The Queen's Institute of Community Nursing

Annual Report and Accounts

Year to 31 December 2025



We were delighted to welcome Steph Lawrence MBE as Chief Executive of the Queen's Institute of Community Nursing in July 2025, succeeding Dr Crystal Oldman CBE. Steph brings extensive experience and a clear vision for the next chapter in the Institute's work.



Photo overleaf: Queen's Nurse Vicky Johnson on her rounds.

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Reference and administrative information about The Queen's Institute of Community Nursing (formerly The Queen's Nursing Institute), its members of Council and advisers

Patron	Her Majesty Queen Camilla
Vice Presidents	Dr June Crown CBE Professor Sir Sam Everington OBE Zahir Fazal Professor Dame Elizabeth Anionwu OM DBE

The members of Council (Trustees) at the date of this report, and those who served during 2025, are as follows:

Chair of Council	Professor John Unsworth OBE * Nick Addyman * # + Dale Carrington Nigel Edwards Richard Fass (retired from Council February 2026) Dr Judith Graham BEM Rosalynde Lowe CBE * Helen Mehra Dr Jenni Middleton Dr Joan Myers OBE Rebecca Myers # +
Vice Chair	Christine O'Connell # +
Interim Honourary Treasurer	Tim Oliver OBE Dr Neesha Oozageer Gunowa Jeremy Taylor OBE

* Council members nominated and appointed by the Patron
# Members of the Finance Committee
\+ Members of the Remuneration Committee

Chief Executive	Steph Lawrence MBE
Charity registration number	213128

Reference and administrative information about The Queen's Institute of Community Nursing (formerly The Queen's Nursing Institute), its members of Council and advisers

Principal office	30 Euston Square London NW1 2FB
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Investment managers	Rathbone Investment Management Limited Port of Liverpool Building Pier Head Liverpool L3 1NW
Bankers	CAF Bank Limited 25 Kings Hill Avenue Kings Hill West Malling Kent ME19 4JQ



Above:
Professor John Unsworth OBE, Chair of Council, The QICN

Foreword from the Chair

Despite being elected on a promise of change, the UK government responsible for the English health service has made little progress to transform community health services. After more than 10 years of workforce decline and underinvestment in education, services remain unable to meet demand for care. 2025 saw several high profile Inquests where 'care not done' was a contributing factor in the person's death. Coroners issued prevention of future death reports, yet there is still no sign of the promised workforce changes. The Institute continue to lobby for investment in community nursing and to highlight the impact of service cuts. The 'care not done' campaign expertly led by our new Chief Executive is gaining support as she works to develop a coalition of organisations to highlight the scandal of the community equivalent of corridor care.

Elsewhere in the UK Wales and Northern Ireland has seen the transformation of the community nursing workforce. Despite this welcome change work still needs to done to ensure that the workforce is at the centre of the health system facilitating safe and timely discharge of patients and preventing unnecessary admission to hospital. Only by achieving this will the system be able to address waiting times and ensure the public have confidence in the NHS.

The publication of the government's ten-year plan, Fit for the Future, in the early summer set out an ambitious agenda built around three radical shifts: from hospital to community, from analogue to digital, and from sickness to prevention. These are shifts the QICN has long championed, and we broadly welcome the direction of travel. However, welcome rhetoric must be matched by meaningful investment, and we will continue to hold government to account on that commitment. We firmly believe that Neighbourhood Teams should be created within existing services, not add on duplication. That requires investment in the existing services so that access can be 24/7 across the week.

In England the structural backdrop to 2025 was one of considerable turbulence. NHS England began its preparations for transition into the Department of Health and Social Care, while Integrated Care Boards were restructured across the country. These changes create uncertainty for the community nursing workforce when strong and stable leadership is most needed. In Wales at the time of writing a new minority government has been elected with Plaid Cymru seeking to transform the NHS. Northern Ireland has seen a period of relative stability following years of impasse around power sharing. Throughout all of this the QICN has sought to be a consistent, independent voice, bringing evidence and experience wherever patients are neglected and nursing risks being overlooked in policy discussions.



Above:
Professor Olga Yakusheva, of John Hopkins University, USA, giving the William Rathbone X Lecture in 2025.

2025 also marked an important transition in our own leadership. After thirteen years of extraordinary service, Dr Crystal Oldman CBE stepped down as Chief Executive in the summer. Crystal leaves a legacy of transformation: a QICN with a reach and influence that belies its size, a strong evidence base through the International Community Nursing Observatory, and a reputation as the foremost voice for community nursing. We owe her a great debt of gratitude. I am delighted that Steph Lawrence MBE took up the post of Chief Executive on 1 July 2025, bringing extensive experience and a clear vision for the next chapter of the QICN's work. Steph has led the leadership transition skilfully, developing our new five-year strategy and beginning implementation with the wider Institute team.

The Institute's new strategy builds on our previous work with two principal transformational elements. Firstly, we are seeking to move our policy leadership from commenting and influencing policy produced by others to setting the policy agenda through more active thought leadership and strategy. Secondly, we are committed to ensuring financial sustainability for the Institute by reversing our deficit positioning. Both of these elements will mean significant change both within the organisation and in terms of what we do to support nurses and stakeholders. I am confident that this direction of travel is the right one and that the Institute will emerge stronger, more focused and influential as a result.

Our policy influence has continued to grow. In November 2025, our Chief Executive gave evidence to the Health and Social Care Select Committee on the community nursing workforce – a clear demonstration of the respect the QICN commands in national policy circles. We contributed to more than 20 national advisory groups and roundtables throughout the year, including hosting our own roundtable on neighbourhood working, attended by the Chief Nurse for England. Our collaboration with the Nuffield Trust on their report into the decline of district nursing, launched at a House of Lords event in May, was another highlight, bringing the plight of district nursing services to a broader public and political audience. As our policy influence has matured we are moving to a much more collegiate approach to influence working alongside and with other nursing organisations to amplify the voice of nursing.

The International Community Nursing Observatory, so expertly led by Professor Alison Leary MBE throughout her tenure, has again produced work of real impact. The 2025 report, The Trap Door: Understanding Career Regression in Nursing, shone an uncomfortable light on the phenomenon of experienced nurses being pushed into lower-banded roles, with serious implications for patient safety and workforce sustainability. We are grateful to Professor Leary for her outstanding contribution to the evidence base over many years. We wish Alison well as she transitions from the role, and warmly welcome Dr Barbara Stilwell, who will lead the Observatory from April 2026.

Our Queen's Nurse programme went from strength to strength in 2025. We awarded the title to 510 new Queen's Nurses, bringing the total to more than 3,500. This is a community of outstanding practitioners, and it was a privilege to celebrate their achievements at two Award Ceremonies in November. The annual Queen's Nurse Conference in March attracted over 600 attendees, and our annual online conference in October drew more than 1,200 delegates over three days. This engagement reflects the enduring value nurses place in the QICN and the community of practice we nurture.

Our leadership programmes continued to develop nurses at every stage of their careers. The Leading Strategically programme, funded by the National Garden Scheme, supported twelve nurses working at executive level, while the Ambition to Lead programme, now open to Allied Health Professionals as well as nurses, completed another successful cohort. We also piloted the Evolving Leaders programme with twelve community nurses in the Isle of Man, focused on the particular challenges of leading in community settings, with encouraging results. Bespoke programmes commissioned by Leeds Community Healthcare, Sutton Health and Care, and, commencing in early 2026, Mid Yorkshire NHS Trust, speak to a growing recognition of the QICN's expertise in professional development.

Our networks and faculties have continued to develop apace. Six faculties have now launched since June 2025, providing structured homes for professional communities across fields of community nursing practice. The merger of the Community Nurse Executive Network and the Integrated Care Board Chief Nurse Network, planned for 2026, reflects a maturing of our approach to supporting senior nurse leaders. Our organisational membership scheme, introduced in 2024, now includes more than 55 organisations and provides a growing income stream that reduces dependence on any single funder.

The QICN's Support for Nurses work remains one of the most direct expressions of our charitable purpose. We paid 163 grants totalling more than £50,000 to working and retired community nurses in financial difficulty during 2025.



Above:
Steph Lawrence MBE at the launch of the Mental Health Nursing and Learning Disability Nursing Faculties.

Behind each of these grants is a person facing hardship, and the responsiveness of our grants team in providing support at moments of crisis is something of which I am enormously proud. Our Keep in Touch programme, connecting retired Queen's Nurses and socially isolated community nurses with volunteer befrienders, celebrates its tenth year in 2026 – a milestone that reflects the extraordinary dedication of Suzanne Rich and the thirty volunteers who make it possible.

None of this work would be possible without the commitment of our many partners, funders and supporters. The National Garden Scheme remains our major funder; support for our Queen's Nurse, leadership, innovation and network programmes is central to what we achieve. Hallam Medical's continued sponsorship of our senior leader networks, and the support of the Burdett Trust, the Company of Nurses Charitable Trust, Skills for Care and many others, all make a material difference to our reach and impact.

I would like to express my sincere thanks to every member of the QICN team for their hard work, creativity and professionalism throughout 2025. The team has navigated a period of significant change and challenge with admirable resilience. I am also grateful to our Council, whose skilled governance and generous voluntary commitment of time underpin everything the charity does. During 2025, Council members contributed in excess of 1,000 hours of their time, and more than 200 volunteers in total gave upwards of 3,500 hours in support of the QICN's mission. That generosity of spirit makes this organisation so special. Our new strategy will extend volunteer opportunities into Faculties and networks and we are excited about the opportunities this will provide to extend our reach and work.

Looking ahead, as we embark on the delivery of our new strategy from 2026, I am confident that the QICN is well placed to continue growing its influence, deepening its support for community nurses, and making the case - with evidence, with persistence and with passion- for the transformative power of nursing in the community.

Professor John Unsworth OBE
Chair of Council

Report of the Council 31 December 2025

The Council presents its report together with the accounts of The Queen's Institute of Community Nursing (QICN) (Formerly The Queen's Nursing Institute) for the year ended 31 December 2025.

The accounts have been prepared in accordance with the accounting policies set out on pages 47 to 52 of the attached accounts and comply with the charity's Royal Charter, applicable laws and Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102).

Objectives and activities

The Queen's Institute of Community Nursing operates in England, Wales and Northern Ireland.

The Queen's Institute of Community Nursing is an independent national charity that is dedicated to improving the nursing care of people in their communities and homes.

Our vision is that all people are provided with the best possible nursing care by the right nurse with the right skills in homes and communities, whenever and wherever it is needed.

The values provide the foundation for our work. They reflect the principles on which the QICN was first established by William Rathbone and Florence Nightingale in 1887.

Values

- Partnership: with people, patients, organisations and policy makers, ensuring individuals, families, carers and communities are at the heart of all we do.
- Integrity: living the values and seeing equality and diversity as strengths.
- Excellence: in nursing, supported by innovation and evidence.
- Independence: using evidence and insight to provide an independent voice.
- Advocacy: recognising the contribution of all community nurses.
- Legacy: cherishing the history of the QICN and our long-standing relationship with funders.



Above:
Steph Lawrence MBE, QICN Chief Executive, speaking at the House of Lords.

Public benefit

In setting and supporting the QICN's strategy and business plan, the members of Council continue to give careful consideration to the Charity Commission's general guidance on public benefit.

Strategic Plan 2021-25

The six strategic priorities were published at the start of 2021: https://www.QICN.org.uk/wp-content/uploads/2021/02/Strategic-Plan-2021-2025-1.pdf
These priorities reflect the status of the QICN as a national charity, focussed on excellent nursing care for all people in the community.

Influence

1. Policy Influence and Development: to improve the health and wellbeing of individuals, carers, families and communities by local, national and international policy, including through the use of the nurse's voice.
2. Data and Evidence: to provide independent intelligence about nursing in the community and primary care that is relevant and needed.

Quality

3. Innovation and Quality Improvement: to improve nursing practice in the community through developing, testing and evaluating innovative approaches to care.
4. Standards: to set national standards for nurse education and practice in community settings, which are recognised across the profession, educators and service providers.

Voice

5. Role models and Leaders: to develop, promote and support excellent and diverse nursing leaders and role models and to empower nurses to raise their voice and articulate their value.
6. Support for Nurses: to support the wellbeing of all community nurses, whether working or not, by listening and responding to their personal and professional needs.

Outcomes

The trustees determined that the strategic plan should include a focus on outcomes which would also guide the development of the annual business plan and measures of achievement:

Influence: The QICN is the organisation that is called upon to contribute to national policy development and implementation when shaping nursing services in the context of a wider health and social care system.

Quality: Evidence from the QICN regarding quality improvement and standards is used to inform policy, research, practice and education and is recognised at all levels in the system.

