



STEPPING FORWARD

ANNUAL REPORT AND ACCOUNTS
For the year ended 31 December 2017

We are St John Ambulance, the charity that steps forward in the moments that matter to save lives and support communities.

Our highly trained volunteers keep people safe at events nationwide, springing into action to help with medical incidents and emergencies. We also help the NHS by responding to some 999 calls as well as transporting patients safely.

And every year around 500,000 people, including children and young people, learn how to save a life through our first aid training.

We have saved lives and relieved suffering for 140 years, but we still have much to do.

Here's our review of 2017 - and our plans for stepping forward into 2018 and beyond.

WE HAVE SAVED LIVES AND RELIEVED SUFFERING FOR 140 YEARS, BUT WE STILL HAVE MUCH TO DO.



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WELCOME

Report of the directors, incorporating the strategic report

The directors, who are the trustees of the charity, present their annual report and accounts for the year ended 31 December 2017.

Every time a medical emergency happens, someone nearby has the skills to step forward and try to help right away. No lives are needlessly lost waiting for help and no one suffers unnecessarily.

That's our vision for the future - and we made good progress in 2017.

Our volunteers gave their time to keep people safe at over 22,500 events nationwide, big and small, there to help anyone who needed medical attention. Our Community First Responder volunteers supported the NHS on thousands of 999 calls, helping ambulance crews in their communities and often arriving first at emergencies in the critical minutes that can make the difference between a life lost and a life saved.

We continue to be proud of the expert training we give all our volunteers, many of whom have no medical experience when they start with us. We made many improvements to our training and recruitment this year, including introducing a new, standardised, intensive induction course, and getting new volunteers working for us more quickly.

But as brilliant as they are, we know our volunteers alone aren't enough to achieve our goal. To make sure help is on hand whenever and wherever there's an emergency, we need to be able to train far more people to help. In 2017, we reached people 1.6 million times with first aid training and education. The skills we teach are simple but the impact they can have is huge, and often life saving.

Throughout our history we've always stepped forward where and when we're needed and we've continued to do so in 2017. And now, having celebrated our 140th anniversary year, we're looking forward to writing our next chapter. We're particularly pleased to have our new Chief Executive Martin Houghton-Brown on board for this.

A huge thank you to every one of our volunteers and employees, everybody who has learned first aid with us in 2017, and our donors and supporters. We hope you'll continue to make a difference in 2018 and beyond - we still have much to do.

Working together, we can make sure someone is there every time for every single person who needs emergency help, in every community.



**Surgeon Rear Admiral
Lionel Jarvis
CBE DL MB BS FRCR
Chair**



**Martin Houghton-Brown
Chief Executive**



OUR IMPACT IN NUMBERS



WE'VE BEEN SAVING LIVES & RELIEVING SUFFERING FOR **140 YEARS**



Our volunteers gave up **873,000** hours of their time to protect the public at events



We gave our volunteers more than

17,000 pieces of training

We gave **workplace first aid training** to

224,000 PEOPLE

In London alone...



5,400 responses

2,300 first on scene



103 PEOPLE received cardiopulmonary resuscitation (CPR) from our volunteers

Our Community First Responders supported ambulance crews at 5,400 emergencies.

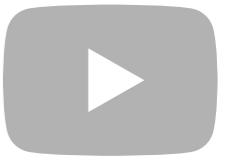
They were first on the scene in **2,300 of these cases**, in the critical first minutes that can be the difference between a life lost and a life saved.

Our volunteers treated **91,000** PEOPLE IN NEED **22,500** events through ambulance work and attendance at

Our patient transport service transported over



Our refreshed and relaunched **YouTube training videos** received **>500,000 VIEWS**



Our **first aid and cycling apps** were downloaded

207,500 times



Free first aid guides were distributed

133,000 CHILDREN received our first aid training in school

and a further **129,500** learned first aid by watching our **BIG FIRST AID LESSON**

OUR VOLUNTEERS

Stepping forward in the moments that matter

873,000 HOURS

That's how long our volunteers spent protecting the public at events in 2017. Between this and working to support the ambulance service, they saved many lives, performing resuscitation on 103 people.

But our impact goes beyond that. We're just as proud of the difference we made stepping forward to treat injuries until more help arrived, helping ill people at crowded events, or just asking 'are you OK?' to anyone we thought might need our help.

WORKING WITH AMBULANCE TRUSTS TO MAKE EVERY MINUTE COUNT

When someone calls 999, every minute can be the difference between a life lost and a life saved.

Our Community First Responder volunteers are ready to go when the most urgent calls come through. They'll travel to the emergency in their own car and provide emergency medical care, reassurance and support until the ambulance crew arrives, helping protect their local community.

We provide volunteers with specialist training to make this crucial service possible. In London alone, our Community First Responders attended 5,400 emergencies in 2017 and were first on the scene for 2,300 patients.

OUR PATIENT TRANSPORT SERVICES

In our 2016 annual report, we set out plans to review our patient transport services. Our aspiration to consolidate operations continued to be challenged by external pressures but we did deliver a positive impact.

Our patient transport services, which includes accident and emergency discharges, and bariatric, paediatric and neonatal transfers, transported over 82,000 people this year.

No two experiences were the same. The one constant, whether we were transporting sick children or terminally ill people, was our compassion and quality of care.

According to the Care Quality Commission report for the East Midlands, we were

'respectful, friendly, kind and compassionate when providing treatment or care to patients, and treated relatives and carers with respect and sensitivity'.



I stepped forward: Q&A WITH ANTHONY

Community First Responder

Anthony McKernan has been a Community First Responder for three and a half years and does two shifts a week in East London, totalling around seven hours. He has seen over 400 patients.

What do you enjoy most about being a Community First Responder?

Being a reassuring presence. People are often scared or anxious when they call an ambulance, so they usually feel better just because we've arrived quickly and provided initial care. I also like helping the ambulance crews with the life saving interventions – it's real teamwork.

What's the most difficult situation you've had to deal with?

The difficult calls are those where the family is distraught, like when a patient is in cardiac arrest. These are quite rare however.

What's your day job?

My son and I have a film-making business, working with businesses and charities.

What do you do when you're 'on call'?

The washing up! We can carry on life as normal until the ambulance control centre activates us. Our radios are GPS-tracked, so we can even visit friends and shops locally as long as we have our radio with us and our car with our equipment is close by.

Our training means we're only dispatched to certain types of emergencies, like chest pains, including heart and angina attacks, strokes, cardiac arrests, epileptic seizures, choking, difficulty in breathing and diabetic emergencies.

Most times we arrive on the scene first, get the situation under control, make the area safe, assess and treat the patient, then hand over to the ambulance service crew when they arrive and work with them.

Even if the paramedic is on scene when we arrive, they use us as part of their team and we can usually support the patient's family.

Do you have a special car?

No. Unless you think a Skoda Yeti is special! We use our own cars, without blue lights or adaptations. We have to obey all road traffic laws – except parking.

What makes a good community first responder?

A calm and reassuring manner and the ability to relate to a diverse range of people. All the first aid and medical skills can be learned, but a responder needs to be able to look people in the eye and make a caring connection.



3.5
years as a
Community
First Responder

2
shifts each week

400
patients



KEEPING PEOPLE SAFE AT EVENTS

Wherever people gather in crowds, it's likely that some will need medical attention – and sometimes need it urgently.

From huge national occasions like the World Athletics Championships in London to village fêtes and local bonfire night celebrations, St John Ambulance volunteers were at 22,500 events in 2017, treating people in need. Seventy-five per cent of the events we provided first aid cover for were smaller-scale community events, with us often helping for little or no cost.

Our volunteers – from Cadet first aiders to doctors – helped 62.4 million people to enjoy events knowing that they'd be well cared for if anything happened.

Take Hull Fair, for example. When a 50m-high ride broke down in October 2017, it left 30 people trapped for up to six hours. Our volunteers were there until the early hours of the morning treating people rescued from the ride and giving shelter and information to waiting families.

And at the London Marathon, our volunteers helped 7,100 people, treating everything from blisters and sprained ankles to people who had collapsed while running.

These events, up and down the country, couldn't have happened without the efforts of so many of our volunteers.

I stepped forward: HOW STEPHEN SAVED ALASTAIR'S LIFE AT A CYCLING EVENT

Alastair Page, 55, was cycling in a 58-mile event in May 2017 when he collapsed on the final hill. Another participant, St John Ambulance volunteer Stephen Price, arrived soon after to give life saving cardiopulmonary resuscitation (CPR).

'Alastair was lying on the side of the road, struggling to breathe,' says Stephen. 'I immediately recognised he was probably in cardiac arrest.'

'I gave CPR while another cyclist called for an ambulance. A paramedic soon arrived on the scene and assessed Alastair's condition while I continued CPR. The paramedic gave a shock to Alastair's heart using a defibrillator. This immediately re-established a regular heartbeat and Alastair started to breathe again.'

He was flown to Harefield Hospital where he was diagnosed as being susceptible to an irregular heartbeat and fitted with an internal cardiac defibrillator, which protects him from collapsing again. He was in hospital for two and a half weeks before being allowed to go home.

Alastair says: 'I am beyond grateful to Stephen for helping me. The consultant at the hospital commented that he'd done an excellent job! It's important to say that Stephen was vital in keeping me alive.'

Alastair has made an excellent recovery and met Stephen in July to thank him for his help and talk about what happened.

Alastair adds: 'I'd like to encourage others to learn the skills to save a life. You never know when you may be able to help someone. It's very scary to think of what may have happened if Stephen hadn't been passing that day.'



SUPPORTING COMMUNITIES

Our work at events and supporting the NHS plays a big part in keeping communities safe. But we always want to go further.

HELPING WITH THE UNEXPECTED

When something unexpected happens, our volunteers are ready to spring into action to help their communities.

When snow and freezing temperatures hit in December 2017, our volunteers were there to help. They worked round the clock using 4x4 ambulances and other off-road vehicles to reach and care for patients, supporting the West Midlands Ambulance Service.

St John Ambulance volunteers were also on hand when a fire broke out in a multi-storey car park next to Echo Arena in Liverpool on New Year's Eve 2017. The team, who had been at the arena working at a horse show, rushed to help the emergency services, treating several people and reassuring many others until the early hours of the morning. The blaze destroyed 1,400 cars but luckily no one was seriously injured.

90%
satisfaction
score

received by our
Shiremoor centre from
North Tyneside Council

SUPPORTING VULNERABLE PEOPLE

Stepping forward to support the most vulnerable is another vital part of our work in communities. Our Homeless Support Services in Brighton and Hastings provided first aid and other healthcare services to people struggling with homelessness 2,800 times in 2017. This included seeing many vulnerable people with complex needs who might not otherwise have got the care they needed.

In January 2017, People's Postcode Trust gave us a £15,800 grant to open a new podiatry clinic at our Brighton service. This runs every Thursday at The First Base Day Centre and once a month from our outreach van on Brighton Seafront. Foot conditions – caused by poor footwear, spending a long time walking and standing, and prolonged exposure to moisture – are common among people who are homeless. They're also closely linked to serious conditions like diabetic neuropathy. We'd like to thank People's Postcode Trust for their support in 2017.

We also run day care centres in Shiremoor, Ashington, Eston and Berwick. In 2017, around 200 elderly and disabled people and people with mental health problems came together at these centres every month to meet new friends, feel less isolated and take part in interesting activities. In November, North Tyneside Council inspected our Shiremoor centre, and we were delighted to receive a satisfaction score of 90%.



SUPPORTING OUR PEOPLE TO STEP FORWARD

Where would we be without our thousands of volunteers and 1,800 employees?

They give their all to keep people safe, be there in times of emergency - and save lives. But they also do their utmost behind the scenes, as managers, leaders, trainers, advocates and fundraisers.

We know they're at the heart of what we do, and we couldn't reach so many people without them. In 2017 we worked hard to improve how we support our volunteers and recognise the contribution of everyone involved in delivering our work. To all of them - thank you.

Following the commitment made in our 2016 annual report, we increased support for our volunteers in 2017.

PROVIDING THE BEST TRAINING

Good training could save lives - so we continued to focus on it in 2017. We gave our volunteers over 17,000 pieces of training during the year and worked hard to improve quality.

To make sure all our training is of the best possible standard, we developed and introduced new, standardised courses. All our new volunteers now learn the essentials of first aid on an intensive four-day course. We make sure they're ready to step forward and deal with any situation in their community, from a grazed knee to a heart attack or choking child.

But training doesn't stop after this thorough induction. Volunteers have training at their regular unit meetings. And each year, all volunteers have to go through an assessment to make sure their skills are up to date and they're providing safe, effective treatment.

Safeguarding training was another key focus in 2017. We've had employees and policies dedicated to protecting the public and the children and vulnerable adults we work with, since 1996. We have worked to continuously improve these. This year we introduced improved safeguarding training. Eight hundred volunteer ambulance crew members did the new training and we'll roll it out to all frontline volunteers in 2018.

We made it easier for volunteers to book on training courses, with a new online system and course brochure. However, we know that not all our volunteers are computer-savvy. So as more of our systems and processes move online we're helping our people to be more digitally confident through training and individual support.

We also developed a new system to help us manage our volunteers and employees. When fully up and running in 2018, it will make life easier for our volunteers and volunteer managers.

WELCOMING NEW VOLUNTEERS

In 2017, we welcomed over 3,000 new first aid-trained volunteers into active duty, a mix of more than 1,700 new recruits and advancing a backlog of trainees to the frontline.

We know that in the past new volunteers have sometimes had to wait too long for their training and induction. This isn't good enough.

In 2018, we plan to roll out a new recruitment process that takes newcomers from interview to working with us within two months in most cases.

DEVELOPING FUTURE LIFE SAVERS

We also continued to support and train the 10 to 17-year-olds in our 436 Cadet units nationwide. Not only do these young people do valuable volunteering work in their communities, learning first aid skills and helping out at events, but they also teach first aid to other young people. Overall, they make a huge contribution to our work.





SUPPORTING OUR FRONTLINE VOLUNTEERS

Our volunteers on the frontline are so important. But their work would be impossible without the efforts of thousands more volunteers behind the scenes, working hard in their communities to support our work.

These include our unit, area and district managers, who look after the volunteers in their area and make sure they have the right training, skills and experience.

They also play a key role in making sure our volunteers feel valued and part of the organisation.

Without our volunteer youth leaders, we wouldn't be able to run our Badger and Cadet programmes either.

And our Presidents are volunteers who act as ambassadors for St John Ambulance and the Priory in their communities. In 2017, they encouraged others to volunteer, built and maintained important relationships with other organisations, and worked on fundraising. Our Presidents also acted as a network, providing advice and support to St John Ambulance volunteers, and helping regional directors and district managers.

Thank you to you all.

I stepped forward: 'THE TRAINING WAS IN-DEPTH, FUN, ENGAGING AND A LOT DIFFERENT TO WHAT I INITIALLY EXPECTED'

Tom Barnes explains how volunteering for St John Ambulance and the training he's received has benefited him.

'My introduction to this fantastic, modern organisation started at Hull University, where the St John Ambulance Unit was recruiting for student volunteers to join.

'The training was in-depth, fun, engaging and a lot different to what I initially expected. It was easily balanced around my studies. Volunteering with St John Ambulance has given

me a countless number of opportunities, such as training as an emergency medical technician, becoming an internal communications officer, and attending events such as the VW Festival and I've even run a half marathon!

'Volunteering has stretched me physically, emotionally and on an educational level. As I prepare to graduate at the end of my four years at university in only a couple of months, it's been a great time to reflect on my time as a student volunteer. Being with St John

Ambulance has developed my self-confidence. It has allowed me to make new friends and learn vocational skills as well as teaching me life saving skills.

'St John Ambulance has changed me immensely over the past few years and has given me the confidence and knowledge I need to succeed after leaving university. If you want to learn something new, learn to save a life.'





Luis is pictured, right, with Ranveer Cheena, our 2017 Student Volunteer of the Year.

VOLUNTEER OF THE YEAR

ORDER OF ST JOHN FELLOWSHIP

The Order of St John Fellowship was originally formed to give retiring volunteers a way to stay in contact with St John Ambulance.

