

Annual Report and Accounts

April 2021 to March 2022



Because every day matters
www.hospiscare.co.uk

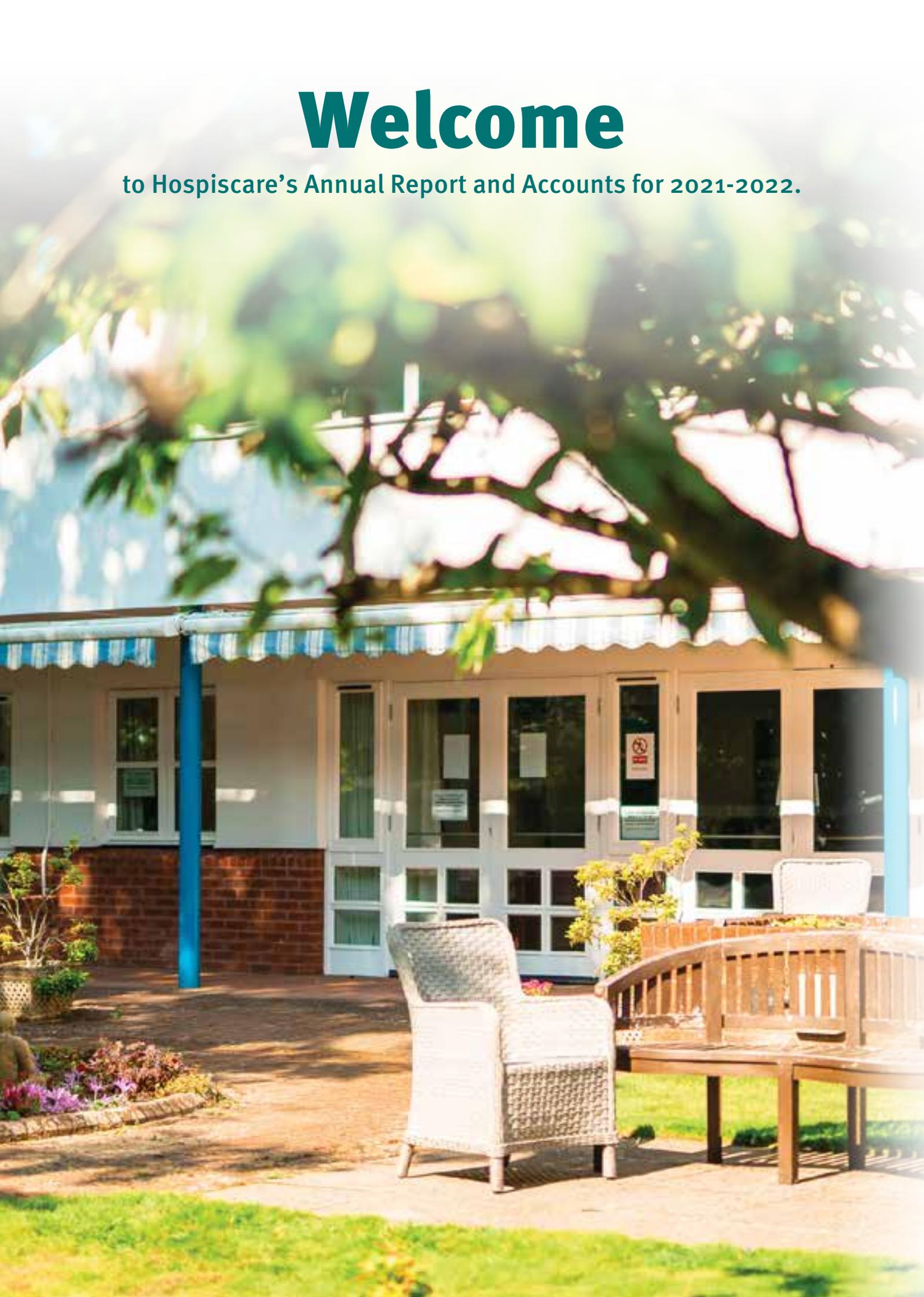
Registered charity no. 297798



Hospiscare
Caring in the heart of Devon

Welcome

to Hospiscare's Annual Report and Accounts for 2021-2022.





Andrew Randall, Chief Executive



Brian Aird, Chair of the Board of Trustees

Joining me in welcoming you to our combined Directors' and Trustees' Annual Report incorporating the Strategic Report and Financial Statements is Brian Aird, our new Chair of Trustees. Brian joined our Board in March 2022, picking up the reins from Dr Helen Enright who has so brilliantly steered our charity for the past 12 months. From all of us here at Hospiscare, we extend our thanks to Helen.

Despite the challenges of the last two years, we have continued to provide our specialist end-of-life care across the heart of Devon. As a healthcare charity that cares for people at such a vulnerable time in their lives, we have continued to keep strict COVID-19 restrictions in place across our sites and when visiting patients at home.

Despite the pressures caused by the pandemic, we also have much to celebrate. We have benefitted from a grant that has enabled us to establish a permanent Clinical Co-ordination Centre, turning a temporary response to the pandemic into a dedicated hub for patients, family members and healthcare professionals to access advice and support.

2022 gives us further cause for celebration as it is a special year for our charity, marking 40 years of caring in the heart of Devon. Our hospice has grown in so many ways since its founding in 1982 by Dr John Searle and we are so grateful to everyone who has been a part of our journey.

Our wonderful family of staff, volunteers and supporters continue to pull together to support each other and Hospiscare as a whole. The response to our 'Save our Services' appeal demonstrates this dedication as, thanks to our community, we reached our £1 million target and secured our services for the year ahead.

After two of the most difficult years in our 40-year history, we would like to sincerely thank our wonderful teams of staff and volunteers, as well as every person, group, organisation, business and trust for supporting us every step of the way. Together, we will continue to deliver the vital end-of-life care that our local communities of Exeter, Mid and East Devon need.

Andrew

I am delighted to have been appointed the new Chair of Trustees at Hospiscare. This follows a long career in the healthcare sector where I have had the privilege of being CEO of an NHS Trust and also held positions on a number of Boards, including the Royal Devon & Exeter.

My first priority with the Trustee Board and Senior Management Team is to work together to create our new three-year strategy with our mission, vision and values at the centre. This will focus on four key pillars: patient services, financials, infrastructure and people and culture and will be available from early 2023.

Financially, we have prepared for the possibility of a further three year deficit and one of our key aims will be working towards a sustainable budget over the long term. Due to the hard work of our teams, we have been fortunate to secure COVID-19 support grants and so this, alongside the fantastic response from our SOS Appeal, means we have not had to dip into our reserves. This has given us stability for at least the year ahead.

We are working to re-build our long-term sustainable income streams and are investigating new ones. This will also involve working closely with the NHS commissioners and the newly established Integrated Care System Devon to champion the need to increase our funding from 19% of costs to a level closer to the national average of 33%.

Our income numbers for 2021/22 include legacies totaling £1.9 million, despite the cash not being received until the following financial year. This is due to income recognition accounting rules. This income has been put in a designated reserve to fund services in 2022/23.

Despite the challenging times that Hospiscare has faced, I am confident that the future is brighter and I look forward to working with and being part of such an important local charity.

Brian

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Trustees' Report



Our Objectives and Activities

Hospiscare is the principal provider of specialist end-of-life care to the communities of Exeter, Mid and East Devon. Our clinical teams care for patients and their families in the community – visiting homes, care homes, community hospitals and Exeter prison – on our specialist ward in Exeter, at our day hospice units in East and Mid Devon, in the acute hospital and through a 24/7 telephone advice service.

Our Mission

We provide compassionate, expert end-of-life care to those in need – before, during and after death. Together with our local community, we make every day matter.

Our Vision

Our vision is to ensure those in need receive outstanding end-of-life care in the place of their choice.

Our Values

Our values are the foundations upon which our strategic ambitions are built and determine how Hospiscare is run on a day-to-day basis. In everything we do, we strive to be:

Compassionate towards every member of our community, from our patients and families to our staff members, volunteers and supporters.

Respectful to the needs and beliefs of the people we serve.

Professional in our provision of specialist end-of-life care.

Inclusive to all needs and circumstances, ensuring end-of-life care remains accessible to all.



Our Priorities

Following a review in 2022, our priorities for the year ahead, as well as our longer term vision for the next three years are as follows:

Care

To care for all of our patients' needs and bring our care closer to home.

Strategic Priorities for the Year Ahead:

- Continue to find new ways to recruit and retain our specialist work force
- Launch our new Hospiscare@Home service in the Okehampton and Crediton area
- Launch our new day services model to provide our patients and carers with access to a range of support
- Position Hospiscare at the centre of end-of-life care in our locality and continue to take an active part in the health and care system

Funding

To accelerate our income for financial stability in light of the challenges we face due to the pandemic and seek to achieve a sustainable level of income.

Strategic Priorities for the Year Ahead:

- Continue our discussions with the Integrated Care System Devon (ICSD)
- Research new income generation opportunities
- Re-grow our current fundraising income streams following the pandemic
- Revitalise our retail operation by accelerating our growth of e-commerce

Marketing

To create a strong presence in our community, engage with current and new supporters and clearly communicate that we are a local charity.

Strategic Priorities for the Year Ahead:

- Update our brand identity with messaging to reflect our 'we are local' message
- Embed ourselves within the community through involvement with events, providing education and partnering with local businesses and media
- Communicate a clear message on our services and the impact these have on our community

Hospiscare's Strategic Priorities for the Next Three Years:

Following the last two years of the pandemic, we are taking 2022 to design our new three-year strategy for Hospiscare. Our Trustees and the Senior Management Team are working together on this plan and will be engaging staff for input to ensure it works for the whole charity.

In developing the strategic direction for the next three years, the Trustees and Management are reviewing how services have been delivered over the last two years, including how services have developed during the pandemic. This has included the development of our Clinical Coordination Centre and Afrai services. Where appropriate, this, coupled with knowledge of the current system pressures and the need to explore new opportunities will shape the strategic direction for the next three years. As the impact of the pandemic reduces, and traditional fundraising models become viable again, previous initiatives will be reinstated to generate income, while new opportunities will be identified.

