



Blood and Transplant

NHS Blood and Transplant

Trust Fund

ANNUAL REPORT AND ACCOUNTS
for the financial year ended 31 March 2019

OFFICE AND REGISTERED ADDRESS :

NHS Blood and Transplant
Finance Operations Team
Bridle Path
Leeds
LS17 5TW

Registered Charity No.1061771

BANKERS :

Lloyds Bank Edgware
Station Road
Edgware
Middlesex
HA8 7JL

INDEPENDENT EXAMINER :

Mazars LLP
5th Floor
3 Wellington Place
Leeds
LS1 4AP

This Report is a public Document, copies of which may be ordered from:
Rob Bradburn, Finance Director at the registered address.

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1. Foreword

The Corporate Trustee, NHS Blood and Transplant, presents the charitable funds' Annual Report together with the Financial Statements for the year ended 31 March 2019.

The Charity's Annual Report and Accounts for the year ended 31 March 2019 have been prepared by the Corporate Trustee in accordance with the Charities Act 2011.

The Report provides detail of the funds held on charitable trust by the Trustee. The report describes and explains the matters involved in the management of those funds, informs the reader as to how the funds have been used during the year and should be read in conjunction with the annual accounts on pages 13 to 23.

2. Reference and Administrative Details

NHS Blood and Transplant is a statutory body that was established under Statutory Instrument 2005 No. 2529 and No. 2531 on 1 October 2005. The authority was formed from the merger of the National Blood Authority and UK Transplant and, by virtue of the powers vested in it through the NHS and Community Care Act 1990, is able to hold funds on trust, as a Corporate Trustee. Charitable Funds held by the National Blood Authority were transferred to NHS Blood and Transplant under a Deed of Variation executed under seal by the Charity Commission. There were no charitable funds held by UK Transplant.

The charitable funds are registered under an umbrella registration with the Charity Commission in accordance with the Charities Act 2011. The registered Charity Number is 1061771. The Charitable Trust name is: NHS BLOOD AND TRANSPLANT TRUST FUND

The charity is constituted of three individual funds as at 31 March 2019 (2017/2018: 3), and the notes to the accounts distinguish the types of fund held. For accounting purposes, the umbrella registration has permitted the production of a single report and set of accounts. This does not obviate the requirement to manage each fund as a separate trust for the purpose of maintaining books for accounts and for investment management.

The Corporate Trustee is NHS Blood and Transplant, and the Board acts as an agent of the Corporate Trustee. Members of the Board of NHS Blood and Transplant who served during the year are shown overleaf:

3. Authority Board NHSBT 2018 - 2019

Chair Ms Millie Banerjee

Non-executive Directors Lord Jonathan Oates
Professor Paresh Vyas
Mr Keith Rigg
Mr Charles St John
Mr Jeremy Monroe
Ms Helen Fridell – from February 2019
Mr Piers White – from February 2019
Mr Roy Griffins CB – left December 2018
Ms Louise Fullwood – left December 2018

Executive Directors Ms Betsy Bassis – Chief Executive and Accounting Officer – from March 2019
Mr Ian Trenholm – Chief Executive and Accounting Officer – left July 2018

Ms Sally Johnson OBE - Interim Chief Executive from July 2018 to April 2019 and Accounting Officer from July 2018 to March 2019.
 Director of Organ Donation and Transplantation to July 2018.
 Dr Gail Miflin – Medical and Research Director
 Dr Huw Williams – Director of Diagnostic and Therapeutic Services
 Mr Greg Methven – Director of Manufacturing and Logistics
 Mr Rob Bradburn – Director of Finance
 Mr Anthony Clarkson – Interim Director of Organ Donation and Transplantation – from July 2018 to February 2019 and Director of Organ Donation and Transplantation – from February 2019

4. Trust Fund Committee

The NHS Blood and Transplant Board, the corporate trustee, delegates responsibility for the ongoing management. The members of the Trust Fund Committee during the year 2018-19 were as follows:

Mr Roy Griffins CB	Chair and Non-Executive Director – left November 2018
Mr Charles St John	Non-Executive Director. Chair from December 2018
Mr Rob Bradburn	Finance Director NHS Blood and Transplant
Dr Gail Miflin	Medical and Research Director NHS Blood and Transplant
Ms Katherine Robinson	Director of Workforce NHS Blood and Transplant

Acting for the Corporate Trustee, the Trust Fund Committee is responsible for the overall management of the charitable fund. The Committee is required to:

- control, manage and monitor the use of the fund's resources;
- manage and monitor the receipt of all income;
- ensure that 'best practice' is followed in the conduct of all its affairs, fulfilling all of its legal responsibilities;
- ensure that the approved investment policy endorsed by the Board as Corporate Trustee is adhered to and that performance is reviewed on a regular basis; and
- keep the Board of the Corporate Trustee fully informed on the activity, performance and risks of the charity.

The Corporate Trustee is responsible for preparing the Trustee 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 & 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 in the Charities SORP;

- make judgments and estimates that are reasonable and prudent;
- state whether applicable accounting standards have been followed; and
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charity will continue in business.

The Corporate 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 Corporate Trustee is also responsible for the maintenance and integrity of the charity and financial information included on the NHSBT website.

Although NHSBT Trust Funds are able to hold non-charitable funds on trust, to do so would be to incur additional Trustee and related administrative responsibilities. The Trust Fund held no non-charitable funds on trust during the year.

