



2022 Trustees'

Annual Report



YEAR ENDED 31 MARCH 2022

For Excellence. For Compassion. For People. For Living.

## **Princess Alice Hospice makes a difference**

It costs us £10 million each year to provide free, high-quality care.

Funding provided by CCGs (Clinical Commissioning Groups) represents circa 24% of our expenditure on charitable activities. In more normal times the balance is raised through legacies, fundraising, dedicated shop units, investments and the generous support of our communities. It is only the support of our community and beyond, that makes it possible to do our work.

*In the year under report, the Hospice has also received additional support through NHS emergency capacity funding grants via Hospice UK, Government grants to support non-essential retail and the Coronavirus Job Retention Scheme (CJRS). It is only as a result of this support that we were able to maintain our services and help to alleviate the pressure on our NHS colleagues throughout the pandemic.*

We have once again been rated by the Care Quality Commission as providing outstanding palliative and end of life care in the community and within our Hospice. Our teams of employees, volunteers and supporters are positive, passionate and professional.

No one can prevent death, but we do everything we can to make dying as good as possible for patients, their families and friends. We believe that hospice care is for living.

### **Our Vision**

Our communities will have the best care and support before, during and after death.

### **Our Mission**

We will develop hospice ways of working so that we can best deliver services that place people at the centre of everything we do.

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## Chair and CEO report

The year under report has seen us transition from responding to COVID-19 as an all-consuming pandemic to operating with it as a near-constant backdrop. In practice this meant that we relaxed restrictions when it was safe to do so, re-instating them when the environment changed. We built on the innovations implemented across the organisation during the worst of the pandemic and embedded them into operating and service models where there was clear benefit in doing so. The acceleration in the pace of digital transformation across the organisation was maintained and provides an excellent foundation for the coming years.

All organisations providing health and social care have faced unprecedented challenges over the past two years and it has never been more important to work in collaboration and partnership. Nationally, the move towards Integrated Care systems (ICS), Integrated Care Boards (ICB) and Partnerships has resulted in both opportunities and threats for smaller specialist providers such as hospices.

Princess Alice Hospice operates in a care area that is part of two emerging Boards; Surrey Heartlands and South West London. Members of the Senior Leadership Team (SLT) continue to invest time and resource in ensuring that Palliative and End of Life Care (PEoLC) receives the focus it deserves. This included supporting the development of a PEoLC Strategy in Surrey Heartlands and taking on the role of Senior Responsible Officer for End of Life Care (EoLC) in Surrey Downs Health and Care Partnership. Moves towards greater integration have also prompted much closer working between hospices operating in the same ICB. We are hopeful that this will result in a more equitable and sustainable approach to NHS funding and investment in hospice care, so that in turn we are better able to support our health and social care partners and, more importantly, deliver the high-quality care and support that our community deserves.

We made changes and adaptations to our services to respond to changing needs and system pressures and sought to implement them in a way that did not impact on quality. We were delighted to have that validated when we retained our overall rating of Outstanding by the Care Quality Commission (CQC) following their inspection in late 2021. The inspectors commended us for our promotion of inclusivity and equality and the tangible sense of flexibility and adaptability amongst staff to meet people's needs. It is only possible to achieve an Outstanding rating when every member of staff, every volunteer, every team and every department works together. We are extremely proud of them all and very pleased that their energy, compassion and commitment has been recognised in the rating.

Further acknowledgement of the quality and commitment of our staff came in the form of a visit last November by Ruth May, Chief Nursing Officer for England. She presented two of our senior In-Patient Unit nurses with a prestigious Chief Nursing Officer Silver Award for their services in providing exceptional care to patients at the end of life – a very special moment.

This year represented the last year of our five-year strategy, so in addition to delivering “business as usual” and focusing on the objectives set for 2021/22, the Board and SLT formed a Strategic Development Group (SDG) and spent a large part of the year developing the new strategy for the organisation. Launched in April “A strategy for our future” sets out four over-arching priorities that will underpin, sustain and develop our vital work, now and in the future. The priorities and focus for the first two years are described in more detail on page 6.

We are first and foremost a people organisation and as the SDG developed its thinking it became clear that we needed to develop a People Plan to support the implementation of the strategy. Structured against five themes; growing our culture, resourcing for the future, developing skills and capabilities, supporting engagement and wellbeing and building leadership and management, the plan builds on the previous Talent and People Strategy and sits alongside the Inclusion strategy approved by the Board in September. The overall aim is that we will be a “values-led and inclusive organisation, with flexible, skilled and engaged people capable of delivering our mission”. Effective

implementation of the plan will be crucial if we are to recruit and retain the people we will need to deliver organisational success.

We said goodbye to some long-standing colleagues and friends on the Board and within SLT during the year and welcomed new ones. Professor Fiona Ross CBE stood down having completed her five-year tenure as Chair and ten years as a Trustee and we said goodbye to Christopher Roshier who had also completed his ten-year term as a Trustee – both remain loyal and committed supporters of the Hospice. We welcomed Monica Harding, Tim Hewens and Darren Webb as new trustees and two additional committee advisers who generously share their knowledge and skills to help us move projects and programmes forward. Two new colleagues joined the SLT; Dr Jennifer Todd took over as Medical Director from Dr Craig Gannon who had been with us for 26 years and Lesley Munro replaced Lesley Spencer as Director of Patient Care, Community Engagement and Support. They have been welcome additions to an already high performing SLT.

Princess Alice Hospice holds a special place in our local community. It is only through the extraordinary generosity of all our supporters and volunteers – donating time, money and resources – that we are able to deliver against our strategic objectives and plan for the future. We are grateful to every one of them.

We feel very privileged to be the Chair and Chief Executive of such a vibrant and innovative organisation, and we look forward to what's in store in 2022/23. Throughout, our dedicated and passionate people will provide and facilitate excellent care and support for every person who touches our services.



**Chair**



**Chief Executive**

## How we improved our care and support in 2021/22

### GOAL 1 We will be recognised for the outstanding care we provide

*We will use our specialist expertise to develop wide-ranging approaches to palliative and end of life care and support to help more people live life to the full, and when the time comes, to have a good death.*

The COVID-19 pandemic continued to impact some aspects of our service delivery during 2021/22, however the experience and learning that we gained from the previous year meant that we were better placed to respond and adapt as restrictions were imposed, removed and, often, reinstated. We are particularly proud of the fact that we maintained compassionate visiting throughout the pandemic and were delighted to be able to remove the remaining restrictions in February of this year.

Our health and social care partners continued to experience unprecedented demand and we worked hard to support them by being flexible and responsive – adapting our services as necessary. We provided care and support to 3,200 patients, enabling more than 71% of them to be cared for and to die at home.

As well as delivering our core services, clinical colleagues set themselves some challenging objectives for the year. They wanted to build on the learning from the previous year, particularly how best to integrate digital services within our core offer and maximise the value from our move to EMIS – the electronic patient record system used by most GP colleagues within our care area.

Achievements include:

- Continuing to explore and embrace digital innovations to modernise and improve services and offer support in ways that respond to patient and family preferences. This has included:
  - Establishing digital sharing agreements with GP practices in our care area so that patient records can be shared, leading to improved communication between us and Primary Care, and a more joined up response to the needs of patients.
  - Utilising Zoom to deliver Wellbeing sessions offering a wider range of sessions, doctor Q&As, peer support and therapeutic interventions – there were nearly 4,200 attendances during 2021/22.
  - Enabling patients and families to use a mix of digital and physical tools to provide feedback and influence the development of future services.
- Working more closely with frailty consultants to support Advance Care Planning and discharge from acute trusts to both home and care home settings.
- Establishing a referral pathway from GPs and Social Prescribers into the Wellbeing service so that more people can benefit from the service.
- Re-establishing out-patient clinics in four sites across the care area with a fifth due to come on board in 2022/23.
- Refreshing the IPU by decorating throughout and installing new lighting, flooring, patient call system and soft furnishings, incorporating design features that are dementia friendly.

We had set ourselves the objective to develop a strategic response to diversity and inclusion across our care and support services ahead of the launch of the new strategy in April 2022. We have taken opportunities to work with partners who are supporting people who have not traditionally had access to hospice care and have taken a blended approach of providing direct support, together with education and training, with the aim of improving the end of life experience for these groups. Establishing a strategic response has progressed more slowly. Its importance, however, was emphasised throughout the strategy development process and the Board of Trustees has allocated funding to support the delivery in the first two years of the new strategic period.

## **GOAL 2 We will nurture compassionate communities**

*We will continue to grow and nurture our Compassionate Communities and equip more people with the knowledge, skills and confidence to support each other through death, dying, grief and loss.*

It became increasingly clear that one of the legacies of COVID-19 was a steep increase in the numbers of people who needed bereavement support.

We responded by:

- Creating a new section about bereavement support on our website - our resources have been enhanced to include links articles, blogs, podcasts and videos.
- Training six new partner organisations to deliver community bereavement support.
- Delivering training courses to our Compassionate Neighbour (CN) Volunteers about bereavement to enable them to support family members and bereaved relatives.
- Implementing a Chaplaincy review and reintroducing pastoral support volunteers who can also provide pre-bereavement and bereavement support.

In addition, we have:

- Continued to recruit and train CNs and match them with Community Members. Since the beginning of this project in 2017 we have trained 370 CNs and made 453 matches.
- Trained volunteers to support people to have planning ahead conversations and delivered Introduction to Planning Ahead courses with volunteers to support more people to have the knowledge and confidence to think about what would be important to them at the end of life.
- Reintroduced volunteer roles that had been paused during the pandemic and developed new ones in both the hospice and in the community.

## **Goal 3**

### **We will share our knowledge and expertise and influence the debate around death and dying**

*We will raise awareness of high-quality end of life care by sharing our skills, knowledge, research and opinions.*

While it became possible to re-introduce some face-to-face learning opportunities in 2021/22, the shift to delivering most of our programme digitally was maintained. This was in response to feedback from both learners and the organisations sponsoring them. By providing this flexibility we have been able to extend our reach, enabling more health and social care colleagues to access the knowledge and skills they need to support good end of life care in their settings.

As well as delivering a programme of 266 education sessions to 2,756 learners, during the year we:

- Increased the number of hospices delivering the European Certificate in Essential Palliative Care (ECEPC), now in its 20<sup>th</sup> year.
- Created new learning and development partnerships with Learning Disability services – including delivering staff wellbeing training to their teams.
- Delivered a Summer School to a diverse group of 53 young people interested in a career in health or social care
- Worked with Hospice UK and the Foundation of Nursing Studies to develop a programme of Resilience-Based Clinical Supervision which will in turn better support clinical colleagues delivering palliative and end of life care
- Seized opportunities to disseminate our education and research activity at conferences and through publication.

Crucial to the achievement of our objectives for 2021/22 has been the ability of our income generation teams to generate the funds that we need and our operational and support services to create an environment that is positive, supportive, sustainable, safe and enables us to take advantage of, for example, new technologies, or improved ways to communicate with our stakeholders.

Highlights from the year include:

- The retail business making a net contribution to the Hospice of £335,374 after the previous year of significant disruption, due mainly to periods of shop closures throughout the pandemic.
- Continuing to generate strong financial and volunteer support from our local community against a back-drop of increasing competition for time, money and resources.
- Increasing the confidence and ability of the Marketing and Communications team to generate digital content for our various social media channels.
- An on-going focus on staff health and wellbeing, coupled with an internal focus on inclusion and diversity and what it means for Princess Alice Hospice culminating in the approval of the Inclusion and Diversity Strategy by the Board in May 2022.
- Delivery of the IPU refurbishment to time and budget with minimal operational down time.
- Significant progress in the implementation of MS365 including migrating Outlook to the cloud and introducing SharePoint across the organisation.
- A greater emphasis on sustainability, energy efficiency and minimising our environmental footprint.

## Objectives for 2022/23

We entered the final year of our five-year organisational strategy in April 2021. The Board of Trustees and SLT established an SDG and spent a significant part of the year under report developing a new strategy for our future. This process was informed by our experiences of operating throughout the pandemic. It was also a response to internal and external drivers that were having and would continue to have, a wide-ranging impact, namely:

- Changing demographics, with a projected increase in the number of people who will need palliative and end of life care in the future.
- An existing gap between those who need PEOLC and those who receive it – a gap that is exacerbated by inequality and social exclusion.
- Changing health and social care structures with an increased emphasis on integration
- Developments in technology and a growing acceptance of people to use digital services to access and receive health care.
- Increasing and changing demands of the people we care for.
- A competitive market for resources and skills.
- Funding shortfalls – costs increasing faster than the income we can generate
- A growing emphasis on sustainability and the ESG (environmental, social, governance) agenda.

Some of the drivers represented opportunities, some significant challenges, however it was clear that simply maintaining the status quo was not an adequate strategic response. At the same time the SDG recognised that we were operating in a period of continuous change and unprecedented uncertainty and complexity and that the ability to be agile, adaptive and responsive was crucial, while not losing sight of our long-term vision.

**We have therefore developed four overarching priorities for our next strategic period that will support our vision and sustain and develop our vital work now and in the future:**

### **PRIORITY 1**

#### **Developing and expanding our specialist care**

We will provide and develop outstanding, personalised, specialist end of life care by adapting our models of care and broadening access to our community services, focusing on providing the right care, by the right people, at the right time and in the right place.

In 2022/23 we will focus on:

- Using data and patient and family insight to refine our service design and pathway flows to improve accessibility, reach and responsiveness.
- Exploring emerging models of care such as “Virtual Wards”, and, where there are clear benefits, using the evidence and learning to adapt our services.
- Implementing an effective digital solution to deliver remote consultations by clinicians to increase flexibility and choice for patients and families.

### **PRIORITY 2**

#### **Empowering people in our communities to better support and care for people at the end of life**

We will make sure that people feel supported and have access to the right tools and advice to support others who are faced with death, dying, grief and loss. We will champion equity of access so that people can access our services equally, regardless of background, gender, sexual orientation or religion.

In 2022/23 we will focus on:

- Deepening our understanding of the needs and make-up of our local community to allow us to address inequalities of access and respond to unmet needs.
- Working in partnership with groups which are under-represented to deliver community-based bereavement support.
- Continuing to increase the number of CNs developing their skills and expertise so that they are better able to support community members through death, dying, grief and loss.
- Re-launching the Planning Ahead programme (Advance Care Planning) to highlight the importance of understanding and sharing future needs and wishes.

### **PRIORITY 3**

#### **Developing our education, research and learning programmes to improve quality and encourage and support innovation**

We will make sure people are supported and cared for at the end of life by health and social care professionals who have the right skills, expertise and confidence.

In 2022/23 we will focus on:

- Scoping the potential of the ECEPC in terms of growth and diversification.
- Continuing to develop ways in which we can support care home staff to improve their confidence and competence in end of life care.
- Developing a Research Strategy that aligns with and supports the new organisational strategy.



