



TRUSTEES' ANNUAL REPORT
AND ACCOUNTS
FOR THE YEAR ENDED
31 MARCH 2015

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NHS PROVIDERS - ADMINISTRATIVE DETAILS OF THE CHARITY, ITS TRUSTEES AND ADVISERS

TRUSTEES/ NON-EXECUTIVE DIRECTORS

John Adler (appointed 1 July 2015)
John Anderson
Ingrid Barker (re-appointed 1 July 2015)
Catherine Beardshaw* (retired 31 March 2015)
Ian Black (appointed 1 July 2015)
Elisabeth Buggins[◊] (re-appointed 1 July 2015)
Thomas Cahill[◊] (re-appointed 1 July 2015)
Della Cannings (appointed 2 July 2014,
re-appointed 1 July 2015)
Paula Clark (appointed 1 July 2015)
Susan Davis[◊] (re-appointed 1 July 2015)
Karen Dowman (retired 1 July 2015)
Gillian Easson (appointed 1 July 2014)
Jeffery Ellwood
Simon Featherstone (retired 1 July 2014)
Alan Foster (appointed 1 July 2015)
William Hancock* (appointed 2 July 2014)
Joseph Harrison (appointed 1 July 2015)
Peter Herring* (re-appointed 1 July 2014, retired 1 July 2015)
Martin Howell (retired 1 July 2015)
John Lawlor (appointed 1 July 2015)
James Mackey (retired 1 July 2014)
Sir Graham Meldrum (appointed 1 July 2015)
Gillian Morgan¹ (chair)
Kenneth Morris* (retired 1 July 2014)
Robert Naylor (retired 1 July 2015)
Elizabeth Padmore*
Angela Pedder
Christopher Smallwood (retired 1 July 2014)
Timothy Smart* (retired 1 May 2015)
Anthony Spotswood[◊]
Tracy Taylor (re-appointed 1 July 2015)
Anthony Thorne (retired 1 July 2015)

SENIOR EXECUTIVE STAFF/DIRECTORS²

Chris Hopson	Chief executive
Saffron Cordery	Director of policy and strategy
Ben Clacy	Director of development and operations
Nick Samuels	Director of communications

AUDITORS

Saffery Champness, Lion House,
Red Lion Street, London WC1R 4GB

BANKERS

The Co-operative Bank, 80 Cornhill,
London EC3V 3NH
Barclays Business, 1st Floor,
27 Soho Square, London W1D 3QR

PRINCIPAL AND REGISTERED ADDRESS

One Birdcage Walk, London, SW1H 9JJ

SOLICITORS

DAC Beachcroft, Portwall Place,
Portwall Lane, Bristol BS99 7UD

The Foundation Trust Network

Charity registration number: 1140900
Company registration number: 07525114

* Member of the finance and general purpose committee.
Chaired by Ken Morris until June 2014 and Elizabeth Padmore
from July 2014 onwards.

◊ Member of the remuneration committee.
Chaired by Tony Spotswood throughout 2014/15.

1 During 2014/15 Gill Morgan was required to take a partial
compassionate leave of absence for six months. During this
time the NHS Providers board was led by the vice-chair
Susan Davis.

2 For the year 2014/15 Chris Hopson, Saffron Cordery, Ben
Clacy and Nick Samuels were incorrectly registered at
Companies House as directors of Foundation Trust Network.
This was an administrative error and a request for the removal
of the registrations has now been submitted to Companies
House. They remain directors of Foundation Trust Network
Trading Ltd.

STRUCTURE, GOVERNANCE AND MANAGEMENT

This is the fourth annual report and audited financial statements of the Foundation Trust Network since it became an independent organisation on 1 April 2011. The organisation is now operating as NHS Providers. Details of the organisation's incorporation as a private company limited by guarantee and registration as a charity are given on page 3. The company is governed by its articles of association, the latest version agreed in June 2013.

It should be noted that during 2014/15 the organisation changed its operating name to *NHS Providers* in a rebranding exercise. Its registered name is still the Foundation Trust Network and it can be found under this name at both Companies House and the Charity Commission. Please note that the organisation will be referred to by its operating name of NHS Providers throughout this document.

ABOUT US

NHS Providers is the membership organisation for NHS public provider foundation trusts and trusts, representing NHS acute hospitals, community, mental health and ambulance services.

NHS Providers helps those NHS foundation trusts and trusts deliver high quality, patient focused care by enabling them to learn from each other, acting as their public voice and helping shape the system in which they operate.

As of 31 March 2015 the organisation had 222 members – more than 90 per cent of all NHS foundation trusts and aspirant trusts – who collectively account for £65 billion of annual expenditure and employ more than 920,000 (WTE) staff.

The charity's Objects are:

the relief of sickness and the preservation and protection of public health through the support of its members as providers of healthcare within the NHS.

The trustees confirm that they have complied with the duty in section 17 of the Charities Act 2011 to have due regard to public benefit guidance published by the Charity Commission.

ABOUT THE PERIOD COVERED BY THIS REPORT

This report covers all the organisation's activities from 1 April 2014 until 31 March 2015.

GOVERNANCE

APPOINTMENT AND INDUCTION OF NEW TRUSTEES

NHS Providers is governed by a board of trustees. Trustees who served during the period 2014/15 and to the date of this report are listed on page 3, together with the names of the senior executive staff and external advisors.

During 2014/15 the board comprised of 21 trustees:

- ten board members representing acute foundation trusts;
- four board members representing mental health foundation trusts;
- two board members representing community foundation trusts;
- two board members representing ambulance service foundation trusts;
- two board members representing aspirant trusts; and
- one chair.³

Trustees are drawn from chairs and chief executives of member organisations and are therefore already familiar with both board procedures and the activities of NHS Providers. Upon election, trustees go through an induction process to ensure that they understand the specific duties and responsibilities of being a charity trustee - in particular the importance of acting

³ Appointed following open competition and a national search in line with Article 20 of the organisation's articles of association.

as trustees of the charity and representing the views of all trusts, not just the views of their own organisation. During this reporting year the organisation ran a board evaluation process which, whilst providing positive results overall, did highlight the need for a revised induction process more focused on the role of the trustee and associated legal obligations. This was addressed in the next induction process that took place in July 2015.

The organisation maintains a register of interests for trustees, as well as managers. The trustees' and senior executives' interests registers are reviewed annually and in addition oral declarations of interest are taken at the start of each meeting of the NHS Providers board.

