



**The Robert Jones and Agnes Hunt  
Orthopaedic Hospital**

NHS Foundation Trust

Registered Charity Number: 1058878

**Oswestry  
Shropshire  
SY10 7AG**

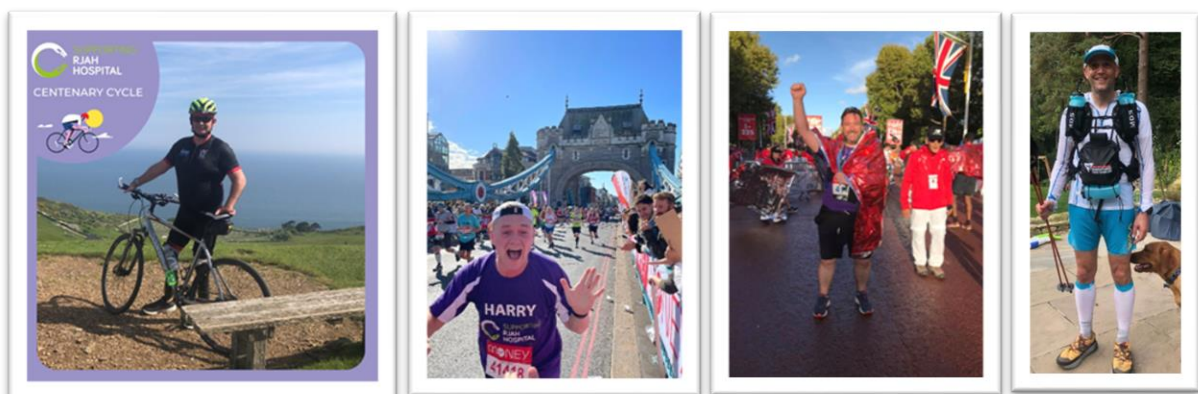
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**2021-22**

**Trustee's Annual Report and Financial Statements  
The Robert Jones and Agnes Hunt Orthopaedic Hospital Charitable Fund**

**Charity Registration No. 1058878**



*Fundraising events are back and so are our wonderful supporters*

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## TRUSTEE'S REPORT

### Foreword by Chairman of the Corporate Trustee

Welcome to our annual report for the year ending 31 March 2022.

I am the new Chair of the Charity but not new to the Charity. I took over as Chair in February 2022, when Frank Collins OBE had completed his term of office. I should like to thank Frank for all the work he put in supporting the Charity and ensuring its success, especially during these last, difficult, couple of years. Frank was made an Officer of the Order of the British Empire (OBE) for his service to the NHS in the Queen's recent Birthday Honours list, a well-deserved recognition. I was fortunate enough to work with Frank on the Charitable Funds Committee for many years and feel privileged to take over from him as Chair of both the Charity and the NHS Foundation Trust.

The Robert Jones and Agnes Hunt Orthopaedic Hospital Charitable Fund (RJA Charity) has continued to support the Trust in its aim to provide the best possible healthcare to its patients and support to its staff during what has been a very challenging and often difficult time for us all.

During the 12 months from 1 April 2021 to 31 March 2022, we received £136,000 and spent £299,000 supporting the care and treatment of patients and the wellbeing of staff.

A large proportion of our funds comes from legacies left by past patients and their family members. We would like to, once again, state our appreciation for the generosity of those who remember us in this way at what is always a difficult time for a family. Through these acts of kind generosity, we can enhance the care and support we give to our patients at our wonderful hospital. This might be through providing equipment or enhanced facilities or perhaps by supporting important research which will benefit both our current and future patients.

Yet again, there was an understandable reduction from pre-pandemic years in donation and fundraising receipts. However, we were most fortunate to receive a further grant of £31,500 from the NHS Charities Together Charity (NHSCT), following the huge response shown for their Emergency Covid-19 NHS Support Appeal. This was in addition to the £151,000 we received last year, some of which funded this year's expenditure. We are particularly proud of the wellbeing path, also known as the Path of Positivity, constructed in the field at the rear of the hospital using some of these funds, the plans for which were mentioned in last year's report. This provides an accessible facility for both patients and staff and, in doing so, pays tribute to the inspirational Captain Sir Tom Moore.

On behalf of the RJA Charity, I thank everyone who raises or donates funds for us and I hope you will continue to be inspired to do so. It is a well-worn phrase but let me emphasise – *"every penny counts"*.

We are very grateful to those of you who continued to support us directly, despite the restrictions we were all living under as we learn to live with Covid-19, for example by taking part in sponsored challenges, asking for donations in lieu of gifts, choosing us as the charity to receive donations in memory of your loved ones, nominating us as the charity to benefit from your workplace charity donation scheme or deciding to make a personal donation. Through these and many other sources of generosity, we received £62,000 in direct donations. An impressive amount, I think you will agree.

We continue to make grants to RJAH FT for expenditure on patient and staff facilities. We have supported and provided improved patient care areas, better equipment, enhanced staff education initiatives and opportunities, as well as a significant number of smaller cost projects which often make such a large difference to patient welfare and comfort. Your donations and support make all of this possible and your future donations are the key to our continued success.

Thank you all and I hope you enjoy reviewing this annual report.



Harry Turner, Chair  
On Behalf of the Corporate Trustee  
7 December 2022



## Who we are

We are the Robert Jones and Agnes Hunt Orthopaedic Hospital Charitable Fund (RJAHC Charity), an NHS Charity set up for the benefit of NHS patients and their families and carers, in particular those of the Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust (RJAHC NHS FT).

We were first registered with the Charity Commission, Registered Charity No. 1058878, on 28 October 1996. The Charity is registered in England and Wales.

RJAHC NHS FT is our corporate trustee with its Board acting on behalf of the corporate trustee. We are managed by a committee, known as the Charitable Funds Committee (CFC), which is made up of designated RJAHC NHS FT Board members as detailed in the Principal Officers section below.

Our annual report and financial statements relate to the funds administered for the public benefit by Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust with due regard to the Charity Commission for England and Wales's guidance on public benefit.

## What we aim to do: our objectives and activities

### Our mission

By raising new money and careful management of our existing funds, we are able to make grants to RJAHC NHS FT and the organisations it works with in order to fulfil its objective:

*"Any charitable purpose or purposes relating to the National Health Service wholly or mainly for the service provided by the Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust."*

Given this wide remit, the charity seeks in particular to add to or enhance the services provided by the NHS whilst ensuring the wishes of the donors are respected at all times.

RJAHC NHS FT's stated ambition is to be recognised as the leading centre for orthopaedic care in the UK, with providing the highest quality care as their clear priority and the priority of all who work at the hospital.

We exist to raise funds and receive donations to provide resources and facilities to support the hospital in its work and meet the needs of patients and staff. By securing donations and legacies, we make a real difference to patients together with their families and friends as well as the staff who look after them both directly and indirectly.

We endeavour to ensure all donations are spent in accordance with the wishes of donors. Restricted funds are set up where necessary and, where a non-binding preference is expressed by a donor, unrestricted, designated funds have been created to benefit various wards, departments and activities each with a fund advisor from the relevant service or department appointed by the trustee to ensure this objective is met.

The income to achieve our objectives and strategy is mainly received from donations and legacies. The main areas of activity are patient and staff welfare, including new and refurbishment building expenditure and equipment provision.

Generating income and achieving our objectives involves all our partners including staff, patients and their families, carers and the local community.

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 in most need. During the year 2021-22, grants totaling £226,000 were made. Our future plans are to continue to raise our level of fundraising which will help us work with RJAHC NHS FT to transform the care of our patients.

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

Our key aim is to serve NHS patients, in particular the patients of RJAHS NHS FT for the public benefit. By working with the NHS, we assist patients from every walk of life, irrespective of race, creed, ethnicity or personal or financial circumstances. We put this aim into practice by helping the patients, their families and carers, and visitors to the hospital by:

- Funding medical research to understand better the diseases affecting our patients today so that we can develop the cures and therapies of tomorrow.
- Enhancing the care our partner hospital can offer through making grants for new equipment and building improvements to deliver better facilities.
- Investing in NHS staff, in particular by supporting staff training.
- Supporting RJAHS NHS FT in the creating of a caring environment for the patients receiving care, their families and visitors.
- Making a number of smaller grants for the provision of extra comforts for patients and to support social and other activities recommended as part of their rehabilitation.

We do this through a range of programmes funded by you, our generous donors. 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 patients' lives both now and in the future.

### **Funding the treatments of tomorrow £40,000**

We make available funds to sponsor non-commercial research in areas where our partner NHS Foundation Trust has considerable expertise, with a view to developing new therapies for treating and caring for patients. Two studies were funded during 2021-22.

- The Charity continued to fund the lease of a machine and the purchase of consumables to allow the Metabolic Unit to measure levels of a bone formation marker and a bone resorption marker on-site to facilitate a study to assess these markers in their clinic patients. These provide the most up to date markers of bone metabolism in patients being managed for their osteoporosis and other metabolic bone disease. The purpose of the study is to assess the benefits of these two markers of bone turnover for measuring the efficacy of osteoporosis and anti-bone resorption therapies. £15,000 was spent in 2021-22 (£6,000 in 2020-21).

This project has been impacted by the Covid-19 pandemic and samples from patients ceased between March 2020 and February 2021. Since February 2021, samples from patients required to come on site for appointments have been measured and the research project has been extended to 2022-23 and an additional £20,000 funding approved by the Charitable Funds Committee.

- A pilot study was started to stratify biologic therapies for psoriatic arthritis to evaluate how we can stratify patients to receive targeted biologic therapy for their disease subset, with the aim of achieving better disease control and avoid the use of blind, broad spectrum biologics.

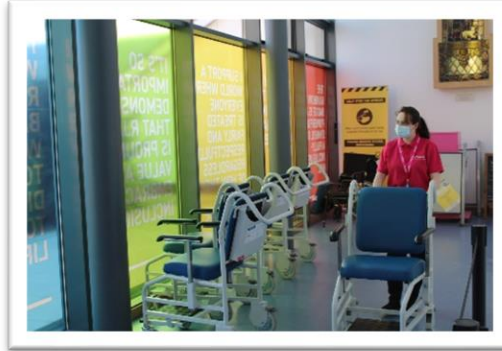
This study will aim to test the effectiveness of synovial fluid analysis as a potential biological marker to direct therapeutic options in patient non-responders to standard disease modifying antirheumatic drugs therapy. The study will investigate whether the most effective choice of biologic therapy for patients with Psoriatic Arthritis might be guided by synovial fluid analysis in combination with peripheral blood inflammatory markers.

The total amount of the grant approved was £136,000 over three years with £25,000 spent in 2021-22.

### **Improving patient experience – attending to patient needs £16,000**

- Some areas tend to have patients whose treatment involves longer stays and who may be relatively immobile and often require extra comforts to improve their morale, especially during the Covid-19 pandemic as visitor numbers were restricted. Birthday and Christmas presents as well as Easter treats were purchased for patients on the Children's and the Spinal Injuries Units. We also funded activity items such as craft materials, toys, games and DVD players and DVDs as well as small prizes for quizzes.

- Chilled drinking water was provided to all areas of the hospital at a cost of £8,000 (£8,000 in 2020-21). Apart from the health and comfort benefits, being properly hydrated means both patients and staff are less likely to suffer from mental and physical fatigue. Staff are thus able to give their best to patients.
- £5,000 was spent on wheelchairs to be used by Logistics to move patients around the site.



