

## **Annual Report**

## **January 2017 – March 2018**

11-13 Cavendish Square, London W1G 0AN A Company Limited by Guarantee, Registration No. 518623 England Charity Registration No's: 229229 England & Wales, SC044341 Scotland

Igniting leaders, fuelling potential.





Scholars Sandra Mononga, Gerry Bolger and Sarah Noble, Lamp Carrier and Escorts at the 2017 Florence Nightingale Commemoration Service, Westminster Abbey

The Bearer of the Roll, Army Nurse Corporal Alex Young, Royal Centre for Defence Medicine, Queen Alexandra's Royal Army Nursing Corps, is escorted by the three matrons-in-Chief of Her Majesty's Armed Forces





HRH Princess Alexandra, the Hon Lady Ogilvy, is presented with a posie from Euan Primrose at the 2017 service

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**66** For us who nurse, our nursing is a thing which unless we are making progress every year, every month, every week, take my word for it, we are going back...99

Florence Nightingale



## Legal & Administration Information

## Year Ended 31 March 2018

Royal Patron:	HRH Princess Alexandra The Hon Lady Ogilvy KG GCVO
Patron:	Sir Robert Francis QC
President:	Baroness Watkins of Tavistock
Vice Presidents:	Miss Theo Noel Smith The Rt Hon Lord Remnant CVO FCA Mr Bryan Wilson
Honorary Vice Presidents:	Mrs Mary Spinks CBE Mr Geoffrey Walker OBE
Chairman:	Mr Bryan K Sanderson CBE
Vice Chairman:	Mr Richard Beazley (until June 2017) Mr Andrew Andrews MBE (from June 2017)
Treasurer:	Dr Colin L Reeves CBE
Directors:	Professor Martin Bradley Professor Ann Lloyd Keen Mr Peter Siddall Captain Alison Hofman RRC Mr David Hulf Dr Edward Libbey Dame Professor Jill Macleod Clark
Chief Executive:	Professor Elizabeth Robb OBE (until February 2017) Ms Ursula Ward MSc MA (from February 2017)
Deputy Chief Executive:	Dr Abigail Masterson (until July 2017)
Chief Operating Officer:	Professor Greta Westwood (from October 2017)
Head of Corporate Affairs:	Susanna Mead (from September 2017)
Head of Fundraising and Partnerships:	Mr Ian Watson (from November 2017-March 2018)
Office Manager:	Ms Larissa Worwood (until August 17)
Programme Manager:	Mrs Janet Shallow
Events, Marketing and Fundraising:	Ms Rose Woodall Simmons (until October 2017)

Auditors:	Gilbert Allen & Co Churchdown Chambers Bordyke, Tonbridge Kent TN9 1NR
Bankers:	Coutts & Co 440 The Strand London WC2 0QS
	CCLA Charity Funds 80 Cheapside London EC2V 6DZ
	M & G Group PO Box 9039 Chelmsford Essex CM99 2XG
Registered Office:	11-13 Cavendish Square London W1G 0AN
Charity Number:	Registered in England and Wales with Charity Reg No. 229229 and in Scotland with Charity Reg No. SC044341
Company Number:	518623



## **Chairman's Introductions**

I am pleased to report that the Foundation had another good year in which we said farewell to Professor Elizabeth Robb who, as many of you will know, made an enormous contribution to the work and the reputation of the Foundation. Well done Liz! Florence Nightingale would have been proud of you and we shall all miss you. Now we welcome Ursula Ward who has all the skills and experience needed to take us into the next phase of our work.

The need for our work; giving skills, training and recognition to so many of the top nurses in the country becomes more demanding and urgent as the NHS, private and voluntary sectors face the increasing challenge of delivering care on a restricted budget to an aging population. It is not going to get easier and the dispassionate and apolitical role we perform is becoming an essential ingredient in the complex world which constitutes health care.

Learning of course must never replace the passion for caring which Florence Nightingale so memorably demonstrated. Those ideals were as always very much in evidence at our annual service in Westminster Abbey. Particularly in the address from The Very Revd John Hall which was memorable, not only for its content, but also the very real admiration for nursing and midwifery he demonstrated. This year was also special for me, with my Scottish connections, because the students in the procession came from Edinburgh Napier University. Sandra Mononga carried the Lamp supported by Gerry Bolger and Sarah Noble – all three Florence Nightingale scholars. The Bearer of the Roll of Honour was Army Nurse Corporal Alex Young from Queen Alexandra's Royal Army Nursing Corps. The reading was by Professor Jane Cummings, Chief Nursing Officer England.

Much of 2017 focused on reviewing our capability and capacity to ensure the Foundation is well placed to respond to the future challenges. We have also used the opportunity to refresh our Board, ensuring we have the appropriate skills and experiences moving forward. We have reviewed both our financial and overall governance processes, systems and policies to ensure we are following best practice, as set out by the Charity Commission. We have invested in the overall infrastructure of the Foundation specifically in people, brand identity and a new website. In October 2017, the Board took some time out to refresh the Foundation's strategy going forward. This has now been finalised and clearly sets out four strategic priorities that will align to the activities of the Foundation going forward.

The Board acknowledged that as the Foundation was growing so too was the need to review the current accommodation and location of the offices. After considerable thought to best suitability, we have concluded that the Kings Fund based in Cavendish Square would enable closer interaction and partnership working with other health related organisations. Thus a move is planned for June 2018. We would wish to thank the very generous Grosvenor Estates who have been an excellent landlord over many years and most accommodating in meeting our needs thus far.

As always we are greatly indebted to our sponsors without whom our work could not proceed. We said farewell with thanks to Atkinson Morley whose thirteen-year partnership with us came to an end. We were delighted to receive new support from Cooperation and Working Together (CAWT); Department of Health Northern Ireland; Help for Heroes and the National Leadership and Innovation Centre (NLIC).

The Board of Trustees lost the services of Mr Richard Beazley DL, Mr Neil Chrimes, Miss Katrina Cooney, Dr David Foster and Professor Fiona McQueen, all of whom will be greatly missed for their contributions and their friendship. We have been joined by Dr Edward Libbey and Dame Professor Jill Macleod Clark who bring with them a wealth expertise and will further strengthen the Board.

Finally, as always, a big thank you to all the donors, whether charitable or NHS organisations, who make our work possible. These are turbulent times and you are much needed and we are very grateful. Last of all, to my fellow Trustees old and new, many thanks for keeping us on the right track, with much good humour.

Organ K. Sanderson

Mr Bryan Sanderson CBE Chairman

# Chief Executive's Review

I took on my role as the Chief Executive of the Florence Nightingale Foundation in February 2017. It has been an incredible year and has simply flown by. I wish to acknowledge the many achievements of my predecessor, Professor Elizabeth Robb, who has provided a fantastic platform that will serve the Foundation well as its moves forward.

I have been struck by the support, commitment and indeed the immense respect our sponsors and beneficiaries have shown towards the work of the Foundation over the years. Similarly, I have had many wonderful conversations with our scholars who have benefitted from the programmes. All report the huge benefits that have resulted both professionally and personally, with many scholars describing the opportunities afforded them as 'truly life changing'. The Foundation's activities are not exclusive to the NHS and it is this diversity that comes with having scholars from a range of organisations that adds to the richness of the experience for our scholars.

Key events of 2017 centred on the annual conference that was held on 3<sup>rd</sup> February. Feedback, as in previous years, was positive. There were suggestions that in future years the programme might be extended to reflect the increasingly wide range of hot topics affecting all branches of nursing and midwifery. Student's day and the Westminster Abbey annual commemoration was held on 17<sup>th</sup> May and, as in previous years, demand outstripped supply. Those present, particularly for the first time, commented on how uplifting the experience was. The feedback from Student's Day was similarly remarkable and I would like to extend a huge thanks to Edinburgh Napier University for sponsoring the event. We had a panel of senior people including some of our scholars and with 'Chatham House' rules, the students were able to raise a number of issues they were currently experiencing in an environment that was safe and supportive. It was the largest ever representation of male nurses present and thus afforded a great opportunity to hear first-hand how our male colleagues work within what is an essentially female dominated profession.

We said goodbye to Deputy Chief Executive, Dr Abigail Masterson; Office Manager, Ms Larissa Worwood; and Events, Marketing and Fundraising, Ms Rose Woodall Simmons. We welcomed our Chief Operating Officer, Professor Greta Westwood; Head of Corporate Affairs, Miss Susanna Mead; and Head of Fundraising and Partnerships, Mr Ian Watson. We refocused Mrs Janet Shallow's role to assume Programme Manager for all scholarship programmes.

And so to the future:

We will focus our efforts in the coming year to ensure we stay true to our strategic priorities in all we do. We will continue to work with key organisations in ensuring our 'Offer' is fit for purpose and meeting the needs of our scholars, against a background of increasing complexity. We will develop relationships with new partners who share our vision. We will develop our Alumni in a way that continues to support past and present scholars but also with the intention of supporting and guiding our new scholars.

I wish to thank all NHS organisations and the wide range of charities who have been instrumental in enabling us to carry on with our work and continue to maintain the legacy of Florence Nightingale. Without this support we would simply be unable to do what we do.

I would also like to thank the Board of Trustees for their ongoing commitment and support, who give their time most generously to support the activities of the Foundation.

Ursula Ward MSc MA Chief Executive

## **About the Foundation**

Florence Nightingale is undoubtedly the world's most famous nurse and her influence and legacy continues to have effect throughout the world today. When Florence died in 1910 at 90, the international nursing community wished to pay tribute to the life and work of this great nurse. At the International Council of Nurses (ICN) Congress held in Cologne in 1912, Mrs Bedford Fenwick in her speech at the final banquet proposed that 'an appropriate memorial to Florence Nightingale be instituted'. She envisaged an educational foundation which would enable nurses 'to prepare themselves most fitly to follow in her footsteps'. However, due to the 1914-1918 world war, it was not until 1929, at the ICN Grand Council in Montreal, that the memorial proposal was activated.

The Florence Nightingale Foundation was subsequently established as a living memorial to Florence. The Foundation advances the study of nursing and midwifery and promotes excellence in practice to benefit patients. It provides scholarships that enable nurses and midwives to extend their knowledge and skills to meet the changing needs of patient care for today and the future. Further, the Foundation creates new knowledge and contributes to the evidence base for excellence in nursing and midwifery practice through the Florence Nightingale Clinical Professoriate together with our research scholars.

Florence Nightingale was granted membership of the Royal Statistical Society. Her research abilities, in partnership with others, resulted in saving thousands of lives. As part of Florence's legacy a key focus of the Foundation is to generate the evidence base that underpins practice.

The Foundation's aim is to improve health, clinical outcomes and patient experience, through building nursing and midwifery clinical and research leadership capacity and capability. It does this by enabling nurses and midwives, our scholars, to access sophisticated and bespoke leadership development opportunities, both in the UK and overseas, tailored to the scholar. The bespoke leadership development programmes ensure the Foundation's offer remains unique and highly sought after. All of our scholars describe the experience with the Foundation as 'life changing' both professionally and personally. This has in turn given them the confidence to lead with integrity, challenge when they may not have done so previously and importantly recognise that by staying within their profession they can make a real difference to patient care and health outcomes.

It is important that nurses and midwives are empowered to use their professional voice effectively and seek all opportunities to influence healthcare policy and practice. We will ensure that the Foundation becomes 'the go to place' for professional opinion and debate, a recognised academy for healthcare thought and will be the voice for the nursing and midwifery.

## Why is Nursing and Midwifery Leadership Important?

Demand for healthcare is at its highest and rising. People are living longer and increasingly living with multiple co-morbidities. Health policy mandates that more care be delivered closer to the patients' home. The emphasis on prevention and the public taking more responsibility for their health for their own health is likely to increase. Nurses are ideally placed to take a lead in these areas but will need the support to do so. The evidence highlights a clear connection between effective leadership and positive health outcomes, for example lower medication errors, lower infection rates, improved mortality and greater patient satisfaction and experience. Nursing and midwifery leaders of today need also be confident and competent to be able to speak up and influence practice and policy at all levels.

