

**NATIONAL CONFIDENTIAL ENQUIRY  
INTO PATIENT OUTCOME AND DEATH**

**TRUSTEES' ANNUAL REPORT & FINANCIAL STATEMENTS**

**31 MARCH 2024**

The trustees (who are also directors of the charity for the purposes of the Companies Act) present their annual report together with the audited financial statements of National Confidential Enquiry into Patient Outcome and Death ('the charity', 'NCEPOD') for the year ended 31 March 2024. The trustees confirm that the annual report and financial statements of the charity comply with the current statutory requirements, the requirements of the charity's governing document and the provisions of the Statement of Recommended Practice (SORP), applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective October 2019). The annual report serves the purposes of both a trustee report and a directors' report under company law.

Since the charity qualifies as small under section 383, the strategic report required of medium and large companies under The Companies Act 2006 (Strategic Report and Director's Report) Regulations 2013 is not required.

## **REFERENCE AND ADMINISTRATIVE DETAILS**

The trustees who have held office since 1 April 2023, unless otherwise stated, as follows:

Mr I C Martin	<b>Chair</b>
Associate Professor P J Greaves	<b>Honorary Treasurer</b>
Mrs J Barber	Demitted 3 <sup>rd</sup> August 2023
Professor Sir B Keogh	
Professor N Kumar	
Dr S Lishman CBE	
Professor M Sani	Demitted 4 <sup>th</sup> May 2023
Dr K Wilkinson	Appointed 15 <sup>th</sup> September 2023
Dr F Healey	Appointed 15 <sup>th</sup> September 2023
Dr Z Puthucheary	Appointed 15 <sup>th</sup> September 2023

The principal address of the charity and the registered office of the company is the offices of NCEPOD at Abbey House, 74-76 St John Street, London, EC1M 4DZ.

The charity is registered under the charity number 1075588 and the company is incorporated with the company registration number 03019382 in England and Wales.

The trustees have made the following professional appointments:

Solicitor:	H Montlake & Co, 198 High Street, Ilford, Essex IG1 1LX
Auditor:	Kreston Reeves, Montague Place, Quayside, Chatham Maritime, Chatham, ME4 4QU
Bankers:	CAF Bank Limited, 25 Kings Hill Avenue, Kings Hill, West Malling, Kent ME19 4JQ CCLA Investment Management Limited, 80 Cheapside, London EC2V 6DZ Virgin Money, Jubilee House, Gosforth, Newcastle upon Tyne, NE3 4PL The Charity Bank Limited, Fosse House, 182 High Street, Tonbridge, TN9 1BE Nationwide Building Society, Nationwide House, Pipers Way, Swindon, SN38 1NW
Stockbrokers:	Quilter Cheviot Investment Management, Senator House, 85 Queen Victoria St, London EC4V 4AB
Insurance Brokers:	Insurance Services (Surrey) Ltd, PO Box 1533, Woking, GU22 2RY Secondsight, Foster Denovo Group, 2 Hamm Moor Lane, Weybridge, Surrey KT15 2SA

The following key senior members of staff are responsible for the day-to-day activities of the charity who together with the trustees form the key management personnel of the charity:

Dr Marisa Mason	Chief Executive & Company Secretary
Dr Neil Smith	Clinical Researcher & Deputy Chief Executive

## STRUCTURE, GOVERNANCE AND MANAGEMENT

### Status and history

The National Confidential Enquiry into Patient Outcome and Death (formerly the National Confidential Enquiry into Perioperative Death) was originally set up in 1988 following the desire by the government of the day to undertake regular reviews into the practice of surgical and anaesthetic care. The remit has since been extended to include medical care, mental healthcare, community and primary care. In addition, on behalf of the Health Foundation, NCEPOD have undertaken a study in relation to medical care within the Prison Estate.

NCEPOD is a registered charity, and a company limited by guarantee, not having share capital. Every member of NCEPOD (steering group listed below) undertakes to contribute an amount not exceeding £1 to the assets of the charity in the event of the charity being wound-up during the period of membership, or within one year thereafter.

NCEPOD was incorporated on 8 February 1995 and became a registered charity on 20 May 1999. NCEPOD is governed by the rules and regulations set down in its company Articles of Association originally dated 8 February 1995, and updated on 1 April 1999, 28 November 2003 (change of name), 29 November 2012 (membership organisations amended), 27 May 2016 (membership updated to include the Royal College of Surgeons of Edinburgh, the Royal College of Physicians of Edinburgh, the Royal College of Physicians and Surgeons of Glasgow and the Royal College of Psychiatrists), 27 April 2017 (membership updated to include the Faculty of Intensive Care Medicine), 5 November 2020 (changes to appointment of trustees), 29 April 2021 (minor updates) and 4 November 2021 (removal of the member status of Scottish Colleges and general simplification of the Articles).

### Organisational structure

#### Steering group

The members of the steering group represent the healthcare Associations, Colleges, and Faculties primarily related to NCEPOD's activities and are elected by resolution of the trustees to ensure a balance within the Group. The steering group ensures that the clinical and professional messages of NCEPOD are evidence based. The members, who have served on the steering group since 1 April 2023, are as follows:

<b>Association of Anaesthetists</b> Dr W Fawcett – demitted 26 <sup>th</sup> July 2023 Dr R Gill – appointed 26 <sup>th</sup> July 2023	<b>Royal College of Nursing</b> Dr N Ashby
<b>Association of Surgeons of Great Britain and Ireland</b> Mr M Lansdown – demitted 26 <sup>th</sup> June 2023 Miss A Pullyblank – appointed 3 <sup>rd</sup> August 2023	<b>Royal College of Obstetricians and Gynaecologists</b> Dr T Hillard – demitted 30 <sup>th</sup> April 2023 Dr E Khan – appointed 3 <sup>rd</sup> July 2023
<b>Royal College of Emergency Medicine</b> Katherine Henderson	<b>Royal College of Paediatrics and Child Health</b> Dr I Doughty – demitted 1 <sup>st</sup> March 2024 Professor M Ng – appointed 1 <sup>st</sup> March 2024
<b>Faculty of Dental Surgery</b> Mr J Dhanda	<b>Royal College of Physicians of London</b> Dr A Gibson, Dr M Kumwenda and Dr H Skene
<b>Faculty of Intensive Care Medicine</b> Dr D Parek	<b>Royal College of Psychiatrists</b> Dr J Richardson
<b>Lay Representatives</b> Vacancy	<b>Royal College of Radiologists</b> Professor R McWilliams
<b>Royal College of Anaesthetists</b> Dr B Bahlmann Dr S Sivasubramaniam	<b>Royal College of Pathologists</b> Professor M Sheppard – appointed 27 <sup>th</sup> April 2023
<b>Royal College of General Practitioners</b> Dr C Millington-Sanders	<b>Royal College of Surgeons of England</b> Miss S Vig – demitted 18 <sup>th</sup> April 2024 Professor R Sayers – appointed 26 <sup>th</sup> June 2023

#### Observers, clinical co-ordinators and lay representatives

There are also observers to the meetings of the steering group, who assist and provide advice to ensure the clinical and public integrity of NCEPOD.

