

Company No 03063721
Charity No 1048934

WOODLANDS HOSPICE CHARITABLE TRUST
LIMITED

CONSOLIDATED FINANCIAL STATEMENTS
FOR YEAR ENDED 31 MARCH 2018

WOODLANDS HOSPICE CHARITABLE TRUST LIMITED

CONSOLIDATED FINANCIAL STATEMENTS

YEAR ENDED 31 MARCH 2018

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WOODLANDS HOSPICE CHARITABLE TRUST LIMITED

COMPANY INFORMATION

YEAR ENDED 31 MARCH 2018

Company Registration No.	03063721
Charity Registration No	1048934
Registered Office	AUH Campus Longmoor Lane Liverpool L9 7LA
Directors and Trustees	B. Bartlett BA Hons Dip Arch RIBA (Chairman) C.M. Hubbert MRCP DRCOG (Vice Chairman) C. Brennand FCA (Hon. Treasurer) W.J. Wood BSc MHSM Dip.HSM E. McDonald B. Lynne Roberts BA, Dip OT, PGCE, MBA, PhD A. Johnson S. Ollerhead A. Keith D. Brown
Company Secretary	R Milnes (MCIPD)
Auditors	Lonsdale & Marsh 7 th Floor Cotton House Old Hall Street Liverpool L3 9TX
Solicitors	Hill Dickinson No 1 St Pauls Square Liverpool L3 9SJ
Bankers	National Westminster Bank Plc Corner Longmoor Lane and Cedar Road Liverpool L9 0EG
Investment Managers	Investec Wealth & Investment Limited The Plaza 100 Old Hall Street Liverpool L3 9AB

WOODLANDS HOSPICE CHARITABLE TRUST LIMITED

TRUSTEES' ANNUAL REPORT

YEAR ENDED 31 MARCH 2018

The Trustees present their report and the financial statements of the charity for the year ended 31 March 2018.

The company information set out on page 1 forms part of this report. The financial statements have been prepared in accordance with the accounting policies set out in Note 1 to the accounts and comply with the Charities Act 2011, Companies Act 2006, the Statement of Recommended Practice - Accounting and Reporting by Charities and FRS 102 and with the company's Memorandum and Articles of Association.

INTRODUCTION

The incorporated charity is governed by the Memorandum and Articles of Association. The first members of the council of management were appointed trustees of Woodlands Hospice Charitable Trust under the terms of a Trust Deed dated 6 July 1992.

LEGAL STATUS

The charity, which was incorporated on 1 June 1995, is limited by guarantee whereby each member of the company undertakes to contribute such amount as may be required, not exceeding £1, to the company's assets if it should be wound up while he/she is a member; or within one year after he/she ceases to be a member, for payment of the company's debts and liabilities contracted before he/she ceases to be a member, and of the costs, charges and expenses of winding up, and for the adjustment of the rights of the contributories among themselves.

PURPOSE and PUBLIC BENEFIT

The purpose of Woodlands Hospice is to promote and deliver a specialist palliative care service to the residents of North Liverpool, South Sefton, Kirkby and elsewhere, living with a life limiting illness through the establishment and maintenance of Hospice facilities.

The direct public benefits that flow from this purpose are :- (i) Improving the quality of life of those living with life limiting illnesses, (ii) Reduction in Hospital admissions of those who could benefit from Hospice Care, (iii) Emotional and psychological support for patients and their families, (iv) Education and training of other local organisations caring for those with end of life care needs (v) Allowing patients to die in their preferred place of care, (vi) Enhancing and retaining independence for those living with a life limiting illness.

These benefits can be evidenced through the feedback received from patients and families satisfaction surveys, positive feedback received from Trustee visits and the Key Performance Indicators reported to Trustees, senior staff and commissioners.

There is no private benefit flowing from the organisation. Beneficiaries of Woodlands Hospice are people living with a life limiting illness and their families living in the local or wider area.

The Trustees have complied with a duty in Section 4 of the Companies Act 2006 and confirm that they have referred to the guidance contained in the Charity Commission's general guidance on public benefit when reviewing the charity's aims and objectives and in planning future activities.

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ORGANISATION

A Board of Trustees comprising twelve members (two current vacancies carried in year) administers the charity. New Trustee appointments are recommended by the Nominations Committee and approved by the Board. A full induction programme is provided for all new Trustees to ensure that they are aware of the charity's objects, strategy and activities and their responsibilities as Trustees.

The Board has established formally constituted sub-committees, each with specific terms of reference and functions, delegated by the Board and with a Trustee as Chair. The established committees are Personnel, Finance, Clinical Governance, and Governance (which overviews the Staff -led Health and Safety Committee). The Finance Committee also overviews the Income Generation sub-committee established two years ago and the Fundraising Regulation Task and Finish Group set up for a restricted period of time to address the changes in the Fundraising Regulation and which was disbanded in July 2018. These committees meet on a regular, scheduled basis with at least 3 meetings held each year of each committee. Full minutes of all committee meetings are submitted to the Board meetings held every two months.

The Trustees delegate the day to day management of the Hospice to the Chief Executive who works closely with the Clinical Lead and the Patient Services Manager as a Senior Management Team. Day to day decisions are taken within individual teams, with managers where appropriate, and escalated to the Senior Management Team if they impact on the wider organisation.

The pay of the Senior Management Team is dealt with differently for each individual depending on their primary role. The Chief Executive's salary is a 'spot salary' based on benchmarking against other Hospices of similar size and location at the time of appointment 7 years ago with no change since other than application of the Hospice wide Cost of Living pay rises. These are recommended by the Trustee led Personnel Committee, supported by the Trustee Led Finance Committee and approved by the Board of Trustees. The Clinical Lead (Consultant in Palliative Medicine) is provided to the Hospice from the local Hospital NHS Foundation Trust under a Service Level Agreement and the salary is established through the British Medical Association (BMA) nationally agreed pay band for Consultants. The Patient Services Manager's salary, mirrors the NHS nationally agreed Agenda for Change payscale, following Job Evaluation utilising the NHS Job Evaluation criteria. This scale is used for all clinical staff at the Hospice.

The Trustees participate in a rolling programme of unannounced reviews within the Hospice monitoring compliance with the Care Quality Commission Fundamental Standards of Quality and Safety.

CONSTITUTION

The Woodlands Hospice Charitable Trust was established as a Charitable Trust by a Trust Deed dated 6 July 1992 under registered number 1048934.

The Trust was wound down under the terms and conditions of the Trust Deed on 31 December 1995 and at that date the assets of the Trust were donated to Woodlands Hospice Charitable Trust Limited. The company was incorporated on 1 June 1995 under the Companies Act 1985 as a private company limited by guarantee under company number 03063721.

PRINCIPAL ACTIVITY

The principal activity of the company during the year was to deliver a specialised palliative care service to local people and their families.

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REVIEW OF DEVELOPMENTS, ACTIVITIES AND ACHIEVEMENTS

The Senior Management team, led by Chief Executive, Mrs Rose Milnes, has continued to deliver patient services to meet the ongoing needs of our patients and their families and also the needs of commissioners in the constantly pressured healthcare system. The robust governance structure in place has ensured continuing high standards of quality and safety and ongoing compliance with regulatory requirements. The follow up inspection by CQC in April 2017 resulted in a 'good' classification being reinstated across all areas of care, quality and safety following a single breach identified the previous year in safeguarding.

2017/18 was the second year of a two year strategic plan and the principal objectives this year were:

Patient Services

- Continue to provide the highest quality care to all our patients and their families and/or carers and receive excellent inspection reports from all statutory bodies, e.g. Care Quality Commission, Environmental Health Agency and high standards of patient service measured against our quality markers.
- Maintain an average bed occupancy of greater than 85% and an average length of stay of 12-14 days and continue to be flexible with all admissions including weekends and bank holidays.
- Achieve our Quality Account Priorities for 2017/18.
- Develop approaches to falls prevention and management for Inpatients.
- Improve handover of information about patient care.
- Enhance the support for young people.
- Further develop the revised end of life communication records.
- Ensure individualised care plans and care packages for all patients.
- Ensure a robust audit programme (clinical and non-clinical) is carried out with documented evidence of high performance.
- Receive consistent positive feedback from all patients and their families/carers through a variety of collation methods including patient satisfaction surveys, comments, compliments, Patient Services Manager ward rounds and Trustee visits.
- Review and revise, if appropriate, services available within the Well-being and Support Centre (WBSC) to ensure increased occupancy levels to an average of 70% and optimisation of all facilities.
- Increase the number of patients in WBSC with a non-cancer diagnosis.
- Continue to work with Knowsley and Liverpool CCGs to encourage them to fund a Hospice at Home service to ensure consistency of service for all our patients.
- Continue to work with nursing homes in South Sefton to improve confidence in end of life skills and prevent unnecessary hospital admissions.
- Continually review the Quality Assurance Framework including all Board sub committees and working groups.

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Facilities and infrastructure

- Ensure the best possible environment for patients and visitors to ensure dignity and respect with quality and safety paramount.
- Further develop the PLACE (Patient Led Assessment of the Care Environment) process.
- Reconsider the feasibility of extending patients bedrooms and repositioning the en-suite bathrooms.
- Consider a replacement programme for ill-fitting Inpatient bedroom patio doors and windows.
- Draw up plans for the conversion of the Garden Room and Patio Room to be joined up and extended into the garden space to create a large room for Wellbeing and Support Centre Group activities.
- Review the space allocated for use by children and young people.
- Review and update the Business Continuity plan to ensure robust systems and procedures in place with heightened staff awareness.
- Work with Aintree University Hospital to join with them in their contingency arrangements should the water supply become interrupted.
- Review and update the contract for provision of laundry, seeking alternative suppliers if appropriate.
- Review and update all printers across the Hospice to improve efficiency and costs of replacement toners.
- Reconsider opening times of café to accommodate patients and families at weekends and evenings.

Patient Information Systems/Data collection and Reporting

- Explore how data and intelligence can be improved to support continuous improvement to care and influence impact reporting
- Play a key role in the development of the integrated patient information system across Liverpool (Electronic Patient Record or EPR).
- Further develop the Key Performance Indicators (KPIs) including the introduction of KPIs for Fundraising and Trading and share readily with all staff to celebrate success and address shortcomings.
- Actively participate in the EPaCCS (Electronic Palliative Care Co-ordination System) liaising with other providers and the commissioners to share patient information in a timely manner and improve patient care.
- Continue to establish the use of Palliative Care Outcome Measures to help identify what is important to the patient, and clinical decision-making and show the impact of care delivered.
- Continue to develop strong Information Governance processes and organisational culture.
- Respond to developments in the Data Protection Act due 2018.

Human resources

- Ensure the workforce is fit for purpose with clear leadership permeating through the Hospice supporting the ongoing development of a highly skilled, competent workforce fit to face the future challenges of specialist palliative care and end of life services.
- Actively recruit a new Chair of the Board of Trustees to ensure timely replacement of retiring Chair in March 2017.
- Review the skill mix of the Board of Trustees and actively recruit to identified gaps as vacancies arise and address succession planning.

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- Develop an ongoing training and development programme for all Trustees to ensure confidence in their role and responsibilities.
- Review and implement leadership and management training across the senior teams to ensure appropriate qualifications, skills and knowledge exist to take the organisation forward in changing and uncertain times.
- Confirm and maintain robust staffing establishments for each service with appropriate policies and procedures for addressing varying staffing levels (e.g. through sickness absence, study leave, one-to-one nursing, etc.).
- Further review and revise the recruitment and induction programme for all staff and volunteers to ensure they are efficient and effective.
- Foster an environment of ongoing learning and development for all staff.
- Ensure ongoing appraisals and personal development reviews remain a priority in all teams.
- Review and revise contracts with healthcare professionals training organisations to ensure robust procedures in place for student placements.
- Review and revise the staff support systems in place to ensure a more transparent, accessible support system for all staff and volunteers.

Volunteers

- Review and revise the contribution of volunteers to all services, expanding to new areas as appropriate, in particular, to assist nursing roles on the In-patient Unit.

External Relationships and collaboration

- Work with key partners and organisations to consider the future and help influence the direction of the next two years for end of life care to ensure that everyone approaching the end of life has access to high quality care with their needs and wishes being met, as far as is practicably possible.
- Ensure that end of life care is a core priority within the reformed health and social care services.
- Ensure active participation in all local and regional strategic network groups addressing end of life priorities and issues. (This includes discussion around the planned merger between Aintree University Hospital and The Royal Liverpool Hospital).
- Develop and implement more robust strategies for integration with all providers including the community to ensure a better joined up service for all our patients across their end of life journey.
- Actively participate in local and regional groups regarding Advance Care Planning working together with other providers to ensure the ACP is a live document and acted upon appropriately wherever the patient may be.
- Increase the profile of the Hospice with local clinicians and the public.