- £2,000 was spent on nine replacement mattresses and covers for the camp beds used by parents staying overnight on the Children's Ward.
- Sunscreen was purchased for use by patients on the Spinal Injuries Unit to allow them to take advantage of the outdoor space and garden provided by the Horatio's Garden Charity for the unit.
- A grant was made for mouth sticks to be used, as required, by spinal injuries patients to allow them to participate in activities such as painting, music and playing games.
- A magnetic board and magnets were purchased for the Children's Unit and used to set up a staff identity board to enable patients to identify staff working on the ward and their job roles.
- Our Spinal Injuries Activities fund allows patients and their therapists to organise and support off-site activities. This is vital for the rehabilitation of patients, helping them gain experience and confidence in managing situations they may come across on discharge. Due to the Covid-19 pandemic outings were limited but patients have been encouraged to socialise thanks to quizzes and afternoon teas.

### Improving Patient experience – improving their environment £109,000

- £104,000 was spent on building the accessible, wheelchair friendly wellbeing path around the field at the rear of the hospital, started at the end of 2020-21 and funded by NHS Charities Together grants received in 2020-21.

The path encircles the large field at the rear of the hospital and provides a calming space for staff, patients and visitors to enjoy a walk or a break outdoors and has proved very popular.

#### *Path of Wellbeing and route*





- £1,000 was spent on wheelchair accessible picnic tables and benches to be situated next to the wellbeing path.

*Benches and picnic tables for path of wellbeing*



- We funded the Sky subscription for our Spinal Injuries Unit at a cost of £2,000.
- Other expenditure included craft items for patients in the Children's Unit to use during play therapy, window vinyls for those beds on Powys Ward which only had a view of a brick wall, funding for the turf cutting ceremony for the Veterans' Orthopaedic Centre and the planting of 100 trees around the site.

*Planting of 100 trees as part of the Queen's Green Canopy*



A total of 100 saplings have been planted at RJAH as part of the Queen's Green Canopy, along with commemorating the 100-year anniversary of the hospital relocating to its current site in Gobowen. The Queen's Green Canopy is a unique opportunity created to commemorate 70 years since The Queen's ascension to the throne which invites people to Plant a Tree for the Jubilee. Lord-Lieutenant of Shropshire, Anna Turner JP, attended the ceremony alongside Chair Harry Turner and Interim Chief Executive Stacey Keegan. Mrs Turner said: "The Platinum Jubilee is such a special moment for the UK and I'm delighted RJAH has been able to take part in the celebrations whilst also marking an important milestone of their own." Stacey said: "This initiative aligns perfectly with our Green Plan and sustainability objectives within the Trust.

**Providing better care using the latest technology £10,000**

- We spent £6,000 on the My Recovery App for Rheumatology patients. This App aims to provide better communication with and education of patients, including an introduction to the Rheumatology Department and who is who within the team, what to expect on a first visit, a link to a helpline, improved collection of outcome measures and individual patient updates linked to patient protocols and management timescales for different conditions, e.g. early inflammatory arthritis, psoriatic arthritis and ankylosing spondylitis. The aim is to improve patient and clinician experience and improved compliance.



- £2,000 was spent on two standing transfer aids purchased for the Spinal Injuries Unit to facilitate transfers from bed to chair etc. and improve both patient experience and moving and handling risks for staff.
- Equipment was purchased, at a cost of over £1,000, for use by spinal injury patients to enable assisted upper limb activity for patients who are unable to independently move their upper limbs, allowing therapeutic input to increase functional outcomes.
- Various items of adapted domestic equipment, such as cutlery with loops, steady hand mugs, easy pour kettle, tabletop nail clippers and adjustable grippers were purchased costing almost £1,000. This equipment is used by the Therapies Team to assess patients for skills necessary for daily living activities. The therapist will be able to assess whether patients are able to use the equipment to complete tasks independently or whether care will need to be provided. This assessment informs discharge planning to ensure each patient's needs are met.
- Other expenditure included TENS equipment and other therapy equipment purchased for use in the Children's Unit for pain relief and physiotherapy treatment.

### **Recognising staff and training £15,000**

We recognise the impact staff morale has on staff motivation and how this, in turn, can affect the way patients experience their interactions with staff.

Many donations are received from grateful patients in recognition of how the way staff have responded to them has made them feel, as well as the often specialist treatment they have received. This is reflected in the use of funds to enable staff to attend courses and conferences, which are not normally funded by the NHS but will benefit patients. The Covid-19 pandemic has had an impact on this area of expenditure as staff were not able to travel to attend training or conferences as they would have previously. Funds are also used for morale boosting treats, events and on facilities and amenities.

- £6,000 was spent on gifts of plants for Nurses' Day.



- £4,000 was spent on gifts for staff retiring from the hospital.
- £2,000 was spent on a lunch and gift vouchers as a long service award for those who have worked in the NHS for over 30 years.
- £1,000 was given towards a Christmas Meal for staff on the Spinal Injuries Unit.
- £1,000 was spent on ice cream treats for staff working on site during particularly hot days.
- Other expenditure included flowers on the leaving of the Spinal Injuries' Horatio's Garden Manager, in thanks for the wonderful facility this had provided for patients and especially during the height of the pandemic.

## How we funded our grants, our achievements and performance

The following figures are taken from the full financial statements, approved on 07 December 2022. The full financial statements and related accounting notes may be viewed from page 28 onwards of this report. This Trustee's Annual Report and Financial Statements publication has also been lodged with the Charity Commission.

### Movement in funds

At the start of the period, 1 April 2021, the total fund balance amounted to £1,379,000. Of this, £1,140,000 related to unrestricted funds and £239,000 related to restricted funds in the form of the Veterans' Orthopaedic Centre Appeal Fund.

By the end of the period, 31 March 2022, the total fund balance amounted to £1,216,000 which was a decrease of £163,000 during the year. Of these funds, £973,000 related to unrestricted funds and £243,000 related to restricted funds in the form of the Veterans' Orthopaedic Centre Appeal Fund.

### Money received during 2021-22 £136,000; Money spent during 2021-22 £299,000

We can only continue to support the work of the Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust for as long as we receive the money needed. Almost all of our income comes from the voluntary efforts of the general public. Overall, we spent £163,000 more than we received during 2021-22 with £1,000 interest earned on cash deposits during the period.

### Money received – sources of funds

Total income for the year 2021-22 was £136,000, compared with £352,000 for 2020-21, a decrease of £216,000. This was mainly due to a decrease in both grant and legacy receipts, although both direct donations and funds raised made some recovery compared to the prior year.

### Donations

We received £62,000 in donations during 2021-22 compared to £39,000 during 2020-21, an increase of £23,000. This was mainly due to some relaxation of the restrictions the Covid-19 pandemic placed on our supporters' independent fundraising activities. Donations received for our restricted fund, the Veterans' Orthopaedic Centre Appeal, increased by £2,000 to £6,000. Seven donations of £1,000 or above were received in 2021-22.

Even so, the number of donations received were so numerous that we cannot list them all in detail but should like to take this opportunity to express our gratitude and heartfelt thanks to all who have and continue to support us which, in turn, allows us to support the patients of the RJAHS NHS FT.

The following list is just a sample of the generous support for us:

- £38,000 was donated directly by patients and their family and friends, £3,000 of which was given to the Veterans' Orthopaedic Centre Appeal. Donations are often made in gratitude for treatment received and in recognition of the role the charity plays in providing the Trust with funds for enhanced facilities, equipment and comforts for treating NHS patients, research projects and by giving staff access to additional training grants and also helping boost morale by subsidising small treats and team-building events and allowing the Trust to show recognition of staff with small retirement gifts and long-service awards.

Some £3,000 of these donations were raised by our supporters taking part in events such as sponsored walks, runs and other challenges and a number of people forewent presents on special occasions and request donations to RJAHS Charity in lieu. £2,000 was received via online shopping site donations and £2,000 from regular donors.



Laura completed the Manchester Half Marathon on behalf of RJA Charity. Laura is a previous patient of RJA and raised just over £600 in taking on this challenge.



The Marathon Des Sables sees runners cover 250km in six days across the Sahara Desert and is one of the toughest foot race challenges in the world. Simon ran to support the Veterans' fund at RJA because 'I joined the Royal Army Medical Corps in 1983, and I am humbled to have served my country and community in a very small way. I have also been lucky enough to have worked in the Orthopaedic industry for 30 years - equipped with skills and values from the RAMC. Many of our veterans leave the Armed Services needing specialist Orthopaedic Care, often having suffered serious physical and mental injury.

- A further £7,000 was received from families and friends in memory of loved ones. We are always so touched and grateful to be remembered at such a time.
- £12,000 was donated by groups and associations, of which £2,000 was given to the Veterans' Orthopaedic Centre Appeal. These included a golf club, a pub, armed services associations, a choir and staff groups from companies.
- Nearly £2,000 was raised via the Staff Lottery which is open to the employees of all the Shropshire NHS bodies with half of payments put into a prize fund and the other half donated to the NHS charity relevant to their place of employment.

## Legacies

Once again, we benefited from the generosity of our supporters who remembered us in their wills. The Robert Jones and Agnes Hunt Orthopaedic Hospital Charitable Fund is always very grateful to receive such legacies as they help us to provide state of the art equipment and facilities for our patients. We are aware that we receive these gifts at a sensitive time for the remaining family and friends and we should like to take this opportunity to emphasise how grateful we are to be remembered in this way.

We received legacy receipts totaling £11,000 during 2021-22 compared to £121,000 in 2020-21, a decrease of £110,000.

- The 2021-22 income includes accruals totaling £11,000 for payments not received but known about and expected as of 31 March 2022.
- All the legacies were allocated to unrestricted funds, thus being available for us to use freely to further our objectives and benefit patients, their families and carers as well as staff.
- The reported income relates to six legacies and the amounts varied from £1,000 to £5,000 and were all received with thanks.
- We recognise legacy income only once it is probable that the incoming resources will be received and the value of those incoming resources can be reliably measured.
- We have a subscription with an agency which reviews Wills as they are released after going through probate and alerts beneficiaries to the existence of potential legacies.

- Again, we are very touched to be remembered in this way and always try to take the wishes expressed in wills into account or discuss an acceptable alternative area of spend with families and/or executors where it is not possible to honour specific requests for whatever reason.

### General Grants

Grants totaling £32,000 were received during 2021-22 (£188,000 2020-21).

- A grant in support of volunteers at the hospital was successfully applied for from NHS Charities Together from the funds they received as part of the Covid-19 Appeal they set up. A total of £63,000 was granted with half to be received and spent by 31 March 2022 and the remainder to be paid over in 2022-23. Our volunteers are recruited and managed by the RJAH League of Friends Charity and they oversaw the expenditure of this grant. The Volunteering Futures Fund 'Future Friends' will target underrepresented groups including communities facing socio-economic disadvantages, people from diverse ethnic backgrounds, and disabled young people. These new projects will help further develop crucial skills like team working and problem-solving, increase confidence and self-esteem, and build relationships and social networks.



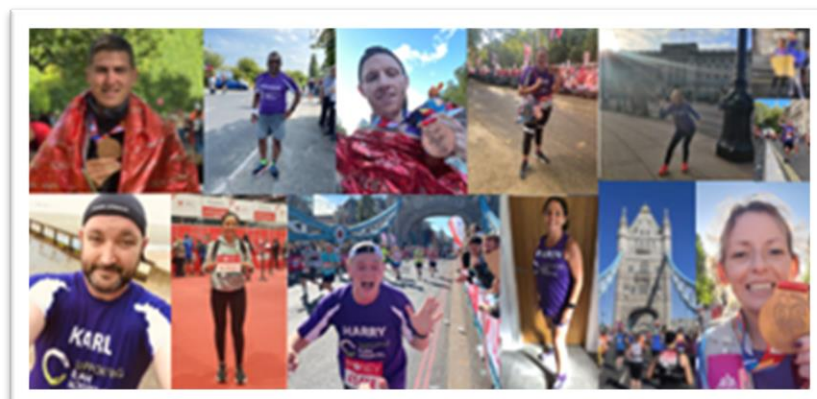
Sara Ellis-Anderson, Interim Chief Nurse, said: "We're delighted to have the opportunity to develop our Voluntary Services further at RJAH. Volunteers have played an integral part in supporting the hospital throughout the response to Covid-19 and this additional funding will enable us to build on that response."