Over the years it has developed into an organisation for current and former volunteers, their friends and family and others who want to get together socially and support the Order of St John's work.

This year, the Fellowship reached 135 branches with around 3,000 members. Fellowship members contributed a huge amount to our work in 2017, including helping at events, and with fundraising and training.

RECOGNISING AND REWARDING OUR DIVERSE COMMUNITY

All our volunteers contributed greatly this year – and we strived to recognise and reward them.

We're part of The Priory of England and the Islands, an establishment of the Order of St John – a major international charity founded on Christian values. The Priory helps us to recognise our volunteers' huge contribution by admitting them to the Order of St John, an Order of Chivalry of the Crown. In 2017, 98 people were admitted to the Order or promoted within it, and 691 were honoured for their long service. The Priory Council issued 12 votes of thanks too, recognising people who have made an important contribution.

COMING TOGETHER ON ST JOHN'S DAY

St John's Day in June is an opportunity each year for the whole family of St John to join together to celebrate the work of our volunteers and employees and to commemorate those who have gone before us.

This year, our Service of Commemoration and Rededication was at St Paul's Cathedral, where we were joined by over 100 volunteers from St John in Hong Kong.

CADET OF THE YEAR

Harriet Walton from Halifax was St John Ambulance's National Cadet of the Year for 2017.

The 16-year-old triumphed in a two-day contest, which saw the best of our young volunteers from across the country take part in some tough tasks to win the prestigious title.

Harriet said: 'I'm so thrilled to be awarded the National Cadet of the Year 2017 and delighted to be bringing it back to the North! I have had a brilliant weekend and being there with the top 30 Cadets in the country was an honour.'

Luis Sellmeyer, 22, from North London was our 2017 Volunteer of the Year.

For two years, Luis was the Unit Manager for the University of London Unit, where he helped his unit and volunteers to thrive. Under his leadership, his team volunteered over 11,300 operational hours, providing first aid at events in the community – nearly a fourfold increase on the two years before.

Luis said: 'It's wonderful to know that my peers are grateful for my contributions to St John Ambulance. I feel that recognition and thanks play a big part in motivating each other to achieve even greater things.'

'I would strongly encourage anyone, who has not already, to learn first aid or even join St John Ambulance!'

OUR FIRST AID TRAINING

Empowering people to step forward nationwide

Imagine you had a heart attack or stroke. Or fell and broke your leg. Or found yourself choking and unable to breathe.

Wouldn't you want someone who knows how to help by your side in seconds?

If we all knew first aid, that would be possible - and it would save lives.

In 2017 we continued to educate the public in first aid, so they can help when it matters.

CREATING FIRST AIDERS ACROSS THE NATION

First aid skills can be so simple to learn. But they are critical in the moments that matter.

From how to deal with a burn or bleeding to doing cardiopulmonary resuscitation (CPR) or helping someone who's choking, we teach people the skills they need to save lives and relieve suffering.

In 2017, we reached people 1.6 million times with this critical first aid know-how. That included training 224,000 people in workplace first aid and giving 133,000 children first aid training in school. We're proud of the hundreds of thousands of people we trained, but even prouder of the many who tell us they've used their vital skills in emergencies.

Beyond our training, people used our resources to learn vital first aid skills. In 2017, we refreshed and relaunched our YouTube training videos and saw people turning to them for advice over 500,000 times.

Our four new **C.A.R.E.** for a Heart videos were a key part of our campaign to raise awareness of what to do to help someone in cardiac arrest (think: where is my **C**losest defibrillator? Is the person in **A**rrest? **R**esuscitate. Give **E**arly defibrillation).

They were viewed over 72,000 times on YouTube and by nearly 1.2 million people on Facebook. Over 240,000 of these were people targeted because they are most likely to need this knowledge.

Our first aid and cycling apps were also downloaded 207,500 times, taking us to over a million downloads since their launch. Offline, we distributed 420,500 free first aid guides.

In 2017 we started to tackle a new area, too: mental health. Towards the end of the year we launched our new partnership with Mental Health First Aid England, offering courses to raise awareness of mental illness, and to help people support themselves and recover.





I stepped forward: HOW WORKPLACE FIRST AID TRAINING HELPED JACK DEAL WITH A SERIOUS HEAD INJURY

Jack Thompson, 21, was there to help when his colleague Richard found himself bleeding severely from the head.

It was just an average day at work when employee Richard Ferguson burst into the office covered in blood.

Luckily, his colleague, Jack Thompson, had just come back to work after the second day of his three-day St John Ambulance first aid course. Jack knew exactly what to do and leapt into action.

'I couldn't believe what was happening,' says Jack. 'Our trainer, Chris, had literally been teaching me how to treat head injuries and severe bleeds earlier in the day, so it was all fresh in my memory, which was handy.'

'The blood was all over Richard's face - it was thick and dark red, so I knew the injury could be serious and that he needed urgent medical attention. I sat him down, talked to him to help keep him calm, and got the first aid kit.'

Jack cleaned up his patient, found he had two cuts on his head, and used dressings to apply pressure to the wounds and stem the flow of blood. Rather than waiting for an ambulance, his boss ran Richard to hospital, where the gashes to his head were stapled closed.

'I'd never learned first aid before and if this had happened 24 hours earlier, I wouldn't have known what to do,' adds Jack. 'But, thanks to my St John Ambulance training, I was able to help.'

IN 2017

We reached people
1.6 million
times with critical
first aid know-how

Offline, we distributed
420,500
free first aid guides

We trained
224,000
people in workplace
first aid

Our C.A.R.E. for a Heart
videos were viewed over
72,000
times on YouTube,
and by nearly

We gave
133,000
children first aid
training in school

1.2 million
people on Facebook

People turned to
our training videos
for advice over
500,000
times on YouTube

TRAINING WHOLE COMMUNITIES IN FIRST AID

We want whole communities to be trained in first aid, so people can be there to help each other in moments of need.

In 2017, we trained 17,500 people in first aid as part of our community courses. But we tried some new and innovative approaches as well.

A key strand of our work was thinking carefully about the people who would be most likely to find themselves in a situation where they needed to give first aid – and getting them trained.

It's already saving lives. When grocery giant Morrisons bought defibrillators for all 500 of its stores from us, we committed to provide demonstrations for its employees throughout the UK. Our volunteers delivered 30-minute demonstrations in around 400 stores in England, the rest being delivered by St John Wales and St Andrews in Scotland. Within days of her training at the Blackburn store, employee Suzi was called into action, saving the life of one of her customers. That was just the first of four life saving interventions so far.

We also supported BBC Radio Lincolnshire with its 'Save A Life' CPR campaign. Working in partnership with the BBC and the charity LIVES, we trained 4,000 of the 20,200 people who learned CPR through the campaign. We'll be expanding the campaign into Cambridgeshire in 2018.

MAKING AN EVEN BIGGER IMPACT

However, we know these examples won't necessarily add up to the impact we want to see across a whole community. That's why we also plan to train 740 people, most over 50 years old, as First Aid Community Advocates by the end of March 2019. These volunteers will work in their communities across England to raise awareness of first aid and help people find the training they need.

By March 2019 we're aiming for the First Aid Community Advocate project to reach 328,000 people through 13,120 events, engage 13,400 people through first aid workshops and make sure 9,700 people from vulnerable groups are taught life saving skills.

Most importantly, we see this pilot project as an important way for us to learn how best to engage a whole community to develop the skills they need to keep people safe.

The project is funded by innovation foundation Nesta and the Department for Digital, Culture, Media and Sport's Second Half Fund. We have been pledged £250,000 and will be one of 13 organisations taking part in the Second Half Fund, which aims to mobilise the time and talents of people over 50 years old to help others. Thank you for your support in 2017.



'KAROL THOUGHT I WAS ROLE PLAYING, BUT I TOLD HER IT WAS REAL AND THAT I WAS GOING TO LOSE CONSCIOUSNESS'

We stepped forward: HOW A GROUP OF FIRST AID TRAINEES SAVED THEIR TRAINER'S LIFE

St John Ambulance volunteer David Knowles went into heart failure while delivering a first aid course - and talked his trainees through how to save his life.

David Knowles was delivering a first aid lecture to members of his church group earlier this year, when he started feeling unwell.

The 77-year-old retired nurse has been the church's first aider for over 40 years, sharing his life saving skills with fellow parishioners. And the training he gave them saved his life.

'I had just started my lecture and we were talking about cardiopulmonary resuscitation (CPR),' says David. 'The more senior members of the group had asked for a demonstration and, as I was instructing one of them, I suddenly felt dizzy and weak, so I had to lie down.'

Karol Chew was one of the members of the group who stepped in to help him. David says: 'She thought I was role playing, but I told her it was real and that I was going to lose consciousness. I told her what to do to save my life, then passed out.'

David had gone into cardiac arrest. His trainees called 999 and gave him CPR until an ambulance arrived.

'I'm told I came to, briefly, and was talking to the paramedics about my condition, but the next thing I remember is waking up in hospital, two and a half weeks later,' explains David.

It was a miraculous recovery that defied the expectations of medical professionals, who initially told his family to expect the worst. And it's all down to David having received first aid fast. He is now making an excellent recovery.



HELPING THE NEXT GENERATION STEP FORWARD

In our 2016 annual report, we said we would continue to develop how we engage young people in first aid. In 2017, we have taken steps to help us prioritise the support provided to young people.

To make sure communities can keep themselves safe, we believe it's important to support young people to make a difference. Once a child knows basic first aid skills, they can use them to help people in need throughout their lives.

Giving every child the opportunity to learn first aid is one of our longstanding goals - and in 2017 we reached hundreds of thousands in schools and beyond.

We gave face to face first aid training to 133,000 young people in schools, but this year again spread knowledge further with our Big First Aid Lesson. This half-hour first aid lesson in November was watched by 129,500 schoolchildren, learning about skills they might use to save a life one day.

Another success was Restart a Heart Day, when we helped train 195,000 young people working in partnership with ambulance services, the Resuscitation Council (UK), the British Heart Foundation and the British Red Cross.



We refreshed and relaunched our Badger programme, which brings together 7 to 11-year-olds to learn first aid, volunteer and have fun. We worked hard to recruit new leaders to make sure our 290 Badger Setts continue to be well supported and provide a great first experience of first aid.

We're also excited about the contribution our committed 10 to 17-year-old Cadets make in their communities, and we're always looking for new ways to support them. In 2018 we plan to review our Cadet programme to make sure we're giving our 436 Cadet units the best possible training and experiences.

A big thank you to all our youth leaders and trainers who make these programmes possible.

I stepped forward: HOW 10-YEAR- OLD DOM SAVED HIS MUM'S LIFE

Thanks to St John Ambulance first aid training at school, Dom Hollinshead from Teesside knew what to do when his mum, Lisa, started choking.

Lisa Hollinshead was relaxing watching TV late one evening when a pork scratching she was eating got stuck and she started to choke. Luckily, her son Dom was there to help.

She says: 'We would both normally have been in bed at that time but, for some reason he'd left his bedroom and ran in to help. He gave me four massive abdominal thrusts and suddenly I could breathe again.'

'We both started crying. I was laughing, crying and hugging him. He really did save my life. Dom's my hero.'

'We'd been taught first aid at school by St John Ambulance and I'm so glad I knew what to do,' explains Dom. 'I did abdominal thrusts and eventually it worked, and mum could breathe again.'

'It just shows what an amazing job St John Ambulance does,' says Lisa. 'I think all schools should teach first aid. Simple first aid skills really can be the difference between a life lost and a life saved.'

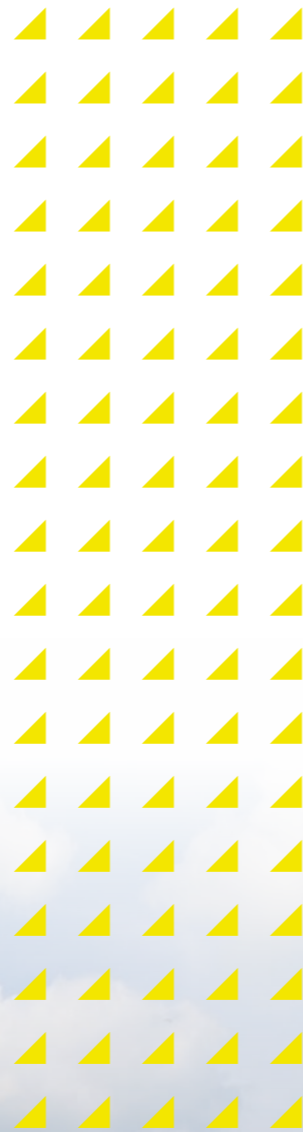


STRENGTHENING OUR FOUNDATIONS TO STEP FORWARD INTO THE FUTURE

To achieve our goals, we know we need to be an effective, well organised and agile organisation. We worked hard in 2017 to improve how we work as an organisation – so we could make the biggest possible impact.

In 2016, we committed to developing research to ensure that we maximise the impact of our available resources and identify the best ways to achieve our vision.

We commissioned pieces of work on Active Bystanding and Community Resilience, which have informed planning for 2018, and have committed to further evaluation of our impact in the next year.



Our work this year has built the foundations for exciting changes and improvements in 2018 and beyond.

SUSTAINABLE AMBULANCES

We couldn't do our work without our 850 vehicles, including more than 400 ambulances. However, they'll only stay reliable and effective with the right management and investment. In 2017 we began putting together a plan to operate them sustainably, which we'll complete in 2018.

We were also extremely fortunate and grateful to receive significant financial support from The Grand Lodge of Mark Master Masons to help us start a programme to modernise our vehicles over the next 10 to 15 years to make sure they're reliable when we need them most.

CONSISTENCY AND BEST PRACTICE

Following structural changes in the charity, we continued in 2017 on our journey towards making sure how we work is consistent across the country.

This is a key part of making the charity more efficient today and more effective in the future. Sharing and embedding best practice between regions and local operations is not always easy but we're committed to improving how we do it across all our work.

The Care Quality Commission inspected our ambulance operations in the North East, East and East Midlands in 2017. Inspectors identified some areas for improvement, but also highlighted the caring manner of our employees.

The commission also inspected the St John Care Home in Whitstable, highlighting a number of areas requiring improvement – we're now working to respond. However, we were pleased to be rated 'good' in answer to the key question of whether the service is caring.

SECURING OUR INFORMATION

In 2018 the new General Data Protection Regulation will come into force and bring with it more responsibilities for organisations who collect and use data about people.

Throughout 2017, we evaluated and improved our systems, processes and security measures to make sure we're compliant with the new law. We'll continue this work into 2018.

CELEBRATING OUR HISTORY AND HERITAGE

We are proud of the long history of St John and aim to make sure our activities today reflect our heritage of caring for others in moments of need. Our parent charity, the Priory, was delighted to welcome nearly 39,000 visitors to the St John Museum in Clerkenwell in 2017, helping to connect our current impact to our past.

The museum is home to the Order's collection of historical artefacts, as well as being a learning centre for school groups and others. In 2017, the museum grew its presence on social media, developing and expanding its YouTube channel with new material for virtual visitors.

HOW WE WILL STEP FORWARD IN 2018

We're so proud of everything St John Ambulance has achieved over the past 140 years. But now we're ready to step forward into the future, with exciting plans for 2018 and beyond.

As we work towards setting our long-term strategy, we're going to put the following areas at the heart of our work in 2018:

1 SUPPORTING COMMUNITIES

We'll continue our key work of training and supporting our volunteers to help in moments of need in their communities, including through providing first aid cover for events, responding to 999 calls, supporting communities in crisis and our Homeless Service on the south coast.

We're excited to explore new and different ways to work in communities too, and to roll out our First Aid Community Advocates pilot programme (see page 28).

2 ENGAGING YOUNG PEOPLE

A big part of our work in 2018 will be reviewing our Cadet programme, making sure young people get the best possible experience of volunteering with St John.

We're also going to develop lots of first aid resources for young people, focusing on digital content.

3 TRAINING PEOPLE NATIONWIDE IN FIRST AID

Training millions in first aid will continue to be at the heart of our work. We want to deliver face to face or virtual first aid training for everyone who needs it in 2018. In particular, we're planning to improve our online first aid education resources.

