themselves. 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.

Opinions on other matters prescribed by the Companies Act 2006

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

- the information given in the Trustees' Report for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the Trustees' Report has been prepared in accordance with applicable legal requirements.
with the applicable legal requirements.

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the parent charitable Company and its environment obtained in the course of the audit, we have not identified material misstatements in the Trustees' Report.

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

- the parent charitable company has not kept adequate and sufficient accounting records, or returns adequate for our audit have not been received from branches not visited by us; or

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

- the parent charitable company financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of Trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit.

Responsibilities of trustees

As explained more fully in the Trustees' Responsibilities Statement set out on page 21, the Trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the Trustees determine is necessary to enable the preparation of 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 parent charitable company'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 Group or parent charitable company or to cease operations, or have no realistic alternative but to do so.

Auditor's responsibilities for the audit of the financial statements

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

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud is detailed below:

Our approach to identifying and assessing the risks of material misstatement in respect of irregularities, including fraud and non-compliance with laws and regulations, was as follows:

- *the senior statutory auditor ensured that the engagement team collectively had the appropriate competence, capabilities, and skills to identify or recognise non-compliance with applicable laws and regulations;*
- *we identified the laws and regulations applicable to the parent Charitable Company and the Group through discussions with directors and other management, and from our commercial knowledge and experience of the sector;*
- *we focused on specific laws and regulations which we considered may have a direct material effect on the financial statements or the operations of the parent charitable company and the Group, including the financial reporting legislation, Companies Act 2006, Charities Act 2011, taxation legislation, anti-bribery, employment, and environmental and health and safety legislation;*
- *we assessed the extent of compliance with the laws and regulations identified above through making enquiries of management and inspecting legal correspondence; and*
- *identified laws and regulations were communicated within the audit team regularly and the team remained alert to instances of non-compliance throughout the audit.*

We assessed the susceptibility of the parent charitable company's and the group's financial statements to material misstatement, including obtaining an understanding of how fraud might occur, by:

- *making enquiries of management as to where they considered there was susceptibility to fraud, their knowledge of actual, suspected, and alleged fraud; and*
- *considering the internal controls in place to mitigate risks of fraud and non-compliance with laws and regulations.*

To address the risk of fraud through management bias and override of controls, we:

- *performed analytical procedures to identify any unusual or unexpected relationships;*
- *tested journal entries to identify unusual transactions;*
- *assessed whether judgements and assumptions made in determining the accounting estimates set out in Note 2 were indicative of potential bias; and*
- *investigated the rationale behind significant or unusual transactions.*

In response to the risk of irregularities and non-compliance with laws and regulations, we designed procedures which included, but were not limited to:

- *agreeing financial statement disclosures to underlying supporting documentation;*
- *reading the minutes of meetings of those charged with governance;*
- *enquiring of management as to actual and potential litigation and claims; and*
- *reviewing correspondence with HMRC, relevant regulators and the parent Charitable Company's and the group's legal advisors.*

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

Because of the inherent limitations of an audit, there is a risk that we will not detect all irregularities, including those leading to a material misstatement in the financial statements or non-compliance with regulation. This risk increases the more that compliance with a law or regulation is removed from the events and transactions reflected in the financial statements, as we will be less likely to become aware of instances of non-compliance. The risk is also greater regarding irregularities occurring due to fraud rather than error, as fraud involves intentional concealment, forgery, collusion, omission, or misrepresentation.

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 Auditors' report.

Other matters

The financial statements of the prior period were audited by Mazars LLP. An unqualified audit report was issued and signed on 12 October 2023.

Use of the audit report

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



Mark Gurney FCCA (Senior Statutory Auditor)

for and on behalf of

Dains Audit Limited

Statutory Auditor

Chartered Accountants

Birmingham

Date: 19 August 2024

Consolidated Statement of Financial Activities (including consolidated Income and Expenditure account) for the year ended 31 March 2024

	Note ref.	Unrestricted funds 2024 £000	Restricted funds 2024 £000	Total funds £000	Prior Year 2023 £000
Income and endowments from:					
Donations, legacies, grants and gifts in kind	3	3,235	400	3,635	3,312
Charitable activities	3.1	789	1	790	683
Other Trading Activities					
UHB Trading CIC	2.2	-	-	-	39
Investments	9.2	738	-	738	652
<i>Total</i>		4,762	401	5,163	4,686
Expenditure on:					
<i>Raising funds:</i>					
UHB Charity	5.1	1,156	-	1,156	975
UHB Trading CIC	2.2	-	-	-	24
<i>Charitable activities:</i>					
Medical Research	5	1,073	-	1,073	566
Purchase of Equipment		413	-	413	974
New Building and Refurbishment		1,935	-	1,935	(52)
Staff Education and Welfare		933	4	937	1,015
Patient Education and Welfare		26	-	26	102
Programme related Assets Running Costs		534	-	534	328
Depreciation Costs		38	-	38	411
Grants to Other Bodies		-	-	-	(30)
<i>Total</i>		6,108	4	6,112	4,313
Net (expenditure) / income before gains and losses on investments		(1,346)	397	(949)	373
Other recognised gains and losses					
Unrealised gains / (losses) on investments		588	-	588	(713)
Transfers between funds	15	-	-	-	-
Net movement in funds for the year		(758)	397	(361)	(340)
Reconciliation of funds:					
Total funds brought forward		15,909	1,003	16,912	17,252
Total funds carried forward	17	15,151	1,400	16,551	16,912

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

The notes at pages 30 to 45 form part of these accounts.

