

ANNUAL REPORT AND ACCOUNTS

2021/22

Financial year ended
30 September 2022



Royal Hospital for
Neuro-disability

Our patron

Her Majesty Queen Elizabeth II (Deceased 8 September 2022)

President

Leonora, Countess of Lichfield

Vice Presidents

Ruth Maxwell
Shirley Palmer
Alan Sanders
The Mayor of Wandsworth (ex Officio)

Administrative details

Royal Hospital for Neuro-disability
Registered charity number – 205907
Royal Hospital for Neuro-disability (Services) Limited
Company registration number – 04570542 (Non Trading)

Principal address and registered office

Royal Hospital for Neuro-disability
West Hill
Putney
London SW15 3SW

Our Trustees and Executives

Board of Trustees

Des Benjamin – Chairman

Previously Group Chief Executive at SimplyHealth for 13 years; and President of the Institute of Customer Service.

Les Broude

Worked at Mars Snackfoods Europe, Barclays Bank, Premier Foods PLC; and became a Non-Executive Director and Audit Committee Chair at Buckinghamshire Healthcare NHS Trust where he remains an honorary lay member of the Charitable Funds Committee. He is a Non-Executive Director of South Central Ambulance Service NHS Foundation Trust.

Mark Cooke

Currently leading a Financial Services Risk Utility start up, in conjunction with the ORX Association. Formerly, Group General Manager and Group Head of Operational Risk at HSBC and non-executive Chairman of ORX Association until 2020.

Dominic Fairclough

A partner in the personal injury and clinical negligence team at Russell-Cooke solicitors, whose expertise includes advocacy in Coroners Courts advising on clinical negligence and personal injury claims.

Christopher Foster

Retired as Bishop of Portsmouth in 2021 after over seven years as a member of the House of Lords. He has a lifelong concern for the wellbeing, support and care of the most vulnerable people in our communities, and for those closest to them. He is an independent non-exec director of NHS Somerset.

Julie Harding – Deputy Chair

An HR professional working locally and internationally with HSBC before specialising in culture and change management at the Co-operative Bank and more recently, the House of Commons.

Deborah Hill

Works as a Finance Director at Unilever PLC with international finance and risk management expertise.

Jane McCormick (from 20 October 2022) – Chair designate

Previously a senior partner at KPMG and a member of the global management team for KPMG International. Chairs the Diocesan Board of Finance for the Diocese of Salisbury and sits on other boards.

Anna Marks (Resigned 20 October 2022)

A senior partner at Deloitte working with publicly listed corporates, Vice Chair of the UK Firm and a member of the Deloitte Global Board. She is also a member of the Board of the CBI.

Dr David Mitchell – Deputy Chair (until 26 January 2022)

Medical Director and the Responsible Officer for the Hospital of St John and St Elizabeth, David was previously Medical Director at Imperial College Healthcare NHS Trust and Consultant in General and Chest Medicine at St Mary's Hospital London.

Hugh Rees (Treasurer)

Previously a non-executive director at Enigma Healthcare based in Singapore and formerly the Chairman and CEO of Wilkinson Healthcare. Following an international career in finance and corporate strategy in the pharmaceutical industry.

Deborah Sanders – Deputy Chair (from 14 April 2022)

Chief Executive at Barnet Hospital and executive director of the Royal Free London NHS Foundation Trust. A registered nurse with 10 years' experience as a chief nurse and director of infection prevention and control.

Chris Streather (from 26 Jan 2022)

Regional Medical Director and CCIO NHSE London, previously Chief Medical Officer Royal Free London NHS Foundation Trust, Trustee Royal Free Charity

Shoab Ali Shah

Extensive knowledge in Racial Equality, Equal Opportunity and Diversity; a champion with 25 years of work experience both at local and national level.

Dr Yen Foung Tai

A consultant neurologist and honorary Clinical Senior Lecturer with a clinical and research interest in the treatment of movement disorders and neurodegenerative diseases.

Executive Directors

Paul Allen
Chief Executive

Ashraff Ali
Interim Medical Director
(From 1 August 2021 to 2 November 2021)

Jane Beaven
Director of Fundraising, Communications and Facilities

Frances Low
Director of Governance

Steven Luttrell
Medical Director
(From 2 November 2021)

Lesley Mill
Director of Service Delivery

Nanda Ratnavel
Director of Finance

Della Warren
Director of Nursing

Our Trustees and Executives

Our Board committees

Audit and Risk Committee

Les Broude – Chairman
Mark Cooke
Julie Harding

Board Medical Committee

Dr David Mitchell – Chair to 26 January 2022
Dr Yen Fung Tai – Chair from 27 January 2022
Dominic Fairclough
Deborah Sanders
Chris Streater

The Executive and senior clinical staff are also members

Chairman's Committee

Des Benjamin – Chairman
Julie Harding
Jane McCormick (from 20 October 2022)
David Mitchell – (to 26 January 2022)
Hugh Rees- Treasurer
Deborah Sanders (from 14 April 2022)

Ethics Committee

Christopher Foster - Chair
Paul Allen – Chief Executive
Des Benjamin
Geoff Coyne – Hospital Chaplain
Dominic Fairclough
Dr Andrew Hanrahan – RHN consultant nominated by the Chief Executive
Laurence Oates (Co-optee)
Deborah Sanders
Shoaib Ali Shah

Other members of Executive are also members and staff, GPs and others also attend

Finance Committee

Hugh Rees – Treasurer and Chairman
Adam Barber (Co-optee, from 3 October 2022)
Rebekah Farjemirokun (Co-optee, from 3 October 2022)
Stephen Ford (Co-optee, to 15 July 2022)
Deborah Hill
Anna Marks (to 20 October 2022)
Christopher Streater (from 20 October 2022)

Nominations and Remuneration Committee

Des Benjamin – Chairman
Julie Harding
Jane McCormick (from 20 October 2022)
David Mitchell (to 26 January 2022)
Hugh Rees
Deborah Sanders

Patient Safety and Quality Committee

Deborah Sanders – Chair (from 27 January 2022)
Julie Harding
Trudi Kemp
David Mitchell – Chairman (to 26 January 2022)
Shoaib Ali Shah
Yen Fung Tai

Our advisors

Auditor

BDO LLP
55 Baker Street London
W1U 7EU

Banker

National Westminster Bank plc 153 Putney High Street
Putney
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SW15 1RX

Insurance Broker

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Merlin House
Brunel Road
Theale
RG7 4BY

Investment Custodian

Schroder & Co Bank AG
Central 2
8021 Zurich
Switzerland

Investment Manager

Cazenove Capital Management
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London
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Solicitors

Capsticks
1 St George's Road
London
SW19 4DR

Fieldfisher
Riverbank House
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Bevan Brittan LLP
Kings Orchard
1 Queen Street
Bristol
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Our Trustees and Executives

CHAIRMAN'S WELCOME	6
CHIEF EXECUTIVE'S INTRODUCTION	8
TRUSTEES' REPORT:	10
FUNDRAISING	11
ACTIVITY AT THE RHN IN 2021/22	12
RESEARCH AND INNOVATION	13
LEISURE AND FAMILY SERVICES	14
MANAGING OUR RISKS	16
FINANCIAL REVIEW	20
STRUCTURE, GOVERNANCE AND MANAGEMENT	24
LOOKING FORWARD	26
TRUSTEES' RESPONSIBILITIES	27
INDEPENDENT AUDITOR'S REPORT	28
STATEMENT OF FINANCIAL ACTIVITIES (SOFA)	30
BALANCE SHEET	31
CASH FLOW STATEMENT	32
NOTES TO THE ACCOUNTS	34-49



Chairman's welcome

For most of the population of the United Kingdom and perhaps many people overseas too, 2022 will become a time stamped year in their memories, as the year in which, very sadly, we were all affected by the passing of Her Majesty, Queen Elizabeth II.

Her Majesty has been our Patron at the RHN since she ascended to the throne in 1953 and for that we would all like to express our unreserved gratitude and respect for the invaluable contribution she made to us.

We made sure to pass on the condolences of everyone involved with the RHN to His Majesty King Charles and wished him and all the Royal Family well.

So to the affairs of the RHN over the last twelve months and I would like to start this year's annual report with some quite uplifting news of the very considerable achievements of the hospital in yet another COVID-19 recovery year.

The first thing to say, with great applause to our staff, is that we have not suffered a single patient or resident death from COVID-19 at the hospital since January 2021, two years now.

On our Jack Emerson ward, which is a high dependency ward where all patients have a ventilator to help them breathe, we have not had a single patient become infected with the virus throughout the entire pandemic.

For a year, we have been open for family visiting and we have been able to hold many events in our grounds and wonderful community rooms. All of this changes the atmosphere of the hospital for the better and has been achieved through the diligence of everyone in our community working together to protect our patients and residents.

Our clinical teams of Doctors, Nurses, Healthcare Assistants, Allied Health Professionals, Pharmacists, Adaptive Technology and Infection Control people have worked tirelessly in concert with our Porters, Facilities, Estates, Catering, Security and Grounds staff to make this happen safely and for that I am most thankful. A truly great achievement.

All of this supported as always by our HR, Finance, Secretariat, IT, Communications, Fundraising, Contracts and Learning and Development teams who give such fundamental support to the operating of the hospital, it simply wouldn't happen without them all.

And as ever our team of Volunteers come in to make so much possible to enhance the lives of our patients and residents that otherwise would not take place, my thanks goes to all of them.

It means that many of our annual celebrations have been reinstated including Founders Day and Festival Week, recruitment drives, lectures and hospital tours, events which encourage many of our sponsors, funders, prospective employees and volunteers to come and experience our world and really get to appreciate the extraordinary work we do.

This year we have exceeded our charity fundraising target, which is an extraordinary achievement by our fundraising team given the difficulties of the last few years. The funding of vital patient and resident treatments and therapies; and important capital developments come out of these funds.

Our bed occupancy is very close to capacity which reflects the phenomenally hard work of our outreach teams in what is still a confused and stressed world of healthcare. This is a better position than we expected to be in at this stage of the pandemic recovery.

Despite inflation gripping the whole country, we have achieved a satisfactory financial result at the hospital operating level through diligent work on income negotiation, cost control and high levels of bed occupancy. While many have contributed to this success, I would like to pass my thanks to the finance team for the clarity with which they both presented the financial challenges and then played their part in tackling them.

Although financial markets are in some difficulty, our strong reserves mean that our investment programme has progressed further this year with the Board agreeing to the refurbishment of Wellesley Ward, a £3 million project that has

Chairman's welcome (continued)

just commenced and will complete during 2023. We have also continued to add ventilator beds to Leonora ward and this has now given us one of the pre-eminent ventilator care facilities in the United Kingdom with 26 operational beds and capacity for more in the years ahead.

This year we have updated our Royal Charter, signed by Royal consent of Her Majesty the Queen on 19 July 2022. Our new documents of Constitution now reflect up to date corporate governance and best practice with a strong historical connection to the intent of our founder Andrew Reed and the universal values of the RHN that travel with us through time. It is difficult to appreciate just what a strong foundation this is for the RHN in the truest sense, unseen but relied upon by everyone, every day.

Our disciplines around patient and resident safeguarding continue to improve, even from last year's high standard. The result of this is we are seeing fewer events that can adversely affect the wellbeing of those we care for and when we do see them, we are quick to resolve them and to learn from our experience.

At our October Board meeting this year our inspector from the Care Quality Commission reflected their view to the Board that the RHN's progress in respect of safeguarding was noteworthy on a national basis and that they had been truly impressed at both how we had implemented improvements and the speed with which we had done it. Everyone involved in this assessment should be rightly proud.

Our continuous programme of improvements to the unseen parts of our infrastructure has been maintained and we have continued to upgrade many aspects of our computer technologies, as well as managing the ongoing programme of improvements to the infrastructure of the RHN's land and buildings.

Together with our ward improvement programme, it means we are keeping pace with our goal of having first class infrastructure to support our first class services for patients. These two go hand in hand and neither is achievable without the other.

Our programme of education continues unabated with more events now happening in person rather than via video conferencing and our staffing recruitment initiatives have successfully recruited from an increasing diverse number of places, helping us greatly in the incredibly competitive environment for good quality staff.

I think it is worth mentioning that although this year has been a great deal steadier than the previous two years, I think it will take time for many staff who have been submerged in COVID-19 to recover their strength and energy as well as their full mental fortitude. I expect us all to fully recover more slowly over the next few years, we must afford people time and consideration in this regard.

So to the road ahead for the RHN in 2023.

What is clear is that the road ahead will be bumpy for a good while yet. External pressures of inflation, national debt, staffing shortages, political uncertainty and a legacy of COVID-19 fatigue will all adversely impact the RHN in the months and years ahead.