## **PRIORITY 4**

### **Enhancing our collaborative influence in palliative and end of life care through leadership and advocacy**

We will use our expertise and knowledge to improve end of life care for everyone facing death, dying, loss and bereavement.

In 2022/23 we will focus on:

- Investing the time of senior leaders to work with health and social care partners within our care area as the new NHS governance and delivery structures form and develop.
- Developing a way of assessing the value of partnerships and collaborations to inform decisions on how we allocate time and resources.

## **SUSTAINABILITY AND RESILIENCE**

Delivery of the organisational priorities across the strategic period will be supported by organisational projects that will focus on sustainability in its widest context and develop greater organisational capacity, capability, and resilience.

The focus for 2022/23 will be:

- Investing in additional fundraising posts in areas that we perceive to have growth potential
- Investing in digital fundraising and marketing capabilities so that we can scale up digital engagement and support.
- Implementing the People Plan and refreshing our employer brand so that we can continue to attract and retain the talent we need to deliver the strategy.
- Developing a framework for ESG to capture our impact against all these areas across the organisation.
- Developing greater organisational maturity in the use of data to support decision making.

In addition, once it became clear that we were finishing 2021/22 with a significant surplus, the Board agreed to establish a Sustainable Building Development fund of £500k from reserves so that we can continue to make capital investments in our building and infrastructure that will result in a decrease in our environmental impact.

# Structure, governance and management

Princess Alice Hospice was incorporated as a company limited by guarantee on 25 November 1981 and is governed by its Articles of Association. We are registered with the Charity Commission in England and Wales. Our registered office is at West End Lane, Esher, Surrey KT10 8NA.

## Objectives

The Hospice is an independent charity working across a large part of Surrey, south west London and Middlesex. We provide free high-quality, compassionate care and support at the end of life for patients, families, carers and close friends at every stage, up to, and after death.

Through education and research, we aim to improve palliative care knowledge and to change practice in the wider health and social care economy. Founded by our local community, fundraising and community support are crucial to our continuing work as a charity.

## How we are governed

### Trustees

Our Board of Trustees is responsible for overseeing the Hospice's strategy and performance. It is chaired by Professor Sean Hilton (Professor Fiona Ross CBE until September 2021) and Jeannine Nolan has served as Vice-Chair (Professor Sean Hilton until September 2021).

The Trustees are the directors of Princess Alice Hospice for the purposes of the Companies Act 2006. They are not paid. There is a short biography of the Trustees on page 47.

The Board meets regularly throughout the year to consider, set and review strategies, policies, budgets, plans and performance. An annual "away day" is held for in-depth strategic discussions and decision-making. Members of the Senior Leadership Team (SLT) attend Board meetings to report back on performance and progress against strategic objectives. In-depth "spotlight" sessions and business reviews are delivered by members of the leadership team, a practitioner working in front-line services or a family member representing "patient voice". This allows the Board to gain a deeper understanding of the organisation.

### Impact of COVID-19

The Board has continued to work flexibly during 2021/22 to maximise the contribution from Trustees and Advisory Members and support diversity. Board and Committee meetings have been held face-to-face when restrictions allowed but the option to join remotely has been retained, allowing hybrid meetings to take place. Meetings were temporarily moved back online from December 2021 to February 2022 as a response to the rising number of COVID cases.

The Finance and General Purposes Committee has continued to monitor the Hospice's cash position closely, receiving weekly updates. Individual Committee Chairs have been in regular contact with the lead SLT for their area.

### Board Committees

The Board delegates powers and responsibilities to Committees, more details of which are given below. The Board believes that this enables more detailed discussion and understanding of key areas of the organisation. Each Committee has terms of reference defining membership, responsibilities and delegated authority. These are reviewed annually by the Committee and approved by the Board. There is an annual process of review to give the Board assurance that the Committees are working effectively. Minutes of Committee meetings are on the agenda for the following Board meeting and Committee Chairs provide a summary report for the Board on the major issues discussed and decisions taken.

**The Clinical Strategy and Governance Committee**, chaired by Heather Patel, is responsible for overseeing clinical strategy, education and research. It provides assurance on the development, implementation, safety and effectiveness of the clinical services delivered by the Hospice. It monitors clinical activity, performance and risks against the annual business plan, raising issues to the Board where appropriate. It also oversees relationships with our health and social care partners regarding grants, contracts and service level agreements. The Committee monitors health and education policy and regulation and keeps the Board informed as appropriate.

**The Finance and General Purposes Committee**, chaired by Despina Don-Wauchope, oversees the finances of the Hospice. It is responsible for reviewing and recommending to the Board the annual budget and financial strategy and monitoring performance against budget during the year. It oversees the investment of the Hospice's funds, recommending on the appointment of an investment manager and reviewing their performance annually. In addition, the Committee is responsible for overseeing capital expenditure, estates and infrastructure.

**The Income Generation Committee**, chaired by Gail Cookson, is responsible for the identification, development, implementation and effectiveness of all income generation activities (except for NHS grants) including the Hospice's retail portfolio. It ensures compliance with all regulatory requirements impacting the Hospice's income generation activities.

**The People and Communities Committee**, chaired by Karen Roberts, oversees the development, implementation and effectiveness of the People Plan, diversity and inclusion, community engagement, marketing and communications programmes. It oversees and reviews HR governance, the volunteer strategy and from time to time undertakes workforce reviews, ensuring the Hospice has the skills and expertise it needs to deliver its strategy.

**The Remuneration and Nominations Committee**, chaired by the Board Chair, has a membership of the Committee Chairs, the Vice-Chair of the Board, the Chief Executive (CEO) and Company Secretary (nominations only). It meets twice a year to consider the skill mix of the Trustees, Committee membership and succession planning. Once a year it reviews the performance of the SLT and the CEO and makes recommendations on their remuneration. The Committee also oversees the recruitment process for Trustees, Advisory Members and SLT.

**The Audit and Risk Committee**, chaired by Tim Hewens (Sean Hilton to December 2021), oversees risk management and governance processes, external audit and internal risk and quality reviews. It reviews the management of systems for internal control and advises the Board on exposure, mitigation and lessons for continuous improvement. It manages the relationship with the external auditors, reviews feedback on their performance and value for money and advises on reappointment as appropriate.

### **Trustee and Committee advisory member recruitment**

The Board believes it is vital to get a mix of Trustees with healthcare, legal, financial, investment, fundraising, commercial, digital and retail skills, as well as skills and experience drawn from the local community. Trustees are initially appointed for two years and may then be reappointed for up to two more four-year periods (up to a maximum of 10 years). The Board has a good gender balance and is setting goals to increase the representation of people from a variety of ethnic minority backgrounds, skills and experiences as part of our Inclusion Strategy.

There was no external recruitment campaign during 2021/22. Darren Webb joined the Board in July 2021 having previously been an advisory member to the Finance and General Purposes Committee. Darren has extensive experience in investment banking.

The Remuneration and Nominations committee added a second meeting to the cycle this year to focus specifically on Trustee recruitment and succession planning. The Committee reviewed the skills and knowledge of current Board members and identified some key skills gaps over the next few years as longer-standing Trustees step down at the end of their tenure. The review also identified some different skills that would support the Board over the new strategic period. The Board agreed that a recruitment campaign for a Trustee with senior digital experience should take place in the first quarter of 2022/23.

In addition to Trustees, the Board may invite individuals to become advisory members to Committees. This is typically someone with relevant specialist expertise in the Committee's area of responsibility. These appointments are normally for an initial period of up to two years. During this time, the person may be invited to become a Trustee, or they may continue as a committee advisory member. Their appointment may be renewed by mutual agreement, and the Board may end the appointment at any time. During the year, there were 11 committee advisory members serving on Board committees.

The Board were delighted to welcome two new committee advisory members recruited during the year – Ros Irving, who joined the People and Communities Committee and Louise Mitchell, who joined the Income Generation Committee. Details of the current advisory members can be found on page 48.

New Trustees and advisory members receive an induction and training specific to their role, coordinated by the lead SLT and respective Committee chair. They also attend the Hospice's induction day for all new employees and volunteers. Induction has taken place mainly remotely during 2021/22 but face-to-face visits have been arranged when restrictions allowed. The Chair and Vice-Chair follow up individually newly recruited Trustees and advisors to ensure that they feel supported and informed.

### **Charity Governance Code**

The Board is committed to maintaining the highest standards of governance and has adopted the Charity Governance Code (the Code) as a tool to support continuous improvement:

<https://www.charitygovernancecode.org/en/front-page>

The Code sets out seven principles and provides recommended practice to support charities to develop high standards of governance. Not all of the recommended practice will be appropriate for us to adopt but the Code is designed to be aspirational and to support the development of the charity over time.

Equality, diversity and inclusion have remained a focus for the Board in 2021/22 and an item has been added to every Board agenda giving time to reflect on the impact that Board discussions and decisions have for diversity.

The Board is committed to continuously improving its governance processes. Work was undertaken in the year to formally document the annual cycle of Board Assurance. A forward agenda was put in place for the Board and each of the committees. The flow of information was mapped, reducing duplication and ensuring that the work of the committees is strategically focused and provides the appropriate level of assurance to the Board. Meeting agendas have been reviewed to clearly identify the purpose of each item of business and to allow time for meaningful discussion. The introduction of SharePoint as the Hospice intranet during the year has greatly improved the efficiency of access to meeting papers, which no longer have to be circulated by email and can be accessed via a link within the agenda. Trustees and committee advisors now have improved access to an extensive range of resources to increase their understanding of the Hospice.

## Senior Leadership Team

The Hospice internal management structure is made up of seven directorates, each led by a member of the team.

These directorates are:

**Clinical Services** – responsible for in-patient care, community care, wellbeing services, therapies, social work and education.

**Medical** – responsible for palliative medical care in all settings and covering doctors, including consultants.

**Finance and Operations** – responsible for finance, company secretarial and governance, facilities, front of house, health, safety, environment and business continuity, housekeeping and catering.

**People and Organisational Development** – responsible for human resources.

**Community Engagement** – responsible for volunteering, community engagement, bereavement care and spiritual care.

**Income Generation** – responsible for all income generation activities, apart from NHS income.

**Digital, Marketing, Communications and Performance** – responsible for ICT, digital, data, marketing, communications and performance.

## Remuneration Policy

We recognise that we have a duty to deliver our services effectively and maximise the use of our resources. To do this we need to attract and retain suitably qualified people with the right skills, knowledge and experience and pay them fairly and responsibly.

The market comparator for the majority of our clinical roles is the NHS. We directly employ medical consultants, doctors, nurses and other allied professional healthcare staff and in order to recruit and retain qualified and experienced professionals we pay them at a rate equivalent to the relevant national scale.

For the remainder of our roles, when setting salaries, we take into account the knowledge, skills, experience and effort needed for the job and market forces affecting recruitment, which may be local or national. We also benchmark against available information such as comparable roles being advertised locally and charity salary surveys. We take part in such surveys ourselves and benchmark against a range of our peers.

## Financial review

The COVID-19 pandemic has continued to impact the Hospice in 2021/22 although not on the scale experienced in the 2020/21. We have not seen any direct business impact of the Russian invasion of Ukraine apart from the general economic effect being experienced across the UK.

Over the period our main income streams can be categorised as legacies, NHS funding, fundraising and retail, these are discussed in more detail below.

### Legacies

Legacies accounted for 34% of our net income in 2021/22 (2021: 23%). We use forecast information produced by Legacy Foresight, a specialist legacy sector analysis company, as a basis for budgeting and business planning. Legacy KPIs such as notifications, open estates and outstanding accruals are monitored and reported monthly. This should enable us to identify whether any fluctuations in legacy income are short-term, or part of a longer-term trend, so that we

can adapt our plans accordingly. We commissioned an updated report from Legacy Foresight in February 2022 to inform our projections for future years.

### **NHS England COVID-19 funding**

A new package of NHS England funding was announced in December 2021 to allow the hospice sector to provide patient care to support the NHS COVID-19 response. The Hospice received £2,049,130 under this funding agreement. The income was restricted for patient care and has been fully expended in 2021/22. In 2020/21 the Hospice received £6,276,936 NHS England funding under two separate grant programmes.

### **NHS grants**

NHS grants accounted for 19% (2021:16%) of our net income. These are block grants based on historical practice and not related to the level of clinical activity undertaken. We have one-year grant funding agreements with Surrey Heartlands CCG and South West London CCG. The Board has assumed in its strategic plans that there would not be a significant drop in this source of income over the next few years.

### **Fundraising and retail**

The COVID-19 pandemic continued to impact trading activities in 2021/22 although much less than in the previous year.

Retail recovered strongly once the shops were able to re-open from 12 April 2021, helped by Government re-start grants of £200,963 (2021: £531,940). There have been no further enforced store closures and retail made a net contribution of £335,374 in 2021/22 compared with a net deficit of £3,154,707 in 2020/21.

Work on a strategic plan for the future of our retail portfolio continued during the year and as a result of this we outsourced our furniture collection and delivery service to Box Move, a specialist charity furniture business, in November 2021. In December 2021 we closed our Enfield store. Future plans include looking to exit our Distribution Centre to reduce central costs as it no longer suits our needs. We remain committed to maximising the contribution of our retail footprint in the future, both in terms of profitability and the part the shops play in disseminating our service and support to the local community.

Fundraising continued to be challenging in 2021/22, income from donations was £2,311,295 (2021: £2,563,840). Events fundraising has shown a small recovery, as some face-to-face events were able to resume after restrictions eased. Events income was £449,611 (2021: £397,182) but this remains low when compared with pre-pandemic income of over £800,000. We have continued to look at where we can maximise fundraising activity online and our community have supported us by responding generously to our campaigns and appeals.

### **Going concern**

The Board and the Finance and General Purposes Committee continue to closely monitor the ongoing impact of the pandemic on both short and longer-term operations. A range of budget scenarios have been considered and cash flow forecasts prepared in response to scenario planning. The Trustees are satisfied that even under the worst-case scenario considered, there are sufficient funds in current bank and building society accounts, together with investment funds, to continue operating and meet liabilities as they fall due for the foreseeable future.

The Board's view, therefore, is that the Hospice's balance sheet is sufficiently robust to provide resilience and that our reserves should allow the Hospice time to respond with reduction of services and cost savings if income projections indicate a significant reduction over the next three years.

## Reserves

As noted above, a significant amount of the Hospice's income comes from legacies and NHS income. The Board maintains scrutiny over the external environment and uncertainties related to these sources of income. We carry out financial planning and produce a three-year projection of income and expenditure, cash and reserves.

The Trustees have set aside funds in a designated Running Costs Reserve to meet future charitable expenditure in the event of a significant short-term drop in income. This has a target of nine months' (plus or minus three months') budgeted charitable expenditure for the year ahead. During the current uncertain economic climate, and the fact that future pandemic-related restrictions cannot be entirely ruled out, the Board feels that the aim should be to maintain this reserve at the upper end of the target range. The balance on this reserve at the year-end represented 12 months (2021: 12 months) of the Hospice's budgeted charitable expenditure for 2022/23.