We will be focussing on pulling together the key aims and measurable goals that sit under the following strategic pillars:



Patient Services



People & Culture



Infrastructure



Finance

What we said	What we did
<p>We would help people with advance care planning to ensure that our patients' final wishes are known.</p>	<p>We opened up a conversation about dying and what it means to plan for the time you have left by sharing the video diaries of our patient, Lizzie, who spoke about her plans for her final months.</p> <p>To continue this conversation, our Chief Nurse, Ann, shared her advice for planning ahead and we dedicated a space on our website to Ann's advice and to resources that can be accessed at any time.</p> <p>We also aimed to increase our numbers of Care Navigators to assist patients with advance care planning. Unfortunately, as a result of the pandemic, we were not able to introduce this at this stage.</p>
<p>We would utilise our five ways of connecting with and supporting people:</p> <ul style="list-style-type: none"> ● Visiting people in their homes ● A short stay on our specialist ward ● A telephone call ● A virtual consultation ● An outpatient clinic appointment 	<p>We introduced virtual visiting and patient consultations through secure video calling and developed a new Clinical Co-ordination Centre to ensure we were just a phone call away.</p>
<p>We would continue to provide more care closer to home, working towards equal access to hospice care regardless of diagnosis, circumstances or economic standing. We would continue to support people to live well until they die and ensure that Searle House remains a centre of expertise with facilities that are fit for the future.</p>	<p>Throughout the pandemic, we continued to deliver care on our ward in Exeter, in patients' homes and in the community through our partnerships with local care homes, Exeter Prison and local homelessness charity, St Petrock's.</p>
<p>We would provide a range of services that are reflective of relevant quality standards.</p>	<p>We continued to be rated 'Outstanding' by the Care Quality Commission and we are working continuously to improve our service and ensure that it meets all possible quality standards.</p>
<p>We would work with GP networks and promote our referral criteria.</p>	<p>We work with all GP networks within our locality, but the pandemic reduced the level of promotion that we had planned to carry out during this period.</p>
<p>We would promote our work to all stakeholders.</p>	<p>The publication of our yearly Impact Report, our bi-annual Together newsletter and other mailings throughout the year promote our work to stakeholders. In addition, we work with local support groups and businesses to share our messages to as wide an audience as possible.</p>
<p>We would work collaboratively with other health and social care providers.</p>	<p>The nature of healthcare encourages a collegiate approach and we work in this way with many other health and social care professionals across a spectrum of services.</p>
<p>We would engage and share expertise with the Integrated Care System and clinical commissioners.</p>	<p>We have worked closely with the ICSD and clinical commissioners and taken part in various forums and discussion groups. We contributed to research for a report on end-of-life care and the formulation of their commissioning requirement. We also contributed to a national NHS end-of-life care programme through Hospice UK, of which we are a member.</p>

Our Family of Staff and Volunteers

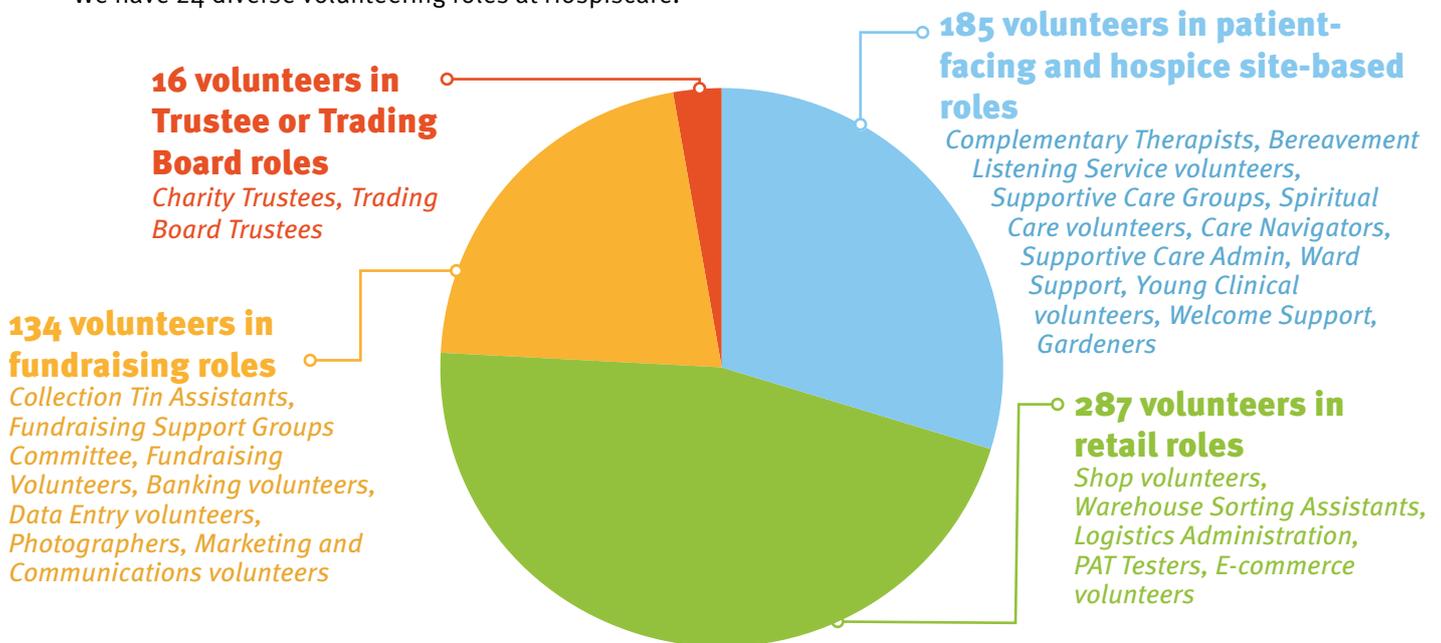
Here at Hospiscare, we are extremely fortunate to benefit from the wide-ranging skills and dedication of our staff and volunteers.

It is the people who shape our organisation. Every person within our Hospiscare family is dedicated to making every day matter to our patients and their loved ones. As many of our staff and volunteers have a personal connection with our hospice through the care of a loved one, this makes our charity truly unique.

Wellbeing is at the centre of what we do and, as an employer, we are committed to the wellbeing of our staff and volunteers. Hospiscare has been awarded the Mind Bronze Award for wellbeing at work and has been recognised as a Disability Confident employer. Hospiscare gives full and fair consideration to all applications for roles within the organisation, and is supportive of ongoing education and training needs, development, and progression of staff irrespective of their protected characteristics including sex, race, disability, and sexual orientation.

Hospiscare could not exist without the dedication of our volunteers. We have almost 600 volunteers who donate over 900 hours of their time per week, which equates to approximately 45,000 hours annually. Their incredible contribution has saved our charity over £400,000 from April 2021 to March 2022.

We have 24 diverse volunteering roles at Hospiscare:



"I've never worked anywhere like Hospiscare before. Everyone I speak to has a story and a link with Hospiscare. It's

really quite wonderful – you know everyone is here because they genuinely want to be."

Becci Stone joined the Hospiscare family as Volunteering Administrator in May 2021.

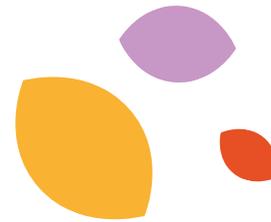


"Not long after my stepdad, Malcolm, passed away, I knew I wanted to give back to Hospiscare

and become a volunteer. After the support Hospiscare gave to us when Malcolm was ill, it is humbling to be able to give something back."

Kelly Preece joined the Hospiscare family as a volunteer in our Marketing and Communications department in 2019.

Making Every Day Matter to our Patients and their Families



Hospiscare serves the people of Exeter, Mid and East Devon, delivering specialist end-of-life care across 1,068 square miles of Devon's heartland.

Who are we supporting?

 **15,468**

calls from patients, family members and healthcare professionals were answered by our Clinical Co-ordination Centre



We cared for **2,247** patients

204



family members and friends received support

How did we support friends, families and loved ones?



86

family members and friends received bereavement support

82,730

people visited our website for advice and support



582

people joined our Light up a Life broadcast to remember their loved ones

How did we support our patients?



201 

patients cared for on our specialist ward

2,046

patients cared for at home and in the community



880

patients supported to die at home

April 2021 to March 2022

Activities and Performance in 2021/22

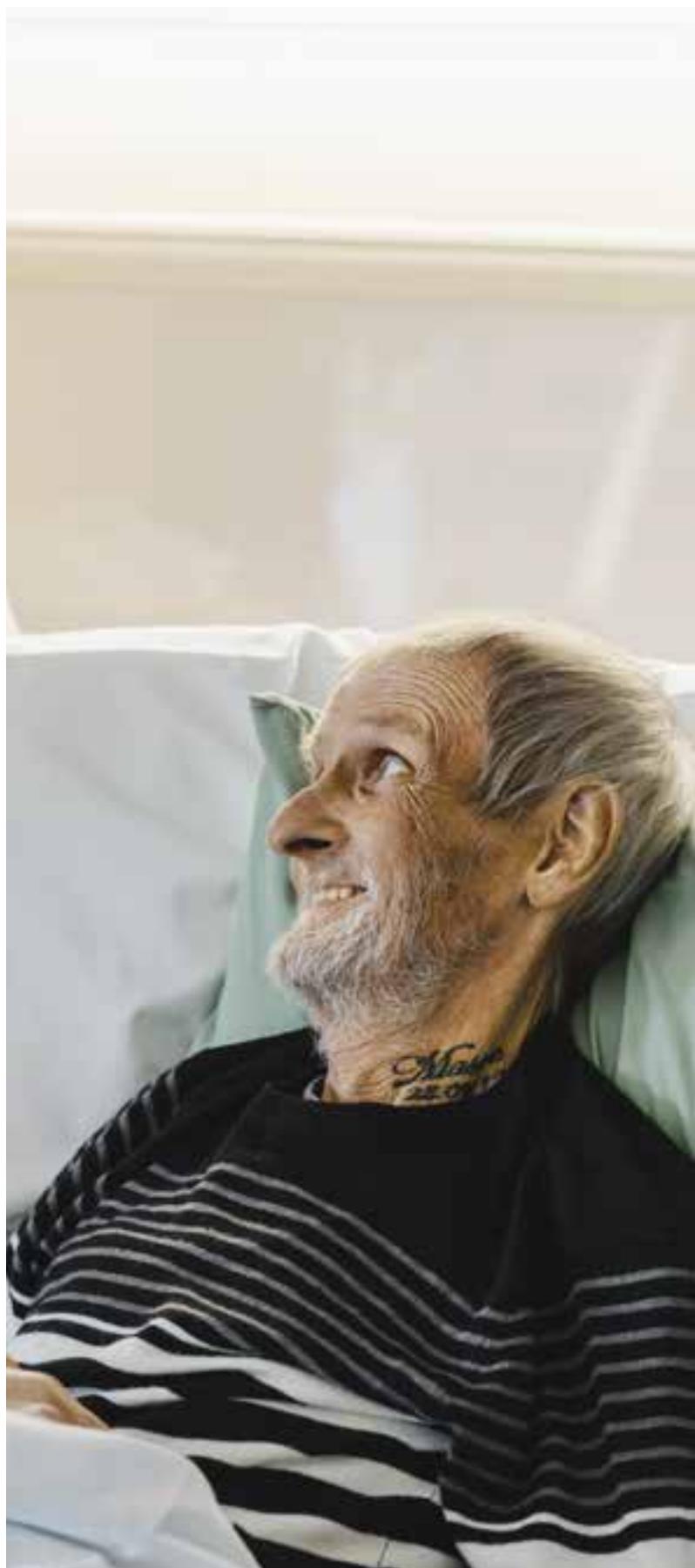
During the year, Hospiscare cared for over 2,000 patients and provided support to family members and friends in delivering services for the public benefit. We provided care on our specialist ward to 201 patients (2020/21 194 patients), and a further 2,046 patients (2020/21 2,092 patients) in their own home or community setting. This shows a slight increase in patients on our ward and decrease in the community in comparison to the previous year.

Since 31 March 2022, the demand for services has continued to increase, with Hospiscare treating patients with more complex health needs on our specialist ward and within community settings. Service delivery models have been reviewed to enable our charity to respond to increased demand.

Hospiscare continues to provide support to the friends and loved ones of our patients. During 2021/22, we provided bereavement support to 86 family members, and provided online support to over 82,000 members of the public (2020/21 73,611 individuals). In addition, we provided an online Light up a Life service to enable families and friends to remember their loved ones. Historically this service has been held in person, however, an online service was necessary due to COVID-19 restrictions. The level of support provided to patients has increased compared to previous years, with more people seeking guidance and support as a result of the pandemic restricting the usual sources of information.

Improvements have been made to our services in response to the pandemic and changing patient needs and system-wide demand. Indeed, services are continuing to develop to meet the ever increasing demand, and change in patients wishes with more patients choosing to die at home on a yearly basis.

Throughout 2021/22, the Trustees have had regard to the Charity Commission's guidance on public benefit in making decisions on the services provided.



Hear from the families we've supported this year

"On 26 November 2021, Mum died peacefully at home. My main concern was that she was able to remain at home with me so that we could be together at the end. Julie made this possible by communicating with Mum's doctors and care providers, ensuring that I had everything I needed.

