

St Nicholas Hospice (Suffolk)

# *Annual Report and Financial Statements*

Year ended 31 March 2020



*because  
you matter*

**St Nicholas**  
Hospice Care

A Registered Charity No. 287773

Inspected and rated

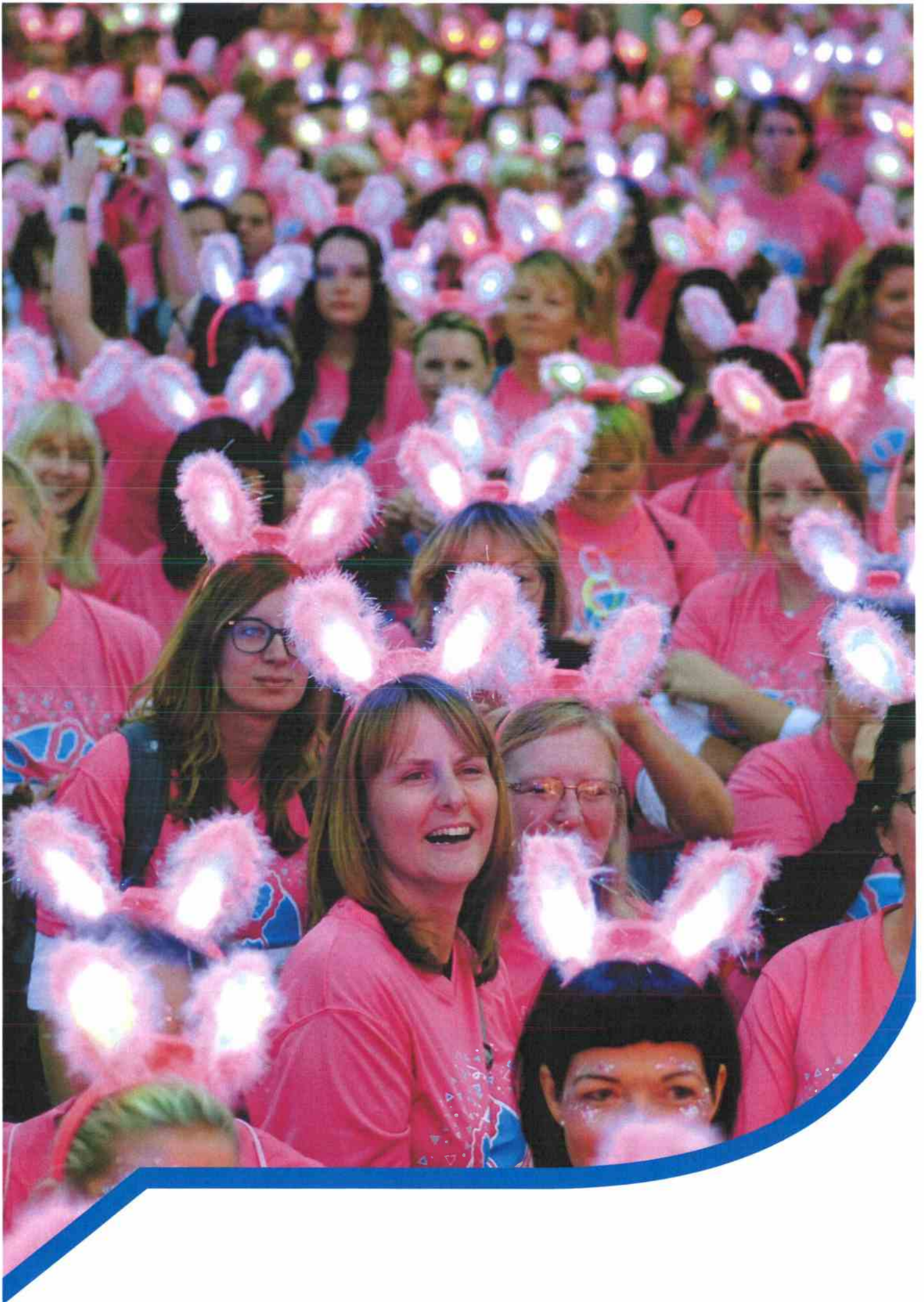
Outstanding ★



Care Quality  
Commission



Registered with  
**FUNDRAISING  
REGULATOR**



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# *Trustees' Report*

for the year ended 31 March 2020



# Trustees and advisors

## Board of Trustees

Charles Simpson <sup>1 5</sup>	Chairman
Susan Hayter <sup>3</sup>	Vice Chair
Michelle Masson <sup>1</sup>	Honorary Treasurer
Marion Miles <sup>2</sup>	
Revd Canon Matthew Vernon <sup>4</sup>	Resigned 25 April 2019
Ann Langdon <sup>2</sup>	
Malcolm Leith <sup>2 3</sup>	Resigned 25 April 2019
Ian Morgan <sup>4</sup>	
Chris Minett <sup>3</sup>	
Tessa Wright <sup>2</sup>	Resigned 25 June 2019
Karen Chandler-Smith <sup>4</sup>	
Anne Fisher	Appointed 10 December 2020
Donna Forster	Appointed 10 December 2020
Neil Morgan	Appointed 10 December 2020

## Secretary and registered/principal office

Fiona Heath, St Nicholas Way, Hardwick Lane, Bury St Edmunds, Suffolk, IP33 2QY

## Chief Executive

Dr Barbara Gale MBE<sup>5</sup>

## Directorate

Georgina Bissell – Fundraising and Marketing Director  
Suzanne Hughes – Human Resources Director, Health and Safety Lead to 30 November 2019  
Debra Garside – Clinical Services Director, Registered Manager, Accountable Officer to 30 September 2020  
Gwyneth Tyler – Clinical Services Director from 7 September 2020  
Rachel Spencer – Finance Director and Deputy Chief Executive, Company Secretary, SIRO to 21 April 2020

## Data Protection Officer

Sara Taylor

## Auditors

RSM UK Audit LLP, Abbotsgate House, Hollow Road, Bury St Edmunds, Suffolk, IP32 7FA

## Solicitors

Ellisons Solicitors incorporating Gross & Co, 84 Guildhall Street, Bury St Edmunds, Suffolk, IP33 1PR

## Bankers

Barclays Bank plc, 20/21 Cornhill, Bury St Edmunds IP33 1DY

## Investment managers

Rathbones Investment Management Limited, 159 New Bond Street, London, W1S 2UD  
Standard Life Wealth, 30 St Mary Axe, London, EC3A 8EP  
Sarasin & Partners LLP, Juxon House, 100 St Paul's Churchyard, London, EC4M 8BU

Registered Charity number: 287773

Registered Charity name: St Nicholas Hospice (Suffolk)

Other name used: St Nicholas Hospice Care

Company number: 1748046

<sup>1</sup> Finance and Investment Committee member   <sup>2</sup> HR Committee member   <sup>3</sup> Clinical Committee member  
<sup>4</sup> Income Generation Committee member   <sup>5</sup> Director of St Nicholas Hospice Trading Ltd

# Introduction from the Chief Executive Officer and Chairman

We are proud to present this year's annual report, which details our achievements and our plans for the future.

This year we completed much of the testing to develop an operational model to deliver our Equip Provide Strive strategy. A model, presented at an international conference in Australia.

We have been delighted to see how our approaches to equipping our communities to live with dying, death and grief have been recognised nationally. In this report, you can read about the work of the Life's Questions Team, one of the initiatives in our Equip Strategy.

We successfully recruited four new Trustees and also welcomed a young Trustee onto our board as an observer for a year as part of the local Young Shadow Trustee Programme.

Following a period of testing and consultation with local stakeholders, in January 2020, a three-year plan was approved to implement restructures in the clinical model while income growth and cost savings would lower the deficit over that time.

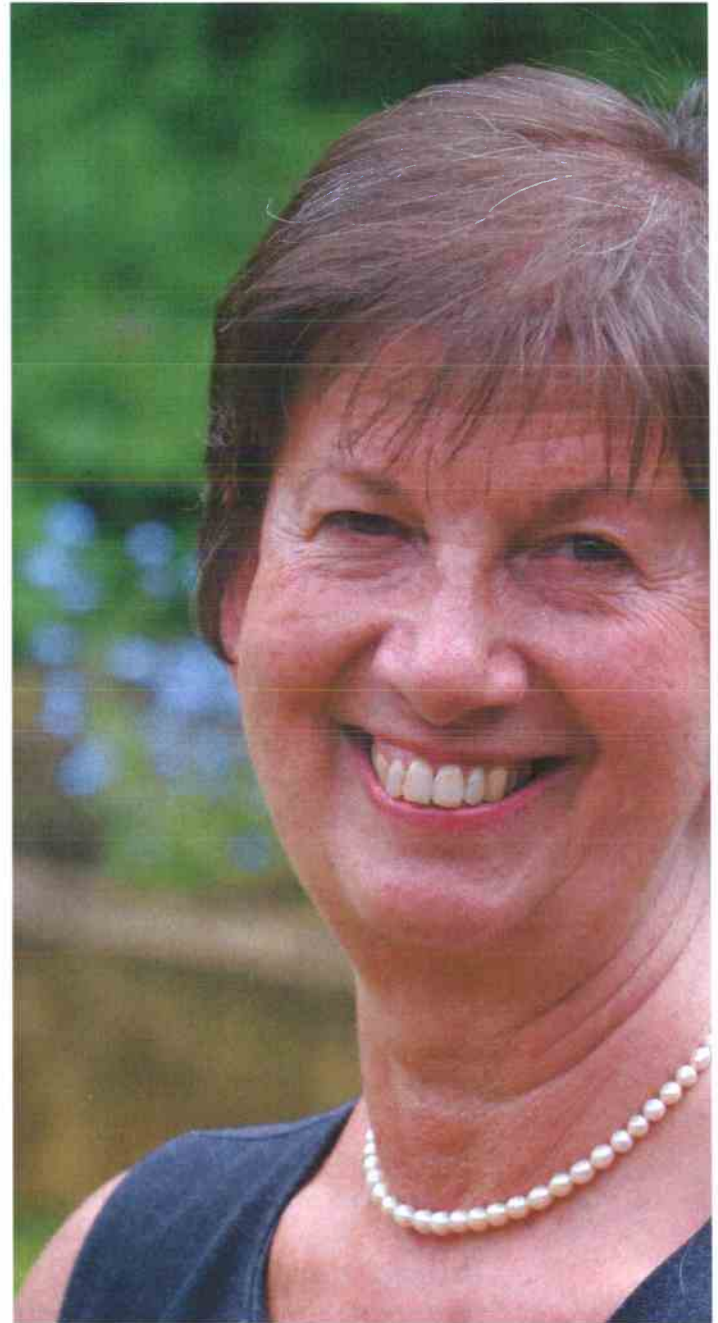
However, following the impact of Covid-19 on the services which could be delivered and plans to increase income, it was agreed the plans made in January needed to be thoroughly reviewed.

In September 2020, the management team presented a new proposal which brings the introduction of a new clinical model, and the cost savings, into immediate effect this year. Formal consultation with staff started in October.

Our team is responding amazingly to the challenges presented by Covid-19 and how we have to adapt services and income generation activities and meet changing national guidance to keep our staff, volunteers and community safe.

Our plans will continue to be underpinned by a financial strategy, which ensures that we focus on financial sustainability over the longer term. This strategy will ensure that we:

- **Equip** everyone to live with dying, death and grief
- **Provide** direct support
- **Strive** for 'something better' through innovation.



*Barbara Gale*      *CH Simpson*

**Dr Barbara Gale MBE,**  
Chief Executive Officer

**Charles Simpson**  
Chair



# Strategic Report

## In 2019/20

we said we would develop a model:

### Which will ensure that people:

- Can talk about dying, death and grief
- Are informed about and prepared for dying, caring, death and grief
- Have the skills to cope with dying, caring, death and grief
- Feel inspired to help people living with dying, caring, death and grief.

### Which will ensure that:

- People living with dying, death and grief have access to hospice specialist support, wherever they are and whenever they need it
- Professionals supporting people living with dying, death and grief have access to advice and support.

### Which will ensure that:

- The charity is well run
- We make the most of donations and resources

## By March 2020

we had:

### Completed and evaluated testing, which included:

- A Compassionate Community pilot in Mildenhall
- Nurse-led beds
- Hospital liaison
- Worked with care homes.

### Engaged with local stakeholders about the new clinical model.

### Agreed a clinical model and developed a 3-year plan to deliver:

- A locality-based model of support linked to local integrated neighbourhood teams and primary care networks as well as voluntary groups and organisations
- A specialist multidisciplinary team consultation and advice for people wherever they are
- A supportive multidisciplinary team working jointly with system colleagues and providing support and education.

### Developed a three-year plan to ensure the hospice:

- Has the relevant resources, information, systems and governance in place
- Is financially sustainable
- Continues to develop and test new ways of working.

# The impact of Covid-19 on the Charity's activities

## Clinical Services

The onset of Covid-19 required the Hospice to work closely with local statutory services to support people facing dying, death and grief during the pandemic. These changes included:

- Stopping all-day services, group activities and non-essential face-to-face contact
- Meeting daily with statutory colleagues to ensure care for people and their families was prioritised and coordinated across the healthcare system
- Increasing the numbers of inpatient beds available from 12 to 16
- Increasing Medical Consultant support to the hospital and out of hours advice for the local community
- Ensuring staff and volunteers were trained and equipped with appropriate PPE and new procedures were put in place to ensure environments were Covid secure
- Rapidly implementing IT solutions to support home working and virtual clinical consultations
- Increasing psychological, spiritual and bereavement and support for community and local staff
- Increasing online resources for the community, including for healthcare professionals to support symptom management and preparing for death and grief
- Hospice Neighbours and Family Support Volunteers continuing to offer telephone support to people facing illness and grief.

## Income generation activities

Covid-19 has changed the way we are fundraising dramatically. Our retail division was entirely shut during the first lockdown, and many of our usual fundraising events were cancelled or postponed. A large number of the Income Generation team were also furloughed.

We have focused, and continue to focus on, our Individual Giving Programme. This includes our Friends of St Nic's (a regular giving ask) and products such as our weekly lottery. We also delivered our first virtual event, Girls Night Out, which was very successful.

Income Generation continues to adapt the fundraising strategy to suit a post-Covid-19 environment and strive to develop products which focus on philanthropic donations rather than events and traditional community giving.

## Supporting our people

Also, numbers of staff and volunteers were required to shield, and some have adapted to home working. New online support and communication spaces were set up to support staff.

A Mutual Aid agreement with local statutory services facilitated some hospice staff working in the community with NHS colleagues and other external staff joining the Hospice team.



# Plans for future periods

The plans below will continue to include the practical changes outlined in the report for last year as Covid-19 continues to affect people's lives.

We will:

- Develop new ways of offering group support online
- Continue to work with statutory colleagues to ensure care for people and their families is prioritised and coordinated across the healthcare system
- Continue to ensure staff and volunteers are trained and equipped with appropriate PPE and procedures are in place to ensure environments are Covid secure
- Continue to develop online resources for the community, including for healthcare professionals to support symptom management and preparing for death and grief.

To meet our **strategic aims** to:

---

## Equip

everyone to live with dying, death and grief

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## Provide

direct support

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**Strive** for 'something better' through innovation

## In 2020/21 we will:

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### **Implement a model which will ensure that people:**

- Can talk about dying, death and grief
- Are informed about and prepared for dying, caring, death and grief
- Have the skills to cope with dying, caring, death and grief
- Feel inspired to help people living with dying, caring, death and grief

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### **Implement a model which will ensure that:**

- People living with dying, death and grief have access to hospice specialist support, wherever they are and whenever they need it
- Professionals supporting people living with dying, death and grief have access to advice and support

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### **Implement a model which will ensure that:**

- The charity is well run
- We make the most of donations and resources

## We will do this through:

### **Implementing:**

#### **A locality-based model of support linked to local integrated neighbourhood teams and primary care networks encompassing:**

- **Community Connectors**
- **Education**
- **Specialist Nurse Support**
- **Hospice Neighbours**
- **Compassionate businesses**

#### **A specialist multidisciplinary team consultation and advice for people wherever they are**

- **Inpatient services**
- **Virtual ward**
- **Hospital liaison**

#### **A supportive multidisciplinary team working jointly with system colleagues and providing support and education**

# Financial review

The Group, returned a deficit of **£1.775m** compared to a deficit of £1.531m in 2018/19. The deficit reflects the planned expenditure to develop our service design to reach more people affordably together with the necessary investment in our infrastructure to comply with regulatory requirements.

However, the deficit position worsened during March 2020 as the Covid-19 pandemic began to impact on the hospice. This led to the closure of the retail shops and the house clearance service, which caused a drop in income. Also, there was a significant fall in the value of our investments which resulted in a net loss of £0.212m.

## Income

Income has increased by **£0.109m** from £6.088m to **£6.197m** (2%).

Income from charitable activities has increased from £1.161m in 2018/19 to £1.275m in 2019/20, as additional NHS grants were received for specific initiatives. Our commitment to work in partnership with our local Clinical Commissioning Groups (CCGs) to continue to provide our services and reduce the overall burden on the NHS remains. In March 2020, we renegotiated a new four-year grant agreement for 2020/21-2023/2024 with our main partner, the West Suffolk CCG. This will increase our funding so that by 2023/24, our CCG funding will be in line with the national average. The Charity has maintained a strong income from fundraising activities. Income from donations and legacies was slightly lower than last year but these remain significant income streams. Legacy income was in line with our five-year average.

The trading activity of the Charity and its trading subsidiary has increased the income generated by 2%. This reflects the strategy to continue to develop the trading activity, through growth particularly in house clearances and to increase the profitability of shops. March saw the start of the impact of Covid-19 on retail and house clearances which resulted in a sharp fall in income. However, as part of the government's funding in response to Covid-19, we received non-recurrent business retail business grants totalling £0.165m (in respect of the shops and the Haven Café). This additional government

funding helped to mitigate the financial impact of Covid-19. The trading subsidiary returned a trading profit of £88k, an increase of £6k compared with the previous year. The maximum available taxable profits are gifted to the Charity.

## Expenditure

Expenditure has increased by **£0.148m** from £7.611m to **£7.759m** (2%).

Expenditure on charitable activities has remained at the levels incurred in 2018/19 largely, as the incremental increase in staff costs has been offset by vacancies that have arisen across most departments due to the natural turnover of staff. Although Covid-19 began to have a considerable effect on clinical services in March and several services started to operate differently, there was no significant additional financial cost to the Hospice in 2019/20.

Expenditure on trading activities has increased slightly, reflecting the investment made in e-Commerce, our house clearance service, new goods and fundraising. Also, further costs were incurred to ensure both health and safety and fire regulation requirements were met both by the Hospice and the retail sites.

## Investments

The Hospice has a diversified investment portfolio comprising of listed equities and unit trusts, fixed interest securities and cash and is managed by independent investment managers.

Following the decision of the Board of Trustees, through the Finance and Investment Committee, the sale of the third and final tranche of investments from Standard Life Wealth was completed and reinvested by Sarasin & Partners LLP in April 2019.