Developing leaders requires investment in professional development but over the last decade policy decisions have eroded available funding for nurses and midwives. This is currently exacerbated by the growing financial pressures especially in the NHS where access to both funding and time out is becoming a significant problem. The Foundation with the support of its sponsors is making a real difference in going some way towards supporting staff in a way that will enable them to responds to some the challenges referred to above.

## **Our Vision and Values**

### **Our Vision**

To be the leading scholarship provider for nursing and midwifery leadership development, recognised for influencing breakthroughs in health and social care policy and practice on a national and global level.

To be 'the go to place' for professional opinion and debate, a recognised academy for healthcare thought, a voice for nursing and midwifery. Our scholars, our professoriate and our alumni will seek all opportunities to influence healthcare policy and practice.

### **Our Mission**

To pioneer change and improvements in patient and health outcomes, through nursing and midwifery clinical and research leadership, honouring Florence Nightingale's legacy.

### **Our Values**

#### We are guided by a core set of values

**Care:** We care for nurses and midwives and this is at the heart of what we do. Like Florence Nightingale, we have an overriding instinct to enable nurses and midwives to be better and discover new ways to improve patient care and health outcomes.

**Challenge:** We challenge norms and non-evidenced based nursing and midwifery practice. We promote transparency and lead communities to ignite change for the better. We use Florence's legacy as leverage to intelligently influence those around us, unafraid to challenge the status quo when needed.

**Nurture:** We nurture our scholars and provide the tools, confidence and knowledge they need to lead change and influence those around them.

**Promote:** We promote courageous leaders who discover new ways of working and forge a path to impact policy and practice at local, national and international levels.

### **Our Promise**

#### We will:

**Select** the very best talent in nursing and midwifery as scholars of the Foundation. Through our bespoke leadership development programmes, we will inspire, nurture and support their future success. Our programmes are designed and delivered through partnerships with leading organisations both in and outside of health and social care.

**Connect** nurses and midwives to become the positive voice of nursing and midwifery.

**Shine** a light on nurses and midwives and their practice. We will commemorate Florence's legacy and the impact she had on modern-day nursing. We will identify practice that is not evidenced based, support new research to generate new knowledge, communicate and celebrate our achievements and the impact our work has on improvements in health and social care.

## Strategy

### **Refresh of the Strategy**

A new five-year (2018-2022) strategy was approved by the Board in March 2017 to ensure the Foundation remains current and relevant. The strategy sets out our ambitions for the Foundation's contribution to improvements healthcare for the next five years. The strategy is applicable across all four UK countries and addresses how we will increase our prominence and presence and our impact on policy and practice not only in the UK, but globally.

This strategy was developed in partnership with our Trustees, Scholars, and our Florence Nightingale Foundation Clinical Professors of Nursing and Midwifery who all agree the focus of our work must centre on improving patient care and health outcomes.

Four strategic priorities underpin this strategy and set out the principles by which we will engage in our work:

- 1. **Demonstrate Impact** Ensure our important work, and that of our nursing and midwifery scholars, is published to facilitate adoption by others, enhance impact and raise the profile of the Foundation.
- 2. Influence Policy and Practice Support and develop nursing and midwifery clinical and research leaders to create the evidence base to change clinical practice and influence healthcare policy.
- 3. Increase National and Global Reputation, Visibility and Reach Develop our position and brand as a credible voice of nursing and midwifery practice to ensure The Florence Nightingale Foundation is a household name.
- 4. Grow and Sustain Secure and increase the financial position of the Foundation.

This strategy builds upon the many achievements of the Foundation to date. Key priorities will align to the annual business planning process and will be underpinned by robust performance management reporting into the Board.

### **New Florence Nightingale Foundation Office Accommodation**

The Board acknowledged that as the Foundation was growing so too was the need to review the current accommodation and location of the offices. After considerable thought to best suitability, the Board concluded that The Kings Fund, Cavendish Square would enable closer interaction and partnership working with other health related organisations. The Kings Fund have welcomed our planned move there in June 2018.

## **Our Activities**

## **Review of Scholarships**

In the autumn of 2017, before the selection of the 2017/18 scholars, a review of all leadership programmes was undertaken. The aim, to ensure all programmes were relevant and delivered by those organisations working with known and established brands. The Foundation will now partner with organisations, for example The Kings Fund and Windsor Leadership that deliver first class leadership development programmes for our scholars.

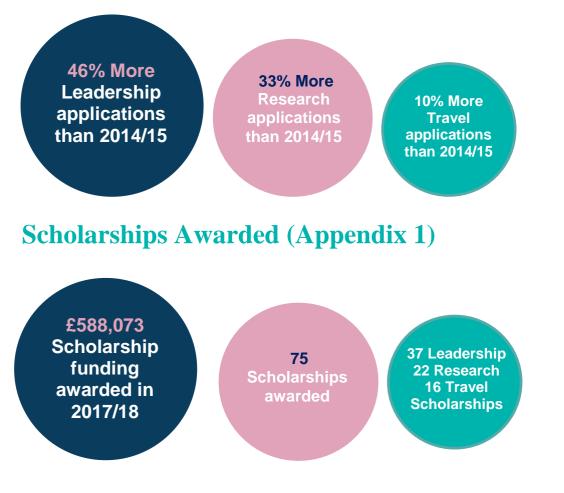
The first element of the leadership scholarship year includes a series of personal assessments to offer insight into the value of personality differences and their impact on individuals, teams and organisations. For the first time this year, this was provided for all cohorts of Leadership Scholars.

A review of all core programme costings and content was undertaken to ensure scholars were able to obtain the most benefit from their scholarship funding. All cohort programmes were designed to include, at the start of the scholarship year, a Welcome Day, followed by one two-day residential, a mid-year one-day review, and at the end of the year, a Celebration Event.

## **Scholarship Applications**

The Foundation has received increasing numbers of scholarship applications each year since 2014

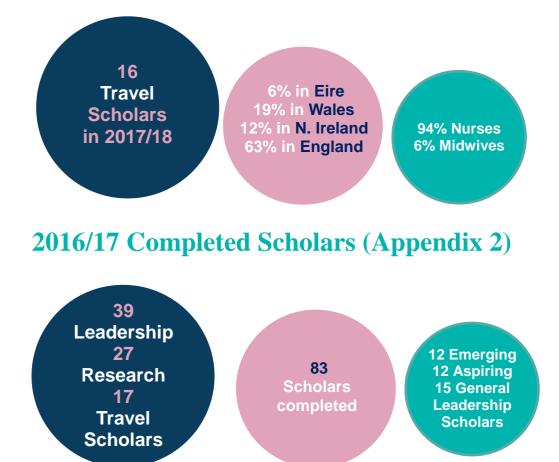
- 98 Leadership scholarship applications in 2017/18 compared with 31 in 2014/15
- 72 Research scholarship applications in 2017/18 compared with 54 in 2014/15
- 32 Travel scholarship applications in 2017/18 compared with 29 in 2014/15





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## **Travel Scholarships Awarded**



## **Research and the Launch of the FNF Clinical Professoriate**

The publications and presentations, national and international, by our Clinical Professors, are shown in Appendix 3.

Our ambition is to expand the scope of the FNF Clinical Professor network of nine UK senior clinical academic nurses and one midwife. This network is unique, and has the potential to be the UK senior clinical academic voice that will ultimately influence policy and practice change through the generation and dissemination of new knowledge. This ambition is dependent upon dedicated resources. The Foundation secured support from the National Institute of Health Research (NIHR) and launched this professorial network 'The Florence Nightingale Clinical Professoriate'. It is underpinned by a clear set of expectations including the development and implementation of a research strategy. Its purpose is to develop and drive clinical academic leadership capability and capacity and act as a senior professional network of nurses and midwives that will influence policy and practice. In 2017/18 its activities included:

- Established quarterly meetings
- Considered our research strategy to ensure the Foundation's Research Scholars are aligned with the Professoriate work
- Established a central database of the Professoriate's current and future research activity including publications, presentations and grant funding applications (Appendix 3)
- Submitted a Florence Nightingale Foundation Professoriate collaborative NIHR research grant funding application

The Foundation's Board of Directors requested a review of the work of the nine Clinical Professors of Nursing and Midwifery to ensure alignment with our vision and strategy. This review will be completed in 2018/19 and will be chaired by Professor Dame Jill Macleod Clark.

## **Events**

### **Commemoration Service**

The annual commemoration service was held on 17 May in Westminster Abbey, London. The Dean of Westminster Abbey presided over the event and attendance included prominent public figureheads. The event was attended by approximately 2,100 Foundation guests. The presence of HRH Princess Alexandra, our royal patron made the event even more special. A special request from the Guild of Nurses was that they be allowed to process this year which was granted.

#### **Students Day**

This annual event is held on the day of the Commemoration Service. Nursing and Midwifery students from across the UK are invited to attend. The morning plenary discussion allows students to openly raise questions to a panel of senior nurses and midwives. The afternoon is spent at the Florence Nightingale Museum where students learn the history and continuing influence of Florence on nursing and midwifery today. Students visit the Florence Nightingale Chapel in Westminster Abbey prior to attending the Commemoration Service.

Edinburgh Napier University sponsored the event this year which meant that the students from that University had the privilege of processing.

## **Remembering Florence in Hampshire**

Florence's main family home was in Derbyshire but the family spent the summers in Embley Park, her Hampshire Home. She is buried in East Wellow, Hampshire and every year the Foundation supports a locally held service in her honour. Similar events are held in Derbyshire and Northern Ireland in May each year, her birth month.

### **Annual Conference**

The annual Florence Nightingale Foundation Conference has been running for many years and is intended to support continuing professional development for nurses and midwives. It is an opportunity to hear from inspirational speakers; take part in a variety of master classes focussing on sharing innovation and best practice; and an opportunity to network with healthcare professionals and academic leaders. In 2017 the conference took place on 3 February at Guoman Tower Hotel in London. In previous years the event was held over two days, but due to increasing difficulties and financial pressures it was agreed it should be confined to one day. The conference was followed by a Gala dinner the purpose of which was to raise funds.

### **Award Ceremony**

An award ceremony is held bi-annually to present scholars with their certificates upon completion of their scholarship. The next ceremony is due to take place in December 2018.

### **Other Activities and Engagements**

- Chief Nursing Officer Conference, attended by the CEO, talk given on the Excellence Framework
- An Alumni conference took place in Birmingham on 27 September for our Alumni members which was very well received
- University of Hertfordshire: CEO talk to University and Trust staff, followed by a panel discussion
- Royal College of Anaesthetists Great Britain and Ireland: CEO presentation on the NHS and sustainability
- University of Southampton: CEO talk to students

- CEO Speaker at Trainee Practitioners Quality Improvement Workshop
- CEO Member of the Nursing Times awards judging panel
- Royal College of Nursing Annual Dinner
- Royal College of Nursing Inaugural Lecture
- Wreath Laying Edith Cavell remembering her life and works.
- Quarterly meetings with Chief Executive Charity membership
- Windsor Leadership Alumni Leadership Debate
- Foundation of Nursing Studies Evening Reception
- COO Keynote speech for the NIHR Clinical Research Network (CRN)
- COO Module leader for the NIHR CRN Advanced Leadership Programme
- COO Representing the Foundation at the CNO conference

### **Relationship Management**

The Chief Executive and the Chief Operating Officer have spent considerable effort on meeting with existing key sponsors from both the NHS and across the different charities who have supported the Foundation over the years. This has been invaluable in gaining greater understanding of our strengths and areas for improvement. Focus has also been on identifying and establishing new relationships as future partners and funders.

### **Rebranding and Website**

The Board had recognised that the website needed updating in order to reflect the advancement of the Foundation. A review of the brand was also considered as an essential part of the website redesign. As part of this work, a questionnaire was designed which focused on understanding perceptions of the Foundation's existing brand and quality of messaging to support future growth.