5. Structure, Governance and Management

The Department of Health and Social Care appoints Non-Executive members of the Board. Executive members of the Board are recruited by the Board of NHS Blood and Transplant. Members of the Board and the Trust Fund Committee are not individual trustees under Charity Law but act as agents on behalf of the Corporate Trustee.

The Committee agrees an annual work plan and held four meetings during the financial year 2018/19. The Committee was chaired by Roy Griffins until the November meeting, after which he stepped down from the Committee and Charles St John was appointed as the new Chair. Attendance at meetings is shown below:

Meeting Dates	April 2018	July 2018	November 2018	February 2019
Roy Griffins	✓	✓	✓	-
Charles St John	✓	✓	✓	✓
Gail Miflin	✓	✓	✓	✓
Rob Bradburn	✓	✓	✓	✓
Katherine Robinson	✓	✓	✓	✓

All members of the Trust Fund Committee are provided with a copy of Committee terms of reference, procedure and guidance notes, copies of the annual report and accounts, and information about trusteeship. Updated guidance and news from the Charity Commission is also circulated to Committee members. At the end of the financial year the Committee provides the NHSBT Board with an annual report on the work undertaken during the year.

The Charity holds a single unrestricted general fund and two restricted funds, the Howard Ostin Bequest and the British Bone Marrow Donor Appeal (BBMDA). The total value of charitable funds held on trust at the end of the year, with investment assets valued at market value, was £161,000 (£341,000 31 March 2018).

The Corporate Trustee fulfils its legal duty by ensuring that funds are spent in accordance with the objects of each fund, and by designating funds the Trustee ensures that the wishes of donors are respected.

The Trust Fund Committee considers all applications for funding. For research applications a 'peer review' process by the NHSBT National Research and Development Senior Management Team occurs prior to submission to the Trust Fund Committee. All spending during the year was authorised by the Trust Fund Committee under delegated authority from the Board. Decisions to spend funds take into account whether the purpose of the request meets the charity's objectives and whether there are funds available to meet that expenditure.

The Nature and Purpose of NHSBT

The core purpose of NHSBT is to "Save and Improve Lives" through providing a safe and reliable supply of blood components, solid organs, stem cells, tissues and related diagnostic services to the National Health Service (NHS) and to the other UK Health Departments where directed. In support of this purpose NHSBT is constituted as a Special Health Authority in England and Wales. Our accountability to the Scottish and Northern Ireland Health Departments, regarding our UK-wide role in organ donation and transplantation, is discharged through certain arrangements within the NHSBT Board, supported by income generation agreements.

NHSBT is one of the largest services of its type in the world. NHSBT is organised into three operating divisions:

Blood Components covers the supply of red cells, platelets, plasma and specialist blood components to NHS hospitals in England. The cost of these products is recovered in the prices that are agreed annually through the National Commissioning Group for Blood. Around 28,000 units of blood are collected every week via a network of fixed sites and mobile blood collection teams. The blood is processed in three processing centres (two of which are also testing facilities) and distributed via a network of fifteen stock holding units to all English NHS Acute Trusts, 365 days a year.

Organ Donation and Transplantation (ODT). We are the UK "Organ Donation Organisation" that is working with the four UK Health Departments and hospitals throughout the UK to increase the numbers of organs available for transplantation. Our ODT activities (including the retrieval of donated organs) are funded by the UK Health Departments. There are currently around 6,000 people on the UK Transplant Waiting List.

Diagnostic and Therapeutic Services (DTS). This division is a group of strategic business units (SBUs) that supply biological products and related services, mostly to the NHS in England. This includes:

Tissues and Eye services – We operate the UK's largest tissue and eye bank. We manage the pathway from referral and consent of deceased donors to the retrieval and processing of tissue and eyes. Tissue (such as corneas, tendons, bone, heart valves and skin) is supplied on a cost recovery basis for the treatment of patients across the UK.

Cellular and Molecular Therapies (CMT) – Building on the capabilities we have developed in Stem Cell Donation and Transplantation (SCDT) we also provide supporting services to NHS, academic and private sector organisations seeking to take next generation stem cell therapies to the clinic. This includes the operation of the Clinical Biotechnology Centre (CBC).

Diagnostic Services – via a national network of laboratories we provide detailed investigations into complex serological problems referred to us from NHS hospital diagnostic teams, antenatal screening services and investigate adverse transfusion reactions (red cell immunohematology). We also support the diagnosis and treatment of medical conditions in several clinical areas including organ, stem cells and tissue transplantation and immunology (histocompatibility & immunogenetics).

Therapeutic Apheresis Services (TAS) - We provide life-saving and life-enhancing treatments for both adults and children using special technology to exchange, remove, or collect certain components with the blood. Our services are delivered by experienced clinical teams across a range of clinical specialities across the whole of the NHS.

NHSBT's annual report and accounts is also a public document, a copy of which can be requested from Rob Bradburn, Finance Director at the address below:

**NHS Blood and Transplant
Finance Operations Team Bridle Path Leeds LS15 7TW**

6. Fund Objectives and Activities

The General Fund (£160,000) is an **unrestricted** income fund and the property therein may be used at the discretion of the Trustee for charitable purposes, wholly or mainly for the services provided by NHS Blood and Transplant. Part of the unrestricted fund may be earmarked for a particular project and designated as a separate fund for administrative purposes. Only £19,000 has been separately designated by the Trustee in this manner.