### Other trading income - fundraising

A gross total of £30,000 was raised during 2021-22, an increase of £26,000 on the £4,000 raised in 2020-21. The majority of this increase was due to:

- £28,000 was raised by runners who had been awarded one of our places. Both the official and a virtual London Marathon took place in October 2021. Runners were given the option to carry forward their places from the April 2020 London Marathon, which had to be cancelled due to Covid-19, to 2021 or 2022. These runners raised £22,000 and those with places in the 2022 London Marathon started their fundraising during 2021-22 and had raised £6,000 as of 31 March 2022.

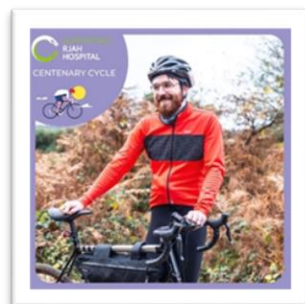
#### *London Marathon runners*





- To celebrate 100 years since The Robert Jones and Agnes Hunt Orthopaedic Hospital relocated to Gobowen and to raise vital funds, a charity bike ride was held in March 2022. The Centenary Cycle Ride raised just under £3,000 and participants included a number of RJAH staff.

#### *Centenary Cycle ride participants*



Income, Costings and Planning Analyst, Stefan said: "I'm looking forward to cycling this route on the day - it takes you past a few meres and through plenty of Shropshire villages along some quiet scenic roads. I cycle outdoors at any time of year - a few hours in any weather is a welcome change from staring at a computer screen during the day!"



Consultant Orthopaedic and Oncological Surgeon, Gillian said: "As an avid cyclist I really enjoy taking on new challenges and the Centenary Cycle is a really exciting addition to the calendar. "Charities have undoubtedly struggled throughout the pandemic, and I'm really pleased this event will directly benefit RJAH Charity and the important work they carry out within the hospital."

Please see Note 7 to the Accounts for the expenditure for these fundraising events.

It has been encouraging to see the return of various fundraising events during 2021-22, both externally organised events, such as the London Marathon, and the smaller fundraising events held by our runners and riders as well as our individual supporters. There is still a question mark over what events or other fundraising will be able to take place throughout 2022-23 but we are optimistic that old favourites and new opportunities will continue to open up and feel sure our supporters will do their best to find many alternative, entertaining and successful ways of raising funds.

As in 2021, the London Marathon will also be run in both live and virtual formats in October 2022.

The varied activities carried out by us on behalf of our patients are all made possible by the generosity of so many different people. So, thank you once again to everyone who contributed and to those who continue to support us.

#### **Other income - interest on cash deposits**

We earned £1,000 on cash deposits during 2021-22 (2021-20 nil). This was driven by the decision of the Government to re-introduce interest payments for funds held within the Government Banking Service from February 2022, having held the interest rate at 0% during 2020-21 and up to December 2021. During this period, the Charitable Funds Committee agreed the interest income which would be obtained at 0.25% to 1.0% in commercial banks was not significant enough to outweigh the potential risks, given the uncertain economic climate during the pandemic. Investment decisions are made in line with our Investment Policy which lays down strict criteria on the rating levels for organisations required before a cash deposit may be considered and requires the protection of funds held from potential loss to be considered.

## **Expenditure on charitable activities**

Total expenditure on charitable activities during 2021-22 was £293,000 compared to £231,000 in 2020-21, an increase of £62,000. See Note 8 to the accounts below. These values are inclusive of the apportioned Support Costs, as are the headline figures for each expenditure category. See Note 9 to the accounts below.

Our charitable work is accounted for under six programme areas plus the support costs we incur.

The focus of our charitable work is to advance patient care, firstly by funding equipment, facilities, therapies and training; secondly through supporting patients and their carers and families. During the year we continued to support a wide range of charitable and health related activities benefiting patients, their carers, their families and the hospital staff who care for them. Funds were used to purchase goods and services over and above those provided by the hospital from central NHS funds.

Details of actual expenditure are given under the "What we have achieved" section above, from page 6 onwards.

### **Building and refurbishment**

Total building and refurbishment expenditure for 2021-22 was £136,000 compared to £20,000 in 2020-21, an increase of £116,000. The majority of the expenditure, £109,000 excluding support cost allocation, was for the completion of the accessible wellbeing path, also known as the Path of Positivity. Other expenditure included expenses for the turf cutting event held to mark the start of the building work for the Veterans' Orthopaedic Centre and support expenditure for the planting of 100 trees around the hospital site.

### **Equipment**

Total equipment and refurbishment expenditure for 2021-22 was £25,000 compared to £75,000 in 2020-21, a decrease of £50,000.

The NHS, of course, buys much of its own equipment for day to day use and has its own capital programme. However, with advances in technology and technological obsolescence of existing equipment, we can make a real difference to patients by purchasing various pieces of software and equipment. The largest items of expenditure were £6,000 for the development of a patient/clinician app for rheumatology patients, £5,000 for ten wheelchairs to be used across the hospital, £2,000 for replacement mattresses and covers for camp beds on the Childrens' Unit, £2,000 on two standing transfer aids for spinal injury patients, £2,000 on a time-lapse camera to capture the progress of the Veterans' Orthopaedic Centre build, £2,000 on equipment to assist upper limb activity for patients who are unable to move independently in that area and £1,000 on various adapted items of domestic equipment for use when assessing the needs of spinal injury patients. Other items included TENS equipment for use in physiotherapy and a magnetic board and magnets to create a staff identity board, both for use on the Childrens' Unit.

### **Medical Research**

Total spend on medical research in 2021-22 was £52,000 compared to £8,000 in 2020-21 an increase of £44,000.

There were two grants against which expenditure was made. £25,000 related to a pilot study to stratify biologic therapies for psoriatic arthritis to evaluate how we can stratify patients to receive targeted biologic therapy for their disease subset with the aim of achieving better disease control and avoid the use of blind, broad spectrum biologics. £15,000 was spent on consumables for a study relating to bone turnover marker testing with the aim being to introduce a new test for bone turnover markers whilst running the current clinic appointment/review model side by side with the intended outcome being the improvement of standards of care by changing the metabolic follow up model. Both studies are carrying over to 2022-23.

### **Patient education and welfare**

Total spend on patient education and welfare in 2021-22 was £19,000 compared to £25,000 in 2020-21, a decrease of £6,000. The main items of expenditure were £8,000 on water coolers, £2,000

on Sky for spinal injury patients, £2,000 on additional laboratory assistant hours in Metabolic Medicine and £1,000 on wheelchair accessible picnic tables for the wellbeing path. Other expenditure included vinyl window coverings for those beds on Powys Ward with an outlook onto a brick wall, craft items for the Children's Unit, mouth sticks for spinal injuries patients to enable them to participate in activities such as painting, music and playing games and social and activity outings for spinal injury patients were also funded.

### **Staff education and welfare**

Total spend on staff education and welfare in 2021-22 was £21,000 compared to £103,000 in 2020-21, a decrease of £82,000.

A large part of the decrease in expenditure was due to the temporary suspension of the annual non-statutory training grant of £50,000 as Covid-19 restrictions meant fewer training opportunities. The £1,000 expenditure on staff training that did occur was for previously approved grants directly from designated funds.

£6,000 was spent on gifts for Nurses' Day, £4,000 on retirement gifts, £2,000 on long service awards, £1,000 on a Christmas meal to thank the staff looking after our spinal injury patients and £1,000 was spent on ice-creams for staff working on site during the hot summer days and nights.

Other expenditure included framing a finger-prints tree featuring Spinal Injuries Unit (Midlands Centre for Spinal Injuries) in memory of a member of staff who, sadly, died during the pandemic.

### **Support costs**

Support costs were £68,000 in 2021-22 compared to £50,000 in 2020-21, an increase of £18,000.

Support costs are allocated over the other expenditure headings on a pro-rata value basis.

This increase is mainly attributable to the £20,000 cost of the Charity Office function. The Charity Office Service is provided by RJAHL League of Friends Charity under a service level agreement, which started on 1 April 2021. This agreement formalises arrangements in place since April 2020 when the Fundraising Manager's post ceased. Charity Office administration includes liaison with donors and publicity of the Charity's activities, plus all related administration such as receipting and correspondence. Previously, the Fundraising Manager's full costs were allocated to the Fundraising Costs header as it was not possible to split out the cost attributable to oversight of this function and the administration work was free as it was carried out by volunteers.

Administration costs include the RJAHL NHS FT salary costs relating to those carrying out our administration processes on a day-to-day basis together with our other operational costs including bank charges, a legacy notification service and the annual charitable funds accounting and customer relations management software licence fees. These were apportioned over the charitable activities grants payable on a pro-rata basis.

Governance costs are those associated with governance arrangements and include the proportion of time devoted to the charitable funds by the Chief Finance Officer, NHS Charities Together membership and External Auditor's fees. Governance costs are charged to the undesignated General Fund.

The estimated support costs approved by the Charitable Funds Committee prior to each financial year are allocated across the charitable activities and fundraising expenditure areas on a pro-rata basis on fund balances and included in the totals mentioned in the paragraphs above. A fixed proportion of the relevant salaries are charged to the Charitable Funds, this accounted for £41,000 of the costs in 2021-22 (£39,000 in 2020-21). The total hours of support given and recharged remained about the same at around 40 hours per week on average over the year.

External audit fees were £4,800 for both 2021-22 and 2020-21. Other operational costs included our subscription to NHS Charities Together and the annual charitable funds accounting and customer relationship management modules software licence fees, bank charges and a legacy notification service.



## **Fundraising costs**

Fundraising costs were £6,000 for 2021-22 compared to £15,000 for 2020-21, a decrease of £9,000. Details of funds raised are given on pages 12 to 13.

Our Fundraising Manager finished in April 2020 and was not permanently replaced so there were no costs in 2021-22 (2020-21 £6,000). The RJAHC Charity Office has since been run by the RJAHC League of Friends Charity's staff and this cost now falls under fundraising expenditure.

The annual licence for the Customer Relations Management software cost remained the same at £1,000. Other expenditure included tops for our London Marathon runners, places were brought forward from 2020 and 2021 so no cost for those, places and tops for our Centenary Cycle cyclists, JustGiving donation fees, fundraising support items such as collection tins and banners, membership of Cobseo – the confederation of services charities and the Fundraising Regulator registration fee.

## **Volunteers**

£40,000 was spent on volunteers in 2021-22 and this was the first year there has been any such expenditure as oversight of the hospital's volunteer workforce is outsourced to the RJAHC League of Friends Charity.

This expenditure was funded by the first half of a £63,000 grant from NHS Charities Together. The core objective of this grant is to support young people, with a focus on those who experience barriers to volunteering, to build their skills, well-being and social networks through volunteering. Some flexibility has been given on how these funds may be spent. Traditionally volunteers have mainly been retired people aged 60 plus, with a much smaller cohort of volunteers under this age, often those taking part in the Duke of Edinburgh Awards Scheme.