The observers listed below were invited to attend the meetings of the steering group, during the year ended 31 March 2024:

Coroners' Society of England and Wales	Dr D Sharpstone
Healthcare Quality Improvement Partnership	Mr D Smith
Healthcare Quality Improvement Partnership	Mrs V Dunne
Royal College of Physicians and Surgeons of Glasgow	Dr G Curry
Royal College of Physicians of Edinburgh	Dr J MacLeod
Royal College of Surgeons of Edinburgh	Miss A Paisley

Clinical co-ordinators are co-opted members of the steering group, and one of their number is appointed as the lead clinical co-ordinator and invited to attend trustee meetings as an observer and to inform the trustees of the progress of the current studies.

Twelve consultants had been on secondment to NCEPOD as clinical co-ordinators between 1 April 2023 and 31 March 2024, committing to between one and two sessions per week.

Mr J Abercrombie	Colorectal Surgery
Dr A Goodwin	Anaesthesia and Critical Care
Dr M Juniper	Respiratory Medicine
Dr K Malbon	Paediatrics
Dr S McPherson	Radiology
Dr D McWilliams	Physiotherapy
Dr A Michalski	Paediatric Oncology
Mr M Sinclair	General Surgery
Dr V Srivastava	Acute Medicine
Dr A Tavaré	General Practice
Dr D Wood	Physician and Clinical Toxicologist

NCEPOD has a panel of six lay representatives who advise on public input into the work of NCEPOD and are invited to attend the steering group:

Mr N Buck	Mrs H Topping	Mrs D McFarlane
Mr R Newell	Mr P Moodley	Miss T Saha

### ***Trustees***

A minimum of three trustees are appointed, and one of these individuals is additionally appointed as the Chair.

The trustees have formal responsibility under the Companies Acts 2006 and the Charities Act 2011 for the management of NCEPOD as a company and a charity. Their role relates primarily to the governance of the organisation, and together they are the employer of all NCEPOD staff. The chair of the trustees is the "head" of NCEPOD for the staff. The trustees meet at least quarterly to exercise their duties, and to fulfil their responsibilities. For the purposes of the Companies Acts 2006, the trustees of the charity are also the directors of the company. The names of the trustees, who have served during the year, are listed on page 2.

## **Method of recruitment, appointment, election, induction and training of trustees**

### ***Recruitment***

It is the policy of NCEPOD to ensure that there are an appropriate number of trustees with the required skills to ensure that the charity is well governed. Trustees are appointed following resignation of an existing trustee and/or to provide additional skills. These skills may be professional such as legal or accounting skills or may be clinical to ensure appropriate coverage of the various medical specialties. When a vacancy is identified, an appointment will be made by the trustees after conducting an application/invitation and interview process. Every new trustee becomes a member of the steering group.

### ***Induction and training***

Newly appointed trustees are given a pack of information comprising of:

- The Charity Commission's document 'The Essential Trustee'
- NCEPOD's Memorandum and Articles of Association
- The last Trustees' Annual Report and Financial Statements
- The last year's minutes of trustee and steering group meetings
- The business plan
- The latest risk assessment

A meeting with the chief executive, is also arranged before attending their first trustee meeting to ensure that any questions they may have are answered. Additional sessions can be arranged if required on specific issues.

If additional training needs, such as media training, are identified then an appropriate method of training is used.

### ***Staff***

The day-to-day running of NCEPOD is managed by the chief executive and company secretary, Dr M Mason, who is based at NCEPOD's registered office and principal address. She is assisted in this task by her deputy, Dr N Smith and fourteen staff, three of whom are part-time. These staff members are responsible, together with the clinical co-ordinators, for the running of studies including their design and the processing of data.

Dr M Juniper, as lead clinical co-ordinator is responsible for the deployment of the clinical co-ordinators and is the clinical lead for NCEPOD. Many clinicians assist NCEPOD as study advisory group members and case note reviewers and are listed in the associated report.

### ***Staff pay***

The trustees are responsible for setting the pay of the chief executive and deputy chief executive who, with the trustees, represent the charity's key management personnel, and for agreeing any other staff pay rises. The pay scale used by the trustees was agreed following an external review which benchmarked salaries to a variety of similar organisations. This is reviewed by the trustees and amended at their discretion having regard to the current pay scales of NHS providers, academic institutions and similarly sized organisations. As well as the resources of the charity the pay scale was updated in January 2023.

### **Risk and corporate governance matters**

The trustees have conducted a review of the principal risks and uncertainties to which NCEPOD is exposed and systems have been established to mitigate those risks. This register is reviewed annually. The basis of this risk review is the Charity Commission's guideline "Charities and Risk Management", and risks are assessed under the following headings:

- Governance risks
- Operational risks
- Financial risks
- External risks
- Compliance with law and regulation

The trustees' first concern is to maintain and enhance the quality of the studies with which the reputation of NCEPOD has become synonymous.

Their second concern is to ensure that the lessons of the studies undertaken are widely shared so that they can be translated into improved patient care.

Financial viability is essential if NCEPOD is to continue and the reduction in income in real terms due to the financial pressures on NCEPOD's principal funder, NHS England, is a significant risk. During 2022/23 NCEPOD's contracts with the Healthcare Quality Improvement Partnership (HQIP) were extended for a further two years, but during 2024 NCEPOD will need to bid once more for the contracts. There is always a risk that funding will be reduced or terminated with little notice and therefore NCEPOD has continued to keep free reserves available to meet liabilities such as redundancy payments in the event of forced closure or loss of contract[s], under the tendering arrangements.

Internal risks are minimised by the implementation of internal financial procedures for authorisation of all transactions, and to ensure quality of delivery for all operational aspects of NCEPOD. These procedures are annually reviewed to ensure that they still meet the needs of the charity. The responsibility for completing this risk assessment and for following up actions lies with the chief executive.

The safeguarding of highly confidential data is of paramount importance to NCEPOD and as such the charity is registered with the Information Commissioner (Z5442652). NCEPOD abides by the UK General Data Protection Regulations 2016. The chief executive acts as a Caldicott Guardian, and the deputy chief executive acts as the Data Protection Officer with responsibility for protecting the confidentiality of information relating to all patient identifiable data. NCEPOD is also registered with the Health Research Authority - Confidentiality Advisory Group (HRA-CAG) which, under Section 251 of the NHS Act 2006, requires organisations to seek approval of the Secretary of State for Health where patient consent is not

sought for the use of identifiable data. This registration is reviewed annually and requires an approved completion of the Data Security and Protection Toolkit. Formal arrangements are also in place with the Northern Ireland Privacy Advisory Committee. External assurance is obtained by certification that NCEPOD complies with the requirements of Cyber Essential.

### **Professional indemnity insurance**

NCEPOD has taken out an insurance policy that provides professional indemnity cover for the trustees. The cost of this insurance policy to NCEPOD for the year was £11,935 (2023: £11,935).

### **Trustees' and directors' responsibilities in the preparation of financial statements**

The trustees (who are also the directors of NCEPOD for the purposes of company law) are responsible for preparing the Trustees' Annual Report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

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

- Select suitable accounting policies and then apply them consistently;
- Observe the methods and principles in the Charities SORP;
- Make judgments and estimates that are reasonable and prudent;
- State whether applicable UK Accounting Standards have been followed, subject to any material 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 charitable company will continue in business.