Company Statement of Financial Activities for the year ended 31 March 2024

	Note ref.	Unrestricted funds 2024 £000	Restricted funds 2024 £000	Total funds £000	Prior Year 2023 £000
Income and endowments from:					
Donations, legacies, grants and gifts in kind	3	3,235	400	3,635	3,312
Charitable activities	3.1	789	1	790	683
CIC Trading Income	2.2	-	-	-	15
Investments	9.2	738	-	738	652
<i>Total</i>		4,762	401	5,163	4,662
Expenditure on:					
<i>Raising funds:</i>	5.1	1,156	-	1,156	975
<i>Charitable activities:</i>	5				
Medical Research		1,073	-	1,073	566
Purchase of Equipment		413	-	413	974
New Building and Refurbishment		1,935	-	1,935	(52)
Staff Education and Welfare		933	4	937	1,015
Patient Education and Welfare		26	-	26	102
Programme related Assets Running Costs		534	-	534	328
Depreciation Costs		38	-	38	411
Grants to Other Bodies		-	-	-	(30)
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The statement of financial activities includes all gains and losses recognised in the year. All income and expenditure derive from continuing activities.

The notes at pages 30 to 45 form part of these accounts.

Consolidated Balance Sheet as at 31 March 2024

	Note ref.	Unrestricted funds 2024 £000	Restricted funds 2024 £000	Total funds £000	Prior Year 2023 £000
Fixed assets:					
Investments-Equities, Securities and Property	9	11,916	600	12,516	11,928
Tangible Fixed Assets	9.4	9	-	9	47
Programme Related Asset	9.3	2,040	-	2,040	1,670
<i>Total fixed assets</i>		13,965	600	14,565	13,645
Current assets:					
Debtors payable within one year	10.1	1,087	800	1,887	1,515
Debtors payable after more than one year	10.1	678	-	678	900
Cash at bank and in hand	10.2	4,893	-	4,893	4,770
<i>Total current assets</i>		6,658	800	7,458	7,185
Liabilities:					
Creditors: Amounts falling due within one year	11	585	-	585	640
<i>Net current assets/liabilities</i>		6,073	800	6,873	6,545
<i>Total assets less current liabilities</i>		20,038	1,400	21,438	20,190
Provisions payable within one year	13	3,672	-	3,672	2,813
Provisions payable after more than one year	13	1,215	-	1,215	465
<i>Total net assets or liabilities</i>		15,151	1,400	16,551	16,912
The funds of the group:					
Restricted income funds	17.1	-	1,400	1,400	1,003
Unrestricted funds	17.2	15,151	-	15,151	15,909
<i>Total funds</i>		15,151	1,400	16,551	16,912

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

Signed:



David Mackay
(Chairman)

Date: 14 August 2024



Mike Seabrook
(Trustee)

Date: 14 August 2024

The notes at pages 30 to 45 form part of these accounts.

Balance Sheet as at 31 March 2024

	Note ref.	Unrestricted funds 2024 £000	Restricted funds 2024 £000	Total funds £000	Prior Year 2023 £000
Fixed assets:					
Investments-Equities, Securities and Property	9	11,916	600	12,516	11,928
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<i>Total assets less current liabilities</i>		20,038	1,400	21,438	20,190
Provisions payable within one year	13	3,672	-	3,672	2,813
Provisions payable after more than one year	13	1,215	-	1,215	465
<i>Total net assets or liabilities</i>		15,151	1,400	16,551	16,912
The funds of the charity:					
Restricted income funds	17.1	-	1,400	1,400	1,003
Unrestricted funds	17.2	15,151	-	15,151	15,909
<i>Total charity funds</i>		15,151	1,400	16,551	16,912

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

Signed:



David Mackay
(Chairman)

Date: 14 August 2024



Mike Seabrook
(Trustee)

Date: 14 August 2024

The notes at pages 30 to 45 form part of these accounts.

Consolidated Statement of Cash Flows

		2023/24	2022/23
		£000	£000
Cash flows from operating activities:			
Net cash used in / provided by operating activities	Table A	(245)	(1,830)
Cash flows from investing activities:			
Dividends, interest and rents from investments	9.2	738	652
Purchase of property, plant and equipment	9.3	-	-
Proceeds from sale of investments	9	6	-
Purchase of investments	9	(376)	(19)
Net cash provided by (used in) investing activities		368	633
Cash flows from financing activities:			
Net cash provided by (used in) financing activities		-	-
Change in cash and cash equivalents in the reporting period		123	(1,197)
Cash and cash equivalents at the beginning of the reporting period		4,770	5,967
Change in cash and cash equivalents due to exchange rate movements		-	-
Cash and cash equivalents at the end of the reporting period	Table B	4,893	4,770

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

		2023/24	2022/23
		£000	£000
Net movement in funds for the period		(361)	(340)
Adjustments for:			
Depreciation charges	9.4	38	410
Losses / (gains) on investments		(588)	713
Dividends, interest and rents from investments	9.2	(738)	(652)
Decrease / (increase) in Stock		-	16
(Increase) / decrease in debtors	10.1	(150)	(1,123)
(Decrease) / increase in creditors	11	(55)	(1,012)
Increase in provisions	13	1,609	158
Net cash (used in) provided by operating activities		(245)	(1,830)

Table B: Analysis of cash and cash equivalents

		2023/24	2022/23
		£000	£000
Cash in hand	10.2	4,893	4,770
Total cash and cash equivalents		4,893	4,770

Analysis of changes in net debt

	At 1 April	Cash	At 31 March
	2023	Flows	2024
	£000	£000	£000
Cash at bank and in hand	4,770	123	4,893
	4,770	123	4,893

Notes to the Accounts

The company was incorporated as a private company limited by guarantee on 1st April 2016. It is incorporated in England and Wales under the Companies Act and registered with the Charity Commission for England and Wales. The address of the registered office is given in the reference and administration section of these financial statements. The nature of the charity's operations and principal activities are to support the patients and staff of University Hospitals Birmingham NHS Foundation Trust ("UHBFT"), by funding equipment, facilities, research and patient support that are over and above what can be provided by the NHS.