Volunteers have been impacted by the Covid-19 pandemic, with some too vulnerable to attend. As of January 2022, there were just under 100 active volunteers, compared to pre-pandemic numbers of around 400. This grant has helped to start a project to encourage younger people to take on volunteering roles. The RJAHC League of Friends had already found a younger demographic had been inspired to volunteer during the pandemic. These volunteers have been helping in less traditional areas, such as the delivery of social media projects, supporting patients with IT skills and fundraising.

All expenditure was managed by the RJAHC League of Friends Charity and recharged.

£21,000 was spent on volunteer administration and management support. £6,000 was spent on promotional materials, such as banners, leaflets and a promotional video. £2,000 was spent on cameras. £2,000 was spent on laptops. £1,000 was spent on volunteer sundries, such as uniforms, lanyards, pin badges, refreshments and reasonable travel expenses.

## Reference and administrative details

### Officers and professional advisers report

#### Trustee details

The Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust is the corporate trustee and the hospital Trust Board has devolved responsibility for the on-going management of the funds to the Charitable Funds Committee which administers the funds on behalf of the corporate trustee.

#### Principal Officers

As the Trust Board is the corporate trustee, members of the Trust Board are not individual trustees under charity law but act as agents on behalf of the corporate trustee. For information, the names of those people who were Trust Board members during 2021-22 were as follows:

Name	RJAH NHS FT Board Role
Frank Collins	Chair (to Jan 2022)
Harry Turner	Non-Executive Director (to Jan 2022) & Chair (from Feb 2022)
Chris Beacock	Non-Executive Director
David Gilbert	Non-Executive Director (to Nov 2021)
Rachel Hopwood	Non-Executive Director (to Jan 2022)
Paul Kingston	Non-Executive Director
Alison Tumilty	Non-Executive Director (from Sep 2021)
Mark Brandreth	Chief Executive (to Aug 2021)
Stacey Keegan	Chief Nurse (to Jul 2021) & Acting Chief Executive (from Aug 2021)
Chris Morris	Acting Chief Nurse (from Apr 2020 to Sep 2020)
Sara Ellis-Anderson	Acting Chief Nurse (from Aug 2021)
Craig Macbeth	Chief Finance Officer
Steve White	Chief Medical Officer (to Apr 2021)
Ruth Longfellow	Chief Medical Officer (from May 2021)
Kerry Robinson	Chief of Improvement, Performance & Organisational Development

#### Charitable Funds Committee (CFC) – terms of reference

##### 1. Constitution

- 1.1. The corporate trustee of the Robert Jones and Agnes Hunt Orthopaedic Hospital Charitable Fund has delegated operational management of the Fund to the Charitable Funds Committee. This is not a sub-committee of the Board but rather acts as agent for the corporate trustee. It has no executive powers other than those specifically delegated in these Terms of Reference.
- 1.2. The corporate trustee approved the establishment of the Charitable Funds Committee for the purpose of:
  - 1.2.1. Ensuring stewardship and effective management of funds which have been donated, bequeathed and given to the Robert Jones and Agnes Hunt Orthopaedic Hospital Charitable Fund for charitable purposes.
  - 1.2.2. Determining an investment strategy and arrangements for the investment of funds which are not immediately required for use.
  - 1.2.3. Coordinating the provision of assurance to the corporate trustee that the funds are accounted for, deployed and invested in line with legal and statutory requirements.
  - 1.2.4. Considering and approving the annual accounts for charitable funds for submission to the corporate trustee.

## **2. Role**

- 2.1. The role of the Committee is to oversee the management of the affairs of the Robert Jones and Agnes Hunt Orthopaedic Hospital Charitable Fund. This is a delegated duty carried out on behalf of the Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust as sole corporate trustee of the Charity.
- 2.2. The role is to ensure that the charity acts within the terms of its declaration of trust and appropriate legislation and to provide information to the trustee to enable it to gain assurance that the charity is properly governed and well managed across the full range of activities in line with the Charity's Governance Framework.

## **3. Membership**

- 3.1. The membership of the Committee shall consist of:
  - 3.1.1. Foundation Trust Chairman
  - 3.1.2. Foundation Trust Chief Executive
  - 3.1.3. Two Non-Executive Directors including the Audit Committee Chair who will serve as Deputy Chair of the Charitable Funds Committee
  - 3.1.4. Chief Finance Officer
- 3.2. A quorum will be two Non-Executive Directors (or the Chairman and one Non-Executive Director) and one Executive Director. The Trust Chairman will chair the Charitable Funds Committee.

## **4. Attendance**

- 4.1. The following individuals shall normally be in attendance:
  - 4.1.1. Finance Manager with responsibility for Charitable Funds
  - 4.1.2. Manager with responsibility for fundraising
  - 4.1.3. League of Friends representative
  - 4.1.4. Orthopaedic Institute representative
  - 4.1.5. All directors may attend should they wish to do so.
- 4.2. Finance shall agree the agenda with the Chair of the Committee, collate and distribute the papers and keep a record of matters arising and issues to be carried forward.

## **5. Frequency of meetings**

- 5.1. The Committee will meet not less than four times a year, with one of those meetings attended by all of the directors. The Chair may at any time convene additional meetings of the Committee to consider business that requires urgent attention.
- 5.2. Members may participate in these meetings by telephone, video or computer link and participation in this manner shall be deemed to constitute presence in person at the meeting.

## **6. Authority**

- 6.1. The Committee is authorised to oversee the management of the Charitable Funds, within its terms of reference and the charity's Governance Framework.
- 6.2. It will approve fundraising and expenditure within the limits delegated to it. It is authorised to seek any information it requires from any employee and all employees are directed to co-operate with any request made by the Committee.
- 6.3. The Committee is authorised by the Trustee to obtain outside legal or other independent professional advice and to secure the attendance of outsiders with relevant experience and expertise if it considers this necessary.

## **7. Reporting**

- 7.1. The Committee will circulate copies of the minutes of its meetings to all Board members.
- 7.2. The Charity's Annual Report will be presented to a meeting of the corporate trustee.
- 7.3. The Committee will also undertake a self-assessment and produce an annual report of its activities and effectiveness.

## **8. Key responsibilities**

- 8.1. To manage the affairs of the Robert Jones and Agnes Hunt Orthopaedic Hospital Charitable Fund within the terms of its declaration of trust and appropriate legislation.
- 8.2. To approve and review every three years the charity's Governance Framework which sets out the key principles of the charity and its day-to-day running including:
  - Investment and Banking Policy - to manage the investment of funds in accordance with the Charities' Act 2011 and, if necessary, appoint fund managers to act on its behalf.
  - Expenditure Policy – to ensure funding decisions are clinically and ethically appropriate, consistent with the charity's objectives and provide added value and benefits to the patients and staff of the Trust above those afforded by the Exchequer funds.
- 8.3. To receive regular reports on fundraising activities.
- 8.4. To implement as appropriate, procedures and policies to ensure that accounting systems are robust and donations received and recorded as instructed.
- 8.5. To approve the Trustee's Annual Accounts and Report and to ensure that all relevant information is disclosed.
- 8.6. To identify and consider the major risks to which the Charity is exposed and review the systems to mitigate those risks.
- 8.7. To evaluate its own membership and performance on an annual basis.
- 8.8. To keep abreast of Charity Commission guidance, charity law and other governance and legal requirements relating to charities.
- 8.9. To review annually these terms of reference, recommending any changes.

### **Principal Charitable Fund Adviser to the Trustee**

The Chief Finance Officer acts as the Principal Charitable Fund Adviser to the corporate trustee, under an approved scheme of delegated authority. They are responsible for ensuring that the funds are managed appropriately and with due regard to their purpose and requirements.

## Principal Professional Advisers:

### Independent Examiner

Deloitte LLP  
3 Rivergate  
Temple Quay  
Bristol  
BS1 6GD

### Solicitors

Hill Dickinson  
Pearl Assurance House  
2 Derby Square  
Liverpool  
L2 9XL

### Bankers

Government Banking Service  
Southern House (7<sup>th</sup> Floor)  
Wellesley Grove  
Croydon  
CR9 1WW

Lloyds Bank PLC  
Faryners House  
25 Monument Street  
London  
EC3R 8BQ

## Principal Addresses

### Registered Office

RJAH Charity  
The Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust  
Gobowen  
Oswestry  
Shropshire  
SY10 7AG

### Email addresses

[rjah.charity@nhs.net](mailto:rjah.charity@nhs.net)  
[rjah.fundraising@nhs.net](mailto:rjah.fundraising@nhs.net)

### Website

<https://www.rjah.nhs.uk/charity.aspx>

## Structure, Governance and Management

In its operation of the charitable funds, the corporate trustee has had regard to the Charity Commission's guidance on independence and established the Charitable Funds Committee to assist in maintaining independence. It does this by ensuring that the use of charitable funds is focused on the needs of the NHS patients, their carers and their families.

All the funds held on trust as at the date of registration on 28 October 1996 were unrestricted. Our restricted funds were created after this date following the receipt of legacies with restrictive bequests and for the Appeals. Subsequent donations and gifts received that are attributable to the original funds are added to those fund balances within the existing charity. Apart from solicited donations to our appeal, all donations received are explicitly agreed with the donor to be unrestricted but with a preference, which is non-binding on the trustee, about where to spend the money. This is why they are treated as designated rather than restricted.

To assist the corporate trustee in the day-to-day management of the unrestricted charitable funds, the funds available for spending are allocated to designated funds within the General Fund related to

the purpose of the donation or gift. For example, there are undesignated charitable funds for wards, for research and for specific areas such as the Midlands Centre for Spinal Injuries. Where no specific area is indicated then the gift is allocated to the non-designated General Fund.

Our funds are invested and accounted for separately from other income received by the hospital for the provision of healthcare. This is in accordance with the requirement of the Charities Act 2011.

The corporate trustee fulfils its legal duty by ensuring that funds are spent in accordance with the objects of each fund and by designating the funds the trustee respects the wishes of our generous donors to benefit patient care and advance the good health and welfare of patients, and the carers and staff who look after them.

New Trust Board members, as agents for the corporate trustee, are committed to familiarise themselves with their responsibilities. In broad terms, trustees have a duty to ensure compliance with charity law and accounting regulations set out by the Charity Commission; a duty of prudence in ensuring that we remain solvent and income and property is applied solely for the purposes held within the governing document; and they also have a duty of care to donors and potential donors.

Our governing document is a Model Declaration of Trust dated January 1995 and is a legal document registering us with the Charity Commission and states our purposes, also known as our objectives.

Full use is made of Charity Commission guidance and support for trustees, which is available via their website.

The accounting records and the day-to-day administration of the funds are dealt with by the Finance Department located at the Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust, Gobowen, Oswestry, Shropshire, SY10 7AG.

## **Administration**

Charitable funds received are accepted, held and administered as funds held on trust for purposes relating to the health service in accordance with the National Health Service Act 1977, the National Health Service and Community Care Act 1990 and the National Health Service Act 2006. These funds are held on trust by the corporate body.

Our Annual Report and Financial Statements for the year ended 31 March 2022 have been prepared by the corporate trustee in accordance with Part 8 of the Charities Act 2011 and the regulations made thereunder; the Charities (Financial Statements and Reports) Regulations 2008 and the Regulatory Reform (National Health Service Charitable and Non-Charitable Trust Financial Statements and Audit) Order 2005.

The financial statements are presented under the Statement of Recommended Practice (SORP), Financial Reporting Standard 102 (FRS 102) issued in 2019.

As at 31 March 2022, we are constituted of a total of 19 funds. These comprise one restricted fund set up in 2018-19 for the Veterans' Orthopaedic Centre Appeal and an unrestricted General Fund split into one undesignated fund and 17 designated sub funds.

