NORFOLK COMMUNITY HEALTH AND CARE NHS TRUST CHARITABLE FUND

England & Wales · Charity number 1051173

Details

Other names	NORFOLK COMMUNITY HEALTH AND CARE NHS TRUST, NORFOLK PRIMARY CARE TRUST CHARITABLE FUND, NORWICH COMMUNITY HEALTH PARTNERSHIP NHS TRUST, NORWICH COMMUNITY HEALTH PARTNERSHIP NHS TRUST CHARITABLE FUND, NORWICH PRIMARY CARE NHS TRUST CHARITABLE FUND
Status	Registered
Legal form	Other
Registered	1995-12-01
Register	View on the Charity Commission register

Contact

Address	Norwich Community Hospital Bowthorpe Road Norwich Norfolk NR2 3TU
Phone	01603272572
Email	carol.plunkett@nhs.net
Website	https://eastofenglandcommunityhealthandcare.nhs.uk/about-us/charities-and-charitable-funds/

Activities

Objects: FOR ANY CHARITABLE PURPOSE OR PURPOSES RELATING TO THE NATIONAL HEALTH SERVICE

Activities: Norfolk Community Health and Care NHS Trust Charitable Fund supports and improves patient services and provides support for families and carers of NHS patients across Norfolk. It supports services and activities delivered within the community, in clinics and in people's homes. It also supports patients in Community hospitals.

Downloaded from opencharities.uk/ew/1051173

Classification

- **How:** Provides Services, Other Charitable Activities
- **What:** The Advancement Of Health Or Saving Of Lives
- **Who:** Children/young People, Elderly/old People, People With Disabilities

Geography

- Norfolk

Finances

Period end	Income	Expenditure	Assets	Employees
2025-03-31	£195,000	£274,000	-	-
2024-03-31	£154,000	£391,000	-	-
2023-03-31	£221,992	£319,954	-	-
2022-03-31	£111,000	£165,000	-	-
2021-03-31	£358,000	£295,000	-	-

Trustees

Name	Role	Appointed
EAST OF ENGLAND COMMUNITY HEALTH AND CARE NHS TRUST		2026-04-01

Linked charities

- D M COOPER (DECEASED) FUND (1051173-1)
- PRISCILLA BACON LODGE FUND (1051173-2)
- COMMUNITY HOSPITALS GENERAL FUND (1051173-3)
- LITTLE PLUMSTEAD HALL CENTENARY FUND (1051173-4)
- LEARNING DISIBILITIES LITTLE PLUMSTEAD FUND (1051173-5)
- THE NORFOLK PRIMARY CARE TRUST (EXPENDABLE FUNDS) COMMON INVESTMENT FUND (1051173-6)

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NORFOLK COMMUNITY HEALTH AND CARE NHS TRUST CHARITABLE FUND

England & Wales - Charity number 1051173

Accounts

NORFOLK COMMUNITY HEALTH AND CARE NHS TRUST CHARITABLE FUND

ANNUAL REPORT AND ACCOUNTS 2024/2025



NCH&C Charitable Fund

NHS Norfolk Community Health and Care NHS Trust

FUNDRAISING REGULATOR

CHARITY COMMISSION FOR ENGLAND AND WALES



SMALL THINGS CAN MAKE SUCH A DIFFERENCE.
DANI HARVEY - HCA URGENT COMMUNITY RESPONSE TEAM
WITH CARE PACKAGE ITEMS FOR PATIENTS.

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MESSAGE FROM OUR CHAIR



Welcome to our annual report for 2024/25.

We are a registered charity that works for the benefit of NHS patients and their families from Norfolk and the surrounding area. We work closely with all the NHS bodies in the area, not just our corporate trustee.

We exist to provide resources and facilities to meet the needs of our NHS partners' patients and their families.

Your donations made this work possible, and your future donations are the key to our continued success.

This is my second report as Chair of the charitable funds committee, and I would like to thank everyone who has donated gifts or money this year as well as our staff who have worked so hard over the last two years.

We will continue to focus on helping the population of Norfolk to live fulfilling and healthy lives. If you would like to get involved, details about how to do this are at the end of this report. Please support us, every £ counts.



John Kennedy
(Non-Executive Director)
30 June 2025

Our year at a glance

Funding grants provided
78

Income
£195,000

Expenditure
£274,000

KEY HIGHLIGHTS OF OUR YEAR

Working in **collaboration with the Friends of Kelling Hospital** on a jointly funded project to install screens to Pineheath Ward. This investment of £52,000 has transformed the ward environment into a more calming, clean and welcoming space for patients, visitors and staff.

Receiving a **restricted grant from Dereham Town Council** to fund dementia friendly clocks on Foxley Ward at Dereham Hospital to support patients living with dementia who are receiving inpatient treatment.

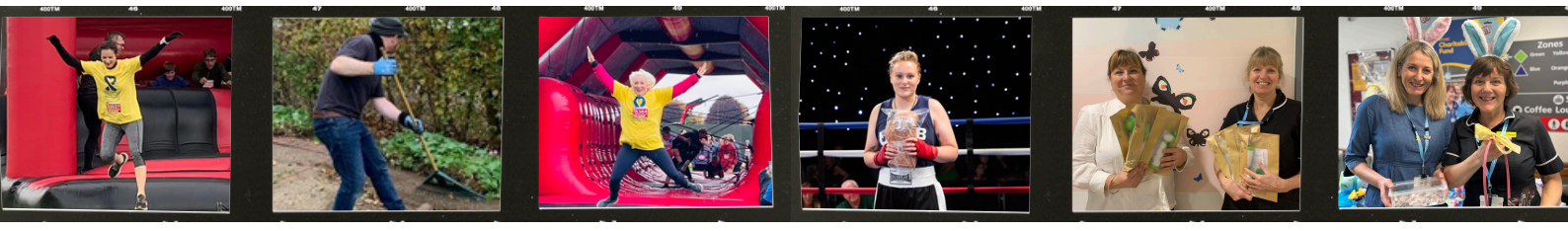
Supporting the **delivery of a new Enhanced Services Team** by funding resources for therapy treatment across multi-Trust sites.

Creation of a new website to engage with supporters and demonstrate the impact of donations to inspire and motivate support for the charity.

·Financial **support for a research project** at Caroline House into managing expectations of patient families during patient recovery

Increased income through event participation by taking part in Inflatable 5k race with over 25 staff members taking part and raising over £3,000.

Working in partnership with Norfolk Community Health & Care NHS Trust in the delivery of a new £13.m facility – The Willow Therapy Unit.



WHAT WE AIM TO DO: OUR OBJECTIVES & ACTIVITIES

WHO WE ARE

Norfolk Community Health and Care (NCH&C) NHS Trust Charitable Fund is a registered charity (registered number 1071153). We exist to raise funds and receive donations for the benefit of the NHS. By securing donations, legacies, and sponsorship, NCH&C Charitable Fund can provide the 'icing on the cake' to make a real difference for patients, their families and the staff who look after them.

Norfolk Community Health and Care NHS Trust is an outstanding provider of community healthcare and our key partner in fulfilling our charitable aims. NCH&C NHS Trust provides both general and specialist care for over 900,000 patients each year. NCH&C NHS Trust provides district nursing and health visiting to the residents of Norfolk as well as the patients of several community hospitals.

OUR MISSION

By raising new money and careful management of our existing funds, NCH&C NHS Trust Charitable Fund provides a public benefit by making grants to NCH&C NHS Trust and the other organisations it works with in order to:

'serve the population of Norfolk by funding facilities, equipment and research and to support associated healthcare and complementary services for patients of the NHS in Norfolk.'

Grants are made in accordance with charity law, our constitution and the wishes and directions of donors. In making grants, we endeavour to reflect the wishes of patients and staff by directing funds towards areas they tell us are most in need. During the year 2024/25, grants totalling £106k were made. When considering where to focus our attention our corporate trustee's board and, particularly, the members of the charitable funds committee have regard to the Charity Commission for England and Wales's guidance on public benefit and what this means for NCH&C NHS Trust Charitable Fund.

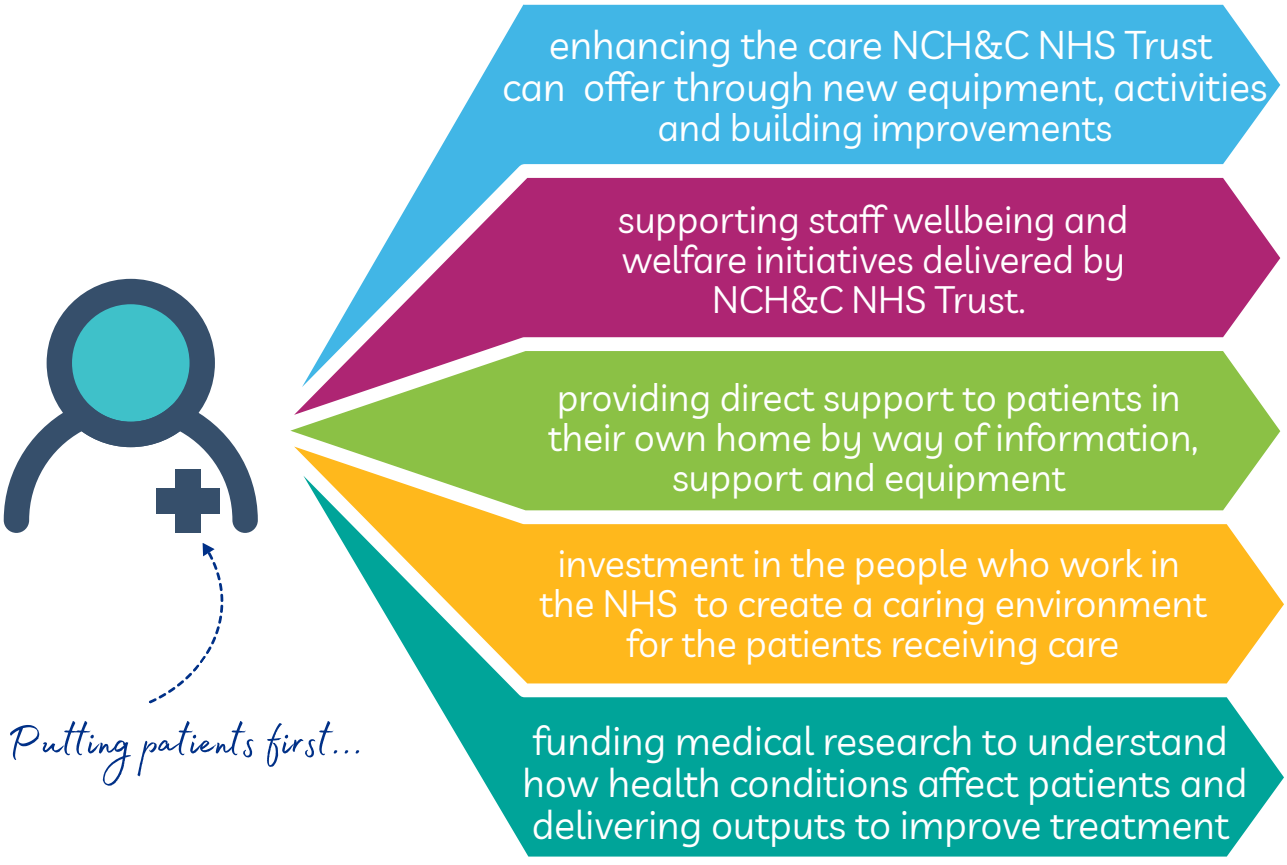
Our plans are to continue to increase our level of fundraising to achieve our target of £292k a year which will help us work with our NHS partners to improve the health prospects for patients in our community.

WHAT WE HAVE ACHIEVED

Our key aim is to serve the NHS patients of NCH&C NHS Trust for the public benefit.

By funding activities, equipment and services, we help the NHS body we work with provide care to their patients which goes beyond that which they are funded by the state to provide. Our role is not to replace or subsidise NHS healthcare, but to complement it.

By working with the NHS, we aim to enhance the patient experience for people irrespective of their ethnicity, beliefs, or personal or family circumstances. We put this aim into practice by helping the patients, their families and carers, and visitors to the hospital by:



We do this through a range of programmes funded by your donations, legacies and grants. Highlights from the main programmes undertaken in the year are detailed over the next few pages to give you a wider understanding of the difference we can make together to lives today and in the future.

We couldn't do it without you!

INVESTING IN PATIENT ENVIRONMENTS

Transforming Patient Experience with Silentia Screens at Kelling Hospital.

Thanks to a generous donation from a legacy gift and the Friends of Kelling Hospital, a significant upgrade costing over **£50,000** has been made to Pineheath inpatient ward with the installation of Silentia privacy screens.

These innovative screens replace traditional fabric curtains, offering a flexible and modern solution that enhances both patient privacy and infection control unlike curtains, the screens are easy to clean and reduce the risk of cross-contamination – a crucial improvement in maintaining a safe healthcare environment.



The new layout also helps patients feel less hidden and confined. The light, airy design of the screens allows for more natural light to flow through the ward, creating a more open and calming atmosphere. Staff have reported that the flexibility of the screens improves day-to-day care by making it easier to adapt spaces for different needs.

> This project has not only improved the functionality of the ward but has had a real impact on patient comfort and wellbeing. They are easy to keep clean which has had a big impact on reducing infections on the ward. We are incredibly grateful to the Friends of Kelling Hospital and the thoughtful legacy gift that made this transformation possible.
>
> **Kelling Hospital Ward Manager, Susan Garside.**

SUPPORTING PATIENT INTERVENTIONS

Case Stuldy: Enhanced Support Team patient interventions project.

Charitable Funds were asked to financially support the development of the Enhanced Support Team, a new structure within the NCH&C NHS Trust established at the end of 2024. The team supports the care of patients who require enhanced observation, for a variety of health conditions and behaviours, to prevent harm to themselves and/or others.

A vital part of the role is to use meaningful activity-based interventions to apply distraction and promote social interaction, consequently reducing unwanted behaviours. The financial support received from Charitable Funds was used to purchase activity tools which were then divided between all staff members. The activity tools are used during each shift supporting the interactions with patients.

THE GREATEST BENEFITS FOR THE PATIENTS ARE:·

THE LEVEL OF SUPPORT TAILORED TO PATIENT'S INDIVIDUAL NEEDS

AN INCREASE IN ACTIVITY AND SOCIAL INTERACTIONS.





> "We are grateful to the funding from charity donations, as we did not have the budget within the NHS to fund these additional items that have delivered so many benefits in a short space of time."
>
> **Anita Strowger, Enhanced Support Team Lead**

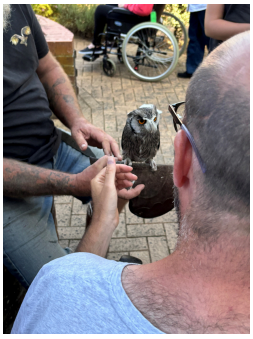
FUNDING INNOVATIVE PATIENT RESEARCH

Case Study: Research project to improve support for families after brain Injury.

Charitable funding of £1,000 has enabled vital research at Caroline House, exploring how healthcare professionals work with families of people with complex brain injuries - especially when their expectations of recovery differ. This issue can cause significant distress for both families and staff, directly affecting patient care.







The money has enabled the analysis and second part of this study; results of interviews with Caroline House staff, ready for publication. The research shows several areas of modifiable improvement that we could make as a service to better support families and patients. These ideas will be taken forward by the management team at Caroline House once the results are confirmed.

> The money has enabled me to extend my research, which is looking at how healthcare professionals work with families of people with complex brain injuries when their expectations of recovery differ. The funding will also support a future doctorate application to test these improvements further and embed long-term change.

Jessica Blake, Specialist Neurological Occupational Therapist

With support, the researcher has completed the second phase of their study, analysing staff interviews and identifying key areas where services could improve communication and emotional support. These findings will be shared with Caroline House management to help shape better support for families and patients.

The funding will also support a future doctorate application to test these improvements further and embed long-term change.

The paper was published by a peer-reviewed journals and articles site in 2025: https://www.tandfonline.com/doi/full/10.1080/02699052.2025.2450603

DELIVERING ENHANCED STAFF TRAINING

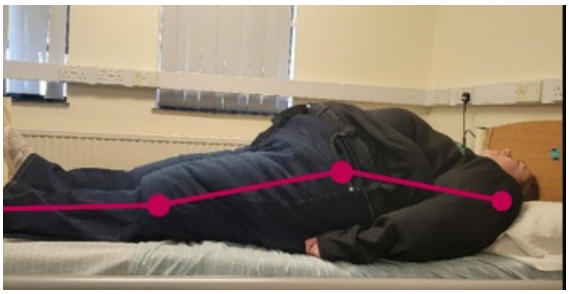
CASE STUDY: Bariatric Empathy Suit training resource

The charity funded a Bariatric Simulation Suit for the NCH&C Staff Experience team, which is made to educate and create a better understanding of the abilities and restrictions of a bariatric patient. Below is feedback from the Lianne Mason, Moving and Handling and Mandatory Training Lead:

We spent some time discussing body shapes (somatotypes) and how this can impact normal movement patterns and affect handling of patients. We then gave delegates the opportunity to wear the empathy suit. There was a focus throughout on the patient experience and how small changes that staff can make can improve their experience.

When laying flat on a bed, the body shape can result in the person feeling like they are tipping head down even though the bed itself is flat. By engaging the patient and asking when they felt flat we were able to position them in a way that they were more comfortable and aligned. This can be hard to explain or understand through verbal description only and all delegates really felt the impact of this when in the suit.

The photos show one of our delegates before and after the adjustments to the bed. The pink dots show how the bottom pushes the hips upwards and results in the head down feeling and overarching of the back that the delegates experienced.







'Better understanding on how a patient who is bariatric feels and how we can help with small adjustments'
'It has been really eye opening. Consider how patients feel when moving, impact on confidence and movement'
'A really useful informative and interactive session'
'key learning point: How the different body shapes impact transfers'
'key learning point: Patient experience - educate staff, ensure time for sessions'
'"Very insightful"

Staff feedback

We also emphasised the impact on vision and visual field, both when walking and in bed. Delegates experienced how the difficulty seeing other people when they were in bed did cause them to disengage with the conversation and how noticeable it was when the bed was adjusted and staff repositioned, they felt more included in the discussion.

Also the need for more reassurance when mobilising and when rolling in bed as anxiety of falling was increased – by the staff members describing positioning and taking time this provided reassurance to the person in the suit.

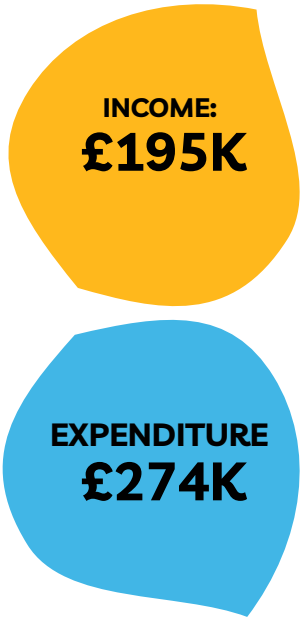
HOW WE FUNDED OUR WORK:
OUR ACHIEVEMENTS & PERFORMANCE

The following figures are taken from the full accounts approved on 30 June 2025; if more details are required, please refer to the full accounts. This part of the trustee's annual report comments on key features of those accounts. In this section we firstly explain how we raised the money and then how we spent it.

MONEY RECEIVED AND MONEY SPENT

NCH&C Charitable Fund can only continue to support the work Norfolk Community Health and Care NHS Trust for as long as we receive the money needed. Most of our income comes from the voluntary efforts of the general public.

This year we spent £79,000 more than we received in income as part of a planned overspend to expend historical donations.



OUR FUNDRAISING PRACTICES

FUNDRAISING REGULATOR

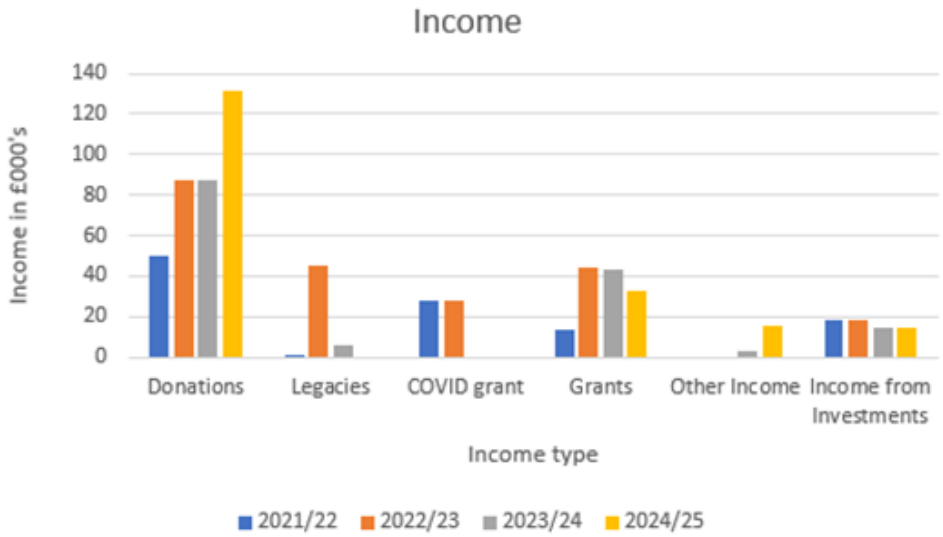
Members of NCH&C Charitable Fund team organise fundraising events and co-ordinate the activities of our supporters both on site and in the wider community on behalf of NCH&C NHS Trust. We do not use professional fundraisers or involve commercial participators. There have been no complaints about fundraising activity this year.

The Fundraising Regulator is the independent regulator of charitable fundraising in England, Wales and Northern Ireland, and we are a member of that organisation. Fundraising Regulator publishes the Code of Fundraising Practice that sets the standards that apply to fundraising carried out by all charities and third-party fundraisers in the UK.

The charity development and project manager is a member of the Chartered Institute of Fundraising and the charity follows the Fundraising Regulator's Code of Fundraising Practice. All fundraising guidance and working practices are compliant with that code.

MONEY RECEIVED: OUR SOURCE OF FUNDS

The chart below shows our main sources of income over the past four years.



Our largest source of income continues to be gifts and donations from the public, either direct or through corporate giving. Grant income has reduced this year. Income from fundraising is almost at pre-pandemic levels.

The public continue to be our main supporters. However, donations from grateful patients are falling, partly due to the cost-of-living crisis. The Charity is looking at increasing the ways that people can give. In particular, we are trying to increase the ways that people can give electronically.

We continue to be grateful to our League of Hospital Friends groups at Swaffham and Kelling Hospital who provide grants to fund specific activities. They act as local ambassadors and galvanise their local community to support their own hospital.

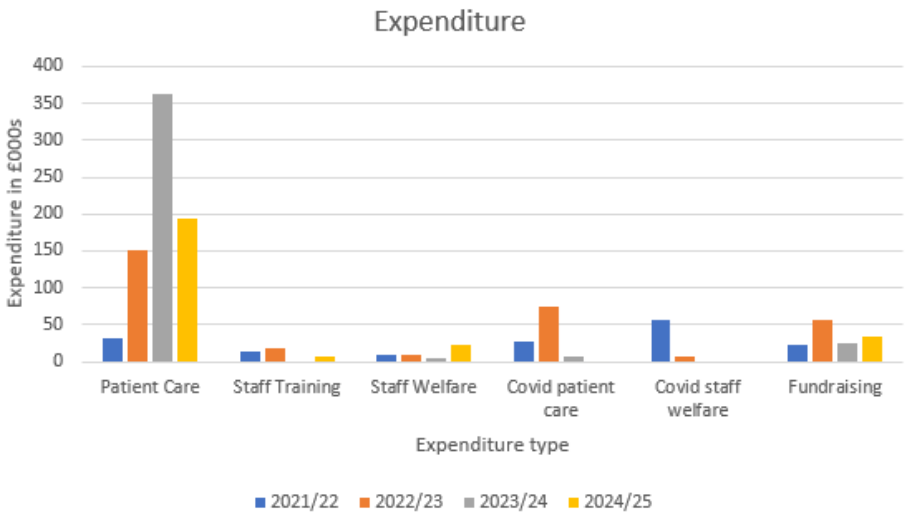
OUR FUNDRAISING PERFORMANCE

During the year the total donations, legacies and income from fundraising (shown as charitable activities activities in the statement of financial activities) came to £180,000 against a target of £325,000. Our fundraising income is almost back to pre-pandemic levels, but we are still affected by the cost-of-living crisis. We continue exploring new ways of fundraising including applying for grants from organisations other than NHS Charities Together.

We benchmark our fundraising activity with our peers through the NHS Charities Together financial comparison exercise. This data demonstrates that the charity is performing within the top half of its peers of mental and community health NHS Trust charities in terms of income and spending its' funds on patient and staff expenditure as per our responsibility to generous donors.

MONEY SPENT: WHAT WE USED FUNDS FOR

The chart below shows our expenditure over the past four years.



We are a grant making charity – mostly we give grants to our NHS body, but we also give smaller grants to other service providers where that meets our charitable objectives.

Every year, we designate a fund to support the wellbeing and staff engagement activities of the Trust as well as a small training and research budget to support additional projects to benefit patients.

We have increased the amount of spending in patient homes across Norfolk working closely with the community nursing teams to understand the challenges. We have continued to fund equipment and activities that will support the treatment, care and dignity of patients receiving treatment in their own homes.

PEFORMANCE AGAINST OBJECTIVES

Spending the money is only part of the story because we are committed to ensuring value for money. To achieve this, applications for general fund grants include questions about the objectives, impact, and success criteria for the proposed project.

The charity undertakes an annual survey of all grants awarded over £5,000 and a sample of smaller grants to establish the extent to which the intended benefits have been realised. We ask the applicant what the outcome of the grant was both in terms of how the money was spent and what the impact was to the medical care and treatment of patients. This information not only informs future grant making policy but also provides a basis for assessing our performance.

We also ask fund advisors who have spent more than £5,000 in the year to provide a brief report on what they spent the money on and the difference it made to the medical care and treatment of patients.

WHAT WE PLAN TO DO WITH YOUR DONATIONS: OUR FUTURE PLANS

We will achieve our mission by working with the NHS to develop the facilities to treat the patients of tomorrow and have established a development fund to further that purpose. To identify enhanced treatments , we actively seek to assist in equipping NHS staff with the skills they need and provide financial support to our research partners in their important work. Our open invitation to the readers of our annual report and accounts is to join with us in our important mission by making a gift.



Our detailed plans are to:

- Expand our fundraising activities towards achieving our long-term goal of raising £250,000 every year
- Review the grants that we could apply for. Until 2019 we received relatively little income from grants. We are actively exploring looking at other grant making bodies to see whether we are eligible for other grants that we can use to enhance the services provided by NCH&C NHS Trust.
- Review processes to increase efficiencies and reduce costs to maximise the impact of donations to our beneficiaries.
- Maintain and improve the environments enhanced beyond statutory requirements through charitable funds by funding key capital projects to the value of £50k.
- Continuing to invest in equipment and activities that support patients in managing their own health in their own homes.

Your support makes these plans possible and to help us please do consider making a donation.

HOW WE MANAGE OUR MONEY:



OUR GRANT MAKING POLICY

NCH&C Charitable Fund makes grants from both its unrestricted and restricted funds. The grants from restricted funds must be used in accordance with the conditions attached to the donation. Within the unrestricted funds, grants are made from general funds, designated (earmarked) funds and designated research funds:

general funds are received by NCH&C Charitable Fund with no particular preference expressed by donors. These funds are used to target projects in areas of the Trust that do not have available designated funds to assist them.

designated funds are established for a particular location or activity nominated by the donor. They are overseen by the charity and fund advisors who recommend how to spend the money within the designated area.

endowment fund cannot be spent but produces an income credited to a separate fund to promote the preservation of health and recovery of patients and former patients of Swaffham Hospital.

The charitable funds committee decides which, if any, projects to fund based an assessment of quality, value for money and how well they match the objects of the charity.

RESERVES POLICY

The charitable funds committee has established a reserves policy as part of its plans to provide long term support to NCH&C Trust. The committee calculate the reserves as unrestricted income funds that is freely available after taking account of designated funds that have been earmarked for specific projects.



The charitable funds committee intends that designated funds are spent within a reasonable period of receipt and therefore expects to only maintain reserves sufficient to provide certainty of funding for financial commitments and continuity for grant making.

Therefore, the target range for reserves is £30k-£100k to ensure the charity can continue to operate in a no-income scenario. The reserves held are currently within our target range and we plan to increase the unrestricted funding by implementing a fundraising strategy in 2025/26.

The charitable funds committee expects that designated funds will be spent within three years. It therefore regularly reviews the balances held in designated funds against this benchmark unless it has been agreed that a different period is more appropriate based on the reason for the designation. Where the fund has not been spent within three years, the charitable funds committee will determine whether the fund is likely to be committed soon and the extent to which there is a continuing need for the particular designated fund(s).

Where it is decided that the designation is no longer necessary or the designated fund has been inactive for more than five years, the funds are closed and transferred to general unrestricted reserves.

ABOUT OUR INVESTMENTS

The charity invests the majority of its money, which are managed by Barratt & Cooke with the objective to maximise the income receivable whilst allowing a degree of capital growth.

Since these funds represent unrestricted income funds including reserves, the emphasis is on maintaining a high level of liquidity and a low to moderate investment risk. The governing documents allows the trustee to invest in a wide range of shares and investments, provided they are not speculative.



The portfolio is structured to permit a range of investments intended to yield a competitive rate of return in difficult market conditions and part of the portfolio is invested in hedge funds. In addition, the charitable funds committee has decided not to invest in tobacco securities or fossil fuels because of the proven links between smoking, pollution and poor health which would make such investments contrary to our charitable aims.

Investment performance is monitored by the charitable funds committee by reviewing regular reports from the investment managers.

The movement in the stock market affects the value of our investments. This year we have an unrealised loss. This makes little difference to the day- to-day running of the charity until the point that we have to sell our investments and realise the gain or loss.

HOW WE ORGANISE OUR AFFAIRS:
REFERENCE AND ADMINISTRATIVE DETAILS

THE CHARITY

The Norfolk Community Health and Care (NCH&C) NHS Trust Charitable Fund are registered with the Charity Commission under the single Registered Number 1051173.
Its objects are 'for any charitable purpose or purposes relating to the National Health Service.'

TRUSTEE ARRANGEMENTS

NCH&C NHS Trust is the sole corporate trustee of the charity. The corporate trustee's responsibilities are therefore carried out by its board of directors. The board is appointed in accordance with the Trust constitution. Details of NCH&C board membership can be found in its annual report and accounts and website.



As NCH&C Charitable Fund has a corporate trustee it is, in accounting terms, controlled by Norfolk Community Health and Care NHS Trust and is therefore its subsidiary. Financially, the charity is not material to NCH&C, so it is not consolidated into the Trust's accounts.



NCH&C's board meet annually as corporate trustee to:

- review and approve NCH&C Charitable Fund's strategic plan
- re-appoint or appoint members of the charitable funds committee
- approve the trustee's annual report and accounts for the year.

The board of directors of Norfolk Community Health and Care NHS Trust delegate responsibility for the day-to-day management of the NCH&C Charitable Fund to the charitable funds committee and the trust fund director in accordance with the scheme of delegation and standing financial instructions.



Together, they are responsible for fulfilling the corporate trustee's strategic plan and for working with the professional advisors and with the representatives of NCH&C and NCH&C Charitable Fund who provide the financial services to the charities.

NCH&C CHARITABLE FUND COMMITTEE

The charitable funds committee comprises two executive members of the board and two non-executive members. Other members of NCH&C staff are invited to attend committee meetings but do not have a vote at those meetings.

Name and Date appointed/resigned and job title.

John Kennedy from January 2024.
Non-Executive Director and Chair of the Charitable Funds committee.

Lynda Thomas from February 2023.
Non-Executive Director and Group Chair.

Rachel Hawkins from 1st April 2025.
Group Director of Corporate Affairs.

Angela Moodie from 21st July 2025.
Group Chief Finance and Resources Officer.

Andrew Hopkins from April 2016 to 11 September 2025.
Finance Director.

Dr Sue Crossman from April 2024 to April 2025.
Non-executive Director.

Carolyn Fowler From November 2019 to 4 July 2025.
Director of Nursing.

Members of the charitable funds committee are selected to give the charity a good mix of appropriate professional skills – for example, medical, finance, investment and fundraising.

New members of the charitable funds committee are provided with an induction pack consisting of the governing documents, previous three years trustee's annual reports and accounts, policies and procedures of the Charity as well as the HFMA's Practical guide: NHS charitable funds and the Charity Commission for England and Wales's guidance public benefit: running a charity.

Appropriate training courses are offered in charity law and administration, and the roles and responsibilities of trustees. The charity's auditors and solicitors provide useful material, and NHS Charities Together runs regular conferences for trustees.

OUR STAFF AND ADVISORS

Our awesome charity team!







NCH&C Charitable Fund has two full time staff, Mrs Carol Plunkett is the charity development and project manager and Mrs Tracy Harvey is the charity administrator and finance officer. Kerry Brind was the charity fundraising and marketing office who left in November 2024 after a one year contract. The charity has plans to recruit a substantive replacement post in 2025/26.

Members of the charitable funds committee are not trustees in their own right, but act on behalf of the corporate trustee.

The charitable funds committee is also assisted by a number of professional advisors, as detailed below:

Bankers:
Barclays Business Banking
3 St James Court
Whitefriars
Norwich
NR3 1RJ

Investment Managers:
Barratt & Cooke Ltd
5-6 Opie Street
Norwich
Norfolk
NR1 3DW

Independent examiners:
Larking Gowen LLP
1st Floor Prospect House
Rouen Road
Norwich
NR1 1RE

Legal advisors:
Mills & Reeve
1 St. James Court
Whitefriars
Norwich
NR3 1RU

KEY MANAGEMENT PERSONNEL REMUNERATION

The board of the corporate trustee and the Director of Finance comprise the key management personnel of the charity as they are in charge of:

DIRECTING AND CONTROLLING THE CHARITY

RUNNING AND OPERATING THE CHARITY ON A DAY-TO-DAY BASIS

None of the Board members are specifically paid for the work they do for the NCH&C Charitable Fund. The Charitable Fund reimburses the corporate trustee for hours worked by the Director of Finance and Performance on Charitable Fund business.

Members of NCH&C's board are required to disclose all relevant interests and register them with the trust fund director and withdraw from decisions where a conflict of interest arises. All related party transactions are disclosed in note 8 to the accounts.

The finance director of the charity is employed by NCH&C on NHS terms and conditions. His remuneration is reviewed annually and increases reflect those terms and conditions. NCH&C Charitable Fund is fully recharged by the Trust for the employment costs relating to the finance director, along with those of the charity staff.



RISK ANALYSIS

The what if...

As part of the business planning exercise carried out during the year, the charitable funds committee has considered the major risks to which NCH&C is exposed. They have reviewed systems and identified steps to mitigate those risks.

Three major risks have been identified and arrangements have been put in place to mitigate those risks.

FUTURE LEVELS OF INCOME

NCH&C Charitable Fund is reliant on donations to allow it to make grants to NHS bodies. If income falls, then the charity would not be able to make as many grants or enter into longer term commitments with the NHS bodies it supports.

The committee mitigates the risk that income will fall by engaging in fundraising activities. We ensure that any funds are raised in full compliance with fundraising regulation.

NHS waiting times for treatment are getting longer – this is partly due to the impact of the pandemic, but demand also continues to rise. There is a risk that the public's goodwill for the NHS will reduce making fundraising more difficult.

The cost of living remains a significant pressure on many people's lives. This is continuing to have an impact on the amount that people are able to donate to charity and is being closely monitored.

FALL IN INVESTMENT RETURNS

NCH&C Charitable Fund generates additional income from investing its cash balances so the committee considers the loss of investment income to be a major financial risk. The risk is mitigated by retaining expert investment managers, having a diversified investment portfolio and regularly reviewing that portfolio. The committee makes use of benchmarking information when reviewing the portfolio.

UNFORESEEN CHANGES IN THE OPERATION OF NHS

The NHS is, by its very nature, subject to national changes in government policy as well as local politically driven decisions. The charitable funds committee has identified this as a risk as it may mean initiatives or healthcare activities supported by NCH&C Charitable Fund are no longer delivered in the Norfolk area. The committee regularly liaises with NHS partners to understand the changes that they are facing at an early stage.

WIDER NETWORKS

NCH&C Charitable Fund is one of over 400 NHS linked charities in England and Wales who are eligible to join NHS Charities Together. As a member charity, we can 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 members of the charitable funds committee.



OUR RELATIONSHIP WITH THE WIDER COMMUNITY

The ability of NCH&C Charitable Fund to continue its important support for the NHS in Norfolk is dependent on its ability to raise funds from the general public. NCH&C Charitable Fund continues to forge strong relationships with members of NHS staff without whose co-operation, the ability to make an effective contribution would be much diminished.

VOLUNTEERS

On behalf of the trustee body, the charitable funds committee would like to pay tribute to:

- the members of staff who give of their time out of hours in support of the work of NCH&C Charitable Fund, in developing ideas for expenditure and working with us to identify how we can improve patient care
- Lindsey Roffe (pictured right), who joined the team in September 2024 on a voluntary basis providing invaluable resource and support for fundraising and donor stewardship activities.
- our fundraisers who do so much to encourage others to enrich lives through donations and fundraising activities.



STATEMENT OF TRUSTEE RESPONSIBILITIES

The law applicable to charities in England and Wales requires the Trustee to prepare financial statements for each financial year which give a true and fair view of the charity's financial activities during the year and of its financial position at the end of the year. In preparing financial statements giving a true and fair view, the Trustee should follow best practice and:

- Select suitable accounting policies and then apply them consistently;
- Make judgements and estimates that are reasonable and prudent;
- State whether applicable accounting standards and statements of recommended practice have been followed, subject to any departures disclosed and explained in the financial statements; and
- Prepare the financial statements on the going concern basis unless it is inappropriate to presume that charity will continue in operation.

The Trustee is also responsible for keeping accounting records which disclose with reasonable accuracy the financial position of the charity, and which enable them to ascertain the financial position of the charity, and which enable them to ensure that the financial statements comply with the Charities Act 2011, the Charity (Accounts and Reports) Regulations and the provisions of the Trust Deed. The Trustee is also responsible for safeguarding the assets of the charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

The Trustee confirms it has met the responsibilities set out above and complied with the requirements for preparing the accounts on a going concern basis. The financial statements and notes to the accounts set out on pages 27 to 39 attached have been compiled from and are in accordance with the financial records maintained by the Trustee.
By Order of the Trustee



Angela Moodie **Date: 23/12/2025**
Group Chief Finance and Resources Officer on behalf of the Corporate Trustee.



John Kennedy **Date: 23/12/2025**
Chair of the Charitable Funds Committee on behalf of the Corporate Trustee.

INDEPENDENT EXAMINER'S REPORT

Independent Examiner's Report to the Trustee of Norfolk Community Health and Care NHS Trust Charitable Fund

I report to the charity trustees on mv examination of the accounts of the charity for the year ended 31 March 2025 which are set out on pages 27 - 39.