Voice: A diverse community of Queen's Nurses and others in the QICN networks successfully lead innovation and change, challenge inequalities and make a positive difference to the care of individuals, carers, families and communities.

Context

2025 was another year of change in the health service. We saw the ten year health plan; Fit for the Future published in early summer 2025 which sets out the government's health mission to build a health service fit for the future. It sets out how the government will reinvent the NHS through 3 radical shifts:

- hospital to community
- analogue to digital
- sickness to prevention

During 2025 there was also organisational change within the NHS with NHSE preparing for its transition into the Department of Health and Social Care (DHSC) and Integrated Care Boards (ICB's) being restructured.

There have also been some changes within the QICN, with the planned retirement in the summer of 2025 of the Chief Executive, Dr Crystal Oldman CBE, who has led the charity since 2012. The new Chief Executive commenced post on 1 July 2025. The organisation also reviewed its communications and policy function and as a result there were changes in the team and the QICN will welcome a new Director of Communications and Policy in April 2026 as it moves into its next phase and the delivery of its new strategy from 2026 onwards.



Above:
QICN roundtable on neighbourhood working attended by Chief Nurse for England and Sir John Oldham in 2025.

The organisation has also continued its programme of launching its new faculties and associated networks. Six faculties have now launched since the first one in June 2025.

Meanwhile, the QICN has continued to be the voice of nursing which is recognised nationally in all community settings and the leading professional organisation for all nurses working in the community. In November 2025 the Chief Executive gave evidence to a Health and Social Care Select Committee about the community nursing workforce. We have continued to provide independent data and evidence to influence national policy and also to demonstrate the impact of new policies. The QICN also provides innovative solutions to challenging issues in the delivery of nursing services in the community, promoting learning and sharing to accelerate the adoption of new ways of working to improve the care of the people served.

As the focus has continued to be on community services the QICN has once again supported a number of national workstreams as members of working groups, advisory boards and professional reference groups.

Throughout the year, the Council of the QICN has provided the skilled governance and leadership required to support the delivery of the strategic plan 2021-2025 and the annual business plan. Organisational membership which was introduced in 2024 has continued to grow and this is supporting the financial income into the organisation.

A number of workstreams within the QICN were no longer funded and council agreed that these needed to be stopped as alternative funding could not be sourced. Therefore, the Long Covid Network and the Community Nursing Research Network both ended in late 2025. Both workstreams will continue to feature in the faculty networks as appropriate.

There were no changes to the Council during 2025. The activities undertaken by the QICN throughout 2025 to achieve the objectives of the QICN strategy (2021-2025) are set out in the following section ‘Achievements and Performance’.

Achievements and performance - impact of the work in 2025

Goal One: Policy Influence and Development

Throughout 2025, the QICN contributed expert community nursing insight to more than 20 national advisory groups and round tables, including a roundtable hosted by the QICN regarding neighbourhood working attended by the Chief Nurse for England and other key personnel. Our influence can be seen in the outputs of the advisory groups and round tables but remains a challenge to quantify. The QICN worked with the Nuffield Trust during 2025 on its report District nursing: Understanding the decline and mapping the future, and were delighted to support a launch event at the House of Lords in May 2025 hosted by Baroness Watkins.

- Our unique networks of experienced nurses and our supportive partnerships with stakeholder groups enables a robust collection of intelligence and data that support and contribute to national policy development and policy influence, in alignment with our strategic goals. Our internal networks will continue to grow and develop as the faculties develop further.

- Our Queen's Nurses continue to provide reliable and expert sources of the lived experience of the impact of policies on the organisation and the delivery of nursing services. A number of Queens Nurses have represented the QICN at various events throughout the year and also continue to offer shadowing opportunities.

- The QICN contributed to All Party Parliamentary Groups wherever relevant and are working closely on developing an APPG for nursing during the latter half of 2025 which will launch in 2026.

- The QICN annual online conference was delivered in October 2025 over three days, with extremely positive feedback from the more than 1200 delegates who participated. The 2026 conference will return to an in-person event.

We are grateful to our sponsors and all the speakers who provided truly engaging sessions, enabling participants to learn and reflect on the experience of service users, new information, the latest research and best practice.

- The QICN is member of the International Council of Nurses (ICN) which provides a platform to influence policy nationally and globally in relation to the aims of the ICN – universal health coverage for all, a vision in which nurses play a critical part as the largest clinical professional in healthcare across the world:



Above:
Kendra Schneller (top right), Queen's Nurse and Elsie Wagg Scholarship winner, with the Garden to Plate project team.

https://www.icn.ch/. In June 2025, the Chair and incoming Chief Executive attended the bi-annual meeting of the ICN in Finland. This was an opportunity to attend the business meeting and then partciciapte in the conference and network with nursing colleagues from across the world.

Goal Two: Data and Evidence

The International Community Nursing Observatory

The QICN's International Community Nursing Observatory (ICNO), expertly led by Professor Alison Leary MBE, has had another very productive year. To date, the ICNO has published 12 reports since its creation in 2019.

In 2025, we published 'The Trap Door: Understanding Career Regression in Nursing', highlighting the overlooked trend of experienced nurses moving into lower-paid or less senior roles.The report explored the issue of 'downbanding' within the NHS Agenda for Change pay structure. It introduced the concept of the 'trap door', where skilled professionals are not only prevented from progressing but are actively pulled back into lower pay bands. The QICN Chief Executive said these findings are very worrying with over 80% of respondents having experienced career regression, and the majority being very experienced clinicians- the expertise of these nurses is critical to safe delivery of care. The reasons given are very concerning – the harms to patients due to lack of capacity and the stress and burnout for staff involved. We have to ensure a more flexible approach if we are to retain a skilled and competent nursing workforce.

Another report worked on during 2025 will be published in early 2026; Building the future of UK primary care: expanding roles of general practice nurses and patient perspectives, has examined the work of General Practice Nurses and the impact on patient care. This report will be used as the basis for a discussion about the future of General Practice Nursing at a Round Table to be held at the QICN offices in May 2026.

The ICNO's Director, Professor Alison Leary MBE, announced her intention to step down in March 2026, citing a desire to create an opportunity for new

leadership as she transitions toward the end of her professional career. It has been announced that Dr Barbara Stilwell will replace her from April 2026, ensuring that this crucial aspect of QICN work continues.

The findings and recommendations of all our publications are shared in all our networks, at conferences and events and with Directors of Nursing in community providers and senior leaders in the NHS. The QICN will continue to utilise our unique data and insights to influence policy in this way.

Goal Three: Innovation and Quality Improvement

✚ Community Nurse Innovation Programme (CNIP)

Nurse-led projects are one of the most direct ways in which we help nurses improve patient care. Since 1990 the QICN has funded around 400 innovative projects across the whole range of community nursing specialisms in England, Wales and Northern Ireland. Sharing the results of these projects helps us to drive improvements in knowledge and practice. Often, these funded projects become part of mainstream services.

Five Elsie Wagg scholarship projects funded by the National Garden Scheme were completed in June 2025. This brings the total of Elsie Wagg projects to 20. Dr Richard Claxton, Chief Executive, the National Garden Scheme said of these we are immensely proud to support this unique scholarship programme which helps to promote the health benefits of gardening and garden visiting to a wide cross section of the community and health care settings. This most recent report once again highlights the importance of gardens to health and wellbeing for people of all ages especially those in care homes and nursing homes. It also highlights the ingenuity and commitment of Queen's Nurses and, as we head towards the National Garden Scheme's centenary in 2027, reaffirms the joint legacy between us and ourfounder, the Queen's Institute of Community Nursing.

The QICN published the 2024/2025 report of the NGS Elsie Wagg (Innovation) Scholarships showcasing five innovative projects led by community nurses. Each project demonstrated the power of gardening to improve health and wellbeing.

Five nurse-led projects in the community were funded by the Burdett Trust for Nursing focusing on Diabetes. Their final report will be available shortly.



Above:
Professor Michelle Bateman giving new Queen's Nurse Karilagan Lagutin Cobley her Queen's Nurse certificate and badge at the QICN Awards Ceremony in November 2025

Goal Four: **Standards**

The QICN is recognised in the UK for its significant expertise in post-registration community nurse education. The nurses in the QICN team have considerable experience of working in a senior level in higher education, leading and managing programmes, and in senior practice development roles in community and primary care settings.

This level of experience and capability within a professional organisation provides a strong foundation for the development of QICN standards for education and practice.

✚ QICN Standards of Education and Practice to support Specialist Practitioner Qualifications

The QICN endorsement process for universities now has 14 universities using the QICN standards and being endorsed by the QICN, many of these have more than one SPQ programme running.

We have new universities signing up during 2026 and we will see the first SPQ programmes for Adult Social Care Nursing and Community Learning Disability Nursing commencing.

✚ Association of Academic General Practice Nurse Educators (AAGPNE)

The Association of Academic General Practice Nurse Educators (AAGPNE) is now in its fifth year and is co-chaired by the QICN lead for Primary Care Nursing. It is recognised as the national body for General Practice Nurse educational expertise, with 75 Members and 45 Associate members from across the UK.

✚ Bournemouth University: Support for GPN programmes

The QICN has continued to support Bournemouth University's General Practice Nurse (GPN) Fellowship programme and the programme for GPNs new to General Practice. Over the last six years hundreds of GPN students have been supported virtually by the Assistant Director of Nursing Programmes, providing the QICN with an excellent insight into the experiences of nurses new to General Practice in the South West region, which then informs our standards and policy influencing work.

With the decreasing national funding for General Practice Nurse programmes in England, the numbers at Bournemouth University are likely to diminish in future years, but currently the contract for the support has continued for the 2025/26 academic year but on reduced hours and will end in 2026.

Goal Five: **Role models and Leaders**

✚ Queen's Nurses

The QICN benefited from a substantial grant from the National Garden Scheme (NGS) to continue the work of the QICN in developing and supporting an increased number of Queen's Nurses (QN) in 2025.

The applications resulted in 510 new Queen's Nurses being awarded the title, bringing the total to just over 3500. The two annual QICN Award Ceremonies took place in November 2025, with one ceremony in the morning and another in the early evening.

The annual Queen's Nurse conference took place in March 2025 and was attended by over 600 Queens Nurses. There were a wide range of speakers and the day was very well evaluated.

Regional QN meetings have continued with many now meeting in person again. The QICN team support and attend one meeting per region each year.

The QICN continued to support Queen's Nurses to make a significant contribution to national work in England, including involvement in national consultations, round tables and advisory groups. They continue to be frequently called upon for nursing policy advice, with the QICN directing national policy leads to specific Queen's Nurses with the expertise being sought.

Recognition of the work of Queen's Nurses was also seen in the national honours awarded in the summer of 2025 and the new year (2026) to a number of Queen's Nurses and QICN Fellows.

✚ Leading Strategically

The QICN is very grateful to the NGS for continuing to support Queen's Nurse leaders who are working at an executive level.

In 2025, 12 nurses were funded by the National Garden Scheme on the Leading Strategically programme with two more nurses receiving external funding. Feedback from one of the participants was "The programme itself remains



Above:
The QICN's 2025 Ambition to Lead cohort

one of the most valuable experiences of my career to date. The insight I gained about myself during that time has undoubtedly been a catalyst for the growth I have experienced over the past six months. I have also been incredibly fortunate to build lifelong friendships and develop a network of expertise and support-having that knowledge just a WhatsApp message away truly feels like having a quiet army behind me."

Recruitment to a new cohort for this programme happened in November 2025 and the new cohort commenced in January 2026.

Ambition to Lead Programme

This successful, well established programme provides an opportunity for community nurses and Allied Health Professionals in a wide variety of roles and fields of practice to participate in the yearlong programme with employer, grant or self-funded places.

'Ambition to Lead' and is designed to support the professional development of nurses (not only Queen's Nurses and in 2024 we widened the entry to Allied Health Professionals) working in the community to enhance their leadership skills in integrated contexts to the benefit of the people, families, and communities they serve.

In 2025, 15 delegates completed the Ambition to Lead programme. A further cohort commenced during 2025 and will continue into 2026.

Evolving Leaders Programme

In 2025, 12 community nurses from the Isle of Man piloted 'The Evolving Leaders' programme, participating in six online and one face-to-face session focused on the specific challenges of community leadership.

The 'Evolving Leaders' programme aims to strengthen negotiation and influence skills while building the professional confidence and capability required for leaders to maximize their impact within their roles. Evaluation of the pilot will inform the programme being offered more widely to community nurses and AHPS in 2026/7.

Bespoke Professional Development Programmes

In 2025, the QICN was commissioned by Leeds Community Healthcare NHS Trust to deliver two further bespoke professional development programme for community staff nurses and Allied Health Professionals in Leeds.