1 Accounting Policies

1.1 a) Basis of preparation

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.

b) Assessment of going concern

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. Regular budget reviews take place to ensure the Charity can meet their liabilities as they fall due.

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. In the year under review UHB Trading CIC was dormant and received no income or incurred any expenditure. This is due to the Charity not generating enough trading income to use a trading subsidiary.

The Charity's functional and presentational currency is GBP and the financial statements are rounded to the nearest £'000.

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 16.

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 12).

1.4 Income (cont')

Grants are included in the Statement of Financial Activities on a receivable basis. The balance of income received for specific purposes but not expended during the period is shown in the relevant funds on the Balance Sheet. Where income is received in advance of entitlement of receipt, its recognition is deferred and included in creditors as deferred income. Where entitlement occurs before income is received, the income is accrued.

Cash donations are recognised on receipt. Other donations are recognised once the Trust has been notified of the donation, unless performance conditions require deferral of the amount.

Income tax recoverable in relation to donations received under Gift Aid or deeds of covenant is recognised at the time of the donation.

Investment income is earned through holding assets for investment purposes such as shares. It includes dividends and interest. Where it is not practicable to identify investment management costs incurred within a scheme with reasonable accuracy the investment income is reported net of these costs. It is included when the amount can be measured reliably. Interest income is recognised using the effective interest method and dividend income is recognised as the charity's right to receive payment is established.

Income tax recoverable in relation to investment income is recognised at the time the investment income is receivable.

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 800 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 110, who volunteer in the Fund Raising Hubs within the hospitals, assist with fundraising events and visit wards and departments with the Pets in Hospitals scheme.

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.

Grants payable are charged in the year when the offer is made except in those cases where the offer is conditional, such grants being recognised as expenditure when the conditions attaching are fulfilled. Grants offered subject to conditions which have not been met at the year end are noted as a commitment, but not accrued as expenditure.

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 4.

- 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.

1.8 Fixed Assets

Investments

Investments - are stated at market value as at the balance sheet date. The Statement of Financial Activities includes the net gains and losses arising on revaluation and disposals throughout the year. The restatement is due to the cost price of the investment holdings being adjusted and the incorporation of the value of the investment properties which had previously been omitted.

Investment Property

Investment property is carried at fair value determined annually by Trustees and periodically by external valuers and derived from current market rents, recent transaction prices and investment property yields for comparable real estate, adjusted if necessary for any difference in the nature, location, or condition of the specific asset. No depreciation is provided. Changes in fair value are recognised in the Statement of Financial Activities.

In February 2020 the charity acquired Bottle Cottages comprising of 11 flats with a further 2 flats purchased in December 2023. 4 of these flats are being held as investment properties with the remaining being held as programme related assets.

Along with Bottle Cottages, No2 Elizabeth Court (50% share) and No7 Elizabeth Court (100% share) are being held as investment properties. The value of the properties were reviewed by Cottons Chartered Surveyors and evaluated against local market conditions etc in February 2022. Trustees have concluded that it reflects the market value at the year end.

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.

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

Tangible fixed assets and depreciation

Tangible fixed assets are capitalised and recognised when future economic benefits are probable and the cost or value of the asset can be measured reliably.

Tangible fixed assets are initially recognised at cost. After recognition, under the cost model, tangible fixed assets are measured at cost less accumulated depreciation and any accumulated impairment losses. All costs incurred to bring a tangible fixed asset into its intended working condition should be included in the measurement of cost.

At each reporting date the Charity assesses whether there is any indication of impairment. If such indication exists, the recoverable amount of the asset is determined to be the higher of its fair value less costs to sell and its value in use. An impairment loss is recognised where the carrying amount exceeds the recoverable amount.

Depreciation is charged so as to allocate the cost of tangible fixed assets less their residual value over their estimated useful lives, using the straight-line method.

Depreciation is provided on the following bases:

Fisher House has been depreciated over the deemed useful life of 10 years.

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

Man Van - this mobile unit has been depreciated over the deemed useful life of 3 Years.

1.8 Fixed Assets (cont')

Programme Related Asset

All programme related investments are held at market value.

Fair value is determined annually by Trustees and periodically by external valuers and derived from current market rents, recent transaction prices and yields for comparable real estate, adjusted if necessary for any difference in the nature, location or condition of the specific asset. No depreciation is provided. Changes in fair value are recognised in the Statement of Financial Activities.

9 of the Bottle Cottages flats mentioned above are being held as programme related assets with the remaining being held as investment properties.

Elmbank Court is also being held as a programme related asset. The value of the properties were reviewed by Cottons Chartered Surveyors and evaluated against local market conditions etc in February 2022. Trustees have concluded that it reflects the market value at the year end.

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).

