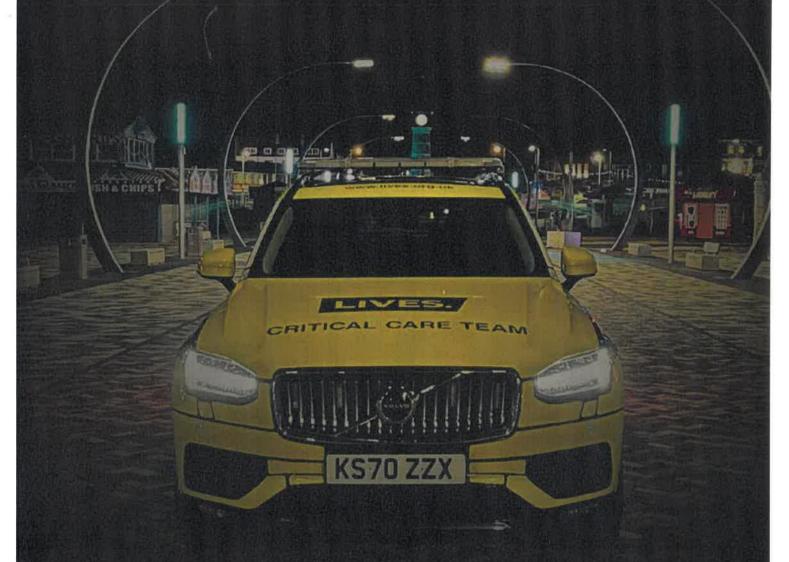
LIVES.



## **ANNUAL REPORT**

2021/22

Lincolnshire Integrated **Voluntary Emergency Service** 



f LIVESHeadQuarters ( @livesHQ



LIVES.ORG.UK

Registered company number 04680981



# WEARE LIVES

We exist to provide emergency care in critical situations. To reach people in need and protect life. It's our reason for being. It's that simple.

As a registered charity, our work is only made possible thanks to the kindness of our supporters and the dedication of our team of very special volunteers, who come from all corners of clinical care.



## LIVES. IN NUMBERS

1 APRIL 2021 - 31 MARCH 2022

84.3%

OF THE TIME,

LIVES WERE

FIRST ON SCENE

PATIENTS
WITH BREATHING
DIFFICULTIES

CARDIAC ARRESTS
ATTENDED

PATIENTS
WHO HAD
FALLEN

ROAD TRAFFIC COLLISIONS



VOLUNTEERS GAVE

67,177 HOURS

OF THEIR TIME

MEDIC RESPONSE JOBS 542

**642**CRIT CARE JOBS



852 BUSIEST MONTH - MAY



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## WELCOME FROM **OUR CHAIR & CEO**

#### Welcome to our Annual Review 2021-22.

We are pleased to share with you our annual report and accounts for the 2021/22 year. As we have emerged from the global pandemic and many usual activities have resumed, it has been a year of both excitement and challenges.

We have been pleased to welcome many new volunteers to the organisation, and to welcome back those responders who chose not to actively volunteer during the pandemic. We continue with our plans to recruit 100 new responder volunteers each year and ensure that they are well supported with education, mentorship and peer support through their district teams. We end the year with a waiting list of dedicated, community-minded individuals waiting to join our team.

Throughout the year we have continued with our strategic objective to grow the impact that the charity makes. We have launched Medic 50, our critical care car that serves the communities of the Lincolnshire coast. Our Critical Care Team come with the medical experience to perform an array of potentially life-saving procedures. They're ready to deliver highly specialised critical care in a heartbeat, which for some, really could mean the difference between life and death.

We have also seen the growth of our Community Emergency Medicine services, with the appointment of co-Clinical Directors to provide clinical leadership to this team in 2022. Both teams are equipped, empowered and ready to alleviate the pressure on the NHS with a unique blend of skills and decision-making abilities. Right now, services such as this are more important than ever.



We remain proud and thankful for every one of our volunteers and employees without whom we could not deliver a life-saving emergency response across Lincolnshire.

We are also immensely thankful to our supporters. Whether you've taken part in a virtual challenge, given a one-off donation or a regular payment, your support has been vital. We are proud to say that every penny received has allowed us to continue with our life-saving work.

This year has, most excitingly, seen us move closer to our plan to develop a purpose-built education and training facility for pre-hospital emergency medicine. We have identified a site and intend to submit planning permission for this leading facility in late 2022. Project Lifesaver will deliver an education facility without classrooms that will train LIVES responders, people working in healthcare and the wider community to respond to medical emergencies through a unique, state of the art, immersive learning experience.

As we reflect upon the last year, we would like to take the opportunity to express our heartfelt thanks to everyone who continues to support us, and those who volunteer for LIVES. Without you, we wouldn't be able to help patients and their families within our local communities, during a time when they need it most. It takes a team to save a life. Thank you.

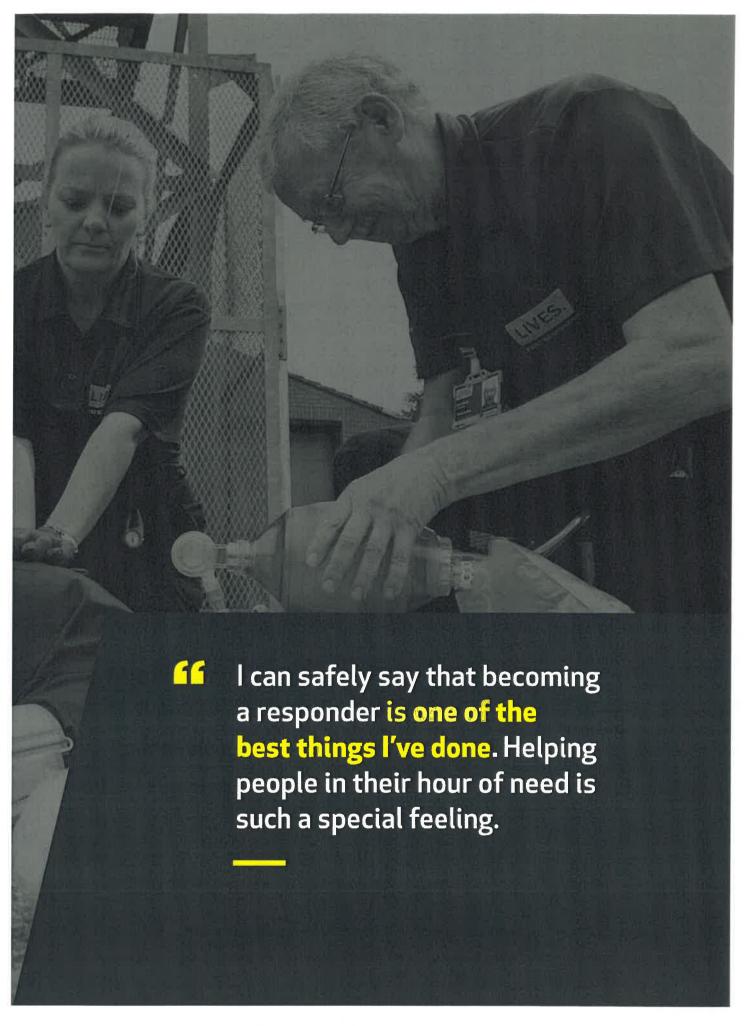
Thomasin Nicholds, Chair

Nikki Cooke, CEO

# PURPOSE & CULTURE

In a minute, your life or the life of someone you love can change dramatically. A fall, a car accident, your breathing can change, your heart could stop.





## STATEMENT OF PUBLIC BENEFIT.

## Charities are required to demonstrate how they provide a benefit to the public.

LIVES delivers benefit to the public in the relief of injury or illness by facilitating and delivering rapid response and treatment of those suffering a medical emergency or traumatic injury. This benefit is available to any member of the public in Lincolnshire and areas nearby whether they are residents or visitors, and access to the service is based solely on patient need.

The Trustees have complied with their duty in accordance with the Charities Act and the Charity Commission's guidance on public benefit in exercising their powers and duties to consider it in all aspects of the company's activities.



## WHAT MAKES US WHO WE ARE?

Many of our team actively shy away from the limelight and do not seek praise or thanks for the actions that they undertake. We do what we do because it takes a team to save a life. We're united by a passion for protecting life and improving patient outcomes. That's who we are. That's our culture.

From a volunteer responding quickly and competently to an emergency in their community, to our team who teach a child in school how to make a 999 call, there is no organisation in the United Kingdom that delivers an emergency response that equals the broad scope of practice that we do.

We are recognised as being a leader in prehospital emergency medicine and in the emerging world of community emergency medicine. That's something we quietly take pride in.

Quality is embedded in everything we do - training and equipping people with both the skills to make a difference and the confidence to use them.

Our governance systems are robust and allow us to evaluate and evidence the high standards that we set for ourselves and to put things right quickly where change is needed.





## OUR VISION.

Our vision is that no person should suffer unnecessarily as a result of their illness. injury or their rural location.

Our mission is to provide equality and excellence of care to any person who suffers a medical or traumatic emergency within Lincolnshire.

## JUST CULTURE.

LIVES is committed to fostering a Just Culture within the organisation. A Just Culture considers wider systemic issues where things go wrong, enabling professionals and those operating the system to learn without fear of retribution.

Generally, in a Just Culture inadvertent human error, freely admitted is not normally subject to sanction to encourage reporting of safety issues. In a Just Culture, investigators principally attempt to understand why failings occurred and how the system led to sub-optimal behaviours. However, a Just Culture also holds people appropriately to account where there is evidence of gross negligence or deliberate acts.

## **OUR VALUES:** WHAT MATTERS TO US MOST?



#### INTEGRITY

Our strength comes from working together and upholding shared values. We do the right thing, even when it's difficult.



#### COMMUNITY

This is where we're from, we're in this together. We're all united around a common purpose; to support the communities in which we all live.



#### **EXCELLENCE**

We strive to be the best we can in everything we do and to give all of our people an equal opportunity to grow and flourish.

## OUR STRATEGY

#### It takes a team to save a life

And every member of that team is vital to delivering the very best outcomes for the patient. That could be the bystander who witnesses a member of the public collapse in the street and calls for help, or an ambulance crew who back up a LIVES community first responder and takes over the patient's treatment, or a fire crew who work alongside colleagues from LIVES and the ambulance service to extricate a seriously injured patient from a road traffic collision.

No single person, service or organisation has all of the skills to meet the needs of our most unwell or injured patients. Teamwork and collaboration are vital.

LIVES brings together people in our communities right across Lincolnshire to give them the competence and the confidence to be able to respond quickly and skilfully when someone in their vicinity suffers a medical emergency.



## **OUR STRATEGY.**

If an individual suffers a medical emergency in our county, we should be equipped to protect their safety and maximise positive medical outcomes. Whatever it takes.

It's the basis upon which LIVES was built in the past. It will always inform our plans for the future.

When location or geography makes it more difficult to access emergency healthcare, we will be there to deliver pre-hospital emergency medicine excellence, wherever it's needed.



## OVER THE NEXT FIVE YEARS. **WE WILL STRIVE TO CONTINUE TO:**

#### 1. UNDERSTAND OUR IMPACT.

We know we make a difference but measuring that is sometimes difficult. We will improve our data collection and adopt new measures to demonstrate the difference we make. We will work with research partners to build an evidence base for the effectiveness of our emergency response activity. We will use this information to continuously improve the quality of care that we deliver to people in our communities.

#### 2. GROW OUR PRESENCE

We want every community in Lincolnshire to have access to our emergency response. We will increase the number of LIVES responders in operation across Lincolnshire, with targeted recruitment in areas where there is less coverage. We will invest in the skills of these responders so they can meet the needs of their community. And we will identify opportunities to use our skills in different ways to support people in medical need.

#### 3. FOCUS ON QUALITY

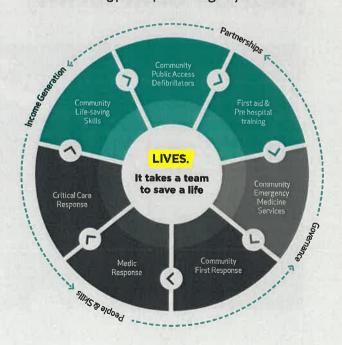
We strive to excel at everything that we do. Our work is always based on evidence and we focus on delivering quality service and care - in our clinical activity, our training and the knowledge that we provide. We inspire and encourage all our people to be the best that they can be, at their chosen level.

#### 4. SUSTAIN OUR GROWTH FINANCIALLY

We will develop and consolidate income streams that support the charity to deliver our aims. We will ensure that we have adequate reserves to weather unpredictable circumstances. And we will be transparent with our supporters, customers and funders, so they are clear on how we spend the funds that they trust us with.

#### 5. ACHIEVE THE HIGHEST LEVELS OF GOVERNANCE EXCELLENCE

Doing the right thing is important to us, even when that is difficult. We will maintain robust and structured processes, in both clinical and charity governance. We will ensure that we are complaint with all regulatory requirements and that we are a model of best practice, in both leading volunteers and delivering prehospital emergency medicine.



## PROJECT LIFESAVER.

#### An education facility without classrooms

Project Lifesaver is a unique and world-leading learning environment for Pre-hospital Emergency Medicine (PHEM). It's an education facility without classrooms that will train LIVES responders, people working in healthcare and the wider community to respond to a wide variety of medical emergencies through a state of the art immersive learning experience.

Every year PHEM responders save countless lives. These committed individuals deserve the very best facilities in which to learn and train; facilities that will test their skills in a wide variety of real-life, high pressure environments, encourage them to perform and reflect, and ultimately inspire and support them to become the very best that they can be.

## **Project Lifesaver is LIVES** plan to create a £10million purpose-built facility



Project Lifesaver is LIVES plan to create an £10m purpose-built facility that will use a combination of digital technology and 'real' stage settings to create an infinite variety of challenging scenarios to train and test the skills of people working in the most difficult of environments. From a city street, to a rural field, an offshore windfarm or an industrial quarry, the Centre will replicate all of the challenges of the environment whilst crucially keeping the learners safe.

All of the action will be captured on video and will be able to be reviewed and debriefed in near-real time to ensure that all of the learning from each scenario is embedded with each learner.

Drawing from elite sport and marginal gains concepts, we will encourage responders at all levels to be the very best they can be, be that in their clinical skills or their critical thinking.

Located in Lincolnshire, Project Lifesaver will build on the reputations of both the county and LIVES as a model of best practice in delivering PHEM in a rural location and establish Lincolnshire as the best place to train in this challenging area of medicine. It will advance LIVES aim to make Lincolnshire the safest place in the UK to suffer a medical emergency despite the challenges of the geography and a growing, ageing population.

During 2021/22 LIVES has developed the plan and business case for Project Lifesaver and acquired a site (subject to planning permission and funding) on which to develop the Centre. During 2022/23 LIVES will be submitting planning applications and securing funding for the development with a view to beginning construction in later 2023.



## " My father's passion for care was a real driving force

Suzi Lumbard, daughter of Dr Cooper.



#### **OUR HISTORY.**

## Beginning with two local doctors. Growing into an army of life-saving volunteers.

You've probably never heard of our two founders, Dr Michael Cooper and Dr Richard Harper-Smith. But trust us, without them, many lives in Lincolnshire would have been lost over the last 50 years.

Back in the 1970s they built the LIVES concept upon a simple purpose: to provide expert emergency medical assistance for road traffic accident victims and trauma patients in our county.

From a standing start, the idea quickly gathered support from over a hundred local doctors, and so the LIVES journey began. The road ahead would not be easy though. In the beginning LIVES had no funds to speak of and the medical professionals who volunteered to help us provided not only their time, but their own equipment too.

Thankfully in those early days, local businesses and institutes initiated a culture of support that's still clear to see today.

They saw the value of LIVES. They recognised that something quite exceptional had been born. And we're proud to say community backing has continued to grow. Thanks to the generosity of local businesses, partners, members of the public and of course, our growing number of volunteers - we're still here. Getting stronger every year. Continuing to save lives in our community.