This report is made solely to the Trustee, as a body, in accordance with section 149 of the Charities Act 2011 and regulations made under section 149 of that Act. My work has been undertaken so that I might state to the Trustee those matters that are required to be stated in an Independent examiner's report and for no other purpose. To the fullest extent permitted by law, I do not accept or assume responsibility to anyone other than the charity and the Trustee as a body, for this examination, for this report, or for the statements made.

Responsibilities and basis of report

As the charity's trustees you are responsible for the preparation of the accounts in accordance with the requirements of the Charities Act 2011 ('the 2011 Act').

I report in respect of my examination of the charity's accounts carried out under section 145 of the Act and in carrying out my examination I have followed all the applicable Directions given by the Charity Commission under section 145(5)(b) of the 2011 Act.

Independent examiner's statement

I have completed my examination. I confirm that no material matters have come to my attention in connection with the examination giving me cause to believe that in any material respect:

1. accounting records were not kept in respect of the charity as required by section 130 of the 2011 Act; or
2. the accounts do not accord with those records; or
3. the accounts do not comply with the applicable requirements concerning the form and content of accounts set out in the Charities (Accounts and Reports) Regulations 2008 other than any requirement that the accounts give a 'true and fair view' which is not a matter considered as part of an independent examination.

I have no concerns and have come across no other matters in connection with the examination to which attention should be drawn in this report in order to enable a proper understanding of the accounts to be reached.

Signed: 

Giles Kerkham, FCA DChA

Larking Gowen LLP

Chartered Accountants

1st Floor Prospect House
Rouen Road
Norwich
NR1 1RE

Date: 12 January 2025

FINANCIAL STATEMENTS

Statement of Financial Activities for the year ending 31 March 2025

	Note	Unrestricted Funds £'000	Restricted Funds £'000	Endowment Funds £'000	2024/25 Total Funds £'000	2023/24 Total Funds £'000
Income and Endowments from						
Donations, legacies and Gifts in Kind	2.1	142	5	0	147	96
Charitable activities	2.2	1	32	0	33	43
Income from investments		10	0	5	15	15
Transfer between funds	9	36	(31)	(5)	0	0
Total income		189	6	0	195	154
Expenditure on						
Charitable Activities	4.2	(176)	(52)	0	(228)	(366)
Fundraising costs	4.1	(35)	0	0	(35)	(19)
Marketing Resource	4.2	(7)	0	0	(7)	(2)
Governance costs	4.2	(3)	0	0	(3)	(2)
Amortisation	5.2	(1)	0	0	(1)	(2)
Total expenditure		(222)	(52)	0	(274)	(391)
Net incoming/(outgoing) resources before other recognised gains/(losses)		(33)	(46)	0	(79)	(236)
Net gains/(losses) on investments	5	(21)	(1)	(1)	(23)	18
Net movement in funds		(54)	(47)	(1)	(102)	(218)
Reconciliation of funds						
Total funds brought forward		489	71	36	596	814
Total funds carried forward at 31 March 2025	10	435	24	35	494	596

The notes on pages 29 to 39 form part of these accounts

Balance Sheet at 31 March 2025

	Note	Unrestricted funds £'000	Restricted funds £'000	Endowment funds £'000	Total at 31 March 2025 Total funds £'000	Total at 31 March 2025 Total funds £'000
Fixed assets:						
Intangible Assets - Harlequin	5.2	0	0	0	**0**	1
Investments	5.1	477	(16)	35	**496**	518
Total fixed assets		**477**	**(16)**	**35**	**496**	519
Current assets:						
Debtors	6	3	40	0	**43**	50
Cash at bank and in hand		24	43	0	**67**	190
Gifts in Kind Stock		3	0	0	**3**	0
Total current assets		**30**	**83**	**0**	**113**	240
Liabilities:						
Creditors falling due within one year	7	(72)	(43)	0	**(115)**	(163)
Net current assets / (liabilities)		**(42)**	**40**	**0**	(2)	77
Total net assets / (liabilities)		**435**	**24**	**35**	**494**	596
The funds of the charity:						
Unrestricted funds		435	0	0	**435**	489
Restricted funds		0	24	0	**24**	71
Endowment funds		0	0	35	35	36
Total charity funds	10	**435**	**24**	**35**	**494**	**596**

These financial statements of Norfolk Community Health & Care NHS Trust Charitable Fund registered number 1051173 were approved by the Charity Committee and authorised for issue on 111/12/2025. They were signed on its behalf by



John Kennedy
Chair of the Charitable Funds Committee on behalf of the Corporate Trustee

DATE 23/12/2025

Notes to the financial statements

1. Accounting Policies

The policies adopted by the charity in preparing these financial statements are described below. They have been applied consistently in dealing with items considered material in relation to the financial statements.

(a) Basis of preparation
The financial statements have been prepared under the historic cost convention, with the exception of investments which are measured at fair value. The financial statements have been prepared in accordance with the Statement of Recommended Practice (SORP): Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standard applicable to the UK and Republic of Ireland (FRS 102) effective 1 October 2019 and the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102) and the Charities Act 2011 and UK Generally Accepted Practice as it applies from 1 January 2019.

Additional information is provided where it is believed to be useful to the reader.

The Trustee considers there are no material uncertainties about the charity's ability to continue as a going concern. Fundraising income continues to be affected by the cost-of-living crisis, it is not such a significant impact as to affect the charity's ability to continue as a going concern. As a grant making charity with few on-going commitments, reduced income will impact on the level of new grants that can be made in the short term rather than affecting the charity's ability to continue as a going concern. There are no material uncertainties affecting the current year's accounts. These financial statements have therefore been prepared on a going concern basis.

(b) Funds structure
Where there is a legal restriction on the purpose to which a fund may be put, the fund is classified either as a restricted income fund, where the donor has provided for the donation to be spent in furtherance of a specified charitable purpose or as an endowment fund, where the charity restrictions only permit the income of the fund being expended as per the donors wishes.

Unrestricted income funds comprise those funds which the Trustee is free to use for any purpose in furtherance of the charitable objectives. Unrestricted funds include designated funds, where the donor has made known their non-binding wishes or where the Trustee has, at its discretion, created a fund for a specific purpose.

(c) Incoming resources
All incoming resources are recognised once the charity has entitlement to the resources, it is probable (more likely than not) the resources will be received, and the monetary value of incoming resources can be measured with sufficient reliability.

Where there are terms or conditions attached to incoming resources, these terms or conditions must be met before the income is recognised. Where terms or conditions have not been met or uncertainty exists as to whether they can be met then the relevant income is not recognised in the year. If received, incoming resources with unmet terms or conditions are deferred and shown on the balance sheet as deferred income.

(d) Incoming resources from legacies
Legacies are accounted for as incoming resources either upon receipt or where the receipt of the legacy is probable.
Receipt is probable when:
- confirmation has been received from the representatives of the estate that probate has been granted;
- the executors have established there are sufficient assets in the estate to pay the legacy; and
- all conditions attached to the legacy have been fulfilled or are within the charity's control.

If there is uncertainty as to the amount of the legacy and it cannot be reliably estimated then the legacy is shown as a contingent asset until all the conditions for income recognition are met.

(e) Incoming resources from endowment funds

The incoming resources receivable from the investment of endowment funds are restricted for NCHC charity and have been earmarked in accordance with the donor's stated wishes.

(f) Incoming resources from donations in kind

Gifts in kind, such as food and care packages are not accounted for when they are accepted and immediately distributed unless a single donation is material.

Gifts of tangible assets such as microwaves and fridges are recognised as a donation at fair value (market price) on receipt and charitable expenditure when they are distributed.

Where gifts in kind are held before being distributed to beneficiaries, they are recognised at fair value as stock until they are distributed.

(g) Resources expended and irrecoverable VAT

All expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all costs related to each category of expense shown in the Statement of Financial Activities. Expenditure is recognised when the following criteria are met:

- there is a present legal or constructive obligation resulting from a past event;
- it is more likely than not that a transfer of benefits (usually a cash payment) will be required in settlement; and
- the amount of the obligation can be measured or estimated reliably.

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

(h) Recognition of expenditure and associated liabilities as a result of a grant

Grants payable are payments made in furtherance of the charitable objectives of the funds held on trust, primarily being relief of those who are sick.

Grant payments are recognised as expenditure when the conditions for their payment have been met or where there is a constructive obligation to make a payment.

A constructive obligation arises when:

- the charity has communicated its intention to award a grant to a recipient who then has a reasonable expectation that they will receive a grant or
- the charity has made a public announcement about a commitment which is specific enough for the recipient to have a reasonable expectation that they will receive a grant or
- there is an established pattern of practice which indicates to the recipient the charity will honour its commitment.

The Trustee has control over the amount and timing of grant payments and consequently where approval has been given by the Trustee and any of the above criteria have been met the a liability is recognised. Grants are not usually awarded with conditions attached. However, when they are, then those conditions must be met before the liability is recognised.

(i) Allocation of support and governance costs

Support costs are those costs which do not relate directly to a single charitable activity. These include some staff costs, costs of administration and some of the overhead costs of the Corporate Trustee's. Governance costs include external examination, and any other regulatory fees. The analysis of support and governance costs are shown in note 4.

(j) Fundraising costs

The costs of generating funds are those costs attributable to generating income for the charity, other than those costs incurred in undertaking charitable activities. Fundraising costs include some of the salaries as well as expeniture for fundraising activites.

(k) Charitable activities

Costs of charitable activities comprise all costs incurred in the pursuit of the charitable objects of the charity. These costs, where not wholly attributable, are apportioned between the categories of charitable expenditure in addition to the direct costs. The total costs of each category of charitable expenditure therefore include support costs and an apportionment of overheads.

Note 2.1 Income from donations, legacies and Gifts in Kind

	Unrestricted Funds £'000	Restricted Funds £'000	**2024/25 Funds £'000**	Unrestricted Funds £'000	Restricted Funds £'000	**2023/24 Funds £'000**
Donations	122	5	**127**	91	(8)	**83**
Legacies	0	0	**0**	6	0	**6**
Gift Aid	4	0	**4**	3	0	**3**
Gifts in Kind	14	0	**14**	1	0	**1**
Other income	2	0	**2**	3	0	**3**
Total	142	5	**147**	104	(8)	**96**

Donations includes gifts from members of the public, relatives of patients and staff, as well as funding from organisations such as leagues of friends and similar support groups.

Note 2.2 Analysis of income from charitable activities

	Unrestricted Funds £'000	Restricted Funds £'000	**2024/25 Funds £'000**	Unrestricted Funds £'000	Restricted Funds £'000	**2023/24 Funds £'000**
Grants	1	32	**33**	0	43	**43**
Total	1	32	**33**	0	43	**43**

Grants have come from other charities, Trusts and Foundations

Note 3. Role of volunteers

The charity benefits from volunteers to assist with its functioning. They perform three main roles:

• Fund Holders advise and approve the strategic spend of designated funds for their directorate. Fund Holders report on the positive impact large expenditure has on the beneficiaries of the request.

• The Charitable Funds Committee provide an assurance role in enabling the charity to manage how its designated funds are spent. Their role is to assist the Trustee in ensuring that funds are spent appropriately, ensuring that funds are spent in accordance with the Objects of the charity and on activities over and above those normally expected to be provided through NHS funds.

• Garden volunteers assist throughout the year at various sites to maintain the outside spaces for patients and visitors and administration vounteers assist with the day to day running of the charity.

In accordance with the SORP, due to the absence of any reliable measurement basis, the financial contribution of these volunteers is not recognised in the accounts.

Note 4. Expenditure

The charity incurs three broad types of expenditure:

- grant funded activity. The charity mainly pursues its charitable activities by making grants rather than directly undertaking charitable activities;
- fundraising costs; and
- support costs.

Grant funded activity is allocated directly to the fund or funds the grant is made from.

Fundraising costs are allocated fully to a sub fund of the Norfolk General Fund, an unrestricted fund.

Support costs are made up of:
1. Governance costs. These are the costs associated with the governance arrangements of the charity and include the preparation and independent review of the annual financial statements and costs to provide financial information throughout the year to the Charitable Funds

2. Other support costs, primarily recharges of the Charity Development and Project Manager, Charity Administrator and Finance Officer and related charges by the Corporate Trustee when performing work for the charity.

Support costs which are not attributable to a single activity must also be apportioned between the activities being supported.

Note 4.1 shows the allocation of fundraising costs to the different fund types.

Note 4.2 shows the allocation of support costs to the categories of charitable

Note 4.1 Analysis of fundraising expenditure

	2024/25			2023/24		
	Unrestricted £'000	Restricted £'000	**Total £'000**	Unrestricted £'000	Restricted £'000	**Total £'000**
Fundraising office	11	0	**11**	14	0	**14**
Marketing & Comms	10	0	**10**	2	0	**2**
Other fundraising costs	14	0	**14**	3	0	**3**
Total	35	0	**35**	19	0	**19**

Note 4.2. Analysis of charitable expenditure

All of the charitable expenditure was in the form of grant funding.

	Grant Funded Activity £'000	Support costs £'000	2024/25 Total £'000	Grant Funded Activity £'000	Support costs £'000	2023/24 Total £'000
Patient care - general	82	109	**191**	264	98	**362**
Patient Gifts in Kind	4	0	**4**	1	0	**1**
Patient care - staff training	7	(0)	**7**	(5)	(2)	**(7)**
Staff Welfare	8	15	**23**	4	(0)	**4**
Patient Care - Research	3	1	**4**	0	0	**0**
Staff Gifts in Kind	6	0	**6**	0	0	**0**
COVID19 - Patient Care	(4)	(3)	**(7)**	1	4	**5**
Total	106	122	**228**	265	100	**365**

Support costs	**2024/25 £'000**	**2023/24** £'000
Fundraising office #	102	98
Administrative support costs	20	2
Total	**122**	**100**

#Fundraising office costs relate to staff time on project management, dealing with grant activity, with both internal stakeholders and external bodies such as Friends groups and grant makers.
Staff time is split between

- applying for grants from external bodies,
- liasing with Friends groups regarding plans for currrent and future spend,
- co-ordinating with internal Estates and Facilities teams to oversee ongoing projects
- raising the profile of the charity internally and externally

Marketing Resource	**2024/25 £'000**	**2023/24** £'000
Marketing support costs	7	0
Total	**7**	**0**

Marketing support costs relate to admin time of role to support set up of website

Governance costs	**2024/25 £'000**	**2023/24** £'000
Independent examination	3	2
Other governance costs	0	0
Total	**3**	**2**

The charity does not make grants to individuals. All grants are made to NCHC to provide for the care of NHS patients in furtherance of our charitable aims. The total cost of making grants, including support costs, is disclosed on the face of the statement of financial activities and the actual funds spent on each category of charitable activity.

Note 4.3. Analysis of staff costs and renumeration of key management personnel

Staff costs

	2024/25	2023/24
	£'000	£'000
Salaries and Wages	103	91
Social Security Costs	15	13
Other Pension Costs	11	10
Total	**129**	**114**

NCH&C Charitable Fund does not directly employ any members of staff. The members of staff are contracted with the Trust and then the costs are fuly recharged to the Charity.

The Charity receives corporate support from Norfolk Community Health and Care NHS Trust. An annual charge to cover the cost of these is authorised by the Charitable Funds Committee, which for 2024/25 totalled £15,407 (2023/24: £14,040). This cost is not included in the above table, see Note 8 Related costs.

The Charity considers its key management personnel to be the members of the Norfolk Community Health and Care NHS Trust management board acting on behalf of the corporate trustee. For 2024/25 this was the Director of Finance and Performance and the Director of Nursing & Quality. There was no recharge of employment benefits for key management personnel during 2024/25 or 2023/24.

No employees had emoluments in excess of £60,000 (2023/24: none).

Note 4.4. Trustee remuneration, benefits and expenses

Members of the Trust board give their time freely and receive no remuneration for the work that they undertake in relation to the Charity. However, they can claim expenses to reimburse them for the costs that they incur in fulfiling their duties relating to the Charity - these include travelling specifically for charitable funds committee meetings and charity specific training events.

No expenses were claimed from the Charity by committee members in 2024/25 or 2023/24.

Note 4.5. Independent examination fees

The independent examiner's remuneration of £2,790 (2023/24: £2,640) related solely to the examination and other fees incurred £nil (2023/24: nil).

Note 5. Assets

Movement in fixed asset investments

	2024/25 £'000	2023/24 £'000
Market value bought forward at 1 April	518	700
Add additions to investments at cost	59	79
Less disposals proceeds	(64)	(271)
Increase/(decrease) in cash held within the portfolio*	4	(8)
Add net (loss)/gain on revaluation	(23)	18
Market value as at 31 March	**494**	518

* A small proportion of the investment portfolio is held as cash. This is primarily due to timing differences between the sale of investments and the purchase of new investments. The cash amount is included within the investments balance in the balance sheet, rather than as 'cash at bank and in hand', given it is a part of the overall investment managed

All investments are financial assets carried at fair value through net income and are managed by expert advisors.

Fixed asset by type

	2024/25 £'000	2023/24 £'000
Listed equity	489	517
Cash*	5	1
Total	**494**	**518**

All investments are held at their fair value and are managed by expert advisors.

Realised and unrealised gains and losses are apportioned to individual restricted, endowment funds, designated funds and the Norfolk General Fund (an unrestricted fund) on the basis of the average balances held on unrestricted, restricted and endowment

Note 5.2 Intangible Fixed Assets

This relates to the accounting software which will be amortised over five years

	2024/25 £'000	2023/24 £'000
Opening Balance	1	3
Additions	0	0
Amortisation	(1)	(2)
Total	**0**	**1**

Note 6. Analysis of Current Debtors

	2024/25 £'000	2023/24 £'000
Other Debtors	43	50
Total	43	50

The debtor balance is made up of three debtors; Kelling Friends £39k, Leigh Day Solicitors £2.5k and Swaffham Friends £1k. (2023/24: Debtors - Kelling Friends £32k and North Walsham Friends £13k).

Note 7. Analysis of Current Liabilities

Creditors due in less than one year	2024/25 £'000	2023/24 £'000
Trade Creditors	0	0
Accruals	115	163
Total	115	163

The accruals relate to expenditure requests which have been approved and are outstanding at balance date.

Note 8. Related Party Transactions

Norfolk Community Health and Care NHS Trust is the corporate trustee of the charity and is its main grant beneficiary along with other organisations working in partnership with it - they are therefore related parties. The Trustee appoints Members of the Charitable Funds Committee, a sub-committee of the Norfolk Community Health and Care NHS Trust Board.

Transactions between the Charity and the Trust during the year were in relation to salary payments for its staff, payment of some Charity supplier invoices that were initally paid by the Trust and refunded by the Charity and for administrative and management costs.

The Charity did not pay any expenses or honoraria to any member of the Norfolk Community Health and Care NHS Trust Board (the Trustee) or the Charitable Funds Committee in the year 2024/25. (2023/24: £0)

The Charity receives corporate support from Norfolk Community Health and Care NHS Trust. An annual charge to cover the cost of these is authorised by the Charitable Funds Committee, which for 2024/25 totalled £15,407 (2023/24: £14,040).

At the end of the financial year £18,603.90 was owed by the Charity to the Trust. (2023/24: £34,900)

Note 9. Transfers between funds

During the year £30,899.26 was transferred from restricted funds to designated funds of this £25,432 was transferred from the restricted development grant fund to offset related costs in a designated fund. £4,672.76 in income dividends was transferred from the Swaffham endowment fund to a related designated fund.

Note 10. Movement of major funds

The analysis below shows the opening and closing value including the income and expenditure movement of funds, with an opening or closing balance over £10,000.

	1 April 2024 £'000	Income £'000	Expenditure £'000	Gains & Losses £'000	Transfers £'000	31 March 2025 £'000
Unrestricted funds						
General Fund **#1**	40	20	(16)	(3)	5	46
North Walsham Hospital	11	83	(23)	(4)		67
West Community Services Fund	16	2	(8)	(1)		9
Swaffham Hospital	56	2	(19)	(3)	5	41
Palliative Community Care	61	6	(21)	(3)		43
PBL	188	4	(79)	(7)		106
LEGACY Pauline Rosetta Basted (Kelling Hospital)	11	0	(2)	(1)	(2)	6
LEGACY Patricia Ramm (Swaffham Hospital)	10	1	0	(1)		10
LEGACY Dorothea Burton (Swaffham)	15	1	0	(1)		15
LEGACY Vera May Ive (PBL)	12	1	14	(1)		26
Designated Funds (21 funds)	69	32	(68)	4	28	65
Total unrestricted funds	**489**	**152**	**(222)**	**(21)**	**36**	**435**
Restricted funds						
Kelling Training Fund	15	0	(4)	(1)		10
Development Grant	25	0	0	0	(25)	0
Other Restricted Funds (14 funds)	31	37	(48)	0	(5)	14
Total restricted funds	**71**	**37**	**(52)**	**(1)**	**(31)**	**24**
Endowment funds	behalf by					
Swaffham Shephard CIP	36	5	0	(1)	(5)	35
Total endowment funds	**36**	**5**	**0**	**(1)**	**(5)**	**35**
Total funds	**596**	**194**	**(274)**	**(23)**	**(0)**	**494**

Note 10 ii. Movement of major funds

The analysis below shows the opening and closing value including the income and expenditure movement of funds, with an opening or closing balance over £10,000.

	1 April 2023 £'000	Income £'000	Expenditure £'000	Gains & Losses £'000	Transfers £'000	31 March 2024 £'000
Unrestricted funds						
General Fund	47	23	(26)	1	(5)	40
Swaffham Hospital	61	2	(14)	1	6	56
Palliative Community Care	63	11	(14)	1		61
PBL	182	60	(60)	6		188
Caroline House	16	1	(9)	0		8
LEGACY Zienia Merton	127	0	(127)			0
LEGACY Pauline Rosetta Basted (Kelling Hospital)	40	1	(29)	(1)		11
LEGACY Patricia Ramm (Swaffh	10	0	0	0		10
LEGACY Audrey Edwards (PBL)	24	0	(24)			0
LEGACY Dorothea Burton (Swaffham)	15	0	0	0		15
LEGACY Vera May Ive (PBL)	33	1	(22)	0		12
Designated Funds (22 funds)	106	15	(48)	8	9	90
Total unrestricted funds	**722**	**114**	**(373)**	**16**	**10**	**489**
Restricted funds						
Kelling Training Fund	9	1	5	(0)		15
Development Grant	29	0	0	0	(4)	25
Other Restricted Funds (9 funds)	20	36	(25)	0		31
Total restricted funds	**58**	**37**	**(20)**	**0**	**(4)**	**71**
Endowment funds						
Swaffham Shephard CIP	35	7	0	0	(6)	36
Total endowment funds	**35**	**7**	**0**	**0**	**(6)**	**36**
Total funds	**815**	**159**	**(393)**	**16**	**0**	**596**

Note 11. Balance Sheet at 31 March 2024

	Unrestricted funds £'000	Restricted funds £'000	Endowment funds £'000	Total funds £'000
Fixed assets:				
Intangible Assets - Harlequin	1	0	0	**1**
Investments	467	15	36	**518**
Total fixed assets	**468**	**15**	**36**	**519**
Current assets:				
Debtors	6	44	0	**50**
Cash at bank and in hand	137	53	0	**190**
Gifts in Kind Stock	0	0	0	**0**
Total current assets	**143**	**97**	**0**	**240**
Liabilities:				
Creditors falling due within one year	(122)	(41)	0	**(163)**
Net current assets / (liabilities)	**21**	**56**	**0**	77
Total net assets / (liabilities)	**489**	**71**	36	596
The funds of the charity:				
Endowment funds	489	0	0	**489**
Restricted funds	0	71	0	**71**
Unrestricted funds	0	0	36	36
Total charity funds	**489**	**71**	**36**	596

CONTACT US



The charity office and principal address of Norfolk Community Health and Care NHS Trust Charitable Fund is:

Norfolk Community Health and Care NHS Trust Charitable Fund
Woodlands House, Norwich Community Hospital, Bowthorpe Road, Norwich, Norfolk, NR2 3TU
Email: charitablefund@nchc.nhs.uk

The corporate trustee, Norfolk Community Health and Care NHS Trust's principal address is:
The Chief Executive
Norwich Community Hospital, Woodlands House, Bowthorpe Road, Norwich, Norfolk, NR2 3TU
Email: chief.exec@nchc.nhs.uk

https://www.norfolkcommunityhealthandcare.nhs.uk/charity-home/

@NCHC_CF
@NCHCCharitableFund
@norfolk-community-health-care-charitable-fund
charitablefund@nchc.nhs.uk

NORFOLK COMMUNITY HEALTH AND CARE NHS TRUST CHARITABLE FUND

England & Wales - Charity number 1051173

Accounts

TRUSTEE ANNUAL REPORT **AND** FINANCIAL STATEMENTS

2023/24



NCH&C Charitable Fund

NHS
Norfolk Community Health and Care
NHS Trust

FUNDRAISING REGULATOR

CHARITY COMMISSION FOR ENGLAND AND WALES



Staff Nurse, Kerry Hemming, meets Bo-peep during a visit by Miniature Donkey's for Wellbeing to the Priscilla Bacon Hospice.

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MESSAGE FROM OUR CHAIR

We are a charity that works for the benefit of NHS patients and their families from Norfolk and Waveney. We work closely with all the NHS bodies in the area, not just our corporate trustee – NCH&C NHS Trust.

This is my first report as Chair of the NCH&C Charitable Funds committee, and I would like to thank everyone who has spent time volunteering, or donated gifts or money, as well as our staff who have worked so hard over the last year.

We will continue to focus on helping the population of Norfolk and Waveney to live fulfilling and healthy lives. Please continue to support us, every penny and pound counts.

John Kennedy
Charitable Funds Committee Chair







"WE EXIST TO PROVIDE RESOURCES AND FACILITIES TO MEET THE NEEDS OF OUR NHS PARTNERS PATIENTS AND THEIR FAMILIES. YOUR DONATIONS MAKE THIS WORK POSSIBLE, AND YOUR FUTURE DONATIONS ARE THE KEY TO OUR CONTINUED SUCCESS."

KEY HIGHLIGHTS OF THE YEAR

This year the Charitable Fund worked on 81 different funding grants.

01.

Significant funding of £186,000 for enhanced patient equipment at the newly opened Priscilla Bacon Hospice (PBH) for NHS palliative patients. These items will support the comfort, dignity and wellbeing of those receiving care and treatment.

02.

Reducing our overall fund balance from £814,000 to £596,000 to demonstrate spending donations in a timely manner according to donor wishes.

03.

Increase in the delivery of support for community patients in their own homes from 2022/23. By working with clinicians, we have been able to understand more of the challenges that patients have at home and provide items to support their independence, engagement in treatment and boost wellbeing and recovery.

04.

Utilising a £29,000 grant from NHS Charities Together (NHSCT) to deliver a customer relationship management database. We also appointed a Charity Marketing and Fundraising Officer to generate more awareness and increase donations to the charity.

05.

Increase in local business support by facilitating corporate volunteering activities that lead to both financial and 'gifts in kind' support.

06.

Delivery of £1,668 in staff training opportunities, providing non mandatory provisions to enhance skills and knowledge for patient care.

WHO WE ARE

Norfolk Community Health & Care NHS Trust Charitable Fund (NCH&C CF) is a registered charity (Reg No. 1051173). We exist to raise funds and receive donations for the benefit of the NHS. By securing donations and legacies, NCH&C CF can provide those little extras that make a real difference for patients, their families and the staff who care for them.

Norfolk Community Health & Care (NCH&C) NHS Trust is an outstanding Trust that provides community-based NHS health and care across Norfolk and Waveney, and is our key partner in fulfilling our charitable aims.

NCH&C NHS Trust operates more than 70 different service locations across Norfolk, serving a population of nearly 900,000 people and employs over 2,300 members of staff.

OUR MISSION

By raising new money and through careful management of our existing funds, NCH&C CF provides a public benefit by making grants to Norfolk Community Health & Care NHS Trust in order to:

Serve the population of Norfolk and Waveney by funding facilities, equipment and research and to support associated healthcare and complementary services for patients of the NHS in Norfolk.

Grants are made in accordance with charity law, our constitution and the wishes and directions of donors. We endeavour to direct funds towards areas that patients and staff tell us are most in need. In 2023/24, grants totalling £265,000 were made.

When considering where to focus our attention, our corporate trustee's board and, members of the charitable funds committee have regard to the Charity Commission for England and Wales's guidance on public benefit and what this means for NCH&C CF.

Our goal is to increase our level of fundraising to achieve a sustainable target of £250k+ a year which will help us work with our NHS partners to support improvement of the health prospects for patients in our community.

WHAT WE'VE ACHIEVED

Our key aim is to serve the NHS patients of Norfolk Community Health & Care NHS Trust for the public benefit.

By funding additional and enhanced equipment, services and activities, we help NCH&C NHS Trust to acquire technologically advanced equipment, provide enhanced patient care and provide additional training opportunities. Our role is not to replace or subsidise NHS healthcare, but to complement it.

By working with the NHS, we aim to enhance the patient experience for people, irrespective of their ethnicity, beliefs, personal or family circumstances. We put this aim into practice by helping the patients, their families and carers, and visitors who are involved in the service by:

01.

Funding medical equipment to support rehabilitation and recovery of medical conditions affecting our patients and delivering enhanced treatments and therapies.

02.

Enhancing the care our hospitals, clinics and community settings can offer through new equipment and building improvements to deliver better facilities and environments.

03.

Investment in the people who work in the NHS in Norfolk to create a caring environment for the patients receiving care, their families and visitors.

04.

Providing direct support to patients by way of information, networking support and better facilities.

We do this through a range of projects funded by your donations, legacies and grants. Highlights from the main programmes undertaken in the year are detailed in this report to give you a wider understanding of the difference we can make together to lives today and in the future.

We couldn't do it without you!



Physiotherapist, Sue Flute, with traffic cones funded by the NCH&C Charitable Fund.

These cones are used to create a 'driving' course' for patients learning how to manoeuvre a wheelchair at at Pine Cottage, our amputee rehabilitation unit at Colman Hospital, Norwich.

INVESTING IN PATIENT ENVIRONMENTS

The charity has delivered £246,545 in improvements to ward spaces, clinical areas and waiting rooms across Norfolk. This includes upgrading waiting room chairs, adding vibrant artwork and enhancing patient riser recliners, to installing televisions and purchasing smaller items to improve patient dignity and comfort.

We work with colleagues to understand what makes a difference to patients. Our goal is to support their physical and mental health, increase independence and encourage their engagement with rehabilitation. This helps patients to recover quickly and return to their own homes.

Where possible, the charity invests in items that have particular benefits patients. For example, investing in elements such as way marking art, dementia clocks, reminiscence therapy resources and quietly folding screens can help to create a calming and less confusing environment for patients living with Dementia.

The charity continues to invest in outside spaces to provide respite from busy ward areas for patients to meet with family and visitors and to enjoy fresh air and sunshine. The seating and planting provide a peaceful therapeutic space and encourage physical activity which is so important for recovery.

Shiny, new and super lovely!



In September 2023, the NCH&C Priscilla Bacon Lodge team moved from Colman Hospital to the newly built Priscilla Bacon Hospice, funded by a capital appeal run by Priscilla Bacon Hospice Charity. NCH&C Charitable Fund provided £186,000 to fund enhanced equipment, furniture and resources that would improve the comfort and quality of the environment.

Using historical legacies that were generously bequeathed to the original Priscilla Bacon Lodge fund, enhanced items were purchased to create a less clinical feeling space for palliative patients, their families and visitors.

This investment included 65 day chairs, 19 televisions, kitchen appliances, lounge furniture and physio, art, play and music therapy resources. These provide a higher level of comfort, additional therapy and dignity to comfort patients, visitors and families at such a difficult time.

CASE STUDY:
COMMUNITY PATIENT SUPPORT

Much of the care delivered by NCH&C NHS Trust takes place within patient homes across Norfolk. Our community teams help to manage patient health and medical conditions to minimise the need for them to be in hospital.

The charity has worked closely with community teams who deliver care. We have funded dignity packages for patients who have little support or are not able to obtain supplies. These packages contain simple toiletries like soap and a clean towel that can make patients more comfortable and relieve symptoms, particularly during palliative treatment. In addition, we have supported Looked After Children by funding stress balls to help minimise the anxiety children might feel while waiting for and during medical assessments and appointments.





We help patients manage their long term medical conditions by funding items such as handheld fans for patients with lung conditions and special drinking cups for patients with dysphagia.

To provide practical support, the charity has funded temporary wheelchair ramps for patients who were awaiting more permanent home adjustments to give them independence and enable them to move around and attend appointments easier.

Mobile hoists have been funded to enable community nursing staff to move patients safely in emergency situations. These items give staff the tools to respond agilely and quickly to circumstances and provide quicker comfort and treatment for patients often without the need to call an ambulance.

WORKING WITH CORPORATE PARTNERS

This year, we worked with five local businesses and numerous internal NCH&C teams to deliver over 280 hours of employee volunteering. These activities can help support teambuilding, boost staff morale and support mental health.

During 2023/24, we increased our engagement with local businesses by offering corporate volunteering opportunities to support the development of outside spaces for patients, visitors, and staff.

The statutory NHS budget does not stretch to funding extensive gardening areas. The resource, skills and financial support provided by local business enables the charity to maintain funded spaces and create areas where patients can engage with rehabilitation and horticultural therapies.

These green spaces provide a wonderful respite for patients, visitors and NHS staff from the busy ward environment. They help to support mental wellbeing, recovery and resilience.







Working hard!

"WE HAVE DONE MANY VOLUNTEERING DAYS IN OUR YEARS AT AVIVA BUT THIS ONE WAS BY FAR THE MOST SIGNIFICANT. WE ARE SO PLEASED THAT OUR EFFORTS WILL HELP PEOPLE ADMITTED TO YOUR HOSPITAL, WHO ARE FACING SUCH ADVERSITY IN THEIR LIVES."

SUPPORTING STAFF WELLBEING

Having access to a clean and well equipped space provides staff with the opportunity to rest away from the busy work area, to promote recovery and resilience and enable them to continue the delivery of excellent patient care and treatment. This year the charity worked in partnership with the Estates and Facilities teams to identify staff welfare areas that were in need of refurbishment.

In 2020, we received a £10,628 legacy from a local patient who attended Wymondham Health Centre over a period of time for treatment for a long-term medical condition. The funds were used to upgrade the patient waiting area by replacing the furniture, redecoration and artwork to create a more welcoming area for patients.





The staff room was redecorated in fresh invigorating colours, and the mismatched, furniture replaced with new comfy seating, where staff can hold meetings, take breaks and make food and refreshments.

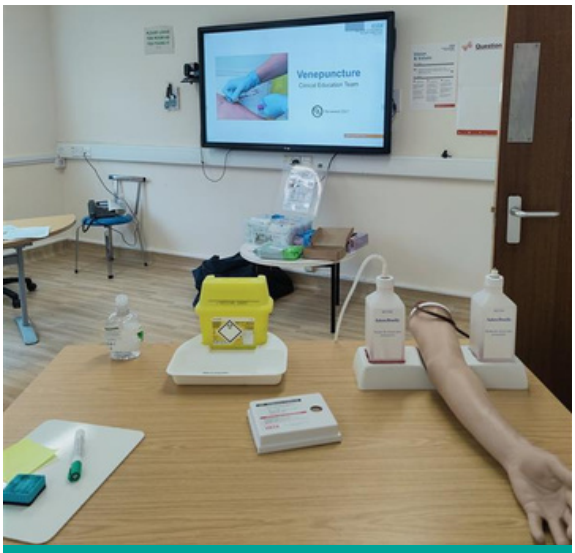
This upgraded space has provided a welcoming area that encourages staff to take breaks away from the clinical or office environment to support their physical and mental wellbeing.



"'WOW, 'I LOVE IT! IT MAKES THE ROOM LOOKS MUCH BIGGER AND THE ARMCHAIRS ARE GREAT. YOU'VE CREATED A VERY CALM, WELCOMING SPACE FOR STAFF AND PATIENTS, THANK YOU."

FUNDING INNOVATIVE TECHNOLOGY

While the NHS budget supports a wide range of essential services, it does not always cover the cost of the latest technological innovations. That's where our charity steps in. Through the generosity of our supporters, we provide grants to purchase cutting-edge equipment that the NHS alone cannot fund.



A personal health monitor wireless mobile ECG for arrhythmia interpretation – enabled The Thetford Community Nursing team to track patients heart rhythm and rate. This non statutory piece of kit provides additional information for identifying risks that otherwise may not be found. This can lead to further in-depth assessment or testing for prompt treatment.

At the heart of our mission is the commitment to enhance the quality of care for our patients. One way we achieve this is by investing in state-of-the-art technology that enables our hospitals to provide the highest standard of medical care.

From vibrant artwork and enhancing patient riser recliners to installing televisions, these smaller items help to improve patient dignity and comfort.

By working with NCH&C clinical teams, we identify equipment that - although not essential - could deliver significant benefits to improve or speed up recovery outcomes for our patients.

This vital support allows us to bring advanced technology to our hospitals, directly benefiting our patients by improving diagnosis, treatment, and overall care.

"OUR PATIENT HAD A PAST HISTORY OF STROKE, AND HAD EXPERIENCED MINOR FALLS OUT OF A RECLINER CHAIR. WE USED THE TILT IN SPACE FUNCTION ON OUR NEWLY FUNDED MULTIADJUST SPECIALIST CHAIR TO PREVENT HIM SLOUCHING TO THE EDGE OF THE CHAIR, AND THERE WERE NO INCIDENTS AFTER THAT. THE PATIENT LOOKED A LOT MORE UPRIGHT, HAD THE ABILITY TO CONTROL HIS POSTURE BUT COULD HAPPILY RELAX WITHOUT SLIPPING. HE SAID IT WAS VERY COMFORTABLE."

CASE STUDY:
MILL LODGE ACHEEVA BED

In 2023, Alan Boswell Charitable Trust kindly provided a grant of £7,000 to fund an acheeva bed for Mill Lodge.



Mill Lodge is a state-of-the-art Adult Learning Disability Respite Unit in Taverham that supports individuals with a learning disability and complex physical and health needs who are living at home with their families. The team identified that for some patients, trying to engage in therapy was proving more difficult as they were limited to either using a wheelchair or in a bed.

This special piece of equipment enables greater participation in activities for patients when positioned in alternative postures to sitting. The versatility of having a height adjustable, manoeuvrable system that enables positioning in prone, supine and side lying is invaluable in caring for a person with disabilities.

The Acheeva bed enables patients to participate in rehabilitation and engagement activities in more comfortable positions other than a wheelchair or a bed for greater inclusivity.

The bed also eliminates the need for a hoist and therefore reduces the time staff spend on preparing patients for activities and provides more time for fun and entertainment.

"MY DAUGHTER STAYS AT MILL LODGE EACH MONTH. THIS BED MEANS SHE CAN TAKE TIME OUT OF HER WHEELCHAIR, WHILST STILL BEING INVOLVED WITH OTHER YOUNG PEOPLE AND STAFF. THANK YOU SO MUCH."