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

In so far as the trustees are aware:

- There is no relevant audit information of which the charitable company's auditor is unaware; and
- The trustees have taken all steps that they ought to have taken to make themselves aware of any relevant audit information and to make that information available to the auditor.

The trustees are responsible for the maintenance and integrity of the corporate and financial information included on the charitable company's website.

### **Auditor**

The charity's auditors, Kreston Reeves LLP indicated their willingness to continue in office and offer themselves for re-appointment.

## OBJECTIVES AND ACTIVITIES

### Charitable objectives

The charitable objectives for which the charity was established are as follows:

The company's objects are to assist in maintaining and improving standards of healthcare for the benefit of the public (such term to include members of the public for the time being serving a term of imprisonment) by reviewing the care of patients, by undertaking confidential surveys and research, and by publishing and generally making available the results of such activities.

### Charitable activities

NCEPOD's principal source of funding is from NHS England, the Welsh Government, the Department of Health in Northern Ireland and the Offshore Islands, provided via HQIP. The private healthcare sector also contributes funds to the core activities of NCEPOD.

With effect from 1 January 2021 NCEPOD entered into a 27-month contract with the Health Foundation, for a study looking at the care provided to prisoners in HMP who died from natural causes.

Over fifty reports have been published since NCEPOD was set up, and its influence is widely recognised within the healthcare sector. All NHS hospitals in England, Wales and Northern Ireland are eligible to participate in the work of NCEPOD, together with hospitals in Guernsey, Jersey and the Isle of Man, and the majority of the providers of acute patient care in the independent sector.

NCEPOD's remit includes adults, children and young people who have received medical, surgical or mental healthcare in hospitals, in the community, in primary care or in prison.

Ideas for topics for consideration are sought from a wide range of organisations as part of an annual topic selection process usually held over the summer and autumn months. The call for topics is also made available on the NCEPOD website and using social media; allowing ideas to be submitted by any interested party, including the public.

Therefore in pursuance of its overall goal, NCEPOD undertakes a principal charitable activity which is the design and conduct of confidential surveys. The findings together with targeted recommendations are published. These activities are consistent with the objects of NCEPOD as described above.

### Indicators, milestones and benchmarks

Each new study runs over approximately a two-year period. Progress against set milestones (below) is assessed and formally documented in the business plan which is produced at the beginning of each financial year.

1. Form the Study Advisory Group (SAG)	6. Advertise for reviewers	11. Run reviewer meetings
2. Undertake surveys/focus groups	7. Test data collection methods	12. Data analysis
3. Write the protocol	8. Meet with the SAG for a second time	13. Write the report
4. Design the questionnaires	9. Final protocol to steering group and HQIP	14. Design the report
5. Advertise the study	10. Start data collection	15. Publish the report

### Public benefit - strategy

The trustees have taken The Charity Commission's general guidance on public benefit (contained within the guidance publication "Charities and Public Benefit") into consideration in determining the strategy and operation of the charity and in preparing their statements on public benefit contained within this trustees' annual report.

### Benefits and beneficiaries

In accordance with its charitable objectives, NCEPOD strives to improve patient care and safety and to improve the quality of healthcare for the benefit of all those treated. The charity's beneficiaries are therefore the public and patients, and benefits to all are provided through continuing support for clinicians and allied health professionals to ensure the highest possible quality of safe care is delivered.

***Trustees' assessment of public benefit***

In addition to monitoring the progress of NCEPOD in terms of achievement of the study milestones, the trustees also promote the adoption of the recommendations. At the start of a study, relevant organisations that represent the study sample are involved. This group includes clinicians as well as patient representatives. In addition to this the chair requests that the NCEPOD steering group take the messages of the report back to their constituent groups (royal colleges and specialist organisations) to ensure maximum impact. Feedback from these organisations on how the reports and recommendations have been implemented act as a surrogate marker of public benefit.

**Volunteers**

NCEPOD does not use public volunteers to undertake its work but does benefit from clinicians and lay representatives who are willing to provide their time to help review the data collected.

**Grant making policy**

The charity does not give grants.

**Fundraising activities**

No activities.



## ACHIEVEMENTS AND PERFORMANCE

### Activities and events

#### Publications

NCEPOD published five reports during 2023/24:

1. The Inbetweeners: A review of the transition from child to adult healthcare services
2. Making the Cut?: A review of the quality of care provided to patients with Crohn's disease
3. Consolidation Required: A review of the care provided to patients admitted to hospital with community acquired pneumonia
4. Inside Healthcare: A review of the quality of healthcare provided to people in prison
5. Twist and Shout: A review of the quality of care provided to children and young people who presented to hospital with testicular torsion

The table below details the studies in progress up to 31 March 2024 and future studies planned. Further information can be found on [NCEPOD's website](#).

Area of study:	Milestone reached:
Endometriosis	Due to be published in July 24
End of life care	Analysis complete and report being written
Juvenile arthritis	Analysis complete and report being written
Rehabilitation following critical illness	Data being collected
Blood sodium	Data being collected
Emergency surgery in children and young people	Study in development
Medical care of patient with a learning disability	Study in development
New 1	To be chosen
New 2	To be chosen
New 3	To be chosen

### Impact of activities and events



#### A REVIEW OF THE TRANSITION FROM CHILD TO ADULT HEALTHCARE SERVICES

**Royal College of Paediatrics and Child Health President said:** *"I commend the report, 'The Inbetweeners' to you[college members]."*

**The Royal College of Physicians of Edinburgh:** "Welcomes a new report published by NCEPOD... the College hopes it will lead to improvements in how NHS services, clinicians and care providers support children with complex health and care needs as they transition into adult services from paediatric services.

NCEPOD have given nearly 40 talks around the country to a variety of healthcare providers and specialties, as well as to commissioners. In addition to talks there have been webinars, conference attendances and editorials.



#### A REVIEW OF THE QUALITY OF CARE PROVIDED TO PATIENTS WITH CROHN'S DISEASE

**The Association of Coloproctology of Great Britain and Ireland:** *"An important NCEPOD report on Crohn's Disease surgery has been released this week."*

**Crohn's and Colitis UK:** *"This is an important and comprehensive review."*

**Lancet Gastroenterol Hepatol 2023 :** *Peter Irving (Consultant Gastroenterologist, Guy's and St Thomas' NHS Foundation Trust, London, UK) regarded the NCEPOD report as "excellent, timely and if anything, long overdue".*

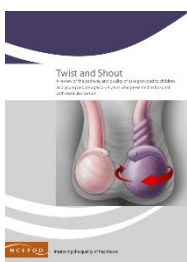
[www.thelancet.com/gastrohep](https://doi.org/10.1016/S2468-1253(23)00274-1) Published online August 8, 2023 [https://doi.org/10.1016/S2468-1253\(23\)00274-1](https://doi.org/10.1016/S2468-1253(23)00274-1)



### A REVIEW OF THE CARE PROVIDED TO PATIENTS ADMITTED TO HOSPITAL WITH COMMUNITY ACQUIRED PNEUMONIA

**The British Thoracic Society (BTS)** “welcomes the publication of the new NCEPOD report on the care provided to adults presenting to hospital with a diagnosis of community-acquired pneumonia. Community-acquired pneumonia (CAP) is an infectious disease very prominent in our communities. It has a high rate of hospital admittance, as well as a high mortality rate, especially for more vulnerable people and those managing other co-morbidities. It is generally understood that the negative impact from CAP is avoidable and can be minimised.”