As such, the investment portfolio is apportioned between and managed by two independent investment managers, Rathbones Investment Management Limited and Sarasin & Partners LLP, appointed by the Board of Trustees. The Trustees, through the Finance and Investment Committee, consult with the investment managers, to take advice on the management of the portfolios and to monitor their performance.

During the year, there was a considerable decrease in investment funds. To support the deficit position it was necessary to liquidate £1.700m of investments to facilitate the operational cash flow. Besides, there was extraordinary volatility during March driven by Covid-19, which was not anticipated. Although there was a very sharp fall in the markets, they did improve by the end of March. As a consequence of these factors, our investments have dropped significantly during the year.

The Hospice investment policy remains unchanged. Over the long-term, we maintain and increase the real capital value of the investment funds to achieve returns from a diversified portfolio of equities, fixed interest securities and cash within a medium to low risk/reward profile as agreed by the Finance and Investment Committee. Where appropriate and within the investment objectives, the Trustees will attempt to invest in ethical and socially responsible organisations. The Finance and Investment Committee considered that the investment account had performed satisfactorily given the market conditions.

#### Reserves

Total reserves at the end of the year amounted to £7.999m (2019: £9.773m) of which £0.060m (2019: £0.306m) were restricted. The Charity also benefits from the Earl of Euston 2009 Endowment Fund of £44k. The attributed income (£861) from this fund was used in furtherance of the objects of the Hospice. The total value of designated funds is £5.641m.

The reserves policy, agreed by the Trustees, remains unchanged and requires that the Charity must hold a minimum level of reserves equivalent to approximately six-months' worth of total running costs. Free reserves at the end of the year totalled £5.454m or the equivalent of just over eight months' worth of total running costs. This ensures that the organisation can continue to support beneficiaries in periods of a financial downturn, but also enables funds to be invested for future Hospice services and revenue-generating projects.

As part of the Trustees' review this year, no additional funds have been designated as the Trustees deem the current designations to be sufficient to support the development of our services and income streams, except for the realignment of the Fixed Asset Fund described later in this section.

Designated funds comprise the following:

- Building/Fixed Asset Fund
- New Building and Maintenance Fund
- Service Development Fund
- IT Systems Fund
- Income Generation Fund.

**Building/Fixed Asset Fund.** St Nicholas Hospice Care owns the Hospice building and has a peppercorn lease with West Suffolk Hospital for the land. This designated fund represents the original cost of the building and the remainder of the original foundation fund, against which we offset the annual depreciation of the Hospice building. During 2019/20, the Trustees approved to reallocate the net book value of the fixed assets held within the restricted fund (£199,691) to this fund, to realign the balances.

**The New Building and Maintenance Fund** was set up in 2015/16 to maintain and update the existing Hospice building and to allocate funds for future building requirements. To ensure prudent management of the Charity's funds for this future requirement, the Trustees designated £2m from reserves during the 2015/16 financial year and a further £0.250m in 2016/17. Since then, due to the financial out-turn in the following years, the Trustees have decided not to allocate any further funds to this.

**The IT Systems Fund** is used to replace or upgrade IT systems and hardware to develop greater reliance, functionality and efficiency to support the services we deliver and how we work, now and in the future. During 2019/20, this programme of work included upgrading the servers and improvements to the patient record system and was funded from this designated fund. Some £0.076m remains.

**The Service Development Fund** was originally set up as the Hospice Community Services Fund in December 2012. The purpose of this fund is to support the ongoing development, testing and planning of new service delivery models across our entire service offering in all settings. The fund has been drawn down during the year to support the development work £0.475m remains.

**The Income Generation Project Fund** is to develop income generation through new and existing income streams that are sustainable and resilient to economic and social challenges. The fund was not used during the year, and £0.399m remains.

# Trustees Report

The Board of Trustees presents their annual report on the affairs of the charity, together with the financial statements for the year ended 31 March 2020.

## Background

St Nicholas Hospice Care has been supporting the people of West Suffolk and Thetford since 1984. This catchment area includes a population of approximately 270,000 (240,000 in West Suffolk and 30,000 in Thetford area).

Every year we support nearly 2,000 local people, delivering care to people in their own homes as well as in outpatient sessions, day therapy

and our inpatient ward. Services are not just for patients, but for their family and friends too, and include everything from specialist medical care to bereavement support and practical help. We also work with other community services that can help and provide a variety of training and education to local professionals and carers about palliative care and bereavement.

## Our vision

For everyone to matter in life and death.

## Our mission

For everyone to be informed, equipped and able to live with dying, death and grief.

# Our values

## Compassion

From our people you can expect care, warmth, kindness and honesty.

## Listen

We listen to what is important to you. What you tell us will be understood and not judged.

## Team spirit

We work together with respect, friendship, trust and a touch of laughter.

## Learn

We lead and develop, sharing knowledge and skills generously.

## Resilience

Our attitude towards change and the future has the courage to move and grow with life's changes.



# Objectives and Activities

## Charitable activities

The Charity reviews its objectives and activities annually, identifying achievements and outcomes and ensuring that the activities relate to the aims and objectives set.

## Hospice services

Our services are provided free to patients and their families and friends; however, some educational sessions do require payment. A clinical team led by the Clinical Services Director and Consultants in Palliative Medicine deliver the clinical services.

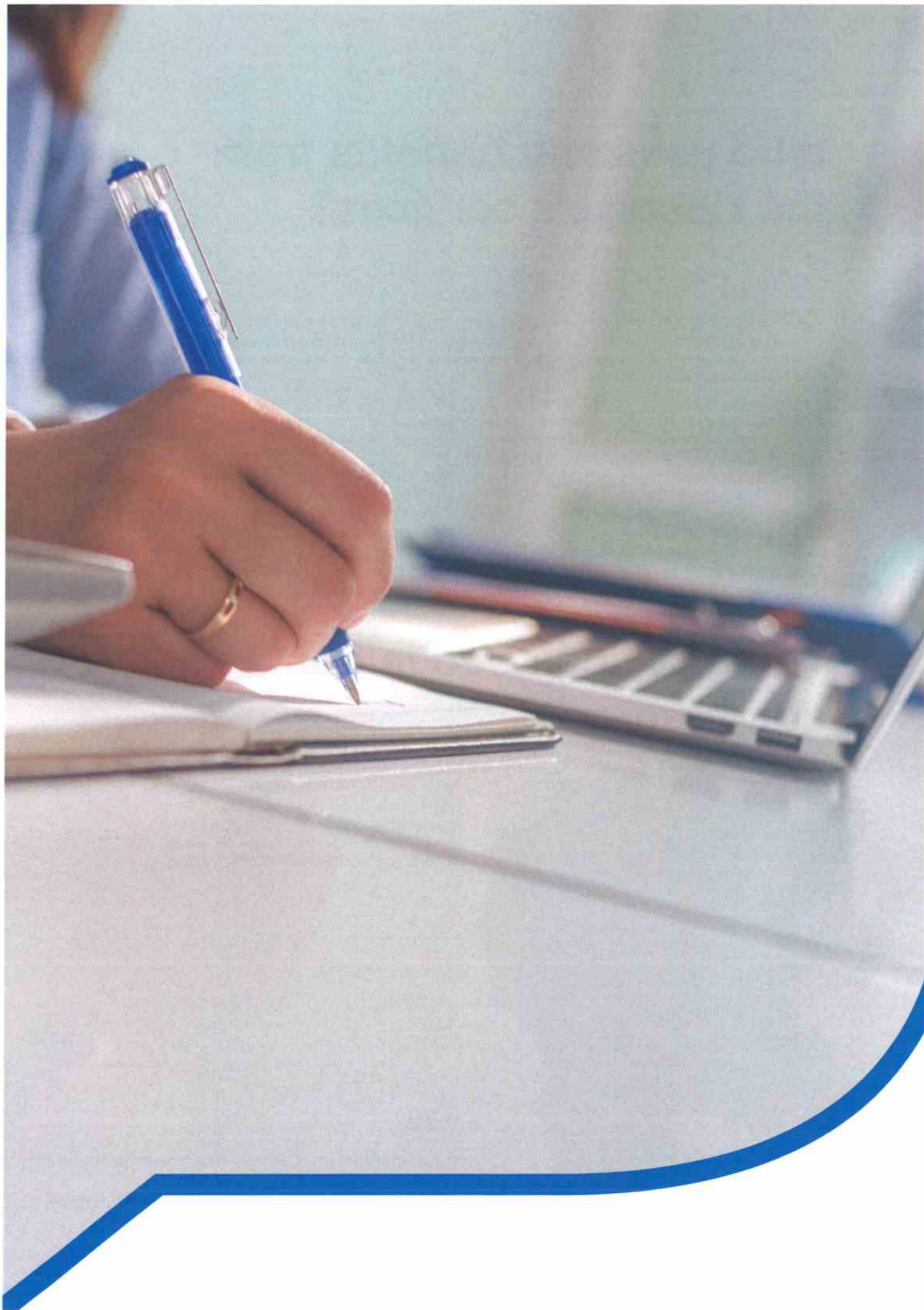
The Clinical Services Director is also the Registered Manager, Clinical Information Governance Lead and Accountable Officer (for Controlled Drugs). One of the Consultants in Palliative Medicine is the Caldicott Guardian. We have developed a flexible and experienced skill mix of people, ranging from employed staff such as palliative care clinicians, therapists and carers, to our broad mix of volunteers who provide support to all our services and organisational functions and work across all settings. This enables us to focus on proactive care planning and management, which aids effective people-centred decision-making.

Our services ensure that specialist support and advice is available to people wherever they are whether at home, in a care home, in a hospital or without a home. Some 88% of people receiving hospice care are at home.

However, we also support people in many different settings, from the Hospice itself in Bury St Edmunds, which has a 12 bedded inpatient unit, West Suffolk Hospital Foundation Trust to working in local communities.

In line with our Equip Provide Strive Strategy our services to those facing dying, death and grief are provided by:

- **A specialist multidisciplinary team providing clinical consultation, advice and education including:**
  - Palliative care consultants and doctors
  - Advanced practitioners in nursing, psychological support, occupational therapy and physiotherapy
  - Chaplaincy and spiritual support team
- **A locality approach where our teams are connecting and working with:**
  - Local healthcare teams including GP surgeries, care homes, primary care networks and integrated neighbourhood teams
  - Other voluntary and charitable organisations, community groups & volunteers
  - Local councils
  - Local businesses
- **Education and training for people, families and professionals about caring and supporting people at the end of life and those bereaved, including:**
  - Training for carers in nursing homes,
  - Clinical professionals,
  - Clinical and school students,
  - Training for hospital clinicians, and
  - Community groups and schools.



# Who uses and benefits from the Hospice's services?

## Our purpose is to benefit

- Those facing dying, death and grief. Our support is offered not only to those who are ill but to their family and friends, and this includes services for bereaved children and young people.
- The local community by enhancing their role, ability and confidence to support each other when facing dying, death and grief.

Our services are available to people living within the West Suffolk and Thetford areas (South Norfolk). Whenever possible, we will also help people outside our immediate catchment area if it is their wish to be supported by us.

As well as working with fellow healthcare professionals, we promote self-referral or contact from family or friends on behalf of others. We actively encourage people and their families to contact us early so we can help them live well and maintain their independence. Our services

are there to support anyone who needs us, sometimes from the point of diagnosis onwards, not just in the last year or months of life.

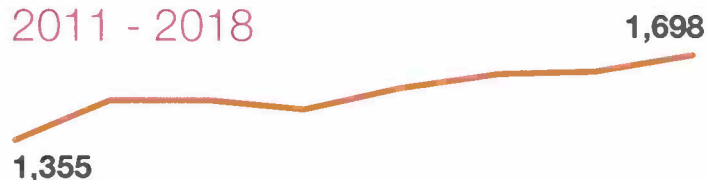
Additionally, the Hospice works with teenagers, young people, and their families. To promote continuity, Hospice staff collaborate with East Anglia's Children's Hospices to help meet the needs of young people transitioning from child to adult services.

## The growing need in our community



Approximately 270,000 people live in our service area. The Suffolk Public Health Team has projected that West Suffolk CCG's ageing population will grow; those aged **65 - 84** by **20.5%**, and those **85+** by **45.3%** by 2028.

## Total annual deaths in West Suffolk Local Authority, 2011 - 2018



Since the last census in 2011, by 2018 the number of deaths in the West Suffolk local authority area had grown **25%**. It can be estimated anywhere between **69% - 82%** of deaths need palliative care. (Murtagh, 2014)

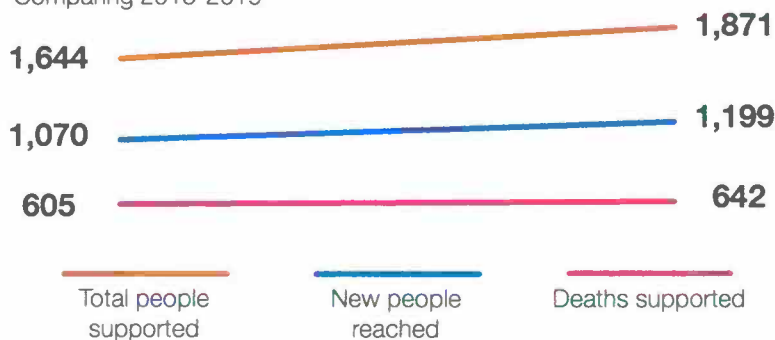
**“Palliative care** is required for a wide range of diseases. The majority of adults in need of palliative care have chronic diseases such as **cardiovascular diseases** (38.5%), **cancer** (34%), **chronic respiratory diseases** (10.3%), **AIDS** (5.7%) and **diabetes** (4.6%). Many other conditions may require palliative care, including kidney failure, chronic liver disease, multiple sclerosis, Parkinson's disease, rheumatoid arthritis, neurological disease, dementia, congenital anomalies and drug-resistant tuberculosis.”

World Health Organisation, 2020

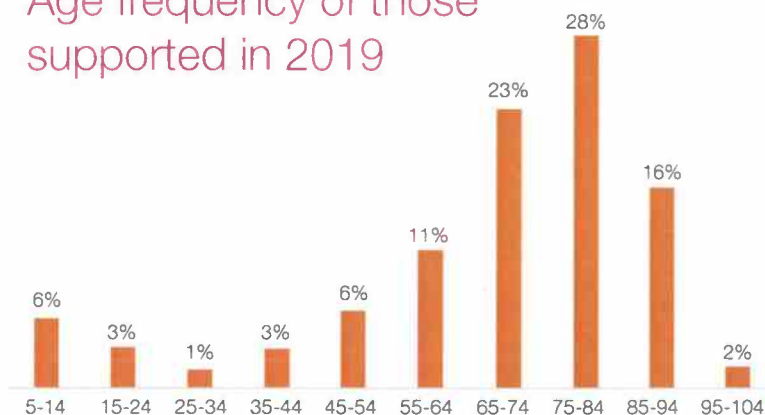
## Statistics about Hospice support

Between **2015** and **2019**, the Hospice has supported more than **5,680** individuals.

Comparing 2015-2019



Age frequency of those supported in 2019



**24%**

of people supported accessed bereavement services

**35%** of people supported had a

**non-malignant primary diagnosis**

(non-cancer) from April 2019–March 2020

- 341** Home
- 52** Care home
- 112** Hospice ward
- 135** Hospital
- 31** Unknown

Location of Hospice supported deaths

33

## Life's Questions

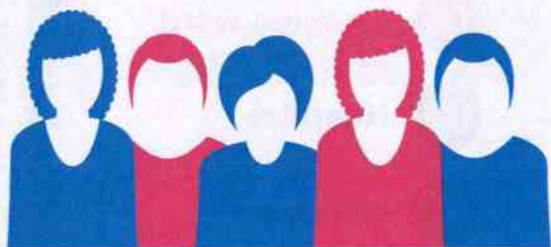
sessions held  
with a total of **670**  
attendees

22

**Gravetalk** sessions  
held with a total of  
**98** attendees

2,353

The total number of  
people who attended a  
Hospice education session



EQUIP

PROVIDE

STRIVE



# EQUIP

## The Hospice uses education, public awareness and community development approaches to support and build compassionate communities.

**The Hospice equips local communities by growing links and relationships with wider Hospice teams, local people and organisations. We inspire local groups to ask 'what they can do' in their areas to support people who are experiencing dying, death and grief.**

### Facilitate community support groups and equip people to talk about death.

During May's national 'Dying Matters Week' there was a full programme of events in different communities across our locality. This enabled education, hospice neighbours and fundraising teams to deliver joined-up work to engage our communities in end of life conversations. This included shops, business, college, and public events. These events put the Hospice in the heart of our community.

In the summer of 2019, the Hospice hosted workshops to equip the community with Cormac Russell, a leader in community development approaches. These sessions were well attended and positively received by 'non-hospice' groups & individuals. This has led to tentative partnership talks with Suffolk County Council and their community development teams.

The Hospice has cultivated links with local communities in the Mildenhall area. Staff have attended Market Cross Patient Participation Group (PPG) which links in with the 'Friends of Market Cross Surgery'.

A variety of training sessions were delivered to groups to equip people to talk about death, and this included conversations with Suffolk Family Carers on conversations around dying, recognising that not everyone likes to talk about death.

### Feedback from the sessions:

*"We learnt about: the deterioration of different conditions, aspects of old age, the different types of palliative care, conversations around end-of-life care and advance care planning."*

*One of the advisors said: "It was useful as it [death] isn't always addressed, it is good to know the skills and tools for a potentially awkward conversation."*

*Another member of staff reported: "Found the training really useful. It is always difficult to discuss things like your will and end-of-life care; so it's great for us to know how to talk about these topics."*

In June, Factual Fridays commenced in the Mildenhall Shop with 'coffee on a couch' for conversations around dying, death and grief. The sessions were for members of the Mildenhall Community to come meet in an informal environment.

Following on from our close work and support of Mabbs Hall care home, they developed a successful, well-received and broadly self-led community meeting for their residents, carers and community groups.

Also, the year included the development of neighbourly training/conversation 'Being Neighbourly' for local volunteers. In addition, the Hospice has continued to work with the Brandon and Mildenhall Locality Team on the Alliance Delivery Plan.

### Equip young people to live with dying, death and grief.

Life's Questions continues to develop and is now equipping schools to deliver sessions.

A school wanted to ensure they support the whole family as best they can when they explained a child's parent was dying. A session for 13 staff gave them resources and tools on what to say and what not to say.

#### **Feedback from the session included;**

*"Very helpful, not personally dealt with issues like this either at home or at school professionally so a very helpful start to dealing with this."*

*"Thought provoking. Enabling me to understand how to approach this topic. Understanding and approachable questioning. Supportive training."*

After the session, the head teacher felt better equipped to start a conversation to support the child and their family.

### Equip everyone to live with dying death and grief.

A Hospice healthcare assistant commenced our first Registered Nurse Apprenticeship Programme and successfully passed two exams and received 94% on her presentation for her first module on end-of-life care.

Through secondment/training work placements future healthcare practitioners are equipped to communicate and care for those people who are dying and bereaved. This included student; nurses, doctors, physiotherapists and occupational therapists as well as work placements with Year 10/11 students. Also, we have delivered sessions to the East of England Ambulance Service NHS Trust student paramedic cohorts at the University of East Anglia, to equip them with strategies to support people to be cared for at the place of their choice.