"I will always be grateful to Julie, whose care and compassion was without doubt very significant in allowing my mum to be with me at the end of her life."

Lindsay's mum, Iris, was cared for by our Admiral Nursing team. Their support enabled Iris to die at home with Lindsay by her side.



"My dad spend the last five days of his life with the wonderful Hospiscare team at Searle House on the ward. On that morning when my wonderful dad took his last breath, their incredible support and care meant that I was right there with him, holding his hand and telling him I loved him. I will never forget that moment."

Ellie's dad was cared for by our community nursing team before being admitted to our ward for his final days. Our ward team arranged for Mike to be cared for in the Wisteria Room, which opens up onto the beautiful garden at Searle House, and allowed all of the family, including dog Scooby, to be there at the end of his life.

"We go through the suffering, but Hospiscare understands that we're suffering and they live it with us. You will always be in that tunnel of not knowing what's going on and how you're going to get on with your life. Unfortunately, I'm still in that tunnel, but I'm starting to see a bit of light."

Peter's wife, Tina, died on our ward in August 2020. Since Tina's death, Peter has been supported by Sarah and members of our Supportive Care Team.



"18 years ago, my dad lost his beloved wife, Jane, to cancer. Being back on the hospice ward and in the room next to hers brought Dad a sense of calm and belonging.

"Dad was blown away to meet a Hospiscare nurse who remembered treating Jane and supporting her young boys and Dad in the year that she joined Hospiscare. Dad really needed to feel the personal connection with those he spent time with and the nursing team went above and beyond to spend time with him."

Tom remembers his dad, Hugh, who died on our ward in 2021. Tom and his family have been fundraising for Hospiscare as it has brought them comfort to know that the money raised in Hugh's memory will ensure those living with a terminal illness get the support they need.

Income Generation



Making every day matter to our patients and their families

The second year of the pandemic was again very challenging on our income streams and we made the decision to launch our 'Save Our Services' Appeal in November 2021 with the aim of raising an additional £1 million by March 2022 to close our deficit.

We are extremely grateful for each and every donation and we would like to take this opportunity to say thank you. Without your incredible support this year, we would have been in a very difficult place.

Take a look at some of the highlights of our fundraising activities from the past year:

£132K

from supporters who generously donated with a monthly regular gift

£347K

from friends and family members who chose to remember their loved ones with a donation

£278K

from Men's Walk, Twilight Walk, Marathon in a Month, Tour de Devon and many more events and challenges

£43K

raised by our amazing Friends of Hospiscare support groups across Exeter, Mid and East Devon

£590K

from our weekly lottery, with over 8,000 regular players providing a stable source of income for our charity

£477K

received from charitable trusts and foundations

£109K

from local businesses supporting our work

Gifts in Wills continues to be our most valuable income stream, and this year we have needed to accrue much more than expected – pushing our legacy income to £3.9 million. This is due to having to account in 2021/22 for £1.9 million of income expected in 2022/23 due to income recognition rules.

This has resulted in an increased budget deficit in 2022/23, but we will be ring fencing this income to use in the 2022/23 financial year as planned. We continue to focus on gifts in wills promotion to ensure our community and supporters know how invaluable a gift can be to help secure our future.

Our incredible supporters share their stories

"The nurses cared for my wife Mary, and for me, as we spent her final days in the hospice. I wanted to show my appreciation of the wonderful care we received by leaving a gift in my Will to Hospiscare. It was easy to do and it is lovely to be able to say thank you to the doctors and nurses in this way."

Brian pledged his gift to Hospiscare in 2021 in memory of Mary.



"My wife was diagnosed with pancreatic cancer and there was always someone from Hospiscare there for me and Debbie, even during the pandemic. By supporting Hospiscare through playing their lottery, I know there's always going to be someone there when you need them."

Jeff began playing Hospiscare's Lottery in 2011 after we cared for his brother and continues to support our hospice in memory of his wife, Debbie.



"When Dad was first diagnosed, you don't get a first shot at fighting cancer. You face that head-on. Facing the triathlon for Hospiscare head-on was my way of honouring that."

Will raised double his fundraising target in memory of his dad, Mark.

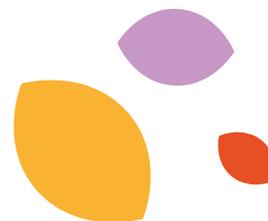


"We wanted to do something for the Hospiscare@Home team and the doctors and nurses on the ward who were all so wonderful. Marathon in a Month coincided with the anniversary of Keith's death, and also his birthday on 19 October, so it just felt right to honour him in this way and get something positive out of something so devastating."

Gill and her family raised over £2,500 in Keith's memory with their Marathon in a Month.



Financial Review



The consolidated financial statement comprises the result of the Charity together with its subsidiary company, Hospiscare (Shops) Limited.

a. Going Concern

After making appropriate enquiries, the trustees have a reasonable expectation that the Charity has adequate resources to continue in operational existence for the foreseeable future. Furthermore, the trustees have no knowledge of any other financial or regulatory action which could cause the Charity to cease operations.

For this reason, they continue to adopt the going concern basis in preparing the financial statements. Further details regarding the adoption of the going concern basis can be found in the Accounting Policies.

b. Financial Position at Year-end

The financial statements show the consolidated financial position of the charitable company ('the Charity') and its subsidiary company ('the Trading Company') (collectively 'the Group'). At 31 March 2022, the net assets of the Group were £15,719,178 (2021 - £12,690,134) an increase of £3,029,044 during the year.

Net assets comprise:

Net assets	2022	2021
	£	£
Fixed assets		
Tangible fixed assets	4,601,040	4,784,336
Investments	5,963,345	6,129,645
	<hr/>	<hr/>
	10,564,385	10,913,981
Current assets		
Stocks	2,833	12,786
Debtors	2,924,719	1,043,230
Cash	3,259,079	1,632,908
	<hr/>	<hr/>
	6,186,631	2,688,924
Less: creditors & provisions		
Creditors	845,048	742,056
Provisions	186,790	170,715
	<hr/>	<hr/>
	1,031,838	912,771
Net assets	<hr/>	<hr/>
	15,719,178	12,690,134

Tangible fixed assets mainly comprise the depreciated cost of the Charity's hospices and the plant, fixtures and fittings therein.

Investments comprise the investment portfolio managed by external professional investment managers and investment property. The Group's cash balances are receivable on demand and are held in sterling by leading UK banks and financial institutions.

Debtors and creditors represent normal working capital. Provisions represent the expected cost of future lease dilapidations in respect of the shops estate operated by the Trading Company.

The principal change in the composition of net assets during the year was an increase in the level of Cash and Debtors within the accounts. Both of these increased due to the level of legacy and fundraising income received in the last quarter of the year and accrued at the year end.

c. Financial Review and Significant Events

The principal items of the Group's income and expenditure for the year were:

	2021/22 £	2020/21 £
Income		
Donations and legacies	7,347,095	3,046,001
Charitable activities	2,080,436	2,161,327
Other trading activities	2,823,692	1,536,471
Investments	128,723	139,573
Other income	132,321	2,398,732
Total income and endowments	12,512,267	9,282,104
Expenditure		
Raising funds	3,341,539	3,016,972
Charitable activities	6,391,413	6,430,366
Total expenditure	9,732,952	9,447,338
Operating surplus / (deficit)	2,779,315	(165,234)
Investment gains	249,729	932,404
Net income	3,029,044	767,170

Net income has improved compared to last year. Legacy and fundraising income were both higher this year. This was due, in part, to accounting for legacies totalling £1.9 million within the 2021/22 accounts which was not expected to be received until 2022/23, and significant donations during the year.

The Investment portfolios have continued to perform well during 2021/22, although the value of investments held did fall during the last quarter of the year reducing the net gains that were seen. Our investments continue to be managed by external investment managers in line with our Investment Policy.

Trustees' Report

Fundraising income increased by 68% during the year as the organisation was able to return to its normal fundraising programme as COVID-19 restrictions were reduced. As a result, the organisation incurred an increase in associated fundraising costs (11%).

Funding from NEW Devon CCG represents 12% (2020/21 – 13%) of total income.

Income from shops and lottery increased by £1,287,221 as shops were able to trade more normally as COVID-19 restrictions were relaxed.

All the above funding sources are primarily used to meet the direct cost of the Charity providing services to patients and their families and necessary central costs.

Expenditure on Charitable Activities fell by £38,953 due to the ongoing challenges of recruiting staff. This phenomenon is seen across health and social care providers within Devon and the wider South West of England. The Group continues to face pressure on salary costs, particularly clinical staff, as it seeks to ensure that it can attract the appropriate level of staff to continue and grow the services offered.

d. Reserves and Reserves Management Policy

Hospiscare had a total of £15,719,178 in reserves on 31 March 2022. This is analysed into unrestricted and restricted reserves.

Unrestricted funds are spent or applied at the discretion of the Trustees to further the purpose of the Charity. The Trustees set aside part of the unrestricted funds to be used for specific purposes including the financing of capital assets, providing financial stability, and funding future projects or commitments. At the year-end, funds had been designated for the following purposes:

	2021/22	2020/21
	£	£
Financing current capital assets	4,214,995	4,387,654
COVID-19 recovery and future deficits	3,460,540	1,800,000
Stability and working capital	3,400,000	3,000,000
	<u>11,075,535</u>	<u>9,187,654</u>

Further details are disclosed in note 20 to the financial statements.

At the year-end, undesignated "free" funds amount to £1,956,850 (2021: £809,854)

Restricted and Endowment Funds

The following restricted funds are in place within the Hospiscare accounts:

- Exmouth and Lypstone (£1,742,671). This is reserve is used to deliver services to patients within this geographic area.
- Hospiscare@Home (£788,779). This reserve was set up during 2021/22 following generous donations to provide end of life care within patients' own homes to prevent them being cared for in hospital or within a hospice during their illness.
- Other smaller Restricted Funds: (£135,343)

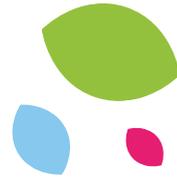
Endowment funds amounted to £20,000 (2020/21: £20,000)

e. Future Income Streams

The Charity continues to be managed prudently recognising that economic growth remains fragile and uncertain in the wake of current national and international factors. The level of legacy income is also difficult to predict and based on the current 'pipeline' the amount received in 2022/23 is likely to be lower than that received in 2021/22, not least due to the earlier recognition of two significant legacies in the prior year.

The Trustees recognise that significant funds are required to finance the Group's working capital requirements and to provide a buffer against unexpected shortfalls in income, particularly in respect of fundraising activities, legacies that are unpredictable in amount and timing, and against falls in the value of the Charity's investments. Hospiscare's Reserve Policy states that unallocated reserves should be less than 12 months expenditure. At the year end, the total value of unallocated reserves was £8.8 million compared to costs for the year of £9.7 million. While the reserves holding is in line with the Organisation's Reserve Policy, the balance is larger than normal due to the £1.9 million of legacy income recognised in 2021/22 rather than as expected within 2022/23. As such, these funds will be used to fund expenditure during the 2022/23 financial year and will reduce the level of reserves held by the organisation.

Our Investment Approach



Investment Policy, Performance and Objectives

Asset Allocation

Hospiscare is reliant on fundraising and donations for its activities. Its assets are principally held as investments and cash. The key risk to long-term funds is inflation and the assets are invested to mitigate this risk over the long term. The Trustees understand that this is likely to mean that investments will be concentrated in real assets and that their capital value can fluctuate.

The investment portfolios are split into two risk profiles defined by the managers as, 'low risk' and 'low-medium risk', with the ratio and profile reviewed and monitored by the Finance and Income Generation Committee and approved by the Board. The risk profile is determined to mitigate the key risk of inflation.