## AT A GLANCE: MILESTONES IN OUR LIVES.

1970s

1980s

990s

Dr Michael Cooper from Nettleham and Dr Richard Harper-Smith of Tetford, devised the LIVES concept.

Communication system to improve the efficiency of call-out. A mixture of telephones and two-way radios were introduced with transmitters at Nettleham and Fulletby.





Further transmitters were installed at Barton, Boston and Sleaford employing three part-time operators Communications remained limited and additional transmitters were provided by charitable contribution, to a total of seven. Each transmitter was then connected to the control room at the Lincoln County Hospital by landline.

These cost £10,000 a year in rental alone.

An invitation from the Lincolnshire
Ambulance Service to base LIVES
Control within the ambulance
control centre was accepted
and LIVES control was moved
to the ambulance headquarters
at Bracebridge Heath. This
move greatly improved the
efficiency of LIVES call-out and
still operates to this day, as part
of the computerised automatic
dispatch (CAD) system.

The Chief Executive of the Ambulance Trust invited LIVES to establish a community first responder service for suspected victims of cardiac arrest. It was envisaged that this would enable an equality of service to be extended across the rural areas within the county. LIVES saw this as an extension of their existing service and readily agreed to participate. This then became the LIVES 'First Responder Scheme'.

2000s

2020s

As our First Responder Scheme grows, research by the Sheffield University School of Health and Associated Research (SHARR) shows that LIVES responds to over 25% OF CATEGORY A CALLS IN LINCOLNSHIRE. For 60% of these calls, LIVES arrives SIGNIFICANTLY **FASTER, WITH AN AVERAGE RESPONSE RATE OF 5.2** MINUTES. LIVES improves response time performance by 35% OVERALL, AND 55% IN RURAL AREAS.

Nikki Silver is appointed as the first Chief Executive of the charity and Dr Simon Topham becomes Medical Director. This signals the beginning of a period of significant growth in the services offered to the people of Lincolnshire.

The now iconic brand of LIVES is launched in 2016. introducing our new bold yellow logo which we see today.

LIVES celebrates 20 years of working together with Lincolnshire Fire & Rescue and adding additional 999 medical response with LIVES Co-responders.





In 2020, LIVES celebrates its 50th Year although celebrations are curtailed by the coronavirus pandemic.

New clinical response teams launch including the groundbreaking Community Emergency Medicine Service (CEMS) teams and the LIVES Falls Response service. These teams use LIVES emergency responding skills to bring care to patients who might not otherwise benefit.

Critical Care Car launches in 2021 to provide a critical care service, direct to the patient, supporting the most seriously ill or injured patients with advanced care and interventions.

# OUR ACHIEVEMENTS

LIVES responders are qualified and skilled medical volunteers, living and working in the communities that they serve. When a patient or bystander makes an urgent call for help, LIVES responders will be there.

LIVES responders share a commitment to saving life, whatever it takes. That's what unites all our Emergency Responders whether they're providing rapid first aid support on their doorstep, or highly specialised medical interventions around the clock and across the county.

For most of our people responding to emergencies isn't a job. This is a life choice that all LIVES' volunteers share.



## COMMUNITY FIRST RESPONDERS.

LIVES Community First Responders are ordinary people, doing extraordinary things. They come to us with little or no previous medical experience, just a willingness to learn life-saving skills and give up some of their time to be there to respond to calls for help in their community. They're trained and equipped to deal with a range of serious and often life-threatening medical incidents. Whenever needed, they can be quickly on-scene to provide a range of treatments including:

- Delivering life-saving CPR and defibrillator shocks to a patient whose heart has stopped due to cardiac arrest.
- Giving oxygen to a patient who needs help with their breathing.
- Administering life-saving autoinjector medication to a patient suffering from a life-threatening allergic reaction.

If you ask our team of Community First Responders, they'll tell you it's almost second nature for them to use the skills we've helped them acquire, to step up, step in and do what we're trained to do, in the place they call home. We currently have 241 Community First Responders.





Lincolnshire Integrated Voluntary Emergency Service Registered company number 04680981

This year LIVES Community First Responders made themselves available to attend emergencies for 67,176 hours and attended 7,226 jobs. This is a reduction on previous years which can largely be attributed to pressures on our ambulance service colleagues and decisions made by individual volunteers in response to this. As ambulance wait times for less serious calls increase, many Responders make the difficult decision to restrict their availability to the most serious and lifethreatening calls. We value the time that each volunteer gives to their community and support their decisions about how to best use this time.

Community First Responders focus on 'doing the basics well' often being the first to arrive on scene and deliver lifesaving interventions until more specialist resources arrive. During 2021/22 Community First Responders were first on scene at 84.27% of all jobs they attended. This is an increase on previous years although not surprising because Responders typically live and work in the communities in which they respond.

66

I'd like to thank LIVES for saving our wonderful and special mother following a near fatal accident in October 2020. Without doubt the family are forever grateful and thankful that a LIVES paramedic was able to attend quickly and necessitate the correct procedures that undoubtedly saved our mother. Our family will be eternally grateful as without you, we wouldn't have seen our mother this Christmas.



Training activity for Community First Responders had been curtailed during COVID but has returned to more usual arrangements during this year as lockdown restrictions were lifted. Responders meet in district groups on a monthly basis for training covering an ongoing programme of skills appropriate for their level of response. This face to face learning is supplemented by the LIVES Academy online learning platform which delivers theoretical and supportive training modules. Responders undertook 4,164 online learning via LIVES Academy last year. Although we can now meet together to train, online learning has remained a vital part of our education delivery.

Recruitment of new responders was also halted during the pandemic due to COVID restrictions. This pause gave us the opportunity to review the recruitment process and design pathways to support new responders that ensured they were well supported and successful in their volunteer role. We have acquired a waiting list of volunteers wanting to join LIVES as either community first responders and invited 107 to attend a recruitment event to assess their suitability as a LIVES community first responder with 99 subsequently offered places. Our intention is to grow the Community First Responder cohort in a controlled and supported manner and we have a target to recruit and retain 100 new responders each year for the coming five years. The recruitment plan prioritises the recruitment of responders in areas that are less well served at present.

## **MEDIC**FIRST RESPONDERS.

When an emergency 999 call is made, the pace at which qualified medical professionals arrive on the scene can be pivotal. In some cases, it can be the difference between survival and a fatality.

That's where LIVES Medic Responders come in. They're trained doctors, nurses and paramedics, but beyond that, they also give up their time for free to respond for LIVES. Because for people like them, the dedication to saving life, doesn't end when their shift does. Since the 1970s volunteer medics have been bringing their skills to medical emergencies across the county, often brining more skills or experience than those possessed by a regular ambulance crew.

All our Medic First Responders are fully supported by LIVES. We provide them with specialist equipment and access to advanced training so they can further their skills. Everything needed to perform complex medical procedures, wherever and whenever they're called upon, including:

- Leading a cardiac arrest team, coordinating bystanders and healthcare professionals during a cardiac arrest.
- Providing pain relief such as morphine to patients who have suffered traumatic injuries.
- Travelling on the ambulance with the patient to hospital to enable treatments to continue en route.

During 2021/22 our cadre of 27 LIVES medics attended 542 jobs which is more than double the amount undertaken in the previous year. We had previously suspended our requirements for medic volunteers to commit to a responding activity as many were very busy in their usual NHS jobs due to the pressures of the COVID pandemic. We are very happy to see many of these volunteers returning to responding activities as the pressures of the pandemic ease.

Recruitment of new medic responders has been paused during COVID. During this year 13 healthcare professionals attended a medic first responder selection event, with nine subsequently offered a place as a LIVES medic responder. It is planned that recruitment will continue with a small number of medic responders joining the organisation each year to ensure that each can be supported to develop their skills. Regardless of a medic's background, responding as a solo responder to an emergency in your community can be quite different from your usual work environment and so education and training remain important. Not all medic responders want to progress to delivering critical care but for those that do there is a defined pathway of education and experience to do so.

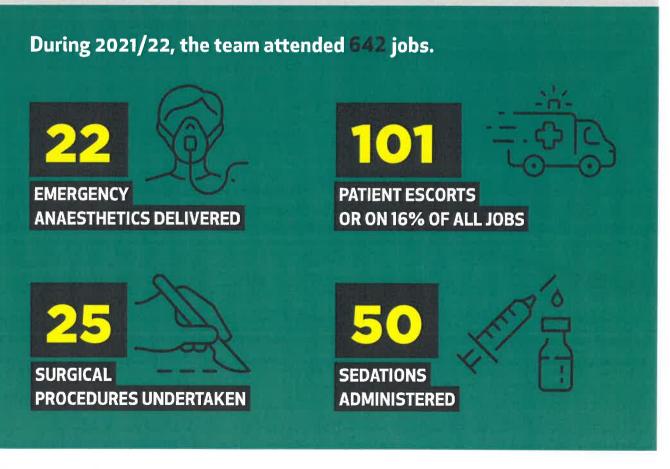
## CRITICAL CARE RESPONDERS.

Imagine the worst medical scenario you can. Now imagine it happening without warning. You're miles from a critical care facility. Your condition is on the brink of significantly worsening if you don't receive urgent medical attention. There's no time to transport you to hospital. Life-saving intervention is needed. It's needed now. This is a reality for the patients our Critical Care Responders attend to every day.

Our highly qualified volunteer Critical Care Responders specialise in delivering rapid. advanced treatments, often in locations which are miles away from the hospital facilities that the patient needs. For the people they give up

their time to save lives through their selfless work with LIVES, they are literally a lifeline.

- Providing sedation at the roadside to straighten a badly broken leg and restore blood flow to the limb.
- Putting a critically injured or ill patient into a medically induced coma to manage their breathing and protect their brain from further damage.
- Undertake life-saving surgical procedures in the community such as opening a chest to stop bleeding after a stabbing.



In 2019 LIVES began differentiating between the skillset of our volunteer medic responders and our critical care responders who deliver the very highest levels of pre-hospital interventions. In 2022 we have 13 volunteer responders performing at this level, delivering lifesaving medical and surgical interventions that give patients the very best opportunity to make it to hospital and onto recovery.

During 2021/22 this small but effective team attended 642 jobs. They undertook 25 surgical procedures, 50 sedations and administered 22 pre-hospital emergency anaesthetics. They travelled to hospital with the patient on the attending ambulance 101 times, or on 16% of all jobs to ensure that the patient received the best ongoing care.

We have recognised that the model of a single critical care responder with equipment in their car and responding to emergencies alone does not appeal to all potential critical care medics, some of whom would prefer to work in a team, on a shift or from a central location.



Therefore in 2021 we launched a LIVES critical care car to serve the communities of the east coast who are often the furthest from the hospital facilities that they need in an emergency. The coastal area is also a challenging area for recruiting medical staff and LIVES critical care responders often travel extended distances from their homes or places of work to attend jobs in this area. Locating a critical care car and crew in the community will provide more timely and skilled response to those patients that need it the most.

The car is crewed with a critical care doctor and critical care paramedic undertaking twilight shifts and carries extended capabilities beyond that of a solo critical care responder including blood products and mechanical CPR. Medic 50 also provides an education platform to allow those medic responders aspiring to deliver critical care to develop experience and skills in an appropriately mentored environment.

During 2022/23 we plan to build on the critical care response we can deliver to our most injured patients by implementing Project Code Crimson. This project, delivered in partnership with PathLinks and emergency service partners, will allow a LIVES critical care medic to request blood products are brought to scene for patients who would benefit from this intervention ahead of arrival at hospital. The number of patients who will need this are small but this potentially life-saving intervention will be a valuable addition to our capabilities for those patients who are often more than an hour from the hospital care that they need.



## **COMMUNITY EMERGENCY** MEDICINE SERVICE.

Community Emergency Medicine (CEMS) is a service that's entirely unique to Lincolnshire and its residents. This is rapid response with a difference. The CEMS team are equipped, empowered and ready to alleviate the pressure on the hospital system through a unique blend of skills, diagnostics and decision-making ability.

CEMS offers something quite extraordinary; Wherever there is a medical need, we have the experience and equipment on-board our three CEMS response vehicles, to bring specialist medical procedures to the patient. We provide enhanced care, over and above the care accessed at a GP surgery, including blood testing and ultrasound at the scene. Right there and then, everything is sorted and the need for the patient to enter the healthcare system is minimised. Imagine the positive impact that makes on the individual and on NHS resources.

Unlike many of our other response teams, the CEMS Clinicians are not volunteers, they're all paid medical professionals. They're empowered by LIVES to make a judgement call as to which call-outs they attend, based on clinical need and the direct benefit to both the patient and the health service as a whole.

#### 66

Seeing the relief on the faces of the patients and their families when I arrive is so rewarding and that's what drives me to respond.

We have three highly equipped response vehicles and CEMS is supported solely by qualified medical specialists and experienced clinicians, including doctors, paramedics, and nurses.

The specialist skills within the CEMS team mean they can carry out many procedures, that often an ambulance crew cannot. This could be anything from stitching and treating a serious wound to diagnosing and treating complex diabetic emergencies in the patients' own home for example - removing the strain on A&E and freeing it up to focus on other emergencies. In short, CEMS facilitates optimum discharge on scene and tries to circumvent the need for a patient to attend hospital/A&E. It significantly alleviates workloads elsewhere in the health system.



#### The CEMS team is committed to:

- Bringing focused value to a medical emergency situation.
- Delivering mobile expertise and innovation right where it's needed
- Combining leading edge medical treatment with award winning tech innovation to radically improve patient outcomes.

2021/22 was the second full year of operation for the CEMS team. The team is made up of 38 doctors, advanced clinical practitioners, nurses and paramedics from a variety of disciplines. The team adopts a wide range of working patterns from full time to casual. Recruitment will continue through the coming year as the team continues to grow.

Access to information is important and so we are pleased that systems have also been implemented including access to GP and Ambulance Service records which ensures that the CEMS team has access to appropriate patient and activity data as well as facilitating effective communication with other healthcare professionals.

During 2021/22 the CEMS team saw 5,701 patients with 76.8% either staying at home or referred for appropriate onward care during this episode. CEMS particularly targets complex patients who may be able to be kept at home through advanced diagnostics and treatments, however there will always be a proportion of patients that require admission to hospital.



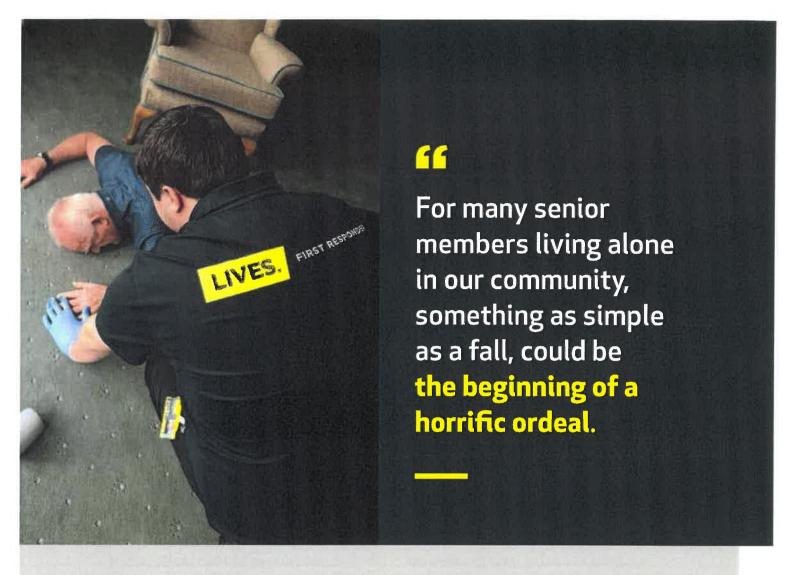
## **FALLS** RESPONSE UNIT.

For many senior people living alone in our community, something as simple as a fall, could be the beginning of a horrific ordeal. The LIVES' Falls Response Unit meets a fundamental need for older members of society who suffer a debilitating injury at home; to know someone is there. We're on call to get to those low injury, yet potentially life changing events fast. We're there to ensure our elderly residents are never left alone for a second longer than necessary, following a fall that leaves them incapacitated.

