

**MINUTES OF THE ANNUAL MEETING  
OF THE GENERAL COUNCIL OF  
THE NORTHERN POLICE CHARITIES**

**HELD AT THE ST ANDREWS, HARROGATE  
ON THURSDAY 28 JUNE 2018**

**PRESENT**

President	Baroness Harris of Richmond
Chairman of the Board of Trustees	Mr Liam Kelly
Treasurer	Mr Peter Henson
Chief Executive	Colonel Patrick Cairns

Members of the Board of Trustees of the two Charities, Delegates, Members of Donating Forces, Welfare Officers and Professional Advisors.

**APOLOGIES**

Apologies for non-attendance had been received from the following forces:

Civil Nuclear	(PTC & SGPCT)
Cumbria	(PTC & SGPCT)
Greater Manchester	(PTC & SGPCT)
Humber side	(PTC & SGPCT)
MoD	(PTC & SGPCT)
North Wales	(PTC & SGPCT)
West Mercia	(SGPCT)

Apologies for non-attendance have been received from the following Trustees:

George Clarke	Raymond Dutton	Martin Fotheringham
Drew Harris	Ian Hopkins	Martin Lally
Conor Moore	Dan Murphy	Lisa Winward

Apologies for non-attendance have also been received from the following:

Duke of York	Patron
Andrew Jones	MP
Holly Lynch	MP
Gavin Thomas	PSAEW
Mark Williams	PFOA
Jim McBrierty	Chair, RPOAS
Peter Sweeney	Blue Lamp Foundation
Sharron Ashurst	Blue Lamp Foundation
Chris McNichol	The Gurney Fund

and 45 representatives from constituent forces.

Approved by: \_\_\_\_\_ Chairman BoT Mr Liam Kelly Date \_\_\_\_\_

# NORTHERN POLICE CHARITIES

## JOINT MEETING

The President, Baroness Harris of Richmond, DL, addressed those present, explaining that she was delighted to be at the AGCM and welcomed all attendees to the Annual General Council Meeting.

1. **ATTENDANCE:** All Forces who contributed to the Charities with the exception of those detailed in the apologies section were present.
2. **APOLOGIES:** These had been received from those people listed in the preface to the Minutes.

### 3. **THE POLICE TREATMENT CENTRES**

#### 3.1 **MINUTES OF THE COUNCIL MEETING HELD ON 22 June 2017**

These had been circulated to all members and also displayed on the Charity's website and were taken as read. It was proposed by M Lindsay, PSNI and seconded by J Skelton, Nottinghamshire that they be accepted as a true record. All present agreed.

#### 3.2 **MATTERS ARISING FROM THE MINUTES**

There were no matters arising.

#### 3.3 **ANNUAL REPORT 2017**

**Presented by Liam Kelly, Chair, Board of Trustees**

As the Chair of the Board of Trustees of the Police Treatment Centres, L Kelly presented the Annual Report for the year 2017 which was contained within the Impact Report which all attendees had received.

There were no questions

#### 3.4 **INVESTMENT MANAGER REPORT**

**Presented by Nick Bence-Trower, Cazenove**

N Bence-Trower reported that at 31 December 2017 the PTC portfolio was valued at £2,097,758 which compares with £1,955,306 at 31 December 2016. In percentage terms 2017 performance was up 7.9%. Taking cash flows and income into account, since inception the portfolio is up 70.1%.

There were no questions.

#### 3.5 **AUDITORS REPORT**

**Presented by Steve Williams, Murray Harcourt**

S Williams, Murray Harcourt reported on income and expenditure which showed that income in 2017 was £5,480,000 and expenditure of £4,576,000. It was noted that investment income was also a significant contributor to the result for the year (£74,000).

The Balance Sheet showed the majority of the total net assets of £23.7 million were held in tangible assets i.e. the two Treatment Centres at Castlebrae in Auchterader and St Andrews in Harrogate. The investment portfolio was £2.09 million, an increase on 2016. The improvements of a hydrotherapy pool and the extension at Castlebrae had contributed

Approved by: \_\_\_\_\_ Chairman BoT Mr Liam Kelly Date \_\_\_\_\_

to the increase in assets. Debtors and cash were £4.35m and donation liabilities were £325,000. The balance sheet total was £23.7 million.

S Williams concluded his report by confirming that the accounts showed a true and fair view of the Charity, having used the following tests to come to this conclusion:

- Asset inspections
- Testing of transactions
- Review of control environment

Overall, an unqualified audit opinion.

There were no questions.

### **3.6 TREASURER'S REPORT**

**Presented by Peter Henson, Treasurer**

Peter Henson, Treasurer, prior to delivering his report, asked that any questions be saved until the end of his presentation.

He started his presentation by reporting that the plans and policies which had been put in place in recent years had produced strong financial results and his presentation would, therefore, focus on outcomes and future plans.

The auditors had provided a breakdown of the 2017 out turn which showed that the Charity had managed to generate a surplus of £904,000 from within the areas that it controlled.

The background to this was that in November 2015 the Government was preparing to release the results of its spending review, it was generally accepted that all public finance, including the police, would see a reduction in their budgets of approximately 20%. The Charity had prepared financial plans to ensure its financial viability over the next few years in the event of a loss of police officer numbers. Following the terrorist attacks in Paris the Home Office subsequently did not make the 20% cuts to the police budget. This has assisted the Charity to make a healthy surplus in 2017 where some funding has been invested back into patient care ensuring the Charity has a strong platform to move forward.