The Charity's investment assets can be invested widely and should be diversified by asset class, by fund manager and by security. Asset classes may include cash, bonds, equities, property, hedge funds, structured products, private equity, commodities and any other asset that is deemed suitable for the Charity.

The asset class invested in are decided by external professional investment managers according to the risk profile determined by the Trustees.

Short term reserves are held to provide financial security, as they may be required at short notice. As such, capital volatility cannot be tolerated and these assets are maintained in cash with highly rated banks and financial institutions.

Benchmarking

Performance of the portfolios is measured against an agreed index plus a performance premium. The indices used and the performance premium are reviewed by the Finance and Income Generation Committee in discussion with the appointed investment manager. A recommendation will then be made to the Board for approval.

Method of Review

The Trustees have delegated their day-to-day investment responsibilities to Charles Stanley and Investec on a discretionary basis. The Charity's investments are kept under regular review by the Finance and Income Generation Committee, which is advised by the investment portfolio managers, with a view to ensuring that the Charity's investments are positioned to meet the strategy detailed in the investment policy. The Board considers a report on investment performance at least annually.

Restrictions and Ethical Policy

The Trustees take account of social, environmental and ethical issues in the charity's investment policy and endeavour not to invest in companies that draw a major part of their income from tobacco-related products.

How we Manage Risks and Uncertainties

Hospiscare has a clear risk management framework in place which is overseen by the Audit, Risk, and Corporate Governance Committee as delegated by the Board of Trustees. The corporate risk register is reviewed at all committees and by the Board and the Audit, Risk and Corporate Governance Committee annually. Departmental risks are reviewed by the Senior Management Team (SMT) and appropriate departments. In addition, the trading company has a corporate and departmental risk register and its board reviews this at each meeting.

Risk Management

Hospiscare has a clear risk management framework in place which is overseen by the Audit, Risk, and Corporate Governance Committee as delegated by the Board of Trustees. The corporate risk register is reviewed at all committees and by the Board and the Assurance, Risk and Corporate Governance Committee annually. Departmental risks are reviewed by the Senior Management Team (SMT) and appropriate departments. In addition, the trading company has a corporate and departmental risk register and its board reviews this at each meeting.

The responsibility for the management and control of a charity rests with the Trustee body and therefore their involvement in the key aspects of the risk management process is essential, particularly in setting the parameters of the process and reviewing and considering the results.

The risk register is managed by an electronic data management system.

Bi-monthly risk surgeries are carried out with the Directors and Head of Retail to ensure the risks are kept up-to date and managed.

The Board has considered risk appetite and recognises that the charity's long-term sustainability depends upon the delivery of its strategic objectives and its relationships with patients, supporters, the local community and strategic partners.

Hospiscare will not accept risks that materially impact on patient safety. However, Hospiscare has a greater appetite to take considered risks in terms of their impact on organisational issues and reputation. Hospiscare has appetite to pursue innovation and to take opportunities where positive gains can be anticipated, within the constraints of the regulatory environments.

Hospiscare is compliant with all relevant legal, statutory and regulatory standards. It has followed Charity Commission guidance and complies with Principle 4 of the Charity Governance Code, Decision Making, Risk and Control.

It has updated its information governance and security in line with the General Data Protection Regulation (GDPR) and has appointed a Data Protection Officer who is the Head of Governance and Data Protection.

The Senior Information Risk Owner (SIRO) role is held by the Director of Estates and Facilities with overall responsibility for the charity's information risk policy. The SIRO is accountable and responsible for information risk across the organisation.

Principal Risks and Uncertainties

The principal risks and uncertainties facing the Charity and the Trustees' plans and strategies for managing those risks are set out in the table below:

Risk Title	Summary of Control
Insufficient quality of care	<ul style="list-style-type: none"> • Adherence to CQC regulation and statutory obligations • Systematic quality review and audit • In-house monitoring by Quality Assurance and Improvement Committee and Patient Experience and Safety meetings • Robust systems and processes for clinical and care work
The Charity not having enough money to ensure the continuation of services and levels of care	<ul style="list-style-type: none"> • Annual Budget Process gives a 12 month forecast of financial performance and allows comparison of actual results against the forecast • This is supported by a six year overview for the period ending 31 March 2029
Care falls below required CQC standards and does not meet Hospiscare ambition of excellence	<ul style="list-style-type: none"> • Demonstrate effective corporate governance contributing to the mitigation of this risk • This is overseen by the CEO and company secretary
Potential breach of legislation and guidelines/regulatory compliance	<ul style="list-style-type: none"> • Appropriate policies and procedures put into place and updated as and when required so all staff and volunteers are aware of their obligations to uphold required legislation
Inability to recruit and retain appropriately skilled staff at the levels required to deliver Hospiscare's services	<ul style="list-style-type: none"> • Collaborative working between People and Clinical Leaders on Clinical Careers Days, and future initiatives planned for targeted recruitment campaigns.

Fundraising Standards Information

We adhere to the Fundraising Regulator and its Fundraising Code along with the Gambling Commission and its License Conditions and Codes of Practice. We have not had any breaches against these during 2021/22. We regularly monitor and report on all of our fundraising activities and provide training and guidance to those taking on our fundraising activities, meeting regularly with our volunteer fundraising groups.

We are very mindful of how we engage with vulnerable people and ensure we work within the Data Protection Laws and Fundraising Code of Practice. We also have excellent support from our clinical colleagues if we have a concern about a supporter and we have a Safeguarding Lead we can seek advice from if needed.

Complaints

During the year, we received 10 complaints linked to its fundraising. While none of the complaints received were of a serious nature, we have worked with the complainant to understand their concerns and make suitable adjustments to our fundraising approach where this has been necessary for future events.

Structure, Governance and Management



Hospiscare is a registered charitable company limited by guarantee.

The Charity is constituted under Articles of Association and is a registered charity, number 297798. The Charity was set up in 1982 and was established as a company limited by guarantee in 1987. In the event of the company being wound up, members are required to contribute an amount of £1.

The company has a wholly-owned trading subsidiary Hospiscare (Shops) Limited (company number 02201730 (England & Wales), whose sole purpose is to raise funds for the Charity by operating a chain of local charity shops and a warehouse.

Organisational Structure

Hospiscare is governed by its Board and there are six sub-committees of the Board which scrutinise specific areas in detail. These sub-committees are: Finance and Income Generation Committee, the Audit, Risk and Corporate Governance Committee, the Quality Assurance and Improvement Committee, the People and Estates Committee, the Nominations Committee and the Remuneration Committee.

The Chair of the Trustees is Brian Aird, whose career in NHS management encompassed periods as a Director and a CEO of NHS organisations. Brian was appointed as Chair in March 2022.

The Charity is organised so that the Trustees meet collectively four times a year to direct the management of its affairs. Strategy days are also held twice a year.

The operational management of the Charity lies with the Senior Management Team (SMT). The SMT meets monthly.

Hospiscare (Shops) Limited is managed by its Board of Directors comprising a Trustee of the Charity, members of the Charity's senior management team and non-executive directors with relevant experience. Hospiscare has reviewed the 2018 Charity Governance Code and aspires to meet its principles.

Appointment, Induction and Training of Trustees

The Board seeks to ensure that it encompasses an appropriate range of skills and talent. Hospiscare's Nominations Committee oversees the recruitment of new Trustees, following the Charity's policy on Trustee recruitment. Trustees are appointed by the Board and serve for three years after which period they may put themselves forward for re-appointment. Trustees may be appointed for a maximum of three consecutive terms of three years after which, they must stand down for at least one year. The Trustees also receive training on other topics relevant to governance and their committee membership.

New Trustees are offered a programme of induction which includes an induction pack and a comprehensive induction programme, which includes spending time with each of the key services that Hospiscare provides and visiting its shops. Trustees identify topics on which they would like further information or training and appropriate measures are put in place to provide this. A presentation about patient experience is made by clinical staff, anonymously, at the beginning of every Board meeting.

Management

The day to day operation of the Charity is carried out by the SMT, who have delegated responsibility and are employees of the Charity.

During 2021/22 care services throughout the Charity were provided under the direction of the Director of Care, Tina Naldrett.

Trustees' Report

Fundraising and marketing and communications staff work under the direction of the Director of Fundraising and Marketing, Katie Chantler. The finance function was overseen by the Director of Finance, Dominic Rogers. The Director for People, Annette Hill, is responsible for HR and Volunteering. The Operations Director, Wayne Gale, is responsible for facilities management and health and safety.

The above members of the SMT report to the Chief Executive, Andrew Randall, who oversees all operational and strategic matters.

Senior Management Team Remuneration

The Charity has a Remuneration Committee, which reviews the pay and benefits of its senior staff annually.

The committee comprises of up to six Trustees, one of which must be the Chair of Trustees. The committee considers information from a variety of available sources to benchmark the pay and benefits of its senior staff and makes recommendations to the Board accordingly.

Employees

Hospiscare is committed to the principle of equal opportunities in employment and recognises its obligations under the Equality Act 2010. Hospiscare declares its opposition to any form of less favourable treatment, whether through direct or indirect, associated or perceived discrimination accorded to Hospiscare staff, or job applicants, on the grounds of their race/nationality or ethnic origin, disability, sex, age, sexual orientation and gender reassignment, marital and civil partnership status, pregnancy and maternity, religion or belief (otherwise known as 'protected characteristics' as defined by the Equality Act 2010), including Human Rights.

Hospiscare is committed to creating a positive culture that fosters respect for all staff and promotes positive practice, valuing the diversity of all individuals and communities.

Hospiscare embraces and recognises the importance of diversity, knowing that different people bring different perspectives, ideas, knowledge and culture that brings great strength to our organisation.

Our aim is to create a culture that respects and values each person's differences and promotes dignity, equality, diversity and inclusivity to encourage individuals to develop and maximise their true potential.

Continued close attention is paid to the health and safety of employees and as such, all staff are provided with regular health and safety training that is in compliance with Hospiscare's Health and Safety Policy.

Employee views are sought through a number of forums including one to ones, team meetings and our 'Staff Voice' forum. Hospiscare's strong 'Speaking Up' culture is also encouraged by our 'Freedom to Speak Up Guardians' from across the organisation. Information concerning the Charity and its activities and performance are shared with employees through several mediums including email, the staff intranet and organisational meetings.

Risk Management

The responsibility for the management and control of a charity rests with the Trustee body and therefore their involvement in the key aspects of the risk management process is essential, particularly in setting the parameters of the process and reviewing and considering the results.

The corporate risk register is reviewed at all committees and by the Board and the Assurance, Risk and Corporate Governance Committee annually. Departmental risks are reviewed by SMT and appropriate departments. Update reports will be presented to Committees and the Board.

The trading company also has a corporate and departmental risk register and its Board reviews this at each meeting.

The risk register is managed by an electronic data management system.

Bi-monthly risk surgeries are carried out with the Directors and Head of Retail to ensure the risks are kept up-to-date and managed.

The Board has considered risk appetite and recognises that the Charity's long-term sustainability depends upon the delivery of its strategic objectives and its relationships with patients, supporters, the local community and

strategic partners.

Hospiscare will not accept risks that materially impact on patient safety. However, Hospiscare has a greater appetite to take considered risks in terms of their impact on organisational issues and reputation. Hospiscare has appetite to pursue innovation and to take opportunities where positive gains can be anticipated, within the constraints of the regulatory environments.

Hospiscare is compliant with all relevant legal, statutory and regulatory standards. It has followed Charity Commission guidance and complies with Principle 4 of the Charity Governance Code, Decision Making, Risk and Control.

Hospiscare has updated its information governance and security in line with the General Data Protection Regulation (GDPR) and has appointed a Data Protection Officer who is the Head of Governance and Data Protection. The Senior Information Risk Owner (SIRO) role is held by the Director of Estates and Facilities with overall responsibility for the Charity's information risk policy. The SIRO is accountable and responsible for information risk across the organisation.