Two bespoke professional development programme for nurses and AHPs was also commissioned for staff at Sutton Health and Care NHS Trust during2025.

Mid Yorkshire NHS Trust approached the QICN during 2025 about a bespoke programme and delivery of the first programme commenced in January 2026.

The QICN's developing reputation for excellence in bespoke programme delivery is predicated on the talents of the nursing delivery team, all of whom have teaching qualifications or experience in the design and delivery of education programmes, and the highly skilled coordinators who provide all the professional support needed to create a seamless application, recruitment and delivery service.

Community Nurse Executive Network - CNEN

The QICN is extremely grateful to Hallam Medical for their continued annual grant to support the Community Nurse Executive Network (CNEN). The network provides a safe space for executive level nurses in community provider organisations, large care home and hospice providers, to come together to share challenges and solutions and to be updated from senior leaders in the NHS and social care, across England, Wales and Northern Ireland.

Launched in 2016, CNEN is now in its tenth year of supporting executive nurse leaders. It is established in the sector as a valuable network for sharing best practice, challenges and solutions, while supporting leadership and management practice in community services amongst peers. Application for membership is now typically by word-of-mouth referrals.

The CNEN membership has remained stable throughout 2025, at 229 members. Meetings were held monthly throughout 2025 and were chaired by CNEN members: Chair, Helen Mehra, QN, QICN Fellow, QICN Trustee and Vice Chair, Gabbie Parham, QN.

During late 2025 discussions were held about combining this network with the ICB Chief Nurse Network and occured in May 2026.



Above:
Steph Lawrence MBE at the launch of the Adult Social Care Faculty in 2025.

Integrated Care Board Chief Nurse Network (ICBCNN)

The QICN is delighted that Hallam Medical extended their support of the QICN senior leaders networks with a grant for the Integrated Care Board Chief Nurse Network which commenced in March 2023 and continued throughout early 2025. However, following discussion it was agreed that attendance was sporadic and not consistent and discussions were held about a different approach. It was agreed that this network would merge with the CNEN in 2026.

The QICN had an exhibition space at NHS Expo in June 2025 in Manchester, giving the ICBCNN and CNEN members the opportunity to meet face-to-face with the QICN team and Hallam Medical Chief Nurse. This was not felt to have been as beneficial as in past years with not as many nurses being present and in 2026 the QICN will return to RCN congress instead.

Podcast Series

As part of the conversations about the CNEN and ICB Chief Nurse Network it was agreed that the QICN would develop a series of podcasts. The first one with the QICN Chief Executive was recorded in December 2025 and this initiative is led by Lou Patten Strategic Adviser to the QICN. This podcast aired in January 2026 and was followed by a second podcast soon after. Further podcasts are planned during 2026 and we are delighted that Samantha Jones Permanent Secretary in the DHSC and former nurse will be interviewed in 2026.

Adult Social Care Nursing Network

The QICN is very grateful for the support of the Adult Social Care Nursing Network by Skills For Care throughout 2025.

The Adult Social Care Nursing Faculty was launched in July 2025. It is a platform to share leadership, research, and innovation across the Adult Social Care Nursing sector. Previously there were two networks relating to adult social care: The Care Home Nurses Network, and the IPC Network; these have now merged into the Adult Social Care Nursing Network and continues to be funded by Skills for Care.

The Adult Social Care Nursing Network is free and is open to all adult social care nurses working across the UK. It provides the following:

- Hosts quarterly virtual events that focus on matters relating to the adult social care sector.
- Disseminates regular communications via a newsletter.
- Enables the dissemination of best practice across the adult social care sector and encourage sharing of best practice through the webinars and the closed Facebook Forum.
- Encourages the network members to participate in policy and research.

Homeless and Inclusion Health Programme

The QICN's Homeless and Inclusion Health Programme has continued with regular network meetings and the development of resources, supporting nurses working with people experiencing homelessness, refugees and asylum seekers, those who are vulnerably housed, sex workers, Gypsy, Traveller, Roma, Boater and Showmen.

'Transition to Inclusion Health Nursing' was revised and published in 2025. The Homeless and Health Inclusion Network now has over 2,700 members. Health Inequity was confirmed to be an issue across all fields of health and social care, and varied specialists gave webinars including dentists, youth charities, and palliative care amongst others.

Themes of innovation, challenging norms, advocating and persistence underline a lot of the work done in this area. Whether it was hearing about a multi-disciplinary mental health service in Manchester, a one-of-a-kind care home for palliative care patients with addictions, or a new remote service improving access to blood pressure management.

Beyond regular meetings and a monthly newsletter, the network raises awareness of roles in the field through interview articles offering ideas and inspiration. The QICN's Network Lead also presented at two RCN conferences and the BJN's first conference this year, promoting awareness of health inequity and the impact nurses can have.

Community Children's Nurse (CCN) Network

The QICN Community Children's Nurse Network continues to develop and now has over 600 members from across the UK.

The network is nationally recognised for this small but critically important specialist field of community nursing practice, focussed on babies, children,



Above:
Homeless and Inclusion Health Nurse Simon Ashley Ward with a client.

young people and families in the community. The group is a source of expert advice for policy makers and those nurses working at a strategic level to scope the future of community nursing services.

The Network lead presented at many meetings, roundtables and conferences, such as NHS England 2nd CYP Student Nurse conference; Celebrating CYP conference at Northumbria University; UKFHD Specialist Nurse Conference 2025; and many more.

The QICN is grateful to the National Garden Scheme for awarding a grant for the second year to support the Community Children's Nurse Network, enabling the network and its associated programme to continue to thrive and develop in 2025.

General Practice Nurse Network

The network holds regular webinars and members receive a regular e-newsletter. It is open to all General Practice Nurses (GPNs) in England, Wales and Northern Ireland. The network membership has grown to over 1500 GPNs.

The aim of the network is to provide GPNs with the opportunity:

- to be part of a national network for experienced and nurses new to general practice nursing
- to network and share best practice with GPN contemporaries
- to articulate the value of GPNs as autonomous practitioners within the primary care team
- to discuss innovative approaches to improving and articulating best practice for patients

The QICN is deeply grateful to the National Garden Scheme for the ongoing support of this network for a second year in 2025.

Organisational Membership

The QICN launched its organisational membership scheme for providers of community nursing services in March 2024, following a period of several months of engagement with executive community nurses.

The new membership scheme is open to all providers of community services. The membership scheme offers a huge range of benefits to organisations and their nursing and AHP staff, including CPD webinars, career development sessions for 'Rising Stars', access for all staff to the QICN annual online conference and a political influencing session for senior staff to gain a deeper understanding of how local health services are affected by political decision making at a national level.

The membership numbers have grown throughout 2025 and now stands at over 55, with a mix of community services which are stand alone or integrated (Mental health and community services and hospital and community services), primary care organisations, care homes and independent health care providers providing a sustainable income stream and a closer working relationship with community services who are members of the QICN.

Education Prizes

Philip Goodeve-Docker Memorial Prize

The Philip Goodeve-Docker Memorial Prize was established in memory of a young man who in 2013 embarked on a fundraising challenge to cross Greenland to raise money for the QICN. His grandfather had been a QICN Council member and Treasurer for over 25 years. Tragically Philip lost is life in the endeavour, but his family and friends raised over £60,000 for the QICN in his memory. The memorial prize is awarded for outstanding achievement in the District Nursing SPQ at every university in England, Wales and Northern Ireland where the programme is offered. Many prize winners have subsequently become Queen's Nurses or have continued their affiliation with the charity in other ways.

Dora Roylance Memorial Prize

The QICN received a legacy of £21,792 from a retired QN who died in 2015. The specification was that it was to be used for the support of Health Visitor education. A Dora Roylance Memorial Prize has been created which is similar to the Philip Goodeve-Docker Memorial Prize; it is for the most outstanding achievement for every student Health Visitor in every university offering the Health Visitor programme in England, Wales and Northern Ireland. Taking into consideration the number of universities offering the Health Visitor programme and the total of the fund, the award of prizes is likely to last approximately 14 years.

Ellen Mary Memorial Prize

The Ellen Mary Fund was established in 2019 from a legacy received from the family of a Queen's Nurse, whose mother, Ellen Mary left a legacy of £5,000 to support an annual prize for General Practice Nurse (GPN) students undertaking



Above:
Carolyn Bell, Director of Patient Services at Prospect Hospice receiving her certificate from Lucy Rathbone at the QICN's William Rathbone X Annual Award in 2025.

their NMC approved GPN specialist practice qualification. The memorial prize is awarded for outstanding achievement in the General Practice Nursing SPQ at every university in England, Wales and Northern Ireland where the programme is offered.

The Dame Elizabeth Fradd Memorial Prize

The Dame Elizabeth Fradd Prize was established and awarded for the first time in 2024. Dame Elizabeth had been a strong supporter of the QICN, having been a Trustee and a Fellow. In her career, she supported the establishment of Community Children's Nursing (CCN) as a specialist field of practice which was then approved as a recordable qualification by the Nursing and Midwifery Council. Sadly, Dame Elizabeth Fradd sadly died on 12th May 2024 on her 75th birthday. The memorial prize is awarded for outstanding achievement in the Community Children's Nursing SPQ at every university in England, Wales and Northern Ireland where the programme is offered.

William Rathbone X Annual Award

In 2023, the William Rathbone X Award was established, in memory of William Rathbone X who was a trustee of the QICN for 48 years and who sadly died on 31.12.22. As the great-great-grandson of the founder of the QICN, William (Bill) Rathbone X made a significant and enduring impact on the work of the QICN and his legacy can be seen in the work delivered by the QICN today. The Award is sponsored by Bill Rathbone's daughter Lucy Addyman and son-in-law Nick Addyman, a patron appointed QICN Trustee.

The Award is for the most outstanding Executive Nurse of a community services provider and nominations are judged by a panel of experts. In 2025, the award was given to Carolyn Bell, Director of Patient Services at Prospect Hospice. The ceremony took place in London in May 2025 and was attended by trustees, Fellows, key stakeholders, nominees and Queen's Nurses. The Award followed the Annual William Rathbone X lecture, given by Professor Olga Yakusheva entitled, 'A Human Capital Approach to Nursing Value and Payment'.

Goal Six: Support for Nurses

Financial hardship grants

We paid a total of 163 grants in 2025, to working and retired community nurses this was over £50,000 from our Support for Nurses fund. We awarded over £26,000 in single grants to community nurses in 2025. There were 55 community nurses who received a single grant from us, many of them facing challenging and difficult periods in their lives

We sent Sainsburys vouchers to 10 Nurses to help them to buy essential food items for their families.

We were able to offer further financial support to some that are still affected financially from Covid, the impact now is for those that have had to reduce working hours as they are still suffering with physical symptoms.

Grant applications reduced again in 2025, with a total of 163 awarded in the year in comparison to 233 in 2024. This is a pattern experienced by other charities that award financial assistance to nurses.

The difference that the QICN funding makes to the nurses who are experiencing often extremely complex and challenging situations in their lives is significant. The process is responsive and person-centred, and recipients often report directly to the Grants Manager that the QICN funding provided a critical financial lifeline at a time of crisis.
The QICN was delighted in 2025 to continue working with the Company of Nurses Charitable Trust in administering their financial hardship fund for community nurses, to the value of £10,000 annually. The agreement to support their hardship fund commenced in 2019 and over the years, this work has enabled even more nurses to be supported.

The QICN also administers the Hertfordshire Community Nurses' Charity Welfare Grant applications, making recommendations for the grants to be awarded to community nurses in Hertfordshire, as appropriate.

Education grants

Since 2019 the QICN has been supported by the Company of Nurses Charitable Trust to administer their education grant specifically for nurses working with people experiencing homelessness, from the Chantry Robinson Fund: Donations and Funds .

The Company of Nurses

The Company of Nurses also awarded the QICN grant funding to match fund one participant on the Ambition to Lead programme.



Above:
The KIT volunteer's annual meeting in 2025.

'Keep in Touch' programme

The 'Keep in Touch' programme provides an opportunity for retired Queen's Nurses and other socially isolated community nurses, to be supported by a volunteer Queen's Nurse via the telephone. The initiative was originally funded by a legacy from a retired Queen's Nurse and 2025 was the ninth year of a very successful service.

The QICN's Keep In Touch (KIT) programme is a practical way in which we aim to strengthen the Queen's Nurse community, maintaining contact with our Queen's Nurses, past and present. The KIT programme provides volunteers with opportunities to speak to retired Queen's or community nurses regularly on the phone, to talk about life experiences, aspects of nursing current and historic, memories and future plans. Volunteers call their contact regularly – usually once a week, or in some cases once a fortnight or monthly. Led by Suzanne Rich, KIT's Programme Manager, 2026 will celebrate 10 years of the programme.