Data from the report are now being embedded into a national audit programme.

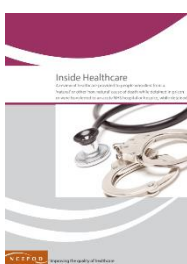


### A REVIEW OF THE QUALITY OF CARE PROVIDED TO CHILDREN AND YOUNG PEOPLE WHO PRESENTED TO HOSPITAL WITH TESTICULAR TORSION

The Getting It Right First Time (GIRFT) programme for paediatric surgery has developed a [national consensus pathway](#) that addresses the issues raised in the report.

Surgery in Children Operational Delivery Networks have included this work in their workplans.

The report was linked to an [information page about testicular torsion](#).



### A REVIEW OF THE QUALITY OF HEALTHCARE PROVIDED TO PEOPLE IN PRISON

**The Independent Advisory Panel for Deaths in Custody:** “This report provides an excellent insight into the provision of healthcare for people in prison. People in prison tend to experience greater health inequalities and the report rightly recognises that the care they receive should – fundamentally – be consistent in range and quality with that available to the wider public. In this way ‘equivalence’ of care is essential for achieving equitable health outcomes. ... It is only with a collective ambition of improving the quality of care can avoidable deaths in custody be reduced.”

A summary of the impact of past reports was compiled and can be found [here](#).

#### **Other means of disseminating the messages from the reports**

Other than the main report, for each study the following are produced:

1. An executive summary
2. A summary sheet
3. An infographic
4. A slide set
5. A short video uploaded to social media
6. A commissioner’s guide
7. Quality improvement for each report to allow individual hospitals and trusts/health boards to assess their own practice against the recommendations made. These include a recommendation checklist, an audit tool and fishbone diagrams

#### **Other activities**

To promote the work of NCEPOD and to ensure that effective links are made with each hospital so that they feel confident participating in the studies, NCEPOD has continued to run days for the local reporters (the link person in each hospital) and ambassadors (hospital-based clinicians who promote the work of NCEPOD) to meet with NCEPOD and discuss common issues. These have been held in person and online, which enabled more people to attend.

#### **Public benefit - delivery**

During the year 2023/24, the trustees gathered the following evidence that demonstrates to their satisfaction that NCEPOD continues to benefit the public through its activities targeted to achieve its charitable objectives:

- Patients, parents, carers and lay members were involved in the development of all new studies
- Patient and carer views were sought for the studies on endometriosis and rehabilitation following critical illness
- Information leaflets were developed in an easy read format and audio format for the first time, and this will be continued for future studies
- A presentation on cardiopulmonary resuscitation was given, with the Resuscitation Council UK at the Patient Safety Congress.

## FINANCIAL REVIEW

### Financial results of activities and events

Results for the year ended 31 March 2024 are given in the Statement of Financial Activities on page 18. The assets and liabilities of NCEPOD are shown in the Balance Sheets on page 19. The financial statements should be read in conjunction with their related notes, which appear on pages 24 to 33.

In summary, total income decreased by 5.2% (2023: increased by 5%) to £1,384,439 (2023: £1,459,932), total expenditure increased by 7.6% (2023: increased by 19%) to £1,552,667 (2023: £1,443,418), resulting in a negative net movement in funds for the year of £146,994 (2023: negative net movement in funds of £2,537). Included in the net movement in funds is the gain on investment recognised for 2024: £21,234 (2023: loss £19,051). The primary source of funding was via the Healthcare Quality Improvement Partnership (HQIP) who commission two of the work programmes undertaken.

The trustees maintain their policy of transferring cash not immediately needed for working capital purposes to short term treasury deposits and longer-term investments as detailed below.

### Reserves policy

The trustees review the reserves policy each year. In conducting this review, the trustees take account of best practice as identified by the Charity Commission and the risks facing NCEPOD.

Designated reserves are set aside at the discretion of the trustees.

The current level of free reserves stands at £1,539,523 (2023: £1,684,162), which meets the above requirements. The free reserves comprise the general fund less the book value of net tangible fixed assets.

Reserves are primarily held to meet legal and other associated costs to undertake an orderly wind-up if this became necessary. It is estimated that a sum up to £1M would be required to cover the costs of staff redundancy, legal and professional costs of winding up the charitable company and the termination costs for premises and equipment leases.

Free reserves, held in excess of 'wind-up' costs, will be used, as required, to cover situations such as:

- Adding funds to the budget in 2024/25 to cover the shortfall in core funding
- Covering any unexpected costs/shortfalls occurring during the year such as fluctuations in insurance premiums.
- Subsidising overhead costs to enable NCEPOD to broaden its scope for the future by taking on additional work programmes.

### Investment policy

NCEPOD plans its activities over a three-year period, with annual review and budgets calculate anticipated income and expenditure and the maintenance of, reserves as detailed above. To date and to ensure the best return on the reserves NCEPOD has £215,305 in a Virgin Deposit Account, £159,554 in a COIF deposit fund, £210,195 in the Charity Bank and £205,920 in the Nationwide Building Society. In addition, NCEPOD has £226,032 invested in low/medium risk securities.

### Investment objective

Longer-term assets (reserves) will be invested with the aim of at least maintaining the value or purchasing power in real terms (i.e. against inflation).

### Total return target

The total return target for the investment portfolio has been set at inflation plus 3.5% p.a. net of fees. This implies a nominal target of 5.5% p.a. assuming the Bank of England's official 2% target for CPI inflation.

### Income requirement

There is no specific income requirement. However, the trustees expect the investments to generate a reasonable level of income, currently around 3%, as income forms an important component part of the overall total return.

### Time horizon

The time horizon for the investment portfolio is considered to be medium to long term (i.e. more than five years).

***Liquidity requirement***

The charity holds in cash reserves sufficient funds to meet immediate cash-flow requirements.

The longer-term investment portfolio should be invested in assets that are easily realisable in normal market conditions.

***Ethical and other constraints***

The trustees have considered what activities would be in conflict with NCEPOD objectives and concluded that it would be inappropriate to invest directly into tobacco companies. This exclusion is aligned with Quilter Cheviot Global Income & Growth Fund for Charities which precludes any direct investment in tobacco companies or businesses which make controversial weapons.

The trustees wish to be responsible investors. Environmental, social and governance (ESG) criteria are a set of standards to assess a company's operations that investors, such as charities, consider when reviewing their investments:

- Environmental criteria consider how a company performs as a steward of nature.
- Social criteria examine how it manages relationships with employees, suppliers, customers and the communities where it operates.
- Governance deals with a company's leadership, executive pay, audits, internal controls, and shareholder rights.