Attendance of trustees at NHS Providers board meetings is listed below.

NAME	ATTENDANCE
J Anderson	4 / 6
I Barker	4 / 6
C Beardshaw	5 / 6
E Buggins	4 / 6
T Cahill	5 / 6
D Cannings	4 / 5
S Davis	4 / 6
K Dowman	4 / 6
G Easson	3 / 5
J Ellwood	5 / 6
S M Featherstone	0 / 1
W Hancock	4 / 5
P Herring	5 / 6
M Howell	6 / 6
J Mackey	1 / 1
G Morgan	4 / 6
K S Morris	0 / 1
R Naylor	5 / 6
E Padmore	5 / 6
A Pedder	3 / 6
C Smallwood	1 / 1
T Smart	3 / 6
A Spotswood	3 / 6
T Taylor	5 / 6
T Thorne	6 / 6

MANAGEMENT

In addition to the trustees (who have full voting rights at board meetings), the NHS Providers board is also attended by the chief executive, director of policy and strategy, director of development and operations and director of communications as non-voting attendees. A scheme of delegation clearly lays out the respective responsibilities of the trustees, directors and management. This, together with a full set of operational policies and procedures, determines the conduct of all executives and other employees.

The NHS Providers board met six times during 2014/15 including an awayday reviewing progress against strategy. The board has two standing committees: the finance and general purposes committee (incorporating the audit committee); and the remuneration committee. The chief Executive of the organisation is responsible for the operational delivery of the strategy set out by the board.

The finance and general purposes committee's membership during 2014/15 comprised of five trustees and a co-opted member finance director. The committee met five times during 2014/15 and is responsible for providing scrutiny and advice to the NHS Providers board on the oversight of:

- financial reporting and control;
- risk management;
- reserves and investment policy;
- commercial activities;
- annual report and accounts; and
- commissioning and monitoring the outcomes of the external audit.

Both the NHS Providers chair and chief executive have standing invitations to the committee.

During the year the finance and general purposes committee reviewed its membership and terms of reference to ensure that it was better able to discharge its duties. Revised terms of reference were agreed by the NHS Providers board in July 2014 and the appointment of a co-opted member finance director to the committee. This has helped the committee to more robustly interrogate the data provided to it and also provide enhanced

support to the executive team. To date this has led to an improved and more active committee able to undertake a greater number of delegated tasks from the board and also challenge, and work with the executive, on material ahead of board meetings. This has led to improved discussions at board level and a growing confidence in a committee able to scrutinise appropriate detailed issues in advance/on behalf of the board.

The remuneration committee met once during 2014/15 and its membership comprises four trustees (including the NHS Providers vice-chair). The NHS Providers chair has a standing invitation to attend and the meetings are also attended by the chief executive and the director of development and operations – neither they, nor the NHS Providers chair participate in the committee's discussions of their individual pay or fees. A detailed remuneration report including further information on the role of the remuneration committee and its work in 2014/15 can be found on pages 7 to 9.

Attendance at both the finance and general purposes committee and the remuneration committee are set out below.

Finance and general purposes committee

NAME	ATTENDANCE
J Anderson	4 / 6
C Beardshaw	6 / 6
S Betney (co-opted finance director)	2 / 2
W Hancock	1 / 3
P Herring	3 / 6
K Morris (chair to June 2014)	1 / 2
E Padmore (chair from June 2014)	6 / 6
T Smart	4 / 6

Remuneration committee

NAME	ATTENDANCE
E Buggins	1 / 1
T Cahill	1 / 1
S Davis	1 / 1
T Spotswood (chair)	1 / 1

Other board sub-committees are formed periodically on a 'task and finish' basis, carrying out specific pieces of work as delegated by the NHS Providers board.

RISK MANAGEMENT

Effective risk management is a key priority for the organisation, ensuring that NHS Providers is able to manage its risks to the standard the organisation believes is crucial to its position as an adviser to members on governance matters.

Day-to-day responsibility for operational risk lies with the managers and staff responsible for the organisation's operations. All risks are documented in a full risk register which is reviewed and updated on a regular basis by the senior management team of the organisation and the finance and general purposes committee. The trustees are responsible for considering the overall strategic risks and for monitoring the status of any significant operational risks with, as mentioned at page 5, the finance and general purposes committee considering specific risks in more detail. The board often considers one of the key areas of risk to the organisation – reputation – as part of its discussions around its strategic approach to health policy and the challenges faced by members.

PARTNERSHIPS

The organisation must maintain a high quality staff team in order to best serve its members but, as a charity, it also seeks to provide services in the most efficient and cost effective way for members. In many cases this means working with external expert partners to deliver all or part of some of the activities undertaken. In accordance with good governance principles, as far as practicable, such work is put out for tender.

EMPLOYEES

As a membership organisation, NHS Providers is a service-based business, and its employees are at the core of all the organisation's activities.

In order to support its members, in line with the charitable objects set out at page 4, the organisation

needs to maintain a team of expert specialist staff covering areas as diverse as governance, benchmarking, clinical and functional networks, healthcare policy and economics.

Alongside recruiting high quality individuals NHS Providers is keen to promote continuous development to ensure employees have the opportunity to develop their skills. Employee training and development needs are reviewed at least twice a year as part of an annual appraisal cycle.

A full remuneration report is set out below.

REMUNERATION REPORT

STATEMENT OF GENERAL APPROACH TO REMUNERATION AND GOVERNANCE

NHS Providers ensures that its staff are remunerated fairly and in a way that allows the organisation to attract and retain people with the skills needed to deliver its charitable objects. To ensure this report meets the requirements of both the Charities SORP and the guidance recently published by the National Council for Voluntary Organisations it has been reviewed against these requirements by the chair, chief executive, directors and the finance and general purposes committee.

REMUNERATION COMMITTEE

NHS Providers has a remuneration committee which, in 2014/15, met once and transacted other business via correspondence. This committee is chaired by a trustee and is comprised of three additional trustees, including the organisation's vice chair. The NHS Providers chair, chief executive and director of operations are invited to attend but are excluded from discussions of their individual pay/fees.

The main responsibilities of the committee are to:

- set the overall pay policy for the organisation as a whole and consider regular reports on the operation of that policy, particularly in relation to pay for staff other than the directors;
- determine the remuneration package of the individual directors, on the recommendation of the chief executive and the chair;
- determine the remuneration package of the chief executive, on the recommendation of the chair;
- set the fees of the chair; and
- ensure that contractual terms on termination are fair to the individual and the charity, that poor performance is not rewarded and a duty to mitigate loss is recognised.