I take great comfort in our ability to meet these challenges from our rootedness in the purpose for which the hospital was formed, to look after the most vulnerable in society.

From the calibre and skill of our management teams and dedicated staff who, every year, display their willingness to learn and unfailing desire to care for our patients and residents to the best of their ability.

I would like to give my personal thanks to the RHN's executive team whose courage, balance, resolve and integrity in all of their work, combined with leading by example and fostering such an inclusive approach to the whole community, really do bring such strength to the hospital.

My thanks go as they always do to my fellow trustees for their generous contribution in overseeing the RHN. As volunteers operating in a set of very difficult circumstances, to me, it says much about them as people.

And it is with great pleasure that I am also able to announce that we have successfully recruited my successor as Chair of the RHN, Mrs Jane McCormick will take over from me as Chair in April this year and I am sure Jane will bring great skill and heart to a new period of stewardship of this most important Institution.

So, this year after eight years, I sign myself off into the archives of those who have been fortunate enough to Chair the RHN with some words I have been repeating since very soon after I arrived here.

It has been the great privilege of my life to have served at the RHN and, working with this caring family of people who have such a clear and selfless purpose, the RHN has done more for me than I ever could have done for it. I am most grateful.

My thanks and best wishes to everyone.

Take care,

Des Benjamin
Chairman

25 January 2023

Chief Executive's Introduction



The financial year 2021/22 has been a successful year for the RHN. The hospital has emerged from the main part of the COVID pandemic in good shape and has returned to “business as usual” in many respects, not the least of which has been returning to unrestricted visiting of patients by their relatives and the resumption of face to face meetings, including activities for patients. Lifting of COVID restrictions meant that we were able to hold the RHN festival week and founders’ day in June 2022 for the first time since 2019.

Occupancy within the hospital has improved significantly such that all available capacity is essentially full. The financial performance has improved in tandem: we have exceeded budget for the year at hospital and operating levels, delivering surpluses. Fundraising has had a particularly good year, exceeding budgeted income by some £600k.

I am very pleased to be able to report that we have been able to restart our programme of ward refurbishments, delayed by two years because of COVID. The £3m refurbishment of Wellesley ward commenced in October 2022. Subject to board approval, the refurbishment programme will be completed over the next few years

In November we published a new strategy for the RHN, titled The Path to Excellence. This document sets out a roadmap for the next 5 years with patient experience at its heart. The development of our people is also key and we have specific plans to develop our clinical strategy. Happily, the lifting of COVID restrictions has meant that development of the strategy has included open engagement sessions with all staff.

In November 2022 we saw a significant change to the arrangements for the management of the historic defined benefit pension scheme. The scheme trustees (a mixture of hospital appointed and member appointed), expertly chaired by Eric Stobart, stepped down and handed over trusteeship of the scheme to a sole corporate trustee, Dalriada Ltd. This change ensures that trusteeship of the scheme is sustainable on the long term basis.

There have been no changes to the executive team over the last year and I am very grateful for the excellent work carried out by this talented and experienced team. Our Chair, Des Benjamin, steps down in April 2023 after 8 years in post. Jane McCormick has been recruited to replace him and I look forward to working with Jane in the future. I would like to record special thanks

to Des for the numerous achievements at the RHN under his leadership and the enormous support he has given me. He has been a pleasure to work with and he definitely hands over the RHN in a better place than when he started.

The governance of our hospital has been improved by the revision of our Royal Charter, which was approved by Her Majesty the Queen in July 2022 and adopted at the October 2022 board meeting. We were of course deeply saddened by the death of our Royal Patron, HM Queen Elizabeth II in September and await the appointment of a new Royal Patron by Buckingham Palace.

Looking ahead, although the RHN is in good shape and has an ambitious strategy, it is faced with many of the same pressures affecting other organisations. Inflation of both costs and wages is well documented and the RHN will have to manage the challenge of squeezed commissioning budgets, general cost increases and the impact of wage increases. On the last of these points, the RHN remains committed to paying the London Living Wage.

In conclusion, many thanks to all our staff for another year of hard work with great commitment and passion, all for the benefit of our patients and residents. Thanks also to our growing number of volunteers and to the continued support of our Board of Trustees.

Paul Allen
CEO

25 January 2023



Fundraising events made a comeback in 2022.

Report of the trustees

for the year ending 30 September 2022

The Trustees are pleased to present their annual report, together with the financial statements of the charity for the year ended 30 September 2022.

The financial statements comply with the Charities Act 2011 and the Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019).

Our purpose

The charity's object is to give permanent relief to such persons as are hopelessly disqualified for the duties of life by disease, accident or deformity. The charity aims to enable people with profound or complex disabilities, resulting from damage to the brain or other areas of the nervous system, to enjoy an optimal quality of life through enhanced independence.

Public benefit

The Royal Hospital for Neuro-disability's trustees have considered the Charity Commission's published guidance on public benefits requirements under the Charities Act 2011.

The Charity carries out its objects and activities through:

- contracts with NHS England to provide rehabilitation to adults following catastrophic brain injuries;
- contracts with Integrated Care Boards and others to provide care to adults who, following brain injury, require continuing specialist and complex care; and
- fundraising in order to enhance the care and wellbeing of patients and residents, by improving facilities available to them, developing and providing therapies such as occupational art and music therapies, offering recreational and social events, and providing pastoral care to all – whatever their faith or background.

Our charity

Founded by Andrew Reed in 1854, the Royal Hospital for Neuro-disability (RHN) is one of the oldest independent hospitals and charities in the UK; today we are a charity hospital and research centre.

Our charitable status enables us to raise funds for a variety of specialist services that complement the NHS funded care package received by our patients and residents. These services broadly cover our Brain Injury Service and Continuing Care Service, both aimed at improving the quality of life for our patients and residents living with severe neurological disabilities.

As a medical charity with a holistic approach to treatment, we take great pride in delivering excellent work in the areas of assessment, rehabilitation and specialist care to some of the most disabled adults in the UK, as well as support to their families.

Fundraising

As a charity, the RHN raises vital funds for our patients and residents from a variety of generous supporters and organisations.

With the influence of Fundraising and the generosity of supporters, the RHN is better placed to provide additional therapies and recreational services that help to boost the quality of life for patients and residents at the hospital, as well as provide support for families.

Some of the additional services we are able to fund include



Leisure and Families Service
(including disability sports)



Computer therapy and specialist communication aids

Nurse escorts and transport for patient trips



Onsite multi-faith chapel services



Specially adapted wheelchairs



Occupational art therapy



Music therapy

With the lifting of all national restrictions brought on by the impact of the global COVID-19 pandemic, Fundraising was able to deliver on the following objectives:

- Increase income significantly to support activities and services across the RHN.
- Introduce new income generation tools that support growth and attract new supporters.
- Raise awareness of the RHN's work locally, regionally and nationally through external Direct Marketing communications.

As we emerge from the challenges caused by COVID-19, Fundraising is open to adopting alternative ways of raising funds which has led to our Events team taking a more tailored approach to some of its work and fully utilising the beautiful grounds of the hospital.

One of the key contributors to delivering our objectives, is our supporter centric approach to fundraising, a service that serves and supports all fundraising disciplines and helps us to deliver an effective supporter engagement and stewardship programme in order to retain their support and increase their financial contributions.

As a charity we are still committed in delivering best practice in all our Fundraising activities; as such we remain registered with the Fundraising Regulator and continue to adhere to its code of practice for charitable fundraising in the UK.

Furthermore, with our compliance to the Data Protection Act of 2018 and our online privacy notice (www.rhn.org.uk/help/privacy), we are able to lawfully support our need to gather, process and store personal data in a way that assures the public, our supporters and those in our care of our respectful, accountable, open and transparent approach to fundraising.

Activity at the RHN in 2021/22

Statistics	2022	2021
Admission to the hospital	168	203
Bed Capacity		
Brain Injury Service (exc. DToC)	42	42
Delayed Transfer of care (DToC)	6	6
Continuing Care	188	187
Aggregate bed capacity	236	235
Annual Bed Occupancies		
Brain Injury Service (exc. DTOC)	39	40
Delayed Transfer of Care	3	1
Continuing Care	174	164
Aggregate bed occupancy	216	205
Patients treated within the BIS	143	143
Percentage occupancy rate BIS inc. DTOC	88%	85%
Percentage occupancy rate BIS excl. DTOC	93%	95%
Percentage occupancy rate CC	93%	88%

The RHN had 168 admissions in 2022 (2021: 203). The hospital splits its services into two main categories; The Brain Injury Service and Continuing Care.

The aggregate bed capacity for the RHN in 2022 was 236 (2021: 235) of which Brain Injury Service was 48 (2021: 48) and Continuing Care 188 (2021: 187). The aggregated bed occupancy for the RHN was 216 (2021: 205).

Brain Injury Services

The Brain Injury Unit has 6 beds available for use outside of the NHSE contract. They can accommodate any delayed transfers of care and spot purchase rehabilitation packages for both the NHS and private patients with rehabilitation requirements.

Excluding Delayed Transfers of Care, the average length of stay in the Brain Injury Service was 17.5 weeks (2021: 17.2 weeks) and percentage occupancy was 93% (2021: 95%).

In terms of responsiveness we continue to aim to process referrals within the 14 day target. The complexity of our patients is recorded on admission and our scores show that we continue to take patients who are more severely impaired when compared with many other units.

Continuing Care

There were 26 discharges from Continuing Care (2021: 23). The data for discharges only includes home discharges and discharges to other services. It excludes deaths and discharges to acute hospitals.

There were 134 unplanned temporary admissions made to acute services (2021: 77) and Continuing Care had a percentage occupancy rate of 93% (2021: 88%).

Research and innovation

Research

After the disruption of the COVID-19 pandemic, our research projects have started again with two new dental projects, two collaborative studies with the dietetics department, one COVID review and two projects on long term ventilation on top of the three existing PhD projects.

Our PhDs were invited to present their work at international events as follows:

- Amy Pundole gave a presentation on Assessing Language in Severely Brain Injured Patients to the IBIA (International Brain Injury Association) Inaugural Conference on Disorders of Consciousness that took place virtually on December 2021.
- Alexandra Rose presented at the ASSBI (Australasian Society for the Study of Brain Impairment) 2022 Conference on "Assessment of low mood, distress and depression in people with severe brain injury: a systematic review."

Education

We organised 23 courses and 9 open lectures. We have successfully migrated our courses online and when restrictions were lifted were able to organise face to face training again.

The open lectures are recorded and made available on the RHN Youtube channel thus made available to a broad range of people. Our recorded webinars have been viewed by around 2,000 people and is a great way to reach a wider audience. Our online courses are also very popular and attract a national and international audience.



Heritage

We have completed the National Lottery Heritage Fund project by organising an online and onsite exhibition in the RHN gardens. The exhibition was complemented by open days and tours that were very popular. The feedback from the Fund was "It is impressive to see the contribution to disability history, high standards of archiving, promotion of heritage skills and the level of engagement with the archives, which can be a difficult process to do. It is also good to see the organisational impact and project legacy."

Publications during this period

Yelden, K., James, L.M., Duport, S., Kempny, A., Farmer, S.F., Leff, A.P. and Playford, E.D., 2022. A simple intervention for disorders of consciousness - is there a light at the end of the tunnel? *Frontiers in neurology*, 13.

da Conceição Teixeira, L., Blacker, D., Campos, C., Garrett, C., Duport, S. and Rocha, N.B., 2021. Repeated Clinical Assessment Using Sensory Modality Assessment and Rehabilitation Technique for Diagnosis in Prolonged Disorders of Consciousness. *Frontiers in human neuroscience*, p.729.

Gill - Thwaites, H.L., Elliott, K.E. and Morrissey, A.M., 2021. LOCCATE: A tool to identify the diagnostic spectrum profile of motor function and functional communication responses for the individual with a prolonged disorder of consciousness. *Neuropsychological Rehabilitation*, pp.1-21.

Gallagher, L., 2021. Dental nursing in a neuro-disability hospital. *BDJ Team*, 8(10), pp.26-27.

Leisure and family services LaFS



We are continuing to reimagine LaFS as a Therapeutic Leisure Service with a focus on offering ward based activity groups based on the needs and interests of residents.

The groups and one to one sessions continue to be based within the Specialist Nursing Home wards and led by the LaFS coordinators and volunteers. Over the past year the number of volunteers within the organisation has continued to grow and we aim to expand the service in the coming months.