The KIT Team of 30 dedicated Volunteers currently supports 30 contacts, with 18 other contacts receiving regular calls from the QICN. KIT sends flowers for special birthdays (80 or 90 or 90+). KIT Volunteer meetings occur twice a year, one face-to-face and one online, where Volunteers share their experiences and any issues/concerns.

TalkToUs

In 2025, the number of calls diminished significantly, with the majority unrelated to the impact of Covid-19. The original purpose of the grant was to support nurses impacted by the pandemic and it is considered that many employers provide a range of support services for employees, which has decreased the demand for the QICN Talk To Us service.

With agreement from the QICN Council, the Chief Executive has proposed to the RCN Foundation that their grant is repurposed to support the Keep in Touch programme and this was agreed in the summer of 2025.

Organisational development

The role and contribution of volunteers

The QICN is very grateful to the large number of volunteers who support a range of areas of work within the charity. The QICN would like to thank most sincerely all our volunteers for their significant contribution to the work of the charity throughout 2025.

QICN volunteers include all members of Council, project advisory groups, standards reference group members, QN application assessors, members of panels who review awards and grant applications, befrienders supporting the 'Keep in Touch' programme, and those who support policy consultation work.

In 2025 Queen's Nurses continued to contribute significantly to the policy work of the QICN as volunteers, attending QICN focus groups, Department of Health and Social Care advisory groups and round table discussions for national work and with arm's length bodies, on behalf of the QICN.

Fellows of the QICN continued to contribute to and support the work of the QICN in 2025, providing ongoing mentorship during and after the Ambition to Lead and Leading Strategically programmes. Several have provided personal advice and support to the Chief Executive.

Council members collectively gave more than 1,000 hours of their time attending meetings, chairing advisory groups and participating in QICN events, including the annual conference and the annual award ceremony.

During 2025, it is estimated that more than 200 individuals made contributions to the work of the QICN, totalling in excess of 3,500 hours of voluntary work. The QICN is deeply grateful and indebted to all its volunteers.

Key financial policies of the QICN

Community Nursing Innovation Programme – direct funding of projects

The QICN makes awards to support individual projects run by community nurses. The projects are selected on a competitive basis; those selected demonstrate the greatest innovation and potential impact on the care of individuals, families, carers and communities. The projects run for 12 months and the scheme offers a professional development programme for the project leaders in addition to the grant, to enable project delivery. The opportunity is often dependent on funding being received to support the programme and when available, details of the programme and the application process are set out on the QICN website, including opportunities for self and employer funding.



Above:
Participants from the Elsie Wagg project, 'The Circle Garden Haven' in Sutton.

Grants

The QICN provides financial assistance to nurses who have worked or who are currently working in the community or primary care environment and to retired Queen's Nurses (nurses working in the community who were trained by the QICN between 1887 and 1967).

The majority of the beneficiaries are nurses who are no longer able to work because of illness, age or disability. Applications are accepted from nurses, their friends, family or professionals and voluntary organisations supporting them (with the applicant's consent). An application form detailing eligibility, health and housing status, income, savings and expenditure must be completed, together with a description of what level of financial assistance is being sought. This information is checked by staff before being presented to the grants advisors for consideration. Information on other relevant charities that may be able to assist in their case is also supplied to successful and unsuccessful applicants.

The QICN will consider all types of applications for single grants. In a diminishing number of cases, assistance is provided in the form of regular grants and on-going gifts from year to year. The gifts are dependent on the availability of funds and are not regarded as a regular commitment.

Investment policy

In keeping with charity law, the QICN's investment strategy aims to maximise income and capital, within acceptable levels of risk.

The QICN's investments are managed by Rathbone Investment Management Limited, which operates within guidelines set by the Council and the fund manager meets with the Finance Committee at least twice a year.

Currently, the only ethical constraint is that the fund should not invest in any companies which derive a significant part of their revenue directly from the manufacture or sale of tobacco-related products.

In April 2023, following a procurement process, the QICN commissioned Asset Risk Consultants (ARC) to undertake a review of our investments with Rathbone and following consultation with trustees, to draft a revised investment policy. This work was overseen by the Honorary Treasurer and the Head of Finance and was completed in the summer of 2024. It was determined that Rathbones will continue to be the investment managers of the QICN portfolio. In September 2024, the revised investment policy was discussed with Rathbones and the trustees of the Finance Committee.

The final copy was agreed by Council in September 2024 and the changes implemented in January 2025, with an agreed regular income to be received throughout the year from the portfolio and the total return on investments. The revised investment policy was also informed by the work undertaken on reviewing the QICN trustees' approach and conclusions reached when considering the Environmental, Social, and Governance (ESG) factors in measuring the sustainability and societal impact of an investment in a company or business.

The QICN investments are reviewed monthly (or more frequently, depending on the market conditions) by the Head of Finance and the Honorary Treasurer. In 2024, the performance of the investments was considered to be satisfactory both in terms of capital and investment. Since the US President Trump's 'Liberation Day' tariffs were announced, in April 2025, the financial markets across the world have been impacted negatively. This will be monitored closely by Rathbones whose investment manager has kept the QICN informed of the impact on our now reduced portfolio value.

Members of Council have carried out their annual assessment of the level of the QICN's reserves, taking into consideration the QICN's working capital requirements and liquidity needs, the future expansion of its work, and a contingency provision. They are also mindful of the QICN's responsibility to honour the investment made by partners and scholars and participants in schemes and other professional development initiatives that extend for more than one year.

In 2015, it was agreed that the recommendations made by the Finance Committee, and agreed by Council, regarding the reserves policy and the use of expendable endowment should be 'codified' in a financial strategy to align with



Above:
Advanced Practitioner Lead and Queen's Nurse, Kirsty Balfour, with clients.

the QICN strategy (2017-2020).

It was agreed by Council in 2021 that the principles upon which the financial strategy was based continue to be relevant to the delivery of the new QICN strategy 2021-25:

1. The expendable endowment fund should be preserved at a level which ensures the generation of income sufficient to cover a level of core costs, such as the lease and service charge costs, and so enable the long-term viability of the QICN.
2. The level at which the expendable endowment is to be preserved over and above the level required in 1 above will be determined by Council year on year. (See also note 21 for further details).
3. The expenditure of the restricted District Nurses 1965 Fund (welfare) will be reviewed annually in the context of the distribution of financial assistance currently being greater than the annual investment income.
4. Council will determine each year the levels of expendable endowment fund needing to be transferred to general funds, if any, to be used to support QICN activity.

Financial review

The financial year resulted in net expenditure (before investment gains) of £763,893 (2024 – £314,239). This comprised of net expenditure on unrestricted funds of £617,910 (2024 – (net expenditure of £160,570), net expenditure on restricted funds of £145,983 (2024 – net expenditure of £153,669) and net income on endowment funds of £nil (2024- £nil).

Income

Income for the year totalled £1,285,608 (2024 – £1,517,769), 15% lower than 2024. Income from donations and legacies was £316,541 (2024 – £352,675) a decrease of 10%, and income from charitable activities was £747,990 (2024 – £872,878), a decrease of 14%. Investment income and interest receivable was £221,077 (2024 – £292,216) for the year and this continues to provide an essential element of the QICN's core funding.

Expenditure

Expenditure for 2025 totalled £2,049,501 (2024 – £1,832,008), an increase of 12% on 2024.

This expenditure represents significant investment the QICN is currently making in organisational development, an increase in Queen's Nurse numbers and the growth of faculties and networks.

Investments

The QICN's portfolio of investments and cash held for investment had a market value at 31 December 2025 of £11,535,649 (2024- £11,466,882). Income from the portfolio for the year was £218,039 (2024 – £289,030), and net investment gains on the revaluation and disposal of investments were £828,837 (2024 – £721,343).

Reserves: At the year-end, the charity held 'free reserves' of £472,961. These free reserves are sufficient to meet six months of committed unrestricted expenditure required by the QICN's reserves policy. The Council is content with this position and considers that it provides flexibility given the organisational development and the wider investment being made by the QICN.

Fundraising

The QICN does not employ a professional fundraiser. Bids or project grants are developed and submitted by the Chief Executive with support from key members of the team including the Deputy Chief Executive, Director of Finance and the Director of Nursing Programmes.

Sponsorship opportunities for QICN activities are explored as appropriate



Above:
Staff and Trustees at the launch of the Dame Elizabeth Anionwu Boardroom in 2025

and Hallam Medical continues as a regular sponsor of the Community Nurse Executive Network (CNEN) and the Integrated Care Board Chief Nurse Network.

In 2025, the annual online conference was sponsored by Hallam Medical and RL Datix.
The QICN does not seek to raise funds from the public. A number of Queen's Nurses provide regular donations to the QICN, as do some members of Council. Queen's Nurses are also encouraged to raise retailer donations through the use of software platforms such a 'EasyFundraising'.

The QICN has received no complaints about this or any other approach to fundraising.

During 2025 legacy fundraising commenced with 'Farewill': https://farewill.com/

Structure, governance and management

Governing document

The QICN is registered as a charity under the Charities Act 2011 and operates in England, Wales and Northern Ireland. It was founded in 1887 and was granted its Royal Charter in 1889. Supplemental Charters have been granted in 1904, 1928, 1958, 1973, 2008 and 2024. Under the Charters, the members of Council (i.e. the trustees) are incorporated as a body.

The latest Supplemental Charter related to the change of name from the Queen's Nursing Institute to the Queen's Institute of Community Nursing, granted through Privy Council in November 2024.

Council members

There are 15 members of Council, some with clinical backgrounds and others with expertise in communications, law, business, finance and the management of charities.

There were no changes to Council during 2025.

Recruitment and appointment of Council members
Under the constitution of the QICN, the Patron may nominate and appoint up to four people who act as ex-officio members of the Council. All other members of Council are nominated by existing Council members or recruited through agreed procedures before being approved by the Patron.

The QICN Chair undertakes 1:1 interviews with each of the members of Council and discusses their individual contribution to Council and any feedback they have on the development and the governance of the QICN. This is also an opportunity to review gaps in the skills and expertise of Council in relation to the changing context of community nursing and the wider health and social care context.

Induction and training of Council members
All new Council members are supplied with the Council members' handbook as well as relevant papers, policies and publications from the QICN.
New members of Council are invited to meet the Chair and Chief Executive for a 1:1 induction soon after appointment. The new Trustees are also invited to meet with key QICN staff informally. A few months after their appointment, the Chair meets with them again to seek their views on the QICN in general and Council in particular. New members of Council are also encouraged to visit the QICN's offices, as appropriate, to meet individual staff members and find out more about specific areas of work.
Members of Council do not receive remuneration in respect to their services to the QICN. They are provided with the opportunity to apply for reimbursement for travel expenses when attending Trustee meetings.

Staffing of the QICN and key management personnel
The key management personnel of the QICN, responsible for directing and controlling, running and operating the charity on a day-to-day basis, comprise members of Council together with the six members of the Senior Leadership Team of the QICN: the Chief Executive, Deputy Chief Executive/Director of Nursing, Director of Nursing Programmes (Innovation and Policy), Director of Finance, Head of Commercial Operations and Head of Communications (until December 2025,this post will become the Director of Communications and Policy in April 2026).

The Chief Executive has overall responsibility for day-to-day leadership and operational matters, and reports to Council on a regular basis.

All staff have six monthly performance appraisals against objectives linked to the business plan for the year. The QICN Staff Handbook provides information



Above:
Professor John Unsworth OBE, Chair of QICN Council, being awarded the Gold Badge at the Awards Ceremony in December 2025

on internal policies and ways of working to all staff. The Handbook was reviewed and updated in 2025.

When advertised, the salaries of all staff, including key management posts, are determined by the scope of responsibilities of the various levels of post, such as events coordinator, events manager and the leadership team. The Chief Executive salary is determined by the Chair of Trustees and the Chair of Finance Committee.

Risk management

Major risks to which the QICN is exposed, arising from its own work and from external contingencies, are reviewed regularly by the Finance Committee and Council, and systems or procedures are in place to manage, and where possible mitigate, those risks.

The QICN's risk register is maintained by the Chief Executive and is reviewed by Council at every meeting. In 2021, the QICN introduced the concept of risk tolerance, and the following examples are those which are still considered major risks, with controls in place.

People

Risk: There is a risk that the organisation could lose staff through sickness or resignation or that too much work was taken on without the staff required to deliver it that may mean the work that is required cannot be delivered in a timely way.

Controls: Incoming volumes of work are monitored closely and if required additional resource is acquired through a temporary route initially or staff re-directed to pick up more urgent work initially. Job descriptions are reviewed and the appropriate notice period to safeguard against this risk for senior posts particularly are in place. Efficient and effective recruitment processes are in place for if a staff member leaves.