The remuneration policy aims to ensure that the chief executive, directors and other staff have appropriate incentives to encourage enhanced individual performance and are, in a fair and responsible manner, rewarded for their contributions to the success of NHS Providers. This recognises that delivery of NHS Providers charitable vision and purpose is almost wholly dependent on the performance of its staff, with remuneration being the largest single element of charitable expenditure.

The remuneration policy is reviewed regularly. This includes comparisons with similar membership organisations and the wider charitable sector as well as being sensitive to the remuneration approach of our members, pay and employment conditions in the NHS and general approaches to charitable sector pay.

2014/15 APPROACH TO PAY STAFF PAY

Staff are primarily policy and communications experts, recruited from these sectors, with administration, support, event management and corporate services staff recruited from a wide range of different sectors. The organisation recruits relatively few of its staff directly from NHS frontline organisations. NHS Providers is committed to paying all staff the London living wage, currently set at £17,843. The organisation's lowest salary in 2014/15 was £25,140.

Staff roles below director level are allocated onto one of seven pay spines. Prior to 2014/15 there was an annual automatic advancement of 3.8 per cent. A significant reduction has been negotiated with staff as this position was recognised as not sustainable. Annual increments are now set at 1.9 per cent, with the award of this amount dependent on performance assessed against a set of agreed criteria and moderated by the directors and the wider senior management team.

Salaries, at all levels, are regularly benchmarked every two to three years against those offered by similar organisations to ensure competitiveness. The last review carried out by CELRE in December 2013 suggested that NHS Providers "appears to be well market-aligned with its present pay levels". The next benchmarking review will take place during 2015/16. No bonuses are paid to any members of staff.

The ratio of salary between the organisation's highest and lowest paid member of staff is 1:7.5 with the ratio between its highest and median salary being 1:4.

CHIEF EXECUTIVE AND DIRECTOR PAY

The remuneration committee sets chief executive and individual director pay each year taking account of individual and organisational performance. The remuneration committee is provided with information to ensure awareness of published salary rates for roles in similar organisations such as the Local Government Association and the NHS Confederation and, in the case of the chief executive, the salaries paid to chief executives of member organisations and relevant arms length bodies.

The results of the pay policy in relation to total remuneration, including salary and pension contributions, for 2014/15 and 2013/14 are reflected in the table on page 9.

CHAIR'S FEES

The fees paid to the chair⁴ of NHS Providers are reviewed annually by the remuneration committee and reflect both personal and organisational performance. They are benchmarked against:

- chair fees in similar organisations such as the NHS Confederation;
- chair fees of foundation trust members; and
- chair or chair equivalent fees for the organisation's key stakeholders.

PENSIONS AND TOTAL REMUNERATION PACKAGE

The organisation makes a contribution of nine per cent (staff contributing six per cent) of salary to a defined contribution pension scheme for all employees who wish to receive it. There are also a range of other benefits available to all employees including non-contributory life-assurance cover; season ticket loans; childcare vouchers (via a salary sacrifice scheme); free health checks; and a cycle to work scheme.

IMPACT OF REMUNERATION POLICY

NHS Providers has built and maintained a strong team of expert specialist staff who deliver a diverse and wide range of work. The success of the team, and NHS Providers as an employer, is reflected in a range of different evidence including:

- 90 per cent overall member satisfaction with our work, described by Ipsos MORI as a particularly high score for an organisation of our type;
- staff perceived as supportive, professional and knowledgeable with members being positive about their relationship with NHS Providers (Ipsos MORI member survey); and
- 97 per cent of staff being satisfied with their job; 100 per cent thinking their colleagues are committed to delivering high quality services and 100 per cent recommending it as a good place to work (NHS Providers staff survey).

4 During 2014/15 the chair was granted a period of compassionate leave in which she worked the equivalent of one day a week. The NHS Providers board agreed to continue paying the chair the agreed fees and, in return, the chair will work 30 extra days in 2015/16 to compensate the organisation.

SUMMARY OF REMUNERATION - INDIVIDUAL HIGHEST PAID STAFF

	2013/14 remuneration		2014/15 remuneration	
	Salary	Pension contribution	Salary	Pension contribution
Dame Gill Morgan chair	£13,750* (£55,000)	£0	£55,000	£0
Chris Hopson chief executive	£200,000	£18,000	£200,000	£18,000
Ben Clacy director of development and operations	£33,750* (£90,000)	£3,038 (£8,100)	£90,900	£8,181
Saffron Cordery director of policy and strategy	£95,034	£8,553	£95,984	£8,639
Nick Samuels director of communications	£82,500* (£90,000)	£7,425 (£8,100)	£90,900	£8,181

* employed for only part of the full financial year.

Please note:

Nick Samuels worked on a contractor basis from May - December 2013 whilst finishing other contractual obligations.
Nick became a permanent member of NHS Providers staff from January 2014.

Aside from Gill Morgan no other trustees received remuneration or were reimbursed expenses incurred in the course of acting on behalf of the charity.

For information, C Hopson, S Cordery, B Clacy and N Samuels were all employees and directors of the company during 2014/15.

The number of employees whose emoluments exceeded £60,000 for the period was:	2015	2014
£60,000 – £70,000	3	2
£70,001 – £80,000	–	1
£80,001 – £100,000	3	1
£100,001 – £200,000	1	1

During the year retirement benefits accrued to six higher paid employees under a defined contribution scheme and to one higher paid employee under the NHS defined benefit pension scheme.

OBJECTIVES, ACTIVITIES, ACHIEVEMENTS AND PERFORMANCE

VISION, MISSION AND STRATEGIC OBJECTIVES

To enable members to provide high quality healthcare within the NHS that relieves sickness and protects public health, the organisation has an agreed vision, mission, and strategy to direct and prioritise its activities. This strategy covers a three year period from 2013/14 to 2015/16 inclusive.

VISION

An outstanding membership organisation and trade association for all NHS providers, unrivalled in the influence, voice and support we offer our members.

THREE YEAR MISSION

Support members to create the sustainable new patterns of high quality local healthcare delivery their patients and service users need and help develop the right NHS future vision to enable this transformation.