We're also keen to develop and grow our mental health first aid offering in partnership with Mental Health First Aid England.

4 REVIEWING AND RELAUNCHING OUR VISION AND MISSION AS A CHARITY

Our vision reflects our ambition and the change we want to make in society. Everything we do contributes towards achieving our vision, so it's important that we get this right.

In 2018 we will review our vision, in keeping with the values and heritage of the Priory.

WE'RE EXCITED TO EXPLORE NEW AND DIFFERENT WAYS TO WORK IN COMMUNITIES





STATEMENT OF PUBLIC BENEFIT

St John Ambulance's principal activities result in considerable benefit to the public on many levels.

From the direct beneficiaries who receive the care and support of our people in their moments of need to the personal and social development opportunities afforded to those volunteers themselves. In wider society, our activities help support the development of greater community resilience.

The directors have considered the relevant guidance and are satisfied that all the organisation's charitable activities fall within its objects and result in considerable benefit to the public. This is outlined in the section of this report dealing with achievements and performance.

The directors have regard to the Charity Commission's requirements and the positive impact we have on beneficiaries, volunteers and communities when reviewing the charity's aims and objectives, and in planning future activities.

FINANCIAL REVIEW

St John Ambulance ('the charity') is a registered charity and a company limited by guarantee. It conducts most of the activities of its parent undertaking, The Priory of England and the Islands of the Most Venerable Order of the Hospital of St John of Jerusalem. St John Ambulance and its wholly-owned subsidiary, Support St John Limited, are together referred to as 'St John'.

In preparing this report, the directors have complied with the Companies Act 2006 and the Statement of Recommended Practice – Accounting and Reporting by Charities, which incorporates the requirements of the Financial Reporting Standard applicable in the UK and Republic of Ireland ('FRS 102') ('the Charities SORP (FRS 102)').

REVIEW OF THE YEAR

As a charity, we're fortunate to have such a strong commercial training and supplies enterprise to contribute to our funds. However, in 2017, financial pressures in the NHS continued to affect us, with our commercial patient transport work facing particularly challenging times.

We strived to increase our income, streamline our costs and invest our money well in 2017. This included extending our current activities, reaching new people through campaigns and encouraging regular donors. Our volunteers, County Priory Groups and Presidents, embedded in their communities nationwide, played an important role in this, and will continue to do so.

To raise more money to fund our crucial services, we're also aware that we need to improve how we explain the impact of our work to the public.

OVERALL SUMMARY

In the calendar year 2017, the charity achieved a net surplus of £5.0m (2016: £3.9m) after including gains arising from the disposal of fixed assets and gains on investments. Total income in 2017 was £101.8m (2016: £102.2m), similar to the previous year.

Income was affected by continued reductions in requirements for support to the NHS within our ambulance and transport services activity. However, this was offset by increases in grant income and higher first aid products sales. Total expenditure reduced by £3.0m to £99.5m (2016: £102.5m), of which £90.1m (2016: £93.6m) was spent on charitable activities.

The reduction was primarily within our ambulance and transport services activity.

At 31 December 2017, the charity's total funds were £130.7m (2016: £125.7m), with unrestricted funds of £126.3m (2016: £122.7m).

These funds are represented by fixed assets (which are important in delivering our charitable services), our headquarters building, current assets and our other investments. Our free reserves, which are shown in further detail on pages 48 and 49, are £19.5m (2016: £15.8m).

The 2017 financial performance across each of our main areas of activity is described in the sections that follow. Expenditure figures referred to include an element of overhead costs, allocated as described in note 7 to the accounts.

FIRST AID PROVISION AND YOUTH DEVELOPMENT

Expenditure in this area is considerably greater than income due to the large number of community events where first aid services are provided either free, or for a nominal charge which does not recover the full cost.

Expenditure in 2017 including allocated indirect costs was £13.1m, an increase of £0.5m (4%) compared with 2016, while income remained steady at £7.1m. The net cost of first aid provision and youth development therefore increased by £0.5m to £6.0m in 2017.

AMBULANCE AND TRANSPORT SERVICES

Income from the provision of ambulance services reduced by 28% in 2017 as continued funding restrictions within the NHS again affected the demand for our services.

Income decreased by £5.7m to £14.6m in 2017, from £20.3m the previous year. The total cost attributable to this activity, after including the allocation of indirect costs, reduced by £5.8m (18%) to £26.8m (2016: £32.6m).

We were able to reduce our costs for servicing ambulance and transport services activity during the year by a level similar to the amount of lost income, using fewer employees and vehicles. Consequently, the net deficit arising from the provision of ambulance and transport services fell slightly, despite the reduction in income, by £0.1m to £12.2m in 2017 (2016: £12.3m).

Providing support to the NHS remains one of our key activities and we perform work for ambulance service and community services provider trusts across England.

Given the uncertainty of demand in this area of activity, we will continue to review our operating model and strategy during 2018 to ensure we can continue to provide a quality service in the most efficient and cost-effective way.

COMMUNITY SUPPORT PROGRAMMES

Our community support programmes include the provision of services to the homeless in Sussex, as well as to the elderly at the St John Care Home in Kent. Day care centres, training in first aid and informal advice are also provided to unpaid informal carers.

Income from these activities rose by £0.1m during the year to £1.5m. However, due to an increase of £0.3m in related expenditure the net cost of providing these services in 2017 increased to £2.4m (2016: £2.2m).

TRAINING

The net surplus from the provision of first aid training was £11.1m, an increase of £1.0m compared with the previous year. Such surpluses are used to fund other charitable activities. Income from this source increased by 2% to £43.8m (2016: £43.0m). Related expenditure was £32.7m, a decrease of £0.2m compared to the 2016 expenditure of £32.9m.

The cost of first aid training includes the cost of courses provided to the community for no charge.

FIRST AID PRODUCTS

First aid products are procured and distributed by St John Ambulance Supplies, which sells first aid products to third parties, with resulting surpluses used to support the activities of St John Ambulance.

In 2017, its external income rose by £2.0m to £12.2m (2016: £10.2m), an increase driven in part by higher sales of defibrillators for placement in workplaces and the community.

St John Ambulance Supplies is an internal department, which also co-ordinates purchasing for the whole of the charity. Costs incurred, relating to both internal and external activities and including allocated indirect costs, totalled £11.5m (2016: £9.9m). The increase of £1.6m in expenditure is commensurate with the higher level of activity.



FUNDRAISING

In 2016, we committed to enhance our fundraising to reinforce our sustainable financial position. Our results in 2017 were varied and are discussed below. In 2018, we will redouble our efforts to improve our fundraising, providing the public with a clearer narrative of the importance of our impact in communities.

INCOME FROM DONATIONS AND LEGACIES

Although income is generated from the provision of some of its services, St John Ambulance also receives income from donations and legacies made by our supporters. This income, which is greatly appreciated, is used to support our charitable mission.

The total value of income from donations and legacies increased by 7.5% to £15.8m, from £14.7m in 2016. Restricted income increased by £2.4m, an amount which includes a grant of £2.0m received from The Grand Lodge of Mark Master Masons to fund new ambulances, mobile treatment centres and support vehicles nationwide.

Unrestricted income from donations and legacies fell compared with the previous year, however. While total donation levels reduced by less than 2% to £11.4m, the reduction in total legacy income was more significant, falling by £0.7m (28%) to £1.8m in 2017.

FUNDRAISING COSTS

The fundraising costs incurred by the charity, which enable the generation of our income from donations and legacies, were £6.8m (2016: £6.7m). As explained in note 7, this figure includes allocated indirect costs totalling £1.3m. Direct fundraising costs were £5.5m (2016: £5.2m).

FUNDRAISING PRACTICES

Making sure we follow best practice for fundraising and being completely transparent about how we raise money is very important to St John Ambulance.

HOW WE RAISE MONEY

- We gain new supporters through door to door and private site fundraising (such as in shopping centres and petrol stations) and engage with them over time to develop relationships
- We also gain new supporters through door-drops, inserts and people donating online through our website
- We raise money from trusts, foundations, companies and major donors
- We raise money from people who fundraise for us through events, treks and challenges
- We raise money through local community fundraising teams who build networks with our employees and volunteers around the country
- We promote leaving gifts in wills to current and new supporters.

WORKING WITH FUNDRAISING AGENCIES

As a charity, face to face fundraising is very important to us because regular donations mean we can plan effectively for the future.

During 2017 we worked with three face to face fundraising agencies to encourage new regular giving support and weekly lottery plays – Wesser Limited, Personal Fundraising Services and Gemini. The agencies did both door to door fundraising and raised funds in private site venues across England.

We work with external agencies in this way because they employ fully trained professionals, which is more cost effective than delivering this work in-house and means more money can go directly towards our work. This work is monitored to a high level and includes a structured programme of mystery shopping.

We also work with three payroll giving agencies, including Sharing the Caring, Hands On Payroll Giving and Payroll Giving in Action, to promote tax effective giving from people in the workplace.

OUR FUNDRAISING POLICIES

St John Ambulance is a member of the Fundraising Regulator and we ensure that across all our in-house activity and our external partners we abide by the Code of Fundraising Practice and code of conduct for face to face fundraising. We have no reported breaches or failings of these standards.

We recognise that to maintain the income we require, we need to maintain public trust. This means having processes in place to continually monitor the work we deliver across all our fundraising and listening to feedback from current, potential and lapsed supporters.

We aspire for our systems and procedures to meet best practice and work closely with our internal audit, assurance and other specialist colleagues to monitor our performance. We maintain a robust process for choosing external partner agencies and for checking the contracts we have in place, which display the expectations of both parties clearly.

We also continue to ensure that our policies and procedures around data and processing meet our legal requirements, our high expectations and those of our supporters, with agreements in place with agencies we work with. We conduct regular internal audits of all teams who work with and process supporter data.

Sometimes we receive complaints from the general public about our activity. In 2017, St John received a total of 52 complaints about our fundraising activities.

We have a process for responding promptly to all complaints, and where appropriate carrying out an investigation. Around half of the complaints resulted in training or retraining of the individual fundraiser.

We have a clear fundraising complaints procedure, which can be found at:

<https://www.sja.org.uk/sja/support-us/our-fundraising-promise/complaints-procedure.aspx>

This is aligned with the Fundraising Regulator's requirements and we monitor and respond to complaints in accordance with it. We also have robust complaints processes in place for all our external agency partners to ensure we are fully compliant and that the agencies meet the standards laid down by the Fundraising Regulator.

The trust and confidence of the general public is paramount to St John Ambulance and we ensure high standards by having a clear set of policies in place. These include policies for protecting vulnerable people, safeguarding and a fundraising promise, which can be found at:

<http://www.sja.org.uk/sja/support-us/our-fundraising-promise.aspx>

We ensure all fundraisers and fundraising employees read and understand these documents. External fundraisers also take part in a training programme, with regular update sessions.

CASH FLOWS

To maximise the income generated by our cash holdings, while maintaining enough funds to meet our operational requirements, funds held on longer term deposits which mature on a regular rolling basis increased by £11.0m during the year to £15.0m. These funds are treated as current asset investments.

Total cash balances, including monies placed on deposit, increased in 2017 by £6.1m (2016: increase of £4.1m) to £23.4m (2016: £17.3m).

The cash outflow in respect of purchased fixed asset additions in 2017 was £2.2m (2016: £1.3m). The increase in additions of £0.9m is attributable to the purchase of vehicles funded by The Grand Lodge of Mark Master Masons.

A further £1.5m outflow (2016: £1.2m) related to the capital element of finance lease payments, which relate to ambulances purchased on finance leases in previous years. No vehicles (2016: vehicles with a book cost of £2.0m) were purchased in this manner during 2017.

The rationalisation of our property portfolio continued during 2017 and £6.9m (2016: £5.0m) was received from the sale of tangible fixed assets, primarily properties surplus to our needs, during the year. The resulting gain on disposal of £4.2m will be invested to further improve the quality of our operational properties, both by refurbishment and, where appropriate, the purchase of new properties.

INVESTMENTS

The St John Ambulance Board annually reaffirms its policy regarding investments. Cash balances over and above what are required for operational purposes, including capital expenditure, are potentially available for investment in quoted securities, which can easily be liquidated if required. The purpose of investment is to generate a return so that the value, in real terms, of these reserves is at least maintained.

QUOTED SECURITIES

The movement in the UK Retail Prices Index is the basic comparator against which long-term investment performance is judged, the objective being for a total return of Retail Prices Index +3%.

The relative amounts invested in UK and in overseas securities is subject to regular review. At the year end, approximately 60% of securities were invested in the UK market, with 40% in a range of overseas markets.

UK investments are held in the BlackRock Charishare Common Investment Fund, a unit-based fund designed as a vehicle for investment by charities. Overseas securities are held in the form of units in a number of separate geographically focused BlackRock funds.

Across 2017 the total return from our securities investments, including dividends received, was 14.2% (2016: 20.1%), which exceeds the target benchmark figure. Across the same period the FTSE All-Share Total Return Index, which relates to UK securities only, rose by 13.1%.

INVESTMENT PROPERTY

St John Ambulance has one investment property, which is located adjacent to St John's Gate, Clerkenwell, the historic home of the Order. This important property also houses the National Headquarters of St John Ambulance.

For accounting purposes, the property comprises two parts:

- That part of the building used by St John Ambulance for operational purposes is classified as an operational property and is included in the balance sheet at historic cost less accumulated depreciation
- Those parts of the building let to third parties are classified as an investment property and are included in the balance sheet at fair value. This element of the property is included in the balance sheet at its 31 December 2017 valuation of £18.2m. This figure has increased by £0.9m compared with its 31 December 2016 valuation of £17.3m.

FUNDS AND RESERVES POLICIES

The directors have adopted a policy for St John Ambulance reserves which is in line with the recommendations of the Charity Commission for England and Wales.

The directors review this policy annually. In carrying out their assessment, the directors have regard to strategic plans and financial budgets, as well as major operational, financial and external risks. These plans are aimed at achieving financial stability over the medium and long term. St John Ambulance's planning process, including financial projections, takes into consideration the underlying economic climate and its potential impact on sources of income and planned expenditure.

FREE RESERVES

The level of unrestricted funds, after excluding the value of fixed assets, investment property and any other amounts that have been designated for a particular purpose, are classed as 'free reserves'.

A level of 'free reserves' is required to ensure that the activities of St John Ambulance can continue in the event of a major unforeseen reduction of income or increase in expenditure.

These reserves provide a contingency which enable St John Ambulance, if necessary, to make the required structural changes to bring income and expenditure into line. The reserves are supported by cash and quoted securities, which can be accessed readily when required.

Taking into account these factors, the directors have determined that free reserves should be in the range of £12m to £20m, and this is reflected in St John Ambulance's financial strategy. This represents between 1.5 and 2.4 months of expenditure on our core costs.

Securities investments (which can be sold at short notice if required) are entirely included within the value of free reserves, while the investment property, which is held as a long term asset, has been excluded.



At 31 December 2017, unrestricted funds held by St John Ambulance totalled £126.3m (2016: £122.7m). These are represented by:

- Designated funds of £88.6m (2016: £89.6m) consisting of:
 - £74.9m (2016: £79.1m) relating to the net book value of heritage assets and unrestricted tangible fixed assets
 - £13.7m (2016: £10.5m) designated for other particular purposes as follows:
 - Funds required for the replacement and maintenance of St John Ambulance's fixed assets (including ambulances and other medical vehicles) at a level whereby the charity can provide services in a professional and exemplary manner
 - £18.2m (2016: £17.3m) reflecting the fair value of investment property
 - Free reserves of £19.5m (2016: £15.8m).
- Funds earmarked to develop business processes and systems, including information technology, to ensure up to date procedures, economies of scale and consistent delivery of St John Ambulance's objectives
- Funds intended for investment in fundraising activity, to develop diversified, additional future income streams to aid in the delivery of the charity's objectives.

St John has therefore met its target for free reserves. Further detail is given in note 25.

The directors consider there is a reasonable expectation that St John Ambulance has adequate resources to operate for the foreseeable future. The directors do not consider there to be any material uncertainties that will change this expectation and accordingly the accounts have been prepared on a going concern basis.