Our work with the CCG on the Interface Geriatrician Project has equipped care homes to feel confident to undertake end-of-life conversations and advance care planning (this includes completing My Care Wishes documents) with residents and family members. In April, the 'My Care Wishes' documentation review was approved and rolled out across Suffolk. Sally Coldrey, St Nicholas Hospice Care Practice Educator, made a significant contribution and led on this project.

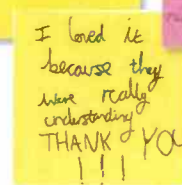
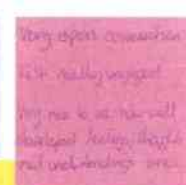
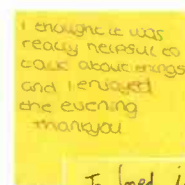
# Education

**Structured education sessions are valued and appreciated. Education sessions lead to other needs being identified.**

Education is a key public health tool, and we explored this in Mildenhall to understand the potential of developing new offers, deliver more of existing education sessions and make new connections in communities.



Difficult conversations



Businesses

**We are working with**

Communities

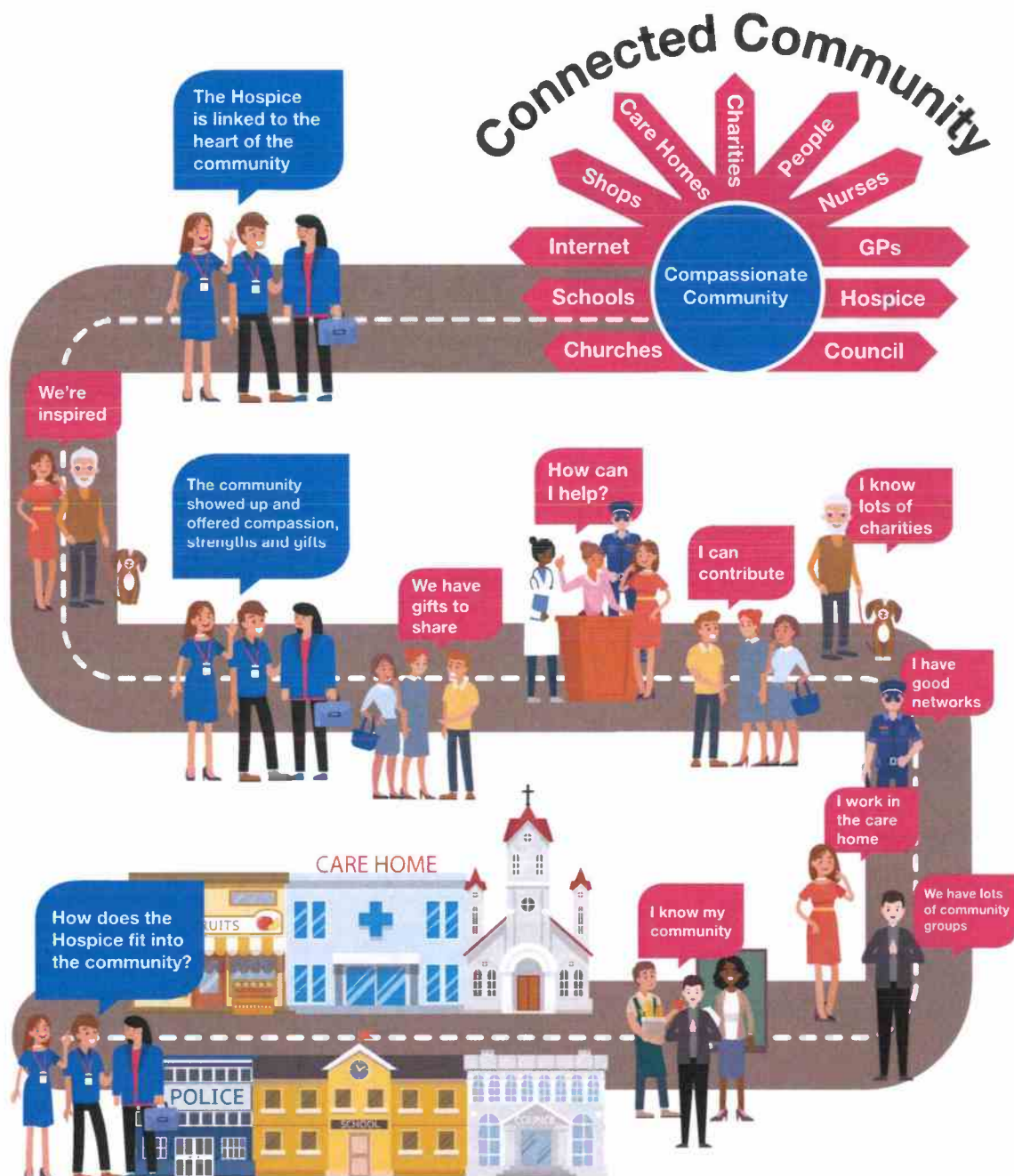
Partners



Groups and Volunteers

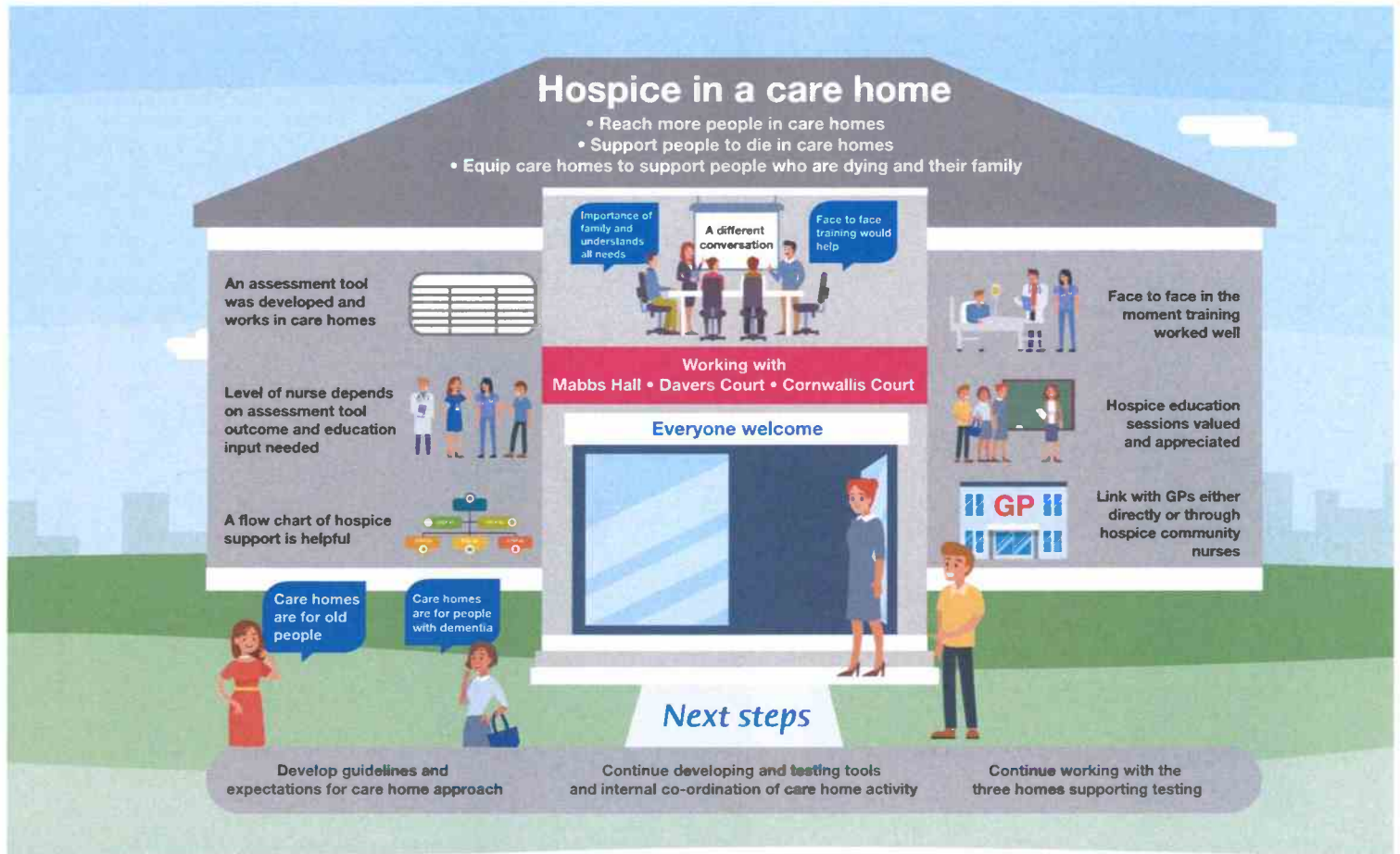
# Community connectors

Asset Based Community Development (ABCD) and public health approaches to palliative and end-of-life care were used to explore Mildenhall's activity and engagement as a community. Working alongside the community we were able to connect with people locally and see the green shoots of a compassionate community equipped to support people experiencing dying, death and grief. The Hospice continues to explore these approaches in the town allowing it to evolve organically and build on what we find is strong.



# Hospice in a care home

We've looked at how to support care homes differently, enabling them to provide expertise in dying, death and grief. We want residents, families and care home teams to be more comfortable with receiving and delivering end of life care and bereavement support in care homes, closer to communities.





by the Clinical  
Community Team



**548** people  
received 1-2-1  
bereavement  
sessions



Measures from April 2019 – March 2020



# PROVIDE

The Provide element of the Hospice's model focuses on the specialist clinical expertise and care we are able to offer to those at the end of their lives, as well as support for their carers and those important to them.

Our clinical team, made up of consultants in palliative medicine, doctors, specialist nurses, therapists, healthcare assistants and advanced practitioners all provide highly skilled and complex advice and support for those who most need very complex intervention.

## Our progress

The development of the Provide aspect of our Hospice model has seen us continue to test new ideas and ways of working.

This work is giving further insight into our current direct care provision and aspects of our support that we currently provide, which could and perhaps should be delivered by others.

### Existing ideas in development and testing

**Carer-led bed** – In May 2019, the Sylvan Ward tested a carer-led bed for five days, the test identified gaps and improvements that the Hospice needs to address to be able to facilitate this offering in the future. A follow-up interview with the couple who participated highlighted how the Hospice expected people to fit in with its routines, and did not encourage people to keep to their own routines. This included not being able to administer all medications in the way they usually would and the ability to enjoy a meal together. Further testing of carer-led beds is needed, and will be considered once further research has taken place.

**Nurse-led beds** – Some 33 nurse-led beds have been tested at the Hospice. These beds have been used at various stages of care; during discharge planning, while supporting end-of-life

care, during the transition to doctor-led beds, for respite care and for ongoing admission. Part of this testing also looked at ways we could work more closely with West Suffolk Hospital to facilitate nurse-led beds.

**Clinical volunteer roles and discharge buddies** – These roles continue to be developed, led by a ward healthcare assistant. A three-month trial of a Hospice Wellbeing Support Volunteer is in the planning stages to support people when discharged from Sylvan Ward.

**Care in the community** – Our Community Team are testing working in localities, co-locating with other healthcare professionals such as district nurses. The Sudbury district nurse team have agreed for Hospice nurses to work in their offices and conversations with the Newmarket district nursing team are underway. In addition, the community team are testing alternative shift patterns and skill mixes.

# Memorable Moments

**At the Hospice, we are not only focused on the medical health of those we care for. As well as our services strands which offer support focused on physical, emotional and mental wellbeing, we also want to provide experiences that those in our care can enjoy – Memorable Moments.**

**Our Memorable Moments are a way for the person who is ill and their loved ones to make new memories. To come together to enjoy an experience.**

**This could be based on an existing passion or hobby the individual has, or it could be something new, it can be big or small, all that matters is that the experience is a memorable one for those who share it.**

**For 94-year-old Geoff**, an afternoon spent reminiscing about his time in the Royal Air Force (RAF), was not only memorable for him, but a privilege for those able to share it with him.

Having told members of staff on our Sylvan Ward all about his time as an RAF Officer during World War II and his later experiences as a Wing Commander, they decided they wanted him to be able to recount his memories more widely.

Having spoken to a member of the Hospice's Fundraising Team who has a contact at RAF Honington, Geoff enjoyed an afternoon with Warrant Officers Sonya and Mac. His amazing memory allowed him to recall stories of meeting Princess Margaret, seeing sharks and being stationed in Aden, Yemen.





**For 84-year-old John, his dying wish was to be able to fly in a Spitfire.**

After hearing his request, Bianca, our Family Support Team Leader, contacted Biggin Hill Heritage Hanger to see if they could help.

The Biggin Hill team kindly invited John and his wife Heather for a private tour of the hangar in Bromley, Kent.

John was thrilled that his last request had come true and said: "I could have sat inside the cockpit, but it was very small and would have been hard to get out of. I can face most situations but not that. I think the pilots were a lot smaller in those days."

**After asking for some help from our staff, Trevor, who was being cared for on our ward was able to enjoy a special date night with his wife Nadia.**

With staff decorating our family room with flowers and fairy lights and the music played at their wedding filling the room, the setting was perfect for Trevor and Nadia's Memorable Moment.

With a local restaurant donated their meals and our Catering Team providing a bottle of wine the pair were able to sit back and enjoy their date.



EQUIP

PROVIDE

STRIVE



# STRIVE

**As an organisation, the Hospice is committed to striving for improvement through innovation. This has been essential in developing a new Hospice model.**

**Experience-based service design has informed its contents, and innovative ideas have been generated and prototyped from across the Hospice teams. This will continue as the model evolves.**

## Mildenhall pilot conclusions

The pilot in Mildenhall aimed to test new ways of working, such as a public health approach to palliative care and using an Asset Based Community Development (ABCD) approach. Through the service design process, the Hospice developed concepts based on what people said, three of which were: Compassionate Communities, Community Connectors and Networks of Support.

Using these approaches and, concepts the Hospice embarked on understanding the Hospice's role in a community to improve death literacy. By working in new ways and testing different approaches it is envisaged that a more sustainable model for end-of-life care can be realised to face expanding need and an ageing population.

### **Early indications from the pilot suggest the key components in developing a compassionate community include:**

- A dedicated person who understands the approaches is essential in leading the work
- Hospice branding is an asset in the area, for example; a shop or bereavement café
- Identifying key people (Parish Nurse) and places (Mabbs Hall) in the community and making links with them at the beginning enables effective connections within the

community

- Engaging, and building relationships and working with statutory partners straight away, for example, councils and GP surgeries enables the work to reach a wider audience.

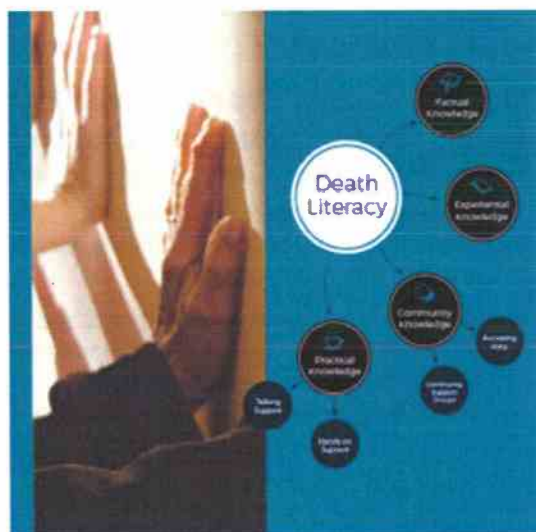
### **The key learning and next steps from testing the concepts in the pilot are:**

- Community Connectors need more time to develop, more testing is needed to understand their role in a community, for example within GP surgeries
- Community groups have worked well and continue to thrive. These relationships should be maintained and nurtured to facilitate further development of a compassionate community
- Developing Compassionate Companies needs a different approach with the community, not necessarily through fundraising
- Hospice education is an asset within the public health and ABCD approaches. The team should continue to develop and grow their training and education packages based on what people tell us
- Individual network resources need to be tested further, directly involving patients and the public to understand if they are effective.

# Death Literacy Index

The Hospice trialled a survey to understand how informed, and prepared people living in Mildenhall and Sudbury feel about living with dying, death, caring and grief.

Western Sydney University and the GroundSwell Project in Australia, developed a Death Literacy Index to measure people's knowledge, skills, experience and action around dying, caring and grief. The Hospice used the index in three surveys during the year to support the research into measuring death literacy in communities. The survey results helped us better understand the areas of strength the communities already have and their ability to take action and care for one another.



## DEATH LITERACY INDEX: A REPORT ON ITS DEVELOPMENT AND IMPLEMENTATION

WESTERN SYDNEY UNIVERSITY THE GROUND SWELL PROJECT LA TROBE UNIVERSITY USC

**SHARE YOUR EXPERIENCES OF DYING, DEATH, CARING AND GRIEF**

Please take part in this 15 minute survey.

The Hospice would like to learn more about the experience behind Mildenhall's compassion for people living with dying, death and grief.

The survey will close on Tuesday, 8 October, at midday. Thank you.