Related Parties

The Articles of Association of Hospiscare (Shops) Limited give the charity power to control the decisions of that company.

Reference and Administration



Company Number	02164215
Charity Number	297798

Directors and Trustees

Secretary	Andrew Randall
Registered Office	Searle House, Dryden Road, Exeter, Devon, EX2 5JJ
Brian Aird	Chair of Trustees (Appointed 10 January 2022)
Dr Helen Enright	Vice Chair of Trustees
John Hawkins	Trustee (Resigned 13 December 2022)
Jose Cortizo	Trustee
Peter Serjeant	Trustee
Sarah Jackson	Trustee
Jenny Winslade	Trustee
Matthew Bryant	Trustee
Cathy Durston	Trustee
Mike Williams	Trustee (Appointed 10 January 2022)
Greg Allen	Trustee
Barbara Sweeney	Trustee (Resigned 23 July 2022)
Robert (Geoff) Pringle	Chair of Trustees (Resigned 6 April 2021)
Charlotte McGregor	Trustee (Resigned 28 September 2021)
Geoffrey Bush	Trustee (Resigned 28 September 2021)
Ben Turner	Trustee (Resigned 28 September 2021)

Senior Management Team

Chief Executive	Andrew Randall
Director of Care	Tina Naldrett
Director of Finance	Dominic Rogers
Director for People	Annette Hill
Director of Fundraising and Marketing	Katie Chantler
Operations Director	Wayne Gale

Advisors

Principal Bankers	National Westminster Bank Plc, 59 High Street, Exeter, EX4 3DL
Independent Auditors	Bishop Fleming LLP, Chartered Accountants, 2nd Floor Stratus House, Emperor Way, Exeter Business Park, Exeter, EX1 3QS

Statement of Trustees' Responsibilities

The Trustees (who are also directors of Hospiscare for the purposes of company law) are responsible for preparing the Trustees' report (including the group strategic report) and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Charity and company law requires the Trustees to prepare financial statements for each financial year. Under company law, the Trustees must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the Charitable Company and the Group, and of the incoming resources and application of resources, including the income and expenditure, of the charitable group for that period. In preparing these 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 2019 (FRS 102)
- make judgements and accounting estimates that are reasonable and prudent
- prepare the financial statements on the going concern basis, unless it is appropriate to presume that the Charitable Company and the Group will continue in operation.

The Trustees are responsible for keeping adequate accounting records that are sufficient to show and explain the Charitable Company and the Group's transactions; to disclose, with reasonable accuracy at any time, the financial position of the Charitable Company and the Group 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 Charitable Company and the Group and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

Disclosure of Information to Auditors

Each of the persons who are Trustees at the time when this Trustees' report is approved has confirmed that:

- so far as that Trustee is aware, there is no relevant audit information of which the charitable group's auditors are unaware, and
- that Trustee has taken all the steps that ought to have been taken as a Trustee in order to be aware of any information needed by the charitable group's auditors in connection with preparing their report and to establish that the charitable group's auditors are aware of that information.

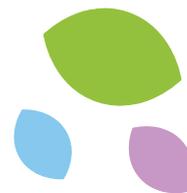
This report, incorporating the group strategic report, was approved by the Trustees, in their capacity as company directors, and signed on their behalf by:

Brian Aird

Brian Aird

Chair of Trustees

Independent Auditors' Report to the Members of Hospiscare



Opinion

We have audited the financial statements of Hospiscare (the 'Parent Charitable Company') and its subsidiaries (the 'Group') for the year ended 31 March 2022 which comprise the Consolidated statement of financial activities, the Consolidated balance sheet, the Charity balance sheet, the Consolidated statement of cash flows and the related notes, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the Group's and of the Parent Charitable Company's affairs as at 31 March 2022 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 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 Auditors' responsibilities for the audit of the financial statements section of our report. We are independent of the Group in accordance with the ethical requirements that are relevant to our audit of the financial statements in the United Kingdom, including the Financial Reporting Council's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions Relating to Going Concern

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

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the Group's or the Parent Charitable Company's ability to continue as a going concern for a period of at least 12 months from when the financial statements are authorised for issue.

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

Other Information

The other information comprises the information included in the Annual Report and Accounts other than the financial statements and our Auditors' report thereon. The Trustees are responsible for the other information contained within the Annual Report. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon. Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the course of the audit, or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

Opinion on Other Matters Prescribed by the Companies Act 2006

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

- the information given in the Trustees' report including the Strategic report for the financial year for which the financial statements are prepared is consistent with the financial statements.
- the Trustees' report and the Strategic report have been prepared in accordance with applicable legal requirements.

Matters on which we are Required to Report by Exception

In the light of our knowledge and understanding of the Charitable Company and its environment obtained in the course of the audit, we have not identified material misstatements in the Trustees' report including the Strategic report.

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

- the Parent Charitable Company has not kept adequate and sufficient accounting records, 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 Trustees' responsibilities statement, 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 the 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 the parent charitable company or to cease operations, or have no realistic alternative but to do so.

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

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

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

- the nature of the sector, control environment and the Group and Parent Company's performance;
- results of our enquiries of management and the Trustees, about their own identification and assessment of the risks of irregularities;
- any matters we identified having obtained and reviewed the Group and Parent Company's documentation of their policies and procedures relating to: identifying, evaluating and complying with laws and regulations and whether they were aware of any instances of non-compliance; detecting and responding to the risks of fraud and whether they have knowledge of any actual, suspected or alleged fraud; the internal controls established to mitigate risks of fraud or non-compliance with laws and regulations; and
- the matters discussed among the audit engagement team regarding how and where fraud might occur in the financial statements and any potential indicators of fraud.
- As a result of these procedures, we have considered the opportunities and incentives that may exist within the Group and Parent Company for fraud and identified the highest area of risk to be in relation to income recognition, with a particular risk in relation to year-end cut-off. We also identified lease disclosures and the provision for dilapidations as risks. In common with all audits under ISAs (UK), we are also required to perform specific procedures to respond to the risk of management override of controls using manual journal entries.

In common with all audits under ISAs (UK), we are also required to perform specific procedures to respond to the risk of management override.

We have also obtained an understanding of the legal and regulatory frameworks that the charity operates in, focusing on provisions of those laws and regulations that had a direct effect on the determination of material amounts and disclosures in the financial statements. Laws and regulations that are of direct significance to the Group, and of which non-compliance could result in material misstatement, are considered to be the UK Companies Act, Charities SORP, FRS 102, Charities Legislation and UK tax legislation.

In addition, we considered provisions of other laws and regulations that do not have a direct effect on the financial statements but compliance with which may be fundamental to the Group's ability to operate or to avoid a material penalty. These included data protection regulations, health and safety regulations, employment legislation and care quality commission compliance.

Our procedures to respond to risks identified included the following for the Parent Company and its subsidiaries, as was considered appropriate:

- reviewing the financial statement disclosures and testing to supporting documentation to assess compliance with provisions of relevant laws and regulations described as having a direct effect on the financial statements;
- reviewing the financial statement disclosures and testing to supporting documentation to assess the recognition of revenue;
- enquiring of Trustees and management concerning actual and potential litigation and claims;
- performing procedures to confirm material compliance with the requirements of the above regulations;
- performing analytical procedures to identify any unusual or unexpected relationships that may indicate risks of material misstatement due to fraud;
- in addressing the risk of fraud through management override of controls, testing the appropriateness of journal entries and other adjustments; assessing whether the judgments made in accounting estimates are indicative of potential bias; and
- reviewing calculations relating to leases and dilapidations and testing to supporting documentation.

We also communicated relevant identified laws and regulations and potential fraud risks to all engagement team members and remained alert to any indications of fraud or non-compliance with laws and regulations throughout the audit.

Our audit procedures were designed to respond to risks of material misstatement in the financial statements, recognising that the risk of not detecting a material misstatement due to fraud is higher than the risk of not detecting one resulting from an error, as fraud may involve deliberate concealment by, for example, forgery, misrepresentations or through collusion. There are inherent limitations in the audit procedures performed and the further removed non-compliance with laws and regulations is from the events and transactions reflected in the financial statements, the less likely we would become aware of it.

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

Use of our Report

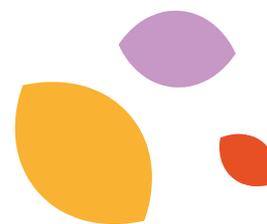
This report is made solely to the Charitable Company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006. Our audit work has been undertaken so that we might state to the Charitable Company's members those matters we are required to state to them in an Auditors' report 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 its members, as a body, for our audit work, for this report, or for the opinions we have formed.

Tim Borton FCA (Senior Statutory Auditor) for and on behalf of
Bishop Fleming LLP, Chartered Accountants, Statutory Auditors
2nd Floor Stratus House, Emperor Way
Exeter Business Park, Exeter, EX1 3QS

Date: 15 December 2022

Financial Statements

for the year ended 31 March 2022



Consolidated Statement of Financial Activities

(including income and expenditure account) for the year ended 31 March 2022

	Note	Endowment funds 2022 £	Restricted funds 2022 £	Unrestricted funds 2022 £	Total funds 2022 £	Total funds 2021 £
Income and endowments from:						
Donations and legacies	4	-	1,603,067	5,744,028	7,347,095	3,046,001
Charitable activities	5	-	-	2,080,436	2,080,436	2,161,327
Other trading activities	6	-	-	2,823,692	2,823,692	1,536,471
Investments	7	-	48,647	80,076	128,723	139,573
Other income	8	-	-	132,321	132,321	2,398,732
Total income and endowments		-	1,651,714	10,860,553	12,512,267	9,282,104
Expenditure on:						
Raising funds	9	-	-	3,341,539	3,341,539	3,016,972
Charitable activities	10	-	1,682,972	4,708,441	6,391,413	6,430,366
Total expenditure:		-	1,682,972	8,049,980	9,732,952	9,447,338
Net (expenditure)/income before net gains on investments		-	(31,258)	2,810,573	2,779,315	(165,234)
Net gains on investments		-	25,425	224,304	249,729	932,404
Net movement in funds		-	(5,833)	3,034,877	3,029,044	767,170
Reconciliation of funds:						
Total funds brought forward		20,000	2,672,626	9,997,508	12,690,134	11,922,964
Net movement in funds		-	(5,833)	3,034,877	3,029,044	767,170
Total funds carried forward		20,000	2,666,793	13,032,385	15,719,178	12,690,134

The consolidated statement of financial activities includes all gains and losses recognised in the year.

The notes on pages 34 to 55 form part of these financial statements.

Consolidated Balance Sheet

as at 31 March 2022

	Note	2022 £	2021 £
Fixed assets			
Tangible assets	14	4,601,040	4,784,336
Investments	16	5,593,345	5,759,645
Investment property	15	370,000	370,000
		10,564,385	10,913,981
Current assets			
Stocks		2,833	12,786
Debtors	17	2,924,719	1,043,230
Cash at bank and in hand		3,259,079	1,632,908
		6,186,631	2,688,924
Creditors: amounts falling due within one year	18	(845,048)	(742,056)
Net current assets		5,341,583	1,946,868
Total assets less current liabilities		15,905,968	12,860,849
Provisions for liabilities	19	(186,790)	(170,715)
Total net assets		15,719,178	12,690,134
Charity funds			
Endowment funds	20	20,000	20,000
Restricted funds	20	2,666,793	2,672,626
Unrestricted funds	20	13,032,385	9,997,508
Total funds		15,719,178	12,690,134

The Trustees acknowledge their responsibilities for complying with the requirements of the Act with respect to accounting records and preparation of financial statements.

