

The  
**Point of Care**  
Foundation

## 2016 ANNUAL REPORT

A charitable incorporated organisation

**Trustees' Report and Accounts**  
For the year ended 30 April 2016

Trustees	Sir Adrian Montague Dr Tracey Batten Dr Sean Elyan Sir Robert Francis QC Ms Ceinwen Giles Ms Rebecca Gray Mr Michael Nutt Mr Hardev Virdee
Charity number	1151628
Principal address	2nd Floor 99 Gray's Inn Road London WC1X 8TY
Auditors	Hazlems Fenton LLP Chartered Accountants Palladium House 1-4 Argyll Street London W1F 7LD
Bankers	The Co-operative Bank Plc PO Box 101 1 Balloon Street Manchester M60 4EP

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# Foreword

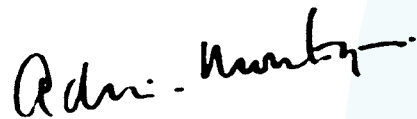
2015-16 was another year of tremendous growth and activity for The Point of Care Foundation, with our existing programmes growing at speed and a significant new programme in end of life care starting during the year. In just three years, the Foundation has achieved a great deal; I am proud to say that we are working with over 200 healthcare organisations across the UK and the Republic of Ireland.

In January our new 'living well to the very end' programme got underway, aiming to improve end of life care across the South of England in partnership with NHS England (South). The ambitious programme teaches healthcare staff how to put their patients and families at the heart of the services they provide and aims to improve the experience of patients who are terminally ill and their relatives.

During 2017, we aim to increase the number of participating clinical teams in order to reach more patients and families. The Foundation is grateful to the Health Foundation for their funding and support for the programme.

Schwartz Rounds continue to provide a valuable forum for healthcare staff, with around 50,000 staff taking part during the year. We are pleased that we are reaching more and more people, with GP practices and two medical schools now running Rounds to support their staff.

On behalf of the Trustees of The Point of Care Foundation, I am delighted to present our annual report and audited accounts for the year ended 30 April 2016 and confirm that they comply with the Foundation's constitution, the Charities Act 2011 and the Charities Statement of Recommended Practice (SORP).



Sir Adrian Montague  
Chairman  
26 September 2016

# Trustees' report

## Governance and management

The Foundation is a charitable incorporated organisation constituted on 12 April 2013. The Trustees who served during the year were:

Sir Adrian Montague	12 April 2013 - 11 April 2019
Dr Tracey Batten	15 January 2015 - 14 January 2018
Dr Sean Elyan	12 April 2013 - 11 April 2019
Sir Robert Francis QC	8 July 2013 - 7 July 2017
Ms Ceinwen Giles	8 July 2013 - 7 July 2017
Ms Rebecca Gray	12 April 2013 - 11 April 2019
Mr Michael Nutt	15 January 2015 - 14 January 2018
Mr Hardev Virdee	15 January 2015 - 14 January 2018

You can find full biographies of each of our trustees on our website at: <https://www.pointofcarefoundation.org.uk/about-us/trustees/>

## Induction and Training

As part of their induction, all new Trustees are offered induction meetings with the Chairman, the Chief Executive and the Chief Operating Officer. They also receive a pack of papers on the work of the charity including recent Board papers, a copy of the Constitution, the latest Annual Report and Accounts and Charity Commission guidance on Trustee responsibilities.

## Organisation

The governance of the charity is the responsibility of the Board of Trustees, which takes decisions on the strategic leadership of the organisation. Decisions are made at the Board meetings, which are normally held four times a year. The Trustees have delegated some powers and functions to the Remuneration Committee, which first met in October 2015.

Trustees are normally elected and appointed for a period of up to three years. This may be extended by no more than two additional periods of up to three years.

## Related parties

There are no related parties to the way in which the Foundation carries out its business and objectives, apart from those detailed in note 18.

## Risk management

The Point of Care Foundation maintains a risk register which is reviewed by Trustees at each Board meeting and the senior management team take appropriate action to mitigate risk to the Foundation.

## Objects for the public benefit

The charitable objectives of The Point of Care Foundation, as set out in the Constitution, are:

- The advancement of education of the public, in particular those working in health and social care, in methods and skills to improve patients' and service users' care experience and
- To promote research for the public benefit in all areas of that subject and
- To publish the useful results of such research with the object of improving health and social care outcomes for patients, service users and their families and carers.

