

# NORFOLK COMMUNITY HEALTH AND CARE NHS TRUST CHARITABLE FUND ANNUAL REPORT AND ACCOUNTS 2024/2025



NCH&C  
**Charitable  
Fund**



FUNDRAISING  
REGULATOR



CHARITY COMMISSION  
FOR ENGLAND AND WALES



Norfolk Community  
Health and Care  
NHS Trust





**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



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

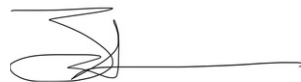
This is my second report as Chair of the charitable funds committee, and I would like to thank everyone who has donated gifts or money this year as well as our staff who have worked so hard over the last two years.

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.

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**

Income  
**£195,000**

Funding grants  
**78** provided

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 Study: 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.

INCOME:  
**£195K**

EXPENDITURE  
**£274K**

### OUR FUNDRAISING PRACTICES



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.

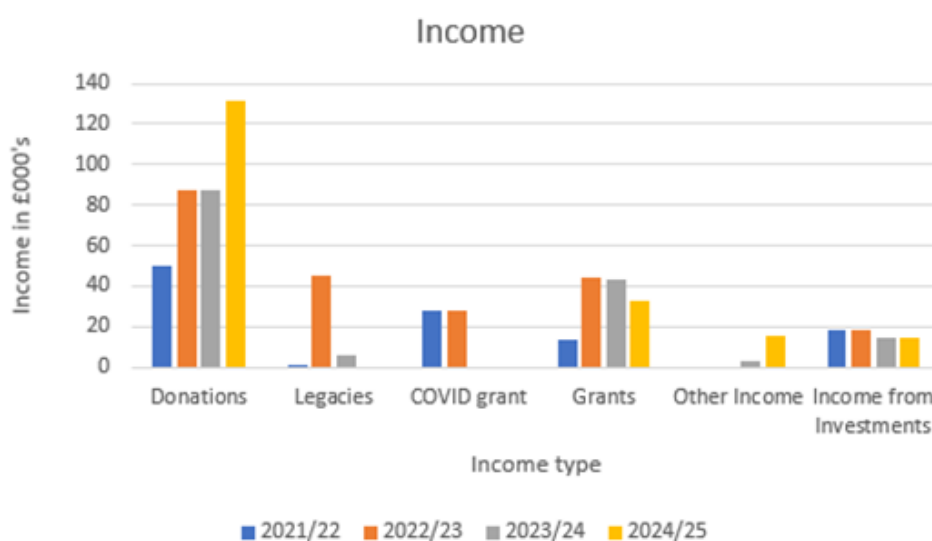
The Fundraising Regulator is the independent regulator of charitable fundraising in England, Wales and Northern Ireland, and we are a member of that organisation. Fundraising Regulator publishes the Code of Fundraising Practice that sets the standards that apply to fundraising carried out by all charities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

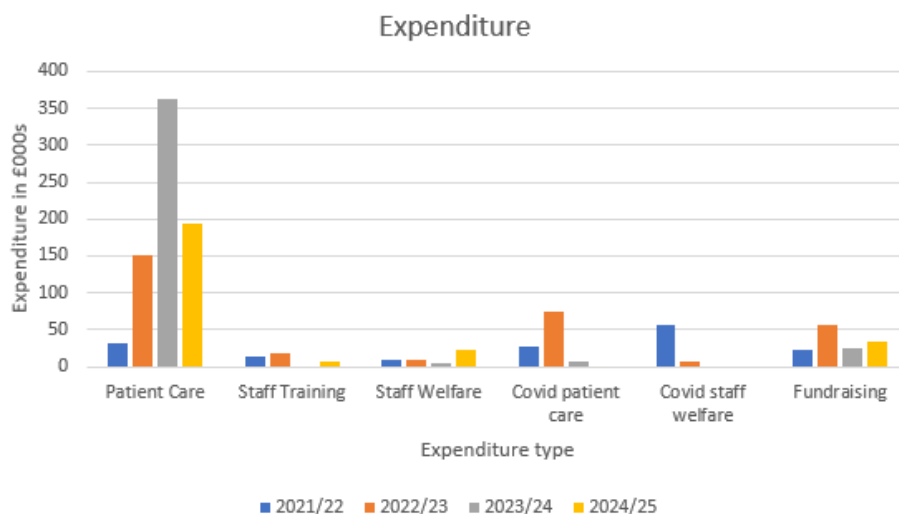
## OUR FUNDRAISING PERFORMANCE

During the year the total donations, legacies and income from fundraising (shown as charitable activities 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.