During the repeat COVID-19 outbreak between December 2021 and February 2022 the LaFS team and volunteers, once again, helped with "Red Running" within the RHN. Red Runners helped with receiving, moving and delivering essential supplies and equipment during this period. Visiting remained open across all wards with stringent infection control compliance during this period.

Since family visiting started after the initial COVID-19 outbreak in July 2020, LaFS and volunteers have supported family visiting, initially just doing lateral flow testing for visitors and then moving to registering all visitors, checking LFT results and issuing visitors with masks. Support for family visiting continued up until the end of January 2022 when the automated visitor checking in system was installed. There are several visiting check in points across the site and these have worked smoothly since installation.

With help from the Fundraising department, the CoDA Dance Group had previously secured a three year lottery grant. We are now into the second year of the grant. Year 2 has allowed an increase from three to four sessions per week to be run. There are currently two sessions per week on our Continuing Care wards, one in Goodman house and one in the Brain Injury Unit. In addition to the CoDA Dance Group, staff, ward staff and volunteers facilitate all sessions

which are greatly enjoyed by residents and staff. Year 3 will see an increase to six sessions per week.

Church services continue to be adapted to how they run on a Sunday. Since March 2021, the Chaplain, LaFS staff and volunteers have been running eight separate ward based Sunday services. Since March 2022 when COVID restrictions were further relaxed, Sunday services were able to recommence in the Assembly room but with reduced maximum capacity. The Chaplain, LaFS staff and volunteers have been able to facilitate a service for up to fifty residents in the Assembly room every Sunday morning, separate services continue to be held on a Sunday afternoon in Chatsworth, Haberdashers, JEC, Devonshire and Drapers Wards.

The Thursday informal service and quiz is now held in the Chatsworth Day Room with a few residents from other wards joining in. The holy communion service on Fridays, for a small number of residents, continues to take place in the chapel. Wednesday afternoons see group Bible Study for a small number of residents.

The parish priest from St Thomas A Becket, Wandsworth has recommenced a monthly Mass on the premises on the first Wednesday of each month. This restarted in May 2022.

An Imam visits twice a week to conduct "one to ones" with Muslim residents and patients.

The Chaplain continues to offer spiritual and pastoral care both on and off the wards (including individual holy communion for those residents and patients not able to get to a service), one to one readings and prayers; and one to one spiritual counsel.

Saturday concerts resumed after August 2021 but with reduced capacity. Due to this, with support from Fundraising, we were successful with an application for a COVID funding grant from Wandsworth council. With the

Leisure and family services LaFS (continued)

grant, we have been able to offer a Wednesday afternoon concert for patients and residents to attend. To help support the running of the concerts we have partnered with a volunteer programme for year 12 students from the local Ark Academy. As the Wednesday afternoon sessions have been so well received we aim to continue running them in 2023.

Massage and Beauty Therapy services continue to run. Four external massage therapists registered to work with the RHN visit on different days in the week and continue to accept new referrals via the LaFS team.

Hairdressing services resumed in March 2022. The hairdresser is available one day a week and has been running at full capacity. We will consider an additional day per week if demand increases.

After the refurbishment of the Assembly Room, the audio/visual equipment was removed and quotes were obtained for new equipment with the Fundraising team securing a donor to fund the purchase and installation of the new equipment in June 2022. The curtains in the room were replaced by blinds in July 2022 and alternative light and sound filters within the doors were installed.

In conjunction with the Brain Injury Group we were able to reinstate our on site free Legal and Welfare Advice clinics. These clinics run every six weeks and are open to patients, residents and family members to discuss any legal query relating to brain injury. We hope to continue to run these clinics throughout 2023. In addition, with the social work department we have been liaising with the DWP and hope to set up a separate Benefits Advice Clinic as there has been a growing need for support in this area.

Community outings have recommenced in a new way. To ensure an individual approach to the planning of outing activities and trips, they are now arranged and booked by Ward Administrators. LaFS continues to support the ward administrators with these bookings and have created a directory of wheelchair accessible venues that have been enjoyed and successfully visited by residents in the past; we will continue to expand the directory.

The hydrotherapy pool remains closed, significant repairs and refurbishment is required in order for it to reopen. We are currently putting together a proposal for the required work; as the work is likely to be significant, there is no clear timeline for when this will happen.

Volunteers

Number of active volunteers as of 1 October 2021	39
Total number of volunteers active in the year to 30 September 2022	122 (2021: 51)
Total number of new volunteers recruited in the period 1 October 2021 – 30 September 2022	79 (2021: 21) (4 withdrew before starting)
Total number of volunteers on 30 September 2022	87 (54 Regular, 33 ad hoc)

Donated services received from volunteers are not included in our Statement of Financial Activities as the charity does not pay to obtain these services in the course of carrying out core activities. There is no economic benefit that requires the value of this gift to be recognised.

Managing our risks

In order to minimise or eliminate risks to the charity during the 2020/21 financial year, potential risks are and continue to be identified and regularly reviewed by both the Executive team and Trustees.

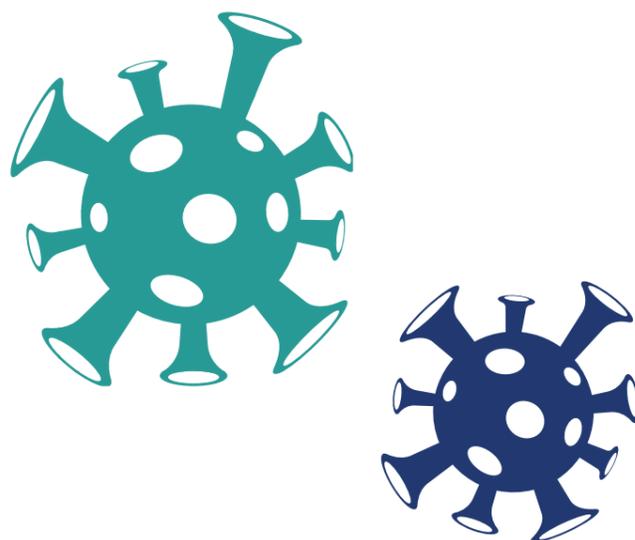
In 2021/22 the RHN identified its principal risks as: patient safety and wellbeing, COVID, and financial risks. The principle safeguarding risk is now well controlled. The RHN's response to the COVID pandemic has demonstrated the robustness of its infection control measures, but vigilance continues to be crucial. The RHN's finances were impacted by events in particular the challenges of the pandemic, but have proved resilient, and robust plans are in place to ensure continued stability and growth. Board committees keep these risks under review, and the Audit and Risk Committee reviews all significant risks quarterly before consideration by the Board.

The Coronavirus and COVID-19

The hospital is now operating in line with the "Living with COVID-19" government plan. This means that COVID-19 cases are closely monitored and escalated in line with best clinical practise guidelines. A rolling programme for patient vaccinations is in place.

We continue to have a routine screening programme in place for patient facing staff and all staff are strongly encouraged to continue to be up to date with their vaccines.

Our business continuity planning has enabled us to return to delivering the full range of services for our patients and residents and our occupancy levels have improved significantly over the last year. We are well prepared for any future iterations of COVID-19 and as such the risks around this are considered to be well mitigated.



Managing our risks (continued)

Quality of care

We are a regulated healthcare provider with The Care Quality Commission (CQC) and The Charity Commission. Following our unplanned CQC Quality Inspection in 2021, which focussed on the Safe and Well Led Key Lines of Enquiry, we have been rated Good in all domains with an overall rating of Good by the CQC.

The RHN has robust controls in place to ensure that it implements high standards of quality and safety, including quality of care. These include the following:

- Robust clinical leadership at board level, executive management and across the hospital.
- A named Board level trustee for quality and safety.
- A Patient Safety and Quality Committee.
- A named executive director for quality and safety.
- A dedicated team to drive quality and safety across the hospital, led by the Head of Patient Safety and Quality Assurance.
- A robust governance structure.
- Policies and procedures which are reviewed and updated.
- Robust processes for disseminating national alerts and guidance.
- A clinical audit schedule.
- Robust management of the Datix recording and management system.
- Review of clinical risks and trends by the Clinical Risk and Incident Committee.
- Review of patient deaths by the Mortality Review Committee (now the Palliative Care and Mortality Committee).
- Excellent safeguarding leadership, structures and processes with robust analysis of decision making and management led by the Head of Safeguarding.
- Membership of the Safeguarding Adult National Network (SANN).
- High levels of mandatory training compliance, exceeding 90%.
- A competence framework to underpin nursing and Health Care Assistants' practice.
- A robust student supervision framework, including mentorship and preceptorship.
- Linkages with the South West London (SWL) Integrated Care System, including membership of the SWL Quality Council.

Rated 'good' in all areas for the first time!



We have an ambitious Patient and Resident Experience Strategy, which underpins the RHN Strategy 2022 to 2027, A Path to Excellence. We also encourage feedback and involvement from patients, residents and their families through multiple formats including through the Annual Patient Survey and through participation in a number of forums and through our comprehensive complaints and compliments process. We have a Patient Representative Committee (chaired by a Trustee, which includes representatives from patients, residents and families from all wards) which is a forum to receive feedback on experiences hospital wide and to share information.

We are a regulated healthcare provider with The Care Quality Commission (CQC) and The Charity Commission. Following our unplanned CQC Quality Inspection in 2021, which focussed on the Safe and Well Led Key Lines of Enquiry, we have been rated Good in all domains with an overall rating of Good by the CQC.

Our clinical risk registers (Clinical and Medicines) are updated monthly by the named clinical directors responsible for each of the risks on the registers and clinical risks are incorporated into the organisational risk register (ORR) if they meet the threshold. The Executive Management Team (EMT) also reviews the risk registers monthly. A new risk management system is in the process of introduction to strengthen our management. The Patient Safety and Quality Committee (a board Committee) has oversight of clinical risks

As well as our overall quality rating of Good with our regulator, CQC, our Director of Nursing and Head of Safeguarding are recipients of NHS Safeguarding Medals, awarded by SANN for our excellence in safeguarding practice.

We are embarking on Pathway To Excellence™ with the American Nurse Credentialing Center (ANCC), which provides us with a framework for nursing excellence through the development of positive practice environments for all of our clinicians and where nursing can excel. We aim to achieve this accreditation by 2023/24, which is led through our Director of Nursing and the senior nurse leadership and clinical skills teams across the RHN.



Recruitment and retention of staff

During the financial year, we continued seeing the benefits of the overseas nurse recruitment campaigns from 2019 and various online campaigns conducted remotely. Whilst the impact of COVID-19 could still be felt during the year, the lifting of restrictions allowed fifteen further overseas to join during 2021/22 which is a slight increase on the previous year. Another two overseas nurses arrived in December 2022.

We have also begun extending visas for those nurses that came in 2019 for a further 3 years, which is real evidence of return on investment. So far, twelve visas have been extended in this way.

As well as the above, during 2021/22, seven permanent RNs, six bank RNs, 40 permanent HCAs and 21 bank HCAs were recruited. The RHN is now far less dependent on agency nurses and HCAs than previously, greatly helped by the success of the Putney bank (the RHN's internal agency).

It is anticipated that more overseas nurses will be recruited from the Philippines after a campaign in August 2022 resulted in fifty - six offers of employment.

Staff engagement

The RHN held a staff engagement roadshow led by the staff engagement lead during the year. The roadshow was for all staff and ran during the day as well as a night session to ensure night staff had the opportunity to attend. The roadshow's aim was to increase employee understanding and awareness of the various ways the RHN seeks to engage and support its employees. There were the following stalls:

- Wellbeing – 'Here for you' (signposting from our intranet).
- CIC – Employee Assistance Programme.
- Pride at RHN (The LGBTQI+ Staff Network).
- BAME staff network.
- Speak Up.
- Staff mediation service.
- Medigold (occupational health wellness and health checks).

We also had the following activities available for staff:

- Massage.
- Yoga.
- Singing therapy.
- Reflexology.

We received very positive feedback about the roadshow and plan to have targeted and focused quarterly roadshows in the future.

In response to the feedback our staff surveys in the last two years, videos have now been planned for workshop delivery. They will be used across the RHN in training and discussion groups to help us consider how we address the issues presented. The videos were shot using actors portraying RHN staff members. The focus is on bullying, harassment and equal opportunities.

We are planning a CIC employee assistance awareness campaign to launch the CIC employee assistance programme mobile app and to provide workshops to people managers to support signposting and awareness to their staff of this valuable service. We will also be running workshops for staff to get an update on the many resources and support that are available via this service. The EAP service advised us that, since the roadshow, there had been an increase in usage across the services they provide. We held an additional wellness/health check day in July for staff who had not been successful in reserving a place at the roadshow. This was provided by Medigold (occupational health) for which we have a waiting list. This was a very popular initiative and staff have commented positively about it.