NHS CHARITIES TOGETHER DEVELOPMENT GRANT

NHS Charities Together distributed £29,000 to the charity to increase capacity and support our development and growth.

In November 2023, we implemented a new customer relationship management database to store donor records in line with GDPR guidance, to improve our stewardship. The database will enable us to correctly capture information and communicate better with supporters who have consented to contact to keep them updated about news and developments. This system will enable the team to communicate to donors the difference that their support has made to patients and staff.

The grant also enabled us to recruit Kerry Brind, as a part time Charity Marketing and Fundraising Officer in January 2024 for a one-year contract to support the delivery of a number of key marketing initiatives to raise the profile and income for the charity.

























Charity Development and Project Manager Carol Plunkett, with Director of Nursing and Quality, Carolyn Fowler, at the NCH&C Charitable Fund Spring Fair.

MONEY RECIEVED AND MONEY SPENT

The following figures are taken from the full accounts approved on 30 June 2024; for more details, please refer to the full accounts.

MONEY RECIEVED: £156,469

MONEY SPENT: £392,609

Planned overspend!

This part of the trustee's annual report comments on key features of those accounts. In this section we explain how we raised the money and then how we spent it.

NCH&C CF can only continue to support the work of Norfolk Community Health & Care NHS Trust and our other partners for as long as we receive generous donations. Most of our income comes from the voluntary efforts of the general public. This year we had a planned overspend of £236,140 in order to expend historical legacy funds according to donor wishes.

OUR FUNDRAISING PRACTICES

The Charity team organises fundraising events and co-ordinates the activities of supporters both in inpatient facilities and in the wider community. NCH&C CF does not use professional fundraisers or commercial participators. There have been no complaints about fundraising activity this year.

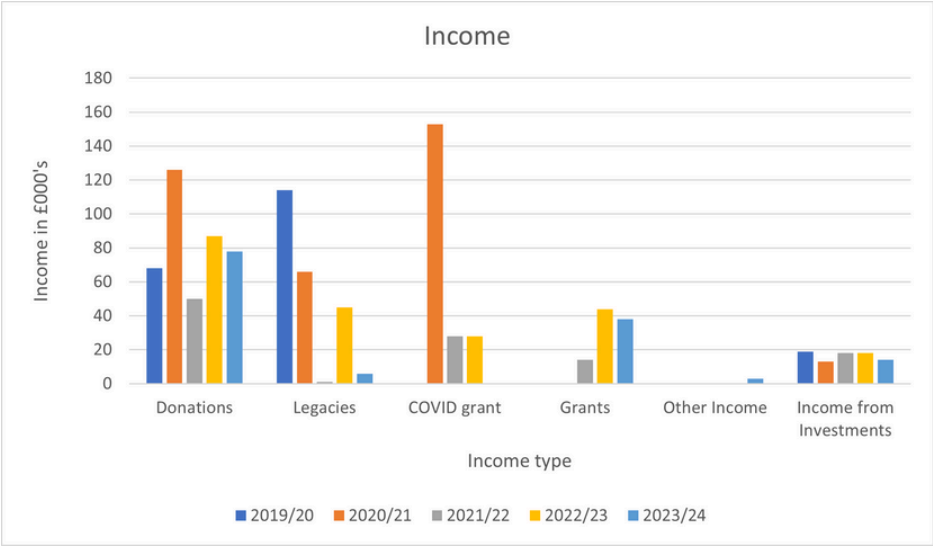
The Fundraising Regulator publishes the Code of Fundraising Practice that sets the standards for fundraising carried out by charities and third-party fundraisers in the UK. The Fundraising Regulator is the independent regulator of charitable fundraising in England, Wales and Northern Ireland. In Scotland, the Scottish Fundraising Standards Panel is the regulator.



MONEY RECIEVED:

SOURCES OF FUNDS

The chart below shows our main sources of income over the past five years. Our largest source of income continues to be gifts and donations from the public.



Our largest source of income is given by our local community and increasingly through grants from external Trusts and Foundations. We are no longer receiving Covid grants, but the learnings from those applications have provided us with a framework to make further applications for other Trust activities and projects.

The public continue to be our main supporters. However, donations in general are declining and this is partly due to the cost-of living crisis and also systematic changes post pandemic. We continue to look at increasing the ways that people can give and in particular provide ways that people can give digitally, volunteer or offer gifts in kind.

We have seen a gradual decline in the number of legacies bequeathed to the charity. There are plans to engage in a legacy campaign, to inform potential legators of the difference their gift can make in the future.

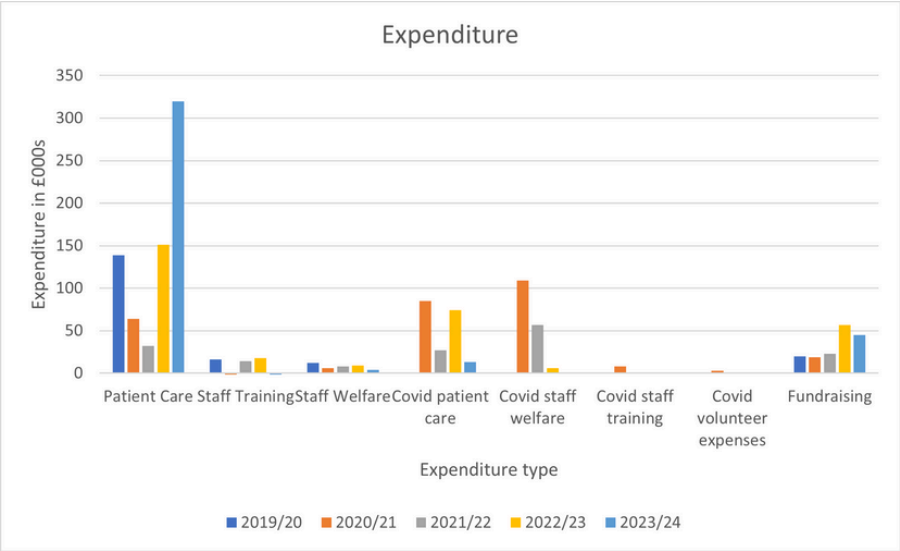
The Committee are reviewing how to obtain the best returns for funding that is not required in the short term.

We continue to cultivate our ongoing relationships with the Hospital League of Friends groups; they provide grants that support the Trust above and beyond the NHS standard funding.

MONEY SPENT:

WHAT WE SPENT THE MONEY ON

We are a grant making charity and work closely with clinicians across the Trust who identify opportunities to benefit patients and submit those applications for funding from designated funds.



We have spent the Covid-19 recovery grant of £55,000 received from NHS Charities Together. This was spent mainly on staff and patient well-being activities.

We have received several requests from teams to support patients, including our dietetics service in providing up-to-date information on management of conditions such as diabetes for patients in community clinics.

During the continued cost of living crisis, we have funded staff welfare and support in collaboration with the Trust and other sponsors. Food packages and snacks have been distributed to all staff across the community to have a positive impact on their wellbeing and resilience.

As the charity is self-funded, a proportion of our funds are spent on running and operational costs. This includes staff salaries, memberships and software subscriptions

We are always focussed on achieving value for money. To ensure the money is well spent, applications for general fund grants include questions about the objectives, impact, and success criteria for the proposed project.

OUR FUTURE PLANS:
WHAT WE'LL DO WITH DONATIONS

We will achieve our mission by working with the NHS to develop the facilities to improve the treatment that patients receive. Our clinicians are the experts and can guide us to spending funds to obtain maximum benefits to patient care. Your support makes these plans possible and to help us please do consider making a donation.

01.

Expand our fundraising activities to stabilise incomes and achieve our long-term goal of raising £250,000 every year. As part of this we will improve the effectiveness of our marketing to drive up donations and legacies.

02.

Continue to make grant applications to external providers and work more collaboratively on projects with Hospital League of Friends Groups in order to achieve their and our objectives.

03.

We want to reduce our fund balance of £500,000 in order to spend funds in a timely manner and according to the wishes of our donors by working closely with fund holders.

04.

Increase our funding for staff wellbeing and welfare to achieve a target of 10% of overall expenditure to support resilience and recovery for the continuation of patient care.

05.

Use charitable funds to maintain and improve patient environments such as equipment and buildings, beyond statutory requirements.

06.

Deliver of a new website to help tell the story of our charity and demonstrate impact, as well as providing a one-stop shop for resources. The site will enable us to accept donations, boost fundraising, build trust with supporters, and achieve so much more for patients.

HOW WE MANAGE OUR MONEY: OUR GRANT MAKING POLICY

NCH&C CF makes grants from both its unrestricted and restricted funds. The grants from restricted funds must be used in accordance with the conditions attached to the donation.

This year the Hospital Saturday fund approved a restricted grant of £1,500 for sensory equipment at Mill Lodge – this grant has now been spent. Within the unrestricted funds, grants are made from general funds, designated (earmarked) funds and designated research funds:

- **General funds.** These funds are received by NCH&C CF with no particular preference expressed by donors. Grants are particularly targeted at projects in areas of the Trust that do not have available designated funds to assist them, or where the benefits are system wide.
- **Designated funds.** These funds are established for a specific part of the service, patient group or activity nominated for support by the donor. They are overseen by fund holders who can make recommendations on how to spend the money within the designated area. Fund advisors' applications are generally accepted if they fit our criteria, and these funds can be spent at any time.
- NCH&C CF manages an endowment, which cannot be spent but which produces an income. The income is credited to a designated fund to promote the preservation of health and recovery of patients and former patients of the Swaffham Hospital.

HOW WE AWARD GRANTS

The charity undertakes surveys of all grants awarded over £10,000 and a sample of smaller grants to establish the extent to which the intended benefits have been realised. We ask the applicant what the outcome of the grant was both in terms of what they spent the money on and what difference it made to the medical care and treatment of patients. This information informs future grant making policy as well as providing a basis for assessing our performance.

We also ask fund advisors who have spent more than £10,000 in the year to provide a brief report on what they spent the money on and the difference it made to the medical care and treatment of patients.

HOW WE MANAGE OUR MONEY: OUR RESERVES POLICY

The charitable funds committee has established a reserves policy as part of its plans to provide long term support to NCH&C CF.

The charitable funds committee calculate the reserves as that part of the charity's unrestricted income funds that is freely available after taking account of designated funds that have been earmarked for specific projects. The free reserves currently stand at £39,500 and are calculated as follows:

Total unrestricted funds of £488,885
Less designated funds £449,385
Total free reserves £39,500

The charitable funds committee intends that designated funds are spent within a reasonable period of receipt and therefore expects to only maintain reserves sufficient to provide certainty of funding for the delivery of committed grant making for a period of three months.

The minimum recommended reserves target is £39,000 which would cover three months of operating costs. Therefore, reserves held are within our target range. The ongoing impact of the cost-of-living crisis, and the increasingly challenging public funding environment makes it harder to secure public donations for our general fundraising efforts.

The charitable funds committee expects that designated funds will be spent within three years. It therefore regularly reviews the balances held in designated funds against this benchmark unless it has been agreed that a different period is more appropriate based on the reason for the designation.

Where the fund has not been spent within three years, the charitable funds committee will determine whether the fund is likely to be committed soon and the extent to which there is a continuing need for the particular designated fund(s). Where it is decided that the designation is no longer necessary or the designated fund has been inactive for more than five years, the funds are closed and transferred to general unrestricted reserves.

ABOUT OUR INVESTMENTS

Our investments are managed by Barratt & Cooke with the objective to maximise the income receivable whilst allowing a degree of capital growth. Since these funds represent unrestricted income funds including reserves, the emphasis is on maintaining a high level of liquidity and a low to moderate investment risk.

The governing documents allows the trustee to invest in a wide range of shares and investments, provided they are not speculative.

The portfolio is structured to permit a range of investments intended to yield a competitive rate of return in difficult market conditions.

In addition, the charitable funds committee has decided not to invest in tobacco or alcohol securities or fossil fuels because of the proven links between smoking, pollution and poor health which would make such investments contrary to our charitable aims.

Investment performance is monitored by the charitable funds committee by reviewing regular reports from the investment managers. The movement in the stock market affects the value of our investments. This year we have an unrealised gain of £18,000 or 2.5%. This makes little difference to the day- to-day running of the charity until the point that we have to sell our investments and realise the gain or loss.





VOLUNTEERS

On behalf of the trustee body, the charitable funds committee would like to pay tribute to:

- The members of staff who give of their time out of hours in support of the work of the NCH&C CF, in developing ideas for funding and working with us to identify how we can improve patient care.
- Our fundraisers who do so much to encourage others to enrich lives through donations and fundraising activities.
- Our wonderful garden volunteers who help to maintain the charity funded outdoor spaces across the Trust.

HOW TO CONTACT US



The charity office and principal address of NCH&C CF is:

Norfolk Community Health & Care NHS Trust Charitable Fund
Woodlands House
Norwich Community Hospital
Bowthorpe Road
Norwich
NR2 3TU

Email: charitablefund@nchc.nhs.uk

The corporate trustee, NCH&C NHST Trust principal address is:

The Chief Executive
Norfolk Community Health & Care NHS Trust
Woodlands House
Norwich Community Hospital
Bowthorpe Road
Norwich
NR2 3TU

Email: chief.exec@nchc.nhs.uk

HOW WE ORGANISE OUR AFFAIRS: REFERENCE AND ADMINISTRATIVE DETAILS

The NCH&C CF are registered with the Charity Commission under the single Registered Number 1051173.

Formerly known as the Norwich Community Health Partnership NHS Trust Charitable Fund, the governing document is a deed dated 6 November 1995.

Our objects are 'for any charitable purpose or purposes relating to the National Health Service'.

TRUSTEE ARRANGEMENTS

The NCH&C NHS Trust is the sole corporate trustee of the charity. The corporate trustee's responsibilities are therefore carried out by NCH&C's board of directors. The board is appointed in accordance with the Trust constitution. Details of NCH&C board membership can be found in its annual report and accounts and on its website.

As NCH&C CF has a corporate trustee it is, in accounting terms, controlled by NCH&C and is therefore its subsidiary. Financially, the charity is not material to NCH&C, so it is not consolidated into the Trust's accounts.

NCH&C's board meet annually as corporate trustee to:

- review and approve NCH&C CF strategic plan
- re-appoint or appoint members of the charitable funds committee and
- approve the trustee's annual report and accounts for the year.

The board of directors of NCH&C delegate responsibility for the day-to-day management of the NCH&C CF to the charitable funds committee in accordance with the scheme of delegation and standing financial instructions.

They are responsible for fulfilling the corporate trustee's strategic plan and working with professional advisors and representatives of NCH&C NHS Trust who provide various services, such as procurement, financial, estates and marketing to the charities.



TRUSTEE ARRANGEMENTS

The charitable funds committee comprises two executive members of the board and two non-executive members. Other members of NCH&C staff are invited to attend committee meetings but do not have a vote at those meetings. During the year, the committee members were:

- Andrew Williams Committee Chair, Non-Executive Director (till X)
- Andrew Hopkins Director of Finance and Performance
- Dr Venu Harilal Medical Director
- John Kennedy Non-Executive Director

Very important folk!






Members of the charitable funds committee are selected to give the charity a good mix of appropriate professional skills – for example, medical, finance, investment and fundraising.

New members of the charitable funds committee are provided with an induction pack consisting of the governing documents, previous annual reports and accounts, policies and procedures of the Charity as well as the HFMA's Practical guide: NHS charitable funds and the Charity Commission for England and Wales's guidance.

OUR STAFF AND ADVISORS

NCH&C CF has two full time staff; Mrs Carol Plunkett is the Charity Development and Project Manager and Mrs Tracy Harvey is the Charity Finance and Administration Officer. We have also appointed Mrs Kerry Brind as Charity Marketing and Fundraising Officer on a one-year contract.

Our awesome charity team!







The charitable funds committee is also assisted by a number of professional advisors, as detailed below:

Bankers:
Barclays Business Banking
3 St James Court
Whitefriars
Norwich
NR3 1RJ

Investment Managers:
Barratt & Cooke Ltd
5-6 Opie Street
Norwich
Norfolk
NR1 3DW

Independent examiners:
Larking Gowen LLP
1st Floor Prospect House
Rouen Road
Norwich
NR1 1RE

Legal advisors:
Mills & Reeve
1 St. James Court
Whitefriars
Norwich
NR3 1RU

Members of the charitable funds committee are not trustees in their own right, but act on behalf of the corporate trustee.

KEY MANAGEMENT PERSONNEL REMUNERATION

NCH&C's board members are executive members or non-executive members who are remunerated in accordance with the NCH&C's constitution. None of the board members are specifically paid in relation to NCH&C CF.

The board of the corporate trustee and the Director of Finance make up the key management personnel of the charity. They are in charge of:

- directing and controlling the charity
- running and operating the charity on a day-to-day basis.

Members of NCH&C's board are required to disclose all relevant interests and register them with the trust fund director and withdraw from decisions where a conflict of interest arises. All related party transactions are disclosed in note 2 to the accounts. NCH&C CF is fully recharged by the Trust for the employment costs relating to the Charity Development and Project Manager, along with those of the Charity Finance and Administration Officer, Charity Marketing and Fundraising Officer, and other finance personnel costs.



RISK ANALYSIS

As part of the business planning exercise carried out during the year, the Charitable Funds committee has considered the major risks to which NCH&C CF is exposed.

They have reviewed systems and identified steps to mitigate those risks. Three major risks have been identified and arrangements have been put in place to mitigate those risks.

FUTURE LEVELS OF INCOME

NCH&C CF is reliant on voluntary donations to allow it to make grants to NHS bodies. If income falls, then the charity would not be able to make as many grants or enter into longer term commitments with the NHS bodies it supports

NHS waiting times for treatment are getting longer – this is partly due to the impact of the pandemic, but demand also continues to rise. There is a risk that the public's goodwill for the NHS will reduce making fundraising more difficult.

The cost of living remains a significant pressure on many people's lives. This is continuing to have an impact on the amount that people are able to donate to charity and is being closely monitored.

The committee mitigates the risk that income will fall by supporting the fundraising endeavours of the charity team. Fundraising activity is regularly benchmarked against our peers and reviews are undertaken after campaigns and events to understand what worked well and how things could be done better.



FALL IN INVESTMENT RETURNS

NCH&C CF generates additional income from investing its cash balances, so the committee considers the loss of investment income to be a financial risk. The risk is mitigated by retaining expert investment managers, having a diversified investment portfolio and regularly reviewing that portfolio.

The committee makes use of benchmarking information when reviewing the portfolio.

The what if...

UNFORESEEN CHANGES IN THE OPERATION OF THE NHS

The NHS is, by its very nature, is subject to national changes in government policy as well as local politically driven decisions. The charitable funds committee has identified this as a risk as it may mean initiatives or healthcare activities supported by NCH&C CF are no longer delivered in the Norfolk area. The committee regularly liaises with NHS partners to understand the changes that they are facing at an early stage, and shares it's operational plans accordingly.

WIDER NETWORKS

NCH&C CF is one of over **230 NHS linked charities** in England and Wales who are eligible to join NHS Charities Together. As a member charity, we can 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 members of the charitable funds committee.

As a member of NHS Charities Together, we have also been very grateful to receive grants from their national emergency appeal and ongoing grants program.

NHS CHARITIES TOGETHER

RELATED PARTIES

NCH&C is the corporate trust of NCH&C CF and is therefore a related party.
NCH&C CF has fostered close relationships with local Hospital League of Friends Groups that support community hospitals and provide grants to benefit patients and staff.

However, they retain their independence to act in the best interests of NCH&C and the charity's beneficiaries.

STATEMENT OF TRUSTEE RESPONSIBILITIES

The law applicable to charities in England and Wales requires the Trustee to prepare financial statements for each financial year which give a true and fair view of the charity's financial activities during the year and of its financial position at the end of the year.

In preparing financial statements giving a true and fair view, the Trustee should follow best practice and:

- Select suitable accounting policies and then apply them consistently;
- Make judgements and estimates that are reasonable and prudent;
- State whether applicable accounting standards and statements of recommended practice have been followed, subject to any departures disclosed and explained in the financial statements; and
- Prepare the financial statements on the going concern basis unless it is inappropriate to presume that charity will continue in operation.

The Trustee is also responsible for keeping accounting records which disclose with reasonable accuracy the financial position of the charity, and which enable them to ascertain the financial position of the charity, and which enable them to ensure that the financial statements comply with the Charities Act 2011, the Charity (Accounts and Reports) Regulations and the provisions of the Trust Deed.

The Trustee is also responsible for safeguarding the assets of the charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

The Trustee confirms it has met the responsibilities set out above and complied with the requirements for preparing the accounts on a going concern basis. The financial statements and notes to the accounts set out on pages 34 to 49 attached have been compiled from and are in accordance with the financial records maintained by the Trustee.

By Order of the Trustee. Date 23/10/2024



Andrew Hopkins, Director of Finance and Performance on behalf of the Corporate Trustee



John Kennedy, Chair of the Charitable Funds Committee on behalf of the Corporate Trustee

Independent Examiner's Report to the Trustee of Norfolk Community Health and Care NHS Trust Charitable Fund

I report to the charity trustees on my examination of the accounts of the charity for the year ended 31 March 2024 which are set out on pages 34 to 48.

This report is made solely to the Trustee, as a body, in accordance with section 149 of the Charities Act 2011 and regulations made under section 149 of that Act. My work has been undertaken so that I might state to the Trustee those matters that are required to be stated in an Independent examiner's report and for no other purpose. To the fullest extent permitted by law, I do not accept or assume responsibility to anyone other than the charity and the Trustee as a body, for this examination, for this report, or for the statements made.

Responsibilities and basis of report

As the charity's trustees you are responsible for the preparation of the accounts in accordance with the requirements of the Charities Act 2011 ('the 2011 Act').

I report in respect of my examination of the charity's accounts carried out under section 145 of the Act and in carrying out my examination I have followed all the applicable Directions given by the Charity Commission under section 145(5)(b) of the 2011 Act.

Independent examiner's statement

I have completed my examination. I confirm that no material matters have come to my attention in connection with the examination giving me cause to believe that in any material respect:

1. accounting records were not kept in respect of the charity as required by section 130 of the 2011 Act; or
2. the accounts do not accord with those records; or
3. the accounts do not comply with the applicable requirements concerning the form and content of accounts set out in the Charities (Accounts and Reports) Regulations 2008 other than any requirement that the accounts give a 'true and fair view' which is not a matter considered as part of an independent examination.

I have no concerns and have come across no other matters in connection with the examination to which attention should be drawn in this report in order to enable a proper understanding of the accounts to be reached.



Signed:

Giles Kerkham, FCA DChA

Larking Gowen LLP

Chartered Accountants

1st Floor Prospect House
Rouen Road
Norwich
NR1 1RE

Date: 9 November 2024

Statement of Financial Activities for the year ending 31 March 2024

	Note	Unrestricted Funds 2023/24 £'000	Restricted Funds 2023/24 £'000	Endowment Funds 2023/24 £'000	**Total Funds 2023/24 £'000**	Total Funds 2022/23 £'000
Income and Endowments from:						
Donations, legacies and Gifts in Kind	2.1	105	(8)	0	96	132
Charitable activities	2.2	0	43	0	43	72
Income from investments		9	0	6	15	18
Transfer between funds	9	10	(4)	(6)	0	0
Total incoming resources		**124**	**31**	**0**	**154**	**222**
Expenditure on:						
Charitable Activities	4.2	(346)	(20)	0	(366)	(304)
Fundraising costs	4.1	(19)	0	0	(19)	(11)
Marketing Resource	4.1	(2)	0	0	(2)	0
Governance costs	4.2	(2)	0	0	(2)	(2)
Amortisation	5.2	(2)	0	0	(2)	(2)
Total expenditure		**(371)**	**(20)**	**0**	**(391)**	**(319)**
Net incoming/(outgoing) resources before other recognised gains/(losses)		**(247)**	**11**	**0**	**(236)**	**(97)**
Net gains/(losses) on investments	5	16	1	1	18	(24)
Net movement in funds		**(231)**	**12**	**1**	**(218)**	**(121)**
Reconciliation of funds:						
Total funds brought forward		720	59	35	814	935
Total funds carried forward	10	**489**	**71**	**36**	**596**	**814**

The notes on pages 36 to 47 form part of these accounts

Balance Sheet at 31 March 2024

	Note	Unrestricted funds 31 March 2024 £'000	Restricted funds 31 March 2024 £'000	Endowment funds 31 March 2024 £'000	**Total funds 31 March 2024 £'000**	**Total funds** 31 March 2023 £'000
Fixed assets:						
Intangible Assets - Harlequin	5.2	1	0	0	1	3
Investments	5.1	467	15	36	518	700
Total fixed assets		**468**	**15**	**36**	**519**	703
Current assets:						
Debtors	6	6	44	0	50	68
Cash at bank and in hand		137	53	0	190	267
Gifts in Kind Stock		0	0	0	0	0
Total current assets		**143**	**97**	**0**	**240**	335
Liabilities:						
Creditors falling due within one year	7	(122)	(41)	0	(163)	(224)
Net current assets / (liabilities)		**21**	**56**	**0**	**77**	111
Total net assets / (liabilities)		**489**	**71**	**36**	**596**	814
The funds of the charity:						
Unrestricted funds		489	0	0	489	720
Restricted funds		0	71	0	71	59
Endowment funds		0	0	36	36	35
Total charity funds	10	**489**	**71**	**36**	**596**	814

Approved by the Charitable Funds Committee at its meeting on 23 October 2024.



John Kennedy
Chair of the Charitable Funds Committee on behalf of the Corporate Trustee

Notes to the financial statements

1. Accounting Policies

The policies adopted by the charity in preparing these financial statements are described below. They have been applied consistently in dealing with items considered material in relation to the financial statements.

(a) Basis of preparation
The financial statements have been prepared under the historic cost convention, with the exception of investments which are measured at fair value. The financial statements have been prepared in accordance with the Statement of Recommended Practice (SORP): Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standard applicable to the UK and Republic of Ireland (FRS 102) effective 1 October 2019 and the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102) and the Charities Act 2011 and UK Generally Accepted Practice as it applies from 1 January 2019.

Additional information is provided where it is believed to be useful to the reader.

The Trustee considers there are no material uncertainties about the charity's ability to continue as a going concern. Whilst the Covid-19 pandemic has had an impact on the Charity, it is not such a significant impact as to affect the charity's ability to continue as a going concern. These financial statements have therefore been prepared on a going concern basis.

There are no material uncertainties affecting the financial statements. Fundraising income is almost back to pre-pandemic levels but continues to be affected by the cost-of-living crisis. As a grant making charity with few on-going commitments, reduced income will impact on the level of new grants that can be made in the short term rather than affecting the charity's ability to continue as a going concern. There are no material uncertainties affecting the current year's accounts.

(b) Funds structure
Where there is a legal restriction on the purpose to which a fund may be put, the fund is classified either as a restricted income fund, where the donor has provided for the donation to be spent in furtherance of a specified charitable purpose or as an endowment fund, where the charity restrictions only permit the income of the fund being expended as per the donors wishes.

Unrestricted income funds comprise those funds which the Trustee is free to use for any purpose in furtherance of the charitable objectives. Unrestricted funds include designated funds, where the donor has made known their non-binding wishes or where the Trustee has, at its discretion, created a fund for a specific purpose.

(c) Incoming resources
All incoming resources are recognised once the charity has entitlement to the resources, it is probable (more likely than not) the resources will be received, and the monetary value of incoming resources can be measured with sufficient reliability.

Where there are terms or conditions attached to incoming resources, these terms or conditions must be met before the income is recognised. Where terms or conditions have not been met or uncertainty exists as to whether they can be met then the relevant income is not recognised in the year. If received, incoming resources with unmet terms or conditions are deferred and shown on the balance sheet as deferred income.

(d) Incoming resources from legacies
Legacies are accounted for as incoming resources either upon receipt or where the receipt of the legacy is probable. Receipt is probable when:
- confirmation has been received from the representatives of the estate that probate has been granted;
- the executors have established there are sufficient assets in the estate to pay the legacy; and
- all conditions attached to the legacy have been fulfilled or are within the charity's control.

If there is uncertainty as to the amount of the legacy and it cannot be reliably estimated then the legacy is shown as a contingent asset until all the conditions for income recognition are met.

(e) Incoming resources from endowment funds

The incoming resources receivable from the investment of endowment funds are restricted for NHC&H charity and have been earmarked in accordance with the donor's stated wishes.

(f) Incoming resources from donations in kind

Gifts in kind, such as food and care packages are not accounted for when they are accepted and immediately distributed unless a single donation is material.

Gifts of tangible assets such as microwaves and fridges are recognised as a donation at fair value (market price) on receipt and charitable expenditure when they are distributed.

Where gifts in kind are held before being distributed to beneficiaries, they are recognised at fair value as stock until they are distributed.

(g) Resources expended and irrecoverable VAT

All expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all costs related to each category of expense shown in the Statement of Financial Activities. Expenditure is recognised when the following criteria are met:

- there is a present legal or constructive obligation resulting from a past event;
- it is more likely than not that a transfer of benefits (usually a cash payment) will be required in settlement; and
- the amount of the obligation can be measured or estimated reliably.

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

(h) Recognition of expenditure and associated liabilities as a result of a grant

Grants payable are payments made in furtherance of the charitable objectives of the funds held on trust, primarily being relief of those who are sick.

Grant payments are recognised as expenditure when the conditions for their payment have been met or where there is a constructive obligation to make a payment.

A constructive obligation arises when:

- the charity has communicated its intention to award a grant to a recipient who then has a reasonable expectation that they will receive a grant or
- the charity has made a public announcement about a commitment which is specific enough for the recipient to have a reasonable expectation that they will receive a grant or
- there is an established pattern of practice which indicates to the recipient the charity will honour its commitment.

The Trustee has control over the amount and timing of grant payments and consequently where approval has been given by the Trustee and any of the above criteria have been met the a liability is recognised. Grants are not usually awarded with conditions attached. However, when they are, then those conditions must be met before the liability is recognised.

(i) Allocation of support and governance costs

Support costs are those costs which do not relate directly to a single charitable activity. These include some staff costs, costs of administration and some of the overhead costs of the Corporate Trustee's. Governance costs include external examination, and any other regulatory fees. The analysis of support and governance costs are shown in note 4.

(j) Fundraising costs

The costs of generating funds are those costs attributable to generating income for the charity, other than those costs incurred in undertaking charitable activities. Fundraising costs include some of the salaries as well as expeniture for fundraising activites.

(k) Charitable activities

Costs of charitable activities comprise all costs incurred in the pursuit of the charitable objects of the charity. These costs, where not wholly attributable, are apportioned between the categories of charitable expenditure in addition to the direct costs. The total costs of each category of charitable expenditure therefore include support costs and an apportionment of overheads.

(l) Fixed asset investments
Investments are a form of basic financial instrument. Fixed asset (non current) investments are initially recognised at their transaction value and are subsequently measured at their fair value (market value) at the balance sheet date (31 March each year). The Statement of Financial Activities includes the net gains and losses arising on revaluation and disposals throughout the year. Quoted stocks and shares are included in the balance sheet at the current market value quoted by an investment analyst.

The main form of risk to the charity's financial assets is that of volatility in equity and bond markets and investment markets due to wider economic conditions, the attitude of investors to investment risk, and changes in sentiment concerning equities and within particular sectors or sub sectors.

(m) Debtors
Debtors are amounts owed to the charity. They are measured at their recoverable amount.

(n) Cash and cash equivalents
Cash at bank and in hand is held to meet the day to day running costs of the charity as they fall due. Cash equivalents are short term, highly liquid investments, usually in 90 day notice interest bearing savings accounts.

(o) Creditors
Creditors are the amounts owed by the charity. They are measured at the amount that the charity expects to have to pay to settle the debt.

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

(q) Staff costs and pensions
NCHC Trust fully re-charged NCHC Charitable Fund for the 2.08 members of staff who work full time for the charity.

Staff members belong to the NHS Pension Scheme which is an unfunded defined benefit scheme which is accounted for as a defined contribution scheme. The recharge from NCHC Trust includes the employee contributions to that scheme. For more information on the NHS Pension Scheme refer to the NCHC Trust annual report and accounts.

(r) Intangible assets
Intangible assets are non-monetary assets without physical substance which are capable of being sold separately from the charity's business or which arise from contractual or other legal rights. They are recognised only where it is probable that future economic benefits will flow to, or service potential be provided to the charity, and where the cost of the asset can be measured reliably.

Intangible fixed assets are amortised at rates calculated to write them down to estimated residual values on a straight line basis over their estimated useful lives. Computer software is expected to have a useful life of 5 years.

Note 2.1 Income from donations, legacies and Gifts in Kind

	Unrestricted Funds	Restricted Funds	Endowment Funds	**Total Funds**
	2023/24	2023/24	2023/24	**2023/24**
	£'000	£'000	£'000	**£'000**
Donations	92	(8)	0	**84**
Legacies	6	0	0	**6**
Gift Aid	3	0	0	**3**
Gifts in Kind	1	0	0	**1**
Other income	3	0	0	**3**
Donations, legacies and GIK total	105	(8)	0	**97**

Donations includes gifts from members of the public, relatives of patients and staff, as well as funding from organisations such as leagues of friends and similar support groups.

	Unrestricted Funds	Restricted Funds	Endowment Funds	**Total Funds**
	2022/23	2022/23	2022/23	**2022/23**
	£'000	£'000	£'000	**£'000**
Donations	45	38	0	**83**
Legacies	45	0	0	**45**
Gift Aid	3	0	0	3
Gifts in Kind	1	0	0	1
Other income	0	0	0	0
Donations, legacies and GIK total	94	38	0	**132**

Note 2.2 Analysis of income from charitable activities

	Unrestricted Funds	Restricted Funds	Endowment Funds	**Total Funds**
	2023/24	2023/24	2023/24	**2023/24**
	£'000	£'000	£'000	**£'000**
Stage 3 grant from NHS Charities Together	0	0	0	**0**
NHS Charities Together Development grant	0	0	0	**0**
Grants other	0	43	0	**43**
Charitable activities total	0	43	0	**43**

	Unrestricted Funds	Restricted Funds	Endowment Funds	**Total Funds**
	2022/23	2022/23	2022/23	**2022/23**
	£'000	£'000	£'000	**£'000**
Stage 3 grant from NHS Charities Together	0	28	0	28
NHS Charities Together Development grant	0	29	0	29
Grants other	5	10	0	15
	5	67	0	**72**

In 2020/21, 2021/22, 2022/23 the charity received grants from the NHS Charities Together Covid-19 emergency appeal
Other grants have come from other charities.

Note 3. Role of volunteers

The charity benefits from volunteers to assist with its functioning. They perform two main roles:

• Fund Holders advise and approve the strategic spend of designated funds for their directorate. Fund Holders report on the positive impact large expenditure has on the beneficiaries of the request.

• The Charitable Funds Committee provide an assurance role in enabling the charity to manage how its designated funds are spent. Their role is to assist the Trustee in ensuring that funds are spent appropriately, ensuring that funds are spent in accordance with the Objects of the charity and on activities over and above those normally expected to be provided through NHS funds.

In accordance with the SORP, due to the absence of any reliable measurement basis, the financial contribution of these volunteers is not recognised in the accounts.

Note 4. Expenditure

The charity incurs three broad types of expenditure:
- grant funded activity. The charity mainly pursues its charitable activities by making grants rather than directly undertaking charitable activities;
- fundraising costs; and
- support costs.

Grant funded activity is allocated directly to the fund or funds the grant is made from.

Fundraising costs are allocated fully to a sub fund of the Norfolk General Fund, an unrestricted fund.

Support costs are made up of:
1. Governance costs. These are the costs associated with the governance arrangements of the charity and include the preparation and independent review of the annual financial statements and costs to provide financial information throughout the year to the Charitable Funds Committee.

2. Other support costs, primarily recharges of the Charity Development and Project Manager, Charity Administrator and Finance Officer and related charges by the Corporate Trustee when performing work for the charity.

Support costs which are not attributable to a single activity must also be apportioned between the activities being supported.

Note 4.1 shows the allocation of fundraising costs to the different fund types.

Note 4.2 shows the allocation of support costs to the categories of charitable expenditure incurred.

Note 4.1 Analysis of fundraising expenditure

	Unrestricted	**Restricted**	**Endowment**	**Total 2023/24**
	£'000	£'000	£'000	**£'000**
Fundraising office	14	0	0	**14**
Marketing costs	2	0	0	**2**
Other fundraising costs	3	0	0	**3**
Total	**19**	**0**	**0**	**19**

	Unrestricted	**Restricted**	**Endowment**	**Total 2022/23**
	£'000	£'000	£'000	**£'000**
Fundraising office	10	0	0	**10**
Other fundraising costs	2	0	0	**2**
Total	**11**	**0**	**0**	**11**

Note 4.2. Analysis of charitable expenditure

The charity did not undertake any direct charitable activities on its own account during the year.
All of the charitable expenditure was in the form of grant funding.

	2023/24	2023/24	**2023/24**
	Grant Funded Activity	**Support costs**	**Total expenditure on charitable activities**
	£'000	**£'000**	**£'000**
Patient care - general	264	98	**362**
Patient Gifts in Kind	1	0	**1**
Patient care - staff training	(5)	(2)	**(7)**
Staff Welfare	4	(0)	**4**
Staff Gifts in Kind	0	0	**0**
COVID19 - Patient Care	1	5	**6**
COVID19 - Patient Gifts in Kind	0	0	**0**
COVID19 - Staff Wellbeing	0	0	**0**
COVID19 - Staff Gifts in Kind	0	0	**0**
COVID19 - Staff Training	0	0	**0**
COVID19 - Volunteer Expenses	0	0	**0**
Total	**265**	**101**	**366**

	2022/23	2022/23	**2022/23**
	Grant Funded Activity	**Support costs**	**Total expenditure on charitable activities**
	£'000	£'000	**£'000**
Patient care - general	**98**	54	**152**
Patient Gifts in Kind	**1**	0	**1**
Patient care - staff training	**8**	10	**18**
Staff Welfare	**8**	29	**37**
Staff Gifts in Kind	**0**	0	**0**
COVID19 - Patient Care	**63**	24	**87**
COVID19 - Patient Gifts in Kind	**0**	0	**0**
COVID19 - Staff Wellbeing	**6**	3	**9**
COVID19 - Staff Gifts in Kind	**0**	0	**0**
COVID19 - Staff Training	**0**	0	**0**
COVID19 - Volunteer Expenses	**(1)**	1	**(0)**
Total	**183**	**121**	**304**

	31 March 2024	**31 March 2023**
	£'000	£'000
Fundraising office #	98	87
Administrative support costs	3	34
Total	**101**	**121**

Fundraising office costs relate to staff time dealing with grant activity, with both internal stakeholders and external bodies such as Friends groups and grant makers.
The majority of the time was spent on overseeing expenditure granted in the previous year.

Governance costs breakdown	**31 March 2024**	**31 March 2023**
	£'000	£'000
Independent examination	2	2
Other governance costs	0	0
Total	**2**	**2**

Note 4.3. Analysis of staff costs and renumeration of key management personnel

The average number of full-time equivalent employees during the year was 2.08 (2022/23: 2) with all employees involved in providing support services to charitable activities or the governance of the charity.