The General Fund receives donations that can be used for any charitable purpose relating to the NHS. This flexibility has been used to fund recognition awards for those staff members with over 20 years' service with NHS Blood and Transplant (including service with the National Blood Authority), and staff winter celebrations. Staff recognition awards for those staff working in the Birmingham area are funded from the Howard Ostin Fund.

The Howard Ostin Bequest (£nil) is a **restricted** fund and has the following objective:

"The object of the charity is to further such charitable purposes of NHS Blood and Transplant as the trustee thinks fit. In furthering such purposes, the trustee shall first consider and have regard to the needs in the area of Birmingham and the surrounding district".

The British Bone Marrow Donation Appeal (BBMDA) (£1,000) is a **restricted** fund.

The objective of this fund is to improve the infrastructure for searching and accessing the Registry by clinicians, registry managers and patients.

Public Benefit

The aim of the Charity is to save and improve patients' lives. Thus the Charity will support non-commercial research in areas where the Corporate Trustee has considerable expertise with a view to improving blood, tissue and organ safety. In planning the activities of the Charity and agreeing a budget for the year the Trustee has given careful consideration to the Charity Commission's guidance on public benefit. The Charity has achieved its aims with a focus on funding research projects that meet the specific objectives of each of the funds and providing funding for loyal service awards to staff with over 20 years of service.

7. Achievements and Performance

Review of Activities undertaken for the Public Benefit and furtherance of the Charity's objectives

During the year the Committee has approved expenditure on the following research and development projects amounting to £158,209 (excluding reversals), which help to improve and save patients' lives: -

Rare Hematopoietic Stem Cell Donors

This study was awarded £10,000 from the BBMDA Fund. It develops a previously funded project and aims to improve the identification and retention of stem cell donors with a rare haplotype profile, ultimately leading to a better provision of stem cells for patients.

Psychological Impact on Organ Donation on Staff

This study was awarded £49,500 from the General Fund. It aims to understand the psychological impact on employees facilitating organ donation. Working with support from NHSBT's Occupational Health provider and colleagues in the National Institute for Health Research Blood and Transplant Research Unit (NIHR BTRU), the project will develop strategies to increase resilience and wellbeing in this workforce.

Trust, Altruism, Social Inclusion and BAME Blood Donor Recruitment

This study was awarded £49,704 from the General Fund. It aims to understand the trust relationship between Black, Asian and Minority Ethnic donors and NHSBT. This study will lead to recommendations for future recruitment campaigns: encouraging donors from BAME backgrounds is important to improve the treatment of certain conditions (e.g. sickle cell disease) that have a higher prevalence in BAME communities.

Laying the groundwork for a future randomised control trial that will compare cost effectiveness of different replacement fluids during Therapeutic Plasma Exchange (TPE)

This study was awarded £49,005 from the General Fund. It aims to generate data which will support a future clinical trial, investigating the safety and efficacy of various TPE regimes across the NHS in England and Wales. This has real potential to improve the care of patients who rely upon TPE.

The Committee has also recognised the importance of the contribution of the staff of NHS Blood and Transplant and has supported staff long service and recognition awards.

Investment performance

The funds invested with Barings have been monitored at each meeting. In the months to December 2018, the funds grew 7.6% versus a 7.8% target (CPI+5%).

Barings Fund investments were sold in January 2019 (see page 9 and note 5.1).

Associated Charities and Other Bodies

Each of the three funds must be seen as 'associated' with the other funds. The Authority (NHSBT) as a public body, and principal beneficiary of the funds held on trust, has considerable influence on how the funds are used.

Thank You

The Corporate Trustee would like to thank patients, relatives and other members of the public who have made charitable donations which have in turn improved services for patients and funded recognition awards for staff.

Annual Accounts

The Regulations, the Charity Statement of Recommended Practice (SORP 2015) and the Accounting and Reporting Standards have specified three components to the final accounts:

- i. Statement of Financial Activities (SOFA) (page 13)
- ii. Balance Sheet (page 14)
- iii. Notes to the Accounts (pages 15-23)

8. Financial Review

Income

The Charity relies on donations, legacies and investment income as the main sources of income. The Trustee does not actively fund raise. This means that future donations are likely to remain at relatively low levels.

The main sources of income in the year are investment income £8,000 (2017/18 £8,000) earned in interest and dividends through prudent management of funds not immediately required. We have also received donations from individuals or grateful relatives and friends totalling £11,000 (2017/18 £18,000), and a legacy of £23,000 (2017/18 £75,000).

Expenditure

Expenditure during the year was £216,000 (2017/18 £75,000) spent mainly on research. The grants awarded £158,000 (2017/18 £48,000) and grants returned/credited £9,000 (2017/18 £33,000) giving a net total to grant expenditure this year of £149,000 (2017/18 £15,000) on an accruals basis. See note 4 for detail of grants.

The Trust Fund continues to support long service awards to staff with over 20 years' service, including service with the National Blood Authority and UK Transplant. Where staff are working in the Birmingham area these costs are recharged to the Howard Ostin Fund. The long service awards help retain a motivated and stable workforce and so support the advancement of health and saving lives. Expenditure on such awards amounts to £20,400 (2017/18 £20,200). The Trust Fund also provided funding of £31,600 (2017/18 £37,900) for NHSBT staff winter celebrations at Christmas and provided a further £1,800 (2017/18 £800) to fund recognition of events. The Committee have agreed that staff welfare costs will cease to be funded from the Trust funds after the year 2019/20.