The surplus had been achieved from the following three key areas:

- Firstly, an increase in donation rate which in 2016 was raised for the first time in five years and £650,000 had been placed in the Charity's reserves. The Board of Trustees have agreed to set aside six months to one year's running costs by the end of 2018 as a prudent measure to protect the long term future of the Charity.
- Secondly, in April 2017 Derbyshire Constabulary transferred its provision for treatment to the Police Treatment Centres.
- Thirdly, the Charity, as a matter of prudence, sets a contingency budget. This has proved vital in the past for unforeseen repairs and renewals. During 2017 the contingency budget was not fully utilised and the Charity managed to set aside £135,000.

P Henson provided a breakdown of the donations from retired officers which had contributed to the surplus. In 2016 the Trustees had agreed to introduce a donation rate of £0.65 per week for retired officers which would allow them to remain entitled to receive treatment. In 2017 the Charity generated just short of £200,000 from retired officers which is offsetting the current loss in serving officers and included a generous donation of £50,000 from the PSNI Benevolent Fund. Due to the strong financial performance of the Charity, Trustees have agreed to hold the current donation rate of £0.65 for 2018 and it will be reviewed as part of the 2019 budget process.

Approved by: \_\_\_\_\_ Chairman BoT Mr Liam Kelly Date \_\_\_\_\_

A major part of the Charity's success in generating income has come through its trading activities. To ensure all income is invested back into patient care and to comply with tax regulations the Charity set up a trading arm to deal with all trading activities. The trading arm gift aids any surplus at the year end to the Charity to ensure there is no liability to corporation tax.

Each year the Charity presents a medium term financial forecast to the Trustees as part of the budget process. Items which will have a significant impact include the cost of living through items such as fuel, utilities and catering together with the living wage which will impact the Charity through to 2020.

Last year when the donation rate was increased for the first time in five years it was confirmed this provided the Charity with financial security through to 2020 subject to any unforeseen events taking place. Income is anticipated to drop by approximately 3% on an annual basis in the coming years probably through either cuts to police budgets or as a result of donating officers retiring or resigning mid service. The Medium Term Financial Strategy showed a strong financial position through to 2021 but would continue to be monitored in view of the current Brexit negotiations.

As part of the strategic review the Charity asked forces if they could break down the number of officers together with those that donate grouped into their years' of service. Not all forces could break this information down but from the ones that could it was clear that an officer in the later stages of their career is statistically more likely to donate than one at the beginning. Therefore, if force numbers remained static and the percentage take up remained the same, over the next five years we would have a net loss of 500 donating officers based on this group. If this was extrapolated across all of our constituent forces then the net reduction in the next five years would be in excess of 2,000 officers which in financial terms is an additional loss of £187,000 which would turn the surplus in 2021 into a loss. Positively it highlights the groups we need to target through our donor recruitment initiatives. The Charity is keen to talk to new recruits with the intention of signing them up at the beginning of their career. Hopefully, this is something you can assist us with in terms of inviting us to present to new recruits.

While the changes in 2016 were predominantly to ensure the long-term viability of the Charity, the opportunity was also taken to invest some of the money back into the business to increase and extend the treatment provided, in particular recognising the changing needs of officers. The number of officers presenting with stress related illnesses has increased over the last few years and in 2017 the Charity invested money into increasing the number of patients it could treat for psychological illnesses. Sadly this increase is expected to continue and the Trustees and management of the Charity are working to increase the real estate in Harrogate with additional bedrooms. During 2017 the Charity were notified that it would be supported with a grant of £1.5 million from the Libor fines to support the capital project.

The increase in donation rate has allowed the Charity to depreciate the buildings for the first time and set aside money to undertake future capital works. £300,000 was set aside in 2017 to support the estate strategy. Fundraising strategies will, however, continue. The Charity has worked extremely hard to ensure its financial viability in order to retain a surplus for the next few years. In support of this the Charity has increased its fundraising initiatives with a view to increasing alternative potential income streams with the aim of maintain the donation rate at its current level for a longer period of time. The main areas of focus for the team in 2018 are:

- Recruitment of New Officers
- Signing up Retired Officers
- Fundraising Events

Approved by: \_\_\_\_\_ Chairman BoT Mr Liam Kelly Date \_\_\_\_\_

- Lottery

The Trustees made a number of decisions to protect the long term financial stability of the Charity and as a result of these the Treasurer was able to present a balanced budget which delivers an enhanced level of service to the beneficiaries of the Charity.

The majority of expenditure is on employee costs. The costs for premises generally relate to the repairs, maintenance, rates and utilities for the two centres with supplies and service mostly relating to the cost of catering. The uncontrollable expenditure is depreciation.

84% of employee costs relate to the front line services. Only 16% relate to management finance and Charity engagement functions.

The Treasurer concluded by demonstrating that the initiatives, strategies and policies which have been developed and incorporated over the past five years in the Charity's business plan ensured the most effective and efficient running of both treatment centres in the current financial environment. Policies have been introduced to enable the Charity to achieve efficiencies which have then been invested back into front line services while at the same time maintaining the level of expenditure in the Charity. The increase in donation rate in 2016, the first since 2011, has provided a strong financial platform and a Medium Term Financial Strategy has enabled the Charity to invest more in the health and wellbeing of our patients and your members and colleagues which is at the forefront of the work of the Charity. Plans have been introduced to enable the development of the Charity's facilities in order to best support our patients' treatment. We have already raised £1.5 million in support of this and, based on the business case, we are confident of achieving the required match funding. The Charity now has an asset management plan for the next ten years which has been costed together with a means of financing it. An Estates Strategy is also in place which includes depreciation of the buildings to ensure funds are in place for the future. The Fundraising Strategy is continually being developed looking at all potential opportunities to support the Charity and is supported by the addition of a trading arm which provides greater opportunities to generate additional income which will be invested back into the Charity.