Quilter Cheviot is expected to take account of ESG issues in their investment analysis and decision-making processes and engage with company management when appropriate and produce periodic reports covering ESG issues.

***Risk tolerance***

A reasonable level of capital volatility within the investment portfolio is considered by the trustees to be acceptable given the charity's risk and return objectives but the portfolio should be well diversified across asset classes and individual investments should be in line with a standard medium risk profile.

Diversification within the portfolio should be such as to limit the downside risk in the portfolio. However, the trustees accept there may be times of crisis when the downside risk might be larger as demonstrated in above 'peak to trough decline'.

## PLANS FOR FUTURE PERIODS

### Future strategy

The contract with HQIP for the current programme of child health studies continues until 31 December 2024 and the contract for the medical and surgical studies continues until 31 March 2025.

Work will continue to ensure that the quality of the studies is high, both in methodological terms and in ensuring robust recommendations are provided which will improve patient care and benefit the public.

### Future activities and events

NCEPOD is planning to release three reports during 2024/25

1. Endometriosis
2. End of life care
3. Juvenile idiopathic arthritis

Data collection will continue during 2024/25 for all remaining studies.

The next topic selection round is open and will close for selection in March 2025. Suggestions will be sought from a wide range of organisations and individuals.

NCEPOD trustees will explore additional sources of potential income for NCEPOD.

### Impact of future activities and events

The following targets have been set by the trustees against which to measure the performance of NCEPOD during 2034/25:

- The three reports will be published
- Data collection will begin for two new studies
- Three new studies to be selected.

### Public benefit

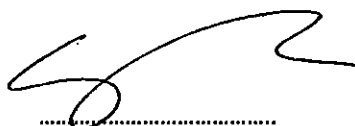
The trustees intend to ensure that NCEPOD continues to benefit the public by producing high quality reports which are available on the NCEPOD website, making recommendations that will improve the quality of care received by patients. The trustees will continue to be pro-active in planning which groups are best placed to promote the recommendations that are made and will continue to invite patient groups to be part of the study planning process to ensure that data collected is relevant to what patients want, as well as what clinicians want for patients.

## FUNDS HELD AS CUSTODIAN

NCEPOD does not currently hold, and the trustees do not anticipate that it will in the future hold, any funds as custodian for any third party.

This report of the board of trustees has been prepared taking advantage of the small companies' exemption of section 415A of the Companies Act 2006.

This report was approved by the trustees on 6<sup>th</sup> August 2024, and was signed for and on behalf of the trustees by:

  
.....  
Dr S Lishman CBE

## **Opinion**

We have audited the financial statements National Confidential Enquiry into Patient Outcome and Death for the year ended 31 March 2024 which comprise the statement of financial activities, the balance sheet, the Charity balance sheet, the statement of cash flows and the related notes, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the Charity's affairs as at 31 March 2024 and of the Charity's incoming resources and application of resources, including its income and expenditure for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006

## **Basis for opinion**

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

## **Conclusions relating to going concern**

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

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

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

## **Other information**

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

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

We have nothing to report in this regard.

#### **Opinion on other matters prescribed by the Companies Act 2006**

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

- the information given in the trustees' report for the financial year for which the financial statements are prepared is consistent with the financial statements.
- the trustees' report has been prepared in accordance with applicable legal requirements.

#### **Matters on which we are required to report by exception**

In the light of our knowledge and understanding of the charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the trustees' report.

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

- the charitable company has not kept adequate and sufficient accounting records, or returns adequate for our audit have not been received from branches not visited by us; or
- the charitable company financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit; or
- the trustees were not entitled to prepare the financial statements in accordance with the small companies regime and take advantage of the small companies' exemptions in preparing the trustees' report and from the requirement to prepare a Strategic report.

#### **Responsibilities of trustees**

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

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

#### **Auditor's responsibilities for the audit of the financial statements**

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

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

*Capability of the audit in detecting irregularities, including fraud*

The objectives of our audit are to identify and assess the risks of material misstatement of the financial statements due to fraud or error; to obtain sufficient appropriate audit evidence regarding the assessed risks of material misstatement due to fraud or error; and to respond appropriately to those risks.

Based on our understanding of the charity and sector, and through discussion with the trustees and other management (as required by auditing standards), we identified that the principal risks of non-compliance with laws and regulations related to health and safety, anti-bribery and employment law. We considered the extent to which non-compliance might have a material effect on the financial statements. We also considered those laws and regulations that have a direct impact on the preparation of the financial statements such as the Companies Act 2006, taxation and pension legislation. We communicated identified laws and regulations throughout our team and remained alert to any indications of non-compliance throughout the audit. We evaluated management's incentives and opportunities for fraudulent manipulation of the financial statements (including the risk of override of controls) and determined that the principal risks were related to posting inappropriate journal entries to increase revenue or reduce expenditure and management bias in accounting estimates and judgemental areas of the financial statements. Audit procedures performed by the engagement team included:

- Discussions with management and assessment of known or suspected instances of non-compliance with laws and regulations and fraud; and
- Challenging assumptions and judgements made by management in its significant accounting estimates; and
- Performing analytical procedures to identify any unusual or unexpected relationships, including related party transactions, that may indicate risks of material misstatement due to fraud; and
- Confirmation of related parties with management, and review of transactions throughout the period to identify any previously undisclosed transactions with related parties outside the normal course of business; and
- Review of significant and unusual transactions and evaluation of the underlying financial rationale supporting the transactions; and
- Identifying and testing journal entries, in particular any manual entries made at the year end for financial statement preparation.

There are inherent limitations in the audit procedures described above and the further removed non-compliance with laws and regulations is from the events and transactions reflected in the financial statements, the less likely we would become aware of it. Also, the risk of not detecting a material misstatement due to fraud is higher than the risk of not detecting one resulting from error, as fraud may involve deliberate concealment by, for example, forgery or intentional misrepresentations, or through collusion.

As part of an audit in accordance with ISAs (UK), we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion of the effectiveness of the charitable company's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the trustees.
- Conclude on the appropriateness of the trustees' use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that



may cast significant doubt on the charitable company's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in my Auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of my Auditor's report. However, future events or conditions may cause the charitable company to cease to continue as a going concern.

- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

#### **Use of our report**

This report is made solely to the charitable company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006, and to the charitable company's trustees, as a body, Part 4 of the Charities (Accounts and Reports) Regulations 2008. Our audit work has been undertaken so that we might state to the charitable company's members those matters we are required to state to them in an Auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and its members, as a body, for our audit work, for this report, or for the opinions we have formed.