1.10 Tax Policy

The Charity is considered to pass the tests set out in Paragraph 1 Schedule 6 of the Finance Act 2010 and therefore it meets the definition of a charitable company for UK corporation tax purposes. Accordingly, the Charity is potentially exempt from taxation in respect of income or capital gains received within categories covered by Chapter 3 Part 11 of the Corporation Tax Act 2010 or Section 256 of the Taxation of Chargeable Gains Act 1992, to the extent that such income or gains are applied exclusively to charitable purposes.

1.11 Financial instruments policy

The Charity has applied the provisions of FRS 102, Section 11, 'Basic Financial Instruments' and Section 12, 'Other Financial Instruments Issues'. Financial assets and liabilities are recognised when the Charity becomes a party to the contractual provisions of the instrument. The Charity initially recognises a financial asset or a financial liability at transaction price – for debtors and other creditors this is the settlement amount. Grant commitments over one year are discounted to reflect present value.

1.12 Debtors

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

1.13 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.

1.14 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.

Liabilities are recognised when there is an obligation at the Balance Sheet date as a result of a past event, it is probable that a transfer of economic benefit will be required in settlement, and the amount of the

Liabilities are recognised at the amount that the Charity anticipates it will pay to settle the debt or the amount it has received as advanced payments for the goods or services it must provide.

Provisions are measured at the best estimate of the amounts required to settle the obligation. Where the effect of the time value of money is material, the provision is based on the present value of those amounts, discounted at the pre-tax discount rate that reflects the risks specific to the liability. The unwinding of the discount is recognised in the Statement of Financial Activities as a finance cost.

1.15 Pensions

NHS Pension Scheme

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

Both are unfunded defined benefit schemes that cover NHS employers, general practices and other bodies, allowed under the direction of the Secretary of State for Health and Social Care in England and Wales. They are not designed to be run in a way that would enable NHS employers 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 Trust 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 the scheme liability as at 31 March 2024, is based on valuation data as 31 March 2023, updated to 31 March 2024 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 report of the scheme actuary, which forms part of the annual NHS Pension Scheme 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 recent demographic experience), and to recommend contribution rates payable by employees and employers.

The latest actuarial valuation undertaken for the NHS Pension Scheme was completed as at 31 March 2020. The results of this valuation set the employer contribution rate payable from April 2024. The Department of Health and Social Care has recently laid Scheme Regulations confirming the employer contribution rate will increase to 23.7% of pensionable pay from 1 April 2024 (previously 20.6%). The core cost cap cost of the scheme was calculated to be outside of the 3% cost cap corridor as at 31 March 2020. However, when the wider economic situation was taken into account through the economic cost cap cost of the scheme, the cost cap corridor was not similarly breached. As a result, there was no impact on the member benefit structure or contribution rates.

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 Judgements and accounting estimates

In the application of the charitable company's accounting policies, the Trustees are required to make judgements, estimates and assumptions about the carrying amount of assets and liabilities that are not readily apparent from other sources.

Estimates and judgements are continually evaluated and are based on historical experience and other factors, including expectations of future events that are believed to be reasonable under the circumstances. The charitable company makes estimates and assumptions concerning the future.

The resulting accounting estimates and assumptions will, by definition, seldom equal the related actual results. Revisions to accounting estimates are recognised in the period in which the estimate is revised where the revision affects only that period, or in the period of the revision and future periods where the revision affects both current and future periods.

Critical accounting estimates and assumptions:

In the view of the Trustees in applying the accounting policies adopted, the following judgements were required that have a significant effect on the amounts recognised in the financial statements and the following estimates or assumptions made carry a significant risk of material adjustment in the next financial year.

Investment property valuation

The charitable company carries its investment property and programme related assets at fair value, with changes recognised in the Statement of Financial Activities. The charity engages professional valuers periodically to determine fair value, which is based on a number of valuation techniques, which are largely linked to external property market values for similar properties and market yields expected for comparable real estate. There are also inherent assumptions in respect of the value in use of such properties, which are subject to judgement and estimation. These include the discount rate, growth rates and inflation.

Grant provision

The split of the grant provision between less than one year and greater than one year requires an element of management judgement as to when the grant expenditure is probable to take place within the remaining time period for each grant and through periodic correspondence with recipients.

2.1 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.

2.2 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 Hospitals NHS Foundation Trust and these are detailed in note 5.2.

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

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

2.2 Related party transactions and trustees' expenses and remuneration (cont')

None of the trustees have been paid any remuneration or received any other benefits from an employment with University Hospitals Birmingham Charity. During the year, one of the Trustees was an employee of the University Hospitals Birmingham NHS FT and is paid on normal pay scales for their role in the Trust. They are not remunerated for their role as a Trustee of the charity or other work performed for the charity. Their remuneration for their work for the Trust is included in the accounts of the Trust along with any other disclosures. A further Trustee serves on the Trust's Board of Governors, unpaid. The trustees have not purchased trustee indemnity insurance.

During the year expenses for trustees paid directly to a third party were paid as below. (2022/23 £0)

	Accom/Subs	Travel	Training	Total
	£	£	£	£
2023/24	19	0.00	0.00	19

The estimated value of unclaimed travel expenses during the year was £400 (£400 2022/23)

- 2.2** The Charity opened a wholly owned trading subsidiary in August of 2018. 'UHB Trading CIC' which gift aids all of 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 income 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 2022/23 are shown below. In the year under review UHB Trading CIC was dormant and received no income or incurred any expenditure. This is due to the Charity not generating enough trading income to use a trading subsidiary.