The Treasurer concluded his report by saying that the Trustees believed that the hard work over the five years by the staff and trustees together with the continued support of officers, had demonstrated their commitment to ensuring its future success.

In answer to a question from the floor, around the Police Treatment Centres taking on additional forces, P Henson confirmed that discussions were taking place with other Forces about a number of items.

There were no further questions.

### **3.7 ACCEPTANCE OF THE ANNUAL ACCOUNTS**

The Chair asked for a proposer and seconder for the 2017 PTC Annual Report. C Grandison, West Yorkshire, proposed acceptance of the 2017 Annual Report for The Police Treatment Centres and this was seconded by J Skelton, Nottinghamshire. This was unanimously carried.

### **3.8 SIX MONTH FOLLOW UP OF ROBERT GORDON UNIVERSITY REPORT Presented by Mark Oxley, Head of Clinical Services**

M Oxley opened his report by explaining that he would provide a short update on a study run at the PTC as a follow up to the research project previously commissioned from Robert Gordon University.

Approved by: \_\_\_\_\_ Chairman BoT Mr Liam Kelly Date \_\_\_\_\_

The School of Health Studies at RGU had looked at various outcomes for every officer who attended for physiotherapy over a six month period in 2016 at both Harrogate and Auchterarder. The results had shown that in addition to positive physiotherapy outcome measures, work status, work ability, quality of life and pain and disability measures, all were significantly improved following two weeks' treatment and these measures had all been maintained six weeks after the patients left the centres. The final conclusion of the research was that the physiotherapy service was effective, highly regarded and cost-effective. However, we do not know how officers get on after they leave the centres. Therefore, we decided to carry out a further study to look at those officers involved in the original study six months after they received treatment at the PTC.

The objectives of the study were:

1. To evaluate if the PTC aided Return to Work and improved workability over a six month period
2. To evaluate if those who visited the PTC were able to maintain improvements in health status and quality of life 6 months post visit
3. To evaluate if those who visited the PTC were able to maintain improvements in pain and disability 6 months post visit

To do this we used survey monkey to contact 491 officers – they were patients who had all taken part in the original study, received 2 weeks physiotherapy at either of the centres and crucially for whom we had the correct e-mail address, and we asked them to once again complete the measures concerning their current health and also a couple of additional questions to briefly explore their clinical experiences after leaving us. We had 250 replies, so just over a 50% response rate, which is exceptionally high for this kind of cold calling e-mail survey so we are very grateful to all those who took the time to take part.

So to the results, for objective 1 concerning return to work status, 46% of officers were on full duties when they attended for treatment, that rose to 63% six weeks later and at the six month post treatment period it has risen again to 71%. With regard to those on adjusted duties the figures were 39% when presenting for treatment, 33% six weeks afterwards this had decreased to 33% and then at the six month mark this has fallen to 19% of the officers who responded. Finally whilst 15% were off work when attending for treatment, this fell to 4% six weeks later, at the six month mark this had risen back up to 10%. There could be several reasons for this, a new injury or a recurrence of the original injury, or most likely it is a reflection that the six week and six month study participants are not the same group, the six week study using a smaller number of 66 officers chosen at random from the full study. Indeed the other marker for work participation, the work ability index whereby the officer self-rates their own ability to be able to fulfill their work duties, was maintained for the six month group as a whole compared with that seen at six weeks, in fact there was slight improvement overall.

The second objective looked at Quality of Life as measured by looking at a variety of indicators; mobility, self-care, performance of usual activities, pain and anxiety or depression, produced an average health score of 79/100 which meant all the improvements that we had seen at six weeks have been maintained by the group.

The final objective was to look at pain and disability and the effects of pain on various aspects of life. The average score for these measures was 2.5 out of 10 at six months compared to 3.8 at the pre-treatment stage. This represents a 66% reduction in pain and this is the same result as at six weeks so the improvements made then had been fully maintained.

Finally looking at the responses to the additional questions, 93% of those who were on adjusted duties at the time they attended for physio felt their stay at the PTCs helped them return to full duties, just 21%, so about 1 in 5, needed any further intervention after

being here, and finally a huge 95% said they were continuing to follow the advice and exercises provided during their treatment six months afterwards which is brilliant.

In the interests of balance it is worth pointing out some potential limitations of the survey, firstly the six week follow-up group and the six month follow up group are not the exact same cohort, they are both smaller samples of the original study, secondly the study was not a functional assessment – although it asks questions about all round health, pain etc it doesn't have the scope to assess what that means fully in regard to the daily demands of the job, we just know if they are at work or on adjusted duties for instance. Lastly there is the potential for possible reporting bias in that the longer a study goes on there is a well-known tendency for those who respond to this type of email survey to veer towards the extremes, i.e. those who want to talk about either a very good or very bad experience, and that is the main reason why we stopped the study at six months post treatment as that effect would be magnified still further as the study period continued.

So the conclusions of the study were that it demonstrated firstly that two weeks physiotherapy at the PTCs aided officers to return to full duties with an improved level of workability and that this was further improved six months after treatment. Secondly that the majority of officers were able to maintain their improved health status six months after treatment. And lastly that officers were able to maintain improved levels of pain and disability six months after treatment. Overall we found that the very positive results of physiotherapy at the PTC that were demonstrated on the RGU study, continue long after officers leave here and are maintained at least six months afterwards.