When an elderly person falls, their needs potentially go way beyond treatment of an initial injury. That's why, when the call comes in, one of our experienced Falls Responders will be on the scene quickly, to:

- Conduct an initial patient assessment and help to remobilise.
- Provide early treatment to avoid permanent damage.
- Determine clinical need and refer for appropriate treatment.
- Undertake a 'frailty assessment', to determine if occupational health interventions are required and arrange short term care packages, where appropriate.
- Look beyond the initial 999 call made, take time to identify any social care concerns and try to make sure preventative measures are in place to minimise the chance of them falling again in the future.

The Falls Response team are there to meet an immediate medical emergency need, but we're also there to meet a very human need too. Maybe that's as simple as popping the kettle on once the patient is comfortable and sitting with them for a while. Maybe it's providing practical help, such as moving their bed to ensure they have an accessible place to rest and recover. That's the 'Falls Response Unit'. That's what we do.



The Falls Response Partnership was cocommissioned as a service by Lincolnshire County Council and NHS Lincolnshire from April 2021 following a successful two year pilot. The team of 19 experienced Responders is a blend of employed and casual staff who work to a bespoke scope of practice including the ability to provide pain relief, take an ECG and specialist skills in the safe moving of people. The team is mobilised in specialist 4x4 vehicles that carry a range of equipment for safer moving of people including lifting cushions and hoists.

During 2021/221,767 patients were attended by the Falls Response team, and of these 54% have remained at home following their 999 call. Further developments of the service are planned including increasing wound closure skills and the ability to refer to additional pathways including social prescribing.

# THE COMMUNITIES WE SERVE.

LIVES exists because our county is rural, the infrastructure is sparse, and yet our people suffer the same medical and traumatic emergencies every day as those living in cities or urban areas. We believe that no one in our county should suffer poorer outcomes from a medical emergency because they live or work far from the healthcare facilities they need.

LIVES is a Lincolnshire charity. We operate over the historical area of Greater Lincolnshire, an area that extends from the Humber to the Wash and covers an area of 7,000 square kilometres or 2,700 sq. miles.

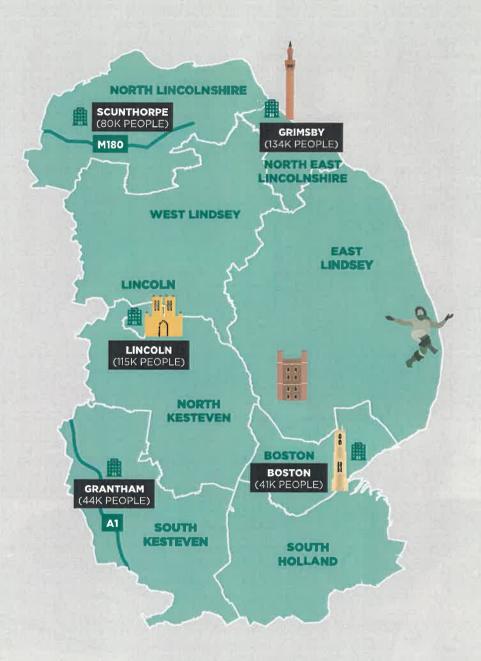
The area is largely rural and is sparsely populated, with an average of 150 people per sq. km compared with 411 per sq. km across England. In the most sparsely populated district of East Lindsey there are only 80 people per sq. km. Rural areas make up 95% of the land area of Lincolnshire.

We have one city, Lincoln, and around 30 market towns and coastal resorts with a fairly even distribution of villages across the area. Our largest centres of population are Lincoln (115,000), Grimsby (134,000), Scunthorpe (80,000), Grantham (44,000), and Boston (41,000).

In total the area covered by LIVES has just over 1 million residents. Approximately 90,000 people live in areas in the top 10 per cent most deprived in the country. Almost 25 per cent of our population are aged over 65 and this is predicted to grow further in coming years.

The transport infrastructure in Lincolnshire is notably sparse, with the only motorway connection being the M180 into the north of the area. The A1 runs along the western edge of the county and facilitates access to the north and south. In total there are 850 miles of A roads that connect the main service centres of the Greater Lincolnshire area.





Our health system is complex, with multiple NHS trusts and commissioning groups and all subject to the challenges of funding. Lincolnshire is typical of many rural settings where 80% of rural residents live within 4km of a GP surgery, compared with 98% of the urban population, and only 55% of rural households, compared to 97% of urban households, are within 8km of a hospital.

The north and northeast of the county are served by hospital sites at Grimsby and Scunthorpe, with the remainder of the county accessing hospital facilities in Lincoln, Boston and Grantham. There is no Major Trauma Centre in Lincolnshire and our most ill or injured patients will often need to travel out of county to receive emergency care and treatment.

The East Midlands Ambulance Service Lincolnshire division covers the same area as LIVES. The geography and infrastructure of the greater Lincolnshire area creates challenges for delivering a timely and skilled response to medical emergencies. LIVES exists to help address these challenges.



# SHARING OUR SKILLS LIVES EDUCATION.

Every year, there are around 30,000 out of hospital cardiac arrests across the UK, but sadly less than 1 in 10 people survive. For every minute defibrillation is delayed, the chances of survival fall by approximately 10%. (Resuscitation Council UK, 2015).

In recent years there have been relatively very few developments in improving outcomes for patients in cardiac arrest but the evidence base shows that improvements in about earlier recognition and more rapid response to cardiac arrest with CPR is most likely to make a difference. In Lincolnshire that means more bystanders who can recognise cardiac arrest and start CPR.

A population widely trained in CPR has the potential to double survival rates. Evidence from other countries suggests that providing training in CPR to members of the public has a significant impact and improves patient outcomes for those who suffer a cardiac arrest.

Training in CPR and how to use a defibrillator has been included in the school curriculum in Scandinavian countries such as Norway

and Denmark for over 10 years and there has been a steady improvement in patient outcomes (Global Resuscitation Alliance, 2018). Therefore, knowing how to deliver safe and effective CPR is a basic skill that can save lives and one which is already taught to schoolaged children in many parts of the world.

At LIVES we believe that every young person in Lincolnshire should have the opportunity to learn lifesaving skills before they leave school. In 2019/20 we launched our schools partnership programme to enable every school in Lincolnshire to access this life-saving education for their students. Sadly the closure of schools and restrictions on social gatherings during 2020/21 have severely limited our ability to deliver this lifesaving education and it has been slow to resume following the easing of restrictions. However we have seen a resumption of activity and during 2021/22 we delivered CPR awareness training to 30 primary schools and seven Secondary, teaching a total of 1,763 pupils under 18 this valuable and lifesaving skill.

We also know that learning doesn't finish when you leave school. We continue to work with community groups, sports clubs, faith groups and other organisations, as well as at community events to give every person who lives in Lincolnshire the opportunity to learn lifesaving skills. An evaluation of earlier programmes found that 85% of those who took part in a community training session reported that their confidence in performing CPR had improved following the training. Furthermore, 8% reported that they had actively used their CPR training, either in a medical emergency or to show others what do to.

# TOWARDS EXCELLENCE CLINICAL GOVERNANCE.

The quality of care that we deliver is fundamentally important to all at LIVES. Quality is embedded in everything we do at LIVES. Our core activity is training and equipping people with both the skills to make a difference and the confidence to use them.

We are proud of our governance systems that are robust and allow us to evaluate and evidence the high standards that we set for ourselves and to put things right quickly where change is needed.

Many people are unclear about what a Clinical Governance system is and there are numerous definitions, but that which we prefer in LIVES is "a system through which organisations are accountable for continuously improving the quality of their services and safeguarding high standards of care by creating an environment in which clinical excellence will flourish"

There are eight pillars on our clinical governance framework.

**OPENNESS** - being transparent and honest with casualties, their families and their representatives about the standard and type of care they receive and delivering a Duty of Candour when things do not go right

**CLINICAL AUDIT** – reviewing a percentage sample of activity to measure against key performance indicators. Also includes the review of significant events to ensure that lessons learnt to improve the healthcare provision are identified and disseminated within the organisation

CLINICAL **EFFECTIVENESS** – basing all activity on evidence that supports that the activity being delivered is safe, effective and meets the needs of the individual receiving care

**RESEARCH AND DEVELOPMENT -**

where possible, looking at the healthcare that is delivered to evidence concepts, trial new clinical activities and give opportunity for academic research to underpin further developments. Often involves collaboration with academic healthcare organisations and educational establishments



EDUCATION, TRAINING
AND CONTINUING
PROFESSIONAL
DEVELOPMENT – ensuring
that the standards of
initial and ongoing training
are commensurate with
the scope and needs
of the organisation



INFORMATION
MANAGEMENT – ensuring
that any clinical records of
care are comprehensive,
accurate and kept safely in
line with GDPR principles
and Medical Records Act



RISK MANAGEMENT –
understanding, classifying
and mitigating the risks
that are associated with
the delivery of healthcare,
or indeed the risks of
not delivering healthcare
that should be



PATIENT AND CARER
EXPERIENCE AND
INVOLVEMENT – ensuring
feedback is sought from
persons who come into contact
with the service as patients
and that learning is shared
across the organisation

## CARE QUALITY COMMISSION

LIVES has been registered as a health care provider with the CQC since August 2011 for the delivery of transport services, triage and medical advice provided remotely, and for treatment of disease, disorder or injury. During 2020 and in recognition of the expansion of both our skillset and available technologies, we expanded our registration to include surgical procedures and diagnostic and screening procedures.

LIVES was most recently inspected by the CQC in January 2018 with the inspection focused on the provision of services using our ambulance, both patient transport and event first aid provision. The report was very positive, identifying

areas of good and outstanding practice and with no recommendations or actions.

During 2021/22 LIVES undertook several conversations with the CQC under the transitional monitoring arrangements as CQC visits were suspended due to COVID. No concerns about our governance or compliance were raised during these discussions and we look forward to welcoming the CQC to LIVES when restrictions are lifted.

LIVES values our CQC registration highly and continue to adhere to the standards required to ensure we remain compliant.

# WORKING WITH OTHERS THE IMPORTANCE OF PARTNERSHIPS.

Partnership is key to LIVES delivery of services to the communities that we serve. We have a number of partners in delivering both an emergency response and skills to our communities, as well as in advancing the cause of pre-hospital emergency medicine nationally.

LIVES works in close partnership with East Midlands Ambulance Service NHS Trust (EMAS) and this partnership is key to the deployment of LIVES responders to medical emergencies across the county. LIVES responds to patients at the invitation of EMAS and volunteers are deployed by a dedicated team of dispatchers within the EMAS control room. Cooperation between EMAS crews and LIVES teams on the front line with patients is overwhelmingly positive and contributes to improved experience and outcomes for patients. The relationship between the organisations is governed by a service level agreement which was renewed in 2020 for a further three year term.

LIVES has worked in formal partnership with Lincolnshire Fire and Rescue (LFR) since the start of the Community First Responder Scheme in 1999 but has cooperated at the scene of incidents since our inception in 1970. LFR volunteer fire fighters are trained as co-responders and attend medical emergencies in their communities under the training and clinical governance structure provided by LIVES. These co-responders make a significant contribution both to the charity and to their communities and we thank them

for their dedication and commitment. During 2021 we have begun delivering medical trauma training to LFR fire fighters across Lincolnshire to ensure that they have the skills and confidence they need to respond to the medical needs of patients at incidents they attend. This has led to further opportunities for partnership working including the development of an RTC (road traffic collision) course for LIVES responders that integrates with an LFR drill night for teams to have the opportunity to work together.

We welcome new partnerships and have been very happy to develop our relationship with the University of Lincoln over the past year, with this culminating in the signing of a Memorandum of Understanding between LIVES and the University in 2021. We are pleased to be working with the University to develop a postgraduate certificate in pre-hospital critical care that will welcome its first cohort of students in 2023. We've also welcomed our first students from across the Medical School and the School of Health and Care to placements with LIVES services, and look forward to collaborating on research to further the development of pre-hospital emergency medicine.

# **USING TECHNOLOGY** TO ACHIEVE OUR AIMS.

The use of technology has become increasingly important to all aspects of LIVES activity, including the delivery of education programmes, the use of equipment for diagnostics and treatment of patients in the field, to the maintenance of patient records and communications with LIVES members.

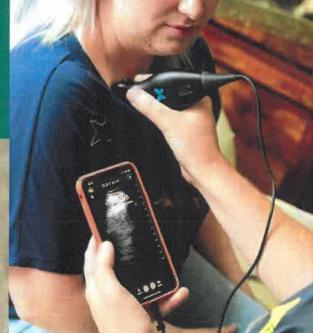
Technology has driven a number of advances in clinical care delivered to patients. CEMS teams routinely use handheld ultrasound scanners and point of care blood testing technology to inform clinical decision making. During 2020 LIVES has established a defibrillator replacement programme which will result in all defibrillators and advanced life support monitors being renewed to the Zoll platform. In the 2021/22 year we rolled out 75 defibrillators to Community First Responders and Medic Responders and 11 advanced life support monitors to critical care Responders. All devices are wireless enabled which will allow us to capture realtime rescue data for sharing with clinicians in the patient's onward journey, and for review and audit with the attending responders to ensure the best quality clinical care.

In April 2021 LIVES implemented an online inventory management system to track the usage of medical equipment, consumables and drugs across the organisation. There are benefits in

both cost saving through the more effective use of consumables and quality through the more robust and timely management of equipment or consumable recalls when advised by regulators. This system will be embedded in the headquarters operation during the first half of 2021 before being rolled out to voluntary responders at district level.

During 2021/22 we have begun the first stages of an IT systems upgrade that will underpin the development of a charity-wide information reporting platform. Microsoft Dynamics 365 Business Central was adopted as a finance system and implemented during Q3. Work on developing the Dynamics 365 platform to provide a CRM system for volunteer management is underway and will be completed during 2022/23. This will provide LIVES Responders with the up to date information on their education, activity and availability. Future plans include the development of a Dynamics 365 database for supporter information, and an electronic patient care record system that will be accessible from a mobile device.









# OUR INCOME GENERATION

Income generation continues to strengthen with the fifth consecutive year of income growth in 2021/22.

Our total income was £3.676million, compared with £3.150million in 2020/21 which represents an increase of 16.7%.

There are several factors contributing to this growth including a positive return to the delivery of education to commercial clients following the restrictions of the pandemic and strong sales of equipment. Fundraising income grew by 7.2% over another challenging year in which much community fundraising activity continued to be curtailed by the pandemic.

This amazing achievement is only possible due to the generosity and commitment of our fantastic supporters to whom we are so very grateful.



Lincolnshire Integrated Voluntary Emergency Service Registered company number 04680981

# RAISING FUNDS.

# **COMMUNITY FUNDRAISING**

Although many of the COVID restrictions were eased, 2021/22 continued to be a challenging year for community fundraising as a lot of the big events around the county were still not open but we did see a late flurry of smaller scale shows later in the year.

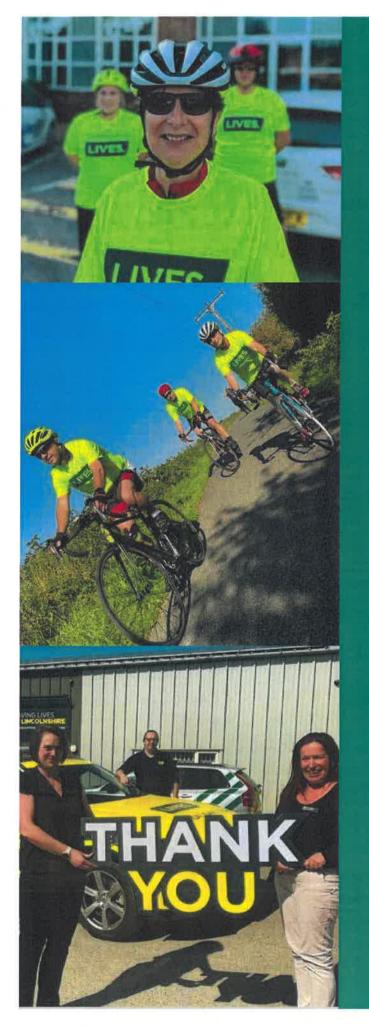
A large part of attending shows is speaking to people in the community; showcasing the charity, what we do, and how we do it. It also allows us to uphold one of our charitable aims which is to educate members of the public about how to recognise the signs of cardiac arrest and how to react to it. Not only is this a skill that could save someone's life, but it is also a conversation starter which often leads to an opportunity to attend a school, or to discuss training, or how a member of the public can be involved with a fundraiser or a Responder.