In the Achievements and Performance section below, we outline how we meet those objects through training and support, information sharing and research.

## Our vision and activities

The Foundation works to improve patients' experience of care and increase support for the staff who work with them.

We believe that a truly patient-centred approach – focused on listening, understanding and responding to the needs of the whole individual – is essential to the delivery of the best possible quality of care. We further this vision by providing evidence and resources to support health and care staff in the valuable work of caring for patients.

The Foundation organises its activities under three headings. It aims:

1. To strengthen the leadership for staff support and improvements in patients' experience by raising awareness and creating and sharing research evidence on what works.
2. To promote effective methods for supporting staff and improving patients' experience through training and mentoring.
3. To innovate and nurture new thinking about practical solutions to overcome the suffering experienced by staff and patients in highly-pressurised and financially-challenged health services.

The Trustees have paid due regard to guidance issued by the Charity Commission in deciding what activities the Foundation should undertake.

## Strengthening leadership and raising awareness of what works

### The Heads of Patient Experience (HOPE) network

The HOPE network provides peer learning and support for people who work in NHS trusts and commissioning bodies, and in independent and third sector providers, whose role includes significant responsibilities for patient experience.

We established the network and ran three meetings in 2015-16, two in London and one in Birmingham, which were attended by more than 100 members. Funding for facilitating the network and running the meetings is provided by NHS England.

#### DID YOU KNOW?

During 2015-16, membership of the network grew from 40 to 140 members, an increase of 350%.

*"The HOPE network has been an incredibly important source of support, information and inspiration as a Head of Patient Experience. I have taken a number of great ideas from the participants, support in knowing I am not alone with my challenges and benchmarking about what is normal or what others do as creative work arounds"*

HOPE network member

### Conferences and Events

In December 2015 we ran our 2nd annual conference in partnership with the Open Section of the Royal Society of Medicine: "Caring organisations: enabling compassion to flourish". More than 250 attendees enjoyed stimulating presentations from expert presenters and interactive sessions designed to offer networking and peer learning.

In November 2015, we ran a Freedom to Speak Up seminar in association with Capsticks LLP. Focusing on how to implement the recommendations of the Freedom to Speak Up review, more than 60 senior leaders from NHS providers heard presentations from the Secretary of State for Health, Rt Hon Jeremy Hunt; David Behan, Chief Executive of the Care Quality Commission; and Helene Donnelly OBE, Ambassador for Cultural Change at Staffordshire and Stoke on Trent Partnership NHS Trust.

96% of attendees felt that the aims of our annual conference were very well met

*"I am leaving with a renewed passion and commitment."*

Attendee at 2015 Annual Conference

## 4. Promoting effective methods for supporting staff and improving the experience of patients

### Schwartz Rounds

Schwartz Rounds provide a structured forum where all staff, clinical and non-clinical, come together regularly to discuss the emotional and social aspects of working in healthcare.

Staff who attend Rounds feel less stressed and isolated, with increased insight and appreciation for each other's roles. The Rounds are open to all employees and help to reduce hierarchies and professional divisions and to focus attention on providing compassionate care.

In 2015-16, 29 new organisations signed up to run Schwartz Rounds, bringing the total number of organisations with established programmes on monthly Rounds in the UK to 138. In October, two organisations in the Republic of Ireland established Rounds as part of a pilot supported by the Irish Health Service Executive.

We have developed a membership scheme for organisations that wish to continue Rounds beyond the period of their initial two-year contract for training and mentoring. Members of the Schwartz community have access to online resources, webinars, regional conferences and peer support. Ninety percent of organisations invited to join the community to date have done so.

#### DID YOU KNOW?

10 of the 13 NHS Trusts with the lowest sickness absence (Dec 14 – Nov 15) run Schwartz Rounds<sup>1</sup>

*"Such inspirational people and stories. This has made me think about my practice and has increased my insight into my own emotions and the importance of supporting those I work with."*

Schwartz Round participant

### Doing quality improvement 'with patients' not 'to patients'

Experience-Based Co-Design (EBCD) is a radical quality improvement method which brings patients and staff together as equal partners to identify, design and implement service improvements.

Evaluations of EBCD have shown that improvements are more likely to be sustained when they resonate strongly with the intrinsic motivation of health care staff to provide safe and compassionate care. The co-design process itself creates an enabling and positive environment in which staff feel proud to work differently with service users, and patients and service users feel valued by the collaboration with staff.