The goal was to obtain insight from Alumni, existing scholars, Trustees, operations staff, large donors and partner/affiliate organisations to understand how their perceptions were influenced by their interaction with the Florence Nightingale Foundation. The findings from this strongly informed the re-positioning and messaging to build a solid brand story.

The Florence Nightingale Foundation's brand embodies everything connected with us. The most 'tangible' aspects of our brand are our name, our logo and other visual elements such as images and symbols.

The new Florence Nightingale brand and website launch will take place in June 2018.

## **Publications by Foundation Staff**

Ward U. Florence Nightingale Foundation: supporting excellent leadership. Br J Nurs. (2017) 26(20):S8-S9 doi:10.12968/bjon.2017.26.20.S8

Ward U. A Vision for the Future of Nursing. Br J Nurs. (2017) 26(7):378.doi:10.12968/bjon.2017.26.7.378.

Joanna Hope, Alejandra Recio-Saucedo, Carole Fogg, Peter Griffiths, Gary Smith, **Greta Westwood**, Paul Schmidt **(2018)** A fundamental conflict of care: nurses' accounts of balancing sleep with taking vital signs observations at night. Journal of Clinical Nursing DOI: 10.1111/jocn.14234

**G Westwood**, Richardson A, Latter S, Macleod Clark J, Fader M **(2018)**. *Building clinical academic leadership capacity in the nursing, midwifery and allied health professions: A sustainable partnership model* **Journal of Research in Nursing** *DOI:* 10.1177/1744987117748348

**G Westwood** P Meredith, P Schmidt, S Atkins, P Greengross, R Aspinall **(2017)**. Universal Screening For Alcohol Misuse In Acute Medical Admissions Is Feasible And Identifies Patients At High Risk Of Liver Disease. Journal of Hepatology DOI: 10.1016/j.jhep.2017.04.017

## **Financial Review**

### **Financial Results**

The Foundation decided to extend its accounting period to 15 months in order to synchronise better with its academic year. When comparing income and costs, with the previous financial year, the additional three-month period needs to be taken into account.

At the beginning of the year the Foundation agreed to invest more money in its infrastructure, through changes in its staff skill mix, in order to be able to provide a more sustainable and enhanced service to its scholars and other users. Despite incurring the additional cost it has been possible to achieve a small surplus, at the net adjusted level, after taking into account the use of a legacy, and after recognising the compassion in practice courses that were completed in 2017/18. A historical interfund transfer of expenditure for the Foundation Clinical Professors of Nursing and Midwifery from designated funds to unrestricted funds in 2017/18 was also made. For 2018/19 a small budget surplus has been agreed for the year.

The Foundation has developed a new Strategic Plan as the current long term plan has come to an end and the new plan that envisions the development of new services is expected to benefit the financial position in the longer term.

On Unrestricted funds the charity made a surplus of £18,478 at the net adjusted income level, (2016/17 deficit of £36,230). When account is taken of the inter-fund transfer from legacies of £46,683, the transfer of the Chairs expenditure of £267,655 and the unrealised investment gain of £17,930, the balance on the Unrestricted Funds of the Foundation fell by £231,247 to £872,037 at 31 March 2018.

On Designated funds the resources made available by sponsors were £1,517,870, some of which were awarded as scholarships during the period, and some available for future periods. As at 31 March 2018, there are Designated funds available of £1,512,625, which are predominantly held in bank accounts until being allocated as scholarships over the next eighteen months. This year's deficit (net movement in funds) on restricted funds arises from expenditure on services where the income was received in previous years.

#### Reserves

Unrestricted reserves provide some protection to the Foundation and its work by allowing time to adjust to changing financial circumstances. The Board, via its Finance and Investment Committee, reviews, on an annual basis, the level of unrestricted reserves by considering the risks associated with various income streams, expenditure plans and Balance Sheet items. This enables an estimate to be made of the level of reserves that are sufficient:

- To allow time for re-organisation in the event of a downturn of income or asset values
- To protect ongoing work programmes.

The minimum level of required reserves is estimated at 12 months of the unrestricted expenditure budget. Consequently, Trustees have decided that the appropriate, prudent level of reserves is in the range 12 to 24 months of the unrestricted expenditure budget.

#### **Unrestricted Reserves**

The Trustees have approved a policy for the organisation of having unrestricted reserves of between 12 and 24 months unrestricted expenditure. Current levels are over 17 months of unrestricted expenditure (2016/17: 21 months). Unrestricted Reserves are composed of General Reserves.

## **Designated and Restricted Funds**

The Designated funds amounting to £1,512,625 (2016/17: £1,330,155) can only be used for the purposes for which they were given. They represent unspent monies received from donors, primarily for scholarships, subject to conditions specified by them, or because the funds were collected in a public appeal to raise money for a particular purpose. Detailed analysis of the various restricted funds is set out in note 15 to the accounts.

### **Investments, Powers and Performance**

The Board, under the powers conferred to them by the Articles of Association, appointed M&G Charifund and COIF to manage the investments. Performance is reviewed six monthly by the Finance and Investment Committee and annually with the Board of Directors. The next review of our investment manager's performance is planned for August 2018.

The Board of Trustee's aims in investing funds continue to be to:

- Act as a reserve to protect core activities in the event of unforeseen income shortfalls
- Support longer term identifiable projects
- Generate income to support core services that are not funded.

Total investments at 31 March 2018 amounted to £1,064,847, an increase of £17,930 (2016/17: increase £61,569). Interest and dividend income in the period amounted to £59,162 (2016/17: £46,716).

#### Pensions

The pension scheme is a UK-based defined benefit scheme, providing benefits at retirement. There is no surplus or deficit on this scheme.

## **Financial Control and Monitoring**

The Finance and Investment Committee monitors and reviews all aspects of the financial performance, financial management reporting, internal financial control, including, in particular, the preparation and monitoring of revenue and capital expenditure and quarterly management accounts. It also deals with such other matters as may be specifically delegated to it by the Board.

#### **Financial Position**

The Board considers that there are sufficient reserves held at the year-end to avoid an unacceptable level of disruption to the organisation in the event of a downturn in future income, and that there is a reasonable expectation that the Florence Nightingale Foundation has adequate resources to continue in operational existence for the foreseeable future. For this reason, the Board continues to adopt the going-concern basis in preparing the accounts.

## **The Treasurer's Report**

The funds available to the Foundation are made up of two components:

## **Unrestricted Funds**

These funds were created when the Foundation was established and have accumulated over time as a result of its annual operational surpluses and an increase in the market value of its investments.

In 2017/18, the Foundation made an income and expenditure surplus on unrestricted funds of £18,478 (2017 deficit of £36,230) and there was also an unrealised gain on our investments of £17,930 reflecting the favourable movement in the stock market. As a result, there was an overall net surplus on unrestricted funds for the Foundation of £36,408.

The Foundation takes great pride in having set up over a number of years, and funded within designated expenditure, the Florence Nightingale Foundation Clinical Professors of Nursing and Midwifery at various universities in the UK (£267,655). After taking account of this initiative, now in unrestricted funds, there are total unrestricted funds available at 31 March 2018 of £872,037 which are held in the form of investments and bank accounts and provide a clear demonstration of the financial viability of the Foundation.

## **Designated and Restricted Funds**

In 2017/18, the resources made available by sponsors were £1,656,504, the majority of which were awarded as scholarships in that year.

As at 31 March 2018, there are designated and restricted funds available of £1,515,761, which are predominantly held in bank accounts until being allocated as scholarships over the next eighteen months.

I would like to take this opportunity of thanking the staff of the Foundation and our external auditor for producing these accounts in both a timely manner and to the highest of standards.

Dr Colin L Reeves CBE Treasurer

## **Governance and Risk**

The Directors of the Foundation are also Charity Trustees for the purpose of charity law under the Company's Articles. In addition to the Chairman, Vice Chairman and Treasurer, Trustees are appointed for a period of three years which is renewable by mutual agreement for a possible two further periods, meaning that a Trustee can serve a maximum of nine years. Co-opted members are approached individually by either the Chairman or Chief Executive to join the Board on the basis of particular relevant skills and experience that they bring to the Board and the charity.

The Board of Directors set and oversee the strategic direction and priorities of the charity. They have a legal duty to govern the charity so as to ensure it achieves its charitable objects and, in doing so, to act reasonably, prudently and selflessly in accordance with legal and regulatory requirements. The Board of Directors will aim to have the best balance of skills, knowledge, expertise and experience to help the Foundation to achieve its purpose.

The Chief Executive is employed by the Board to implement policy, and to devise and execute the charity's operational strategy. The Chief Executive leads the Foundation's office staff and together they provide the central governance, finance, strategic and marketing functions which assist and support the work of the Foundation.

The rules for the governance of the Foundation are laid down in the Memorandum and Articles, (amended by Special Resolutions passed on 12 April 1994, 18 November 1994 and 18 June 2013). Within this framework, day-to-day aspects including responsibilities and duties of individuals and committees, together with procedures for elections to the Board and similar matters, are defined in Standing Orders.

Good governance in charities is at the heart of their success. The Governance Committee is charged with ensuring the Code for the Voluntary and Community Sector (version for Small Organisations) including the identification of principal risks and uncertainties and how those risks are managed is implemented.

In the course of the year, the Governance Committee addressed the following issues:

- Corporate Risk Register The Risk Register had been reviewed by the Chief Executive Officer, Auditor, and Chairman of the Governance Committee. Their recommendations were discussed by the committee and its recommendations to address and reduce risks where possible were taken to the Board and subsequently approved.
- **Policy Updates** The Foundation had seven policies requiring review which was undertaken in September 2017. In March 2018 the Governance Committee proposed four new policies for approval by the Board.
- Governance Review Good governance is fundamental to the success of the Foundation. It enables and supports compliance with the law and relevant regulations. It also promotes a culture where everything works towards fulfilling the Foundation's vision. The Charity Commission suggest that it is good practice for Trustees to carry out some form of governance review from time to time. The Committee agreed that a full review would be carried out in 2018/19.

The Governance Committee is assured that all likely risks to the Foundation arising from activities in 2017 have been identified and mitigated.

Andrew Andrews MBE Vice Chairman Chair, Governance Committee

## **Statement of Trustee Responsibilities**

The Board is responsible for preparing the annual report and the financial statements in accordance with applicable law and regulations.

Company law requires the Board to prepare financial statements for each financial year. Under that law the Trustees have elected to prepare the financial statements in accordance with United Kingdom Generally Accepted Accounting Practice (United Kingdom Accounting Standards and applicable law). Under company law the Board must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the Charitable Company and of the result for that year.

In preparing these financial statements, the Board are required to:

- Select suitable accounting policies and then apply them consistently
- Observe the methods and principles in the Charities SORP
- Make judgments and accounting 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
- Prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in business

The Board are responsible for keeping adequate accounting records that are sufficient to show and explain the charitable company's transactions, and disclose with reasonable accuracy at any time the financial position of the charitable company, and enable it to ensure that the financial statements comply with the Companies Act 2006. The Board is also responsible for safeguarding the assets of the charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

So far as each of the Directors are aware at the time the report is approved:

- There is no relevant audit information of which the charitable company's auditors are unaware
- The Board have taken all the steps that they ought to have taken to make themselves aware of any relevant audit information and to establish that the auditors are aware of that information.

#### Auditors

In accordance with Section 385 of the Companies Act 2006, a resolution proposing that Gilbert Allen and Co be re-appointed as auditors of the company will be put to the AGM.

Approved by the Board on 19 June 2018 and signed on their behalf.