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Education and Research

- Deliver robust education programmes to a variety of audiences and help improve their understanding and delivery of specialist palliative care.
- Continue to collaborate in the production of a local education strategy which will outline in more detail the education programme to be delivered.
- Work with other local providers participating in joint education programmes.
- Gain a full understanding of the role the Hospice can play in local research programmes.
- Participate in identified research projects as appropriate.

Income generation

- Revisit the fundraising strategy to ensure future sustainability, incorporating significant growth in the trading activities and corporate fundraising.
- Review and enhance the events programme to maximise return on investment.
- Develop a legacy strategy to optimise support from the public via gifts in wills.
- Develop and implement a full marketing & PR strategy.
- Recruit to a revised Patrons and Ambassadors Programme to engage public support.
- Respond positively to developing Fundraising Regulation following the Etherington Review.

Finance

- Develop a more robust financial strategy to ensure future sustainability.
- Ensure contingency planning for the possibility of reduced funding through Clinical Commissioning Groups (CCGs) cost improvement programmes.
- Consider further cost savings programmes in house.
- Review, revise and streamline the financial processes as appropriate to ensure best value for money.
- Ensure that the Hospice is fulfilling its duties in terms of both the auto enrolment pension schemes and also the NHS pension scheme.
- Implement systems to ensure that the Hospice makes the best use of the Hospice VAT reclaim scheme.

The Trustees consider the performance of the charity in this context and believe that 2017/18 was a very good year with highly satisfactory results in an extremely challenging financial climate.

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STRATEGIC REPORT – ACHIEVEMENTS AND PERFORMANCE

Patient Services

The Quality Account evidences how well we have met our 2017/18 objectives in relation to patient services and also the priorities we set for improving patient safety, clinical effectiveness and patient and family experience. The Quality Account has been published, as required by the Department of Health, on NHS Choices website.

<https://www.woodlandshospice.org/quality-accounts>

The Account shows the excellent progress made with the patient services objectives during this second year of our two year strategy, the majority of which have been achieved or developments evident.

Areas for further development in the forthcoming strategy include enhancing patient care in relation to the prevention and management of pressure ulcers. Current guidance and literature will be reviewed to ensure the Hospice policy reflects best practice. Additional factors specific to palliative care will be considered and incorporated into skin assessment criteria. The combined data from monthly audit and root cause analysis of all pressure ulcer incidents in the previous twelve months will be reviewed to identify areas for learning and development. Staff training will be enhanced and the impact of the training evaluated through a competency assessment framework.

We will also be looking to ensure Hospice end of life care documentation demonstrates evidence based practice. A multi professional task and finish group will lead on this and action will include a baseline audit of end of life care documentation based on NICE 2017 guidance. Enhancement to the documentation will be made to incorporate any recommendations from the audit. We will review staff training on care of the dying adult and use of enhanced documentation.

Current practice in Woodlands, as with many inpatient settings, is that two registered nurses are required to administer controlled drugs. The nursing team has highlighted that this practice can lead to a delay for some patients waiting for breakthrough pain relief which has led us to consider single nurse administration as many Hospices have already introduced this to excellent effect. The Hospice medicines management group will lead on this priority and actions will include a review of the current literature and guidance in relation to the safe administration of Controlled Drugs. A risk assessment will be undertaken in accordance with all regulatory requirements and guidance. If this is deemed to be the appropriate and safe way forward the group will develop a progress plan for implementation including a robust training and competency framework to support the implementation.

Activity in the Well-being and Support Centre declined during this year although those who did attend stayed with us for longer. The number of patients with a non-cancer diagnosis rose to 25% from the previous year of 16%, reflecting the work the team did during the year in highlighting our services to many different consultants and specialities. Discussions commenced during the year regarding further changes to the service to attempt to break down some barriers that existed for patients not wishing to attend the 'Hospice' early on in their illness. The Hospice is now considering moving some of the Wellbeing and Support Centre services out into the community including medical/nursing clinics and work is currently underway to develop a new model. Outpatient clinics were steady and saw almost 2,000 attendances during the year with group attendances also reaching almost 2,000. These appear to be popular ways of delivering our service.

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The Therapy led Outreach service in patients own homes has also grown in year with 20% of those patients being patients with a non-cancer diagnosis. The team continues to experience an ever increasing number of referrals to this service which at times has put added pressure on the services that the therapy team are able to provide in-house. There clearly appears to be an unmet need in this area of our service which we will highlight with NHS Commissioners.

The Hospice at Home Team for South Sefton continues to operate well and consistently receives positive feedback. The Consultants have prevented many crises at home through attendance by all relevant services at weekly multi-disciplinary team meetings held at the Hospice. Our specialist sitting service has seen an increased number of patients this year despite there being a lower number of sits. This is thought to be because patients are referred prior to commencement of a care package; once the care package has commenced, input from Hospice at Home is reduced. 94% of our patients with Hospice at Home input died at home in accordance with their wishes.

We continue to have dialogue with Knowsley CCG as to the benefits of having a Hospice at Home service but have made no real progress with this during the year. Liverpool CCG have their own End of Life care in the community programme and are tied into a 5 year contract for this so Hospice at Home is not an option there at the current time.

Regular reviews, evaluations and surveys continue to evidence consistently high standards of person centred care experienced by patients and their families/carers.

Our annual patient & family satisfaction survey was particularly pleasing with 37% return rate (an increase on previous year) and overwhelming positive feedback with constructive thoughts for improvement and development.

Our programme of regular 'Trustee visits' has continued during this period, with Trustees undertaking unannounced visits of all patient services examining policies, records and speaking to staff, patients and their families regarding their experiences. These visits were based on the Care Quality Commission Fundamental Standards of Quality and Safety. Excellent feedback has been received during these visits and any suggestions for improvements from observation by the Trustee or patient, their families or staff have been monitored to completion.

The Patient Services Manager has responsibility as the Care Quality Commission Registered Manager and undertakes regular ward rounds and observations of care to monitor standards. The comments received from patients and families in all services evidence the high quality of compassionate care that we aim to achieve and suggestions for improvement are encouraged and welcomed providing an opportunity to resolve any problems at the time.

Maintaining and improving, where possible, patient safety is paramount in the Hospice and our robust governance systems ensure that there is a proactive approach highlighting concerns and trends in patient safety issues. Our working groups such as infection prevention and control, medicines management, falls prevention, and tissue viability continually review Hospice practice in these areas, monitor national guidance and develop local strategies to improve patient safety.

Our Clinical Effectiveness Group, led by our Clinical Lead, comprises senior clinical staff and the Group meets regularly to steer clinical developments within the Hospice.

The Trustee-led Clinical Governance Committee keeps a keen watch on all clinical standards, activity and developments and has a key role in monitoring Quality Assurance.

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This last year the Patient, Friends and Family Forum chaired by our Quality and Improvement Manager has unfortunately dropped in numbers but has remained active in its role. The group has reviewed content of various leaflets including advanced care planning information aimed at patients and also reviewed content for the new electronic information boards. Members again took part in the Patient Led Assessment of the Clinical Environment (PLACE) review, with great endeavour. The Hospice is now actively looking for new group members to boost the group back to original numbers.

We believe that during the year we have continued, with our highly skilled, competent workforce, delivering high quality care to all.

Facilities and Infrastructure

The Hospice facilities are bright, clean and fresh and patients and families often comment on the open and welcome approach on arrival. We do not currently have a paid caretaker role and rely heavily on our amazing small team of volunteer maintenance men who undertake many duties including decorating, minor repairs, high level cleaning of gutters etc. We are however now looking to employ a caretaker part time to lead on these duties on a more planned basis to ensure our expected high standards of environmental cleanliness and maintenance are continually achieved.

The café continues to bring a sense of normality to patients and families as they enjoy a quiet sit and pleasant views of the gardens so meticulously maintained by our volunteers. We now open the café at weekends for a limited number of hours to ensure visitors and families can spend some 'down' time and enjoy a hot meal if required.

During our Trustees visits patients often talk about feeling safe in the Hospice and indeed their families also feel they are given the time to spend with their loved ones without worrying about their care and keeping them safe. Feedback collated is overwhelmingly positive and Trustees are proud of the standards achieved across all our services.

The members of our Patient, Family and Friends forum who undertook our PLACE assessment again this year reported a positive environment with some suggestions for improvement such as handrails being installed along the Well-being and Support Centre corridor for patient safety and also some changes to the baby changing room for ease.

The Capital Projects Committee has been looking at three main developments this year. Firstly, the children and young people's pavilion in the rear garden which has stimulated so much interest and support during the year. The required level of funding was raised by the year end from 14 different funders with contributions ranging from £10 to £17,000. The final plans were drawn up and work starts on the build in September 2018. The children and young people have been an integral part of the team developing this facility and are excited to see the finished building. Argos, on their corporate volunteering day, will be helping with areas such as painting and gardening. We all look forward to enjoying this much needed facility for the future.

Secondly we have been looking again at the merging of the Garden Room and Patio Room which has been put on hold a little whilst the pavilion has been in development but we will look to picking this back up in 2018/19.

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Finally, the Hospice is located on the Aintree University Hospital site and currently sits amongst a disused area of the Hospital site and is not a great path into our grounds at the current time. We are however delighted to have been involved this last year, as a key stakeholder, in the development of the Aintree Hospital site into a Health and Wellbeing campus for the future. This is an exciting positive development and includes an expansion of footprint for Woodlands Hospice which we will hopefully be able to use to improve our bedroom facilities and family facilities but will be subject to a successful capital appeal in the coming years.

The programme of renewing the bedroom doors and windows has progressed well with a number of rooms improved this year and we continue to submit grant applications to secure funding to complete this project.

The laundry contract was reviewed in year. Research into alternative providers did not prove to be viable and we were very happy to stay with the Aintree Hospital laundry with them also providing new curtains on an ongoing basis for the Hospice as part of the overall Service Level Agreement (SLA) without additional cost. This contract is now completed and working well. More homely bedding for patients is still a challenge due to the washing and infection control issues but softer colours at least are being considered.

The Business Continuity plan remains in place with no call for action during the year.

Patient Information Systems/Data collection and Reporting

Robust data collection and analysis is now embedded in daily routines and production of key reports for the Trustees and Commissioners an expectation. The reports were reviewed in year for Trustees and a new set of Key Performance Indicators (KPIs) developed for the Board giving overarching outcomes only with the full in-house set of KPIS being reviewed by Senior Managers and overseen by the Governance Committee. The full set is available for Trustees on request.

The reports set up for CCGs were also reviewed during the year and some additional demographic information included with patients' stories and outcomes of audit added for impact reporting.

Patient information systems are changing locally to assist with sharing of patient information across many providers. The big system change due in 2019 is the integrated Electronic Patient Records (EPR) for Aintree Hospital and the Royal Liverpool Hospital once merged. Woodlands participated fully in the development of the EPR as it relates to the Hospice and we are looking forward to the new system being implemented in due course. We have also continued to attend all meetings on the EPaCCs system which attempts to integrate data from GPs and Community Healthcare teams with Hospitals and Hospices.

The Hospice again achieved Level 2 in the NHS Information Governance Toolkit as required by our NHS Commissioners.

The Hospice developed a Trustee led Task and Finish Group to address General Data Protection Regulations (GDPR) as they related to Fundraising and the Governance Committee oversaw the development across the Hospice for all other GDPR implications including general data, patient data and staff and volunteers data. The Hospice had a number of action plans running to address all developments for GDPR and has achieved the majority of actions at this stage with plans to complete during 2018/19.

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Human resources

Our new Chair of the Hospice, appointed in July 2017, has led the Trustees well during the year and continues to develop knowledge and experience in the challenges of Specialist Palliative Care in the current day.

We have actively recruited one new Trustee, a Senior Nurse, in the year and continue our search for a solicitor and a board member with fundraising experience.

The Board all attended a Masterclass, facilitated by Hospice UK, in November 2017 which addressed issues of accountability, effective Board meeting agendas, Trustee visibility and strategic leadership. The day was extremely informative and beneficial to both new and longstanding Trustees. We have subsequently developed an action plan to address issues raised and have already changed the Board agenda to ensure discussion on strategic issues at every Board meeting and timed sections for decision making and information sharing. We will see these actions through to completion during 2018/19.