Staff costs

	31 March 2024	31 March 2023
	£'000	£'000
Salaries and Wages	91	77
Social Security Costs	13	11
Other Pension Costs	10	9
Total	**114**	**97**

The charity receives corporate support from Norfolk Community Health and Care NHS Trust. An annual charge to cover the cost of these is authorised by the Charitable Funds Committee, which for 2023/24 totalled £14,040 (2022/23: £13,834).

The Charity considers its key management personnel to be the members of the Norfolk Community Health and Care NHS Trust management board acting on behalf of the corporate trustee. For 2023/24 this was the Director of Finance and Performance and the Medical Director. There was no recharge of employment benefits for key management personnel during 2023/24 or 2022/23.

No employees had emoluments in excess of £60,000 (2022/23: none).

Note 4.4. Trustee remuneration, benefits and expenses

Members of the Trust board give their time freely and receive no remuneration for the work that they undertake in relation to the Charity. However, they can claim expenses to reimburse them for the costs that they incur in fulfiling their duties relating to the Charity - these include travelling specifically for charitable funds committee meetings and charity specific training events.

No expenses were claimed from the Charity by committee members in 2023/24 or 2022/23.

Note 4.5. Independent examination fees

The independent examiner's remuneration of £2,640 (2022/23: £2,460) related solely to the examination and other fees incurred £nil (2022/23: nil).

Note 5. Assets

Note 5.1 Movement in fixed asset investments

Movement in fixed asset investments

	2023/24	2022/23
	£'000	£'000
Market value bought forward at 1 April	700	725
Add additions to investments at cost	79	84
Less disposals proceeds	(271)	(92)
Increase / (decrease) in cash held within the portfolio*	(8)	7
Add net (loss)/gain on revaluation	18	(24)
Market value as at 31 March	**518**	**700**

* A small proportion of the investment portfolio is held as cash. This is primarily due to timing differences between the sale of investments and the purchase of new investments. The cash amount is included within the investments balance in the balance sheet, rather than as 'cash at bank and in hand', given it is a part of the overall investment managed portfolio.

All investments are financial assets carried at fair value through net income and are managed by expert advisors.

Fixed asset by type

	31 March 2024	31 March 2023
	£'000	£'000
Listed equity	517	690
Cash*	1	10
Total	**518**	**700**

All investments are held at their fair value and are managed by expert advisors.

Realised and unrealised gains and losses are apportioned to individual restricted, endowment funds, designated funds and the Norfolk General Fund (an unrestricted fund) on the basis of the average balances held on unrestricted, restricted and endowment funds.

Note 5.2 Intangible Fixed Assets

This relates to the accounting software which will be amortised over five years

	31 March 2024	31 March 2023
	£'000	£'000
Opening Balance	3	5
Additions	0	0
Amortisation	(2)	(2)
	1	**3**

Note 6. Analysis of Current Debtors

Debtors due in less than one year	**31 March 2024 £'000**	31 March 2023 £'000
Other Debtors	50	68
Total	50	68

The debtor balance is made up primarily of two significant debtors; Kelling Friends £32k and North Walsham Friends £13k. (2022/23: Debtors - Kelling Friends £56k and North Walsham Friends £9k).

Note 7. Analysis of Current Liabilities

Creditors due in less than one year	**31 March 2024 £'000**	31 March 2023 £'000
Trade Creditors	0	0
Accruals	163	224
Total	163	224

The accruals relate to expenditure requests which have been approved and are outstanding at balance date.

Note 8. Related Party Transactions

Norfolk Community Health and Care NHS Trust is the corporate trustee of the charity and is its main grant beneficiary along with other organisations working in partnership with it - they are therefore related parties. The Trustee appoints Members of the Charitable Funds Committee, a sub-committee of the Norfolk Community Health and Care NHS Trust Board.

Transactions between the Charity and the Trust during the year were in relation to salary payments for its staff, payment of some Charity supplier invoices that were initally paid by the Trust and refunded by the Charity and for administrative and management costs.

The charity did not pay any expenses or honoraria to any member of the Norfolk Community Health and Care NHS Trust Board (the Trustee) or the Charitable Funds Committee in the year 2023/24. (2022/23: £0)

The charity receives corporate support from Norfolk Community Health and Care NHS Trust. An annual charge to cover the cost of these is authorised by the Charitable Funds Committee, which for 2023/24 totalled £14,040 (2022/23: £13,834).

At the end of the financial year £34,900 was owed by the Charity to the Trust. (2022/23: £31,360)

Note 9. Transfers between funds

During the year £9,885 was transferred from restricted funds to designated funds. £6,317 in income dividends was transferred from the Swaffham endowment fund to a related designated fund. £3,567 was transferred from the restricted development grant fund to offset related costs in a designated fund.

Note 10. Movement of major funds

The charity has three categories of funds, as explained in note 1 (b), funds structure.

The analysis below shows the opening and closing value including the income and expenditure movement of funds.

	1 April 2023	Income	Expenditure	Gains & Losses	Transfers	31 March 2024
Unrestricted funds						
General Fund #1	47	23	(26)	1	(5)	40
Swaffham Hospital	61	2	(14)	1	6	56
Palliative Community Care	63	11	(14)	1		61
PBL	182	60	(60)	6		188
Caroline House	16	1	(9)	0		8
LEGACY Zienia Merton	127	0	(127)			0
LEGACY Pauline Rosetta Basted (Kelling Hospital)	40	1	(29)	(1)		11
LEGACY Brian Anthony Knappett (Wymondham)	3	(0)	(1)	0		2
LEGACY Patricia Ramm (Swaffham Hospital)	10	0	0	0		10
LEGACY Audrey Edwards (PBL)	24	0	(24)			0
LEGACY Dorothea Burton (Swaffham)	15	0	0	0		15
LEGACY Dorothea Burton (Kelling)	5	0	0	0		5
LEGACY Vera May Ive (PBL)	32	1	(22)	0		12
Designated Funds (22 funds)	98	15	(47)	8	9	83
Total unrestricted funds	**720**	**114**	**(373)**	**16**	**10**	**489**
		140	371			
Restricted funds						
Kelling Training Fund	9	1	5	(0)		15
North Walsham Dayroom Fund	0	0	0			0
Development Grant	29	0	0	0	(4)	25
COVID19 Grants	4	0	(2)			2
Other Restricted Funds (9 funds)	17	36	(23)	0		29
Total restricted funds	**59**	**37**	**(20)**	**0**	**(4)**	**71**
		32	20			
Endowment funds						
Swaffham Shephard CIP	35	7	0	0	(6)	36
Total endowment funds	**35**	**7**	**0**	**0**	**(6)**	**36**
Total funds	**814**	**159**	**(393)**	**16**	**(0)**	**596**

	1 April 2022	Income	Expenditure	Gains & Losses	Transfers	31 March 2023
Unrestricted funds						
General Fund #1	49	25	(28)	(2)	3	47
Swaffham Hospital	55	1	0	(2)	7	61
Community Specialist Care Team PBL	0	0	0			0
Palliative Community Care	76	8	(19)	(2)		63
PBL	258	2	(70)	(8)		182
Caroline House	19	12	(14)	(1)		16
LEGACY Zienia Merton	130	1	0	(4)		127
LEGACY Pauline Rosetta Basted (Kelling Hospital)	41	0	0	(1)		40
LEGACY Brian Anthony Knappett (Wymondham)	12	0	(9)	(0)		3
LEGACY Patricia Ramm (Swaffham H	13	1	(3)	(1)		10
LEGACY Audrey Edwards (PBL)	25	(0)	0	(1)		24
LEGACY Dorothea Burton (Swaffham)	15	1	0	(1)		15
LEGACY Dorothea Burton (Kelling)	5	1	0	(1)		5
LEGACY Vera May Ive (PBL)	0	33	(2)	0		32
Designated Funds (22 funds)	100	23	(41)	3	13	98
Total unrestricted funds	**796**	**106**	**(186)**	**(21)**	**23**	**720**
Restricted funds						
Margaret Rose Goff Learning Disabiliti	20	0	(3)	(1)	(16)	0
Kelling Training Fund	16	(0)	(6)	(1)		9
North Walsham Dayroom Fund	0	0	0			0
Development Grant	0	29	0	0	0	29
COVID19 Grants	44	28	(68)			4
Other Restricted Funds (9 funds)	23	49	(55)	(0)		17
Total restricted funds	**103**	**106**	**(132)**	**(2)**	**(16)**	**59**
Endowment funds						
Swaffham Shephard CIP	36	7	0	(1)	(7)	35
Total endowment funds	**36**	**7**	**0**	**(1)**	**(7)**	**35**
Total funds	**935**	**219**	**(318)**	**(23)**	**0**	**814**

#1 Zienia Merton negative income - reduction in accrued income as legacy was less than originally expected

#2 Ida May Riley - transfer funds to Norfolk General fund as the service the legacy was requested to be spent on no longer exists

Balance Sheet at 31 March 2023

	Note	Unrestricted funds	Restricted funds	Endowment funds	**Total funds**
		31 March 2023	31 March 2023	31 March 2023	**31 March 2023**
		£'000	£'000	£'000	**£'000**
Fixed assets:					
Intangible Assets - Harlequin	5.2	3	0	0	3
Investments	5.1	647	18	35	700
Total fixed assets		**650**	**18**	**35**	**703**
Current assets:					
Debtors	6	0	68	0	68
Cash at bank and in hand		139	128	0	267
Gifts in Kind Stock		0	0	0	0
Total current assets		**139**	**196**	**0**	**335**
Liabilities:					
Creditors falling due within one year	7	(69)	(155)	0	(224)
Net current assets / (liabilities)		**70**	**41**	**0**	**111**
Total net assets / (liabilities)		**720**	**59**	**35**	**814**
The funds of the charity:					
Endowment funds		720	0	0	720
Restricted funds		0	59	0	59
Unrestricted funds		0	0	35	35
Total charity funds	11	**720**	**59**	**35**	**814**


Thanks to all our amazing fundraisers. We couldn't do it without you!

NCH&C Charitable Fund

www.norfolkcommunityhealthandcare.nhs.uk/nchc-charitable-fund

@NCHC_CF

@NCHCCharitableFund

@norfolk-community-health-care-charitable-fund

charitablefund@nchc.nhs.uk

NORFOLK COMMUNITY HEALTH AND CARE NHS TRUST CHARITABLE FUND

England & Wales - Charity number 1051173

Accounts

TRUSTEE ANNUAL REPORT
AND FINANCIAL STATEMENTS
2022-2023



NCH&C Charitable Fund

Norfolk Community Health and Care NHS Trust Charitable Fund

Registered Charity No: 1051173

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Foreword by the Chair of Charitable Fund Committee of the Norfolk Community Health & Care NHS Trust Charitable Fund.

We are a registered charity that works for the benefit of NHS patients and their families from Norfolk and Waveney and the surrounding area, whether they are Norfolk Community Health and Care (NCH&C) NHS Trust patients or not, and we work closely with our Corporate trustee NCH&C NHS Trust.

We exist to provide resources and facilities to meet the needs of our patients and their families. As Covid restrictions began to reduce, we were able to return to sites where some of the charity's larger projects had needed to be put on hold and to re-start them. Our successful bids to NHS Charities Together and other grant awarding charities has provided a vital funding bridge to enable us to maintain our ambitious plans and priorities.

Key highlights of our year include:

- £55,000 spent on patient capital improvements at Kelling Hospital;
- £48,000 funding for a patient garden at Mulberry stroke unit;
- Investing £55,000 on staff welfare and training development;
- Increasing our digital fundraising capabilities;
- Total expenditure of £152,000 on patient care;
- Funding £7,000 in volunteer expenses reimbursement;
- Expending the NHS Charities Together Stage 1 funding.

Alongside these, we were able to support initiatives with the Trust's health and well-being team such as the We Care events to support staff as the cost of living crisis began to play out. Building on positive staff feedback about the British Sign Language training project, we have invested in another 150 places for staff.

Your donations have made this work possible, and your future donations are the key to our continued success. I would like to thank everyone who has donated gifts or money, as well as our staff and volunteers that have shown such exceptional commitment to supporting patients over the last 2 years and continue to do so.

We will continue to focus on helping the Norfolk and Waveney community to live healthy lives. If you would like to get involved, details are available at the end of this report.



Andrew Williams September 2023.

Who we are.

Norfolk Community Health & Care NHS Trust Charitable Fund (NCH&C Charitable Fund) is a registered charity (registered number 1051173). We exist to raise funds and receive donations for the benefit of the NHS. By securing donations, legacies, and sponsorship, NCH&C Charitable Fund can provide the 'icing on the cake' to make a real difference for patients, their families and the staff who look after them.

Norfolk Community Health & Care NHS Trust is an outstanding provider of excellent healthcare and our key partner in fulfilling our charitable aims. NCH&C provides community healthcare to over 900,000 patients.



Image: Fundraising cheque presentation from a patient to Caroline House staff.

Norfolk Community Health & Care NHS Trust provides district nursing and health visiting to the residents of Norfolk as well as the patients of our community hospitals and community settings.

We would like you to support us in our important work so please read on and let us tell you more about ourselves, what we do, what we have achieved and how we go about spending the money given to us.

What we aim to do: our objectives and activities.

Our mission.

By raising new money and careful management of our existing funds, NCH&C Charitable Fund provides a public benefit by making grants to Norfolk Community Health & Care NHS Trust and the other organisations it works with to:

Fund improvements for the care and treatment for NHS patients, above and beyond that which is provided by the NHS core funding and making a real difference to patients, families/carers and its' staff.





Image: Mni Donkey therapeutic visit at Pine Cottage.

This is closely aligned to the Trust's vision 'to improve the quality of people's lives, in their homes and community, by providing the best in integrated health and social care'.

We achieve this by supporting the work of Norfolk Community Health and Care NHS Trust and its partners through our 3 strategic aims:

- Enhance the patient experience and environment;
- Support the wellbeing and development of NHS staff;
- Maximise the Charity effectiveness to become a Charity of choice.

Grants are made in accordance with charity law, our constitution and the wishes and directions of donors. In making grants, we endeavour to reflect the wishes of patients and staff by directing funds towards areas they tell us are most in need. During the year 2022/23, grants totalling £183,000 were made. When considering where to focus our attention our corporate trustee's board and, particularly, the members of the charitable funds committee have regard to the Charity Commission for England and Wales's guidance on public benefit and what this means for the charity.

Our plans are to continue to increase our level of fundraising to sustain our target of £250,000 a year which will help us work with our NHS partners to improve the health prospects for patients in our community.

What we have achieved: highlights from the activities undertaken in the year.

Our key aim is to serve the NHS patients of Norfolk Community Health & Care NHS Trust for the public benefit. By funding activities, treatment and equipment we can help the NHS bodies we work with provide care to their patients which goes beyond that which they are funded by the state to provide.

By working with the NHS, we assist patients from every walk of life, irrespective of race, creed, ethnicity or personal or family financial circumstances. We put this aim into practice by helping the patients, their families and carers, and visitors to the hospital and community settings by:

- Enhancing the care our hospitals and inpatient units and clinics can offer through new equipment and building improvements to deliver better care.
- Investing in the staff who work for the Trust to enhance a knowledgeable, caring and resilient workforce delivering care to patients.
- Funding additional treatments and therapies that offer increased patient benefits or better outcomes for recovery.
- Providing direct support to patients by way of information and better facilities.

We do this through a range of programmes funded by you and the grants from NHS Charities Together and other funders. Highlights from the main programmes undertaken in the year are detailed below to give you a wider understanding of the difference we can make together to lives today and in the future.

Supporting staff and patient recovery and resilience.

We were grateful to receive a further £27,500 grant from NHS Charities Together to support staff recovery and resilience post pandemic.

Following consultations with staff across multiple sites, we devised a prioritised schedule of works to improve outside space provisions by installing seating areas, planting and decoration to boost morale and improve wellbeing.



Image: Mulberry Garden for stroke patients – before and after.

These spaces enable staff to leave the workplace and take a break in a restful area away from the busyness and noise of wards to ensure they can continue providing outstanding care to patients of the trust.

Funding additional equipment to support recovery.

With generous funding from The National Lottery and Geoffrey Watling Fund, we purchased an omi vista projector for our brain injury specialist unit at Caroline House.

The projector benefits patients physically and cognitively as well as improving their engagement within rehabilitation. This projection system responds to gesture and movement creating dynamic images on any surface. Rehabilitation therapists operate with patients either as individual sessions or within group work and this rehabilitation intervention assists with cognition; perception; motor; behaviour and low mood.



Image: Omi Vista Mobi projector (source Omi Vista).

It can help with patient engagement in goal setting their short-term goals such as mobility, independent living and can progress their rehabilitation to return home and begin to live independently. As the projection kit is so engaging and fun – patients do not realise that they are being treated and rehabilitated, which is why it could be so important to their progress and motivation to improve.

Staff feedback: “Patients have been able to use the Mobii projector whilst in communal spaces in a ‘ad hoc’ way with rehabilitation assistants for sensory stimulation and general enjoyment and socialisation.

The Mobii has also been used as part of sensory/cognitive and upper limb care plans and played an important role in the rehabilitation process. The Mobii offers a vast number of programmes all of which offer different cognitive input, allowing therapists to truly create specifically targeted input with patients.

There have been examples of increased engagement in therapy when using the Mobii in place of traditional forms of therapy due to the interactive and customisable nature of the projector.”

Investment in the staff who work for the Trust to enhance a knowledgeable, caring and resilient workforce delivering care to patients.

The Charity has funded over 200 members of NCH&C Trust to sign up for British Sign Language for beginners training. This fully accredited program gave staff an opportunity to learn basic communication to support the deaf and hard of hearing.

Good communication skills have a positive effect on health outcomes. Patients and those important to them want to know about and participate in their own health care and associated decision-making so all staff need to be able to communicate sensitively and compassionately.



Image: British Sign Language – Greetings (source: signature.org.uk).

This is an accredited course by the CPD Certification Service Course and is worth 1 CPD point to support staff training and development.

As well as enabling better conversations with patients, the learning has been valuable to support communication with staff that may have hearing needs, and the wider community.

How we funded our work, our achievements and performance.

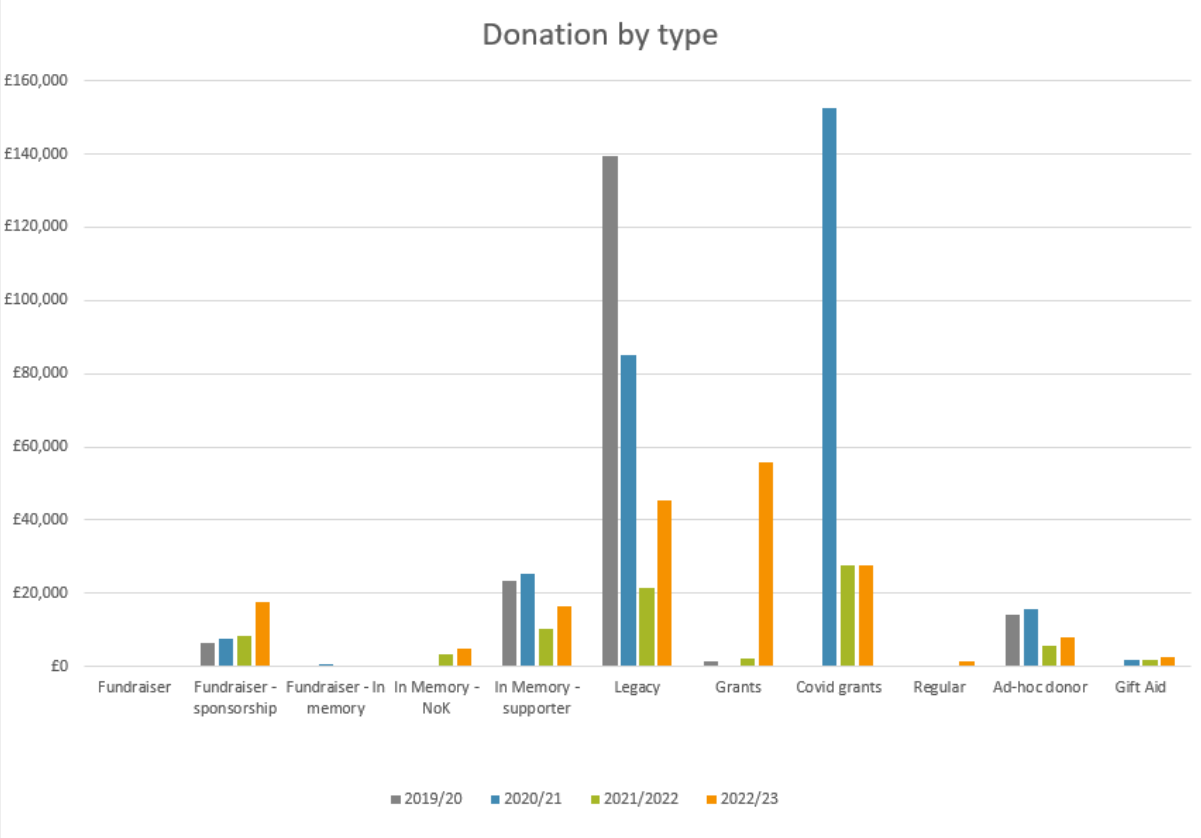
The following figures are taken from the full accounts approved on 30 June 2023. If more details are required, please refer to the full accounts. This part of the trustee's annual report comments on key features of those accounts. In this section we firstly explain how we raised the money and then how we spent it.

Money received - £222k Money spent - £319k.

NCH&C Charitable Fund can only continue to support the work of Norfolk Community Health & Care NHS Trust and our other partners for as long as we receive the money needed. Most of our income comes from voluntary donations. This year we spent £97k more than we received in income, which was a planned deficit to spend historical funds. We experienced losses in the value of our investments which meant our total funds decreased by £121,000.

Money received: sources of funds.

The chart shows our main sources of income over the past four years. Our largest source of income has changed from a reliance on legacies and ad-hoc donations from patients to a more diversified income stream.



Before the pandemic, we received a higher percentage of income from ad-hoc donations of patients visiting inpatient and clinic services. Reduced footfall due to lockdown, social distancing and changes in the way NCH&C delivers services has meant that we continue to experience a downturn in this income.

Our largest source of income is now from grants, mainly from NHS Charities Together. By utilising learning from this experience, we have begun to identify higher value projects that attract funding from other external grant providers.

Legacy income continues to be sporadic but has recovered after lockdown and we have increased our in memory giving through the increased use of digital platforms. By investing in new providers, we have been able to offer donors new and cashless ways of giving.

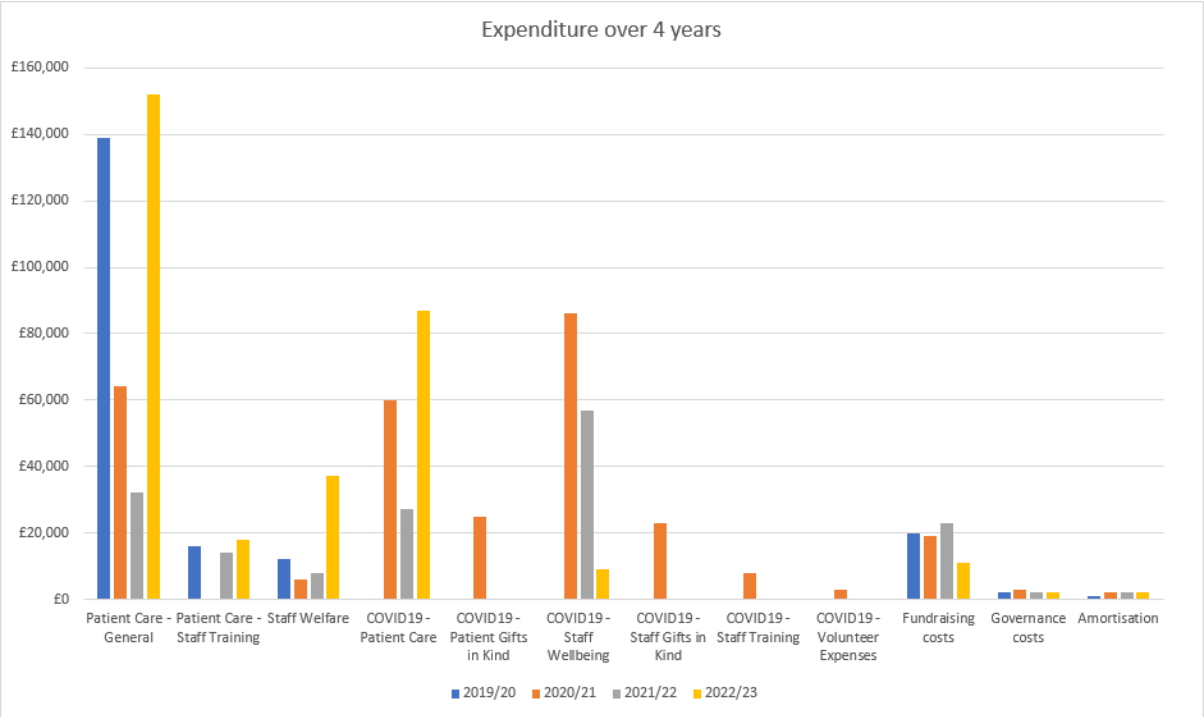


Images: outside space development for patients.

Legacy income continues to be sporadic but has recovered after lockdown and we have increased our in memory giving through the increased use of digital platforms. By investing in new providers, we have been able to offer donors new and cashless ways of giving.

Money spent: what we spent the money on.

We are a grant making charity – mostly we give grants to NHS bodies, but we also give smaller grants to other service providers where that meets our charitable objectives.



Our greatest expenditure continues to be spent on patient care to improve environments and equipment provisions.

Over the past 4 years, we have increased our investment in staff training and wellbeing which was possible due to funding from NHS Charities Together grants. This will continue to grow as our new strategy incorporates staff wellbeing where there is benefit to NCH&C patients.

We have spent all the Covid-19 stage 1 recovery grant that we received from NHS Charities Together. This money was used for staff well-being initiatives to improve environments or enhance Trust initiatives.

We continue to fund initiatives to train the staff who care for patients. Ensuring staff are well trained and supported improves the quality of care they provide. Of course, the NCH&C as employer has a duty to ensure its staff are well trained and able to do their work but we can add those extra amenities and support additional training.

We have also supported staff as a result of the cost-of-living crisis. This involves partly funding food provision initiatives for drinks and healthy snacks on wards and in community teams to ensure the physical wellbeing of NHS staff in their demanding roles.

Spending the money is only part of the story because we are concerned to achieve value for money. To ensure the money is well spent, applications for general fund grants include questions about the objectives, impact, and the patient benefit for the proposed project.



Image: Supporting equality, diversity and inclusivity at Norwich Pride 2022.

The charity requests a grant monitoring form for grants awarded over £5,000 to establish the extent to which the intended benefits have been realised. We ask the applicant what the outcome of the grant was both in terms of what they spent the money on and what difference it made to the medical care and treatment of patients. This information informs future grant making policy as well as providing a basis for assessing our performance.

Our fundraising practices.

NCH&C Charitable Fund organises several fundraising events and co-ordinates the activities of our supporters both in the hospital and in the wider community on behalf of NCH&C. NCH&C Charitable Fund does not use professional fundraisers or involve commercial participators.

There have been no complaints about fundraising activity this year.

NCH&C Charitable Fund has signed up to the Fundraising Regulator's Code of Fundraising Practice and all fundraising guidance and working practices are compliant with that code.

Any direct marketing is undertaken by the NCH&C Charitable Fund team to ensure that it is not unreasonably intrusive or persistent. All marketing material contains clear instructions on how a person can request their removal from mailing lists.

Our fundraising performance.

During the year the total donations, legacies and income came to £204k against a plan of £261k. Our fundraising income is almost back to pre-pandemic levels although from more diversified sources, but we are being impacted by the cost-of-living crisis and the economic backdrop.





Images: NCH&C NHS Trust staff fundraisers.

We are increasing our fundraising by applying for grants from funding organisations other than NHS Charities Together and improving our digital capabilities.

What we plan to do with your donations: our future plans.

We will achieve our mission by working with the NHS to fund enhancements that benefit patients of NCH&C and Norfolk and Waveney and collaborating with clinical colleagues to identify projects and activities that will have the most impact.



Image: Kelling Hospital staff accepting donations for NHS Big Tea event.

Our detailed plans are to:

- expand our fundraising activities towards achieving our long-term goal of raising £250k every year.
- Spending of historical restricted funding on identified capital projects to reduce overall fund balance to £500,000.
- Increase our unrestricted funding to £100,000 with planned fundraising activities.
- Creation of staff wellbeing, staff training, research, and equality, diversity and inclusivity (EDI) funds to support Trust wide activities.
- Continue to identify projects and make applications to external funding bodies both regionally and nationally.
- Increase our marketing and communication resource to grow the charity brand and profile to internal and external stakeholders.
- spend the £200,000 restricted funds within the new Priscilla Bacon Hospice due to open in 2023 to help equip enhanced facilities in collaboration with our partner.

Your support makes these plans possible and to help us please do consider making a donation.

How we manage the money.

Our grant making policy.

NCH&C Charitable Fund makes grants from both its unrestricted and restricted funds. The grants from restricted funds must be used in accordance with the conditions attached to the donation. In 2020/21 a restricted fund was established for the grants received from NHS Charities Together and these grants have now been spent. Within the unrestricted funds, grants are made from general funds and designated funds:

• general funds. These funds are received by NCH&C Charitable Fund with no preference expressed by donors. Grants are particularly targeted at projects in areas of the trust that do not have available designated funds to assist them, or to ensure equitability of a trust wide provision.

• designated funds. These funds are established for a particular place, service or activity nominated for support by the donor. They are overseen by fund advisors who can make recommendations on how to spend the money within the designated area. Fund advisors' recommendations are generally accepted, and these funds can be spent at any time.

• endowment fund. NCH&C manages a separate endowment, which cannot be spent but which produces an income. The income is held in a separate fund to promote the preservation of health and recovery of patients and former patients of the Swaffham Hospital.

Our reserves policy.

The charitable funds committee has established a reserves policy as part of its plans to provide long term support to NCH&C.

The Charitable Funds Committee calculate the reserves as that part of the charity's unrestricted income funds that is freely available after taking account of designated funds that have been earmarked for specific projects.

The free reserves currently stand at £47,000 and are calculated as follows:

Total unrestricted funds of £720,000

Less designated funds (£673,000)

Total free reserves £47,000

The Charitable Funds Committee intends that designated funds are spent within a reasonable period of receipt and therefore expects to only maintain reserves sufficient to provide certainty of funding for the continuity of general grant making.

Therefore, the target range for reserves is between £60,500 to £121,000 to ensure the stability of grant funding.

The current reserves are marginally below the lower level of the target range, which is due to the impact of the cost-of-living crisis on fundraising and donations with designation specified by the Trust. The Committee will be reviewing its plans to improve the reserves level during the forthcoming year. It does not foresee any negative impact on either liquidity or the ability to continue making grants with the current level of reserves, given the sizeable value of investments held by the Charity.

The Charitable Funds Committee expects that designated funds will be spent within three years. It therefore regularly reviews the balances held in designated funds against this benchmark unless it has been agreed that a different period is more appropriate based on the reason for the designation. Where the fund has not been spent within three years, the charitable funds committee will determine whether the fund is likely to be committed soon and the extent to which there is a continuing need for the designated fund(s). Where it is decided that the designation is no longer necessary or the designated fund has been inactive for more than five years, the funds are closed and transferred to general funds following due diligence and approval from the Charitable Funds Committee.

About our investments.

Investments are managed by an external investment manager with the objective to maximise the income receivable whilst allowing a degree of capital growth. The charity will maintain appropriate liquidity within its funds consistent with the spending commitments authorised by the Charitable Funds Committee.

The charity intends to take medium investment risks to generate an average annual return. This will allow the charity to maintain the real value of the assets, whilst generating income to support the funding patient-related activities.

The charity's policy ensures that its investments is also assessed according to the environmental, social and governance behaviour of companies to ensure that our investments respect the needs of the environment and society as a whole.

Funds intended to be used to pay grants in the near future are held on deposit to minimise investment risk.

Investment performance is monitored by the Charitable Funds Committee by reviewing regular reports from the investment managers. The movement in the stock market affects the value of our investments. This year we have an unrealised loss due to the economic climate and other external political factors. This makes little difference to the day-to-day running of the charity until the point that we must sell our investments and realise the loss.

How we organise our affairs:

The NCH&C Charitable Fund is registered with the UK Charity Commission under the registered number 1051173.

Formerly known as the Norwich Community Health Partnership NHS Trust Charitable Fund, the governing document is a deed dated 6 November 1995.

Its objects are 'for any charitable purpose or purposes relating to the National Health Service'.

How to contact us.

The charity office and principal address of NCH&C Charitable Fund is:

Norfolk Community Health & Care NHS Trust Charitable Fund
Woodlands House
Norwich Community Hospital
Bowthorpe Road
Norwich
Norfolk
NR2 3TU

Email: charitablefund@nchc.nhs.uk





Images: NCH&C Charitable Fund team winners of the 'Community Award' at NCH&C Trust Reach Awards 2022.

Trustee arrangements.

The NCH&C NHS Trust is the sole corporate trustee of the charity. The corporate trustee's responsibilities are therefore carried out by NCH&C board of directors. The board is appointed in accordance with the Trusts' constitution. Details of NCH&C NHS Trust board membership can be found in its annual report and accounts and on its website: https://www.norfolkcommunityhealthandcare.nhs.uk/board-of-directors.

As NCH&C Charitable Fund has a corporate trustee it is, in accounting terms, controlled by NCH&C and is therefore its subsidiary. Financially, the charity is not material to NCH&C, so it is not consolidated into the Trust's accounts.

NCH&C board meet annually as corporate trustee to:

- review and approve NCH&C Charitable Fund strategic plan
- re-appoint or appoint members of the charitable funds committee
- approve the trustee's annual report and accounts for the year.

The board of directors of NCH&C delegate responsibility for the day-today management of the NCH&C Charitable Fund to the charitable funds committee in accordance with the scheme of delegation and standing financial instructions. Together, they are responsible for fulfilling the corporate trustee's strategic plan and for working with the professional advisors and with the representatives of NCH&C NHS Trust who provide additional services to the charity.

The Charitable Funds Committee comprises two executive members of the board and two non-executive members. Other members of NCH&C staff are invited to attend committee meetings but do not have a vote at those meetings. During the year, the committee members were:

- Andrew Williams Committee Chair, Non-Executive Director
- Andrew Hopkins Director of Finance and Performance
- Dr Venu Harilal Medical Director
- Vacant - one agreed Non-Executive Director attended on a rotational basis.

Members of the Charitable Funds Committee are selected to give the charity a good mix of appropriate professional skills – for example, medical, finance, investment and fundraising.

New members of the Charitable Funds Committee are provided with an induction pack consisting of the governing documents, previous three years trustee's annual reports and accounts, policies and procedures of the Charity as well as the HFMA's Practical guide: NHS charitable funds and the Charity Commission's guidance: public benefit: running a charity. Appropriate training courses are offered in charity law and administration, and the roles and responsibilities of trustees.

Our staff and advisors.

Norfolk Community Health & Care NHS Trust Charitable Fund has two staff substantive full-time staff from NCH&C, Carol Plunkett is charity development and project manager, and Tracy Harvey is charity administrator and finance officer.

The Charitable Funds Committee is also assisted by several professional advisors, as detailed below:

Bankers:

Barclays Business Banking
3 St James Court
Whitefriars
Norwich
NR3 1RJ

Investment Managers:

Barratt & Cooke Ltd
5-6 Opie Street
Norwich
Norfolk
NR1 3DW

Independent examiners:

Larking Gowen LLP
1st Floor Prospect House
Rouen Road
Norwich
NR1 1RE

Legal advisors:

Mills & Reeve
1 St. James Court
Whitefriars
Norwich
NR3 1RU

Key management personnel remuneration.

NCH&C board members are either executive members who are employees of NCH&C or non-executive members who are remunerated in accordance with the NCH&C's constitution. None of the board members are specifically paid in relation to NCH&C Charitable Fund.

Members of NCH&C's board are required to disclose all relevant interests and register them with the NCH&C Charitable Fund Committee and withdraw from decisions where a conflict of interest arises.

Risk analysis.

As part of the business planning exercise carried out during the year, the Charitable Funds Committee has considered the major risks to which NCH&C Charitable Fund is exposed. They have reviewed systems and identified steps to mitigate those risks. Three major risks have been identified and arrangements have been put in place to mitigate those risks.

Risk 1: Future levels of income.

NCH&C Charitable Fund is reliant on donations to allow it to make grants to NHS bodies. If income falls, then the charity would not be able to make as many grants or enter longer term commitments with the NHS bodies it supports.

The committee mitigates the risk that income will fall by implementing a new strategy that outlines our approach by focusing on diversifying our income streams, and investing across short, medium, and long-term prospective income channels.

The public's support of the NHS was demonstrated through increased donations during the Covid-19 pandemic, particularly the national emergency appeal managed by NHS Charities Together. The social distancing measures in place in 2020 and 2021 have impacted our fundraising.

NHS waiting times for treatment are getting longer – this is partly due to the impact of the pandemic but also demand continues to rise. There is a risk that the public's goodwill for the NHS will reducing making fundraising more difficult.

Towards the end of 2021/22, inflation and the cost of living started to increase. This is continuing to have an impact on the amount that people are able to donate to charity and is being closely monitored.

Risk 2: Fall in investment returns.

NCH&C Charitable Fund generates additional income from investing its cash balances, so the committee considers the loss of investment income to be a major financial risk. The risk is mitigated by retaining expert investment managers, having a diversified investment portfolio and regularly reviewing that portfolio. The committee makes use of benchmarking information when reviewing the portfolio.

Unforeseen changes in the operation of the NHS.

The NHS is, by its very nature, subject to national changes in government policy as well as local politically driven decisions. The Charitable Funds Committee has identified this as a risk as it may mean initiatives or healthcare activities supported by NCH&C Charitable Fund are no longer delivered in the Norfolk area. The committee regularly liaises with NHS partners to understand the changes that they are facing at an early stage.

Wider networks.

NCH&C Charitable Fund is one of over 400 NHS linked charities in England and Wales who are eligible to join NHS Charities Together. As a member, we can discuss matters of common concern and exchange information and experiences, join with others to lobby government departments and others, and to participate in conferences and seminars which offer support and education for our staff and members of the charitable funds committee.

As a member of NHS Charities Together, we have also been very grateful to receive grants from their national emergency appeal.

Related parties.

NCH&C NHS Trust is the corporate trustee of NCH&C Charitable Fund and is therefore a related party.

Our relationship with the wider community.

The ability of NCH&C Charitable Fund to continue its vital support for the NHS in Norfolk is dependent on its ability to raise funds from the public. NCH&C Charitable Fund also continues to forge strong relationships with members of NHS staff whose co-operation the ability to make an effective contribution would be much diminished.