DIRECTORS' RESPONSIBILITIES STATEMENT

The directors (who are also the directors of St John Ambulance for the purposes of company law) are responsible for preparing the report of the directors and the financial statements in accordance with applicable law and regulations.

Company law requires the directors to prepare financial statements for each financial year. Under that law, the directors have elected to prepare the financial statements in accordance with UK Generally Accepted Accounting Practice (United Kingdom Accounting Standards and applicable law), including FRS 102 The Financial Reporting Standard applicable in the UK and Ireland.

Under company law the directors must not approve the financial statements unless they are satisfied that they provide a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of resources, including the income and expenditure, of the charitable company for that period.

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

- Select suitable accounting policies and then apply them consistently
- Observe the methods and principles in the Charities SORP (FRS 102)
- Make judgements 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 directors 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 them to ensure that the financial statements comply with the Companies Act 2006.

The directors are 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.

The directors confirm that:

- So far as each director is aware, there is no relevant audit information of which the charitable company's auditor is unaware
- The directors have taken all the steps that they ought to have taken as directors to make themselves aware of any relevant audit information and to establish that the charitable company's auditor is aware of that information.

The directors are responsible for the maintenance and integrity of the corporate and financial information included on the charitable company's website. Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

BASIS OF ACCOUNTING

The financial statements of St John Ambulance, prepared using the Charities SORP (FRS 102), are attached to this report.

Annually, the directors review the company's key accounting policies to ensure that they continue to be in accordance with the requirements of the Charities SORP (FRS 102) and with best accounting practice. The accounting policies applied by St John Ambulance are detailed in note 1.

No significant changes have been made to these policies from those used in the year ended 31 December 2016.



St John
Ambulance

STRUCTURE, GOVERNANCE AND MANAGEMENT

ORGANISATIONAL STRUCTURE

St John Ambulance (a registered charity, number 1077265/1, and a company limited by guarantee) and its parent undertaking, The Priory of England and the Islands of the Most Venerable Order of the Hospital of St John of Jerusalem ('the Priory' or 'The Priory of England and the Islands'), which is also a charity (charity number 1077265), began operating on 25 October 1999.

On that date, it was given the operations of The Most Venerable Order of the Hospital of St John of Jerusalem ('the Order') in its territory. Most of these operations in England are conducted by St John Ambulance.

The Board and senior executives of the company are listed on pages 89 to 91. Principal places of business and professional advisers of the company are given on page 92.

The company is governed by its Memorandum and Articles of Association, which were approved by the Grand Prior of the Order on 20 October 1999 under authority of the Order's Royal Charter and Statutes.

The Memorandum and Articles of Association are filed with the Charity Commission for England and Wales.

The legal structure of the company, its parent undertaking and its wholly-owned subsidiary as at 31 December 2017 is as follows:

The Priory
A registered charity in England.

St John Ambulance
A wholly owned subsidiary of the Priory, a registered charity in England and a company limited by guarantee.

Support St John Limited
A wholly owned trading subsidiary of St John Ambulance and a company limited by guarantee (company number 1181644).

The principal activities of Support St John Limited are sponsorship, marketing and the hosting of functions and events. Support St John Limited is governed by its Memorandum and Articles of Association adopted on 19 October 2000.

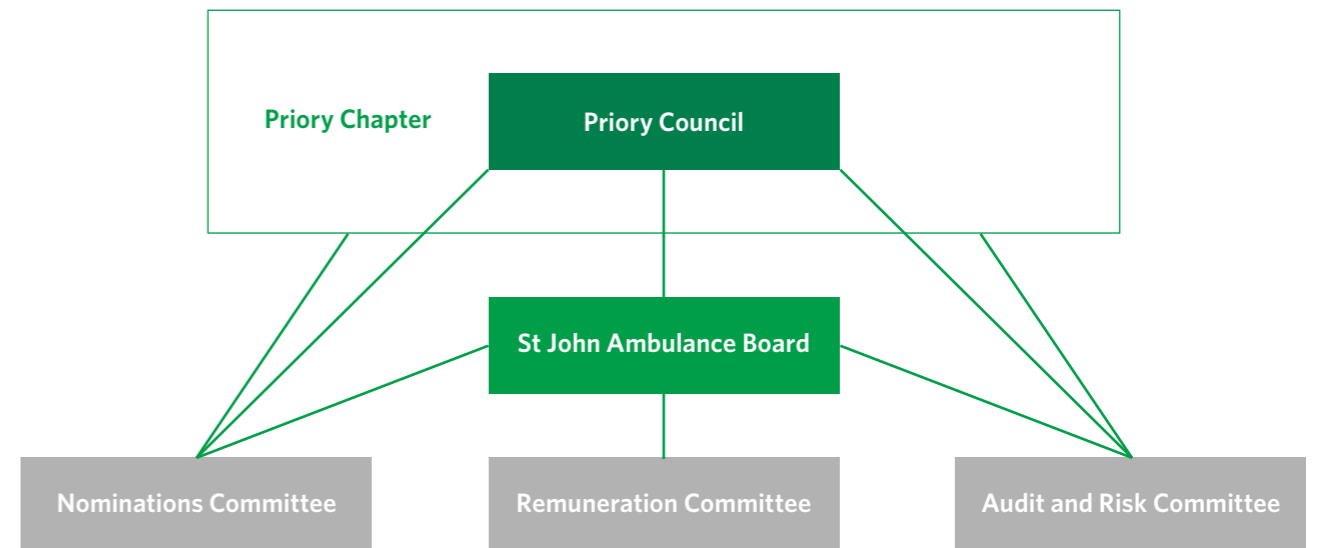


GOVERNANCE

PRIORY

The governing bodies of the Priory are the Council of trustees ('Priory Council') and the Priory Chapter. The relationship between these bodies and St John Ambulance is shown in the diagram below.

The membership of the St John Ambulance Board, and of each committee, is noted on pages 89 and 90.



PRIORY COUNCIL

On 10 November 1999 the trustees of the Priory were incorporated under the Charities Act as a body, known as The Incorporated Trustees of The Priory of England and the Islands of the Most Venerable Order of the Hospital of St John of Jerusalem. The trustees are the members of the Priory Council and are legally responsible for the governance and management of the Priory.

PRIORY CHAPTER

The Priory Chapter consists of up to 48 members selected to be representative of the organisation, comprising 39 representatives from geographical areas and other interest groups and nine other ex officio members. Vacancies which arise are filled from applications assessed by designated Priory trustees and other senior volunteers, for specialist roles. Appointments are for a period of three years, which may be renewed for two further terms of three years.

Priory Chapter recommends the appointment of the Prior, the Dean, the Chancellor and the Chief Volunteer of the Priory to the Grand Prior of the Order. In addition, Priory Chapter appoints the other trustees, excluding the Prior, the Dean, the Chancellor and the Chief Volunteer, to the Priory Council.

ST JOHN AMBULANCE – BOARD OF DIRECTORS

The governing body of St John Ambulance is its Board of directors. The Board is chaired by the Prior, who is also chair of the Priory Council. The directors are legally responsible for the governance and management of St John Ambulance. Appointments to the Board are made by the Priory, the sole member of the company.

The Prior, the Dean, the Chancellor and the Chief Volunteer serve as trustees of the Priory and also, ex officio, as directors of St John Ambulance. They are appointed to the Priory Council by the Grand Prior of the Order on the recommendation of the Priory Chapter.

St John Ambulance may have up to 12 more directors, selected on the basis of the relevant skills and experience necessary to match the competencies required on the Board. Further directors are appointed to the Board by the Priory Council on the recommendation of the Nominations Committee, which is a committee serving both St John Ambulance and the Priory.

These directors may include up to three individuals selected on a national basis, and up to three who are deemed to be independent. Details of all directors who served during 2017 and subsequently are set out on page 89.

Each director is appointed for an initial three-year period which, depending upon the nature of their appointment, may be renewed, normally for one or two further three-year periods.

A formal director induction procedure is in place and a full induction pack is provided to all new directors.

This contains key information and documents regarding the role of the director in the company. In addition, each new director is invited to attend an induction day at the charity's National Headquarters. Directors are encouraged to gain a greater understanding and appreciation of local operations. Directors can also access relevant external training courses relating either to their responsibilities as directors or to the charity sector in general.

MANAGEMENT

The Board of directors is responsible for setting strategies and policies for St John Ambulance and for ensuring that these are implemented. The Board is assisted in its work by a number of formally constituted committees.

Nominations Committee

The Nominations Committee is a joint committee of the Priory Council, Priory Chapter, and the St John Ambulance Board, with terms of reference approved by each of these bodies. It meets as and when required. It provides recommendations to the Priory Council regarding the appointment (and reappointment) of directors of St John Ambulance. It also advises the Priory Council and the St John Ambulance Board directly about the appointment and reappointment of the chairs of committees.

The Nominations Committee comprises nine members and is chaired by the Prior. It includes the Dean and the Chancellor as ex officio members. Three members are selected from the Priory Chapter and the remaining three members are independent of both the Priory Chapter and the Priory Council, selected either internally or externally on the basis of the particular skill sets required on the committee.

Audit and Risk Committee

The Audit and Risk Committee, which is a joint committee of the Priory Council and the St John Ambulance Board, reviews the effectiveness of internal controls (including financial controls) and risk management systems,

the effectiveness of the internal and external audit functions, and the clarity and completeness of disclosures in the annual report and accounts of St John. The committee meets at least four times a year and at other times as required. The Chair is an independent director.

Remuneration Committee

The Remuneration Committee determines the remuneration and benefits of the Chief Executive and the other members of the senior management team. The committee also makes recommendations to the St John Ambulance Board regarding annual pay awards, as well as considering the framework and broad policy for remuneration of all employees and the payment of expenses to employees and volunteers.

The committee meets at least once a year and at other times as required. The Chair is an independent director.

St John Ambulance uses an independently developed system of job evaluation that is transparent and objective, and undertakes periodic reviews of the external market, using independent organisations, to ensure that executive remuneration remains in line with the levels of other charities of similar size and complexity. Salary levels are set in the context of St John Ambulance's charitable status and taking account of affordability in the light of the charity's financial position.

DELEGATION OF AUTHORITY

Authority to conduct the daily operations of St John Ambulance is delegated by the Board to the Chief Executive, who is assisted in the implementation of strategy and policies by the senior management team, to whom certain functions are further delegated. The members of the senior management team are listed on page 91.

EMPLOYEES AND VOLUNTEERS

Information about aims and activities is disseminated to employees and volunteers through newsletters, briefings and meetings, with consultation on major issues taking place through a variety of local and national forums. St John Ambulance has a range of human resources policies to help ensure compliance with employment legislation and good management practice. These include, as part of policies regarding diversity and equal opportunities that apply to both employees and volunteers, practices regarding the recruitment, training and career development of people with disabilities. St John Ambulance personnel, should they become disabled, are supported to continue in their role by making workplace adaptations and providing special training. If this is not possible, every effort is made to find them an alternative role which is more suitable.

AUDITOR

Grant Thornton UK LLP has indicated its willingness to be reappointed as statutory auditor.

OUR PRINCIPAL RISKS AND UNCERTAINTIES

As an active healthcare charity working in the community, our main risks relate to unintentionally causing harm to people and effectively meeting key regulators' requirements. We take these risks seriously and continue to develop our approach to ensure the quality and safety of our care.

HOW WE MANAGE OUR RISKS

The directors identify the major strategic risks to which St John Ambulance is exposed and establish controls and actions to mitigate them. Risk assessments and a risk register are in place and are subject to continual review and monitoring by the senior management team and by the Audit and Risk Committee.

The directors take all appropriate steps to moderate and manage the inevitable operational risks to which volunteers, employees, the assets and the reputation of St John Ambulance are exposed.

The internal audit department, with the oversight of the Audit and Risk Committee, provides assurance on the effectiveness of the risk management process and associated mitigation strategies and controls, focusing on the areas of greatest risk.

RISK - SIGNIFICANT HARM TO AN INDIVIDUAL ON ST JOHN AMBULANCE PREMISES OR IN ST JOHN AMBULANCE CARE

No movement in perceived risk in 2017

Key controls and actions:

Policies and procedures for safeguarding children and vulnerable adults, for standards of clinical practice, and for maintaining a safe and healthy working environment for employees, volunteers and service users. Increasingly standardised training for public-facing employees and volunteers.

Following structural changes to the charity, we continue to drive increased consistency of practice across our operational activity. We make efforts to learn from incidents that occur and have identified the need to support a learning culture at the heart of what we do.

RISK - BREACH OF PRINCIPAL LEGAL OR REGULATORY REQUIREMENTS, SUCH AS THOSE RELATING TO HEALTH AND SAFETY STANDARDS OR CARE QUALITY COMMISSION (CQC) REQUIREMENTS

Reduction in perceived risk in 2017

Key controls and actions:

Key areas are subject to monitoring and reporting to the directors, who also keep up to date with forthcoming changes in the external regulatory environment. In 2017, we responded to findings from various CQC inspections and reports and will continue to do so in 2018.

We also face a series of risks to our effective running of the charity:

RISK - REPUTATIONAL DAMAGE DUE TO INTERNAL OR EXTERNAL FACTORS

Reduction in perceived risk in 2017

Key controls and actions:

Policies and procedures in relation to operational activities, with national and regional teams in place to handle incidents that may arise. Key areas that may generate risk are subject to monitoring and reporting at director level, as well as inclusion in the charity's risk register.

RISK - INSUFFICIENT FUNDS IN PLACE TO ENABLE ST JOHN AMBULANCE TO CONTINUE OUR CURRENT LEVEL OF DAILY OPERATIONS IN THE LONGER TERM

Reduction in perceived risk in 2017

Key controls and actions:

Diverse customer base for main training and supplies revenue streams. Established systems for financial planning, budgeting and monitoring of financial performance, with budgeting further aligned to business planning and prioritisation during 2017. Effective financial management including strategic and short-term treasury planning and management of liquid resources; and clearly-defined delegated authorities for committing to, or approving, expenditure.

St John Ambulance's main exposure to institutional credit risk arises in respect of our investments and cash holdings. This risk that monies held or invested with financial institutions may not be repaid is controlled principally through restrictions regarding which institutions these may be placed with.

Credit risk in relation to customer debts (the risk that a customer will not pay monies owed) is assessed as low because of the nature of St John Ambulance's customer base and the very small number of large customer accounts. Risks relating to cash flow and liquidity are managed through short and long-term planning and forecasting.

RISK - POOR OR FAILING BUSINESS SYSTEMS, INCLUDING I.T., AFFECTING THE ABILITY OF ST JOHN AMBULANCE TO OPERATE EFFECTIVELY

No movement in perceived risk in 2017, although the external I.T. security environment is increasingly challenging

Key controls and actions:

Business systems are monitored to identify at an early stage where improvement may be required. Service level agreements are in place with third party suppliers for systems infrastructure.

IN GRATITUDE

The trustees would like to convey their sincere thanks to all of the donors, volunteers and employees who have so generously given their support to St John, including those listed below.

With their continuing efforts, we look forward to enhancing the delivery of our charitable services within the community.

The Grand Lodge of Mark Master Masons
 The J R Rudd Foundation
 Rotary Club Romsey Test Fund
 The Garrison Church Plate Fund
 Carillion PLC
 Buckinghamshire Federation of Young Farmers Club
 The Chairman's Charitable Trust
 Colthurst Family Trust
 People's Postcode Trust
 Roger Raymond Charitable Trust
 Lloyds Bank Foundation
 Edgar E Lawley Foundation
 The Wilmcote Chariturst
 The Ernest Hecht Charitable Foundation
 The Brian Shaw Memorial Trust
 The Godfrey Winn Will Trust
 Miss Evelyn Daphne Hargreaves Charitable Trust
 K M Williams Deceased Will Trust
 Totara Charitable Trust
 The Cadogan Charity
 The J P Jacobs Charitable Trust
 Curtis Family Charitable Trust
 The Privy Purse Charitable Trust

The John Cowan Foundation
 Alan and Sheila Diamond Charitable Trust
 Audrey Earle Charitable Trust
 The Goldcrest Charitable Trust
 The SMB Charitable Trust
 The Helen Isabella McMorrnan Charitable Trust
 The Joan Wyatt Charitable Trust
 Nesta
 The Department for Digital, Culture, Media & Sport (DCMS)
 Queen Elizabeth Grammar School Ashbourne Academy
 The Helianthus Charitable Trust
 NHS Hastings & Rother CCG
 The Gerald Bentall Charitable Trust
 W L Pratt Charitable Trust
 The Bridgewater Charitable Trust
 The Douglas Compton James Charitable Trust
 Major R L P Coleman Charitable Trust
 The Ancaster Trust
 The Lexus Foundation

Dudley and Geoffrey Cox Charitable Trust
 The Thousandth Man - Richard Burns Charitable Trust
 The Orr Mackintosh Foundation
 The Edgar Lee Foundation
 Sir Edward Lewis Foundation
 The Ian Fleming Charitable Trust

We are particularly grateful for the contribution of The Reverend Canon Paul Denby who retired in January 2017 after many years of service as a director and to Sue Killen for her 10 years as our Chief Executive.