Organ K. Sanderson

Mr Bryan Sanderson CBE Chairman

## **Current Sponsors**

- The Band Trust
- 💙 Bupa
- NHS Professionals
- Association of Respiratory Nurse Specialists (ARNS)
- Cooperation and Working Together (CAWT)
- Chief Nursing Officer, England
- Garfield Weston Foundation
- General Nursing Council for England & Wales
- MENAT Trust
- Department of Health, Social Services and Public Safety, Northern Ireland (DHSSPS)
- RCN Foundation
- The Sandra Charitable Trust
- Scottish Executive
- James Tudor Foundation
- Welsh Government
- The Charlie Waller Trust
- The Stephanie Thompson Memorial Trust
- The Burdett Trust for Nursing
- Council of Deans of Health
- Health Education England, Kent, Surrey and Sussex
- Health Education England North, Central and East London
- Help for Heroes
- National Leadership and Innovation Centre, Southern Ireland
- The Teenage Cancer Trust
- Public Health England

## **Report of the Independent Auditor**

The Florence Nightingale Foundation (a Company limited by guarantee)

#### Report of the Independent Auditor to Members of the Board of Directors For the Fifteen Month Period Ended 31 March 2018

#### Opinion

We have audited the financial statements of The Florence Nightingale Foundation (the 'charitable company') for the period ended 31 March 2018 which comprise the Statement of Financial Activities, the Statement of Financial Position, Cash Flow Statement and the related notes. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102, The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice) and the Charities and Trustee Investment (Scotland) Act 2005 and the Charities Accounts (Scotland) Regulations 2006 (as amended). We have been appointed as auditors under Section 44(1)(c) of the Charities and Trustee Investment (Scotland) Act 2005 and report in accordance with regulations made under that Act.

In our opinion the financial statements:

- Give a true and fair view of the state of the charitable company's affairs as at 31 March 2018 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
- Have been prepared in accordance with the requirements of the Companies Act 2006
- Have been prepared in accordance with the requirements of the Charities and Trustee Investment (Scotland) Act 2005 and regulation 8 of the Charities Accounts (Scotland) Regulations 2006

#### Basis for opinion

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

#### Conclusions relating to going concern

We have nothing to report in respect of the following matters in relation to which the ISAs (UK) require us to report to you where:

- The Trustees use of the going concern basis of accounting in the preparation of the financial statements is not appropriate; or
- The Trustees have not disclosed in the financial statements any identified material uncertainties that may cast significant doubt about the charitable company's ability to continue to adopt the going concern basis of accounting for a period of at least twelve months from the date when the financial statements are authorised for issue.

#### Other information

The other information comprises the information included in the annual report, other than the financial statements and our auditor's report thereon. The Board of Directors are responsible for the other information.

Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon. In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

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

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

- The information given in the Trustee Report, which includes the Directors' Report prepared for the purposes of company law for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- The Trustee Report has been prepared in accordance with applicable legal requirements. The Directors Report is included within the Annual Report.

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

In the light of the knowledge and understanding of the charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the Trustee Report included within the Annual Report.

We have nothing to report in respect of the following matters where the Companies Act 2006 and the Charities Accounts (Scotland) Regulations 2006 (as amended) requires us to report to you if, in our opinion: -

- Adequate accounting records have not been kept or returns adequate for our audit have not been received from branches not visited by us
- The financial statements are not in agreement with the accounting records and returns
- Certain disclosures of Trustees' remuneration specified by law are not made
- We have not received all the information and explanations we require for our audit

#### **Responsibilities of Trustees**

As explained more fully in the Trustees' Responsibilities Statement set out on page 20, the Trustees (who are also the Directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the Trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

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

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

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditor's report.

Januar

John Duncan (Senior Statutory Auditor) For and on behalf of Gilbert Allen & Co Statutory Auditor Chartered Accountants Churchdown Chambers Bordyke Tonbridge Kent TN9 1NR Dated: 19 June 2018

## **Annual Accounts**

## The Florence Nightingale Foundation (a Company limited by guarantee)

#### Statement of Financial Activities Fifteen Month Period Ended 31 March 2018

	Notes	Unrestricted Funds	Designated Funds	Restricted Funds	Total Funds 15 months to 31.3.2018	Total Funds Year to 31.12.2016
		£	£	£	£	£
Income						
Scholarship resources		-	1,517,870	-	1,517,870	1,254,246
Scholarship support		138,634	-	-	138,634	157,012
		040			1,656,504	1,411,258
Florence Alumni Other trading activities	2	916 322,520			916 322,520	-
Legacies	2	18,086		-	18,086	- 1,375
General donations and fundraising		47,432			47,432	67,977
Event sponsorship		13,500		-	13,500	19,500
Investment income - dividends and bank interes	t	59,162		-	59,162	46,716
		00,102			00,102	10,110
Total income		600,250	1,517,870	-	2,118,120	1,546,826
Expenditure						
Direct charitable expenditure	3	308,902	1,556,372	6,728	1,872,002	1,415,158
Fund-raising and publicity costs	4	73,883	-	-	73,883	70,271
	•	10,000			10,000	10,211
Management and administration	5	245,670	-	-	245,670	132,932
Total expenditure		628,455	1,556,372	6,728	2,191,555	1,618,361
Net income / (expenditure)						
for the year		(28,205)	) (38,502)	(6,728)	(73,435)	(71,535)
Inter fund transfers	7	46,683		(-,,	-	-
		-,	( -,,			
Net adjusted income/(expenditure) for the period		18,478	(85,185)	(6,728)	(73,435)	(71,535)
Other recognised gains and losses						
Gains in investments						
Unrealised	14	17,930	-	-	17,930	61,569
		36,408	(85,185)	(6,728)	(55,505)	(9,966)
Historical interfund transfers						
	7	(007.000)	007.005			
Foundation Clinical Professors of Nursing & Midwifery	7	(267,655)	) 267,655	-	-	-
Net movement in funds		(231,247)	) 182,470	(6,728)	(55,505)	(9,966)
Total funds brought forward 1 January 2017		1,103,284	1,330,155	9,864	2,443,303	2,453,269
Total funds carried forward 31 March 2018		872,037	1,512,625	3,136	2,387,798	2,443,303
			(noto 6)			

( note 6)

#### The Florence Nightingale Foundation (a Company Limited by Guarantee)

#### Statement of Financial Position as at 31 March 2018

	Notes	Unrestricted Funds £	Designated Funds £	Restricted Funds £	Total 31.3.2018 £	Total 31.12.2016 £
Fixed Assets						
Tangible fixed assets	11	15,181	-	-	15,181	2
Investments	12	1,053,762	7,949	3,136	1,064,847	1,046,917
		1,068,943	7,949	3,136	1,080,028	1,046,919
Current Assets						
Debtors	13	13,018	106,866	-	119,884	5,579
COIF deposit account		-	172,602		172,602	432,133
Balances at bank on deposit and current	accounts	91,256	497,280	-	588,536	958,859
Balances at bank on client account		-	727,928	-	727,928	27,684
		104,274	1,504,676	-	1,608,950	1,424,255
<b>Creditors:</b> Amounts falling due within one year	14	301,180			301,180	27,871
Net Current Assets		(196,906)	1,504,676	-	1,307,770	1,396,384
Net Assets		872,037	1,512,625	3,136	2,387,798	2,443,303
Funds						
Unrestricted	<i>.</i> –	872,037	-	-	872,037	1,103,284
Scholarship	17 15	-	1,512,625	-	1,512,625	1,330,155
Restricted	GI	-	-	3,136	3,136	9,864
		872,037	1,512,625	3,136	2,387,798	2,443,303

Approved by the Board of Directors on 19 June 2018 Signed on its behalf by:

Bryan K. Sanderson

Mr Bryan Sanderson CBE, Chairman

Dr Colin L Reeves CBE, Treasurer

Dated: 19 June 2018

#### The Florence Nightingale Foundation (a Company Limited by Guarantee)

#### Cash Flow Statement Fifteen Month Period Ended 31 March 2018

	15 months to 31.3.2018 £	Year to 31.12.2016 £
Cash generated from operations activities	_	-
Net Income for the Period		
Unrestricted funds Designated funds Restricted funds	(249,177) 182,470 (6,728)	(82,880) 11,345 -
	(73,435)	(71,535)
Reconciliation to cash generated from operations:		
Add back depreciation charge	260	-
Cash out flow due to increase in debtors Cash inflow due to increase in creditors	(114,305) 273,309	22,842 12,822
Movements in working capital	159,264	35,664
Net cash flow from operating activities	85,829	(35,871)
Purchase of fixed assets	(15,439)	-
Net increase ( decrease ) in cash	70,390	(35,871)
Net cash resources at bank at beginning of period	1,418,676	1,454,547
Net cash at bank at 31 March 2018	1,489,066	1,418,676
Analysis of the Balances of Cash as Shown in the Balance Sl	heet	
	£	£
COIF deposit account	172,602	432,133
Balances at bank on deposit and current accounts	588,536	958,859
Balances at bank on client account	727,928	27,684

1,489,066

1,418,676

#### The Florence Nightingale Foundation (a Company Limited by Guarantee)

#### Notes to the Financial Statements Fifteen Month Period Ended 31 March 2018

#### 1. Accounting Policies

a) Basis of accounting

These financial statements have been prepared in accordance with the Statement of Recommended Practice: Accounting and reporting by charities (SORP 2015), and in accordance with Financial Reporting Standard 102 (FRS 102) and the Charities and Trustee Investment (Scotland) Act 2005. FNF is a public benefit entity and has applied the relevant public benefit provisions of FRS 102. The Board of the FNF is satisfied that FNF has adequate resources to continue in operation for the foreseeable future and, accordingly, these financial statements have been prepared on the basis that FNF is a going concern.

#### b) Incoming Resources

All income is accounted for on a receivable basis. Any income restricted to future accounting periods is deferred, and recognised in those accounting periods.

c) Scholarships

Donations received during the year relating to future scholarship awards are carried forward in creditors as deferred income and are credited to the Statement of Financial Activities in the year in which the award is paid.

d) Legacies

Legacies are accounted for when there is certainty of their being received.

e) Resources expended

All expenses are accounted for on an accruals basis. Expenditure incurred in connection with the specific objectives of the Foundation are included under the heading Direct Charitable Expenditure together with an apportionment of the general overheads of the Foundation. The apportionment has been assessed on the basis of staff time spent between direct charitable activities, fund-raising and publicity, and management and administration of the charity.

f) Fixed assets for charity use

All assets of material value held for use on a continuing basis in the Foundation's activities have been depreciated over their useful economic life using the following rates: Office equipment and furniture - 20% on cost.

g) Investments

Investments are revalued to market value as at the balance sheet date and the surplus or deficit of this revaluation is shown as an unrealised gain or loss on the face of the Statement of Financial Activities. Realised gains represent the difference between the sale proceeds and the acquisition cost of an investment.

h) Designated funds

These are the funds received from sponsors and awarded to scholars.

		15 months to 31.3.2018 £	Year to 31.12.2016 £
2	Income		
	Other trading activities -		
	Commercial course compassion in practice	322,520	
	A commercial course called compassion in practice (cip) that had not previously been recognised in Unrestricted Funds has now been recognised following the full completion of the programme.		
3	Direct Charitable Expenditure	£	£
	Scholarships awarded - sponsors	1,563,100	1,242,901
	Staff costs	300,756	161,873
	Other	8,146	10,384
		1,872,002	1,415,158
4	Fund-Raising and Publicity	£	£
	Staff costs	60,153	47,600
	Other	13,730	22,671
		73,883	70,271
5	Management and Administration	£	£
	Rent of office, rates, electricity, and insurance	40,893	36,194
	Staff costs	40,112	38,587
	CEO Recruitment fee	-	33,975
	Professional fees and insurance	147,311	1,970
	Other	17,354	22,206
		245,670	132,932
6	Designated Funds	£	£
	Research and travel	22,384	9,500
	Leadership	1,333,781	1,089,230
	Bicentenial 2020	150,000	-
	Foundation Clinical Professors of Nursing & Midwifery	-	169,666
	Legacy	-	46,683
	Other	6,460	15,076
		1,512,625	1,330,155
7	Inter fund transfer	£	£
	Balance of Edna Reid legacy released	46,683	46,650
	Foundation Clinical Professors of Nursing & Midwifery	267,655	

A project to fund Nursing Chairs at UK Universities was completed during the year. As there was no funding for the project within Designated Funds, the expenditure has been transferred to Unrestricted Funds and charged against Unrestricted Reserves.