The Charitable Funds Committee (CFC) operates within the terms of reference and delegated powers set out by the Trustee. Members decide policy and make sure it is implemented. Day to day management is delegated to the Chief Finance Officer.

## **Remuneration of Key Management Personnel**

We are overseen by the CFC, made up of RJAHS FT Board members who are seconded to this committee as part of their employment terms. There is no charge made by RJAHS FT to us for their time and none of them receive any remuneration for their work on our behalf.

## Grant Making Policy

The use of our funds is restricted by the governing document which established us for the purposes connected with the NHS. All grant requests have to be countersigned by the relevant Divisional Manager or Executive Director to confirm that expenditure would be in line with the strategic objectives of the division and the Foundation Trust. Authorisation is subject to the delegated authority levels previously listed. Grants are normally made from our unrestricted funds. These funds consist of two elements, the General Fund and the designated sub-funds of the General Fund.

General Fund – constituted of gifts received where no particular preference as to its expenditure by donors. Any member of staff may apply for a grant from the General Fund. Typically, this fund is used for areas with no or insufficient designated funds, or for hospital wide events or purchases.

Designated Funds – these contain gifts where a wish was expressed to benefit a particular part of the hospital or activity by the donor at the time the gift was made. Although their nomination is not binding on the trustee, the designated funds exist to enable us to honour the wishes of our donors without placing restrictions on us which might result in the monies not being spent in a timely manner. Each fund has a fund advisor, usually the clinical lead or the ward manager, who makes recommendations on proposed grants. Whilst these recommendations are not binding on the trustee, they are normally accepted.

## Risk Management

The major risks to which we are exposed have been identified and considered. The Charitable Funds Committee has established a risk register which records these key risks, the steps taken to mitigate them, and actions required. This register is reviewed by the Committee as a standing agenda item and updated as required.

The most significant risks identified relate to the current economic climate including:

- i) The impact on the level of donations received, particularly as a result of Covid-19. We are seeking to mitigate this by:
  - striving to increase awareness about us, including our objectives and our activities;
  - ensuring shortcuts and links are available on our website to affiliated donation and fundraising websites;
  - providing a link on our website to accept online donations directly;
  - reporting on fundraising and donations at every CFC meeting;
  - publicising fundraising activities and charitable expenditure; and
  - developing a fundraising strategy.
- ii) The potential loss of funds on deposit should the financial organisation fail. We are seeking to mitigate this by taking the decision not to invest on the stock market and keeping funds in commercial banks which meet specific ratings aligned to NHS England guidance as followed by RJAHS NHS FT with a fund investment maximum per banking organisation as per FSA protection.

We have an Investment and Reserves Policy which was passed by the Committee and will be reviewed bi-annually. This is discussed in greater detail in the Reserves and Investment Policy sections on pages 23 and 24.

## Partnership Working and Networks

The Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust is a related party by virtue of being our corporate trustee. By working in partnership with the Trust, the charitable funds are used to best effect. When deciding upon the most beneficial way to use charitable funds, the corporate trustee has regard to the main activities, objectives, strategies and plans of the NHS Foundation Trust. However, overriding this, the corporate trustee is required by the Charity Commission to ensure all decisions are made in our interest to further our charitable objects and that there is a clear and open process of decision making by the corporate trustee.



The trustee safeguards our independence by ensuring that sound governance arrangements are in place, in line with guidance issued by the Charity Commission.

RJAH Charity is one of over 250 NHS-linked charities in England and Wales who are eligible to join NHS Charities Together (NHSCT). A representative attends the Members' Interests Groups, together with representatives of other NHS charities, where topics of mutual interest are disseminated and discussed with experience and advice shared. The Association also enables us to band with other charities to lobby government departments and others on issues affecting the future of NHS charities.

As a member of NHSCT, we were grateful to be able to receive grants from their national Covid-19 appeal in both 2021-22 and 2020-21.

## Public Benefit Statement

The activities carried out for the public benefit by us, in partnership with the Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust, are broadly covered by the aims to:

- enhance the provision of high-quality patient care for the public benefit;
- support research in areas relevant to the hospital's activity and patients, making such research publicly available; and
- support the provision of healthcare free at the point of need and care for the patients, families, carers and staff by focusing on areas not covered or fully supported by central NHS funds.

When setting these objectives and carrying out the activities described below the trustee has regard to both the Charity Commission for England and Wales's general guidance on public benefit and our objectives.

## Reserves

Our reserves policy takes note of the Charity Commission publication CC19 Charities and Reserves and requires a minimum balance of reserves to meet four months of expected expenditure.

This publication defines reserves as being that part of a charity's unrestricted funds that is freely available to spend on any of a charity's purposes. This definition excludes restricted income funds, although holding such funds may influence a charity's reserve policy. Reserves will also normally exclude amounts designated for essential future spending.

Charity law requires any income received by a charity to be spent within a reasonable period of receipt and trustees should be able to justify the holding of this income as reserves.

The reserve is calculated as being that part of this charity's unrestricted funds that is freely available after taking account of designated funds which have been earmarked for specific purposes.

Calculation of reserves held as at 31 March 2022	
Total Funds	£1,216,000
Less restricted	(£243,000)
Less designated	(£829,000)
<b>Reserves</b>	<b>£144,000</b>

The reserve amount of £144,000 held as of 31 March 2022 is sufficient to meet the four months' support and fundraising cost target of £25,000 and a large part of the designated funds that have not been earmarked for specific expenditure so are available to the CFC for reallocation should the need arise. The Reserves amount is the minimum required to ensure the Charity would be able to continue whilst seeking to raise additional funds. The full year cost of regularly funded expenditure is £139,000 and there are a further £289,000 of approved grants, mainly against our designated funds where the expenditure has not yet been legally committed to. Our reserves are lower than the £239,000 held as of 31 March 2021 as are our approved grants. The CFC is mindful of the Charity Commission's

requirement that funds be spent in a timely manner and that reserve levels should not be deemed high, the level held is 12% of total funds.

### **Going concern consideration**

We have a duty to consider the future viability of the charity and whether we believe we will continue as a going concern. The CFC has reviewed our status on behalf of the corporate trustee and has come to the conclusion there are no material uncertainties about our ability to continue as a going concern. Nor are we aware of any material uncertainties affecting the current year's accounts.

The CFC receives regular reports on our financial status, including current assets held and future expenditure committed to. They review the value of the actual reserves held compared to the minimum reserve target, which has been set to cover a minimum of 4 months of normalised spend. They consider estimated future revenue streams.

In future years, the key risk to us is a fall in income from donations or legacies. However, we do not commit to expenditure above the funds held at any time and thus are able to respond to a reduction in income by reductions in grant expenditure. In addition, significant Covid-19 grants were received from NHS Charities Together. Having taken these areas into consideration, the CFC has a reasonable expectation that we have adequate resources to continue in operational existence for the foreseeable future, being 12 months from the date of signing of these accounts. See the risk management and reserves sections of the annual report for more information.

For this reason, we consider the going concern assumption is an appropriate basis on which to prepare these financial statements.

### **Investment policy**

The Trustees have adopted a prudent investment policy in the face of an uncertain financial climate. The policy is also informed by cash flow requirements, in particular the expectation of any significant expenditure or fundraising due to occur.

The Trustees have decided not to invest in equities and to place the funds on deposit, having due regard to the security rating of the investment bodies, with a view to maximising the return whilst maintaining security. This decision will be reviewed in the light of any improvement or positive change to the investment market.

The Trustees have decided that if, in the future, funds were to be invested in equities then no investment would be made in companies which derive a substantial amount of their profit from investment in tobacco, gambling or alcohol.

At the end of 2021-22 no funds were invested long term and all funds were either held with the Government Banking Service current account or in an instant access account with Lloyds Bank plc, whichever pays a higher rate of interest.

### **Present and Future Projects**

#### **Wellbeing Path**

The construction of the path was completed in 2021-22, funded by grants received from NHS Charities Together, and we are now in the process of furnishing the area with accessible picnic tables and benches. Some were purchased during 2021-22 and more will be in place by the end of 2022-23. This has proved to be a popular facility with staff, patients and visitors alike.

#### **Alice Ward Garden**

A need to improve the existing facilities available to paediatric patients at RJAH has been identified by Alice Ward staff and leadership. Patients can be long term and the space currently is not utilised to best effect due to limitations, required adaptations for beds and wheelchairs.

We are at the fundraising and planning stage and the intention is to involve stakeholders, including patients and their families as well as staff working in the unit and with the patients to ensure the maximum benefit is delivered for patients.

Initial ideas and concepts for the garden have been created by a student landscape architect student free of charge. A video outlining the design can be found here [Alice's Ward Garden - YouTube](#) and below are pictures showing the garden as it currently stands and the proposed draft design.



*Alice Ward Garden - as it is now*



*Proposed draft new garden design*

The parents and children on our paediatric ward are keen, interested, and willing to engage with us to ensure we meet need. We will take on board their requirements in developing the design and hope some of you will be inspired to raise funds for this project.

We have many examples of patient stories such as the Bloor family who undertook a successful fundraising campaign in gratitude for the care they received whilst their daughter was a patient.

The estimated cost for this project is £150,000 and we believe this is achievable. Although fundraising had a downturn due to Covid-19 restrictions, we are noticing the level of fundraising picking up as we move from the pandemic to an endemic stage.

***Approved on behalf of the corporate trustee:***

**Harry Turner**  
**Chair**

**The Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust**  
**7 December 2022**

## Trustee's statement of responsibilities

The trustee is responsible for preparing the Trustee's Annual Report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice), including FRS 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland".

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 state of affairs of the charity and of the incoming resources and application of resources of the charity for that period. In preparing these financial statements, the trustee is required to:

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles of the Charities SORP;
- make judgments and estimates that are reasonable and prudent;
- state whether applicable accounting standards 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 the charity will continue in business.

The trustee is responsible for keeping proper accounting records that disclose with reasonable accuracy at any time the financial position of the charity and enable them to ensure that the financial statements comply with the Charities Act 2011, the Charity (Accounts and Reports) Regulations 2008 and the provisions of the trust deed. They are 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 is responsible for the maintenance and integrity of the charity and financial information included on the charity's website. Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

***Signed on behalf of the trustee:***



**Harry Turner**  
**Chair**

***The Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust***  
***7 December 2022***

**Independent examiner's report to the trustees of The Robert Jones and Agnes Hunt Orthopaedic Hospital Charitable Fund**

**Independent examiner's report to the trustees of The Robert Jones and Agnes Hunt Orthopaedic Hospital Charitable Fund**

**Report on the examination of the financial statements**

**INDEPENDENT EXAMINER'S REPORT TO THE TRUSTEES OF THE ROBERT JONES AND AGNES HUNT ORTHOPAEDIC HOSPITAL CHARITABLE FUND**

I report to the trustees on my examination of the accounts of The Robert Jones and Agnes Hunt Orthopaedic Hospital Charitable Fund ("the charity") for the year ended 31 March 2022 which comprise the income and expenditure account, the balance sheet and the related notes 1 to 20.

This report is made solely to the charity's trustees, as a body, in accordance with section 145 of the Charities Act 2011 and regulations made under section 154 of that Act. My work has been undertaken so that I might state to the charity's trustees those matters I am required to state to them 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 charity's trustees as a body, for my work, for this report, or for the opinions I have formed.

**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"). You are satisfied that your charity is not required by charity law to be audited and have chosen instead to have an independent examination.

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

**Independent examiner's statement**

I confirm that I am qualified to undertake the examination because I am a member of the Institute of Chartered Accountants in England & Wales, which is one of the listed bodies.

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 Trust 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.