We work closely with the Hospital League of Friends that work in partnership with our community hospitals to ensure collaborative work. The vital work of these groups harnesses local community support to enable NCH&C to do more for patients and its' staff.



Image: Crown Commercial Services volunteering day at Dereham Hospital.

Volunteers.

On behalf of the trustee body, the Charitable Funds Committee would like to pay tribute to:

- the members of staff who give of their time out of hours in support of the work of the NCH&C Charitable Fund, in developing ideas and working with us to identify how we can improve patient care.
- our fundraisers who do so much to encourage others to enrich lives through donations and fundraising activities.



Image: Volunteers Christmas party at Priscilla Bacon Lodge.

Statement of Trustee responsibilities.

The law applicable to charities in England and Wales requires the Trustee to prepare financial statements for each financial year which give a true and fair view of the charity's financial activities during the year and of its financial position at the end of the year. In preparing financial statements giving a true and fair view, the Trustee should follow best practice and:

- Select suitable accounting policies and then apply them consistently;
- Make judgements and estimates that are reasonable and prudent;
- State whether applicable accounting standards and statements of recommended practice have been followed, subject to any departures disclosed and explained in the financial statements; and
- Prepare the financial statements on the going concern basis unless it is inappropriate to presume that charity will continue in operation.

The Trustee is also responsible for keeping accounting records which disclose with reasonable accuracy the financial position of the charity, and which enable them to ascertain the financial position of the charity, and which enable them to ensure that the financial statements comply with the Charities Act 2011, the Charity (Accounts and Reports) Regulations and the provisions of the Trust Deed. The Trustee is also responsible for safeguarding the assets of the charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

The Trustee confirms it has met the responsibilities set out above and complied with the requirements for preparing the accounts on a going concern basis. The financial statements and notes to the accounts set out on pages 25 to 38 attached have been compiled from and are in accordance with the financial records maintained by the Trustee.

By Order of the Trustee



Andrew Hopkins **Date:** 29/11/2023
Director of Finance and Performance on behalf of the Corporate Trustee



Date: 15/09/2023

Andrew Williams
Chair of the Charitable Funds Committee on behalf of the Corporate Trustee

Independent Examiner's Report to the Trustee of Norfolk Community Health and Care NHS Trust Charitable Fund

I report to the charity trustees on my examination of the accounts of the charity for the year ended 31 March 2023 which are set out on pages 25 to 38.

This report is made solely to the Trustee, as a body, in accordance with section 149 of the Charities Act 2011 and regulations made under section 149 of that Act. My work has been undertaken so that I might state to the Trustee those matters that are required to be stated in an Independent examiner's report and for no other purpose. To the fullest extent permitted by law, I do not accept or assume responsibility to anyone other than the charity and the Trustee as a body, for this examination, for this report, or for the statements made.

Responsibilities and basis of report

As the charity's trustees you are responsible for the preparation of the accounts in accordance with the requirements of the Charities Act 2011 ('the 2011 Act').

I report in respect of my examination of the charity's accounts carried out under section 145 of the Act and in carrying out my examination I have followed all the applicable Directions given by the Charity Commission under section 145(5)(b) of the 2011 Act.

Independent examiner's statement

I have completed my examination. I confirm that no material matters have come to my attention in connection with the examination giving me cause to believe that in any material respect:

1. accounting records were not kept in respect of the charity as required by section 130 of the 2011 Act; or
2. the accounts do not accord with those records; or
3. the accounts do not comply with the applicable requirements concerning the form and content of accounts set out in the Charities (Accounts and Reports) Regulations 2008 other than any requirement that the accounts give a 'true and fair view' which is not a matter considered as part of an independent examination.

I have no concerns and have come across no other matters in connection with the examination to which attention should be drawn in this report in order to enable a proper understanding of the accounts to be reached.

Signed: 

Giles Kerkham, FCA DChA
Larking Gowen LLP,
Chartered Accountants
1st Floor Prospect House
Rouen Road
Norwich
NR1 1RE

Date: 25 September 2023

Statement of Financial Activities for the year ending 31 March 2023

	Note	Unrestricted Funds 2022/23 £'000	Restricted Funds 2022/23 £'000	Endowment Funds 2022/23 £'000	**Total Funds 2022/23 £'000**	Total Funds 2021/22 £'000
Income and Endowments from:						
Donations, legacies and Gifts in Kind	2.1	94	38	0	132	51
Charitable activities	2.2	5	67	0	72	42
Income from investments		11	0	7	18	18
Transfer between funds	9	23	(16)	(7)	0	0
Total incoming resources		**133**	**89**	**0**	**222**	**111**
Expenditure on:						
Charitable Activities	4.2	(173)	(131)	0	(304)	(138)
Fundraising costs	4.1	(11)	0	0	(11)	(23)
Governance costs	4.2	(2)	0	0	(2)	(2)
Amortisation	5.2	(2)	0	0	(2)	(2)
Total expenditure		**(188)**	**(131)**	**0**	**(319)**	**(165)**
Net incoming/(outgoing) resources before other recognised gains/(losses)		**(55)**	**(42)**	**0**	**(97)**	**(55)**
Net gains/(losses) on investments	5	(21)	(2)	(1)	(24)	67
Net movement in funds		**(76)**	**(44)**	**(1)**	**(121)**	**13**
Reconciliation of funds:						
Total funds brought forward		796	103	36	935	922
Total funds carried forward	10	**720**	**59**	**35**	**814**	**935**

The notes on pages 27 to 38 form part of these accounts

Balance Sheet at 31 March 2023

	Note	Unrestricted funds 31 March 2023 £'000	Restricted funds 31 March 2023 £'000	Endowment funds 31 March 2023 £'000	**Total funds 31 March 2023 £'000**	**Total funds** 31 March 2022 **£'000**
Fixed assets:						
Intangible Assets - Harlequin	5.2	3	0	0	3	5
Investments	5.1	647	18	35	700	724
Total fixed assets		**650**	**18**	**35**	**703**	**729**
Current assets:						
Debtors	6	0	68	0	68	191
Cash at bank and in hand		139	128	0	267	121
Gifts in Kind Stock		0	0	0	0	0
Total current assets		**139**	**196**	**0**	**335**	**312**
Liabilities:						
Creditors falling due within one year	7	(69)	(155)	0	(224)	(106)
Net current assets / (liabilities)		**70**	**41**	**0**	**111**	**206**
Total net assets / (liabilities)		**720**	**59**	**35**	**814**	**935**
The funds of the charity:						
Unrestricted funds		720	0	0	720	796
Restricted funds		0	59	0	59	103
Endowment funds		0	0	35	35	36
Total charity funds	10	**720**	**59**	**35**	**814**	**935**

Approved by the Charitable Funds Committee at its meeting on 5 September 2023.



Andrew Williams
Chair of the Charitable Funds Committee on behalf of the Corporate Trustee

Notes to the financial statements

1. Accounting Policies

The policies adopted by the charity in preparing these financial statements are described below. They have been applied consistently in dealing with items considered material in relation to the financial statements.

(a) Basis of preparation
The financial statements have been prepared under the historic cost convention, with the exception of investments which are measured at fair value. The financial statements have been prepared in accordance with the Statement of Recommended Practice (SORP): Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standard applicable to the UK and Republic of Ireland (FRS 102) effective 1 October 2019 and the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102) and the Charities Act 2011 and UK Generally Accepted Practice as it applies from 1 January 2019.

Additional information is provided where it is believed to be useful to the reader.

The Trustee considers there are no material uncertainties about the charity's ability to continue as a going concern. Whilst the Covid-19 pandemic has had an impact on the Charity, it is not such a significant impact as to affect the charity's ability to continue as a going concern. These financial statements have therefore been prepared on a going concern basis.

There are no material uncertainties affecting the financial statements. Fundraising income is almost back to pre-pandemic levels but continues to be affected by the cost-of-living crisis. As a grant making charity with few on-going commitments, reduced income will impact on the level of new grants that can be made in the short term rather than affecting the charity's ability to continue as a going concern. There are no material uncertainties affecting the current year's accounts.

(b) Funds structure
Where there is a legal restriction on the purpose to which a fund may be put, the fund is classified either as a restricted income fund, where the donor has provided for the donation to be spent in furtherance of a specified charitable purpose or as an endowment fund, where the charity restrictions only permit the income of the fund being expended as per the donors wishes.

Unrestricted income funds comprise those funds which the Trustee is free to use for any purpose in furtherance of the charitable objectives. Unrestricted funds include designated funds, where the donor has made known their non-binding wishes or where the Trustee has, at its discretion, created a fund for a specific purpose.

(c) Incoming resources
All incoming resources are recognised once the charity has entitlement to the resources, it is probable (more likely than not) the resources will be received, and the monetary value of incoming resources can be measured with sufficient reliability.

Where there are terms or conditions attached to incoming resources, these terms or conditions must be met before the income is recognised. Where terms or conditions have not been met or uncertainty exists as to whether they can be met then the relevant income is not recognised in the year. If received, incoming resources with unmet terms or conditions are deferred and shown on the balance sheet as deferred income.

(d) Incoming resources from legacies
Legacies are accounted for as incoming resources either upon receipt or where the receipt of the legacy is probable. Receipt is probable when:
- confirmation has been received from the representatives of the estate that probate has been granted;
- the executors have established there are sufficient assets in the estate to pay the legacy; and
- all conditions attached to the legacy have been fulfilled or are within the charity's control.

If there is uncertainty as to the amount of the legacy and it cannot be reliably estimated then the legacy is shown as a contingent asset until all the conditions for income recognition are met.

(e) Incoming resources from endowment funds

The incoming resources receivable from the investment of endowment funds are restricted for NHC&H charity and have been earmarked in accordance with the donor's stated wishes.

(f) Incoming resources from donations in kind

Gifts in kind, such as food and care packages are not accounted for when they are accepted and immediately distributed unless a single donation is material.

Gifts of tangible assets such as microwaves and fridges are recognised as a donation at fair value (market price) on receipt and charitable expenditure when they are distributed.

Where gifts in kind are held before being distributed to beneficiaries, they are recognised at fair value as stock until they are distributed.

(g) Resources expended and irrecoverable VAT

All expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all costs related to each category of expense shown in the Statement of Financial Activities. Expenditure is recognised when the following criteria are met:

- there is a present legal or constructive obligation resulting from a past event;
- it is more likely than not that a transfer of benefits (usually a cash payment) will be required in settlement; and
- the amount of the obligation can be measured or estimated reliably.

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

(h) Recognition of expenditure and associated liabilities as a result of a grant

Grants payable are payments made in furtherance of the charitable objectives of the funds held on trust, primarily being relief of those who are sick.

Grant payments are recognised as expenditure when the conditions for their payment have been met or where there is a constructive obligation to make a payment.

A constructive obligation arises when:

- the charity has communicated its intention to award a grant to a recipient who then has a reasonable expectation that they will receive a grant or
- the charity has made a public announcement about a commitment which is specific enough for the recipient to have a reasonable expectation that they will receive a grant or
- there is an established pattern of practice which indicates to the recipient the charity will honour its commitment.

The Trustee has control over the amount and timing of grant payments and consequently where approval has been given by the Trustee and any of the above criteria have been met the a liability is recognised. Grants are not usually awarded with conditions attached. However, when they are, then those conditions must be met before the liability is recognised.

(i) Allocation of support and governance costs

Support costs are those costs which do not relate directly to a single charitable activity. These include some staff costs, costs of administration and some of the overhead costs of the Corporate Trustee's. Governance costs include external examination, and any other regulatory fees. The analysis of support and governance costs are shown in note 4.

(j) Fundraising costs

The costs of generating funds are those costs attributable to generating income for the charity, other than those costs incurred in undertaking charitable activities. Fundraising costs include some of the salaries as well as expeniture for fundraising activites.

(k) Charitable activities

Costs of charitable activities comprise all costs incurred in the pursuit of the charitable objects of the charity. These costs, where not wholly attributable, are apportioned between the categories of charitable expenditure in addition to the direct costs. The total costs of each category of charitable expenditure therefore include support costs and an apportionment of overheads.

Note 2.1 Income from donations, legacies and Gifts in Kind

	Unrestricted Funds 2022/23 £'000	Restricted Funds 2022/23 £'000	Endowment Funds 2022/23 £'000	**Total Funds 2022/23 £'000**
Donations	45	38	0	**83**
Legacies	45	0	0	**45**
Gift Aid	3	0	0	**3**
Gifts in Kind	1	0	0	1
Other income	0	0	0	0
Donations, legacies and GIK total	94	38	0	**132**

Donations includes gifts from members of the public, relatives of patients and staff, as well as funding from organisations such as leagues of friends and similar support groups.

	Unrestricted Funds 2021/22 £'000	Restricted Funds 2021/22 £'000	Endowment Funds 2021/22 £'000	**Total Funds 2021/22 £'000**
Donations	34	13	0	**47**
Legacies	1	0	0	**1**
Gift Aid	2	0	0	2
Gifts in Kind	0	1	0	1
Other income	0	0	0	0
Donations, legacies and GIK total	37	14	0	**51**

Note 2.2 Analysis of income from charitable activities

	Unrestricted Funds 2022/23 £'000	Restricted Funds 2022/23 £'000	Endowment Funds 2022/23 £'000	**Total Funds 2022/23 £'000**
Stage 3 grant from NHS Charities Together	0	28	0	**28**
NHS Charities Together Development grant	0	29	0	**29**
Grants other	5	10	0	**15**
Charitable activities total	5	67	0	**72**

	Unrestricted Funds 2021/22 £'000	Restricted Funds 2021/22 £'000	Endowment Funds 2021/22 £'000	**Total Funds 2021/22 £'000**
Stage 3 grant from NHS Charities Together	0	28	0	28
NHS Charities Together Development grant	0	0	0	0
Grants other	2	12	0	14
The notes on pages 27 to 38 form part of these	2	40	0	**42**

In 2020/21, 2021/22, 2022/23 the charity received grants from the NHS Charities Together Covid-19 emergency appeal
Other grants have come from other charities.

Note 3. Role of volunteers

The charity benefits from volunteers to assist with its functioning. They perform two main roles:

• Fund Holders advise and approve the strategic spend of designated funds for their directorate. Fund Holders report on the positive impact large expenditure has on the beneficiaries of the request.

• The Charitable Funds Committee provide an assurance role in enabling the charity to manage how its designated funds are spent. Their role is to assist the Trustee in ensuring that funds are spent appropriately, ensuring that funds are spent in accordance with the Objects of the charity and on activities over and above those normally expected to be provided through NHS funds.

In accordance with the SORP, due to the absence of any reliable measurement basis, the financial contribution of these volunteers is not recognised in the accounts.

(l) Fixed asset investments
Investments are a form of basic financial instrument. Fixed asset (non current) investments are initially recognised at their transaction value and are subsequently measured at their fair value (market value) at the balance sheet date (31 March each year). The Statement of Financial Activities includes the net gains and losses arising on revaluation and disposals throughout the year. Quoted stocks and shares are included in the balance sheet at the current market value quoted by an investment analyst.

The main form of risk to the charity's financial assets is that of volatility in equity and bond markets and investment markets due to wider economic conditions, the attitude of investors to investment risk, and changes in sentiment concerning equities and within particular sectors or sub sectors.

(m) Debtors
Debtors are amounts owed to the charity. They are measured at their recoverable amount.

(n) Cash and cash equivalents
Cash at bank and in hand is held to meet the day to day running costs of the charity as they fall due. Cash equivalents are short term, highly liquid investments, usually in 90 day notice interest bearing savings accounts.

(o) Creditors
Creditors are the amounts owed by the charity. They are measured at the amount that the charity expects to have to pay to settle the debt.

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

(q) Staff costs and pensions
NCHC Trust fully re-charged NCHC Charitable Fund for the 2 members of staff who work full time for the charity.

Staff members belong to the NHS Pension Scheme which is an unfunded defined benefit scheme which is accounted for as a defined contribution scheme. The recharge from NCHC Trust includes the employee contributions to that scheme. For more information on the NHS Pension Scheme refer to the NCHC Trust annual report and accounts.

(r) Intangible assets
Intangible assets are non-monetary assets without physical substance which are capable of being sold separately from the charity's business or which arise from contractual or other legal rights. They are recognised only where it is probable that future economic benefits will flow to, or service potential be provided to the charity, and where the cost of the asset can be measured reliably.

Intangible fixed assets are amortised at rates calculated to write then down to estimated residual values on a straight line basis over their estimated useful lives. Computer software is expected to have a useful life of 5 years.

Note 4. Expenditure

The charity incurs three broad types of expenditure:
- grant funded activity. The charity mainly pursues its charitable activities by making grants rather than directly undertaking charitable activities;
- fundraising costs; and
- support costs.

Grant funded activity is allocated directly to the fund or funds the grant is made from.

Fundraising costs are allocated fully to a sub fund of the Norfolk General Fund, an unrestricted fund.

Support costs are made up of:
1. Governance costs. These are the costs associated with the governance arrangements of the charity and include the preparation and independent review of the annual financial statements and costs to provide financial information throughout the year to the Charitable Funds Committee.

2. Other support costs, primarily recharges of the Charity Development and Project Manager, Charity Administrator and Finance Officer and related charges by the Corporate Trustee when performing work for the charity.

Support costs which are not attributable to a single activity must also be apportioned between the activities being supported.

Note 4.1 shows the allocation of fundraising costs to the different fund types.

Note 4.2 shows the allocation of support costs to the categories of charitable expenditure incurred.

Note 4.1 Analysis of fundraising expenditure

	Unrestricted	**Restricted**	**Endowment**	**Total 2022/23**
	£'000	£'000	£'000	**£'000**
Fundraising office	10	0	0	**10**
Other fundraising costs	2	0	0	**2**
Total	**11**	**0**	**0**	**11**

	Unrestricted	**Restricted**	**Endowment**	**Total 2021/22**
	£'000	£'000	£'000	**£'000**
Fundraising Manager cost	17	0	0	**17**
Other fundraising costs	6	0	0	**6**
Total	**23**	**0**	**0**	**23**

Note 4.2. Analysis of charitable expenditure

The charity did not undertake any direct charitable activites on its own account during the year.
All of the charitable expenditure was in the form of grant funding.

	2022/23	2022/23	**2022/23**
	Grant Funded Activity	**Support costs**	**Total expenditure on charitable activities**
	£'000	**£'000**	**£'000**
Patient care - general	98	54	**152**
Patient Gifts in Kind	1	0	**1**
Patient care - staff training	8	10	**18**
Staff Welfare	8	29	**37**
Staff Gifts in Kind	0	0	**0**
COVID19 - Patient Care	63	24	**87**
COVID19 - Patient Gifts in Kind	0	0	**0**
COVID19 - Staff Wellbeing	6	3	**9**
COVID19 - Staff Gifts in Kind	0	0	**0**
COVID19 - Staff Training	0	0	**0**
COVID19 - Volunteer Expenses	(1)	1	**(0)**
Total	**183**	**121**	**304**

	2021/22	2021/22	**2021/22**
	Grant Funded Activity	**Support costs**	**Total expenditure on charitable activities**
	£'000	£'000	**£'000**
Patient care - general	**(7)**	39	**32**
Patient Gifts in Kind			
Patient care - staff training	**10**	4	**14**
Staff Welfare	**5**	3	**8**
Staff Gifts in Kind			
COVID19 - Patient Care	**13**	14	**27**
COVID19 - Patient Gifts in Kind	**0**	0	**0**
COVID19 - Staff Wellbeing	**29**	28	**57**
COVID19 - Staff Gifts in Kind	**0**	0	**0**
COVID19 - Staff Training	**(1)**	1	**(0)**
COVID19 - Volunteer Expenses	**0**	0	**0**
Total	**49**	**88**	**137**

The notes on pages 27 to 38 form part of these accounts

	31 March 2023	**31 March 2022**
	£'000	£'000
Fundraising office #	87	69
Administrative support costs	34	19
Total	**121**	**88**

Fundraising office costs relate to staff time dealing with grant activity, with both internal stakeholders and external bodies such as Friends groups and grant makers.
The majority of the time was spent on overseeing expenditure granted in the previous year.

Governance costs breakdown

	31 March 2023	**31 March 2022**
	£'000	£'000
Independent examination	2	2
Other governance costs	0	0
Total	**2**	**2**

Note 4.3. Analysis of staff costs and renumeration of key management personnel

The average number of full-time equivalent employees during the year was 2 (2021/22: 2.08) with all employees involved in providing support services to charitable activities or the governance of the charity.

Staff costs

	31 March 2023	31 March 2022
	£'000	£'000
Salaries and Wages	77	67
Social Security Costs	11	10
Other Pension Costs	9	7
Total	**97**	**84**

The charity receives corporate support from Norfolk Community Health and Care NHS Trust. An annual charge to cover the cost of these is authorised by the Charitable Funds Committee, which for 2022/23 totalled £13,834 (2021/22: £13,583). The increase in cost is due salary increases.

The Charity considers its key management personnel to be the members of the Norfolk Community Health and Care NHS Trust management board acting on behalf of the corporate trustee. For 2022/23 this was the Director of Finance and Performance and the Medical Director. There was no recharge of employment benefits for key management personnel during 2022/23 or 2021/22.

No employees had emoluments in excess of £60,000 (2021/22: none).

Note 4.4. Trustee remuneration, benefits and expenses

Members of the Trust board give their time freely and receive no remuneration for the work that they undertake in relation to the Charity. However, they can claim expenses to reimburse them for the costs that they incur in fulfiling their duties relating to the Charity - these include travelling specifically for charitable funds committee meetings and charity specific training events.

No expenses were claimed from the Charity by committee members in 2022/23 or 2021/22.

Note 4.5. Independent examination fees

The independent examiner's remuneration of £2,460 (2021/22: £2,280) related solely to the examination and other fees incurred £nil (2020/21: nil).

Note 5. Assets

Note 5.1 Movement in fixed asset investments

Movement in fixed asset investments

	2022/23	2021/22
	£'000	£'000
Market value bought forward at 1 April	725	757
Add additions to investments at cost	84	93
Less disposals proceeds	(92)	(188)
Increase / (decrease) in cash held within the portfolio*	7	(4)
Add net (loss)/gain on revaluation	(24)	67
Market value as at 31 March	**700**	**725**

* A small proportion of the investment portfolio is held as cash. This is primarily due to timing differences between the sale of investments and the purchase of new investments. The cash amount is included within the investments balance in the balance sheet, rather than as 'cash at bank and in hand', given it is a part of the overall investment managed portfolio.

All investments are financial assets carried at fair value through net income and are managed by expert advisors.

Fixed asset by type

	31 March 2023	31 March 2022
	£'000	£'000
Listed equity	690	723
Cash*	10	2
Total	**700**	**725**

All investments are held at their fair value and are managed by expert advisors.

Realised and unrealised gains and losses are apportioned to individual restricted and endowment funds and the Norfolk General Fund (an unrestricted fund) on the basis of the average balances held on unrestricted, restricted and endowment funds.

Note 5.2 Intangible Fixed Assets

This relates to the accounting software which will be amortised over five years

	31 March 2023	31 March 2022
	£'000	£'000
Opening Balance	5	7
Additions	0	0
The notes on pages 27 to 38 form part of these accounts	(2)	(2)
Closing balance	**3**	**5**

Note 6. Analysis of Current Debtors

Debtors due in less than one year	**31 March 2023 £'000**	31 March 2022 £'000
Other Debtors	68	191
Total	68	191

The debtor balance is made up primarily of three significant debtors; Kelling Friends £56k and North Walsham Friends £9k. (2020/21: Debtors - Dereham Garden Room £150k, Kelling Friends £14k, North Walsham Friends £13k and The National Lottery Fund grant £8k).

Note 7. Analysis of Current Liabilities

Creditors due in less than one year	**31 March 2023 £'000**	31 March 2022 £'000
Trade Creditors	0	0
Accruals	224	106
Total	224	106

The accruals relate to expenditure requests which have been approved and are outstanding at balance date.

Note 8. Related Party Transactions

Norfolk Community Health and Care NHS Trust is the corporate trustee of the charity and is its main grant beneficiary along with other organisations working in partnership with it - they are therefore related parties. The Trustee appoints Members of the Charitable Funds Committee, a sub-committee of the Norfolk Community Health and Care NHS Trust Board.

Transactions between the Charity and the Trust during the year were in relation to salary payments for its staff, payment of some Charity supplier invoices that were initally paid by the Trust and refunded by the Charity and for administrative and management costs.

The charity did not pay any expenses or honoraria to any member of the Norfolk Community Health and Care NHS Trust Board (the Trustee) or the Charitable Funds Committee in the year 2022/23. (2021/22: £0)

The charity receives corporate support from Norfolk Community Health and Care NHS Trust. An annual charge to cover the cost of these is authorised by the Charitable Funds Committee, which for 2022/23 totalled £13,834 (2021/22: £13,583).

At the end of the financial year £31,360 was owed by the Charity to the Trust. (2021/22: £nil)

Note 9. Transfers between funds

During the year £16,316 was transferred from restricted funds to designated funds. A restriction was removed on an incorrectly classified fund. £6,850 in income dividends was transferred from the Swaffham endowment fund to a related designated fund.

Note 10. Movement of major funds

The charity has three categories of funds, as explained in note 1 (b), funds structure.

The analysis below shows the opening and closing value including the income and expenditure movement of funds.

	1 April 2022	Income	Expenditure	Gains & Losses	Transfers	31 March 2023
Unrestricted funds						
General Fund #1	49	25	(28)	(2)	3	47
Swaffham Hospital	55	1	0	(2)	7	61
Community Specialist Care Team PBL	0	0	0			0
Palliative Community Care	76	8	(19)	(2)		63
PBL	258	2	(70)	(8)		182
Caroline House	19	12	(14)	(1)		16
LEGACY Zienia Merton	130	1	0	(4)		127
LEGACY Pauline Rosetta Basted (Kelling Hospital)	41	0	0	(1)		40
LEGACY Brian Anthony Knappett (Wymondham)	12	0	(9)	(0)		3
LEGACY Patricia Ramm (Swaffham Hospital)	13	1	(3)	(1)		10
LEGACY Audrey Edwards (PBL)	25	(0)	0	(1)		24
LEGACY Dorothea Burton (Swaffham)	15	1	0	(1)		15
LEGACY Dorothea Burton (Kelling)	5	1	0	(1)		5
LEGACY Vera May Ive (PBL)	0	33	(2)	0		32
Designated Funds (22 funds)	100	23	(41)	3	13	98
Total unrestricted funds	**796**	**106**	**(186)**	**(21)**	**23**	**720**
Restricted funds						
Margaret Rose Goff Learning Disabilities #1	20	0	(3)	(1)	(16)	0
Kelling Training Fund	16	(0)	(6)	(1)		9
North Walsham Dayroom Fund	0	0	0			0
Development Grant	0	29	0	0	0	29
COVID19 Grants	44	28	(68)			4
Other Restricted Funds (9 funds)	23	49	(55)	(0)		17
Total restricted funds	**103**	**106**	**(132)**	**(2)**	**(16)**	**59**
Endowment funds						
Swaffham Shephard CIP	36	7	0	(1)	(7)	35
Total endowment funds	**36**	**7**	**0**	**(1)**	**(7)**	**35**
Total funds	**935**	**219**	**(318)**	**(23)**	**0**	**814**

#1 Margaret Rose Goff Fund closed, balance transferred to General fund

	1 April 2021	Income	Expenditure	Gains & Losses	Transfers	31 March 2022
Unrestricted funds						
General Fund	90	14	(58)	4	(1)	49
Swaffham Hospital	54	1	(5)	4	1	55
Community Specialist Care Team PBL	28	0	0		(28)	0
Palliative Community Care	3	8	(10)	5	70	76
PBL	227	4	9	18		258
Caroline House	16	4	(3)	0	2	19
Legacy Zienia Merton #1	120	1	0	9		130
Legacy Pauline Rosetta Basted (Kelling Hospital)	38	0	0	3		41
Legacy Brian Anthony Knappett (Wymondham)	11	0	0	1		12
LEGACY Patricia Ramm (Swaffham H	25	2	(16)	2		13
LEGACY Audrey Edwards (PBL)	23	0	0	2		25
LEGACY Dorothea Burton (Swaffham)	15	0	0	0		15
LEGACY Dorothea Burton (Kelling)	5	0	0	0		5
Designated Funds (85 funds)	124	15	(19)	12	(32)	100
Total unrestricted funds	**777**	**49**	**(102)**	**60**	**12**	**796**
Restricted funds						
Margaret Rose Goff Learn Disab	16	3	0	1		20
Kelling Training Fund	23	2	(10)	1		16
North Walsham Dayroom Fund	10	1	0		(11)	0
Development Grant	0	0	0	0	0	0
COVID19 Grants	52	32	(40)	1		45
Other Restricted Funds (8 funds)	12	23	(12)	0	(1)	22
Total restricted funds	**113**	**61**	**(62)**	**3**	**(12)**	**103**
Endowment funds						
Swaffham Shephard CIP	33	(0)	0	3		36
Total endowment funds	**33**	**(0)**	**0**	**3**	**0**	**36**
Total funds	**922**	**110**	**(164)**	**66**	**(0)**	**935**

#1 Zienia Merton negative income - reduction in accrued income as legacy was less than originally expected

#2 Ida May Riley - transfer funds to Norfolk General fund as the service the legacy was requested to be spent on no longer exists

Balance Sheet at 31 March 2022

	Note	Unrestricted funds 31 March 2022 £'000	Restricted funds 31 March 2022 £'000	Endowment funds 31 March 2022 £'000	**Total funds 31 March 2022 £'000**
Fixed assets:					
Intangible Assets - Harlequin	5.2	5	0	0	5
Investments	5.1	649	39	36	724
Total fixed assets		**654**	**39**	**36**	**729**
Current assets:					
Debtors	6	5	186	0	191
Cash at bank and in hand		182	(61)	0	121
Gifts in Kind Stock		0	0	0	0
Total current assets		**187**	**125**	**0**	**312**
Liabilities:					
Creditors falling due within one year	7	(45)	(61)	0	(106)
Net current assets / (liabilities)		**142**	**64**	**0**	**206**
Total net assets / (liabilities)		**796**	**103**	**36**	**935**
The funds of the charity:					
Endowment funds		796	0	0	796
Restricted funds		0	103	0	103
Unrestricted funds		0	0	36	36
Total charity funds	11	**796**	**103**	**36**	**935**

NORFOLK COMMUNITY HEALTH AND CARE NHS TRUST CHARITABLE FUND

England & Wales - Charity number 1051173

Accounts

TRUSTEE ANNUAL REPORT
AND FINANCIAL STATEMENTS
2021-2022



Norfolk Community Health and Care NHS Trust Charitable Fund

Registered Charity No: 1051173

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1.1 Welcome to our annual report for 2021/22

We are a registered charity that works for the benefit of NHS patients and their families from Norfolk and Waveney and the surrounding area, whether they are Norfolk Community Health and Care (NCH&C) NHS Trust patients or not and we work closely with our Corporate trustee NCH&C NHS Trust.

We exist to provide resources and facilities to meet the needs of our patients and their families. In this second year of the Covid-19 pandemic, the new projects intended to mitigate its impact are settling in and we have restarted some projects that were paused during the first year.

Key highlights of our year include:

- Spending the remaining stage 1 grant from NHS Charities Together to support the immediate challenges of the pandemic on patients and staff:
- Receiving a further £27,500 stage 3 recovery grant from NHS Charities Together to support resilience and recovery.
- Successful Corporate fundraising partnership to fund equipment for Thetford Community Nursing team.
- Provision of new uniforms for volunteers across NCH&C.
- Funded £4,100 for 4 Mental Health First Aid 'Train the Trainer's to build mental health support capacity across the Trust.
- Installation of a new outdoor multi-gym for staff at North Walsham Hospital.
- Thetford Golf Club Charity of the Year relationship raised £8,285 for Caroline House to fund rehabilitation equipment.
- Refurbishment of Mill Lodge garden for patients with learning disabilities.
- Employee volunteering project at Squirrels children's respite service with Enterprise to expend a funding grant of £2,000 grant.
- Received £1,530 from Yorkshire Building Society to fund BISSKit specialist equipment for Early Stroke Discharge team patients.
- Funded £10,419 in training equipment for Community Training Hubs for staff.

Your donations have made this work possible, and your future donations are the key to our continued success. I would like to thank everyone who has donated gifts or money, as well as our staff that have shown such exceptional commitment to supporting patients over the last 2 years, and continue to do so.

As Covid-19 pandemic moves to an endemic disease, we will continue to focus on helping the Norfolk and Waveney community to live healthy lives. If you would like to get involved, details are available at the end of this report.

Andrew Williams **June 2022.**

1.2 Who we are

Norfolk Community Health and Care (NCH&C) NHS Trust Charitable Fund (NCH&C Charitable Fund) is an independent registered charity, number 1051173. It exists for the benefit of NHS patients, and their families and carers, primarily those of Norfolk Community Health and Care NHS Trust. The charity enhances patient care through activities within in-patient hospitals and local clinics, through benefiting patients and their families and carers being treated at home, and through preventative information to empower people to avoid further treatment or reduce their risk of health problems.

We provide activities that are above and beyond those funded by the NHS, and in doing so make a real difference for patients, families, carers and the staff who look after them.



Our key partner in fulfilling our charitable mission and objectives is the NCH&C NHS Trust. NCH&C provides community-based NHS health and care via more than 70 different service locations across Norfolk as well as providing a specialist Early Supported Discharge service to stroke patients in Norfolk and Suffolk.

Serving a population of nearly 900,000 people, NCH&C delivers community dentistry, services for children, young people and families, therapies, community nursing, end of life care and specialist nursing, among others.

We believe that people are better looked after locally and this belief drives us to work hard to bring our expert care to patients in our seven community hospitals, within GP surgeries and in patients' own homes. Our focus is on continually improving the quality of care we offer to local people and on improving access to that care, helping people to move seamlessly from one service to another.

The foundation upon which the charity's vital work is made possible are the donations, legacies, grants, and community funding we receive on behalf of our beneficiaries. This Annual Report will tell you more about what we do, what we have achieved, and what is possible when we combine our expertise with your support.

We would like you to support us in our work, so please read on to find out more about us, our work, what we have achieved and how we spend the money entrusted to us.

1.3 Our mission and objectives

By raising money and effective management of our existing funds, NCH&C Charitable Fund provides a public benefit by making grants to Norfolk Community Health and Care (NCH&C) NHS Trust to:

- Assist and enhance the care given to patients of NCH&C NHS Trust, and their families and carers.
- Provide amenities for patients of NCH&C NHS Trust.
- Support NCH&C NHS Trust staff wellbeing and development.
- Work with other organisations assisting in the delivery of healthcare and complementary services in the population served by NCH&C NHS Trust.

Grants are made in accordance with charity law, our constitution and the wishes and directions of our donors. In making grants, we endeavour to reflect the wishes of patients and staff by directing funds towards areas they tell us are most in need.

During the year 2021/22, 76 grants totalling £136,000 were made. When considering where to focus our attention, our members of the charitable funds committee have regard to the Charity Commission for England Wales's guidance on public benefit and what this means for NCH&C Charitable Fund.



Our plans are to continue to increase our level of fundraising to deliver a more sustained income target year on year and to create a balanced cashflow while spending down historical donations on allocated projects to benefit more patients.

Picture: NCH&C NHS staff taking part in Festive Feet Friday to raise awareness and funds.

1.4 What we have achieved: highlights from our activities during the year

Our key aim is to serve the NHS patients of NCH&C NHS Trust for the public benefit. By funding equipment, facilities and services we can help the NHS body to provide care to their patients that goes beyond that which they are funded by the state to provide.



Picture: Spokes for Strokes fundraisers cycling event raising money for Caroline House and Ipswich Hospital.

By working with the NHS, we assist patients from all walks of life, irrespective of race, creed, ethnicity or personal or family financial circumstance. We put this aim into practice by helping the patients, their families and carers, and visitors to the hospital by:

- Enhancing the care our hospitals and inpatient units can offer through new equipment and building improvements to deliver better care.
- Investment in the staff who work for the Trust to enhance a knowledgeable, caring and resilient workforce delivering care to patients.
- Funding additional treatments and therapies that offer increased patient benefits or better outcomes for recovery.
- Providing direct support to patients by way of information and better facilities.

We do this through a range of programmes funded by you and the grants provided by NHS Charities Together. Highlights from the main activities undertaken in the year are detailed below to give you a wider understanding of the difference we can make together to lives today, and in the future.

Enhance patient care using specialist equipment:

We use funds to purchase items of equipment that aid rehabilitation and recovery for patients, which are not part of the standard NHS provision. For example, BiSSkiT stands for Biofeedback in Strength and Skill Training and is used as a therapy for people with swallowing difficulties. It is a specialised programme which is not yet widely used in the UK, so it doesn't fall under normal NHS funding. Using a grant from Yorkshire Building Society, we have funded the software and licencing to deliver this service to patients at NCH&C NHS Trust.

A small biofeedback device links up with a laptop to show patients a waveform of the activity of their suprahyoid muscles (which are important muscles for safe swallowing).

When they swallow, the waveform should peak, and the BiSSkiT programme gives the person a target to 'hit' with their swallow. The target size increases or decreases depending on success. The software helps patients to develop a better understanding of how to control their swallowing when it has been disrupted by illness or stroke and the aim is to help patients develop a safer and a more targeted swallow.



Picture: A stroke patient using the BiSSkiT rehabilitation software.

The device helps to improve recovery, regain independence and to provide a better quality of life. One of the major outcomes is a safer swallow. For example, one patient went from completely nil by mouth to being able to eat and drink modified diet and fluids after using BiSSkiT for just 3 weeks.

Supporting the resilience and recovery of staff:

Throughout the pandemic and during this year, we have invested heavily in enhancing the wellbeing and welfare provision of NCH&C NHS Trust to support a resilient and supported workforce.

The Trust wanted to provide additional resource for managers who will be supporting staff throughout this challenging period and the charity funded a further four (16 in 2019/20) Mental Health First Aiders to train more colleagues across the Trust. By providing more awareness about emotional and mental health and wellbeing, the aim was to encourage more open discussions between staff and to reduce the stigma often attached with mental health struggles.

There was an identified need to provide managers with the appropriate skills and knowledge to support staff more effectively and safely, in order to continue delivering excellent patient care. By improving staff emotional and mental health, and wellbeing results in the following patient benefits; improved patient safety and experience, improved staff retention, reinforced public health and prevention messages and mental health advice and guidance for patient wellbeing.



Picture: North Walsham Friends and NCH&C Charitable Funds with the newly installed accessible benches at North Walsham War Memorial Hospital.

Enhancing patient environments and experiences:

During the pandemic, outside space has become even more important and we have funded developments at Dereham Hospital, Mill Lodge Adult Learning Disabilities Respite Service, North Walsham Hospital and Mulberry Ward for stroke patients.

These outside spaces have been developed to provide a safe area for patients to relax in the fresh air, with specialist seating, therapeutic planting and items to create an environment of calm and serenity. Wards can be busy, noisy and stressful and these spaces provide some respite to encourage rehabilitation and recharging for both patients and staff.