	15 months to	Year to
	31.3.2018	31.12.2016
8 Staff Costs		
	£	£
Wages and staff costs	372,579	229,758
Social security costs	28,442	18,302
	401,021	248,060

The average number of persons employed by and providing services to the Foundation during the period was as follows:

	No.	No.
Administration	4	5_

The Chief Executive's remuneration for the period was £118,125 (Year 31.12.2016: £70,400).

The members of the Board received no remuneration.

Expenses relating to travel and subsistence of  $\pounds$ 1,505 were reimbursed to members of the Board (2016 -  $\pounds$ 1,068).

A premium of £1,636 per annum is paid for director and officers insurance.

#### 9 Net Income

Net income is stated after charging:

	£	£
Auditors' remuneration	2,900	2,300
All other assurance services performed by Auditors	8,014	1,144

#### 10 Taxation

The Foundation is a registered charity and therefore exempt from corporation tax.

#### 11 Tangible Fixed Assets

	Office equipment and furniture
	£
Cost	
1 January 2017	14,180
Additions	15,439
Disposals	
31 March 2018	29,619
Depreciation	
1 January 2017	14,178
Charge for year	260
On disposals	<u> </u>
31 March 2018	14,438
Net book values	
	45 404
31 March 2018	15,181
31 December 2016	2
12 Investments	31.3.2018 31.12.2016

12 Investments	31.3.2010	31.12.2010
	£	£
Market value at 1 January 2017	1,046,917	985,348
Acquisitions at cost	-	-
Disposals at opening market value	-	-
Net movement on revaluation at 31 March 2018	17,930	61,569
Market value at 31 March 2018	1,064,847	1,046,917
Historical cost at 31 March 2018	565,380	565,380

Market value of investments representing 5% or more of the total portfolio are as follows:

		31.3.2018	31.12.2016
Units		£	£
36,903	M & G Charifund	563,584	566,617
124,741	COIF Fixed Interest	179,792	173,315
582	COIF Investment Fund	8,287	7,907
97,009	COIF Property	114,033	109,067
13,981	COIF Investment Fund	199,151	190,011
		1,064,847	1,046,917
13 Debtors		31.3.2018	31.12.2016
		£	£
Sundry Debtors		106,866	-
Prepayments		13,018	5,579
		119,884	5,579

14	Creditors: Amounts Falling Due Within One Y	ear		31.3.2018 £	31.12.2016 £
	Accruals			49,895	27,871
	Income relating to future years			251,285	
				301,180	27,871
15	Restricted Funds	Balance 1 January 2017 <b>£</b>	Incoming resources £	Outgoing resources £	Balance 31 March 2018 £
	Mona Grey Settlement				
	Capital	7,089	-	(3,953)	3,136
	Atkinson Morley Neuroscience Scholarship				
	Capital	2,775	-	(2,775)	-
		9,864	-	(6,728)	3,136

#### **Mona Grey Settlement**

The capital sum will produce an income which will be used at the discretion of the Foundation's Executive to include funding of Students' Days, History of Nursing seminars and activities linked to the promotion of the Florence Nightingale Foundation.

#### 16 Limited Liability

The Foundation does not have any share capital and is limited by guarantee. The liability of the members is limited to £1 each in the event of the winding up of the Foundation. The total number of Trustees at 31 March 2018 was 10 (2016 - 14).

#### 17 Scholarship Commitments

Scholarships awarded but not yet paid by the Foundation at 31 March 2018 were as follows:

Scholarships relating to periods from 2019 to 2021	<b>£</b> 1,512,625	
<b>18 Other financial commitments</b> At 31st March 2018 the company had annual commitments under non-cancellable operating leases as set out below:	31.3.2018 £	31.12.2016 £
Operating leases which expire within one year Operating leases which expire between one and five years	30,375 162,000	24,629 24,629
	192,375	49,258

Leadership Scholars					
Year	Scholar Name	Job Title	Employing Organisation	Region	Scholarship Type
2017-18	Mandy Catchpole	Head of Nursing - Quality	NHS Hastings and Rother CCG	East Sussex	Aspiring Nurse Director
2017-18	Adrian Bryan	Head of Quality CCG KSS	High Weald Lewes Havens CCG	East Sussex	Aspiring Nurse Director
2017-18	Valentine Chiguvare	Associate Director of Nursing-Clinical Standards	Hampshire Hospitals Foundation Trust	Hampshire	Aspiring Nurse Director
2017-18	Alice Davies	Assistant Director of Nursing CPEoL Pennine	Pennine Acute Hospitals	Huddersfield, West Yorkshire	Aspiring Nurse Director
2017-18	Ruth Dando	Lead Nurse ITU	Bupa, Cromwell, London	London	Aspiring Nurse Director
2017-18	Louise Crosby	Director of Nursing	Barts NHS	London	Aspiring Nurse Director
2017-18	Lian Lee	Matron (Theatres/Endoscopy)	The Royal Marsden Hospital NHS Foundation Trust	London	Aspiring Nurse Director
2017-18	Dee Waterhouse	Lead Nurse Bupa	Bupa, Salford	Manchester	Aspiring Nurse Director
2017-18	Paula Bennett	Associate Director Manchester AHSN	Greater Manchester Academic Health Science Network	Manchester	Aspiring Nurse Director
2017-18	Lisa Wilks	Lead Nurse Q&S Wales	Velindre Cancer Centre	Newport, South Wales	Aspiring Nurse Director
2017-18	Heather Gallagher	Associate Director Midwifery Northampton	Northampton General Hospital NHS Trust	Northampton	Aspiring Nurse Director
2017-18	Mia Cruttenden	Deputy Director of Nursing & Quality KSS	NHS England South (South East)	Tonbridge, Kent	Aspiring Nurse Director
2017-18	Jay Behizulu Dungeni	Deputy Director of Nursing & Integrated Governance	The Hillingdon Hospitals NHS Foundation Trust	Uxbridge	Aspiring Nurse Director
2017-18	Norma Hayes	Clinical Nurse Specialist Continence Wirral	Wirral Community NHS Foundation Trust	Wirral	Aspiring Nurse Director
2017-18	Charlotte Phillips- Girling	General Nurse, RAF	HQ Air, Health Directorate	Buckinghamshire	Emerging Leader
2017-18	Linda Tinkler	Academic Research Nurse	University Hospital of North Durham/Academic Research Nurse Visiting Lecturer	Durham	Emerging Leader
2017-18	Carol Gill	Clinical Occupational Health Nurse	Bupa, London	London	Emerging Leader
2017-18	Kelly Wright	Lead Nurse Acute Kidney Injury	King's College Hospital	London	Emerging Leader

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2017-18	Emma Masters	Advanced Nurse Practitioner Young Adults	The Royal Marsden Hospital	London	Emerging Leader
2017-18	Paul Carruthers	Clinical Lead Bupa	Bupa, Manchester	Manchester	Emerging Leader
2017-18	Marie Marshall	Paediatric Diabetes Nurse Specialist	Royal Manchester Children's Hospital	Manchester	Emerging Leader
2017-18	Katie Oakes	Senior Ward Sister	Derriford Hospital, Plymouth	Plymouth	Emerging Leader
2017-18	Nyadzai Priscillah Ruzayi	Ward Manager	Tunbridge Wells Hospital	Tunbridge Wells	Emerging Leader
2017-18	Emma Maxwell	Urgent Primary Care Wirral	Wirral Community NHS Foundation Trust	Wirral	Emerging Leader
2017-18	Susan Marshall	Chief Nurse	Brighton General Hospital	Brighton	General Leader
2017-18	Marcus Bailey	Ambulance Service	East of England Ambulance Service NHS Trust	Cambridgeshire	General Leader
2017-18	Geoffrey Hall	Army OH Nurse	QARANC	Glasgow	General Leader
2017-18	Caron Swinscoe	Director of Nursing	NHS Digital	Leeds	General Leader
2017-18	Jan Noble	Transformation in St Christopher's Hospice	St Christopher's Hospice	London	General Leader
2017-18	Jane Simons	Chief Nurse Addaction	Addaction	London	General Leader
2017-18	Julie Sanders	Head of Clinical Research	Barts Health	London	General Leader
2017-18	Sonja McIlfatrick	Professor in Nursing Cancer & End of Life Care	Ulster University	Northern Ireland	General Leader
2017-18	Judith Douglas	Director of Nursing	East Midlands Ambulance Service NHS Trust	Nottingham	General Leader
2017-18	Penny Smith	Director of Nursing	NHS England South (SW)	Somerset	General Leader
2017-18	Eileen Whelan	Chief Director of Nursing & Midwifery	Dublin Midlands Hospital Group, S Ireland	Southern Ireland	General Leader
2017-18	Mary Brosnan	Director of Midwifery & Nursing	National Maternity Hospital, S Ireland	Southern Ireland	General Leader
2017-18	Emma Wadey	Deputy Chief Nurse	On Secondment to Southern Health	West Sussex	General Leader

		Resear	ch Scholars		
2017-18	Julia Wells	Nurse Consultant Older Adults Mental Health	NHS Grampian	Aberdeen, Scotland	Research
2017-18	Eleanor Peter	Medical Nurse Practitioner	Royal United Hospital	Bath	Research
2017-18	Rachel Muncey	Health Visitor	Berkshire Healthcare Foundation Trust	Berkshire	Research
2017-18	Sharon Garner	Research Nurse	University Hospital Birmingham	Birmingham	Research
2017-18	Allison Bentley	Dementia Research Nurse	Cambridge & Peterborough NHS Foundation Trust	Cambridgeshire	Research
2017-18	Ann-Marie Wardell	Paediatric Research Nurse	University of Cambridge	Cambridgeshire	Research
2017-18	Louisa Long	Staff Nurse, Enhanced Care Ward. Adult Mental Health Inpatient.	Derbyshire Healthcare Foundation Trust	Derbyshire	Research
2017-18	Ann Cox	Service Line manager CAMHS	Derbyshire Healthcare NHS Foundation Trust	Derbyshire	Research
2017-18	Olivia Silverwood- Cope	Midwife	Gloucestershire NHS Foundation Trust	Gloucestershire	Research
2017-18	Emma Rickards	Early Supported Discharge Lead	Liverpool Heart and Chest	Liverpool	Research
2017-18	Kizhakkekara Molamma Varghese	Sister	Imperial College Healthcare NHS Trust	London	Research
2017-18	Zoe Yessaian	Community Psychiatric Nurse	East London Foundation Trust	London	Research
2017-18	Ingrid Hass	Staff Nurse - Hyper Acute Stroke Unit	University College Hospital London	London	Research
2017-18	Patricia Kiilu	Midwife/Research Nurse	London North West Health Care NHS Trust	London	Research
2017-18	Joanna De Souza	Lecturer in Nursing	King's College London	London	Research
2017-18	Timothy Stephens	Nurse researcher	Barts Health NHS Trust	London	Research
2017-18	Aileen Aherne	Jaundice CNS	Central Manchester University Hospitals NHS Foundation Trust	Manchester	Research
2017-18	Qun Wang	Nurse Consultant	Queen Elizabeth Hospital King's Lynn NHS Foundation Trust	Norfolk	Research
2017-18	Gerard Quinn	Staff Nurse	Belfast Health and Social Care Trust	Northern Ireland	Research
2017-18	Rebecca Delpino	Educator Medical Devices	Heart of England NHS Foundation Trust	Solihull, West Midlands	Research
2017-18	Amanda Harris	Primary Ciliary Dyskinesia & Children's Respiratory Nurse Specialist	Southampton Children's Hospital,	Southampton	Research
2017-18	Wendy Webb	Senior Staff Nurse (Nights)/ Nurse Independent Prescriber	Crisis Team	Warwick	Research