The financial statements were approved and authorised for issue by the Trustees and signed on their behalf by:

Brian Aird

Brian Aird

Chair of Trustees

Date: 13 December 2022

The notes on pages 34 to 55 form part of these financial statements.

Charity Statement of Financial Position (as at 31 March 2022)

	Note	2022 £	2021 £
Fixed assets			
Tangible assets	14	4,571,461	4,681,391
Investments	16	5,703,347	5,869,647
Investment property	15	370,000	370,000
Current assets			
Debtors	17	3,073,839	1,142,525
Cash at bank and in hand		2,833,246	1,305,423
Creditors: amounts falling due within one year	18	(767,215)	(675,064)
Net current assets		5,139,870	1,772,884
Total assets less current liabilities		15,784,678	12,693,922
Total net assets		15,784,678	12,693,922
Charity funds			
Endowment funds	20	20,000	20,000
Restricted funds	20	2,666,793	2,672,626
Unrestricted funds	20	13,097,885	10,001,296
Total funds		15,784,678	12,693,922

The Charity's net movement in funds for the year was £3,090,756 (2021: (£478,951)).

The Trustees acknowledge their responsibilities for complying with the requirements of the Act with respect to accounting records and preparation of financial statements.

The notes on pages 34 to 55 form part of these financial statements.

The financial statements were approved and authorised for issue by the Trustees and signed on their behalf by:



Brian Aird

Chair of Trustees

Consolidated Statement of Cash Flows

(for the year ended 31 March 2022)

	Note	2022 £	2021 £
Cash flows from operating activities			
Net cash generated by operating activities	22	1,144,120	4,014
Cash flows from investing activities			
Dividends, interests and rents from investments		128,723	139,573
Purchase of tangible fixed assets		(102,635)	(73,748)
Loss on sale of tangible fixed assets		39,934	8,015
Proceeds from sale of investments		1,154,562	163,460
Purchase of investments		(738,533)	(190,291)
Net cash provided by investing activities		482,051	47,009
Cash flows from financing activities			
Net cash provided by financing activities		-	-
Change in cash and cash equivalents in the year		1,626,171	51,023
Cash and cash equivalents at the beginning of the year		1,632,908	1,581,885
Cash and cash equivalents at the end of the year	23	3,259,079	1,632,908

The notes on pages 34 to 55 form part of these financial statements.

Notes to the Financial Statements (for the year ended 31 March 2022)

1. General Information

The Charity is a company limited by guarantee, incorporated in England in the United Kingdom. Its registered office is Searle House, Dryden Road, Exeter, EX2 5JJ. The members of the company are the Trustees named on page 24. In the event of the Charity being wound up, the liability in respect of the guarantee is limited to £1 per member of the Charity.

2. Accounting Policies

2.1 Basis of Preparation of Financial Statements

The financial statements have been prepared in accordance with the Charities SORP (FRS 102) -Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Companies Act 2006.

Hospiscare meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy.

The Consolidated statement of financial activities (SOFA) and Consolidated balance sheet consolidate the financial statements of the Charity and its subsidiary undertakings. The results of the subsidiary are consolidated on a line by line basis.

The Charity has taken advantage of the exemption allowed under section 408 of the Companies Act 2006 and has not presented its own Statement of Financial Activities in these financial statements.

2.2 Going Concern

The Trustees have assessed whether the use of the going concern basis is appropriate and have considered possible events or conditions that might affect the ability of the Group to continue as a going concern. The Trustees have made this assessment for a period of at least one year from the date of approval of the financial statements.

The organisation has reviewed its compliance with the CQC regulatory framework and does not believe that the organisation would be placed in special measures based on the outcome of the assessment. As such, there are no concerns regarding the ability of the Charity to continue to deliver its principal objectives.

2.3 Fund Accounting

General funds are unrestricted funds which are available for use at the discretion of the Trustees in furtherance of the general objectives of the Group and which have not been designated for other purposes.

Designated funds comprise unrestricted funds that have been set aside by the Trustees for particular purposes. The aim and use of each designated fund is set out in the notes to the financial statements.

Restricted funds are funds which are to be used in accordance with specific restrictions imposed

by donors or which have been raised by the Group for particular purposes. The costs of raising and administering such funds are charged against the specific fund. The aim and use of each restricted fund is set out in the notes to the financial statements.

Investment income, gains and losses are allocated to the appropriate fund.

2.4 Income

All income is recognised once the Charity has entitlement to the income, it is probable that the income will be received and the amount of income receivable can be measured reliably.

For legacies, entitlement is taken as the earlier of the date on which either: the Charity is aware that probate has been granted, the estate has been finalised and notification has been made by the executor(s) to the Group that a distribution will be made, or when a distribution is received from the estate. Receipt of a legacy, in whole or in part, is only considered probable when the amount can be measured reliably and the Charity has been notified of the executor's intention to make a distribution. Where legacies have been notified to the Charity, or the Charity is aware of the granting of probate, and the criteria for income recognition have not been met, then the legacy is treated as a contingent asset and disclosed if material.

Income tax recoverable in relation to donations received under Gift Aid or deeds of covenant is recognised at the time of the donation.

Income from grants is included in incoming resources when receivable. When donors specify that grants are for a particular restricted purpose, which do not amount to pre-conditions regarding entitlement, this income is included in incoming resources within restricted funds when receivable.

When income is received in advance of delivering the service, it is deferred until the Group is entitled to that income.

Investment income is brought into the accounts when it is received.

Lottery income is accounted for based on the date of the lottery for which the ticket has been purchased.

2.5 Expenditure

Expenditure is recognised once there is a legal or constructive obligation to transfer economic benefit to a third party, it is probable that a transfer of economic benefits will be required in settlement and the amount of the obligation can be measured reliably. Expenditure is classified by activity. The costs of each activity are made up of the total of direct costs and shared costs, including support costs involved in undertaking each activity. Direct costs attributable to a single activity are allocated directly to that activity. Shared costs which contribute to more than one activity and support costs which are not attributable to a single activity are apportioned between those activities on a basis consistent with the use of resources. Central staff costs are allocated on the basis of time spent, and depreciation charges allocated on the portion of the asset's use.

Expenditure on raising funds includes all expenditure incurred by the Group to raise funds for its charitable purposes and includes costs of all fundraising activities events and non-charitable trading.

Expenditure on charitable activities is incurred on directly undertaking the activities which further the Group's objectives, as well as any associated support costs.

All expenditure is inclusive of irrecoverable VAT.

2.6 Interest Receivable

Interest on funds held on deposit is included when receivable and the amount can be measured reliably by the Group; this is normally upon notification of the interest paid or payable by the institution with whom the funds are deposited.

2.7 Tangible Fixed Assets and Depreciation

Tangible fixed assets costing £2,000 or more are capitalised and recognised when future economic benefits are probable and the cost or value of the asset can be measured reliably.

Tangible fixed assets are initially recognised at cost. After recognition, under the cost model, tangible fixed assets are measured at cost less accumulated depreciation and any accumulated impairment losses. All costs incurred to bring a tangible fixed asset into its intended working condition should be included in the measurement of cost.

At each reporting date the Charity assesses whether there is any indication of impairment. If such indication exists, the recoverable amount of the asset is determined to be the higher of its fair value less costs to sell and its value in use. An impairment loss is recognised where the carrying amount exceeds the recoverable amount.

Depreciation is charged so as to allocate the cost of tangible fixed assets less their residual value over their estimated useful lives, using the straight-line method.

Depreciation is provided on the following bases:

Freehold Buildings	- 2% straight line
Leasehold Land & Buildings	- 2% straight line or over the term of the lease if shorter
Plant and Machinery	- 20% straight line
Motor Vehicles	- 20% straight line
Fixtures & Fittings	- 15-33% straight line

2.8 Investments

Fixed asset investments are a form of financial instrument and are initially recognised at their transaction cost and subsequently measured at fair value at the balance sheet date, unless the value cannot be measured reliably in which case it is measured at cost less impairment. Investment gains and losses, whether realised or unrealised, are combined and presented as 'Net Gains on investments' in the consolidated statement of financial activities.

Investments in subsidiaries are valued at cost less provision for impairment.

2.9 Stocks

Stocks are stated at the lower of cost and net realisable value, being the estimated selling price less costs to complete and sell. Cost is based on the cost of purchase on a weighted average basis. Work in progress and finished goods include labour and attributable overheads.

At each reporting date, stocks are assessed for impairment. If stock is impaired, the carrying amount is reduced to its selling price less costs to complete and sell. The impairment loss is recognised immediately in profit or loss.

FRS 102 recommends that goods donated for resale are valued. However, estimating the fair value of donated goods for resale is impractical because of the high level of low value items received. The Trustees have therefore determined that no meaningful valuation can be made and no value has been assigned to the stock of donated goods.

2.10 Debtors

Trade and other debtors are recognised at the settlement amount after any trade discount offered.

Prepayments are valued at the amount prepaid.

2.11 Cash at bank in hand

Cash at bank and in hand includes cash and short-term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

2.12 Liabilities

Liabilities and provisions are recognised when there is an obligation at the balance sheet date as a result of a past event, it is probable that a transfer of economic benefit will be required in settlement, and the amount of the settlement can be estimated reliably.

Liabilities are recognised at the amount that the Group anticipates it will pay to settle the debt or the amount it has received as advanced payments for the goods or services it must provide.

Provisions are measured at the best estimate of the amounts required to settle the obligation.

2.13 Financial Instruments

The Group only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value.

2.14 Pensions

All staff who are eligible to remain within the NHS Pension Scheme do so. The NHS Pension Scheme is an unfunded, multi-employer defined benefit pension scheme. The Group, like similar employers in this sector, is unable to identify its share of the underlying assets and liabilities in the scheme and therefore, as required by FRS 102, accounts for this scheme as if it was a defined contribution scheme. Contributions are paid to the scheme by the Group and by employees.

Additionally, the Group operates a further defined contribution pension scheme for other staff.

The pension charge represents the amounts payable by the Group to the funds in respect of the year.

3. Critical Accounting Estimates and Areas of Judgment

Estimates and judgments 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. The estimates and assumptions that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next financial year are discussed below.

In the application of the Group's accounting policies, the Trustees are required to make judgements,

Notes to the Financial Statements (for the year ended 31 March 2022)

estimates and assumptions about the carrying amount of assets and liabilities that are not readily apparent from other sources. The estimates and associated assumptions are based on historical experience and other factors that are considered to be relevant. Actual results may differ from these estimates.

The estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognised in the period in which the estimate is revised where the revision affects only that period, or in the period of the revision and future periods where the revision affects both current and future periods.

The estimates and assumptions which have a significant risk of causing a material adjustment to the carrying amount of assets and liabilities are outlined below.

Useful Economic Lives of Tangible Assets

The annual depreciation charge is sensitive to any changes in the estimated useful life and residual values of tangible assets. The useful economic lives and residual value is assessed on an annual basis and are amended only when evidence shows a change in the estimated economic lives or residual life. Criteria used to assess the economic life and residual value includes technological advancement, economic utilisation and physical condition of the asset and future investments.

Dilapidations

The dilapidation provision is assessed on a lease-by-lease basis, calculated as a proportion of the annual rent in light of previous experience of actual dilapidation costs. The provision accrues over the term of the lease.

Legacies

Entitlement to legacies is assessed on a case by case basis taking into account factors such as whether probate has been granted and whether the amount receivable can be reliably estimated. Legacies are only accrued when the conditions set out in note 2.4 have been met.