Finally I thought I'd give you a sneak preview of an audit we are currently carrying out concerning patients attending our Psychological Wellbeing Programme. It's a six week follow up this time and we're looking at all officers who attend the PTCs between May and November this year, we're using the survey monkey format again and collecting some psychometric measures of anxiety and depression levels and also asking some additional questions to help us further understand what happens to officers once they leave us.

As I said it is just a sneak preview but one of the additional questions we do ask is "Did you have a follow up review with your OH department after attending the PTCs?" and I thought I'd share with you the answers from the first month or so which were yes 8% and no 92%. Very early days so I'll present that without making any comment at the moment but I did think it was interesting and we'll see how things progress over the full study period.

So that is what we've been up to in terms of auditing our services, extremely positive findings for the physiotherapy service and hopefully you'll come back next year when I can talk in more detail about the psychological wellbeing programme audit,

In answer to a question from J Robins, M Oxley confirmed the survey had been carried out prior to the new GDPR regulations and that e-mail addresses had been given to the PTC for this purpose by the patients.

There were no further questions.

### **3.9 CHIEF EXECUTIVE'S REPORT** **Presented by Patrick Cairns, Chief Executive**

P Cairns, CEO opened his report by explaining that he hoped his report would be both informative and interesting and he would also provide a photographic review of some of the highlights of the year, including the first six months of 2018 and a look ahead to the future.

Approved by: \_\_\_\_\_ Chairman BoT Mr Liam Kelly Date \_\_\_\_\_

In 2017 the PTC treated 3,282 patients of whom 311 were retired officers, all of whom had come for treatment and left in a better position and better health afterwards as a result of their stay. These figures are slightly down from the previous year.

These figures translate into 22,075 hours of intensive physiotherapy, 7,550 hours of gym instruction, and 716 hours of specific back care classes. In terms of the PWP, in 2017 the PTC treated almost 800 men and women on the PWP, a growth of 12% over the previous year, which had increased over the previous year and some of the work carried out on the wellbeing programme can be illustrated by 3,000 hours of counselling, 200 hours of mindfulness sessions, 4,450 hours of complementary therapies, and 2,100 hours of classes and workshops. Most importantly, if almost 800 women and men received treatment, 100% of them felt better about themselves at both their place at work and home, as a result of attending the programme.

There has been a great deal of discussion and focus on PWP within the policing community of late and rightly so, and every time I mention the subject, whether it be within the PTC or beyond, I always see lots of nodding heads, and I think the 12% increase in those who attended last year tells a tale in itself.

The PTC Board felt quite strongly last year that it had a responsibility as one of the leading police charities to react to this growing demand which it was anticipated will continue to grow, and a business case was submitted to the Treasury for Libor money, with the specific intent of expanding our centre at Harrogate to take more wellbeing patients, and expanding the programme at both centres.

The PTC was successful and was awarded £1.5 million in November 2017; the only police charity to get anything at all. we are now mid flow with architects, seeking planning permission, Quantity Surveyors, plans and fundraising. I would like to publicly thank Adele Martin, Centre Manager who is in the audience, who is normally the one discussing the fine detail.

The PTC has always taken its position in the policing community and evolving policing landscape seriously, and prided itself on its work and the difference that it makes, and we are determined to continue to do this in the future. It does not matter whether you see us as part of the treatment pipeline with Force OH departments or the NHS as the initial treatment, then coming to the PTC for the intensive residential two week programme which will towards the tail end of the programme include signposting and follow on support with the NHS/OH or whether you see the PTC as a safety net to help those who might otherwise slip between the cracks, we are focussed on the people rather than the mechanics, and keen to get on with our work. I should also emphasise that we should not stereotype the wellbeing patients of being a particular type of person more susceptible to wellbeing issues, because I can assure you I have had men and women of all shapes and sizes, all lengths of service, from all Forces that we treat in my office, talking about some of the issues that they were dealing with, and for some of them were actually the most surprised of all that they were the one personally suffering as they never expected to be in that situation themselves, so none of us should be too quick to judge them (and I do hear that on occasion), until we have lived the same experience that these individuals have, with both their home and work stresses.

It is not uncommon for patients on the wellbeing programme to come and chat to say that the two week programme has transformed them, and that that they have had it pointed out to them by other patients in the Centre as the two weeks goes on and they can see the black cloud lifting, and that is further reinforced by their friends and family when they see them on the middle weekend that they can see that transformation, in that they are easier to be around, and appear to be happier in themselves. One big rough tough individual in

particular springs to mind who came in at the end of his two weeks to tell me how fantastic the programme had been for him, how he recognised with hindsight quite how disagreeable he had been at work and home over the last 14 months (politer language than he used) and he was going to work hard to try to improve on that. He also informed me how he knew someone on his shift who was exactly where he had been not so long ago, and using his new found skills from the PWP, he intended to go back the following week to gently tackle that other individual to that effect, and try and help them with some second order support that he had learned as a result of his stay on the PWP, and of course to encourage them to apply for the PTC PWP.

This example illustrates the impact of the PWP, and how the effect of it can wash out much further than just one individual benefitting from a two week treatment at the PTC, if one person has a wellbeing issue, the impact of that will spread out to friends, family and colleagues, so it really is something that we do need to get to grips with.

However, I also feel obliged to point out that still, not everyone gets this issue and really understands what a big problem it really is, and some are still dismissive about it, or there are those who will simply continue to talk about wellbeing and talk about what the police service is going to do about it, without actually being prepared to take it on and tackle the issue. This attitude was epitomised at the Policing Minister's Round Table gathering in London in January of this year which I attended and had a wellbeing theme and was a useful forum, but there were many comments throughout along the lines of let us "keep on talking.... Let us have more studies, let us have more questionnaires, let us have more consultation.... and then let us meet again in six months". My view which I expressed in the room at that meeting and indeed now, is that we now all know what we need to know, about this issue, we don't need more studies, we now need to get on with doing something about it, and treating our patients, and ensuring that we have the capacity to do so when needed. Policing is and always will be a physically demanding, dangerous, and inherently stressful business, it is only going to get tougher as people and resources are further squeezed.