		Trave	el Scholars		
2017-18	Una Adderley	Lecturer in Community Nursing	University of Leeds	Leeds	Travel
2017-18	Odette Rawdon	CAMHS Crisis and Home Treatment Practitioner	Lincolnshire Partnership Foundation Trust	Lincolnshire	Travel
2017-18	Cristina Fernandez Turienzo	Research Assistant	King's College London	London	Travel
2017-18	Sarah Lea	Research Facilitator	University College London Hospitals NHS Foundation Trust	London	Travel
2017-18	Sarah Russell	Head of Research and Evidence	Hospice UK	London	Travel
2017-18	Sheila Small	Partnership Quality Lead	Macmillan Cancer Support	London	Travel
2017-18	Charlotte Weston	Lead Nurse	The Royal Marsden NHS Foundation Trust/ Teenage Cancer Trust	London	Travel
2017-18	Virginia Bennett	Lecturer Children and Young People's Nursing	University of Manchester	Manchester	Travel
2017-18	Shauna Duggan & Stephanie Dunleavy	Lecturers in Nursing	Ulster University	Northern Ireland	Travel
2017-18	Rosemary Kelly	PhD student	Ulster University	Northern Ireland	Travel
2017-18	Sheena Stothers	Complex Skin Cancer Clinical Nurse	South Eastern Healthcare Trust	Northern Ireland	Travel
2017-18	Lauren Harding	School Nurse	Oxford Health NHS Foundation Trust	Oxford	Travel
2017-18	Neesha Oozageer Gunowa	Doctoral Researcher	Oxford Institute of Nursing, Midwifery and Allied Health Research	Oxford	Travel
2017-18	Vincenzo Calascibetta	Registered General Nurse	Spire Healthcare Limited	Redbridge, Ilford	Travel
2017-18	Marie Lewis	Practice Development Midwife Band	Powys Teaching Health Board	Wales	Travel
2017-18	Andrew Walker	Lecturer in Mental Health Nursing	Bangor University	Wales	Travel

Leadership Scholars					
Year	Name	Current Role	Organisation	Location	Scholarship type
2016-17	Arlene Wellman	Chief Nurse and Director of Infection Prevention Control Designate	Epsom Hospital	Surrey	Aspiring Nurse Director
2016-17	Claire Wedge	Head of Governance and Patient Safety	Wirral Community NHS Foundation Trust	Wirral	Aspiring Nurse Director
2016-17	Donna Lamb	Director of Nursing and Non-Medical Professionals	Hounslow & Richmond Community Healthcare NHS Trust	Middlesex	Aspiring Nurse Director
2016-17	Elaine Coghill	Lead NMAHP Research, Education and Practice Development	Newcastle upon Tyne Hospitals NHS Foundation Trust	Newcastle upon Tyne	Aspiring Nurse Director
2016-17	Gemma Craig	Assistant Deputy Chief Nurse	Maidstone and Tunbridge Wells NHS Trust	Kent	Aspiring Nurse Director
2016-17	Jacqueline Burrow	Director of Nursing	Salford Royal NHS Foundation Trust	Manchester	Aspiring Nurse Director
2016-17	Jacqueline Vincent	Interim Deputy Director of Nursing & Quality	Hertfordshire Partnership NHS University Foundation Trust	Hertfordshire	Aspiring Nurse Director
2016-17	Jessica Read	LSA Midwifery Officer for London	NHS England (London Region)	London	Aspiring Nurse Director
2016-17	Julie Gray	Head of Nursing and Quality / Trust wide Lead Non Medical Prescribing	The Christie NHS Foundation Trust	Manchester	Aspiring Nurse Director
2016-17	Lucy Brown	Head of Clinical Leadership and Engagement	Bupa UK	London	Aspiring Nurse Director
2016-17	Mercy Wasike	Interim Integrated Primary Care Manager	Camden Community Health	London	Aspiring Nurse Director
2016-17	Rachael Corser	Director of Nursing & Patient Experience	East and North Hertfordshire NHS Trust	Hertfordshire	Aspiring Nurse Director
2016-17	Alice Denga	Matron	Guy's and St Thomas NHS Foundation Trust	London	Emerging Leader
2016-17	Amy Uren	Senior Nurse Professional Standards and Development	Cwm Taf University Health Board	Wales	Emerging Leader
2016-17	Deborah Harris	Head of Nursing Acute Services	Cwm Taf University Health Board	Wales	Emerging Leader
2016-17	Hartness Samushonga	Operations Manager	Humber Foundation Trust NHS	East Yorkshire	Emerging Leader
2016-17	Jamie Cargill	Teenage Cancer Trust Lead Nurse Teenage and Young Adult (TYA) Service South West	University Hospitals Bristol NHS Foundation Trust	Bristol	Emerging Leader
2016-17	Joanna Poole	Deputy Head of Nursing	University Hospitals Bristol NHS Foundation Trust	Bristol	Emerging Leader

2016-17	Karen Turner	Oncology Therapy Service Lead & Clinical Specialist Physiotherapist	Royal Free London NHS Foundation Trust	London	Emerging Leader
2016-17	Lena Abdu	Improvement & Transformation Lead	First Community Health & Care	Surrey	Emerging Leader
2016-17	Moses Mburu	Team Leader – Oak (PICU) Unit	Hertfordshire Partnership NHS Foundation University Trust	Hertfordshire	Emerging Leader
2016-17	Rhonda Pickering	Head of Clinical Services	Derbyshire Health United	Derby	Emerging Leader
2016-17	Sakina Jaffrey	Matron for Day Surgery and Main Theatres	Ashford Hospital	Middlesex	Emerging Leader
2016-17	Sarah Jones	District Nurse Team Leader	West Kirby Community Nurses	Wirral	Emerging Leader
2016-17	Allison Cannon	Chief Nurse - secondment	Surrey and Sussex STP Commissioners	Sussex	General Leader
2016-17	Amanda Croft	Deputy Chief Executive	NHS Grampian	Aberdeen, Scotland	General Leader
2016-17	Angela Reed	Senior Professional Officer	Northern Ireland Practice and Education Council for Nursing and Midwifery	Northern Ireland	General Leader
2016-17	Brian Boag	Associate Dean Operations & Strategic Planning / School of Health & Society	University of Salford	Manchester	General Leader
2016-17	Clare Cable	Chief Executive and Nurse Director	Queen's Nursing Institute Scotland	Scotland	General Leader
2016-17	Debra Salmon	Dean	University of London	London	General Leader
2016-17	Emma Costello	Clinical Lead - Dementia and Locum GP	High Weald Lewes Havens CCG	East Sussex	General Leader
2016-17	Helen Burn	Deputy Chief Pharmacist	Maidstone and Tunbridge Wells NHS Trust	Kent	General Leader
2016-17	Joan Myers	Associate Director for Health Services & Chief Nurse	Achieving for Children	Surrey	General Leader
2016-17	Joanna Bosanquet	Deputy Chief Nurse	Public Health England	London	General Leader
2016-17	Laura Serrant	Professor of Nursing	Sheffield Hallam University	Sheffield	General Leader
2016-17	Lesley Spencer	Director of Patient Care and Strategic Development	Princess Alice Hospice	Surrey	General Leader
2016-17	Lynne Wigens	Regional Chief Nurse	NHS Midlands and the East	Cambridge	General Leader
2016-17	Michael Flanagan	Consultant Nurse & Clinical Lead, Drug & Alcohol	Surrey & Borders Partnership NHS Foundation Trust	Surrey	General Leader
2016-17	Sue Roberts	Professional Standards Manager	Bupa UK	Leeds	General Leader

		Researc	h Scholars		
2016-17	Karen Birch	Lead Nurse, Practice Development	Kettering General Hospital NHS Trust	Northampton	Research
2016-17	Helen Burke	Specialist Nurse Practitioner – School Health	Derbyshire Community Health Services Foundation Trust	Derbyshire	Research
2016-17	Freeman Chakonda	Sexual Health Nurse Practitioner	Solent NHS	Southampton	Research
2016-17	Anna Connolly	Staff Nurse	Newcastle Upon Tyne Foundation Trust	Newcastle upon Tyne	Research
2016-17	Ann Cox	Child and Adolescent Mental Health Services (CAMHS) manager/ Cognitive Behavioural Therapy Lead	Derbyshire Healthcare NHS Foundation Trust	Derbyshire	Research
2016-17	Katrina Creedon	Corporate Nurse	Heart of England Foundation NHS Trust	Birmingham	Research
2016-17	Sekesai Dachi	Registered General Nurse	ID Medical Group	Milton Keynes	Research
2016-17	Joanna De Souza	Lecturer In Nursing	King's College London	London	Research
2016-17	Sharon Eustice	Consultant Nurse	Peninsula Community Health	Cornwall	Research
2016-17	Rhoda Flynn	Lead HDU Midwife	Heart of England NHS Foundation Trust	Birmingham	Research
2016-17	Lin Graham-Ray	Nurse Consultant Looked after Children and Care Leavers	Central London Community Health Care NHS Trust	London	Research
2016-17	Claire Hargrave	Primary Nurse	South London and Maudsley NHS Foundation Trust	London	Research
2016-17	Stacy Johnson	Associate Professor	University of Nottingham	Nottingham	Research
2016-17	Nina Khazaezadeh	Consultant Midwife/ part time PhD student	Guys' & St, Thomas' NHS Foundation Trust	London	Research
2016-17	Moya Kirmond	Clinical Research Nurse ,   NET Research Team - Neuro, Emergencies and Trauma Research Team	Imperial College Healthcare NHS Trust	London	Research
2016-17	Robyn Lotto	Senior Lecturer	Liverpool John Moores University	Liverpool	Research
2016-17	Fiona Lynch	Nurse Consultant	Evelina London Children's Hospital, Guy's & St Thomas' NHS Trust	London	Research
2016-17	Jennifer McEwan	Staff Nurse	The Newcastle Upon Tyne NHS Foundation Trust	Newcastle upon Tyne	Research
2016-17	Victoria Mockridge	Senior Sister/Emergency Nurse Practitioner/Trainee Advanced Nurse Practitioner	Royal United Hospital NHS Foundation Trust	Bath	Research
2016-17	Daisy Sandeman	Clinical Nurse Practitioner Cardio Thoracic Unit	Royal Infirmary of Edinburgh NHS Lothian	Edinburgh	Research

2016-17	Chun Hua (Joy) Shao	Senior Lecturer/Programme Leader	Northumbria University	Newcastle	Research
2016-17	Jacqueline Sinclair	Divisional Head of Nursing Liver & Renal Services	Kings College Hospital	London	Research
2016-17	Lindsey Udberg	Senior Sister	Great North Trauma and Emergency Centre	Newcastle	Research
2016-17	Nicola Vellacott	Safeguarding Children Advisor	Central London Community Health	London	Research
2016-17	Wendy Webb	Night-time Senior Staff Nurse	Myton Hospice	Worcester	Research
2016-17	Julia Wells	Older Adults Mental Health Nurse Consultant	NHS Grampian	Aberdeen	Research
2016-17	Zoe Yessaian	Clinical Specialist	Camden and Islington NHS foundation Trust Early Intervention Service	London	Research