Staffing levels are well established to ensure a safe service delivered by a competent workforce and systems in place for covering absences through holidays and sickness. There have been challenging times in the year due to a shortage of Palliative Care Consultants locally and nationally and recruitment and sickness amongst the nursing team. We have however maintained our occupancy levels and delivered safe and effective care.

Staff training and development remains a high priority for the organisation including leadership and management training programmes. The Hospice delivered an in house training programme over 5 days for the Inpatient senior nursing team with excellent evaluation and implementation of learning.

Training for that team also took place on writing and delivering robust appraisals and objective setting and improvements have been seen with these.

Unfortunately, the mandatory training programme is still very reactive and during the year a key on line training tool originally shared with Aintree Hospital was withdrawn and Woodlands were no longer able to access the replacement system. A task and finish group is now being convened to address the whole of the training programme, including all on line training to ensure a robust, proactive system is in place by the end of 2018/19.

Staff support systems are critical to Hospices and the Family Support Team offer ongoing support to all staff. The senior managers continue to work with the published Hospice UK publication regarding resilience in Hospices including emotional resilience.

A new funding system has been introduced by NHS England for the healthcare student work placements which has considerably increased income from this source but reflects more accurately the amount of time and effort put into these student programmes by our qualified staff which we know is greatly appreciated by our University colleagues. The administration systems supporting student placements are also under review to ensure detailed agreements are in place and liabilities fully understood.

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Volunteers

Woodlands has over 200 volunteers undertaking a wide variety of roles across the Hospice and in our charity shops. Their strong presence throughout the Hospice in supporting roles is a key strength for the organisation and enables staff to concentrate on the care of the patient. Our charity could not exist without this 'additional workforce' and we welcome volunteers from all age groups with varying knowledge, skills and experience.

The Hospice has further increased its number of volunteers over the last year mainly due to the opening of our fourth charity shop but a concerted effort to also recruit additional volunteers to Hospice roles proved very successful and provides for better cover in peak holiday times.

The 15 strong Family Support volunteer team, recruited and set up last year has continued to develop its remit and added additional support to our Inpatients and their families and is now a key strength within that team. We have recruited a small team of Ward Assistant volunteers to man the nurses station and allow nursing staff to allocate their precious time to our patients and families. This role requires further development during 2018/19. We will be looking to develop a community based Volunteers Companion scheme during the next 2 years which we know will be of significant benefit to patients and families in their own homes.

The Hospice remains extremely thankful and very appreciative of the support provided by all our volunteers.

External relationships and collaboration

It has been pleasing this last year to start to reintegrate with all health care providers locally as organisations emerge from a difficult two years of change and austerity. The realisation that working together will improve outcomes for patients and perhaps be more cost effective has driven the desire to re-engage and Woodlands has played an active role in the redevelopment of a number of networks. Our Chief Executive, Clinical Lead and Patient Services Manager have participated in all CCG strategic development groups and in particular taken an active role in a fundamental End of Life Review across the City of Liverpool. The model of care emerging from this review is exciting and provides opportunities for Woodlands further development if funding is secured for the delivery of the model.

Positive initial discussions have taken place between the Palliative Care Consultants in Aintree Hospital and the Royal Liverpool Hospital prior to the impending merger. Whilst Palliative Care will continue to be delivered locally the teams will join together for education and research which is an essential way forward. Our Chief Executive is a Public Governor of Aintree Hospital and as such is fully informed as to the plans for the merger and will ascertain how these may impact on Woodlands Hospice.

Woodlands Hospice understands fully that we need to actively participate in the local and regional networking and look for new ways of working together across our localities.

Unfortunately, despite advertising for a marketing and communications consultancy role for 6 months we were not able to appoint and the strategy remains outstanding but will be addressed fully in 2018/19 to ensure this key area is progressed and Woodlands raises its profile locally.

During the year we invited a number of MPs into the Hospice to inform them of our services and plans for development and also to discuss ongoing funding issues. As a result of one of these visits Woodlands and Hospice funding generally became the subject of a Parliamentary debate in the House of Commons. Raising the profile of the role of Hospices within Health and Social care is critical to our future sustainability.

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Education

Education about Palliative Care is a key responsibility of hospices in order to increase the confidence and competence of health professionals in managing patients with Palliative Care needs that they encounter in their areas of work. Woodlands takes this very seriously and professionals working at Woodlands participate in educational activity through the Aintree Specialist Palliative Care Services Education Group chaired by Dr Kate Marley, Woodlands' Clinical Lead. Dr Marley is also a member of the Cheshire and Merseyside Palliative and End of Life Care Network Education strategy group which drives education provision in Palliative Care for the region. Full details of Woodlands educational programme regarding last year can be found in the Quality Account.

Research and Audit

The Hospice has a policy to cover inclusion in research but, during this period, there was no appropriate national, ethically approved research study in palliative care in which it could participate.

The Cheshire & Mersey Palliative and End of Life Care network continue to look for general research opportunities in palliative care in the region and Woodlands awaits a suitable opportunity to participate in a research project.

A weekly journal club enables members of staff to keep up to date with Palliative Care research.

Income Generation

Fundraising, nationally, has generally responded positively to the new Fundraising Regulations published following the Etherington Review. The Regulations have helped to restore public confidence in charities although there is a great deal of work still to be done for all charities.

Woodlands Hospice voluntarily registered with the Fundraising Regulator in the summer of 2016 and set up a separate Trustee led Task and Finish Group to review the revised Regulations and take appropriate action to ensure ongoing compliance and also to review the forthcoming changes to data protection. With all actions virtually completed the Task and Finish Group has now been disbanded and oversight for the Fundraising Regulation will be given by the Governance Committee moving forward.

Our Income Generation sub-committee chaired by the Treasurer with Trustee support and the Trustee led Task and Finish Group for Fundraising Regulation, minutes of which are shared with the Trustees at Board meetings, have ensured a full understanding by all Trustees of the activities and approaches the Hospice uses in its fundraising efforts. The Trustees are satisfied that Woodlands Hospice is ethical in its approach and has developed required processes and procedures with supportive training to ensure complete transparency to all donors.

Following the resignation of the Head of Income Generation who left in September 2016 the Chief Executive assumed leadership of the Fundraising and Trading teams during 2017 pending the outcome of a full and in-depth review of the Hospice's Fundraising and Trading structures and strategies. This review resulted in a new structure with a required Head of Income Generation Role (Senior Management level) together with separate Head of Fundraising and Head of Trading roles.

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Unfortunately at the time the Hospice did not feel it could afford all three roles so opted for the Trustee led Income Generation Committee to assume the responsibilities of the Head of Income Generation (setting the strategic direction, achieving income targets and overseeing the operational matters). A Head of Trading was already in place and a new Head of Fundraising was appointed in January 2018. The structure is now deemed to be appropriate for achieving the growth required in voluntary income and a Head of Income Generation will be recruited at some point in the future when the income is at a sufficient level for viability.

The income generated during the year was slightly more than that raised in the previous year. The overall growth in fundraising income expected was not achieved, resulting in a shortfall on internal budget of £74k. With a higher than predicted level of legacies received, including an amazing legacy of £190k, the overall income generated was £173k above target, and considerably higher than the previous year where legacies were low. Savings on fundraising salaries more than outweighed the underachievement in income, giving an overall net improvement on return on investment for fundraising.

During the year the fundraising team continued with a number of high profile events including our annual moonlight walk, the John Parrott golf tournament and our fourth Strictly for Woodlands dance event. We also staged, for the first time a Lip Sync battle for our younger supporters. The Events Manager role became vacant in the Autumn of 2017 and we took that opportunity to reconsider the events programme moving forward and have decided it would be wise to stage four big events each year and spend time engaging with our communities to host third party events in aid of the Hospice and encourage more people to undertake sponsored challenges. We had a record number of challenges undertaken last year and we are eternally grateful to all those who have helped to support us in this way. We would not be able to provide the services that we do without the ongoing support of those in our communities and we are extremely grateful for their ongoing generosity and kindness.

This last year has seen increased support from local organisations in the form of corporate volunteering and teams have assisted with activities such as gardening, painting, leaflet drops etc. This really helps the Hospice and the teams always report enjoyable days beneficial to them as team building exercises.

During the year our Community Fundraising Manager has been looking to recruit new Community Fundraising Groups to regularly hold smaller community events such as coffee mornings, bingos, cake sales etc. and who would help to bring in regular income for the Hospice. We have started conversations with two ladies who wish to create these groups in their localities and we look forward to supporting them in the coming year.

Funding received from Grant Making Trusts was lower than anticipated during the year as applications were fewer due to a concentrated effort on raising monies for the children's pavilion. This coming year it is imperative the Hospice concentrates on submitting applications for revenue funding from these Trusts.

Legacies and Wills

In 2017/18 we were extremely fortunate to receive unexpected legacy income of £245k including one legacy of £190k. Without the generosity of these supporters who kindly made these bequests, we would not be able to continue to provide the services we do for our patients and their families and as always we remain extremely appreciative of their kindness.

Our Make a Will campaign enables people to prepare a standard Will with participating solicitors/professional will writers in exchange for a donation to Woodlands Hospice. We are very grateful to all the practices which have taken part and for all donations received.

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Lottery

The Hospice Lottery provides a simple, low cost way to support the work of Woodlands through membership of the weekly draw. The income from this helps to provide a source of sustainable revenue that the Hospice can rely on to plan future budgets to continue to care for patients.

Having seen a growth in lottery membership in 2016/17 attributed to the third party canvassing organisation we contracted with, unfortunately the retention rates of these new sign ups have proven to be low and many of those signed up have discontinued their membership over the last 12 months.

We recruited our own lottery canvassers in the autumn of 2017 and whilst the retention rate on these is very good, there is insufficient growth overall being seen. New ways of recruitment are currently being considered as lottery membership is recognised as a sustainable form of income for the Hospice.

Our digital presence for lottery on line sign ups is currently being developed as we believe this will certainly make joining easier and quicker for potential players.

Charity Shops

In 2014/15 the Board of Trustees approved a retail strategy to open five shops in the following three years as Woodlands currently trails behind other Hospices in securing much needed income from trading activities, particularly in relation to charity shops. With three shops already open in Orrell Park, Old Swan and Maghull we identified a fourth property in Norris Green during 2017 but the signing of the lease has been a protracted process and the shop began trading in August 2018.

The Head of Trading set up a number of operations in the existing three shops, sourced the premises at Norris Green and is keenly chasing properties in Kirkby for 'Pop up shops' testing the area and viability of a longer term investment in property in Kirkby.

It remains our intention to have the fifth shop as a furniture shop which other Hospices report as good income generators but there will need to be sufficient cash in the trading company before we can invest in such a big venture.

The shop gift aid scheme introduced in Old Swan and Maghull shops in 2016 showed early signs of additional income for the trading company but further education is required to ensure the system is robust moving forward.

The performance of the charity shops has been somewhat mixed during the last year with a decision having now been made to withdraw the paid management position from the Maghull shop and develop a Volunteer led model, similar to that of the shop in Orrell Park to ensure financial viability. This will entail the recruitment of many more volunteers for this shop and in order to allow time for this growth the shop will be closed over the summer months awaiting reopening on the new volunteer model.

The charity shops remain a good source of income growth and improved presence on the high street and our anticipated strategy to open more shops will continue.

Hospice Shop

The trading subsidiary also has a small gift shop located within the Hospice reception which is supported by dedicated volunteers, who also give up their time to attend events and outside activities to promote sales. The shop makes a small profit which could possibly be increased with additional outlets for sales. We will be proactively looking for new locations during 2018/19.

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Third Party Fundraisers

The Hospice commissioned only one individual third party fundraiser during the period who is a commission based lottery single ticket seller. They are paid commission of 20 pence for every £1 collection and run a small weekly round of approx. 200- 300 sales. They have been trained on the Hospice procedures and are fully aware of the need to display the solicitation statement. Audit processes are in place for monitoring this third party fundraiser.

Marketing & Communications

The Trustees recognise that the Hospice currently lacks a robust Marketing and Communications Strategy and recruited a Trustee with marketing and communications experience in 2016/17. Her input has been invaluable to the Board who recognise that we need to commission time from a Marketing and Communications consultancy to develop a robust strategy and coach and educate existing staff to implement the strategy. The Recruitment process took place early 2018/19 but did not result in appointment which has led to the strategy now being written by the Chief Executive with the support of the Trustee on an unpaid basis.

Training and education is being considered under a separate commission.

The Hospice continues to improve its digital presence and has engaged more proactively with all forms of social media and has started to develop on line platforms for fundraising and lottery. There is much more work to be done with this.