Governance costs comprise Independent examiner's fees of £2,700 for 2018/19 (2017/18 £2,000) and investment management fees. Investment management fees are charged at 0.05% of the portfolio value, are deducted directly from capital funds and are estimated to be £108 (2017/18 £132) based on the average fund balance over the year prior to sale.

Investments

In November 2018, the Committee decided to sell the Barings investment so that the remaining Trust commitments would be covered by cash holdings. The sale of shares was completed at the end of January 2019, resulting in cash proceeds of £201,100 and a final realised gain of £13,300.

Fund	Value at Purchase* 01/03/12	Opening Value 01/04/18	Final Value 25/01/19	Final Realised Gain/ (Loss)
General Baring	187,786	208,001	201,086	13,300
Totals	187,786	208,001	201,086	13,300

*177,324.14 units at £1.0590 each

The Trust is exempt from Capital Gains Tax on this sale under Section 256 TCGA 1992.

The remaining investment balance of £8,000 (2018 £8,000) relates to a holding in National Grid shares. This prior year figure is restated: for further details, please see note 11.

Net current assets

The accounts show £73,000 (2018 £140,000) held as cash at bank plus £431,000 (2018 £280,000) cash held on deposit in a high interest bearing account. Short term creditors of £311,000 (2018 £230,000) relate primarily to research grants, of which NHS Blood and Transplant is owed £192,000 (2018 £200,000) and other Grantees are owed £119,000 (2018 £30,000). Debtors are £nil (2018 £2,000).

Income funds

The unrestricted general-purpose fund is valued at £160,000 (2018 £313,000) and can be spent at the discretion of the Trustee. In respect of the restricted funds relating to the Howard Ostin Bequest £nil (2018 £18,000) and the British Bone Marrow Donor Appeal £1,000 (2018 £10,000), all expenditure is within the specific objectives of these funds as described on page 7.

Movement in funds

The net assets of the Charitable Funds as at 31 March 2019 were £161,000 (31 March 2018 £341,000). Overall net assets reduced by £180,000 as the result of an excess of expenditure over income and a loss on investments.

Movement in each of the three funds of the Charity are summarised below:

Fund Name	Fund Balance B/F Restated £'000	Incoming Resources £'000	Outgoing Resources £'000	Realised Gain/(Loss) on Investment Assets £'000	Fund Balance C/F £'000
General Fund	313,000	41,000	(188,000)	(6,000)	160,000
Howard Ostin	18,000	-	(18,000)	-	0
BBMDA	10,000	1,000	(10,000)	-	1,000

The Charity does not employ any staff. Trustees do not charge for their time and the Trust Fund incurs no expenses relating to the work of the Trustee. The day to day administration of funds is undertaken by the NHSBT finance department and no recharge is made for this work as costs are not material.

Risk Management

Previously, the most significant risk to the Charity was a potential loss from a fall in the value of investments. A review was undertaken to ensure that all commitments were covered by liquid assets (cash on deposit and in hand). This led to the decision to sell all investments in the year, thereby reducing the risk profile of the Fund. The uncommitted reserves balance continues to be reviewed at each meeting to consider if grants can be made or if investments should be considered to balance the financing risks and opportunities. Other risks are considered and managed as part of the control and risk management processes that operate throughout NHS Blood and Transplant.

Investments

Investment management services were provided by Baring Fund Managers Ltd to January 2019 when investments were sold. Barings are authorised and regulated by the Financial Services Authority, registration No.941405. Their registered address is 155 Bishopsgate London, EC2M

3XY United Kingdom. Monies were invested in a common investment target return fund. The objective of the fund was to provide a total return of CPI + 5% per annum gross of the management fees with an income target of CPI + 1% per annum over a rolling 3 year period. The Committee had instructed the fund managers that there must be no investment in the processing and/or manufacturing of tobacco products.

Reserves Policy

The Trustee's policy is to keep funds to the minimum required to cover approved commitments in the belief that donations are made with the intention and expectation that they will be spent accordingly. In order to avoid the risk of the Charity's reserves becoming overdrawn it is considered prudent to hold a level of funds that at a minimum covers a) the commitments made and b) the annual management and administration costs including independent examiner's fees for the period of those commitments, together with the costs to close (including an appropriate level of contingency). It is the intention of the Trust Fund Committee to fund staff welfare payments for the 2019/20 financial year only. A Staff welfare budget of £62k has been set for 2019/20 (subject to funds being available). The reserves' available to spend balance will be reviewed at each committee meeting prior to any new commitments being made.

The reserves policy is reviewed at least annually.

Future Commitments, Activities and Plans

The Trust Fund Committee works very closely with the Corporate Trustee to determine funding policy. Spending on research remains the main focus in expenditure plans for the medium term with funding for staff development and welfare ceasing from 2019/20.

We do not recognise commitments for future years' staff welfare.

9. Independent Examination

An independent examination for the Trust Fund accounts in 2018/2019 has been completed by Mazars LLP. The examiner is required to report on whether the financial statements are prepared in accordance with the accounting records and the Charities Act 2011.

SIGNED FOR AND ON BEHALF OF THE CORPORATE TRUSTEE



Ms Millie Banerjee CBE

Chair of the NHSBT Board

Date: 14.01.20.

Independent Examiner's report to the Trustee of the NHS Blood and Transplant Trust Fund.

I report on the accounts of the Charity for the year ended 31 March 2019, which are set out on pages 13 to 23.