## PERFORMANCE 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 on 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 1<sup>st</sup> April 2025.

Group Director of Corporate Affairs.

**Angela Moodie** from 21<sup>st</sup> 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 my 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

1<sup>st</sup> 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
<b>Income and Endowments from</b>						
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
<b>Total income</b>		<b>189</b>	<b>6</b>	<b>0</b>	<b>195</b>	<b>154</b>
<b>Expenditure on</b>						
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)
<b>Total expenditure</b>		<b>(222)</b>	<b>(52)</b>	<b>0</b>	<b>(274)</b>	<b>(391)</b>
<b>Net incoming/(outgoing) resources before other recognised gains/(losses)</b>		<b>(33)</b>	<b>(46)</b>	<b>0</b>	<b>(79)</b>	<b>(236)</b>
<b>Net gains/(losses) on investments</b>	5	<b>(21)</b>	<b>(1)</b>	<b>(1)</b>	<b>(23)</b>	<b>18</b>
<b>Net movement in funds</b>		<b>(54)</b>	<b>(47)</b>	<b>(1)</b>	<b>(102)</b>	<b>(218)</b>
<b>Reconciliation of funds</b>						
Total funds brought forward		489	71	36	596	814
<b>Total funds carried forward at 31 March 2025</b>	10	<b>435</b>	<b>24</b>	<b>35</b>	<b>494</b>	<b>596</b>

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

## Balance Sheet at 31 March 2025

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

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 11/12/2025. 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 expenditure for fundraising activities.

#### **(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 volunteers 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**

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

## **Note 4.2. Analysis of charitable expenditure**

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

	2024/25			2023/24		
	Grant Funded Activity £'000	Support costs £'000	Total £'000	Grant Funded Activity £'000	Support costs £'000	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
<b>Total</b>	<b>106</b>	<b>122</b>	<b>228</b>	<b>265</b>	<b>100</b>	<b>365</b>

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

# 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,
- liaising with Friends groups regarding plans for current 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
<b>Total</b>	<b>7</b>	<b>0</b>

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
<b>Total</b>	<b>3</b>	<b>2</b>

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 remuneration of key management personnel**

#### **Staff costs**

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

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 fully 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 fulfilling 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**

	<b>2024/25</b>	<b>2023/24</b>
	<b>£'000</b>	<b>£'000</b>
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
<b>Market value as at 31 March</b>	<b>494</b>	<b>518</b>

\* 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**

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

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

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

### **Note 6. Analysis of Current Debtors**

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

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
<b>Total</b>	<b>115</b>	<b>163</b>

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 initially 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
<b>Unrestricted funds</b>						
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
<b>Total unrestricted funds</b>	<b>489</b>	<b>152</b>	<b>(222)</b>	<b>(21)</b>	<b>36</b>	<b>435</b>
<b>Restricted funds</b>						
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
<b>Total restricted funds</b>	<b>71</b>	<b>37</b>	<b>(52)</b>	<b>(1)</b>	<b>(31)</b>	<b>24</b>
<b>Endowment funds</b>						
Swaffham Shephard CIP	36	5	0	(1)	(5)	35
<b>Total endowment funds</b>	<b>36</b>	<b>5</b>	<b>0</b>	<b>(1)</b>	<b>(5)</b>	<b>35</b>
<b>Total funds</b>	<b>596</b>	<b>194</b>	<b>(274)</b>	<b>(23)</b>	<b>(0)</b>	<b>494</b>

## **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
<b><u>Unrestricted funds</u></b>						
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
<b>Total unrestricted funds</b>	<b>722</b>	<b>114</b>	<b>(373)</b>	<b>16</b>	<b>10</b>	<b>489</b>
<b><u>Restricted funds</u></b>						
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
<b>Total restricted funds</b>	<b>58</b>	<b>37</b>	<b>(20)</b>	<b>0</b>	<b>(4)</b>	<b>71</b>
<b><u>Endowment funds</u></b>						
Swaffham Shephard CIP	35	7	0	0	(6)	36
<b>Total endowment funds</b>	<b>35</b>	<b>7</b>	<b>0</b>	<b>0</b>	<b>(6)</b>	<b>36</b>
<b>Total funds</b>	<b>815</b>	<b>159</b>	<b>(393)</b>	<b>16</b>	<b>0</b>	<b>596</b>

## Note 11. Balance Sheet at 31 March 2024

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

# 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](mailto: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](mailto:chief.exec@nchc.nhs.uk)**

**<https://www.norfolkcommunityhealthandcare.nhs.uk/charity-home/>**



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