In 2015-16 we ran workshops and one-day masterclasses for organisations where we trained a total of 156 individuals across 76 different organisations in the EBCD method.

<sup>1</sup><http://www.hscic.gov.uk/searchcatalogue?productid=20431&topics=0%2fWorkforce&sort=Relevance&size=10&page=1#top>



### DID YOU KNOW?

Oxleas NHS Trust reduced complaints on one ward to 0 for 23 months after using EBCD to improve their services

*"This project has been one of the best things I have been involved with... I want this to be the way we work in the future, maintaining much better partnerships with carers and people who use our services."*

EBCD Training participant

## 5. Innovating and nurturing new thinking about practical solutions in healthcare

### Schwartz Rounds in education

University College London Medical School (UCLMS) is the first medical school in the country to run Schwartz Rounds. After successful pilot Rounds with fifth and sixth year medical students, Rounds have now been formally introduced into the undergraduate curriculum.

Three other medical schools and universities training nurses and therapists are in the process of establishing Schwartz Rounds, including Liverpool University, where the Rounds are incorporated into multidisciplinary training programmes.

710 students have attended Rounds at UCLMS since they were introduced

That surgeon is so high up I would normally be intimidated by him. I'm a medical student and don't want to {be seen to} say anything stupid – but his presentation made him so much more approachable.

Schwartz Round participant

### Schwartz Rounds in primary care

In September we launched a new model to support the implementation of Schwartz Rounds within smaller organisations such as GP federations and hospices, featuring an online training package and increased peer support. Ten organisations signed up to join the first cohort, including hospices and primary care providers.

We are excited about the scope of this new training and support package to extend the reach of Rounds into a diverse range of smaller care settings and are currently evaluating the model to ensure it provides appropriate support to participating organisations.

## Spreading improvement

We embarked on an ambitious three year project to improve end-of-life care in the south of England, working in partnership with NHS England South and the support of a grant from the Health Foundation.

Using the patient and family centred care (PFCC) methodology developed at the University of Pittsburgh Medical Center, the programme offers a simple six-step quality improvement method enabling healthcare organisations to understand the experiences of patients, what could change and which small improvements can be made to bring tangible benefits to the experiences of patients.

The method has a proven track record for improving the experiences of patients, which is focused around staff shadowing patients. There is a growing evidence base to support the effectiveness of shadowing as a method to support patient-centred care .

Eight multi-disciplinary teams who take care of people at the end of their lives in acute, community or primary care settings rather than specialist palliative care teams are participating in the programme. Each team is asked to identify one or more aspects of the service they want to improve and we train them in the PFCC methods via learning events, webinars and site visits from our team.

## Co-design in learning disability services

We are testing the co-design method in a pilot project for people with learning disabilities in Berkshire who have experience of staying in the inpatient unit. A number of patients are working with staff to collect patient stories and they will then together come up with ideas for improvement, which they will try out next year. The project is continuing into 2016-17 and we will continue to provide support and mentoring throughout the co-design process.

# Plans for the future

## 1. Strengthening leadership and raising awareness of what works

### Heads of Patient Experience (HOPE) network

In 2016-17 we are aiming to grow the network to 200 members, using a combination of social media promotion, conference presentations and word-of-mouth endorsements.

We are actively seeking sponsorship for the network as we no longer have funding to run the three national meetings from NHS England. We are hoping to collaborate with local organisations in order to run further meetings across the UK, so that we can strengthen learning and support for patient experience professionals nationwide.

## 2. Promoting effective methods for supporting staff and improving the experience of patients

### Schwartz Rounds

In 2016-17 we will recruit two more cohorts to our new model of training and support, with a particular emphasis on encouraging primary care providers, hospices and healthcare education providers to introduce Rounds.

A key priority is to strengthen the Schwartz community so that members receive peer support, have access to practical resources and are able to network with one another. In late 2016, we will run two regional conferences (in London and Manchester) to offer a more convenient opportunity for learning and networking.

### Doing quality improvement 'with patients' not 'to patients'

We will continue to teach and spread the EBCD method as widely as possible, through a combination of open masterclasses; in-house training for organisations; conference presentations; and journal articles. We will build our capacity by recruiting more coaches and trainers so that we can share the method with more patients and staff working in healthcare.

We look forward to working with Basildon and Thurrock University Hospitals NHS Foundation Trust to provide patient-focused improvement training for staff at their Quality Improvement Academy. We hope to work alongside other providers to build the capacity for quality improvement at the local level, so that staff understand that providing better care is everyone's business.