Registered office for UHB Trading CIC: Fisher House Mindelsohn Way, Queen Elizabeth Hospital, Birmingham, United

UHB Trading CIC Income Statement	2023/24	2022/23
	£'s	£'s
Turnover		
Operating Income	-	39,250
Expenditure		
Cost of Sales	-	(23,826)
Gross profit	-	15,424
Administration Expenses	-	(48)
Interest receivable	-	-
Interest Payable	-	(708)
Profit for the year	-	14,668
Gift Aid Donation to UHB Charity	-	(14,668)
Retained Profit b/f	-	-
UHB Trading CIC Statement of Position	2023/24	2022/23
	£'s	£'s
Assets Employed		
Current Assets		
Stock	-	-
Debtors	-	10,662
Cash in Hand and at Bank	-	-
	-	10,662
Current Liabilities		
	-	(10,662)
Net Assets	-	-
Financed by		
Reserves	-	-

3 Income from Donations and Legacies

	2023/24			2022/23		
	Unrestricted Funds £000	Restricted Funds £000	Total 2024 £000	Unrestricted Funds £000	Restricted Funds £000	Total 2023 £000
Donations from individuals	541	0	541	1,060	3	1,063
Donations from companies	1,811	0	1,811	523	0	523
Legacies	621	1	622	653	1	654
Grants	94	399	493	185	887	1,072
Gifts in kind	168	0	168	0	0	0
	3,235	400	3,635	2,421	891	3,312

3.1 Income from Charitable Activities

	2023/24			2022/23		
	Unrestricted Funds £000	Restricted Funds £000	Total 2024 £000	Unrestricted Funds £000	Restricted Funds £000	Total 2023 £000
Income from Fundraising Events	789	1	790	682	1	683

4 Allocation of Support Costs and Overheads

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

4.1 Analysis of Expenditure	2023/24			2022/23		
	Unrestricted Funds £000	Restricted Funds £000	Total 2024 £000	Unrestricted Funds £000	Restricted Funds £000	Total 2023 £000
Salaries & Pension	250.0	0	250.0	222.0	0	222.0
Travel	0.6	0	0.6	0.7	0	0.7
Training	9.3	0	9.3	4.9	0	4.9
Office Costs	54.1	0	54.1	51.1	0	51.1
Stationery	9.2	0	9.2	7.5	0	7.5
Insurance	7.2	0	7.2	6.4	0	6.4
Subscriptions	0.5	0	0.5	1.2	0	1.2
Trustee training and Expenses	0.0	0	0.0	0.0	0	0.0
Professional fees	1.4	0	1.4	2.7	0	2.7
Internal Audit	3.8	0	3.8	10.4	0	10.4
External Audit	18.9	0	18.9	18.5	0	18.5
Bank Charges	0.2	0	0.2	0.1	0	0.1
Finance SLA	166.0	0	166.0	145.6	0	145.6
Other	5.2	0	5.2	4.4	0	4.4
	526.4	0.0	526.4	475.5	0.0	475.5

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.

4.2 Governance Costs

Calculated governance costs for 2023/24 are £63.03k (2022/23 £63.09k). They relate to costs associated with the governance of operating the charity and include such items as Statutory Audit, Company registration and legal costs as well as an apportionment of remuneration and financial services costs for time spent on governance issues.

5 Analysis of Charitable Expenditure

Expenditure on charitable activities was £4,956k (2022/23: £3,314k) of which £4k was restricted (2022/23: £5k).

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.

	2023/24			2022/23		
	Grant Funded Activity	Support Costs	Total 2024	Grant Funded Activity	Support Costs	Total 2023
	£000	£000	£000	£000	£000	£000
Medical Research	1,038.1	35.5	1,073.6	528.8	37.2	566
Purchase of Equipment	332.5	80.6	413.1	886.3	88.2	974
Building and Refurbishment	1,931.7	3.0	1,934.7	(55.7)	3.2	(52)
Staff Education and Welfare	806.2	130.5	936.7	842.3	172.3	1,015
Patient Education and Welfare	-19.7	45.6	25.9	48.2	53.6	102
Programme related running costs	490.1	44.3	534.4	281.6	46.6	328
Depreciation Costs	37.5	0.3	37.8	409.9	1.3	411
Grants to other Bodies	0.0	0.0	0.0	(31)	0.7	(30)
	4,616.4	339.8	4,956	2,910.4	403.1	3,313

	2023/24			2022/23		
	Unrestricted Funds	Restricted Funds	Total 2024	Unrestricted Funds	Restricted Funds	Total 2023
	£000	£000	£000	£000	£000	£000
Medical Research	1,073.6	0.0	1,073.6	566.0	0.0	566
Purchase of Equipment	413.1	0.0	413.1	724.4	250.0	974
Building and Refurbishment	1,934.7	0.0	1,934.7	(52.4)	0.0	(52)
Staff Education and Welfare	933.0	3.7	936.7	1,014.4	0.0	1,014
Patient Education and Welfare	25.9	0.0	25.9	99.0	3.0	102
Programme related running costs	534.4	0.0	534.4	328.2	0.0	328
Depreciation Costs	37.8	0.0	37.8	411.2	0.0	411
Grants to other Bodies	0.0	0.0	0.0	(30)	0.0	(30)
	4,952.5	3.7	4,956	3,060.5	253.0	3,313

5.1 The remaining £186.6k support costs (£72.2k 2022/23) 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 (2022/23 nil).