FINANCIAL REVIEW

Principal Funding Sources

Woodlands Hospice relies heavily on its own fundraising efforts but also on the grants that it receives from the local NHS and other grant making trusts. It is therefore important to ensure that the services we deliver provide public benefit without prejudice. This is demonstrated in the services of the Hospice being free at the point of delivery and accessible to all through clear referral criteria based on clinical need.

As mentioned earlier, the fundraising team at Woodlands Hospice, led by the Chief Executive in the prolonged absence of a Head of Fundraising together with six months absence of an Events Manager achieved a good year end result achieving growth on the previous year of just below 5% but unfortunately falling short of its target income of £700K for the year. However, the savings in the salary costs due to the vacancies did negate the shortfall in income. Legacy income was ahead of its budget throughout the year and the Hospice was delighted to receive notification of a significant legacy of £190k in the latter half of the year. The legacy was brought into the financial statements for 2017/2018 in line with current accounting regulations and the actual money was received in the first months of the financial year 2018/2019.

Achieving £1 million in voluntary income is a result of the ongoing generosity of our wonderful supporters, and their dedication, enthusiasm and hard work in raising money for the Hospice. We are so grateful to everyone who helped raise this income. Moving forward we will continue to engage proactively with all our communities and endeavour to introduce new and exciting ways in which people can support us and focus on growing sustainable income streams to enable us to continue to provide our specialist palliative care services in the future.

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Due to the history of the Hospice with the transfer of the Inpatient Unit beds from Aintree University Hospital NHS Foundation Trust in 2009, Woodlands receives higher than average NHS grant funding for core services which is currently under significant pressure nationally. Any reduction in funding from the NHS would seriously threaten the viability and future sustainability of all current services. The Hospice will continue to negotiate with the Clinical Commissioning Groups (CCGs) to ensure sustainable funding for the services provided whilst making every effort to continually improve its income from fundraising and trading. We remain very appreciative of the NHS Grant monies received from South Sefton, Liverpool and Knowsley CCGs paid to the Hospice under Conditional Grant Agreements.

In the year to March 2017 South Sefton CCG approved a further two years to the Hospice at Home funded contract (£240,000 pa) within the original tender arrangements. The funding for this service is therefore agreed up to 31st March 2019. This service enables us to provide specialist palliative care to the residents of South Sefton in their own home should this be their preferred place of care and Woodlands has earned a highly respected reputation out in the community for this specific service. The contract for the service will be due for retender in September 2018 and Woodlands keenly awaits the specification for this tender. Assuming there is little change to the service requirements moving forward the Hospice will retender for this highly valued service. There has however been some thought that the specification may change to incorporate all care for patients at the end of their lives but this has not been substantiated by the CCG and the Hospice therefore will await the details in due course.

South Sefton CCG also fund a Care Homes End of Life Facilitator who is employed at the Hospice. This funding has now been incorporated into baseline funding from the CCG and will be included in usual funding negotiations as a key aspect of our service for South Sefton.

The Hospice at Home service and the Care Homes support enhances Woodlands presence in the South Sefton community.

Significant Events

Cuts to NHS funding

It is well publicised nationally that the NHS funding has been under serious pressure over recent years due to the austerity measures put in place by the Government. Local Commissioners are all looking for ways to streamline services and reduce funding wherever possible particularly for Non-NHS services. Whilst Woodlands Hospice has always been aware of the risk of having higher levels of NHS funding than other Hospices, it is only in recent years that the vulnerability of this funding has come to the fore. It was, however, still a shock to the organisation to be visited in June 2017 by Liverpool CCG advising of an intended reduction in current year funding of £100k.

The Hospice was requested to produce an impact assessment of this intended reduction for presentation to the CCG within a very short timescale. A thorough assessment was undertaken by the Medical Consultants, Chief Executive and Patient Services Manager with the active support of all Trustees and a detailed presentation delivered to the CCG as requested.

Having already undertaken a major cost savings exercise during autumn 2016 ensuring the costs of the Hospice had been stripped back as far as was safely able to do so, the Trustees knew that a sudden reduction of £100k in income would mean a change to services. After appropriate assessment the Hospice advised the CCG that their proposed funding cuts would mean a closure of 5 beds for the Hospice which in turn would put additional pressure on the local acute Hospital Trust whose bed status was already at breaking point.

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After careful consideration the CCG confirmed that funding for 2017/18 would remain untouched but requested the Hospice actively partake in a Liverpool-wide End of Life review to try and develop new models of care for patients at the end of their lives, avoiding duplication in the system and encouraging collaboration of all services. Woodlands Chief Executive and its Clinical Lead have subsequently become prominent and proactive members of the Task and Finish Group addressing this review.

During the year, South Sefton CCG questioned the value for money on the Hospice at Home contract as data collected in year did not fully reflect the robust service in place. A new report developed by the Hospice containing key data did demonstrate that as a result of the Consultant led Hospice at Home service, hospital admissions were avoided and a greater number of patients dying in their preferred place of care was evident.

Having been through these difficult times during the year, of protecting the NHS monies, the Hospice is ever more aware of the vulnerability of this funding and seeks to raise additional funding through other means, in particular through its trading company which is still young in its development compared to other Hospices in the North West but undoubtedly has potential for growth.

Investments Portfolio – Realisation of gains

As a result of the reported deficit at the end of the reporting period to March 2017 and subsequent notice given on potential reduction in current levels of funding from Liverpool CCG in the reporting year, the decision was taken in the year by the Trustees to realise £120K from the investment portfolio which had performed extremely well in previous years. The Trustees felt that realising some of the gains back into the cash flow of the Charity would provide greater security for meeting the running costs of the Charity in the next financial year given the uncertainty around the funding from the local CCGs. Ultimately, with the receipt of the large legacy previously mentioned and no cut to the Liverpool CCG funding in year this additional £120k was not actually needed for cash flow this year but will help to address predicted shortfall in next year's accounts.

VAT review

In the previous year the decision was made to take independent VAT advice and the Hospice subsequently registered retrospectively for VAT. The specialist worked with the Finance Manager to ensure that the Hospice was maximising its VAT recovery, including the newly introduced Hospice VAT recovery scheme and the Capital Goods VAT scheme following a refurbishment in 2014. After liaising with HMRC regarding the schedule of payments, the Hospice was satisfied that the VAT position was now very strong and historical issues addressed well.

Fundraising Regulations and General Data Protection Regulations (GDPR)

During the year the Trustee-led Task and Finish group for Fundraising Regulation and GDPR met on a number of occasions and worked to detailed action plans to ensure all new and updated regulations were addressed in a positive manner.

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The Hospice felt that the GDPR changes were a key opportunity to tidy up the supporters' databases (Fundraising and Lottery) which held much historical data and start to develop fresh relationships with supporters. Woodlands decided that it would rely on Explicit Consent for Fundraising and on Legitimate Interest and Contract for the lottery database. After three separate mailings to the more recently active 4,000 members of the fundraising database, the number of supporters with explicit consent reduced to 1,200. Whilst this poses a risk to reduced engagement for any events or appeals the Hospice feels that it will reduce cost in sending information to members who never respond and it is in the Hospice's best interest to start to develop a new database of engaged supporters with rewarding donor experience. The fundraising team are now challenged with asking every person they interact with, moving forward, if they would like to stay on Woodlands database and how they wish to be communicated with. This is a positive action and one which is believed to be the right way forward in the spirit of GDPR. Many other charities who have taken this stance have shown that income is not reduced as a result of explicit consent but supporters feel more valued.

The Task and Finish Group also addressed the new Fundraising Regulations putting revised policies, systems and processes in place to ensure full compliance. This agenda should serve only to improve charities reputation with the public and Woodlands is confident it will not impact on the income.

GDPR also applied generally across the Hospice but no actions taken here have any impact on the financial position of the Hospice as compliance is good and it is highly unlikely that any penalties or fines would emerge.

Overall Result

The final position for the Hospice Charitable Group at the end of the financial year reports a surplus of £93K against a predicted deficit of £226K for the year.

The turnaround can be attributed predominately to the unexpected legacies of £245k in the year which for the third consecutive year has helped to bridge the gap in the shortfall on the donations income target. Without such generous legacies received in the year the year end result would not have been so positive.

However, it must be noted that the Fundraising Team (excluding legacies) have reported an increase in the return on investment from 2.28% to 2.58% as a result of underspend on costs in the year mainly due to vacancies in the team. The team performed well to still improve on last year's income and also make 90% of its targeted income.

The surplus in year can be summarised into total income of £3.98M (2017: £3.81M) an increase of 4.4% from the previous year, and total costs of £3.89M (2017: £3.96M) a decrease of 1.76% on the previous year. Gains on investments against this result took the final surplus to £93K (2017: £60K deficit).

Total Funds and Free Reserves

At the end of the reporting period the Hospice Charitable Group held a total fund balance of £3.5M, which includes a tangible fixed asset value of £2.2M which would only be realised on the disposal of such fixed assets. The remaining fund balance of £1.3M includes restricted funds of £93K, of which £16K is to be spent on the core running costs of the Hospice in the year to March 2019, £39K is to fund capital projects and equipment, and £38K is hosted on behalf of a regional palliative care network which Woodlands is a key member of and will benefit like all participants from this funding for training. Free reserves, including the assets held as the investment portfolio, account for the final £1.2M of the Hospice Charitable Group fund balance.

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At the end of March 2018 the level of free reserves held by the charity including the investment portfolio equated to just £1.2M (2017: £1M). Historically the reported free reserves have been calculated excluding the investments held by the Hospice and as such in years prior to the year ended March 2017 would appear much lower than those currently reported. The decision was taken by the trustees in the previous year to include the investments as part of free reserves based on the liquidity of the portfolio held.

The level of free reserves reported represent approximately 4 months running costs of the Charitable Trust alone excluding any Fundraising expenditure. The documented aim of the Trustees in the year to March 2013 was to reach a level of free reserves equating to six months running costs of the organisation within the next three years. In the time since this documented aim was set the free reserves (including investments) have increased from £1.08M to £1.22M.

Whilst the trading strategy and fundraising strategy combined could potentially restore the levels of free reserves in time to required levels the Trustees are considering the impact on the levels of free reserves of the very real threat of cuts in funding received from the CCGs. The Trustees have given consideration to this as a part of the recognition of principal risks and uncertainties facing the Hospice and their management going forward.

Investment policy

At the end of the reporting period the Charity held an investment portfolio (including cash held in the portfolio) valued at market value of £564K (2017: £661k). The reduction in value is mainly due to the decision taken to realise £120K from the portfolio into the Hospices free cash reserves in light of the risk of funding cuts. The objectives of the investment policy, as documented by the Trustees, is for the funds held in the portfolio to provide an above market average income from the surplus capital of the Charity, and to achieve a balanced return from income and capital growth. The policy states that an income should be strived for of approximately 4% of the capital value and in the reporting year to March 2018 the portfolio had a total return of 3.54% which the Trustees considered to be acceptable against a benchmark performance of 1.22%.

The investment policy of the Trustees documents a medium level of risk for the portfolio.

Whilst the Trustees do consider the ethical implications of the investments held in the portfolio by placing restrictions on direct investments in entities that may be in conflict with the charitable objects of the Hospice, they do understand that by using a collective approach it is impossible to avoid some sectors.

Principal risks and uncertainties

The Trustees have reviewed and identified the major risks and uncertainties that could impact on the Hospice. These are:

Reduction in NHS Funding

As described earlier in this Report the Hospice has experienced, in year, the very real threat of NHS funding cuts. With Woodlands Hospice relying so heavily on NHS funding due to its history, the Trustees have significant concerns at the current time for the ongoing viability and sustainability of the Hospice in the future should NHS funding be reduced significantly. This serves only to highlight that new strategies will need to be considered in order to maximise future voluntary income streams.

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With the Hospice senior leadership participating in the Liverpool CCG city-wide formal End of Life review and South Sefton and Knowsley CCGs following swiftly on with similar strategies, Woodlands will possibly need to work differently moving forward. We will need to secure NHS funding and the Trustees and Senior Management are very responsive to these changes providing they are in the best interest of patients and families.

The Hospice has developed a new income strategy for the years 2018/19 and 2019/20 including a new Trading Strategy where growth is expected and certainly achievable together with a revised Fundraising Strategy incorporating a new Legacy Strategy. A recent benchmarking exercise for North West Hospices finances shows growth is needed in these areas for Woodlands. The Hospice is however very young compared to those Hospices and steady growth has been seen consistently over recent years. The Hospice is confident in its financial strategy and the finances are scrutinised in the Trustee led Finance sub-committee meetings and the Trustee led Income Generation sub-committee with regular reports back to the Board of Trustees.