Notable community fundraising events during this year include a charity auction at The George in Langworth which far exceeded the organisers

fundraising expectations. A sponsored fitness event in Cleethorpes involving a team doing 40,000 burpees was held to thank the LIVES Critical Care Paramedic and Doctor who attended to the gym owner's mum after she was involved in a near fatal accident. It is events such as this that bring communities together to support the work of LIVES that are so vital to funding the delivery of our emergency response and we are very grateful to those who undertake them in aid of our charity.

Our fundraising volunteers are crucial to the delivery of our fundraising activities and provide support across a range of activities in the community such as servicing our collection boxes, talking to local schools and community groups in order to raise the profile of the charity, attending local shows and events to support our stands. We know that many of these volunteers have been disappointed to be unable to take part in fundraising activities this year. We are immensely grateful for their ongoing support and look forward to seeing them again in 2022/23.





# **CHALLENGE EVENTS**

Many of our supporters like a sense of achievement whilst raising funds for LIVES and providing a range of challenges has become an important mechanism to acquire new donors, whilst inspiring our existing supporters. This is still a new income stream for LIVES and one that we hope will grow in the coming years. Although COVID restrictions were lifted, hosting events in 2021/22 was still unpredicatable and so we made the decision to continue with hosting events virtually.

In May we hosted 51 Miles in May which asked people to cover 51 miles throughout the month of May and was an excellent, small-scale opportunity for testing our new donation platform, Enthuse. The Enthuse platform links the fundraisers Strava to their fundraising page so it was easy to keep a track of how many miles each person has done as well as how much they have raised.

In September we hosted our largest virtual event yet. The Lands End to John O'Groats virtual cycle. This saw a host of teams taking on the 874 miles to cover the length of the country. The event was sponsored by Ringrose Law and in total raised over £7,000 and by the time we had finished, the team had covered a staggering 13,520 miles between them. We also held a Long Walk Home For Christmas challenge with the much smaller target of 24 miles between the 1st of December and Christmas Eve.

Aside from the virtual events, we had a team of runners head down to London to take part in the London Landmarks Half Marathon. This is an amazing event and gets bigger and bigger every year. In October we had a team of 46 runners take part in the Lincoln 10k. We'd like to give special mention to LIVES Responder Lee Cook who ran it whilst pushing another member of the team around in a wheelchair.

# OCAL BUSINESS

Our business partnerships are so important to us. As well as raising vital funds, our business supporters raise our profile with their own employees but also offer us the opportunity to develop our networks to include their customers partners too. We know that many businesses are experiencing challenges in returning to more usual trading after the last two years of the pandemic and we value all of the businesses that we have worked with us and supported our work, either through fundraising events or donations of time or goods.

Our partnership with Ringrose Law extends over many years and we were delighted to collaborate with them on the production of the Lincolnshire Kitchen cookbook last year. This year we have been delighted to work with them again to stage the LIVES/Ringrose Law Solicitors Dragon Boat Festival 2022 which raised both funds for LIVES and the profile of the charity, attracted excellent media coverage and has built the foundation for a bigger and better event in 2023.

We were also grateful for the support of Pepperell's Solicitors in staging our first legacy campaign this year. The social media campaign ran over several weeks and focused on sharing information about the importance of making a will and the difference that legacies can make to a charity.





# **TEAM LIVES** REGULAR GIVING **PROGRAMME**

# **GRANTS AND TRUSTS**

During 2021/22 we have continued to build on the grants and trusts programme that we launched prior to the pandemic. We have identified grant funders who have an interest in our work and are extremely grateful to those who have supported our charity this year. Grant income for 2021/22 decreased from £207,049 in 2020/21 which was a reflection of the additional grants available for COVID-related activities, to £137,335 in 2021/22. The very generous support of these funders has allowed LIVES to deliver a number of initiatives that support the people of Lincolnshire.

### East Coast Critical Care car, Medic 50.

Following funding from BASICS, enabled by the Help appeal, to purchase a vehicle in 2020 to support the platform, the East Coast Community Fund and the Henry Surtees Foundation awarded LIVES with grants to ensure the service carries the latest sector leading lifesaving equipment, which will support some of the most serious 999 emergencies in the area. Support from these funders has covered the capital costs of launching this entirely new aspect of our voluntary response this year, including the highest value single grant our charity has ever received towards our work.

### **Code Crimson**

Funding from BASICs, enabled by the Help appeal has been a catalyst towards launching our Code Crimson Project, which will come into fruition in 2022. Code Crimson builds upon a formalised agreement with the NHS to ensure whole blood products are ready for collection by our Responders en-route to serious incidents when it is needed, twentyfour hours a day, seven days a week.

### University of Lincoln's Productivity **Voucher Scheme**

Support from the Productivity Voucher Scheme has enabled LIVES to explore the science

and technologies that will feature in Project Lifesaver's Immersive suite, informing our approach to creating a truly sector leading learning environment for Pre-hospital emergency medicine when the facility is launched.

### **Defibrillator Programme**

In 2019, LIVES embarked on an ambitious project to provide every Responder with a new generation defibrillator that can share live patient data with other responders and the hospital via the cloud. This technology will revolutionise how we train and respond to patients in cardiac arrest and undoubtably save many more lives every year. LIVES have raised over £115,000 towards this project to date, with over £68,000 raised during this financial year.

Our sincere thanks go to the following organisations for their generous support during this year.

**Michael Cornish Foundation Arco Community Grant Scheme** The British Association for Immediate Care (BASICS), enabled by the HELP Appeal. **CDS Action Charitable Trust Ecclesiastical Movement for Good** GrantScape (The Ørsted East **Coast Community Fund) Greenergy Biofuels Limited's Charity Committee** Groundwork UK - Tesco Bags of Help Help for Health **Henry Surtees Foundation McCarthy and Stone Foundation Ongo Communities Community Grants Project Rugby Group Benevolent Fund** The Hawkins Foundation The Welland Charitable Trust **Lincolnshire Community Foundation (Triton Knoll Offshore Wind Farm) Community Fund University of Lincoln (Productivity Voucher Scheme**) The Worth Waynflete Foundation

# **LEGACIES**

We are immensely grateful to those donors who have been generous enough to remember LIVES in their will and very thankful for the contribution that they make to our ongoing charitable work.

Historically legacies have formed a very small income stream for the charity.

Although we have started to see some growth in this income stream in recent years it remains a relatively small and unpredictable contributor to total income.

Over the last three years we began to promote LIVES as a potential beneficiary of legacy donations including providing information on our website. This is a new area for the charity and we understand it will be many years before we see the benefits of work done today.

# **PROVIDING EDUCATION TO OTHERS**

Knowledge sharing is a powerful thing. And never more so than when it equips individuals with the potential to change lives.

LIVES provides first aid and pre-hospital emergency medicine training to individuals, businesses and industry across Lincolnshire and beyond. We teach people how to react in a spectrum of emergency situations. From treating a physical injury, to providing rapid interventions to an individual in a life-threatening condition or mental crisis. Training people with and without prior medical knowledge, passing on the life-saving skills, we've gained over years and empowering them to be life savers too.



The provision of training has been a growing income stream for LIVES over several years. Education income has increased by 288% to £392.927 following the resumption of training activity after the pandemic. This is an important income stream and one that we forecast will continue to grow.

We deliver qualifications on behalf of three awarding bodies. We have delivered the Qualsafe suite of pre-hospital and first aid courses since 2016, and in 2019 added Mental Health England courses to our capabilities. During 2020 we were very proud to begin delivering The ATACC Group range of high fidelity pre-hospital courses. The variety of our education provision means that we can deliver training that meets the exact needs of the client or industry underpinned by nationally recognised qualifications.

We are proud of our highly professional cohort of educators who deliver engaging, confidence-building, consistently high quality training to every learner they encounter.



# COMMUNITY DEFIBRILLATORS.

Early defibrillation is an important part of the Chain of Survival in cardiac arrest. LIVES supports communities to acquire community public access defibrillators (CPADs) including advising on the most appropriate device for their needs and the best location to ensure availability and access. During 2021/22 the sale of defibrillators for use in communities and businesses across Lincolnshire brought £222,510 to the charity, an increase of 95.5% from the previous year.

We have long been aware that purchasing a defibrillator is only the first step in the chain to saving a life. The defibrillator needs to be 'rescue ready' and available for use when it is needed to save a life. During 2019 we launched a defibrillator guardian service, taking responsibility for community defibrillators and ensuring they are checked and ready to be used at any time. We now have 58 community public access defibrillators across the county under LIVES management.

# CLINICAL GOVERNANCE CONSULTANCY.

Any organisation or individual providing care above and beyond First Aid at Work, is required to have a pre-established framework, with the aim of ensuring certain standards are kept to, while continually improving the quality of care they provide. In essence, this means the right medical action, taken by the right person, at the right time.

LIVES is a CQC-registered organisation. That means we have proven expertise in designing and embedding a robust Clinical Governance framework within our own pre-hospital emergency response services. We know what it takes to meet the required standards and we're able to share our knowledge with others. We work with clients to create Clinical Governance frameworks for companies, organisations, and individuals that give them the know-how to provide high-quality care.

Over the last three years LIVES has created a small income stream from sharing our knowledge of clinical governance systems with businesses who need to be able to provide assurance that they are operating a safe clinical system. We are deliberately growing this income in a slow, controlled fashion, mindful of ensuring that we are working with clients who share our commitment to delivering quality care to patients.



# MARKETING AND COMMUNICATIONS.

Sharing the story of our LIVES responders and their activity is an important part of raising the profile of LIVES across the county and encouraging communities to support our work.

## **WEBSITE**

A communications review in 2020 identified that the LIVES website no longer represented the scope and scale of the support that we provide to the Lincolnshire community. Designers and developers were instructed and the new LIVES website was launched in July 2021. Alongside the technical and design revisions, all website copy was rewritten to ensure a consistent professional message regardless of the reason someone may be visiting the site. This common language and tone is now used as a basis for all communications across the charity. A key element of the build has been data capture, with full integration into our supporter database.

We are continuing to work on the website and build strength within our Education section and are reviewing how to improve usability and grow our SEO.

# **SOCIAL MEDIA**

Social media remains a key focus of our brand awareness and fundraising growth through 2021/22. Each social media channel – Facebook, Twitter, Instagram and LinkedIn - has grown in both number of followers and engagement since the previous year. While focusing on our organic growth, we also launched a number of new initiatives to identify and encourage new supporters. We recognise that there is now a clear age demographic of supporters for each platform and we tailor content and messaging to each audience. We also recognise that video content is increasingly needed to engage supporters on social media.



**9,700 Likes** (14.7% increase)



9,460 Followers



**1,463 Likes** (14.1% increase)



865 Followers (48% increase)

# **TELLING OUR STORIES**

Media coverage is an important part of telling the stories of LIVES and the emergency responders that make a difference in communities across Lincolnshire. This year we have received excellent coverage of LIVES stories including Community Emergency Medicine being shortlisted in the HSJ Partnership Awards and the launch of the Medic 50 critical care car on the Lincolnshire coast. LIVES Responder Ella Tapson was the winner of the South Kesteven District Council 'Beyond the Call of Duty' award and was asked to turn on the Christmas lights in Grantham.

We also received extensive radio and television coverage including LIVES Responder Lee Cook and his taking part in the London Landmarks Half Marathon, long-time LIVES supporter Mark Hennis and his third epic canoe challenge for LIVES and coverage of the partnership between LIVES and Lincolnshire Fire & Rescue to deliver medical trauma training to Lincolnshire firefighters.

We've also had the opportunity to collaborate with partners in creating some excellent video content including a video with Zoll showcasing the way that their defibrillator technology will help LIVES to deliver better quality care to patients, and with Ecclesiastical Movement for Good demonstrating the difference that their funding makes to delivering a LIVES emergency response.





Lincolnshire Integrated Voluntary Emergency Service Registered company number 04680981

Volunteer does not mean amateur. LIVES responders commit to developing the skills and confidence to deliver the very best care to patients every time.

LIVES people take many roles. They may be volunteers responding in their communities and supporting their local district, clinicians on our CEMS team or responders on our Falls teams, trainers delivering education programmes across the charity, fundraisers giving up their time to generate much needed income, or staff working in a wide variety of roles in our HQ.

LIVES is nothing without our people. LIVES people are unswervingly dedicated, committed professionals who care about their communities and patients. Every individual is an important part of the team. We are immensely grateful and thankful for the efforts, contribution and dedication of every LIVES member. volunteer and employee. It takes a team to save a life.



# OUR PEOPLE.

During the two years of the pandemic, we recognised that that pressures of responding on the front line of medical emergencies during a pandemic have caused risk, uncertainty and fear for many. We also recognised that many LIVES volunteers are key workers, with a significant number engaged in front line NHS roles. Many volunteers chose not to respond during the height of the pandemic to protect both themselves and their loved ones.

Our focus for 2021/22 has been on supporting our dedicated responders who had taken a 'pause' in volunteering due to COVID to regain the skills and confidence to resume their responding activity. We have also focused on returning to 'business as usual' and recruiting new responders to join the Charity, as well as supporting those who are already active responders to retain and develop their skills.

We have acquired a waiting list of volunteers wanting to join LIVES as either community first responders or medic responders but are conscious that they must be supported to have an excellent experience. We therefore invited

107 to attend a recruitment event to assess their suitability as a LIVES community first responder with 99 subsequently offered places. 13 healthcare professionals attended a medic first responder selection event, with nine subsequently offered a place as a LIVES medic responder.

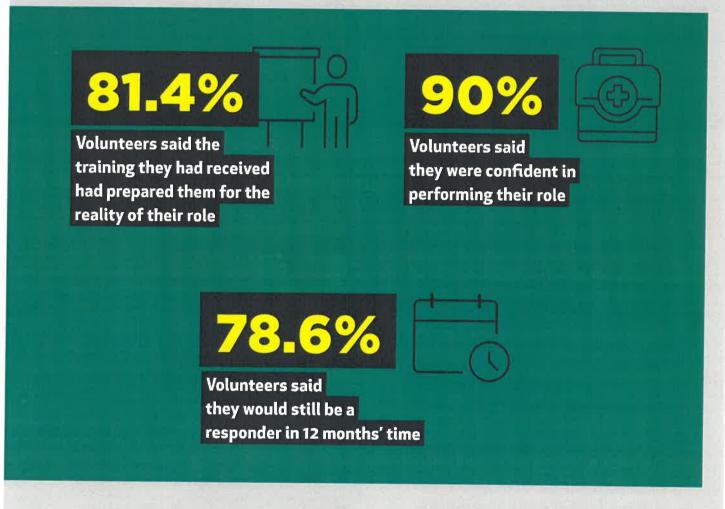
Our Headquarters team have returned to a hybrid working model following the enforced restrictions of lockdown.

The Wellbeing Framework introduced during 2020 remains in place to support LIVES employees and volunteers in all roles to manage their health and wellbeing and their work-life balance. We have six mental health first aiders and a specialist mental health trainer employed by the charity. During the coming year we are reviewing the support model in place for volunteer responders across the Charity to ensure that the wellbeing and welfare programme meets the needs of our current and future volunteers.

# **LIVES VOLUNTEER SURVEY**

During December we undertook the annual LIVES Volunteer Survey which is a chance to understand the views of our volunteers across the charity, and to understand levels of engagement with the charity.

2021 had continued to be a difficult year for many responders, both those who have chosen to continue responding during COVID and those who have chosen not to. We were interested to understand the level of engagement that responders have with the charity, and how supported and confident they feel.