Pride at RHN (The LGBTQI+ Staff Network) continues to meet monthly and is working on various initiatives such as LGBTQI+ awareness training and LGBTQI+ history months. We have also received feedback about other networks that staff would like at the RHN and are planning focus groups to gauge support for further rollout throughout the hospital.

Learning and development

The Learning Management System (LMS) is being updated to make it easier to navigate and to provide at a glance reporting with clear dashboards for those with directly managed staff. We are also looking at the system hierarchies to ensure required learning is easier to manage and staff groups in clinical, corporate, allied health professional, estates and facilities areas can easily be identified along with departmental compliance levels.

Our annual performance reviews are to be moved online, either through an addition to our LMS system or as part of the new HR system being developed. There will be an automatic course reminder function for courses where completion is mandatory.

The RHN Academy (Learning and Development's vocational learning centre) has partnered with Kingston University and the University of Roehampton to introduce a trainee nurse associate programme to the hospital. Supported by the Director of Nursing and Matron for Long Term Care, healthcare assistants are being provided with an opportunity which will see them embark on an apprenticeship that results in them becoming nurse associates.

The RHN Academy continues to receive applications for Adult Care Levels 2 and 3, and also functional skills in English and mathematics; and as part of the new initiative for developing skills in relation to the delivery of Safer People Handling, staff will be offered the opportunity to complete the Level 3 Award in Education and Training (AET).

Financial sustainability

In order to improve and provide the highest quality of care to patients and residents, the RHN recognises the need to maintain financial stability and to continue to attract donations, legacies and other fundraised income in order to invest in its facilities and equipment.

The RHN recorded a financial surplus for the financial year ending 30 September 2022 with year end reserves at satisfactory levels. Our budget for the financial year ending 30 September 2023 anticipates a return to pre COVID-19 occupancy levels with a surplus in income and expenditure and continued satisfactory reserve levels. Further to the budget for the forthcoming financial year, the five year financial plan to the year ending 30 September 2027 approved by trustees sees improving surpluses and cash balances as the RHN gradually alters its mix of existing services and continues to invest in its infrastructure to improve services to patients and residents.

The RHN's primary sources of funding are NHS England, NHS Integrated Care Boards and Local Authorities. Though NHS bodies receive annual increases with which to pay the RHN for its services, these are not sufficient to meet all the RHN's cost pressures. In order to mitigate such funding shortfalls, the RHN continues to work in partnership with commissioners to negotiate adequate contractual agreements whilst increasing efficiency. It is expected that the block contract for rehabilitation services with NHS England will be broken up with responsibility passed to either a lead or multiple Integrated Care Boards.

The drive to maintain financial sustainability includes investment in technology, equipment and the estate with which to provide the highest standards of care and generate income. During 2021/22 important work on water infrastructure, lifts, staff accommodation, HR and payroll systems; and detailed planning for the refurbishment of Wellesley ward in 2022/23 has been carried out.

The RHN has sufficient reserves for the foreseeable future, and has a five year financial plan supporting its corporate strategy. Further disclosures are available within the financial review and note 1.2 of our accounting policies.

The RHN's Committee with oversight of finances is the Finance Committee. In the year the Committee has updated the RHN's Investment Policy. It received a presentation from the investment managers of sustainable (ie socially responsible) investing, following which it held a joint meeting with the Ethics Committee so that they could jointly understand the issues and advise the Board on a way forward.

Financial review

The RHN reported an overall net surplus in funds for the year of **£0.18 million (2021: £0.96 million)** comprising the following:

	2022 £m	2021 £m
Hospital		
Patient Income	45.84	41.00
Patient Expenditure	(45.32)	(42.85)
Surplus/(Deficit) from Hospital Activities	0.52	(1.85)
Voluntary and Other Activities		
Income		
Donations and Other Fundraising	2.89	1.88
Other Income	0.42	0.29
Income from Voluntary and Other Activities	3.32	2.17
Expenditure		
Fundraising Expenditure	(0.89)	(0.78)
Voluntary and Other Expenditure	(1.02)	(1.06)
Expenditure of Voluntary and Other Activities	(1.91)	(1.84)
Surplus from Voluntary and Other Activities	1.40	0.33
Hospital and Charitable activities	1.92	(1.53)
Net Income on Pension Scheme	-	-
Net Gains / (Losses) on Investments and Fixed Assets	(1.74)	2.48
Net Surplus / (Deficit)	0.18	0.96

The RHN receives the majority of its income for patient care from NHS England (for Brain Injury Services) and from Clinical Commissioning Groups and some Local Authorities (for Continuing Care). COVID 19 has compromised occupancy levels and adversely affected income for patient care. The Charity has also seen an increase in donations and legacies of 51% (2021: 1% decrease)

Income from donations, legacies and fundraising events is £3.2 million (2021: £1.9 million) analysed as follows.

Donations, legacies and fundraising received for charitable expenditure during the year ended 30 September 2022

	30 September 2022		30 September 2021	
	£'000	£'000	£'000	£'000
Unrestricted		2,233		1,261
Restricted				
(1) Additional therapies and services	188		167	
(2) Purchase of specialist equipment	357		132	
(3) Research and education	253		67	
(4) Specific redevelopment and refurbishment of hospital buildings	204		221	
(5) COVID crisis response	-		33	
		1,002		620
		3,235		1,881

The RHN's fundraising activities are overseen by the Fundraising Regulator (FR) whose responsibilities include ensuring the charity records all complaints, completes an Annual Complaints Returns Report and displays the FR logo. These convey our commitment to complying with legislation as well as building trust with supporters of the charity.

Financial review (continued)

Expenditure on charitable activities (i.e. hospital activities)

The campaigns by the RHN to recruit nurses from overseas in recent years has resulted in more of them commencing employment during 2021/22. A recent recruitment drive in the Philippines in the autumn of 2022 will see more arrive in 2023. Allied to the successful operation of our own bank of nurses, reliance on agency staffing continues to be successfully managed.

The RHN continues to demonstrate its commitment to its staff through paying competitively, ensuring nobody is paid below the London Living Wage; and by providing staff development opportunities.

Investments	30 September 2022 £ million	30 September 2021 £ million
Net (losses)/gains during the year	(1.74)	2.48

The RHN invests funds surplus to working capital requirements in a portfolio managed by Cazenove Capital Management, Schroder & Co Ltd.'s charity division. They place investments based on asset allocation ranges previously agreed by the RHN's Finance Committee, who review the Charity's investments during the course of the financial year. Investment income during the year was £0.42 million (2021: £0.29 million). The overall performance reflects the general economic climate and is much in line with the performance of stock and other investment markets.

Staff pension scheme	30 September 2022 £ million	30 September 2021 £ million
Net actuarial gains on the defined benefit scheme	-	-

The results above pertain to the RHN's defined benefit pension scheme which was closed to new members in 2001 and existing members in 2006.

As at 30 September 2022, the defined benefit pension scheme was in surplus but as it is not recoverable, was restricted to zero in the disclosures (30 September 2021: zero). The surplus of £8.6 million (2021: £8.7m surplus) in the scheme is not available as a refund to the RHN and is therefore deemed to be irrecoverable under FRS102.

The RHN continues to run a defined contribution scheme for its employees which was transferred to an Aviva Master Trust in October 2019.

Reserves

Reserves are held to help the charity operate effectively in accordance with the Charity Commission's guidance. The Board has carried out a detailed review of the charity's activities, identified the major risks the RHN is exposed to and produced a financial risk assessment.

Free reserves are intended to cover the following:

- Adverse movements in cash flow.
- A shortfall in income net of fees payable.
- A shortfall in voluntary income.
- Falls in the realisable value of investments.
- A contingency against business interruption.

After carrying out a review of the risk areas stated above, the RHN Board of Trustees has determined a range of £12 million to £14 million (2021: range of £11 million to £13 million) of free reserves as being a minimum operating level for three months.

At 30 September 2022, the reserves were as follows:

- Free reserves of £13.6 million (2021 - £14.6 million) after accounting for the defined benefit pension scheme as per FRS102 are greater than the minimum operating level required for three months.
- Designated funds of £29.3 million (2021: £28.0 million) representing the net book value of the RHN's fixed assets of £19.5 million (2021: £19.7 million) together with £1.1 million (2021: £2.1 million) for planned maintenance and £8.8 million (2021: £6.3 million) for future capital expenditure on the hospital buildings and equipment.
- Combined restricted reserves of £1.67 million (2021: £1.78 million) include £1.01 million (2021: £1.07 million) in cash required to fund specific projects.
- Endowment funds of £0.77 million (2021: £0.86 million).

The sum of the above gave total reserves of £45.4million (2021: £45.2million).

Further details of these reserves are disclosed within the statement of financial activities and balance sheet on pages 30 and 31; and in note 17.

Going concern

The RHN is a public benefit entity, and its Board has set out a review of financial performance and the charity's reserves position. At the 30 September 2022, the RHN reported free reserves of £13.6 million (2021: £14.6 million), net current assets of £8.1 million (2021: £6.0 million), and a net cash inflow of £2.0 million (2021: £1.3 million net cash outflow) for the year. The change in cash flow between the two years was largely because of improved patient and fundraised income as the hospital emerged from the COVID-19 pandemic which had adversely affected both streams.

As at 30 September 2022, the defined benefit pension scheme was in surplus but as it is not recoverable, was restricted to zero in the disclosures (30 September 2021: zero). The surplus in the scheme is not available as a refund to RHN and is therefore deemed to be irrecoverable under FRS102. The RHN's strategy of funding any residual obligation in order to eliminate any future deficit remains.

With regard to the year ending 30 September 2023, the most significant areas that are likely to affect the charity's net assets are levels of patient and fundraised income, operating revenue expenditure and capital investment. Occupancy levels will have returned to pre pandemic levels.

In setting the budget for 2022/23, the trustees have deferred some costs but less so than the prior year. In the event of another wave of COVID-19, continued and further social distancing measures and rigorous hygiene procedures will be followed once again.

The RHN's budget for 2022/23 and financial plan for 2023/24 were incorporated in its five year financial plan 2022/27 presented to the Board in October 2022 in support of the organisational strategy over the same period. Prudent uplifts for patient income and an increase in the provision of ventilated services are included.

In order to explore the sustainability of the RHN, a financial stress test exercise was conducted with the above assumptions altered to model more adverse conditions in 2022/23 and 2023/24. With these changed assumptions, a consequent adverse impact was seen on income and expenditure, cash balances and reserves in those two years.

In terms of cash, in order that the RHN retained desired cash balances at the end of the two financial years in question, without curtailing spend, it would be necessary to transfer from investments to the current bank account. It is anticipated that investments would be fully replenished towards the end of the five year financial plan.

Reserves would be sufficient throughout the course of the plan.

On its operational activities, the trustees believe that the current strategy for growth including some shift in the balance of services provided; and the associated rolling five year financial plan has reasonably secured the future of the RHN to sufficiently meet the requirements of a going concern.

The hospital holds investments valued at £17.9 million (2021: £19.6 million) inclusive of cash available of £0.3 million (2021: £0.8 million). Though unrealised losses amounted to £1.7 million in 2021/22 (2021: £2.4 million gain), judicious management of funds aims to minimise adverse market fluctuations.

Like other healthcare providers the RHN faces inflationary pressures, the hospital continues to monitor developments and take appropriate action. The trustees will continue to monitor plans with the RHN executive team to ensure that the RHN retains sufficient reserves to continue operating. The charity has a strong balance sheet, with unrestricted liquid reserves of around £24 million and so the trustees are of the opinion that the charity will have sufficient resources to meet its liabilities as they fall due.

The trustees are satisfied that the RHN can continue operating for the foreseeable future and accounts have been prepared on the basis that the RHN is a going concern.

Neither the Trustees, nor any key persons within the charity, are aware of any further specific, nor general events which would change the charity's status as a going concern.



Structure, governance and management



The RHN's governing constitution is a Royal Charter and byelaws. Amendments to the Royal Charter and revised byelaws were approved by the Board of Management in January 2022 and by the AGM in April 2022. On 19 July 2022 Her Late Majesty the Queen allowed the amendments to the Charter and the Privy Council approved the revised Byelaws. The Board brought both these documents into force at its meeting on 20 October 2022, thus completing the project to update the RHN's constitutional document which began in January 2019.

The arrangements under the version of the Charter current in 2021/2022 were as follows. Members of the Board of Management acted as trustees of the charity. They were elected by the Governors at their Annual General Meeting (AGM) to act on behalf of the charity in the management of its business, property and affairs.