**James Peach BSc FCA (Senior statutory auditor)**

For and on behalf of  
**Kreston Reeves LLP**

Chartered Accountants  
Statutory Auditor  
Montague Place  
Quayside  
Chatham Maritime  
Kent  
ME4 4QU

Date: 13/08/2024

	Notes	Total 2024 £	Total 2023 £
<b>INCOME FROM:</b>			
Donations	1	179,070	202,320
Charitable activities	2	1,168,184	1,242,245
Investments	3	37,185	15,367
<b>TOTAL INCOME</b>		<b>1,384,439</b>	<b>1,459,932</b>
<b>EXPENDITURE ON:</b>			
Charitable activities	4	1,552,667	1,443,418
<b>TOTAL EXPENDITURE</b>		<b>1,552,667</b>	<b>1,443,418</b>
Net (loss) / gain on investments	8	21,234	(19,051)
<b>NET EXPENDITURE / INCOME</b>		<b>(146,994)</b>	<b>(2,537)</b>
<b>NET MOVEMENT IN FUNDS</b>		<b>(146,994)</b>	<b>(2,537)</b>
<b>RECONCILIATION OF FUNDS</b>			
Fund balances brought forward at 1 April 2023		1,691,692	1,694,229
<b>FUND BALANCES CARRIED FORWARD AT 31 MARCH 2024</b>	11	<b>1,544,698</b>	<b>1,691,692</b>
		=====	

The net movement in funds for the year arises from the charity's continuing activities.

No separate statement of total recognised gains and losses has been presented as all gains and losses are dealt with in the Statement of Financial Activities.

All funds are unrestricted in the current and prior year.

The annexed notes form part of these financial statements.

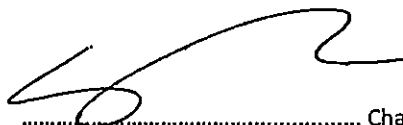
	Notes	2024 £	2023 £
<b>FIXED ASSETS</b>			
Tangible assets	7	5,175	7,530
Investments	8	226,032	204,798
		<u>231,207</u>	<u>212,328</u>
<b>CURRENT ASSETS</b>			
Debtors	9	348,070	366,213
Cash at bank and in hand		1,115,772	1,174,480
		<u>1,463,842</u>	<u>1,540,693</u>
<b>LIABILITIES</b>			
Creditors: Amounts falling due within one year	10	(120,351)	(31,329)
		<u>1,343,491</u>	<u>1,509,364</u>
<b>NET CURRENT ASSETS</b>			
<b>TOTAL ASSETS LESS CURRENT LIABILITIES</b>		<b>1,574,698</b>	<b>1,721,692</b>
Provisions for liabilities		(30,000)	(30,000)
		<u>1,544,698</u>	<u>1,691,692</u>
<b>TOTAL NET ASSETS</b>		<b>1,544,698</b>	<b>1,691,692</b>


#### THE FUNDS OF THE CHARITY

<b>Unrestricted income funds</b>			
General Fund	11	1,544,698	1,691,692
Designated Premises Fund	11	-	-
		<u>1,544,698</u>	<u>1,691,692</u>
<b>TOTAL CHARITY FUNDS</b>	<b>11</b>	<b>1,544,698</b>	<b>1,691,692</b>

The financial statements have been prepared in accordance with the provisions applicable to companies subject to the small companies' regime.

The financial statements were approved and authorised for issue by the Trustees on 3rd August 2024 by the Board and signed on their behalf by:

  
..... Chair  
Dr S Lishman CBE

  
..... Honorary Treasurer  
Associate Professor P J Greaves

The annexed notes form part of these financial statements.

	Notes	2024 £	2023 £
<b>Cash flows from operating activities</b>			
<b>Net cash provided by operating activities</b>	13	(95,893)	(96,119)
<b>Cash flows from investing activities</b>			
Interest from investments		37,185	15,367
Purchase of tangible fixed assets		-	(9,637)
Receipts from sale of investments		-	-
Purchase of investments		-	-
<b>Net cash (outflow) inflow from investing activities</b>		37,185	5,730
<b>Increase (decrease) in cash for the year</b>		(58,708)	(90,389)
<b>Cash brought forward</b>		1,174,480	1,264,869
<b>Cash carried forward</b>		1,115,772	1,174,480
		=====	=====

### Company Status

National Confidential Enquiry into Patient Outcome and Death is a charitable company limited by guarantee and is registered with the Charity Commission (Charity Registration Number: 1075588) and Registrar of Companies (Company Registration Number 03019382) in England and Wales.

The Members of the Charity are the Trustees and steering group representatives named on Page 1. In the event of the Charity being wound up, the liability in respect of the guarantee is limited to £1 per member.

The address of the registered office is given in the Charity's information page on Page 1 of these financial statements. The nature of the Charity's operations and principal activities are listed in the Trustees' Report.

### BASIS OF ACCOUNTING

The financial statements have been prepared to comply with current statutory requirements (being the Companies Act 2006 and the Charities Act 2011), under the historical cost convention, and in accordance with United Kingdom Generally Accepted Accounting Practice. The recommendations in *Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities and in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102)* issued by the Charity Commission effective in October 2019 have been followed. The accounting policies have been applied consistently with the prior year. NCEPOD meets the definition of a public benefit entity under FRS102.

### PREPARATION OF THE ACCOUNTS ON A GOING CONCERN BASIS

The financial statements are prepared on a going concern basis under the historical cost convention, modified to include certain items at fair value. The Trustees consider that this remains an appropriate basis for the preparation of the financial statements as no material uncertainties exist which would threaten the going concern status. NCEPOD is expected to continue in operational existence for the foreseeable future, based on the strategic plans in place, the related financial budgets and forecasts, anticipated outcome of the HQIP funding tender process and its satisfactory reserves position, as detailed in the Trustees' Annual Report and in note 11. The financial statements are presented in sterling and are rounded to the nearest pound.

### INCOME RECOGNITION

Grants are received from both the government departments for health and from private subscribers, who provide money to enable the activities of NCEPOD to continue. Grants receivable are recognised in full in the statement of financial activities in the year to which they relate. Grant income received in advance is carried forward in the balance sheet as deferred income.

Donated services from hospitals providing clinicians for peer reviews is recognised as donated services and valued at the cost NCEPOD would have to pay for equivalent professional work. The income is recognised as donations, and the corresponding expenditure shown as costs of charitable activities.

Bank interest receivable and other sources of income are accounted for on an accruals basis.

### EXPENDITURE RECOGNITION

Resources expended are allocated to the charity's principal activity where the cost can be identified as relating directly to specific confidential surveys.

An estimate is made at the balance sheet date of the proportion of total staff costs that relates to governance matters. All other staff costs can be related directly to specific confidential surveys. For the year ended 31 March 2024, 1.5% (2023:1.5%) of the total staff costs for the Chief Executive have been estimated to relate to governance matters.

All costs that cannot be identified as relating directly to confidential surveys are categorised as support costs, and a proportion of these costs are then allocated to governance costs based on the proportion of total staff costs estimated to relate to governance matters.

#### **TANGIBLE FIXED ASSETS**

All tangible assets that are over £500 are capitalised and classified as tangible fixed assets. Tangible fixed assets are stated at historical cost less depreciation. Depreciation is provided on all tangible fixed assets at rates calculated to write each asset down to its estimated residual value evenly over its expected useful life, as follows:

Computer equipment	over 3 years
Fixtures and fittings	over 5 years

#### **INVESTMENTS**

Investments are stated at market value at the balance sheet date. The statement of financial activities includes the net gains and losses arising on revaluations and disposals throughout the year. As investments are revalued continuously to market value, no realised gains or losses arise.