### 3. Innovating and nurturing new thinking about practical solutions in healthcare

**Living Well to the Very End: Patient and Family Centred End-of-Life Care**  
In September 2016 we will enter phase two of the 'living well to the very end' programme, which focuses on spreading improvement. We will work in partnership with key stakeholders in end-of-life care to demonstrate the improvements that can be made using the PFCC method.

In February 2017 we will host a large event aimed at senior managers and clinical leaders across the UK to showcase innovative work in end-of-life care and to strengthen clinical networks. We continue to work closely with the independent researchers evaluating the programme at Kingston University and in Bath.

#### Financial review

2015-16 was a successful year financially for The Point of Care Foundation, despite being the first year since inception without the benefit of a grant from the Department of Health. Total income grew 14% from £757,830 to £860,881.

Total expenditure grew from £636,178 to £797,624. This reflects the start of the Patient and Family Centred Care project mid-way through the year, which required hiring new staff members, which in turn necessitated a move out of the King's Fund in autumn 2015 and into new, larger premises in Gray's Inn Road. Support costs this year were 15% of total outgoings, including one-off fees related to the office move. (2014-15: 13% on a comparable basis, after restatement due to changes in accounting regulations). The surplus for the year was £63,257.

At year end, net assets were £265,475 of which £182,567 were unrestricted funds. Our bank balance was £741,538 – but it is worth noting that over 85% of this is comprised of income deferred into subsequent years since it relates to services contracted but not yet delivered as at April 30 2016. The majority of these funds are due to be spent supporting organisations running Schwartz Rounds, since most sign up for Rounds support for 2 years and pay in advance.

Whilst The Point of Care Foundation has been very successful in securing funding for programme activity, as for many charities covering core costs remains a real challenge; we now have a fundraising strategy and are actively seeking funds in an attempt to cover these core costs as well as to bolster existing programmes and to nurture new innovations.

#### Reserves policy

Trustees set the unrestricted reserves level at £85,000 during 2015-16. This has been calculated using the same basis as last year, and would allow the Board to cover costs of closure in the case that incoming revenue were to dry up. The Board continues to aspire to increasing the reserves level as the charity grows.

THE POINT OF CARE FOUNDATION  
(A CHARITABLE INCORPORATED ORGANISATION)

## STATEMENT OF TRUSTEES' RESPONSIBILITIES

The trustees are responsible for preparing the Trustees' Report and the accounts 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 accounts for each financial year which give a true and fair view of the state of affairs of the Foundation and of the incoming resources and application of resources of the Foundation for that year.

In preparing these accounts, 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 accounts; and
- prepare the accounts on the going concern basis unless it is inappropriate to presume that the charity will continue in operation.

The trustees are responsible for keeping sufficient accounting records that disclose with reasonable accuracy at any time the financial position of the Foundation and enable them to ensure that the accounts comply with the Charities Act 2011, the Charity (Accounts and Reports) Regulations 2008 and the provisions of the trust deed. They are also responsible for safeguarding the assets of the charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

## INDEPENDENT AUDITORS' REPORT

### TO THE TRUSTEES OF THE POINT OF CARE FOUNDATION

We have audited the accounts of The Point of Care Foundation for the year ended 30 April 2016, as set out on pages 12 to 20. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

This report is made solely to the charity's trustees, as a body, in accordance with section 145 of the Charities Act 2011 and regulations made under section 154 of that Act. 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 auditors' report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and its trustees as a body for our audit work, for this report, or for the opinions we have formed.

#### Respective responsibilities of trustees and auditors

As explained more fully in the statement of trustees' responsibilities, the trustees are responsible for the preparation of accounts which give a true and fair view.

We have been appointed as auditors under section 145 of the Charities Act 2011 and report in accordance with regulations made under section 154 of that Act. Our responsibility is to audit and express an opinion on the accounts in accordance with applicable law and International Standards on Auditing (UK and Ireland). Those standards require us to comply with the Auditing Practices Board's Ethical Standards for Auditors.