The Board is a non-executive body that has four meetings each year and sets the strategic direction of the RHN.

The Board aims to follow the Governance Code for Larger Charities recommended by the Charity Commission. It carries out an annual review of its governance processes. Board members and senior executives are required to complete a declaration of interests and review this at least twice a year, and to declare any gifts and hospitality received. All staff, volunteers and Board members are required to have regular DBS checks every three years. Board members, the Chief Executive and the Director of Finance sign annual declarations of fitness to hold office.

From 20 October 2022, the Board of Management was abolished and replaced by the Board of Governors, with the same functions as the previous Board of Management. The existing members of the Board of Management became members of the Board of Governors and the arrangements above continue to apply to the executive and the new Board.

Structure, governance and management (continued)

The Board of Trustees

In 2021/22 the constitution required that the Board must be made up of a minimum of twelve members, who hold office for four years. They may not hold office for longer than two consecutive terms of four years unless the Board decides there are exceptional circumstances. Members of the Board are appointed and retire by rotation, usually at the Annual General Meeting. The Nominations and Remuneration Committee regularly reviews the skills requirements of the Board. A formal recruitment process has been adopted where particular skills are being sought, which includes open advertisement and interview to ensure the appropriate skills and experience are identified and to extend the Board's ability to recruit a diverse Board. An induction programme and continuing trustee training is also in place.

From 20 October 2022 the revised byelaws set the number of Board members as a minimum of 8 and a maximum of 15.

Responsibilities of the Executive and Committees

The Board delegates certain functions to the Executive and Committees. The day to day running of the RHN is the responsibility of the Chief Executive. The Chief Executive carries out operations according to the strategy and the budget set by the Board and is assisted by the executive team which meets every week.

Remuneration

Trustees (Board members) are not remunerated but may claim reasonable expenses.

As an employer, the charity operates the 'Putney Scale', a harmonised pay method which helps the RHN remain competitive within the healthcare industry. This is available to all nursing and therapy staff and is in line with the NHS Agenda for Change classifications and is periodically reviewed. The components parts are basic pay and a market supplement reflecting the higher cost of inner London living.

The Board's Nominations and Remuneration Committee (comprising Board Members) is responsible for deciding the remuneration of the key management personnel constituting the executive directors. Chaired by the Chairman of the Board, the committee considers directors' salaries and benefits. The Chief Executive's pay is determined by the committee and the Chief Executive provides advice to the Committee on the other directors' remuneration. The remuneration of the Executive team is disclosed in full in notes to the accounts.

Managing our risks

In order to minimise or eliminate risks to the charity during the 2021/22 financial year, potential risks are and continue to be identified and regularly reviewed by both the Executive team and Trustees.

During the year Covid was removed from the top risks to the RHN. The RHN has robust infection control measures, and vigilance continues to be crucial. The principle safeguarding risk is now well controlled and the RHN's safeguarding processes have been recognised as exemplary by stakeholders. The RHN's finances were adversely impacted by the events of the past two years but have proved resilient. The RHN recovered well from the financial effects of the pandemic and the effects of Brexit were well managed. The effects of the Ukraine conflict and the general world economic situation are now posing a different risk, in particular to the ability of staff to live and work in London and the increased pressure on the RHN's costs. However, robust plans are in place to ensure continued stability and growth, including a successful overseas recruitment campaign for nurses, reconsideration of our pay and reward structure for staff; and analysis of energy costs to preemptively obtain as favourable contracts as possible for the future. Board committees keep these risks under review, and the Audit and Risk Committee reviews all significant risks quarterly before consideration by the Board.

Looking forward

The RHN's launched its 2022 to 2027 strategy entitled 'The Path to Excellence' in November 2022.

Our objectives focus on the patient experience, our people, clinical and service development, fundraising, the estate, our facilities, IT, finance and governance and leadership. Our plan is for changes in our mix of activities over the next five years with expansion of our ventilated, behavioural and young adults' services.

In support of our plan to expand of our behavioural, ventilated, and young adults' services, 2022/23 will see the RHN complete the refurbishment of Wellesley ward and further expand capacity on Leonora ward. Additionally, the rolling programme of upgrades and investment in buildings, equipment and information technology will continue.

In 2022/23 we expect to see occupancy back at pre pandemic levels and though COVID-19 had an impact on staff absence in 2021/22, this was much diminished from 2020/21. There were no deaths from the disease amongst patients, residents and staff during the year and visiting has returned to normal with suitable precautions being taken. COVID-19 hygiene measures remain however for all patient facing staff.

Fundraising saw a return to pre pandemic levels of income in 2021/22 and the target for 2022/23 is to achieve similar levels in order to reinvest in our services for patients and residents. Being able to run the full range of engagement and income generating activities with donors and sponsors makes this a realistic ambition.

2021/22 was a challenging year with falls in the asset values of the RHN's defined benefit pension funds and the value of investments the RHN holds. In the case of the defined benefit scheme, the value of liabilities fell commensurately resulting in a net surplus close to the surplus in 2020/21. Work is ongoing with investment managers of both pension fund assets and the RHN's investments to minimise the impacts of market volatility and to maximise returns.



Trustees' responsibilities

The Trustees 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).

The law applicable to charities in England and Wales 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 charity; and of the incoming resources and application of resources of the charity 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 judgements and estimates that are reasonable and prudent;
- state whether applicable 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 charity will continue in business.

The trustees are 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 Royal Charter.

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 trustees are responsible for the maintenance and integrity of the charity; and financial information included on the charity's website.

Des Benjamin
Chairman

Royal Hospital for Neuro-disability

25 January 2023

Independent Auditor's Report

to the trustees of the Royal Hospital for Neuro-disability

Opinion on the financial statements

In our opinion, the financial statements:

- give a true and fair view of the state of the Charity's affairs as at 30 September 2022 and of its incoming resources and application of resources 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 Charities Act 2011.

We have audited the financial statements of Royal Hospital for Neuro-Disability ("the Charity") for the year ended 30 September 2022 which comprise the Statement of Financial Activities, the balance sheet, the cash flow statement and notes to the financial statements, 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).

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 believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Independence

We remain independent of the Charity in accordance with the ethical requirements relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements.

Conclusions related 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 and Accounts, other than the financial statements and our auditor's report thereon. The other information comprises: The Chairman's Welcome, The Chief Executive's Introduction and the Trustees' Report.

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. 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.

Matters on which we are required to report by exception

We have nothing to report in respect of the following matters in relation to which the Charities Act 2011 requires us to report to you if, in our opinion;

the information given in the Trustees' Report for the financial year for which the financial statements are prepared is inconsistent in any material respect with the financial statements; or

- adequate accounting records have not been kept; or
- the financial statements are not in agreement with the accounting records and returns; or
- we have not received all the information and explanations we require for our audit.

Responsibilities of Trustees

As explained more fully in the Trustees' responsibilities statement, the Trustees 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 Charity or to cease operations, or have no realistic alternative but to do so.

Auditor's responsibilities for the audit of the financial statements

We have been appointed as auditor under section 144 of the Charities Act 2011 and report in accordance with the Act and relevant regulations made or having effect thereunder.

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

Independent Auditor's Report

to the trustees of the Royal Hospital for Neuro-disability (continued)

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.

Extent to which the audit was capable of detecting irregularities, including fraud

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:

- Based on our understanding of the charity and the sector in which it operates, we identified that the principal laws and regulations that directly affect the financial statements to be relevant Charities Acts in the UK and Northern Ireland. We assessed the extent of compliance with these laws and regulations as part of our procedures on the related financial statement items.
- In addition, the charity is subject to many other laws and regulations such as the Care Quality Commission regulations, Health and Safety regulations, and NHS Counter Fraud Authority regulations where the consequences of non-compliance could have a material effect on amounts or disclosures in the financial statements, for instance through the imposition of fines or litigation. The operations of the Charity can also be affected where there are any significant breaches. Auditing standards limit the required audit procedures to identify non-compliance with these laws and regulations to enquiry of the Trustees and other management and inspection of regulatory and legal correspondence if any.

Audit procedures performed by the engagement team included the following:

- We agreed the financial statement disclosures to applicable financial reporting standards – FRS 102, Charities Act 2011 and SORP
- We determined that the most significant laws and regulations which are directly relevant to specific assertions in the financial statements are those related to the financial reporting framework including but not limited to United Kingdom Generally Accepted Accounting Practice and the Charities Act 2011, and Statement of Recommended Practice for Accounting Reporting by Charities (SORP FRS 102)
- We reviewed Serious Incident Reports submitted to the Charity Commission
- We understood how the charity is complying with those legal and regulatory frameworks that are significant to their activities by making enquiries of management and those responsible for legal and compliance procedures. We corroborated our enquiries through our review of minutes and correspondence with relevant bodies such as the Care Quality Commission –
- We reviewed the Local Counter Fraud Specialist (LCFS) report
- We obtained and reviewed reported health and safety

incidents

- We challenged assumptions made by management in their significant accounting estimates in particular in relation to pension liability valuations and cash flow forecasts used in going concern assessments and
- In addressing the risk of fraud through management override of controls; testing the appropriateness of journal entries and other adjustments; testing the application of cut-off and revenue recognition, particularly around patient services income, donations and legacies, and evaluating the business rationale of any significant transactions that are unusual or outside the normal course of business.
- performed audit procedures to identify any unusual or unexpected relationships that may indicate risks of material misstatement due to fraud.

Our audit procedures were designed to respond to risks of material misstatement in the financial statements, recognising that 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, misrepresentations or through collusion. There are inherent limitations in the audit procedures performed 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 are to become aware of it.

A further description of our responsibilities for the audit of the financial statements is located at the Financial Reporting Council's ("FRC's") website at:

<https://www.frc.org.uk/auditorsresponsibilities>. This description forms part of our auditor's report.

Use of our report

This report is made solely to the Charity's trustees, as a body, in accordance with the Charities Act 2011. Our audit work has been undertaken so that we might state to the Charity's trustees 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 Charity and the Charity's trustees as a body, for our audit work, for this report, or for the opinions we have formed.

BDO LLP

Heather Wheelhouse (Senior Statutory Auditor)
BDO LLP, statutory auditor
55 Baker Street
W1U 7EU

Date **30 January 2023**

BDO LLP is eligible for appointment as auditor of the charity by virtue of its eligibility for appointment as auditor of a company under section 1212 of the Companies Act 2006.

BDO LLP is a limited liability partnership registered in England and Wales (with registered number OC305127).

Statement of Financial activities (SOFA) including income and expenditure account

for the year ended 30 September 2022

	Notes	Unrestricted funds £'000	Restricted funds £'000	Endowment funds £'000	Total 2022 £'000	Unrestricted funds £'000	Restricted funds £'000	Endowment funds £'000	Total 2021 £'000
Income and endowments from:									
Donations and legacies	2.1	2,092	625	-	2,717	1,181	613	-	1,794
Other trading activities									
- Fundraising events		141	35	-	176	80	7	-	87
Investments									
- Dividends and Interest	2.2	412	12	-	424	280	9	-	289
		2,645	672	-	3,317	1,541	629	-	2,170
Charitable activities	3	45,842	-	-	45,842	40,986	13	-	40,999
Total Income and endowments		48,487	672	-	49,159	42,527	642	-	43,169
Expenditure on:									
Raising funds	4.1	1,043	-	4	1,047	1,010	-	4	1,014
Charitable activities	4.2	45,632	562	-	46,194	43,162	519	-	43,681
Total expenditure		46,675	562	4	47,241	44,172	519	4	44,695
Net surplus / (losses) before gains and losses		1,812	110	(4)	1,918	(1,645)	123	(4)	(1,526)
Net (losses) / gains on Investments		(1,589)	(64)	(83)	(1,736)	2,279	92	112	2,483
Net income/(losses)		223	46	(87)	182	634	215	108	957
Transfers between funds	17	157	(157)	-	-	33	(33)	-	-
		380	(111)	(87)	182	667	182	108	957
Other recognised gains									
Net actuarial gains on defined benefit pension scheme	6.5	-	-	-	-	-	-	-	-
Net movement in funds for the year		380	(111)	(87)	182	667	182	108	957
Reconciliation of funds									
Funds at 1 October		42,647	1,776	860	45,283	41,980	1,594	752	44,326
Total funds at 30 September		43,027	1,665	773	45,465	42,647	1,776	860	45,283

The RHN made no other unrealised gains or losses which do not appear on the SOFA. All the above are derived from continuing activities.

The notes on pages 34 to 49 form a part of these accounts.