Michelle Hopton (FCA)  
for and on behalf of Deloitte  
LLP Bristol, United Kingdom  
08 December 2022



Registered Charity No. 1058878

**THE ROBERT JONES AND AGNES HUNT ORTHOPAEDIC  
HOSPITAL CHARITABLE FUND**

**FINANCIAL STATEMENTS FOR THE YEAR ENDED  
31 MARCH 2022**

## STATEMENT OF FINANCIAL ACTIVITIES FOR THE YEAR ENDED 31 MARCH 2022

	Note	2021-22 Unrestricted funds £000	2021-22 Restricted funds £000	2021-22 Total funds £000	2020-21 Unrestricted funds £000	2020-21 Restricted funds £000	2020-21 Total funds £000
<b>Income from:</b>							
Donations, legacies and grants	4	99	6	105	344	4	348
Other trading activities - fundraising	5	30	0	30	4	0	4
Investments - interest on cash deposits	6	1	0	1	0	0	0
<b>Total incoming resources</b>		<u>130</u>	<u>6</u>	<u>136</u>	<u>348</u>	<u>4</u>	<u>352</u>
<b>Expenditure on:</b>							
Raising funds	7	(6)	0	(6)	(16)	1	(15)
Charitable activities	8	(291)	(2)	(293)	(231)	0	(231)
<b>Total expenditure</b>		<u>(297)</u>	<u>(2)</u>	<u>(299)</u>	<u>(247)</u>	<u>1</u>	<u>(246)</u>
<b>Net income/(expenditure) for the year</b>		(167)	4	(163)	101	5	106
<b>Net movement in funds</b>		<u>(167)</u>	<u>4</u>	<u>(163)</u>	<u>101</u>	<u>5</u>	<u>106</u>
<b>Reconciliation of funds:</b>							
Total funds brought forward		1,140	239	1,379	1,039	234	1,273
Net movement in funds for the year		(167)	4	(163)	101	5	106
<b>Fund balances carried forward at 31 March</b>		<u>973</u>	<u>243</u>	<u>1,216</u>	<u>1,140</u>	<u>239</u>	<u>1,379</u>

There were no other recognised gains and losses for the year. All income and expenditure derive from continuing activities.

Notes from 1 to 20 form part of these Financial Statements.



## BALANCE SHEET AS AT 31 MARCH 2022

	Note	2021-22 Unrestricted funds £000	2021-22 Restricted funds £000	2021-22 Total funds £000	2020-21 Unrestricted funds £000	2020-21 Restricted funds £000	2020-21 Total funds £000
<b>Current assets</b>							
Debtors	11	8	100	108	11	100	111
Cash at bank and in hand	12	1,009	143	1,152	1,141	139	1,280
		1,017	243	1,260	1,152	239	1,391
Creditors: amounts falling due within one year	13	(44)	0	(44)	(12)	0	(12)
<b>Net current assets</b>		973	243	1,216	1,140	239	1,379
<b>Total assets less current liabilities</b>		973	243	1,216	1,140	239	1,379
<b>Net assets</b>		<b>973</b>	<b>243</b>	<b>1,216</b>	<b>1,140</b>	<b>239</b>	<b>1,379</b>
<b>Funds</b>							
Restricted fund			243	243		239	239
Unrestricted funds:							
General fund		144		144	239		239
Designated funds		829		829	901		901
<b>Total funds</b>	14	<b>973</b>	<b>243</b>	<b>1,216</b>	<b>1,140</b>	<b>239</b>	<b>1,379</b>

Notes from 1 to 20 form part of these Financial Statements.

These Financial Statements of the Robert Jones and Agnes Hunt Orthopaedic Hospital Charitable Fund, registered number 1058878, were approved by the Charitable Funds Committee on behalf of the corporate trustee and authorised for issue on 07 December 2022

They were signed on its behalf by:



**Harry Turner**  
**Chair**

**The Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust**  
**7 December 2022**

## CASH FLOW STATEMENT FOR THE YEAR ENDED 31 MARCH 2022

	Note	2021-22 Unrestricted funds £000	2021-22 Restricted funds £000	2021-22 Total funds £000	2020-21 Unrestricted funds £000	2020-21 Restricted funds £000	2020-21 Total funds £000
<b>Net cash flows from operating activities</b>	15	(133)	4	<b>(129)</b>	92	1	93
<b>Cash flows from investing activities:</b>							
Interest received		1	0	<b>1</b>	0	0	0
<b>Net cash flows from investing activities</b>		<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Net (decrease)/increase in cash and cash equivalents</b>		<b>(132)</b>	<b>4</b>	<b>(128)</b>	<b>92</b>	<b>1</b>	<b>93</b>
Cash and cash equivalents at beginning of year		1,141	139	<b>1,280</b>	1,049	138	1,187
<b>Cash and cash equivalents at end of year</b>		<b>1,009</b>	<b>143</b>	<b>1,152</b>	<b>1,141</b>	<b>139</b>	<b>1,280</b>

## **Notes to the Financial Statements for the year ending 31 March 2022**

### **Note 1: Accounting Policies**

These accounting policies have been consistently applied throughout the Financial Statements and their associated notes.

#### Basis of accounting

The financial statements were prepared under the historical cost convention.

In accordance with the Statement of Recommended Practice: Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102), issued in October 2019 and the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102) and the Charities Act 2011 and United Kingdom Generally Accepted Practice as it applies from 1 January 2019.

The accounts (financial statements) have been prepared to give a “true and fair view” and have departed from the Charities (Accounts and Reports) Regulations 2008 only to the extent required to provide a “true and fair view”. This departure has involved following Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102) issued in October 2019 rather than the Accounting and Reporting by Charities Statement of Recommended Practice effective from 2005 which has since been withdrawn.

We are a public benefit entity, a registered charity and our registered office is given on page 20.

#### Preparation of financial statements – going concern basis

On behalf of the Corporate Trustee, the Charitable Funds Committee considers there are no material uncertainties about our ability to continue as a going concern. As a grant making charity with few ongoing commitments, this will impact on the new grants that may 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.

The Charitable Funds Committee receives regular reports on our financial status, including current assets held and future expenditure committed to. They review the value of the actual reserves held compared to the minimum reserve target, which has been set to cover four months of normalised spend. They consider estimated future revenue streams.

In future years, the key risk to us is a fall in income from donations or legacies. We do not commit to expenditure above the funds held at any time and thus is able to respond to a reduction in income by reductions in grant expenditure. Having taken these areas into consideration, the Corporate Trustee has a reasonable expectation that we have adequate resources to continue in operational existence for the foreseeable future, being a minimum of 12 months from the date of signing this report. See the risk management and reserves sections of the annual report for more information.

For this reason, they consider the going concern assumption is an appropriate basis on which to prepare these financial statements.

**Note 1: Accounting Policies (continued)**

Income

- a) All income is included in full in the Statement of Financial Activities as soon as the following three factors can be met:

- i) Entitlement – arises when a particular resource is receivable or our right becomes legally enforceable.
- ii) Probability – when there is reasonable probability that the income will be received.
- iii) Measurement – when the monetary value of the income can be measured reliably.

- b) Donations

Donations are accounted for as income on receipt.

- c) Legacies

Legacies are accounted for as income either on receipt or once the receipt of the legacy becomes probable.

Receipt is probable when:

- Confirmation has been received from the representatives of the estate(s) 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 our control.

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

- d) Grants receivable

Grants receivable are accounted for as income either on receipt or once receipt becomes probable.

Receipt is probable when all the conditions attached to the grant have been fulfilled or are within our control.

- e) Interest receivable

Interest receivable is accounted for on receipt and where a reasonable estimate may be made for interest relating to the period but not yet received which is accrued for.

- f) Donated goods and services

The charity received no donated goods or services.

**Note 1: Accounting Policies (continued)**

Expenditure

Expenditure is recognised once there is a legal or constructive obligation to make a payment to a third party, it is probable that settlement will be required and the amount of the obligation can be measured reliably.

Grants payable are authorised in line with the delegated authority limits of the Charitable Funds Committee and all grants are made to the Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust in the furtherance of our objectives.

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

Expenditure is classified under the following activity headings:

a) Expenditure on raising funds

Expenditure on raising funds includes the costs incurred in generating fundraising income together with investment management fees, when applicable.

Fundraising costs include expenses for fundraising activities and any fee paid for fundraising support.

b) Charitable activities

Expenditure on charitable activities is wholly in the form of grants made to linked, related party or third-party NHS bodies and non-NHS bodies in furtherance of the charitable objectives of the funds held on trust, primarily to benefit the National Health Service, wholly or mainly for the service provided by the Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust. It includes all costs incurred in the pursuit of our charitable objects. 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 include an apportionment of support costs as shown in note 9.

Grants 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:

- i) We have communicated our intention to award a grant to a recipient who then has a reasonable expectation they will receive a grant.
- ii) We have made a public announcement about a commitment which is specific enough for the recipient to have a reasonable expectation they will receive a grant.
- iii) There is an established pattern of practice which indicates to the recipient we will honour our commitment.

On behalf of the Corporate Trustee, the Charitable Funds Committee have control over the amount and timing of material grant payments and consequently where approval has been given by the trustees and any of the above criteria have been met then a liability is recognised. Where a grant is awarded with conditions attached, these conditions have to be met before the liability is recognised.

**Note 1: Accounting Policies (continued)**

Where an intention has not been communicated then no expenditure is recognised but an appropriate designation is made in the appropriate fund. If a grant has been offered but there is uncertainty as to whether any conditions will be met then no liability is recognised but a contingent liability is disclosed.

c) Support costs

Support Costs are those functions that assist but do not directly undertake charitable activities. Support costs are the costs of staff administering our income and expenditure, charity office services, audit costs and other expenditure incurred in our day to day running. These costs have been allocated between the cost of raising funds and expenditure on charitable activities. The bases on which support costs have been allocated are set out in note 9.

d) Governance costs

Governance costs are classed as support costs and have, therefore, been apportioned between fundraising activities and charitable activities.

Fund structure

Where there is a legal restriction on the purpose to which a fund may be spent, the fund is classified in the Financial Statements either as a:

- Restricted fund or
- An endowment fund.

Restricted funds are those where the donor has provided for the donation to be spent in furtherance of a specified charitable purpose. Our restricted funds tend to result from appeals for specified purposes.

Endowment funds arise when the donor has expressly provided that the gift is to be invested and only the income of the fund may be spent. These funds are sub analysed between those where the trustee has the discretion to spend the capital (expendable endowment) and those where there is no discretion to expend the capital (permanent endowment). We currently hold no endowment funds.

Those funds which are neither endowment or restricted funds are unrestricted funds which are sub analysed between designated (earmarked) funds where the trustee has set aside amounts to be used for specific purposes or which reflect the non-binding wishes of donors and an unrestricted general fund which are at the trustee's discretion and represents our reserves.

The major funds held in each of these categories are disclosed at note 14.

Financial Instruments

Financial assets and financial liabilities are recognised when we become party to the contractual provisions of the instrument. All financial assets and liabilities are initially measured at transaction price (including transaction costs). We only have financial assets and financial liabilities of a kind that qualify as basic financial instruments which are initially recognised at transaction value and subsequently measured at their settlement value.

**Note 1: Accounting Policies (continued)**

Debtors

Debtors are amounts owed to us. They are measured on the basis of their recoverable amount, see note 11.

Cash and cash equivalents

Cash at bank and in hand is held to meet our day to day running costs as they fall due. Cash equivalents are short term, highly liquid investments and usually short notice interest bearing savings accounts, of less than 3 months.

Creditors

Creditors are amounts owed by us. They are measured at the amount that we expect to have to pay to settle the debt, see note 13.