THREE YEAR STRATEGIC OBJECTIVES

- To shape the financial, policy, quality and regulatory system in which our members operate - **influence**
- To lead a public provider movement that is both diverse and united, championing our members' interests in the media, government, the NHS and the wider healthcare community - **voice**
- To help our members drive improvement through effective shared development, support and learning - **support**
- While creating an organisation that is fit for purpose and provides outstanding value for money to our members – **professional NHS Providers**

During a period in which public providers will face unprecedented financial, structural and reputational challenges.

KEY ACHIEVEMENTS

2014/15 has been a successful year for NHS Providers, building on the strong foundations formed in 2013/14. The organisation has delivered its key priorities for 2014/15 as identified in the trustees' annual report and accounts for 2013/14, as set out below. Each of the following four sections link back to the four key strategic objectives highlighted above:

INFLUENCE

- During the year the organisation held over 323 meetings with key national opinion formers (an increase of around 30 per cent on last year), and responded to over 50 policy consultations representing member views.
- NHS Providers has run high level campaigns on a number of topics including:
 - arguing that NHS providers need to be appropriately paid for the activity they undertake within the context of an appropriately funded NHS. The organisation played a key role in securing an extra £500 million for NHS providers through the final 2015/16 tariff settlement and historically high levels of extra winter resilience funding in 2014/15;
 - a range of workforce issues to ensure that NHS providers have the right number of staff with the right pay, terms and conditions needed to deliver outstanding care 24 hours a day, 365 days a year;
 - ensuring that the regulatory regime for our members is proportionate and risk based: our representations in 2014/15, for example, helped determine the shape of the CQC inspection regime and the Monitor risk assessment framework.
- As an organisation NHS Providers has developed stronger and deeper relationships with government including ministers and Department of Health officials and senior leaders in the department's arms length bodies, enabling it to influence effectively on behalf of its members. This was reflected in the significant increase in positive stakeholder perceptions in the stakeholder research

by Ipsos MORI where NHS Providers was cited as offering a constructive dialogue despite differences in policy perspectives; and being seen as an evidence based organisation.

VOICE

- NHS Providers has, again, significantly increased its media profile with 750 media mentions during the year – up from 235 in 2013/14 – a rise of over 300 per cent.
- NHS Providers has become one of the “go to” organisations for stakeholder input on key policy initiatives. The organisation is represented on over 25 national advisory groups including all the key new NHS *Five year forward view* governance boards and NHS England's/Monitor's payment and pricing experts group.
- The recent member and stakeholder surveys highlighted that the organisation has successfully balanced being a supportive system influencer with being a muscular and effective advocate of our members' interests.
- The organisation successfully rebranded its operating name in December 2014, clarifying its remit as representing the whole NHS provider sector whilst retaining our key role of promoting the interests of foundation trusts and the FT model itself. Feedback has highlighted that the move to *NHS Providers* positioned the organisation as more inclusive.

SUPPORT

- NHS Providers has increased its capacity to deliver a range of high quality events to members including:
 - over 110 events, attended by more than 4,300 delegates (up from 3,700 in the previous year). This is alongside improving quality scores with 90 per cent of respondents rating events as either good or excellent and 98 per cent of attendees saying they would recommend our events to others. These include, amongst other events: our annual conference attended by more delegates than ever; our network events including new networks for operations and strategy directors; and a new quality conference for the first time.

- Following an approach by the Foundation Trust Governors' Association (FTGA) and an FTGA members vote, the FTGA has now become part of NHS Providers. This has led to an expanded and more cohesive offering to governors – a cornerstone of the FT model – alongside the continued delivery of the GovernWell governor training programme which has trained over 615 governors, 98 per cent of whom have recommended the programme. The joining of the FTGA with NHS Providers also led to assets of £131,391 being received by NHS Providers. This has been shown as a donation of restricted funds in the accounts in accordance with the Charities SORP.
- The organisation has developed its understanding of issues that are key to its membership, expanding its support offer. For example in 2014/15 NHS Providers launched a well received publication on the race equality opportunities for NHS provider boards and ran two highly successful events with The King's Fund on leading cultural change attended by nearly 100 delegates.

PROFESSIONAL NHS PROVIDERS

- NHS Providers achieved an 8.5 per cent increase in income gained from non-member sources for 2014/15.
- In response to the organisation's annual membership survey 90 per cent of member survey respondents said they were very or fairly satisfied with the work of the organisation and with 98 per cent saying that membership is very or fairly important to them.
- During 2014/15 NHS Providers has grown and expanded its staff team to deliver a much wider range of activities including an increased sector focus by working with specialists in the field and engaging more effectively with members.

PLANS FOR THE FUTURE

NHS Providers is entering the final year of its three year strategy which runs from 2013/14 – 2015/16. The organisation's business plan priorities for 2015/16, in the context of that three year strategy are as follows:

INFLUENCE

NHS Providers' three year strategic objective is to work with stakeholders, policy makers, opinion formers and partners to shape the financial, policy, quality and regulatory system in which its members operate. **In 2015/16**, using the unique experience and perspective of members, the organisation will: continue to campaign on the **key NHS system issues** (see table on page 13); shape the debate on **new ways of delivering care**; and influence the **new government's policies for health and social care**, building on the published *Programme for the next parliament*.

VOICE

The organisation's three year strategic objective is to lead a public provider movement that is both diverse and united, championing members' interests in the media, government, the NHS and wider healthcare community. This recognises that NHS Providers represents ambulance, community and mental health as well as acute and specialist hospital trusts. **In 2015/16** the organisation will further build on its position as the "**turn-to" voice of NHS providers**" through effective media, stakeholder and communications strategies. NHS Providers will also continue to build an **enhanced digital presence** to underpin this activity and ensure the voice of all parts of the provider sector are fully heard.

SUPPORT

NHS Providers three-year strategic objective is to help its members drive improvement through effective shared development, support and learning. **In 2015/16**, the organisation will deliver a **comprehensive conference and events programme**, an **effective member support programme** and an **enhanced governor**

support offer, building on having joined forces with the Foundation Trust Governors Association (FTGA). NHS Providers also wants to explore how to play its part in a **sector-led approach to improvement** and how to support all members to deliver their **wider system responsibilities** in areas like equality and diversity. Keynote events – such as the annual conference and exhibition, governance, quality and governor conferences and annual lecture - will be underpinned by extensive and established networks, aspirant preparation and governor support programmes. The organisation will also deepen its sector focus for mental health, community and ambulance trusts.