It was pleasing to see that actions that had been taken following the previous years survey such as the development of new education offerings including a structure quarterly training requirement and a pathway for new responders including mentorship and 'buddying' had a positive impact on the levels of support responders reported.

Actions have been taken in response to feedback with particular focus on communications with volunteers and the development of an internal communication strategy which is being implemented through 2022.

We thank all volunteers who completed the survey for sharing their views.

# **STAFF SURVEY**

LIVES undertook a survey of all employees in September 2021 with the purpose of understanding levels of engagement across teams and feedback on areas for improvement. Using a recognised methodology, high levels of staff engagement were reported across the charity, with an average engagement score of 82.6%.

- 94.5% of employees were proud to tell others that they worked for LIVES
- 95.4% of employees understood the values of the organisation

93.2% of employees thought the values of the organisation were meaningful

Areas for improvement were identified in communication across the charity and within teams, including opportunities for employees to share their views and receive feedback. Actions to address these themes are being undertaken in all teams.

We thank all LIVES employees who completed the survey for sharing their views and giving us the opportunity to improve.

# LIVES ADVISORY GROUP

The LIVES Advisory Group or LAG is a vital channel for sharing information across the charity. Formed in 2019, it is a representative group of 14 LIVES members from across the county. Advisory Group members come from both medic and community first responder communities and meet quarterly to act both as a sounding board for the Headquarters team. They help to develop future plans for the Charity, to understand the impact of the plans or projects, and as a voice for LIVES members to raise questions or concerns with the management team.

Advisory Group representatives also attend each of the board committees where they provide a valuable insight into the concerns and views of LIVES members.

We'd like to take the opportunity to thank these dedicated people who give so freely of their time and expertise to support the charity and their responder colleagues.





# BOARD OF TRUSTEES.

Our committed Board of Trustees are responsible for ensuring LIVES is effectively and properly governed and managed, and that we meet our overall purpose as a charity.

A number of trustees retired from their roles during this year. We thank them for their significant contribution to the charity over many years and wish them well for the future.

The trustees who served during the year are as follows:

**Chair** Thomasin Nicholds **Vice Chair** Andrew Wilson

Trustees Michael Adie

Timothy Downing Hilary Gibb

Jennifer Harper (resigned 10th May 2021)

Jonathan Teer

# KEY MANAGEMENT PERSONNEL.

The management of LIVES is undertaken by our Chief Executive, Nikki Cooke supported by the LIVES Leadership Team who lead on strategic work in each of their Directorates. There have been no changes to the leadership team in 2021/22 and the key individuals are listed below.

Chief Executive Nikki Cooke

Medical Director Dr Simon Topham

**Head of Finance and Performance** Stephanie Gibson

**Head of Fundraising and Communications**Gemma Shaw

**Head of Operations** Chris Cole

Head of Sales Kirsty Raywood

# AMBITIONS

LIVES is a forward-thinking organisation, grounded in our Lincolnshire communities and always looking for new ways to add value to these communities.

LIVES is also outward-looking, committed to advancing the cause of pre-hospital emergency medicine, not only for the benefit of our own people but for those beyond our county borders.

We don't make change for the sake of it, but we are committed to growing to meet the needs of our communities. Our first priority is always the continuity of our core emergency response to those patients who need us most in our large rural county.

We are therefore delighted to share our future plans for the coming years.



# **PROJECT LIFESAVER - A SPECIALIST EDUCATION CENTRE FOR PHEM**

Project Lifesaver is LIVES plan to develop a purpose-built facility to provide LIVES responders and others working and volunteering in pre-hospital emergency medicine with the very best facilities to train in.

Located in Lincolnshire, Project Lifesaver will build on the county's reputation as a model of best practice in delivering PHEM in a rural area and establish Lincolnshire as the place to train in this challenging area of medicine. Furthermore, it will advance LIVES' aim to make Lincolnshire the safest area in the UK to suffer a medical emergency, despite the challenges of the geography and a growing, ageing population.

A site has been identified on the Lincolnshire Showground, a central location that is accessible from outside of Lincolnshire and near the planned developments of the RAF Scampton site, subject to planning permission being granted.

Over the last two years the business case has been developed and a project team appointed to develop the building specification. A planning application will be submitted in late 2022 and it is hoped that building can begin in 2023 subject to funding and the successful award of planning permission.

Technology is key to the development of the building with interactive and immersive learning spaces throughout the centre to provide realistic and testing training situations whilst keeping learners safe. A collaboration of technology partners has been identified that we believe will be able to work together to deliver the industry-leading learning experiences that we seek to deliver.

Project Lifesaver will not only provide excellent facilities for LIVES responders to train in, but will also create new opportunities for income generation and will contribute to the long-term viability and resilience of the charity. As we work towards the development of the centre, we are building partnerships with education, equipment and technology suppliers to underpin the delivery of leading PHEM programmes from the centre. The building will also house an operational base for LIVES clinical teams to operate from, and offices for charity staff.



### **VOLUNTARY RESPONSE**

LIVES emergency responders are at the heart of our charity and our plans for the next three years are focused on supporting the growth and development of this service and the individuals who deliver it.

Over the last five years we have reviewed the clinical and education models for Voluntary Response. In the coming year we will review the operational and support structures that underpin the delivery of community emergency response. The aim is to ensure a robust and flexible structure for Voluntary Response that supports responders to deliver excellent care to patients. Recruitment of Community First Responders has resumed following the pandemic and we plan to recruit 100 new CFRs each year with recruitment targeted to meet the needs of the communities.

In 2021 we begun a programme to replace our estate of defibrillators with state-of-the-art units manufactured by Zoll. This programme will cost £750,000 and be funded by grants and donations. The new defibrillators have a number of advantages including providing coaching and feedback to the individual carrying out CPR, and standardising defibrillator consumables across the charity, therefore reducing the need to hold different manufacturers supplies. Most importantly, all data relating to an incident is captured and stored electronically via WiFi and able to be reviewed, audited and provided to healthcare professionals to guide future treatment for the patient.

We will continue the ongoing programme to deploy technology to responders that makes it easier for them to acquire skills, be safely deployed and keep in touch with the charity and each other. Over the next two years LIVES will implement the Microsoft 365 Dynamics platform that will support core back office functions and allow responders easy access to information that they need. This begins with the delivery of Responder Central during 2022 which will hold volunteer personal information, education records and currency dashboards, as well as availability and activity data. Further into the future, we will develop an electronic patient report form to capture patient data and interventions at scene. Initial scoping of this will be undertaken in 2021/22 to identify the most appropriate solution for our specific needs.



# **COMMUNITY SKILLS**

At our core we are a community-based charity that is committed to improving the outcomes for people in our communities. We will continue to develop our community education activities with schools and community groups with the goal of providing every young person with the opportunity to learn life-saving CPR before they leave school.

In the coming year we will review our programme of delivering community education for bystander CPR and consider the expansion of this to incorporate other lifesaving skills. We know from pre-COVID programmes that there is demand for these skills and the international evidence base for the impact on patient outcomes is positive. We will be seeking funding to develop this initiative into an ongoing, sustainable programme.

We have begun to develop a model for an entry level LIVES responder that harks back to our roots as an initial response to cardiac arrests. This responder will only attend cardiac arrests in their immediate vicinity and will be equipped to deliver basic life support and defibrillation to patients in the first few minutes following their collapse. Our aim is to recruit a large number of these responders across the county so every person in Lincolnshire is never more than a couple of minutes away from a responder who can be deployed to them in this life-threatening situation.

# **COMMUNITY EMERGENCY MEDICINE**

Community emergency medicine is an emerging area of response and LIVES is at the forefront of delivering innovative response models that meet the needs of Lincolnshire. We believe there are a number of other 'pillars' of CEM that will emerge over the coming years and are keen to be part of the development of this exciting area of practice.

In the immediate future our plans including developing further pathways and skills for the Falls Response teams including wound closure. CEMS will be working with the NHS to review the delivery of the service and identify clusters of patient need that can be addressed by the specialist skill set of the highly skilled team.



# RESEARCH AND INFORMATION

LIVES has a charitable objective to advance the cause of pre-hospital care on a national basis. We want to contribute to the growing areas of research into the delivery of pre-hospital emergency medicine, as well as to research around human factors and marginal gains in medicine, and to the development of organisation and volunteer leadership models.

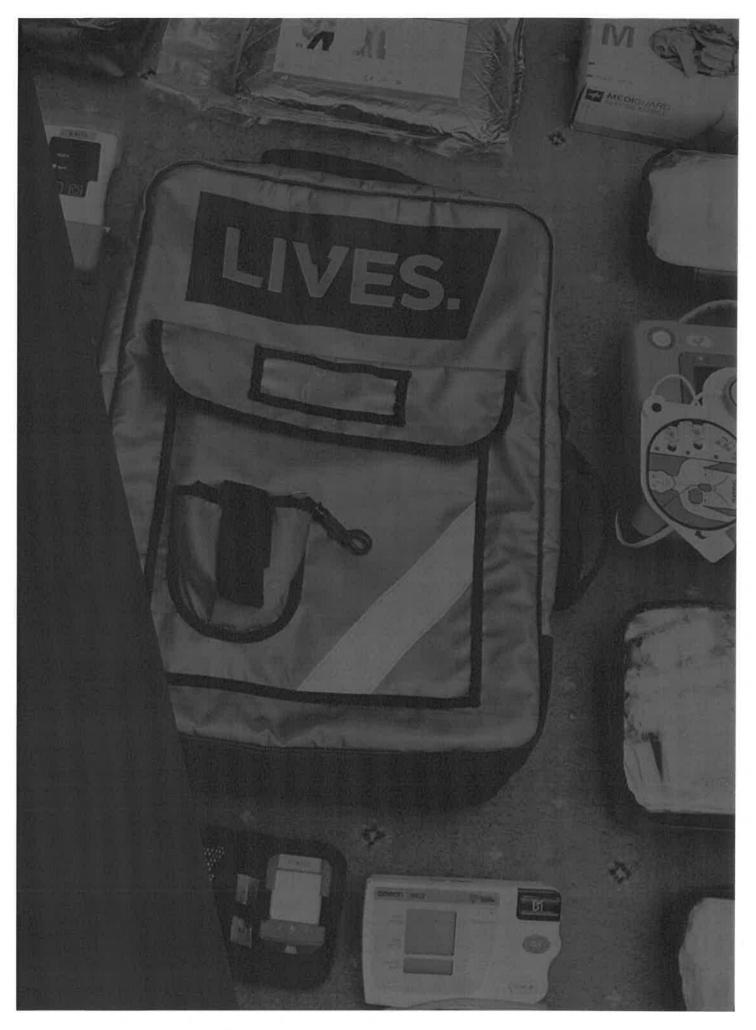
We have formed a small group of responders who have an interest in undertaking research projects in the future. We will further develop our relationships with the University of Lincoln and identify opportunities to build links with other research partners. During 2022 we will present posters at a minimum of two appropriate conference events.

# FINANCE REVIEW AND ACCOUNTS

# **Income and Expenditure**

Financial sustainability is a key strategic objective for the charity. We can only deliver care to patients, education to our own responders and to communities, and plan for future growth if our income is secure and we understand and control our costs.

Historically LIVES relied on community fundraising to generate income to support the delivery of charitable activity. For the last five years our strategy has been to diversify our income streams, develop new sources of funding and mitigate the risks associated with income generation. This strategy has contributed to the sustainability of the charity through the difficult years of the COVID pandemic and to a positive financial position.



Lincolnshire Integrated Voluntary Emergency Service Registered company number 04680981

## INCOME

Total income for the year was £3.676 million, compared with £3.150million in 2020/21 which represents an increase of 16.7%. This is the fifth consecutive year of income growth for the charity and is aligned with our strategic aim of ensuring that LIVES is financially sustainable.

NHS contracted income was secured with the formal commissioning of the Falls service after a two-year pilot. Income from NHS contracts accounts for 53.6% of all income. This is a percentage reduction from the previous year as other income streams have grown.

Income from Community Engagement increased significantly in 2021/22 as activity that had been hampered by the pandemic resumed. Community Engagement includes income from sale of defibrillators and other equipment, education sales and clinical governance consultancy and provides 18% of all income.

Education income has increased by 288% to £392.927 following the resumption of training activity after the pandemic. This is an important income stream and one that we forecast will continue to grow.

Sale of goods increased by 95.5% to £222,510. This was in part contributed to by a significant single sale.

Income from clinical governance consultancy was £44,558 which is reported as a distinct income stream for the first time in 2020/21. This is a small reduction on the previous year due to a decision to end a contract with a client.

Although 2021/22 was less subject to lockdowns, it was in many ways a more difficult year for fundraising. Many events did not run during the year and grant income that had been available in the previous year to deal with COVID-related pressures was less available in the reporting year. It was a difficult year for traditional fundraising activities although total fundraising income (including legacies) for 2021/22 was £613,452 - an increase of 7.2% from £572,248

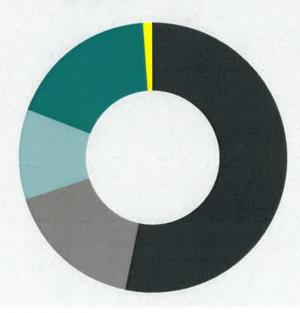
in 2020/21. However fundraising income (excluding legacies) decreased to £412,319 - a decrease of 10.1% from £458,832 in 2020/21. Grant income for 2021/22 also decreased from £207,049 in 2020/21 which was a reflection of the additional grants available for COVIDrelated activities, to £137,335 in 2021/22.

Regular giving membership from the Friends of LIVES programme dropped by 10.0%. This can be attributed to the ongoing effects of the restrictions on face-to-face recruitment of new members during the pandemic. Regular giving income decreased from £96,828 to £85,573 - a decrease of 11.6%.



Other Income £38,866

> Total £3,675,682



## **EXPENDITURE**

Total expenditure was £3.462million, an increase of 40.0% from £2.473million in 2020/21 which was anticipated. The growth in expenditure is in large part attributed to increased costs in the delivery of Community Emergency Medicine services as recruitment of staff that had been curtailed during the pandemic was resumed.

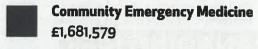
Ongoing work to mitigate costs and ensure appropriate expenditure continues across the charity. Costs have been predictable through 2021/22 with increases in expenditure directly related to funded programmes of work. While there was a significant increase in expenditure against Community Engagement (111.5%), this is offset by the 149.4% increase in related income.

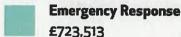
Whilst cost control is important to the prudent management of the charity, it should be noted that the quality of care delivered to patients is central to decision-making.

The cost of fundraising reduced by 1% and return on fundraising activities increased from 108.7% in 2020/21 to 125.9% in 2021/22.

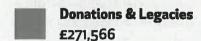
The total cost of charitable activities increased by 45%, however this is in part offset by an overall increase of 18.7% in related income.

The greatest proportion of expenditure is attributable to Community Emergency Medicine (48.57%). This also represents the greatest proportion of income (53.58%).



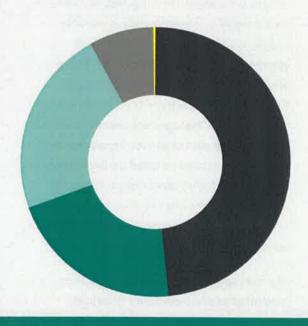








Total £3,462,497



## **CHARITY RESTRUCTURING**

LIVES has grown significantly over the last five years and undertakes a broader range of activities across the charity than has previously been the case. It is forecast that the charity will continue to grow in the coming years, both through the continued development of the education offering and through new business opportunities.

LIVES Education Limited has been formed to sell and deliver the commercial education services that the charity undertakes. It began trading from 1st April 2022. A business transfer agreement has transferred assets and contracts to the new entity but all staff remain the employees of LIVES due to the dual nature of their roles.

## **MANAGING RISK**

## **Approach to Risk Management**

LIVES operates in an environment with inherent risks both to the charity and in the delivery of its core charitable activities. The charity takes proactive steps to evaluate and mitigate these risks. This process is monitored through the Risk Management committee who meet quarterly.