This report, including the strategic report, was approved by the directors on 8 May 2018 and signed on their behalf on 21 May 2018 by:

**Surgeon Rear Admiral Lionel Jarvis
 CBE DL MB BS FRCR,
 Chair**



INDEPENDENT AUDITOR'S REPORT

To the member of St John Ambulance Opinion

We have audited the financial statements of St John Ambulance (the 'charitable company') for the year ended 31 December 2017 which comprise the Statement of Financial Activities, the balance sheet, the cash flow statement and notes to the financial statements, including a summary of significant accounting policies.

The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102; The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- Give a true and fair view of the state of the charitable company's affairs as at 31 December 2017 and of its incoming resources and application of resources, including its income and expenditure for the year then ended
- Have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice
- Have been prepared in accordance with the requirements of the Companies Act 2006.

BASIS FOR OPINION

We have been appointed as auditor under the Companies Act 2006 and report in accordance with regulations made under that Act. 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 Financial Reporting Council'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.

WHO WE ARE REPORTING TO

This report is made solely to the charitable company's member in accordance with Chapter 3 of Part 16 of the Companies Act 2006. Our audit work has been undertaken so that we might state to the charitable company's member those matters we are required to state to them in an auditor's report and for no other purpose.

To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and the charitable company's member for our audit work, for this report, or for the opinions we have formed.

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 directors' use of the going concern basis of accounting in the preparation of the financial statements is not appropriate
- The directors 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 12 months from the date when the financial statements are authorised for issue.

OTHER INFORMATION

The directors are responsible for the other information. The other information comprises the information included in the report of the directors incorporating the strategic report, set out on pages 6 to 58 other than the financial statements and our auditor's report thereon. 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.

OPINION 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 report of the directors incorporating the strategic report for the financial year for which the financial statements are prepared is consistent with the financial statements
- The report of the directors incorporating the strategic report has been prepared in accordance with applicable legal requirements.

MATTER ON WHICH WE ARE REQUIRED TO REPORT UNDER THE COMPANIES ACT 2006

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 report of the directors incorporating the strategic report.

MATTERS ON WHICH WE ARE REQUIRED TO REPORT BY EXCEPTION

We have nothing to report in respect of the following matters where the Companies Act 2006 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 directors' remuneration specified by law are not made
- We have not received all the information and explanations we require for our audit.

RESPONSIBILITIES OF THE DIRECTORS FOR THE FINANCIAL STATEMENTS

As explained more fully in the directors' responsibilities statement set out on page 50, the directors 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 directors 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 directors 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 directors either intend to liquidate the charitable 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.

Carol Rudge,
Senior Statutory Auditor,
For and on behalf of Grant Thornton UK LLP
Statutory Auditor, Chartered Accountants,
London

21 May 2018

FINANCIAL STATEMENTS

for the year ended 31 December 2017



STATEMENT OF FINANCIAL ACTIVITIES

(Incorporating an income and expenditure account) for the year ended 31 December 2017

Note	Unrestricted funds £m	Restricted and endowment funds £m	2017 Total £m	2016 £m
INCOME AND ENDOWMENTS FROM:				
Income from donations and legacies	12.8	3.0	15.8	14.7
Income from charitable activities:				
Delivering first aid:				
First aid provision and youth development	7.1	-	7.1	7.1
Ambulance and transport services	14.6	-	14.6	20.3
Community support programmes	1.4	0.1	1.5	1.4
Equipping the public:				
Training	43.8	-	43.8	43.0
First aid products	12.2	-	12.2	10.2
Other charitable activities	0.1	-	0.1	-
Total income from charitable activities	79.2	0.1	79.3	82.0
Income from other trading activities	1.0	-	1.0	1.0
Investment income	1.2	-	1.2	1.1
Other income				
Net gain on disposal of assets	4.2	-	4.2	3.1
Other income	0.3	-	0.3	0.3
Total other income	4.5	-	4.5	3.4
TOTAL INCOME	98.7	3.1	101.8	102.2
EXPENDITURE ON:				
Total expenditure on raising funds	9.4	-	9.4	8.9
Expenditure on charitable activities:				
Delivering first aid:				
First aid provision and youth development	12.5	0.6	13.1	12.6
Ambulance and transport services	26.8	-	26.8	32.6
Community support programmes	3.8	0.1	3.9	3.6
Equipping the public:				
Training	32.7	-	32.7	32.9
First aid products	11.5	-	11.5	9.9
Other charitable activities	2.0	0.1	2.1	2.0
Total resources expended on charitable activities	89.3	0.8	90.1	93.6
TOTAL EXPENDITURE	98.7	0.8	99.5	102.5
Gains on investments	2.5	0.2	2.7	4.2
NET INCOME / (EXPENDITURE)	2.5	2.5	5.0	3.9
Transfers between funds	1.1	(1.1)	-	-
NET MOVEMENT IN FUNDS	3.6	1.4	5.0	3.9
Fund balances at 1 January	122.7	3.0	125.7	121.8
FUND BALANCES AT 31 DECEMBER	126.3	4.4	130.7	125.7

All income and expenditure in 2017 arises from continuing activities. All gains and losses in the year are included above and accordingly a statement of total realised gains and losses has not been prepared.

The notes on pages 67 to 88 form part of these accounts.

BALANCE SHEET

As at 31 December 2017

Company number: 3866129

Note	£m	2017 £m	£m	2016 £m
FIXED ASSETS				
Heritage assets	12	2.1	2.1	
Tangible fixed assets	13	72.8	77.0	79.1
			74.9	
INVESTMENTS				
Investment in subsidiary	29	-	-	
Securities	14	17.0	15.8	
Investment property	15	18.2	17.3	
			35.2	33.1
			110.1	112.2
CURRENT ASSETS				
Stocks	16	2.4	2.8	
Debtors	17	18.6	18.4	
Current asset investments	18	15.0	4.0	
Cash and short-term deposits	18	8.4	13.3	
		44.4	38.5	
LIABILITIES				
Creditors falling due within one year	19	(17.1)	(16.4)	
			27.3	22.1
NET CURRENT ASSETS				
			137.4	134.3
TOTAL ASSETS LESS CURRENT LIABILITIES				
Creditors falling due after more than one year	20		(6.7)	(8.6)
			130.7	125.7
NET ASSETS				
FUNDS				
Unrestricted funds				
Revaluation reserve	25	18.3	16.0	
Other unrestricted funds		108.0	106.7	
Total unrestricted funds			126.3	122.7
Restricted funds				
			3.4	2.1
Endowment funds				
			1.0	0.9
TOTAL FUNDS	25		130.7	125.7

Approved by the board of directors of St John Ambulance on 8 May 2018 and signed on their behalf on 21 May 2018 by:
Surgeon Rear Admiral Lionel Jarvis CBE DL MB BS FRCR, Chair

The notes on pages 67 to 88 form part of these accounts.

CASH FLOW STATEMENT

For the year ended 31 December 2017

Note	2017 £m	2016 £m
NET CASH PROVIDED BY OPERATING ACTIVITIES	26	0.7
<i>Cash flows from investing activities</i>		
Dividends, interest and rents from activities	1.2	1.1
Proceeds from sale of investments	1.8	0.5
Purchases of current asset investments	(11.0)	(4.0)
Purchases of investments in securities	(1.2)	(0.7)
Proceeds from sale of tangible fixed assets	6.9	5.0
Purchases of tangible fixed assets	(2.2)	(1.3)
Net cash provided by investing activities	(4.5)	0.6
<i>Cash flows from financing activities</i>		
Capital element of finance lease payments	(1.5)	(1.2)
Net cash provided by financing activities	(1.5)	(1.2)
Increase in cash and cash equivalents during the year	(4.9)	0.1
Cash and cash equivalents at 1 January	13.3	13.2
Cash and cash equivalents at 31 December	27	13.3

The notes on pages 67 to 88 form part of these accounts.

NOTES TO THE ACCOUNTS

For the year ended 31 December 2017

1. Accounting policies

The principal accounting policies are set out below. These policies have been applied consistently.

In these policies and the accounts, the following abbreviations are used:

'the Order' – The Most Venerable Order of the Hospital of St John of Jerusalem (charity no. 235979).

'the Priory' – The Priory of England and the Islands of the Most Venerable Order of the Hospital of St John of Jerusalem (charity no. 1077265), the company's parent undertaking.

'the Eye Hospital' – The St John of Jerusalem Eye Hospital Group which is another foundation of the Most Venerable Order of St John and is registered and operates as a separate charity (charity no. 1139527).

'SOFA' – Statement of Financial Activities.

a. Basis of preparation of accounts

The annual report and accounts are prepared in accordance with the Companies Act 2006, the Charities Act 2011, the Statement of Recommended Practice – Accounting and Reporting by Charities applicable to charities preparing their accounts in accordance with FRS 102 ('the Charities SORP (FRS 102)') and with FRS 102, the Financial Reporting Standard applicable in the UK and Republic of Ireland. The accounts have been prepared on a going concern basis as discussed in the report of the directors on page 49.

Consolidated accounts have not been prepared as the income, expenditure, assets and liabilities of St John Ambulance and its wholly-owned subsidiary, Support St John Limited, are included on a line-by-line basis in the consolidated accounts of the parent undertaking, drawn up for the same period.

St John Ambulance meets the definition of a public benefit entity under FRS 102 and is incorporated in the United Kingdom.

b. Critical accounting estimates, judgements and assumptions

In the process of applying its accounting policies, St John Ambulance is required to make certain estimates, judgements and assumptions that it believes are reasonable, based on the information available. These estimates, judgements and assumptions affect the amounts of assets and liabilities at the date of the accounts and the amounts of income and expenditure recognised during the reporting period.

On an ongoing basis, estimates are evaluated using historical experience, consultation with experts and other methods considered reasonable in the particular circumstances. Actual results may differ significantly from the estimates, the effect of which is recognised in the period in which the facts that give rise to the revision become known.

The following paragraphs detail the certain estimates, judgements and assumptions St John Ambulance believes to have the most significant impact on the annual results under the Charities SORP (FRS 102).

Revenue recognition

St John Ambulance recognises revenue on a receivable basis where the amount is reliably measurable and there is adequate probability of receipt. Income recognition policies are detailed in the accounting policy for income.

When it is considered that the key criteria of entitlement, probability and measurement for revenue recognition are not fulfilled for a transaction, revenue recognition is delayed until these have been judged to have been met. Payments received in advance of revenue recognition are recorded as deferred income.

Tangible fixed assets

The charge in respect of periodic depreciation is derived after determining an estimate of an asset's expected useful life. Increasing an asset's expected life would result in a reduced depreciation charge. The useful lives of St John Ambulance's assets are determined at the time the asset is acquired and reviewed annually for appropriateness. The lives are based on historical experience with similar assets as well as anticipation of future events which may impact their life such as changes in technology.

The de minimis limit for the recognition of minor additions to heritage assets and fixed assets is £10,000.

NOTES TO THE ACCOUNTS

For the year ended 31 December 2017, continued

1. Accounting policies, continued

b. Critical accounting estimates, judgements and assumptions, continued

Classification of leased assets

Leases held are analysed in order to determine where the risk and reward of the ownership of the asset lies and subsequently classified as either operating or finance leases. The accounting policy for leases has been applied to these arrangements and additional assets are recognised within tangible fixed assets.

Valuation of investment property

The valuation of the investment property at 27 St John's Lane that is recognised on the balance sheet is subject to an estimation of the proportion of the building which is let to third parties, as opposed to that proportion which is utilised for operational purposes. The valuation is performed by an external independent valuer.

A decision as to whether or not the property is revalued by an independent valuer at the end of a particular financial year is made subsequent to an internal assessment of whether there has been a material movement in the valuation of the property during the reporting period. An external valuation is undertaken when it is considered that the property valuation is likely to have changed materially during the year. As a minimum, an external valuation takes place every five years.

Accruals, provisions and contingencies

Expenditure incurred in the reporting period where there is uncertainty as to the final amount to be paid is accounted for on the basis of an estimated value where this treatment is viewed as appropriate. An accrual is recognised when it is probable that an obligation exists for which a reliable estimate can be made. The amount may change in the future due to new developments or as additional information becomes available.

Matters that either are possible obligations or do not meet the recognition criteria for a provision are disclosed as contingent liabilities, unless the possibility of transferring economic benefits is remote, in which case no reference is made.

Additional contributions to multi-employer pension plans

St John Ambulance currently pays additional employer contributions of over £0.3m per year to cover the deficit in the TPT Retirement Solutions Growth Plan scheme. FRS 102 includes a requirement to recognise the present value of any liability to make payments to fund any deficit relating to past service where an agreement to make the payments is in place.

The present value of the payments recognised, and the discount factor used, are derived from information specific to the St John Ambulance membership of the TPT Retirement Solutions Growth Plan that is supplied by TPT Retirement Solutions (formerly called The Pensions Trust).

Recognition of doubtful debts

A standard debt provision policy exists in order to recognise the cost of debts that are not considered to be collectable. A standard percentage of the debt value is provided against overdue debts, based on a historic analysis of the value of the average debt write-offs over the past five years. An additional provision may also be made where information received indicates that a debt is unlikely to be paid by a customer.

c. Historical cost convention

The accounts have been prepared using the historical cost convention, as modified by the revaluation of Investments.

NOTES TO THE ACCOUNTS

For the year ended 31 December 2017, continued

1. Accounting policies, continued

d. Income

Income is generally recognised on a receivable basis and is reported gross of related expenditure, where the amount is virtually certain and when there is adequate probability of receipt. The specific bases used are as follows:

- Donations, gifts, legacies and general grants receivable, which do not relate to specific charitable activities, are categorised as voluntary income
- The accounts reflect no amounts in respect of time provided by volunteer members of St John Ambulance
- Gifts in kind are brought into the accounts at their estimated fair value
- Where pro bono services are received, the value of those services, as estimated by the directors, is included as both an incoming and outgoing resource in the SOFA
- Legacies are recognised as income when there is entitlement, probability of receipt and measurability of the legacy
- Fundraising income is shown gross except for small fundraising events where the cash is received net of expenditure
- Rental income is accounted for on a receivable basis over the rental period
- Income from charitable activity, including income from long-term contracts, trading and merchandising income, is accounted for when earned. Income received in advance is deferred until entitlement to the income has arisen
- Gains from the disposal of tangible fixed assets are included in the SOFA as part of other incoming resources
- Grants are recognised in the year when the entitlement to the grant is confirmed. Grants for the purchase of equipment and towards the initial setting up of projects are credited in full to the relevant activities in furtherance of the charity's objects. Grants that provide core funding or are of a general nature provided by government and charitable foundations, are recorded as voluntary income. Grants specifically for goods and services to be provided as part of charitable activities are recorded against the activity to which they relate.

e. Expenditure

Expenditure is recognised on an accruals basis when a legal or constructive obligation exists and is reported gross of related income on the following bases:

- Expenditure on raising funds principally comprises the costs associated with attracting voluntary income and other publicity and public relations costs, including promoting more general public awareness
- Charitable expenditure comprises direct expenditure including direct employee costs attributable to the charity's activities. Where costs cannot be directly attributed, they have been allocated to activities on a basis consistent with the use of resources. The basis of allocation of indirect costs to activities is set out in note 7
- Governance costs comprise those incurred as a result of constitutional and statutory requirements
- Support costs represent centrally incurred costs, principally relating to management resource, IT, Finance, Human Resources, buildings management and governance costs, which cannot be attributed to specific activities but provide the organisational infrastructure that enables those activities to take place. The basis of allocation to activities is set out in note 7.

f. Heritage assets

St John Ambulance, on behalf of the Priory, maintains two historic buildings in Clerkenwell, London. These are the Grand Priory Church, which sits upon a 12th century Norman crypt, and the 16th century St John's Gate. Within St John's Gate is situated the Museum of the Order of St John which contains a collection of historic artefacts. Together these form the historic assets that were gifted by the Order to the Priory in 1999 and were subject to a specific term that the Priory may not dispose of these assets. If the Priory no longer considers it appropriate to retain them, they must be returned to the Order. The directors of St John Ambulance consider that it is impracticable to attribute any value in the balance sheet to those assets which were gifted by the Order.