The strength of this reserve has enabled the Board to approve a deficit budget for 2022/23. At the time the budget was approved we were projecting to return to a balanced budget in cash terms by 2023/24 but are now unlikely to achieve this. We are facing an increase of 292% in our energy costs, the impact of rising inflation on consumables and services, plus the need to pay the market rate to recruit and retain the skilled workforce that we need to deliver our care. Nevertheless, the Board feel that it is vital the Hospice maintains its services and continues to support our NHS partners in the local health economy. They have therefore authorised the SLT to spend an additional £250,000 over the agreed budget for 2022/23, where necessary to alleviate pressures on the workforce and to maintain our services. This is in addition to a commitment to matching the NHS pay award if it is in excess of the 3% the Hospice awarded from 1 April 2022. The cost of these commitments is expected to be additional expenditure of c.£510,000 from reserves.

The Trustees have established a designated fund, the Strategic Development Reserve, to support the delivery of the Hospice's strategic objectives. There was no draw-down in 2021/22 (2021: £Nil) as the Board was engaged in the development of plans for the new strategic period. The Hospice's new strategy was launched in April 2022 and the Trustees have agreed a number of strategic change projects starting from April funded from this reserve. The reserve is expected to be fully expended over the next three years and expenditure of up to £600,000 has been agreed for 2022/23.

This year the Trustees have established a new designated fund, the Sustainable Building Development Fund, to cover the cost of bringing the older part of the Hospice building, which is now 16 years old, up to modern standards of energy efficiency and to make it fit for purpose for new ways of working. It will also finance sustainable building development initiatives, as they are identified, in order to meet our sustainability goals.

Notes 5 to 7 of the Financial Statements provide more detail on these and other reserves.

## Investments

As set out in the Articles, the Trustees may invest the Hospice's reserves in banks and building society deposits, stocks, funds, shares or other securities they feel to be appropriate. The Hospice's investments are managed on a discretionary basis by Cazenove Capital Management, a firm of professional investment managers. As at 31 March 2022, the Investment Portfolio totalled £3,203,711 (2021: £3,007,844). The market value of the Investment Portfolio increased by £164,758 (2021: £437,365) during the year.

Currently the only ethical restriction imposed by the Board is that there must be no direct investment in any securities issued by tobacco companies.

A review of the investment policy took place during the year, taking into consideration the growing debate around ethical and responsible investment. The new policy was approved by the Board in May 2022 and the Hospice has adopted a socially responsible approach to investment allowing ethical considerations to be taken into account whilst ensuring there is no significant detrimental impact on the investment return. Investments should deliver the best return for the Hospice, adhere to the agreed risk profile and also show compliance with any Environmental, Social and Governance (ESG) principles that are agreed by the Board. If any surplus funds are identified for investment in 2022/23 consideration will be given to investing in ethical and responsibly screened multi assets funds. The ESG principles will be further developed during the year ahead.

The Finance and General Purposes Committee and our investment manager regularly review the performance of the investments in meeting the Hospice's investment policy.

More details about our investments are in Note 11 of the Financial Statements.

## **Employees**

Our work is only possible because of the dedicated service that our employees provide. Each year we thank them for their hard work, commitment and extraordinary contributions. 2021/22 has not been the return to normal we had hoped for; it has continued to present challenges with ever-changing Government guidance on how we can all work and live safely during the ongoing pandemic. Our employees have battled through all of this to keep our services operating and to continue to offer vital extended support to our local health economy.

Those who were working from home have gradually returned to the workplace and resumed their previous working pattern. We have always been open to flexible working and have approved new flexible working requests where these can be accommodated and are mutually beneficial to the employee and to the Hospice. When COVID cases were rising in December 2021 some teams resumed working mainly from home for a short period as a precautionary measure.

We recognise the stress that the pandemic has caused for people both at home and at work and its impact on personal resilience. We continue to do all we can to support employee wellbeing through the BUPA Healthy Minds service, regular email updates and Zoom sessions delivered by the Chief Executive and the SLT.

In 2021/22 the Hospice employed 416 people (2021: 428), the equivalent of 306 full-time employees (2021: 317).

## **Volunteers**

We have welcomed back our volunteers returning to their roles over the course of 2021/22 as regulations and COVID-secure measures allowed. Understandably for some their circumstances have changed during the pandemic and they have decided that they can no longer continue volunteering. We thank them for the generous gift of time they have given us in the past. We have also welcomed new volunteers joining us for the first time and are pleased to see that our volunteer numbers have increased.

We are immensely grateful to all of our volunteers, without them we simply could not deliver our services in the way that we do. Volunteers provide enormous added benefit to the Hospice and the people we help.

Around 1,200 (2021: 970) volunteers support the Hospice in a variety of different roles. Some provide care services to our patients and families, as ward support volunteers, compassionate neighbours, bereavement support volunteers or complementary therapists. Others volunteer in the Hospice by manning our reception and coffee shop, supporting with administrative tasks, patient transport and maintaining our grounds. We also welcome volunteers from local companies who donate their time for a day to support us in the Hospice or our shops.



Other volunteers are involved in fundraising, including the Friends' Committees, which organise events in the community and promote the work of the Hospice to raise vital funds. The largest group (around 550) normally volunteer in our retail operation, supporting the staff to keep the Hospice's shops open six or seven days a week or helping with administration at the retail head office in Molesey.

Volunteers are recruited through advertising. They attend an induction programme and receive initial and ongoing training. Service users such as patients, families and carers, who have expressed an interest in participating in-service design, work with us on steering groups and in other activities where they can influence areas of service delivery.

## Environmental reporting






We recognise the increasing and urgent need to improve environmental sustainability and the growing influence of stakeholder pressures and expectations to pro-actively demonstrate those improvements. We are at the beginning of our environmental journey so are focusing on compliance with the legal 'Streamlined Energy and Carbon Reporting' (SECR) requirement to report on our greenhouse gas (GHG) emissions, and introducing some of the initial areas of work identified for environmental improvement and sustainability.

### SECR Reporting

The Companies (Directors' Report) and Limited Liability Partnerships (Energy and Carbon Report) Regulations 2018 implement the SECR requirements which require the Hospice to report on its greenhouse gas emissions in relation to use of gas, electricity and vehicle fuel, including the methodology used to calculate the emissions, as well as a benchmarking intensity ratio that will allow on-going comparisons in future years. Information on actions identified to improve energy efficiencies is also required.

The Hospice has met two of the qualifying criteria for reporting GHG emissions for the past two consecutive years. The data below covers the two qualifying years 2020/21 and 2021/22.

### SECR Report – All hospice activity and retail operations

| Emission Scopes                                                         | Emission Activities                                                                                                   | Emissions (tCO <sub>2</sub> e) |               | Total kWh         |                   |
|-------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------|--------------------------------|---------------|-------------------|-------------------|
|                                                                         |                                                                                                                       | 2021/22                        | 2020/21       | 2021/22           | 2020/21           |
| Scope 1                                                                 |                                    | 173.73                         | 158.00        | 948516.09         | 858452.00         |
|                                                                         |                                    | 23.23                          | 11.55         | 98136.22          | 48049.99          |
|                                                                         | Data source: Gas and vehicle fuel invoices                                                                            |                                |               |                   |                   |
| Scope 2                                                                 |                                    | 222.00                         | 174.12        | 1045522.30        | 746845.00         |
|                                                                         | Data source: Hospice - smart meter; retail – British Gas 'Billed kWhs' data and invoices for non-British Gas supplies |                                |               |                   |                   |
| Scope 3                                                                 |                                    | 35.41                          | 31.06         | 143946.80         | 125277.59         |
|                                                                         | Data source: business mileage from expenses claims                                                                    |                                |               |                   |                   |
|                                                                         |                                    | 19.65                          | 14.97         | N/A               | N/A               |
| Data source: electrical transmission/distribution based on Scope 2 data |                                                                                                                       |                                |               |                   |                   |
| <b>Totals</b>                                                           |                                                                                                                       | <b>474.02</b>                  | <b>389.70</b> | <b>2236121.02</b> | <b>1778624.58</b> |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|
| <ul style="list-style-type: none"> <li>• Totals are for Hospice and retail operations combined</li> <li>• Scope 1 = Gas consumption and fuel consumption for HI owned vehicles</li> <li>• Scope 2 = Electricity consumption</li> <li>• Scope 3 = Business use of private vehicles and transmission / distribution emissions associated with electricity consumption</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                     |
| Intensity ratio = <b>tCO<sub>2</sub>e / fte</b> (hospice and retail combined)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 2021/2022 = <b>1.59</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 2020/2021 = <b>1.23</b>                                             |
| Intensity ratio = <b>tCO<sub>2</sub>e / Retail units sold</b> (≡ kgCO <sub>2</sub> e / unit sold)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 2021/2022 = <b>0.0004</b><br>(≡ 0.4 kgCO <sub>2</sub> e / unit sold)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 2020/2021 = <b>0.001</b><br>(≡ 1.0 kgCO <sub>2</sub> e / unit sold) |
| Methodology                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <ul style="list-style-type: none"> <li>• The Greenhouse Gas Protocol: A Corporate Accounting and Reporting Standard (revised edition March 2004)</li> <li>• The UK Government GHG Conversion Factors for Company Reporting 2021 (for the 2021/2022 reporting year)</li> <li>• The UK Government GHG Conversion Factors for Company Reporting 2020 (for the 2020/2021 reporting year)</li> <li>• HM Government: Environmental Reporting Guidelines: Including streamlined energy and carbon reporting guidance (March 2019)</li> <li>• The Hospice will follow the rolling base year option to more easily compare year on year environmental performance, and to minimise the ongoing implications from 2020/2021.</li> </ul> |                                                                     |
| <b>Table Notes</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                     |
| <ol style="list-style-type: none"> <li>1. 2020/2021 is not a true representative year due to COVID lockdowns and restrictions resulting in 45 shop closures from April 2020 and a phased re-opening from April 2021. There was also a reduction in other associated Retail activities. The Hospice In-Patient Unit remained open but with reduced bed numbers, although Community team visits to patients in their own homes increased. A majority of non-clinical staff worked from home, and volunteers were stood down from their roles from March 2020, with a few returning from September 2020. Retail services resumed between April and September 2021, and there was a phased return of Hospice services by April 2022.</li> <li>2. Emissions, total kWh energy used, business mileage and the fte intensity factor for 2021/2022 all increased from 2020/2021, most likely due to full resumption of services and activities across the Hospice following easing/removal of COVID restrictions, although some COVID restrictions did also influence energy use, eg increased heating demand due to open windows to ensure effective ventilation.</li> <li>3. Although not clear from the combined overall totals, there was an actual decrease in electrical consumption in 2021 / 2022 in the main Hospice building, which could be explained by greater numbers of staff working from home, LED replacements of older lights and greater general awareness.</li> <li>4. The figures do not take account of the work-related increase in use of domestic energy for workers working from home.</li> <li>5. More meaningful comparisons should be available in future years.</li> </ol> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                     |

## **Energy Related Mitigation Measures**

Taking forward recommendations from the Hospice's Energy Savings Opportunities Scheme (ESOS) Report (based on the last qualifying period of 2018/2019) and other initiatives we are pursuing, the following mitigation measures to reduce energy use are being actioned/considered.

### **Lighting**

We will continue with our programme to replace older, energy inefficient lighting, eg fluorescent lights, with energy efficient LED lights. Currently around 60% of the main Hospice building has been upgraded. LED replacement plans also include our Retail estate.

### **Heating, Ventilation and Air Conditioning**

We are looking at a centrally controlled temperature system, to stop unreasonable demands on the system. We will continue with planned preventative maintenance work to maximise system insulation and efficient operation, including identifying key components for replacement where they cannot maintain the required energy efficiency levels.

Two more energy efficient condensing boilers have been installed recently to replace the old, inefficient boiler. The new control panel allows finer, more precise and targeted system tuning and adds additional efficiencies.

### **Energy Monitoring and Management**

We are currently in fixed-term contracts with our energy suppliers that expire in 2022. Our ESOS report recommended researching alternative suppliers and we will be using the Hospice Quality Partnership approved broker Focus Energy to support us with this process.

Using available data, we will look at energy usage monitoring and how this can be used to promote/change behaviours and consumption.

### **Renewables and Other Energy Reduction Measures**

The Board has approved a three-year capital expenditure programme that includes approval for the installation of solar panels on the zinc roof of the main Hospice building in 2023/24. These would provide an estimated 50,000kWh of electricity per year (approximately an 1/8th of the main building annual usage) all of which will feed back into Hospice demand. If we can secure funding this project will be brought forward.

### **Transport**

We have invested in the technology to support hybrid-working to cut down on travel to/from the workplace. Many of our meetings and education courses now take place via video conferencing.

Two electric car charge points were installed at the main Hospice building in May 2022 and are available for use by employees, volunteers and visitors. This will enable us to replace the current Hospice diesel vehicle with an electric vehicle and support people coming on site to use electric vehicles.

We will encourage alternative travel options by promoting the Hospice Cycle to Work Scheme and safe walking routes.

### **General**

Our 'Environment Working Group' will promote environmental awareness and behaviours within the Hospice and capture improvement ideas.

We will identify areas where key performance indicators (KPIs) and improvement targets can be set.

## **Areas for further development**

- Waste: identify areas of waste generation and develop initiatives to reduce wastage and promote re-use, up-cycling and re-cycling.
- Water: identify areas of highest water usage and waste and develop initiatives to increase re-use and reduce wastage.
- Nature: identify ways to introduce and support new, non-harmful species into the Hospice grounds while maintaining our current biodiversity, and promote these to our stakeholders to provide wellbeing benefits, interest and awareness.
- Procurement: develop procurement systems that take into account our environmental standards and expectations to ensure responsible and ethical investments, purchases and supply chains.
- Publicity: increase and promote internal and external interest and awareness of Hospice environmental initiatives to all current and future stakeholders.

## **Public benefit**

The Trustees give careful consideration to the Charity Commission's guidance on public benefit when setting the Hospice's aims and objectives and planning activities. Access to our services is on the basis of need and open to anyone via referral from a healthcare professional, or, in the case of bereavement support, self-referral. There is no charge to patients or their families for any of our current care services.

## **Statement of Trustee's responsibilities**

The Trustees (who are the Directors of the Hospice for the purposes of company law) are responsible for preparing the Trustees' Annual Report and the financial statements in line with the law and the regulations that apply. Under company law, the Trustees must prepare financial statements for each financial year. Under that law, the Trustees have elected to prepare such statements in accordance with United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice). By law, these statements must give a true and fair view of the Hospice's finances and of the income and expenditure for the financial year.

When preparing these financial statements, the Trustees must:

- Choose suitable accounting policies and follow them consistently;
- Keep to the methods and principles in the Charities' Statement of Recommended Practice (FRS 102);
- Make judgements and estimates that are reasonable and prudent;
- State whether applicable accounting standards have been followed, subject to any material departures disclosed and explained in the financial statements;
- Prepare the financial statements on a 'going concern' basis, unless the Hospice is unlikely to continue in business.