4. Income from Donations and Legacies

	Restricted funds 2022 £	Unrestricted funds 2022 £	Total funds 2022 £	Total funds 2021 £
Donations and fundraising	418,915	1,380,004	1,798,919	1,068,782
Legacies	77,850	3,848,984	3,926,834	1,293,763
Grants	1,101,552	343,401	1,444,953	519,234
Gift Aid	4,750	171,639	176,389	164,222
Total 2022	1,603,067	5,744,028	7,347,095	3,046,001
Total 2021	462,317	2,583,684	3,046,001	

5. Income from Charitable Activities

	Restricted funds 2022 £	Unrestricted funds 2022 £	Total funds 2022 £	Total funds 2021 £
Education	-	126,370	126,370	118,701
NEW Devon CCG	-	1,460,981	1,460,981	1,295,570
Coastal towns homecare services	-	493,085	493,085	747,056
Total 2022	-	2,080,436	2,080,436	2,161,327
Total 2021	75,000	2,086,327	2,161,327	

6. Income from other Trading Activities

Income from non-charitable trading activities

	Unrestricted funds 2022 £	Total funds 2022 £	Total funds 2021 £
Hospiscare shops	2,234,267	2,234,267	936,497
Lottery	589,425	589,425	599,974
Total 2022	2,823,692	2,823,692	1,536,471
Total 2021	1,536,471	1,536,471	

7. Investment Income

	Restricted funds 2022 £	Unrestricted funds 2022 £	Total funds 2022 £	Total funds 2021 £
Retail income	3,567	-	3,567	14,644
Income on investments	39,203	76,504	115,707	123,865
Income on cash deposits	5,877	3,572	9,449	1,064
Total 2022	48,647	80,076	128,723	139,573
Total 2021	64,014	75,559	139,573	

8. Other Income

	Unrestricted funds 2022 £	Total funds 2022 £	Total funds 2021 £
Government grants and insurance claims receivable relating to COVID-19	97,850	97,850	2,355,964
Catering income	8,630	8,630	7,800
Renewable energy income	18,359	18,359	30,045
Property insurance income	7,482	7,482	4,923
Total 2022	132,321	132,321	2,398,732
Total 2021	2,398,732	2,398,732	

9. Expenditure on Raising Funds

Costs of Raising Voluntary Income

	Unrestricted funds 2022 £	Total funds 2022 £	Total funds 2021 £
Costs of raising voluntary income – direct costs	301,066	301,066	180,029
Costs of raising voluntary income – wages and salaries	388,951	388,951	369,892
Costs of raising voluntary income – NI	33,547	33,547	31,199
Costs of raising voluntary income – pension costs	25,972	25,972	23,849
Allocated centrally incurred fundraising and governance costs including depreciation	274,483	274,483	250,705
Total 2022	1,024,019	1,024,019	855,674
Total 2021	855,674	855,674	

Other Trading Expenses

	Unrestricted funds 2022 £	Total funds 2022 £	Total funds 2021 £
Hospiscare shops' expenditure	969,440	969,440	848,057
Lottery expenditure	147,544	147,544	126,814
Staff costs	1,163,639	1,163,639	1,143,006
Hospiscare shops' depreciation	36,897	36,897	42,695
Administration expenses	-	-	726
Total 2022	2,317,520	2,317,520	2,161,298
Total 2021	2,161,298	2,161,298	

Staff costs are made up of £1,109,402 (2021: £1,069,529) attributable to Hospiscare Shops' expenditure and £54,237 (2021: £73,477) attributable to lottery expenditure.

Costs of raising voluntary income £1,024,019 and other trading expenses £2,317,520 total £3,341,539 (2021: £3,016,972).

10. Analysis of Expenditure by Activities

	Activities undertaken directly 2022 £	Support costs 2022 £	Total funds 2022 £	Total funds 2021 £
Ward	2,511,215	773,555	3,284,770	3,215,710
Community nursing services	1,869,321	1,014,746	2,884,067	2,925,366
Supportive care services	70,332	52,690	123,022	200,098
Education	53,806	45,748	99,554	89,192
Total 2022	4,504,674	1,886,739	6,391,413	6,430,366
Total 2021	4,561,815	1,868,551	6,430,366	

Analysis of Direct Costs

	Ward 2022 £	Community nursing service 2022 £	Day care services 2022 (Supportive care services?) £	Education 2022 £	Total funds 2022 £	Total funds 2021 £
Staff costs	2,323,785	1,708,895	1,472	28,379	4,062,531	4,015,465
Medical supplies	23,569	2,577	-	-	26,146	45,572
Bank staff	-	74,075	664	1,436	76,175	176,240
Travel expenses	3,175	33,806	123	-	37,104	45,231
Other direct costs	127,612	49,817	44,634	5,132	227,195	213,983
Administration & overheads	33,074	151	23,439	18,859	75,523	65,324
Total 2022	2,511,215	1,869,321	70,332	53,806	4,504,674	4,561,815
Total 2021	2,325,278	2,086,862	105,003	44,672	4,561,815	

Analysis of Support Costs

	Ward 2022 £	Community nursing service 2022 £	Day care services 2022 (Supportive care services?) £	Education 2022 £	Total funds 2022 £	Total funds 2021 £
Staff costs	549,074	561,428	-	24,062	1,134,564	1,116,797
Depreciation	54,661	75,646	43,153	5,091	178,551	182,398
Administration & overheads	157,867	357,670	9,537	15,737	540,811	534,801
Catering	3,661	13,749	-	589	17,999	18,407
Governance	8,292	6,253	-	269	14,814	16,148
Total 2022	773,555	1,014,746	52,690	45,748	1,886,739	1,868,551
Total 2021	890,432	838,504	95,095	44,520	1,868,551	

Support costs are allocated based on staff numbers.

11. Auditors' Remuneration

	2022 £	2021 £
Fees payable to the Group's auditor for the audit of the Group's annual accounts	9,950	8,000
Fees payable to the Group's auditor in respect of: The audit of the annual accounts of the Group's subsidiary undertakings	6,100	5,400

12. Staff Costs

	Group 2022 £	Group 2021 £	Charity 2022 £	Charity 2021 £
Wages and salaries	5,925,928	5,836,245	4,937,014	4,871,231
Social security costs	520,629	516,475	452,634	462,103
Pension costs	507,014	497,329	454,521	447,186
Total	6,953,571	6,850,049	5,844,169	5,780,520

**Notes to the Financial Statements
(for the year ended 31 March 2022)**

The average number of persons employed by the Charity during the year was as follows:

	Group 2022 No.	Group 2021 No.	Charity 2022 No.	Charity 2021 No.
Doctors	7	10	7	10
Nurses	96	76	96	76
Health care assistants	20	22	20	22
Care managers	2	8	2	8
Volunteer co-ordinators	1	1	1	1
Fundraising staff	16	24	16	24
Administration	41	21	41	21
Trading	61	70	-	-
Lottery	2	4	2	4
Complementary therapies	1	2	1	2
Catering/cleaning	11	17	11	17
Education	3	5	3	5
Total	261	260	200	190

The average headcount expressed as full-time equivalents was:

	Group 2022 No.	Group 2021 No.	Charity 2022 No.	Charity 2021 No.
Employees	205	181	144	130

The number of employees whose employee benefits (excluding employer pension costs) exceeded £60,000 was:

	Group 2022 No.	Group 2021 No.
In the band £60,001 - £70,000	2	3
In the band £80,001 - £90,000	-	1
In the band £90,001 - £100,000	1	1

Senior Management Team personnel of the Parent Charity and Group comprises the Trustees and senior management team. The total employee benefits (including employer pension contributions and employer national insurance contributions) of the key management personnel were £393,101. (2021: £519,323).

Although Trustees are within the definition of key management personnel, none of the remuneration reported relates to them.

13. Trustees' Remuneration and Expenses

During the year, no Trustees received any remuneration or other benefits (2021 - £NIL).

During the year ended 31 March 2022, expenses totalling £NIL were reimbursed or paid directly to the Trustees (2021: NIL).

During the year, the total amount of donations received from the Trustees without restriction were £9,765 (2021: £1,735).

14. Tangible Fixed Assets

Group

	Freehold property £	Long-term leasehold property £	Short-term leasehold property £	Plant and machinery £	Motor vehicles £	Fixtures and fittings	Total £
Cost or valuation							
At 1 April 2021	2,294,976	3,828,760	9,725	310,952	31,050	1,158,384	7,633,847
Additions	-	22,967	-	13,400	-	66,268	102,635
Disposals	-	(3,465)	-	-	-	(71,678)	(75,143)
At 31 March 2022	2,294,976	3,848,262	9,725	324,352	31,050	1,152,974	7,661,339
Depreciation							
At 1 April 2021	299,100	1,464,366	-	260,978	22,607	802,460	2,849,511
Charge for the year	46,230	58,054	1,221	21,425	2,943	116,124	245,997
On disposals	-	-	-	-	-	(35,209)	(35,209)
At 31 March 2022	345,330	1,522,420	1,221	282,403	25,550	883,375	3,060,299
Net book value							
At 31 March 2022	1,949,646	2,325,842	8,504	41,949	5,500	269,599	4,601,040
At 31 March 2021	1,995,876	2,364,394	9,725	49,974	8,443	355,924	4,784,336

Notes to the Financial Statements
(for the year ended 31 March 2022)

Charity

	Freehold property £	Long-term leasehold property £	Plant and machinery £	Motor vehicles £	Fixtures and fittings	Total £
Cost or valuation						
At 1 April 2021	2,294,976	3,796,040	310,952	31,050	873,992	7,307,010
Additions	-	22,967	13,400	-	66,268	102,635
Disposals	-	(3,465)	-	-	-	(3,465)
At 31 March 2022	2,294,976	3,815,542	324,352	31,050	940,260	7,406,180
Depreciation						
At 1 April 2021	299,100	1,431,606	260,978	22,607	611,328	2,625,619
Charge for the year	46,230	58,054	21,425	2,943	80,448	209,100
At 31 March 2022	345,330	1,489,660	282,403	25,550	691,776	2,834,719
Net book value						
At 31 March 2022	1,949,646	2,325,882	41,949	5,500	248,484	4,571,461
At 31 March 2021	1,995,876	2,364,434	49,974	8,443	262,664	4,681,391

15. Investment Property

Group	Freehold investment property £
Valuation	
At 1 April 2021	370,000
At 31 March 2022	370,000

Charity	Freehold investment property £
Valuation	
At 1 April 2021	370,000
At 31 March 2022	370,000

Valuation

Investments are based on Trustees' valuation based on market data and previous professional valuations.

16. Fixed Asset Investments

Fixed Asset Investments

Group	Listed investments
Cost or valuation	
At 1 April 2021	5,759,645
Additions	738,533
Disposals	(1,095,913)
Revaluations	191,080
At 31 March 2022	5,593,345
Net book value	
At 31 March 2022	5,593,345
At 31 March 2021	5,759,645

Charity	Investments in subsidiary companies £	Listed investments £	Total £
Cost or valuation			
At 1 April 2021	110,002	5,759,645	5,869,647
Additions	-	738,533	738,533
Disposals	-	(1,095,913)	(1,095,913)
Revaluations	-	191,080	191,080
At 31 March 2022	110,002	5,593,345	5,703,347
Net book value			
At 31 March 2022	110,002	5,593,345	5,703,347
At 31 March 2021	110,002	5,759,645	5,869,647

Principal Subsidiaries

The following were subsidiary undertakings of the Charity:

Names	Company number	Included in consolidation	Holding
Hospiscare (Shops) Limited	02201730	Yes	100%
Hospiscare Exmouth and Lymptone	02927336	Yes	100%

The financial results of the subsidiary for the year were:

Name	Income £	Expenditure £	Loss for the year £	Net assets £
Hospiscare (Shops) Limited	2,072,942	(2,134,654)	(61,712)	44,502

Hospiscare Exmouth and Lymptone merged with Hospiscare in 2019 and all operations, assets and liabilities of that charity were transferred to Hospiscare. Accordingly, after the date of the merger, there has been no income or expenditure recognised by Hospiscare Exmouth and Lymptone and its net assets at the year-end were nil.