Balance sheet

for the year ended 30 September 2022

	Notes	Total 2022 £'000	Total 2021 £'000
Fixed assets			
Tangible assets	8	19,453	19,684
Investments	9	17,883	19,644
		37,336	39,328
Current assets			
Stocks	10	276	215
Debtors	11	5,326	5,512
Cash at bank and In hand		6,807	4,793
		12,409	10,520
Creditors - Amounts falling due within one year	12	(4,280)	(4,565)
Net Current assets		8,129	5,955
Net assets - Excluding pension		45,465	45,283
Defined benefit pension scheme asset	6.5	-	-
Total Net assets	17	45,465	45,283
The funds of the charity			
Capital funds			
Endowment funds	17 & 18	773	860
Restricted funds			
Income funds	18	1,012	1,070
Other Restricted funds	18	653	706
Total Restricted funds		1,665	1,776
Unrestricted funds			
Designated funds			
Fixed assets	17	19,453	19,684
Planned capital expenditure	17	8,835	6,305
Anticipated maintenance	17	1,142	2,050
Total Designated funds		29,430	28,039
Free reserves			
General funds		13,597	14,608
Total Unrestricted funds		43,027	42,647
Total charity funds		45,465	45,283

Approved by the Board of Management on 23 January and signed on its behalf by:

Des Benjamin
Chairman

Hugh Rees
Treasurer

The notes on pages 34 to 49 form a part of these accounts.

Cash Flow Statement

for the year ended 30 September 2022

	Total 2022	Total 2021
	£'000	£'000
Cash flows from Operating activities		
Net cash provided by (used in) operating activities	3,257	(626)
Cash flows from Investing activities		
Dividends, interest and rents from investments	424	289
Purchase of property, plant and equipment	(1,692)	(1,069)
Proceeds from sale of investments	4,840	4,550
Purchase of investments	(4,815)	(4,457)
Net Cash (used in) investing activities	(1,243)	(687)
Change in cash and cash equivalents in the reporting period	2,014	(1,313)
Cash and cash equivalents at the beginning of the reporting period	4,793	6,106
Cash and cash equivalents at the end of the reporting period	6,807	4,793
Reconciliation of cash flows from operating activities	2022	2021
	£'000	£'000
Net income for the reporting period	182	957
(as per the statement of financial activities)		
Adjustments for:		
Depreciation charges	1,923	1,812
Pension fund contributions and finance costs	-	-
Losses / (gains) on investments	1,736	(2,483)
Dividends, interest and rents from Investments	(424)	(289)
(Increase) in stocks	(61)	(97)
Decrease / (increase) in debtors	186	(86)
(Decrease) in creditors	(285)	(440)
Net cash (used in) / provided by operating activities	3,257	(626)
Analysis of cash and cash equivalents	2022	2021
	£'000	£'000
Cash in hand	6,807	4,793
Total cash and cash equivalents	6,807	4,793

	As of 1 Oct 2021	Cash inflows	Acquisition / disposal of subsidiaries	New finance leases	Other non cash changes	As of 30 Sep 2022
	£'000	£'000	£'000	£'000	£'000	£'000
Cash	4,793	2,014	-	-	-	6,807
Cash equivalents	-	-	-	-	-	-
Overdraft facility repayable on demand	-	-	-	-	-	-
	4,793	2,014	-	-	-	6,807
Loans falling due within one year	-	-	-	-	-	-
Loans falling due after more than one year	-	-	-	-	-	-
Finance lease obligations	-	-	-	-	-	-
Total	4,793	2,014	-	-	-	6,807



Notes to the accounts

for the year ended 30 September 2022

Royal Hospital for Neuro-disability (Charity No. 205907)

1 Accounting Policies

- 1.1 The Royal Hospital for Neuro-disability is an unincorporated charity registered in England & Wales with the Charity Commission. The address of the registered office is shown on page 2 and the nature of its operations is set out in the report of the Trustees.
- The principal accounting policies which have been adopted in the preparation of the financial statements are set out below and have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their financial statements in accordance with the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102) effective 1 January 2019, and the Charities Act 2011.
- The financial statements have been prepared to give a "true and fair view" and have departed from the Charities (Accounts and Reports) Regulations 2008 only to the extent required to provide a "true and fair view". This departure has involved following the Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS102) issued on 1 January 2019 rather than the Statement of Recommended Practice: Accounting and Reporting by Charities which was effective from 1 April 2005 but which has since been withdrawn.
- 1.2 The RHN is a public benefit entity, and its Board has set out a review of financial performance and the charity's reserves position. At the 30 September 2022, the RHN reported free reserves of £13.6 million (2021: £14.6 million), net current assets of £8.1 million (2021: £6.0 million), and a net cash inflow of £2.0 million (2021: net cash outflow of £1.3 million) for the year.
- Neither the Trustees, nor any key persons within the charity, were aware of any further specific, nor general events which would change the charity's status as a going concern.
- 1.3 The Statement of Financial Activities (SOFA) and Balance Sheet are the financial statements of the RHN. The subsidiary has been dormant in the financial year 2021 - 22.
- 1.4 Income and expenditure are accounted for on an accruals basis and expenditure includes Value Added Tax where this is not recoverable.
- 1.5 Grants Receivable are included in the SOFA in accordance with the terms of the grant agreement and the SORP criteria of entitlement, probability of receipt and reliability of measurement.
- 1.6 Donations of equipment and supplies are included within the appropriate expenditure at cost or estimated value to the donor and within gifts and donations.
- 1.7 Legacy income is recognised at the earlier of the charity being notified of an impending distribution or the legacy being received. 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 if material.
- 1.8 Patient services comprise the costs of nursing, treatment, therapy, domestic and catering services and the costs of maintenance of buildings and equipment, heating, depreciation and other support services attributable to Patient care.
- 1.9 Research expenditure comprises staff costs and direct costs of medical research projects instigated by the RHN and their associated support costs.
- 1.10 Grants are charged to the SOFA in the period in which beneficiaries are notified and so a constructive obligation is entered into by the RHN.
- 1.11 Support costs, comprising facility charges, governance, management and administrative costs, are allocated to activities based on employee headcount.
- 1.12 The RHN operates a pension scheme which includes a defined benefit section and a defined contribution section. The assets of the scheme are held by the scheme trustees separately from the assets of the RHN. Further information on the pension scheme can be found in notes 6.4 and 6.5.

Notes to the accounts

for the year ended 30 September 2022

1 Accounting Policies (continued)

- 1.13 Rentals payable under operating leases are charged to the Statement of Financial Activities on a straight line basis over the lease term.
- 1.14 Depreciation is charged on all fixed assets except freehold land, on a straight line basis, at rates calculated to write off the assets over their estimated useful lives as follows:

Buildings	2% - 20%
Plant and Machinery	7% - 25%
Furniture and Equipment	7% - 50%

The depreciation charge begins from the first day of the month following either; the date of asset acquisition or the date that the asset comes into use.

Tangible fixed assets costing more than £2,500 are capitalised at cost and depreciated at the rates shown.

Impairment losses are included in the Statement of Financial Activities.

Fixed Asset Investments are included in the Balance Sheet at market value. Realised and unrealised gains and losses incurred during the year are included in the Statement of Financial Activities.

Assets in the course of construction, reflect fixed asset projects undertaken by the RHN which have not been completed as at the reporting date. Such assets when completed are transferred to the appropriate asset class and depreciated according to existing accounting policy. Any assets under construction which during review are considered to have declined in value are written off; to any extent identified to the Statement of Financial Activities.

- 1.15 Stocks are valued at the lower of cost and net realisable value.
- 1.16 Fees receivable and other debtors are recognised at the settlement amount due. Prepayments are valued at the amount prepaid net of any trade discounts due.
- 1.17 Creditors and provisions are recognised where the RHN 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. The RHN recognises Creditors and provisions at their settlement amount after allowing for any trade discounts due.
- 1.18 Unrestricted funds are funds which are available for use at the discretion of the Board in furtherance of the general objectives of the RHN and which have not been designated for any other purpose. Restricted funds are funds which are to be used in accordance with specific restrictions imposed by donors or which have been raised by the charity for particular purposes. The cost of raising and administering such funds are charged against the specific fund. The aim and use of each restricted fund is set out in note 17 to the accounts.
- Endowment funds comprise monies that must be held indefinitely as capital. Related income is credited to general funds and applied for general purposes unless under the terms of the endowment such income must be used for specific purposes in which case it is credited to restricted funds.
- Designated funds comprise unrestricted funds that have been set aside by the Board for particular purposes. The use of the designated funds is set out in note 17.
- 1.19 Taxation - The Charity is exempt from taxation in respect of income or capital gains received within categories covered by part 11, chapter 3 of the Corporation Tax Act 2010 or Section 256 of the Taxation of Chargeable Gains Act 1992, to the extent that such income or gains are applied exclusively to charitable purposes.
- 1.20 Estimates and judgements are continually evaluated and are based on historical evidence and other factors, including expectations of future events that are believed to be reasonable under the circumstances.
- With regard to FRS102 Section 28 (Retirement benefits) and the RHN's defined benefit pension scheme, the best estimates used are chosen from a range of possible actuarial assumptions. Further disclosures of the estimates governing these retirement benefits can be found within note 6.5 of this annual report.

Notes to the accounts (continued)

for the year ended 30 September 2022

1 Accounting Policies (continued)

1.21 The charity has financial assets and financial liabilities that qualify as basic financial instruments. These are recognised at transaction value and subsequently measured at either their settlement value or market value. The charity has taken reduced disclosure exemptions for sections 11 and 12 of FRS 102.

At the balance sheet date the charity held financial assets at amortised cost. Financial assets held at amortised cost comprise cash at bank, trade debtors and other debtors totalling £11.9 million (2021: £9.7 million). Financial liabilities held at amortised cost comprise trade creditors and other creditors totalling £3.8 million (2021: £3.3 million). Investments at £17.9 million (2021: £19.6 million) held as part of an investment portfolio, are held at fair value with gains and losses being recognised within income and expenditure.

2 Donations, Legacies and Investment Income

	Unrestricted funds £'000	Restricted funds £'000	Total 2022 £'000	Total 2021 £'000
2.1 Donations and Legacies				
Gifts & donations	415	625	1,040	1,256
Legacies	1,677	-	1,677	538
	2,092	625	2,717	1,794

At 30 September 2022, the RHN has no bequeathed legacies in the financial statements (2021: £0).

2.2 Investment Income

	Unrestricted funds £'000	Restricted funds £'000	Total 2022 £'000	Total 2021 £'000
Listed investments	214	6	220	142
Interest on deposits	198	6	204	147
	412	12	424	289

3 Income from Charitable Activities

	Note	Unrestricted funds £'000	Restricted funds £'000	Total 2022 £'000	Total 2021 £'000
Patient services	3.1	44,707	-	44,707	40,150
Staff accommodation		426	-	426	360
Wheelchair & technology services		122	-	122	118
Other income from charitable activities		587	-	587	358
Grants receivable	3.2	-	-	-	13
		45,842	-	45,842	40,999

3.1 Patient Services

National Health Service	41,858	-	41,858	37,701
Local Authority	756	-	756	867
Non-NHS patients	148	-	148	161
One to One Nursing	1,943	-	1,943	1,418
Other sources	2	-	2	3
	44,707	-	44,707	40,150

3.2 Grants Receivable

Funding research projects	-	-	-	13
	-	-	-	13

Notes to the accounts (continued)

for the year ended 30 September 2022

4 Total Expenditure

	Direct costs £'000	Support costs £'000	Total 2022 £'000	Total 2021 £'000
4.1 Expenditure on raising funds				
Voluntary expenditure (fundraising staff and administration)	851	77	928	904
Fundraising events	25	2	27	19
Investment management	92	-	92	91
	968	79	1,047	1,014
4.2 Expenditure on charitable activities				
Patient Services	38,111	6,755	44,866	42,451
Staff accommodation	48	9	57	57
Wheelchair & technology services	411	73	484	455
Other charitable activities	567	100	667	595
Research	102	18	120	123
Other Finance Costs (see note 6.5)	-	-	-	-
	39,239	6,955	46,194	43,681
Total expenditure	40,207	7,034	47,241	44,695

Expenditure on raising funds comprises staff and running costs of the fundraising department together with any other costs directly associated with raising funds for the group, including related publicity costs. This expenditure heading also includes other costs associated with generating funds such as investment management fees and expenditure directly related to trading income.

Patient services comprise the costs of nursing, treatment, therapy, domestic and catering services and the costs of buildings and equipment maintenance, heating, depreciation and other support services attributable to patient care.