Minimal Free reserves

As detailed earlier in the free reserves section of this report, the Trustees remain alert to the low levels of free reserves especially in view of predicted deficits in annual finances. A watching brief will be kept on the financial position and services reduced if necessary to stay within the financial viability of the Hospice.

Medicines Management

Due to the complex nature of our patients and the high usage of controlled drugs on the inpatient ward, medicines mismanagement could be considered to be a risk to this organisation. However the organisation has robust policies and procedures in place supported by a system of continual internal auditing of such procedures to ensure maximum efficiency and effectiveness. We have a strong culture within the organisation of reporting any drugs incident, however minor, to ensure continual learning. Medicines policies and procedures are reviewed consistently by the Medicines Management working group and the Trustee led Clinical Governance Committee. Our established safe staffing levels are always appropriate to the patient numbers and dependency. We feel that this risk is mitigated by way of our systems and controls in place.

The proposed merger between Aintree University Hospital and The Royal Liverpool Hospital

This merger is gathering pace and is now scheduled for July 2019. There have been early positive meetings between the Consultant led Palliative Care teams in each Hospital and services are expected to run locally as now but joint education and research programmes are planned and no impact is envisaged on the Hospice.

Discussions are underway regarding the Service Level Agreements shared with Aintree Hospital to ensure they continue without problem in the new merged entity. The Consultants and Chief Executive are involved in appropriate discussions and the Trustees will keep a watching brief.

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Shortage of Medical Consultants in Palliative Care

Regrettably there is a national shortage of Palliative Care Consultants with many additional short term vacancies due to maternity leave as Palliative Medicine has a high proportion of female Consultants. Vacancies and sickness have impacted on Woodlands Hospice this year with a small number of bed closures needed in the summer of last year but the overall occupancy for the hospice maintained at 85% so no effect seen on funding. Locum cover is actively being sought and new models of delivery being explored including increased responsibilities for speciality grade doctors.

Recruitment of trained nurses

Due to the national shortage of trained nurses, the Hospice has, at times during the year, struggled to recruit to vacancies on the Inpatient Unit. The Patient Services Manager has, over the year, recruited to a Hospice 'bank staff' which has now become vulnerable due to improved rates of pay and terms for bank staff in the local NHS Trust attracting staff away from the Hospice. The Hospice is able to utilise the Hospital bank staff but at a much more expensive rate of pay which in turn puts added pressure on the finances. Uncertainty remains about future recruitment which may impact on service provision if safe staffing levels are to be maintained. The Trustees discuss these issues in Personnel sub-committee and the Clinical Governance sub-committee meetings.

Increasing Salary Costs

Agenda for Change is the current NHS grading system and pay system for NHS staff excluding doctors, dentists, and very senior managers. Currently the Hospice mirrors the Agenda for Change pay scales for all of its clinical employees and operates a separate pay scale for all its non-clinical employees. In the post balance sheet period healthcare unions voted overwhelmingly to accept the proposed changes to the Agenda for Change system, agreeing to new pay scales and enhanced rates of pay for three years to March 2021. In July 2018 the Board of Trustees agreed that the Hospice must continue to mirror the Agenda for Change pay scales in order that the Hospice can retain and recruit clinical staff. The agreed three year pay deal means that clinical employees at the Hospice will receive increases over the three year period of between 6.5% and 22.7% depending on their Band and length of service. The Board of Trustees also agreed a two year pay increase of 3% per annum for its non-clinical employees in order to keep pace with new National Minimum and National Living wage limits and retaining the appropriate differential between grades and responsibilities.

There is a possibility of receiving additional funding from the Department of Health to cover the increased costs for year 1 of the pay deal for those employees who were TUPE transferred from Aintree Hospital in 2009 and remain protected on the NHS terms and conditions post transfer (eleven in number, as at 31 March 2018). These employees account for approximately 10% of the Hospice workforce. No additional funding will be received from the NHS for the increased costs of meeting the new pay scales for the remaining 90% of the workforce. The risk is that the costs of the Hospice become too great to be met by current NHS funding levels and the Hospices own income streams and services may need to be reduced.

The Trustees feel that there are no further principle risks identified. The services Woodlands provides are a key part of the National End of Life strategy and necessary for our local communities. We have a highly skilled workforce and the premises are on a long term lease and have recently been refurbished to make them fit for purpose for the future.

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PLANS FOR THE FUTURE

The key developments for 2018/19 include the continuing implementation of the revised fundraising strategy, particularly in relation to the retail strategy and the growth of the lottery supported by the Marketing and Communications Strategy which will include increased focus on the digital aspects of marketing and communications. We will also concentrate on a proactive legacy strategy to ensure our supporters are aware of the impact a small gift in their will could have on the Hospice services. The overall clinical strategy will include the formal review of specialist palliative care services and end of life care across our communities and the need to work in collaboration or partnership with other providers to ensure future sustainability.

THE TRUSTEES

The Trustees, who are also Directors for the purposes of company law, who served the charity during the year and the period up to which the accounts were approved were as follows:

B. Bartlett BA Hons Dip Arch RIBA (Chairman)
R. Gladden (Chair) (Appointed 03/04/2017) (Resigned 25/07/2017)
C.M. Hubbert MRCPG DRCOG (Vice Chairman)
C. Brennand FCA (Hon. Treasurer)
W.J. Wood BSc MHSM Dip.HSM
The Reverend N. Wilde (Resigned 11/12/2017)
E. McDonald
B. Lynne Roberts BA, Dip OT, PGCE, MBA, PhD
A. Johnson
S. Ollerhead
A. Keith (Appointed 25/07/2017)
D. Brown (Appointed 11/12/2017)

None of the trustees has any beneficial interest in the company.

TRUSTEES' RESPONSIBILITIES

The Trustees, who are also the directors of Woodlands Hospice Charitable Trust for the purpose 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 year. Under company law the Trustees must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the charity and of the incoming resources and application of resources, including the income and expenditure, of the charitable company for that year.

In preparing these accounts, the Trustees are required to:

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles in the Charities SORP;
- make judgements and estimates that are reasonable and prudent; and
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charity will continue in operation.

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

The Trustees are responsible for the maintenance and integrity of the corporate and financial information included on the charity's website. Legislation in the United Kingdom governing the preparation and dissemination of accounts may differ from legislation in other jurisdictions.

RISK MANAGEMENT

The responsibilities of Trustees are defined by the Memorandum and Articles of Association, The Charities Act and company law.

These responsibilities include:

- Ensuring that the charity only undertakes activities that are within their objects and powers.
- Acting only in the interests of the charity and its beneficiaries.

- Taking decisions in keeping with their duty of care and duty to act prudently.
- Establishing management arrangements to ensure appropriate standards and procedures are in place, that those standards and procedures are complied with and corrective action taken where necessary.
- Ensuring compliance with all relevant statutory regulation and adoption of best practice principles.

The Trustees obtain comfort that their responsibilities are discharged by:

- Regular reports to the Board of Trustees.
- Independent audit of the accounts and financial systems.
- The authority of the Personnel, Finance, Income Generation and Governance Committees.
- The adoption of the appropriate policies and procedures including the risk management policy.
- Audit by external agencies (e.g. Fire Service, Environmental Health Inspectors).

The trustees have examined the major strategic, business and operational risks which the charity faces and confirm that systems have been established to enable regular reports to be produced so that necessary steps can be taken to lessen these risks.

RELATED PARTIES AND OTHER CHARITIES

The Charity has one wholly owned subsidiary, Woodlands Hospice Limited. The subsidiary operates a lottery and charity shops and uses this to support Woodlands Hospice Charitable Trust Limited.

WOODLANDS HOSPICE CHARITABLE TRUST LIMITED

TRUSTEES' ANNUAL REPORT

YEAR ENDED 31 MARCH 2018

AUDITORS

A resolution to re-appoint Lonsdale & Marsh will be put to the Annual General Meeting.

STATEMENT OF DISCLOSURE TO AUDITORS

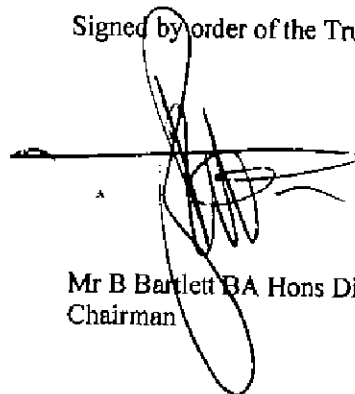
In so far as the Trustees are aware:

- There is no relevant audit information of which the charitable company's auditors are unaware, and;
- Each Trustee has taken the steps that they ought to have taken as trustees in order to make themselves aware of any relevant audit information and to establish that the charitable company's auditors are aware of that information.

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

Registered office:
Woodlands Hospice
Aintree University Hospital Campus
Longmoor Lane
Liverpool
L9 7AL

Signed by order of the Trustees

A handwritten signature in black ink, appearing to be 'Mr B Bartlett', written over a horizontal line.

Mr B Bartlett BA Hons Dip Arch RIBA
Chairman

Approved by the Trustees on 25th September 2018

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS AND TRUSTEES OF
WOODLANDS HOSPICE CHARITABLE TRUST LIMITED
YEAR ENDED 31 MARCH 2018

Opinion

We have audited the financial statements of Woodlands Hospice Charitable Trust Limited (the "Charity") and its subsidiary Woodland Hospice Limited (the "Group") for the year ended 31 March 2018 which comprise the group Statement of Financial Activities, the group Summary Income and Expenditure account, the group and parent charitable company Balance Sheets, the group Cash Flow Statement and the notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102: The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- give a true and fair view of the state of the charity's and group's affairs as at 31 March 2018 and of the groups incoming resources and application of resources for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice;
- have been prepared in accordance with the requirements of the Companies Act 2006.

Basis for opinion

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

Conclusions relating to going concern

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

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

Other information

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

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS AND TRUSTEES OF
WOODLANDS HOSPICE CHARITABLE TRUST LIMITED
YEAR ENDED 31 MARCH 2018

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

We have nothing to report in this regard.

Opinions on other matters prescribed by the Companies Act 2006

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

- the information given in the trustees' report (incorporating the strategic report and the directors' report) for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the trustees' report (incorporating the strategic report and the directors' report) have been prepared in accordance with applicable legal requirements.

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the charity and group and their environment obtained in the course of the audit, we have not identified material misstatements in the Trustees' Annual Report (including the Strategic Report).

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

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

Responsibilities of the trustees

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

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

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS AND TRUSTEES OF
WOODLANDS HOSPICE CHARITABLE TRUST LIMITED
YEAR ENDED 31 MARCH 2018


Our responsibilities for the audit of the financial statements

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

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

Use of our report

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


Elaine Frances McElroy (Senior Statutory Auditor)
For and on behalf of Lonsdale and Marsh

Chartered Accountants
Statutory Auditor

Date: 1 October 2018

7th Floor
Cotton House
Old Hall Street
Liverpool
L3 9TX

WOODLANDS HOSPICE CHARITABLE TRUST LIMITED
CONSOLIDATED STATEMENT OF FINANCIAL ACTIVITIES
YEAR ENDED 31 MARCH 2018

	Note	Unrestricted Funds £	Restricted Funds £	Total Funds 2018 £	Total Funds 2017 £
Income from:					
Donations and legacies	2	910,252	5,360	915,612	743,906
Charitable activities	3	291,473	2,361,692	2,653,165	2,692,138
Other trading activities	4	341,902	-	341,902	309,983
Investment income	5	21,481	-	21,481	24,317
Other income	6	48,200	-	48,200	42,333
Total income		1,613,308	2,367,052	3,980,360	3,812,677
Expenditure on:					
Raising funds	7	543,506	-	543,506	582,398
Charitable activities	8	690,970	2,660,103	3,351,073	3,376,909
Total expenditure		1,234,476	2,660,103	3,894,579	3,959,307
Net gains/(losses) on investments	14	7,279	-	7,279	85,670
Net income/(expenditure)		386,111	(293,051)	93,060	(60,960)
Transfers between funds		(285,776)	285,776	-	-
Net movement in funds	12	100,335	(7,275)	93,060	(60,960)
Reconciliation of funds:					
Fund balances at 1 April 2017		3,341,427	100,190	3,441,617	3,502,577
Fund balances at 31 March 2018		3,441,762	92,915	3,534,677	3,441,617

The Statement of Financial Activities includes all gains and losses in the year and therefore a Statement of Total Recognised Gains and Losses has not been prepared

The notes on pages 35 - 51 form part of these consolidated financial statements

WOODLANDS HOSPICE CHARITABLE TRUST LIMITED

SUMMARY INCOME AND EXPENDITURE ACCOUNT

YEAR ENDED 31 MARCH 2018

	2018	2017
	£	£
Total income	3,980,360	3,812,677
Total expenditure from income funds	3,894,579	3,959,307
	<hr/>	<hr/>
	85,781	(146,630)
Net gains/(losses) on investments	7,279	85,670
	<hr/>	<hr/>
Net income/(expenditure) for the year	93,060	(60,960)

The summary income and expenditure account is derived from the statement of financial activities on page 30 which together with the notes on pages 35 to 51 provides full information on the movements during the year on all funds of the charity.