The spaces have been vital to visitors during the pandemic, when social distancing and infection control guidelines restricted visiting on our wards. This enabled patients to retain some contact with loved ones and friends to reduce social isolation and improve mood and morale.



Picture: flowers and windchimes providing a relaxing outside rest area at NHC&C.

Investing in staff training and development:

The charity funded four 'geri' manikins, costing £10,400, to enhance training provision for Place Learning Hubs for the delivery of clinical skills training that the Trust provides to all learners' bands 1-5.

The manikins are ideal for preparing students to work with elderly patients and excellent for all levels of health care education – from nursing assistants to preregistration students. This grant has allowed the clinical education team to provide the Health Care Assistant (HCA) Apprentices and HCAs in the organisation with training in basic skills to be able to:

- demonstrate NHS values and behaviours;
- undertake aspects of essential care under supervision;

- discuss aspects of Safeguarding and Mental Capacity;
- escalate concerns if required to an appropriate person / services;
- identify a deteriorating patient and undertake appropriate actions.

The opportunity that this provides in being able to use one piece of equipment for all staff and learners to view and appreciate the patient as a whole as opposed to a leg or an arm is invaluable in teaching privacy, dignity and respect for patients.



Picture: 'ear savers' donated to staff to protect ears during mask wearing throughout the ongoing Covid-19 pandemic.

NHS Charities Together (NHSCT) Covid-19 stage 1 grants:

The charity continued to expend its' grants received by NHSCT to support patient and staff wellbeing through the continuing pandemic by funding:

- digital devices to aid patient communication with loved ones and friends, which reduced isolation and loneliness during recovery.
- provisions for staff and volunteers resourcing the vaccination rollout programme in Trust clinics.
- fresh fruit and snack provisions to staff across the Trust to boost morale and aid resilience through the ongoing pandemic.
- outside space provisions including gazebos and furniture to enable patient visitor access while maintaining social distancing and adhering to infection control guidelines during the pandemic.
- Staff photo name ID badge pilot to enable patients to see staff without Personal Protection Equipment (PPE) and remove communication barriers.

1.5 How we funded our work, our achievements and performance

The following figures are taken from the full accounts approved on the 17th May 2022. For more details, please refer to the full set of accounts. This part of the trustee's annual report comments on the key features of the accounts. In this section, we explain how we raised the money.



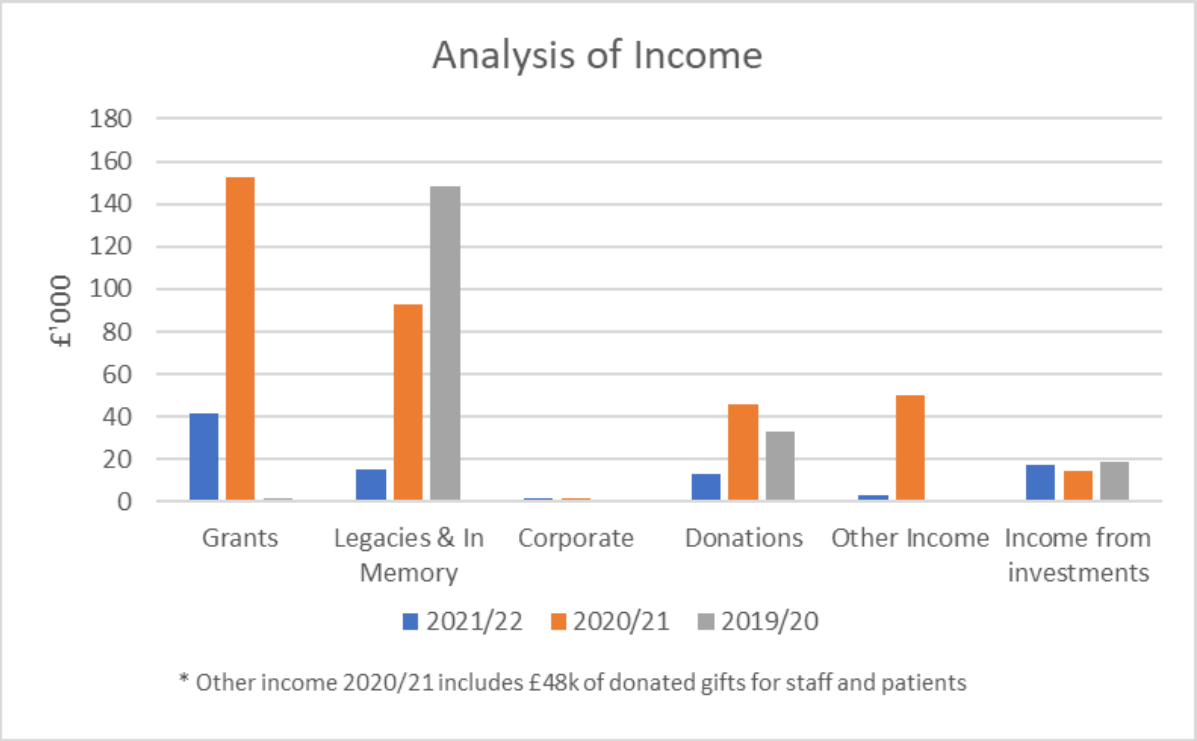
Picture: Alex Mowles cycled from Norwich to Cornwall raising £635 for Beech Ward

Money received £111,000 Money spent £165,000

NCH&C Charitable Fund can only continue to support the work of NHC&C NHS Trust for as long as we continue to receive the money needed. Most of our income comes from voluntary donations through Trusts and Foundations. This year we spent £54,000 more than our income, which was a planned deficit to start spending down historical fund balances.

Money received: source of funds

The chart below shows our main sources of income over the last three years. Our largest source of income has changed over the course of the pandemic from legacy and in memory giving to grants secured from trusts and foundations. This marks a change from the charity being reactive to proactive in its fundraising approach, and also the impact of the ongoing Covid-19 pandemic on general donations.



Legacies and gifts in memory: (£15,000): A gift in a will or a collection in memory of a loved one enables us to enhance the care of our patients now and into the future.

Trust and Foundations: (£41,000): We are very grateful to those charitable trusts and foundations who have provided us with grants to fund particular projects or purchase pieces of equipment.

General donations: (£13,000) The public continues to support the charity by giving individual gifts, taking on personal challenges, raising sponsorship and making donations for designated purposes. This also includes support from local community groups who support our work. We are very grateful for all the support we have been given.

Other income (£22,000) By prudent management of funds not immediately required for use, we have earned dividends of £18,000 and have secured a further £3,000 in Gift Aid on donations received and £1,000 in Gifts in Kind donations.

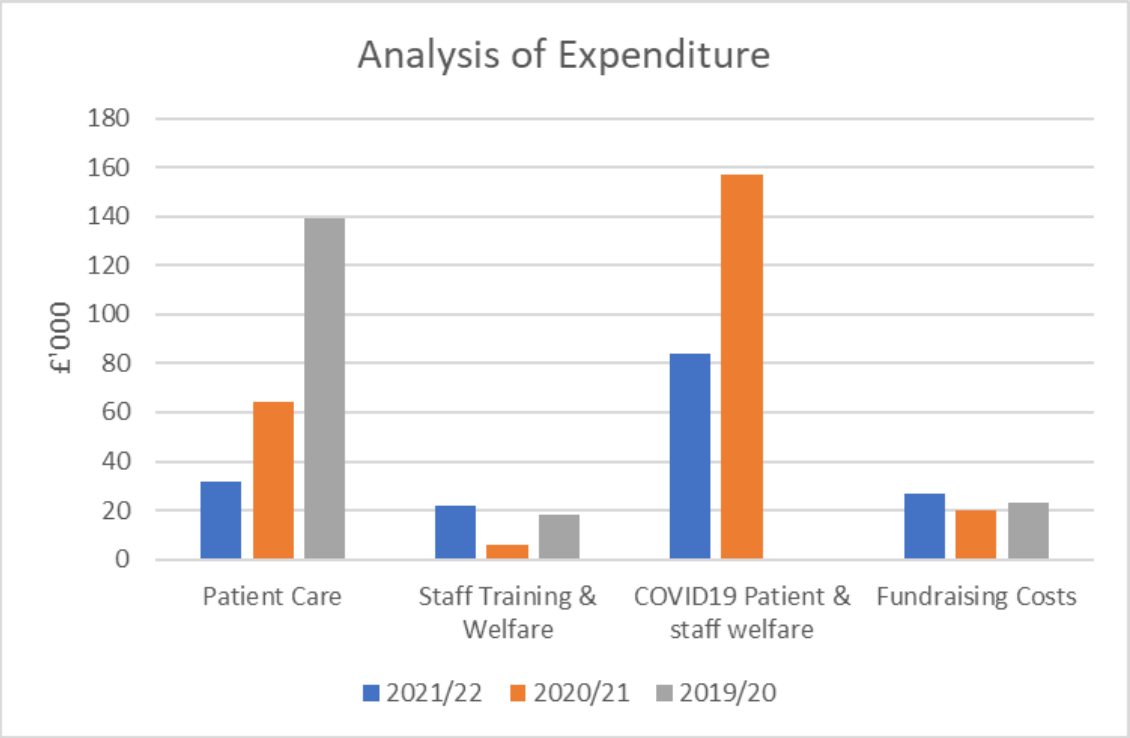
Corporate donations: (£2,000) NCH&C Charitable Fund is grateful to our corporate supporters who have donated time, money and raised funds and awareness to enhance equipment for both patients and staff.



Picture: Enterprise Car Club employee volunteering at 'Squirrels' children's respite service at NCH&C.

1.6 What we spent the money on

As the chart below shows, our largest area of spend was on Covid-19 patient and staff welfare We have spent less on capital buildings due to the economic climate and increasing challenges on the resource of Trust staff to deliver projects.



Our charitable work was made up of three key areas:

- **Patient care and welfare:** The NHS buys much of its own equipment for day-to-day use and has its own capital programme but NHS funds for equipment and capital building are limited and must be used for essential items only. With advances in technology, we can make a real difference in purchasing equipment that provide additional rehabilitation treatments for patients. We spent £32,000 on items to support improved patient care and welfare such as; new patient care information boards, handheld fans for COPD patients, 'gooseneck' tablet/phone holders, noise cancelling headphones and ten specialist riser recliner patient chairs at Swaffham Hospital totalling £14,304.

- **Staff training and welfare:** We spent £22,000 on initiatives to support the staff who care for NCH&C patients. Ensuring staff are well trained and supported benefits the quality of the care they provide. NHC&C NHS Trust as an employer has a duty to ensure its staff are adequately trained

to perform their role, but we can add extra opportunities and support additional training to further improve their knowledge and skills.



Picture: Inpatient using 'gooseneck' phone holder.



Picture: New outdoor gym at North Walsham War Memorial Hospital

- **Covid-19 support:** Our stage 1 grants from NHS Charities Together have supported the continuing challenges to our patients and staff who have been impacted on service delivery. We have invested £84,000 in initiatives to support mental and physical wellbeing of staff and inpatients including a new £13,566 outdoor gym at North Walsham Hospital, providing staff welfare packages, tablet devices for patient communications and outside space facilities to support visiting within guidelines.

1.7 Measuring performance against objectives

Spending the money is only part of the story because we want to demonstrate value for money. To ensure the money is being well spent, applications for funding grants include questions about the objectives, patient benefit and expected outcomes for the proposed project. The charity requests feedback from requesters to establish the extent to which the intended benefits have been realised. We ask what difference this has made to patients. This informs future grant making as well as providing a basis for assessing our performance.

Case Study: Boccia Group at Caroline House

NCH&C Charitable Funds purchased a Boccia Set for the patients at Caroline House. The team are using Boccia during individual patient therapy sessions and have set up a weekly group on the ward.

What is Boccia?

Boccia (pronounced bot-cha) is a Paralympic sport with no Olympic equivalent. It is a target ball sport, very similar to bowls, which tests both muscle control and accuracy. From a seated position, players propel balls to land as close as possible to a white marker ball, known as the Jack.

Patient Feedback:



'I love it'
'It's very nice and sociable'
'gives us competitiveness'
'great fun for everyone'
'it's nice everyone can join in and get out of our rooms'

Staff Feedback:

Hannah is a Rehabilitation Assistant who runs the weekly Boccia Group: 'I enjoy running the group, the patient's engage really well - it is nice to see them socialising and participating!'

Holly is a physiotherapist who set up the Boccia Group: 'I have previously used Boccia in other settings and it has always had such a positive response amongst patients, relatives and staff. It is brilliant that we are now able to have our own weekly Boccia group, and hopefully in the future, we can run this group multiple times a week. It is a brilliant game that is accessible for most of our patients to join in and benefit from. We have a 'Boccia leader board' which brings out a competitive side in everyone!'

1.8 Our fundraising practices

The charity has organised several fundraising events and co-ordinates the activities of our supporters both internal and in the wider community. NCH&C Charitable Fund does not use professional fundraisers or involve commercial participators. There have been no complaints about fundraising activity this year.

The fundraising team has signed up to the Fundraising Regulator's Code of Fundraising Practice and all fundraising guidance and working practices are compliant. The Charity Development and Project Manager is also registered with the Chartered Institute of Fundraising (CIOF) to receive guidance from the sector.

Any fundraising communication is undertaken under guidance from the Charity Commission. Regular correspondence is made through two annual newsletters to keep supporters who have opted in to keep up to date on the charity activities, and there are clear instructions on how a person can be removed from the mailing list.

1.9 Our fundraising performance

During the year, the total donations, legacies and income from fundraising came to £111,000 against a plan of £290,000. The pandemic has significantly impacted our income, and we have switched to more online and virtual fundraising to compensate for the drop in income around legacies and in memoriam donations whilst identifying and submitting funding proposals for grants for external suppliers. We expect this to be the case in 2022/23 and will continue to review our plans.



We benchmark our fundraising activity with our peers through NHS Charities together and monitor our fundraising performance. Our income raised and expenditure figures are within the top third of the community NHS Community Trusts that submitted their figures. (Data was taken from the most recent NHS Charities Together Financial Comparison dashboard for financial year 2019/20).

Picture: Chloe Smith (therapy assistant) raised £250 with her skydive.

1.10 What we plan to do with your donations: our future plans

We will achieve our mission by working with the NHS to develop the facilities to treat patients now and in the future. We will manage the funds effectively and work with our Trust teams to ensure that donations are used where they will have the most benefit for our patients.







Our detailed plans for 2022/23 are:

- Expand our fundraising activities towards achieving a stable £250,000 income target year on year (which represents a 125.225% increase from the current year income achievement). The pandemic has impacted our fundraising plans, and we expect that the increased cost of living will impact the public's ability to make donations.
- Increase our applications to external fundraising sources. The grants we have received from NHS Charities Together in the last 2 years have negated the drop in pre-pandemic income. With the ongoing economic difficulties, we anticipate that income will continue at lower levels.
- Expend the Stage 3 grant from NHS Charities Together by investing in a series of outside space development across multiple Trust sites to improve staff and patient wellbeing.
- Start to accrue expenditure for planned projects in relation to historical donations at Swaffham Hospital, Priscilla Bacon Lodge and Wymondham Health Centre.
- Provide funding to support staff wellbeing due to the ongoing challenges of the pandemic.

Your support makes these plans possible and to help us, please do consider making a donation.

1.11 How we manage the money

Our grant making policy

NCH&C Charitable Fund makes grants from both its unrestricted and restricted funds. The grants from restricted funds must be used in accordance with the conditions attached to the donation. In 2021/22 a restricted fund was established for the Stage 1 grant received from NHS Charities Together (NHSCT) and that funding has been spent during this year. We expect to continue to receive money from NHS Charities Together for Stage 3 funding as they develop their fundraising strategy. Within the unrestricted funds, grants are made from general funds and designated funds.



Picture: our new charitable fund donation forms informing donors about the charity.

General Funds: These funds are received by NCH&C Charitable Fund with no particular preference expressed by donors. Grants provided from this fund are particularly targeted at projects in areas that do not have available designated funds to assist them.

Designated Funds: These funds are established for a particular place, service, team or set of patients nominated for support by the donor. They are overseen by Fund Holders who can make recommendations around spending, in accordance with the charity policy and procedures and the funds can be spent at any time.

Endowment Fund: NCH&C Charitable Fund manages a separate endowment which cannot be spent but which produces an income. The income is transferred to the relevant designated fund to be spent in accordance with the donor instructions.

1.12 Our reserves policy

The Charitable Funds Committee has established a reserves policy as part of its plan to provide long term support to NCH&C Charitable Fund.

The Charitable Funds Committee calculate the reserves as that part of the charity's unrestricted income funds that is freely available after taking account of designated funds that have been earmarked for specific spending.

The free reserves at 31st March 2022 is £49,000 and are calculated as follows:

Total unrestricted funds £796,000

Less designated funds £747,000

Total free reserves £49,000

The Charitable Funds Committee intends that designated funds are spent within a reasonable period of receipt and therefore expects to only maintain reserves sufficient to provide certainty of funding for the continued grant making. Therefore, the target range for reserves of 6-12 months is between £51,000 to £102,000.

The current reserves are marginally below the lower level of the target range, which is due to the impact of the pandemic on fundraising and donations with designation specified by the Trust. The Committee will be reviewing its plans to improve the reserves level during the forthcoming year and does not foresee any negative impact on either liquidity or the ability to continue making grants with the current level of reserves, given the sizeable value of investments held by the Charity.

1.13 About our investments

Investments are managed by an external investment manager with the objective to maximise the income receivable whilst allowing a degree of capital growth. The charity will maintain appropriate liquidity within its funds consistent with the spending commitments authorised by the Charitable Funds Committee.

The charity intends to take low to moderate investment risks to generate an average annual return. This will allow the charity to maintain the real value of the assets, whilst generating income to support the funding patient-related activities.

The charity's policy ensures that its investments is also assessed according to the environmental, social and governance behaviour of companies to ensure that our investments respect the needs of the environment and society as a whole.

During this financial year, the Committee agreed to release £100,000 from our investment portfolio to boost the cash reserves to cover a funding gap due to a payment delay relating to a large capital build project.

2 How we organise our affairs: reference and administrative details

The Charity

The NCH&C Charitable Fund are registered with the Charity Commission under the registered number 1051173.

Formerly known as the Norwich Community Health Partnership NHS Trust Charitable Fund, the governing document is a deed dated 6 November 1995.

Its objects are 'for any charitable purpose or purposes relating to the National Health Service'.

How to contact us

The charity office and registered address of NCH&C Charitable Fund is:

Woodlands House
Norwich Community Hospital
Bowthorpe Road
Norwich
Norfolk
NR2 3TU

charitablefund@nchc.nhs.uk

2.1 Trustee Arrangements

Norfolk Community Health and Care NHS Trust is the sole Corporate Trustee of the charity. The corporate trustee's responsibilities are therefore carried out by NCH&C board of directors. Details of NCH&C board membership can be found in its annual report and accounts and on its website: https://www.norfolkcommunityhealthandcare.nhs.uk/board-of-directors.

As NCH&C Charitable Fund has a corporate trustee it is, in accounting terms, controlled by NCH&C NHS Trust and is therefore its subsidiary. Financially, the charity is not material to NHC&C NHS Trust, so it is not consolidated into the Trust accounts.

NCH&C NHS Board meet annually as Corporate Trustee to:

- Review and approve the NCH&C Charitable Fund strategic plan;
- Re-appoint or appoint members of the NCH&C Charitable Fund Committee;
- Approve the trustees annual report and accounts for the year.

The Trust Board has delegated responsibility to manage the charitable funds to the Charitable Fund Committee in accordance with the scheme of delegation and standing financial instructions. Together, they are responsible for fulfilling the corporate trustee's strategic plan and for working with the professional advisors and with the representatives of NCH&C NHS Trust who provide support to the charity.

Membership of the Charitable Funds Committee is determined by the Terms of Reference of the charity which are reviewed annually by the Board of the Corporate Trustee.

The membership of the Charitable Funds Committee for the reporting period 1st April 2021 to 31st March 2022 was as follows:

Andrew Williams	Committee Chair, Non-Executive Director
Lorna Bailey	Non-Executive Director (till 16 November 2021)
Andrew Hopkins	Director of Finance and Performance
Dr Venu Harilal	Medical Director

Members of the NCH&C Charitable Fund Committee are selected to give the charity a good mix of appropriate professional skills including medical, financial, governance and fundraising.

The Trustee and the Charitable Funds Committee operates within the Charity Commission's guidance: The Essential Trustee and Guidance for charities with a connection to a non-charity. Compliance with the guidance is monitored continually and is formally assessed annually as part of the Charitable Funds Committee's Self-assessment and Annual Review.

New members of the Charitable Fund Committee are provided with an induction pack consisting of the governing documents, previous 3 years trustee's annual report and accounts, policies and procedures of the Charity as well as the Charity Commissions' guidance: public benefit and an overview and the essential trustee: what you need to know (CC3). Appropriate trustee guidance and updates are circulated to the Committee in quarterly briefings and signposting to relevant training materials are provided periodically.

2.2 Our staff and advisors

NCH&C Charitable Fund has two staff full time from NCH&C NHS Trust, Mrs Carol Plunkett is the Charity Development and Project Manager, and Mrs Tracy Harvey is the Charity Administrator and Finance Officer.

The Charitable Fund Committee is also assisted by a number of professional advisors, as detailed below:

Bankers:

Barclays Business Banking
PO Box 614
St Cuthbert's House
7 Upper Kings Street
Norwich BX3 2BB

Investment Managers:

Barratt & Cooke Ltd
5-6 Opie Street
Norwich
Norfolk
NR1 3DW

Independent examiners:

Larking Gowen LLP
King Street House
15 Upper King Street
Norwich
NR3 1RB

Legal advisors:

Mills & Reeve
1 St. James Court
Whitefriars
Norwich
NR3 1RU

2.3 Key management and personnel remuneration

The board of the Corporate Trustee and the Charity Development and Project Manager comprise the key management personnel of the charity as they are in charge of:

- Directing and controlling the charity
- Running and operating the charity on a day-to-day basis

Members of NCH&C board are required to disclose all relevant interests and register them and withdraw from decisions where a conflict of interest arises.

The Charity Development and Project Manager and Charity Administrator and Finance Officer of the charity are employed by NCH&C NHS Trust on NHS terms and conditions. Their remuneration is reviewed annually and is increased in accordance with the nationally agreed increases for their pay scales. NCH&C Charitable Fund is fully recharged by NCH&C NHS Trust for these employment costs.

All Trustee representatives give their time freely and no remuneration was paid in the year. Additionally, there have been no expenses paid to Trustee representatives during 2021/22.

3 Risk analysis and community networks

3.1 Risk analysis

As part of the business planning exercise carried out during the year, the charitable funds committee has considered the major risks to which NCH&C Charitable Fund is exposed. They have reviewed systems and identified steps to mitigate those risks. Three major risks have been identified and arrangements have been put in place to mitigate those risks.

Future levels of income.

NCH&C Charitable Fund is reliant on donations to allow it to make grant to NHS bodies. If income falls, the charity would not be able to make as many grants or enter into longer term commitments with the NHS body it supports.

The public's support of the NHS has been demonstrated through increased donations during the start of the Covid-19 pandemic, although the social distancing restrictions in place and continued presence of the disease, continues to impact the level of fundraising and donations.

The NHS is still struggling to cope with the pandemic, meaning that there are longer waiting times for treatment. There is a risk that the goodwill shown for the NHS at the start of the pandemic is starting to wane which will make fundraising more difficult.

Towards the end of 2021/22, inflation and the cost of living has increased. This is having an impact on the amount that people are able to donate to charity, and we will continue to review this throughout 2022/23 to diversify our income streams and to provide a co-ordinated approach to proactive fundraising.

Fall in investment returns

NCH&C Charitable Fund generates additional income from investing its cash balances, so the committee considers the loss of investment income to be a major financial risk. The risk is mitigated by retaining expert investment managers, having a diversified investment portfolio, and regularly reviewing performance.

Unforeseen changes in the operation of the NHS

The NHS is, by its very nature, subject to the national changes in government policy as well as local politically driven decisions. The Charitable Fund committee has

identified this as a risk as it may mean initiatives or healthcare activities supported by NHC&C Charitable Fund are no longer delivered in the Norfolk & Waveney area.

3.2 Wider Networks

NCH&C Charitable Fund is one of over 400 NHS linked charities in England and Wales who are eligible to join NHS Charities Together. As a member charity, we can discuss matters of common concern and exchange information and experiences, join together with others to lobby government departments and others, participate in conferences and seminars which offer support and education of our staff and charitable funds committee members.

As a member of NHS Charities Together, we have also been very grateful to receive grants from their national emergency appeal.



Picture: Old Catton WI donating teds to NCH&C children's services.

3.3 Our relationship with the wider community

Th ability of NCH&C Charitable Fund to continue its' vital support of the NHS in Norfolk and Waveney is dependent on its ability to raise funds from the general public. NCH&C Charitable Fund also continues to forge strong relationships with members of NHS staff whose co-operation enables us to make effective contributions.

We also work collaboratively with the various groups of the National Association of Leagues of Hospital Friends (N.A.L.H.F.) that campaign tirelessly for their local

hospital, raising funds and making a difference to NHS patients. We are very grateful to those members who support our work.

3.4 Volunteers

On behalf of the trustee body, the Charitable Funds Committee would like to pay tribute to:

- Members of staff who give of their time out of hours in support of the work of NCH&C Charitable Fund, in developing ideas and working with us to identify how we can improve patient care.
- Our fundraisers who do so much to encourage others to benefit patients through donations and fundraising activities.



- *Picture: the new NCH&C volunteer uniforms funded by the Charity.*

4. Statement of Trustee responsibilities.

The law applicable to charities in England and Wales requires the Trustee to prepare financial statements for each financial year which give a true and fair view of the charity's financial activities during the year and of its financial position at the end of the year. In preparing financial statements giving a true and fair view, the Trustee should follow best practice and:

- Select suitable accounting policies and then apply them consistently;
- Make judgements and estimates that are reasonable and prudent;
- State whether applicable accounting standards and statements of recommended practice have been followed, subject to any departures disclosed and explained in the financial statements; and
- Prepare the financial statements on the going concern basis unless it is inappropriate to presume that charity will continue in operation.

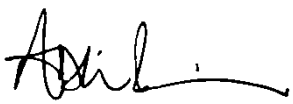
The Trustee is also responsible for keeping accounting records which disclose with reasonable accuracy the financial position of the charity, and which enable them to ascertain the financial position of the charity, and which enable them to ensure that the financial statements comply with the Charities Act 2011, the Charity (Accounts and Reports) Regulations and the provisions of the Trust Deed. The Trustee is also responsible for safeguarding the assets of the charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

The Trustee confirms it has met the responsibilities set out above and complied with the requirements for preparing the accounts on a going concern basis. The financial statements and notes to the accounts set out on pages 29 to 42 attached have been compiled from and are in accordance with the financial records maintained by the Trustee.

By Order of the Trustee



Andrew Hopkins **Date:** 23rd August 2022
Director of Finance and Performance on behalf of the Corporate Trustee



Date: 23rd August 2022

Andrew Williams
Chair of the Charitable Funds Committee on behalf of the Corporate Trustee

Independent Examiner's Report to the Trustee of Norfolk Community Health and Care NHS Trust Charitable Fund

I report to the charity trustees on my examination of the accounts of the charity for the year ended 31 March 2022 which are set out on pages 29 to 42.

This report is made solely to the Trustee, as a body, in accordance with section 149 of the Charities Act 2011 and regulations made under section 149 of that Act. My work has been undertaken so that I might state to the Trustee those matters that are required to be stated in an Independent examiner's report and for no other purpose. To the fullest extent permitted by law, I do not accept or assume responsibility to anyone other than the charity and the Trustee as a body, for this examination, for this report, or for the statements made.

Responsibilities and basis of report

As the charity's trustees you are responsible for the preparation of the accounts in accordance with the requirements of the Charities Act 2011 ('the 2011 Act').

I report in respect of my examination of the charity's accounts carried out under section 145 of the Act and in carrying out my examination I have followed all the applicable Directions given by the Charity Commission under section 145(5)(b) of the 2011 Act.

Independent examiner's statement

I have completed my examination. I confirm that no material matters have come to my attention in connection with the examination giving me cause to believe that in any material respect:

1. accounting records were not kept in respect of the charity as required by section 130 of the 2011 Act; or
2. the accounts do not accord with those records; or
3. the accounts do not comply with the applicable requirements concerning the form and content of accounts set out in the Charities (Accounts and Reports) Regulations 2008 other than any requirement that the accounts give a 'true and fair view' which is not a matter considered as part of an independent examination.

I have no concerns and have come across no other matters in connection with the examination to which attention should be drawn in this report in order to enable a proper understanding of the accounts to be reached.

Signed: 

Giles Kerkham FCA DChA

Larking Gowen LLP

Chartered Accountants

King Street House
15 Upper King Street
Norwich
NR3 1RB

Date: 12 September 2022

Statement of Financial Activities for the year ending 31 March 2022

	Note	Unrestricted Funds 2021/22 £'000	Restricted Funds 2021/22 £'000	Endowment Funds 2021/22 £'000	Total Funds 2021/22 £'000	Total Funds 2020/21 £'000
Income and Endowments from:						
Donations, legacies and Gifts in Kind	2.1	37	14	0	51	192
Charitable activities	2.2	2	40	0	42	153
Income from investments		9	9	0	18	13
Transfer between funds	9	12	(12)	0	0	0
Total incoming resources		60	51	0	111	358
Expenditure on:						
Charitable Activities	4.2	(74)	(64)	0	(138)	(271)
Fundraising costs	4.1	(23)	0	0	(23)	(19)
Governance costs	4.2	(2)	0	0	(2)	(3)
Amortisation	5.2	(2)	0	0	(2)	(2)
Total expenditure		(101)	(64)	0	(165)	(295)
Net incoming/(outgoing) resources before other recognised gains/(losses)		(41)	(14)	0	(55)	63
Net gains/(losses) on investments	5	60	4	3	67	32
Net movement in funds		19	(10)	3	13	95
Reconciliation of funds:						
Total funds brought forward		777	112	33	922	827
Total funds carried forward	10	796	103	36	935	922

The notes on pages 31 to 42 form part of these accounts

Balance Sheet at 31 March 2022

	Note	Unrestricted funds	Restricted funds	Endowment funds	Total funds	Total funds
		31 March 2022	31 March 2022	31 March 2022	31 March 2022	31 March 2021
		£'000	£'000	£'000	£'000	£'000
Fixed assets:						
Intangible Assets - Harlequin	5.2	5	0	0	5	7
Investments	5.1	649	39	36	724	757
Total fixed assets		654	39	36	729	764
Current assets:						
Debtors	6	5	186	0	191	205
Cash at bank and in hand		182	(61)	0	121	258
Gifts in Kind Stock		0	0	0	0	0
Total current assets		187	125	0	312	463
Liabilities:						
Creditors falling due within one year	7	(45)	(61)	0	(106)	(305)
Net current assets / (liabilities)		142	64	0	206	158
Total net assets / (liabilities)		796	103	36	935	922
The funds of the charity:						
Unrestricted funds		796	0	0	796	777
Restricted funds		0	103	0	103	112
Endowment funds		0	0	36	36	33
Total charity funds	11	796	103	36	935	922

Approved by the Charitable Funds Committee at its meeting on 23 August 2022.



Andrew Williams
Chair of the Charitable Funds Committee on behalf of the Corporate Trustee

Notes to the financial statements

1. Accounting Policies

The policies adopted by the charity in preparing these financial statements are described below. They have been applied consistently in dealing with items considered material in relation to the financial statements.

(a) Basis of preparation

The financial statements have been prepared under the historic cost convention, with the exception of investments which are measured at fair value. The financial statements have been prepared in accordance with the Statement of Recommended Practice (SORP): Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standard applicable to the UK and Republic of Ireland (FRS 102) effective 1 October 2019 and the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102) and the Charities Act 2011 and UK Generally Accepted Practice as it applies from 1 January 2019.

Additional information is provided where it is believed to be useful to the reader.

The Trustee considers there are no material uncertainties about the charity's ability to continue as a going concern. Whilst the Covid-19 pandemic has had an impact on the Charity, it is not such a significant impact as to affect the charity's ability to continue as a going concern. These financial statements have therefore been prepared on a going concern basis.

There are no material uncertainties affecting the financial statements. The Covid-19 pandemic continues to have an impact on the charity. Fundraising income is nearly back to pre-pandemic levels but there is concern that the cost-of-living crisis will effect future giving. Grants have been received from NHS Charities Together to fund work on the recovery from the pandemic. As a grant making charity with few on-going commitments, reduced income will impact on the level of new grants that can be made in the short term rather than affecting the charity's ability to continue as a going concern. There are no material uncertainties affecting the current year's accounts.

(b) Funds structure

Where there is a legal restriction on the purpose to which a fund may be put, the fund is classified either as a restricted income fund, where the donor has provided for the donation to be spent in furtherance of a specified charitable purpose or as an endowment fund, where the charity restrictions only permit the income of the fund being expended as per the donors wishes.

Unrestricted income funds comprise those funds which the Trustee is free to use for any purpose in furtherance of the charitable objectives. Unrestricted funds include designated funds, where the donor has made known their non-binding wishes or where the Trustee has, at its discretion, created a fund for a specific purpose.

(c) Incoming resources

All incoming resources are recognised once the charity has entitlement to the resources, it is probable (more likely than not) the resources will be received, and the monetary value of incoming resources can be measured with sufficient reliability.

Where there are terms or conditions attached to incoming resources, these terms or conditions must be met before the income is recognised. Where terms or conditions have not been met or uncertainty exists as to whether they can be met then the relevant income is not recognised in the year. If received, incoming resources with unmet terms or conditions are deferred and shown on the balance sheet as deferred income.

(d) Incoming resources from legacies

Legacies are accounted for as incoming resources either upon receipt or where the receipt of the legacy is probable. Receipt is probable when:

- confirmation has been received from the representatives of the estate that probate has been granted;
- the executors have established there are sufficient assets in the estate to pay the legacy; and
- all conditions attached to the legacy have been fulfilled or are within the charity's control.

If there is uncertainty as to the amount of the legacy and it cannot be reliably estimated then the legacy is shown as a contingent asset until all the conditions for income recognition are met.

(e) Incoming resources from endowment funds

The incoming resources receivable from the investment of endowment funds are restricted for NHC&H charity and have been earmarked in accordance with the donor's stated wishes.

(f) Incoming resources from donations in kind

Gifts in kind, such as food and care packages are not accounted for when they are accepted and immediately distributed unless a single donation is material.

Gifts of tangible assets such as microwaves and fridges are recognised as a donation at fair value (market price) on receipt and charitable expenditure when they are distributed.

Where gifts in kind are held before being distributed to beneficiaries, they are recognised at fair value as stock until they are distributed.

(g) Resources expended and irrecoverable VAT

All expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all costs related to each category of expense shown in the Statement of Financial Activities. Expenditure is recognised when the following criteria are met:

- there is a present legal or constructive obligation resulting from a past event;
- it is more likely than not that a transfer of benefits (usually a cash payment) will be required in settlement; and
- the amount of the obligation can be measured or estimated reliably.

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

(h) Recognition of expenditure and associated liabilities as a result of a grant

Grants payable are payments made in furtherance of the charitable objectives of the funds held on trust, primarily being relief of those who are sick.

Grant payments are recognised as expenditure when the conditions for their payment have been met or where there is a constructive obligation to make a payment.

A constructive obligation arises when:

- the charity has communicated its intention to award a grant to a recipient who then has a reasonable expectation that they will receive a grant or
- the charity has made a public announcement about a commitment which is specific enough for the recipient to have a reasonable expectation that they will receive a grant or
- there is an established pattern of practice which indicates to the recipient the charity will honour its commitment.

The Trustee has control over the amount and timing of grant payments and consequently where approval has been given by the Trustee and any of the above criteria have been met the a liability is recognised. Grants are not usually awarded with conditions attached. However, when they are, then those conditions must be met before the liability is recognised.

(i) Allocation of support and governance costs

Support costs are those costs which do not relate directly to a single charitable activity. These include some staff costs, costs of administration and some of the overhead costs of the Corporate Trustee's. Governance costs include external examination, and any other regulatory fees. The analysis of support and governance costs are shown in note 4.

(j) Fundraising costs

The costs of generating funds are those costs attributable to generating income for the charity, other than those costs incurred in undertaking charitable activities. Fundraising costs include some of the salaries and overhead costs of the Corporate Trustee's as well as expeniture for fundraising activites.

(k) Charitable activities

Costs of charitable activities comprise all costs incurred in the pursuit of the charitable objects of the charity. These costs, where not wholly attributable, are apportioned between the categories of charitable expenditure in addition to the direct costs. The total costs of each category of charitable expenditure therefore include support costs and an apportionment of overheads.

(l) Fixed asset investments

Investments are a form of basic financial instrument. Fixed asset (non current) investments are initially recognised at their transaction value and are subsequently measured at their fair value (market value) at the balance sheet date (31 March each year). The Statement of Financial Activities includes the net gains and losses arising on revaluation and disposals throughout the year. Quoted stocks and shares are included in the balance sheet at the current market value quoted by an investment analyst.

The main form of risk to the charity's financial assets is that of volatility in equity and bond markets and investment markets due to wider economic conditions, the attitude of investors to investment risk, and changes in sentiment concerning equities and within particular sectors or sub sectors.

(m) Debtors

Debtors are amounts owed to the charity. They are measured at their recoverable amount.

(n) Cash and cash equivalents

Cash at bank and in hand is held to meet the day to day running costs of the charity as they fall due. Cash equivalents are short term, highly liquid investments, usually in 90 day notice interest bearing savings accounts.

(o) Creditors

Creditors are the amounts owed by the charity. They are measured at the amount that the charity expects to have to pay to settle the debt.

(p) Realised gains and losses

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

(q) Staff costs and pensions

NCHC Trust fully re-charged NCHC Charitable Fund for the 2 members of staff who work full time for the charity. There is a additional re-charge for the previous Fundraising Manager during handover period at the start of the year.

Staff members belong to the NHS Pension Scheme which is an unfunded defined benefit scheme which is accounted for as a defined contribution scheme. The recharge from NCHC Trust includes the employee contributions to that scheme. For more information on the NHS Pension Scheme refer to the NCHC Trust annual report and accounts.

(r) Intangible assets

Intangible assets are non-monetary assets without physical substance which are capable of being sold separately from the charity's business or which arise from contractual or other legal rights. They are recognised only where it is probable that future economic benefits will flow to, or service potential be provided to the charity, and where the cost of the asset can be measured reliably.

Intangible fixed assets are amortised at rates calculated to write then down to estimated residual values on a straight line basis over their estimated useful lives. Computer software is expected to have a useful life of 5 years.

Note 2.1 Income from donations, legacies and Gifts in Kind

	Unrestricted Funds	Restricted Funds	Endowment Funds	Total Funds
	2021/22	2021/22	2021/22	2021/22
	£'000	£'000	£'000	£'000
Donations	34	13	0	47
Legacies	1	0	0	1
Gift Aid	2	0	0	2
Gifts in Kind	0	1	0	1
Other income	0	0	0	0
Donations, legacies and GIK total	37	14	0	51

Donations includes gifts from members of the public, relatives of patients and staff, as well as funding from organisations such as leagues of friends and similar support groups.