LIVES management processes allow for both bottom-up and top-down risks to be identified, weighted, managed and mitigated. The objective is to quantify risk as accurately as possible and assess potential impact on strategic objectives. This in turn allows for the proper prioritisation of investment decisions and future operational activity. LIVES continues to invest in its risk management and compliance capabilities as part of an evolving process. In 2022 the investment included the deployment of a Learning from Events system to simplify and streamline the capture, investigation, management and dissemination of learning from incidents that occur across the organisation.

Our risk register records all risks which are separated into four domains – Strategic,

Operational, Financial and Compliance - to ensure that the Board is always fully informed of the overall risk picture, its management and mitigations. All risks are reviewed and managed at an appropriate level by Risk Management Committee, and all significant risks are reported and reviewed at each Board meeting where management and mitigation measures are discussed and agreed.

This year, a separate clinical risk register has been developed in recognition of the additional risks faced by the charity due to the nature of its activity. This register is reviewed by the Clinical Governance committee, and an update is provided to the Risk Management committee who have overall ownership.

The charity is also aware that the development of Project Lifesaver and the plan to build a new LIVES Education Centre will expose the charity to risks that are new and previously unconsidered. Early mitigations include the appointment of specialist project managers to deliver the project within a defined governance framework and the development of a project-specific risk register.

## **Key Risks**

Key risks faced by the organisation are categorised as:

- Breakdown of relationships with key operational partners including East Midlands Ambulance
   Service, Lincolnshire Fire and Rescue, or with NHS commissioning organisations making it difficult for LIVES to deliver services
- A reduction in income through the loss of NHS funding, decline in fundraising, or a sustained failure in one or more income streams
- Risks associated with the delivery of clinical services including risks associated with educations, clinical compliance and the management of equipment
- A reduction in operational capacity due to a significant reduction in volunteer membership or staffing; or risks associated with the unplanned growth of activity or membership

- Threats to the health and safety of volunteers and staff through the predominance of lone working
- Competitive threats from other CFR schemes or similar and commercial services.

The impact of the COVID pandemic on the charity and the wider economy has been a significant risk that is under constant review given the emerging and evolving situation. Appropriate mitigations have been in place throughout the response and the Charity maintains situational awareness of this and other potential risks to health.

These risks as well as other risks identified by the Board continue to be monitored and mitigated against, both in terms of likelihood of these situations occurring and the impact on LIVES if they were to happen.

## **MANAGING OUR FINANCES**

## **Going Concern**

Trustees have reviewed the forecasts and are of the view that the charity is a going concern and, although not fully compliant with the reserves policy, Trustees believe the charity has adequate reserves to sustain charitable activities should there be an unexpected decrease in income or increase in activity. The experience of the pandemic has demonstrated the resilience of the charity while responding to unexpected financial circumstances.

The charity has multiple diverse income streams and sufficient cash to meet its liabilities as they arise. The risks are mitigated by our diverse income sources, which include fundraising and donations, grants and trusts, income derived from commercial sales and contracted income from services provided to the NHS.

### Reserves

The total funds of the charity as of 31st March 2022 are £1,636,966 (2020/21: £1,408,755) of which £211,294 are restricted and not available for general purpose.

The reserves the charity holds as of 31st March 2022 are £729,101 (2020/21 restated: £681,683).

Trustees reviewed the reserves policy during 2019/20, in recognition of the growth of the charity and changes in both income and risk profile. The charity's policy is to hold six months of non-commissioned service costs and a provision for covering the costs of winding up the charity if new income sources had not been found at that time. This will equate to £900,000 of unrestricted reserves and will, in the view of Trustees, provide a secure financial footing for LIVES to protect against any significant reduction in its normal income, or any significant unforeseen expenditures.

It is noted that during 2021/22, the charity made further progress towards growing its reserves in line with this policy. However, it does not yet hold the required reserves to be compliant with this policy. The policy will be reviewed again in 2022 to reflect the continued growth of the charity.

## **Investment Policy and Performance**

Trustees are permitted by the Charity's Memorandum and Articles of Association to invest LIVES monies not immediately required for its own purpose in such investments, securities or property as may be thought fit. Trustees consider it appropriate to hold reserves in a combination of cash and balanced risk investment funds.

On 31st March 2022, LIVES portfolio had a value of £310,588 which as an in-year increase of 5.1%.

The LIVES investment policy is:

## a) General objectives

The investments must be managed in such a way as to fulfil Charity Commission requirements to obtain a reasonable return on those investments without excessive risk to the capital.

## b) Capital growth and income requirements

The investments need only to provide capital growth; there is no requirement for them to generate income.

## c) Acceptable risk

A "moderate" approach is to be adopted in the management of the charity's assets. Further definition of this can be found in the JCH Investment Management document, "Attitude to Risk."

## d) Functions delegated to the Trustees' agent (investment manager)

The investments are to be managed on an 'advisory' basis within the bounds of the declared acceptable risk.

## e) Ethical restrictions

The investments must avoid areas that may conflict with the overall aims of LIVES wherever possible, taking into account the large diversification of underlying holdings within the Investment Portfolio.

## **Fundraising Approach**

LIVES takes a responsible approach to fundraising and is both grateful and respectful towards all who support or donate to our charity. We hold ourselves to high standards and ensure that we meet or exceed the requirements of the fundraising regulations. Fundraising activities are predominantly carried out at public events and venues, static collection tins or through unsolicited donations.

The charity employed the services of professional fundraisers during 2019/20 who undertook the recruitment of regular donors to the Friends of

LIVES programme. However, activity was suspended from March 2020 in response to the pandemic lockdown and has not resumed during the year.

LIVES does not undertake door to door collections or telephone marketing campaigns to raise funds.

The charity works closely with its fundraising partners to ensure that best practice is always adhered to. LIVES has voluntarily registered with the Fundraising Regulator and is a member of the Institute of Fundraising. Our employed fundraising team regularly undertake training opportunities through the Institute to ensure they remain current with best practice and guidelines.

## **Fundraising Promise**

LIVES is committed to our 'Fundraising Promise' to our donors and supporters. We have never been, and will never be, involved in cold calling, direct mailing or any form of pressure selling. We take the protection of the personal data of all our supporters and donors extremely seriously and regularly monitor and review our fundraising policies and procedures to ensure we deliver 'best practice' within the sector.

- We will never share your data with any other organisation for marketing purposes
- We always aim to send you a personal thank you for your donation
- We only send marketing communications to those who have explicitly given us consent to do so

- We promise to provide information about our work so you can see how your money is being spent and the difference you're making. To do this though, we need your permission to send you marketing communications
- If you tell us that you don't want us to contact you in a particular way, we won't
- If you sign up to give us a regular monthly gift by direct debit, we won't ask you to increase that monthly gift for at least a year
- We work to best practice, and will take appropriate action promptly if we fail to meet our standards

## **Qualifying Third Party Indemnity Provisions**

Qualifying third party provisions made by the charity are in force for the benefit of the Trustees.

# OUR STRUCTURE, GOVERNANCE AND MANAGEMENT

## **Governing Document**

LIVES is a charitable company limited by guarantee, incorporated on 27 February 2003 and registered as a charity on 4 July 2003. The company was established under a Memorandum of Association, which established the objects and powers of the charitable company and is governed under its Articles of Association. A special resolution was passed at the Annual General Meeting held in October 2019 to adopt updated Articles in line with the current recommendations of the Charity Commission. In the event of the company being wound up, members are required to contribute an amount not exceeding £10.

## **Charitable Objects**

The provision of immediate medical care to any person injured in any accident or involved in any medical emergency in the area of Lincolnshire, North East Lincolnshire and any area reasonably close thereto.

To advance the principles of pre-hospital emergency care on a national basis;

Providing advice and guidance in all aspects of such care; including delivery of training and provision to approved emergency equipment when requested to do so.

## **Area of Benefit**

The area the charity can operate in is Lincolnshire, North East Lincolnshire and the surrounding area.

## **Recruitment and Appointment of New Trustees**

The charity at the time of this report has eight trustees. Of the six trustees in place at the year end, five are still in post. Three trustees have been recruited and appointed post the year end, but prior to the dating of this report.

A board governance review undertaken in 2019 identified that further Trustee recruitment was required both to ensure the continuing skills of the board and to plan for anticipated future retirements. Regular recruitment has been undertaken in subsequent years. There was one resignation from the Board during this reporting period.

All LIVES Trustees undergo an induction process, which in addition to familiarisation with the objectives and operational activities of LIVES, also includes formal training in the role of a Trustee.

## **Governance Structure**

The board delegates responsibility to committees in the areas of Clinical Governance, Finance & Performance, People & Organisation and Risk Management in order to strengthen the governance structure of LIVES, ensure informed effective decision making and mitigate risk. These committees are tasked with reviewing, monitoring and evaluating key areas of the organisation and its activities and making proposals or recommendations to the Board of Trustees based on their findings. Membership of the committees is drawn from the Board of Trustees and LIVES Senior Leadership Team. From 2020, a member of the LIVES Advisory Group has also joined each committee to provider a member's perspective. All committees operate within terms of reference approved by the board.

Trustees are responsible for:

- Delivery of LIVES Objects, as stated in the Articles of Association
- Setting the strategic direction of LIVES
- Upholding the core values of LIVES
- Monitoring performance and financial solvency
- Ensuring that LIVES complies with all relevant law and regulatory legislation
- Ensuring that policies, procedures and internal controls are effective and fit for purpose
- Protection of the assets and property of LIVES
- Reviewing and managing risk
- Upholding and applying the principles of equality and diversity and ensuring that LIVES is fair and open to all sections of the community

## **Decision-making Structure**

There is a robust clinical governance framework in place within LIVES to ensure a consistent quality of delivery for all clinical aspects of the charity. These procedures are regularly reviewed by the Medical Director and the Clinical Governance committee to ensure that they continue to meet the needs of the charity and the communities it serves. LIVES is registered with the Care Quality Commission, which regulates the quality of clinical services delivered. An Equipment Working Group is specifically established to review the suitability of all clinical equipment in use or proposed and make recommendations to this committee.

The Finance & Performance committee ensures close financial monitoring and effective budgeting in LIVES, within terms of reference approved by the Trustees. This committee also scrutinises performance data from across the charity and is responsible for contract monitoring and delivery. There are robust internal systems within LIVES to ensure appropriate authorisation of all large financial transactions and projects and to guard against fraud.

People are of fundamental importance to LIVES. Our delivery model is focused on skilling and equipping volunteers to deliver in their communities, and it is of utmost importance that these people are supported to be the very best that they can be, whether they be volunteers or employees. The People & Organisation committee monitors recruitment, retention and development of both volunteers and staff and oversees the annual volunteer survey and action plans.

LIVES is aware that it faces several risks in the delivery of its activities and takes active steps to evaluate and mitigate these risks. These risks are monitored through the Risk Management committee and an organisational risk registered is maintained with risks stratified and regularly reviewed based on their risk rating.

## **Management Structure**

The LIVES organisation is supported by a headquarters team of 32 people. The headquarters staff provide leadership and support services to ensure that the organisation is managed safely, complies with all regulations, generates sufficient income to operate sustainably, and that volunteers are supported in education, development and provision of equipment.

The organisation is led by a Chief Executive who works alongside the Medical Director and LIVES Leadership team and reports directly to the Board of Trustees.

The Medical Director is responsible for clinical standards and governance across all clinical activity of the Charity. They hold a number of responsibilities including the lead for safeguarding, and the charity's Caldicott Guardian.

The Head of Operations is responsible for the quality and effectiveness of all activity delivered by LIVES. This includes the activity of First Responder districts and Medics, Community Emergency Medicine Services, the delivery of education, provision of equipment and of clinical governance consultancy to clients.

The Head of Fundraising & Communications is responsible for all marketing, fundraising, community engagement and communications activities. This includes the development and delivery of the fundraising strategy, development of new sources of income including a grant strategy and the delivery of effective communications campaigns.

The Head of Sales is responsible for the development of commercial activities as a source of income. This is predominantly through the sale of training and clinical governance services and equipment to corporate, community and public sector clients. This function continues to grow and provide a sustainable income stream for the charity.

The Head of Finance & Performance is responsible for ensuring the effective financial management of the organisation. This individual is also responsible for the production of management and performance information across the charity.

## **Key Management Remuneration**

All directors give their time freely and no director received remuneration in the year. Details of directors' expenses and related party transactions are disclosed in notes 12 and 29 to the accounts.

The pay of senior staff is reviewed annually and normally increased in accordance with average earnings. In view of the nature of the charity, the directors benchmark against pay levels in other charitable organisations of a similar size.

## STATEMENT OF TRUSTEES RESPONSIBILITIES

Trustees, who are also the directors of Lincolnshire Integrated Voluntary Emergency Service (LIVES) for the purposes of company law, are responsible for preparing the Report of the Trustees and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company law requires Trustees to prepare financial statements for each financial year, giving a true and fair view of the charity's state of affairs and of the incoming resources and application of resources. This includes income and expenditure of the charitable company for that period. In preparing those financial statements, the Trustees are required to:

- Select suitable accounting policies and then apply them consistently;
- Observe the methods and principles in the Charity SORP;
- · Make judgements and estimates that are reasonable and prudent;
- State whether applicable UK Accounting Standards have been followed, subject to any
  material departures disclosed and explained in the financial statements; and
- Prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in operation.

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

In so far as the Trustees are aware:

- · There is no relevant audit information of which the charitable company's auditors are unaware; and
- The Trustees have taken all steps that they ought to have taken to make themselves aware of any
  relevant audit information and to establish that the auditors are aware of that information.

## **Auditors**

The auditors, Duncan & Toplis, will be proposed for re-appointment at the forthcoming Annual General Meeting.

This report has been prepared in accordance with the special provisions of Part 15 of the Companies Act 2006 relating to small companies.

Approved by order of the Board of Trustees on 15 October 2022 and signed on its behalf by:

Mrs Thomasin Nicholds

Chair of Trustees

## **Registered Company number**

04680981 (England and Wales)

## **Registered Charity number**

1098364

## **Registered office**

LIVES Headquarters Units 5-8 Birch Court Boston Road Industrial Estate **HORNCASTLE** Lincolnshire LN96SB

## **Trustees**

Chair Thomasin Nicholds Vice Chair Andrew Wilson

Michael Adie Trustees

**Timothy Downing** 

Hilary Gibb Jonathan Teer

All of the above Trustees (who are also the Directors of the charity for the purposes of company law) held office during the year under review.

## **Company Secretary**

Mr M V Adie

## **Senior Statutory Auditor**

Timothy Godson FCA

## **Auditors**

**Duncan & Toplis** 5 Resolution Close Endeavour Park **Boston** Lincolnshire PE217TT

## **Bankers**

Natwest 27 High Street **HORNCASTLE** Lincolnshire LN95XB

And

Lloyds Bank 202 High Street Lincoln LN57AP

## **Investment Advisors**

JCH Investment Management 1 Henly Way **Doddington Road** Lincoln LN63QR

## Key management personnel

Mrs N Cooke, Chief Executive Officer Dr S Topham, Medical Director Mr C Cole, Head of Operations Mrs S Gibson, Head of Finance & Performance Mrs K Raywood, Head of Sales Mrs G Shaw, Head of Fundraising & Communications

## TRUSTEE'S REPORT AND FINANCIAL STATEMENTS **FOR THE YEAR ENDED 31 MARCH 2022**

## Statement of Trustees' Responsibilities

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

Company law requires the Trustees to prepare financial statements for each financial. Under company law, the Trustees must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the charitable company and of its incoming resources and application of resources, including its income and expenditure, for that period. In preparing these financial statements, the Trustees are required to:

- Select suitable accounting policies and then apply them consistently;
- Observe the methods and principles of the Charities SORP (FRS 102);
- Make judgements and accounting estimates that are reasonable and prudent;
- State whether applicable UK Accounting Standards (FRS 102) have been followed, subject to any material departures disclosed and explained in the financial statements;
- · Prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in business.