WOODLANDS HOSPICE CHARITABLE TRUST LIMITED

CONSOLIDATED BALANCE SHEET

YEAR ENDED 31 MARCH 2018

	Note	2018		2017	
		£	£	£	£
Fixed assets					
Tangible assets	13	2,225,891		2,335,117	
Investments	14	524,870		654,383	
		<u>2,750,761</u>		<u>2,989,500</u>	
Current assets					
Stock	15	3,681		2,220	
Debtors	16	306,718		170,505	
Cash at bank and in hand		837,088		642,739	
		<u>1,147,487</u>		<u>815,464</u>	
Creditors: amounts falling due within one year	17	(363,571)		(363,347)	
Net current assets		<u>783,916</u>		<u>452,117</u>	
Total assets less current liabilities		<u>3,534,677</u>		<u>3,441,617</u>	
Net assets		<u>3,534,677</u>		<u>3,441,617</u>	
Funds					
Unrestricted:					
Designated funds	18	-		7,800	
Other charitable funds	18	3,441,762		3,333,627	
		3,441,762		3,341,427	
Restricted	19	92,915		100,190	
Total funds		<u>3,534,677</u>		<u>3,441,617</u>	

These financial statements were approved by the Board of Trustees and are signed on their behalf by:

MR B BARTLETT
Trustee (Chairman)

Date: 25 September 2018

Company No: 03063721

The notes on pages 35- 51 form part of these consolidated financial statements.

WOODLANDS HOSPICE CHARITABLE TRUST LIMITED

BALANCE SHEET

YEAR ENDED 31 MARCH 2018

	Note	2018		2017	
		£	£	£	£
Fixed assets					
Tangible assets	13		2,208,795		2,316,824
Investments	14		524,873		654,386
			<u>2,733,668</u>		<u>2,971,210</u>
Current assets					
Stock	15	409		409	
Debtors	16	424,904		221,985	
Cash at bank and in hand		<u>651,737</u>		<u>538,769</u>	
		1,077,050		761,163	
Creditors: amounts falling due within one year	17	(293,998)		(311,585)	
Net current assets			<u>783,052</u>		<u>449,578</u>
Total assets less current liabilities			<u>3,516,720</u>		<u>3,420,788</u>
Net assets			<u>3,516,720</u>		<u>3,420,788</u>
Funds					
Unrestricted:					
Designated funds	18	-		7,800	
Other charitable funds	18	<u>3,423,805</u>		<u>3,312,798</u>	
			3,423,805		3,320,598
Restricted	19		92,915		100,190
Total funds			<u>3,516,720</u>		<u>3,420,788</u>

These financial statements were approved by the Board of Trustees and are signed on their behalf by:

MR B BARTLETT
Trustee (Chairman)

Date: 25 September 2018

Company No: 03063721

The notes on page 35-51 form part of these consolidated financial statements.

WOODLANDS HOSPICE CHARITABLE TRUST LIMITED

CONSOLIDATED CASH FLOW STATEMENT

YEAR ENDED 31 MARCH 2018

	2018		2017
	£	£	£
CASH FLOWS FROM OPERATING ACTIVITIES			
Net income/(expenditure) for the year (as per the SOFA)	93,060		(60,960)
Adjustments for:			
(Gains)/losses on investments	(7,279)		(85,670)
Depreciation of tangible fixed assets	143,276		141,644
Interest paid on loan	-		95
Bank interest receivable	(313)		(901)
Investment interest receivable	(1,013)		(8)
Dividend income from investments	(20,468)		(24,309)
(Increase)/Decrease in stock	(1,461)		653
(Increase)/Decrease in debtors	(136,213)		4,432
Increase/(Decrease) in creditors	224		(44,779)
Cash from operations	<u>69,813</u>		<u>(69,898)</u>
Interest paid	-		(95)
Net cash provided/(used) in operating activities	69,813		(69,898)
CASH FLOWS FROM INVESTING ACTIVITIES			
Purchases of tangible fixed assets	(34,050)		(43,453)
Loss on disposal of fixed assets	-		200
Bank interest receivable	313		901
Investment interest receivable	1,013		8
Income from other fixed asset investments	20,468		24,309
Purchase of investments	(76,065)		(85,990)
Proceeds from sale of investments	212,857		57,352
Shares received from legacy	-		-
Net cash (used in) / provided by investing activities	124,536		(46,673)
INCREASE/(DECREASE) IN CASH	<u>194,349</u>		<u>(116,571)</u>
CASH AT THE BEGINNING OF THE YEAR	642,739		759,310
CASH AT THE END OF THE YEAR	<u>837,088</u>		<u>642,739</u>

WOODLANDS HOSPICE CHARITABLE TRUST LIMITED
NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
YEAR ENDED 31 MARCH 2018

1. ACCOUNTING POLICIES

Company Information

Woodlands Hospice Charitable Trust Limited is a private company limited by guarantee, incorporated in England and Wales. Its wholly owned subsidiary Woodlands Hospice Limited is a private company limited by shares incorporated in England and Wales (Company no: 03278425). The registered office of both the parent and subsidiary companies is AUH Campus, Longmoor Lane, Liverpool, L9 7LA.

Basis of Accounting

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

The financial statements have been prepared under the historical cost convention, except for investments, modified for the revaluation of leasehold interest, and in accordance with the Statement of Recommended Practice 'Accounting and Reporting by Charities' (FRS 102) effective 1 January 2015, the Financial Reporting standard applicable in the United Kingdom and Republic of Ireland (FRS 102), and the Companies Act 2006.

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

Group Financial Statements

The consolidated financial statements incorporate the results of the charity and its wholly owned subsidiary Woodlands Hospice Limited on a line-by-line basis. A separate Statement of Financial Activities, and income and expenditure account, for the charity itself are not presented because the charity has taken advantage of the exemptions conferred by s408 of the Companies Act 2006. A summary of the financial performance of the charity can be found in Note 25.

Going Concern

The principal risks and uncertainties have been commented upon on pages 21 to 23 of the Trustees Report. The principal risk which could give rise to a potential going concern issue is the threat of a reduction in NHS funding. Funding at the current level has been agreed up to 31st March 2019.

Income

Income from donations, grants and legacies are recognised when the charity has entitlement to the funds, any performance conditions attached to the income have been met, it is probable that the income will be received and the amount can be measured reliably.

Grants which are to be used for specific purposes, as laid down by the donor, are treated as restricted funds. Expenditure that meets the criteria is charged to the fund. Deferred income includes amounts received in advance of work to be undertaken in the next financial year. The funds are released when an individual fulfils the post and funds are released monthly in line with costs to deliver the service.

Grants, including those received from government agencies are recognised on the performance model. They are included under income from charitable activities.

Income from commercial trading operations represents shop sales of goods, excluding value added tax, and income from the sale of lottery tickets.

WOODLANDS HOSPICE CHARITABLE TRUST LIMITED
NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
YEAR ENDED 31 MARCH 2018

1. ACCOUNTING POLICIES (continued)

Income (continued)

Donated goods are not recognised as incoming resources on the Statement of Financial Activities on receipt of an item as it is impractical and not a cost effective use of resources. Instead the value of the donated goods is recognised as income when sold.

In accordance with the SORP (FRS102), the general volunteer time is not recognised on the Statement of Financial Activities. Refer to the trustee's annual report for more information on their contribution.

Interest Receivable

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

Resources Expended

Resources expended are included in the Statement of Financial Activities on an accruals basis, inclusive of any VAT that is not recoverable.

The cost of functions which support more than one of the charity's activities have been allocated to those activities to give a full cost of an activity. Management salaries, payroll costs and legal fees have been allocated to activities based on the size of the expense incurred, as this is in line with time spent. Depreciation has been allocated to the activities for which the depreciated assets are used.

Fund Accounting

Funds held by the charity are either:

- Unrestricted general funds – these are funds which can be used in accordance with the charitable objects at the discretion of the trustees.
- Designated funds – these are funds set aside out of unrestricted general funds for specific purposes.
- Restricted funds – these are funds that can only be used for particular restricted purposes within the objects of the charity. Restrictions arise when specified by the donor or when the funds are raised for a particular restricted purpose.

Tangible Fixed Assets and Depreciation

Tangible fixed assets are held at cost or valuation less depreciation. The costs of minor additions, being those below £250, are not capitalised.

Depreciation is calculated so as to write off the cost of an asset, less its estimated residual value, over the useful economic life of that asset as follows:

Computer equipment	- 33% straight line
Fixtures and fittings	- 25% straight line
Furniture and equipment	- 25% straight line
Leasehold buildings	- Over the remaining lease term

WOODLANDS HOSPICE CHARITABLE TRUST LIMITED
NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
YEAR ENDED 31 MARCH 2018

1. ACCOUNTING POLICIES (continued)

Stock

Stock comprises bought in goods for resale and is stated at the lower of cost or net realisable value. For donated goods see the accounting policy on income.

Financial Instruments

The company has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at the amount receivable or payable. Investments are held at fair value.

Investments

Listed investments are held at fair value, which is the market value as at the balance sheet date with any realised or unrealised gains or losses being recognised within the Statement of Financial Activities.

The investment in the subsidiary company, Woodlands Hospice Limited, is held at cost within the company balance sheet.

Debtors

Debtors are basic financial assets and are recognised at the settlement amount due. Prepayments are valued at the amount prepaid.

A concessionary loan was made in the year to March 2017 from Woodlands Hospice Charitable Trust to its subsidiary company Woodlands Hospice Limited to support the growth of the charity shops in order to increase the donated amount to the charity. In the post balance sheet period this loan has been uplifted to support the growth of further shop locations. The loan is measured at the amount paid and is repayable over a period of three years but can be repaid on demand if necessary.

Cash at bank and in hand

Cash at bank and in hand are basic financial assets, and include cash in hand and deposits held with banks. It also includes cash held with the investment portfolio in order to meet short term cash commitments such as the purchase of shares as they fall due.

Leases

Rentals payable under operating leases are charged against income on a straight line basis over the period of the lease.

Pension Costs

The company pays into two separate schemes:

The company contributes to the NHS Superannuation Scheme for certain former NHS employees. The employer's contribution into the scheme is at a rate of 14.38% of pensionable pay for the year to March 2018 and is disclosed in note 11. The employee's contribution is a variable percentage of pensionable pay. The scheme is unfunded and the charity has no further liability beyond the payments made during the year. The scheme is therefore accounted for as a defined contribution pension scheme with the costs equal to the contributions made for the accounting period.

WOODLANDS HOSPICE CHARITABLE TRUST LIMITED
NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
YEAR ENDED 31 MARCH 2018

1. ACCOUNTING POLICIES (continued)

Pension Costs (continued)

The company also contributes to a separate defined contribution pension scheme for non NHS employees and the contribution is disclosed in Note 11. The assets of the scheme are held in an independently administered fund.

The cost of the employer pension contributions to the NHS Superannuation and other scheme is charged to the Statement of Financial Activities. The pension costs have been allocated according to the activity the employee undertakes. The costs of the activities are allocated between restricted or unrestricted according to how the funding for the activity is received.