Subsequent additions to heritage assets, all of which are funded by St John Ambulance and accounted for in its books, are stated at cost, except in the case of minor additions costing less than £10,000 each, which are expensed in the year in which the cost is incurred.

Expenditure on the historic buildings which results in significant enhancement of the internal configuration and allows for better visual display is capitalised, with depreciation charged over an estimated life of 50 years.

Historic artefacts which are considered to have indefinite lives are not subject to depreciation. The carrying amounts at which heritage assets are held in the balance sheet are reviewed where evidence of possible impairment exists and reduced where an impairment is deemed to have occurred. The cost of maintenance and repair of heritage assets is expensed in the year incurred.

NOTES TO THE ACCOUNTS

For the year ended 31 December 2017, continued

1. Accounting policies, continued

g. Tangible fixed assets, depreciation and impairment

Freehold land is stated at cost.

Other tangible fixed assets are stated at cost less accumulated depreciation.

Minor additions to fixed assets, defined as those costing less than £10,000 each, are expensed in the year in which the cost is incurred.

Donated fixed assets are brought into the accounts at their estimated fair value at the time of acquisition.

Gains on the disposal of fixed assets, representing the excess of net proceeds over net book value, are recognised in the SOFA within other income.

Depreciation is provided to write off the cost of assets by equal annual instalments over their estimated useful lives as follows:

Freehold land	Not depreciated
Freehold and long leasehold buildings	50 years
Short leasehold buildings	Life of lease
Leasehold improvements	Shorter of remaining life and 10 years
Ambulances	Shorter of useful life and 7 years
Leased vehicles and equipment	Shorter of useful life and lease term
Other vehicles and equipment	3 to 7 years

Where the recoverable amount of a fixed asset is found to be below its net book value, the asset is written down to the recoverable amount and the loss on impairment is recognised in the SOFA.

h. Investments

Listed securities are stated at fair value at the balance sheet date.

Investment property is stated at estimated fair value as at the latest valuation date, subject to obtaining advice as to the possibility of any material movements between such valuations. If there is a material movement, the property is revalued at that time. As a minimum, it is revalued by an independent valuer every five years.

Realised gains and losses on securities, calculated as the difference between the sales proceeds and their fair value at the start of the year, or subsequent cost, are credited or charged to the SOFA in the year of sale.

Unrealised revaluation gains and losses are credited or charged to the SOFA in the year of revaluation.

i. Stocks

Stocks are stated at the lower of cost and net realisable value. Cost is calculated using the average cost method.

j. Pension costs

St John Ambulance makes contributions to a number of defined contribution pension schemes for its employees. Contributions payable to these schemes are expensed in the year in which they are incurred.

Liabilities to make payments to fund any deficit relating to past service where an agreement to make the payments is in place are recognised in accordance with FRS 102. The amount to be recognised is the present value of the payments agreed.

k. Foreign currencies

Income and expenditure are translated at the rate ruling when the transaction occurs. Balance sheet items are translated at the rate ruling at the balance sheet date. Gains on exchange are recorded within other income and losses on exchange are recorded within the activity to which they relate.

l. Leases

Assets held under finance leases and other similar contracts, which provide for rights approximating to ownership, are treated as if purchased outright and the capital elements of these obligations are recorded as liabilities. The charge to the SOFA is represented by depreciation, which is charged in line with the charity's accounting policy, and interest. The interest is spread over the lease period in order to provide for a constant periodic charge on the balance of capital repayments outstanding.

The aggregate rentals payable for operating leases are expensed on a straight line basis in annual instalments over the term of the lease including any initial rent-free period.

NOTES TO THE ACCOUNTS

For the year ended 31 December 2017, continued

1. Accounting policies, continued

m. Taxation

St John Ambulance is able to partially recover Value Added Tax on purchases. Irrecoverable Value Added Tax is included in expenditure.

No Corporation Tax is due on profits arising from charitable activities.

Tax credits, tax deducted from income and receipts under deed of covenant or gift aid are recorded on a receivable basis. They are included as part of the income to which they relate.

n. Funds

Endowment funds are capital funds where the capital must be preserved although the income may be spent. The income may be added to restricted or unrestricted funds depending on the terms of the original endowment.

Restricted funds are funds that have restrictions imposed by donors and can only be applied for the particular purposes specified by the donors.

Designated funds are unrestricted funds set aside for specific purposes by the directors. They include an amount equivalent to the net book value of unrestricted fixed assets used to enable St John to continue to carry out its charitable mission.

Any net cumulative unrealised gains on the revaluation of investments, having been credited to the SOFA, are held within a revaluation reserve.

Other charitable funds are unrestricted funds that are available to St John to carry out any of its charitable objectives.

Transfers are primarily made between funds either when the acquisition of a fixed asset has discharged a restriction or to reflect movements in the amount of funds designated by the trustees for specific purposes.

o. Financial instruments

The charity only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value, representing amortised cost, as follows:

Financial instrument	Measurement on initial recognition
Cash	Cash held
Debtors	Settlement amount after any trade discounts
Creditors	Settlement amount after any trade discounts (assuming normal credit terms apply)
Investments – non-puttable unit trusts (i.e. without an option to sell the shares at a later date at an agreed price)	Transaction price (cost)

Forward commitments to purchase foreign currency are recognised at fair value at the date of purchase and are revalued as at the balance sheet date, with any movement recognised in the SOFA.

p. Short term deposits

Monies placed on deposit with a maturity date of more than three months are treated as current asset investments. Where the maturity date is three months or less, the deposit is recognised within cash or cash equivalents. In each case, the deposit is convertible to cash at, or close to, its carrying amount.

2. Income from donations and legacies

	2017	2016
	£m	£m
Donations and gifts	11.4	11.6
Legacies	1.8	2.5
Grants (see note 6)	2.1	0.1
Youth subscriptions	0.5	0.5
	15.8	14.7

NOTES TO THE ACCOUNTS

For the year ended 31 December 2017, continued

3. Income from charitable activities

	Grants (see note 6) £m	Other £m	2017 £m	2016 £m
Delivering first aid:				
First aid provision and youth development	-	7.1	7.1	7.1
Ambulance and transport services	-	14.6	14.6	20.3
Community support programmes	0.1	1.4	1.5	1.4
Equipping the public:				
Training	-	43.8	43.8	43.0
First aid products	-	12.2	12.2	10.2
Other charitable activities	-	0.1	0.1	-
	0.1	79.2	79.3	82.0

4. Income from other trading activities

	2017 £m	2016 £m
Rents from operational buildings	0.7	0.8
Merchandising	0.1	0.1
Fundraising events	0.1	0.1
Gift aid payable by subsidiary	0.1	-
	1.0	1.0

5. Investment income

	2017 £m	2016 £m
Dividends and interest	0.5	0.5
Rents from investment property	0.7	0.6
	1.2	1.1

6. Grants receivable

	Charitable activities (see note 3) £m	Income from donations and legacies (see note 2) £m	2017 Total £m	2016 Total £m
Grant from The Grand Lodge of Mark Master Masons	-	2.0	2.0	-
Other grants	0.1	0.1	0.2	0.4
	0.1	2.1	2.2	0.4

The following grants, which are included above, are required by the donor to be individually disclosed.



Grants from the Big Lottery Fund

	1 Jan 2017	Incoming resources	Outgoing resources	31 Dec 2017
	£'000	£'000	£'000	£'000
Hastings Homeless Service, Sussex	7	49	(52)	4

NOTES TO THE ACCOUNTS

For the year ended 31 December 2017, continued

7. Total expenditure

	Direct employee costs £m	Other direct costs £m	Depreciation £m	Other costs £m	Support costs (see note 8) £m	2017 Total £m	2016 £m
Expenditure on raising funds							
Campaigning and leadership:							
Fundraising costs	1.1	0.9	0.1	4.2	0.5	6.8	6.7
Publicity and public relations costs	1.1	0.2	-	1.1	0.2	2.6	2.1
Investment costs	-	-	-	-	-	-	0.1
	2.2	1.1	0.1	5.3	0.7	9.4	8.9
Expenditure on charitable activities							
Delivering first aid:							
First aid provision and youth development	2.1	5.2	0.5	3.9	1.4	13.1	12.6
Ambulance and transport services	9.5	3.3	2.1	7.3	4.6	26.8	32.6
Community support programmes	1.4	0.2	0.1	1.6	0.6	3.9	3.6
Equipping the public:							
Training	14.9	4.9	0.6	7.9	4.4	32.7	32.9
First aid products	0.6	7.9	0.2	1.9	0.9	11.5	9.9
Other charitable activities	0.3	0.1	0.1	1.4	0.2	2.1	2.0
	28.8	21.6	3.6	24.0	12.1	90.1	93.6
Total expenditure	31.0	22.7	3.7	29.3	12.8	99.5	102.5

Fundraising costs include support costs and other indirect costs of £1.3m (2016: £1.5m), which have been allocated as described in the accounting policies (see note 1). Excluding these allocated costs, fundraising costs total £5.5m (2016: £5.2m).

Direct costs are those associated with providing the activity: for example, first aid training includes training materials.

Other costs include indirect costs relating to employees, office accommodation and communications, which have been allocated to cost categories as described below. Indirect costs are allocated on a basis consistent with the use of resources. Allocation is calculated using both relative employee numbers and usage of resources, with the proportion of each allocation basis used varying depending upon the type of cost to be allocated.

Support costs represent indirect costs which cannot be attributed to specific activities but provide the organisational structure that enables those activities to take place.

Total expenditure includes:

	2017 £m	2016 £m
Operating lease rentals:		
Land and buildings	1.4	1.6
Vehicles and equipment	0.7	0.7
Finance lease interest	0.3	0.3

The auditor's remuneration for the audit of these accounts was £60,000 (2016: £66,000). Non-audit fees in relation to other ad hoc and advisory work totalling £4,000 were also payable to the auditors during the year (2016: £10,000).

NOTES TO THE ACCOUNTS

For the year ended 31 December 2017, continued

8. Analysis of support costs

Support costs within note 7, which include external consultancy and project management costs, are allocated to activities as appropriate:

	Governance £m	Management £m	Human resources £m	Central finance £m	Information Technology £m	Building management £m	2017 Total £m	2016 £m
Campaigning and leadership:								
Fundraising and publicity	-	0.1	0.1	0.1	0.3	0.1	0.7	0.6
Delivering first aid:								
First aid provision and youth development	0.1	0.5	0.1	0.1	0.4	0.2	1.4	1.4
Ambulance and transport services	0.2	1.9	0.4	0.6	1.2	0.3	4.6	5.2
Community support programmes	-	0.3	-	0.1	0.2	-	0.6	0.5
Equipping the public:								
Training	0.3	0.6	0.7	0.8	1.6	0.4	4.4	4.1
First aid products	0.1	0.1	-	0.2	0.4	0.1	0.9	0.9
Other charitable activities	-	-	-	0.1	0.1	-	0.2	0.2
	0.7	3.5	1.3	2.0	4.2	1.1	12.8	12.9

9. Net gains on investment assets

	2017 £m	2016 £m
Unrealised gain on securities (see note 14)	1.6	2.2
Unrealised gain on investment property (see note 15)	0.9	1.8
	2.5	4.0
Realised gain on securities (see note 14)	0.2	0.2
	2.7	4.2

10. Employee information

The average number of persons employed including part-time employees, calculated on a headcount basis, analysed by function, was:

	2017 Headcount	2016 Headcount
Charitable activities	1,764	2,030
Generating funds	19	23
Governance	16	15
	1,799	2,068

The average number of persons employed including part-time employees, calculated on a full-time equivalent basis analysed by function, was:

	2017 Full-time equivalent	2016 Full-time equivalent
Charitable activities	1,471	1,729
Generating funds	19	23
Governance	16	15
	1,506	1,767

NOTES TO THE ACCOUNTS

For the year ended 31 December 2017, continued

10. Employee information, continued

	2017 £m	2016 £m
Total employee costs		
Salaries, wages and benefits in kind	39.6	43.6
Social security costs	3.7	3.8
Pension and death benefits	1.5	1.8
	44.8	49.2

The above-noted costs include direct employee costs, which are shown in note 7, as well as indirect employee costs and employee support costs. The figure also includes additional employer defined benefit pension contributions payable to TPT Retirement Solutions of £0.3m (2016: £0.3m), as referred to in note 31.

Payments to employees, included in salaries, wages and benefits in kind, made in relation to the termination of employment during the year totalled £0.5m (2016: £0.7m).

Emoluments of employees

The number of employees of St John Ambulance whose emoluments (salaries, wages, benefits in kind and termination payments) fell within the following bands were:

	2017 Number	2016 Number
£60,001 - £70,000	8	10
£70,001 - £80,000	5	6
£80,001 - £90,000	7	4
£90,001 - £100,000	3	3
£100,001 - £110,000	4	6
£110,001 - £120,000	2	1
£150,001 - £160,000	-	1

Employees for whom termination payments are payable

	2017 Number	2016 Number
£60,001 - £70,000	-	1
£70,001 - £80,000	1	-
£90,001 - £100,000	-	1
£160,001 - £170,000	2	-
£170,001 - £180,000	-	1
£260,001 - £270,000	1	-

In addition, during the year, pension contributions to a defined contribution scheme on behalf of all of these employees amounted to approximately £229,000 (2016: £197,000).

Further details of the St John Ambulance pension scheme are set out in note 31.

Key management personnel

Key management personnel are defined as the trustees of the Priory, the directors of St John Ambulance and the senior management team of the charity. The trustees and directors receive no remuneration except for expenses necessarily incurred during the performance of their duties. The members of the senior management team are listed on page 91.

The total costs relating to the key management personnel (salaries, wages, benefits in kind, including pension costs, termination payments and fees payable), excluding expenses necessarily incurred during the performance of their duties, during the year were £1,321,000 in relation to 11 people (2016: £998,000 in relation to 15 people).

Payments totalling £98k were made to Belmont Executive Management Limited for the services of David Springthorpe, in relation to the role of Interim Chief Executive between July and December 2017.

NOTES TO THE ACCOUNTS

For the year ended 31 December 2017, continued

10. Employee information, continued

Mr Springthorpe served as a director of St John Ambulance until 15th June 2017, on which date he resigned from that role. He was subsequently appointed to the role of interim Chief Executive until the end of 2017, with a handover period that began in July 2017. Mr Springthorpe was first considered as a possible candidate for the role of interim Chief Executive in May 2017 and from that point until his resignation as a director, he was not involved in any discussions or decisions in relation to the selection or appointment of an interim Chief Executive. The agreement relating to hiring the services of Mr Springthorpe was made after he ceased to be a director.

Donations made by key management personnel during 2017 were £1,600 (2016: £2,000).

11. Directors' remuneration

The directors receive no remuneration for their services but are reimbursed for expenses which are necessarily incurred in the performance of their duties. The total of expenses (relating principally to travel, subsistence and accommodation) in 2017 was £50,000 (2016: £31,000) relating to 13 directors (2016: 16).