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

## Disclosure of Information to Auditors

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

- So far as that Trustee is aware, there is no relevant audit information of which the charity's auditors are unaware, and
- That Trustee has taken all the steps that ought to have been taken as a Trustee in order to be aware of any relevant audit information and to establish that the charity's auditors are aware of that information.

Approved by order of the members of the board of Trustees on 15 October 2022 and signed on their behalf by:

Meholds

Mrs T L Nicholds

Trustee

## **Opinion**

We have audited the financial statements of Lincolnshire Integrated Voluntary Emergency Service (the 'charitable company') for the year ended 31 March 2022 which comprise the Statement of Financial Activities, the Statement of Financial Position, the Statement of Cash Flows and the related notes, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard applicable in the UK and Republic of Ireland' (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- Give a true and fair view of the state of the charitable company's affairs as at 31 March 2022 and of its incoming resources and application of resources, including its income and expenditure for the year then ended;
- Have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- Have been prepared in accordance with the requirements of the Companies Act 2006.

## **Basis for Opinion**

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

## **Conclusions Relating to Going Concern**

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

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the charitable company'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 Annual Report other than the financial statements and our Auditors' Report thereon. The Trustees are responsible for the other information contained within the Annual Report. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the course of the audit, or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

## **Opinion on other Matters Prescribed** by the Companies Act 2006

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

- The information given in the Trustees' Report for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- · The Trustees' Report has been prepared in accordance with applicable legal requirements.

## Matters on Which we are Required to Report by Exception

In the light of the knowledge and understanding of the charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the Trustees' Report.

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

- Adequate accounting records have not been kept 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, 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 charitable company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the Trustees either intend to liquidate the charitable company or to cease operations, or have no realistic alternative but to do so.

## **Auditors' Responsibilities for the Audit of the Financial Statements**

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

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

We have identified areas of laws and regulations that could reasonably be expected to have a material effect on the financial statements from our general commercial experience, knowledge of the sector, a review of regulatory and legal correspondence and through discussions with Trustees and other management obtained as part of the work required by auditing standards. We have also discussed with the Trustees and other management the policies and procedures relating to compliance with laws and regulations. We communicated laws and regulations throughout the team and remained alert to any indications of non-compliance throughout the audit.

The potential impact of different laws and regulations varies considerably. The charitable company is subject to laws and regulations that directly impact the financial statements (for example financial reporting legislation) and we have assessed the extent of compliance with such laws as part of our financial statement audit. We evaluated management's incentives and opportunities for fraudulent manipulation of the financial statements (including risk of override of controls) and determined that the principal risks were related to management bias in accounting estimates and judgemental areas of the financial statements such as depreciation of tangible fixed assets, as well as the risk of inappropriate journal entries to increase fund surplus. Audit procedures performed by the engagement team included the identification and testing of material and unusual journal entries and challenging management on key accounting estimates, assumptions and judgements made in the preparation of the financial statements. We carried out detailed substantive tests on accounting estimates, including reviewing the methods used by management to make those estimates, re-performing the calculation, and reviewing the outcome of prior year estimates.

Additionally, the charitable company is subject to laws and regulations in the industry in which they operate, including those set out by the Charity Commission and Care Quality Commission as regulatory bodies. These are areas where the consequence for non-compliance could have a material effect on the amounts or disclosures in the financial statements.

Auditing standards limit the required audit procedures to identify non-compliance with these laws and regulations to enquiry of the Trustees and other management and inspection. This inspection included a review of legal fees for any evidence of non-compliance, discussions around whether any incidents occurred in the year and a review of the health and safety policies in place. Through these procedures, if we became aware of any non-compliance, we considered the impact on the procedures performed on the related financial statement items.

Owing to the inherent limitations of an audit, there is an unavoidable risk that we may not have detected some material misstatements in the financial statements, even though we have properly planned and performed our audit in accordance with auditing standards. The further removed non-compliance with laws and regulations is from the events and transactions reflected in the financial statements, the less likely the inherently limited procedures required by auditing standards would identify it. As with any audit, there is a greater risk of non-detection of irregularities as these may involve collusion, intentional omissions or the override of internal controls.

We are not responsible for preventing noncompliance and cannot be expected to detect non-compliance with all laws and regulations.

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

## **Use of our Report**

This report is made solely to the charitable company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006. Our audit work has been undertaken so that we might state to the charitable company's members those matters we are required to state to them in an Auditors' Report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and its members, as a body, for our audit work, for this report, or for the opinions we have formed.

T. G. Godson

Timothy Godson FCA (Senior Statutory Auditor) for and on behalf of Duncan & Toplis Limited, Statutory Auditor

5 Resolution Close

**Endeavour Park** 

Boston

Lincolnshire

PE217TT

Date: 24 October 2022

Duncan & Toplis Limited are eligible to act as auditors in terms of section 1212 of the Companies Act 2006.

## STATEMENT OF FINANCIAL ACTIVITIES (INCORPORATING INCOME AND EXPENDITURE ACCOUNT) FOR THE YEAR ENDED 31 MARCH 2022

		Unrestricted	Restricted	Total	Tota
		funds	funds	funds	fund
	Note	2022	2022 £	2022 £	202
Income from:		3.634			
Donations and legacies	4	486,717	126,735	613,452	572,248
Charitable activities:	5				
Emergency response			389,894	389,894	384,45
Community emergency medicine		1,969,486	Mudding.	1,969,486	1,908,434
Community engagement		663,984		663,984	266,21
Other trading activities	6	38,710		38,710	16,289
Investment income	7	148		148	124
Other income	8	7		7	2,152
Total income		3,159,052	516,629	3,675,681	3,149,912
Expenditure on:					
Raising funds		268,671	2,894	271,565	274,21
Charitable activities:	9				
Emergency response		282,204	441,309	723.513	558,028
Community emergency medicine		1,679,979	1,600	1,681,579	1,268,40
Community engagement		780,938	1,820	782,758	370,06
Investment management costs		3,080		3,080	2,678
Total expenditure		3,014,872	447,623	3,462,495	2,473,389
Net income before net gains on investments		144,180	69,006	213,186	676,523
Net gains on investments		15,026		15,026	54,860
Net movement in funds		159,206	69,006	228,212	731,389
Reconciliation of funds:					
Total funds brought forward as previously stated		1,266,467	142,288	1,408,755	670,50
Prior year adjustment				the state of	6,86
Total funds brought forward as restated		1,266,467	142,288	1,408,755	677,36
Net movement in funds		159,206	69,006	228,212	731,38
Total funds carried forward		1,425,673	211,294	1,636,967	1,408,75

 $The \, Statement \, of \, Financial \, Activities \, includes \, all \, gains \, and \, losses \, recognised \, in \, the \, year.$ 

The notes form part of these financial statements.

## STATEMENT OF FINANCIAL POSITION **AS AT 31 MARCH 2022**

	Note		2022		2021 £
Fixed assets					
Intangible assets	13		32,686		
Tangible assets	14		663,886		584,784
Investments	15		310,589		295,561
			1,007,161	المراشقة	880,345
Current assets					
Stocks	16	57,790		45,310	
Debtors	17	385,699		249,996	
Cash at bank and in hand		703,062		961,796	
		1,146,551		1,257,102	
Creditors: amounts falling due within one year	18	(449,666)		(626,371)	
Net current assets			696,885		630,731
Total assets less current liabilities			1,704,046		1,511,076
Creditors: amounts falling due after one year	19		(67,079)		(102,321)
Net assets excluding pension asset			1,636,967		1,408,755
Total net assets			1,636,967		1,408,755
Charity funds					
Restricted funds	20		211,294		142,288
Unrestricted funds	20		1,425,673		1,266,467
Total funds			1,636,967		1,408,755

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

The financial statements have been prepared in accordance with the provisions applicable to entities subject to the small companies regime.

The financial statements were approved and authorised for issue by the Trustees on 15 October 2022 and signed on their behalf by:

## Mrs T L Nicholds

Trustee

The notes form part of these financial statements.

## **STATEMENT OF CASH FLOWS** FOR THE YEAR ENDED 31 MARCH 2022

		2022	2021
	Note	€	2021 £
Cash flows from operating activities			
Net cash used in operating activities	23	39,881	870,139
Cash flows from investing activities			
Proceeds from the sale of tangible fixed assets		19,700	-
Purchase of intangible assets		(18,315)	-
Purchase of tangible fixed assets		(259,654)	(322,683)
Net cash used in investing activities		(258,269)	(322,683)
Cash flows from financing activities			
Repayments of hire purchase	- days	(40,346)	(46,374)
Net cash used in financing activities		(40,346)	(46,374)
Change in cash and cash equivalents in the year		(258,734)	501,082
Cash and cash equivalents at the beginning of the year		961,796	460,714
Cash and cash equivalents at the end of the year	24	703,062	961,796

The notes form part of these financial statements.

### 1. General Information

Lincolnshire Integrated Voluntary Emergency Service is a private company, limited by guarantee without share capital, registered in England and Wales. The charitable company's registered number and registered office address can be found in the Trustees annual report.

The presentation currency of the financial statements is the Pound Sterling (£).

## 2. Accounting Policies

## 2.1 Basis of Preparation of Financial Statements

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

The charitable company 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.

## 2.2 Going Concern

Accounting standards require the Trustees to consider the appropriateness of the going concern basis when preparing the financial statements. The Trustees have taken notice of the Financial Reporting Council guidance, which requires the reasons for this decision to be explained. The Trustees regard the going concern basis as remaining appropriate as the charitable company has adequate resources to continue in operational existence for the foreseeable future. Thus, they continue to adopt the going concern basis of accounting in preparing the annual financial statements.

## 2.3 Incoming Resources

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

The recognition of income from legacies is dependent on establishing entitlement, the probability of receipt and the ability to estimate with sufficient accuracy the amount receivable. Evidence of entitlement to a legacy exists when the charitable company has sufficient evidence that a gift has been left to them (through knowledge of the existence of a valid will and the death of the benefactor) and the executor is satisfied that the property in question will not be required to satisfy claims in the estate. Receipt of a legacy must be recognised when it is probable that it will be received and the fair value of the amount receivable, which will generally be the expected cash amount to be distributed to the charitable company, can be reliably measured.

Grants are included in the Statement of Financial Activities on a receivable basis. The balance of income received for specific purposes but not expended during the period is shown in the relevant funds on the Statement of Financial Position. Where income is received in advance of entitlement of receipt, its recognition is deferred and included in creditors as deferred income. Where entitlement occurs before income is received, the income is accrued.

No amounts are included in the financial statements for services donated by volunteers. Donated services are recognised as income when control is obtained over the item, the receipt of economic benefit is probable and it can be measured reliably.

Other income is recognised in the period in which it is receivable and to the extent the goods have been provided or on completion of the service.

## 2.4 Resources Expended

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

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

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

Governance costs are those costs incurred directly with expenditure related to charity compliance and statutory requirements.

All expenditure is inclusive of irrecoverable VAT.

## 2.5 Interest Receivable

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

## 2.6 Taxation

The charitable company is considered to pass the tests set out in Paragraph 1 Schedule 6 of the Finance Act 2010 and therefore it meets the definition of a charitable company for UK corporation tax purposes. Accordingly, the charitable company is potentially exempt from taxation in respect of income or capital gains received within categories covered by Chapter 3 Part 11 of the Corporation Tax Act 2010 or Section 256 of the Taxation of Chargeable Gains Act 1992, to the extent that such income or gains are applied exclusively to charitable purposes.

## **Intangible Assets and Amortisation**

Intangible assets are capitalised and recognised when future economic benefits are probable and the cost or value of the asset can be measured reliably.

Intangible assets are initially recognised at cost. After recognition, under the cost model, intangible assets are measured at cost less any accumulated amortisation and any accumulated impairment losses.

Amortisation is provided on intangible assets at rates calculated to write off the cost of each asset on a straight-line basis over its expected useful life.

The estimated useful lives are as follows:

Amortisation is provided on the following basis:

Computer software % Straight line over 5 years

## **Tangible Fixed Assets and Depreciation**

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

Depreciation is charged so as to allocate the cost of tangible fixed assets less their residual value over their estimated useful lives.

Depreciation is provided on the following bases:

Short-term leasehold property - 10% or straight line over the life of the lease

Motor vehicles

- Straight line over 5 years

Fixtures and fittings

- Straight line over 3, 5 or 10 years

### 2.9 Investments

Fixed asset investments are a form of financial instrument and are initially recognised at their transaction cost and subsequently measured at fair value at the Statement of Financial Position date, unless the value cannot be measured reliably in which case it is measured at cost less impairment. Investment gains and losses, whether realised or unrealised, are combined and presented as 'Gains/(Losses) on investments' in the Statement of Financial Activities.

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

## 2.10 Stocks

Stocks are valued at the lower of cost and net realisable value after making due allowance for obsolete and slow-moving stocks.

### 2.11 Debtors

Trade and other debtors are recognised at the settlement amount after any trade discount offered. Prepayments are valued at the amount prepaid net of any trade discounts due.

## 2.12 Cash at Bank and in Hand

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

## 2.13 Liabilities and Provisions

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

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

Provisions are measured at the best estimate of the amounts required to settle the obligation. Where the effect of the time value of money is material, the provision is based on the present value of those amounts, discounted at the pre-tax discount rate that reflects the risks specific to the liability. The unwinding of the discount is recognised in the Statement of Financial Activities as a finance cost.

### 2.14 FinancialInstruments

The charitable company only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value with the exception of bank loans which are subsequently measured at amortised cost using the effective interest method.

### 2.15 Finance Leases and Hire Purchase

Assets obtained under hire purchase contracts and finance leases are capitalised as tangible fixed assets. Assets acquired by finance lease are depreciated over the shorter of the lease term and their useful lives. Assets acquired by hire purchase are depreciated over their useful lives. Finance leases are those where substantially all of the benefits and risks of ownership are assumed by the charitable company. Obligations under such agreements are included in creditors, net of the finance charge allocated to future periods. The finance element of the rental payment is charged to the Statement of Financial Activities so as to produce a constant periodic rate of charge on the net obligation outstanding in each period.

## 2.16 Operating Leases

Rentals paid under operating leases are charged to the Statement of Financial Activities on a straight line basis over the lease term.

## 2.17 Pensions

The charitable company operates a defined contribution pension scheme and the pension charge represents the amounts payable by the charitable company to the fund in respect of the year.

## 2.18 Fund Accounting

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

Restricted funds are funds which are to be used in accordance with specific restrictions imposed by donors or which have been raised by the charitable company for particular purposes. The costs of raising and administering such funds are charged against the specific fund. The aim and use of each restricted fund is set out in the notes to the financial statements.

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

## **Critical Accounting Estimates** and Areas of Judgement

In the application of the Charity's accounting policies, management are required to make judgements, estimates and assumptions about the carrying value of assets and liabilities that are not readily apparent from other sources. The estimates and underlying assumptions are based on historical experiences and other factors that are considered to be relevant. Actual results may differ from these estimates.

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

The key sources of estimation uncertainty that have a significant effect on the amounts recognised in the financial statement are described below:

Depreciation - useful expected life

Tangible fixed assets which are valued at cost less accumulated depreciation spread out over the useful life of the individual assets. The useful life is subject to managements judgement based on the utilisation of the assets within the business. The assets are reviewed periodically to ensure that the basis remains appropriate and is amended where necessary.