I am proud that we at the PTC have now closed with the issue and taken some big decisions, and are physically trying to do something, what I do know in three years when we are looking back and reflecting, we at the PTC, Trustees and Employees will be able to say that we have treated thousands of our patients for these wellbeing issues in the interim, whilst others have stood and talked and had more meetings, we have actually moved on with our plans, and thanks to a number of you in the room on our Board and in other capacities who have done the same, have made a difference to many. It is also just worth mentioning as an aside that our PWP is now starting to spill out internationally. We recently hosted an Australian Police Officer who was over in the UK on the Winston Churchill Fellowship Study Visit, and he was so impressed with our PWP which they do not have in Australia, that he has already taken the idea back, got approval, and last week I sent him a copy of our Programme which they are going to use as the foundation for a retreat programme that they are developing in Australia.

Moving on from the wellbeing issue, I hope that the PTC team will also be able to say that we have contributed to the wider debate and discussion about the treatment of health and injury issues within the police family, typical amongst this was the excellent work that my Physio team did on the Body Armor leaflet which was then circulated round all England and Wales Forces and then went on to Police Scotland and PSNI.

We have also engaged widely with our donors and supporters which has taken a lot of time on the road and trips away from the Centre, most of which has been carried out by the Donor Engagement Team, and in 2017 the PTC team attended:

- 91 Student officer courses

Approved by: \_\_\_\_\_ Chairman BoT Mr Liam Kelly Date \_\_\_\_\_

- 61 Pre-retirement seminars
- Numerous Health and wellbeing days.

The Health and Wellbeing events have been particularly valuable as they have allowed us to advise on prevention, rather than just treatment and cure.

As well as communicating these messages at these specific days, we also carry forward the discussion at Police Conferences and other events in support of 23 constituent forces, which as well as allowing us to engage directly with our donors which we believe is vital, also allows us to work with each other in the margins on collective responses to a variety of issues, in order to move things forward in the best interest of the patients.

We are proud to say if that if there is something happening, whether it is a conference, a meeting a briefing, a fundraiser, then we will always try to have someone there, and I am grateful in particular to my Donor Engagement team who really go above and beyond in their efforts to put the PTC brand out there, but they need to do so in order to maintain our donor levels both now and in the future.

It has become increasingly clear in recent years that the number of serving officer donors is down, and every year falls further, but we are having to work much harder now than we ever have done in the past to keep these numbers up. In some respects as you have already heard in the Treasurer's Report the fall in serving donors has been mitigated by the rise in retired officer donors which now stands at 3,500, and I would like to formally place on record to the President of NARPO Brian Burdus and the Secretary of RPOAS Euan Forbes who is representing the President who are both in the audience today, to pass on my thanks to your membership for that support and financial contribution to the PTC, and please keep it coming. We will continue to fight to stem the tide and to seek out new donors, the key to financial success for the PTC is the number of donors, and we need the support of everyone in the room to make that work whether it be new groups, or just thinking about things a little bit differently.

Turning to some other activity now, Visitors in 2017 have flowed in to the Centre thick and fast and they have included:

- New and Old Federation partners
- A clutch of new Chief Constables – including Bill Skelly Lincs, Lee Freeman, Humberside, Peter Goodman Derbyshire and Steve Watson from SYP
- PCCs David Keane, Keith Hunter, Ron Hogg
- Local dignitaries, and too many others to mention, some of whom you can see pictured on the slide.

I think it is important to point out that these visitors see what they see, we never make any special effort to accommodate them, as it is the patients who are the important people and we do not believe that we should be interrupting their treatment or stay for the sake of a visit.

The one thing that all these visitors have in common when we chat in my office is that I ask them all for a donation to the PTC, and although most will absolutely agree whilst in my office with me, it can be rather more challenging getting the money from them afterwards, and despite repeated follow ups with some of them, not all will follow through with a donation despite their promises.

Some forces are extremely generous and support the PTC annually and on an enduring basis, e.g. Police Scotland, PSNI, WYP, GMP. I am talking about the Force as an entity rather than the Federation or Benevolent Fund, and many of those represented within this room are regular and big supporters to the PTC in that capacity, and indeed let us not

Approved by: \_\_\_\_\_ Chairman BoT Mr Liam Kelly Date \_\_\_\_\_

forget our individual donors to whom we are extremely grateful. However, some Forces (PCCs/CCs), despite all the evidence put in front of them, still refuse to consider a donation. I must confess to finding this extremely frustrating, we do not treat our patients any differently depending on which force that they might come from, and give some gold card access to our best rooms, best physios, and best food depending on whether their Force donate or not, but I genuinely find this iniquitous, some forces are persuaded by the PTC business case and moral arguments to support what we do at the PTC and by default their police officers and staff, but for those who choose not to give, I genuinely believe that there is a failure in their moral responsibility and leadership to support their officers/staff, and they are taking the easy option and allowing others to make grants which ultimately benefit all of our patients including their own police officers and staff, but they are not giving grants themselves.

Probably\_our most popular visitor of the year was Police Puppy Dog Jaxx who visited Castlebrae recently with his handler Brian and of course in the best traditions of photos with dogs, achieved the greatest number of “likes” and retweets on social media and boosted the PTC “Likeability Factor”.