Business Continuity

Risk: There is a risk that business is disrupted for a number of reasons, that

could include loss of office space, a national disaster e.g. pandemic or as a result of terrorist activity.

Controls: The organisation has an effective Business Continuity policy in place which is reviewed at least annually. The organisation has the ability and technology available to work from home for an extended period if required.

Financial

Risk: There is a risk that the organisation does not attract enough investment to ensure its viability and this could include via its grant giving function or its delivery function. This could lead to loss of reputation and the potential to lose staff through redundancy.

Controls: There are plans in place to promote the grant giving function and increase fundraising via the organisational strategy. There are plans in place to retain and continue to grow work such as organisational membership. The relationship with the NGS remains strong and a good connection has been made with their new CEO. In addition, there is new work being established to find new partners to work with around sponsorship of programmes and events.

The Council's responsibilities statement

The Council (who are the Board of trustees of the charity for the purposes of charity law) is responsible for preparing the Report of the Council and accounts in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice)

Charity law and the QICN's Royal Charter require the Council to prepare the accounts of the QICN for each financial year which give a true and fair view of the state of affairs of the QICN and of its income and expenditure for that period.

In preparing accounts giving a true and fair view, the Council should:

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles in the Accounting and Reporting by Charities:
- Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS102);
- make judgements and estimates that are reasonable and prudent;
- state whether applicable United Kingdom Accounting Standards have been followed, subject to any material departures disclosed and explained in the accounts; and



Above:
Guests at the Annual Awards Ceremony in 2025

- prepare the accounts on the going concern basis unless it is inappropriate to presume that the QICN will continue in operation.

The members of the Council are responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the charity and to enable them to ensure that the financial statements comply with the Charities Act 2011, applicable Charity (Accounts and Reports) Regulations and the provisions of the charity's governing document. They are also responsible for safeguarding the assets of the charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

Signed on behalf of the Council

Professor John Unsworth OBE
Chair of Council
Date: 24th June 2026

Independent auditor's report to the members of the Council of The Queen's Institute of Community Nursing

Opinion

We have audited the financial statements of The Queen's Institute of Community Nursing (the 'charity') for the year ended 31 December 2025 which comprise the statement of financial activities, balance sheet, statement of cash flows and notes to the financial statements, including significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including FRS 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 charity's affairs as at 31 December 2025 and of its incoming resources and application of resources, for the year then ended
- Have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice
- Have been prepared in accordance with the requirements of the Charities Act 2011

Basis for opinion

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

Conclusions relating to going concern

In auditing the financial statements, we have concluded that the trustees' use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on The Queen's Institute of Community Nursing's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.



Above:
QICN Staff and Partners at the ICCHNR Conference in April 2025.

Our responsibilities and the responsibilities of the trustees with respect to going concern are described in the relevant sections of this report.

Other Information

The other information comprises the information included in the trustees' annual report, other than the financial statements and our auditor's report thereon. The trustees are responsible for the other information contained within the annual report. 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. 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 course of 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 this gives rise to a material misstatement in the financial statements themselves. 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.

Matters on which we are required to report by exception

We have nothing to report in respect of the following matters in relation to which the Charities (Accounts and Reports) Regulations 2008 requires us to report to you if, in our opinion:

- The information given in the trustees' annual report is inconsistent in any material respect with the financial statements;
- Sufficient accounting records have not been kept; or
- The financial statements are not in agreement with the accounting records and returns; or
- We have not received all the information and explanations we require for our audit

Responsibilities of trustees

As explained more fully in the statement of trustees' responsibilities set out in the trustees' annual report, the trustees are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

Auditor's responsibilities for the audit of the financial statements

We have been appointed as auditor under section 144 of the Charities Act 2011 and report in accordance with regulations made under section 154 of that Act. 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.

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud are set out below.

Capability of the audit in detecting irregularities

In identifying and assessing risks of material misstatement in respect of irregularities, including fraud and non-compliance with laws and regulations, our procedures included the following:

- We enquired of management, which included obtaining and reviewing supporting documentation, concerning the charity's policies and procedures relating to:
- Identifying, evaluating, and complying with laws and regulations and whether they were aware of any instances of non-compliance;



Above:
CNIP workshop in 2025.

- Detecting and responding to the risks of fraud and whether they have knowledge of any actual, suspected, or alleged fraud;
- The internal controls established to mitigate risks related to fraud or non-compliance with laws and regulations.
- We inspected the minutes of meetings of those charged with governance.
- We obtained an understanding of the legal and regulatory framework that the charity operates in, focusing on those laws and regulations that had a material effect on the financial statements or that had a fundamental effect on the operations of the charity from our professional and sector experience.
- We communicated applicable laws and regulations throughout the audit team and remained alert to any indications of non-compliance throughout the audit.
- We reviewed any reports made to regulators.
- We reviewed the financial statement disclosures and tested these to supporting documentation to assess compliance with applicable laws and regulations.
- We performed analytical procedures to identify any unusual or unexpected relationships that may indicate risks of material misstatement due to fraud.
- In addressing the risk of fraud through management override of controls, we tested the appropriateness of journal entries and other adjustments, assessed whether the judgements made in making accounting estimates are indicative of a potential bias and tested significant transactions that are unusual or those outside the normal course of business.

Because of the inherent limitations of an audit, there is a risk that we will not detect all irregularities, including those leading to a material misstatement in the financial statements or non-compliance with regulation. This risk increases the more that compliance with a law or regulation is removed from the events and transactions reflected in the financial statements, as we will be less likely to become aware of instances of non-compliance. The risk is also greater regarding irregularities occurring due to fraud rather than error, as fraud involves intentional concealment, forgery, collusion, omission or misrepresentation. A further description of our responsibilities

is available on the Financial Reporting Council's website at: www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditor's report.

Use of our report

This report is made solely to the charity's trustees as a body, in accordance with section 144 of the Charities Act 2011 and regulations made under section 154 of that Act. Our audit work has been undertaken so that we might state to the charity's trustees those matters we are required to state to them in an 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 charity and the charity's trustees as a body, for our audit work, for this report, or for the opinions we have formed.

Date: 3 July 2026

Sayer Vincent LLP, Statutory Auditor
110 Golden Lane, LONDON, EC1Y 0TG

Sayer Vincent LLP is eligible to act as auditor in terms of section 1212 of the Companies Act 2006

Statement of financial activities Year to 31 December 2025

	Notes	Unrestricted funds £	Restricted funds £	Endowment funds £	2025 Total funds £	2024 Total funds £
Income and endowments from:						
Donations and legacies	1	**315,760**	**781**	**—**	**316,541**	352,675
Investment income and interest receivable	2	**210,142**	**10,935**	**—**	**221,077**	292,216
Charitable activities	3	**550,587**	**197,403**	**—**	**747,990**	872,878
Total income		**1,076,489**	**209,119**	**—**	**1,285,608**	1,517,769
Expenditure on:						
Raising funds						
. Costs of generating grants and donations	4(a)	**22,506**	**—**	**—**	**22,506**	21,398
. Management of investments	4(b)	**52,401**	**1,608**	**—**	**54,009**	55,480
Total expenditure on raising funds		**74,907**	**1,608**	**—**	**76,515**	76,878
Charitable activities						
. Policy Influence and Development	5	**194,105**	**—**	**—**	**194,105**	166,541
. Data and Evidence	5	**102,440**	**5,392**	**—**	**107,832**	157,172
. Innovation and Quality Improvement	5	**113,619**	**20,265**	**—**	**133,884**	153,302
. Standards	5	**26,597**	**—**	**—**	**26,597**	77,644
. Role models and Leaders	5	**1,110,639**	**185,457**	**—**	**1,296,096**	960,942
. Support for Nurses	5	**72,092**	**142,380**	**—**	**214,472**	239,529
Total expenditure on charitable activities		**1,619,492**	**353,494**	**—**	**1,972,986**	1,755,130
Total expenditure		**1,694,399**	**355,102**	**—**	**2,049,501**	1,832,008
Net expenditure before investment gains		**(617,910)**	**(145,983)**	**—**	**(763,893)**	(314,239)
Net gains (losses) on investment assets	15	**77,157**	**25,003**	**726,677**	**828,837**	721,343
Net (expenditure) income	8	**(540,753)**	**(120,980)**	**726,677**	**64,944**	407,104
Gross transfers between funds	21	**500,000**	**—**	**(500,000)**	**—**	—
Net movement in funds		**(40,753)**	**(120,980)**	**226,677**	**64,944**	407,104
Reconciliation of funds:						
Funds brought forward at 1 January 2025		**1,199,439**	**610,969**	**9,713,668**	**11,524,076**	11,116,972
Funds carried forward at 31 December 2025		**1,158,686**	**489,989**	**9,940,345**	**11,589,020**	11,524,076

All of the financial activities of the QICN during the above two financial years derived from continuing operations.

*A full comparative statement of financial activities for the year to 31 December 2024 is given on page 2.

Statement of financial activities (comparative) Year to 31 December 2025

	Notes	Unrestricted funds £	Restricted funds £	Endowment funds £	2024 Total funds £
Income and endowments from:					
Donations and legacies	*1*	*333,451*	*19,224*	*—*	*352,675*
Investment income and interest receivable	*2*	*273,101*	*19,115*	*—*	*292,216*
Charitable activities	*3*	*663,033*	*209,845*	*—*	*872,878*
Total income		*1,269,585*	*248,184*	*—*	*1,517,769*
Expenditure on:					
Raising funds					
. Costs of generating grants and donations	*4(a)*	*21,398*	*—*	*—*	*21,398*
. Management of investments	*4(b)*	*52,556*	*2,924*	*—*	*55,480*
Total expenditure on raising funds		*73,954*	*2,924*	*—*	*76,878*
Charitable activities					
. Data, evidence and policy influence	*5*	*166,541*	*—*	*—*	*166,541*
. Standards	*5*	*122,649*	*34,523*	*—*	*157,172*
. Role models/leaders	*5*	*117,581*	*35,721*	*—*	*153,302*
. Innovation	*5*	*77,644*	*—*	*—*	*77,644*
. Providing support for nurses – Support	*5*	*794,131*	*166,811*	*—*	*960,942*
. Providing support for nurses – Education	*5*	*77,655*	*161,874*	*—*	*239,529*
Total expenditure on charitable activities		*1,356,201*	*398,929*	*—*	*1,755,130*
Total expenditure		*1,430,155*	*401,853*	*—*	*1,832,008*
Net expenditure before investment gains		*(160,570)*	*(153,669)*	*—*	*(314,239)*
Net (losses) gains on investment assets		*82,579*	*42,330*	*596,434*	*721,343*
Net expenditure	*8*	*(77,991)*	*(111,339)*	*596,434*	*407,104*
Gross transfers between funds	*21*	*—*	*—*	*—*	*—*
Net movement in funds		*(77,991)*	*(111,339)*	*596,434*	*407,104*
Reconciliation of funds:					
Funds brought forward at 1 January 2024		*1,277,430*	*722,308*	*9,117,234*	*11,116,972*
Funds carried forward at 31 December 2024		*1,199,439*	*610,969*	*9,713,668*	*11,524,076*

Balance Sheet 31 December 2025

	Notes	2025 £	2025 £	2024 £	2024 £
Fixed assets					
Tangible assets	13		**152,421**		10,101
Intangible assets	14		**98,618**		96,674
Heritage assets	15		**70,000**		70,000
Investments	16		**11,535,649**		11,466,882
Total fixed assets			**11,856,688**		11,643,657
Current assets					
Debtors	17	**189,828**		92,420	
Cash at bank and in hand		**484,804**		515,789	
		674,632		608,209	
Creditors: Amounts falling due within one year	18	**(942,300)**		(727,790)	
Net current liabilities/assets			**(267,668)**		(119,851)
Total net assets			**11,589,020**		11,524,076
The funds of the charity					
Unrestricted funds					
. General funds			**472,961**		551,654
. Fixed assets fund	19		**321,039**		176,775
. Designated funds	20		**364,686**		471,010
			1,158,686		1,199,439
Restricted funds	21		**489,989**		610,969
Endowment funds	22		**9,940,345**		9,713,668
			11,589,020		11,524,076

Approved by the members of Council and signed on their behalf by:

Professor John Unsworth OBE
Chair of Council

Approved on: 24th June 2026

Statement of Cash Flows Year to 31 December 2025

	Notes	2025 £	2024 £
Cash flows from operating activities:			
Net cash used in operating activities	A	**(833,159)**	(557,712)
Cash flows from investing activities:			
Payments to acquire tangible fixed assets		**(169,673)**	(2,321)
Payments to acquire intangible fixed assets		**(9,300)**	(96,674)
Payments to acquire investments		**(1,158,107)**	(3,892,201)
Receipts from disposals of investments		**1,937,713**	4,344,021
Investment income and interest received		**221,077**	292,216
Net cash provided by investing activities		**821,710**	645,041
Change in cash and cash equivalents in the year		**(11,449)**	87,329
Cash and cash equivalents at 1 January	B	**737,733**	650,404
Cash and cash equivalents at 31 December	B	**726,284**	737,733

Notes to the statement of cash flows for the year to 31 December 2025.