The Trustees must keep proper accounting records that disclose the Hospice's financial position to a reasonable level of accuracy at all times and make sure that the financial statements comply with the Companies Act 2006. They are also responsible for protecting the Hospice's assets and taking reasonable steps to prevent and detect fraud and other unusual activity.

The Trustees believe they have taken all the necessary steps to make the auditors aware of any relevant audit information and have given the auditors a written undertaking to that effect. They

also believe that they have identified the major risks that the Hospice faces. These have been reviewed, and systems have been put in place to reduce these risks as far as possible.

## **Auditor**

Mazars LLP, having expressed their willingness to continue in office, will be deemed reappointed for the next financial year in accordance with section 487(2) of the Companies Act 2006, unless the company receives notice under section 488(1) of the Companies Act 2006.

# Fundraising Regulation

Princess Alice Hospice is registered with the Fundraising Regulator and committed to adhering to the Code of Fundraising Practice. We review compliance through audit and monitoring feedback, and take corrective action where required.

## Standards and monitoring

We are committed to following the highest ethical standards and ensuring a quality supporter experience. We have detailed policies and procedures in place that in many cases go beyond the minimum requirements for the sector, and we regularly monitor ourselves and our agencies through a range of methods (including regular internal audits and call listening). This helps ensure all Hospice fundraisers, and those who work on our behalf are aware of, and adhere to, our high standards. Some of our fundraising activity is conducted on our behalf, by carefully selected professional fundraising agencies. We also work with agencies to telephone existing supporters to talk about their donation and, on some occasions, to ask for a further donation. We work very closely with our agencies to make sure they represent our work and our organisation to the highest standards. None of our fundraisers, whether employed by us or one of our agencies, are paid on a commission basis.

## Complaints

We report our complaints on a calendar year basis to comply with the Fundraising Regulator's requirements. The number of complaints received for the 12 months to 31 March 2022 regarding fundraising was zero.

## Managing communications

Most people who donate to us want to know how their money is making a difference. We ask whether they would like us to keep in touch with them so we can update them on our work and how they've helped us. From time to time, we ask supporters if they would like to support us further – for example, by increasing their donation or by taking part in a particular event. Sometimes, we need to share information with authorised people or organisations so they can deliver services. If this is the case, we only give them the information they need to do so – and we always make sure that they will protect information with security and confidentiality processes equivalent to ours.

We ask supporters how they would prefer us to communicate with them. We give them the option to let us know if they prefer less contact or no longer wish to hear from us, and always respect their wishes. We never share, swap, rent or sell our supporters' details to any other charities or third parties for marketing purposes.

## Our Fundraising Promise

We will commit to high standards.

We will be clear, honest and open.

We will be fair and reasonable.

We will be respectful.

For further details please see our privacy policy at [www.pah.org.uk](http://www.pah.org.uk)

# Principal risks and uncertainties

**The Audit and Risk Committee (A&RC) oversees the Hospice's risk management and governance processes on behalf of the Board.**

During 2021/22 we reviewed and refined our approach to risk management. A new organisational risk register was developed, with risks assigned to the SLT lead for each area of business. The register was reviewed by A&RC and approved by the Board. The SLT review the register on a regular basis, at least before every Board meeting, and risks can be escalated or de-escalated at any time, informed by the individual directorate risk registers. The role of A&RC is to oversee the Main Risks and to moderate the organisational risk register. Each committee reviews the risks relevant to its area of operation, supported by the SLT lead.

The Main Risk register has six risk areas that impact the Hospice. These act as domains for the organisational risk register and each committee gives them a "RAG" rating for their area under their remit. This helps A&RC to determine an overall risk rating for the domains. A summary status of main risks, and a commentary, is provided for each board meeting by the Chair of A&RC.

The organisational risk register helps us to prioritise risks in terms of the effect they might have and how likely they are to occur. The register also identifies the controls, systems and procedures in place for mitigation. At each Committee's meeting the register is reviewed and the A&RC is notified of any significant change in any of the major risk areas. Committees cross representation by Trustees allows a verbal report from each Committee to the A&RC by a Trustee member who is also a member of that committee.

There is a formal annual review of the risk domains and organisational risk register by the A&RC and the Board. A&RC collates views and presents a summary to the Board for further discussion.

Along with every other charity, corporation and organisation, the Hospice had to adjust its policies and operations to meet the challenges of the COVID-19 pandemic which impacted on every main risk area. Although most restrictions have been removed the Trustees continue to monitor the business impact of living with COVID-19 during 2022/23. The potential for restrictions to be re-imposed if infection levels rise later in the year cannot be ruled out.

At the present time we have not seen any significant business impact as a result of the Russian invasion of Ukraine apart from the general economic impact being experienced across the UK. However, the impact of rising inflation is a serious concern for the Board and we are seeing significant increases in the cost of utilities, services and consumables. One of our main risks is recruitment and retention and we are facing an increasingly competitive jobs market locally. The Board have agreed to match the NHS pay award, when announced, to mitigate the risk of losing staff. We have already paid a 3% increase from 1 April, recognising that our employees are also experiencing the effect of rising prices.

The longer-term economic impact of the UK leaving the EU, the pandemic and the conflict in Ukraine remains, and will remain, a significant concern/risk for the Board and its committees.

## **Our Main Risk areas are:**

**Income** – inability to generate sufficient income to deliver our charitable activities. We have diversified our income streams, monitor our finances closely and have an appropriate level of reserves to withstand short term funding fluctuations. If we identify a longer-term trend of falling income, our reserves will ensure continuity of service provision whilst we seek other sources of funding or implement an appropriate cost reduction programme. Since the onset of the COVID-19 pandemic, F&GP receive a weekly update on our cash position.

**People** – inability to recruit and retain the people with the right skills we need across the organisation. We carry out workforce planning and monitor supply and demand carefully,



introducing new roles and diversifying skills and competencies to make scarce resource go further. We have developed a new “People Plan” for the strategic period 2022 – 27 which supports effective recruitment, development and retention. We also carry out employee satisfaction and wellbeing surveys.

**Culture/morale – inability to align our culture with changes that we need to make and that are being made in the environment within which we work.** The Board and SLT recognise that our people are at the heart of all we do and that it is essential that our employees and volunteers understand what is important to us, our patients and families and the communities that we work with. We are open and transparent in our communications, share our business decisions and rationale and take steps to ensure that the organisational strategy is known and understood throughout the organisation. We monitor the effectiveness of these steps by conducting regular employee and volunteer engagement surveys.

**Health and Social Care Environment – the risk that changes in the health and social care environment will impact on our NHS funding and/or our ability to continue to deliver palliative and end of life care and support.** Senior colleagues work in partnership with health and care professionals and organisations across local health economies, demonstrating the impact of the care that we deliver. As new structures emerge, we take every opportunity to ensure that we have effective representation and continue to advocate for the needs of patients facing the end of life.

**Reputation – risk of reputational damage.** As a sector leader, our reputation is of vital importance. We have a comprehensive set of policies and procedures in place to ensure compliance with best practice and legislation. All comments and complaints are promptly responded to and investigated to ensure that lessons are learned for organisational improvement. This is supported by our communications strategy. In 2021/22 the Hospice was inspected by the CQC and achieved an overall rating of “Outstanding” for the second consecutive time.

**Business continuity – risk of fire, flood or other environmental events that impact on our ability to operate.** We have a comprehensive business continuity plan in place. This includes contingency plans for maintaining services and operations in the event that the Hospice building is out of use. We have an offsite disaster recovery server which can be brought online very quickly to ensure continued access to patient records and other business critical information. Staff receive regular training on dealing with emergency situations, including evacuation of the premises if necessary. Elements of the plan are tested on a regular basis. Our ability to continue to deliver care and support and maintain our operations during the COVID-19 pandemic has provided reassurance to the Board.

Approved by the Board of Trustees on 13 July 2022 and  
signed on its behalf by



Sean Hilton

Chair, Board of Trustees, Princess Alice Hospice

# Independent auditor's report to the members of Princess Alice Hospice

## Opinion

We have audited the financial statements of Princess Alice Hospice (the 'charity') for the year ended 31 March 2022 which comprise the Consolidated Statement of Financial Activities, the Consolidated and Charity Balance Sheets, the Consolidated Statement of Cash Flows and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including FRS 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland" (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- give a true and fair view of the state of the charity and the group's affairs as at 31 March 2022 and of the group's 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 Auditor's responsibilities for the audit of the financial statements section of our report. We are independent of the charity in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

## Conclusions relating to going concern

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

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

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

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the 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 there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

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

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

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

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

In light of the knowledge and understanding of the charity and its environment obtained in the course of the audit, we have not identified material misstatements in the Strategic Report or the Directors' Report included within the Trustees' 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 adequate and proper accounting records have not been kept, or returns adequate for our audit have not been received from branches not visited by us; or

- the 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 set out on page 21, 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 charity's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the trustees either intend to liquidate the charity or to cease operations, or have no realistic alternative but to do so.

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

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

The extent to which our procedures are capable of detecting irregularities, including fraud is detailed below.

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.

Based on our understanding of the charity and its industry, we considered that non-compliance with the following laws and regulations might have a material effect on the financial statements: employment regulation, health and safety regulation, anti-money laundering regulation, non-compliance with implementation of government support schemes relating to COVID-19.

To help us identify instances of non-compliance with these laws and regulations, and in identifying and assessing the risks of material misstatement in respect to non-compliance, our procedures included, but were not limited to:

- Inquiring of management and, where appropriate, those charged with governance, as to whether the charity is in compliance with laws and regulations, and discussing their policies and procedures regarding compliance with laws and regulations;
- Inspecting correspondence, if any, with relevant licensing or regulatory authorities;
- Communicating identified laws and regulations to the engagement team and remaining alert to any indications of non-compliance throughout our audit; and
- Considering the risk of acts by the charity which were contrary to applicable laws and regulations, including fraud.

We also considered those laws and regulations that have a direct effect on the preparation of the financial statements, such as tax legislation, pension legislation, the Companies Act 2006, the Charities Act 2011 and the Charities Statement of Recommended Practice.

In addition, we evaluated the trustees' and management's incentives and opportunities for fraudulent manipulation of the financial statements, including the risk of management override of controls, and determined that the principal risks related to posting manual journal entries to manipulate financial performance, management bias through judgements and assumptions in significant accounting estimates, in particular in relation to accrued income, income recognition (which we pinpointed to the cut-off assertion), and significant one-off or unusual transactions.

Our audit procedures in relation to fraud included but were not limited to:

- Making enquiries of the trustees and management on whether they had knowledge of any actual, suspected or alleged fraud;
- Gaining an understanding of the internal controls established to mitigate risks related to fraud;
- Discussing amongst the engagement team the risks of fraud; and
- Addressing the risks of fraud through management override of controls by performing journal entry testing.

There are inherent limitations in the audit procedures described above and the primary responsibility for the prevention and detection of irregularities including fraud rests with management. As with any audit, there remained a risk of non-detection of irregularities, as these may involve collusion, forgery, intentional omissions, misrepresentations or the override of internal controls.

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](http://www.frc.org.uk/auditorsresponsibilities). This description forms part of our auditor's report.

## Use of the audit report

This report is made solely to the charity'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 charity's members those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charity and the charity's members as a body for our audit work, for this report, or for the opinions we have formed.

A handwritten signature in blue ink that reads "Nicola Wakefield". The signature is written in a cursive style.

Nicola Wakefield  
(Senior Statutory Auditor)  
for and on behalf of Mazars LLP  
Chartered Accountants and Statutory Auditor  
6 Sutton Plaza, Sutton Court Road, Sutton, Surrey, SM1 4FS  
Date: 1 September 2022

# Consolidated statement of financial activities (including income and expenditure account)

For the year ended 31 March 2022

| Consolidated                                         | Notes | Unrestricted funds | Designated funds  | Restricted funds | Endowment funds | Total funds 2022  | Total funds 2021  |
|------------------------------------------------------|-------|--------------------|-------------------|------------------|-----------------|-------------------|-------------------|
|                                                      |       | £                  | £                 | £                | £               | £                 | £                 |
| <b>Income</b>                                        |       |                    |                   |                  |                 |                   |                   |
| <b>Donations and legacies</b>                        |       |                    |                   |                  |                 |                   |                   |
| Donations                                            | 1.4   | 2,048,934          | -                 | 262,361          | -               | 2,311,295         | 2,563,840         |
| Legacies                                             | 1.4   | 3,840,693          | -                 | -                | -               | 3,840,693         | 2,943,798         |
| NHS grants                                           | 1.4   | 2,106,148          | -                 | -                | -               | 2,106,148         | 2,095,908         |
| <b>Other trading activities</b>                      |       |                    |                   |                  |                 |                   |                   |
| Retail shops                                         | 2     | 6,042,851          | -                 | -                | -               | 6,042,851         | 1,544,272         |
| Fundraising events                                   | 1.4   | 449,611            | -                 | -                | -               | 449,611           | 397,182           |
| Trading subsidiaries                                 | 3     | 665,358            | -                 | -                | -               | 665,358           | 595,067           |
| <b>Investments</b>                                   | 1.4   | 51,826             | -                 | -                | 905             | 52,731            | 51,933            |
| <b>Charitable activities</b>                         |       |                    |                   |                  |                 |                   |                   |
| NHS England Covid-19 funding                         | 1.4   | -                  | -                 | 2,049,130        | -               | 2,049,130         | 6,276,936         |
| NHS Covid-19 local response funding                  | 1.4   | -                  | -                 | -                | -               | -                 | 289,529           |
| NHS service funding                                  | 1.4   | 322,963            | -                 | -                | -               | 322,963           | 278,519           |
| NHS continuing healthcare funding                    | 1.4   | 55,183             | -                 | -                | -               | 55,183            | 62,190            |
| Education                                            | 1.4   | 240,286            | -                 | -                | -               | 240,286           | 132,902           |
| <b>Other income</b>                                  |       |                    |                   |                  |                 |                   |                   |
| Coronavirus Retail Grants                            | 1.4   | 200,963            | -                 | -                | -               | 200,963           | 531,940           |
| Coronavirus Job Retention Scheme                     | 1.4   | 51,067             | -                 | -                | -               | 51,067            | 1,302,403         |
| Other income                                         | 1.4   | 59,054             | -                 | -                | -               | 59,054            | 10,942            |
| <b>Total income</b>                                  |       | <b>16,134,937</b>  | <b>-</b>          | <b>2,311,491</b> | <b>905</b>      | <b>18,447,333</b> | <b>19,077,361</b> |
| <b>Expenditure</b>                                   |       |                    |                   |                  |                 |                   |                   |
| <b>Expenditure on raising donations and legacies</b> | 4     | 966,114            | 586               | -                | -               | 966,700           | 930,301           |
| <b>Expenditure on other trading activities</b>       |       |                    |                   |                  |                 |                   |                   |
| Retail shops                                         | 2 & 4 | 5,705,055          | 2,422             | -                | -               | 5,707,477         | 4,698,979         |
| Fundraising events                                   | 4     | 139,326            | -                 | -                | -               | 139,326           | 131,327           |
| Trading subsidiaries                                 | 3 & 4 | 281,639            | -                 | -                | -               | 281,639           | 246,129           |
| <b>Total expenditure on raising funds</b>            |       | <b>6,126,020</b>   | <b>2,422</b>      | <b>-</b>         | <b>-</b>        | <b>6,128,442</b>  | <b>5,076,435</b>  |
| <b>Expenditure on charitable activities</b>          |       |                    |                   |                  |                 |                   |                   |
| In-patient care                                      | 4     | 3,563,571          | 2,018             | 1,194,633        | 885             | 4,761,107         | 5,011,016         |
| Hospice at home                                      | 4     | 2,812,784          | 1,622             | 1,013,737        | -               | 3,828,143         | 3,698,611         |
| Community engagement and support                     | 4     | 596,642            | 274               | 48,125           | -               | 645,041           | 569,383           |
| Education                                            | 4     | 800,697            | 339               | -                | 20              | 801,056           | 776,909           |
| <b>Total expenditure on charitable activities</b>    |       | <b>7,773,694</b>   | <b>4,253</b>      | <b>2,256,495</b> | <b>905</b>      | <b>10,035,347</b> | <b>10,055,919</b> |
| <b>Total expenditure</b>                             | 4     | <b>14,865,828</b>  | <b>7,261</b>      | <b>2,256,495</b> | <b>905</b>      | <b>17,130,489</b> | <b>16,062,655</b> |
| <b>Net income before gains/losses</b>                |       | <b>1,269,109</b>   | <b>(7,261)</b>    | <b>54,996</b>    | <b>-</b>        | <b>1,316,844</b>  | <b>3,014,706</b>  |
| Net gains on investments                             | 11    | 164,758            | -                 | -                | -               | 164,758           | 437,365           |
| <b>Net income</b>                                    |       | <b>1,433,867</b>   | <b>(7,261)</b>    | <b>54,996</b>    | <b>-</b>        | <b>1,481,602</b>  | <b>3,452,071</b>  |
| Transfer from designated funds                       | 5     | (379,126)          | 379,126           | -                | -               | -                 | -                 |
| Transfer from restricted funds                       | 6     | 53,201             | -                 | (53,201)         | -               | -                 | -                 |
| <b>Net movement in funds</b>                         |       | <b>1,107,942</b>   | <b>371,865</b>    | <b>1,795</b>     | <b>-</b>        | <b>1,481,602</b>  | <b>3,452,071</b>  |
| <b>Reconciliation of funds</b>                       |       |                    |                   |                  |                 |                   |                   |
| <b>Total funds brought forward at 1 April 2021</b>   |       | <b>322,403</b>     | <b>18,391,230</b> | <b>78,069</b>    | <b>905,041</b>  | <b>19,696,743</b> | <b>16,244,672</b> |
| <b>Total funds carried forward at 31 March 2022</b>  |       | <b>1,430,345</b>   | <b>18,763,095</b> | <b>79,864</b>    | <b>905,041</b>  | <b>21,178,345</b> | <b>19,696,743</b> |