Pooling Scheme

We do not have an official pooling scheme.

Except where restricted funds are invested separately, all returns on any investments, including interest earned on short-term cash deposits, are apportioned on an average funds balance basis to the value of funds they relate to. The values of any separately invested funds are deducted from restricted funds values prior to apportionment. The Charitable Funds Committee believes this to be a fair and consistent approach. Any gains or losses made on the funds invested separately for restricted funds are solely allocated to the relevant restricted fund.

**Note 2: Critical accounting judgements and key sources of estimation uncertainty**

In the application of our accounting policies, which are described in note 1, the Charitable Funds Committee as agent of the Corporate Trustee are required to make judgements, estimates and assumptions about the carrying amounts of assets and liabilities that are not readily apparent from other sources. The estimates and associated assumptions are based on historical experience and other factors that are considered to be relevant. Actual results may differ from these estimates.

The estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognised in the period in which the estimate is revised if the revision affects only that period or in the period of the revision and future periods if the revision affects both current and future periods.

The Charitable Funds Committee does not consider there are any critical judgements or sources of estimation uncertainty requiring disclosure.

### **Note 3: Related Parties**

The Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust (RJAHT), the patients of which are our main beneficiaries, is our Corporate Trustee. We have made revenue and capital grant payments to RJAHT for the benefit of NHS patients and these are detailed in note 8.

None of the members of the RJAHT Board or parties related to them has undertaken any transactions with us or received any benefit from us in payment or kind.

The RJAHT makes a number of clerical and transaction services available to us for administrative services at a cost of £41,000 in 2021-22 (£39,000 in 2020-21) - see note 9. The amount recovered is set at a level to allow RJAHT to recover its costs.

The Fundraising Manager role ended in April 2020.

#### **3.1 Related party transactions**

	<b>2021-22 Charitable Expenditure</b>	<b>2021-22 Fundraising</b>	<b>Total 2021-22</b>	<b>2020-21 Charitable Expenditure</b>	<b>2020-21 Fundraising</b>	<b>Total 2020-21</b>
	<b>£000</b>	<b>£000</b>	<b>£000</b>	<b>£000</b>	<b>£000</b>	<b>£000</b>
RJAHT NHS FT reimbursement of pay costs	41	0	<b>41</b>	39	6	45
RJAHT NHS FT reimbursement of non-pay costs and grants made	98	0	<b>98</b>	55	0	55
<b>Total</b>	<b>139</b>	<b>0</b>	<b>139</b>	<b>94</b>	<b>6</b>	<b>100</b>

The decrease in the value of pay costs reimbursed by the Charity relates to the ending of the full-time Fundraising Manager post.

The increase in the value of non-pay is driven by the suspension of the £50,000 annual training grant and an increase in grant value for capital additions in 2021-22 (for the Path of Positivity).

#### **3.2 Related party balances**

	<b>Debtors</b>		<b>Creditors</b>	
	<b>Total 2021-22</b>	<b>Total 2020-21</b>	<b>Total 2021-22</b>	<b>Total 2020-21</b>
	<b>£000</b>	<b>£000</b>	<b>£000</b>	<b>£000</b>
RJAHT NHS FT	1	0	<b>34</b>	3
<b>Total</b>	<b>1</b>	<b>0</b>	<b>34</b>	<b>3</b>



**Note 4: Analysis of income from donations, legacies and grants**

	Unrestricted 2021-22 £000	Restricted 2021-22 £000	Total 2021-22 £000	Unrestricted 2020-21 £000	Restricted 2020-21 £000	Total 2020-21 £000
Legacies <sup>1</sup>	11	0	11	121	0	121
Donations <sup>2</sup>	56	6	62	35	4	39
General Grants <sup>3</sup>	32	0	32	188	0	188
<b>Total</b>	<b>99</b>	<b>6</b>	<b>105</b>	<b>344</b>	<b>4</b>	<b>348</b>

<sup>1</sup> Six legacies were accounted for in 2021-22, ranging from £1,000 to £5,000, of which one, for £5,000, was accrued for as at 31 March 2022. One legacy, for £2,000, accounted for in 2020-21 but not yet received was accrued for at 31 March 2022.

<sup>2</sup> Donations from individuals are gifts from members of the public, relatives of patients and staff. Other donations include corporate donations usually received either in sponsorship or matching funds raised by an individual, e.g. from their employer.

<sup>3</sup> One grant was received during 2021-22, £32,000 from NHSCT, compared to seven grants received in 2020-21, five from NHSCT totaling £151,000 and two further grants from charities on their closure totaling £37,000.

**Note 5: Analysis of income from other trading activities**

	Unrestricted 2021-22 £000	Restricted 2021-22 £000	Total 2021-22 £000	Unrestricted 2020-21 £000	Restricted 2020-21 £000	Total 2020-21 £000
Fundraising						
London Marathon <sup>1</sup>	28	0	28	4	0	4
Sponsored Events - Other <sup>2</sup>	2	0	2	0	0	0
<b>Total</b>	<b>30</b>	<b>0</b>	<b>30</b>	<b>4</b>	<b>0</b>	<b>4</b>

<sup>1</sup> The 2020 London Marathon was cancelled but a number of our runners had already started fundraising and continued to do so as their places were carried forward and their supporters generously decided not to request a refund of their donations. In 2021-22, £22,000 related to the 2021 and £6,000 to the 2022 London Marathon.

<sup>2</sup> In 2021-22 the charity funded places in the Centenary Cycle Race and our fundraisers raised over £2,000.

**Note 6: Analysis of income from investments**

	Unrestricted 2021-22 £000	Restricted 2021-22 £000	Total 2021-22 £000	Unrestricted 2020-21 £000	Restricted 2020-21 £000	Total 2020-21 £000
Interest received on cash deposits	1	0	1	0	0	0
<b>Total</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>

The increase in interest received on cash held reflects the increase in interest rates from December 2021.

**Note 7: Analysis of expenditure on raising funds**

	Unrestricted 2021-22 £000	Restricted 2021-22 £000	Total 2021-22 £000	Unrestricted 2020-21 £000	Restricted 2020-21 £000	Total 2020-21 £000
Fundraising Manager <sup>1</sup>	0	0	0	7	(1)	6
London Marathon	1	0	1	6	0	6
Sponsored events - Other <sup>2</sup>	1	0	1	0	0	0
Other costs of raising funds	3	0	3	0	0	0
Support costs <sup>3</sup>	1	0	1	3	0	3
<b>Total</b>	<b>6</b>	<b>0</b>	<b>6</b>	<b>16</b>	<b>(1)</b>	<b>15</b>

<sup>1</sup> The Fundraising Manager post ceased in April 2020. From April 2021 an agreement has been in place with the RJAHL League of Friends Charity to provide ad hoc support to areas of the Trust wishing to carry out targeted fundraising for their designated funds within the RJAHL Hospital Charity, as well as for any appeals. As of 31 March 2022, no targeted fundraising arrangements had been agreed.

<sup>2</sup> In 2020-21 most organised events were cancelled or postponed until 2021-22 due to the Covid-19 pandemic. London Marathon places were rolled over to 2021-22 so no fee was incurred for this year.

<sup>3</sup> Support costs are allocated over fundraising costs and grants payable on an expenditure value basis - see Note 9 for further analysis.

**Note 8: Analysis of expenditure on charitable activities**

**8.1 Analysis of expenditure by activity**

	Grant Funded Activity 2021-22 £000	Support Costs <sup>1</sup> 2021-22 £000	Total 2021-22 £000	Grant Funded Activity 2020-21 £000	Support Costs <sup>1</sup> 2020-21 £000	Total 2020-21 £000
Building and refurbishment	105	31	136	16	4	20
Equipment	19	6	25	60	15	75
Medical research	40	12	52	6	2	8
Patient education and welfare	15	4	19	20	5	25
Staff education and welfare	16	5	21	82	21	103
Volunteers	31	9	40	0	0	0
<b>Total</b>	<b>226</b>	<b>67</b>	<b>293</b>	<b>184</b>	<b>47</b>	<b>231</b>

<sup>1</sup> Support costs are allocated over fundraising costs and grants payable on an expenditure value basis – see Note 9 for further analysis.

## 8.2 Analysis of expenditure by fund type

	Unrestricted 2021-22 £000	Restricted 2021-22 £000	Total 2021-22 £000	Unrestricted 2020-21 £000	Restricted 2020-21 £000	Total 2020-21 £000
Building and refurbishment	135	1	136	20	0	20
Equipment	24	1	25	75	0	75
Medical research	52	0	52	8	0	8
Patient education and welfare	19	0	19	25	0	25
Staff education and welfare	21	0	21	103	0	103
Volunteers	40	0	40	0	0	0
<b>Total</b>	<b>291</b>	<b>2</b>	<b>293</b>	<b>231</b>	<b>0</b>	<b>231</b>

The Charity does not make grants to individuals. All grants are made to the Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust to provide for the care of NHS patients in furtherance of our charitable objectives. The 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 is disclosed in Note 8.1 above.

### **Note 9: Analysis of support costs - basis of allocation is percentage of expenditure**

#### 9.1 Support costs

	Unrestricted Funds 2021-22 £000	Restricted Funds 2021-22 £000	Total 2021-22 £000	Unrestricted Funds 2020-21 £000	Restricted Funds 2020-21 £000	Total 2020-21 £000
Salary recharges	41	0	41	40	(1)	39
Charity Office Service	20	0	20	0	0	0
External audit fee	5	0	5	5	0	5
Other non-pay costs	2	0	2	5	1	6
<b>Total</b>	<b>68</b>	<b>0</b>	<b>68</b>	<b>50</b>	<b>0</b>	<b>50</b>

Support costs are allocated over grants payable and cost of fundraising on an expenditure value basis, as shown in notes 9.2 and 9.3, and included £11,000 for governance costs in 2021-22 (2020-21 £10,000). Non-pay includes audit fees paid to Deloitte LLP of £4,800 (2020-21 £4,800). There were no non-audit fees paid to Deloitte LLP in either year.

No member of staff is directly employed by the charity. The funds are administered by the RJAHS NHS FT staff with a proportion of their salary recharged to the charity.

The Charity Office Service is provided by RJAHS League of Friends Charity under a service level agreement, which started on 1 April 2021. Charity Office administration was previously provided by volunteers and the Fundraising Manager and includes liaison with donors and publicity of the Charity's activities plus all related administration such as receipting and correspondence.