12. Tangible fixed assets – heritage assets

Cost

At 31 December 2016 and 31 December 2017

	Historic buildings £m	Artefacts £m	Total £m
At 31 December 2016 and 31 December 2017	2.0	0.4	2.4

Accumulated depreciation

At 31 December 2016

Charge for year

At 31 December 2017

At 31 December 2016	0.3	-	0.3
Charge for year	-	-	-
At 31 December 2017	0.3	-	0.3

Net book value 31 December 2017

Net book value 31 December 2016

Net book value 31 December 2017	1.7	0.4	2.1
Net book value 31 December 2016	1.7	0.4	2.1

The amount of depreciation charged in 2017 in respect of historic buildings was £40,000 (2016: £40,000).

St John Ambulance, on behalf of the Priory, maintains approximately 40,000 artefacts, of which some 400 of the most historically important are on public display in the Museum, the remainder being held in storage. The items held include a wide range of arms and armour, prints, documents, coins, models, costumes and other items relating to the history and activities of the Order. There is no charge for admission to the Museum, although donations are welcome.

Further details relating to the history and contents of the Museum are provided on the Museum's website (www.museumstjohn.org.uk).

The sale and purchase of artefacts is infrequent, acquisition only being contemplated for items which are complementary to the existing collection. There were no additions or disposals of heritage assets during the years ended 31 December 2016 and 31 December 2017.

The Museum employees are responsible for the cataloguing, custody and maintenance of all of the heritage assets. In accordance with best practice, the Museum's Head of Heritage maintains detailed records of all artefacts, including description and dating information.

Summary analysis of heritage asset transactions

	2017 £'000	2016 £'000	2015 £'000	2014 £'000	2013 £'000
Depreciation – historic buildings only	40	40	40	40	40

Over the past five years, there have been no purchases, donations received or disposals of heritage assets.

NOTES TO THE ACCOUNTS

For the year ended 31 December 2017, continued

13. Tangible fixed assets

Cost

At 1 January 2017

Additions

Disposals

At 31 December 2017

	Freehold property £m	Long leasehold property £m	Short leasehold property £m	Vehicles & equipment £m	Total £m
At 1 January 2017	66.6	15.3	2.9	46.0	130.8
Additions	0.5	0.1	0.4	1.2	2.2
Disposals	(2.7)	(0.4)	(0.1)	(4.5)	(7.7)
At 31 December 2017	64.4	15.0	3.2	42.7	125.3

Accumulated depreciation

At 1 January 2017

Charge for year

Disposals

At 31 December 2017

At 1 January 2017	11.3	3.6	1.5	37.4	53.8
Charge for year	0.9	0.3	0.2	2.3	3.7
Disposals	(0.4)	(0.2)	-	(4.4)	(5.0)
At 31 December 2017	11.8	3.7	1.7	35.3	52.5

Net book value 31 December 2017

Net book value 31 December 2016

Net book value 31 December 2017	52.6	11.3	1.5	7.4	72.8
Net book value 31 December 2016	55.3	11.7	1.4	8.6	77.0

The net book value of assets that are held under finance leases at 31 December 2017 was £5.1m (2016: £6.6m). The depreciation attributable to these assets during the year was £1.5m (2016: £1.3m). All assets held under finance leases are classified as vehicles and equipment.

14. Investments – securities

Analysis of investments at 31 December by category of holding

Unit trusts

Unit trusts include no cash instruments (2016: £Nil).

Analysis of investments at 31 December by location

Investments in the UK

Investments outside the UK

Analysis of movements in the securities portfolio

Fair value at 1 January

Additions at cost

Book value of disposals

Net unrealised gains (see note 9)

Fair value at 31 December

	2017 £m	2016 £m
Unit trusts	17.0	15.8
	17.0	15.8

	2017 £m	2016 £m
Investments in the UK	10.1	9.4
Investments outside the UK	6.9	6.4
	17.0	15.8

	2017 £m	2016 £m
Fair value at 1 January	15.8	13.2
Additions at cost	1.2	0.7
Book value of disposals	(1.6)	(0.3)
Net unrealised gains (see note 9)	1.6	2.2
Fair value at 31 December	17.0	15.8

A realised gain, net of sale costs, of £0.2m (2016: £0.2m) arose from disposals and has been included in the SOFA as part of the total gains on investment assets (see note 9).

NOTES TO THE ACCOUNTS

For the year ended 31 December 2017, continued

14. Investments – securities, continued

The value of the following investments represented more than 5% of the fair value as at 31 December 2017:

	Number of shares	Fair value £m
BlackRock Charishare Common Investment Fund	1,536,899	10.1
BlackRock iShares North American Equity Index Fund class D accumulating units	984,907	3.3
BlackRock iShares Continental European Equity Index Fund class D accumulating units	754,144	1.8

The year end fair value of securities, and historical cost, is shown below:

	2017 £m	2016 £m
Fair value	17.0	15.8
Cost	(13.1)	(13.3)
Revaluation surplus	3.9	2.5

The increase in the revaluation surplus is reflected in the SOFA within unrealised gains (see note 9).

15. Investment property

Analysis of movements in investment property

	2017 £m	2016 £m
Fair value at 1 January	17.3	15.5
Increase in fair value	0.9	1.8
Fair value at 31 December	18.2	17.3

St John Ambulance has one investment property, which is adjacent to the Museum of the Order of St John at St John's Gate. The majority of space in the building is let to third parties, but it also accommodates the National Headquarters of St John Ambulance. The carrying value of the property is split into two separate elements. That part of the building which is let to third parties is included in the balance sheet at fair value, while that part which is used by St John Ambulance for operational purposes is carried in the balance sheet at cost, less accumulated depreciation.

The property was valued as at 31 December 2014 by Daniel Watney LLP, Chartered Surveyors, a firm of independent valuers, who also provided an update to this valuation as at 31 December 2017. The total valuation of the building as at 31 December 2017, including both the operational and investment elements of the property, was £30.3m (2014: £30.8m). Of this amount, £12.1m is classified as operational and £18.2m is classified as the valuation of the investment property.

The valuation amount has been apportioned between the investment and non-investment parts of the building using the relative floor areas attributable to each element.

The basis of valuation was market value on the assumption that it would be sold subject to existing leases and tenancies, determined in accordance with the requirements of the RICS Valuation – Professional Standards January 2014 (revised April 2016). The valuer's opinion of market value was primarily derived using comparable recent market transactions on arm's length terms together with other valuation techniques.

A comparison of the valuation of the investment property and its historical cost is shown below.

	2017 £m	2016 £m
Fair value	18.2	17.3
Cost at 1 January and at 31 December	3.6	3.6
Revaluation surplus	14.6	13.7

NOTES TO THE ACCOUNTS

For the year ended 31 December 2017, continued

16. Stocks

At 31 December stock held amounted to:
First aid training products and equipment

	2017 £m	2016 £m
	2.4	2.8
	2.4	2.8

Stock recognised during the year as an expense was £8.6m, (2016: £7.3m).

An impairment loss of £Nil (2016: £0.1m) was recognised against stock during the year due to slow moving and obsolete stock.

No stock is pledged as security as at the balance sheet date.

17. Debtors

	2017 £m	2016 £m
Trade debtors	12.8	12.9
Other debtors	0.2	0.2
Prepayments and accrued income	5.6	5.3
	18.6	18.4

18. Cash and short term deposits

Cash and short term deposits includes monies held in interest-bearing bank accounts as well as monies held on short-term deposit with a maturity of less than three months (see note 27).

As at 31 December 2017, amounts totalling £15 million were held within a series of 12 month term deposits. These deposits mature on a rolling basis, with maturity dates between March and December 2018. The deposits are treated as a current asset investment and excluded from cash at bank and in hand.

19. Creditors falling due within one year

	2017 £m	2016 £m
Trade creditors	5.0	4.2
Obligations under finance leases	1.5	1.4
Pension contributions (see note 32)	0.6	0.6
Taxes and social security	1.9	2.0
Holiday pay	0.4	0.4
Other creditors	0.1	0.1
Accruals	3.6	4.2
Deferred income (see note 21)	4.0	3.5
	17.1	16.4

20. Creditors falling due after more than one year

Amounts falling due after more than one year comprise:

	2017 £m	2016 £m
Finance leases	4.1	5.7
Pension contributions (see note 32)	2.6	2.9
	6.7	8.6

21. Deferred income

	Course fees £m	Other £m	Total £m
Balance at 1 January 2017	3.2	0.3	3.5
Amount released to income	(3.2)	(0.3)	(3.5)
Amount deferred in the year	3.6	0.4	4.0
Balance at 31 December 2017	3.6	0.4	4.0

NOTES TO THE ACCOUNTS

For the year ended 31 December 2017, continued

22. Financial commitments

Operating lease commitments

Leases which expire within	Land & buildings £m	Vehicles & equipment £m	Total 2017 £m	Land & buildings £m	Vehicles & equipment £m	Total 2016 £m
Less than one year	0.6	-	0.6	0.1	-	0.1
Two to five years	0.8	1.7	2.5	2.5	1.6	4.1
Over five years	4.3	-	4.3	3.3	-	3.3
	5.7	1.7	7.4	5.9	1.6	7.5

Future minimum finance lease payments

Future minimum payments as at the balance sheet date in relation to finance leases, primarily relating to ambulances, comprise:

	2017 £m	2016 £m
Amounts payable within less than one year	1.8	1.8
Amounts payable between two and five years	4.2	5.6
Amounts payable after five years	0.2	0.6
	6.2	8.0

23. Capital commitments

At 31 December capital commitments contracted for amounted to:

	2017 £m	2016 £m
Vehicles and equipment	2.3	-
	2.3	-

Capital commitments primarily relate to outstanding orders for ambulances, mobile treatment centres and support vehicles.

24. Analysis of total funds

Type of asset and liability

	Unrestricted funds £m	Restricted funds £m	Endowment funds £m	2017 £m	2016 £m
Heritage assets	2.1	-	-	2.1	2.1
Tangible fixed assets	72.8	-	-	72.8	77.0
Securities	15.5	0.5	1.0	17.0	15.8
Investment properties	18.2	-	-	18.2	17.3
Net current assets	24.4	2.9	-	27.3	22.1
Creditors falling due after more than one year	(6.7)	-	-	(6.7)	(8.6)
	126.3	3.4	1.0	130.7	125.7

NOTES TO THE ACCOUNTS

For the year ended 31 December 2017, continued

25. Total funds

	1 Jan 2017 £'000	Incoming resources £'000	Outgoing resources £'000	Investment gains £'000	Transfers and reallocations £'000	31 Dec 2017 £'000
Restricted funds						
<i>Lottery funds</i>						
Big Lottery Fund – Hastings Homeless Service	7	49	(52)	-	-	4
<i>Other restricted funds</i>						
Airwing travelling fellowships	186	5	(9)	24	-	206
Building purchases and maintenance	91	16	(69)	-	(1)	37
Community care	9	-	(1)	-	11	19
Local and sundry funds	1,323	913	(589)	12	(374)	1,285
Medical vehicle purchases and maintenance	22	40	-	-	(40)	22
R Luff benevolent fund	160	22	(15)	13	1	181
Training funds	185	11	(29)	-	(11)	156
Volunteer development and welfare	145	-	(22)	-	29	152
Grant from The Grand Lodge of Mark Master Masons	-	1,989	-	-	(715)	1,274
Total restricted funds	2,128	3,045	(786)	49	(1,100)	3,336
Endowment funds						
G Holland Trust	125	-	-	15	-	140
R Luff benevolent fund	681	-	-	86	-	767
Doug Spence fund	99	-	-	12	-	111
Other funds	20	-	-	-	(7)	13
Total endowment funds	925	-	-	113	(7)	1,031
Unrestricted funds						
<i>Designated funds</i>						
Purchase and replacement of vehicles	1,300	-	(855)	-	355	800
Building refurbishment	4,000	-	(2,674)	-	3,174	4,500
Business processes and systems	5,200	-	(1,150)	-	1,600	5,650
Fundraising initiatives	-	-	-	-	2,700	2,700
	10,500	-	(4,679)	-	7,829	13,650
Fixed asset reserve – representing the book value of unrestricted fixed assets	79,146	-	-	-	(4,205)	74,941
<i>Total designated funds</i>	89,646	-	(4,679)	-	3,624	88,591
Investment property	17,290	-	-	940	-	18,230
Unrestricted funds (free reserves)	15,754	98,734	(94,101)	1,646	(2,517)	19,516
Total unrestricted funds	122,690	98,734	(98,780)	2,586	1,107	126,337
TOTAL FUNDS	125,743	101,779	(99,566)	2,748	-	130,704

NOTES TO THE ACCOUNTS

For the year ended 31 December 2017, continued

25. Total funds, continued

The movement in the revaluation reserve of £2.3m during the year from £16.0m to £18.3m, shown within unrestricted funds, represents the unrealised increase in 2017 in the fair value of the investment property of £0.9m and the unrealised gain on unrestricted securities of £1.6m, less the £0.2m impact on the revaluation reserve of disposals of unrestricted securities.

Investment gains arise in respect of investments which are held as part of the restricted fund assets.

Designated funds

Designated funds which are, except for the fixed asset reserve, expected to be spent in 2018 and later, represent:

- Purchase and replacement of vehicles – ambulances and other medical vehicles renewal expenditure
- Building refurbishment – funding for the upkeep and enhancement of the charity's properties and infrastructure
- Business processes and systems – funding to upgrade IT infrastructure and systems
- Fundraising – funding for investment in fundraising activity.

Endowment funds

Endowment funds represent:

- G Holland Trust – provides income to be used by a specific unit of St John Ambulance in Kent
- R Luff benevolent fund – a capital fund established to support members in cases of hardship
- Doug Spence fund – a fund established for the benefit of St John Ambulance in Gloucestershire
- Other funds – comprise endowments held at local level to provide income to meet operational requirements.

26. Reconciliation of net income to net cash provided by operating activities

	2017 £m	2016 £m
Net income	5.0	3.9
Adjustments for:		
Net gain on disposal of tangible fixed assets	(4.2)	(3.1)
Gains on investments	(2.7)	(4.2)
Dividends, interest and rents from investments	(1.2)	(1.1)
Depreciation	3.8	3.8
Decrease/(increase) in stocks	0.4	(0.5)
(Increase)/decrease in debtors	(0.2)	1.1
Increase in creditors	0.2	0.8
Net cash provided by operating activities	1.1	0.7

27. Analysis of cash and cash equivalents

	2017 £m	2016 £m
Cash in hand	8.4	11.8
Notice deposits (less than three months)	-	1.5
Total cash and cash equivalents	8.4	13.3

NOTES TO THE ACCOUNTS

For the year ended 31 December 2017, continued

28. Financial instruments

	2017 £m	2016 £m
Carrying amount of financial assets		
Measured at amortised cost (comprising trade debtors, cash and cash equivalents and current asset investments)	36.2	30.2
Instruments measured at fair value through Statement of Financial Activities (comprising investments)	17.0	15.8
	53.2	46.0
Carrying amount of financial liabilities		
Measured at amortised cost (comprising trade creditors, lease creditors, holiday pay and accruals)	14.7	15.9
	14.7	15.9

29. Investment in subsidiary company

Support St John Limited, which is a non-charitable trading company, is wholly owned by St John Ambulance by virtue of the fact that St John Ambulance is its sole member. Support St John Limited carries out activities that are not compatible with the charitable status of St John Ambulance. Taxable profits are transferred to St John Ambulance under gift aid. Support St John Limited is a company limited by guarantee and does not have any share capital. St John Ambulance has undertaken to contribute an amount not exceeding £10 on a winding up of Support St John Limited.

A summary of the results of Support St John Limited for the year and the aggregate amount of its assets, liabilities, and funds is shown below.

	2017 £'000	2016 £'000
Income	318	278
Expenditure	(253)	(253)
Operating profit	65	25
Taxation payable	-	5
Gift aid	(65)	(48)
Retained profit	-	(18)
Assets	194	191
Liabilities	(194)	(191)
Funds	-	-

NOTES TO THE ACCOUNTS

For the year ended 31 December 2017, continued

30. Associated charities

Through the Priory, St John Ambulance is associated with the Order together with the other priories throughout the world and, on behalf of the Priory, St John Ambulance contributes to the annual running costs of the Order in the proportion of the membership of the Priory relative to the membership of all the priories. In 2017, on behalf of the Priory, St John Ambulance contributed £0.3m to the Order of St John and other priories (2016: £0.3m).