#### Scope of the audit of the accounts

An audit involves obtaining evidence about the amounts and disclosures in the accounts sufficient to give reasonable assurance that the accounts are free from material misstatement, whether caused by fraud or error. This includes an assessment of: whether the accounting policies are appropriate to the charity's circumstances and have been consistently applied and adequately disclosed; the reasonableness of significant accounting estimates made by the trustees; and the overall presentation of the accounts. In addition, we read all the financial and non-financial information in the Trustees' Annual Report to identify material inconsistencies with the audited accounts and to identify any information that is apparently materially incorrect based on, or materially inconsistent with, the knowledge acquired by us in the course of performing the audit. If we become aware of any apparent material misstatements or inconsistencies we consider the implications for our report.

#### Opinion on accounts

In our opinion the accounts:

- give a true and fair view of the state of the charity's affairs as at 30 April 2016 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.

## INDEPENDENT AUDITORS' REPORT (continued)

### TO THE TRUSTEES OF THE POINT OF CARE FOUNDATION

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

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

- the information given in the Trustees' Report is inconsistent in any material respect with the accounts; or
- sufficient accounting records have not been kept; or
- the accounts 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.

Hazlems Fenton LLP

Chartered Accountants  
Statutory Auditor  
Chartered Accountants  
Palladium House, 1-4 Argyll Street, London W1F 7LD

Dated: 17th November 2016

Hazlems Fenton LLP is eligible to act as an auditor in terms of section 1212 of the Companies Act 2006

## STATEMENT OF FINANCIAL ACTIVITIES INCLUDING INCOME AND EXPENDITURE ACCOUNT

FOR THE YEAR ENDED 30 APRIL 2016

	Notes	Unrestricted funds £	Restricted funds £	Total 2016 £	Total 2015 £
<b>Income from:</b>					
Donations and legacies	2	-	236,879	236,879	569,553
Investments	3	1,896	-	1,896	1,089
Charitable activities	4	622,106	-	622,106	187,188
<b>Total income</b>		<b>624,002</b>	<b>236,879</b>	<b>860,881</b>	<b>757,830</b>
<b>Expenditure on:</b>					
<b>Charitable activities</b>	5				
Activities to deliver charitable objectives		515,200	260,416	775,616	594,348
Research activities		22,008	-	22,008	41,830
<b>Total expenditure</b>		<b>537,208</b>	<b>260,416</b>	<b>797,624</b>	<b>636,178</b>
Net income/ (expenditure) and net movement in funds for the year		86,794	(23,537)	63,257	121,652
<b>Reconciliation of funds</b>					
Total funds brought forward		95,773	106,445	202,218	80,566
<b>Total funds carried forward</b>		<b>182,567</b>	<b>82,908</b>	<b>265,475</b>	<b>202,218</b>



## BALANCE SHEET

AS AT 30 APRIL 2016

	Notes	2016		2015	
		£	£	£	£
Fixed assets					
Tangible assets	10		<b>91,801</b>		18,422
Current assets					
Debtors	11	<b>160,826</b>		138,742	
Cash at bank and in hand		<b>741,538</b>		826,852	
<b>Total</b>		<b>902,364</b>		965,594	
Creditors: amounts falling due within one year	12	<b>(728,690)</b>		(781,798)	
Net current assets			<b>173,674</b>		183,796
Total assets less current liabilities			<b>265,475</b>		202,218
<b>The funds of the charity:</b>					
Restricted income funds	15		<b>82,908</b>		106,445
Unrestricted income funds			<b>182,567</b>		95,773
<b>Total</b>			<b>265,475</b>		202,218

The accounts were approved by the Trustees on 26 September 2016



Sir Adrian Montague

Chairman

## NOTES TO THE ACCOUNTS

### FOR THE YEAR ENDED 30 APRIL 2016

#### 1. Accounting policies

##### 1.1 Basis of preparation

The accounts have been prepared under the historical cost convention.

The accounts have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard for Smaller Entities published on 16 July 2014, the Financial Reporting Standard for Smaller Entities (FRSSE), and the Charities Act 2011 and applicable regulations.

##### 1.2 Income recognition

All income is recognised once the charity has entitlement to the income, it is probable that the income will be received and the amount of income receivable can be measured reliably.

Income from charitable activities is recognised upon the percentage of work done to meet key milestones.

Income is deferred only when the charity has to fulfil conditions before becoming entitled to it or where the donor or funder has specified that the income is to be used in a future accounting period.

Grant income is recognised on a receivable basis.

The funding is received in accordance with the provisions and conditions as specified in the offer letters which regulate the way in which such funds may be spent.

Interest on funds held on deposit is included upon notification of the interest paid or payable by the bank.