A Reconciliation of net movement in funds to net cash used in operating activities

	2025 £	2024 £
Net expenditure (as per the statement of financial activities)	**64,944**	407,104
Adjustments for:		
Depreciation charge	**34,709**	5,349
Net (gains) losses on investments	**(828,837)**	(721,343)
Investment income and interest receivable	**(221,077)**	(292,216)
(Increase) decrease in debtors	**(97,408)**	1,291
Increase (decrease) in creditors	**214,510**	42,103
Net cash used in operating activities	**(833,159)**	(557,712)

B Analysis of cash and cash equivalents

	2025 £	2024 £
Cash at bank and in hand	**484,804**	515,789
Cash held by investment managers	**241,480**	221,944
Total cash and cash equivalents	**726,284**	737,733

No separate reconciliation of net debt has been prepared as there is no difference between the net cash (debt) of the charity and the above cash and cash equivalents.

Principal Accounting Policies 31 December 2025

The principal accounting policies adopted, judgements and key sources of estimation uncertainty in the preparation of the accounts of The Queen's Institute of Community Nursing (Formerly The Queen's Nursing Institute) are laid out below.

Basis of accounting
These accounts have been prepared for the year to 31 December 2025 with comparative information given in respect to the year ended 31 December 2024. The accounts have been prepared under the historical cost convention with items initially recognised at cost or transaction value unless otherwise stated in the relevant accounting policies below or the notes to the accounts.

The accounts have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (Charities FRS 102 SORP 2015), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Charities Act 2011.

The charity constitutes a public benefit entity as defined by FRS 102.

The accounts are presented in sterling and are rounded to the nearest pound.

Critical accounting estimates and areas of judgement
Preparation of the accounts requires the members of Council and management to make significant judgements and estimates.

The items in the accounts where these judgements and estimates have been made include:

- Assessing the probability of receiving legacies where the charity has been notified of its entitlement;
- Estimating the useful economic life of tangible fixed assets for the purpose of determining the annual depreciation charge;
- Determining the basis for allocating support costs across expenditure classifications;
- Determining whether the heritage asset may be impaired; and
- Estimating future income and expenditure flows for the purpose of assessing going concern (see below).

Assessment of going concern
The members of Council have assessed whether the use of the going concern assumption is appropriate in preparing these accounts. The members of Council have made this assessment in respect to a period of at least one year from the date of approval of these accounts. The members of Council consider that the uncertainty within the global geo-political context will impact on the economy in the year ahead.

However, given the availability of reserves, the members of Council have concluded that there are no material uncertainties related to events or conditions that may cast significant doubt on the ability of the charity to continue as a going concern. The members of Council are of the opinion that the charity will have sufficient resources to meet its liabilities as they fall due.

Income recognition

Income is recognised in the period in which the charity has entitlement to the income and the amount can be measured reliably and it is probable that the income will be received. Income is deferred only when the charity has to fulfil conditions before becoming entitled to it or where the donor or funder has specified that the income is to be expended in a future accounting period.

Income comprises donations, legacies, investment income, interest receivable and grants in respect to charitable activities.

Grants and donations from government and other agencies and charitable foundations are included as income from activities in furtherance of the charity's objectives where these relate to a specific project or activity or take the form of a contract for services. Where the money is given in response to an appeal or with greater freedom of use, for example monies for core funding, then the income is classified as a donation.

Donations and grants in respect to charitable activities are recognised when the charity has confirmation of both the amount and settlement date. In the event of amounts pledged but not received, the amount is accrued for where the receipt is considered probable. In the event that a donation or grant is subject to conditions that require a level of performance before the charity is entitled to the funds, the income is deferred and not recognised until either those conditions are fully met, or the fulfilment of those conditions is wholly within the control of the charity and it is probable that those conditions will be fulfilled in the reporting period.

Legacies are included in the statement of financial activities when the charity is entitled to the legacy, the executors have established that there are sufficient surplus assets in the estate to pay the legacy, and any conditions attached to the legacy are within the control of the charity.

Entitlement is taken as the earlier of the date on which either: the charity is aware that probate has been granted, the estate has been finalised and notification has been made by the executor to the charity that a distribution will be made, or when a distribution is received from the estate. Receipt of a legacy, in whole or in part, is only considered probable when the amount can be measured reliably and the charity has been notified of the executor's intention to make a distribution.

Where legacies have been notified to the charity, or the charity is aware of the granting of probate, but the criteria for income recognition have not been met, then the legacy is treated as a contingent asset and disclosed if material. In the event that

the gift is in the form of an asset other than cash or a financial asset traded on a recognised stock exchange, recognition is subject to the value of the gift being reliably measurable with a degree of reasonable accuracy and the title of the asset having been transferred to the charity.

Investment income is recognised once the dividend or interest has been declared and notification has been received of the amount due.

Interest on funds held on deposit is included when receivable and the amount can be measured reliably by the charity; this is normally upon notification of the interest paid of payable by the bank.

Expenditure recognition
Liabilities are recognised as expenditure as soon as there is a legal or constructive obligation committing the charity to make a payment to a third party, it is probable that a transfer of economic benefits will be required in settlement and the amount of the obligation can be measured reliably.

All expenditure is accounted for on an accruals basis. Expenditure comprises direct costs and support costs. All expenses, including support costs, are allocated or apportioned to the applicable expenditure headings. The classification between activities is as follows:

- Expenditure on raising funds include the salaries, direct costs and support costs associated with generating donated income, together with the fees paid to investment managers in connection with the management of the charity's listed investments; and
- Expenditure on charitable activities includes all costs associated with furthering the charitable purposes of the charity through the provision of its charitable activities. Such costs include charitable grants and donations, direct and support costs including governance costs.

Welfare grants are made where the members of Council consider there is real need following a review of the details of each particular case and comprise single year payments rather than multi-year grants. Welfare grants are included in the statement of financial activities when approved for payment. Provision is made for grants and donations approved but unpaid at the period end where relevant.

Grants of award funding to institutions are included in full in the statement of financial activities when the award agreement has been returned, completed and signed, by the recipient. Small final instalments of some award grant payments are subject to receipt of a satisfactory final report on the award project.

Allocation of support and governance costs
Support costs represent indirect charitable expenditure. In order to carry out the primary purposes of the charity it is necessary to provide support in the form of

personnel development, financial procedures, provision of office services and equipment and a suitable working environment.

Governance costs comprise the costs involving the public accountability of the charity (including audit costs) and costs in respect to its compliance with regulation and good practice.

Support costs and governance costs are apportioned using percentages based on the time spent on the relevant activities by the employees of the charity.

Tangible fixed assets
All assets costing more than £500 and with an expected useful life exceeding one year are capitalised.

Expenditure on the purchase and replacement of furniture and equipment is capitalised and depreciated on a straight-line basis over the following periods:

- Leasehold improvements: 10 years
- General office equipment, fixtures, fittings and furniture: 4 years
- Computer equipment: 3 years

Intangible fixed assets
Research costs are treated as revenue expenditure as and when they are incurred. Development costs are initially capitalised and then amortised over their estimated useful economic life. The amortisation rate in use is as follows:

- Software: 10 years

Heritage assets
During 2018, QICN discovered a piece of original artwork by Florence Nightingale, which had been given to it many years ago. Following further investigation, the value of the artwork was determined and is recognised in these accounts as a heritage asset. The asset was initially recognised on the balance sheet based on its estimated market value as at 31 December 2018 as determined by The Bowman Gallery, a specialist art valuer. This has been taken to be equal to its deemed cost for accounting purposes. No depreciation is charged against the asset, but the asset is reviewed annually for impairment.

Investments
Listed investments are a form of basic financial instrument and are initially recognised at their transaction value and subsequently measured at their fair value as at the balance sheet date using the closing quoted market price. Realised and unrealised gains (or losses) are credited (or debited) to the statement of financial activities in the year in which they arise.

The charity does not acquire put options, derivatives or other complex financial instruments.

As noted above, the main form of financial risk faced by the charity is that of volatility in equity markets and investment markets due to wider economic conditions, the attitude of investors to investment risk, and changes in sentiment concerning equities and within particular sectors or sub sectors.

Realised gains (or losses) on investment assets are calculated as the difference between disposal proceeds and their opening carrying value or their purchase value is acquired subsequent to the first day of the financial year. Unrealised gains and losses are calculated as the difference between the fair value at the year-end and their carrying value at that date. Realised and unrealised investment gains (or losses) are combined in the statement of financial activities and are credited (or debited) in the year in which they arise.

Debtors
Debtors are recognised at their settlement amount, less any provision for non-recoverability. Prepayments are valued at the amount prepaid. Debtors have been discounted to the present value of the future cash receipt where such discounting is material.

Cash at bank and in hand
Cash at bank and in hand represents such accounts and instruments that are available on demand or have a maturity of less than three months from the date of acquisition. Deposits for more than three months but less than one year have been disclosed as short-term deposits. Cash placed on deposit for more than one year is disclosed as a fixed asset investment.

Creditors and provisions
Creditors and provisions are recognised when there is an obligation at the balance sheet date as a result of a past event, it is probable that a transfer of economic benefit will be required in settlement, and the amount of the settlement can be estimated reliably. Creditors and provisions are recognised at the amount the charity anticipates it will pay to settle the debt. They have been discounted to the present value of the future cash payment where such discounting is material.

Fund structure
The general fund comprises those monies, which may be used towards meeting the charitable objectives of the QICN at the discretion of the Council.
The tangible and heritage assets fund represents the aggregate net book value of tangible and heritage assets at the balance sheet date. The value of such assets has been reflected on the balance sheet as a separate fund in order to emphasise the fact that the value of such assets should not be regarded as available to meet day-to-day expenditure. The assets are held for functional purposes in the case of tangible fixed assets or are retained as part of the charity's archives in the case of heritage assets.
The designated funds are monies set aside out of the general fund and designated for specific purposes by the Council.

The restricted income funds are monies raised for, and their use restricted to, a specific purpose, or donations subject to donor-imposed conditions. In the case of restricted income funds for welfare purposes, transfers are made to the general fund to reflect an agreed quarterly charging structure for staff time and office services attributable to providing welfare support from those funds.

The expendable endowment funds represent amounts held as capital until such time as members of Council decide to expend them subject to self-imposed conditions. Whilst held as capital, the funds generate income which is regarded as unrestricted.

Pension costs
Contributions in respect of the charity's defined contribution pension schemes are charged to the statement of financial activities when they are payable to the relevant scheme. The charity's contributions are restricted to the contributions disclosed in note 9. There were no outstanding contributions at the year end. The charity has no liability beyond making its contributions and paying across the deductions for the employees' contributions.

Leased assets
Rentals applicable to operating leases where substantially all of the benefits and risks of ownership remain with the lessor are charged to the statement of financial activities on a straight-line basis over the lease term.