PROFESSIONAL NHS PROVIDERS

NHS Providers three-year strategic objective is to develop an organisation that is fit for purpose and provides outstanding value for money to members. **In 2015/16** the organisation will **develop its organisational capability** and **develop a commercial strategy** to deliver growth in revenue from non-member sources. NHS providers will continue to define its ultimate success by how effectively members' needs are met.

FURTHER INFORMATION AND CONTACT DETAILS

Chris Hopson, chief executive
NHS Providers
(registered as Foundation Trust Network)
One Birdcage Walk
London SW1H 9JJ

Tel: 020 7304 6977
Email: enquiries@nhsproviders.org
Web: www.nhsproviders.org

A TABLE OF NHS PROVIDERS PRIORITIES 2015/16

INFLUENCE	SUPPORT
<p>1 Continue to address key system issues from a provider perspective:</p> <ul style="list-style-type: none"> ● finance and provider sustainability ● provider regulation (including competition) ● governance and the FT model ● workforce reform ● future of commissioning ● quality <p>2 Shape the debate on new ways of delivering care reflecting perspectives of acute, ambulance, community, mental health and specialist hospital trusts:</p> <ul style="list-style-type: none"> ● integration ● new organisational forms including the Dalton Review ● FT pipeline ● urgent and emergency care ● reconfiguration/service change <p>3 Influence policy development under the new government based on the NHS Providers published <i>Programme for the next parliament</i>:</p> <ul style="list-style-type: none"> ● early ministerial briefing, thought forming and legislation ● 2015 spending review and NHS finance settlement for the next five years ● <i>Five year forward view</i> implementation 	<p>6 Deliver a comprehensive conference and events programme:</p> <ul style="list-style-type: none"> ● annual conference and exhibition 2015 ● governance conference ● quality conference ● annual lecture 2015 ● dinner programme <p>7 Deliver an effective member support programme:</p> <ul style="list-style-type: none"> ● preparation programme for aspirant trusts ● deliver 40+ different member network meetings ● deepen sector specific support offer to acute, ambulance, community, mental health and specialist hospital trusts <p>8 Deliver an enhanced governor support offer incorporating GovernWell training</p> <p>9 Explore how to play a significant part in a sector led improvement plan/programme</p> <p>10 Explore how to support members to deliver their wider system responsibilities:</p> <ul style="list-style-type: none"> ● equality and diversity ● cross-sector mental health responsibilities such as acute hospital psychiatric liaison
VOICE	PROFESSIONAL NHS PROVIDERS
<p>4 Continue building status as the "turn-to" voice of NHS providers through effective media, stakeholder and communications strategies, ensuring the distinctive voices of acute, ambulance, community, mental health and specialist hospital trusts are also properly heard</p> <p>5 Continue to build an enhanced digital presence to underpin all communication and engagement activity</p>	<p>11 Develop a commercial strategy to deliver a growth in revenue</p> <p>12 Develop organisational capability:</p> <ul style="list-style-type: none"> ● improve strategic membership management (including agreeing appropriate regional activity) ● develop a new three year strategy ● complete four year governance review ● agree steps to build influence ● develop an information strategy

FINANCIAL REVIEW

NHS Providers, as a membership organisation, receives the majority of its recurring income from membership subscriptions. Additional annual income is derived from workshops and training services to members - as well as from commercial agreements including (but not limited to) event sponsorship. NHS Providers does not raise funds directly from the public, although it does accept unsolicited donations. NHS Providers received grant income from the NHS Trust Development Authority to run the preparation programme. During the year under review, NHS Providers incorporated under its auspices the activities of the FTGA, which further enhances our member offering to foundation trust governors in terms of their development and support. The receipt of the related net assets is included as donations in incoming resources.

Under its current strategy, NHS Providers aims to:

- fully utilise its subscription income in the delivery of its services to members;
- fully utilise any grant income in accordance with the terms of its grant agreement; and
- make a surplus or to achieve break-even on the provision of any additional commercial services to members, such as workshops and training.

Incoming resources for the year ended 31st March 2015 totalled £4,239,077 (2014: £3,309,690) less resources expended of £4,166,358 (2014: £3,877,585), generating a surplus of £72,719 against a prior year deficit of £567,895 and a budgeted deficit of £249,000. The surplus against budget was achieved through increased revenue from membership, income from FTGA and lower than budgeted costs. Income for 2015 was 28 per cent up on 2014, with a total increase in costs of 7.5 per cent against 2014 figures. This reflects the growth in membership during 2015, increase in membership subscription tariffs and the strategy of investing in improving our infrastructure during 2014 which then levelled off in 2015.

RESERVES POLICY

In the trustees' view the reserves should provide the charity with adequate financial stability and the means for it to meet its charitable objectives should a shortfall in income occur, taking into account potential risks. The reserves are equally maintained to further the strategic aims of the charity and to maximise opportunities relating to business growth, subject to due diligence checking and vetting by the finance and general purposes committee. In the event that the charity were to cease, the reserves are required to meet all necessary obligations and commitments to staff and third parties. The policy was set out by the board in November 2013.

To meet the above objectives, the target level of free reserves was set at £950,000 for 2014/2015. This was set at a level equivalent to six months' salary and an estimate of the costs of winding up. The level of free reserves for the group is defined as general unrestricted funds excluding tangible fixed assets which cannot be readily liquidated.

In accordance with the target level of reserves, the group retained free reserves of £1,021,278 for the year ended 31 March 2015.

The finance and general purposes committee will review the amount of reserves on an annual basis to ensure that they are sufficient to meet the group's continuing obligations.

STATEMENT OF TRUSTEES' RESPONSIBILITIES

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

Company law requires trustees to prepare financial statements for each financial year to provide a true and fair view of the state of the affairs of the charitable company and the group and of the incoming resources and application of resources, including the income and expenditure, of the group for that period.

NHS PROVIDERS TRUSTEES' REPORT

for the year ended 31 March 2015

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' Statement of Practice (SORP);
- make judgements and estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements; and
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company and group 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 charitable company and group and enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charitable company and group, and taking reasonable steps for the prevention and detection of fraud and other irregularities.

In so far as the trustees are aware:

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

The financial statements and this report have been prepared in accordance with current legislation, the Statement of Recommended practice 'Accounting and Reporting by Charities' (March 2005) and with the governing document.

These financial statements have been prepared in accordance with the special provisions available to small companies under Part 15 of the Companies Act 2006 and the Financial Reporting Standard for Smaller Entities (FRSSE), (effective April 2008).

