St Gemma's Hospice

Report and Financial Statements

31 March 2019



Charity Registration No: 1015941

Company Registration No: 02773867



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Reference and administrative information

Charity Name

St Gemma's Hospice

Charity Registration Number

1015941

Company Registration Number

02773867

Registered Office

329 Harrogate Road Moortown Leeds LS17 6QD

Patrons

The Right Rev Marcus Stock, Catholic Bishop of Leeds The Right Rev Nick Baines, Anglican Bishop of Leeds The Earl and Countess of Harewood HM Lord-Lieutenant for West Yorkshire, Ed Anderson Professor Gerald Richards Tom Riordan Arif Ahmad Zulfi Hussain MBE

40th Anniversary Patrons

HM Lord-Lieutenant for West Yorkshire, Ed Anderson Bob Bowman Liz and Dr Terry Bramall CBE Chris Pointon Marilyn Stowe Christine Talbot Duncan Wood Edward Ziff OBE

Bankers

HSBC Bank plc 108 Harrogate Road Leeds LS7 4NU

Investment Advisers

Investec Wealth and Investment 2 Gresham Street London EC2V 7QN

Auditor

Deloitte LLP Registered Auditor 1 City Square Leeds LS1 2AL

Hospice Leadership Team

Dr Mike Stockton

Consultant in Palliative Medicine & Chief Medical Officer Kerry Jackson

Chief Executive

Heather McClelland

Chief Nurse

Jason Kirk

Chief Operating Officer & Company Secretary



Board of Trustees

Dr Peter Belfield

Chair of the Board Member of the Corporate Governance Committee

June Toovey

Deputy Chair of the Board Chair of the Clinical Governance Committee Member of the Corporate Governance Committee

Sue Ansbro

Deputy Chair of the Board Chair of the Corporate Governance Committee Member of the Finance & Business Committee

Kuldeep Bajwa

Member of the Clinical Governance Committee

Hilary Barrett

Member of the Finance & Business Committee

Dr Elizabeth Carmody

Member of the Clinical Governance Committee (retired 15 January 2019)

Debra Fairley

Member of the Clinical Governance Committee

Sr Eileen Fucito CP

Sr Carmel Gorman CP

Sr Anne Hammersley CP

Angus Martin

Chair of the Finance & Business Committee Member of the Corporate Governance Committee

Professor Julia Newton-Bishop

Member of the Clinical Governance Committee

Sr Therese O'Regan CP

Chris Schofield

Member of the Finance & Business Committee

Sr Savio Steed CP

Trustees' Report

Our Vision:

The needs of people living with a terminal illness and those close to them are met with care, compassion and skill

Our Purpose:

St Gemma's Hospice acknowledges the value of life and the importance of dignity in death. We provide and promote the highest quality palliative and end of life care, education and research

Our Values:

Caring - Treating each person with kindness, empathy, compassion and respect

Aspiring - Continually learning and developing; striving for excellence in everything we do

Professional - Delivering high standards through team work, a skilled workforce and good governance

Our Strategy 2018 - 2028:



Impact

St Gemma's University
Teaching Hospice will
improve care for patients
and families through
research, education and
translating evidence
into practice



Connect

St Gemma's Hospice will work in partnership with others to provide the standard of care we would want for our own families



Extend

St Gemma's Hospice will develop palliative and end of life care services in Leeds to meet the needs of more people in the future

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Scope

The needs of people living with a terminal illness and those close to them are met with care, compassion and skill

Quality

Continuous improvement is sought across all areas of the Hospice

Sustainability

Our Hospice services, estate and workforce are financially viable and fit for the future

Statement from the Chair and the Chief Executive

We are delighted to introduce the St Gemma's Report and Financial Statements for the year to 31 March 2019. St Gemma's Hospice provides and promotes the highest quality palliative and end of life care, education and research. We strive to meet the complex and changing needs and preferences of people with a terminal illness and support their families and carers, including children and young people. Through education and research our Academic Unit of Palliative Care (AUPC) enables us to improve care and support for many more people than those who receive services directly from St Gemma's.

During the year we celebrated the Hospice's 40th Anniversary with a number of special events including A Night to Remember at Leeds Town Hall, a Mass of Thanksgiving at Leeds Cathedral and a 40 Faces photography exhibition. Over the last 40 years we have cared for many thousands of people with a terminal illness and supported their families and friends; as we have grown in size and complexity, we have always retained our vision of meeting the needs of individuals with care, compassion and skill.

Last year we developed our new Hospice Strategy with three pillars of Impact, Connect and Extend. This year the Board of Trustees approved plans for delivering this Strategy, building on the strengths of our current services and developing and transforming our services for the future.

St Gemma's care is rated Outstanding by the Care Quality Commission. We have made care quality improvements in a range of areas including strong progress against our three Quality Account priorities for 2018/19: management of the acutely deteriorating patient; improving end of life care for homeless people; and improving patient feedback.

One of the key ways in which we are assured about the quality of care provided by St Gemma's is feedback received from families. This year we surveyed bereaved relatives about the quality of care for patients who died on the wards; 71% of surveys were returned, a very high response rate. We are proud of the results which show that respondents felt their relative died in the right place, that staff were professional and made time

for them, privacy and dignity were respected and pain and other symptoms were effectively controlled.