2. INCOME FROM DONATIONS AND LEGACIES

	Unrestricted Funds	Restricted Funds	Total Funds 2018	Total Funds 2017
	£	£	£	£
Donations	631,346	5,360	636,706	607,686
Legacies	278,906	-	278,906	136,220
	<u>910,252</u>	<u>5,360</u>	<u>915,612</u>	<u>743,906</u>

3. INCOME FROM CHARITABLE ACTIVITIES

	Unrestricted Funds	Restricted Funds	Total Funds 2018	Total Funds 2017
	£	£	£	£
Well-being & support centre	223,212	-	223,212	223,212
Outreach service	-	105,341	105,341	105,341
Lymphoedema service	-	58,384	58,384	69,594
Hospice at home	-	240,000	240,000	240,000
Family support worker	-	24,518	24,518	24,518
Macmillan family support worker	-	21,699	21,699	43,398
In-patient unit	-	1,829,918	1,829,918	1,813,138
Superannuation fund	14,031	-	14,031	16,987
Education/training	48,280	1,040	49,320	42,860
Outpatient accommodation	5,950	-	5,950	5,950
Advanced care planner	-	-	-	25,393
Discharge planner	-	-	-	15,350
End of Life training prog-care homes	-	44,817	44,817	44,817
Equipment fund	-	35,975	35,975	21,580
	<u>291,473</u>	<u>2,361,692</u>	<u>2,653,165</u>	<u>2,692,138</u>

WOODLANDS HOSPICE CHARITABLE TRUST LIMITED
NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
YEAR ENDED 31 MARCH 2018

4. INCOME FROM OTHER TRADING ACTIVITIES

	2018	2017
	£	£
Lottery	207,322	186,967
Charity shops	134,580	123,016
	<u>341,902</u>	<u>309,983</u>

5. INVESTMENT INCOME

	2018	2017
	£	£
Dividends received	20,468	24,309
Investment interest	1,013	8
	<u>21,481</u>	<u>24,317</u>

6. OTHER INCOME

	2018	2017
	£	£
Catering services	45,472	39,493
Sundry income	2,415	1,939
Bank interest receivable	313	901
	<u>48,200</u>	<u>42,333</u>

7. EXPENDITURE ON RAISING FUNDS

Activity	Direct Cost of Activity	Support Costs	Total Costs 2018	Total Costs 2017
	£	£	£	£
Fundraising and publicity:				
Appeals costs	64,551	16,200	80,751	93,650
Salaries	172,942	18,293	191,235	201,348
Investment management fee	4,907	-	4,907	4,869
Commercial trading operations:				
Lottery	96,127	9,263	105,390	141,892
Charity shop	142,987	18,236	161,223	140,639
	<u>481,514</u>	<u>61,992</u>	<u>543,506</u>	<u>582,398</u>

Expenditure on raising funds was £543,506 (2017: £582,398) of which all was unrestricted.

WOODLANDS HOSPICE CHARITABLE TRUST LIMITED
NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
YEAR ENDED 31 MARCH 2018

8. EXPENDITURE ON CHARITABLE ACTIVITIES

	Direct Cost of activity	Support Costs	Total Costs 2018	Total Costs 2017
	£	£	£	£
Charitable activity:				
Well-being & support centre	257,951	34,214	292,165	309,351
In-patient bedded unit	2,114,885	295,107	2,409,992	2,419,452
Hospice at home	191,075	16,878	207,953	229,379
Lymphoedema service	59,695	5,273	64,968	69,564
End of life training - care homes	45,826	4,048	49,874	48,680
Family support team	97,656	8,625	106,281	90,540
Macmillan family support worker	27,902	2,465	30,367	44,436
Outreach	117,308	1,509	118,817	91,458
Catering services	52,612	12,288	64,900	56,341
Volunteer's summer party	1,421	-	1,421	1,815
Staff training	1,009	-	1,009	2,798
Equipment fund	2,583	-	2,583	11,689
Dying matters	497	-	497	944
CPR training	246	-	246	271
Garden fund	-	-	-	191
	<u>2,970,666</u>	<u>380,407</u>	<u>3,351,073</u>	<u>3,376,909</u>

Expenditure on charitable activities was £3,351,073 (2017: £3,376,909) of which £690,970 (2017: £670,510) was unrestricted, and £2,660,103 (2017: £2,706,399) was restricted.

9. ANALYSIS OF GOVERNANCE AND SUPPORT COSTS

	General Support	Governance Function	Total 2018	Total 2017
	£	£	£	£
Depreciation	143,276	-	143,276	141,644
Management salaries	251,228	-	251,228	217,727
Audit fees	-	7,600	7,600	7,300
Payroll & other costs	25,762	-	25,762	23,894
Insurance & legal fees	14,532	-	14,532	14,938
	<u>434,798</u>	<u>7,600</u>	<u>442,398</u>	<u>405,503</u>

10. TAXATION

Corporation Tax has not been chargeable to either company for the year to 31st March 2018. The trading subsidiary has tax losses carried forward of £24,128 (2017: £22,761).

WOODLANDS HOSPICE CHARITABLE TRUST LIMITED
NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS

YEAR ENDED 31 MARCH 2018

11. EMPLOYEE COSTS

The aggregate payroll costs were:			
	2018		2017
	£	£	£
Wages and salaries	2,490,656		2,496,134
NI contributions	173,860		178,974
Pension costs :			
Defined contribution scheme	69,471	70,689	
Contributions to Superann. Scheme	157,127	151,514	222,203
	<u>226,598</u>	<u>222,203</u>	<u>2,897,311</u>
	<u>2,891,114</u>		

Particulars of employees:

	2018	2017
	No	No
The average number of staff employed by the charity and the group during the financial year :		
Number of charitable service staff	84	83
Number of administrative staff	10	7
Number of fundraising staff	16	12
	<u>110</u>	<u>102</u>

During the year the charity employed approximately 89 part time staff, including 17 employees on a zero hour contract.

Numbers of employees who received remuneration in excess of £60,000 per annum are listed below:

	GROUP		COMPANY	
	2018	2017	2018	2017
£60,000 - £70,000	<u>1</u>	<u>1</u>	<u>1</u>	<u>1</u>

During the year the charity made contributions to defined benefit schemes in relation to higher paid employees amounting to £8,978 (2017: £8,840).

Neither the trustees nor any other person connected with them have received any remuneration during the year.

The trustees were not reimbursed for expenses during the year (2017: £Nil).

The key management personnel of the group comprise the trustees, Chief Executive Officer and senior management. The total employee benefits of the key management personnel of the group were £144,358 (2017: £161,658).

The doctors and the associated clerical support, at Woodlands Hospice are contracted to work at the Hospice through a service level agreement with Aintree University Hospital NHS Foundation Trust. The total amount recharged from Aintree Hospital to the Hospice in the year for these services was £222,758 (2017: £235,393). In the year to March 2018 the Hospice incurred agency costs in relation to the Therapy team of £3,048 (2017: £61,329). The costs were significantly higher in the previous year as historically the costs were recharged from Aintree Hospital. As the Hospice decided to employ its own physiotherapists and occupational therapists for the year to March 2017 agency costs were incurred as the newly implemented team carried some role vacancies.

WOODLANDS HOSPICE CHARITABLE TRUST LIMITED
NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
YEAR ENDED 31 MARCH 2018

11. EMPLOYEE COSTS (continued)

The Aintree University Hospital NHS Foundation Trust also provides the hospice with access to its Nurse Bank to ensure that the hospice is able to have all shifts suitably manned during periods of staff absence. Aintree Hospital invoice the hospice based on the nurses used on a monthly basis. The total amount recharged from Aintree Hospital to the Hospice in the year for this service was £74,878 (2017: £44,499).

12. MOVEMENT IN TOTAL FUNDS FOR THE YEAR

This is stated after charging :

	2018 £	2017 £
Depreciation	143,276	141,644
Fees payable to the charity's auditors for: the audit of the charity's annual accounts	5,100	5,100
the audit of the charity's subsidiary	2,500	2,200
other accounting services	1,500	2,310
	9,100	9,610

13. TANGIBLE FIXED ASSETS

GROUP:	Fixtures, Fittings & Computers £	Short Leasehold Buildings £	Furniture & Equipment £	Total £
COST OR VALUATION				
At 1 April 2017	305,761	3,263,363	391,138	3,960,262
Additions	8,289	-	25,761	34,050
Disposals	-	-	(1,433)	(1,433)
At 31 March 2018	314,050	3,263,363	415,466	3,992,879
Comprising :				
Cost	314,050	3,068,363	415,466	3,765,262
Valuation 1996	-	195,000	-	195,000
	314,050	3,263,363	415,466	3,992,879
DEPRECIATION				
At 1 April 2017	262,996	989,524	372,625	1,625,145
Charge for the year	8,339	110,549	24,388	143,276
On disposals	-	-	(1,433)	(1,433)
At 31 March 2018	271,335	1,100,073	395,580	1,766,988
NET BOOK VALUE				
At 31 March 2018	42,715	2,163,290	19,886	2,225,891
At 31 March 2017	42,765	2,273,839	18,513	2,335,117

WOODLANDS HOSPICE CHARITABLE TRUST LIMITED
NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
YEAR ENDED 31 MARCH 2018

13. TANGIBLE FIXED ASSETS *(continued)*

COMPANY:	Fixtures, Fittings & Computers £	Short Leasehold Buildings £	Furniture & Equipment £	Total £
COST OR VALUATION				
At 1 April 2017	297,841	3,249,116	391,138	3,938,095
Additions	4,319	-	25,761	30,080
Disposals	-	-	(1,433)	(1,433)
At 31 March 2018	<u>302,160</u>	<u>3,249,116</u>	<u>415,466</u>	<u>3,966,742</u>
Comprising :				
Cost	302,160	3,054,116	415,466	3,771,742
Valuation 1996	-	195,000	-	195,000
	<u>302,160</u>	<u>3,249,116</u>	<u>415,466</u>	<u>3,966,742</u>
DEPRECIATION				
At 1 April 2017	261,217	987,429	372,625	1,621,271
Charge for the year	6,022	107,699	24,388	138,109
On disposals	-	-	(1,433)	(1,433)
At 31 March 2018	<u>267,239</u>	<u>1,095,128</u>	<u>395,580</u>	<u>1,757,947</u>
NET BOOK VALUE				
At 31 March 2018	<u>34,921</u>	<u>2,153,988</u>	<u>19,886</u>	<u>2,208,795</u>
At 31 March 2017	<u>36,624</u>	<u>2,261,687</u>	<u>18,513</u>	<u>2,316,824</u>

The revaluation relates to the old outpatient/day therapy buildings of the Hospice which were redesigned in a previous reporting period and rebranded as the Well-Being and Support Centre. The costs of the redesign were capitalised and the Trustees are satisfied that the value of the buildings in the financial statements sufficiently reflect the actual value of the building. The Trustees are not aware of any other material changes to the valuation of the buildings.

WOODLANDS HOSPICE CHARITABLE TRUST LIMITED
NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
YEAR ENDED 31 MARCH 2018

14. INVESTMENTS

GROUP:

Listed investment portfolio:	2018	2017
	£	£
Market value as at 1 April 2017	654,383	540,075
Additions at cost	76,065	85,990
Disposals at market value	(212,857)	(57,352)
Net gain/(loss) in market value		
Realised	50,278	29,213
Unrealised	(42,999)	56,457
	<u>7,279</u>	<u>85,670</u>
Market value as at 31 March 2018	<u>524,870</u>	<u>654,383</u>
Historical cost as at 31 March 2018		532,726

The investments had the following market values as at the year end:

	Market Values	
	2018	2017
	£	£
UK Fixed Interest	68,800	86,214
Overseas Fixed Interest	21,819	26,947
UK Equities	143,139	173,098
Overseas Equities	187,276	261,402
Property	33,292	46,675
Alternative Investments	70,544	60,047
	<u>524,870</u>	<u>654,383</u>

There were no individual investments exceeding 5% of the total portfolio value as at 31 March 2018.

Cash held as part of the investment portfolio is included within bank and cash. The value of the cash held as part of the investment portfolio was £39,427 (2017: £7,026).

COMPANY:

In addition to the investment portfolio held with Investec which is disclosed above within the group note, the charity also has an investment of £3 in its wholly owned subsidiary Woodlands Hospice Limited (WHL), which is incorporated in the England & Wales (Company No:03278425)

WHL operates charity shops and the hospice lottery to help support its parent company. During the year, WHL transferred £98,030 (2017: £46,500) under the terms of a profit shedding agreement.