These accounts were approved by the NHS Providers board on 4 November 2015 and signed on its behalf on 1 December 2015 by:



Dame Gill Morgan

Chair, NHS Providers

INDEPENDENT AUDITORS' REPORT TO MEMBERS OF NHS PROVIDERS

We have audited the financial statements of NHS Providers for the year ended 31 March 2015 set out on pages 18 to 29. 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 company's members and the trustees, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006. Our audit work has been undertaken so that we might state to the company's members and 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 company, the company's members and 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 (who are also the directors of the company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view.

We have been appointed as auditors under the Charities Act 2011 and the Companies Act 2006 and report in accordance with those Acts. Our responsibility is to audit and express an opinion on the financial statements 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 FINANCIAL STATEMENTS

An audit involves obtaining evidence about the amounts and disclosures in the financial statements sufficient to give reasonable assurance that the financial statements are free from material misstatement, whether caused by fraud or error. This includes an assessment of: whether the accounting policies are appropriate to the group's and the parent 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 financial statements. In addition, we read all the financial and non-financial information in the trustees' report to identify material inconsistencies with the audited financial statements 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 THE FINANCIAL STATEMENTS

In our opinion the financial statements:

- give a true and fair view of the state of the group's and the parent charity's affairs as at 31 March 2015 and of the group's incoming resources and application of resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006 and the Charities Act 2011.

OPINION ON OTHER REQUIREMENT OF THE COMPANIES ACT 2006

In our opinion the information given in the trustees' annual report for the financial year for which the financial statements are prepared is consistent with the financial statements.

MATTERS ON WHICH WE ARE REQUIRED TO REPORT BY EXCEPTION

We have nothing to report in respect of the following matters where the Companies Act 2006 and the Charities Act 2011 require us to report to you if, in our opinion:

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



Liz Hazell
Senior statutory auditor

For and on behalf of Saffery Champness,
signed on 4 December 2015.

Saffery Champness
Chartered Accountants
Statutory Auditors
Lion House
Red Lion Street
London WC1R 4GB

CONSOLIDATED STATEMENT OF FINANCIAL ACTIVITIES

(INCORPORATING THE INCOME AND EXPENDITURE ACCOUNT)
FOR THE YEAR ENDED 31 MARCH 2015

Income and expenditure		£	£	£	£
<i>Incoming resources</i>		Unrestricted funds	Restricted funds	2015	2014
<i>Incoming resources from generated funds</i>	Note				
Grants	2	–	321,000	321,000	220,000
Donations	2	–	131,891	131,891	–
Contract income	2	25,000	–	25,000	72,500
Subscriptions	2	3,107,650	–	3,107,650	2,277,839
Benchmarking	2	–	–	–	(7,500)
Course fees	2	161,628	–	161,628	175,029
Trading income	2	486,430	–	486,430	554,623
		3,780,708	452,891	4,233,599	3,292,491
<i>Investment income</i>					
Interest received		5,478	–	5,478	17,199
Total incoming resources		3,786,186	452,891	4,239,077	3,309,690
<i>Resources expended</i>					
<i>Charitable activities</i>		3,281,462	323,707	3,605,169	3,186,050
<i>Governance costs</i>		220,451	–	220,451	279,304
<i>Trading activities</i>		340,738	–	340,738	412,231
Total resources expended	5	3,842,651	323,707	4,166,358	3,877,585
<i>Net income/(expenditure) for the year</i>					
	6	(56,465)	129,184	72,719	(567,895)
Total funds brought forward	11	1,195,040	32,907	1,227,947	1,795,842
Total funds carried forward	11	1,138,575	162,091	1,300,666	1,227,947

All gains and losses arising in the year are included in the statement of financial activities and relate to continuing operations.

The notes on pages 21 - 29 form part of these financial statements.

GROUP BALANCE SHEET AS AT 31 MARCH 2015

	Note	£ 2015	£ 2014
Fixed assets			
Tangible assets	7	117,297	153,824
Current assets			
Debtors	9	110,339	3,256,320
Cash at bank and in hand		1,569,536	1,230,595
		1,679,875	4,486,915
Creditors			
Amounts falling due within one year	10	(496,506)	(3,412,792)
Net current assets		1,183,369	1,074,123
Net assets		1,300,666	1,227,947
Funds			
Restricted funds	11	162,091	32,907
Unrestricted funds	11	1,138,575	1,195,040
		1,300,666	1,227,947

The notes on pages 21 - 29 form part of these financial statements.

These accounts have been prepared in accordance with the special provisions of Part 15 of the Companies Act 2006 relating to small companies and in accordance with the Financial Reporting Standard for Smaller Entities (effective April 2008).

Approved, and authorised for distribution, by the NHS Providers board of trustees on 4 November 2015 and signed on its behalf on 1 December 2015 by:

Dame Gill Morgan
Chair

Registered Company No. 07525114

CHARITY BALANCE SHEET AS AT 31 MARCH 2015

	Note	£ 2015	£ 2014
Fixed assets			
Tangible assets	7	117,297	153,824
Investments	8	1	1
		117,298	153,825
Current assets			
Debtors	9	791,601	4,394,753
Cash at bank and in hand		864,478	82,882
		1,656,079	4,477,635
Creditors			
Amounts falling due within one year	10	(472,711)	(3,403,513)
Net current assets		1,183,368	1,074,122
Net assets		1,300,666	1,227,947
Funds			
Restricted funds	11	162,091	32,907
Unrestricted funds	11	1,138,575	1,195,040
		1,300,666	1,227,947

The notes on pages 21 - 29 form part of these financial statements.

These accounts have been prepared in accordance with the special provisions of Part 15 of the Companies Act 2006 relating to small companies and in accordance with the Financial Reporting Standard for Smaller Entities (effective April 2008).

Approved, and authorised for distribution, by the NHS Providers board of trustees on 4 November 2015 and signed on its behalf on 1 December 2015 by:

Dame Gill Morgan
Chair

Registered Company No. 07525114

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2015

1. ACCOUNTING POLICIES

Accounting convention

These financial statements have been prepared on the going concern basis, under the historical cost convention and in accordance with the provision of the Companies Act 2006, the revised Statement of Recommended Practice (SORP 2005) "Accounting and Reporting by Charities" and the Financial Reporting Standard for Smaller Entities (effective April 2008).

The charity has adjusted the formats from those prescribed by the Companies Act 2006 to include headings that are relevant to its activities to enable it to show a true and fair view.