	2023/24			2022/23		
	Grant Funded Activity	Support Costs	Total 2024	Grant Funded Activity	Support Costs	Total 2023
	£000	£000	£000	£000	£000	£000
Costs of Raising Funds	747.1	186.6	934	699.0	72.3	771
Costs of Fundraising Events	179.4	0.0	179	186.0	0.0	186
Investment Management Costs	42.7	0.0	43	17.5	0.0	18
	969.2	186.6	1,156	902.5	72.3	975

	2023/24			2022/23		
	Unrestricted Funds	Restricted Funds	Total 2024	Unrestricted Funds	Restricted Funds	Total 2023
	£000	£000	£000	£000	£000	£000
Costs of Raising Funds	933.7	0.0	934	771.3	0.0	771
Costs of Fundraising Events	179.4	0.0	179	186.0	0.0	186
Investment Management Costs	42.7	0.0	43	17.5	0.0	18
	1,155.8	0.0	1,156	974.8	0.0	975

5.2 Grants

Grants are made to University Hospitals Birmingham NHS Foundation Trust as well as other institutions. The Charity does not make grants to individuals.

	2023/24	Total	2022/23	Total
Institution Receiving Support	Number of	2024	Number of	2023
	Grants	£000	Grants	£000
University Hospitals Birmingham NHS Foundation Trust	35	4,067	36	1,273
University Hospitals Birmingham NHS Foundation Trust*	*	1,971	*	2,812
University of Birmingham	*	74	*	203
		6,112		4,288

* 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.

6 Analysis of staff costs

No staff costs are contained within the Trading Company.

	Total	Total
	2024	2023
	£000	£000
Salaries and wages	744	643
Social security costs	71	64
Other pension costs	54	47
	869	754

Pension Costs are split as follows

Defined Contribution Scheme	40	34
NHS Pensions Defined Benefit Scheme	14	13
	54	47

Outstanding contributions at year end were:

Defined Contribution Scheme	7	6
NHS Pensions Defined Benefit Scheme	0	0
	7	6
Average full time equivalents of employees in the year:	22.0	19.9
Average head count during the year:	26.0	22.0

7 The number of employees whose total earnings in the year (excluding employer pension contributions) fell into the bands below were:

	2023/24	2022/23
	Total	Total
£60,000 - £69,999	1	1
£90,000 - £99,999	1	1

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 £99,670 plus pension contributions of £14,176.

8 Auditor's Remuneration

The external auditor's remuneration of £16,500 (2022/23: £16,200) related solely to statutory audit work. The charity did not commission any additional work from the auditor (2022/23 nil).

**9 Analysis of Fixed Asset Investments
Movements during the year**

	2024	2024	2023	2023
	Charity	Group	Charity	Group
	£000	£000	£000	£000
Equities, Securities and Property				
Market value at start of year	11,928	11,928	12,807	12,807
Less: Disposals at carrying value	(6)	(6)	0	0
Add: Acquisitions at cost	376	376	19	19
Transfer (to) / from programme related asset	(370)	(370)	(185)	(185)
Net gains (losses) on revaluation	588	588	(713)	(713)
Market value at end of year	<u>12,516</u>	<u>12,516</u>	<u>11,928</u>	<u>11,928</u>
Historic cost at year end	<u>11,345</u>	<u>11,345</u>	<u>11,343</u>	<u>11,343</u>
Proceeds from the sale of investments in year	6	6	0	0

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

	2024	2024	2023	2023
	Charity	Group	Charity	Group
	£000	£000	£000	£000
Schroders Responsible Multi Asset Fund	11,333	11,333	10,751	10,751
Investment Property	1,098	1,098	1,092	1,092
Leasehold Properties	77	77	77	77
Other Investments	8	8	8	8
	<u>12,516</u>	<u>12,516</u>	<u>11,928</u>	<u>11,928</u>

9.2 Total gross income from Charity and Group

	2023/24	2022/23
	Total	Total
	£000	£000
a) Fixed Asset Investments		
Investments listed on a recognised Stock Exchange	631	512
Other Fixed Assets	5	0
b) Current Assets		
Interest earned on cash deposits and inter co. loan in the year	18	4
c) Investment Properties		
Rent received	84	136
	<u>738</u>	<u>652</u>

9.3 Programme Related Asset

All assets relate to the Charity

	2024	2024	2023	2023
	Charity	Group	Charity	Group
	£000	£000	£000	£000
Freehold Property				
Market Value at start of Year	1,670	1,670	1,485	1,485
Transfer (to) / from Investment Asset	370	370	185	185
Net Gain on revaluation	0	0	0	0
	<u>2,040</u>	<u>2,040</u>	<u>1,670</u>	<u>1,670</u>
Historic Cost	<u>1,963</u>	<u>1,963</u>	<u>1,594</u>	<u>1,594</u>

9.4 Tangible Fixed Assets	Fisher House		Hepatitis Van		Man Van		Total	
	2024 Charity £000	2024 Group £000	2024 Charity £000	2024 Group £000	2024 Charity £000	2024 Group £000	2024 Charity £000	2024 Group £000
COSTS								
Cost as at 1st April 2023	3,724	3,724	112	112	108	108	3,944	3,944
Disposals	(3,724)	(3,724)	0	0	0	0	(3,724)	0
Cost as at 31st March 2024	0	0	112	112	108	108	220	3,944
ACCUMULATED DEPRECIATION								
As at 1st April 2023	3,724	3,724	65	65	108	108	3,897	3,897
Disposals	(3,724)	(3,724)	0	0	0	0	(3,724)	0
Charge for the year	0	0	38	38	0	0	38	38
Depreciation as at 31st March 2024	0	0	103	103	108	108	211	3,935
Net Book Value as at 31st March 2023	0	0	47	47	0	0	47	47
Net Book Value as at 31st March 2024	0	0	9	9	0	0	9	9

Fisher House has been fully depreciated and the initial lease has expired, therefore the Charity has disposed of the asset. A new 10 year lease at peppercorn rent has been signed with UHB NHS Foundation Trust.