Take the survey now by visiting [www.stnicholashospice.org.uk/survey](http://www.stnicholashospice.org.uk/survey)

because you matter

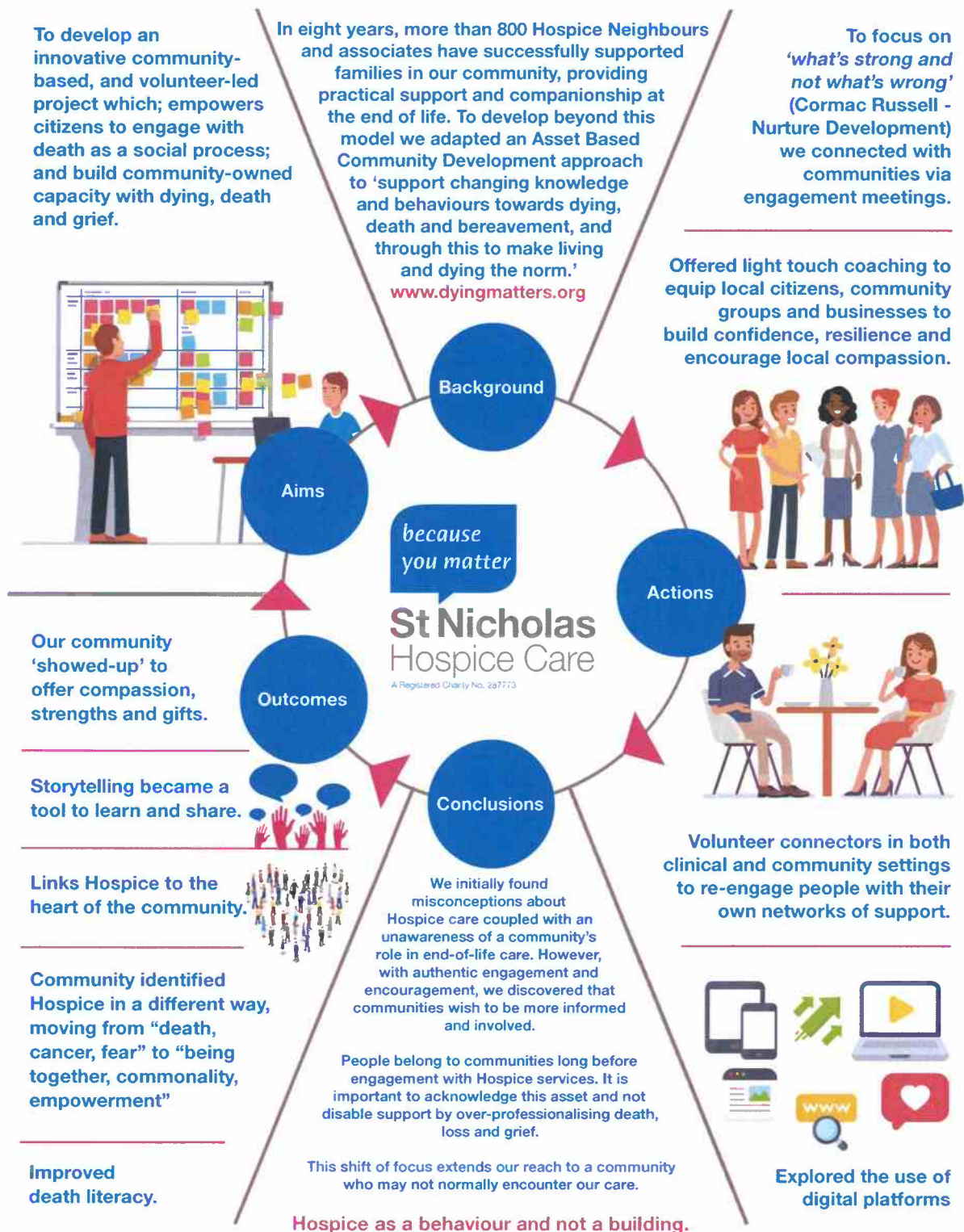
St Nicholas Hospice Care

LA TROBE UNIVERSITY  
WESTERN SYDNEY UNIVERSITY

THE GROUND SWELL PROJECT  
ihbi  
Institute of Health and Behavioural Inquiry



# Equipping a community by thinking differently about volunteers



# Influence

## Life's Questions recognised

**The team behind the Hospice's Life's Questions initiative were honoured at BMA Patient Information Awards in September 2019.**

With judges recognising the initiative's merit Life's Questions was shortlisted in its category.

Judges said: "Building resilience, promoting wellbeing and supporting young people during or after any kind of loss or bereavement should now be integrated into the wider school curriculum, with teachers and other staff receiving support from appropriate teams and institutions.

"This much-needed initiative is directed at one of the most important age groups. It promotes openness and empathy, understanding other people's views though not necessarily agreeing to them, and building resilience in the face of grief, loss and frustration. In my opinion, this initiative will help young people gain a better understanding of the quality of life issues."



## Bianca facilitates and speaks at annual national conference

**Bianca Neumann-Morris, from our Family Support Team, facilitated a day at the annual national conference of the Association of Bereavement Service Co-ordinators.**

In her role within the National Bereavement Evaluation Forum, a specialist task group in the national bereavement alliance, Bianca was asked to be part of the conference planning team.

Bianca helped to construct the two-day conference and facilitated and presented on day one. Her presentation was very well received and the focus of that day was exploring 'Practitioner Resistance to Change, the underlying psychological processes and how to overcome it.



## Chief Executive delivers a passionate presentation

**Chief Executive, Dr Barbara Gale MBE, received a round of applause for her passionate talk on the need to support people to have 'better deaths' and developing compassionate communities.**

Barbara spoke at the University of East Anglia's public seminar on "Compassionate Communities: A public health approach to palliative and end-of-life care."

Dr Guy Peryer, Lecturer in Applied Health Sciences and seminar organiser, said:

"Barbara gave an excellent presentation describing the future of hospice care, the need for strong leadership, and the importance of shouldering certain risks that are currently limiting the type and value of care and support that community members want to provide."

The conference was organised by the University, the Eastern Academic Health Sciences Network, Collaboration for Leadership in Applied Health Research and Care East England (NIHR) and the British Society of Gerontology.

Barbara's talk is available online:

<https://www.youtube.com/watch?v=2SA4Z8fTQWE>



# Public Health Palliative Care International conference

**Five members of our staff attended the sixth Public Health Palliative Care International Conference in Australia.**

Entitled 'Compassionate Communities in Action: Re-claiming Ageing, Dying and Grieving', the conference explored the public health approach to end-of-life care.

Glenn Hubbard and Bernie Ryan-Self from Hospice Neighbours, alongside Service Design Programme Manager Jessica Hulbert, Lisa Patterson from our Education Team and Bianca Neumann-May from Family Support, presented ideas from St Nicholas Hospice Care about how the Hospice is striving to equip people living with dying, death, grief and caring.

The group attended a variety of workshops, showcased posters and presented on topics such as Life's Questions and our service design journey, all on an international stage. Below is an account of the experience of one of our delegates, Lisa, who emailed the Hospice at the time:

"What an amazing first two days. We have been welcomed with Wagana Aboriginal Dancers and invited to take part in the women's traditional Tea Dance.

"We welcomed in the new President Dr John Rosenberg of PHPCI and I attended the Coffin Club and also learnt of Shroud Mementos - how families can get involved in creating and colouring shrouds to express their feelings/love emotions.

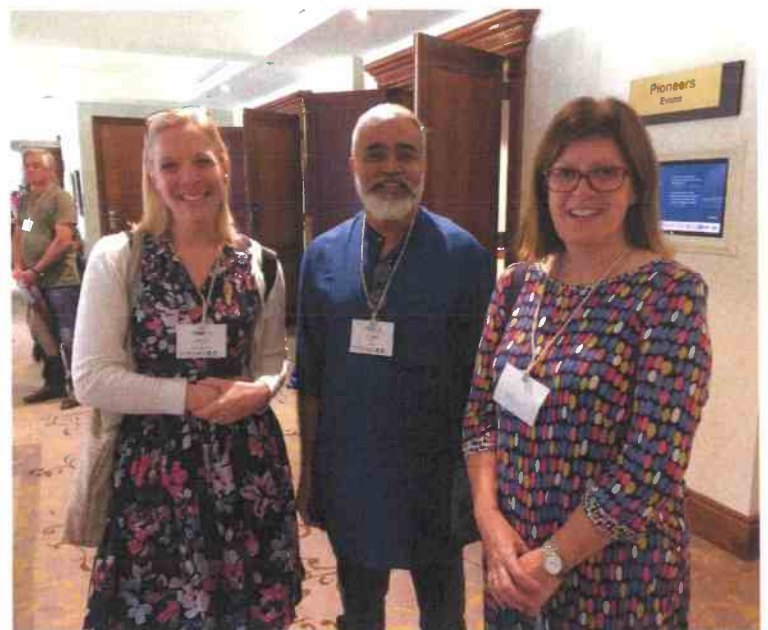
"There are approximately 350 people here, the number of delegates has grown over the years since the conference started with less than 100 in Kerala.

"This morning we were told of the history of this land, the First Nation, a history that we were not all aware of through the words and experience of Susan Moylan-Coombs a woman from the Lost Generation. Dr Tess Moeke-Maxwell then presented the digital research of end-of-life care of the Aotearoa.

"It's fair to say the morning was so powerful it moved the delegates and generated a standing ovation. I attended a workshop on Implementing Difficult Conversations from a Family Support Team.

"This afternoon was again moving when I listened to a researcher talk of sibling death and its lifetime impact. Out of that session, I took away a comment from her research that a sibling reported which was that what helped was the 'friends that got it'. - I can only hope that through Life's Questions we can encourage listening, hearing and understanding.

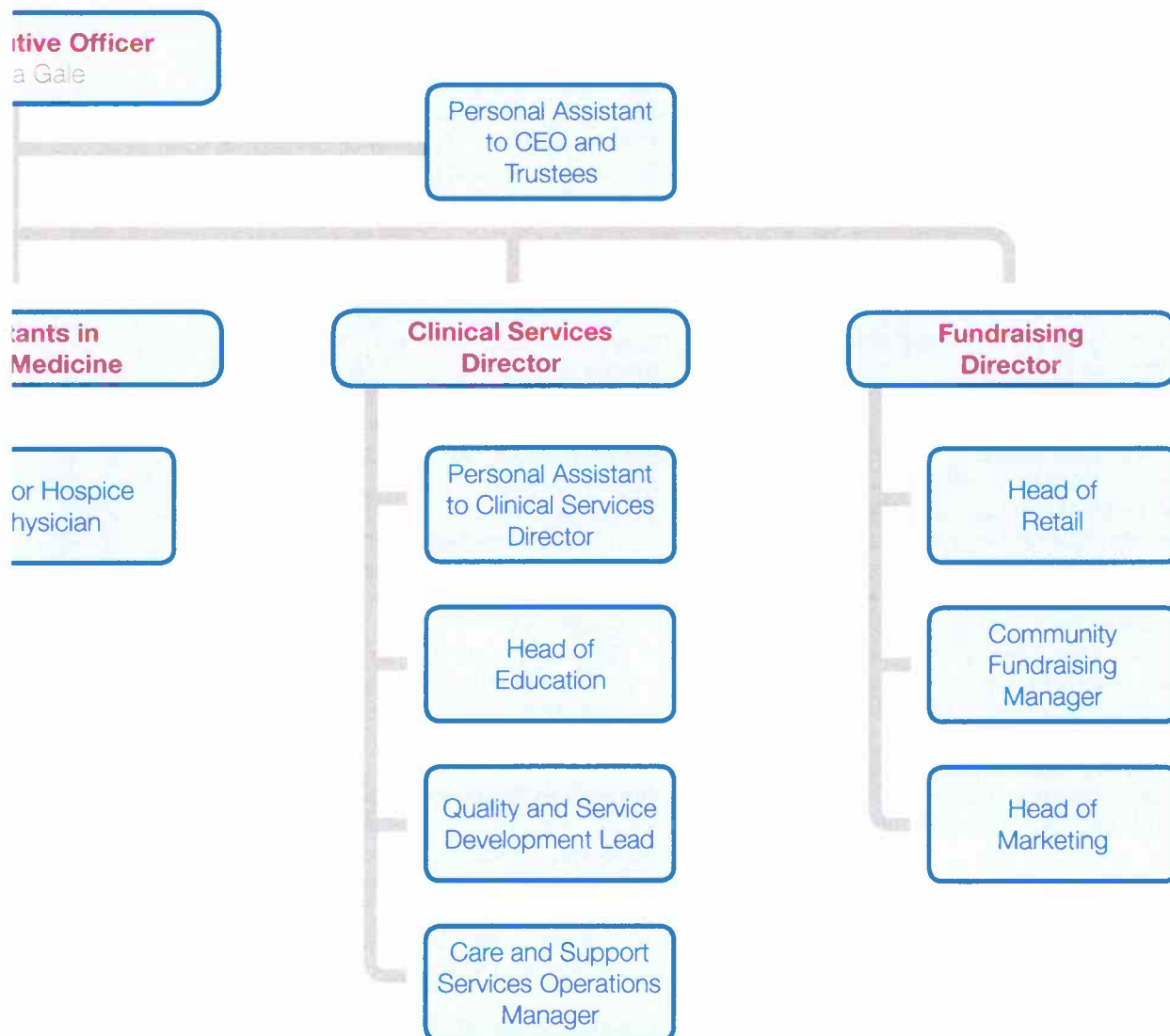
"I also heard Mary Lou Kelley talk about Compassionate Ottawa. Interesting talk of communities coming together. A truly moving day and now sitting and preparing for my presentation."





# Structure, governance and management





The Trustees confirm that they have given due consideration to the Charity Commission's published guidance on the Public Benefit requirement under the Charities Act 2011.

### 1. Management and decision-making

St Nicholas Hospice (Suffolk) is a company limited by guarantee and is governed, under its Memorandum and Articles of Association, through a 57-strong membership association made up from persons from the community. The Association, in turn, appoints and monitors the performance of the Trustees. It delegates the effective Governance of the Charity to the Board of Trustees and receives reports at least once per annum. The full Board of Trustees meets quarterly to review performance and delivery of the strategic plan. Additional meetings and away days are held to cover specific areas of focus, review strategy and direction, and the governance arrangements in place.

### 2. Register of members

The register of members is available for inspection free of charge, at the registered office of the charitable company.

### 3. Our workforce and management structure

The management and leadership of the Hospice is led by the Chief Executive who chairs a weekly Directorate meeting with the Palliative Care Consultants, Clinical Services, Finance, Fundraising and Marketing, and Human Resources Directors. The Directorate meets regularly with the Operational Managers' Forum to ensure good cross-organisation planning and management. The Chief Executive meets formally with the Chairman of the Board of Trustees and/or Vice-Chairman at least twice a month. On 31 March 2019, the Charity employed 194 staff, over half of whom were part-time (equating to 156 full-time equivalents), and 657 formal volunteers.

### 4. Board of Trustees committees

During the year, the Board has continued to operate four committees with specific terms of reference and functions delegated by the Board and with a Trustee as Chairman appointed by the Board - Clinical Committee, Finance and Investment Committee, Human Resources Committee, and the Income Generation Committee. These committees include co-opted members with relevant experience from the Association and the majority of Trustees aside from the Chair serves on at least one Sub Committee. The meetings are attended by the Chief Executive and relevant Director; other

Directors attend when requested.

The Board is currently reviewing the terms of reference for the committees to ensure they continue to be fit for purpose. Since September, the Finance and Investment and Income Generation Committees have held joint meetings. The committees review directorate KPIs, monitor risk, incidents, complaints, health and safety and managers' recommendations for developments. The Chair of each committee reports back to the Board about matters discussed at each meeting.

1. **The Clinical Committee** oversees all clinical matters with particular reference to palliative care and clinical standards and medicines management. It monitors performance and quality. The meetings are attended by the Chief Executive, the Clinical Services Director and the Consultant in Palliative Medicine.
2. **Finance and Investment Committee** oversees all financial aspects of the Charity's activities. It reviews the budget and monitors performance against it. It also considers the appointment, resignation or dismissal of the external auditors and approves their annual fee. The meetings are attended by the Chief Executive, and the Finance Director. The committee reviews the:
  - Charity's investment strategy and monitors investment performance,
  - Audited financial statements of the Charity and recommends them to the Board, and
  - Reports from the external auditors and monitors management actions to implement recommendations made in reports from the auditors.
3. **The Human Resources Committee** reviews and monitors remuneration and employment policy and recommends to the Board of Trustees the annual employee percentage salary increase. The meetings are attended by the Chief Executive and the Human Resources Director.
4. **The Income Generation Committee** oversees the retail, fundraising and marketing strategy, policy and performance and reports its findings and recommendations to the Board. The meetings are attended by the Chief Executive and the Fundraising and Marketing Director.

The Board of Trustees fulfils their key role and function in overseeing and directing the affairs

of the Charity, ensuring that it is well run and delivering the charitable outcomes for which it was established. The above committees are part of that process. The day-to-day running of the Hospice is entrusted to the Chief Executive who delegates that work through the Directorate and Management Team to the staff and volunteers deployed across the Charity's services.

### **Trustee recruitment and induction**

All current Board members have been appointed to the Board of Trustees based on their experience, expertise, and community involvement, and for their commitment to and passion for the work of St Nicholas Hospice Care and the hospice movement in general. All appointments to the Board are confirmed by the Association at its Annual General Meeting (AGM). The Board Chairman and Committee Chairs oversee the process of succession planning, recruitment and induction of Trustees and recruitment of Association Members serving on the Board Committees and will also meet with all prospective Trustees. Their work will include an ongoing skills audit and looking at different methods of recruitment.

As part of their induction, Trustees receive introductory information including planning and financial documents, national guidance about being a Trustee and information relevant to the Hospice. They see the work of the Charity first-hand and are given ample opportunities to engage with the Charity's activities, services, staff and volunteers – and with service users as appropriate. Prospective Trustees will normally attend at least one Trustee meeting, before being asked to enter the formal processes of application and acceptance. Once approved new Trustees will usually identify particular areas of interest and will especially spend time in those areas.

### **Our Trustees**

The Board of Trustees is made up of between no less than seven and no more than 12 Trustees.

During the year, the following Trustees resigned:  
Revd Canon M. Vernon  
Malcolm Leith

All have given much support to the Charity and their input and expertise have been of great value.

During the year the Hospice conducted a successful Trustee recruitment campaign, and over 37 people expressed an interest in a role and 24 people applied to be a Trustee after

further discussions and interviews four people joined the Board as Trustees in May 2020 to be endorsed at the next AGM.

David Wilkes (resigned in August 2020)  
Anne Fisher  
Donna Forster  
Neil Morgan

In addition, the Trustees welcomed Sam Turner who joined the Board as Young Shadow Trustee, which is part of a programme endorsed by Community Action Suffolk to develop young people as future charity leaders.

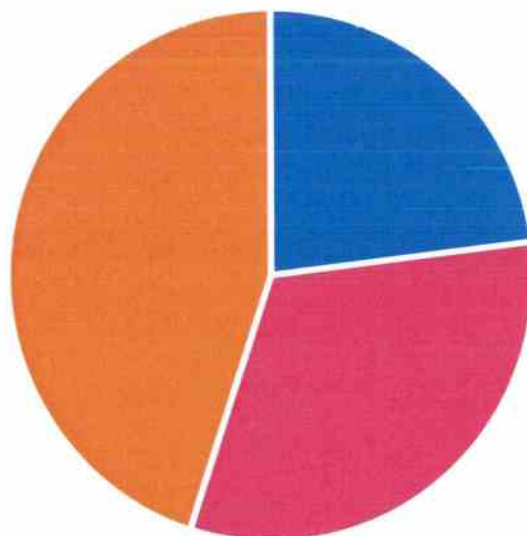
# Our people

## Recruitment

Recruitment was average for this year with 32 new appointments to either fixed-term or permanent roles. Most notably, we recruited to the Head of Fundraising position, which enabled the Fundraising and Marketing Director to operate at a more strategic level.

Average headcount figures for 2019/20 were 194 compared to 190 in 2018/19. The full-time equivalent (FTE) figures for the same periods are 156 (2019/20) and 154 (2018/19). This represents a 1.3% increase in FTE.

## Total New Starters 2019/2020



**23%** Income Generation

**32%** Service Delivery

**45%** Support and Admin

## Remuneration and benefits

Employee Costs were £5.683m compared to £5.399m last year. This reflects investments in Service Design and income growth, as well as a pay award of 1.5%.

Some 46 employees are in the NHS pension scheme (principally clinical staff), and 132 employees in the Aegon Group Personal Pension Plan.

The employer's contributions vary from 14.38% for those in the NHS scheme, and either 5% or 7% for those in the Group Personal Pensions Scheme.

## Employee wellbeing

In November 2019, staff and volunteers attended the Hospice's first Wellbeing Morning.

Plenty was going on, with massages, hypnosis tasters, car winter checks and yoga sessions all proving popular. Staff who were eligible could also have an NHS health check, and representatives from Suffolk Mind and Woolpit Complementary also attended.

The Hospice's Mental Health First Aiders were also there to chat to staff and volunteers.