Notes to the Accounts Year to 31 December 2025

1 Donations and legacies

	Unrestricted funds £	Restricted funds £	Endowment funds £	2025 Total funds £
National Garden Scheme donation	**305,000**	**—**	**—**	**305,000**
Other donations	**10,440**	**781**	**—**	**11,221**
Legacies	**320**	**—**	**—**	**320**
2025 total funds	**315,760**	**781**	**—**	**316,541**

	Unrestricted funds £	*Restricted funds £*	*Endowment funds £*	*2024 Total funds £*
National Garden Scheme donation	*305,000*	*—*	*—*	*305,000*
Other donations	*17,551*	*19,224*	*—*	*36,776*
Legacies	*10,899*	*—*	*—*	*10,899*
2024 total funds	*333,451*	*19,224*	*—*	*352,675*

2 Investment income and interest receivable

	Unrestricted funds £	Restricted funds £	Endowment funds £	2025 Total funds £
Income from investments listed on a recognised stock exchange within the UK	**207,129**	**10,911**	**—**	**218,040**
Bank and deposit interest	**3,013**	**24**	**—**	**3,037**
2025 total funds	**210,142**	**10,935**	**—**	**221,077**

	Unrestricted funds £	*Restricted funds £*	*Endowment funds £*	*2024 Total funds £*
Income from investments listed on a recognised stock exchange within the UK	*269,941*	*19,090*	*—*	*289,030*
Bank and deposit interest	*3,161*	*25*	*—*	*3,186*
2024 total funds	*273,102*	*19,115*	*—*	*292,216*

Notes to the Accounts Year to 31 December 2025

3 Income from charitable activities

	Unrestricted funds £	Restricted funds £	Endowment funds £	2025 Total funds £
Care Home Nurse Network	—	10,076	—	10,076
IPC Champions Network	—	9,860	—	9,860
Burdett - Diabetes Innovation	—	38,328	—	38,328
Burdett - ICCHNR International Conference	—	46,189	—	46,189
NGS – Support for QN Leadership programme	70,000	—	—	70,000
NGS – Support for Innovation programme	25,000	—	—	25,000
NGS – Support for QN Networks	—	93,750	—	93,750
Organisational Membership	171,500	—	—	171,500
AHP Development Programme	35,000	—	—	35,000
Care Community Nurse Development	10,000	—	—	10,000
Bournemouth University	32,179	—	—	32,179
Raising Professional BAME Voices in Social Care	15,000	—	—	15,000
Adult Social Care Nurses Network	30,000	—	—	30,000
CNEN Sponsorship	12,500	—	—	12,500
Leadership programmes	60,689	—	—	60,689
ICB Chief Nurse Network Sponsorship	12,500	—	—	12,500
SPQ Standards Course Endorsement	35,250	—	—	35,250
Awards Ceremony	17,438	—	—	17,438
Annual Conference	17,620	—	—	17,620
Sales of Resources	3,397	—	—	3,397
Company of Nurses grant funding	—	4,200	—	4,200
Innovation Projects	—	(5,000)	—	(5,000)
Fees, publications and sundry service	2,515	—	—	2,515
2025 total funds	550,587	197,403	—	747,990

Notes to the Accounts Year to 31 December 2025

3 Income from charitable activities (continued)

	Unrestricted funds £	*Restricted funds £*	*Endowment funds £*	*2024 Total funds £*
Care Home Nurse Network	*—*	*34,613*	*—*	*34,613*
IPC Champions Network	*—*	*33,929*	*—*	*33,929*
NGS – Support for QN Leadership programme	*70,000*	*—*	*—*	*70,000*
NGS – Support for Innovation programme	*25,000*	*—*	*—*	*25,000*
NGS – Support for QN Networks	*—*	*100,000*	*—*	*100,000*
Organisational Membership	*74,000*	*—*	*—*	*74,000*
AHP Development Programme	*42,562*	*—*	*—*	*42,562*
International Nurses Courses	*29,500*	*—*	*—*	*29,500*
Care Community Nurse Development	*25,000*	*—*	*—*	*25,000*
Bournemouth University	*34,696*	*—*	*—*	*34,696*
Community Nurse Consultant Handbook	*30,000*	*—*	*—*	*30,000*
CNEN Sponsorship	*25,000*	*—*	*—*	*25,000*
Leadership programmes	*119,547*	*—*	*—*	*119,547*
ICB Chief Nurse Network Sponsorship	*20,000*	*—*	*—*	*20,000*
SPQ Standards Course Endorsement	*16,000*	*—*	*—*	*16,000*
GPN Evaluation	*30,000*	*—*	*—*	*30,000*
Sustainability Projects	*44,700*	*—*	*—*	*44,700*
Community Nursing Research Forum	*—*	*39,915*	*—*	*39,915*
Awards Ceremony	*18,584*			*18,584*
Annual Conference	*24,695*	*—*	*—*	*24,695*
Sales of Resources	*7,342*	*—*	*—*	*7,342*
Fees, publications and sundry service	*26,407*	*1,388*	*—*	*27,795*
2024 total funds	*663,033*	*209,845*	*—*	*872,878*

Notes to the Accounts Year to 31 December 2025

4 Expenditure on raising funds

(a) *Cost of generating grants and donations*

Costs were incurred primarily in researching and developing relationships with grant making trusts.

	Unrestricted funds £	Restricted funds £	Endowment funds £	2025 Total funds
Direct costs	**13,582**	**—**	**—**	**13,582**
Support costs (note 7)	**8,924**	**—**	**—**	**8,924**
2025 total funds	**22,506**	**—**	**—**	**22,506**

	Unrestricted funds £	*Restricted funds £*	*Endowment funds £*	*2024 Total funds*
Direct costs	*11,436*	*—*	*—*	*11,436*
Support costs (note 7)	*9,962*	*—*	*—*	*9,962*
2024 total funds	*21,398*	*—*	*—*	*21,398*

(b) *Management of investments*

	Unrestricted funds £	Restricted funds £	Endowment funds £	2025 Total funds £
2025 total funds	**52,401**	**1,608**	**—**	**54,009**

	Unrestricted funds £	*Restricted funds £*	*Endowment funds £*	*2024 Total funds £*
2024 total funds	*52,556*	*2,924*	*—*	*55,480*

5 Expenditure on charitable activities

	Direct costs £	Grant funding of activities (note 6) £	Support costs (note 7) £	2025 Total funds £
Policy Influence and Development	**119,809**	**—**	**74,296**	**194,105**
Data and Evidence	**66,558**	**—**	**41,274**	**107,832**
Innovation and Quality Improvement	**49,408**	**33,230**	**51,246**	**133,884**
Standards	**16,416**	**—**	**10,181**	**26,597**
Role models and Leaders	**749,509**	**50,489**	**496,098**	**1,296,096**
Support for Nurses	**81,474**	**50,906**	**82,092**	**214,472**
2025 Total	**1,083,174**	**134,625**	**755,187**	**1,972,986**

Notes to the Accounts Year to 31 December 2025

5 Expenditure on charitable activities (continued)

	Direct costs £	*Grant funding of activities (note 6)* £	*Support costs (note 7)* £	*2024 Total funds* £
Policy Influence and Development	*113,174*	*—*	*53,367*	*166,541*
Data and Evidence	*106,808*	*—*	*50,364*	*157,172*
Innovation and Quality Improvement	*67,695*	*36,483*	*49,124*	*153,302*
Standards	*52,764*	*—*	*24,880*	*77,644*
Role models and Leaders	*648,317*	*4,700*	*307,925*	*960,942*
Support for Nurses	*80,883*	*81,891*	*76,755*	*239,529*
2024 Total	*1,069,641*	*123,073*	*562,415*	*1,755,130*

6 Grant making

Innovation – grants payable to institutions

Fund for innovation	**2025 £**	2024 £
Total value	**79,419**	36,483

These grants were awarded to support innovative community nursing projects or research and development projects conducted by named nurses. They were given in conjunction with professional development programmes delivered by the QICN.

Providing welfare support – grants made directly to individuals

	2025 £	2024 £
Total value	**50,906**	81,891

Providing educational support – grants made directly to individuals

	2025 £	2024 £
Total value	**4,300**	4,700

Grant commitments

As at 31 December 2025, the charity had annual welfare grant commitments of £18,800 (2024 – £24,384).

Notes to the Accounts Year to 31 December 2025

7 Support costs

Support costs are allocated to each area of charitable activity in proportion to the direct expenditure on those areas.

	2025 £	2024 £
Policy Influence and Development	**74,296**	53,367
Data and Evidence	**41,274**	50,364
Innovation and Quality Improvement	**51,246**	49,124
Standards	**10,181**	24,880
Role models and Leaders	**496,098**	307,925
Support for Nurses	**82,092**	76,755
Organisation costs	**8,924**	9,962
	764,111	572,377

8 Net expenditure and net movement in funds

This is stated after charging:

	2025 £	2024 £
Staff costs (note 9)	**1,224,867**	1,063,050
Depreciation	**34,709**	5,349
Operating lease rentals – land and buildings	**73,861**	55,818
Amounts payable to the auditor in respect of:		
. External audit	**19,740**	19,200

9 Staff costs and remuneration of key management personnel

Staff costs during the year were as follows:

	2025 £	2024 £
Gross wages and salaries	**947,164**	887,346
Employer’s national insurance contributions	**121,149**	91,931
Employer’s pension costs	**126,554**	83,774
	1,194,867	1,063,050
Redundancy	**30,000**	—
	1,063,050	1,063,050

The following number of employees received employee benefits (excluding employer pension costs and employer's national insurance) during the year between:

	2025 £	2024 £
£60,000 - £69,999	**3**	4
£80,000 - £89,999	**1**	—
£110,000 - £119,999	**—**	1

Notes to the Accounts Year to 31 December 2025

9 Staff costs and remuneration of key management personnel (continued)
The average headcount of employees in 2025 was 20 (2024 – 20).

The average number of full-time equivalent employees in 2025 was 18 (2024 – 18).

The key management personnel of the charity in charge of directing and controlling, running and operating the charity on a day-to-day basis comprise the members of Council together with the Chief Executive, Deputy Chief Executive/Director of Nursing, Director of Finance, Head of Communications, Director of Nursing Programmes (Innovation & Policy), Director of Nursing Programmes (Leadership & Standards) and Head of Commercial Operations, The total remuneration payable to key management personnel during the year was £611,969 (2024 – £461,604).

10 Council members
No member of the Council received remuneration in respect of their services as a member of the Council during the year (2024 – none).

There were two Council members who had expenses reimbursed during the year in respect of travel totalling £5,013 (2024 one Council member – £1,544).

During the year members of the Council donated a total of £120 to the charity (2024 – £10,189).

11 Related party and connected person transactions
During the year there were no payments to members of the council (2024 – £1,300). Other than the transactions reported within note 10 to the accounts, there were no other transactions with related parties or connected persons during the year (2024 – none).

12 Taxation
The Queen's Institute of Community Nursing is a registered charity and, therefore, is not liable to income tax or capital gains tax on income derived from its charitable activities, as it falls within the various exemptions available to registered charities.

13 Tangible fixed assets

	Leasehold improvements £	Fixtures, fittings, furniture and equipment £	**Total £**
Cost or valuation			
At 1 January 2025	50,931	48,561	**99,492**
Additions	62,407	107,266	**169,673**
Disposals	(50,931)	(21,381)	**(72,312)**
At 31 December 2025	50,931	134,446	**196,853**
Depreciation			
At 1 January 2025	50,931	38,460	**89,391**
Charge for the year	4,679	22,674	**27,353**
Disposals	(50,931)	(21,381)	**(72,312)**
At 31 December 2025	4,679	39,753	**44,432**
Net book values			
At 31 December 2025	57,728	94,693	**152,421**
At 31 December 2024	—	10,101	**10,101**

14 Intangible fixed assets

	Software £	**Total £**
Cost or valuation		
At 1 January 2025	96,674	**96,674**
Additions	9,300	**9,300**
Disposals	—	**—**
At 31 December 2025	105,974	**105,974**
Depreciation		
At 1 January 2025	—	**—**
Charge for the year	7,356	**7,356**
Disposals	—	**—**
At 31 December 2025	7,356	**7,356**
Net book values		
At 31 December 2025	98,618	**98,618**
At 31 December 2024	96,674	**96,674**

All of the above assets are used for charitable purposes.

15 Heritage assets

At deemed cost	£
At 1 January 2025 and at 31 December 2025	**70,000**

During 2018, QICN discovered a piece of original artwork by Florence Nightingale, which had been given to it many years ago. Following further investigation, the value of the artwork was determined and is recognised in these accounts as a heritage asset. The asset was initially recognised on the balance sheet based on its estimated market value of £70,000 as at 31 December 2018 as determined by The Bowman Gallery, a specialist art valuer. This has been taken to be equal to its deemed cost for accounting purposes. No depreciation is charged against the asset, but the asset is reviewed annually for impairment. There have been no indications of impairment as at 31 December 2025 (and since the initial recognition of the asset).

16 Investments

	2025 £	2024 £
Investments listed on a recognised stock exchange		
Market value at 1 January 2025	**11,244,938**	10,975,415
Add: Additions at cost	**1,158,107**	3,892,201
Less: Disposals proceeds	**(1,937,713)**	(4,344,021)
Total investment gains (losses)	**828,837**	721,343
Market value at 31 December 2025	**11,294,169**	11,244,938
Cash and settlements pending, held as part of the investment portfolio	**241,480**	221,944
Total investments held	**11,535,649**	11,466,882
Listed investments at cost	**8,498,487**	8,963,652

At 31 December 2025, the listed investments comprised the following:

	2025 £	2024 £
Fixed interest	**2,071,270**	1,657,947
UK equities	**1,448,276**	1,853,059
Overseas equities	**6,468,068**	6,551,198
Alternatives	**1,306,555**	1,182,735
	11,294,169	11,244,939

At 31 December 2025, no holdings were material in the context of the entire portfolio value (2024 – none).