The Man Van has been fully depreciated however the Charity still owns and runs this asset.

10 Analysis of Current Assets

10.1 Amounts falling due within one year:	2023/24 Charity £000	2023/24 Group £000	2022/23 Charity £000	2022/23 Group £000
Trade debtors	164	164	459	469
Accrued income	1,579	1,579	933	933
Prepayments	144	144	113	113
Amounts owed by group and undertakings	0	0	10	0
Total debtors payable within one year	1,887	1,887	1,515	1,515
Amounts falling due after one year:	2023/24 Charity £000	2023/24 Group £000	2022/23 Charity £000	2022/23 Group £000
Trade debtors	0	0	0	0
Accrued income	678	678	900	900
Prepayments	0	0	0	0
Amounts owed by group and undertakings	0	0	0	0
Total debtors payable after more than one year	678	678	900	900

Amounts owed by group and undertakings are unsecured, interest free, have no fixed date of repayment and are repayable on demand.

10.2 Cash and cash equivalents	2023/24 Charity £000	2023/24 Group £000	2022/23 Charity £000	2022/23 Group £000
Cash at bank and in hand	4,893	4,893	4,770	4,770

11 Creditors	2023/24 Charity £000	2023/24 Group £000	2022/23 Charity £000	2022/23 Group £000
Amounts falling due within one year:				
Trade creditors	329	329	250	250
Accruals	241	241	378	378
Other taxation and social security	15	15	12	12
Total creditors falling due within one year	585	585	640	640

12 Contingent assets – legacy income

As at 31 March the charity had been notified of 27 legacies (2022/23 32 legacies), the value of which cannot be ascertained with accuracy, all being a share of a residue amount.

13 Liabilities and Provisions for Charity and Group	Charitable Expenditure £000	2024 Total £000	2023 Total £000
Movements during the year			
Opening Provisions	3,278	3,278	3,120
Add: New provisions charged in the year	4,373	4,373	1,621
Less: Provisions released in the year	(1,359)	(1,359)	(705)
Change in value of brought forward provisions	(1,405)	(1,405)	(758)
Provisions outstanding at end of year	<u>4,887</u>	<u>4,887</u>	<u>3,278</u>
Provisions Payable within one year	3,672	3,672	2,813
Provisions payable after more than one year	1,215	1,215	465
Provisions outstanding at end of year	<u>4,887</u>	<u>4,887</u>	<u>3,278</u>

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

14 Commitments for Charity and Group

Trustees have entered into arrangements with future commitments as follows:

	2024 Land & Buildings £000	2024 Other £000	2023 Land & Buildings £000	2023 Other £000
Expiring within a year				
Finance SLA	0	166	0	166
Office Accommodation	17	0	17	0
Capital Commitments	0	0	167	0
	<u>17</u>	<u>166</u>	<u>0</u>	<u>166</u>
Expiring between 2 - 5 years	3	0	20	0

15 Pension commitments

The Charity operates multiple defined contribution pension schemes. The assets of the schemes are held separately from those of the Charity in independently administered funds. The pension cost charge represents contributions payable by the Charity to the funds and amounted to £54,000 (2023 - £47,000). Contributions of £7,000 (2023 - £6,000) were payable to the fund at the balance sheet date and are included in creditors.

16 Grant Commitments

At the balance sheet date, the Charity had committed to making grants of £6,112,000 (2023 - £4,288,000) as part of its multitude of supported projects. The grant commitment consists of a number of grants that either run over a three-year period or provide additional funding to existing grants made to grantees.

Where the grant commitment runs over several years, the balance of the commitment outstanding at each year end will be subject to monitoring, particularly in respect of the timeframe remaining on each grant.

17 Analysis of Charitable Funds**17.1 Restricted Funds for Charity and Group**

	Balance 1 April 2023 £000	Income £000	Expenditure £000	Transfers £000	Gains and Losses £000	Balance 31 March 2024 £000
R1 Hollier Legacy	88.3	0.0	0.0	0.0	0.0	88.3
R2 Hear and Now	22.4	1.0	(3.5)	0.0	0.0	19.9
R3 Get Ahead	91.8	0.0	0.0	0.0	0.0	91.8
R4 Transplant Centre	800.0	400.0	0.0	0.0	0.0	1,200.0
Total Restricted Funds	<u>1,003</u>	<u>401</u>	<u>(4)</u>	<u>0</u>	<u>0</u>	<u>1,400</u>

The objects of the restricted funds are as follows

- R1** For the training and education of doctors at Good Hope Hospital
- R2** For the cochlear implant programme.
- R3** Funds used to purchase vital equipment, education and research into cancer and other head and neck diseases.
- R4** Grant to be used against the Transplant Centre.