	Unrestricted Funds	Restricted Funds	Endowment Funds	Total Funds
	2020/21	2020/21	2020/21	2020/21
	£'000	£'000	£'000	£'000
Donations	64	12	0	76
Legacies	66	0	0	66
Gift Aid	2	0	0	2
Gifts in Kind	0	48	0	48
Donations, legacies and GIK total	132	213	0	345

Note 2.2 Analysis of income from charitable activities

	Unrestricted Funds	Restricted Funds	Endowment Funds	Total Funds
	2021/22	2021/22	2021/22	2021/22
	£'000	£'000	£'000	£'000
Stage 1 grant from NHS Charities Together	0	0	0	0
Stage 3 grant from NHS Charities Together	0	28	0	28
Grants other	2	12	0	14
Charitable activities total	2	40	0	42

	Unrestricted Funds	Restricted Funds	Endowment Funds	Total Funds
	2020/21	2020/21	2020/21	2020/21
	£'000	£'000	£'000	£'000
Stage 1 grant from NHS Charities Together	0	153	0	153
Stage 3 grant from NHS Charities Together	0	0	0	0
Grants other	0	0	0	0
Charitable activities total	0	153	0	153

In 2020/21 and 2021/22 the charity received grants from the NHS Charities Together Covid-19 emergency appeal
Other grants have come from other charities.

Note 3. Role of volunteers

The charity benefits from volunteers to assist with its functioning. They perform two main roles:

• Fund Holders advise and approve the strategic spend of designated funds for their directorate. Fund Holders report on the positive impact large expenditure has on the beneficiaries of the request.

• The Charitable Funds Committee provide an assurance role in enabling the charity to manage how its designated funds are spent. Their role is to assist the Trustee in ensuring that funds are spent appropriately, ensuring that funds are spent in accordance with the Objects of the charity and on activities over and above those normally expected to be provided through NHS funds.

In accordance with the SORP, due to the absence of any reliable measurement basis, the financial contribution of these volunteers is not recognised in the accounts.

Note 4. Expenditure

The charity incurs three broad types of expenditure:
- grant funded activity. The charity mainly pursues its charitable activities by making grants rather than directly undertaking charitable activities;
- fundraising costs; and
- support costs.

Grant funded activity is allocated directly to the fund or funds the grant is made from.

Fundraising costs are allocated fully to a sub fund of the Norfolk General Fund, an unrestricted fund.

Support costs are made up of:
1. Governance costs. These are the costs associated with the governance arrangements of the charity and include the preparation and independent review of the annual financial statements and costs to provide financial information throughout the year to the Charitable Funds Committee.

2. Other support costs, primarily recharges of the Charity Development and Project Manager, Charity Administrator and Finance Officer and related charges by the Corporate Trustee when performing work for the charity.

Support costs which are not attributable to a single activity must also be apportioned between the activities being supported.

Note 4.1 shows the allocation of fundraising costs to the different fund types.

Note 4.2 shows the allocation of support costs to the categories of charitable expenditure incurred.

Note 4.1 Analysis of fundraising expenditure

	Unrestricted	Restricted	Endowment	Total 2021/22
	£'000	£'000	£'000	£'000
Fundraising office	17	0	0	17
Other fundraising costs	6	0	0	6
Total	23	0	0	23

	Unrestricted	Restricted	Endowment	Total 2020/21
	£'000	£'000	£'000	£'000
Fundraising Manager cost	17	0	0	17
Other fundraising costs	3	0	0	3
Total	19	0	0	19

Note 4.2. Analysis of charitable expenditure

The charity did not undertake any direct charitable activites on its own account during the year.
All of the charitable expenditure was in the form of grant funding.

	2020/21 Grant Funded Activity	2020/21 Support costs	2020/21 Total expenditure on charitable activities
	£'000	£'000	£'000
Patient care - general	(7)	39	32
Patient Gifts in Kind			
Patient care - staff training	10	4	14
Staff Welfare	5	3	8
Staff Gifts in Kind			
COVID19 - Patient Care	13	14	27
COVID19 - Patient Gifts in Kind	0	0	0
COVID19 - Staff Wellbeing	29	28	57
COVID19 - Staff Gifts in Kind	0	0	0
COVID19 - Staff Training	(1)	1	(0)
COVID19 - Volunteer Expenses	0	0	0
Total	49	88	137

	2020/21 Grant Funded Activity	2020/21 Support costs	2020/21 Total expenditure on charitable activities
	£'000	£'000	£'000
Patient care - general	29	35	64
Patient Gifts in Kind	0	0	0
Patient care - staff training	(4)	0	(4)
Staff Welfare	3	3	6
Staff Gifts in Kind	0	0	0
COVID19 - Patient Care	42	18	60
COVID19 - Patient Gifts in Kind	25	0	25
COVID19 - Staff Wellbeing	61	25	86
COVID19 - Staff Gifts in Kind	23	0	23
COVID19 - Staff Training	6	2	8
COVID19 - Volunteer Expenses	2	1	3
Total	187	84	271

Breakdown of support costs

	31 March 2022	31 March 2021
	£'000	£'000
Fundraising office #	69	67
Administrative support costs	19	18
Total	88	84

Fundraising office costs relate to staff time dealing with grant activity, with both internal stakeholders and external bodies such as Friends groups and grant makers.
The majority of the time was spent on overseeing expenditure granted in the previous year.

Governance costs breakdown

	31 March 2022	31 March 2021
	£'000	£'000
Independent examination	2	3
Other governance costs	0	0

Total	2	3

Note 4.3. Analysis of staff costs and renumeration of key management personnel

The average number of full-time equivalent employees during the year was 2.08 (2019/20: 1.79) with all employees involved in providing support services to charitable activities or the governance of the charity.

Staff costs

	31 March 2022	31 March 2021
	£'000	£'000
Salaries and Wages	67	70
Social Security Costs	10	7
Other Pension Costs	7	10
Total	84	87

The charity receives corporate support from Norfolk Community Health and Care NHS Trust. An annual charge to cover the cost of these is authorised by the Charitable Funds Committee, which for 2020/21 totalled £13,583 (2020/21: £11,248). The increase in cost is due in the main to the increase time from the Deputy Director of Finance along side salary increases.

The Charity considers its key management personnel to be the members of the Norfolk Community Health and Care NHS Trust management board acting on behalf of the corporate trustee. For 2021/22 this was the Director of Finance and Performance and the Medical Director. There was no recharge of employment benefits for key management personnel during 2021/22 or 2010/21.

No employees had emoluments in excess of £60,000 (2019/20: none).

Note 4.4. Trustee remuneration, benefits and expenses

Members of the Trust board give their time freely and receive no remuneration for the work that they undertake in relation to the Charity. However, they can claim expenses to reimburse them for the costs that they incur in fulfiling their duties relating to the Charity - these include travelling specifically for charitable funds committee meetings and charity specific training events.

No expenses were claimed from the Charity by committee members in 2021/22 or 2020/21.

Note 4.5. Independent examination fees

The independent examiner's remuneration of £2,280 (2020/21: £2,220) related solely to the examination and other fees incurred £nil (2019/20: £654).

Note 5. Assets

Note 5.1 Movement in fixed asset investments

Movement in fixed asset investments

	2021/22 £'000	2020/21 £'000
Market value bought forward at 1 April	757	725
Add additions to investments at cost	93	312
Less disposals proceeds	(188)	(224)
Increase / (decrease) in cash held within the portfolio*	(4)	(89)
Add net (loss)/gain on revaluation	67	32
Market value as at 31 March	725	757

* A small proportion of the investment portfolio is held as cash. This is primarily due to timing differences between the sale of investments and the purchase of new investments. The cash amount is included within the investments balance in the balance sheet, rather than as 'cash at bank and in hand', given it is a part of the overall investment managed portfolio.

All investments are financial assets carried at fair value through net income and are managed by expert advisors.

Fixed asset by type

	31 March 2022 £'000	31 March 2021 £'000
Listed equity	722	750
Cash*	2	7
Total	724	757

All investments are held at their fair value and are managed by expert advisors.

Realised and unrealised gains and losses are apportioned to individual restricted and endowment funds and the Norfolk General Fund (an unrestricted fund) on the basis of the average balances held on unrestricted, restricted and endowment funds.

Note 5.2 Intangible Fixed Assets

This relates to the accounting software which will be amortised over five years

	31 March 2022 £'000	31 March 2021 £'000
Opening Balance	7	9
Additions	0	0
Amortisation	(2)	(2)
Closing balance	5	7

Note 6. Analysis of Current Debtors

Debtors due in less than one year	31 March 2022 £'000	31 March 2021 £'000
Other Debtors	191	205
Total	191	205

The debtor balance is made up primarily of four significant debtors; Dereham Garden Room £150k, Kelling Friends £14k, North Walsham Friends £13k and The National Lottery Fund grant £8k (2020/21: Debtors - Dereham Garden Room £150,000 and D Burton Legacy £20,000).

The Dereham Garden Room building works were delayed due to the pandemic so the funds due from the Dereham Friends group remain outstanding. The building work is complete but the garden is still outstanding and the money transfer will be completed in early 2022/23.

Note 7. Analysis of Current Liabilities

Creditors due in less than one year	31 March 2022 £'000	31 March 2021 £'000
Trade Creditors	0	0
Accruals	106	305
Total	106	305

The accruals relate to expenditure requests which have been approved and are outstanding at balance date.

Note 8. Related Party Transactions

Norfolk Community Health and Care NHS Trust is the corporate trustee of the charity and is its main grant beneficiary along with other organisations working in partnership with it - they are therefore related parties. The Trustee appoints Members of the Charitable Funds Committee, a sub-committee of the Norfolk Community Health and Care NHS Trust Board.

Transactions between the Charity and the Trust during the year were in relation to salary payments for its staff, payment of some Charity supplier invoices that were initally paid by the Trust and refunded by the Charity and for administrative and management costs.

The charity did not pay any expenses or honoraria to any member of the Norfolk Community Health and Care NHS Trust Board (the Trustee) or the Charitable Funds Committee in the year 2021/22. (2020/21: £0)

The charity receives corporate support from Norfolk Community Health and Care NHS Trust. An annual charge to cover the cost of these is authorised by the Charitable Funds Committee, which for 2021/22 totalled £13,583 (2020/21: £11,248).

At the end of the financial year £nil was owed by the Charity to the Trust. (2020/21: £83,595)

Note 9. Transfers between funds

During the year £11,552.80 was transferred from restricted funds to designated funds as they were identified as unutilised and subsequently closed during the fund restructure .

Note 10. Movement of major funds

The charity has three categories of funds, as explained in note 1 (b), funds structure.

The analysis below shows the opening and closing value including the income and expenditure movement of funds.

	1 April 2021	Income	Expenditure	Gains & Losses	Transfers	31 March 2022
Unrestricted funds						
General Fund	90	14	(58)	4	(1)	49
Swaffham Hospital	54	1	(5)	4	1	55
Community Specialist Care Team PBL	28	0	0		(28)	0
Palliative Community Care	3	8	(10)	5	70	76
PBL	227	4	9	18		258
Caroline House	16	4	(3)	0	2	19
LEGACY Zienia Merton	120	1	0	9		130
LEGACY Ida May Riley	0	0	0			0
LEGACY Pauline Rosetta Basted (Kelling Hospital)	38	0	0	3		41
LEGACY Brian Anthony Knappett (Wymondham)	11	0	0	1		12
LEGACY Patricia Ramm (Swaffham Hospital)	25	2	(16)	2		13
LEGACY Audrey Edwards (PBL)	23	0	0	2		25
LEGACY Dorothea Burton (Swaffham)	15	0	0	0		15
LEGACY Dorothea Burton (Kelling)	5	0	0	0		5
Designated Funds (22 funds) #1 #2	124	15	(19)	12	(32)	100
Total unrestricted funds	777	49	(102)	60	12	796
Restricted funds						
Margaret Rose Goff Learning Disabilities	16	3	0	1		20
Kelling Training Fund	23	2	(10)	1		16
North Walsham Dayroom Fund #1	10	1	0		(11)	0
COVID19 Grants	52	32	(40)	1		45
Other Restricted Funds (9 funds) #2	12	23	(12)	0	(1)	22
Total restricted funds	113	61	(62)	3	(12)	103
Endowment funds						
Swaffham Shephard CIP	33	(0)	0	3		36
Total endowment funds	33	(0)	0	3	0	36
Total funds	922	110	(164)	66	(0)	935

#1 North Walsham Dayroom fund closed as project completed, underspend transferred to North Walsham designated fund

#2 Restricted Kelling Garden fund closed as project completed and transfered to relevant designated fund.

	1 April 2020	Income	Expenditure	Gains & Losses	Transfers	31 March 2021
Unrestricted funds						
General Fund	115	(8)	(105)	29	58	90
Swaffham Hospital	56	0	(3)			54
Community Specialist Care Team PBL	28	0	0			28
Palliative Community Care	2	1	0			3
PBL	224	2	1			227
Caroline House	13	11	(9)			16
Legacy Zienia Merton #1	122	(2)	0			120
Legacy Ida May Riley #2	63	0	0		-63	0
Legacy Pauline Rosetta Basted (Kelling Hospital)	38	0	0			38
Legacy Brian Anthony Knappett (Wymondham)	11	0	0			11
LEGACY Patricia Ramm (Swaffham H	0	25	0			25
LEGACY Audrey Edwards (PBL)	0	23	0			23
LEGACY Dorothea Burton (Swaffham)	0	15	0			15
LEGACY Dorothea Burton (Kelling)	0	5	0			5
Designated Funds (85 funds)	79	72	(27)			124
Total unrestricted funds	751	145	(142)	29	-5	777
Restricted funds						
Margaret Rose Goff Learn Disab	16	0	-1	1		16
Kelling Training Fund	16	0	6	1		23
North Walsham Dayroom Fund	10	0	0	0		10
COVID19 Grants	0	160	-113	0	5	52
Other Restricted Funds (8 funds)	3	10	(1)	0		12
Total restricted funds	44	170	-109	2	5	112
Endowment funds						
Swaffham Shephard CIP	32	0	0	1		33
Total endowment funds	32	0	0	1	0	33
Total funds	827	315	-251	32	0	922

#1 Zienia Merton negative income - reduction in accrued income as legacy was less than originally expected

#2 Ida May Riley - transfer funds to Norfolk General fund as the service the legacy was requested to be spent on no longer exists

Balance Sheet at 31 March 2021

	Note	Unrestricted funds	Restricted funds	Endowment funds	Total funds
		31 March 2021	31 March 2021	31 March 2021	31 March 2021
		£'000	£'000	£'000	£'000
Fixed assets:					
Intangible Assets - Harlequin	5.2	7	0	0	7
Investments	5.1	686	38	33	757
Total fixed assets		693	38	33	764
Current assets:					
Debtors	6	34	171	0	205
Cash at bank and in hand		148	110	0	258
Gifts in Kind Stock		0	0	0	0
Total current assets		182	281	0	463
Liabilities:					
Creditors falling due within one year	7	(98)	(207)	0	(305)
Net current assets / (liabilities)		84	74	0	158
Total net assets / (liabilities)		777	112	33	922
The funds of the charity:					
Endowment funds		0	0	33	33
Restricted funds		0	112	0	112
Unrestricted funds		777	0	0	777
Total charity funds	11	777	112	33	922

NORFOLK COMMUNITY HEALTH AND CARE NHS TRUST CHARITABLE FUND

England & Wales - Charity number 1051173

Accounts

TRUSTEE ANNUAL REPORT
AND FINANCIAL STATEMENTS
2020-2021

NCH&C Charitable Fund







Norfolk Community Health and Care NHS Trust Charitable Fund

Registered Charity No: 1051173

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1.1 Welcome to our annual report for 2020/21

We are a charity and we work for the benefit of NHS patients and their families, working with our Corporate trustee Norfolk Community Health and Care (NCH&C) NHS Trust.

We exist to provide resources and facilities to meet the needs of our patients and their families. 2020/21 has been a year like no other as the Coronavirus Covid-19 global pandemic affected all of our plans for the year and has changed the focus of our original operational plan.

We have refocused our charitable objectives so that we can receive and spend funds for patients and staff of NCH&C NHS Trust. This was as a result of the Covid-19 emergency appeal by NHS Charities Together (NHSCT).

Key highlights of our year:

- receiving £152,500 in stage 1 grants from NHS Charities Together that was utilised to support NCH&C in response to the Covid-19 pandemic.
- completion of the £100,000 garden room for patients at Foxley Ward in Dereham Hospital for recovery and rehabilitation.
- receiving and distributing goods generously donated to support NHS staff as they worked through the lockdown period from March to July 2020.
- installing wheelchair accessible seating in outdoor spaces to support patients, visitors and staff.
- funding devices to enable patients to see and speak to loved ones when Covid-19 restrictions prevented visitor access.
- securing the charity's very first ballot place in the London Marathon 2021.
- delivery of neuro music therapy project for brain injury inpatients.
- new logo and visual identity for the Charitable Fund to raise awareness.

Your donations made this work possible, and your future donations are the key to our continued success.

This is my first report as Chair of the charitable funds committee, and I would like to thank everyone who has donated gifts or money this year as well as our dedicated and hard-working colleagues at NCH&C NHS Trust.

We will continue to monitor the progress of the pandemic and review our plans to ensure that we focus on enhancing the treatment and care that patients of NCH&C NHS Trust receive.

Andrew Williams 30 June 2021

1.2 Who we are

Norfolk Community Health and Care (NCH&C) NHS Trust Charitable Fund (NCH&C Charitable Fund) is an independent registered charity, number 1051173. It exists for the benefit of NHS patients, and their families and carers, primarily those of Norfolk Community Health and Care NHS Trust. The charity enhances patient care through activities within in-patient hospitals and local clinics, through benefiting patients and their families and carers being treated at home, and through preventative information to empower people to avoid further treatment or reduce their risk of health problems.

We provide activities that are above and beyond those funded by the NHS, and in doing so make a real difference for patients, families, carers and the staff who look after them.

Our key partner in fulfilling our charitable mission and objectives is the NCH&C NHS Trust. NCH&C provides community-based NHS health and care via more than 70 different service locations across Norfolk as well as providing a specialist Early Supported Discharge service to stroke patients in Norfolk and Suffolk.

Serving a population of nearly 900,000 people, NCH&C delivers community dentistry, services for children, young people and families, therapies, community nursing, end of life care and specialist nursing, among others.

We believe that people are better looked after locally and this belief drives us to work hard to bring our expert care to patients in our seven community hospitals, within GP surgeries and in patients' own homes. Our focus is on continually improving the quality of care we offer to local people and on improving access to that care, helping people to move seamlessly from one service to another.

The foundation upon which the charity's vital work is made possible are the donations, legacies, grants, and community funding we receive on behalf of our beneficiaries. This Annual Report will tell you more about what we do, what we have achieved, and what is possible when we combine our expertise with your support.





1.3 Our mission and objectives

Through raising new donations and the strategic use and management of our existing funds, NCH&C Charitable Fund's mission is to:

- Assist and enhance the care given to patients of NCH&C NHS Trust, and their families and carers;
- Provide amenities for patients of NCH&C NHS Trust;
- Work with other organisations assisting in the delivery of healthcare and complementary services in the population served by NCH&C NHS Trust.

The charity operates through providing grants and directly commissioning its own activities in accordance with charity law, our constitution and the wishes and directions of our donors.

Our activities are guided by the wishes of patients and staff, directing funds towards areas they tell us are most in need. We work closely with other local organisations such as Hospital Leagues of Friends, support groups, voluntary organisations, and professionals, to make the most of their expertise and local knowledge.

To meet its objectives and to deliver public benefit, the charity provides support in the following ways:

- Assisting in the recovery from illness;
- Providing specialised items of equipment above and beyond that which would fall within the normal funding by the NHS of such equipment;
- Providing new or enhancing therapies for patients;
- Training and supporting Trust staff and allied professionals to enable them to deliver patient care in ways that exceed their contractual obligations;
- The advancement of education, carrying out research into patient needs or the delivery of care in ways that will enhance the future prospects for patients;
- Supporting building or other large capital projects relating to patient care, the provision of better amenities, and enhancing the environment for patients, that would not fall within the normal funding by the Trust.
- Supporting staff well-being to enable them to deliver outstanding care.

During 2020/21, grants totalling £152,500 were made from NHS Charities Together (NHSCT). When considering where to focus our attention, the members of our Charitable Fund Committee referred to guidance provided by the Charity Commission for England and Wales on public benefit, and the criteria specified by NHSCT.

1.4 What we have achieved

Our key aim is to serve the NHS patients of Norfolk Community Health and Care NHS Trust for the public benefit. By funding equipment and services, we can help the NHS provide outstanding care to patients, which goes above and beyond that which are funded by the state to provide.

By working with the NHS, we aim to assist patients by helping patients, their families and carers, and visitors to our sites by:

- Enhancing the care our NHS partner can offer through new equipment and building improvements to deliver better facilities
- Supporting staff wellbeing to improve delivery of patient care
- Investment in the people who work at NCH&C to create a caring environment for the patients receiving treatment, their families and visitors.

We do this through our grant giving programme which is funded by our generous donors. Highlights from these activities are detailed below to provide a wider understanding of the difference we can make by working together.

Dereham Hospital: Foxley Ward patient garden room - £100,000.





With the generous support of The Friends of Dereham Hospital we have delivered a fantastic, light-filled tranquil garden room for patients. This space provides a sanctuary for inpatients receiving rehabilitation, away from the noise of the wards to aid recuperation and assist towards recovery and a return to home. We look forward to the final stage of the project with the completion of a beautiful outdoor garden space in 2021.

Muscular Bisskit software for SaLT patients - £6,000.

Our specialist stroke therapists on Beech Ward requested a muscular Bisskit software program and laptop to enable the measurement of swallowing reflexes with inpatients. By working on these improvements, patients are rehabilitated to improve their quality of life and independence.

Neuro Music Therapy Project at Caroline House for inpatients - £32,000.





Funding has enabled us to implement this pilot treatment for inpatients receiving care at our specialist brain injury facility at Caroline House. By funding a music therapist from Chiltern Music Therapy, we are providing music therapy interventions in neuro rehabilitation to deliver positive outcomes for patients and families/carers.

Provision of outdoor benches for staff and patients - £15,000.



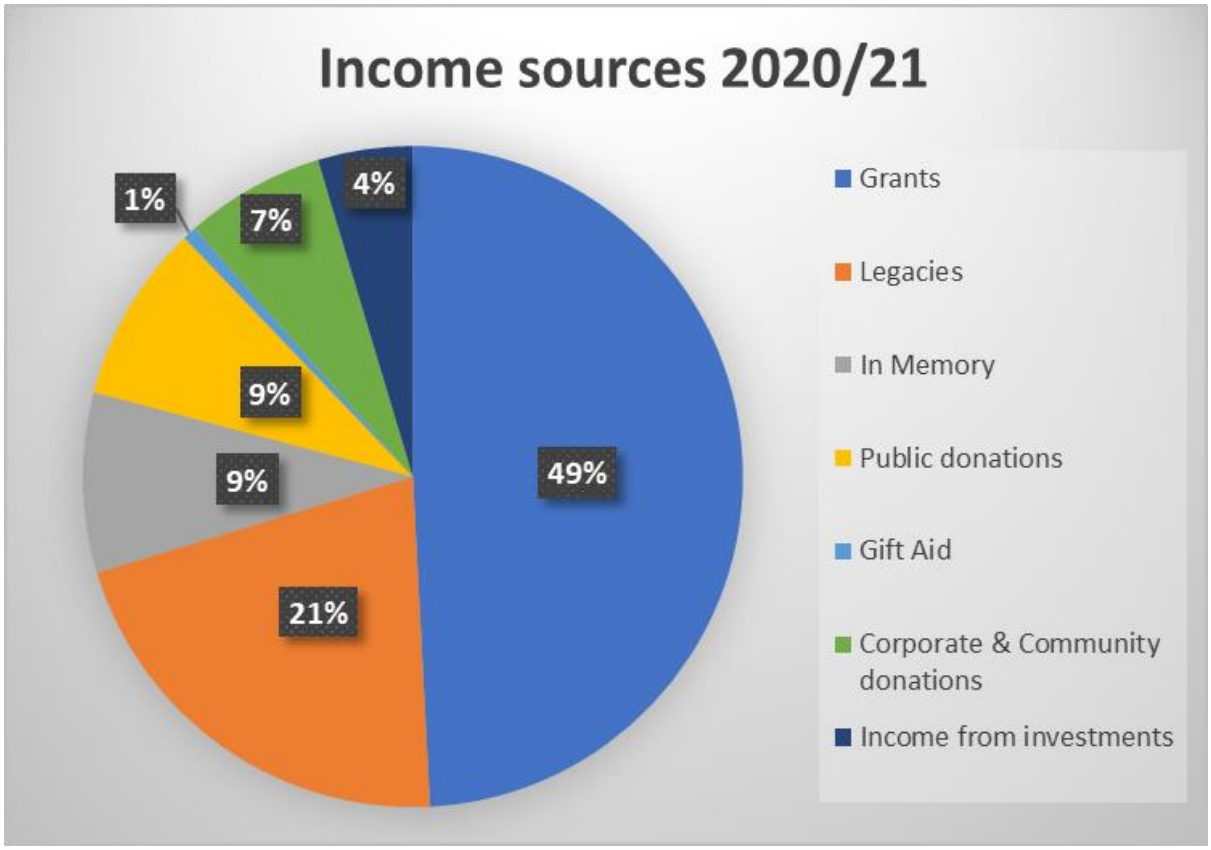
We installed over 14 benches and wheelchair accessible benches across multiple Trust sites, providing much needed space away from patient delivery areas for breaks, and for visitors.

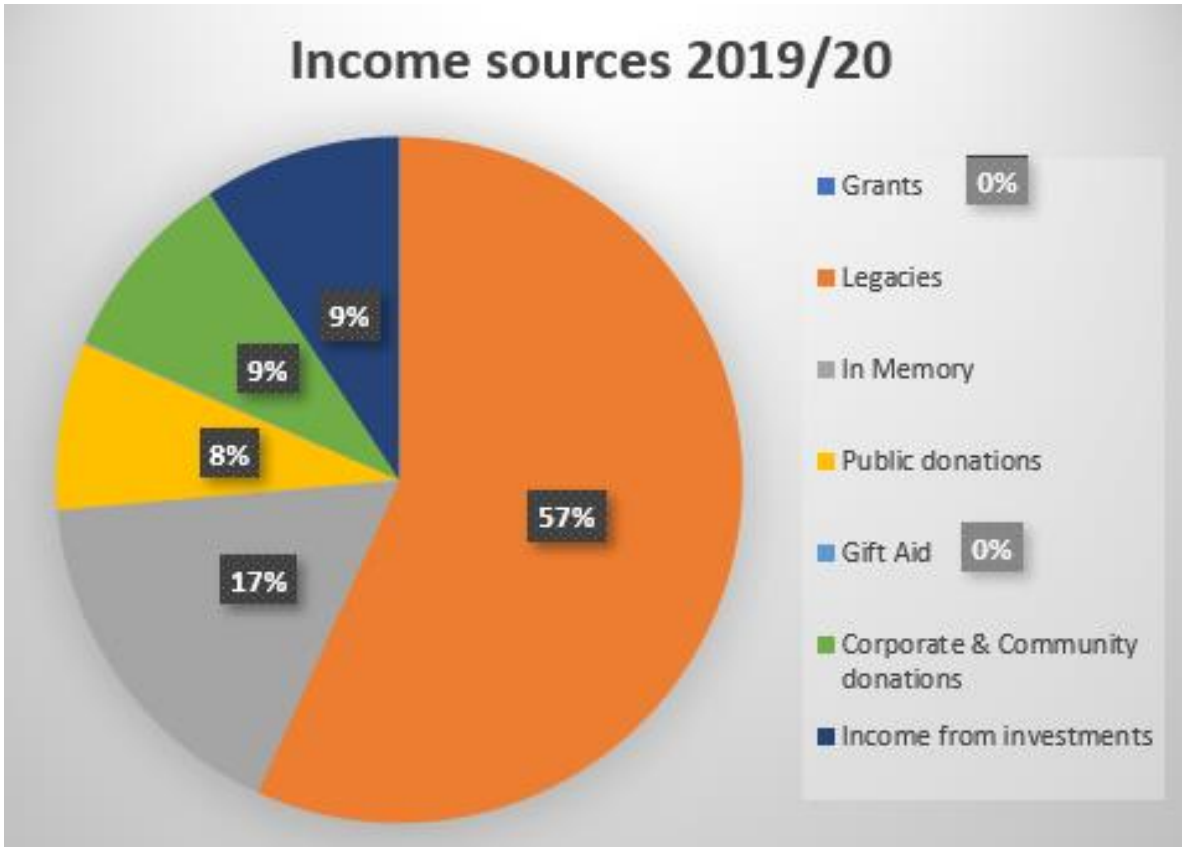
1.5 How we funded our work in 2020/21

The following figures are taken from the full accounts approved on 9th September 2021. This part of the trustee's annual report comments on key features of those accounts. In this section, we explain how we raised the money and then how we spent it.

Income received (£358,000 2020/21 v £201,000 in 2019/20)
NCH&C Charitable Fund can only continue to support the work of NCH&C NHS Trust for as long as we receive donations to pay for work delivered by the charity. All of our income is voluntary and mostly derives from the generosity of the general public.

Income: source of funds
The charts below show our main sources of income this year measured against last year. We received unprecedented support in the form of grants from NHS Charities Together during 2020/21, which helped to lessen the impact in the reduction of regular income sources due to the pandemic.





Legacies and Gifts in Memory (£93,000 2020/21 v £148,000 2019/20)
The pandemic has impacted on this source of income during 2020. Continuing social distancing rules imposed on large gatherings and the impact on house prices and house sale delays for residual bequests. However, this income stream remains one of the highest sources for the charity.

NCH&C Staff Fundraising (£4,200 2020/21 v £0 2019/20)
We are grateful to a number of staff across the Trust who organised independent virtual fundraising events remotely with family, friends and colleagues from running relays to dyeing hair – which have funded patient care items for their specific ward or service.





Grants from NHS Charities Together (£152,500 2020/21 v £0 2019/20).
We are extremely grateful to NHS Charities Together that have kindly provided us with grants totalling £152,500 from the emergency appeal. We plan to apply for further funding from the Stage 3 grant allocation to support staff recovery and resilience in the future.

Gifts from the public (£48,000 2020/21 v not recorded 2019/20).
The outpouring of support for the NHS in the first lockdown was amazing. We were lucky enough to receive donations of flowers, clothing, food, coffee machines and toiletries that we distributed to grateful staff and patients. We estimate that these gifts valued approximately £48,000.



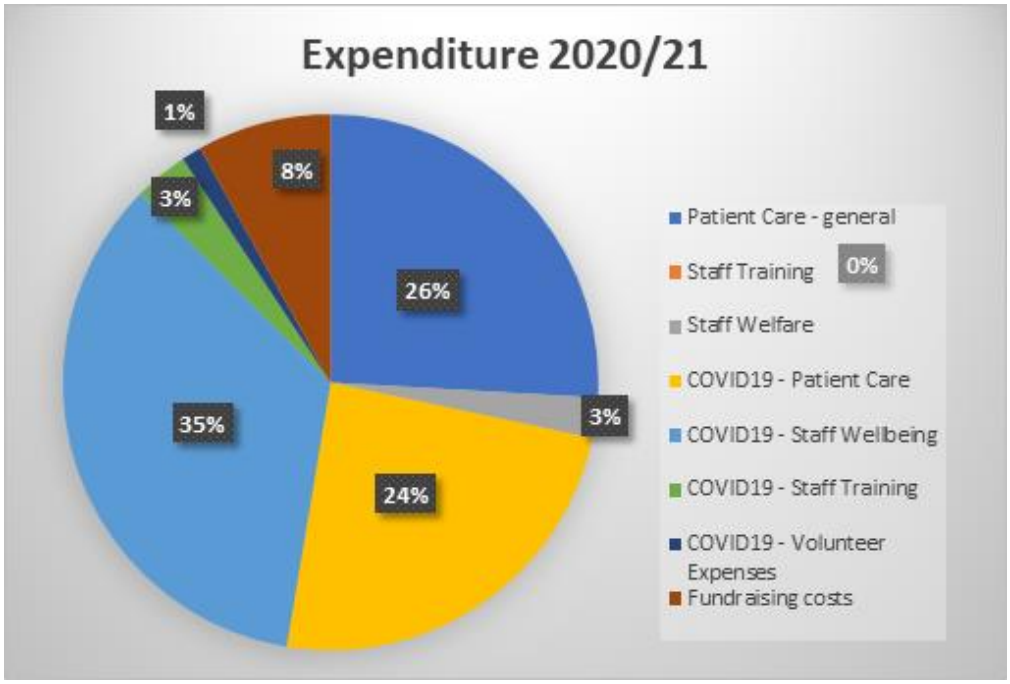


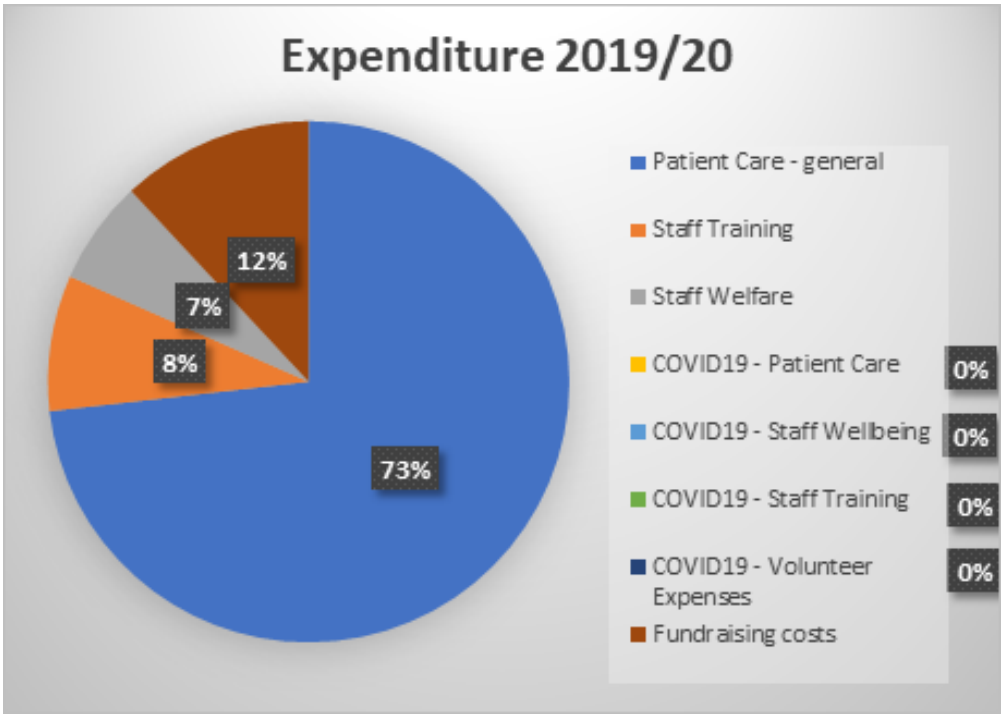
Investment income (£13,000 2020/21 v £19,000 2019/20)
By prudent management of funds not immediately required for use across the Trust, we earned interest and dividends of £13,000. Although impacted initially by Covid-19 at the beginning of the financial year, the markets have re-stabilised during the year and we are starting to recover the initial losses as a result of the global pandemic.

1.6 What we spent the money on.

Our total expenditure for 2020/21 was £295,000, an increase from £190,000 in 2019/20.

As the charts below show, our largest area of spend was on charitable activities in the form of funding requests compared to the previous year. However, the purpose of those funding requests changed. Covid-19 impacted on planned major projects, and we spent more on staff welfare this year than planned due to the specified criteria of expending grants from NHS Charities Together.





Our charitable work was made up of 5 key areas, with some examples below:

Covid-19 Patient Care (including gifts in kind) £85,000.

- devices for patients to communicate with families during lockdown.
- patient entertainment packs to relieve boredom.
- bereavement care packs for palliative patients.
- physio and wellbeing packs for adult learning disability service.
- infection control friendly Christmas decorations for inpatient units.
- portable oil heated radiators.
- framed artwork for inpatient units.
- digital neuro music therapy for SaLT patients.
- patient care packages for personal care during no visitation.





Covid-19 Staff Wellbeing and Training including gifts in kind £117,000.

- mental health first aider ‘train the trainer’ training.
- weekly fresh fruit provisions.
- Christmas festive boxes for Trust teams.
- outdoor gym provision at North Walsham.
- funding mental wellbeing staff publication provision.
- microfibre cooling towels for Ward and community nursing teams.





Covid-19 Volunteer expenses £3,000.

- FIT face mask fitting mileage expenditure.

Patient Care £64,000 2020/21 v £139,000 2019/20.

- neuro musical therapy project.
- riser beds for patients to aid rehabilitation.
- dementia friendly analogue clocks.
- neuromuscular Electrical Stimulation Dysphagia Treatment system for Stroke patients.
- u-Step walker for Swaffham Hospital.
- library book provision for patients.
- television and DVD player for children's services day room.
- outdoor furniture for Caroline House.
- hydrant bottles for Multiple Sclerosis patients.
- patient information care boards.
- new garden room at Dereham Hospital on Foxley ward.



Fundraising costs reduced to £19,000 2020/21 v £20,000 2019/20.

These fundraising costs represent 25% of the support costs relating to the charity to reflect the time spent on general administration which is not specific to a particular fund or request. These costs include salaries and Trust support recharges and the reduction relates to a change in personnel overseeing the Charity financial processes. The remaining costs are apportioned to the funds that have had activity in the quarter, against their final balance. This follows the SORP guidance (8.8)

1.7 How we manage the money

NCH&C NHS Trust Charitable Fund makes grants from both its restricted and unrestricted funds.

Within the unrestricted funds (totalling £777,000 on 31st March 2021), grants are made from general funds and designated funds.

- **Norfolk General Fund –** The general Fund manages donations received by the charity with no particular preference expressed by donors. The funds are currently used for two main purposes: Firstly, to provide grants to support beneficiaries, services and strategic activities where designated and restricted funds are not available; Secondly, to meet the support costs of the charity.

- **Health and Care Fund** – the Health and Care Fund receives donations where donors have expressed a wish or preference that falls short of a formal restriction. This umbrella fund houses a large number of designated funds linked to specific services or activities.

The charity also makes grants from a small number of restricted funds (totalling £112,000 on 31st March 2021), including restricted grants from other bodies, and legacies.

The charity has one capital endowment fund, the Swaffham Shephard CIP (balance at 31st March 2021 £33,000), the investment return from which is used to support grants to Swaffham Hospital.

The trustee, through the Charitable Funds Committee, invites requests for grants from any member of NCH&C NHS Trust staff and from committees and project work groups of those staff. Individual budget holders represent the localities and services that they have managerial responsibility for and are required to discuss and sign off requests within their area of activity.