## Development of staff

The key focus areas for 2019/20 has been to ensure we are supporting staff to be compliant with their mandatory and statutory training, particularly in line with governance requirements, such as the DSP Toolkit. We have also supported a varied Mini-Bite schedule on both clinical and non-clinical topics and continued to develop the Learning & Development provision on Compass as much as possible, including the implementation of quarterly compliance reports for operational managers. A Training and Development Bulletin has been created to keep employees more informed about learning and development requirements and opportunities.

Finally, we have commenced the implementation of a Leadership programme, compiling and publishing a Leadership Toolkit to support new and existing managers.

### Equip Workshops

The workshops, which took place in June, were a chance for staff, volunteers and the wider community to come together to share thoughts and discuss ideas.

The sessions intended to offer greater detail on the different ways we can work with the community, and we wanted attendees to see how everyone can play an active role in helping more people living with dying to receive compassionate support.

### Volunteering

At the end of 2019/20, we had 643 volunteers supporting all areas of the organisation. We have developed an electronic Volunteer Induction Handbook for new starters.

### Communication

This year, working with the marketing team, we have introduced the organisation to Workplace by Facebook. This is a closed social media platform for Hospice employees. It is working well and gives a vital link to all employees across sites and departments to meet, chat and share ideas.

### Rev'd Canon Richard Norburn's commemoration

The Hospice held a commemoration event for our founder Canon Richard Norburn.

The event was well attended by the Norburn family, staff and volunteers. Chaplain Sharon,

Chairman, Charles and Chief Executive, Barbara, reflected on Richard's dedication before his wife Joyce unveiled a plaque.

Barbara said: "God equipped Richard, we now want to go forward and equip everyone, because everyone matters and we now need to reach more people. Our strategy is equipping our community, providing more care and really striving for that innovation. Richard was so innovative in his time and we have to hold on to that and do more of it."



# Clinical quality and assurance

**The Hospice has a clinical governance structure to monitor, review and ensure safety and quality in clinical services.**

**We promote a culture of learning and improvement to deliver the best care to everyone experiencing dying and grief.**

## Quality assurance monitoring and reporting structure



## Clinical incidents

Serious incidents

0

Safeguarding

2

General

13

Data Protection/  
GDPR

15

Medication

29

Slips, trips  
and falls

43

Pressure  
ulcer

69

Total

171

## Clinical complaints and concerns

Concerns

16

Complaints

18

Total

34

Hospice UK  
benchmarking figures

All incidents, complaints and concerns are investigated thoroughly with learning outcomes identified and subsequent action plans developed for monitoring and improvement.

## Safeguarding

Throughout 2019/20, we continued to contribute to Suffolk Safeguarding Partnership and implement the 2018/19 framework. A training programme to support the new framework continues to be rolled out across Hospice employees and volunteers. This includes Prevent training which helps staff safeguard vulnerable people from being radicalised to supporting terrorism or becoming terrorists themselves. There were a total of 14 safeguarding concerns reported to the three Hospice safeguarding leads during the year.

## CQC preparation

In April 2016, an inspection team from the Care Quality Commission (CQC) rated St Nicholas Hospice Care as 'Outstanding' following a two-day unannounced visit, inspected under the governance group of Adult Social Care. Following a review and consultation of the inspection framework in 2018, Hospices are now to be inspected under a new governance group – Independent Health Care Services. In preparation for an inspection by 2021, collation of evidence and benchmarking under the key lines of enquiry was undertaken throughout the year:

- Are they safe?
- Are they effective?
- Are they caring?
- Are they responsive to people's needs?
- Are they well-led?

Before a comprehensive inspection, CQC will ask for information to help plan the inspection and to understand more about the care and the services provided. In December 2019, CQC submitted a provider information request to the Hospice. We expected an inspection by May 2020. Unfortunately, due to Covid-19, the inspection has been postponed until further notice.

## Audit

Sixteen different audits are completed repeatedly or individually throughout the year. Seven of these are mandatory. The audits completed help the Hospice to identify where improvements need to be made.

## User Advisory Group (UAG)

The UAG continued to meet quarterly throughout the year. The group supports the improvement and development of Hospice services. In 2019/20 the group:

- Informed development of the 5x5 patient experience questionnaire. Each Hospice team asked five questions to five people who had used the service and feedback was collated for analysis, with improvements identified for 2020/21.
- Input into CQC preparations, with the opportunity to be involved in mock CQC inspections.
- Reviewed development of a ward information booklet, planned to be available for visitors.
- Learned about the Hospice's Life's Questions education programme for young people.

## Improvements identified for 2020/21

- Review of audit schedule
- Record compliments
- Equality and diversity.

**PATIENT REGISTRATION AND HEALTH HISTORY**

**PERSONAL INFORMATION:**

4. In order to provide you with optimum dental care we require a thorough medical and dental history. Please take a moment to answer each question on BOTH sides of this form.

**PATIENT INFORMATION:**

NAME: Mr. John Doe

DATE OF BIRTH: 01/01/1980

SEX: M

STREET: 123 Main St

CITY: Anytown

STATE: CA

ZIP: 90210

WORK: ABC Corp

GROUP #: 12345

E-MAIL: john.doe@email.com

TEL HOME: 555-1234

INSURANCE CARRIER: Blue Cross

NAME OF SPOUSE: John Doe

DATE OF BIRTH: 01/01/1980

SEX: M

STREET: 123 Main St

CITY: Anytown

STATE: CA

ZIP: 90210

WORK: ABC Corp

GROUP #: 12345

SECONDARY CARRIER: Blue Cross

NAME OF SPOUSE: John Doe

DATE OF BIRTH: 01/01/1980

SEX: M

STREET: 123 Main St

CITY: Anytown

STATE: CA

ZIP: 90210

WORK: ABC Corp

GROUP #: 12345

Who has referred you to our office?

**MEDICAL HISTORY: (CONFIDENTIAL)**

Do you have any of the following diseases or problems?

High Blood Pressure? No

Heart Disease? No

Diabetes? No

Any Kidney Problems? No

Any other medical problems? No

Are you on any medicine, drugs, or pills? No

Have you ever had a serious illness, operation, or hospitalization? No

Do you smoke? No

Do you drink alcohol? No

Do you have any other medical problems? No

£ £ £ £  
**£6.2m**

**total Hospice  
income** in the  
financial year  
2019/20

**Donations,  
Legacies and  
Grants** totalled

**£2.3m**

The **Hospice's  
Lottery** raised

**£456k**



# Income generation

**The Hospice is immensely grateful for and humbled by the close connection it shares with the community. The Hospice could not reach and help the number of people it does without the community's passion and generosity.**

**There are always more people than we can possibly thank but please read just a handful of the wonderful stories from the last year and join us in celebrating in the achievements of our supporters and income generating teams.**

## **A family's incredible fundraising has become a lasting legacy as their efforts have led to more than £60,000 raised for the Hospice.**

In June 2015, the family of Zena Butcher came together to launch the Zena 10 fundraising campaign. The total they have raised now amounts to £62,000.

Initially, the group, led by Zena's daughter Connie Gibbs, Zena's partner Darren Gibbs and her sisters Tracey Butcher and Mandy Smart, wanted to raise £10,000 in four months to mark the 10th anniversary of her death.

The family wanted to support the Hospice because of the help they received during Zena's six-year battle with a malignant brain tumour.

Tracey said: "Zena's personality was infectious, her kindness, her sense of humour. This has all been for her, so we can remember and create a legacy, which I think has been reflected in our fundraising, which has been a celebration of her life.

"The balls we have organised have always been for friends and family to enjoy, and that's what they have been, just as Zena would have wanted."

The team were pushed over the £60,000 mark following their latest annual ball, which raised £4,375.

Mandy said: "Our fundraising really has been a team effort. The response we have had over the years, from companies, businesses, family, friends and individuals, has been fantastic.

"People have run marathons, sponsored events, netball tournaments, head shaves and cycle rides and joined in Girls Night Out, all of which have contributed to this amazing achievement."

The group are determined to carry on with their fundraising and have their next ball booked in November at Ashlar House.

Some of the money raised has been used to fund Nicky's Way, which helped Connie and Darren after Zena died aged 37 in 2005.



## A group of friends are dealing all the right moves when it comes to fundraising

The Bury Friends Group began fundraising eight years ago and since then they have put their hand to organising regular events including the popular card playing afternoons, Bridge for Fun.

The groups' ongoing dedication to fundraising has resulted in £34,220.

Bridget Alexander, a member of Bury Friends Group, became involved in fundraising for the Hospice in 2011.

She said "I was introduced to the Hospice by Jane Rutherford who was Vice-Chair of the trustee board at that time and sadly died unexpectedly in October 2012

"I became a volunteer and met the head of fundraising on a training course. He asked me if I would like to organise fundraising events for the Hospice which I have done so ever since in Jane's memory."

Bridget asked her friends if they would like to help her and since then they have provided all of the food for the Bury Friends Group events.



## Big high-fives to the 180 Beaver Scouts

Some 180 Beaver Scouts from Lakenheath, Horringer, Honington, Red Lodge, Great Barton and Ixworth, who re-created their own version of Girls Night Out and took part in a two-mile walk around Nowton Park.

The £1,767 raised will help us to continue supporting bereaved children through our Nicky's Way programme.



## Hospice wins Charity Retail Association Award

The Hospice was the proud winner of a Charity Retail Association Award this week.

Karen, Head of Retail, received the "Most Valuable Item Sold (Under 100 shops)" award.

The Hospice's warehouse staff found some jade in a box of donated goods last June. They cleaned it up and took it to auction where it was sold for £11,500.





### Accumulator Challenge raised more than £30,000

Businesses battled to be named top dog in the 1 Accounts Online Accumulator Challenge.

The 35 firms involved in the three-month challenge have each spent the summer trying to turn a £50 stake, donated by sponsors 1 Accounts Online, into as much money as possible for the charity.

The businesses gathered at the Hospice for a special awards evening, where they learned they had raised a grand total of £33,274.

### Success for Hospice's skydive day

A group of 13 fundraisers who took the plunge for the Hospice raised an amazing £6,000 in July 2019.



### Newmarket shops wins best charity retailer award

The Hospice's Newmarket shop was recognised when it won 'Newmarket BID Business Award for Best Charity Retailer in the Town'.

Martin, Manager of the boutique style shop in the High Street, said:

"I was very proud to receive this award on behalf of the Hospice. This award was mainly based on customer service and shop standards and is all down to the hard work, great skill and teamwork of our staff and volunteers at the Newmarket store."

# Fundraising Compliance Report

St Nicholas Hospice Care employs a core fundraising staff to develop, promote and run a range of fundraising campaigns, assisted by vital volunteers and taken up by our supporters. We steward our donors and promote our fundraising campaigns to them, and the wider community which we serve, through direct mail, e-mail contact, telephone and digitally. Our in-house fundraising team are supported by a canvassing organisation who promote our lottery door to door, together with a self-employed person.

We constantly monitor the cost and time which goes into each fundraising activity against the financial return to ensure we are making the most of every donation received.

We are registered with the Fundraising Regulator and work in accordance with the Code of Fundraising Practice, and the best practice laid out by the Hospice Lotteries Association, Institute of Fundraising and Institute of Legacy Management. Our lottery and raffles are promoted in accordance with the Gambling Commission guidelines and we have checks in place to monitor third parties who carry out work for us, or for whom we enter into contracts with.

We appraise the commercial marketplace before entering into contracts with others and ensure our supporters enter into written agreements with us when promoting or selling products or activities which raise funds for us. Our staff are encouraged to be actively involved with these organisations at a strategic level, and we meet the standards required of these memberships.

We received no complaints through the Fundraising Regulator, two suppressions of contact which we put in place, and received two other complaints during the year, which were logged, dealt with and responded to appropriately.

We review the frequency and appropriateness of our communications and provide an option for supporters to 'opt-out' of our communications. We contact based on legitimate interest, and also run vulnerability checks and have a self-exclusion form on our website for gambling-related products.

We continue to listen to our supporters and to learn from them to shape our fundraising activity. Our supporters are very important to us, and we put them at the heart of everything we do.



**GAMBLING  
COMMISSION**



## Thanking Trusts and Foundations

**Thank you to all of the other Trusts and Foundations, which have supported our work during 2019/20.**

Funding from Suffolk Community Foundation through the Suffolk Giving Fund.

Funding from Suffolk Community Foundation through the Martineau Fund

Funding from Suffolk Community Foundation through the Suffolk Carers' Fund

Funding from Suffolk Community Foundation through the Pargiter Fund

Funding from Suffolk Community Foundation through the Fonnereau Road Health Foundation Fund.



# Going concern

Like many other charities, the Hospice faces the challenge of providing an equitable service which can respond flexibly to the changing and growing needs expressed by people in the local community, as well as ensuring the charity remains financially sustainable. The Trustees have considered the following areas specifically in their assessment of going concern:

At the end of the financial year 2019/20, the Charity has reserves amounting to £7.999m of which £5.454m are free reserves which exceed the target of six months total running costs. This allows for investment in services, income generation and infrastructure to further the Charity's aims and objectives as well as providing funds to mitigate against economic uncertainty.

## **The impact of Covid-19 on going concern**

The impact of Covid-19 required the senior management team to completely revise the original plan to deliver the new clinical model over three years. A proposal has been put forward, which would implement the changes required to deliver the model and the financial savings required during the financial year 2020/2021 to ensure financial sustainability.

Part of this proposal would be to restructure teams across clinical, fundraising and retail departments to maximise income and deliver savings of £1.2m in 2021/22.

The ongoing challenges of Covid-19 will mean plans will have to be continually reviewed, recognising the impact on income generation activities.

## **Fundraising**

St Nicholas Hospice Care has a diverse range of income-generating activities including grants and donations, investment, fundraising, retail, event and lottery income. While some of these income streams are inherently volatile, the Charity has policies in place to manage these risks including specific investment and reserves policies, explained in the Trustees Report. The ongoing use of designated funds to improve existing or develop new income streams will add to this diversification and enable the Charity to continue serving our local population.

## **NHS Grant Funding**

West Suffolk Clinical Commissioning Group (WSCCG) is the main single NHS funder and continues to support the work of the Charity. The Charity has agreed with WSCCG that there will be a gradual increase in income over five years, from £945k to £1.4m March 2024.

## **Reserves**

# Trustees' responsibilities in relation to the financial statements

The Trustees (who are also the directors for the purposes of company law) are responsible for preparing the Trustees' Report and the financial statements in accordance with applicable law and regulations.

The law applicable to charities in England and Wales requires the Trustees to prepare financial statements for each financial year which give a true and fair view of the state of the affairs of the charity and of the incoming resources and application of resources of the charity for that period. In preparing those financial statements, the Trustees are required to:

Select suitable accounting policies and then apply them consistently

- Observe the methods and principles in the Charities SORP;
- Make judgments and estimates that are reasonable and prudent;
- State whether applicable accounting standards have been followed, subject to any material departures disclosed and explained in the financial statements; and
- Prepare the financial statements on the going concern basis unless it is inappropriate to presume that the company will continue in business.

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

The directors are responsible for the maintenance and integrity of the corporate and financial information included on the charity's website. Legislation in the UK governing the preparation and dissemination of financial statements and other information included in the annual report, may differ from legislation in other jurisdictions.

## Statement as to disclosure of information to the Auditor

In accordance with company law, as the charity's Trustees, we certify that:

- So far as we are aware, there is no relevant audit information of which the charity's auditor is unaware
- We have taken all the steps that we ought to have taken in order to make ourselves aware of any relevant audit information and to establish that the charity's auditor is aware of the information.

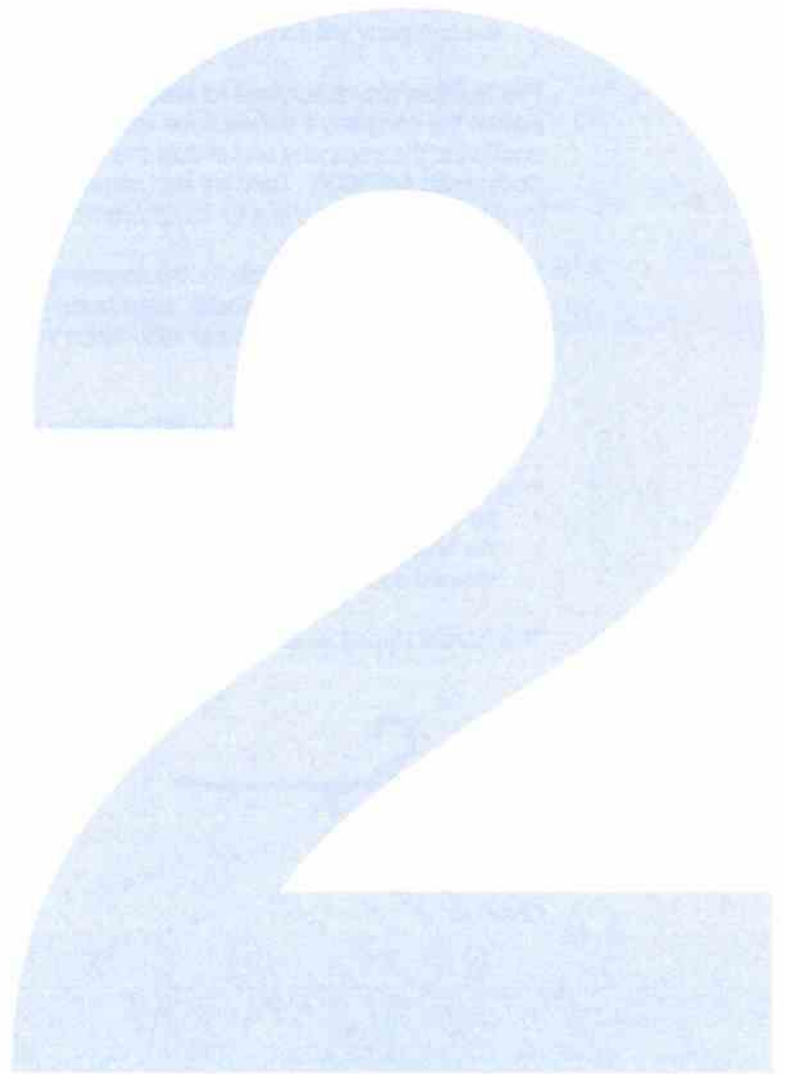
This Annual Report was approved by the Trustees on 10 December 2020.



Charles Simpson  
Chair

# *Independent Auditors Report*

For the year ended 31 March 2020



## Opinion

We have audited the financial statements of St Nicholas Hospice (Suffolk) (the 'parent charitable company') and its subsidiaries (the 'group') for the year ended 31 March 2020 which comprise the Consolidated Statement of Financial Activities, the Group and Charity Balance Sheets, the Consolidated Cash Flow Statement and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including 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 group's and the parent charitable company's affairs as at 31 March 2020 and of the group's incoming resources and application of resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

## Basis for opinion

We have been appointed auditors under the Companies Act 2006 and section 151 of the Charities Act 2011 and report in accordance with those Acts.

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 group and parent charitable company in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

## Conclusions relating to going concern

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

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

## Other information

The trustees are responsible for the other information. The other information comprises the information included in the Trustees' Report other than the financial statements and our auditor's report thereon. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

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

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

- the information given in the Trustees' Report, which includes the Directors' Report and the Strategic Report prepared for the purpose of company law for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the Directors' Report and the Strategic Report included within the Trustees' Report have been prepared in accordance with applicable legal requirements.