Note 5

Note 6

Note 7

All the above results are derived from continuing activities. There were no other recognised gains or losses other than those stated above.

The comparative figures for each fund are shown in Note 8. The Notes on pages 31 to 46 form part of these financial statements.

## Balance sheets as at 31 March 2022

|                                                | Notes | Group             |                   | Charity           |                   |
|------------------------------------------------|-------|-------------------|-------------------|-------------------|-------------------|
|                                                |       | 2022              | 2021              | 2022              | 2021              |
|                                                |       | £                 | £                 | £                 | £                 |
| <b>Fixed assets</b>                            |       |                   |                   |                   |                   |
| Intangible assets                              | 9     | 71,867            | 110,982           | 71,867            | 110,982           |
| Tangible fixed assets                          | 10    | 5,820,191         | 6,201,950         | 5,820,191         | 6,201,950         |
| Investments                                    | 11    | 3,203,711         | 3,007,844         | 3,204,811         | 3,008,944         |
| <b>Total fixed assets</b>                      |       | <b>9,095,769</b>  | <b>9,320,776</b>  | <b>9,096,869</b>  | <b>9,321,876</b>  |
| <b>Current assets</b>                          |       |                   |                   |                   |                   |
| Stock                                          | 12    | 16,732            | 28,594            | -                 | -                 |
| Debtors                                        | 13    | 6,318,098         | 4,802,990         | 6,573,728         | 5,018,254         |
| Cash at bank                                   |       | 7,236,261         | 6,544,196         | 6,887,633         | 6,253,622         |
| <b>Total current assets</b>                    |       | <b>13,571,091</b> | <b>11,375,780</b> | <b>13,461,361</b> | <b>11,271,876</b> |
| <b>Liabilities</b>                             |       |                   |                   |                   |                   |
| Creditors: Amounts falling due within one year | 14    | (1,389,515)       | (900,813)         | (1,280,885)       | (798,009)         |
| <b>Net current assets</b>                      |       | <b>12,181,576</b> | <b>10,474,967</b> | <b>12,180,476</b> | <b>10,473,867</b> |
| <b>Total assets less current liabilities</b>   |       | <b>21,277,345</b> | <b>19,795,743</b> | <b>21,277,345</b> | <b>19,795,743</b> |
| <b>Provisions for liabilities</b>              |       |                   |                   |                   |                   |
| Annuity provision                              | 1.9   | (99,000)          | (99,000)          | (99,000)          | (99,000)          |
| <b>Total net assets</b>                        |       | <b>21,178,345</b> | <b>19,696,743</b> | <b>21,178,345</b> | <b>19,696,743</b> |
| <b>The funds of the charity:</b>               |       |                   |                   |                   |                   |
| Endowment funds                                | 7     | 905,041           | 905,041           | 905,041           | 905,041           |
| Restricted income funds                        | 6     | 79,864            | 78,069            | 79,864            | 78,069            |
| Designated funds                               | 5     | 18,763,095        | 18,391,230        | 18,763,095        | 18,391,230        |
| Unrestricted funds                             |       | 1,430,345         | 322,403           | 1,430,345         | 322,403           |
|                                                |       | <b>21,178,345</b> | <b>19,696,743</b> | <b>21,178,345</b> | <b>19,696,743</b> |

Approved by the Board of Trustees on 13 July 2022 and signed on its behalf by:



Sean Hilton  
Chair



D. Don-Wauchope  
Honorary Treasurer

## Consolidated cash flow statement for the year ended 31 March 2022

|                                                                               | Notes                     | 2022             | 2021             |
|-------------------------------------------------------------------------------|---------------------------|------------------|------------------|
|                                                                               |                           | £                | £                |
| <b>Net income for the year (as per the statement of financial activities)</b> | <b>b/fwd from page 29</b> | <b>1,481,602</b> | <b>3,452,071</b> |
| <b>Adjustments for:</b>                                                       |                           |                  |                  |
| Depreciation and amortisation                                                 | <b>9 &amp; 10</b>         | 725,253          | 691,141          |
| Net (gain) on investments                                                     | <b>11</b>                 | (164,758)        | (437,365)        |
| Investment income                                                             |                           | (52,731)         | (51,933)         |
| Decrease in stock                                                             | <b>12</b>                 | 11,862           | 5,217            |
| (Increase)/decrease in debtors                                                | <b>13</b>                 | (1,515,108)      | 960,027          |
| Increase/(decrease) in creditors                                              | <b>14</b>                 | 488,702          | (241,132)        |
| <b>Cash flows from operating activities</b>                                   |                           |                  |                  |
| <b>Net cash provided by operating activities</b>                              |                           | <b>974,822</b>   | <b>4,378,026</b> |
| <b>Cash flows from investing activities</b>                                   |                           |                  |                  |
| Investment income                                                             |                           | 52,731           | 51,933           |
| (Purchase) of fixed assets                                                    | <b>9 &amp; 10</b>         | (304,379)        | (186,498)        |
| Sale of investments                                                           | <b>11</b>                 | 409,999          | 1,112,716        |
| Movement in cash                                                              |                           | 60,387           | (124,619)        |
| (Purchase) of investments                                                     | <b>11</b>                 | (501,495)        | (1,021,737)      |
| <b>Net cash (used in) investing activities</b>                                |                           | <b>(282,757)</b> | <b>(168,205)</b> |
| <b>Increase in cash in the year</b>                                           |                           | <b>692,065</b>   | <b>4,209,821</b> |
| <b>Opening balance at bank</b>                                                |                           | <b>6,544,196</b> | <b>2,334,375</b> |
| <b>Closing balance at bank</b>                                                |                           | <b>7,236,261</b> | <b>6,544,196</b> |

## Notes to the Financial Statements

### FOR THE YEAR ENDED 31 MARCH 2022

#### 1. Accounting Policies

##### 1.1 Basis of preparation

These financial statements are prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) - ("Charities SORP" (FRS 102)), the Financial Reporting Standard applicable in the UK and Republic of Ireland ("FRS 102") and the Companies Act 2006.

The charitable company, Princess Alice Hospice (the "Hospice") 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 note(s).

The financial position of the Hospice is set out in the Trustees' Annual Report. The COVID-19 pandemic has continued to impact the Hospice's voluntary and trading income in 2021/22. Retail income has recovered strongly and alongside planned changes to the structure of the retail estate saw a significant improvement. The Hospice has been able to access Government re-start grants for retail businesses of £200,963 (2021: £531,940 various support grants). The Hospice claimed, and was reimbursed for, £34,299 (2021: £1,197,431) from the Coronavirus Job Retention Scheme



(CJRS) for shop staff who were furloughed. (See note 1.4 for more details of these grants). The retail shops also benefitted from a business rates holiday for part of 2021/22.

Fundraising has recovered more slowly, with community fundraising particularly impacted. PAH Trading Limited saw a recovery in new goods sales and commission on Gift-aided sales after the shops re-opened. Face-to-face education courses have remained limited during the year but courses offered via remote learning have expanded.

The Hospice has benefited from NHS England restricted funding in the form of grants through Hospice UK to support the NHS COVID-19 response. This is on a similar basis to the programme that ran from November 2020 to March 2021. A total of £2,049,130 (2021: £6,276,936) was receivable during 2021/22 of which £1,682,811 (2021: £1,187,019) remained outstanding at 31 March 2022. (See note 1.4 for further details)

Cash flow forecasts have been prepared and a range of future scenarios considered. The Trustees are satisfied that, due to the level of cash and reserves held, even under the worst-case scenario considered there are sufficient funds to continue operating and meet liabilities as they fall due for the foreseeable future.

The Trustees are of the opinion that the Hospice has sufficient money in current bank and building society accounts together with investment funds to continue in operational existence for the foreseeable future. The Trustees therefore continue to adopt the going concern basis of accounting in preparing these annual financial statements.

## **1.2 Group financial statements**

The financial statements consolidate the results of the Hospice and its wholly-owned subsidiaries PAH Trading Limited and PAH Lottery Limited (“the group”) on a line-by-line basis. A separate Statement of Financial Activities (“SoFA”) and Income and Expenditure Account for the charity has not been presented because the Hospice has taken advantage of the exemption afforded by section 408 of the Companies Act 2006. The income of the Hospice was £18,165,695 (2021: £18,831,497) and the expenditure was £16,848,851 (2021: £15,816,790).

## **1.3 Fund accounting**

Endowment, restricted, designated and unrestricted funds are separately disclosed in the Balance Sheet and in the Consolidated SoFA. These different funds are defined as follows:

- Endowment funds are funds given to the Hospice where it may use only the income generated from investing these funds
- Restricted funds are subject to specific restrictive conditions imposed by the donor or by the nature of an appeal
- Designated funds are set aside at the discretion of the Trustees for specific purposes. They would otherwise form part of unrestricted funds
- Unrestricted funds are available to use at the discretion of the Trustees in furtherance of the charitable objectives of the Hospice.

## **1.4 Income**

The total income receivable in the year comprises donations, legacies, NHS income, income from trading activities, interest, fees from education courses run by the Hospice, coronavirus-related government grants and other sundry income.

Legacies are recognised as income when it can reasonably be assumed that the Hospice is entitled to the legacy and the amount can be estimated with sufficient reliability.

NHS England (NHSE) COVID-19 funding is income received under a funding programme administered by Hospice UK during 2021/22. The NHSE awarded funding for hospices to provide

patient care to support the NHS COVID-19 response. The funding was restricted and has been fully expended in 2021/22.

NHS grants are the block grants that the Hospice receives from NHS Surrey Heartlands Clinical Commissioning Group, and NHS South West London Clinical Commissioning Group (the “CCGs”). These are based on historic practice and not related to the level of clinical activity undertaken by the Hospice. They are only agreed for up to one year at a time.

NHS service funding is income received related to the provision of a clinical service, which is normally linked to specific clinical activities undertaken by the Hospice. This may be funding for a new initiative which has been commissioned by a CCG in its care area, such as rapid response night service, or a pilot project. Funding is typically received as a percentage contribution towards the total costs.

NHS continuing healthcare funding is income received for patients who are eligible for a continuing care package. These patients are ready for discharge from the In-Patient Unit but are waiting for a suitable place in a care home or nursing home, or for domiciliary care to be arranged.

Retail re-start grants are Government grants received via local authorities to support non-essential retail businesses to get up and running after lockdown closure.

The CJRS was set up by the Government to support businesses with the employment costs of staff who would otherwise have been laid off or made redundant because the business was severely impacted by the COVID-19 crisis. The Hospice claimed, and was reimbursed for, £51,067 in total for 2021/22 (2021: £1,302,403).

### **1.5 Donated goods and services**

Donated vehicles, plant or furniture are recognised as tangible fixed assets and the corresponding gain recognised as income from donations in the SoFA. Donated facilities or services are likewise recognised as income from donations on the basis of the value of the gift to the Hospice and an equivalent amount recognised as an expense under the appropriate heading in the SoFA.

The Hospice received donations of goods to the value of £12,593 in the year ended 31 March 2022 (2021: £Nil). Donated goods for resale are recognised as income when sold and included in income from retail shops in the SoFA. It is not practical to estimate the fair value of these goods on receipt because of the volume of low-value items received and the lack of detailed records.

In accordance with the Charities SORP (FRS 102), general volunteer time is not included as income in the accounts as it is not possible to measure this reliably. However, the Hospice relies on the contribution of volunteers and is very grateful for their time. See page 16 for further details.

### **1.6 Expenditure**

Direct costs comprise expenditure incurred during the year both directly and indirectly attributable to the activity concerned. Support costs include the cost of governance, housekeeping, catering, facilities and health & safety, people services, marketing and communication, finance and administration and depreciation of fixed assets. These have been allocated to activities on a proportionate basis e.g. by activity level, headcount or on the basis of staff time spent (see Note 4).