Notes to the Accounts Year to 31 December 2025

17 Debtors

	2025 £	2024 £
Trade debtors	**92,468**	36,450
Prepayments	**52,251**	14,972
Accrued income	**29,903**	32,435
Other debtors	**15,206**	8,563
	189,828	92,420

18 Creditors: Amounts falling due within one year

	2025 £	2024 £
Expense creditors	**48,929**	46,376
Accruals	**111,700**	81,988
Other creditors	**36,805**	26,541
Deferred income (see below)	**744,866**	572,886
	942,300	727,790
Deferred income		
Balance brought forward	**572,886**	503,498
Released in year	**(572,886)**	(503,498)
Deferred in year	**744,866**	572,886
Balance carried forward	**744,866**	572,886

Deferred income consists of project funding received by the year end but which relates specifically to project work to be performed in future accounting periods.

19 Fixed assets fund

	2025 £	2024 £
At 1 January 2025	**176,775**	83,129
Other movements in year	**144,264**	93,646
At 31 December 2025	**321,039**	176,775

The fixed assets fund represents the aggregate net book value of tangible, intangible and heritage assets at the balance sheet date. The value of such assets has been reflected on the balance sheet as a separate fund in order to emphasise the fact that the value of such assets should not be regarded as available to meet day-to-day expenditure. The assets are held for functional purposes in the case of tangible fixed assets or are retained as part of the charity's archives in the case of heritage assets.

Notes to the Accounts Year to 31 December 2025

20 Designated funds

The funds of the charity include the following designated fund which has been set aside out of unrestricted funds by the members of the Council for specific purposes.

	At 1 January 2025 £	New designation £	Utilised £	At 31 December 2025 £
Leadership and Innovation fund	**126,382**	**—**	**(40,000)**	**86,382**
Phillip Goodeve-Docker fund	**52,885**	**—**	**(1,800)**	**51,085**
Heyes legacy fund	**19,794**	**—**	**(7,899)**	**11,895**
International Community Nursing Observatory	**271,949**	**—**	**(56,625)**	**215,324**
The Welfare Legacies Fund	**—**	**320**	**(320)**	**—**
	471,010	**320**	**(106,644)**	**364,686**

	At 1 January 2024 £	*New designation £*	*Utilised £*	*At 31 December 2024 £*
Leadership and Innovation fund	*190,572*	*—*	*(64,190)*	*126,832*
Phillip Goodeve-Docker fund	*55,085*	*—*	*(2,200)*	*52,885*
Heyes legacy fund	*29,675*	*—*	*(9,881)*	*19,794*
International Community Nursing Observatory	*333,818*	*—*	*(61,869)*	*271,949*
The Welfare Legacies Fund	*—*	*10,899*	*(10,899)*	*—*
	609,150	*10,889*	*(149,039)*	*471,010*

The Leadership and Innovation fund represents funds set aside by Council to increase the team. This will strengthen the offer of leadership and innovation programmes and assist in the delivery of newly commissioned work.

The Phillip Goodeve-Docker fund represents monies given as ‘donations in memory’ which the Council has set aside in the memory of Phillip Goodeve-Docker who sadly passed away in 2013 during a fundraising trek across Greenland. Due to the scale of donations received the Council decided to create an award in his name, with his parents’ approval. The annual prize is to the most outstanding District Nursing Student in each university in England, Wales and Northern Ireland, offering the District Nurse programme.

The Heyes legacy fund comprises a legacy received during 2018, which the Council designated to enabling an increase in the number of funded attendees at the annual Queen’s Nurse Conference. The Queen’s Nurse Conference is now a virtual conference and the designated fund is utilised against the total expenditure of the conference.

The International Community Nursing Observatory fund was set aside by Council to establish the observatory. The goal of which is to collate, gather and analyse evidence based data on the nursing workforce.

Council have elected to designate most legacies received to support our welfare grant giving activity, supporting nurses in financial difficulty.

Notes to the Accounts Year to 31 December 2025

21 Restricted funds

	At 1 January 2025 £	Income £	Expenditure £	Gains, losses and transfers £	At 31 December 2025 £
District Nurses 1965 Fund	**481,455**	**11,537**	**(127,106)**	**25,003**	**390,889**
TalkToUs Service	**36,650**	**—**	**(14,762)**	**—**	**21,888**
Burdett – Diabetes Innovation Projects	**8,978**	**38,328**	**(19,774)**	**—**	**27,532**
Burdett – International student conference sponsorship	**—**	**46,189**	**(46,189)**	**—**	**—**
Company of Nurses Welfare Grants	**—**	**4,200**	**(1,800)**	**—**	**2,400**
William Rathbone Annual Award	**29,380**	**—**	**(500)**	**—**	**28,880**
Dora Roylance Fund	**10,463**	**—**	**(1,500)**	**—**	**8,963**
Care Home Nurse Network	**7,100**	**10,076**	**(17,176)**	**—**	**—**
Innovation Programme	**7,051**	**(5,000)**	**(491)**	**—**	**1,560**
IPC Champions Network	**1,783**	**9,860**	**(11,643)**	**—**	**—**
NGS - Support for QN Networks	**9,574**	**93,750**	**(103,324)**	**—**	**—**
Community Nursing Research Forum	**5,392**	**—**	**(5,392)**	**—**	**—**
Other Restricted Funds	**13,143**	**179**	**(5,444)**	**—**	**7,878**
	610,969	**209,119**	**(355,101)**	**25,003**	**489,990**

	At 1 January 2024 £	*Income £*	*Expenditure £*	*Gains, losses and transfers £*	*At 31 December 2024 £*
District Nurses 1965 Fund	*571,449*	*19,415*	*(151,739)*	*42,330*	*481,455*
TalkToUs Service	*44,660*	*—*	*(8,010)*	*—*	*36,650*
Burdett – Diabetes Innovation Projects	*36,341*	*—*	*(27,363)*	*—*	*8,978*
Company of Nurses Welfare Grants	*4,250*	*800*	*(5,050)*	*—*	*—*
William Rathbone Annual Award	*19,811*	*10,069*	*(500)*	*—*	*29,380*
Dora Roylance Fund	*12,263*	*—*	*(1,800)*	*—*	*10,463*
Care Home Nurse Network	*—*	*34,613*	*(27,513)*	*—*	*7,100*
Innovation Programme	*15,120*	*288*	*(8,357)*	*—*	*7,051*
IPC Champions Network	*—*	*33,929*	*(32,146)*	*—*	*1,783*
NGS - Support for QN Networks	*5,449*	*100,000*	*(95,875)*	*—*	*9,574*
Homeless and Inclusion Health Programme	*8,677*	*—*	*(8,677)*	*—*	*—*
Community Nursing Research Forum	*—*	*39,915*	*(34,523)*	*—*	*5,392*
Other Restricted Funds	*4,288*	*9,155*	*(300)*	*—*	*13,143*
	722,308	*248,184*	*(401,853)*	*42,330*	*610,969*

District Nurses 1965 Fund (Welfare Fund)

This fund is a separate charitable trust administered by the Queen's Institute of Community Nursing and is known internally as the Welfare Fund. The fund must be used specifically for making grants to nurses who are, or who have been, associated with district and community nursing services and who are in financial hardship. As local District Nursing Associations in England closed over the years, additional funds have been transferred from the Associations to the 1965 Fund, with a specification that the funds should be used to support education grants for community nurses as well grants for those in financial hardship.

Notes to the Accounts Year to 31 December 2025

21 Restricted funds (continued)

TalkToUs Service
The Covid19 Healthcare Support Appeal (CHSA) awarded a grant to the QICN in 2022 to enable the continued delivery of the TalkToUs service.

Burdett – Innovation projects
The Burdett Trust for Nursing funded seven projects focussed on nurse-led innovations in caring for people with diabetes.

Burdett – International student conference sponsorship
The Burdett Trust for Nursing funded international scholars to attend and present at 'The Race to Address Health Inequalities by 2030: Community Nursing in the Lead' conference delivered in partnership with ICCHNR and City St George's.

Company of Nurses – financial assistance grants
The QICN administers grants for financial assistance on behalf of the Company of Nurses.

William Rathbone X annual award
Lucy and Nick Addyman sponsor the annual William Rathbone X Award for the most outstanding executive nurse of a community services provider.

Dora Roylance Fund
The QICN received a legacy of £21,792 from a retired QN who died in 2015. The specification was that it was to be used for the support of Health Visitor education. A Dora Roylance Memorial Award has been created for the most outstanding achievement for every student Health Visitor in every university offering the Health Visitor programme in England, Wales and Northern Ireland. Taking into consideration the number of universities offering the Health Visitor programme and the total of the fund, the award is likely to last approximately 15 years to 2030.

Care Home Nurse Network
Following the completion of the RCN Foundation grant funding for the Care Home Nurse Network in 2023, the QICN was grant funded by the Department of Health and Social Care in England to deliver the Care Home Nurse Network.

Innovation Programme
The QICN Innovation Programme holds funds for the community nurses participating to complete their projects.

IPC Champions Network
DHSC provided funding to develop and deliver and Infection Prevention and Control (IPC) Champions Network in 2022, 2023, 2024 and 2025.

National Garden Scheme Networks
The National Garden Scheme committed funding to support four networks of the QICN when funding became unexpectedly unavailable. These include the Long Covid Network, the Community Children's Network, the General Practice Nurse Network and the Homeless and Inclusion Heath Network

Notes to the Accounts Year to 31 December 2025

21 Restricted funds (continued)

Homeless & Inclusion Health - DHSC
The Department of Health and Social Care (DHSC) provided a grant to support the development of field specific standards in Inclusion Health and the promotion of the use of the standards in universities offering the NMC regulated Community Nursing Specialist Practice Qualification.

Community Nursing Research Forum
This project was originally funded by NHSE in 2022, to set up a community nursing research forum to inspire interest in research as a career option for community nurses and to provide learning and peer support. After the overwhelming success of the first year and after the one year of NHSE funding was completed, the NIHR agreed to pilot funding for one further year to continue with the same approach. At the end of the year, it was agreed that a small underspend could be used to continue the work, albeit with a limited offer to forum members, to April 2025.

22 Expendable endowment fund
The fund was established originally following the disposal of the QICN's freehold property in Belgravia, London. Movements on the endowment fund during the year to 31 December 2025 are as shown below:

	2025 £	2024 £
Fund value at 1 January	**9,713,668**	9,117,234
Net investment (losses) gains	**726,677**	596,434
Transfer to unrestricted general funds (see below)	**(500,000)**	—
Fund value at 31 December	**9,940,345**	9,713,668

Whilst the expendable endowment fund is ordinarily intended to be held as longer-term capital, investment income generated by the underlying investments is unrestricted based on the terms of the expendable endowment. Accordingly, the investment income is credited to the charity's unrestricted general funds.

The capital (including any cumulative unrealised gains) may be expended by the charity at the discretion of Council in accordance with self-imposed conditions consistent with the achievement of the charity's overall strategic plan. In 2024 the management of the investments moved to a total return basis with funds distributed throughout the year from the portfolio at a level set during the budgeting process. Transfers from the endowment to general unrestricted funds occur as necessary to maintain an appropriate level of free reserves. Council's general approach and policy is to keep the underlying capital preserved as far as possible.

23 Analysis of net assets between funds

	General funds £	Tangible and heritage assets fund £	Designated funds £	Restricted funds £	Endowment funds £	Total 2025 £
Fund balances at 31 December 2025 are represented by:						
Tangible fixed assets	**—**	**321,039**	**—**	**—**	**—**	**321,039**
Investments	**851,812**	**—**	**364,686**	**378,806**	**9,940,345**	**11,535,649**
Net current (liabilities) assets	**(378,851)**	**—**	**—**	**111,183**	**—**	**(267,668)**
	472,961	**321,039**	**364,686**	**489,989**	**9,940,345**	**11,589,020**

	General funds £	Tangible and heritage assets fund £	Designated funds £	Restricted funds £	Endowment funds £	Total 2024 £
Fund balances at 31 December 2024 are represented by:						
Tangible fixed assets	—	176,775	—	—	—	176,775
Investments	811,515	—	471,010	470,689	9,713,668	11,466,882
Net current (liabilities) assets	(259,861)	—	—	140,280	—	(119,581)
	551,654	176,775	471,010	610,969	9,713,668	11,524,076

24 Operating leases

At 31 December 2025 the charity had annual commitments under non-cancellable operating leases as follows:

	Land and buildings	
	2025 £	2024 £
Due within:		
. One year	**71,579**	64,732
. Two to five years	**21,186**	74,562
	92,765	139,294

The Queen's Institute of Community Nursing

www.qicn.org.uk
Founded 1887
Patron HM The Queen