	Travel Scholars					
2016-17	Jane Appleton	Professor in Primary and Community Care	Oxford Brookes University	Oxford	Travel	
2016-17	Ruth Auton	Senior Nurse	Senior Nurse Health Education England		Travel	
2016-17	Alison Bunce	Compassionate Inverclyde Programme Lead	Ardgowan Hospice	Scotland	Travel	
2016-17	Gary Francis	Associate Professor	London South Bank University	London	Travel	
2016-17	Vanessa Heaslip	Principal Academic Nursing	Bournemouth University	Bournemouth	Travel	
2016-17	Julia Judd	Advanced Nurse Practitioner	Southampton University Hospital NHS Foundation Trust	Southampton	Travel	
2016-17	Arlene "Helen" Kerr	Lecturer: Education	Queen's University, Belfast	Belfast, Northern Ireland	Travel	
2016-17	Joanne Kirby & Roisin McKeon- Carter	Family Support Sister Clinical Director Neonatal Services / Advanced Neonatal Nurse Practitioner	Plymouth Hospitals Trust	Plymouth	Travel	
2016-17	Anne McKenny & Jane Curran & Angela O'Neill & Imelda McLeod	Clinical services Manager, Team Lead Adult Eating Disorder Service, Team Lead Adult Eating Disorder Service, Clinical Service Manager Adult Eating Disorder Service	Belfast Health and Social care Trust, Southern Health and Social care Trust, Western Health and Social care Trust, Northern Health and Social care Trust	Belfast, Northern Ireland	Travel	
2016-17	Martina Meenon & Moira Mallon	Nurse Education Consultants	HSC Clinical Education Centre	Londonderry, Northern Ireland	Travel	
2016-17	Audrey Morrison	Research Practitioner	Beatson West of Scotland Cancer Centre	Stirlingshire, Scotland	Travel	
2016-17	Sarah Neill	Associate Professor in Children's Nursing	University of Northampton	Northampton	Travel	
2016-17	Robert Nettleton	Education Advisor	Institute of Health Visiting	Manchester	Travel	
2016-17	Helen Robbins	Associate Director of Nursing	NHS Grampian	Aberdeen	Travel	
2016-17	Suzan Robinson- Southey	Consultant Nurse	Queen Elizabeth Hospital Kings Lynn	Norfolk	Travel	
2016-17	Stephen Taylor	Practice Skills Learning & Simulation	West London Mental Health Trust	London	Travel	
2016-17	Claire Whitehouse	Lead Nurse for Research	The James Paget University Hospital	Norfolk	Travel	

## Appendix 3 – Activities of FNF Clinical Professors

	FNF Clinical Professor	Author List	Publication Title	Reference
2018		Leach, M., Jones, M., Bressington, D., <b>Nolan, F</b> ., Jones, A., Muyambi, K., Gillam, M., Grey, R.	The association between mental health nursing and hospital admissions for people with serious mental illness: a protocol for a systematic review	Systematic Reviews 2018 7:2 DOI 10.1186/s13643 017-0658
2017	_ Fiona Nolan	Hughes, E., Edmondson, A. J, Onyekwe, I., Quinn, C., <b>Nolan, F.</b>	Identifying and addressing sexual health in serious mental illness: views of mental health staff working in two NHS organisations in England	International Journal of Mental Health Nursing 2017 DOI: 10.1111/inm.12402
2017		Smith, T., Clark, A., Dodd, E., Khoo, M.E., Heneker, S., Cross, J., Cheston, R., Gray, R., Fox, C., <b>Nolan, F.</b>	Feasibility study suggests no impact from protected engagement time on adverse events in mental health wards for older adults.	International Journal of Mental Health Nursing, 2017 doi: 10.1111/inm.12362
2017		Dodd, E., Cheston, R., Procter, C., Heneker, S., Gray, R., Fox, C., <b>Nolan,</b> <b>F.</b>	Protected engagement time on older adult mental health wards: A thematic analysis of the views of patients, carers, and staff.	International Journal of Mental Health Nursing 2017 doi: 10.1111/inm.12342
2017		<b>Coates VE</b> , Horigan G, Davies M, Davies MT	Educational and psychological aspects why young people with Type 1 diabetes decline structured education with a view to overcoming barriers.	Diabetic Medicine. 34 (8), 1092-1099. DOI: 10.1111/dme.13368.
2017		Coates VE, Slevin M, Carey M, slater P, Davies M.	Declining structured diabetes education in those with type 2 diabetes: A plethora of individual and organisational reasons.	Patient Education and Counselling. 101(4):696-702 doi: 10.1016/j.pec.2017.10.013. Epub 2017 Nov 2
2018	Viv Coates	Taggart L, Truesdale M, Carey ME, Martin-Stacey L, Scott J, Bunting B, <b>Coates VE,</b> Brown M, Karatzias T, Northway R, Clarke JM	Educational and psychological aspects Pilot feasibility study examining a structured self- management diabetes education programme, DESMOND-ID, targeting HbA1c in adults with intellectual disabilities.	Diabetic Medicine. 35; 1357-146. DOI: 10.1111/dme.13539.
2018		Mulhall P, Taggart L. <b>Coates V</b> , McAloon T, Hassiotis A.	A systematic review of the methodological and practical challenges of undertaking randomised-controlled trials with cognitive disability populations	Social Science & Medicine. 200, 114-128. https://doi.org/10.1016/j.socscimed.2018.01.032
2017		Coates VE	Role of nurses in supporting patients to self- manage chronic conditions.	Nursing Standard, 31 (38) 42-46.
2017		McCorkell G, Harkin D, McCory V & Coates VE	Care of patients with dementia in an acute trauma and orthopaedic unit.	Nurs Stand. 2017 May 3;31(36):44-53. doi: 10.7748/ns.2017.e10250.
2018	Christi Deaton	Yorke J, <b>Deaton C,</b> Campbell M, McGowen L, Sephton P, Kiely DG, Armstrong I.	Symptom severity and its effect on health- related quality of life over time in patients with pulmonary hypertension: a multisite longitudinal cohort study.	BMJ Open Respiratory Research. 2018; 5(1): e000263. doi: 10.1136/bmjresp-2017-000263. eCollection 2018.
2018	Deaton	Adams C, Stears A, Savage D, Deaton C.	"We're stuck with what we've got": The impact of lipodystrophy on body image. Journal of Clinical Nursing.	doi: 10.1111/jocn.14342. [Epub ahead of print]

2017		Driscoll A, Grant MJ, Carroll D, Dalton S, <b>Deaton C,</b> Jones I, Lehwaldt D, McKee G, Munyombwe T, Astin F	The effect of nurse-to-patient ratios on nurse- sensitive patient outcomes in acute specialist units: a systematic review and meta-analysis.	European Journal of Cardiovascular Nursing. 2017 ePub ahead of print. DOI: 10.1177/14745151117721561
2017		Piepoli MF, Corrà U, Dendale P, Frederix I, Prescott E, Schmid JP, Cupples M, <b>Deaton C</b> , Doherty P, Giannuzzi P, Graham I, Hansen TB, Jennings C, Landmesser U, Marques- Vidal P, Vrints C, Walker D, Bueno H, Fitzsimons D, Pelliccia A.	Adams C, Stears A, Savage D, Deaton C.	Journal of Cardiovascular Nursing. 2017; 16(5) 369– 380. Also published in: Eur Heart J Acute Cardiovasc Care. 2017 Jun;6(4):299-310. doi: 10.1177/2048872616689773
2017		French D, Cameron E, Benton JS, Deaton C, Harvie M.	Can communicating personalized disease risk promote healthy behaviour change? A systematic review of systematic reviews.	Annals of Behavioural Medicine. October 2017. doi:10.1007/s12160-017-9895-z. Co-Author & Co-I on grant
2017		C Deaton	Reducing premature mortality from non- communicable diseases	Nursing Standard. 2017; 31 (34): 40 – 43. Doi:10.17748/ns.2017.e10664
2017		lles-Smith H, <b>Deaton C,</b> Campbell M, Mercer C, McGowan L	The experiences of myocardial infarction patients readmitted within six months of primary percutaneous coronary intervention.	Journal of Clinical Nursing, 2017. doi: 10.1111/jocn.13715.
2018		O'Gara G, Tuddenham S, Pattison N	Haemato-oncology patients' perceptions of health-related quality of life after critical illness: a qualitative phenomenological study.	Int Crit Care Nurs Oct 19. pii: S0964- 3397(17)30159-3. doi: 10.1016/j.iccn.2017.09.011.
2017		Pattison NA	The morality of good end-of-life care in critical care.	Nursing in Critical Care. 22(3):123-124.
2017	Natalie Pattison	Rose L, Istanboulian L, Allum L, Burry L, Dale C, Hart N, Kydonaki C, Ramsay P, <b>Pattison N,</b> Connolly B;	PERFORM study investigators. Patient-and family-centred performance measures focused on actionable processes of care for persistent and chronic critical illness: protocol for a systematic review.	Syst Rev. 2017 Apr 17;6(1):84
2017		Coombs MA, Darlington AE, Long- Sutehall T, <b>Pattison N</b> , Richardson A	Transferring patients home to die: what is the potential population in UK critical care units?	BMJ Supportive Palliative Care. 7(1): 98-101
2017		<b>Pattison N,</b> Arulkumaran N, Humpheys S, Walsh T	Exploring obstacles to critical care trials in the UK: A qualitative investigation.	Journal of the Intensive Care Society. 18(1): 36-46
2018	Candy	Wylde V, Bertram W, Beswick AD, Blom A, Bruce J, Burston A, Dennis J, Garfield K, Howells N, Lane A, <b>McCabe C</b> , Moore A, Noble S, Peters J, Price A, Sanderson E, Toms A, Walsh D, White S, Gooberman-Hill R.	Clinical- and cost-effectiveness of the STAR care pathwaycompared to usual car e for patients with chronic pain after totalknee r eplacement: study protocol for a UK randomised controlledtrial.	Trials. 2018 Feb 21;19(1):132. doi: 10.1186/s13063- 018-2516-8
2018	McCabe	Wylde V, Howells N, Bertram W, Moore A, Bruce J, <b>McCabe C</b> , Blom A, Dennis J, Burston A, Gooberman- Hill R.	Development of a complex intervention for people with chronicp ain after knee replacement: the STAR care pathway.	Trials. 2018 Jan 23;19(1):61. doi: 10.1186/s13063- 017-2391-8.
2018		Llewellyn A & <b>McCabe CS</b> (co-leads). White P, Hibberd Y, Davies L, Marinus J, Perez RSGM, Thomassen I,	Are you better? A multi-centre study exploring the patients' definition of recovery from Complex Regional Pain Syndrome	Eur J Pain. 2018 Mar;22(3):551-564. doi: 10.1002/ejp.1138. Epub 2017 Dec 1.

		Brunner F, Sontheim C, Birklein F, Goebel A, Haigh R, Connett R, Maihöfner C, Knudsen L, Harden N, Zyluk A, Shulman D, Small H, Gobeil F, Moskovitz P.		
2017		Goebel A, Bisla J, Carganillo R, Frank B, Gupta R, James M, Kelly J, <b>McCabe C</b> , Murphy C, Padfield N, Philips C, Saunders M, Serpell M, Shenker N, Shoukrey K, Wyatt, L, Ambler G.	Low-dose intravenous immunoglobulin treatment for longstanding Complex Regional Pain Syndrome, a randomized placebo- controlled phase III multicentre trial.	Annals of Internal Medicine 2017; 167 (7): 476-483.
2017		Brun C, Gagné M, <b>McCabe C</b> , Mercier C.	Sensory Disturbances, but not Motor Disturbances, induced by Sensorimotor Conflicts are increased in the Presence of Acute Pain.	Frontiers in Integrative Neuroscience, July 2017 https://doi.org/10.3389/fnint.2017.00014
2017		Grieve S, Perez RSGM, Birklein F, Brunner F, Bruehl S, Harden RN, Packham T, Gobeil F, Haigh R, Holly J, Terkelsen A, Davies L, Lewis J, Thomassen I, Connett R, Worth T, Vatine J-J, <b>McCabe CS</b> .	Recommendations for a first Core Outcome Measurement set for complex regional PAin syndrome Clinical sTudies (COMPACT).	Pain 2017; June 158(6): 1083-1090
2018		David Stonehouse, Christine Piper, Michelle Briggs, Fraser Brown:	Play Within the Pre-registration Children's Nursing Curriculum Within the United Kingdom: A Content Analysis of Programme Specifications.	Journal of Paediatric Nursing 02/2018;, DOI:10.1016/j.pedn.2018.01.013
2017		Jaqui Long, <b>Michelle Briggs,</b> Felicity Astin:	Overview of Systematic Reviews of Mindfulness Meditation-based Interventions for People With Long-term Conditions.	Advances in mind-body medicine 10/2017; 31(4):26- 36.
2017	Michelle	Ganesan Baranidharan, <b>Michelle</b> <b>Briggs</b>	Local and regional anaesthetic techniques in wound management.	Surgery (Oxford) 07/2017; 35(9)., DOI:10.1016/j.mpsur.2017.06.003
2017	Briggs	Muhammad Abdul Hadi, <b>Michelle</b> <b>Briggs</b> , José Closs, Kathryn Marczewski, David Phillip Alldred	'Treated as a number, not treated as a person': A qualitative exploration of the perceived barriers to effective pain management of patients with chronic pain.	BMJ Open 06/2017; 7(6)., DOI:10.1136/bmjopen- 2017-016454
2017		Anya Petyaeva, Martine Kajander, Vanessa Lawrence, Lei Clifton, Alan J Thomas, Clive Ballard, Iracema Leroi, <b>Michelle Briggs,</b> Jose Closs, Tom Dening, Kayleigh-Marie Nunez, Ingelin Testad, Renee Romeo, Anne Corbett	Feasibility of a staff training and support programme to improve pain assessment and management in people with dementia living in care homes.	Journal of Geriatric Psychiatry 05/2017; 33(Suppl 1)., DOI:10.1002/gps.4727
2018	Christine Norton	Dibley L,, Czuber-Dochan W, Wade T, Duncan J, Burch J, Warusavitarne J, <b>Norton C,</b> Artom M, O'Sullivan L, Verjee A, Cann D; members of the stoma PPI team.	Patient decision-making about emergency and planned stoma surgery for IBD: a qualittaive exploration of patient and clinician perspectives	Inflammatory Bowel Disease, 2018. <b>24</b> (2): p. 235- 246.
2018		Sweeney L, Moss-Morris R, Czuber- Dochan W, Meade L, Chumbley G, Norton C.	Systematic review: psychosocial factors associated with pain in inflammatory bowel disease.	Aliment Pharmacol Ther, 2018. <b>47</b> : p. 715-729.