#### **DEBTORS RECEIVABLE AND CREDITORS PAYABLE WITHIN ONE YEAR**

Debtors and creditors with no stated interest rate and receivable or payable within one year are recorded at transaction price. Any losses arising from impairment are recognised in expenditure.

#### **CASH AT BANK AND IN HAND**

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

#### **LEASED ASSETS AND OBLIGATIONS**

All leases are “operating leases” and the annual rentals are charged to the statement of financial activities on a straight line basis over the lease term.

#### **PENSIONS**

NCEPOD makes contributions into defined contribution pension schemes on behalf of certain employees. The assets of the schemes are held separately from those of NCEPOD in independently administered funds. The amount charged to the statement of financial activities in respect of pension costs is the total contributions payable for the year. No contributions were outstanding at the end of the year (2023: £nil).

#### **FUND ACCOUNTING**

The general fund comprises the accumulated surpluses of unrestricted incoming resources over resources expended, which are available for use in furtherance of the general objectives of the charity.

Designated funds are a particular form of unrestricted funds consisting of amounts, which have been allocated or designated for specific purposes by the Trustees. The use of designated funds remains at the discretion of the Trustees.

#### **FINANCIAL INSTRUMENTS**

The Charity holds basic financial instruments. The financial assets and financial liabilities of the Charity are as follows:

**Financial assets** – trade debtors, other debtors and accrued income are basic financial instruments and are debt instruments measured at amortised cost as detailed in note 9. Prepayments are not financial instruments.

**Cash at bank** – is classified as a basic financial instrument and is measured at face value.

**Investments** - All investments are classified as basic financial instruments and held at their fair value.

**Financial liabilities** – trade creditors and accruals are classified as basic financial instruments and are measured at amortised cost as detailed in note 10. Taxation and social security are not considered to be financial instruments.

#### **JUDGEMENTS AND KEY SOURCES OF ESTIMATION UNCERTAINTY**

The following judgements (apart from those involving estimates) have been made in the process of applying the above accounting policies that have had the most significant effect on amounts recognised in the financial statements:

- Useful economic lives of assets
- Basis of valuation of donated services
- Basis of valuation of the financial asset investments

	Total 2024 £	Total 2023 £
<b>1. DONATIONS:</b>		
Donated services	179,070	202,320
	-----	
	179,070	202,320
	=====	
<b>2. INCOME FROM CHARITABLE ACTIVITIES – DESIGNING AND RUNNING CONFIDENTIAL SURVEY</b>		
Healthcare Quality Improvement Partnership (HQIP)	1,096,344	1,095,122
Health Foundation grant income	41,340	110,000
Private hospitals	24,500	31,000
Conference, exhibition and other income sources	6,000	6,123
	-----	
	1,168,184	1,242,245
	=====	
<b>3. INVESTMENT INCOME</b>		
Dividends	6,510	6,752
Bank interest receivable on short term cash deposits	30,675	8,615
	-----	
	37,185	15,367
	=====	



4. CHARITABLE ACTIVITIES

	Total 2024 £	Total 2023 £
Support costs (note 5)	298,870	304,090
Direct staff costs (note 6)	703,780	657,642
Other direct expenditure:		
Staff healthcare, training, and recruitment	640	2,083
Clinical co-ordinators secondments	217,024	161,092
Clinical reviewers (donated services)	179,070	202,320
Clinical co-ordinators, reviewers, and staff expenses	91,586	52,574
Consultancy	15,754	2,476
Temporary staff costs	11,075	35,632
Conference, exhibition, and meetings expenses	17,159	7,618
Operating lease rentals:		
Plant and machinery	5,666	2,863
Other printing and report production costs	28	7,362
Postage and distribution	4,465	7,666
Write off of bad debts	7,550	-
	1,552,667	1,443,418
	=====	=====

	Support costs £	Governance costs £	Total 2024 £	Total 2023 £
<b>5. SUPPORT AND GOVERNANCE COSTS</b>				
Staff costs (note 6)	-	932	932	873
Other expenditure:				
Operating lease rentals:				
Land and buildings	151,296	-	151,296	141,437
Other premises costs	27,894	-	27,894	28,218
Auditors' remuneration:				
Audit fees	-	9,300	9,300	8,774
Bookkeeping and payroll costs	8,603	12	8,615	9,714
Public relations	69	1	70	-60
Computer expenses	22,223	32	22,255	27,165
Insurance	27,964	40	28,005	24,176
Sundry expenses	9,699	14	9,713	5,346
Telephone	4,662	7	4,668	4,634
Office costs	24,625	35	24,660	17,699
Steering Group expenses	3,640	5	3,645	1,382
Trustee expenses	5,401	-	5,401	1,708
Depreciation - owned assets	2,352	3	2,355	2,945
Bank charges	61	-	61	79
Dilapidation provisions	-	-	-	30,000
	<u>288,489</u>	<u>10,381</u>	<u>298,870</u>	<u>304,090</u>
	=====		=====	=====

Governance costs for the year £10,382 (2023: £9,781) and include all of the audit fees, staff costs and Trustee costs as well as a proportion of other support costs.

Included within auditors' remuneration are amounts payable to Kreston Reeves LLP of £9,300 in respect of audit services for the current year (2023: £8,774).

PRIOR YEAR COMPARATIVE

	Support costs £	Governance costs £	Total 2023 £	Total 2022 £
<b>5. SUPPORT AND GOVERNANCE COSTS</b>				
Staff costs (note 6)	-	<b>873</b>	873	746
Other expenditure:				
Operating lease rentals:				
Land and buildings	141,437	-	141,437	133,644
Other premises costs	28,218	-	28,218	22,521
Auditors' remuneration:				
Audit fees	-	8,774	8,774	8,100
Bookkeeping and payroll costs	9,700	14	9,714	9,366
Public relations	-60	-	-60	860
Computer expenses	27,127	38	27,165	21,951
Insurance	24,142	34	24,176	20,592
Sundry expenses	5,338	8	5,346	6,065
Telephone	4,627	7	4,634	4,748
Office costs	17,674	25	17,699	8,947
Steering Group expenses	1,378	4	1,382	681
Trustee expenses	1,708	-	1,708	-
Depreciation - owned assets	2,941	4	2,945	2,958
Bank charges	79	-	79	190
Dilapidation provisions	30,000	-	30,000	-
	<u>294,309</u>	<u>9,781</u>	<u>304,090</u>	<u>241,369</u>
	=====		=====	=====

Governance costs for the year £9,781 (2022: £8,959) and include all of the audit fees, staff costs and Trustee costs as well as a proportion of other support costs.

Included within auditors' remuneration are amounts payable to Kreston Reeves LLP of £8,774 in respect of audit services for the current year (2021: £8,100).

	2024	2023
<b>6. STAFF COSTS</b>		
	No.	No.
The average monthly number of persons employed by NCEPOD during the year (excluding Trustees) was:		
Designing and running of confidential surveys	16	16
	=====	=====
	£	£
Staff costs for the above persons:		
Wages and salaries	594,379	544,499
Social security costs	52,938	62,246
Pension costs	57,395	51,770
	<u>704,712</u>	<u>658,515</u>
	=====	=====
Staff costs are allocated in the financial statements, as follows:		
Designing and running of confidential surveys – unrestricted	703,780	657,642
Governance costs	932	873
	<u>704,712</u>	<u>658,515</u>
	=====	=====

One employee's total emolument was between £90,000 and £100,000 in the current year (2023: one employee's total emoluments was between £90,000 - £100,000).