Respective responsibilities of trustees and examiner

The charity's trustee is responsible for the preparation of the financial statements. The charity's trustee considers that an audit is not required for this year under section 144(2) of the Charities Act 2011 (the 2011 Act) and that an independent examination is needed.

It is my responsibility to:

- examine the accounts under section 145 of the 2011 Act;
- follow the procedures laid down in the general Directions given by the Charity Commission under section 145(5)(b) of the 2011 Act; and
- to state whether particular matters have come to my attention.

This report, including my statement, has been prepared for and only for the charity's trustee as a body. My work has been undertaken so that I might state to the charity's trustee 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 trustee as a body for my examination work, for this report, or for the statements I have made.

Basis of independent examiner's report


My examination was carried out in accordance with the general Directions given by the Charity Commission. An examination includes a review of the accounting records kept by the charity and a comparison of the financial statements presented with those records. It also includes consideration of any unusual items or disclosures in the financial statements, and seeking explanations from you as trustee concerning any such matters. The procedures undertaken do not provide all the evidence that would be required in an audit and consequently no opinion is given as to whether the financial statements present a 'true and fair view' and the report is limited to those matters set out in the statement below.

Independent examiner's statement

In connection with my examination, which is complete, no matters have come to my attention which give me reasonable cause to believe that in any material respect:

- accounting records were not kept in respect of NHS Blood and Transplant Trust Fund in accordance with section 130 of the 2011 Act; or
- the financial statements do not accord with those records; or
- the financial statements do not comply with the applicable requirements concerning the form and content of financial statements set out in the Charities (Accounts and Reports) Regulations 2008 other than any requirement that the financial statements 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, in my opinion, attention should be drawn in order to enable a proper understanding of the financial statements to be reached.

Signed:  Date: 16 January 2020
Name: Mark Kirkham (ACA, CIPFA) for and on behalf of Mazars LLP
Relevant professional qualification or body: ACA, CIPFA
Address: 5th Floor, 3 Wellington Place, Leeds, LS1 4AP

Charitable Funds Trust Account – NHS Blood and Transplant 2018 - 2019

Statement of Financial Activities Year ended 31 March 2019

		2018-19			2017-18		
	Note	Unrestricted Funds £'000	Restricted Funds £'000	Total Funds £'000	Unrestricted Funds £'000	Restricted Funds £'000	Total Funds £'000
					Re-stated		
INCOME FROM:							
Donations and legacies	2	34	-	34	93	-	93
Investments	3	7	1	8	8	-	8
TOTAL INCOME		41	1	42	101	-	101
EXPENDITURE ON:							
Charitable activities	4	188	28	216	55	20	75
TOTAL EXPENDITURE		188	28	216	55	20	75
Net income/(expenditure) before investment gains/(losses)		(147)	(27)	(174)	46	(20)	26
Net gains/(losses) on investments		(6)	-	(6)	(1)	-	(1)
NET MOVEMENT IN FUNDS		(153)	(27)	(180)	45	(20)	25
RECONCILIATION OF FUNDS							
Total funds brought forward as previously reported		313	28	341	268	48	316
Net movement in funds for the year		(153)	(27)	(180)	45	(20)	25
Total funds carried forward		160	1	161	313	28	341

The notes at pages 15 to 23 form part of this account.

All activities were derived from continuing operations. All recognised gains and losses have been included in the above statement.


Balance Sheet as at 31 March 2019

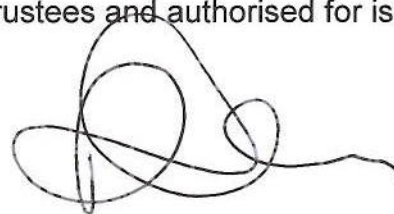
	Unrestricted Funds £'000	Restricted Funds £'000	Total at 31 Mar-19 £'000	Total at 31 Mar-18 Restated £'000
Fixed Assets				
Investments	8	-	8	216
Total Fixed Assets	<u>8</u>	<u>-</u>	<u>8</u>	<u>216</u>
Current Assets				
Debtors	-	-	0	2
Cash on deposit	326	105	431	280
Cash at bank and in hand	38	35	73	140
	<u>364</u>	<u>140</u>	<u>504</u>	<u>422</u>
Creditors: amounts falling due within one year *	<u>(188)</u>	<u>(123)</u>	<u>(311)</u>	<u>(230)</u>
Net Current Assets	<u>176</u>	<u>17</u>	<u>193</u>	<u>192</u>
Creditors: Amounts falling due after one year	(24)	(16)	(40)	(67)
Total Net Assets	<u>160</u>	<u>1</u>	<u>161</u>	<u>341</u>
Funds of the Charity				
Income Funds:				
Unrestricted	160	-	160	313
Restricted	-	1	1	28
Total Funds	<u>160</u>	<u>1</u>	<u>161</u>	<u>341</u>

The notes at pages 15 to 23 form part of this account.

These financial statements of Charity NHS Blood and Transplant Trust Fund registered number 1061771 were approved by the Board of Trustees and authorised for issue on 29th November 2019.

Signed for and on behalf of the Corporate Trustees


Ms Millie Banerjee CBE
 Chair of the NHSBT Board
 Date: 14.01.20


Mr Rob Bradburn
 Finance Director NHSBT
 Date: 14.01.20



Notes to the accounts

1. Accounting Policies

NHS Blood and Transplant Trust Funds meets the definition of a public benefit entity under FRS 102.