2018	Tauber-Gilmore M, Addis G, Zahran Z, Black S, Baillie L, Procter S, <b>Norton C.</b>	The views of older people and health professionals about dignity in acute hospital care	Journal of Clinical Nursing, 2018. <b>27</b> : p. 223-234.
2017	Artom M, Czuber-Dochan W, Sturt J, <b>Norton C.</b>	Cognitive behavioural therapy for the management of inflammatory bowel disease- fatigue with a nested qualitative element: study protocol for a randomised controlled trial.	Trials, 2017. <b>18</b> (213): p. doi: 10.1186/s13063-017- 1926-3.
2017	Combes, S., S. Woodward, and <b>C.</b> Norton,	"It is what it is": mothers' experiences of providing bladder and bowel care to their daughters living with life-limiting conditions.	International Journal of Palliative Nursing, 2017. <b>23</b> (12): p. 588-595.
2017	Dibley, L., <b>C. Norton</b> , and E. Whitehead,	The experience of stigma in inflammatory bowel disease: an interpretive (hermeneutic) phenomenological study.	Journal of Advanced Nursing, 2017. <b>DOI:</b> 10.1111/jan.13492: p. 1-14.
2017	Goodman C, <b>Norton C</b> , Buswell M, Russell B, Harari D, Harwood R, Roe B, Rycroft-Malone J, Drennan VM, Fader M, Maden M, Cummings K, Bunn F.	Managing faecal incontinence in people with dementia resident in Care Homes: a realist synthesis of the evidence (FINCH study)	Health Technology Assessment, 2017.
2017	Jordan J, Gage H, Benton B, Lalji A, <b>Norton C,</b> Andreyev HJN.	Gastroenterologist and nurse management of symptoms after pelvic radiotherapy for cancer: an economic evaluation of a clinical Randomized Controlled Trial (the ORBIT study).	ClinicoEconomics and Outcomes Research, 2017. <b>9</b> : p. 241-249.
2017	Lawler M, Alsina D, Adams RA, Anderson AS, Brown G, Fearnhead NS, Fenwick SW, Halloran SP, Hochhauser D, Hull MA, Koelzer VH, McNair AGK, Monahan KJ, Näthke I, <b>Norton</b> <b>C</b> , Novelli MR, Steele RJC, Thomas AL, Wilde LM, Wilson RH, Tomlinson I; Bowel Cancer UK Critical Research Gaps in Colorectal Cancer Initiative.	Critical research gaps and recommendations to inform research prioritisation for more effective prevention and improved outcomes in colorectal cancer.	Gut, 2017. <b>DOI: 10.1136/gutjnl-2017-315333</b> : p. 1- 15.
2017	Lear R, Godfrey AD, Riga C, <b>Norton</b> <b>C,</b> Vincent C, Bicknell CD.	The impact of system factors on quality and safety in arterial surgery: a systematic review.	European Journal of Endovascular Surgery, 2017. doi: 10.1016/j.ejvs.2017.03.014.
2017	Muls A, Andreyev J, Lalondrelle S, Taylor A, <b>Norton C</b> , Hart A.	Systematic Review : The Impact of Cancer Treatment on the Gut and Vaginal Microbiome in Women With a Gynecological Malignancy.	International Journal of Gynaecological Cancer, 2017. DOI: 10.1097/IGC.000000000000999.
2017	Norton C, Czuber-Dochan W, Artom M, Sweeney L, Hart A.	Systematic review: interventions for abdominal pain management in inflammatory bowel disease. Alimentary Pharmacology and Therapeutics, 2017. <b>doi: 10.1111/apt.14108</b> : p. 1-11.	Alimentary Pharmacology and Therapeutics, 2017. doi: 10.1111/apt.14108: p. 1-11.
2017	Roe B, Goodman C, Russell B, Buswell M, <b>Norton C,</b> Harari D,Harwood R, Malone JR, Drennan VM, Fader M, Maden M, Bunn F.	Management of Fecal Incontinence in Older People With Dementia Resident in Care Homes: A Realist Synthesis-The FINCH Study.	J Am Med Dir Assoc. 2017 Sep 1;18(9):750-751. doi: 10.1016/j.jamda.2017.06.001. Epub 2017 Jul 21.

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2017		Topchiev, H., et al.,	What causes and what helps with fatigue in inflammatory bowel disease: a qualitative analysis of patient perspectives.	Gastrointestinal Nursing, 2017. 15(1): p. 37-42.
2018		2. Johnston, B, Patterson A, Bird L, Wilson E, Almack K, Mathews G, Seymour S	Impact of the Macmillan specialist Care at Home service: a mixed methods evaluation across six sites	BMC Palliat Care. 2018 Feb 23;17(1):36. doi: 10.1186/s12904-018-0281-9
2018		Finucane , A, Carduff E, Lugton J, Fenning S, <b>Johnston B</b> , Fallon M, Clark, Spiller J. A Murray S	Palliative and end-of-life care research in Scotland 2006–2015: a systematic scoping review	BMC Palliative Care https://doi.org/10.1186/s12904 017-0266-0
2017		Campling N, Richardson A, Mulvey M, Bennett M, <b>Johnston B</b> , Latter S	Self-management support at the end of life: Patients', carers' and professionals' perspectives on managing medicines	International Journal of Nursing Studies DOI: http://dx.doi.org/10.1016/j.ijnurstu.2017.08.019
2017	Bridget	Mathews G and Johnston B	Palliative and end-of-life care for adults with advanced chronic obstructive pulmonary disease: a rapid reviewfocusing on patient and family caregiver perspectives	Current Opinion in Supportive & Palliative Care do https://doi.org/10.1097/SPC.00000000000000303
2017	Johnston	Johnston, B, M Flemming,K; Hardy, B, Narayanasamy, M, Coole C	Patient reported outcome measures for measuring dignity in palliative and end of life care: a scoping review	BMC Health Services Research; https://doi.org/10.1186/s12913-017-2450-6
2017		<b>Johnston B</b> , Papadopoulou, C, Hunter K, Andrew J, Östlund U, Buchanan D,	What's dignity got to do with it? Patient experience of an end of life dignity intervention, The Dignity Care Pathway	Sage Open Nursing https://doi.org/10.1177/2377960817699839
2017		Popejoy E, Pollock K, Manning J Johnston B	Decision making and future planning for children with life-limiting conditions: A qualitative systematic review and thematic synthesis,	Child: Care, Health & Development https://doi.org/10.1111/cch.12461
2017		McIlfatrick S, Collins R, Connolly M, Larkin P, Murphy T, <b>Johnston</b> B	Evaluating a Dignity Care Intervention for palliative care in the community setting: community nurses' perspective,	Journal of Clinical Nursing https://doi.org/10.1111/jocn.13757

	FNF Clinical Professor	Invited Speaker Presentations
2017	Fiona Nolan	Mongolian Nursing Conference: Invited Keynote 'The global context of mental health nursing' 21-22 September 2017, Ulaanbaatar, Mongolia
2017	- Christi Deaton -	Finding Heart Failure – Identifying Patients with HFpEF. European Society of Cardiology Annual Congress. Barcelona 26 – 30 August, 2017.
2017	- Christi Deaton	State of the Art: Health-related Quality of Life in Cardiac Patients. European Society of Cardiology Annual Congress. Barcelona 26 – 30 August, 2017.
2017	Natalie Pattison	Invited speaker for symposium British Association of Critical Care Nurses, London 8th Sep 2017
2017		Optimising pain management in a rushed NHS. 25 <sup>th</sup> Managing Osteoporosis & 6 <sup>th</sup> Practical Management of Osteoporosis Conference 2017. The Royal Bournemouth and Christchurch Hospital NHS Foundation Trust, December 2017
2017		Diagnosis and Management of Complex Regional Pain Syndrome. North British Pain Society, Edinburgh November 2017
2017	Condy McCoho	The importance of building a symbiotic multi-disciplinary team. CRPS 2017 IASP Special Interest Group Cork Conference, Cork, Ireland. August 2017
2017	<ul> <li>Candy McCabe</li> </ul>	Evaluation and management of Complex Regional Pain Syndrome: our experience. 4th SEFID International Conference on Pain & Physiotherapy, Valladolid, Spain. May 4th- 6th 2017.
2017		Complex Regional Pain Syndrome: not just a painful limb. British Society for Surgery of the Hand Spring Scientific Meeting. Bath April 2017.
2017		From mirrors to sensory memories. Exploring and restoring sensorimotor function for the relief of persistent pain. British Society of Rheumatology AGM. Birmingham. April 2017. Droitwich prize lecture.
2018		Evaluation of a multi site specialist palliative care at home intervention oral paper The APM's Annual Supportive and Palliative Care Conference (ASP Conference) In Association with the Palliative Care Congress 15 - 16 March 2018
2017		Social Media & End of Life Care #WeEOLC. Modern Dying, New Hopes, New Choices, New Challenges. Palliative Care Conference, Dundee, UK
2017		Making a case for evidence based practice. NHS GGC Nursing and Midwifery Research Conference, Glasgow, UK
2017	Bridget Johnston	Building a research culture and asking "so what" Questions. Nursing GGC Conference, Glasgow, UK
2017	<ul> <li>Bridget Johnston</li> </ul>	Plenary Session Palliative Care – Nurse Researchers as Leaders in Global Health, Oncology Nursing Society International Joint Session. International Conference on Cancer Nursing (ICCN) 2017 Conference, California, USA
2017		Grief and Bereavement – The Social Impact. Dignity therapy in legacy making. 12th Asia Pacific Hospice Conference 2017, Singapore
2017		Palliative/End life care issues in the care of the older person Singapore Institute of Technology , Singapore
2017		Leading, learning and innovating. Hospice UK, Liverpool, UK
	FNF Clinical Professor	Book Title/Chapter
2017	<b>Nolan, F,</b> Watson, C., Khoo, M.E.	Engagement and observation of people at risk, in Psychiatric and Mental Health Nursing; the craft of caring Ch 17, Ed Chambers, M. CRC Press, Routledge, UK
2017	McCabe CS, Gauntlett-Gilbert J, Grieve S, Lewis J, Walsh N.	Multi-disciplinary Approaches to Managing Long-term Pain in Arthritis. Eds; Hochberg MC, Silman AJ, Smolen JS, Weinblatt ME, Wiseman MH Rheumatology 7th edition; Elsevier 2017



## Support us with our mission in continuing Florence's legacy.

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