##### 1.3 Expenditure recognition

Liabilities are recognised as expenditure as soon as there is a legal or constructive obligation committing the charity to that expenditure, it is probable that settlement will be required and the amount of the obligation can be measured reliably.

All expenditure is accounted for on an accruals basis. All expenses including support costs and governance costs are allocated or apportioned to the applicable expenditure headings.

Expenditure on charitable activities includes the costs of activities undertaken to further the purposes of the charity and their associated support costs.

Where there are costs common to both direct charitable and management expenditure judgement is applied on a time allocation basis.

## NOTES TO THE ACCOUNTS (continued)

### FOR THE YEAR ENDED 30 APRIL 2016

#### 1.4 Tangible fixed assets and depreciation

Tangible fixed assets are stated at cost less depreciation. Depreciation is provided at rates calculated to write off the cost less estimated residual value of each asset over its expected useful life, as follows:

Leasehold improvements	Over life of lease
Website and Computer equipment	33% straight line
Office equipment	10% straight line

#### 1.5 Leasing commitments

Rentals payable under operating leases are charged against income on a straight line basis over the period of the lease.

#### 1.6 Pensions

The Foundation operates a defined contributions pension scheme. Contributions are charged in the accounts as they become payable in accordance with the rules of the scheme.

#### 1.7 Accumulated funds

Unrestricted funds represent funds which are expendable at the discretion of the trustees for the furtherance of the objects of the charity. Such funds may be held for the purposes of meeting the administration and operational costs of the charity.

Restricted funds represent grants which are allocated by the donor for specific purposes.

#### 1.8 Irrecoverable VAT

Irrecoverable VAT is charged against the expenditure heading for which it was incurred.

## 2. Donations and legacies

	<b>2016</b>	2015
	<b>£</b>	£
Grants receivable for core activities	<b>236,879</b>	569,553

## NOTES TO THE ACCOUNTS (continued)

## FOR THE YEAR ENDED 30 APRIL 2016

## 3. Investments

	<b>2016</b> £	2015 £
Interest receivable	1,896	1,089

## 4. Charitable activities

	<b>2016</b> £	2015 £
Services from direct charitable activities	<b>598,359</b>	112,599
Research activities	<b>23,747</b>	74,589
	<b>622,106</b>	187,188

## 5. Total resources expended

	<b>Staff costs</b> £	<b>Depreciation</b> £	<b>Other costs</b> £	<b>Total 2016</b> £	<b>Total 2015</b> £
<b>Charitable activities</b>					
Activities to deliver charitable objectives					
Activities undertaken directly	443,851	17,173	194,887	655,911	512,148
Support costs	56,069	-	63,636	119,705	82,200
<b>Total</b>	<b>499,920</b>	<b>17,173</b>	<b>258,523</b>	<b>775,616</b>	<b>594,348</b>
Research activities					
Activities undertaken directly	18,356	-	3,652	22,008	41,830
<b>Total</b>	<b>518,276</b>	<b>17,173</b>	<b>262,175</b>	<b>797,624</b>	<b>636,178</b>

## NOTES TO THE ACCOUNTS (continued)

## FOR THE YEAR ENDED 30 APRIL 2016

## 6. Support costs

	2016	2015
	£	£
General administration and management	<b>51,572</b>	44,176
Governance costs	<b>12,064</b>	11,603
Staff costs	<b>56,069</b>	26,421
<b>Total</b>	<b>119,705</b>	82,200

Governance costs includes auditors' remuneration of £4,500 (2015: £4,300) for audit fees exclusive of Value Added Tax.

## 7. Trustees

None of the Trustees (or any persons connected with them) received any remuneration or benefits from the Foundation during the year, with regard to their services as a Trustee. One Trustee was paid for her separate role in a specific project - see note 18.

## 8. Employees

## Number of employees

The average monthly number of employees during the year was:

	2016	2015
	Number	Number
Administrative staff	2	1
Operational staff	10	2
	<b>12</b>	<b>3</b>
Employment costs	2016	2015
	£	£
Wages and salaries	461,526	145,805
Social security costs	47,732	12,801
Other pension costs	9,018	5,304
<b>Total</b>	<b>518,276</b>	<b>163,910</b>

## NOTES TO THE ACCOUNTS (continued)

## FOR THE YEAR ENDED 30 APRIL 2016

The number of employees whose remuneration was £60,000 or more were:

	2016 Number	2015 Number
Between £70,000 and £80,000	1	-

Of the employees whose emoluments exceed £60,000, 1 (2015: 0) has retirement benefits accruing under defined contribution pension schemes.