Through the Priory, St John Ambulance is also associated with the Eye Hospital. In 2017 £0.2m was contributed to the support of the Eye Hospital (2016: £0.3m).

31. Pension scheme

Pension arrangements

St John Ambulance participates in the Growth Plan, Unitised Ethical Plan ('UEP') and Flexible Retirement Plan ('FRP'), all of which are multi-employer pension plans provided by TPT Retirement Solutions (formerly called The Pensions Trust).

Contributions paid into the Growth Plan up to and including September 2001 were converted to defined amounts of pension payable from normal retirement date. From October 2001 contributions were invested in personal funds which have a capital guarantee, and which are converted to pension on retirement, either within the Growth Plan or by the purchase of an annuity.

Membership of the UEP, the FRP or Growth Plan Series 4, all of which are defined contribution schemes, is made available to new employees. Employees, including those who are in the Growth Plan Series 1, 2 and 3, which are closed to new entrants, have the option to switch in the future to any of the three schemes that are currently available to new employees.

Membership and pension contributions

St John Ambulance paid contributions to all three plans at rates between 2% and 10% during the year. Members paid contributions generally between 1% and 5% during the year. Auto-enrolment of all employees into a pension plan came into effect from 1 October 2013. As at the year end, there were 1,413 employees (2016: 1,550) of St John Ambulance who were members of the available TPT Retirement Solutions plans, including 1,276 in the Growth Plan (2016: 1,360).

The Growth Plan Series 1, 2 and 3 are defined benefit schemes which provide benefits to some 1,300 non-associated participating employers. It is not possible in the normal course of events to identify the share of underlying Growth Plan assets and liabilities belonging to individual participating employers. Growth Plan assets are co-mingled for investment purposes and benefits are paid from the total Plan assets. Therefore, the Growth Plan is accounted for as a defined contribution scheme.

The total pension contributions payable to TPT Retirement Solutions in relation to 2017, including employee contributions, were £2.6m (2016: £2.7m). The amount owing to TPT Retirement Solutions at 31 December 2017 was £0.2m (2016: £0.2m).

Actuarial valuations

The Growth Plan is funded and is not contracted out of the state scheme. The plan trustee commissions a full actuarial valuation of the Growth Plan every three years, with updates in-between. The purpose of the actuarial valuation is to determine the funding position of the Growth Plan by comparing the assets with the past service liabilities as at the valuation date. Asset values are calculated by reference to market levels. Accrued past service liabilities are valued by discounting expected future benefit payments using a discount rate calculated by reference to the expected future investment returns.

The rules of the Growth Plan give the trustee the power to require employers to pay additional contributions to ensure that the statutory funding objective under the Pensions Act 2004 is met. The statutory funding objective is that a pension scheme should have sufficient assets to meet its past service liabilities, known as technical provisions.

A full actuarial valuation of the Growth Plan was performed at 30 September 2014 and updated as at 30 September 2016 by a professionally qualified actuary using the Projected Unit Method. The financial assumptions underlying the valuations were as follows:

	2016 update % pa	2015 update % pa	2014 valuation % pa	2013 update % pa	2012 update % pa
Investment return pre-retirement	2.6	3.6	4.2	4.6	4.1
Investment return post-retirement	1.7	2.7	3.3	4.1	3.6
Rate of price inflation – Retail Prices Index (RPI)	3.0	3.0	3.1	3.2	2.6
Rate of price inflation – Consumer Prices Index (CPI)	2.1	2.1	2.2	2.5	2.0

In determining the investment return assumptions, the trustee considered actuarial advice relating to the probability of achieving particular levels of investment return. The trustee has incorporated an element of prudence into the pre- and post-retirement investment return assumptions, such that there is a 60% expectation that the return will be in excess of that assumed and a 40% chance that the return will be lower than that assumed over the next 10 years.

NOTES TO THE ACCOUNTS

For the year ended 31 December 2017, continued

31. Pension scheme, continued

Actuarial valuations, continued

The scheme actuary has prepared a full actuarial valuation as at 30 September 2014. The fair values of the Growth Plan's assets as at the valuation date of 30 September 2014 and the update date of 30 September 2016, as well as for previous years, are shown in the following table:

	2016 update £m	2015 update £m	2014 valuation £m	2013 update £m	2012 update £m
Assets	900.8	856.8	793.4	772.0	790.3
Technical provisions (past service liabilities)	(1,051.7)	(995.4)	(969.9)	(927.5)	(984.1)
Shortfall of assets compared with the value of liabilities	(150.9)	(138.6)	(176.5)	(155.5)	(193.8)
Funding level	85.7%	86.1%	81.8%	83.2%	80.3%

The actuarial valuation as at 30 September 2014 is the latest available. The next full actuarial valuation will be carried out as at 30 September 2017.

Deficit contributions

The full actuarial valuation for the Growth Plan scheme carried out at 30 September 2011 showed a funding shortfall of £148m. To eliminate this funding shortfall, the trustee asked participating employers to pay additional contributions to the scheme. The total annual additional contributions payable by all participating employers was calculated at £13.9m, increasing by 3% per annum on 1 April each year, from 1 April 2013 to 31 March 2023.

In addition, a full actuarial valuation of the scheme was carried out at 30 September 2014. This valuation showed a funding shortfall of £177m and the required schedule of total additional contributions payable has subsequently been extended. The total annual additional contributions payable by all participating employers was calculated at £13.0m, increasing by 3% per annum on 1 April each year, from 1 April 2017 to 31 March 2028. The recovery plan contributions are allocated to each participating employer in line with their estimated share of the Growth Plan Series 1 and Series 2 scheme liabilities.

The additional contributions required from St John Ambulance have been levied at £345,000 per annum after 1 April 2016, increasing to £355,000 per annum payable from 1 April 2017. From 1 April 2018 the amount payable is £366,000 per annum. Payments continue, increasing at 3% per annum, until 31 March 2025.

Where the scheme is in deficit and the participating employer has agreed to a deficit funding arrangement, the employer recognises a liability for this obligation. The amount recognised is the net present value of the deficit reduction contributions made under the agreement that relates to the deficit. The present value is calculated using the discount rate disclosed in the assumptions below. The unwinding of the discount rate is recognised as a finance cost. Further details of the liability are given in note 32.

Cessation of membership

The Growth Plan is classified as a 'last man standing' arrangement. In the event of a complete withdrawal from the Growth Plan by St John Ambulance or if TPT Retirement Solutions were wound up, St John Ambulance would have a legal liability to pay a share of the accumulated deficit in the Growth Plan, as calculated on an annuity purchase basis. The current potential liability for St John Ambulance, based on the actuarial update at 30 September 2016, is estimated at £7.7m (30 September 2015: £6.2m). This potential liability is affected by changes in the fair value of the Growth Plan assets due to stock market fluctuations. There is no intention on the part of St John Ambulance to withdraw from the Growth Plan.

32. Pension contributions liability

(i) Total pension contributions liability

	2017 £m	2016 £m
Pension contributions payable on salaries	0.2	0.2
Present value of provision relating to additional pension contributions	3.0	3.3
	3.2	3.5
Amounts falling due within one year (see note 19)	0.6	0.6
Amounts falling due after more than one year (see note 20)	2.6	2.9
	3.2	3.5

NOTES TO THE ACCOUNTS

For the year ended 31 December 2017, continued

32. Pension contributions liability, continued

(ii) Reconciliation of opening and closing provisions relating to additional pension contributions	2017 £m	2016 £m
Provision at 1 January	3.3	3.4
Unwinding of the discount factor (interest expense)	-	0.1
Deficit contribution paid	(0.3)	(0.3)
Re-measurements – impact of any change in assumptions	-	0.1
Provision at 31 December	3.0	3.3

(iii) Income and expenditure impact	2017 £m	2016 £m
Interest expense	-	0.1
Re-measurements – impact of any change in assumptions	-	0.1
Total cost recognised in Statement of Financial Activities	-	0.2

(iv) Assumptions	31 December 2017	31 December 2016	31 December 2015	31 December 2014
	% per annum	% per annum	% per annum	% per annum
Discount rate used	1.39	1.44	2.50	1.99

The discount rates shown above are the equivalent single discount rates which, when used to discount the future recovery plan contributions due, would give the same results as using a full AA corporate bond yield curve to discount the same recovery plan contributions.

(v) Deficit contributions schedule

The following schedule details the deficit contributions agreed between St John Ambulance and the Growth Plan at each year end period:

Amounts payable in each future year as at the balance sheet date	2017 £'000	2016 £'000
Year 1	363	353
Year 2	374	363
Year 3	385	374
Year 4	397	385
Year 5	409	397
Year 6	421	409
Year 7	434	421
Year 8	334	434
Year 9	-	334

St John Ambulance must recognise a liability measured as the present value of the contributions payable that arise from the deficit recovery agreement and the resulting expense in the income and expenditure account (the unwinding of the discount rate as a finance cost in the period in which it arises).

It is these contributions that have been used to derive the balance sheet liability.

NOTES TO THE ACCOUNTS

For the year ended 31 December 2017, continued

33. Parent undertaking

St John Ambulance is a wholly-owned subsidiary of The Priory of England and the Islands of the Most Venerable Order of the Hospital of St John of Jerusalem ('the Priory').

The consolidated accounts of the Priory may be obtained from:

St John Ambulance Headquarters, 27 St John's Lane, Clerkenwell, London, EC1M 4BU.

34. Related parties

Advantage has been taken of the exemption given by section 33 of the Financial Reporting Standard in the UK and Republic of Ireland (FRS 102) from disclosing transactions and balances with wholly-owned subsidiaries.

NOTES TO THE ACCOUNTS

For the year ended 31 December 2017, continued

35. Comparative results for the year ended 31 December 2016, by type of fund

	Note	Unrestricted funds £m	Restricted and endowment funds £m	2016 Total £m
Income and endowments from:				
Income from donations and legacies				
	2	14.1	0.6	14.7
Income from charitable activities:				
Delivering first aid:				
First aid provision and youth development		7.1	-	7.1
Ambulance and transport services		20.3	-	20.3
Community support programmes		1.4	-	1.4
Equipping the public:				
Training		42.7	0.3	43.0
First aid products		10.2	-	10.2
Other charitable activities		-	-	-
Total income from charitable activities	3	81.7	0.3	82.0
Income from other trading activities	4	1.0	-	1.0
Investment income	5	1.1	-	1.1
Other income				
Net gain on disposal of assets		3.1	-	3.1
Other income		0.3	-	0.3
Total other income		3.4	-	3.4
TOTAL INCOME		101.3	0.9	102.2
Expenditure on:				
Total expenditure on raising funds	7	8.9	-	8.9
Expenditure on charitable activities:				
Delivering first aid:				
First aid provision and youth development		12.1	0.5	12.6
Ambulance and transport services		32.6	-	32.6
Community support programmes		3.4	0.2	3.6
Equipping the public:				
Training		32.4	0.5	32.9
First aid products		9.9	-	9.9
Other charitable activities		2.0	-	2.0
Total resources expended on charitable activities	7	92.4	1.2	93.6
TOTAL EXPENDITURE		101.3	1.2	102.5
Gains on investments	9	4.0	0.2	4.2
NET MOVEMENT IN FUNDS		4.0	(0.1)	3.9
Fund balances at 1 January 2016		118.7	3.1	121.8
FUND BALANCES AT 31 DECEMBER 2016	25	122.7	3.0	125.7

ROYAL PATRONS, DIRECTORS, MANAGEMENT AND COMMITTEES

ROYAL PATRONS

HM The Queen	Sovereign Head of the Order of St John
HRH The Duke of Gloucester	Grand Prior
HRH The Princess Royal	Commandant in Chief (Youth) St John Ambulance
HRH The Countess of Wessex	Grand President

BOARD OF DIRECTORS

The directors who are listed below serve as trustees of St John Ambulance and are legally responsible for governance and management of the charity.

Surgeon Rear Admiral Lionel Jarvis CBE DL MB BS FRCR

Chair*	2,3	
The Revd. Canon Paul Denby MBE JP DL*	2,3	retired 31 January 2017
The Very Revd. Nicholas Frayling*	3	
Mrs A Cable MBE DL*	2	appointed 1 March 2017
Mr M Messinger LVO QPM*	2,3	
Ms M Coleman		
Ms A Jarvie CBE	1	
Ms J Mee	2	
Mr M Mansigani		
Mr M Patten		
Dr D Reeves		
Mr D Springthorpe	1,2	resigned 15 June 2017
Mr M Stevenson-Dodd		
Company Secretary		
Dr G Maydon JP PhD		resigned as Company Secretary 30 April 2018
Mr R Sims		appointed as Company Secretary 8 May 2018

* Also a trustee of the Priory.

1. Member of Audit and Risk Committee
2. Member of Remuneration Committee
3. Member of Nominations Committee

ROYAL PATRONS, DIRECTORS, MANAGEMENT AND COMMITTEES

AUDIT AND RISK COMMITTEE

Chair - Ms A Jarvie CBE

Mr P S Bussy	retired 23 June 2017
Mr B R England OBE DL	retired 7 September 2017
Mr S Frost	
Mr J N Rose	
Mr D Springthorpe	resigned 15 June 2017
Ms V Storey	
Mr M W Willis	retired 6 December 2017
Mr N Wood, MBE	appointed 7 September 2017

REMUNERATION COMMITTEE

Chair - Ms J Mee

The Revd. Canon Paul Denby MBE JP DL	retired 31 January 2017
Mrs A Cable MBE DL	appointed 1 March 2017
Surgeon Rear Admiral Lionel Jarvis CBE DL MB BS FRCR	
Mr M Mansigani	appointed 1 July 2017
Mr M Messinger LVO QPM	
Mr D Springthorpe	resigned 15 June 2017

NOMINATIONS COMMITTEE

Chair - Surgeon Rear Admiral Lionel Jarvis CBE DL MB BS FRCR

Ms M Boland	appointed 1 August 2017
Mr J Dempster	
The Revd. Canon Paul Denby MBE JP DL	retired 31 January 2017
The Very Revd. Nicholas Frayling	
Mr P Herbage	appointed 1 August 2017
Ms S Lowndes-Jones	
Mrs E Mackinlay	
Mr M Messinger LVO QPM	appointed 1 February 2017
Ms S Morgan	
Mrs J Siggers	

ROYAL PATRONS, DIRECTORS, MANAGEMENT AND COMMITTEES

SENIOR MANAGEMENT TEAM

Mr M Houghton-Brown, Chief Executive, appointed 2 January 2018

Mr D Springthorpe, Interim Chief Executive, appointed 1 September 2017, resigned 31 December 2017

Ms S A Killen, Chief Executive, resigned 1 September 2017

Ms R Boyce, Director of Quality and Standards

Mr S Conway, Director of Brand, Marketing, Communications and Fundraising, resigned 15 December 2017

Mr M Farmer, Director of First Aid Services

Mr S Foster, Director of People and Organisation

Mr M Fox, Director of Training

Mr K Heydenrych, Director of Information Systems and Processes

Ms J T Keaney, Director of Finance and Shared Services

Dr G Maydon JP Phd, Company Secretary, resigned 30 April 2018

Mr J Radford, Head of Strategy and Performance Measurement

PRINCIPAL PLACES OF BUSINESS AND ADVISERS

The Priory of England and the Islands

St John's Gate
St John's Lane
Clerkenwell
London
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020 7324 4000
stjohnengland.org.uk

St John Ambulance

27 St John's Lane
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sja.org.uk

Support St John Limited

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30 Finsbury Square
London
EC2P 2YU

Bankers

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1 Churchill Place
London
E14 5HP

Investment managers

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12 Throgmorton Avenue
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Property advisers

Daniel Watney LLP, Chartered Surveyors
165 Fleet Street
London
EC4A 2DW

Solicitors

Bircham Dyson Bell
50 Broadway
London
SW1M 0BL

Insurance brokers

Sydney Packett & Sons Limited
Salts Wharf
Ashley Lane
Shipley
BD17 8DB

Pension fund

TPT Retirement Solutions
Verity House
6 Canal Wharf
Leeds
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