### **1.7 Taxation**

As a registered charity, the Hospice benefits from business rates relief from local Councils and is exempt from direct tax on its charitable activities. The Hospice is able to claim back VAT on most of its activities, any irrecoverable VAT is included in the cost of those items to which it relates. Income tax recoverable in respect of donations under Gift Aid and investment income is included with the income to which it relates.

## 1.8 Intangible and tangible fixed assets

Fixed assets are stated at cost, net of depreciation. Depreciation is provided at rates calculated to write off the cost in equal instalments over the economic life of the asset at the following annual rates:

|                                                      |                            |
|------------------------------------------------------|----------------------------|
| • Intangible assets                                  | 20%/33%                    |
| • Freehold land                                      | 0%                         |
| • Freehold buildings                                 | 4%                         |
| • Leasehold buildings                                | over the life of the lease |
| • Furniture and equipment                            | 10%                        |
| • Medical equipment                                  | 20%                        |
| • Motor vehicles                                     | 25%                        |
| • Information and Communication Technology Equipment | 20%/33%                    |

Items are treated as fixed assets and their costs capitalised only where the purchase price exceeds £1,000.

Intangible fixed assets are non-monetary fixed assets that do not have physical substance, such as computer software, licences and website development.

The cost of leasehold buildings represents capital expenditure on retail shops and lease acquisition premiums.

## 1.9 Pension costs

The total employer pension contribution to all schemes for the year ended 31 March 2022 was £623,568 (2021: £632,716). Total contributions of £95,838 (2021: £98,040) were due to be paid after the year end.

### NHS Pension Scheme

The Hospice makes payments to the NHS Pension Scheme for former NHS employees who, on employment with the Hospice, are eligible to continue in or re-join the NHS Pension Scheme. The NHS Pension Scheme is an unfunded defined benefit scheme that covers employees of NHS employers, General Practices and other bodies allowed under the direction of the Secretary of State for Health and Social Care in England and Wales, which includes the Hospice. It is not possible to identify the Hospice's share of the underlying assets and liabilities and as a result the NHS Pension Scheme is treated as a defined contribution scheme under FRS102.

The employer contribution payable in the year to the NHS Pension Scheme was £318,855 (2021: £335,766).

### Group Personal Pension Scheme

A defined contribution scheme is in operation for eligible employees with contributions payable by both the Hospice and the relevant employees. The assets of these plans are held separately from those of the Hospice, being invested with an insurance company. The current provider of the scheme is Scottish Widows Limited.

The employer contribution payable in the year into the Group Personal Pension Scheme was £199,982 (2021: £203,009).

## **Auto-enrolment**

All employees meeting certain criteria must be enrolled into a workplace pension if they are not already in a qualifying scheme. The Hospice has chosen the National Employment Savings Trust (“NEST”) to meet its auto-enrolment obligations. The employer contribution payable in the year into NEST was £87,025 (2021: £77,518).

## **Other pension schemes**

The Hospice contributed to one other pension scheme (2021: one). This scheme is a defined contribution pension scheme.

Prior to 31 December 2011 it was a defined benefit scheme, which is now closed to new members and also to future accrual of benefits to existing members. It is not possible to identify the Hospice’s share of the underlying assets and liabilities and as a result the scheme is treated as a defined contribution scheme under FRS102. However, the scheme is in deficit and the Hospice is paying its share of the deficit on an ongoing basis through its employer contributions at a rate set by the scheme and reviewed annually.

The employer contribution payable in the year into the scheme was £9,960 (2021: £8,503).

## **Annuities**

The Hospice is contracted to pay annual sums for life to two former employees based on a sum of £4,499 per annum in 1998 increased by the Hospice annual salary increase (if any). The sum paid in the year under review was £7,746 (2021: £7,520). This liability is met from income in the year in which it is paid. During 2021/22 the Hospice was notified that one of the former employees had died.

A provision of £99,000 is retained to cover future unfunded liabilities. The Trustees consider this provision to be adequate.

### **1.10 Stock**

Stock purchased for sale is valued at the lower of cost and net realisable value. Stock donated for sale in the Hospice’s retail shops is valued at nil.

### **1.11 Operating leases**

The Hospice has entered into various operating leases, the future financial commitment to which is set out in Note 18. Rentals payable under these leases are charged on a straight-line basis over the term of the lease.

### **1.12 Investments**

Listed investments are included in the balance sheet at market value. Realised gains and losses on disposals in the year and unrealised gains and losses on investments at the balance sheet date are included in the Consolidated Statement of Financial Activities. The movement in the valuation of investments during the year is set out in Note 11.

## 2. Retail shops results

|                                             |             | 2022        | 2021        |
|---------------------------------------------|-------------|-------------|-------------|
|                                             |             | £           | £           |
| Turnover*                                   |             | 6,042,851   | 1,544,272   |
| Direct costs                                | (5,407,501) |             |             |
| Support costs                               | (299,976)   | (5,707,477) | (4,698,979) |
| Net contribution/(deficit) as per SoFA      |             | 335,374     | (3,154,707) |
| "Other income" related to retail operations |             |             |             |
| Coronavirus Job Retention Scheme            | 34,299      |             |             |
| Coronavirus retail grants                   | 200,963     | 235,262     | 1,729,371   |
|                                             |             | 570,636     | (1,425,336) |

\*Turnover includes £1,870,868 (2021: £503,015) of donations and associated Gift Aid of £467,717 (2021: £125,754) from the retail Gift Aid scheme. This scheme involves PAH Trading Limited selling goods on behalf of supporters ("Agency Sales") in the Hospice's retail shops and the supporters then donating the proceeds of the Agency Sales to the Hospice under Gift Aid.

The retail shops re-opened from 12 April 2021 and there were no further enforced closures due to the pandemic. Retail shop staff were furloughed from 1 – 12 April 2021 and the Hospice was able to recover the majority of their salary costs through the CJRS. A total of £34,299 (2021: £1,197,431) was recovered. This is shown under "other income" in the Statement of Financial Activities (SoFA) on page 29. The Hospice has also been able to access retail re-start grants of £200,963 (2021: £531,940). Although the grants are directly related to the retail shops the income is treated as a Government grant and is shown under "other income" in the SoFA.

### 3. Trading subsidiaries

The Hospice has two wholly-owned subsidiaries which are incorporated in the UK for the purposes of generating income for the Hospice's charitable purposes. The whole of their taxable profit is donated to the Hospice under a Deed of Covenant within nine months of the year end. The specific activity of each of the trading subsidiaries is:

PAH Trading Limited (1925762) – sells new and promotional goods, as well as receiving commission on Agency Sales, provides catering services for the benefit of the Hospice and external users and undertakes other sundry trading activities.

Agency sales and sales of new goods resumed when the shops re-opened in April 2021. Catering services for visitors were only re-introduced once all of the Covid-19 restrictions were lifted. The business has shown a good recovery although profits are not yet at pre-pandemic levels.

PAH Lottery Limited (3347939) – operates lotteries. The lottery was less impacted by the pandemic but ticket sales through the shops did not recommence until September 2021. There continued to be a small decline in regular subscribers and plans are in place to address this in 2022/23.

|                                                          | PAH         | PAH         | Total     | Total     |
|----------------------------------------------------------|-------------|-------------|-----------|-----------|
|                                                          | Trading Ltd | Lottery Ltd | 2022      | 2021      |
| Profit and loss accounts                                 | £           | £           | £         | £         |
| Turnover                                                 | 184,108     | 481,250     | 665,358   | 595,067   |
| Income                                                   | 184,108     | 481,250     | 665,358   | 595,067   |
| Cost of sales                                            | (100,563)   | (104,520)   | (205,083) | (170,232) |
| Direct overheads                                         | -           | (33,669)    | (33,669)  | (42,384)  |
| Administrative expenses                                  | (9,344)     | (45,414)    | (54,758)  | (38,105)  |
| Expenses                                                 | (109,907)   | (183,603)   | (293,510) | (250,721) |
| Net profit                                               | 74,201      | 297,647     | 371,848   | 344,346   |
| Amount covenanted to the Hospice                         | (74,201)    | (297,647)   | (371,848) | (344,346) |
| Retained in subsidiary                                   | -           | -           | -         | -         |
| Previous year net profit (all covenanted to the Hospice) | 29,363      | 314,983     | 344,346   | -         |
| <b>Shareholder's funds</b>                               |             |             |           |           |
| Share capital (issued)                                   | 100         | 1,000       | 1,100     | 1,100     |

#### 4. Total expenditure

|                                              | Direct<br>Costs               | Support<br>costs<br>(See note 1.6) | Total<br>2022 | Total<br>2021         |
|----------------------------------------------|-------------------------------|------------------------------------|---------------|-----------------------|
|                                              | £                             | £                                  | £             | £                     |
| In-patient care                              | 2,956,286                     | 1,804,821                          | 4,761,107     | 5,011,016             |
| Princess Alice at home                       | 2,999,996                     | 828,147                            | 3,828,143     | 3,698,611             |
| Community engagement and support             | 481,158                       | 163,883                            | 645,041       | 569,383               |
| Education                                    | 475,330                       | 325,726                            | 801,056       | 776,909               |
| Raising donations and legacies               | 557,135                       | 409,565                            | 966,700       | 930,301               |
| Fundraising events                           | 139,326                       | -                                  | 139,326       | 131,327               |
| Retail shops                                 | 5,407,501                     | 299,976                            | 5,707,477     | 4,698,979             |
|                                              | 13,016,732                    | 3,832,118                          | 16,848,850    | 15,816,526            |
| Trading subsidiaries                         | 281,639                       | -                                  | 281,639       | 246,129               |
|                                              | 13,298,371                    | 3,832,118                          | 17,130,489    | 16,062,655            |
| <b>Analysis of support costs:</b>            | <b>Basis of apportionment</b> | <b>Group<br/>2022</b>              |               | <b>Group<br/>2021</b> |
|                                              |                               | £                                  |               | £                     |
| Governance                                   | Time spent                    | 30,033                             |               | 34,465                |
| Housekeeping                                 | Time spent                    | 541,351                            |               | 526,368               |
| Catering                                     | Resource allocated            | 281,572                            |               | 260,011               |
| Facilities and health & safety               | Resource allocated            | 394,767                            |               | 441,833               |
| People services                              | Head count                    | 265,670                            |               | 209,749               |
| Volunteering                                 | Resource allocated            | 103,800                            |               | 98,345                |
| Information technology                       | Time spent                    | 418,260                            |               | 301,663               |
| Marketing and communication                  | Resource allocated            | 314,971                            |               | 318,574               |
| Digital and data                             | Time spent                    | 187,526                            |               | 273,629               |
| Executive, finance and administration        | Time spent                    | 696,067                            |               | 699,569               |
| Amortisation/depreciation (excluding retail) | Resource allocated            | 598,101                            |               | 602,265               |
|                                              |                               | 3,832,118                          |               | 3,766,471             |
|                                              |                               | <b>Group<br/>2022</b>              |               | <b>Group<br/>2021</b> |
| <b>The above figures include:</b>            |                               | £                                  |               | £                     |
| Auditor's remuneration - statutory audit     |                               | 20,503                             |               | 17,220                |
| - other services                             |                               | 4,370                              |               | 4,350                 |
| Operating lease rentals:                     |                               |                                    |               |                       |
| For charitable activities:                   |                               |                                    |               |                       |
| Equipment                                    |                               | 25,312                             |               | 31,350                |
| For generating funds:                        |                               |                                    |               |                       |
| Leasehold retail shops                       |                               | 1,561,717                          |               | 1,441,120             |
| Amortisation/depreciation of owned assets    |                               | 725,253                            |               | 691,141               |

## 5. Designated funds

|                                       | Group and Hospice |             |           |            |
|---------------------------------------|-------------------|-------------|-----------|------------|
|                                       | Balance           |             | Net       | Balance    |
|                                       | 2021              | Expenditure | Transfers | 2022       |
|                                       | £                 | £           | £         | £          |
| Fixed Asset Equalisation Fund         | 6,312,932         | -           | (420,874) | 5,892,058  |
| Running Costs Reserve                 | 10,644,000        | -           | 300,000   | 10,944,000 |
| Strategic Development Reserve         | 1,400,000         | -           | -         | 1,400,000  |
| Sustainable Building Development Fund | -                 | -           | 500,000   | 500,000    |
| Staff wellbeing fund                  | 34,298            | (7,261)     | -         | 27,037     |
|                                       | 18,391,230        | (7,261)     | 379,126   | 18,763,095 |

The Fixed Asset Equalisation Fund represents the net book value of tangible and intangible fixed assets. This assists in identifying funds which are not free for the Trustees to use. The transfer of £429,504 out to (2021: £504,643 out to) unrestricted funds represents the difference between net capital expenditure and depreciation.

The Running Costs Reserve is intended to provide adequate reserves to meet future charitable expenditure in the event of a significant short-term drop in income. The Trustees are targeting a level of 9 months +/- 3 months budgeted charitable expenditure. A transfer of £300,000 (2021: £2,796,000) has been made in from unrestricted funds. The balance on this fund is 12 months (2021:12) of the Hospice's budgeted cash expenditure on charitable activities for 2022/23.

The Strategic Development Reserve has been established to support the delivery of the Hospice's strategic objectives. There has been no transfer into the reserve from unrestricted funds in the year (2021: £983,442). No expenditure was incurred in the year (2021: £Nil). The Hospice's new strategy was launched in April 2022 and the Trustees have agreed a number of strategic change projects starting from April funded from this reserve. The reserve is expected to be fully expended over the next three years and expenditure of up to £600,000 has been agreed for 2022/23.

The Sustainable Building Development Fund has been established to cover the cost of bringing the older part of the Hospice building, which is now 16 years old, up to modern standards of energy efficiency and to make it fit for purpose for new ways of working. It will also fund sustainable building development initiatives, as they are identified, to meet our sustainability goals. A transfer of £500,000 has been made in from unrestricted funds (2021: nil).

The Staff Wellbeing Fund has been established to fund initiatives to improve workforce wellbeing and engagement. Expenditure of £7,261 (2021: £Nil) was incurred during the year on providing an Employee Assistance Programme through BUPA, delivering a Wellbeing Week and a staff summer party.