We have tried to keep moving forward as well in the last year, in 2017 we were very pleased to welcome Derbyshire Police into the PTC fold for treatment, and this year we have welcomed another group, the Harbour Police from the NE, a very small group, but it all helps, and indeed we have already had our first patient through from this group.

We are also trying to think about doing things differently and being more responsive to our patients and giving them what they what, and this has been demonstrated by our launch of a series of recovery days for groups of Lancashire police, and providing a series of activities for them to take part in at the PTC for individual groups who come for the day, and depending on how the trial period goes, this might be something we try to expand in the future.

We do always spend quite a bit of time working on seeking out donations and grants every year, and you have heard about some of our successes already in the financial brief so I won't labour them, but they include donations from within the Police Service, from some police partners, from external organisations, and of course by individual fundraisers who are too numerous to mention.

I think it is also worthwhile highlighting the second BOTB cycling sportive this year, which despite the disruption and hit to participant numbers caused by the minor distractions of a Royal Wedding and the FA Cup Final the previous day (we picked our day first), was still a superb event, really well organised by the PTC team, and raised lots of money for the Charity.

Everyone who is involved in Fundraising in the past, knows that this is quite simply a hard slog, and to write grant application after grant application without any acknowledgment can be frustrating, and then to get acknowledgements from some that you had high hopes for, but to learn that they have decided to refuse an application is dispiriting, but it is something that we have to keep hammering away at and the occasional success does tend to rather balance the scales, slightly. For example last month, I found myself so disappointed about getting news in the same six day period on being rejected for two grant applications which I had written and thought were quite good, that I actually forgot we had received news of a £150,000 grant in that same six day period of time which we should have been celebrating.

Finally although you have already heard about it in the Treasurer's Report, it is just worth highlighting the money raised through the lottery, B&B and the Patient Social Committees, and I am really grateful to the whole team effort of PTC employees in both centres in

making this so. These are really valuable sources of income, and independent testimony to the quality of what we offer, and our supporters.

The future - I think that we are in a pretty good place, and if we were not where we are at the moment, we would be aiming to be here if that does not sound to be too convoluted, and there are plenty of other similar providers who look at what we do with some envy and wish that they were in our position!

So how do we define success, well we are treating thousands of men and women each year and getting them back to work, we are, I firmly believe, very much a Class Leading Centre that is innovative, and as well as looking forward has not forgotten to live and treat in the moment, we have a committed and engaged Board of Trustees, for now we are financially in good health which has given us some breathing room to reflect and prepare for what next, and we have a plan for how we are going to deal with the growing number of women and men coming to us for treatment on the wellbeing programme, so to answer my own question, it is us, and it is our work, our patients, our team and our family and of course, both our fantastic centres

However, is not the moment for self-congratulation, or patting ourselves on the back but the moment to plan where we go next and what we do. We do debate these big issues routinely within the Boardroom and at Strategy meetings and yes, the discussions can be quite robust and vigorous on occasions, and I do think that is a healthy way to conduct our business, but we also need to be aware that donating numbers to the PTC are down as you have already heard, and although there are some red lines with who we might wish to consider treating at the PTC and in the future and what we are, I do think that we have to remain alive to other ways to raise income to support our work, and new partners who may want to come into the PTC fold to ensure we maintain our income flow now and in the future, and that we remain able to continue to provide the class leading treatment and support and that we are still going to be able to do so for many years.

As a reminder for every 1000 donors we lose or gain, that is £93,600 each year that we lose or gain, or to put that in to context, in comparison with the 2018 numbers, it is a loss of 8000 donors and therefore a loss of £770,000 at today's donation rate. Many of these donors will of course have been lost through cuts to police numbers, but others have been lost through a reduction in signups, and I would hate to be standing here in ten years looking at a further loss of another 8000 donors. So all I ask for now, is for us to at least keep an open mind as to where we go next, ensure that we fight hard to retain as many of our current donors as we can, seek out as many new ones as possible, and whilst the PTC will, as the name suggests, remain a POLICE Treatment Centre, we must at least remain open minded to our future direction of travel, be alive to any threats, risks or opportunities, and ensure that the PTC remains modern, relevant and fit for purpose both now and in the future for our patients.

Thank you all for your support this year, we are in a strong position we have had another successful year, and we just need to maintain it now.

Thank you everyone, it has been another good year, and great to be at the PTC and be a part of something important.

Councillor Bernard Bateman, Mayor of Harrogate, asked if the Charity received any money from Police and Crime Commissioners. P Cairns confirmed that some do and others don't, however, North Yorkshire did and the Charity would be grateful for any donations which it would spend wisely.

There were no further questions.

### **3.10 ANY OTHER BUSINESS**

There being no further issues, the Chair declared this section of the meeting closed.

## **4. THE ST. GEORGE'S POLICE CHILDREN TRUST**

### **4.1 MINUTES OF THE COUNCIL MEETING HELD ON 22 June 2017**

These had been circulated to all members and displayed on the website and were taken as read. C Grandison, West Yorkshire proposed that these be accepted as a true record, seconded by J Skelton, Nottinghamshire. All present agreed.

### **4.2 MATTERS ARISING FROM THE MINUTES**

There were no matters arising.

### **4.3 ANNUAL REPORT**

#### **Presented by Liam Kelly, Chair, Board of Trustees**

As the Chair of the Board of Trustees of the Police Treatment Centres, L Kelly presented the Annual Report for the year 2017 which was contained within the Impact Report which all attendees had received.