(a) Basis of preparation

The financial statements have been prepared in accordance with the Charities Statement of Recommended Practice (SORP).

Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy note(s). The principal accounting policies adopted in the preparation of the financial statements are as below. The Trustee does not consider there are any critical judgements or sources of estimation uncertainty requiring disclosure beyond the accounting policies listed.

(b) Preparation of the accounts on a going concern basis

The Corporate Trustee of the charity has agreed that the trust funds will not actively fund raise therefore the funds diminish has grants are made unless donations are received. The Trustee has reviewed the financial forecast and is content that the funds will be available for at least the next 12 to 18 months and consider that there are no material uncertainties about the Charity's ability to continue as a going concern.

(c) Fund accounting

Restricted funds are funds which are to be used in accordance with specific restrictions imposed by the donor.

Unrestricted income funds comprise those funds which the Trustee is free to use for any purpose in furtherance of the charitable objects. Unrestricted funds include designated funds where the donor has made known their non-binding wishes or where the Trustee, at their discretion, has created a fund for a specific purpose. Included in this is £19,000 of earmarked funds (split of £7k earmarked for Organ Donation, £4k Therapeutic Apheresis Services purposes and £8k Tissues artwork) as at 31 March 2019.

(d) Income

All income is recognised once the charity has entitlement to the resources, it is probable that the resources will be received, and the monetary value of the income can be measured with sufficient reliability.

For legacies, entitlement is taken as the earlier of the date on which either: the charity is aware that probate has been granted, the estate has been finalised and notification has been made by the executor(s) to the Trust that a distribution will be made, or when a distribution is received from the estate. Where legacies have been notified to the charity, or the charity is aware of the granting of probate, and the criteria for income recognition have not been met, then the legacy is treated as a contingent asset and disclosed where material.

(e) Interest receivable

Interest on funds held on deposit is included when receivable and the amount can be measured reliably by the charity; this is normally upon notification of the interest paid or payable by the bank.

(f) Expenditure and irrecoverable VAT

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. For grant expenditure this is when the grant letter has been issued to the recipient. Expenditure classified under 'expenditure on

charitable activities' includes the costs of grants paid, long service awards, winter celebrations for NHSBT employees, and associated support costs. Formerly the support costs were apportioned across each fund on the basis of resource time; however with the two restricted funds now holding negligible balances, it has been decided to charge all support costs to the unrestricted fund from 2018/19 onwards. Irrecoverable VAT is charged against the category of resources expended for which it was incurred.

(g) Debtors

Debtors are amounts owed to the charity. They are measured on the basis of their recoverable amount. Prepayments are valued at the amount prepaid.

(h) Cash and cash equivalents

Cash and cash equivalents includes cash and cash on deposit. Cash in bank includes cash in the Lloyds current account. Cash on deposit includes cash in the charity savings account.

(i) Creditors and provisions

Creditors and provisions are recognised where the charity has a present obligation resulting from a past event that will probably result in the transfer of funds to a third party and the amount due to settle the obligation can be measured or estimated reliably. Creditors and provisions are normally recognised at their settlement amount after allowing for any trade discounts due.

(j) Financial instruments

The Trust has held shares in a Barings targeted return fund, which has been invested by Barings' fund managers across a wide portfolio of equity and property investments. Barings have provided quarterly statements of the value of our investment shares within the fund based on the fair value of the portfolio of investments. The Trust also holds shares in National Grid.

Investment gains and losses are taken to the Statement of Financial Activities as they arise. Realised gains and losses on investments are calculated as the difference between sales proceeds and the funds' quarterly opening valuation.

2. Income from donations and legacies

Donations	2019	2018
	Total	Total
	£'000	£'000
Legacies	23	75
Donations	11	18
	<u>34</u>	<u>93</u>

The income from donations and legacies was £34,000 (2017/18 £93,000) of which £34,000 was unrestricted (2017/18 £93,000) and £nil restricted (2017/18 £nil).

The Trust fund received the balance of a legacy from an individual estate of £23,000 on 12th April 2018, which together with the interim distribution of £75,000, brought the total figure from this legacy to £98,000.

3. Analysis of Investment Income

Total Investment Income

	2019	2018
	Total	Total
	£'000	£'000
Baring Investment	7	7
Bank Interest	1	1
	<u>8</u>	<u>8</u>

4. Analysis of expenditure on charitable activities

	Activities undertaken directly £'000	Grant funding activities £'000	Support costs £'000	Total 2019 £'000	Total 2018 £'000
Support for non- commercial research	-	149	3	152	17
Earmarked Funds and Projects	10	-	-	10	-
Staff Long Service Award	20	-	-	20	20
Recognition Events	2	-	-	2	1
Winter Celebrations	32	-	-	32	37
	<u>64</u>	<u>149</u>	<u>3</u>	<u>216</u>	<u>75</u>

Expenditure on charitable activities was £216,000 (2017/18 £75,000), of which £188,000 was unrestricted (2017/18 £55,000) and £28,000 was restricted (2017/18 £20,000).

Support costs consist of governance costs comprising independent examiner's fees of £2,700 for 2018/19 (2017/18 £2,000) and investment management fees. Investment management fees are charged at 0.05% of the portfolio value, and are deducted directly from capital funds. These are estimated to be £108 (2017/18 £132) based on the average fund balance over the ten months prior to sale.

No recharge is made for administration costs supplied by NHSBT and the charity is not able to put a value on these donated services.

The support costs have been allocated to the non-commercial research activity.