## 6. Restricted funds

|                            | Group and Hospice |           |             |           |         |
|----------------------------|-------------------|-----------|-------------|-----------|---------|
|                            | Balance           | Income    | Expenditure | Transfers | Balance |
|                            | 2021              |           |             |           | 2022    |
|                            | £                 | £         | £           | £         | £       |
| Ward equipment fund        | 20,631            | 3,520     | (161)       | (10,818)  | 13,172  |
| Children in Need project   | -                 | 9,670     | (9,670)     | -         | -       |
| Community Choir            | 1,500             | -         | (1,500)     | -         | -       |
| Bereavement Service        | 3,262             | 21,200    | (21,151)    | -         | 3,311   |
| Wellbeing                  | 664               | 3,750     | (33)        | -         | 4,381   |
| Rapid response nurse       | -                 | 50,000    | (50,000)    | -         | -       |
| Enhanced support service   | 5,769             | 48,771    | (23,523)    | -         | 31,017  |
| Hospice at Home            | 26,904            | -         | (26,904)    | -         | -       |
| Compassionate neighbours   | 4,549             | 10,000    | (10,000)    | -         | 4,549   |
| Man Shed                   | 5,155             | 10,000    | (5,804)     | (2,083)   | 7,268   |
| Covid visitor coordinator  | 7,366             | -         | (4,794)     | -         | 2,572   |
| NHS England - patient care | -                 | 2,049,130 | (2,049,130) | -         | -       |
| In-patient unit general    | -                 | 50,000    | (50,000)    | -         | -       |
| In-patient unit refresh    | -                 | 40,300    | -           | (40,300)  | -       |
| Garden                     | -                 | 15,100    | (3,346)     | -         | 11,754  |
| Other Funds                | 2,269             | 50        | (479)       | -         | 1,840   |
|                            | 78,069            | 2,311,491 | (2,256,495) | (53,201)  | 79,864  |

The policy of the Trustees is to treat donations given for specific purposes as Restricted Funds until properly expended. The funds shown are those which were directed by donors to be used for specific purposes and are unexpended at 31 March 2022. These funds will be used in accordance with the directions of the donors in a subsequent accounting period.

## 7. Endowment funds

|                                       | Group and Hospice |                       |             |         |
|---------------------------------------|-------------------|-----------------------|-------------|---------|
|                                       | Balance           | Movement in resources |             | Balance |
|                                       | 2021              | Income                | Expenditure | 2022    |
|                                       | £                 | £                     | £           | £       |
| The Edwin Stevens fund                | 40,000            | 40                    | (40)        | 40,000  |
| The D.J. Squires "Love of Roses" fund | 20,000            | 20                    | (20)        | 20,000  |
| The June Daphne Allen fund            | 845,041           | 845                   | (845)       | 845,041 |
|                                       | 905,041           | 905                   | (905)       | 905,041 |

The Edwin Stevens fund relates to a permanent capital contribution received on establishment of the Hospice. The D.J. Squires Love of Roses fund was established in 1996, the income from which is to be used for the research and advance of palliative care. The June Daphne Allen fund was created by the conditions of a legacy received in July 2001, the income from which is to be used for the general purposes of the Hospice. All income arising from these funds was expended during the year.

## 8. Comparative results for each group of funds

| Year ended 31 March 2021               | Unrestricted funds | Designated funds | Restricted funds | Endowment funds | Total funds 2021  |
|----------------------------------------|--------------------|------------------|------------------|-----------------|-------------------|
|                                        | £                  | £                | £                | £               | £                 |
| <b>Income</b>                          |                    |                  |                  |                 |                   |
| Donations                              | 2,369,906          | -                | 193,934          | -               | 2,563,840         |
| Legacies                               | 2,943,798          | -                | -                | -               | 2,943,798         |
| NHS grants                             | 2,095,908          | -                | -                | -               | 2,095,908         |
| NHS England Covid-19 emergency funding | -                  | -                | 6,276,936        | -               | 6,276,936         |
| NHS Covid-19 local response funding    | -                  | -                | 289,529          | -               | 289,529           |
| NHS service funding                    | 278,519            | -                | -                | -               | 278,519           |
| NHS continuing healthcare funding      | 62,190             | -                | -                | -               | 62,190            |
| Education                              | 132,902            | -                | -                | -               | 132,902           |
| Retail shops                           | 1,544,272          | -                | -                | -               | 1,544,272         |
| Fundraising events                     | 397,182            | -                | -                | -               | 397,182           |
| Trading subsidiaries                   | 595,067            | -                | -                | -               | 595,067           |
| Investments                            | 51,842             | -                | -                | 91              | 51,933            |
| Coronavirus retail grants              | 531,940            | -                | -                | -               | 531,940           |
| Coronavirus job retention scheme       | 1,302,403          | -                | -                | -               | 1,302,403         |
| Other income                           | 10,942             | -                | -                | -               | 10,942            |
| <b>Total income</b>                    | <b>12,316,871</b>  | <b>-</b>         | <b>6,760,399</b> | <b>91</b>       | <b>19,077,361</b> |
| <b>Expenditure</b>                     |                    |                  |                  |                 |                   |
| Raising donations and legacies         | 930,301            | -                | -                | -               | 930,301           |
| Retail shops                           | 4,698,979          | -                | -                | -               | 4,698,979         |
| Fundraising events                     | 131,327            | -                | -                | -               | 131,327           |
| Trading subsidiaries                   | 246,129            | -                | -                | -               | 246,129           |
| In-patient care                        | 1,252,205          | -                | 3,758,722        | 89              | 5,011,016         |
| Hospice at Home                        | 779,667            | -                | 2,918,944        | -               | 3,698,611         |
| Community engagement and support       | 476,710            | -                | 92,673           | -               | 569,383           |
| Education                              | 776,907            | -                | -                | 2               | 776,909           |
| <b>Total expenditure</b>               | <b>9,292,225</b>   | <b>-</b>         | <b>6,770,339</b> | <b>91</b>       | <b>16,062,655</b> |
| Net gain on investments                | 437,365            | -                | -                | -               | 437,365           |
| <b>Net income/(expenditure)</b>        | <b>3,462,011</b>   | <b>-</b>         | <b>(9,940)</b>   | <b>-</b>        | <b>3,452,071</b>  |
| Transfer to designated funds           | (3,274,799)        | 3,274,799        | -                | -               | -                 |
| Transfer from restricted funds         | 2,243              | -                | (2,243)          | -               | -                 |
| <b>Net movement in funds</b>           | <b>189,455</b>     | <b>3,274,799</b> | <b>(12,183)</b>  | <b>-</b>        | <b>3,452,071</b>  |

## 9. Intangible assets

|                       | Total 2022 |
|-----------------------|------------|
| Cost                  | £          |
| At 1 April 2021       | 492,316    |
| Purchases             | 17,019     |
| Disposals             | (9,231)    |
| At 31 March 2022      | 500,104    |
| <b>Amortisation</b>   |            |
| At 1 April 2021       | 381,334    |
| Charge for year       | 56,134     |
| Disposals             | (9,231)    |
| At 31 March 2022      | 428,237    |
| <b>Net book value</b> |            |
| At 31 March 2022      | 71,867     |
| At 31 March 2021      | 110,982    |

## 10. Tangible fixed assets

|                          | Group and Hospice |                    |                     |                                   |            |
|--------------------------|-------------------|--------------------|---------------------|-----------------------------------|------------|
|                          | Freehold land     | Freehold buildings | Leasehold buildings | Furniture, equipment and vehicles | Total 2022 |
| <b>Cost or valuation</b> | £                 | £                  | £                   | £                                 | £          |
| At 1 April 2021          | 71,586            | 12,164,021         | 526,288             | 2,165,737                         | 14,927,632 |
| Purchases                | -                 | 83,536             | 18,505              | 185,319                           | 287,360    |
| Disposals                | -                 | -                  | (67,299)            | (249,504)                         | (316,803)  |
| At 31 March 2022         | 71,586            | 12,247,557         | 477,494             | 2,101,552                         | 14,898,189 |
| <b>Depreciation</b>      |                   |                    |                     |                                   |            |
| At 1 April 2021          | -                 | 6,748,757          | 248,382             | 1,728,543                         | 8,725,682  |
| Charge for year          | -                 | 439,031            | 90,770              | 139,318                           | 669,119    |
| Disposals                | -                 | -                  | (67,299)            | (249,504)                         | (316,803)  |
| At 31 March 2022         | -                 | 7,187,788          | 271,853             | 1,618,357                         | 9,077,998  |
| <b>Net book value</b>    |                   |                    |                     |                                   |            |
| At 31 March 2022         | 71,586            | 5,059,769          | 205,641             | 483,195                           | 5,820,191  |
| At 31 March 2021         | 71,586            | 5,415,264          | 277,906             | 437,194                           | 6,201,950  |

## 11. Investments

|                                                                                   | 2022        | 2021        |
|-----------------------------------------------------------------------------------|-------------|-------------|
|                                                                                   | £           | £           |
| <b>Marketable investments</b>                                                     |             |             |
| Market value at start of year                                                     | 3,007,844   | 2,536,839   |
| Net additions at cost                                                             | 441,108     | 1,146,356   |
| Disposals at market value                                                         | (409,999)   | (1,112,716) |
| Net (loss)/gain on revaluation/disposal                                           | 164,758     | 437,365     |
| Market value at 31 March                                                          | 3,203,711   | 3,007,844   |
| <b>Trading subsidiaries (see Note 3)</b>                                          | 1,100       | 1,100       |
| <b>Total investments</b>                                                          | 3,204,811   | 3,008,944   |
| Cost at 31 March                                                                  | 2,562,875   | 2,494,557   |
|                                                                                   |             |             |
|                                                                                   | <b>2022</b> | <b>2021</b> |
|                                                                                   | £           | £           |
| Marketable investments comprise:                                                  |             |             |
| Equities                                                                          | 1,610,606   | 1,536,927   |
| Fixed Income                                                                      | 498,064     | 476,230     |
| Other securities (absolute return funds, multi-asset funds, property funds, etc.) | 955,449     | 794,708     |
| Short term deposits and cash                                                      | 139,592     | 199,979     |
|                                                                                   | 3,203,711   | 3,007,844   |

## 12. Stock

|                                                                               | Group  |        |
|-------------------------------------------------------------------------------|--------|--------|
|                                                                               | 2022   | 2021   |
|                                                                               | £      | £      |
| Stock of promotional and new goods (all stock is held by PAH Trading Limited) | 16,732 | 28,594 |

### 13. Debtors

|                                  | Group     |           | Hospice   |           |
|----------------------------------|-----------|-----------|-----------|-----------|
|                                  | 2022      | 2021      | 2022      | 2021      |
|                                  | £         | £         | £         | £         |
| Operating debtors                | 404,647   | 234,119   | 414,564   | 234,119   |
| Accrued legacy income            | 2,926,436 | 2,472,085 | 2,926,436 | 2,472,085 |
| Gift Aid recoverable             | 437,695   | 76,370    | 437,695   | 76,370    |
| NHS England Covid-19 funding     | 1,682,811 | 1,184,223 | 1,682,811 | 1,184,223 |
| Retail rents prepaid             | 388,585   | 404,230   | 388,585   | 404,230   |
| Insurance pre-paid               | 114,740   | -         | 114,740   | -         |
| Coronavirus Retail Grants        | -         | 84,143    | -         | 84,143    |
| Coronavirus Job Retention Scheme | -         | 160,495   | -         | 160,495   |
| Other debtors and prepayments    | 363,184   | 187,325   | 359,869   | 173,896   |
| Amounts due from subsidiaries    | -         | -         | 249,028   | 228,693   |
|                                  | 6,318,098 | 4,802,990 | 6,573,728 | 5,018,254 |

### 14. Creditors

|                                    | Group     |         | Hospice   |         |
|------------------------------------|-----------|---------|-----------|---------|
|                                    | 2022      | 2021    | 2022      | 2021    |
|                                    | £         | £       | £         | £       |
| Taxation and social security costs | 235,604   | 223,834 | 235,604   | 223,834 |
| Salaries and holiday pay           | 56,268    | 94,481  | 56,268    | 94,481  |
| Operating creditors                | 377,053   | 186,880 | 372,253   | 185,869 |
| NHS grants paid in advance         | 171,123   | -       | 171,123   | -       |
| Other creditors and accruals       | 549,467   | 395,618 | 445,637   | 293,825 |
|                                    | 1,389,515 | 900,813 | 1,280,885 | 798,009 |

### 15. Staff remuneration

|                                   | Group      |            |
|-----------------------------------|------------|------------|
|                                   | 2022       | 2021       |
| Costs                             | £          | £          |
| Salaries                          | 10,599,134 | 10,289,040 |
| Employer's National Insurance     | 937,950    | 902,067    |
| Pension costs                     | 623,568    | 632,316    |
| Apprenticeship Levy               | 37,778     | 36,415     |
| Agency staff                      | 94,801     | 50,244     |
| Recruitment and training expenses | 114,162    | 90,877     |
| Subsidiary companies staff costs  | 33,669     | 42,384     |
|                                   | 12,441,062 | 12,043,343 |

|                                    | Group     |     |           |     |
|------------------------------------|-----------|-----|-----------|-----|
|                                    | 2022      |     | 2021      |     |
|                                    | Headcount | FTE | Headcount | FTE |
| <b>Average number of employees</b> |           |     |           |     |
| In-patient unit                    | 62        | 48  | 60        | 49  |
| Hospice at home                    | 63        | 46  | 62        | 47  |
| Community engagement and support   | 10        | 8   | 12        | 10  |
| Consultants and doctors            | 9         | 6   | 10        | 7   |
| Clinical administration            | 16        | 11  | 15        | 11  |
| Therapies                          | 3         | 1   | 5         | 2   |
| Housekeeping                       | 20        | 15  | 18        | 14  |
| Other support services             | 31        | 23  | 26        | 21  |
| Education                          | 11        | 8   | 10        | 7   |
| Marketing and communication        | 8         | 6   | 9         | 6   |
| Fundraising                        | 15        | 13  | 14        | 12  |
| Digital and technology             | 6         | 5   | 7         | 6   |
| Retail                             | 153       | 109 | 171       | 118 |
| Executive and finance              | 9         | 7   | 9         | 7   |
|                                    | 416       | 306 | 428       | 317 |

|                                                                                                                     | Group |      |
|---------------------------------------------------------------------------------------------------------------------|-------|------|
|                                                                                                                     | 2022  | 2021 |
|                                                                                                                     | No.   | No.  |
| The number of employees whose earnings (excluding employer's pension contributions) fell into the bands below were: |       |      |
| £60,000 to £69,999                                                                                                  | 4     | 2    |
| £70,000 to £79,999                                                                                                  | 3     | 1    |
| £80,000 to £89,999                                                                                                  | 3     | 4    |
| £90,000 to £99,999                                                                                                  | *1    | -    |
| £100,000 to £109,999                                                                                                | 1     | *1   |
| £130,000 to £139,999                                                                                                | -     | 1    |

\*The pay of the Chief Executive falls within this band.

Included in the number above are medical consultants, doctors and other senior clinical staff directly employed by the Hospice who are paid at a rate equivalent to the relevant NHS scale.

The key management personnel of the Hospice are the Trustees and the Senior Leadership Team ("SLT"). The SLT comprises the Chief Executive, Medical Director, Director of Patient Care and Strategic Development, Director of Digital, Communication, Marketing and Performance, Director of Income Generation, Director of Finance and Operations, Director of People Services and Organisational Development. They are subject to the same terms and conditions as other members of staff and do not receive any additional employee benefits. They are only reimbursed for expenses wholly and necessarily incurred for business purposes in accordance with Hospice policy. The total employee benefit (salary and employer's pension contribution) received by the SLT was £629,355 (2021: £630,382)

The Trustees are the directors for the purposes of the Companies Act 2006 and, as required by the Articles of Association, are the members of Princess Alice Hospice, a Company limited by Guarantee. They receive no remuneration. During the year to 31 March 2022 they were reimbursed for expenses of £292 (2021: nil).