5 Support costs

	Expenditure on raising funds £'000	Expenditure on charitable activities £'000	Total 2022 £'000	Total 2021 £'000
Administration and management	27	2,406	2,433	2,267
Building expenses	22	1,954	1,976	2,118
Finance	6	583	589	504
Human resources	9	778	787	631
Information technology	12	1,079	1,091	1,004
Governance	1	52	53	48
Statutory audit	1	56	57	44
Internal Audit, Counter Fraud and Pension Audit	1	47	48	68
	79	6,955	7,034	6,684

Total expenditure includes the allocation of support costs to the various expenditure categories set out in the SOFA. These support costs relate to information technology, property and facilities management, human resources and finance, in addition to the support costs incurred by communications and other centralised departments that are not otherwise allocated directly. Support costs have been allocated to activities consistently based on employee headcount.

Notes to the accounts (continued)

for the year ended 30 September 2022

6 Employee Information

6.1 Staff costs during the year were as follows:

	Total 2022 £'000	Total 2021 £'000
Salaries and wages	31,738	29,728
Social security costs	2,540	2,434
Other pension costs and life assurance premiums	1,691	1,721
	35,969	33,883

Included within the wages and salaries figure above is the cost of employing agency staff £6,710,453 (2021: £4,827,712).

During the year, a total of £0 (2021: £0) has been recognised for termination payments, of which £0 remained payable at the year end (2021: £0).

6.2 Employees whose emoluments not including employers NI and pension costs exceeded £60,000 were as follows:

	Total 2022	Total 2021
£60,000 to £69,999	17	11
£70,000 to £79,999	11	11
£80,000 to £89,999	3	1
£90,000 to £99,999	-	-
£100,000 to £109,999	1	3
£110,000 to £119,999	1	-
£120,000 to £129,999	3	2
£130,000 to £139,999	2	3
£140,000 to £149,999	2	2
£150,000 to £159,999	-	-
£160,000 to £169,999	-	-
£200,000 to £209,999	1	1
	41	34

The increase in numbers by 7 is due to the inclusion of members of staff who had increases in pay related to bank work to cover staff vacancies as a result of increase in activities.

39 employees (2021 - 31) earning more than £60,000 were members of the defined contribution section of the scheme. Employers' contributions payable during the year in respect of these employees amounted to £212,306 (2021 - £166,641).

Remuneration of Key Management Personnel including employers NI and pensions payable during the year amounted to £1,197,642 for 6.6 FTE staff (2021 - £1,140,016 for 6.5 FTE staff). This group comprises the Executive team.

6.3 The average number of staff employed (excluding agency staff) was as follows:

	Total 2022	Total 2021
Patient services	682	682
Research	6	5
Other charitable activities	36	38
Generating funds	8	8
Governance	2	2
	734	735

Notes to the accounts (continued)

for the year ended 30 September 2022

6 Employee Information (continued)

6.4 The charity operates a pension scheme for those members of staff who are eligible.

The scheme has two sections:

- A defined contribution section which, since 1 October 2006, includes all active members of the scheme. An eligible jobholder will be automatically enrolled as a member of the scheme on his automatic enrolment date. The contribution by the employer depends on whether a member is in the first or second tier. If a member has been automatically enrolled or has opted to join the scheme on the first tier contribution basis, the percentage required will be the minimum required under section 20(1)(b) (taking into account the transitional periods under section 29) of the Pension Act 2008. If a member is already in a scheme prior to 1 January 2014 or if the member has opted to be a member on the second tier contribution basis, the percentage will be determined by the member's age as per the table below. A member can elect to move from the first tier to the second tier contribution basis on becoming a member or on providing one month's written notice, with the exception of a member who does not work under a contract of employment.

- A defined benefit section, which was closed to new members on 1 November 2001 and closed to future accrual on 30 September 2006, when members were invited to join the defined contribution section.

The assets of the scheme are held by the scheme trustees separately from the assets of the charity.

The rates of contribution to the defined contribution scheme on the second tier basis are:

	Defined Contribution 2022	Defined Contribution 2021
Employer contributions:		
age 18 to 35	4.0%	4.0%
age 36 to 50	7.0%	7.0%
age 51 to 65	10.0%	10.0%
Employee contributions	4.0%	4.0%

In addition the charity pays death in service insurance premiums in respect of members of the scheme in the second tier. Employers pension contributions payable to the defined contribution section of the scheme were as follows:

	Total 2022 £'000	Total 2021 £'000
Defined Contribution	1,404	1,400

Pension contributions outstanding at the end of the year under the defined contribution scheme are as follows:

	Total 2022 £'000	Total 2021 £'000
Pension contributions outstanding at year end	200	194

A stakeholder scheme is also available to employees of the charity, but no employer contributions are made to this scheme.

Notes to the accounts (continued)

for the year ended 30 September 2022

6 Employee Information (continued)

6.5 Staff Pension and Life Assurance Scheme

The assumptions used in calculating the liabilities were as follows:

	Total 2022	Total 2021	Total 2020
Inflation	4.3%	3.8%	3.1%
Salary escalation	n/a	n/a	n/a
Pension increases, subject to LPI	4.0%	3.5%	3.0%
Statutory revaluation in deferment	3.5%	2.9%	2.4%
Discount rate (pre and post retirement)	5.3%	1.9%	1.5%
Life expectancy for 65 year old male	87	87	87
Life expectancy for 65 year old female	90	90	90

The assumptions used by the actuary are the best estimate chosen from a range of possible actuarial assumptions which, due to the long time period covered, may not necessarily be borne out in practice. The fair value of the assets for each category of asset are as follows:

	Total 2022 £'000	Total 2021 £'000	Total 2020 £'000
Equities	7,857	12,401	13,489
Corporate bonds	6,953	11,172	11,293
Liability matching credit	31,778	38,946	22,481
Diversified growth fund	5,215	8,609	9,202
Equity linked bond fund	-	-	-
Alternatives	4,103	6,457	7,319
Liability driven investment, Government Bonds and Cash	13,211	24,291	40,153
Insured annuities	417	615	627
Total fair value of assets	69,534	102,491	104,564
Present value of scheme liabilities	60,961	93,769	99,674
	8,573	8,722	4,890
Restriction to the amount that can be recognised	(8,573)	(8,722)	(4,890)
Net pension asset	-	-	-

The actual return on Assets is 5.3% per annum which is set to equal the discount rate (2021 - 1.9%).

Assets in the scheme as a percentage of total scheme assets

	Total 2022	Total 2021
Equities	11.3%	12.1%
Corporate bonds	10.0%	10.9%
Liability matching credit	45.7%	38.0%
Diversified growth fund	7.5%	8.4%
Alternatives	5.9%	6.3%
Liability driven investment, Government Bonds and Cash	19.0%	23.7%
Insured annuities	0.6%	0.6%

Amounts included in the statement of financial activities:

	Total 2022 £'000	Total 2021 £'000
Interest income (excluding interest income on assets that are not recoverable)	1,751	1,472
Interest cost	(1,751)	(1,472)
Interest on the net defined benefit liability	-	-

Notes to the accounts (continued)

for the year ended 30 September 2022

6 Employee Information (continued)

6.5 Staff Pension and Life Assurance Scheme (continued)

	Total 2022 £'000	Total 2021 £'000
Assets		
Assets in scheme at beginning of year	102,491	104,564
Movement in year:		
Interest income	1,751	1,472
Employer contributions	-	-
Benefits paid	(3,316)	(3,047)
Actuarial (losses) on assets	(31,392)	(498)
Assets in scheme at end of year	69,534	102,491

	Total 2022 £'000	Total 2021 £'000
Liabilities		
Liabilities in scheme at beginning of year	93,769	99,674
Movement in year:		
Interest cost	1,751	1,472
Benefits paid	(3,316)	(3,047)
Actuarial (gains) on liabilities	(31,243)	(4,330)
Liabilities in scheme at end of year	60,961	93,769

History of experience gains and losses

	Total 2022 £'000	Total 2021 £'000	Total 2020 £'000	Total 2019 £'000	Total 2018 £'000
Defined benefit obligation	(60,961)	(93,769)	(99,674)	(96,462)	(85,535)
Scheme assets	69,534	102,491	104,564	106,219	92,558
Surplus	8,573	8,722	4,890	9,757	7,023

The movement during the year is as follows (unless otherwise specified, the figures calculated are based on the assumptions as at the beginning of the year):

	Total 2022 £'000	Total 2021 £'000
Surplus in the scheme at beginning of year	-	-
Movement in year:		
Contributions	-	-
Net return on pension scheme	-	-
Actuarial gains	-	-
Surplus in the scheme at end of year	-	-

Notes to the accounts (continued)

for the year ended 30 September 2022

7 Related Party Transactions

7.1 Trustees Remuneration and Expenses

Members of the Board of management are not entitled to and did not receive any remuneration during the year. Additionally, one member of the Board of management received £1,255 (2021: no member, £0) for reimbursement of expenses. These expenses related to travel and accommodation costs for attending Board Meetings. Trustees' Indemnity Insurance of £5,600 was paid for the year 2022 (2021: £5,042).

7.2 Other Related Party Transactions

Other than the expenses listed, there have been no other related party transactions (2021: £0).

8 Tangible Fixed Assets

	Assets in the course of construction £'000	Land and Buildings £'000	Plant and Machinery £'000	Furniture and Equipment £'000	Total 2022 £'000
Cost					
Opening balance	76	32,284	1,796	6,114	40,270
Additions	119	423	390	760	1,692
Transfers	(30)	30	-	-	-
Disposals	-	(11)	-	(185)	(196)
	165	32,726	2,186	6,689	41,766
Depreciation					
Opening balance	-	15,600	769	4,217	20,586
Disposals	-	(11)	-	(185)	(196)
Charge for the year	-	1,208	141	574	1,923
Impairment	-	-	-	-	-
	-	16,797	910	4,606	22,313
Net book value 2022	165	15,929	1,276	2,083	19,453
Net book value 2021	76	16,684	1,027	1,897	19,684

All fixed assets are held for charitable use.

	Assets in the course of construction £'000	Land and Buildings £'000	Plant and Machinery £'000	Furniture and Equipment £'000	Total 2021 £'000
Cost					
Opening balance	565	31,440	1,730	5,798	39,533
Additions	45	361	205	458	1,069
Transfers	(534)	491	2	41	-
Disposals	-	(8)	(141)	(183)	(332)
	76	32,284	1,796	6,114	40,270
Depreciation					
Opening balance	-	14,439	783	3,884	19,106
Transfers	-	-	-	-	-
Disposals	-	(8)	(141)	(183)	(332)
Charge for the year	-	1,169	127	516	1,812
Impairment	-	-	-	-	-
	-	15,600	769	4,217	20,586
Net book value 2021	76	16,684	1,027	1,897	19,684
Net book value 2020	565	17,001	947	1,914	20,427

Notes to the accounts (continued)

for the year ended 30 September 2022

9 Investments

	Total 2022 £'000	Total 2021 £'000
Market value at beginning of year	19,644	17,254
Purchases at cost	5,384	3,760
Proceeds from disposals	(4,840)	(4,550)
Net (losses) / gains on investments	(1,735)	2,482
(Decrease) / Increase in short term deposits	(570)	698
Market value at end of year	17,883	19,644
Historical cost at end of year	15,093	14,506

Analysed by type

	Total 2022 £'000	Total 2021 £'000
Investments		
- Listed direct	13,697	14,897
- Unlisted direct	118	95
- Listed unit trusts	3,798	3,812
Term Deposits	270	840
	17,883	19,644

Geographical analysis

	Total 2022 £'000	Total 2021 £'000
United Kingdom Investments	7,963	7,961
Overseas Investments	9,920	11,683
	17,883	19,644

Individual investments which have a market value of 5% or greater of the overall portfolio are:

iShares PLC - S&P 500 Index
HSBC FTSE All World Index Fund

Short term deposits under the management of the charity's professional investment managers are included in fixed asset Investments as they form part of the overall investment portfolio. The investment management fee for the year was £92,294 (2021: £90,975).

10 Stocks

	Total 2022 £'000	Total 2021 £'000
Dispensing stocks	276	215
Other consumables	-	-
	276	215

Notes to the accounts (continued)

for the year ended 30 September 2022

11 Debtors	Total 2022 £'000	Total 2021 £'000
Fees receivable	4,352	4,391
Other debtors	155	91
Prepayments	604	462
Accrued income	215	568
	5,326	5,512

12 Creditors - Amounts falling due within one year	Total 2022 £'000	Total 2021 £'000
Trade creditors	732	430
Other creditors	378	365
Taxation and social security	687	650
Accruals	2,051	1,874
Deferred income (note 12.1)	184	897
Provisions and contingencies (note 12.2)	248	349
	4,280	4,565

12.1 Analysis of Deferred income	Total 2022	Total 2021
Opening balance	897	1,054
Changes during the year:		
Amounts released to the statement of financial activities	(897)	(1,054)
New income deferrals	184	897
Closing balance as at 30 September	184	897

Deferred income largely relates to the provision of patients' services which will be recognised in the forthcoming year.