The Statement of Financial Activities (SOFA) and Balance Sheet consolidate the financial statements of the charitable company and its subsidiary undertaking. The results of the subsidiary are consolidated on a line by line basis.

No separate SOFA has been presented for the charity alone as permitted by section 408 of the Companies Act 2006 and paragraph 304 of the SORP.

Incoming resources

Subscription and other incoming resources are accounted for on a receivable basis.

Accrued and deferred income

Income is recognised in the SOFA in accordance with the SORP income recognition criteria of entitlement, certainty and measurement. For 2015, subscription income is invoiced in the subscription year and therefore recognised in full within the financial year. For 2014, subscription income was invoiced in advance and was therefore treated as deferred income upon receipt. Income relating to the financial year which has not been received or invoiced is recognised as accrued income. Grant and donation income are recognised when the SORP income recognition criteria are fulfilled.

Classification of expenditure

Liabilities are recognised as resources expended as soon as there is a legal or constructive obligation committing the charity to the expenditure.

All expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all costs related to the category.

Expenditure on charitable activities comprises those costs incurred supporting and developing its members, promoting shared learning and lobbying on behalf of its members. It includes both costs that can be allocated directly to those activities and those costs of an indirect nature to support them.

Governance costs are those incurred in the governance of the charity and are primarily associated with the constitutional and statutory requirements. Expenditure is shown net of VAT and any irrecoverable VAT is shown separately in expenditure.

Support costs are allocated between the expenditure categories of the SOFA on a basis designed to reflect the use of the resource. Costs relating to a particular activity are allocated directly.

Support costs are divided between the unrestricted and the restricted funds, with the restricted funds being charged with expenses specifically incurred in fulfilling the restrictions imposed; all other expenses are charged to the unrestricted funds.

Pension costs

The charity contributes to the NHS Pensions Scheme which is an unfunded scheme and contributions are calculated so as to spread the cost of pensions over employees' working lives with NHS Providers in such a way that the pension cost is a substantially level percentage of current and future pensionable payroll. The scheme is considered to be a multi-employer defined benefit scheme as the charity is unable to identify its share of the underlying assets and liabilities. Therefore, the contributions, which are fixed annually and payable monthly, are charged to the SOFA when payable and the charity has no further potential liability.

The charity contributes to a defined contribution scheme for members of staff. The charge in the accounts represents the contributions payable to the scheme in the financial period.

Fund accounting

Unrestricted funds are available for use at the discretion of the trustees in furtherance of the general objects of the charity.

Restricted funds are funds which are only to be used for the purpose as determined by the donor.

Tangible fixed assets and depreciation

Tangible fixed assets, where the value is over £500, are capitalised at cost. They are then depreciated at rates calculated to write off the cost less estimated residual value of each asset over its expected useful life, as follows:

Short leasehold property improvements	20 per cent straight line basis
Fixtures and fittings	Over three years straight line basis
Office equipment	Over three years straight line basis
Computer equipment	Over three years straight line basis

Operating leases

Rentals payable under operating leases are charged to the SOFA over the term of the lease.

Taxation

No provision for taxation is included in the accounts as the charitable company is entitled to exemption from tax afforded by Section 505 of the Income and Corporation Taxes Act 1988.

2. INCOMING RESOURCES

	£ Unrestricted funds	£ Restricted funds	£ 2015	£ 2014
Grants				
NHS Trust Development Authority	–	321,000	321,000	220,000
NHS Leadership Academy	–	–	–	72,500
	–	321,000	321,000	292,500
Donations				
FTGA - governor support	–	131,891	131,891	–
	–	131,891	131,891	–
Contract income				
Department of Health	25,000	–	25,000	–
	25,000	–	25,000	–
Foundations and trusts				
Subscriptions	3,107,650	–	3,107,650	2,277,839
Benchmarking	–	–	–	(7,500)
Course fees (CPD's etc)	161,628	–	161,628	175,029
Trading income	486,430	–	486,430	554,623
	3,755,708	–	3,755,708	2,999,991
	3,780,708	452,891	4,233,599	3,292,491

3. TRUSTEES

One trustee, Gill Morgan, was reimbursed for expenses relating to travel and accommodation amounting to £7,698 (2014: £916) and remuneration of £55,000 (2014: £13,750). No other trustees received remuneration for services rendered or reclaimed expenses. The company incurred a cost of £580 in respect of annual indemnity insurance for the trustees.

4. DIRECTORS' REMUNERATION

	£ 2015	£ 2014
Directors' emoluments (see footnote 2 on page 3)	477,874	453,156
Company contributions to pension schemes	43,000	37,016
Amounts paid to third parties in respect of director's services	–	–

Three of the directors were in the NHS Pension scheme which is a defined benefit pension scheme (2014-2) and one was in a personal defined contribution pension scheme to which the charity contributes (2014-1).

5. ANALYSIS OF TOTAL RESOURCES EXPENDED

a. Summary	£ Staff costs	£ Other costs	£ Total 2015	£ Total 2014
Charitable activities (note c)	2,217,395	1,387,774	3,605,169	3,186,050
Governance costs (note d)	165,481	54,970	220,451	279,304
Trading activities (note e)	14,468	326,270	340,738	412,231
	2,397,344 (note b)	1,769,014 (note c, d and e)	4,166,358	3,877,585

b. Staff costs	£ 2015	£ 2014
Wages and salaries	1,860,359	1,373,240
Social security costs	204,937	161,001
Defined contribution pension costs	149,833	77,373
Defined benefit pension costs	15,126	16,088
	2,230,255	1,627,702
Other staff costs	167,089	223,344
	2,397,344	1,851,046
Directors' emoluments (including pension contributions)	477,784	453,156

The average number of employees for the year was 36 (2014: 27). The bandings for employees who received more than £60,000 is on page 9.

c. Operating costs (charitable activities)	£ 2015	£ 2014
Members events and meetings	179,552	179,362
Development and engagement incl network costs	194,973	208,534
Irrecoverable VAT	165,481	170,716
Consultancy	387,033	494,568
Office running costs	81,907	60,694
Other	114,058	81,774
Publication and media support	53,804	77,819
Rent and service charges	135,510	134,738
Website/IT	75,456	112,328
	1,387,774	1,520,533

d. Operating costs (Governance costs)	£ 2015	£ 2014
Auditors' remuneration – current year	9,000	10,755
Auditors' remuneration – non audit services (fees paid to former auditors)	26,307	59,984
Professional fees	16,644	7,831
Irrecoverable VAT	–	14,568
Support costs	3,019	882
	54,970	94,020