There were no questions

### **4.4 INVESTMENT MANAGER REPORT**

#### **Presented by Nick Bence-Trower, Cazenove**

N Bence-Trower explained that the presentation and slides that he had delivered to The Police Treatment Centres section of the AGCM were equally relevant to St George's Police Children Trust as the funds were invested in the same way.

He reported that the investment portfolio ended 2017 with a value of £15.7 million which compares to £15.5 million twelve months earlier an increase of 7.5%.

There were no questions.

### **4.5 AUDITORS REPORT**

#### **Presented by Steve Williams, Murray Harcourt**

S Williams, Murray Harcourt reported on income and expenditure which showed that income in 2017 was £981,000 and expenditure of £543,000 which related to beneficiaries grants.

The balance sheet of the Charity is £13.8 million in total showing the reliance on the investment portfolio.

The audit approach taken is similar to that taken for the PTC and resulted in an overall unqualified audit opinion.

There were no questions.

### **4.6 TREASURER'S REPORT**

#### **Presented by Peter Henson, Treasurer**

P Henson began his report by saying that his presentation would provide details of the financial position of St George's Police Children Trust and the work that the Trustees and Staff have undertaken to ensure the long term future of the Trust.

He reported that the out turn for 2017 suggests that the Trust made a surplus of £437,947. The 2017 accounts have been prepared using FRS102, the Financial Reporting Standard which came into effect in January 2015 and the surplus is mainly due to two items.

The trust is obliged to make a year end provision to cover all the beneficiaries contained within the Charity's records at the end of the year. The provision is based on providing support throughout full time education for each child up to the age of 25. The current provision is approximately £3.5 million. Between years the provision can fluctuate for a number of reasons. For example:

- New beneficiaries being added to the list, this together with their age and the financial circumstances of the family.
- The number of children that leave education in the year.
- Variances in the household income, some people in the current climate may lose their jobs meaning their allowance will increase requiring a greater provision.

In 2017 the provision required decreased by £185,597 generally as a result of the Charity supporting marginally less children and the current beneficiaries being one year older. This provision will change on an annual basis depending on the number of beneficiaries claiming and the age of those beneficiaries. He stressed this is an accounting provision and not cash held within the Trust and finally in 2017, the Trust did not need to draw down on its contingency making a saving of £113,000. A contingency is required as the Trust does not know how many new beneficiaries it will take on in the year and the amount it will have to pay out. Therefore, the true surplus to the Trust was in the region of £138,000 in 2017. This was largely as a result of a strong performance of investments in generating additional dividends. The Trust has become more and more reliant on dividends to meet the financial needs of its beneficiaries.

The Treasurer continued by explaining that the vast majority of income received by the Trust is derived from dividends, 59% in 2017 and 41% from officer donations which equates to £579,000 from dividend and £401,000 from officer donations. The investments can fluctuate on a daily basis and with the uncertainty surrounding Brexit the Trust is anticipating an element of volatility going forward.

During 2017 the Trustees reviewed the benefits being offered to beneficiaries to see if improvements could be made. Improvements were made as follows:

- Supporting children where the partner of a police officer dies.
- Providing driving lessons to the value of £1,000 per child.
- Financial support for counselling to the value of £1,000 per child.
- New beneficiary grant increased from £100 per child to £1,000 per child.

The weekly donation rate was increased from 20p to 35p to finance the above benefits and also to allow the Trust to be less reliant on dividends from investments. The changes to benefits and donation rates took effect from 1 January 2018 and it is hoped this decision will keep the Charity financially secure for the next three years.

The Trustees remain cautious as there is the potential for further cuts in public spending which will put additional pressures on the budget of the St George's Police Children Trust and the wider police family. As a method of financial prudence the Trust presents the Trustees with a medium term financial forecast as part of the budget process. Matters which are likely to have a significant impact on the Trust are the government continuing to reduce police officer numbers and the cost of living for beneficiaries. The increased donation rate and the current information we hold gives the Trustees some confidence that

Approved by: \_\_\_\_\_ Chairman BoT Mr Liam Kelly Date \_\_\_\_\_

the Trust will be financially secure until at least 2021. The new donation rate allows Trustees time to look at how income can be increased or expenditure reduced and put plans in place.

The Charity is conscious that there may be children who it should be supporting, but of whom it is not aware. The awareness campaign is important as it is possible some people believe the donor needs to be killed or injured on duty in order to apply and this is not the case so your support is requested to seek out other beneficiaries. Hand in hand with the awareness campaign the Charity is promoting the Trust at every opportunity, at student inductions and at presentations to new recruits. Currently there are only 36,000 police officers donating to the Trust with approximately 30,000 officers not doing so and who could not access the benefits should they be needed.

The Trust has put in place a strategy to increase its income over the next few years and one of the key pieces of work is the creation of a legacy strategy to target previous beneficiaries, who have achieved careers, which they might not have been able to attain without the financial support of the Trust.

St George's House - The trust acquired this property in Harrogate in 2013, to support the beneficiaries of the Trust, as a holiday let, but where spare capacity allows, other members of the police family. There are still some spare weeks available in 2018 and you can find more information on the website.

The Trustees have approved a zero balanced budget for 2018. The new benefits came into effect on 1 January 2018 and the contingency budget has been increased to ensure the Trust can support all of its beneficiaries.

The Treasurer reported that, over the last few years the Trust has reacted to changes in society and has adapted the way benefits are allocated to its beneficiaries allowing the Trust to target those most in need with additional money, while not losing sight or support for others. The timeliness of grant making has been increased so that beneficiaries receive a registration grant upon receipt of their application and will then receive a minimum of £10 per week per child. During 2017 the Trustees approved a wide range of new benefits to support beneficiaries and making the Trust more modern and making the Trust fit for purpose going forward.