## 9.2 Support Costs allocation by fund type

### 9.2.1 Support Costs allocation by fund type 2021-22

	Unrestricted funds expenditure 2021-22	Unrestricted support costs allocated 2021-22	Unrestricted Total 2021-22	Restricted funds expenditure 2021-22	Restricted support costs allocated 2021-22	Restricted Total 2021-22
	£000	£000	£000	£000	£000	£000
Raising funds	5	1	6	0	0	0
Building and refurbishment	104	31	135	1	0	1
Equipment	18	6	24	1	0	1
Medical Research	40	12	52	0	0	0
Patient education and welfare	15	4	19	0	0	0
Staff education and welfare	16	5	21	0	0	0
Volunteers	31	9	40	0	0	0
<b>Total</b>	<b>229</b>	<b>68</b>	<b>297</b>	<b>2</b>	<b>0</b>	<b>2</b>

### 9.2.2 Support Costs allocation by fund type 2020-21

	Unrestricted funds expenditure 2020-21	Unrestricted support costs allocated 2020-21	Unrestricted Total 2020-21	Restricted funds expenditure 2020-21	Restricted support costs allocated 2020-21	Restricted Total 2020-21
	£000	£000	£000	£000	£000	£000
Raising funds	13	3	16	(1)	0	(1)
Building and refurbishment	16	4	20	0	0	0
Equipment	60	15	75	0	0	0
Medical Research	6	2	8	0	0	0
Patient education and welfare	20	5	25	0	0	0
Staff education and welfare	82	21	103	0	0	0
<b>Total</b>	<b>197</b>	<b>50</b>	<b>247</b>	<b>(1)</b>	<b>0</b>	<b>(1)</b>

## 9.3 Support Costs allocation by expenditure type

	Expenditure 2021-22	Support costs allocated	Total 2021-22	Expenditure 2020-21	Support costs allocated	Total 2020-21
	£000	£000	£000	£000	£000	£000
Raising funds	5	1	6	13	3	16
Building and refurbishment	105	31	136	16	4	20
Equipment	19	6	25	60	15	75
Medical research	40	12	52	6	2	8
Patient education and welfare	15	4	19	20	5	25
Staff education and welfare	16	5	21	82	21	103
Volunteers	31	9	40	0	0	0
<b>Total</b>	<b>231</b>	<b>68</b>	<b>299</b>	<b>197</b>	<b>50</b>	<b>247</b>

#### **Note 10: Transfers between funds**

There were no transfers between funds in 2021-22 (2020-21 nil).

#### **Note 11: Analysis of debtors**

	Unrestricted 2021-22 £000	Restricted 2021-22 £000	Total 2021-22 £000	Unrestricted 2020-21 £000	Restricted 2020-21 £000	Total 2020-21 £000
Amounts receivable within one year:						
Accrued income <sup>1</sup>	8	0	8	11	0	11
Pledges <sup>2</sup>	0	100	100	0	100	100
<b>Total debtors receivable within one year</b>	<b>8</b>	<b>100</b>	<b>108</b>	<b>11</b>	<b>100</b>	<b>111</b>

<sup>1</sup> 2021-22 includes £7,000 outstanding legacy income (2020-21 £11,000).

<sup>2</sup> Pledged contribution to the Veterans' Orthopaedic Centre Appeal by RJAH League of Friends Charity.

#### **Note 12: Analysis of cash and cash equivalents**

	Unrestricted 2021-22 £000	Restricted 2021-22 £000	Total 2021-22 £000	Unrestricted 2020-21 £000	Restricted 2020-21 £000	Total 2020-21 £000
Cash in current bank account	999	143	1,142	1,131	139	1,270
Notice deposit accounts (less than 3 months)	10	0	10	10	0	10
<b>Total cash and cash equivalents</b>	<b>1,009</b>	<b>143</b>	<b>1,152</b>	<b>1,141</b>	<b>139</b>	<b>1,280</b>

No cash or cash equivalents were held in non-cash investments or outside of the UK in either 2021-22 or 2020-21.

All the amounts held on interest bearing deposit are available to spend on charitable activities.

The decrease in the cash balance held as at 31 March 2022 from 31 March 2021 reflects expenditure being higher than the income received by the charity.

### **Note 13: Analysis of creditors**

	Unrestricted 2021-22 £000	Restricted 2021-22 £000	Total 2021-22 £000	Unrestricted 2020-21 £000	Restricted 2020-21 £000	Total 2020-21 £000
Amounts falling due within one year:						
Trade creditor accruals <sup>1</sup>	10	0	10	9	0	9
Accruals for grant expenditure owed to RJAHS NHS FT <sup>2</sup>	34	0	34	3	0	3
<b>Total creditors falling due within one year</b>	<b>44</b>	<b>0</b>	<b>44</b>	<b>12</b>	<b>0</b>	<b>12</b>

<sup>1</sup> The trade creditor accruals include £9,600 for 2021-22 and 2020-21 external audit fees not yet invoiced.

<sup>2</sup> Amounts owed to related undertakings are non-interest bearing and repayable on demand.

### **Note 14: Details of material funds**

#### **14.1.1 Current year movement in material funds – restricted**

	Balance 31 March 2021 £000	Income £000	Expenditure Expended £000	Balance 31 March 2022 £000
A Veterans' Orthopaedic Centre Appeal	239	6	(2)	<b>243</b>
<b>Total</b>	<b>239</b>	<b>6</b>	<b>(2)</b>	<b>243</b>

#### **14.1.2 Prior year movement in material funds – restricted**

	Balance 31 March 2020 £000	Income £000	Expenditure £000	Balance 31 March 2021 £000
A Veterans' Orthopaedic Centre Appeal	234	4	1	239
<b>Total</b>	<b>234</b>	<b>4</b>	<b>1</b>	<b>239</b>

#### **14.2 Details of material funds – restricted**

Name of fund	Description of the nature and purpose of each fund
A Veterans' Orthopaedic Centre Appeal	<p>These are funds raised via the Veterans' Orthopaedic Centre Appeal, set up to help fund a dedicated centre where Service veterans may be treated in surroundings and by staff sensitive to their requirements.</p> <p>This is a short-term fund set up during 2018-19 and will end with the completion of the new centre. All funds are committed for payment over to RJAHS NHS FT, subject to completion of the project.</p> <p>The total balance held in this fund as of 31 March 2022 was £243,000 (31 March 2021 was £239,000).</p>

#### 14.3.1 Current movement in material funds – designated and unrestricted

	Balance 31 March 2021	Income	Expenditure	Balance 31 March 2022
	£000	£000	£000	£000
B Arthritis & Rheumatism	282	2	(57)	227
C MCSI (Spinal Injuries Unit)	270	4	(19)	255
D Charles Salt	198	1	(12)	187
E General	239	101	(196)	144
F Aggregate of remaining unrestricted funds	151	22	(13)	160
<b>Total</b>	<b>1,140</b>	<b>130</b>	<b>(297)</b>	<b>973</b>

#### 14.3.2 Prior year movement in material funds – designated and unrestricted

	Balance 31 March 2020	Income	Expenditure	Balance 31 March 2021
	£000	£000	£000	£000
B Arthritis & Rheumatism	297	2	(17)	282
C MCSI (Spinal Injuries Unit)	259	36	(25)	270
D Charles Salt	176	27	(5)	198
E General	146	272	(179)	239
F Aggregate of remaining unrestricted funds	161	10	(20)	151
<b>Total</b>	<b>1,039</b>	<b>347</b>	<b>(246)</b>	<b>1,140</b>

#### 14.4 Details of material funds – unrestricted

Name of fund	Description of the nature and purpose of each fund
B Arthritis & Rheumatism	A designated fund within the charity's general fund set up for arthritis and rheumatism related research and staff and patient welfare. Fund balance as of 31 March 2022 was £227,000 (31 March 2021 was £282,000).
C MCSI	A designated fund within the charity's general fund to benefit the patients and staff of the Spinal Injuries Unit known as the Midlands Centre for Spinal Injuries (MCSI). Fund balance as of 31 March 2022 was £255,000 (31 March 2021 was £270,000).
D Charles Salt	A designated fund within the charity's general fund for Metabolic Bone Disease research and staff and patient welfare. Fund balance as of 31 March 2022 was £187,000 (31 March 2021 was £198,000).
E General Fund - undesignated	This fund is where all the unrestricted funds of the charity which have not been designated are shown. They are freely available to be used to further the objectives of the charity, within the specified authorisation limits. The fund balance as of 31 March 2022 was £144,000 (31 March 2021 was £239,000 including £109,000 of unspent grants from NHSCT).
F Aggregate of remaining unrestricted funds	14 designated funds (14 as at March 2021). Each fund has a balance below 10% of the total value of the unrestricted funds. They mainly comprise funds held for wards and therapy areas. The total balance held in these funds as of 31 March 2022 was £160,000 (31 March 2021 was £151,000).

**Note 15: Reconciliation of cash flow net income/(expenditure) from operating activities**

	2021-22 Unrestricted funds £000	2021-22 Restricted funds £000	2021-22 Total funds £000	2020-21 Unrestricted funds £000	2020-21 Restricted funds £000	2020-21 Total funds £000
Net income for the year	(167)	4	(163)	101	5	106
Adjustment for interest receivable	(1)	0	(1)	0	0	0
Operating cash flow before movement in working capital	(168)	4	(164)	101	5	106
Decrease / (increase) in debtors	3	0	3	10	0	10
(Decrease) / increase in creditors	32	0	32	(19)	(4)	(23)
<b>Cash generated by operating activities</b>	<b>(133)</b>	<b>4</b>	<b>(129)</b>	<b>92</b>	<b>1</b>	<b>93</b>

**Note 16: Financial Instruments**

**16.1 Financial risk management**

Financial reporting standard FRS 102 requires disclosures on the role that financial instruments have had during the period in creating or changing the risks a body faces in undertaking its activities. Because we are a grant making charity only and do not rely on income from activities with their related contract performance risks, we are not exposed to a significant degree of financial risk. Our investment policy limits the investment of surplus funds to institutions with a low-risk rating. Financial assets and liabilities are generated by day-to-day operation activities rather than being held to change the risks facing us in undertaking its activities.

Our treasury management operations are carried out by the finance department of the RJAH NHS FT within parameters defined formally within our governing document and Charitable Funds Committee Terms of Reference.

**Currency risk**

We are principally a domestic organisation with the great majority of our transactions, assets and liabilities being in the UK and sterling based. We have no overseas operations. We, therefore, have low exposure to currency rate fluctuations.

**Interest rate risk**

We hold no loans and do not rely to any significant degree on income from cash deposits and, therefore, have low exposure to interest rate fluctuations. We have no borrowings.

**Credit risk**

With the majority of our income coming from voluntary donations and legacies, we are considered to have a low exposure to credit risk.

**Liquidity risk**

We only commit to fund grant expenditure to the extent that funds are available. We hold no investments which could not be made available within 24 hours and, therefore, have a low exposure to liquidity risk. There would be an interest reduction penalty applied where early access is required of funds held in term deposits.



## 16.2 Financial assets

	31 March 2022 £000	31 March 2021 £000
Trade and other receivables excluding non-financial assets	108	111
Cash and cash equivalents	1,152	1,280
<b>Total financial assets</b>	<b>1,260</b>	<b>1,391</b>

The receivables held by us are reported at historical cost as they are all current and this is considered to be an appropriate measurement of their value to us.

## 16.3 Financial liabilities

	31 March 2022 £000	31 March 2021 £000
Trade and other payables excluding non-financial liabilities	44	12
<b>Total financial assets</b>	<b>44</b>	<b>12</b>

The payables held by us are reported at historical cost as they are all current and this is considered to be an appropriate measurement of our liabilities.

### Note 17: Contingencies

There are no contingent gains or (losses) included in the accounts.

### Note 18: Commitments, liabilities and provisions

We have no commitments or liabilities not recognised in these Financial Statements and have made no provisions.

### Note 19: Trustee indemnity insurance

There was no expenditure on Trustee indemnity insurance in either 2021-22 or 2020-21 as the RJAHS NHS FT is the Corporate Trustee with the Trust Board acting as its agents rather than Trustees in their own right.

### Note 20: Trustee and key managers' remuneration

None of the RJAHS FT Trust Board received any remuneration from the charity in 2021-22 (2020-21 nil).

There are no key management personnel costs incurred by us either directly or recharged by RJAHS NHS FT. The charity is overseen by the Charitable Funds Committee on behalf of the RJAHS NHS FT Board which, in turn, is acting on behalf of the RJAHS NHS FT as our corporate trustee. Details of the RJAHS NHS FT's key management personnel may be seen in their 2021-22 Annual Report and Financial Statements available on their website at the following link: [www.rjah.nhs.uk](http://www.rjah.nhs.uk).