Analysis of grant expenditure

The charity does not make grants to individuals. All grants are made to NHSBT or other third party organisations.

	Grant funding activities	
	2019	
	£'000	
4.1 Analysis by activity		
Grants returned -		
Bedside platelet function testing to guide the use of platelet transfusion in neonates		(2)
Study of the significance of T regulatory cells in the outcome of allogeneic HSCT		(7)
Grants given -		
Rare Hematopoietic Stem Cell Donor		10
The psychological Impact of Organ Donation on staff		49
Trust, Altruism, Social Inclusion and BAME Blood Donor Recruitment		50
Laying the groundwork for a future randomised control trial that will compare cost effectiveness of different replacement fluids during Therapeutic Plasma Exchange (TPE)		49
		<hr/> 149 <hr/>
4.2 Analysis by activity		2018
		£'000
Grants returned -		
ATHENA II. A pilot study of fibrinolytic activation in patients with haematological malignancies		(3)
Platelet transfusions in the Absence of Bleeding in Critical care (Platelet ABC study)		(20)
Improving database of outcomes after stem cell transplant recipients and short and long term follow-up of donors from British Blood and Marrow Registry		(10)
Grants given -		
Factors predicting unrelated hematopoietic stem cell donors availability at the verification typing and work-up stages		48
		<hr/> 15 <hr/>
4.3 Analysis by recipient	2019	2018
	Total	Total
	£'000	£'000
NHS Blood and Transplant	52	18
Oxford University Hospitals NHS Trust	-	(3)
University of Nottingham	50	-
Queen Mary's University London	49	-
University of Cambridge	(2)	-
Total	<hr/> 149 <hr/>	<hr/> 15 <hr/>

5. Analysis of Fixed Asset Investments

5.1 Market value at 31 March 2019

	Total 2019 £'000	Total 2018 Restated £'000
Market value at 1 April 2018	216	331
Disposals (at carrying value)	(201)	(115)
Additions	-	-
Net realised gains/ (losses) on revaluation	(6)	-
Investment Fees & Charges	-	-
Rounding Correction	(1)	-
Market value at 31 March 2019	<u>8</u>	<u>216</u>
Historic cost at 31 March 2019	<u>7</u>	<u>195</u>

5.2 Market value at 31 March 2019 Analysis by Fund

	Total 2019 £'000	Total 2018 Restated £'000
Common Investment Fund	-	208
National Grid Shares	8	8
	<u>8</u>	<u>216</u>

The restatement is detailed in note 11.

The charity also owns 100 Santander CDIs, which had a market value of £354 at 31st March 2019. As the costs of disposal would exceed this amount, a nil value has been attributed to them and they have not been individually recognised in the financial statements.

6. Analysis of Debtors

	Total 2019 £'000	Total 2018 £'000
Amounts falling due within one year:		
Accrued Income	-	2
	<u>-</u>	<u>2</u>

7. Cash and Cash Equivalents

	Total 2019 £'000	Total 2018 £'000
Cash on deposit	431	280
Cash at bank and in hand	73	140
	<u>504</u>	<u>420</u>

8. Analysis of Creditors

	Total	Total
8.1 Creditors under one year	2019	2018
	£'000	£'000
Amounts due to NHSBT	192	200
Amounts due to other creditors	119	30
Total creditors falling due within one year	<u>311</u>	<u>230</u>

	Total	Total
8.2 Creditors over one year	2019	2018
	£'000	£'000
Amounts due to NHSBT	22	45
Amounts due to other creditors	18	22
Total creditors falling due after more than one year	<u>40</u>	<u>67</u>

All creditors total £351,272 (2018 £296,523), comprising of creditor accruals (£104,417) and £246,855 of research grant commitments which break down as follows:

1. Red blood cell transfusion thresholds and QOL in MDS: a pilot, feasibility study (£1,098)
2. A placebo-controlled single-blind, randomised feasibility trial of Desmopressin (DDAVP) in critical illness prior to procedures (£19,103)
3. Red cell transfusion in Acute myeloid Leukaemia (REAL trial): A feasibility cross-over randomised controlled trial to test adherence comparing restrictive versus liberal red cell transfusion strategies in adult patients with acute myeloid leukaemia (AML) receiving intensive chemotherapy (£1,943)
4. Factors predicting unrelated hematopoietic stem cell donors availability at the verification typing and work-up stages (£13,236)
5. A feasibility trial comparing restrictive versus liberal red cell transfusion strategies in stable children (£36,800)
6. Mesenchymal stromal cells to reduce ischaemia reperfusion injury following renal transplantation (£25,000)
7. Rare Hematopoietic Stem Cell Donor (£10,000)
8. Psychological Impact of Organ Donation on staff (£49,500)
9. Trust, Altruism, Social Inclusion and BAME Blood Donor Recruitment (£41,170)
10. Laying the groundwork for a future randomised control trial that will compare cost effectiveness of different replacement fluids during Therapeutic Plasma Exchange (TPE) (£49,005)

The following amounts have been returned to the relevant fund in respect of unspent grants :-

1. Bedside platelet function testing to guide the use of platelet transfusion in neonates (£1,782)
2. Study of the significance of T regulatory cells in the outcome of allogeneic HSCT (£7,146)

9. Analysis of funds

9.1 Endowment Funds

The Charity does not hold any endowment funds.