## 9. Taxation

The Foundation is a registered charity and is not liable to income tax on income derived from its charitable activities, as it falls within the various exemptions to registered charities.

## 10. Tangible fixed assets

	Leasehold improvements	Website and Computer equipment	Office equipment	Total
	£	£	£	£
<b>Cost</b>				
At 1 May 2015	-	25,408	3,643	29,051
Additions	27,320	46,717	16,515	90,552
At 30 April 2016	<b>27,320</b>	<b>72,125</b>	<b>20,158</b>	<b>119,603</b>
<b>Depreciation</b>				
At 1 May 2015	-	10,224	405	10,629
Charge for the year	1,034	15,044	1,095	17,173
At 30 April 2016	<b>1,034</b>	<b>25,268</b>	<b>1,500</b>	<b>27,802</b>
<b>Net book value</b>				
At 30 April 2016	<b>26,286</b>	<b>46,857</b>	<b>18,658</b>	<b>91,801</b>
At 30 April 2015	-	<b>15,184</b>	<b>3,238</b>	<b>18,422</b>

## NOTES TO THE ACCOUNTS (continued)

## FOR THE YEAR ENDED 30 APRIL 2016

## 11. Debtors

	2016 £	2015 £
Trade debtors	<b>127,257</b>	122,970
Prepayments and accrued income	<b>33,569</b>	15,772
<b>Total</b>	<b>160,826</b>	138,742

## 12. Creditors: amounts falling due within one year

	2016 £	2015 £
Trade creditors	<b>22,747</b>	20,788
Taxes and social security costs	<b>58,945</b>	54,987
Accruals	<b>11,074</b>	22,475
Deferred income	<b>635,924</b>	683,548
<b>Total</b>	<b>728,690</b>	781,798

## 13. Deferred income

Income is deferred only when the charity has to fulfil conditions before becoming entitled to it or where the funder has specified that the income is to be used in a future accounting period.

## 14. Pension and other post-retirement benefit commitments

## Defined contribution

The Foundation operates a defined contribution pension scheme. The assets of the scheme are held separately from those of the Foundation in an independently administered fund. The pension cost charge represents contributions payable by the Foundation to the fund.

	2016 £	2015 £
Contributions payable by the charity for the year	<b>9,018</b>	5,304

## NOTES TO THE ACCOUNTS (continued)

## FOR THE YEAR ENDED 30 APRIL 2016

## 15. Restricted funds

The income funds of the charity include restricted funds comprising the following unexpended balances of donations and grants held on trust for specific purposes:

	Movement in funds			Balance at 30 April 2016 £
	Balance at 1 May 2015 £	Incoming resources £	Outgoing resources £	
MacMillan Cancer Support	106,445	125,547	(164,242)	67,750
Patient & Family Centred Care	-	111,332	(96,174)	15,158
<b>Total</b>	<b>106,445</b>	<b>236,879</b>	<b>(260,416)</b>	<b>82,908</b>

## 16. Analysis of net assets between funds

	Unrestricted funds £	Restricted funds £	Total £
Fund balances at 30 April 2016 are represented by:			
Tangible fixed assets	91,801	-	91,801
Current assets	719,850	182,514	902,364
Creditors: amounts falling due within one year	(629,084)	(99,606)	(728,690)
<b>Total</b>	<b>182,567</b>	<b>82,908</b>	<b>265,475</b>

## 17. Commitments under operating leases

At 30 April 2016 the company had annual commitments under non-cancellable operating leases as follows:

	Land and buildings	
	2016 £	2015 £
Expiry date:		
Between two and five years	66,612	24,732



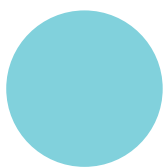
## NOTES TO THE ACCOUNTS (continued)

### FOR THE YEAR ENDED 30 APRIL 2016

#### 18. Related parties

Jocelyn Cornwell, the Chief Executive of The Point of Care Foundation, is also a director and 100% owner of Compassion in Healthcare Limited. During the year, £Nil (2015: £53,333), was paid to Compassion in Healthcare Limited for services rendered by Jocelyn Cornwell.

Ceinwen Giles, a Trustee, invoiced the Charity £4,658 in the year (2015: £1,800) for support services in respect of the HOPE programme which the Charity is delivering.



The  
**Point of Care**  
Foundation

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