17. Debtors

	Group 2022 £	Group 2021 £	Charity 2022 £	Charity 2021 £
Due within one year				
Trade debtors	146,540	237,492	171,009	245,909
Amounts owed by group undertakings	-	-	182,498	445,324
Other debtors	82,507	363,235	58,139	47,197
Prepayments and accrued income	2,695,672	442,503	2,662,193	404,095
Total	2,924,719	1,043,230	3,073,839	1,142,525

18. Creditors: Amounts Falling due within One Year

	Group 2022 £	Group 2021 £	Charity 2022 £	Charity 2021 £
Trade creditors	392,529	368,975	363,782	341,647
Other taxation and social security	124,942	122,115	112,000	111,406
Other creditors	102,385	91,734	66,241	62,779
Accruals and deferred income	225,192	159,232	225,192	159,232
Total	845,048	742,056	767,215	675,064
Deferred income				
Deferred income at 1 April 2021	11,059	32,269	11,059	32,269
Resources deferred during the year	73,687	-	73,687	-
Amounts released from previous periods	(11,059)	(21,210)	(11,059)	(21,210)
Total	73,687	11,059	73,687	11,059

19. Provisions

Group

	Dilapidations £
At 1 April 2021	170,715
Additions	16,075
Total	186,790

Dilapidations

The Group dilapidations provision is based on the future expected repair costs required to restore the leased buildings to their fair condition at the end of their respective lease terms.

The Charity has no provisions.

20. Statement of Funds

Statement of Funds – Current Year

	Balance at 1 April 2021 £	Income £	Expenditure £	Transfers in/out £	Gains/(Losses) £	Balance at 31 March 2022 £
Unrestricted funds						
Designated funds						
Capital	4,387,654	-	(268,799)	96,140	-	4,214,995
Stability & working capital	3,000,000	-	-	400,000	-	3,400,000
Budgeted deficit 22/23	-	-	-	2,400,000	-	2,400,000
COVID-19 reserve	1,800,000	-	-	(1,800,000)	-	-
Hospiscare@ Home	-	-	-	1,060,540	-	1,060,540
Total	9,187,654	-	(268,799)	2,156,680	-	11,075,535
General funds						
General reserves	809,854	10,860,553	(7,781,181)	(2,156,680)	224,304	1,956,850
Total unrestricted funds	9,997,508	10,860,553	(8,049,980)	-	224,304	13,032,385
Endowment funds						
Endowment funds – all funds	20,000	-	-	-	-	20,000

On 1 April 2009, under an arrangement agreed with the Charity Commission, the activities, assets and liabilities of a separate charity were merged with Hospiscare. £20,000 represents the permanent endowment capital. Income arising therefore is unrestricted.

Notes to the Financial Statements
(for the year ended 31 March 2022)

	Balance at 1 April 2021 £	Income £	Expenditure £	Transfers in/out £	Gains/(Losses) £	Balance at 31 March 2022 £
Restricted funds						
Medical research fund	63,492	6,850	(10,120)	-	-	60,222
Dementia project	-	35,744	(35,744)	-	-	-
Early referral research fund	47,940	-	-	-	-	47,940
Hospicare Exmouth and Lympstone	2,271,275	79,879	(633,908)	-	25,425	1,742,671
Other restricted funds	-	2,500	(7,314)	7,500	-	2,686
LGBTQ+ project	21,435	-	(3,140)	-	-	18,295
Fundraising	2,810	373,933	(363,043)	(7,500)	-	6,200
Hospicare@ Home	265,674	523,105	-	-	-	788,779
Hospice UK	-	629,703	(629,703)	-	-	-
Total restricted funds	2,672,626	1,651,714	(1,682,972)	-	25,425	2,666,793
Total of funds	12,690,134	12,512,267	(9,732,952)	-	249,729	15,719,178

Designated Funds

Capital

This fund represents the net book value of the tangible fixed assets employed by the group, excluding those held in restricted funds.

Stability and Working Capital

This fund is intended to provide a buffer for working capital requirements and against unexpected shortfalls in fundraising and legacy income and falls in the value of investments. The reserve has been increased in year reflecting the increased uncertainty in relation to fundraising and legacy income.

Budgeted Deficit 2022/23

This fund has been set aside to fund the anticipated shortfall in funding during the 2022/23 financial year that was identified during the budget setting process.

COVID-19 Reserve

This fund was set aside to cover additional costs incurred due to the COVID-19 pandemic. These costs are now being managed as business as usual and the reserve has been released.

General Reserves

This fund represents the free reserves of the Charity and are available for general use.

Hospiscare@Home

This fund is to support the ongoing delivery of the Exmouth and Lympstone and Hospiscare@Home services when the associated restricted reserves are fully utilised if additional funding is not identified.

This reserve (based on the latest forecast) provides funding if required until 2025/26.

Restricted Funds

Exmouth and Lympstone Hospiscare

This fund represents the net assets remaining following the transfer of assets from Exmouth and Lympstone Hospiscare in 2019 and includes income and gains from the underlying assets. The fund will be used to meet the costs of palliative care for persons terminally ill in the Exmouth and Lympstone area and to support those patients and their families.

Hospiscare@Home

This fund is to support the Charity's plans to roll-out the service in the Mid and West Devon area.

Hospice UK

One-off funding was provided through Hospice UK to support the organisation in covering additional costs incurred during the 2021/22 finance year because of COVID-19.

Other Restricted Funds

These funds are held in respect of separately identified short-term projects, which are being undertaken or about to commence.

Notes to the Financial Statements
(for the year ended 31 March 2022)

Statement of Funds – Prior Year

	Balance at 1 April 2020 £	Income £	Expenditure £	Transfers in/out £	Gains/(Losses) £	Balance at 31 March 2021 £
Unrestricted funds						
Designated funds						
Capital	4,573,062	-	(393,664)	208,256	-	4,387,654
Stability & working capital	-	-	-	3,000,000	-	3,000,000
Budgeted deficit 2022/23	533,500	-	-	(533,500)	-	-
Legacy reserve	500,000	-	-	(500,000)	-	-
COVID-19 reserve	1,500,000	-	-	300,000	-	1,800,000
Total	7,106,562	-	(393,664)	2,474,756	-	9,187,654
General funds						
General reserves	2,010,848	8,680,773	(7,746,553)	(2,720,330)	585,116	809,854
Total unrestricted funds	9,117,410	8,680,773	(8,140,217)	(245,574)	585,116	9,997,508
Endowment funds						
Endowment funds	20,000	-	-	-	-	20,000
Restricted funds						
Medical research fund	60,346	7,251	(4,105)	-	-	63,492
Dementia project	-	20,000	(20,000)	-	-	-
Primary care grant – palliative and end-of-life care	-	75,000	(75,000)	-	-	-
Healthy Aging Project	-	58,700	(58,700)	-	-	-
Early referral research fund	47,940	-	-	-	-	47,940
Hospiscare Exmouth and Lympstone	2,447,537	117,878	(641,428)	-	347,288	2,271,275
Legacies	229,016	79,370	(308,386)	-	-	-
Other restricted funds	715	-	(715)	-	-	-
LGBTQ+ project	-	24,055	(2,620)	-	-	21,435
Fundraising	-	198,977	(196,167)	-	-	2,810
Hospiscare@Home	-	20,100	-	245,574	-	265,674
Total	2,785,554	601,331	(1,307,121)	245,574	347,288	2,672,626
Total of funds	11,922,964	9,282,104	(9,447,338)	-	932,404	12,690,134

21. Analysis of Net Assets between Funds

Analysis of Net Assets between Funds – Current Year

	Endowment funds 2022 £	Restricted funds 2022 £	Unrestricted funds 2022 £	Total funds 2022 £
Tangible fixed assets	-	386,045	4,214,995	4,601,040
Fixed asset investments	-	1,708,963	3,884,382	5,593,345
Investment property	-	370,000	-	370,000
Current assets	20,000	201,785	5,964,846	6,186,631
Creditors due within one year	-	-	(845,048)	(845,048)
Provisions for liabilities and charges	-	-	(186,790)	(186,790)
Total	20,000	2,666,793	13,032,385	15,719,178

Analysis of Net Assets between Funds – Prior Year

	Endowment funds 2021 £	Restricted funds 2021 £	Unrestricted funds 2021 £	Total funds 2021 £
Tangible fixed assets	-	396,682	4,387,654	4,784,336
Fixed asset investments	-	1,636,074	4,123,571	5,759,645
Investment property	-	370,000	-	370,000
Current assets	20,000	269,870	2,399,054	2,688,924
Creditors due within one year	-	-	(742,056)	(742,056)
Provisions for liabilities and charges	-	-	(170,715)	(170,715)
Total	20,000	2,672,626	9,997,508	12,690,134

22. Reconciliation of Net Movement in Funds to Net Cash Flow from Operating Activities

	Group 2022 £	Group 2021 £
Net income for the year (as per Statement of Financial Activities)	3,029,044	767,170
Adjustments for:		
Depreciation charges	245,997	251,141
Gains on investments	(249,729)	(921,968)
Dividends, interests and rents from investments	(128,723)	(139,573)
Decrease in stocks	9,953	5,688
Increase in debtors	(1,658,546)	(126,322)
Increase in creditors	125,089	167,878
Net cash generated by operating activities	1,373,085	4,014

23. Analysis of Cash and Cash Equivalents

	Group 2022 £	Group 2021 £
Cash in hand	3,259,079	1,632,908
Total cash and cash equivalents	3,259,079	1,632,908

24. Analysis of Changes in Net Funds

	At 1 April 2021 £	Cash flows £	At 31 March 2022 £
Cash at bank and in hand	1,632,908	1,626,171	3,259,079
Total	1,632,908	1,626,171	3,259,079

25. Contingent Assets

Legacies are not recognised until Hospiscare has entitlement to the funds, the amount can be quantified and there is probability of receipt. The estimated value of legacies, not included as income in these accounts and which have been notified but not received as at 31 March 2022, was £1,166,767 (2021:£702,611.)

26. Pension Commitments

The Group pays contributions to a defined contributions pension scheme. The assets of the scheme are held separately from those of the Group in an independently administered fund. The pension cost charge represents contributions payable by the Group to the fund and amounted to £276,443 (2021: £259,238). Contributions totalling £49,944 (2021: £46,704) were payable to the fund at the balance sheet date and are included in creditors.

Additionally, the Charity pays contributions to the NHS Pension Scheme. Although the scheme provides defined benefits to members, it is an unfunded multi-employer scheme, with no ongoing liability for the Charity beyond the level of employer contributions specified by the Scheme. Accordingly it is accounted for as if it was a defined contribution scheme. The pension cost charge represents contributions payable by the Group to the fund and amounted to £230,571 (2021: £238,091). Contributions totalling £20,361 (2021: £16,472) were payable to the fund at the balance sheet date and are included in creditors.

27. Operating Lease Commitments

	Group 2022 £	Group 2021 £	Charity 2022 £	Charity 2021 £
Not later than 1 year	300,395	314,060	288,820	302,485
Later than 1 year but not later than 5 years	787,983	846,307	787,983	846,307
Later than 5 years	25,575	154,428	25,575	164,428
	1,113,953	1,324,795	1,102,378	1,313,220

28. Related Party Transactions

The Charity is taking advantage of the exemption allowed under FRS102 from the requirement of Section 33 “Related Party Disclosures” not to disclose related party transactions with members of the Group. There are no other related party transactions other than those disclosed in note 13. There were no amounts outstanding from any Trustee at the year end.