Professional fees represent legal costs incurred relating to the acquisition of the Foundation Trust Governors' Association and on other general corporate affairs.

e. Operating costs (trading activities)	£ 2015	£ 2014
Auditors' remuneration – current year	3,000	3,000
Accountancy services – non audit related (fees paid to former auditors)	–	8,801
Annual conference and exhibition	317,083	388,124
Other	6,187	12,061
	326,270	411,986

6. NET INCOME/(EXPENDITURE) FOR THE YEAR

is stated after charging	£ 2015	£ 2014
Auditors' remuneration	12,000	13,755
Accountancy services – non audit related (fees paid to former auditors)	26,307	68,785
Depreciation	75,518	47,410

7. FIXED ASSETS - GROUP AND CHARITY

	Leasehold property improvements	Fixtures and fittings	Office equipment	Computer equipment	Total
Cost					
At 1 April 2014	47,084	53,919	30,219	85,906	217,128
Additions	–	21,877	1,142	15,972	38,991
At 31 March 2015	47,084	75,796	31,361	101,878	256,119
Depreciation					
At 1 April 2014	14,525	22,370	12,347	14,062	63,304
Charge for the year	9,417	21,867	10,352	33,882	75,517
At 31 March 2015	23,942	44,237	22,699	47,944	138,822
Net book value at 31 March 2015	23,142	31,559	8,662	53,934	117,297
Net book value at 31 March 2014	32,559	31,549	17,872	71,844	153,824

8. FIXED ASSETS INVESTMENTS

The charity's investment at the balance sheet date in the share capital of companies include the following:

FTN Trading Limited

Nature of business	To establish and run a conference for foundation trusts
Country of registration	United Kingdom
Class of share	Ordinary - £1
% - holding	100
Aggregate capital and reserves	£1

The financial results of the subsidiary are as follows:

	£ 2015	£ 2014
Income	486,430	554,623
Expenditure	340,738	412,231
Operating profit	145,692	142,392
Paid under Gift Aid to NHS Providers	145,692	142,392
Surplus/(Deficit) for year	–	–

9. DEBTORS

	Group	Charity	
	£ 2015	£ 2014	£ 2015
Subscription due	20,710	3,240,638	14,441
Other debtors	9,782	6,646	9,782
Prepayments	79,847	9,036	79,847
Amounts due from FTN Trading Limited	–	–	687,531
	110,339	3,256,320	1,190,766
			4,394,753

The amounts due from FTN Trading Limited represent the net position of subscriptions income received by FTN Trading on behalf of NHS Providers. The balance also includes any donations due to the charity by its subsidiary.

10. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	Group	Charity	
	£ 2015	£ 2014	
Trade creditors	269,648	94,471	248,854
Social security and other taxes	21,948	87,599	21,948
Other creditors	17,188	13,343	17,188
Accruals	187,721	71,129	184,721
Deferred income	–	3,146,250	–
	496,506	3,412,792	472,711
	3,403,513		

The deferred income balance in 2014 relates to annual membership income raised by the group, any income which related to a later period has been deferred. All deferred income relating arising in 2014 was released during 2015. A deferred income balance does not arise in 2015 as subscription income is now invoiced in the corresponding subscription year.

11. RESTRICTED AND UNRESTRICTED FUNDS

Group	£ Brought forward	£ Incoming resources	£ Resources expended	£ Carried forward
Restricted funds				
Preparation programme	32,907	321,000	(323,707)	30,200
Governor support programme	–	131,891	–	131,891
Total restricted funds	32,907	452,891	(323,707)	162,091
Unrestricted funds				
	1,195,040	3,786,186	(3,842,651)	1,138,575
	1,227,947	4,239,077	(4,166,358)	1,300,666

Charity	£ Brought forward	£ Incoming resources	£ Resources expended	£ Carried forward
Restricted funds				
Preparation programme	32,907	321,000	(323,707)	30,200
Governor support programme	–	131,891	–	131,891
Total restricted funds	32,907	452,891	(323,707)	162,091
Unrestricted funds				
	1,195,040	3,786,186	(3,842,651)	1,138,575
	1,227,947	4,239,077	(4,166,358)	1,300,666

The preparation programme represents the income and costs of managing the NHS Trust Development Authority - sponsored programme to provide support and advice to those NHS trusts which are working towards foundation trust status. The governor support programme represents the national training programme for foundation trust governors.

12. ANALYSIS OF NET ASSETS BETWEEN FUNDS

Group	£ Restricted funds	£ Unrestricted funds	£ Total 2015	£ Total 2014
Tangible fixed assets	–	117,297	117,297	153,824
Net current assets	162,091	1,021,278	1,183,369	1,074,123
	162,091	1,138,575	1,300,665	1,227,947

Charity	£ Restricted funds	£ Unrestricted funds	£ Total 2015	£ Total 2014
Tangible fixed assets	–	117,298	117,298	153,825
Net current assets	162,091	1,021,277	1,183,368	1,074,122
	162,091	1,138,575	1,300,665	1,227,947

13. FINANCIAL COMMITMENTS

As at 31 March 2015 the charity was committed to making the following payments under non-cancellable operating leases:

	2015	2014
Operating leases which expire:		
Between two and five years	135,513	135,513

14. LIABILITY OF MEMBERS

At 31 March 2015 the charity had 222 members. The liability of each member to contribute to the assets of the charity is limited to £1.

15. RELATED PARTY TRANSACTIONS

For this year, FTN Trading paid under gift aid a donation of £145,692 (2014: £142,392) to NHS Providers. At the year end NHS Providers was owed £687,531 (£1,190,766) by FTN Trading Limited.

All elected board members are either chairs or chief executives of member organisations. See note three for details of their remuneration and expenses.

There are no other related party transactions during the year.

NHS Providers is the membership organisation and trade association for the NHS acute, ambulance, community and mental health services that treat patients and service users in the NHS. We help those NHS foundation trusts and trusts to deliver high quality, patient focused, care by enabling them to learn from each other, acting as their public voice and helping shape the system in which they operate.

NHS Providers has more than 90 per cent of all NHS foundation trusts and aspirant trusts in membership, collectively accounting for £65 billion of annual expenditure and employing more than 928,000 staff.



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Registered charity 1140900

Registered in England and Wales as company 7525114

Registered Office

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