NCEPOD contributed 10% of the total emolument for one employee to a stakeholder pension.

Total costs for key management personnel remuneration and benefits (i.e. pension costs and employer national insurance contributions) for 2024 was £204,183 (2023: £194,336).

The Charity operates a defined contribution pension plan for its employees. The amount recognised as an expense in the year was £57,395 (2023: £51,770). There were no outstanding pension contributions at the balance sheet date (2023: £nil). This is recognised within unrestricted funds.

7. TANGIBLE ASSETS

	Computer equipment £	Fixtures & fittings £	TOTAL £
Cost:			
1 April 2023	19,136	7,612	26,748
Additions	-	-	-
Disposals	-	-	-
31 March 2024	19,136	7,612	26,748
Depreciation:			
1 April 2023	17,696	1,522	19,218
Charge in the year	832	1,523	2,355
Depreciation on disposal			
31 March 2024	18,528	3,045	21,573
Net book value:			
31 March 2024	607	4568	5,175
	=====	=====	=====
31 March 2023	1,440	6,090	7,530
	=====	=====	=====
		<b>2024</b>	<b>2023</b>

8. INVESTMENTS

Listed investments:

	£	£
Opening balance at 1 April	204,798	223,849
Unrealised (losses)/gains on investments	21,234	(19,051)
Market value at 31 March	226,032	204,798
	=====	=====

All investments are held in the UK and Ireland.

	2024	2023
<i>Analysis of investment holdings</i>	£	£
QC Global income and Growth Fund	226,032	204,798
Market value at 31 March	226,032 =====	204,798 =====
<b>9. DEBTORS</b>	£	£
Amounts falling due within one year:		
Trade debtors	277,862	290,439
Other debtors	24,643	24,643
Prepayments	45,565	51,131
	348,070 =====	366,213 =====
<b>10. CREDITORS</b>	£	£
Amounts falling due within one year:		
Trade creditors	96,797	6,862
Accruals and deferred income	23,554	24,467
	120,351 =====	31,329 =====
<b>Deferred income</b>	£	£
Deferred income at 1 April 2023	-	-
Resources deferred during the year	-	-
Amounts released from previous years	-	-
	- =====	- =====

11. THE FUNDS OF THE CHARITY

	1 April 2023 £	Income £	Expenditure £	Gain on Investment £	Transfers £	31 March 2024 £
Unrestricted income funds:						
General Fund	1,691,692	1,384,439	(1,552,667)	21,234	-	1,544,698
	<u>1,691,692</u>	<u>1,384,439</u>	<u>(1,552,667)</u>	<u>21,234</u>	<u>-</u>	<u>1,544,698</u>

The leased premises that have been occupied by NCEPOD will require maintenance and internal decoration during the course of the lease. The lease was extended for a further 5 years, and a provision was included within the accounts for dilapidations in the prior year, therefore the designated funds previously held is still no longer required.

	1 April 2022 £	Income £	Expenditure £	Loss on Investment £	Transfer £	31 March 2023 £
Unrestricted income funds:						
General Fund	1,664,229	1,459,932	(1,443,418)	(19,051)	30,000	1,691,692
Designated	30,000	-	-	-	(30,000)	-
	<u>1,694,229</u>	<u>1,459,932</u>	<u>(1,443,417)</u>	<u>(9,051)</u>	<u>-</u>	<u>1,691,692</u>

12. ANALYSIS OF NET ASSETS BETWEEN FUNDS

	Fixed asset investments £	Tangible fixed assets £	Net current assets £	Total £
Unrestricted income funds:				
General Fund	226,032	5,175	1,313,491	1,544,698
Designated Premises Fund	-	-	-	-
NET ASSETS AT 31 MARCH 2024	<u>226,032</u> =====	<u>5,175</u> =====	<u>1,313,491</u> =====	<u>1,544,698</u> =====

	Fixed asset investments £	Tangible fixed assets £	Net current assets £	Total £
Unrestricted income funds:				
General Fund	204,798	7,530	1,479,364	1,691,692
NET ASSETS AT 31 MARCH 2023	<u>204,798</u> =====	<u>7,530</u> =====	<u>1,479,364</u> =====	<u>1,691,692</u> =====

13. RECONCILIATION OF NET INCOME TO NET CASH FLOW FROM OPERATING ACTIVITIES

	2024 £	2023 £
Net income for the year	(146,994)	(2,537)
Depreciation (note 7)	2,355	2,945
Gain on investments	(21,234)	19,051
Interest from investment	(37,185)	(15,367)
Decrease (Increase) in debtors	18,143	10,126
(Decrease) increase in creditors	89,022	(110,337)
<b>Net cash from operating activities</b>	<b>(95,893)</b> =====	<b>(96,119)</b> =====

14. **COMMITMENTS UNDER OPERATING LEASES**

At 31 March 2024, NCEPOD had future minimum lease payments under non-cancellable operating leases:

	2024		2023	
	Land & Building	Equipment	Land & Building	Equipment
Within 1 year	£148,676	£5,606	£144,904	£5,606
Within 2-5 years	£74,338	£9,811	£217,356	£15,418
<b>Total</b>	<b>£217,356</b> =====	<b>£15,418</b> =====	<b>£362,260</b> =====	<b>£21,024</b> =====

15. **NET DEBT RECONCILIATION**

	At 1 April 2023 £	Cash flows £	At 31 March 2024 £
Cash at bank and in hand	1,174,480	(58,708)	1,115,772
Debt	-	-	-
<b>Total</b>	<b>1,174,480</b> =====	<b>(58,708)</b> =====	<b>1,115,772</b> =====

16. **ANALYSIS OF CASH AND CASH EQUIVALENTS**

	2024 £	2023 £
Cash in hand	1,115,772	1,174,480
<b>Total cash and cash equivalents</b>	<b>1,115,772</b>	<b>1,174,480</b>



**17. TRANSACTIONS WITH TRUSTEES AND OTHER RELATED PARTIES**

Related parties include Key Management Personnel, which comprise the Trustees and senior members of staff. Aggregate remuneration and benefits for these staff are disclosed in Note 6.

The Trustees and directors were paid no remuneration for their services provided to NCEPOD during the current or previous period. Two (2023: Two) Trustees were reimbursed travel and meeting expenses totalling £5,401 (2023: £1,708) incurred in attending meetings.

NCEPOD has taken out an insurance policy that provides professional indemnity cover for the Trustees. The cost of this insurance policy to NCEPOD for the year was £11,935 (2023: £11,935).

Income of £6,500 was received from Spire Healthcare during the year (2023: £6,500). Dr S Lishman CBE, a Trustee of NCEPOD has a related party interest in Spire Healthcare, as her husband is a Hospital Director at the Spire Hospital in Leicester.

There were no other transactions with related parties that require disclosure.