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

In the light of the knowledge and understanding of the group and the parent charitable company and their environment obtained in the course of the audit, we have not identified material misstatements in the Directors' Report or the Strategic Report included within the Trustees' Report.

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

- adequate accounting records have not been kept by the parent charitable company, or returns adequate for our audit have not been received from branches not visited by us; or
- the parent charitable company financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit.

### Responsibilities of trustees

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

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

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

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

A further description of our responsibilities for the audit of the financial statements is provided on the Financial Reporting Council's website at <http://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 charitable company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006. Our audit work has been undertaken so that we might state to the charitable company's members those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and the charitable company's members as a body, for our audit work, for this report, or for the opinions we have formed.



CLAIRE SUTHERLAND (Senior Statutory Auditor)  
For and on behalf of RSM UK AUDIT LLP, Statutory Auditor

Chartered Accountants,  
Abbotsgate House, Hollow Road,  
Bury St Edmunds, IP32 7FA

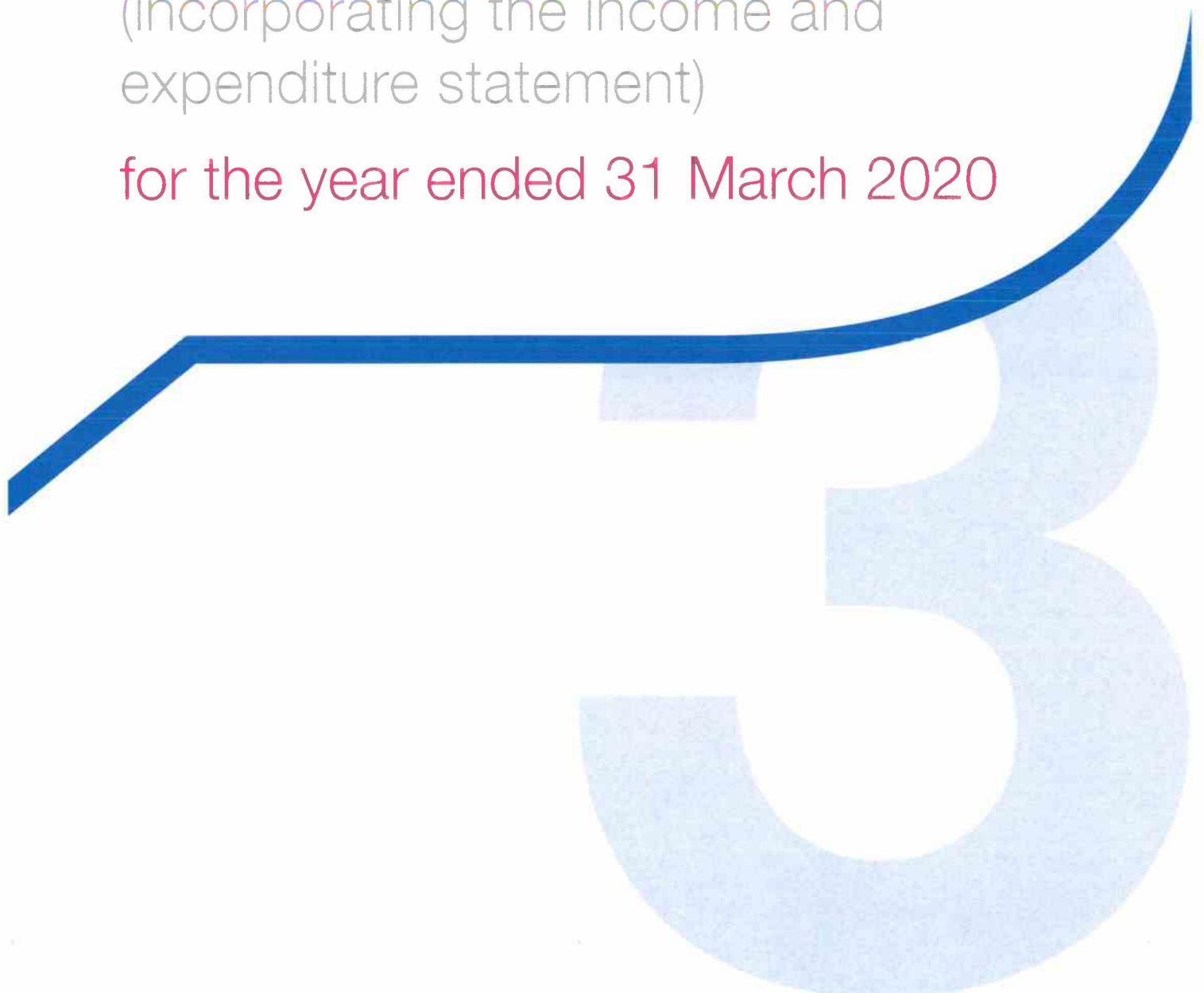
Date 18 December 2020



# *Consolidated Statement of financial activities*

(incorporating the income and  
expenditure statement)

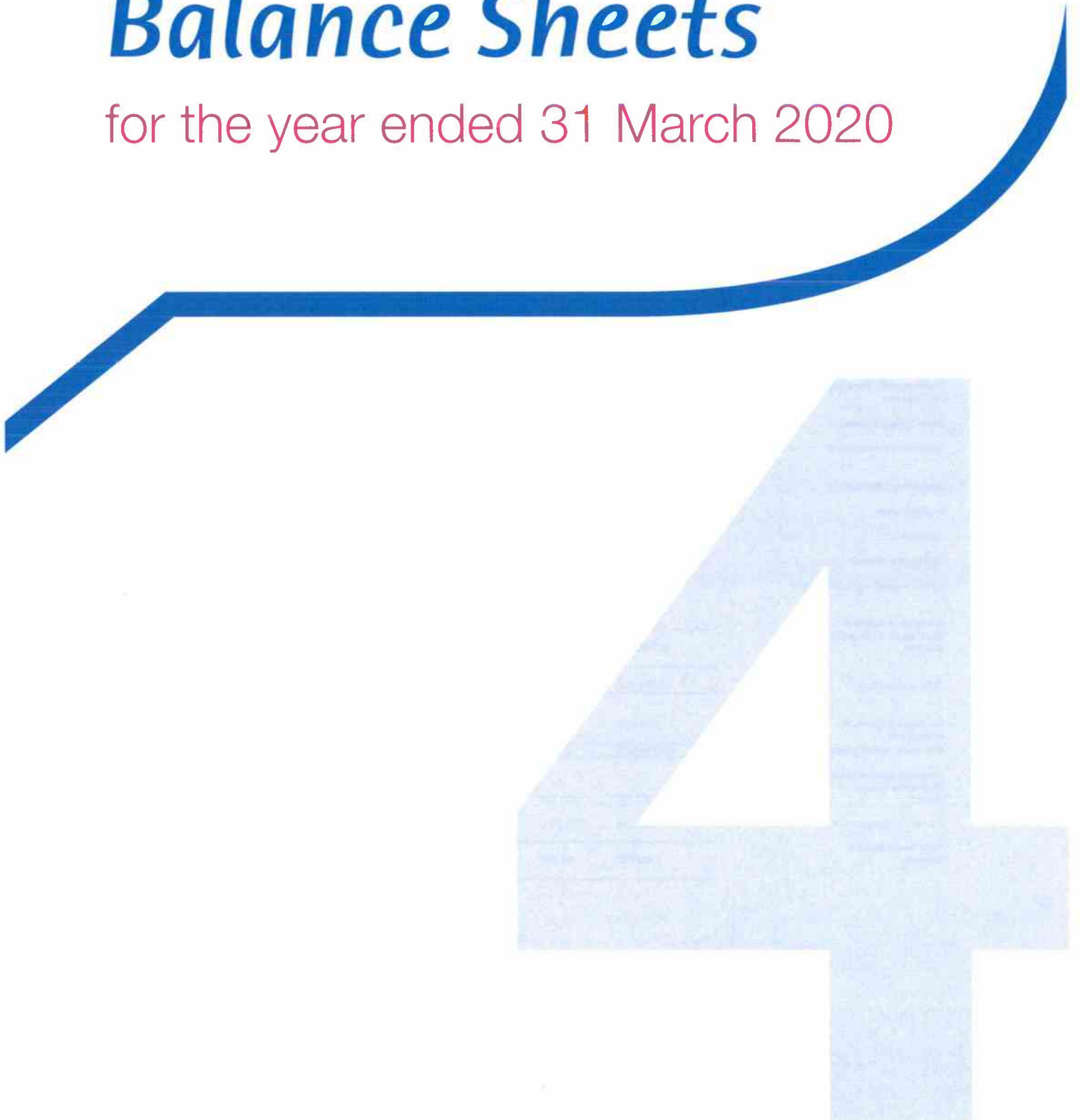
for the year ended 31 March 2020



		2020				2019			
	Note	Unrestricted Funds £	Restricted Funds £	Endowment Funds £	Total £	Unrestricted Funds £	Restricted Funds £	Endowment Funds £	Total £
Income from									
Grants, donations and Legacies									
Donations		929,119	182,576	-	1,111,695	958,769	143,703	-	1,102,472
Legacies		1,014,155	15,000	-	1,029,155	1,278,736	4,602	-	1,283,338
Grants		-	-	-	-	2,500	-	-	2,500
		1,943,274	197,576	-	2,140,850	2,240,005	148,305	-	2,388,310
Charitable activities	2	1,274,998	-	-	1,274,998	1,160,687	-	-	1,160,687
Other trading activities:									
Shops		1,468,721	-	-	1,468,721	1,400,880	-	-	1,400,880
Lottery		456,457	-	-	456,457	489,502	-	-	489,502
Fundraising		454,039	-	-	454,039	450,045	6,641	-	456,686
Other	3	57,792	-	-	57,792	48,037	-	-	48,037
		2,437,009	-	-	2,437,009	2,388,464	6,641	-	2,395,105
Investments	4	178,147	-	861	179,008	142,718	-	847	143,565
Other		165,000	-	-	165,000	-	-	-	-
Total Income		5,998,428	197,576	861	6,196,865	5,931,874	154,946	847	6,087,667
Expenditure on:									
Raising funds									
Raising grants, donations and legacies		(573,969)	(488)	(861)	(574,457)	(492,086)	-	-	(492,086)
Other trading activities		(2,212,631)	-	-	(2,212,631)	(2,149,645)	-	-	(2,149,645)
Investment management		(39,148)	-	-	(39,148)	(53,821)	-	-	(53,821)
		(2,825,748)	(488)	(861)	(2,826,236)	(2,695,552)	-	-	(2,695,552)
Charitable activities									
In patient care		(2,056,472)	(9,581)	(861)	(2,066,914)	(2,086,708)	(12,079)	(847)	(2,099,634)
Day care		(351,124)	(41,204)	-	(392,328)	(326,701)	(28,878)	-	(355,579)
Community services		(1,664,438)	(103,000)	-	(1,767,438)	(1,693,141)	(74,780)	-	(1,767,921)
Family support and bereavement		(445,279)	(11,609)	-	(456,888)	(413,120)	(18,070)	-	(431,190)
Education & research		(235,152)	(14,465)	-	(249,617)	(253,938)	(6,963)	-	(260,901)
Expenditure on charitable activities		(4,752,465)	(179,859)	(861)	(4,933,185)	(4,773,608)	(140,770)	(847)	(4,915,225)
Total expenditure	5	(7,578,213)	(180,347)	(861)	(7,759,421)	(7,469,160)	(140,770)	(847)	(7,610,777)
Net (losses) /gains on investments	11	(211,036)	-	(981)	(212,017)	(8,725)	-	926	(7,799)
Net movement in funds	8	(1,790,821)	17,229	(981)	(1,774,573)	(1,546,011)	14,176	926	(1,530,909)
Reconciliation of funds:									
Total funds brought forward		9,422,564	305,709	45,111	9,773,384	10,968,575	291,533	44,185	11,304,293
Transfer between funds		263,282	(263,282)	-	-	-	-	-	-
Total funds carried forward		7,895,025	59,656	44,130	7,998,811	9,422,564	305,709	45,111	9,773,384

# *Group and Charity Balance Sheets*

for the year ended 31 March 2020



		Group		Charity	
	Note	2020	2019	2020	2019
		£		£	£
<b>Fixed assets</b>					
Tangible assets	10	2,441,205	2,458,594	2,441,205	2,458,594
Investments	11	4,616,678	6,393,554	4,651,684	6,428,560
		<u>7,057,883</u>	<u>8,852,148</u>	<u>7,092,889</u>	<u>8,887,154</u>
<b>Current assets</b>					
Stock		29,696	29,290	-	-
Debtors	12	2,100,840	620,089	2,125,650	644,649
Cash at bank and in hand		789,757	831,521	760,225	800,737
		<u>2,920,293</u>	<u>1,480,900</u>	<u>2,885,905</u>	<u>1,445,386</u>
<b>Creditors: amounts falling due within one year</b>	13	1,979,365	559,664	2,037,869	610,976
<b>Net current assets</b>		<u>940,928</u>	<u>921,236</u>	<u>848,036</u>	<u>834,410</u>
<b>Net assets</b>		<u>7,998,811</u>	<u>9,773,384</u>	<u>7,940,925</u>	<u>9,721,564</u>
<b>The funds of the charity</b>					
Restricted income funds	14	59,656	305,709	59,656	305,709
Unrestricted funds:					
General fund	15	2,254,125	3,944,845	2,196,239	3,893,025
Designated fund	15	5,640,900	5,477,719	5,640,900	5,477,719
Endowment fund	16	44,130	45,111	44,130	45,111
<b>Total funds</b>	17	<u>7,998,811</u>	<u>9,773,384</u>	<u>7,940,925</u>	<u>9,721,564</u>

A separate Statement of Financial Activities (SOFA) is not presented because the Charity has taken advantage of the exemptions afforded by Section 408 of the Companies Act 2006 and paragraph 397 of the SORP. The gross income of the charity for the year was £5,878k and the net movement in funds was a deficit of £1,781k.

The financial statements were approved and authorised for issue by the Board of Trustees on 10 December 2020.



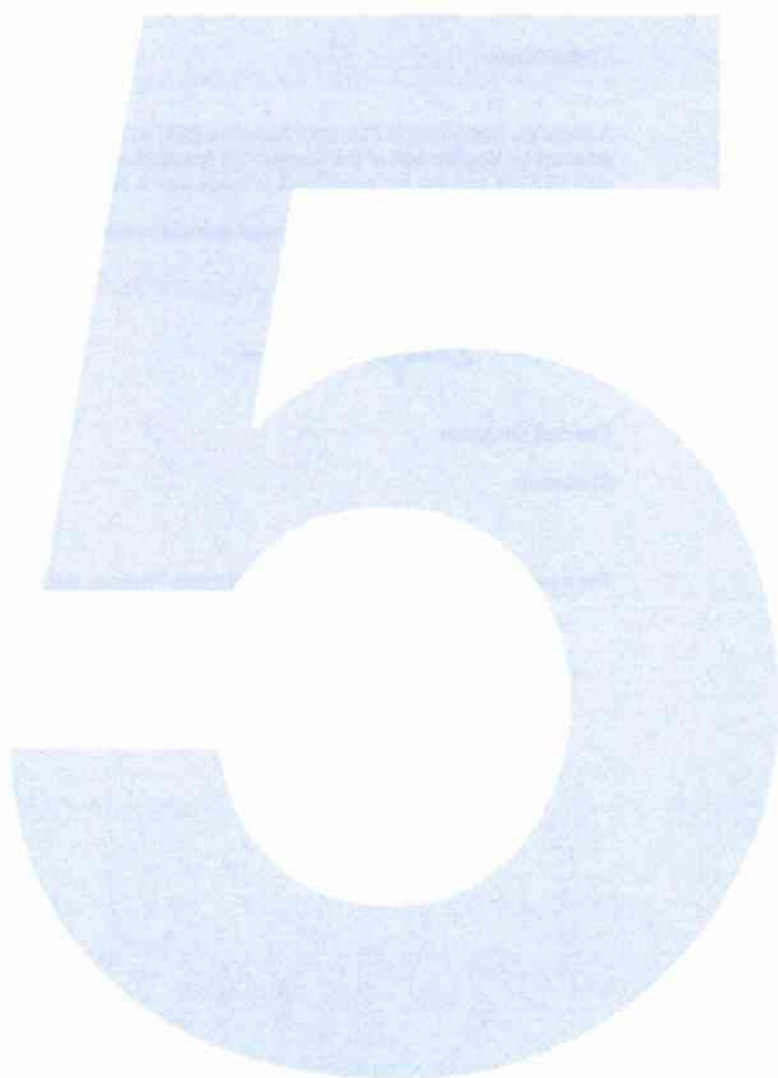
Charles Simpson

Chairman

The notes on pages 67 to 82 form part of these financial statements.

# *Consolidated cash flow statement*

for the year ended 31 March 2020



Note	Group	
	2020 £	2019 £
<b>Cash flows from operating activities:</b>		
Net cash used in operating activities	20 (1,630,155)	(1,002,637)
<b>Cash flows from investing activities:</b>		
Dividends and interest from investments	176,549	139,199
Interest received	2,459	4,366
Proceeds from the sale of tangible fixed assets	-	2,500
Payments to acquire tangible fixed assets	(155,476)	(164,027)
Proceeds from the sale of investments	3,421,283	2,836,228
Purchase of investments	(1,909,094)	(2,497,494)
Net cash provided by investing activities	1,535,721	320,772
<b>Change in cash and cash equivalents in the year</b>	<b>(94,434)</b>	<b>(681,865)</b>
Cash and cash equivalents at the beginning of the year	1,022,250	1,704,115
<b>Cash and cash equivalents at end of the year</b>	<b>21 927,816</b>	<b>1,022,250</b>

# *Notes forming part of the financial statements*

for the year ended 31 March 2020

## 1 Accounting policies

### *Basis of preparation*

St Nicholas Hospice (Suffolk) is a private company limited by guarantee, and is registered, domiciled and incorporated in England. The registered office of the company is Hardwick Lane, Bury St Edmunds, Suffolk, IP33 2QY.

The financial statements are prepared under the historical cost convention, with the exception of investments which are stated at market value, and in accordance with applicable accounting standards and the Companies Act 2006. The financial statements also comply with the Statement of Recommended Practice applicable to charities preparing their accounts in accordance with FRS 102 and the Charity SORP (FRS 102).

The financial statements are prepared in sterling, which is the functional currency of the company. Monetary amounts in these financial statements are rounded to the nearest £.

### *Going concern*

The Trustees have considered the financial position of the Charity. In light of the above, the investment portfolio, the 2021/21 and the 2021/22 budgets and the planned service delivery model. As a consequence, The Trustees believe that Charity is well placed to manage its business risks successfully through these difficult and uncertain times.

The Trustees have a reasonable expectation that the Charity has adequate resources to continue in operational existence for at least 12 months from the date of approval of the financial statements, due to:

- Regular re-forecasting and monitoring of accounts including cash flow
- Robustness of income generation and legacy forecasts
- A regular review of investments
- The management teams planning and willing to implement significant changes to working practices and use of assets to ensure future sustainability to continue charitable activities.
- Maintain current reserves policy.