12.2 Analysis of Provisions and contingencies	Legal Settlement Provision £'000	Total 2022 £'000	Legal Settlement Provision £'000	Total 2021 £'000
Opening balance	349	349	-	-
Changes during the year:				
Additions	-	-	349	349
Charges against the provision	(101)	(101)	-	-
Unused amounts reversed	-	-	-	-
Closing balance as at 30 September 2022	248	248	349	349

It is expected that the charity will be liable to pay the remaining legal costs £7k (2021: £103k) and settlement £241k (2021: £246k) relating to an existing court case within the next 12 months, for which a provision has been made.

Notes to the accounts (continued)

for the year ended 30 September 2022

13 Funds held as agent

The charity holds funds as an agent on behalf of its patients and residents. During the year £64,938 (2021: £50,093) was received and £68,382 (2021: £38,322) was paid out of this account. At the year end the balance held in this account was £177,019 (2021: £180,463).

The charity holds funds as an agent on behalf of beneficiaries of deceased employees entitled to death in service lump sum payments, payable under the Life Assurance Scheme. During the year £0 (2021: £374,834) was received and £0 (2021: £326,375) was paid out of this account. At the year end the balance held in this account was £390,810 (2021: £390,810).

14 Operating Leases	Total 2022 £'000	Total 2021 £'000
Rentals charged in the year:		
Land and Buildings	6	6
Plant and Machinery	34	32
Equipment	151	151
	191	189

	Total 2022 £'000	Total 2022 £'000	Total 2022 £'000	Total 2021 £'000	Total 2021 £'000	Total 2021 £'000
	Land and Buildings	Plant and Machinery	Furniture and Equipment	Land and Buildings	Plant and Machinery	Furniture and Equipment
Payments due on operating lease obligations						
Within one year	6	34	124	6	32	146
Within two and five years	-	92	1	-	113	74
Over five years	-	11	-	-	13	-
	6	137	125	6	158	220

15 Capital Commitments	Total 2022 £'000	Total 2021 £'000
Contracted for but not provided	296	108

16 Subsidiary and Connected Entities

The RHN owns the whole of the issued share capital of Royal Hospital for Neuro-disability Services Limited, a company registered in England with a paid up share capital of £1. The subsidiary has been dormant in the trading year to 30 September 2022 (Year end 2021 balance owed to parent £0).

Notes to the accounts (continued)

for the year ended 30 September 2022

17 Statement of funds

As at 30 September 2022	Fund balance				Pension scheme actuarial gains	Transfers between funds	Fund balance carried forward
	brought forward	Incoming resources	Resources expended	Investment gains			
	£'000	£'000	£'000	£'000	£'000	£'000	£'000
Unrestricted funds							
General funds	14,608	48,487	(46,675)	(1,589)	-	(1,234)	13,597
Pension reserve	-	-	-	-	-	-	-
Fixed asset fund	19,684	-	-	-	-	(231)	19,453
Planned capital expenditure	6,305	-	-	-	-	2,530	8,835
Planned maintenance	2,050	-	-	-	-	(908)	1,142
Total unrestricted funds	42,647	48,487	(46,675)	(1,589)	-	157	43,027
Restricted funds							
John Howard Convalescent Home	706	11	-	(64)	-	-	653
Research Department	104	9	(102)	-	-	-	11
Assembly Room Windows	44	38	-	-	-	(50)	32
Music Therapy Omega	188	-	-	-	-	-	188
Circadian Rhythm	25	-	(13)	-	-	-	12
Patient Beds	6	74	(6)	-	-	(9)	65
IT Suite	1	-	(1)	-	-	-	-
Pergola Garden Project	19	1	-	-	-	-	20
Training - HEE Mouthcare	14	-	(9)	-	-	-	5
Escorts	61	8	(10)	-	-	-	59
Patients Amenities/Patients without Relatives	18	2	-	-	-	-	20
Wheelchair Loan Store	55	1	(3)	-	-	-	53
Dental Equipment	29	-	-	-	-	-	29
Treatment of Mood & Wellbeing	30	-	(30)	-	-	-	-
Wellesley Ward Refurbishment	92	21	-	-	-	-	113
Habs House Equipment	35	5	-	-	-	(40)	-
DoC Emergence	34	-	(15)	-	-	-	19
Sensory Equip & Ward Activity	67	4	(13)	-	-	(13)	45
Shower Chairs	-	41	(2)	-	-	-	39
Large Ambulance 2	8	55	-	-	-	-	63
SW Hardship Fund	19	23	(6)	-	-	-	36
Other	221	379	(352)	-	-	(45)	203
Total restricted funds	1,776	672	(562)	(64)	-	(157)	1,665
Endowment funds							
Lopes Chaplains Stipend fund	8	-	-	-	-	-	8
Other endowments	852	-	(4)	(83)	-	-	765
Total endowment funds	860	-	(4)	(83)	-	-	773
Totals	45,283	49,159	(47,241)	(1,736)	-	-	45,465

Notes to the accounts (continued)

for the year ended 30 September 2022

17 Statement of funds (continued)

As at 30 September 2021	Fund balance				Pension scheme actuarial gains	Transfers between funds	Fund balance carried forward
	brought forward	Incoming resources	Resources expended	Investment losses			
	£'000	£'000	£'000	£'000	£'000	£'000	£'000
Unrestricted funds							
General funds	12,587	42,527	(44,172)	2,279	-	1,387	14,608
Pension reserve	-	-	-	-	-	-	-
Fixed asset fund	20,427	-	-	-	-	(743)	19,684
Planned capital expenditure	6,185	-	-	-	-	120	6,305
Planned maintenance	2,781	-	-	-	-	(731)	2,050
Total unrestricted funds	41,980	42,527	(44,172)	2,279	-	33	42,647
Restricted funds							
John Howard Convalescent Home	610	4	-	92	-	-	706
Research Department	184	24	(104)	-	-	-	104
Assembly Room Windows	42	2	-	-	-	-	44
Music Therapy Omega	188	-	-	-	-	-	188
Circadian Rhythm	54	-	(29)	-	-	-	25
Patient Beds	9	-	(3)	-	-	-	6
IT Suite	10	15	(24)	-	-	-	1
Pergola Garden Project	19	-	-	-	-	-	19
Training - HEE Mouthcare	23	-	(9)	-	-	-	14
Escorts	70	1	(10)	-	-	-	61
Patients Amenities/Patients without Relatives	27	-	(9)	-	-	-	18
Wheelchair Loan Store	39	29	(13)	-	-	-	55
Dental Equipment	29	-	-	-	-	-	29
Treatment of Mood & Wellbeing	30	-	-	-	-	-	30
Wellesley Ward Refurbishment	-	92	-	-	-	-	92
Habs House Equipment	35	-	-	-	-	-	35
DoC Emergence	20	31	(17)	-	-	-	34
Sensory Equip & Ward Activity	2	76	(11)	-	-	-	67
Other	203	368	(290)	-	-	(33)	248
Total restricted funds	1,594	642	(519)	92	-	(33)	1,776
Endowment funds							
Lopes Chaplains Stipend fund	8	-	-	-	-	-	8
Other endowments	744	-	(4)	112	-	-	852
Total endowment funds	752	-	(4)	112	-	-	860
Totals	44,326	43,169	(44,695)	2,483	-	-	45,283

Notes to the accounts (continued)

for the year ended 30 September 2022

17 Statement of funds (continued)

A summary of definition and descriptions

Name of fund	Description, nature and purpose of the fund
General	These are the 'available' funds of the charity, after transfers to or from any other/designated funds and contributions to the pension reserve.
Designated	Reviewed on a rolling year basis, these are amounts appropriated within the unrestricted category for the continued development and maintenance of the charity's assets for: <ul style="list-style-type: none"> Fixed assets funds represent the net book value invested in fixed assets. During the year the RHN transferred £231,000 (2021: £707,000 from) to its general fund from these designated funds. Identified planned capital expenditure is for works to be utilised within the next five years, During the year the RHN transferred £2,530,000 (2021: £120,000) from its general fund to these designated funds). During the year the RHN transferred £908,000 back to its general fund from designated funds (2021: £731,000) in anticipation of maintenance expenditure in the coming year.
Restricted	These are funds available only for the purpose under which they were received, unless permitted by the donor. Further described below:

Restricted Fund Description	Purpose of the fund
John Howard Convalescent Home	To provide support for necessitous members of the middle class and persons generally who are only able to make a small payment in return for convalescence and care
Research Department	Running costs of Research department
Assembly Room Windows	Replacement of the Assembly room windows
Music Therapy Omega	Funding of Music Therapy research project. Re-assigned to PhD research with plans to use funds over the coming years
Circadian Rhythm	Funding of research into prolonged disorder of consciousness
Patient Beds	Replacement of hospital beds and parts
IT Suite	Running costs of Compass department
Pergola Garden Project	Funding for grounds renovation projects
Training - HEE Mouthcare	Training in Dentistry provided by Mouthcare
Escorts	Funding for nurse escorts for leisure
Patients Amenities/Patients without Relatives	Funding for personal expenses of patients
Wheelchair Loan Store	Wheelchairs for Bio-Medical department
Dental Equipment	Funding for dental equipment
Treatment of Mood & Wellbeing	Funding for Research PHD
Wellesley Ward Refurbishment	Refurbishment of Wellesley ward
Habs House Equipment	Funding for Haberdashers House equipment
DoC Emergence	Funding for Research projects
Sensory Equip & Ward Activity	Funding for sensory equipment and ward activities
Shower Chairs	Funding for shower chairs
Large Ambulance 2	For maintenance of ambulances
SW Hardship Fund	For patients and relatives in financial need

Notes to the accounts (continued)

for the year ended 30 September 2022

17 Statement of funds (continued)

A summary of definition and descriptions (continued)

Restricted (continued)	Other restricted funds is made up of 37 funds (2021: 41 funds) none of whose balances are over £26,000 (2021: £26,000) and they are for a variety of specific purposes.
	Restricted funds for the John Howard Convalescent Home relate to the proceeds received on the agreed sale of a convalescent home in prior years. The asset was originally provided to the charity as a restricted fund.
Endowment	The income generated from these funds are used specifically to contribute towards the cost of chaplaincy services available at the Royal Hospital for Neuro-disability; and bequests which are required to be held as permanent endowments of the charity. Income generated on the latter is available for the general purposes of the charity.

Included under endowment funds are the following:

	Total 2022 £'000	Total 2021 £'000
Permanent endowment:		
Lopes Chaplains Stipend fund	8	8
Other Endowment funds	765	852
	773	860

Lopes Chaplains Stipend fund

This is a trust fund set up by the Rt. Hon. Sir Massey Lopes Bt to generate income to contribute towards the cost of chaplaincy services available at the Royal Hospital for Neuro-disability.

Other endowment funds

Other endowment funds represent several bequests which are required to be held as permanent endowments of the charity. The income generated by these funds is available for the general purposes of the Charity.

*Transfers are explained above with the exception of those in unrestricted fund which reflect the appropriation of pension reserves within unrestricted funds

18 Analysis of fund balances	Unrestricted funds £'000	Designated funds £'000	Restricted funds £'000	Endowment funds £'000	Total 2022 £'000
Tangible fixed assets	-	19,453	-	-	19,453
Fixed asset investments	6,480	9,977	653	773	17,883
Net current assets	7,117	-	1,012	-	8,129
Total funds at 30 September 2022	13,597	29,430	1,665	773	45,465

	Unrestricted funds £'000	Designated funds £'000	Restricted funds £'000	Endowment funds £'000	Total 2021 £'000
Tangible fixed assets	-	19,684	-	-	19,684
Fixed asset investments	9,723	8,355	706	860	19,644
Net current assets	4,885	-	1,070	-	5,955
Total funds at 30 September 2021	14,608	28,039	1,776	860	45,283



Registration

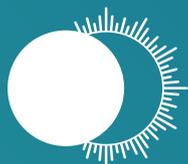
Under the registration system of the Care Quality Commission and the regulations laid down by the Health and Social Care Act 2008, the Royal Hospital for Neuro-disability achieved its registration in 2010 and is therefore licensed to provide services under the regulations.

The Royal Hospital for Neuro-disability

West Hill, Putney, London, SW15 3SW

telephone 020 8780 4500
email info@rhn.org.uk
website www.rhn.org.uk

Registered charity number 205907



Royal Hospital for
Neuro-disability