An aggregate payment of £37,658 (2021: £55,751) was made to 6 ex-employees (2021: 4) under a settlement agreement. An aggregate payment of £7,849 (2021: £9,498) was made to 6 (2021: 3) employees on redundancy in respect of statutory redundancy pay.

## 16. Related Party Transactions

During the year ended 31 March 2022, the aggregate amount of donations received from Trustees and their close family members, the SLT and their spouse/partner was £7,981 (2021: £4,126).

The Trustees volunteer their time to fulfil their governance and leadership role. They provide support and advice to the SLT, which took the form of increased communication during the rapid fluctuations of the pandemic when staff and patient safety was paramount. They have continued to attend internal and external meetings, Hospice events and external events, in person where possible but otherwise virtually during the year. The Trustees estimate that during the year they donated over 2,000 hours of time in aggregate.

Gail Cookson, Trustee, is an International Director of WPNC a company providing direct marketing services. During the reporting period WPNC did not provide any services to the Hospice (2021: £28,430). There was no balance outstanding at 31 March 2022 (2021: £Nil).

During the year to 31 March 2022 the Hospice invoiced PAH Trading Limited for £7,876 (2021: £2,431) for the use of retail shop facilities to sell goods on behalf of supporters (Agency Sales) and £3,995 (2021: £2,161) for the preparation of sandwiches to sell in the coffee shop.

## 17. Analysis of net assets between funds (Group)

|                     | Unrestricted funds | Designated funds | Restricted funds | Endowment funds | Total 2022  | Total 2021 |
|---------------------|--------------------|------------------|------------------|-----------------|-------------|------------|
|                     | £                  | £                | £                | £               | £           | £          |
| Fixed assets        | -                  | 5,892,058        | -                | -               | 5,892,058   | 6,312,932  |
| Investments         | -                  | 2,298,670        | -                | 905,041         | 3,203,711   | 3,007,844  |
| Current assets      | 2,918,860          | 10,572,367       | 79,864           | -               | 13,571,091  | 11,375,780 |
| Current liabilities | (1,389,515)        | -                | -                | -               | (1,389,515) | (900,813)  |
| Annuity provision   | (99,000)           | -                | -                | -               | (99,000)    | (99,000)   |
|                     | 1,430,345          | 18,763,095       | 79,864           | 905,041         | 21,178,345  | 19,696,743 |

## 18. Other financial commitments

|                                                                                                                   | Retail Shops |           | Equipment |        |
|-------------------------------------------------------------------------------------------------------------------|--------------|-----------|-----------|--------|
|                                                                                                                   | 2022         | 2021      | 2022      | 2021   |
| At 31 March 2022 the Group was committed to making the following payments under non-cancellable operating leases: |              |           |           |        |
|                                                                                                                   | £            | £         | £         | £      |
| <b>Operating leases which expire:</b>                                                                             |              |           |           |        |
| Within 1 year                                                                                                     | 1,070,088    | 1,369,671 | 1,990     | 30,623 |
| Within 2 to 5 years                                                                                               | 2,231,398    | 2,700,167 | 22,924    | -      |
| After 5 years                                                                                                     | 829,950      | 1,042,935 | -         | -      |
|                                                                                                                   | 4,131,436    | 5,112,773 | 24,914    | 30,623 |

## 19. Simplified income and expenditure statement

|                                                   | Notes | Group       |                     | Group       |             |                     |             |
|---------------------------------------------------|-------|-------------|---------------------|-------------|-------------|---------------------|-------------|
|                                                   |       | 2022        | 2022                | 2021        | 2021        |                     |             |
| Income                                            |       | £           | £                   | £           | £           |                     |             |
| NHS grants                                        | 1.4   |             | 2,106,148           | 19%         | 2,095,908   | 16%                 |             |
| Voluntary income                                  |       |             |                     |             |             |                     |             |
| Legacies                                          | 1.4   |             | 3,840,693           | 34%         | 2,943,798   | 23%                 |             |
| Donations                                         | 1.4   | 2,311,295   |                     |             | 2,563,840   |                     |             |
| Cost of generating voluntary income               | 4     | (966,700)   |                     |             | (930,301)   |                     |             |
|                                                   |       |             | 1,344,595           | 12%         |             | 1,633,539           | 12%         |
| Fundraising events                                | 1.4   | 449,611     |                     |             | 397,182     |                     |             |
| Cost of fundraising events                        | 4     | (139,326)   |                     |             | (131,327)   |                     |             |
|                                                   |       |             | 310,285             | 3%          |             | 265,855             | 2%          |
| Trading subsidiaries                              | 3     | 665,358     |                     |             | 595,067     |                     |             |
| Cost of trading subsidiaries                      | 3     | (281,639)   |                     |             | (246,129)   |                     |             |
|                                                   |       |             | 383,719             | 3%          |             | 348,938             | 3%          |
| Retail                                            |       |             |                     |             |             |                     |             |
| Retail income                                     | 2     | 6,042,851   |                     |             | 1,544,272   |                     |             |
| Coronavirus Retail Grants                         |       | 200,963     |                     |             | 531,940     |                     |             |
| Coronavirus Job Retention Scheme                  |       | 34,299      |                     |             | 1,197,431   |                     |             |
| Income attributable to retail                     |       | 6,278,113   |                     |             | 3,273,643   |                     |             |
| Cost of retail                                    | 4     | (5,707,477) |                     |             | (4,698,979) |                     |             |
| Retail contribution                               |       |             | 570,636             | 5%          |             | (1,425,336)         | -11%        |
| NHS England Covid-19 funding                      | 1.4   |             | 2,049,130           | 18%         |             | 6,276,936           | 48%         |
| Investment income                                 | 1.4   |             | 52,731              | 0.6%        |             | 51,933              | 0.4%        |
| NHS service funding                               | 1.4   |             | 322,963             | 3%          |             | 278,519             | 2%          |
| NHS local Covid response funding                  | 1.4   |             | -                   |             |             | 289,529             | 2%          |
| NHS continuing healthcare funding                 | 1.4   |             | 55,183              | 0.5%        |             | 62,190              | 0.5%        |
| Education                                         | 1.4   |             | 240,286             | 2%          |             | 132,902             | 1%          |
| Coronavirus Job Retention Scheme (ex. retail)     | 1.4   |             | 16,768              | 0.1%        |             | 104,972             | 1%          |
| Other                                             | 1.4   |             | 59,054              | 0.5%        |             | 10,942              | 0.1%        |
| <b>Net income</b>                                 |       |             | <b>11,352,191</b>   | <b>100%</b> |             | <b>13,070,625</b>   | <b>100%</b> |
| <b>Expenditure</b>                                |       |             |                     |             |             |                     |             |
| <b>Charitable activities</b>                      |       |             |                     |             |             |                     |             |
| In-patient care                                   | 4     | (4,761,107) |                     | 47%         | (5,011,016) |                     | 50%         |
| Princess Alice at home                            | 4     | (3,828,143) |                     | 38%         | (3,698,611) |                     | 37%         |
| Community engagement and support                  | 4     | (645,041)   |                     | 7%          | (569,383)   |                     | 5%          |
| Education                                         | 4     | (801,056)   |                     | 8%          | (776,909)   |                     | 8%          |
|                                                   |       |             | (10,035,347)        |             |             | (10,055,919)        |             |
| <b>Total expenditure on charitable activities</b> |       |             | <b>(10,035,347)</b> | <b>100%</b> |             | <b>(10,055,919)</b> | <b>100%</b> |
| <b>Operating surplus</b>                          |       |             | <b>1,316,844</b>    |             |             | <b>3,014,706</b>    |             |

# WHO'S WHO

## Trustees

### **Professor Sean Hilton**

**Chair** (from September 2021)

Sean is Emeritus Professor at St George's, University of London. He was a GP partner for 30 years in Kingston upon Thames.

### **Jeannine Nolan**

**Vice-Chair** (from September 2021)

Jeannine has over 30 years' experience in the healthcare communications sector, working with leading pharmaceutical companies and global agencies.

### **Despina Don-Wauchope**

**Honorary Treasurer**

Despina is a Chartered Management Accountant and has more than 30 years' experience working for a number of FTSE100 companies.

### **Deborah Bowman MBE**

Deborah is an Emeritus Professor of Medical Ethics and Law and a Clinical Ethicist who has combined a successful academic career with effective and values-based senior leadership in Higher Education.

### **Gail Cookson**

With over 30 years' experience in fundraising, Gail has been a director of WPNC for 18 years.

### **Monica Harding**

Monica has worked as a CEO, Director and consultant in the UK and internationally across government, charity and business sectors.

### **Tim Hewens**

Tim is a solicitor and a partner at Osborne Clarke LLP where he specialises in M&A and Private Equity. He was previously a trustee of Walton Charity and of the RG Foundation.

### **Andrew Jennings**

Andrew is retired following a career as a Chartered Accountant in the City where he spent over 30 years in International Law management.

### **Heather Patel**

Heather is a recently retired GP with 35 years' experience. Her practice was in Claygate where she worked closely with the Princess Alice Hospice on behalf of her patients.

### **Karen Roberts**

Karen has over 30 years' experience of managing Human Resources in global companies, specialising in talent management and workforce planning.

### **Christopher Roshier** (to September 2021)

Christopher is a retired chartered accountant with 20 years' experience working in the City as a merchant/investment banker.

### **Fiona Ross CBE** (to September 2021)

Fiona is Emeritus Professor and former Dean at Kingston University and St George's, University of London; she is also a Governor of Westminster University.



**Jamie Tolentino-Deludet**

Jamie has extensive experience in digital marketing and innovation. She helps the traditional industry of financial services become digitally enabled.

**Sean Watson**

Sean is a Solicitor and formerly a Corporate Finance partner in International Law Firm CMS Cameron McKenna and a Non-Executive Director of 2 Listed FTSE companies. He is a founding Trustee of Dovedale Foundation, a family charitable foundation.

**Darren Webb**

Darren has nearly 20 years' experience in Financial Markets working for a number of international businesses. He currently works for the Bank of Montreal in London.

**Dr Peter West**

Peter is a health economist with over 40 years' experience working for consulting groups, universities and government agencies across the world.

**Honorary President****Jane Formby MBE**

Jane has been involved with the Hospice for over 30 years, first as a volunteer then as a founding Trustee. Jane stepped down as a Trustee in 2018 and took up the role of Honorary President.

**Committee Advisory Members**

**Rob Aldous**, Director of Kingston Hospital Charity – Income Generation Committee

**Duncan Burton**, Deputy Chief Nursing Officer for England - Clinical Strategy and Governance Committee

**Jon Cunliffe**, Chief Investment Officer, Charles Stanley – Audit and Risk Committee

**Karen Frend**, Deputy Head of Central Governance at the Cabinet Office – Audit and Risk Committee

**Ros Irving**, Member of Group Management Board, Euromoney Institutional Investor PLC – People and Communities Committee

**Esther Kitto**, Director of Clinical Operations (clinical drug development) – People and Communities Committee

**Louise Mitchell**, Regional Brand Manager COS – Income Generation Committee

**Tim Moody**, Head of Property, British Heart Foundation – Income Generation Committee

**Maxine Obeng**, Assistant Director East London NHS Foundation Trust and founder of Niche Careers Consultancy – People and Communities Committee

**Monday Ugiagbe**, Senior Lecturer in Nursing, Middlesex University – Clinical Strategy and Governance Committee

**Representatives of the Friends of Princess Alice Hospice**

**Veronica Eagles** – People and Communities Committee

**Mary Houghton** – People and Communities Committee

## **Senior Leadership Team**

Nicki Shaw  
Chief Executive

Karen Garforth  
Director of People Services and Organisational Development

Angela Grimes  
Director of Income Generation

Lesley Munro  
Director of Patient Care, Community Engagement and Support (from May 2021)

Diane Rickwood  
Director of Finance and Operations and Company Secretary

Nigel Seymour  
Deputy Chief Executive, Director of Digital, Marketing, Communications and Performance

Lesley Spencer  
Director of Patient Care and Strategic Development (to May 2021)

Jennifer Todd  
Medical Director

## **Advisors**

**Cazenove Capital Management**, 1 London Wall Place, London EC2Y 5AU

**Mazars LLP**, 6 Sutton Plaza, Sutton Court Road, Sutton, Surrey, SM1 4FS

**Barclays Corporate**, Ground Floor, Tagus House, Ocean Way, Southampton, SO14 3TJ

# Special thanks to .....

## Trusts

The Albert Hunt Trust  
The Ann Jane Green Trust  
The Anonymous Donor Trust  
The Basil Samuel Charitable Trust  
BBC Children in Need  
The Bookhams, Fetcham & Effingham Nursing Association  
The Brock Webb Trust  
The Catherine Lewis Foundation  
Charles Hayward Foundation  
Community Foundation for Surrey  
D'Oyly Carte Charitable Trust  
The Dandy Charitable Trust  
Dentons UKMEA LLP Charitable Trust  
The Diana Edgson Wright Charitable Trust  
Diocese of Arundel and Brighton  
Edwin George Robinson Charitable Trust  
The Elizabeth Frankland Moore & Star Foundation  
Emily Huffer Settlement  
The Erica Leonard Trust  
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Garfield Weston Foundation  
The Gerald Bentall Charitable Trust  
The Girdlers Company  
Grace Trust  
Hampton Fund  
Hargrave Foundation for A Brighter Future  
Holloway Charitable Trust  
The Hospital Saturday Fund Charitable Trust  
The Ingram Trust  
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The James Wise Charitable Trust  
The Joseph Strong Frazer Trust  
Kingston Nursing Association  
London Aged Christian Society  
Loseley & Guildway Charitable Trust  
The Margaret and David Walker Trust  
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Masonic Charitable Foundation  
The Michael & Anna Wix Charitable Trust  
The National Lottery Community Fund  
Quartet Community Foundation

Ratcliffe Charitable Trust  
Rest-Harrow Trust  
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The Rowan Bentall Charitable Trust  
The Rozel Trust  
The Shirley & Ian Watson Charitable Trust  
The Souter Charitable Trust  
SSP Foundation  
Surrey Provincial Charity Fund  
The Three `T' Charity  
The Vernon N Ely Charitable Trust  
Wimbledon Foundation

## **Masons**

Addlestone Lodge 5222  
Clerkenwell Lodge of Installed  
Crescent Lodge No. 788  
Elmbridge Lodge L5838  
Hampton Lodge No 6435  
Lodge Light From The East  
Lovekyn Chantry Lodge No 6807  
Molesey Lodge Chapter 2473  
OSM Masonic Group of Surrey  
RAOB New Venture  
St Georges Esher Lodge  
Surbiton Lodge No 2146  
Surrey Provincial Grand Stewards' Chapter No. 8297

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TAR | SEPTEMBER 2022