Day to day responsibility for the management of grant requests and authorised spending lies with the Charity Development and Project Manager. There is an on-going programme of activities and promotion to ensure that staff are engaged in the process and that requests reflect the full range of potential beneficiaries. Funding requests are reviewed to ensure that they are in keeping with the charity's objectives, its published *Policies and Procedures*, and the Charity Commission's guidance on public benefit. Single requests in excess of £10,000 are considered individually by the Charitable Funds Committee.

Distribution and Investment Policy.

The charity's *Distribution and Investment Policy* is reviewed annually. The Policy provides a framework to ensure that the charity's incoming resources can be applied to meet the expectations of donors, and the needs of beneficiaries, in an effective and timely way. This includes:

- Seeking to spend all new donations within two years of the donation being made;
- Prioritising the spending of restricted and legacy funds over general funds in order to ensure that there is not an unnecessary proliferation of funds;
- Spending down historically accrued funds.

Our reserves policy.

The charity follows Charity Commission guidance with respect to reserves, and to its sustainability. This means that in calculating our reserves we exclude:

- Permanent or expendable endowments;
- Restricted funds;
- Designated funds.

The charity's policy is to maintain sufficient reserves to meet 12 months operational costs excluding those covered by existing net assets, and budgeted spending from endowments, restricted or designated funds.

The free reserves currently stand at £90,000 and are calculated as follows:

Total unrestricted funds of £777,000.

Less designated funds £687,000.

Total reserves £90,000

As of 31st March 2021, planned levels of operational costs amount to £94,000 over the next 12 months.

Action will be continued over the next 12 months to reduce the excess unrestricted funds level. This includes investing in the capacity of the charity to raise additional income and investment in specific projects to benefit patients, families and carers.

The charity reviews its reserves policy annually.

2. Our structure, governance and management.

The registered address of the charity is:

Norfolk Community Health and Care NHS Trust Charitable Fund
Woodlands House
Norwich Community Hospital
Bowthorpe Road
Norwich
Norfolk
NR2 3TU

The NCHC Charity is registered with the Charity Commission under the Registered Number 1051173.

Formerly known as the Norwich Community Health Partnership NHS Trust Charitable Fund, the governing document is a deed dated 6 November 1995.

Its objects are 'for any charitable purpose or purposes relating to the National Health Service'.

Trustee Arrangements.

Norfolk Community Health and Care NHS Trust is the Corporate Trustee. During the year, the following Directors served Norfolk Community Health and Care NHS Trust:

Geraldine Broderick	Chair
Josephine Spencer	Chief Executive
Paul Cracknell	Deputy Chief Executive (Left 31st March 2021)
John Webster	Deputy Chief Executive and Director of Strategy and Transformation (on secondment from 1st April 2021)
Andrew Hopkins	Director of Finance and Performance
Dr Venu Harilal	Medical Director
Carolyn Fowler	Director of Nursing and Quality
Laura Clear	Director of Community Health and Social Care Operations
Lorna Bailey	Non-Executive Director
Njoki Yaxley	Non-Executive Director
Steve Crowe	Non-Executive Director
Andrew Williams	Non-Executive Director
Graham Nice	Non-Executive Director

Our advisors

Bankers:
Barclays Business Banking
PO Box 614
St Cuthbert's House
7 Upper Kings Street
Norwich BX3 2BB

Investment Manager:
Barratt & Cooke Ltd
5-6 Opie Street
Norwich
Norfolk
NR1 3DW

Independent examiners
Larking Gowen LLP
King Street House
15 Upper King Street
Norwich
NR3 1RB

Legal advisors:
Mills & Reeve
1 St. James Court
Whitefriars
Norwich
NR3 1RU

Recruitment, appointment and induction of Trustee representatives.

The Trust Board has delegated responsibility to manage the charitable funds to the Charitable Funds Committee.

Membership of the Charitable Funds Committee is determined by the Terms of Reference of the charity, which are reviewed annually by the Board of the corporate trustee.

The membership of the Charitable Funds Committee for the reporting period 1 April 2020 to 31 March 2021 was as follows:

Andrew Williams	Committee Chair, Non-Executive Director
Lorna Bailey	Non-Executive Director
Andrew Hopkins	Director of Finance and Performance
Carolyn Fowler	Director of Nursing and Quality (until 17th November 2021)
Dr Venu Harilal	Medical Director (from 18th November 2021)

The Trustee is particularly keen to ensure that the charity is managed for the public benefit, and that conflicts of interest arising from corporate trusteeship are monitored and managed effectively.

The Trustee and the Charitable Funds Committee operates within the Charity Commission's guidance: *The Essential Trustee* and *Guidance for charities with a connection to a non-charity*. Compliance with the guidance is monitored continually

and is formally assessed annually as part of the Charitable Funds Committee's Self-assessment and Annual Review.

All Trustee representatives benefit from an annual programme of training and support covering the pursuit of public benefit, new developments with respect to the governance of NHS charities, and changes and updates to Charity Commission guidance with respect to charities in general.

New members are given a full induction by the Charity Development and Project Manager covering NHS Charity law and guidance, Charity Commission guidance, guidance provided by the Fundraising Regulator, and guidance from the Information Commissioner's Office regarding GDPR and privacy.

Members of the Charitable Funds Committee are provided with the charity's governing documents, *Terms of Reference*, *Policies and Procedures*, and *Distribution and Investment Policy*. They are advised on particular charity matters throughout the year by the Charity Development and Project Manager and by other Trust staff. They undertake additional training as required.

Trustee remuneration.

All Trustee representatives give their time freely and no remuneration was paid in the year. Additionally, there have been no expenses paid to Trustee representatives during 2020/21.

Trustee declarations of interest and loyalty.

Trustee representatives are required to disclose all relevant interests and register them with the NCH&C Trust Secretary. They are required to withdraw from decisions where a personal conflict of interest or loyalty arises as defined by Charity Commission guidance.

Our employees.

The charity has no direct employees.

The Charity Development and Project Manager, and the Charity Administrator and Finance Officer, are employed by Norfolk Community Health and Care NHS Trust on the same terms and conditions (Agenda for Change) as staff in the NHS. Remuneration is reviewed annually and is increased in accordance with the nationally agreed increases in pay scale.

The service is an outsourced function provided by NCH&C on behalf of the charity and the cost of employment is recharged by the Trust to the charity.

3. Risk Analysis.

Future levels of income.

NCH&C Charitable Fund is reliant on donations to allow it to make grants to NHS bodies. If income falls, the charity will not be able to support as many activities across the Trust or enter into longer term commitments.

The committee mitigates that risk by engaging with the Charity Development and Project Manager and Charity Administrator and Finance Officer. This team provides a co-ordinated approach to raising funds.

The public's support of the NHS has been demonstrated through increased donations during the Covid-19 pandemic, particularly through the national emergency appeal managed by NHS Charities Together. Income from in memory and community donations have decreased due to social distancing restrictions relating to the pandemic. The team has managed this risk by pivoting fundraising to online platforms to engage remotely and virtually with supporters and donors.

Covid-19 third wave.

Another wave of the Coronavirus would impact the progress of any planned charity activities, due to changing pressures on the Trust and access to site locations. We have implemented many new ways of working to help support the Trust through another pandemic if required.

Fall in investment returns.

NCH&C Charitable Fund generates additional income from investing its cash balances and the committee considers the loss of investment income to be a financial risk. The risk is increased as a result of the impact of the Covid-19 pandemic on the global stock market. The risk is mitigated by retaining expert investment managers, having a diversified investment portfolio and regular monitoring and review processes.

Unforeseen changes in the operation of the NHS.

The NHS is, by its very nature, subject to national changes in government policy as well as local politically driven decisions. The Charitable Fund committee has identified this as a risk as it means that the initiatives and activities supported by the charity, may no longer delivered by NCH&C NHS Trust.

4. Working Relationships.

Related Parties.



The charity provides grants to the NCH&C NHS Trust and other organisations working in partnership with it. The Trust acting as Corporate Trustee for the charity has appointed a Charitable Fund committee – a sub-committee of the NCH&C NHS Trust Board.

To ensure the effectiveness of the charity, the Charitable Fund committee consults widely with Trust representatives and staff through formal and informal contact but retains independence to act in the best interests of the charity and its beneficiaries.

The charity receives corporate support from the NCHC&C NHS Trust and is charged annually to cover those costs.

Wider networks.

NCH&C Charitable Fund is one of over 240 NHS linked charities in England and Wales who are eligible to join NHS Charities Together. As a member charity, we have the opportunity to discuss matters of common concern and exchange information and experiences, join together with others to lobby government departments and to participate in conferences and seminars which offer support and education for our staff and members of the charitable fund committee.

This year as a member of NHS Charities Together, we have been very grateful to receive grants from the national emergency appeal.

Our relationship with the wider community.

The ability of NCH&C Charitable Fund to continue its vital support for the NHS at NCH&C NHS Trust is dependent on its ability to raise funds from the general public. NCH&C Charitable Fund also continues to forge strong relationships with members of NHS staff whose co-operation enables us to make effective contributions.

Volunteers



On behalf of the Trustee body, NCH&C Charitable Fund committee would like to thank:

- Our fundraisers who have kindly undertaken fundraising activities.
- Staff at Norfolk Community Health and Care (NCH&C) NHS Trust.
- NHS Charities Together NHSCT.
- Unison.
- The Friends of Kelling Hospital.
- The Friends of Dereham Hospital.
- The Friends of North Walsham War Memorial Hospital.
- Priscilla Bacon Support Group.
- Swaffham Community Hospital League of Friends.
- Voluntary Norfolk.
- Business in the Community.
- Norfolk NHS Superheroes.
- Co-Op (Brundall, Sprowston).
- Local knitters and craft groups.

5. Statement of Trustee responsibilities.

The law applicable to charities in England and Wales requires the Trustee to prepare financial statements for each financial year which give a true and fair view of the charity's financial activities during the year and of its financial position at the end of the year. In preparing financial statements giving a true and fair view, the Trustee should follow best practice and:

- Select suitable accounting policies and then apply them consistently;
- Make judgements and estimates that are reasonable and prudent;
- State whether applicable accounting standards and statements of recommended practice have been followed, subject to any departures disclosed and explained in the financial statements; and
- Prepare the financial statements on the going concern basis unless it is inappropriate to presume that charity will continue in operation.

The Trustee is also responsible for keeping accounting records which disclose with reasonable accuracy the financial position of the charity and which enable them to ascertain the financial position of the charity and which enable them to ensure that the financial statements comply with the Charities Act 2011, the Charity (Accounts and Reports) Regulations and the provisions of the Trust Deed. The Trustee is also responsible for safeguarding the assets of the charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

The Trustee confirms it has met the responsibilities set out above and complied with the requirements for preparing the accounts on a going concern basis. The financial statements and notes to the accounts set out on pages 24 to 37 attached have been compiled from and are in accordance with the financial records maintained by the Trustee.

By Order of the Trustee



Date: 8 October 2021

Andrew Hopkins
Director of Finance and Performance on behalf of the Corporate Trustee



Date: 8 October 2021

Andrew Williams
Chair of the Charitable Funds Committee on behalf of the Corporate Trustee

Independent Examiner's Report to the Trustee of Norfolk Community Health and Care NHS Trust Charitable Fund

I report to the charity trustees on my examination of the accounts of the charity for the year ended 31 March 2021 which are set out on pages 24 to 37.

This report is made solely to the Trustee, as a body, in accordance with section 149 of the Charities Act 2011 and regulations made under section 149 of that Act. My work has been undertaken so that I might state to the Trustee those matters that are required to be stated in an Independent examiner's report and for no other purpose. To the fullest extent permitted by law, I do not accept or assume responsibility to anyone other than the charity and the Trustee as a body, for this examination, for this report, or for the statements made.

Responsibilities and basis of report

As the charity's trustees you are responsible for the preparation of the accounts in accordance with the requirements of the Charities Act 2011 ('the 2011 Act').

I report in respect of my examination of the charity's accounts carried out under section 145 of the Act and in carrying out my examination I have followed all the applicable Directions given by the Charity Commission under section 145(5)(b) of the 2011 Act.

Independent examiner's statement

I have completed my examination. I confirm that no material matters have come to my attention in connection with the examination giving me cause to believe that in any material respect:

1. accounting records were not kept in respect of the charity as required by section 130 of the 2011 Act; or
2. the accounts do not accord with those records; or
3. the accounts do not comply with the applicable requirements concerning the form and content of accounts set out in the Charities (Accounts and Reports) Regulations 2008 other than any requirement that the accounts give a 'true and fair view' which is not a matter considered as part of an independent examination.

I have no concerns and have come across no other matters in connection with the examination to which attention should be drawn in this report in order to enable a proper understanding of the accounts to be reached.

Signed: 

Giles Kerkham, FCA DChA

Larking Gowen LLP

Chartered Accountants

King Street House
15 Upper King Street
Norwich
NR3 1RB

Date: 13-10-2021

Statement of Financial Activities for the year ending 31 March 2021

	Note	Unrestricted Funds 2020/21 £'000	Restricted Funds 2020/21 £'000	Endowment Funds 2020/21 £'000	**Total Funds 2020/21 £'000**	Total Funds 2019/20 £'000
Income and Endowments from:						
Donations, legacies and Gifts in Kind	2	132	60	0	192	182
Charitable activities	2	0	153	0	153	0
Income from investments		12	1	0	13	19
Transfer between funds	9	(5)	5	0	0	0
Total incoming resources		**139**	**219**	**0**	**358**	**201**
Expenditure on:						
Charitable activities						
Patient Care - general	4.2	(62)	(2)	0	(64)	(139)
Patient Care - staff training	4.2	(2)	6	0	4	(16)
Staff Welfare	4.2	(6)	0	0	(6)	(12)
COVID19 - Patient Care	4.2	(18)	(42)	0	(60)	0
COVID19 - Patient Gifts in Kind	4.2	0	(25)	0	(25)	0
COVID19 - Staff Wellbeing	4.2	(27)	(59)	0	(86)	0
COVID19 - Staff Gifts in Kind	4.2	0	(23)	0	(23)	0
COVID19 - Staff Training	4.2	(2)	(6)	0	(8)	0
COVID19 - Volunteer Expenses	4.2	(1)	(2)	0	(3)	0
Sub Total Charitable Activities		**(118)**	**(153)**	**0**	**(271)**	**(167)**
Fundraising costs	4.1	(19)	0	0	(19)	(20)
Governance costs	4.2	(3)	0	0	(3)	(2)
Amortisation	5.2	(2)	0	0	(2)	(1)
Total expenditure		**(142)**	**(153)**	**0**	**(295)**	**(190)**
Net incoming/(outgoing) resources before other recognised gains/(losses)		**(3)**	**66**	**0**	**63**	**11**
Net gains/(losses) on investments	5	29	2	1	32	(53)
Net movement in funds		**26**	**68**	**1**	**95**	**(42)**
Reconciliation of funds:						
Total funds brought forward		751	44	32	827	869
Total funds carried forward	10	**777**	**112**	**33**	**922**	**827**

The notes on pages 26 to 37 form part of these accounts

Balance Sheet at 31 March 2021

	Note	Unrestricted funds 31 March 2021 £'000	Restricted funds 31 March 2021 £'000	Endowment funds 31 March 2021 £'000	**Total funds 31 March 2021 £'000**	**Total funds 31 March 2020 £'000**
Fixed assets:						
Intangible Assets - Harlequin	5.2	7	0	0	7	9
Investments	5.1	686	38	33	757	725
Total fixed assets		**693**	**38**	**33**	**764**	**734**
Current assets:						
Debtors	6	34	171	0	205	254
Cash at bank and in hand		148	110	0	258	138
Gifts in Kind Stock		0	0	0	0	0
Total current assets		**330**	**391**	**0**	**463**	**392**
Liabilities:						
Creditors falling due within one year	7	(98)	(207)	0	(305)	(299)
Net current assets / (liabilities)		**232**	**184**	**0**	**158**	**93**
Total net assets / (liabilities)		**925**	**222**	**33**	**922**	**827**
The funds of the charity:						
Endowment funds		0	0	33	33	32
Restricted funds		0	112	0	112	44
Unrestricted funds		777	0	0	777	751
Total charity funds	11	**777**	**112**	**33**	**922**	**827**

Approved by the Charitable Funds Committee at its meeting on 09 September 2021.



Andrew Williams
Chair of the Charitable Funds Committee on behalf of the Corporate Trustee

Notes to the financial statements

1. Accounting Policies

The policies adopted by the charity in preparing these financial statements are described below. They have been applied consistently in dealing with items considered material in relation to the financial statements.

(a) Basis of preparation
The financial statements have been prepared under the historic cost convention, with the exception of investments which are measured at fair value. The financial statements have been prepared in accordance with the Statement of Recommended Practice (SORP): Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standard applicable to the UK and Republic of Ireland (FRS 102) effective 1 October 2019 and the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102) and the Charities Act 2011 and UK Generally Accepted Practice as it applies from 1 January 2019.

Additional information is provided where it is believed to be useful to the reader.

The Trustee considers there are no material uncertainties about the charity's ability to continue as a going concern. Whilst the Covid-19 pandemic has had an impact on the Charity, it is not such a significant impact as to affect the charity's ability to continue as a going concern. These financial statements have therefore been prepared on a going concern basis.

There are no material uncertainties affecting the financial statements. The Covid-19 pandemic has had an impact on the charity’s fundraising income for unrestricted funds although this is partially offset by the generous donations made by members of the public in the first lockdown and restricted income from the NHS Charities Together national appeal.

(b) Funds structure
Where there is a legal restriction on the purpose to which a fund may be put, the fund is classified either as a restricted income fund, where the donor has provided for the donation to be spent in furtherance of a specified charitable purpose or as an endowment fund, where the charity restrictions only permit the income of the fund being expended as per the donors wishes.

Unrestricted income funds comprise those funds which the Trustee is free to use for any purpose in furtherance of the charitable objectives. Unrestricted funds include designated funds, where the donor has made known their non-binding wishes or where the Trustee has, at its discretion, created a fund for a specific purpose.

(c) Incoming resources
All incoming resources are recognised once the charity has entitlement to the resources, it is probable (more likely than not) the resources will be received, and the monetary value of incoming resources can be measured with sufficient reliability.

Where there are terms or conditions attached to incoming resources, these terms or conditions must be met before the income is recognised. Where terms or conditions have not been met or uncertainty exists as to whether they can be met then the relevant income is not recognised in the year. If received, incoming resources with unmet terms or conditions are deferred and shown on the balance sheet as deferred income.

(d) Incoming resources from legacies
Legacies are accounted for as incoming resources either upon receipt or where the receipt of the legacy is probable. Receipt is probable when:

- confirmation has been received from the representatives of the estate that probate has been granted;
- the executors have established there are sufficient assets in the estate to pay the legacy; and
- all conditions attached to the legacy have been fulfilled or are within the charity's control.

If there is uncertainty as to the amount of the legacy and it cannot be reliably estimated then the legacy is shown as a contingent asset until all the conditions for income recognition are met.

(e) Incoming resources from endowment funds

The incoming resources receivable from the investment of endowment funds are restricted for NHC&H charity and have been earmarked in accordance with the donor's stated wishes.

(f) Incoming resources from donations in kind

The amount at which gifts in kind are included in the Statement of Financial Activities is a reasonable estimate of their fair value to the charity. Where gifts in kind are included in the Statement of Financial Activities at their estimated fair value, the current value will be the price the charity estimates it would have to pay in the open market for an equivalent item.

(g) Investment income and realised and unrealised gains and losses

Investment income and realised and unrealised gains and losses are apportioned to individual restricted and endowment funds and the Norfolk General Fund (an unrestricted fund) on the basis of the average balances held on unrestricted, restricted and endowment funds.

(h) Resources expended and irrecoverable VAT

All expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all costs related to each category of expense shown in the Statement of Financial Activities. Expenditure is recognised when the following criteria are met:

- there is a present legal or constructive obligation resulting from a past event;
- it is more likely than not that a transfer of benefits (usually a cash payment) will be required in settlement; and
- the amount of the obligation can be measured or estimated reliably.

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

(i) Recognition of expenditure and associated liabilities as a result of a grant

Grants payable are payments made in furtherance of the charitable objectives of the funds held on trust, primarily being relief of those who are sick.

Grant payments are recognised as expenditure when the conditions for their payment have been met or where there is a constructive obligation to make a payment.

A constructive obligation arises when:

- the charity has communicated its intention to award a grant to a recipient who then has a reasonable expectation that they will receive a grant;
- the charity has made a public announcement about a commitment which is specific enough for the recipient to have a reasonable expectation that they will receive a grant; or
- there is an established pattern of practice which indicates to the recipient the charity will honour its commitment.

The Trustee has control over the amount and timing of grant payments and consequently where approval has been given by the Trustee and any of the above criteria have been met the a liability is recognised. Grants are not usually awarded with conditions attached. However, when they are, then those conditions must be met before the liability is recognised.

(j) Allocation of support costs

Support costs are those costs which do not relate directly to a single activity. These include the costs of staff supporting the operational activites of the charity, administration costs, and the cost of the independent examination. Support costs have been apportioned between fundraising costs and charitable activities as set out in note 4 to these financial statements. All support costs are met by the Norfolk General Fund (unrestricted). The analysis of support costs and the bases of apportionment applied are shown in note 4.

(k) Fundraising costs

The costs of generating funds are those costs attributable to generating income for the charity, other than those costs incurred in undertaking charitable activities. The costs of generating funds represent fundraising costs together with investment management fees. Fundraising costs include the salaries and overhead costs of the Corporate Trustee's fundraising office.

(l) Charitable activities

Costs of charitable activities comprise all costs incurred in the pursuit of the charitable objects of the charity. These costs, where not wholly attributable, are apportioned between the categories of charitable expenditure in addition to the direct costs. The total costs of each category of charitable expenditure therefore include support costs and an apportionment of overheads.

(m) Fixed asset investments
Investments are a financial instrument. Fixed asset (non current) investments are initially recognised at their transaction value and are subsequently measured at their fair value (market value) at the balance sheet date (31 March each year). The Statement of Financial Activities includes the net gains and losses arising on revaluation and disposals throughout the year. Quoted stocks and shares are included in the balance sheet at the current market value quoted by an investment analyst.

The main form of risk to the charity's financial assets is that of volatility in equity and bond markets and investment markets due to wider economic conditions, the attitude of investors to investment risk, and changes in sentiment concerning equities and within particular sectors or sub sectors.

(n) Debtors
Debtors are amounts owed to the charity. They are measured at their recoverable amount.

(o) Cash and cash equivalents
Cash at bank and in hand is held to meet the day to day running costs of the charity as they fall due. Cash equivalents are short term, highly liquid investments, usually in 90 day notice interest bearing savings accounts.

(p) Creditors
Creditors are the amounts owed by the charity. They are measured at the amount that the charity expects to have to pay to settle the debt.

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

(r) Staff costs and pensions
NCHC Trust fully re-charged NCHC Charitable Fund for the 2 members of staff who work full time for the charity.

Staff members belong to the NHS Pension Scheme which is an unfunded defined benefit scheme which is accounted for as a defined contribution scheme. The recharge from NCHC Trust includes the employee contributions to that scheme. For more information on the NHS Pension Scheme refer to the NCHC Trust annual report and accounts.

(s) Intangible assets
Intangible assets are non-monetary assets without physical substance which are capable of being sold separately from the charity's business or which arise from contractual or other legal rights. They are recognised only where it is probable that future economic benefits will flow to, or service potential be provided to the charity, and where the cost of the asset can be measured reliably.

Intangible fixed assets are amortised at rates calculated to write then down to estimated residual values on a straight line basis over their estimated useful lives. Computer software is expected to have a useful life of 5 years.

Note 2. Income from donations and legacies

	Unrestricted Funds 2020/21 £'000	Restricted Funds 2020/21 £'000	Endowment Funds 2020/21 £'000	**Total Funds 2020/21 £'000**
Donations	64	12	0	**76**
Legacies	66	0	0	**66**
Gift Aid	2	0	0	**2**
Gifts in Kind	0	48	0	**48**
Grants	0	153	0	**153**
Donations and legacies total	132	213	0	**345**

Donations includes gifts from members of the public, relatives of patients and staff, as well as funding from organisations such as leagues of friends and similar support groups.

Donations of goods £48,000 are included in income valued at a fair value. All of these donations, have been distributed during the year.

	Unrestricted Funds 2019/20 £'000	Restricted Funds 2019/20 £'000	Endowment Funds 2019/20 £'000	**Total Funds 2019/20 £'000**
Donations	29	206	0	**235**
Legacies	146	0	0	**146**
Gift Aid	0	0	0	0
Gifts in Kind	0	0	0	0
Grants	0	0	0	0
Donations and legacies total	175	206	0	**381**

Note 3. Role of volunteers

The charity benefits from volunteers to assist with its management and functioning. They perform two main roles:

• There are a number of people who, in addition to our one-off donors, actively and regularly fundraise in support of the charity by holding events, sales of goods, and taking collections at christmas and other times of the year. During 2020/21, these arrangements stopped but we kept in touch with our volunteers and some of them have given their time to help during the pandemic.

• Assistant Directors of the Trust provide an assurance role in enabling the charity to manage how its designated funds are spent. Their role is to assist the Trustee in ensuring that funds are spent appropriately, ensuring that funds are spent in accordance with the Objects of the charity and on activities over and above those normally expected to be provided through NHS funds.

In accordance with the SORP, due to the absence of any reliable measurement basis, the financial contribution of these volunteers is not recognised in the accounts.

Note 4. Expenditure

The charity incurs three broad types of expenditure:
- grant funded activity. The charity mainly pursues its charitable activities by making grants rather than directly undertaking charitable activities;
- fundraising costs; and
- support costs.

Grant funded activity is allocated directly to the fund or funds the grant is made from.

Fundraising costs are allocated fully to unrestricted funds.

Support costs are allocated fully to the unrestricted general fund and are made up of:
1. Governance costs. These are the costs associated with the governance arrangements of the charity and include the preparation and independent review of the annual financial statements and costs to provide financial information throughout the year to the Charitable Funds Committee.
2. Other support costs, primarily recharges of the Fundraising Manager, Charity Development and Project Manager, Charity Administrator and Finance Officer and related charges by the Corporate Trustee when performing work for the charity.

Staff costs are allocated between raising fund costs and support costs in proportion to the time spent on each type of activity.

Support costs are allocated monthly across the four categories of charitable expenditure incurred - patient care, staff training, staff welfare and volunteer expenses. This is calculated on a percentage of the months expenditure for each of the four categories.

Note 4.1 shows the allocation of fundraising costs to the different fund types.

Note 4.2 shows the allocation of support costs to the categories of charitable expenditure incurred.

Note 4.1 Analysis of fundraising expenditure

	Unrestricted	**Restricted**	**Endowment**	**Total 2020/21**
	£'000	£'000	£'000	**£'000**
Software licence	0	0	0	**0**
Fundraising office	17	0	0	**17**
Other fundraising costs	3	0	0	**3**
Total	**19**	**0**	**0**	**19**

	Unrestricted	**Restricted**	**Endowment**	**Total 2019/20**
	£'000	£'000	£'000	**£'000**
Software licence	1	0	0	**1**
Fundraising Manager cost	16	0	0	**16**
Other fundraising costs	3	0	0	**3**
Total	**20**	**0**	**0**	**20**

Note 4.2. Analysis of charitable expenditure

The charity did not undertake any direct charitable activites on its own account during the year.
All of the charitable expenditure was in the form of grant funding.

	2020/21	2020/21	**2020/21**
	Grant Funded Activity	**Support costs**	**Total expenditure on charitable activities**
	£'000	**£'000**	**£'000**
Patient care - general	29	35	**64**
Patient care - staff training	(4)	0	**(4)**
Staff Welfare	3	3	**6**
COVID19 - Patient Care	42	18	**60**
COVID19 - Patient Gifts in Kind	25	0	**25**
COVID19 - Staff Wellbeing	61	25	**86**
COVID19 - Staff Gifts in Kind	23	0	**23**
COVID19 - Staff Training	6	2	**8**
COVID19 - Volunteer Expenses	2	1	**3**
Total	**187**	**84**	**271**

	2019/20	2019/20	**2019/20**
	Grant Funded Activity	**Support costs**	**Total expenditure on charitable activities**
	£'000	£'000	**£'000**
Patient care - general	**60**	79	**139**
Patient care - staff training	**9**	7	**16**
Staff Welfare	**6**	6	**12**
COVID19 - Patient Care	**0**	0	**0**
COVID19 - Patient Gifts in Kind	**0**	0	**0**
COVID19 - Staff Wellbeing	**0**	0	**0**
COVID19 - Staff Gifts in Kind	**0**	0	**0**
COVID19 - Staff Training	**0**	0	**0**
COVID19 - Volunteer Expenses	**0**	0	**0**
Total	**75**	**92**	**167**

Support costs included in charitable activities	**31 March 2021**	**31 March 2020**
	£'000	£'000
Fundraising office	67	64
Administrative support costs	18	28
Total	**84**	**92**

Governance costs breakdown	**31 March 2021**	**31 March 2020**
	£'000	£'000
Independent examination	3	2
Other governance costs	0	0
Total	**3**	**2**

Note 4.3. Analysis of staff costs and renumeration of key management personnel

The average number of full-time equivalent employees during the year was 2.08 (2019/20: 1.79) with all employees involved in providing support services to charitable activities or the governance of the charity.

Staff costs

	31 March 2021	31 March 2020
	£'000	£'000
Salaries and Wages	70	64
Social Security Costs	7	7
Other Pension Costs	10	9
Total	**87**	**80**

The charity receives corporate support from Norfolk Community Health and Care NHS Trust. An annual charge to cover the cost of these is authorised by the Charitable Funds Committee, which for 2020/21 totalled £11,248 (2019/20: £27,886). The reduction in cost is due in the main to the purchase of specfic charity finance software, reducing the Trust time needed to support with finances.

The Charity considers its key management personnel to be the members of the Norfolk Community Health and Care NHS Trust management board acting on behalf of the corporate trustee. For 2020/21 this was the Director of Finance and Performance, the Director of Nursing and Quality and the Medical Director. There was no recharge of employment benefits for key management personnel during 2020/21 or 2019/20.

No employees had emoluments in excess of £60,000 (2019/20: none).

Note 4.4. Trustee remuneration, benefits and expenses

Members of the Trust board give their time freely and receive no remuneration for the work that they undertake in relation to the Charity. However, they can claim expenses to reimburse them for the costs that they incur in fulfiling their duties relating to the Charity - these include travelling specifically for charitable funds committee meetings and charity specific training events.

No expenses were claimed from the Charity by committee members in 2020/21 or 2019/20.

Note 4.5. Independent examination fees

The independent examiner's remuneration of £2,220 (2019/20: £1,944) related solely to the examination and other fees incurred £654 (2019/20: £nil).

Note 5. Assets

Note 5.1 Movement in fixed asset investments

Movement in fixed asset investments

	2020/21	2019/20
	£'000	£'000
Market value bought forward at 1 April	725	779
Add additions to investments at cost	312	153
Less disposals proceeds	(224)	(233)
Increase / (decrease) in cash held within the portfolio*	(89)	79
Add net (loss)/gain on revaluation	32	(53)
Market value as at 31 March	**757**	**725**

* A small proportion of the investment portfolio is held as cash. This is primarily due to timing differences between the sale of investments and the purchase of new investments. The cash amount is included within the investments balance in the balance sheet, rather than as 'cash at bank and in hand', given it is a part of the overall investment managed portfolio.

All investments are financial assets carried at fair value through net income and are managed by expert advisors.

Fixed asset by type

	31 March 2021	**31 March 2020**
	£'000	£'000
Listed equity	750	312
Fixed interest	0	316
Cash*	7	97
Total	**757**	**725**

All investments are held at their fair value and are managed by expert advisors.

The fixed interest and equity portfolios were merged to create one pool of investments in September 2020.

Realised and unrealised gains and losses are apportioned to individual restricted and endowment funds and the Norfolk General Fund (an unrestricted fund) on the basis of the average balances held on unrestricted, restricted and endowment funds.

Note 5.2 Intangible Fixed Assets

This relates to the accounting software which will be amortised over five years

	31 March 2021	**31 March 2020**
	£'000	£'000
Opening Balance	9	0
Additions	0	9
Amortisation	(2)	0
Closing balance	**7**	**9**

Note 6. Analysis of Current Debtors

Debtors due in less than one year	**31 March 2021 £'000**	31 March 2020 £'000
Other Debtors	205	254
Total	205	288

The debtor balance is made up primarily of two significant debtors; Dereham Garden Room £150,000 and D Burton Legacy £20,000. (2019/: Debtors - Z Merton Legacy £22,000 and Dereham Garden Room £150,000 and I Riley Legacy £63,300).

The Dereham Garden Room building works were delayed due to the pandemic so the funds due from the Dereham Friends group are still outstanding. The work and money transfer will be completed in early 2021/22.

Note 7. Analysis of Current Liabilities

Creditors due in less than one year	**31 March 2021 £'000**	31 March 2020 £'000
Trade Creditors	0	0
Accruals	305	299
Total	305	300

The accruals relate to expenditure requests which have been approved and are outstanding at balance date.

Note 8. Related Party Transactions

Norfolk Community Health and Care NHS Trust is the corporate trustee of the charity and is its main grant beneficiary along with other organisations working in partnership with it - they are therefore related parties. The Trustee appoints Members of the Charitable Funds Committee, a sub-committee of the Norfolk Community Health and Care NHS Trust Board.

Transactions between the Charity and the Trust during the year were in relation to salary payments for its staff, payment of some Charity supplier invoices that were initally paid by the Trust and refunded by the Charity and for administrative and management costs.

The charity did not pay any expenses or honoraria to any member of the Norfolk Community Health and Care NHS Trust Board (the Trustee) or the Charitable Funds Committee in the year 2020/21. (2019/20: £0)

The charity receives corporate support from Norfolk Community Health and Care NHS Trust. An annual charge to cover the cost of these is authorised by the Charitable Funds Committee, which for 2020/21 totalled £11,248 (2019/20: £27,886).

At the end of the financial year £83,595.12 was owed by the Charity to the Trust. (2019/20: £15,205)

Note 9. Transfers between funds

During the year £5,000 was transferred from unrestricted funds to restricted funds to support the delivery of a COVID staff refreshments project. Corporate donations were received as unrestricted but the project was funded through restricted funds.

Note 10. Movement of major funds

The charity has three categories of funds, as explained in note 1 (b), funds structure.

The analysis below shows the opening and closing value including the income and expenditure movement of funds.

	1 April 2020	Income	Expenditure	Gains & Losses	Transfers	31 March 2021
Unrestricted funds						
Norfolk General Fund	115	(8)	(105)	29	58	90
Swaffham Hospital	56	0	(3)			54
Community Specialist Care Team PBL	28	0	0			28
PBL	224	2	1			227
Caroline House	13	11	(9)			16
Legacy Marilyn Rose Holmes	0	0	0			0
Legacy Zienia Merton #1	122	(2)	0			120
Legacy Ida May Riley #2	63	0	0		(63)	0
Legacy Pauline Rosetta Basted (Kelling Hospital)	38	0	0			38
Legacy Brian Anthony Knappett (Wymondham)	11	0	0			11
LEGACY Patricia Ramm (Swaffham Hospital)	0	25	0			25
LEGACY Audrey Edwards (PBL)	0	23	0			23
LEGACY Dorothea Burton (Swaffham)	0	15	0			15
LEGACY Dorothea Burton (Kelling)	0	5	0			5
Health and Care Fund	81	73	(27)			128
Total unrestricted funds	**751**	**145**	**(142)**	**29**	**(5)**	**777**
Restricted funds						
Margaret Rose Goff Learn Disab	16	0	(1)	1		16
Kelling Training Fund	16	0	6	1		23
North Walsham Dayroom Fund	10	0	0	0		10
COVID19 Grants	0	160	(113)	0	5	52
Other Restricted Funds	3	10	(1)	0		12
Total restricted funds	**44**	**170**	**(109)**	**2**	**5**	**112**
Endowment funds						
Swaffham Shephard CIP	32	0	0	1		33
Total endowment funds	**32**	**0**	**0**	**1**	**0**	**33**
Total funds	**827**	**315**	**(251)**	**32**	**0**	**922**

#1 Zienia Merton negative income - reduction in accrued income as legacy was less than originally expected

#2 Ida May Riley - transfer funds to Norfolk General fund as the service the legacy was requested to be spent on no longer exists

	1 April 2019	Income	Expenditure	Gains & Losses	Transfers	31 March 2020
Unrestricted funds						
Norfolk General Fund	303	(13)	(123)	(49)	(3)	115
Swaffham Hospital	58	0	(2)			56
Community Specialist Care Team PBL	13	16	(1)			28
PBL	228	6	(10)			224
Caroline House #1	20	(4)	(3)			13
Legacy Marilyn Rose Holmes	25	7	(32)			0
Legacy Zienia Merton	122	0	0			122
Legacy Ida May Riley	0	63	0			63
Legacy Pauline Rosetta Basted (Kelling Hospital)	0	38	0			38
Legacy Brian Anthony Knappett (Wymondham)	0	11	0			11
Health and Care Fund	26	67	(12)			81
Total unrestricted funds	**795**	**191**	**(183)**	**(49)**	**(3)**	**751**
Restricted funds						
Margaret Rose Goff Learn Disab	18	0	(1)	(1)		16
Kelling Training Fund	21	1	(6)	0		16
North Walsham Dayroom Fund #2	2	(6)	15	(1)		10
Other Restricted Funds	1	1	(2)	(1)	3	3
Total restricted funds	**42**	**(4)**	**6**	**(3)**	**3**	**44**
Endowment funds						
Swaffham Shephard CIP	32	1	0	(1)		32
Other endowment funds	0	0	0	0		0
Total endowment funds	**32**	**1**	**0**	**(1)**	**0**	**32**
Total funds	**869**	**188**	**(177)**	**(53)**	**0**	**827**

#1 Caroline House negative income - transfer £7k to Legacy M Holmes for Music Project

#2 North Walsham Dayroom Fund negative income, income accrual released as project came in under spend

Balance Sheet at 31 March 2020

	Note	Unrestricted funds	Restricted funds	Endowment funds	**Total funds**
		31 March 2020	31 March 2020	31 March 2020	**31 March 2020**
		£'000	£'000	£'000	**£'000**
Fixed assets:					
Intangible Assets - Harlequin	5.2	9	0	0	9
Investments	5.1	663	35	27	725
Total fixed assets		**672**	**35**	**27**	**734**
Current Assets					
Debtors	6	93	161	0	254
Cash at bank and in hand		118	15	5	138
Total current assets		**211**	**176**	**5**	**392**
Liabilities:					
Creditors falling due within one year	7	(132)	(167)	0	(299)
Net current assets / (liabilities)		**79**	**9**	**5**	**93**
Total net assets / (liabilities)		**751**	**44**	**32**	**827**
The funds of the charity:					
Endowment funds		0	0	32	32
Restricted income funds		0	44	0	44
Unrestricted funds		751	0	0	751
Total charity funds	11	**751**	**44**	**32**	**827**