9.2 Restricted Funds	Balance as at 01 April 2018 £'000	Income £'000	Expenditure £'000	Gains/ (Losses) £'000	Transfers £'000	Balance as at 31 March 2019 £'000
Howard Ostin Bequest	18	-	(18)	-	-	-
British Bone Marrow Donor Appeal	10	1	(10)	-	-	1
Total	28	1	(28)	-	-	1

The Charity holds **two** restricted funds.

The Howard Ostin Bequest

The main objective of which is to further such charitable purposes as the trustees think fit, having first considered and having regard to the needs in the area of Birmingham and the surrounding district.

The British Bone Marrow Donor Appeal

The main objective of which is to improve the infrastructure for searching and accessing the Registry by clinicians, registry managers and patients.

9.3 Unrestricted Funds	Balance as at 01 April 2018 Restated £'000	Income £'000	Expenditure £'000	Gains/ (Losses) £'000	Transfers £'000	Balance as at 31 March 2019 £'000
Total	313	41	(188)	(6)	-	160

The General Fund is an unrestricted fund which may be used by the Trustee for charitable purposes, wholly or mainly to support the goals of NHS Blood and Transplant in saving and improving lives. Unrestricted funds also include £19,000 designated funds set aside in the year for Organ Donation, Therapeutic Apheresis Services purposes and Tissues artwork.

The restatement is detailed in note 11.

10. Related Party Transactions

The management of Charitable trust funds is delegated to the Trust Fund Committee which is a sub-committee to the Board of the Corporate Trustee, NHS Blood and Transplant.

The charitable trust has made payments to NHS Blood and Transplant in furtherance of its charitable goals. The members of the Trust Fund Committee (whose names are listed below) also served as members of NHS Blood and Transplant Board during the year.

There were £0 donations received from the NHSBT Board and Committee members.

Mr Roy Griffins CB – left November 2018

Mr Charles St John

Mr Rob Bradburn

Ms Katherine Robinson

Dr Gail Miflin

Dr Gail Miflin is the Medical and Research Director of NHSBT, and research projects which have been funded by the Trust Fund Committee are also within Dr Miflin's area of responsibility.

The Committee members are paid members for the NHSBT Board but receive no additional remuneration or reimbursement of expenses for the work that they undertake on behalf of the Corporate Trustee.

Details of all the charitable trust account related party transactions are below. This includes payments which are considered to have been made under NHSBT's control, even if the actual recipient is a third party.

- Payment to NHS Blood and Transplant and third parties relating to A placebo-controlled single-blind, randomised feasibility trial of Desmopressin (DDAVP), £10,404 (2017/18 £10,159), of which £2,969 is included within creditors in the balance sheet.
- Payment to NHS Blood and Transplant and third parties relating to Study of the Red cell transfusion in Acute Myeloid Leukaemia (REAL trial), £31,872 (2017/18 £8,869), of which £16,750 is included within creditors in the balance sheet.
- Payment to NHS Blood and Transplant relating to Study of the Factors predicting unrelated hematopoietic stem cell donors availability at the verification typing and work-up stages, £32,680 (2017/18 £1,965), of which £16,541 is included within creditors in the balance sheet.
- Payment to NHS Blood and Transplant relating to A feasibility trial comparing restrictive versus liberal red cell transfusion strategies in stable children, £13,099 (2017/18 £nil).
- Payment to NHS Blood and Transplant relating to Mesenchymal stromal cells to reduce ischaemia reperfusion injury following renal transplantation, £25,000 (2017/18 £nil).
- Payment to NHS Blood and Transplant and third parties relating to Red blood cell transfusion thresholds and QOL in MDS, £nil (2017/18 £29,138).
- Payment to NHS Blood and Transplant in respect of staff winter celebrations, £31,599 (2017/18 £37,862), included within creditors in the balance sheet.

The NHSBT Trust Fund also funds the cost of long service awards made to employees of NHSBT. In 2018/19 this amounted to £20,487 (2017/18 £20,147). The other two areas of spend under NHSBT's control were £1,796 (2017/18 £nil) for staff recognition events and £10,264 (2017/18 £815) on earmarked fund projects.

11. Prior Year Adjustment

A prior year adjustment has been made with regard to the value of the National Grid investment at 31 March 2018.

Market value of shares at 31 March 2018	1,085 shares £	994 shares £	Restatement Gain/(Loss) £
	8,704	7,974	(730)
Total	<u>8,704</u>	<u>7,974</u>	<u>(730)</u>

Market value of one National Grid share at 31 March 2018: 802.20 GBp

The misstatement came about due to an 11-for-12 share consolidation that occurred in May 2017, replacing the Trust's 1,085 original shares with 994 new ones. This change was not accounted for when calculating the market value of the shareholding at 31 March 2018, and as a result the value of the Trust's investment portfolio was overstated by £730.

This restatement impacts the movement of funds on page 10, prior year net investment gains/(losses) on the Statement of Financial Activity, prior year fixed asset values on the Balance Sheet (and subsequent carried forward balances), note 5 prior year figures, and note 9.3.

NHS Blood and Transplant

NHS Blood and Transplant (NHSBT) saves and improves lives by providing a safe, reliable and efficient supply of blood and associated services to the NHS in England and North Wales. We are the organ donor organisation for the UK and are responsible for matching and allocating donated organs. We rely on thousands of members of the public who voluntarily donate their blood, organs, tissues and stem cells.

For more information

Visit nhsbt.nhs.uk

Email enquiries@nhsbt.nhs.uk

Call 0300 123 23 23