The Treasurer concluded by hoping that he, together with the Trustees and the administrative staff, had demonstrated, how the Trust is supporting the children of deceased or incapacitated officers, to the very best effect.

There were no questions.

#### **4.7 ACCEPTANCE OF THE ANNUAL ACCOUNTS**

The Chair asked for a proposer and seconder for the 2017 Annual Report. G McDowall, Police Scotland proposed acceptance of the 2017 Annual Report for St George's Police Children Trust, seconded by N Bathgate, Police Scotland. This was unanimously carried.

#### **4.8 CHIEF EXECUTIVE'S REPORT**

##### **Presented by P Cairns, Chief Executive**

P Cairns opened the St George's report commenting that it would be significantly shorter than the PTC one, but following the same pattern, so started with the numbers again and as a reminder these cover the 12 months from the last ACGM in June 2017:

We currently have 197 current child beneficiaries plus 41 students, and it is worth highlighting that these students get £500 each term whilst at Higher Education, and I am

Approved by: \_\_\_\_\_ Chairman BoT Mr Liam Kelly Date \_\_\_\_\_

also sad to say that 28 new beneficiaries have been approved since the last AGCM, 28 extra child beneficiaries whose financial security will be improved as a result of SG, and there were two Ex Gratia Grants.

It probably will not surprise you to hear that many of our beneficiary families for obvious reasons do not want any intrusion or publicity, but we do get thank you notes and occasionally bump into PTC patients who are parents of SGPCT beneficiaries, and I think that does help us to put a human face on them.

One of the last things I mentioned at the 2017 ACGM was that the Trustees were scheduled to discuss the donation rate to SGPCT at the Strategic Workshop as the income from donations was continuing to move downwards and I think that it was important that we had a frank discussion to that effect. The Strategic Workshop took place in August 2017 and the Trustees decided they would raise the donation rate on 1 January 2018 from 20p per week to 35p per week equating to an increase from £10 per year to £18 per year. The Trustees were conscious that no matter how modest any rise is it is still a rise, so also directed that we should expand and improve the range of benefits on offer, and these now include an increase in the new beneficiary grant from £100 to £1,000, £1,000 in child counselling, £1,000 in driving lessons, and for the first time ever and a really innovative move, eligibility for all these benefits when the partner of the serving police donor dies. Please get that message out, both in terms of encouraging people to sign up and then equally importantly to get them to claim when they are eligible. It is absolutely heart-breaking when tragedy strikes, and we learn that an officer was a donor to PTC but not SGPCT and therefore not eligible, and all for such a tiny sum of money.

It is still early days and we are not yet in a position to know what difference this increase will make to our overall income, but we are hopeful that we will not lose any donors as it is still pennies, and we will attract some new ones. I will be in a better position to update you next year.

I also mentioned to you last year that this year would mark the final formal reunion of the SGOBAG from the old orphanage and we held this in April in Harrogate. It was an excellent evening, well attended by the old boys and girls and a variety of high profile VIP guests including our new President of both charities Baroness Harris of Richmond who also attended. We followed on by hosting them the following day at Harrogate for cake and lunch and a chance to see the new St George's Christmas tree and SGOBAG commemorative bench and plaque both located prominently in the Harrogate PTC gardens.

It is always easier and if I am honest sometimes tempting to put these things to one side as we are all so busy, but all of us at the PTC/SGPCT felt very strongly that we wanted to look after this fine bunch of men and women, and indeed we had a moral responsibility to do so, as they were such an important part of the SG history. I think if you focus on real people and what small things might mean for them personally amongst all the big stuff going on, you will not go far wrong in life, so that was an important event for us.

We have of course had some donations and fundraisers for SGPCT this year which have been welcome, but to be frank, they do not come close to match those given to PTC which has the higher profile and also the greater financial need, so as time goes on we may review this balance of effort and priorities as I do sometimes worry that SGPCT gets lost in the background noise of the PTC although we are careful in that every time we brief or talk about the PTC, we always build in a few words and slides about SG, but we are constantly looking for ways to raise its profile

I will close on some good news, the PSNI who are donors to the PTC constituency have long since been considering whether they wanted to come in with SGPCT, to add to the

Approved by: \_\_\_\_\_ Chairman BoT Mr Liam Kelly Date \_\_\_\_\_

fantastic range of benefits they offer through their PSNI benevolent fund, and I am delighted to announce that in April 2018 they brought in beneficiary cover for their officers and have now come on board with this charity. This has in the first place been generously funded by their Benevolent Fund but with the intention that individuals will take on personal responsibility for paying this small donation in the future. This is excellent news for SGPCT, PSNI and any future beneficiaries who might arise, I hope there will not be any, but I know from past experience that this is unlikely to be the case so it will be of tremendous value to those who need it in the future.

So in conclusion, we have brought in new beneficiaries this year, raised the donation rate, changed and expanded the benefits, and really done some good, I suspect that is quite an achievement, something to be proud of, and a suitable moment to conclude my CEO Report about SG.

There were no questions.

#### **4.9 ANY OTHER BUSINESS**

No items being raised, the Chair declared this section of the meeting closed.

---

***L Kelly made a presentation to M Lindsey who was retiring as a Trustee of the Police Treatment Centres.***

***There being no further business, The Chair declared the meeting closed at 12.20 p.m. and invited those present to attend a buffet lunch, and tour of the facilities, at St Andrews.***

#### ***Closing Remarks***

***The President, Baroness Harris of Richmond DL formally closed the meeting by thanking the Board of Trustees and employees for all their work during the year and saying that she looked forward to being part of the Charities in the future.***

***ENDS***