The summary financial position and performance of the subsidiary alone is:

	2018	2017
	£	£
Turnover	341,939	310,014
Expenditure	344,814	311,371
(Loss)/profit	(2,875)	(1,357)
Gross assets	212,812	153,437
Liabilities	194,852	132,602
Net assets	17,960	20,835

WOODLANDS HOSPICE CHARITABLE TRUST LIMITED
NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS

YEAR ENDED 31 MARCH 2018

15. STOCK

	GROUP		COMPANY	
	2018	2017	2018	2017
	£	£	£	£
Goods bought for resale	3,681	2,220	409	409
	<u>3,681</u>	<u>2,220</u>	<u>409</u>	<u>409</u>

16. DEBTORS

	GROUP		COMPANY	
	2018	2017	2018	2017
	£	£	£	£
Trade debtors	29,293	17,938	29,293	17,291
Prepayments	34,163	32,986	27,073	27,415
Other debtors	243,262	119,581	243,262	96,439
Amount owed by subsidiary	-	-	125,276	80,840
	<u>306,718</u>	<u>170,505</u>	<u>424,904</u>	<u>221,985</u>

Amounts falling due after more than one year and included in the debtors above are:

	GROUP		COMPANY	
	2018	2017	2018	2017
	£	£	£	£
Amount owed by subsidiary	-	-	2,250	11,250
	<u>-</u>	<u>-</u>	<u>2,250</u>	<u>11,250</u>

17. CREDITORS: Amounts falling due within one year

	GROUP		COMPANY	
	2018	2017	2018	2017
	£	£	£	£
Trade creditors	117,770	122,266	111,762	111,859
Accruals	66,375	61,635	31,500	23,472
Deferred income	-	-	-	-
Taxation and social security	75,595	101,032	75,152	101,032
Other creditors	103,831	78,414	75,581	75,222
Amounts owed by subsidiary	-	-	3	-
	<u>363,571</u>	<u>363,347</u>	<u>293,998</u>	<u>311,585</u>

Deferred income

GROUP AND COMPANY:

	GROUP		COMPANY	
	2018	2017	2018	2017
	£	£	£	£
Balance brought forward	-	40,773	-	40,773
Release of deferred income	-	(40,773)	-	(40,773)
	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>

WOODLANDS HOSPICE CHARITABLE TRUST LIMITED
NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
YEAR ENDED 31 MARCH 2018

17. CREDITORS: Amounts falling due within one year (*continued*)

Deferred income was comprised of grant income received from South Sefton CCG to deliver a particular service which requires the employment of an individual to deliver that service. The funds are released when the individual is in post and funds are released monthly in line with costs to deliver the service. Such grant monies were fully utilised in the previous year.

18. UNRESTRICTED FUNDS

GROUP:	General Fund £	Designated Fund £	Total £
Balance at 1 April 2017	3,333,627	7,800	3,341,427
Incoming resources	1,613,308	-	1,613,308
Recourses expended	(1,234,476)	-	1,234,476
Gains on investments	7,279	-	7,279
Funds Transfer - restricted (Note 19)	(285,776)	-	(285,776)
Fund Transfer - unrestricted	7,800	(7,800)	-
Balance at 31 March 2018	<u>3,441,762</u>	<u>-</u>	<u>3,441,762</u>

The designated fund relates to the revaluation reserve.

COMPANY:	General Fund £	Designated Fund £	Total £
Balance at 1 April 2017	3,312,798	7,800	3,320,598
Incoming resources	1,369,399	-	1,369,399
Recourses expended	(987,695)	-	(987,695)
Gains on investments	7,279	-	7,279
Funds Transfer – restricted (Note 19)	(285,776)	-	(285,776)
Fund Transfer - unrestricted	7,800	(7,800)	-
Balance at 31 March 2018	<u>3,423,805</u>	<u>-</u>	<u>3,423,805</u>

The designated fund relates to the revaluation reserve.

WOODLANDS HOSPICE CHARITABLE TRUST LIMITED
NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
YEAR ENDED 31 MARCH 2018

19. RESTRICTED FUNDS

GROUP AND COMPANY:

	Balance as at 1 April 2017 £	Incoming Resources £	Resources Expended £	Transfer (to) / from unrestricted fund £	Balance as at 31 March 2018 £
Family support worker	-	26,518	(97,656)	71,138	-
Macmillan FSW	5,350	21,699	(27,902)	853	-
Lymphoedema service	16,573	58,384	(59,695)	-	15,263
Outreach service	22,575	105,341	(117,308)	(10,608)	-
Hospice at Home	-	240,000	(191,075)	(48,000)	925
15 - Bed in-patient unit	-	1,829,918	(2,114,885)	284,967	-
Education/training etc.	44	1,040	(1,009)	(75)	-
Social worker funding	7,352	-	-	-	7,352
Community awareness	1,664	-	-	-	1,664
End of Life – care homes	-	44,817	(45,826)	1,009	-
ICN comms skills	7,752	-	-	-	7,752
GP programme	12,507	-	-	-	12,507
Unified DNACPR	-	-	-	-	-
Training	52	-	(246)	1,194	1,000
ACST (MCCN)	3,664	-	-	-	3,664
MDT development fund	800	-	-	-	800
Dying matters	3,348	-	(497)	-	2,851
Volunteer's summer party	-	-	(1,421)	1,421	-
Percy Bilton fund	340	-	-	(340)	-
Equipment fund - grants	17,233	33,975	(2,187)	(15,051)	33,970
Equipment fund - donations	936	5,360	(396)	(732)	5,168
	<u>100,190</u>	<u>2,367,052</u>	<u>(2,660,103)</u>	<u>285,776</u>	<u>92,915</u>

See note 23 for further details on transfers between funds.

WOODLANDS HOSPICE CHARITABLE TRUST LIMITED
NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
YEAR ENDED 31 MARCH 2018

19. RESTRICTED FUNDS *(continued)*

Family Support Worker

This conditional grant from Sefton, Liverpool and Knowsley CCGs is provided to contribute to the cost of a family support worker services across our In-Patient unit and our Well-Being and Support Centre.

Macmillan Family Support Worker

Funds received from Macmillan Cancer Support to fund one whole time Family Support Worker for a period of two years. Funding for this service from Macmillan came to an end in September 2017. Income was received monthly and the monies are released as the costs are incurred.

Lymphoedema Service

This conditional grant from Sefton, Liverpool and Knowsley CCGs is provided to contribute to the cost of Lymphoedema services.

Outreach Service

This conditional grant from Sefton, Liverpool and Knowsley CCGs is provided to contribute to the cost of Community Outreach services. A proportion of our therapy team costs are allocated to this fund.

Hospice at Home

This grant is from Sefton CCG and is provided to run a Hospice at Home Service for patients with a South Sefton GP.

15 - Bed In-patient Unit

This conditional grant from Sefton, Liverpool and Knowsley CCGs is provided to contribute to the cost of In Patient services.

Education/Training

The Hospice applies for training grants from various grant making trusts throughout the year to supplement staff training costs. Expenditure on staff training is directly attributed against this fund as the appropriate costs are incurred.

Social Worker Funding

These monies from Merseyside and Cheshire Cancer Network (MCCN), hosted on behalf of the Aintree Integrated Cancer Network (ICN), were provided for the ICN to deliver training to social workers on end of life care. Monies are released as costs are incurred.

Community Awareness

These brought forward monies from Merseyside and Cheshire Cancer Network (MCCN), hosted on behalf of the Aintree Integrated Cancer Network (ICN), were provided for the network to engage with the community on dying and end of life matters. Funds are released as costs are incurred.

End of Life Training Programme – Care Homes (6 steps)

This grant is received from South Sefton CCG to fund a care home facilitator. Funds are released as costs are incurred.

ICN Comms Skills – Education Post

These brought forward funds, hosted for Aintree Integrated Cancer Network (ICN) and provided by Merseyside and Cheshire Cancer Network (MCCN), are remaining monies from communications skills training rebadged for role of ICN education facilitator. Funds are released as costs are incurred.

WOODLANDS HOSPICE CHARITABLE TRUST LIMITED
NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
YEAR ENDED 31 MARCH 2018

19. RESTRICTED FUNDS *(continued)*

ICN Comms Skills Local Programme

Monies hosted for Aintree Integrated Cancer Network (ICN) and provided by Merseyside and Cheshire Cancer Network (MCCN) MPET funding for local communications skills training.

GP Programme

Monies hosted for Aintree Integrated Cancer network (ICN) provided by Merseyside and Cheshire Cancer Network (MCCN), for GP end of life education programmes. Monies are released as costs are incurred.

Unified DNACPR Training

Funds were received to fund the training of staff in "Do Not Attempt CPR". Monies are released as costs are incurred.

Advanced Communications Skills Training/Train the Trainer (MCCN)

Monies hosted for Aintree Integrated Cancer Network (ICN) provided by Merseyside and Cheshire Cancer Network (MCCN) for advanced communications skills training. Monies are released as costs are incurred.

MDT Development Fund

Funding was received from Multi Professional Education and Training levy (MPET) in order to develop a local plan for MDT development. Monies are released as costs are incurred.

Dying Matters

Monies received in a previous year from South Sefton CCG in order that the Hospice could actively participate in Dying Matters week by hosting events in order to promote a greater awareness around death and dying. The hospice has now hosted three events for dying Matters week and will continue to participate in future years with the use of this fund.

Percy Bilton Fund

This grant was received to contribute towards the installations of Accrowynn protective covering and corner guards to bedrooms in our In-Patient unit for patient and staff safety. The project was completed in 2015 and expenditure released against the fund. The funds remaining represent the vat element of the costs of the project and have therefore been written back to the unrestricted funds.

Equipment Funds

This includes grants from various Charitable Trusts and also donations from individuals for specific items of equipment and furniture to be used either for the benefit of patients or staff. Where funds are expended on capital items the fund is appropriately reduced by a transfer equivalent to the capital cost.

Volunteer Party Fund

In previous years grants have been received to fund the volunteer Christmas and Summer parties and as such the expenditure against such activities is still shown as restricted.

WOODLANDS HOSPICE CHARITABLE TRUST LIMITED
NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
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20. ANALYSIS OF NET ASSETS (between restricted and unrestricted funds)

	Tangible fixed assets	Investments	Other net assets	Total
	£	£	£	£
Restricted Funds	-	-	92,915	92,915
Unrestricted Funds	2,225,891	524,870	691,001	3,441,762
	<u>2,225,891</u>	<u>524,870</u>	<u>783,916</u>	<u>3,534,677</u>

21. COMMITMENTS UNDER OPERATING LEASES

At 31st March 2018 the group and company had future minimum payments under non-cancellable operating leases as follows:

	2018	2017
	£	£
In one year or less	14,387	14,555
In more than one year, but not more than 5 years	27,566	36,016
In greater than 5 years	-	3,765
	<u>41,953</u>	<u>54,336</u>

22. RELATED PARTY TRANSACTIONS

During the year the company entered into transactions with its wholly owned subsidiary, Woodlands Hospice Limited. The transactions can be summarised as follows:

	2018	2017
	£	£
Donations from subsidiary	98,030	46,500
Transfer of expenditure to the subsidiary:		
Salaries	109,617	49,474
Other general overheads	4,917	4,970

At 31 March 2018, there was a balance due to the company from Woodlands Hospice Limited of £125,276 (2017: £80,840).

23. GROSS TRANSFERS BETWEEN FUNDS

Transfers from unrestricted funds to restricted funds represent a particular restricted area of resources where total expenditure exceeds the incoming resources for this service. The deficit is therefore transferred from the unrestricted funds to ensure that individual funds do not show a deficit at the year end.

The transfer between the restricted fund for Hospice at Home and unrestricted funds is to account for the management and administrative costs and the overhead expenses of this service as agreed with South Sefton CCG.

WOODLANDS HOSPICE CHARITABLE TRUST LIMITED
NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
YEAR ENDED 31 MARCH 2018

24. GUARANTEE

The charitable company is limited by guarantee and has no share capital. The members' liability is restricted to £1 in accordance with the memorandum and articles.

25. RESULTS OF THE COMPANY

The consolidated statement of financial activities includes the results of the charity's wholly owned subsidiary, Woodlands Hospice Limited, which operates the hospice lottery and a charity shop.

The summary financial performance of the charity alone is:

	Total Funds 2018 £	Total Funds 2017 £
Income from:		
Donations and legacies	915,612	743,906
Payments from subsidiaries	98,030	46,500
Grants receivable	2,653,165	2,692,138
Interest receivable	276	872
Investment income	21,481	24,317
Other Income	47,887	41,432
Total Income	3,736,451	3,549,165
Expenditure on:		
Raising funds	296,725	317,526
Charitable activities	3,351,073	3,376,909
Total Expenditure	3,647,798	3,694,435
Net (losses)/gains on investments	7,279	85,670
Net movement in funds	95,932	(59,600)
Reconciliation of funds:		
Total funds brought forward	3,420,788	3,480,388
Total funds carried forward	3,516,720	3,420,788
Represented by:		
Restricted funds	92,915	100,190
Unrestricted funds	3,423,805	3,320,598
	3,516,720	3,420,788