17.2 Unrestricted and Designated Funds

The Trustees set a balance (opening or closing) of £250,000 or above as the threshold for reporting material designated funds. Those funds above the Trustees set balance of £250,000 are disclosed below:

	Balance 1 April 2023 £000	Income £000	(Expenditure) £000	Transfers £000	Gains and Losses £000	Balance 31 March 2024 £000
Designated Funds						
E1 UHB Transplant Centre	1,811.7	22.9	0.0	568.4	0.0	2,403.0
E2 Ward 19 Charity Fund Heartlands	436.4	6.7	(25.7)	(0.5)	0.0	416.9
E3 Good Hope Legacies	263.6	42.3	0.0	(8.9)	0.0	297.0
E4 BHam Hospitals Childrens Fund	274.9	1.1	(111.0)	8.4	0.0	173.4
E5 4 Trauma 4 Patients	66.1	1,031.2	(60.5)	(28.0)	0.0	1,008.8
E6 Fisher House	496.6	298.8	(417.9)	(33.8)	0.0	343.7
E7 The Giles Trust	251.9	65.0	16.5	(65.7)	0.0	267.7
E8 QEHB Legacies	1,307.5	366.2	0.0	(913.3)	0.0	760.4
E9 Simulation Suite	996.5	0.0	(500.0)	(250.0)	0.0	246.5
E10 Trustee approved future projects	279.4	0.0	(0.1)	79.0	0.0	358.3
E11 QE Cancer Appeal	0.0	0.6	0.0	378.5	0.0	379.1
E12 Home from Home capital fund	0.0	0.0	0.0	2,077.4	0.0	2,077.4
E13 Friends of QE capital fund	0.0	0.0	0.0	326.0	0.0	326.0
Other designated funds	7,486.9	2,749.3	(4,770.3)	(2,076.7)	0.3	3,389.5
Unrestricted Funds						
QEHB Charity	42.6	44.1	(1.5)	(34.0)	0.0	51.2
Heartlands Hospital Charity	0.0	1.9	(3.4)	7.1	0.0	5.6
Good Hope Hospital Charity	50.8	5.5	(2.4)	8.3	0.0	62.2
Solihull Hospital Charity	(0.2)	1.3	(9.7)	6.6	0.0	(2.0)
UHB Charity	562.2	124.7	(222.7)	(48.6)	0.0	415.6
All Funds Gain/(Loss) on Investments	1,582.5	0.0	0.0	0.0	588.0	2,170.5
Total Unrestricted Funds	<u>15,909</u>	<u>4,762</u>	<u>(6,109)</u>	<u>0</u>	<u>588</u>	<u>15,151</u>
UHB Trading CIC	0	0	0	0	0	0
Consolidated Total	<u>16,912</u>	<u>5,163</u>	<u>(6,112)</u>	<u>0</u>	<u>588</u>	<u>16,551</u>

17.2 Unrestricted and Designated Funds - continued

E1	To create a Birmingham Transplant Centre at UHB
E2	Support for the Haematology & Oncology Units
E3	Legacies for the benefit of Good Hope Hospital
E4	Support for the children's wards and departments at UHB
E5	Patient support programme for trauma patients
E6	Fisher House, home away from home for military patients and their families
E7	Support for brain tumour departments at UHB
E8	Legacies for the benefit of Queen Elizabeth Hospital Birmingham
E9	Support costs for the creation of a Digital Simulation Suite
E10	Funds set aside for future projects approved by Trustees that do not have a current confirmed start date
E11	Supporting cancer patients
E12	Home from Home capital
E13	Friends of QE Hospital capital

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. Donors express a preference rather than trust/restriction when donating and therefore all designated funds are effectively unrestricted in nature and then assigned to projects by the Charity.

17.3 Summary of Funds

Summary of funds - current year

	Balance 1 April 2023 £000	Income £000	Expenditure £000	Transfers £000	Gains and Losses £000	Balance 31 March 2024 £000
Unrestricted funds	2,237.9	177.5	(239.7)	(60.6)	588.0	2,703.1
Designated funds	13,671.5	4,584.1	(5,869.0)	60.8	0.3	12,447.7
Restricted funds	1,002.5	401.0	(3.5)	0.0	0.0	1,400.0
	16,911.9	5,162.6	(6,112.2)	0.2	588.3	16,551

18 Analysis of net assets between funds

	Unrestricted Funds 2024 £000	Restricted Funds 2024 £000	Total Funds 2024 £000
Analysis of net assets between funds - current year			
Fixed asset investments	13,956	600	14,556
Tangible fixed assets	9	0	9
Current assets	6,658	800	7,458
Creditors due within one year	(585)	0	(585)
Total	<u>20,038</u>	<u>1,400</u>	<u>21,438</u>
Provisions Payable within one year	(3,672)	0	(3,672)
Provisions payable after more than one year	(1,215)	0	(1,215)
Total	<u>(4,887)</u>	<u>0</u>	<u>(4,887)</u>
Total fund balances	<u>15,151</u>	<u>1,400</u>	<u>16,551</u>
Analysis of net assets between funds - prior year			
	Unrestricted Funds 2023 £000	Restricted Funds 2023 £000	Total Funds 2023 £000
Fixed asset investments	13,395	203	13,598
Tangible fixed assets	47	0	47
Current assets	6,385	800	7,185
Creditors due within one year	(640)	0	(640)
Total	<u>19,187</u>	<u>1,003</u>	<u>20,190</u>
Provisions Payable within one year	(2,813)	0	(2,813)
Provisions payable after more than one year	(465)	0	(465)
Total	<u>(3,278)</u>	<u>0</u>	<u>(3,278)</u>
Total fund balances	<u>15,909</u>	<u>1,003</u>	<u>16,912</u>

19 Transfers Between Funds

There have been no transfers between restricted & designated funds for 2023/24. (2022/23 £0.8k)

20 Controlling Party

The ultimate controlling party is the Trustess of the Charitable Parent Company.