## Income from donations and legacies

	Unrestricted	Restricted	Total	Total
	funds	funds	funds	funds
	2022	2022	2022	2021
	£	£	£	£
Donations incl "in memory of" and anniversaries	87,101		87,101	80,531
Regular giving schemes	85,573	-	85,573	96,828
Collection tins	12,641		12,641	7,952
Statutory giving	5,774		5.774	29,036
Corporate	83,895		83,895	37,536
Legacies	201,133		201,133	113,316
Grants	10,600	126,735	137.335	207,049
Total 2022	486,717	126,735	613,452	572,248
Total 2021	374,573	197,675	572,248	

## Income from charitable activities

		Community			
	Emergency response	emergency medicine	Community engagement	Total activities	Total activities
	2022	2022	2022	2022	2021
	£	£	£	£	£
Sale of goods			222,509	222,509	113,833
Clinical governance			44,558	44,558	50,035
Education		- 1	392,927	392,927	101,199
Commissioned services		1,969,486		1,969,486	1,911,539
Grants	389,894			389,894	381,348
Event medical support	- A ] - E	and the	3,990	3,990	1,145
	389,894	1,969,486	663,984	3,023,364	2,559,099

## 6. Income from other trading activities

Income from fundraising events

Fundraising events	funds 2022 £ 31,677	funds 2022 £ 31,677	funds 2021 £ 6,172
Other trading activities	7,033	7,033	10,117
	38,710	38,710	16,289
Total 2021	16,289	16,289	

## 7. Investment income

	Unrestricted funds 2022	Total funds 2022	Total funds 2021
	€	2022 £	2021 £
Interest received	148	148	124
Total 2021	124	124	

## 8. Other incoming resources

	Unrestricted funds 2022	Total funds 2022	Total funds 2021
	£	£	£
Miscellaneous income	7	7	2,152
Total 2021	2,152	2,152	

## **Total resources expended**

	Donations and legacies	Emergency response	Community emergency medicine	Community engagement	Investment management costs	Total funds 2022	Total funds 2021 £
Costs directly allocated to activities:							
Staffing	173,480	19,196	1,107,932	305,668		1,606,276	1,332,609
Medical equipment & consumables		155,611	65,419	5,231		226,261	176,823
Clinical training	A	1,220	2,670		9	3,890	12,509
Responder training	-	10,604		-	7 . I .	10,604	12,421
Vehicle costs		20,799	1,167	2,073	-	24,039	38,612
Purchase of goods for resale	-	1,284		162,189	, i .	163,473	45,410
Provision of external training		-		65,820		65,820	13,066
Fundraising	2,500					2,500	1,146
Support costs allocated to activities:							
Staff costs	34,312	305,190	187,933	120,793	1 - 11, 1	648,228	365,132
Staff related expenses	4,111	33,315	32,314	34,449		104,189	54,443
HQ Premises	3,974	12,767	27,022	8,440		52,203	45.933
Office expenses	6,596	24,340	25,037	13,363		69,336	67,107
Advertising	11,512	2,567	3.972	5.491		23,542	14,423
Vehicle costs	2,079	27,736	86,279	14,256		130,350	32,744
IT costs	11,955	22,047	25,838	13,860		73,700	50,526
Insurance	2,354	7,061	26,094	4,707		40,216	33,993
Finance costs	1,879	(1,852)	3,687	4,769	3,080	11,563	24,179
Depreciation of tangible fixed assets	8,539	57.537	58,903	9,204		134,183	90,412
Legal and professional fees	6,952	14,656	19,465	9,801		50,874	40,517
Governance costs	895	2,685	3,579	1,790		8,949	8,187
Loss on disposal and reclassification of fixed assets	428	6,749	4,267	855		12,299	13.197
Total expenditure	271,566	723,512	1,681,578	782,759	3,080	3,462,495	2,473,389

In. Vantrais i cilimitei driaii	10.	<b>Auditors</b>	remuneration
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	2022 €	2021 £
Fees payable to the charitable company's auditor for the audit of the charitable company's annual accounts	9,000	7,500
Fees payable to the charitable company's auditor in respect of: All non-audit services not included above	3,950	1,065

## 11. Staff costs

	2022	2021
	£	£
Wages and salaries	1,894,647	1,392,190
Social security costs	179,003	122,048
Contribution to defined contribution pension schemes	72,950	51,940
	2,146,600	1,566,178

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

		As restated
	2022	2021
	No.	No.
Average monthly headcount	96	62

The average headcount expressed as full-time equivalents was:

	2022 No.	2021 No.
Administration	10	9
Fundraising	5	5
Emergencyresponse	5	4
Community emergency medicine	23	19
Community engagement	7	4
	50	41

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

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

The key management personnel, as listed in the Trustees' Annual Report, received employee benefits totalling £424,284 (2021 - £412,338).

## 12. Trustee's remuneration and expenses

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

The charitable company has purchased professional indemnity insurance on behalf of the Trustees for claims made by third parties arising from:

- Fidelity loss
- · Loss of or damage to documents
- Pollution

The cost of this insurance is £689 (2021 - £763).

During the year ended 31 March 2022, no Trustee expenses have been incurred (2021 - £NIL).

3. Intangible assets	
	Computer software
Cost	
Additions	18,315
Reclassification	40,458
At 31 March 2022	58,773
Amortisation	
Charge for the year	9,499
Reclassification	16,588
At 31 March 2022	26,087
Net book value	
At 31 March 2022	32,686
At 31 March 2021	

During the year, fixed assets with a net book value of £23,870 were reclassified from tangible fixed assets to intangible fixed assets.

## 14. Tangible fixed assets

	Short-term leasehold property	Motor vehicles	Fixtures and fittings	Total
Cost or valuation				
At 1 April 2021	39,026	369,825	647,078	1,055,929
Additions		22,427	237,227	259,654
Disposals	(6,000)	(35,400)	(10,904)	(52,304)
Reclassification			(40,458)	(40,458)
As at 31 March 2022	33,026	356,852	832,943	1,222,821
Depreciation				
At 1 April 2021	17,276	138,117	315,752	471,145
Charge for the year	8,755	55,152	60,777	124,684
On disposals		(10,620)	(9,686)	(20,306)
Reclassification			(16,588)	(16,588)
As at 31 March 2022	26,031	182,649	350,255	558,935
Net book value				
At 31 March 2022	6,995	174,203	482,688	663,886
At 31 March 2021	21,750	231,708	331,326	584,784

The net book value of tangible fixed assets includes £98,980 (2021 - £153,041) in respect of assets held under hire purchase contracts.

During the year, fixed assets with a net book value of £23,870 were reclassified from tangible fixed assets to intangible fixed assets.

5. Fixed asset investments	Investments in subsidiary companies	Listed investments	Tota
Cost or valuation	£	£	
At 1 April 2021		295,561	295,561
Additions	1		
Reclassification	<u> </u>	15,027	15,027
As at 31 March 2022	1	310,588	310,589
Net book value			
At 31 March 2022	1	310,588	310,589
At 31 March 2021		295,561	295,56

## Principal subsidiaries

The following was a subsidiary undertaking of the charitable company:

Name	Company number	Registered office or principal place of business	Principal activity
LIVES Education Limited	13887550	Lives Headquarters, Units 5-8 Birch Court, Boston Road Industrial Estate, Horncastle, Lincolnshire, LN9 6SB	Training services

Class of shares	Holding	Included in consolidation
Ordinary	100%	No

The financial results of the subsidiary for the year were:

Name

LIVES Education Limited

The subsidiary company was dormant throughout the period and did not start trading until 1 April 2022. As such, consolidated accounts have not been prepared.

16. Stocks		
	2022 £	2021 £
Finished goods and goods for resale	57.790	45,310
7. Debtors		
7. Debtors	2022	2021
7. Debtors  Due within one year:	2022 £	2021 £
Due within one year:	£	£
<b>Due within one year:</b> Trade debtors	164,708	£

18. Creditors: Amounts falling due within one year		
	2022	2021
	٤	£
Trade creditors	134,019	187,722
Other taxation and social security	84.737	181,361
Obligations under finance lease and hire purchase contracts	32,470	37,574
Other creditors	11,175	7,928
Accruals and deferred income	187,265	211,786
	449,666	626,371
	2022 £	2021 £
Deferred income at 1 April 2021	149,986	44,326
Resources deferred during the year	51,526	149,986
Amounts released from previous periods	(149,986)	(44,326)
	51,526	149,986

Year end deferred income is for income received in the year relating to services and contracts that are being carried out in the 2022-23 financial year.

## 19. Creditors: Amounts falling after more than one year

	2022	2021
	€	£
Net obligations under finance lease and hire	e purchase contracts <b>67,079</b>	102,321

Liabilities under hire purchase contracts are secured on the assets to which they relate.

## 20. Statement of funds

Statement of funds - current year

	Balance at 1 April 2021 £	Income	Expenditure	Gains/ (Losses)	Balance at 31 March 2022
Unrestricted funds					
General Funds - all funds	1,266,467	3,159,052	(3,014,872)	15,026	1,425,673
Restricted income funds				No.	
First Responders	7,939	390,894	(383,409)		
Education Technology Fund	28,036		(2,048)		25,988
CFR Recruitment Fund	12,316	1,000	(13,316)		
CEMS Vehicle Fund	6,400		(1,600)	714 E	4,800
Covid-19 Fund		1,000	(1,000)	-	
Medic 50 Fund	33,635		(8,191)		25,444
Defibrillator Replacement Programme Fund	46,462	59,036	(18,422)		87,076
Interactive Education Fund	7.500		(2,894)		4,606
Code Crimson		10,000		A Charles	10,000
Medic 50 Equipment Fund		54,699	(1,319)		53,380
	142,288	516,629	(447,623)		211,294
Total of funds	1,408,755	3,675,681	(3,462,495)	15,026	1,636,967

## Description, nature and purpose of restricted funds

## **First Responder Grant**

An annual grant is received from NHS Lincolnshire CCG, NHS North Lincolnshire CCG and NHS North East Lincolnshire CCG to fund the provision of First Responders across the county.

## **Education Technology Fund**

Ufi VocTech Trust provided a grant to develop a virtual learning platform to enable Responders to maintain their competency during Covid restrictions.

## **CFR Recruitment Fund**

Established to collect donations and grants to support the recruitment of new Community First Responders. This contributes to the cost of recruitment events, including wages and venue hire, and the training/equipping of new CFRs.

### **CEMS Vehicle Fund**

BASICs provided a grant towards the blue light installation of 3 vehicles for the Community Emergency Medicine Service. This cost is incorporated in the overall cost for the vehicles which are depreciated over 5 years.

### Covid-19 Fund

Established to collect donations and grants towards the purchase of additional resources to equip Responders with appropriate PPE to allow them to continue responding safely during Covid.

## Medic 50 Fund

BASICs provided a grant of £35,000 to fund a new vehicle for the Medic 50 service which provides critical care cover to the East Coast of Lincolnshire.

### **Defibrillator Replacement Programme Fund**

Established to collect donations and grants towards the cost of replacing defibrillators for all First Responders within LIVES.

## **Interactive Education Fund**

Established to purchase interactive display equipment to engage audiences of all ages, show our audiences how important it is to learn CPR skills and inspire those who are more interested to become a LIVES community first responder.

### Code Crimson

Established to collect donations and grants to support the integration of blood into our critical care response and fund the provision of equipment to safely transport blood from each Trauma unit in the county.

## **Medic 50 Equipment Fund**

Established to collect donations and grants to fund the purchase of advanced life-saving and diagnostic equipment specifically for our Medic 50 critical care car which covers the East Coast of Lincolnshire.

## Statement of funds - prior year

Unrestricted funds General	As restated Balance at 1 April 2020 £	Income £	Expenditure £ (2,006,154)	Gains/ (Losses) £	As restated Balance at 31 March 2021 £
Restricted funds					
First Responders		391,348	(383,409)		7.939
Education Technology Fund		49,334	(21,298)	-	28,036
CFR Recruitment Fund		19,460	(7,144)	-	12,316
CEMS Vehicle Fund		8,000	(1,600)		6,400
Covid-19 Fund	-	51,781	(51,781)	-	× .
Medic 50 Vehicle Fund	-	35,000	(1,365)		33,635
Defibrillator Replacement Programme Fund	30,500	16,600	(638)		46,462
Interactive Education Fund		7,500		110715	7,500
	30,500	579,023	(467,235)		142,288
Total of funds	677,366	3,149,912	(2,473,389)	54,866	1,408,755

#### 21. **Summary of funds**

## Summary of funds - current year

Total of funds	1,408,755	3,675,681	(3,462,495)	15,026	1,636,967
Restricted funds	142,288	516,629	(447,623)	-	211,294
General funds	1,266,467	3,159,052	(3,014,872)	15,026	1,425,673
	Balance at 1 April 2020 £	Income £	Expenditure £	Gains/ (Losses)	Balance at 31 March 2022 £

## Summary of funds - prior year

Total of funds	677.366	3,149,912	(2,473,389)	54,866	1,408,755
Restricted funds	30,500	579,023	(467,235)	*	142,288
General funds	646,866	2,570,889	(2,006,154)	54,866	1,266,467
	As restated Balance at 1 April 2020 £	Income £	Expenditure £	Gains/ (Losses) £	As restated Balance at 31 March 2021 £

#### 22. Analysis of net assets between funds

## Analysis of net assets between funds - current year

	Unrestricted funds 2022 £	Restricted funds 2021	Total funds 2021
Tangible fixed assets	515,972	147,914	663,886
Intangible fixed assets	32,686	-	32,686
Fixed asset investments	310,589	477	310,589
Current assets	1,083,171	63,380	1,146,551
Creditors due within one year	(449,666)		(449,666)
Creditors due in more than one year	(67,079)		(67,079)
Total	1,425,673	211,294	1,636,967

## Analysis of net assets between funds - prior year

Total	1,266,467	142,288	1,408,755
Creditors due in more than one year	(102,321)		(102,321)
Creditors due within one year	(626,371)		(626,371)
Current assets	1,229,347	27,755	1,257,102
Fixed asset investments	295,561		295,561
Tangible fixed assets	470,251	114,533	584,784
	Unrestricted funds 2021 £	Restricted funds 2021 £	Total funds 2021 £

#### Reconciliation of net movement in funds to net cash flow from operating activities 23.

	2022	2021
	£	£
Net income for the year (as per Statement of Financial Activities)	228,212	731,389
Adjustments for:		
Depreciation charges	124,684	90,412
Amortisation charges	9,499	-
Loss/(gain) on investments	(15,028)	(54,866)
Loss/(profit) on the sale and reclassification of fixed assets	12,298	13,197
Increase in stocks	(12,480)	(20,387)
Increase in debtors	(135,703)	(124,088)
Increase/(decrease) in creditors	(171,601)	234,482
Net cash provided by operating activities	39,881	870,139

Analysis of cash and cash equivalents			
		2022	2021
		£	£
Cash in hand	والمحاصرة	703,062	961,796
Total cash and cash equivalents		703,062	961,796
25. Analysis of changes in net debt			
	At 1 April		At 31 March
	2021	Cash flows	2022
	2	£	£
Cash at bank and in hand	961,796	(258,734)	703,062
Hire purchase	(186,269)	46,374	(99,549)
	821,901	(218,388)	603,513
26. Capital commitments			
		2022	2021
		£	£
Contracted for but not provided in these financial statements			
Acquisition of tangible fixed assets		58,716	A

## **Pension commitments**

The charitable company operates a defined contribution pension scheme. The assets of the scheme are held separately from those of the charitable company in an independently administered fund. The pension cost charge represents contributions payable by the charitable company to the fund and amounted to £72,950 (2021 -£51,940). £10,576 (2021 - £7,734) was payable to the fund at the balance sheet date and is included in creditors.

#### 28. **Operating lease commitments**

At 31 March 2022 the charitable company had commitments to make future minimum lease payments under noncancellable operating leases as follows:

	420,346	272,490
Later than 5 years	112,292	
Later than 1 year and not later than 5 years	231,827	185,991
Not later than 1 year	76,227	86,499
	2022 £	2021 £

The following lease payments have been recognised as an expense in the Statement of Financial Activities:

	2022	2021
	£	£
Operating lease rentals	72,947	27,500

#### Members' liability 29.

Each member of the charitable company undertakes to contribute to the assets of the company in the event of it being wound up while he/she is a member, or within one year after he/she ceases to be a member, such amount as may be required, not exceeding £10 for the debts and liabilities contracted before he/she ceases to be a member.

#### **Related party transactions** 30.

The charitable company purchased management training/consultancy services amounting to £3,375 (2021 - £2,590) from Taking Charge of Your Success Ltd, a company in which Hilary Gibb is a director. The balance owed at the year end was £300 (2021 - £1,170).

#### **Controlling party** 31.

There is no ultimate controlling party.

# LIVES.