The Trustees have not identified any material uncertainties in relation to going concern and therefore continue to adopt a going concern basis of accounting in preparing the financial statements.

### *Group accounts*

The consolidated financial statements incorporate the accounts of the Charity and those of its trading subsidiary, St Nicholas Hospice Trading Limited for the year ended 31 March 2020.

### *Income*

Income is included in the Statement of Financial Activities when the charity is entitled to the income, the amount can be quantified with reasonable accuracy and there is probability of receipt.

Income from NHS contracts and other grants is included on a receivable basis.

Legacies and donations are included when the aforementioned recognition criteria have been met.

Dividends and interest on fixed interest securities are included in the accounts when due.

Lottery income is accounted for in respect of those draws that have taken place in the year.

### *Expenditure and irrecoverable VAT*

All expenditure is accounted for on an accruals basis (that is, recognised once there is a legal or constructive obligation committing the charity to the expenditure), and has been classified under the headings that aggregate all costs related to the category. Where costs cannot be directly attributed to particular headings they have been allocated to activities on a basis consistent with use of resources.

- Costs of raising funds are those costs incurred in seeking voluntary contributions and in trading activities and do not include the costs of disseminating information in support of the charitable activities.
- Charitable activities include expenditure associated with the provision of hospice services and include both the direct costs and support costs relating to these activities.
- Support costs are those costs incurred directly in support of expenditure on the objects of the charity and include project management carried out at the Hospice. Such costs have been allocated to activity cost categories on a headcount basis.

Irrecoverable VAT is charged against the category of expenditure for which it was incurred.

### *Volunteers*

The value of services provided by volunteers is not incorporated into these financial statements. Further details of the contribution made by volunteers can be found in note 7 to the accounts and within the Trustees report.

## 1 Accounting policies (continued)

### *Tangible fixed assets and depreciation*

Fixed assets costing more than £500 are capitalised, with the exception of computer equipment which is capitalised where assets cost over £100 and capital project related expenditure all of which is capitalised irrespective of value.

Depreciation is provided to write off the cost, less estimated residual values, of all fixed assets evenly over their expected useful lives. It is calculated at the following rates:-

Leasehold buildings	- remaining term of lease
Furniture and equipment	- 10% - 50% per annum
Motor vehicles	- 20% per annum
IT Equipment	- 10% - 50% per annum

### *Fixed assets donated*

Donated assets provided for use by the charity are taken to income and capitalised in the accounts at their estimated market value when donated.

### *Investments*

In the Group Balance Sheet, Investments are stated at market value, less any provision for impairment. The Statement of Financial Activity includes gains and losses arising on revaluation and disposals throughout the year.

Realised gains and losses represent the difference between the market value at the previous balance sheet date and the eventual sale proceeds or the acquisition price if bought and sold within the same year. Unrealised gains and losses represent the difference between market value at the previous balance sheet date or cost of any purchases during the year and the market value at the current balance sheet date.

In the Charity Balance Sheet, 'Investments' includes the investment in a subsidiary, which is recorded at cost.

### *Stocks*

Stock of retail goods is included at the lower of cost and net realisable value. Donated items of stock for resale or distribution are not included in the financial statements until they are sold or distributed. The Trustees consider it impractical to be able to assess the amount of donated stocks as there are no systems in place which record these items until they are sold and undertaking a stock take would incur undue cost for the charity which far outweigh the benefits.

### *Pension costs*

The charity contributes to a group personal pension plan and a defined benefit pension scheme. Contributions paid into these pension arrangements are charged to the Statement of Financial Activity when due.

A number of employees contribute to the NHS Superannuation scheme and certain other employees participate in personal pension plans. Whilst the NHS Superannuation scheme is a Defined Benefit Scheme, it is a multi-employer scheme for which the Charity's share of the underlying assets and liabilities cannot be identified; it is therefore accounted for as a Defined Contribution Scheme in accordance with FRS 102. The Charity's contributions to these schemes are therefore charged to the Statement of Financial Activity when due.

### *Employee benefits*

The best estimate of the expenditure required to settle an obligation for termination benefits is recognised immediately as an expense when the company is demonstrably committed to terminate the employment of an employee or to provide termination benefits.

### *Operating leases*

Rentals paid under operating leases are charged to the Statement of Financial Activity over the period in which the cost is incurred.

### *Impairment of fixed assets*

The need for any fixed asset impairment write-down is assessed by comparison of the carrying value of the asset against the higher of net realisable value and value in use.

### *Fund accounting*

Unrestricted funds comprise accumulated surpluses and deficits on the general fund and designated funds. They are available for use at the discretion of the Trustees in furtherance of the charity's objectives.

Designated funds are those funds designated for particular purposes or projects at the discretion of the Trustees.

Restricted funds are created when grants or donations are made for a particular purpose, the use of which is restricted to that purpose.

Endowment funds represent funds which must be held permanently by the Charity, principally as investments. Income arising on each of the endowment funds can be used in accordance with the objects of each fund and is

shown as income against that fund and allocated to costs as appropriate. Any material gains or losses arising on the investment forms part of the fund.

#### *Taxation*

The income and gains of the charity are exempt from corporation tax to the extent that they are applied to its charitable objectives. Recoverable income tax is accrued within the financial statements.)

#### *Debtors*

Trade and other debtors are recognised at the settlement amount due. Prepayments are valued at the amount prepaid. Accrued income and tax recoverable is included in the best estimate of the amounts receivable at the balance sheet date.

#### *Creditors*

Creditors are recognised where the charity has a present obligation resulting from a past event that will probably result in the transfer of funds to a third party and the amount due to settle the obligation can be measured or estimated reliably. Creditors are normally recognised at their settlement amount after allowing for any discounts due.

#### *Cash at Bank and in hand*

Cash at bank and cash in hand includes cash and short term liquid investments with a short maturity of three months or less.

#### *Financial Instruments*

The charity only has financial assets and financial liabilities of a kind that qualifies as a basic financial instrument. Basic financial instruments are initially recognised at transaction value and subsequently measured at amortised costs using the effective interest method, apart from listed investments, which are held at fair value, derived as noted within the investments accounting policy.

#### *Critical accounting estimates and areas of judgement*

Estimates and judgements are continually evaluated and are based on historical experience and other factors, including expectations of future events that are believed to be reasonable under the circumstances.

#### *Critical accounting estimates and assumptions*

The Group makes estimates and assumptions concerning the future. The resulting accounting estimates and assumptions will, by definition, seldom equal the related actual results. There are not considered to be any estimates or assumptions that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next financial year.

#### *Critical areas of judgement*

The Trustees do not consider that there are any critical areas of judgement applied in the preparation of these financial statements.

## **2 Income from charitable activities**

	2020 £	2019 £
In patient care	558,125	534,972
Day care	56,463	39,399
Community services	493,073	431,318
Family support & bereavement	79,726	75,882
Education and research	87,611	79,116
	<u>1,274,998</u>	<u>1,160,687</u>

## **3 Other income**

	2020 £	2019 £
Catering income	51,585	46,114
Other income	6,207	1,923
	<u>57,792</u>	<u>48,037</u>

#### 4 Investment income

	2020	2019
	£	£
Dividend – equities	159,383	113,916
Interest – fixed interest securities	17,166	25,283
Bank interest	2,459	4,366
	<b>179,008</b>	<b>143,565</b>

#### 5 Analysis of expenditure

	Direct Costs	Support Costs (note 6)	2020 Total Costs	2019 Total Costs
	£	£		£
Costs of raising grants, donations and legacies	463,761	110,696	<b>574,457</b>	492,086
Other trading activities	463,761	110,696	<b>574,457</b>	492,086
Shop costs	1,315,570	283,192	<b>1,598,762</b>	1,571,219
Lottery costs	180,943	11,298	<b>192,241</b>	209,782
Events costs	202,558	53,043	<b>255,601</b>	266,191
Other income	137,236	28,791	<b>166,027</b>	102,453
	<b>1,836,307</b>	<b>376,324</b>	<b>2,212,631</b>	<b>2,149,645</b>
Investment management costs	38,294	854	<b>39,148</b>	53,821
	<b>2,338,362</b>	<b>487,874</b>	<b>2,826,236</b>	<b>2,695,552</b>
In patient care	1,551,320	515,594	<b>2,066,914</b>	2,099,634
Day care	267,576	124,752	<b>392,328</b>	355,579
Community services	1,449,359	318,079	<b>1,767,438</b>	1,767,921
Family support & bereavement	325,658	131,230	<b>456,888</b>	431,190
Education and research	189,409	60,208	<b>249,617</b>	260,901
	<b>3,783,323</b>	<b>1,149,863</b>	<b>4,933,185</b>	<b>4,915,225</b>
<b>Total</b>	<b>6,121,684</b>	<b>1,637,737</b>	<b>7,759,421</b>	<b>7,610,777</b>

#### 6 Analysis of support costs

	Admin, Finance & IT	Human Resources	Maintenance and Domestic	Catering	Governance Costs	2020 Total	2019 Total
	£	£	£	£	£		£
Cost of raising grants, donations and legacies	64,463	29,156	6,729	-	10,348	<b>110,696</b>	106,183
Other trading activities	231,249	104,593	8,550	-	31,932	<b>376,324</b>	393,203
Investment management costs	-	-	-	-	854	<b>854</b>	1,555
	<b>295,712</b>	<b>133,749</b>	<b>15,279</b>	<b>-</b>	<b>43,134</b>	<b>487,874</b>	<b>500,941</b>
In patient care	164,009	74,181	82,591	160,197	34,616	<b>515,594</b>	557,171
Day care	25,431	11,502	28,450	53,399	5,970	<b>124,752</b>	126,522
Community services	190,270	86,058	9,411	-	32,340	<b>318,079</b>	335,669
Family support & bereavement	37,160	16,807	16,598	53,399	7,266	<b>131,230</b>	98,800
Education and research	33,279	15,052	7,651	-	4,226	<b>60,208</b>	64,464
<b>Charitable services</b>	<b>450,149</b>	<b>203,600</b>	<b>144,701</b>	<b>266,995</b>	<b>84,418</b>	<b>1,149,863</b>	<b>1,182,626</b>
<b>Total</b>	<b>745,861</b>	<b>337,349</b>	<b>159,980</b>	<b>266,995</b>	<b>127,552</b>	<b>1,637,737</b>	<b>1,683,567</b>

## 7 Employee Costs

	2020 £	2019 £
Wages and salaries	4,831,534	4,622,455
Social security costs	428,042	408,797
Pension costs	371,286	347,234
Other employee benefits	52,500	20,500
	<b>5,683,362</b>	<b>5,398,986</b>

Full time equivalent employees during the year were 156 (2019:154) and analysis of the headcount in the year was:

	2020 Number	2019 Number
Direct charitable services	109	108
Fundraising services	54	52
Support services	31	30
	<b>194</b>	<b>190</b>

The number of employees whose total employee benefits excluding pension contributions earning over £60,000, classified within bands of £10,000 is as follows:

	2020 Actual Number	2019 Actual Number
£60,000-£69,999	2	1
£70,000-£79,999	2	2
£80,000-£89,999	1	1
£90,000-£99,999	-	1
£100,000-£109,999	1	-
£110,000-£119,999	1	-
<b>Total</b>	<b>7</b>	<b>5</b>

Pension costs relating to those staff earning over £60,000 totalled £53,146 in 2020 (2019: £49,595).

Termination payments amounted to £52,500 (2019: £20,500) and no funding was received relating to this payment.

The Hospice considers that the key management personnel comprise of six of the senior management team – who are the Chief Executive and five other key directors. The total employee benefits of the key management personnel of the Hospice were £598,391 (2019: £518,715)

The Hospice had an average of 657 volunteers as at 31 March 2020 (2019: 660) who provided their services in the following areas:

	2020 Number	2019 Number
Retail	281	268
Clinical	145	139
Hospice Neighbours	116	118
Fundraising and support services	94	108
Trustees	10	12
Associates	11	15
	<b>657</b>	<b>660</b>

## 8 Net movement in funds

	2020	2019
	£	£
Net movement is stated after charging/(crediting):		
Depreciation	172,865	185,252
Auditor's remuneration		
-Statutory audit of charity and group	13,685	13,285
-Statutory audit of subsidiary	3,395	3,295
-Tax advisory	685	2,400
-Other services	13,658	11,353
(Profit)/loss on sale of fixed assets	-	(2,500)
Operating lease rentals	231,111	210,732

## 9 Taxation

St Nicholas Hospice (Suffolk) is a registered charity and as such is exempt from taxation on its income and gains falling within section 505 of the Taxes act 1988 or section 252 of the Taxation of chargeable Gains Act 1992 to the extent that these are applied for charitable purposes.

## 10 Tangible fixed assets (Charity and Group)

	Long Leasehold Buildings £	Furniture and Equipment £	ICT Equipment £	Motor Vehicles £	Total £
<b>Cost</b>					
At 1 April 2019	4,028,491	1,289,009	359,277	67,280	5,744,057
Additions	18,105	77,805	59,566	-	155,476
<b>At 31 March 2020</b>	<b>4,046,596</b>	<b>1,366,814</b>	<b>418,843</b>	<b>67,280</b>	<b>5,899,533</b>
<b>Depreciation</b>					
At 1 April 2019	1,799,438	1,193,441	263,478	29,106	3,285,463
Charge for the year	90,857	34,083	34,469	13,456	172,865
<b>At 31 March 2020</b>	<b>1,890,295</b>	<b>1,227,524</b>	<b>297,947</b>	<b>42,562</b>	<b>3,458,328</b>
<b>Net book value</b>					
At 31 March 2020	2,156,301	139,290	120,896	24,718	2,441,205
At 31 March 2019	2,229,053	95,568	95,799	38,174	2,458,594

The long leasehold expenditure represents:

- The building costs of the Hospice on land at Hardwick Lane, Bury St Edmunds for which a 60 year lease at a peppercorn rent was entered into on 15 August 1991
- The refurbishment of the In Patient Unit during 2008
- Office reconfigurations in 2013
- Improvements to the Orchard Day Centre on the Hospice site
- Expenditure on new and existing shops
- The development of an Outreach Centre at the Burton Centre in Haverhill.

All fixed assets of the charity are used for charitable purposes.

## 11 Investments

A) Summary	Group		Charity	
	2020	2019	2020	2019
	£	£	£	£
At start of the year	6,202,825	6,549,358	6,202,825	6,549,358
Additions	1,909,094	2,497,494	1,909,094	2,497,494
Disposals	(3,421,283)	(2,836,228)	(3,421,283)	(2,836,228)
Realised gains / (losses)	43,032	(133,192)	43,032	(133,192)
Unrealised gains / (losses)	(255,049)	125,393	(255,049)	125,393
	<b>4,478,619</b>	<b>6,202,825</b>	<b>4,478,619</b>	<b>6,202,825</b>
Cash held as part of the investment portfolio	138,059	190,729	138,059	190,729
Equity investment in subsidiary		-	35,006	35,006
	<b>4,616,678</b>	<b>6,393,554</b>	<b>4,651,684</b>	<b>6,428,560</b>
B) Analysis of investments			2020	2019
			£	£
Equities			3,246,341	4,246,190
Fixed interest securities			1,232,278	1,956,635
Cash held as part of the investment portfolio			138,059	190,729
Total group			<b>4,616,678</b>	<b>6,393,554</b>
Equity investment in subsidiary			<b>35,006</b>	<b>35,006</b>
Total charity			<b>4,651,684</b>	<b>6,428,560</b>
C) Historical cost of investments			2020	2019
			£	£
Rathbones			2,182,665	3,555,972
Aberdeen Standard Capital			-	1,433,541
Sarasin & Partners			2,089,731	690,000
Equity Investment in Subsidiary			<b>4,272,396</b>	<b>5,679,513</b>
			<b>35,006</b>	<b>35,006</b>
Total charity			<b>4,307,402</b>	<b>5,714,519</b>

### D) Trading subsidiary

The Charity holds 100% of the issued share capital of St Nicholas Hospice Trading Limited (company number 02176804), a company incorporated in the UK. The principal activity of St Nicholas Hospice Trading Limited during the year was the sale of the bought in goods, house clearances and income from the Haven Café.

The company gifts its taxable profits to St Nicholas Hospice (Suffolk) under gift aid and the aggregate capital and reserves of St Nicholas Hospice Trading Limited at 31 March 2020 were £94,392 (2019: £91,326).

All items of income or expenditure reported on the Group Statement of Financial Activities have been shown after the removal of intra group transactions.

## 11 Investments (continued)

The trading results for the year ended 31 March 2020 and 31 March 2019 are show below:

	2020 £	2019 £
Turnover	403,492	348,079
Cost of sales	(224,750)	(177,847)
Gross profit	178,742	170,232
Operating expenses	(90,121)	(87,676)
Profit on ordinary activities before interest	88,621	82,556
Interest payable on concessionary loan to hospice	(625)	(625)
Net trading profit	87,996	81,931
Assets	132,274	126,995
Liabilities	(37,882)	(35,669)
Net assets	94,392	91,326
Represented by:		
Capital	35,006	35,006
Reserves	59,386	56,320
Net assets	94,392	91,326

## 12 Debtors

	Group		Charity	
	2020 £	2019 £	2020 £	2019 £
Trade debtors	975,291	10,612	976,011	10,472
Taxation recoverable	41,967	37,690	41,967	37,690
Other debtors	3,919	2,903	3,919	2,903
Prepayments	283,077	271,650	282,743	271,650
Accrued income	272,148	35,294	271,572	34,994
Legacies	524,438	261,940	524,438	261,940
	2,100,840	620,089	2,100,650	619,649
Amounts due greater than one year:				
Loan due from subsidiary undertaking	-	-	25,000	25,000
	2,100,840	620,089	2,125,650	644,649

In 2018/19, the charity entered into a new loan agreement to the subsidiary undertaking to fund working capital, secured by a fixed charge over goodwill and a floating charge over all assets of the company with interest charged at 2.5%. The balance on this loan will be repaid in full on 15 November 2028.

Included within prepayments is £121,358 (2019: £125,351) for a lease which falls due greater than one year.

### 13 Creditors: amounts falling due within one year

	Group		Charity	
	2020	2019	2020	2019
	£	£	£	£
Trade creditors	97,968	129,674	94,324	126,615
Amounts due to subsidiary undertaking	-	-	71,386	61,981
Taxation and social security	107,306	110,893	104,988	107,662
Other creditors	55,576	55,844	55,576	55,844
Accruals	213,074	151,751	208,974	147,489
Deferred income – lottery	74,956	76,513	74,956	76,513
Deferred income – other	1,430,485	34,989	1,427,665	34,872
	<b>1,979,365</b>	<b>559,664</b>	<b>2,037,869</b>	<b>610,976</b>

#### Deferred income reconciliation – lottery

	Group		Charity	
	2020	2019	2020	2019
	£	£	£	£
Balance brought forward	76,513	72,102	76,513	72,102
Amounts released to income in the year	(76,513)	(72,102)	(76,513)	(72,102)
Amount deferred in the year	74,956	76,513	74,956	76,513
Balance carried forward	<b>74,956</b>	<b>76,513</b>	<b>74,956</b>	<b>76,513</b>

#### Deferred income reconciliation – other

	£	£	£	£
Balance brought forward	34,989	34,112	34,872	31,777
Amounts released to income in the year	(34,989)	(34,112)	(34,872)	(31,777)
Amount deferred in the year	1,430,485	34,989	1,427,665	34,872
Balance carried forward	<b>1,430,485</b>	<b>34,989</b>	<b>1,427,665</b>	<b>34,872</b>

Deferred income relates to income for future events and lottery subscriptions and the CCG grant paid in advance.

### 14 Restricted funds (Group and Charity)

	Balance at 31 March 2019	Income	Expenditure	Transfers	Balance at 31 March 2020
	£	£	£	£	£
In patient care	164,304	10,581	(9,581)	(163,251)	2,053
Day care	118,957	57,940	(41,204)	(87,806)	47,887
Community services	3,054	103,000	(103,000)	2,622	5,676
Family support and bereavement	150	11,614	(11,609)	-	155
Education and research	4,397	13,953	(14,465)	-	3,885
Hospice building boiler fund	14,847	-	-	(14,847)	-
Fundraising	-	488	(488)	-	-
	<b>305,709</b>	<b>197,576</b>	<b>(180,347)</b>	<b>(263,282)</b>	<b>59,656</b>

## 14 Restricted funds (Group and Charity) (continued)

	Balance at 31 March 2018	Income	Expenditure	Transfers	Balance at 31 March 2019
	£	£	£	£	£
In patient care	165,946	10,284	(11,926)	-	164,304
Day care	116,397	31,438	(28,878)	-	118,957
Community services	6,109	71,725	(74,780)	-	3,054
Family support and bereavement	256	17,964	(18,070)	-	150
Education and research	2,825	8,535	(6,963)	-	4,397
Hospice Boiler Fund	-	15,000	(153)	-	14,847
	291,533	154,946	(140,770)	-	305,709

The *In-Patient Unit Refurbishment fund*, specifically for the purpose of the refurbishment of the In-Patient Unit at the Hospice. The money has been expended and is represented within the leasehold land and buildings and furniture and equipment (Note 10). The transfer for the year reallocates the net book value of the fixed assets held within the restricted fund to the Building/Fixed Asset Fund to realign the fund.

The *Beds fund* specifically received and partly expended for the purchase of electric beds for the Hospice. Those beds that have already been purchased are represented within furniture and equipment (Note 10).

The *Sylvan Ward Fund* specifically received towards the revenue funding for the running cost of the in-patient unit.

*Memorable Moments* specifically received to provide a memorable experience for patients who are nearing the end of their life.

### Day Care Fund incorporates;

The *Garden, Orchard, Bradbury Green and Family Room Refurbishment fund* specifically for the purpose of the refurbishment of those areas and includes funding from previous years including a capital grant from the Department of Health to deliver tangible physical improvements enhancing care provision to the garden, Chapel, Bradbury Green and Orchard Day Therapy areas. This funding has now been fully expended apart from small amount remaining in respect of the enhancements to the Family Room and is either represented within leasehold land and buildings and equipment (Note 10) or revenue expenditure relating to garden works, which has been proportionately allocated against patient areas that benefit from the work undertaken.

The *Clinical Equipment fund* was specifically received for and partially expended on palliative care equipment. The equipment that has already been purchased is represented within furniture and equipment (Note 10).

The *Orchard Day Care fund* was specifically received revenue funding towards the running costs of the Orchard Day Centre, which supports patients in achieving independence.

The transfer for the year reallocates the net book value of the fixed assets held within the restricted fund to the Building/Fixed Asset Fund to realign the fund.

### Community services restricted funds incorporates;

The *Hospice Neighbours Project fund* relates to revenue funding to maintain and grow a volunteer scheme to provide practical support to people in their own homes.

The *Burton Centre Refurbishment* relates to funding received in order to develop an Outreach Centre in Haverhill. The capital spent to date is represented within long leasehold and furniture and equipment.

The *Burton Centre Garden – Big Lottery Fund Grant*, relates to capital funding to redevelop the garden space for users of the Burton Centre.

The *Burton Centre running costs fund* relates to funding received and expended in the year towards the costs of operating the Haverhill Hub.

The *Community Hospice Team fund* relates to specific revenue funding received and expended in the year for the Community Hospice Team Service which includes Community Nurse Specialists and community based Nursing Assistants.

The *Haven Café fund* relates to a specific piece of funding received to upgrade the kitchen in the Haven Café.

The *Refrigerator fund* relates to a specific funding used to purchase a refrigerator display cabinet at the Haven Café.

The *Hospice at Home IT project* relates to a piece of funding received to assist us to upgrade our systems to allow access to SystmOne remotely.

The transfer for the year reallocates the net book value of the fixed assets held within the restricted fund to the Building/Fixed Asset Fund to realign the fund.

## 14 Restricted funds (Group and Charity) (continued)

### Family Support and Bereavement restricted funds incorporates;

The Nicky's Way fund relates to specific revenue funding received and expended in the year for the children's bereavement support service known as Nicky's Way.

The *Miscellaneous Non Clinical Equipment* fund includes the following specific funding for:

- The cost of a dolls house for Nicky's Way, the children's bereavement support service
- Equipment for Nicky's Way.

### Education and Research restricted funds incorporates;

The *HOPE course fund* relates to revenue funding received for co-ordinating a course for cancer patients entitled 'Help Overcoming Problems Effectively'.

The *Access to work fund* relates to specific funding towards special IT equipment and training for individuals coping with Dyslexia. The IT equipment purchased is represented within furniture and equipment (note 10)

The *Education for Hospice Staff fund* relates to grants received and expended during the year towards clinical courses.

The *My Care Wishes Fund* is a specific piece of funding received from the Clinical Commission Group to deliver advanced care planning to west Suffolk care homes.

### Hospice Boiler Fund restricted funds incorporates;

The *hospice boiler fund* relates to specific funding received to upgrade the hospice boilers at the Hardwick Lane site.

The transfer for the year reallocates the net book value of the fixed assets held within the restricted fund to the Building/Fixed Asset Fund to realign the fund.

### Fundraising restricted funds incorporates;

*Community Fundraising Vehicle Sponsorship* A number of individual corporate funders sponsored the organisation to cover the lease payments for a new fundraising vehicle.

## 15 Unrestricted funds

### Charity

	Balance at 31 March 2019 £	Income £	Expenditure £	Investment gains/ (losses) £	Transfers £	Balance at 31 March 2020 £
<b>Designated funds</b>						
Building / Fixed Asset Fund	2,053,596	-	(172,865)	-	560,474	2,441,205
New building and maintenance fund	2,250,000	-	-	-	-	2,250,000
IT Systems fund	167,408	-	(91,403)	-	-	76,005
Service development fund	608,051	-	(133,025)	-	-	475,026
Income generation project fund	398,664	-	-	-	-	398,664
	5,477,719	-	(397,293)	-	560,474	5,640,900
<b>General fund</b>	3,893,025	5,680,492	(6,869,049)	(211,036)	(297,192)	2,196,239
	9,370,744	5,689,492	(7,266,342)	(211,036)	263,282	7,837,139

## 15 Unrestricted funds (continued)

### Group

	Balance at 31 March 2019 £	Income £	Expenditure £	Investment gains/ (losses) £	Transfers £	Balance at 31 March 2020 £
<b>Designated funds</b>						
Building/Fixed Asset fund	2,053,596	-	(172,865)	-	560,474	<b>2,441,205</b>
New building and maintenance fund	2,250,000	-	-	-	-	<b>2,250,000</b>
IT Systems fund	167,408	-	(91,403)	-	-	<b>76,005</b>
Service development fund	608,051	-	(133,025)	-	-	<b>475,026</b>
Income generation project fund	398,664	-	-	-	-	<b>398,664</b>
	5,477,719	-	(397,293)	-	560,474	<b>5,640,900</b>
<b>General fund</b>	3,944,845	5,998,428	(7,180,920)	(211,036)	(297,192)	<b>2,254,125</b>
	9,422,564	5,998,428	(7,578,213)	(211,036)	263,282	<b>7,895,025</b>

### Charity

	Balance at 31 March 2018 £	Income £	Expenditure £	Investment gains/ (losses) £	Transfers £	Balance at 31 March 2019 £
<b>Designated funds</b>						
Building/Fixed Asset fund	2,053,596	-	-	-	-	2,053,596
New building and maintenance fund	2,250,000	-	-	-	-	2,250,000
IT Systems fund	360,745	-	(193,337)	-	-	167,408
Service development fund	843,775	2,500	(238,224)	-	-	608,051
Income generation project fund	419,840	-	(21,176)	-	-	398,664
	5,927,956	2,500	(452,737)	-	-	5,477,719
<b>General fund</b>	5,024,115	5,631,533	(6,753,898)	(8,725)	-	3,893,025
	10,952,071	5,634,033	(7,206,635)	(8,725)	-	9,370,744

### Group

	Balance at 31 March 2018 £	Income £	Expenditure £	Investment gains/ (losses) £	Transfers £	Balance at 31 March 2019 £
<b>Designated funds</b>						
Building/Fixed Asset fund	2,053,596	-	-	-	-	2,053,596
New building and maintenance fund	2,250,000	-	-	-	-	2,250,000
IT Systems fund	360,745	-	(193,337)	-	-	167,408
Service development fund	843,775	2,500	(238,224)	-	-	608,051
Income generation project fund	419,840	-	(21,176)	-	-	398,664
	5,927,956	2,500	(452,737)	-	-	5,477,719
<b>General fund</b>	5,040,619	5,929,374	(7,016,423)	(8,725)	-	3,944,845
	10,968,575	5,931,874	(7,469,160)	(8,725)	-	9,422,564

#### Building/Fixed Asset fund

This is a designated fund representing the construction costs of the existing building to 31 March 2020 less depreciation charged thereon, together with funds transferred from the original foundation fund. During 2009/10 the balance on the capital appeal restricted fund (£511,529), which was held specifically for the purpose of the development and provision of accommodation for family bereavement and support services, was transferred into this fund. During 2019/20, the Trustees gave approval to reallocate the net book value of the fixed assets held within the restricted fund (£263,282) to the Building/Fixed Asset Fund, to realign the funds.

## 15 Unrestricted funds (continued)

### *New building and maintenance fund*

This is a designated fund for the purposes of maintain and updating the existing hospice building and allocating funds for future building requirements. This fund has not been drawn on during 2019/20.

### *IT systems fund*

The charity has a number of IT systems and hardware which require replacing or upgrading to develop greater reliance, functionality and efficiency to support the services we deliver and the way in which we work, now and in the future. During 2019/20, this programme of work included upgrading the servers and improvements to the patient record system and was funded from this designated fund.

### *Service development fund*

The purpose of this fund is to develop and test new service delivery models across our entire service offering in all settings. The fund will continue to support the ongoing development, testing and planning of services.

### *Income generation fund*

The fund is to develop income generation through new and existing income streams that are sustainable and resilient to economic and social challenges. This fund has not been drawn on during 2019/20.

## 16 Endowment funds

	Balance at 1 April 2019 £	Income £	Expenditure £	Investment loss £	Balance at 31 March 2020 £
The Earl of Euston 2009 Fund	45,111	861	(861)	(981)	44,130

The income earned from the investment of the fund, £861 must be spent in accordance with the objects of the Charity.

The loss arising on the investment of the fund was £981 and the value of the fund was decreased by this at 31 March 2020. The investment management charge attributable to the fund at £239 was immaterial and no adjustment has been made to the value of the fund

	Balance at 1 April 2018 £	Income £	Expenditure £	Investment gains £	Balance at 31 March 2019 £
The Earl of Euston 2009 Fund	44,185	847	(847)	926	45,111

## 17 Net assets by funds

Group	General Funds £	Restricted Funds £	Endowment Fund £	Total Funds 31 March 2020 £
Investments	4,572,548	-	44,130	4,616,678
Tangible fixed assets	2,441,205	-	-	2,441,205
Current assets	2,860,637	59,656	-	2,920,293
Creditors falling due within one year	(1,979,365)	-	-	(1,979,365)
	7,895,025	59,656	44,130	7,998,811

## 17 Net assets by funds (continued)

Charity	General Funds	Restricted Funds	Endowment	Total Funds 31 March 2020
	£	£	£	£
Investments	4,607,554	-	44,130	4,651,684
Tangible fixed assets	2,441,205	-	-	2,441,205
Current assets	2,826,249	59,656	-	2,885,905
Creditors falling due within one year	(2,037,869)	-	-	(2,037,869)
	<b>7,837,139</b>	<b>59,656</b>	<b>44,130</b>	<b>7,940,925</b>

Group	General Funds	Restricted Funds	Endowment Fund	Total Funds 31 March 2019
	£	£	£	£
Investments	6,348,443	-	45,111	6,393,554
Tangible fixed assets	2,157,561	301,033	-	2,458,594
Current assets	1,476,224	4,676	-	1,480,900
Creditors falling due within one year	(559,664)	-	-	(559,664)
	<b>9,422,564</b>	<b>305,709</b>	<b>45,111</b>	<b>9,773,384</b>

Charity	General Funds	Restricted Funds	Endowment	Total Funds 31 March 2019
	£	£	£	£
Investments	6,383,449	-	45,111	6,428,560
Tangible fixed assets	2,157,561	301,033	-	2,458,594
Current assets	1,440,710	4,676	-	1,445,386
Creditors falling due within one year	(610,976)	-	-	(610,976)
	<b>9,370,744</b>	<b>305,709</b>	<b>45,111</b>	<b>9,721,564</b>

## 18 Related party transactions

None of the charity trustees or connected persons received remuneration for the year (2019: nil).

Trustee indemnity insurance is included within total insurance costs of £54,508 (2019: £50,275). It is not possible to quantify the trustee indemnity element from the overall insurance cost.

Four trustees were St Nicholas Hospice Care Lottery subscribers in the year (2019: five), and in total paid £312 (2019: £251). Their winnings amounted to £10 (2019: £10).

During the year one trustee commissioned the services of the house clearance team and paid a fee of £300 (2019: nil).

During the year twelve trustees and associates (2019: 20) made donations totalling £10,775 (2019: £3,455).

Transactions with the subsidiary undertaking were:

	2020 £	2019 £
Loan outstanding from the trading company to the charity	25,000	25,000
Current account balance from the trading company to the charity	71,386	61,981
Gift aid donation from the trading company to the charity	84,931	49,613
Recharged costs from the charity to the trading company	265,709	213,829
Recharged income from the charity to the trading company	373,233	142,093
Interest paid/received on loan to subsidiary	625	625

## 19 Financial commitments

As at 31 March 2020, the charitable company had annual commitments under non-cancellable operating leases as set out below:

	Land and buildings		Other	
	2020	2019	2020	2019
	£	£	£	£
Operating leases which expire:				
Within one year	191,554	146,964	31,218	21,857
Later than one year but not later than five	493,286	404,257	47,029	38,194
Later than five years	41,160	64,245	-	-
	<u>726,000</u>	<u>615,466</u>	<u>77,247</u>	<u>60,051</u>

## 20 Reconciliation of net income / (expenditure) to net cash flows from operating activities

	Group	
	2020	2019
	£	£
<b>Net expenditure</b>	<b>(1,774,573)</b>	<b>(1,530,909)</b>
<b>Adjusted for:</b>		
Depreciation charges	172,865	185,252
Losses on investments	212,017	7,799
Dividends received from investments	(176,549)	(139,199)
Interest received	(2,459)	(4,366)
Loss on the sale of fixed assets	-	(2,500)
Increase in stocks	(406)	107
Decrease in debtors	(1,480,751)	481,036
(Decrease)/increase in creditors	1,419,701	143
<b>Net cash used in operating activities</b>	<b>(1,630,155)</b>	<b>(1,002,637)</b>

	Group	
	2020	2019
	£	£
<b>Opening net funds</b>		
Cash and cash equivalents	1,022,250	1,704,115
Changes in net fund arising from cash flow of the group	(94,434)	(681,865)
<b>Closing net funds</b>		
Cash and cash equivalents	<u>927,816</u>	<u>1,022,250</u>

## 21 Analysis of cash and cash equivalents

	Group		Charity	
	2020	2019	2020	2019
	£	£	£	£
Cash at bank and in hand	789,757	831,521	760,255	800,737
Cash held as part of the investment portfolio	138,059	190,729	138,059	190,729
	<u>927,816</u>	<u>1,022,250</u>	<u>898,314</u>	<u>991,466</u>

## 22 Members guarantee

The charity has no share capital but is limited by guarantee. Every member of the charitable company is a guarantor and undertakes to contribute to the assets of the charitable company, in the event of it being wound up, such amounts as may be required. Each guarantor's liability is limited to £1.

## 23 Pension costs

A group personal pension plan is operated on behalf of certain employees. The assets are held separately from those of the charity in independently administered funds. The pension charge represents contributions payable by the charity to the plan at rates ranging from 5% to 7%. Contributions paid by the charity during the year amounted to £166,563 (2019: £154,828). Contributions outstanding at 31 March 2020 amounted to £25,742 (2019: £25,486)) and were included within other creditors.

In addition, certain other employees previously employed by the National Health Service have, by arrangement, continued to be members of the NHS Pension Scheme, a multi-employer defined benefit scheme, whilst in the employment of St Nicholas' Hospice (Suffolk). Contributions paid by the charitable company during the year amounted to £204,723 (2019: £192,406). Contributions outstanding at 31 March 2020 amounted to £28,182 (2019: £28,040) and were included within other creditors.

The scheme is not designed to be run in a way that would enable NHS bodies to identify their share on the underlying scheme assets and liabilities. Therefore, the scheme is accounted for as if it were a defined contribution scheme: the cost to the Hospice of participating in the scheme is taken as equal to the contributions payable to the scheme for the accounting period.

Employers' contributions to the NHS pension scheme were made at the rate of Employers' contributions to the NHS pension scheme were made at the rate of 20.68% (2019: 14.38% including the 0.08% levy). The increase was funded by the NHS Pension Schemes transitional arrangements which resulted in no additional costs to the charity. This transitional arrangement will continue into 2020/21. Employee contributions ranged from 5.6% to 13.5%.

## 24 Material legacies

Legacy income is only included in incoming resources where receipt is probable and the amount can be measured reliably, or the legacy has been received. There were no additional notifications which could be determined to be probable, material or reliably measured over and above those already recognised in the financial statements as at 31 March 2020 (2019: £Nil).

## 25 Capital commitments

At the end of the financial year there was £11,849 of expenditure authorised and contracted (2019: £Nil).

## 26 Financial Instruments

	Group		Charity	
	2020	2019	2020	2019
Financial assets:	£	£	£	£
Instruments measured at fair value through profit & loss	<b>4,478,619</b>	6,202,825	<b>4,478,619</b>	6,202,825

## 27 Contingent Liabilities

The charity is registered within the VAT group with St Nicholas Hospice Trading Limited. The maximum potential liability at 31 March 2020 was £2,319 (2019: £3,231)

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*because  
you matter*

**St Nicholas**  
Hospice Care

A Registered Charity No. 287773