St Gemma's hosts the Leeds Palliative Care Network, bringing together health, social care and academic professionals in partnership to drive real systems change, promoting the highest quality of consistent, equitable and sustainable care in the final phase of life.

As the first University Teaching Hospice, St Gemma's is a leading academic centre of palliative care within the UK. Our AUPC, working in collaboration with the University of Leeds and others, improves care through research, education and translating evidence into clinical practice. We have continued to attract significant external research grant income and recruit patients to local and national studies and clinical trials. We are a regional learning hub for healthcare professionals of all disciplines, providing training to over 500 individuals each year. This year we have added to our programme of education by introducing video conferencing technology (Extension for Community Healthcare Outcomes (ECHO)) to deliver training; the initial programme is being delivered to 11 GP practices in Leeds.

For the second year, St Gemma's took part in The Sunday Times Best Companies Survey. We achieved an improved ranking in the 100 Best Not-for-Profit Organisations, with very good levels of staff engagement. Staff value the chance to make a difference, the calm and friendly environment and their wonderful colleagues. The survey identified opportunities for further improving working life at St Gemma's; these are being addressed as part of our commitment to enhancing Hospice culture in areas such as working across teams and developing our leaders and managers. During the year staff from across the Hospice developed a new Behaviours Framework as part of our culture work.

St Gemma's could not continue without the generous support of our local community, in the form of volunteering, donations and fundraising. We are hugely grateful to every individual, school and group, place of worship, club and business

that has supported us this year. We were delighted also to be the Lord Mayor's Charity of the Year. We are also grateful to those individuals who valued the work of the Hospice by leaving a gift in their will.

We appreciate the financial contribution we receive from the NHS and value our strong relationship with NHS commissioners and other health and care providers in Leeds.

Raising the funds we need every year is challenging, and the challenge will grow further as both the need for care and complexity of care are expected to increase over the coming years. Recruitment to registered nursing posts continues to be a challenge locally and nationally; and we continue to take steps to manage this risk through skill mix, training and an increasing focus on the wellbeing of St Gemma's staff.

We are delighted to report a strong set of financial results that support the achievement of our long term strategy and financial plans. Headline income of £10.8m represents year on year growth of 11.6%, delivering a surplus for the financial year of £499k. This growth in income reflects the success of our twenty four shops and an exceptional year in legacy income. General reserves have strengthened to £7.3m (2018: £6.3m) ensuring we cover our assessed financial risks, support

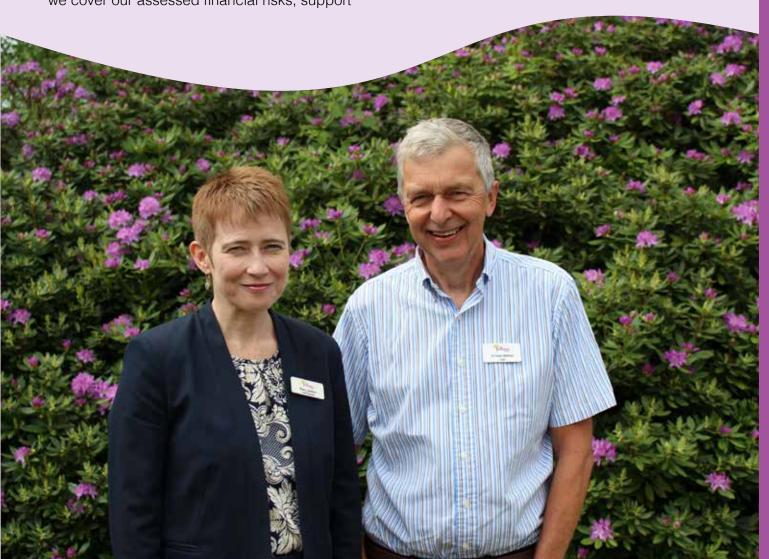
agreed future investment plans and continue to be sustainable in the future.

We are delighted to welcome Heather McClelland to St Gemma's as our Chief Nurse. Heather is an experienced nurse with strong clinical and professional skills and a passion for delivering quality and improvement.

We offer sincere thanks to our Board of Trustees, including Dr Elizabeth Carmody who retired from the Board during the year. We thank our 40th Anniversary Patrons for the support they have given during this special Anniversary year: Ed Anderson, Bob Bowman, Liz and Terry Bramall, Chris Pointon, Marilyn Stowe, Christine Talbot, Duncan Wood and Edward Ziff.

We are also grateful to our Patrons for their ongoing contributions and we are delighted to welcome HM Lord-Lieutenant for West Yorkshire, Ed Anderson as a Patron of the Hospice. Sincere thanks also to the Sisters of the Cross and Passion, who continue to provide guidance, support and challenge to the elected Trustees and the Hospice Leadership Team.

Dr Peter Belfield Kerry Jackson Chair Chief Executive



Strategic Highlights 2018/19

942
Volunteers contributed



123,344
Hours



7,500Twitter Followers





24
Retail
Outlets

255 Staff Members

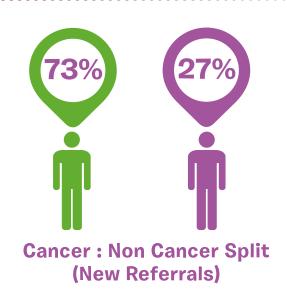




517Admissions to In-Patient Unit









5,005
Community Nursing and Medical Face to Face
Consultations

1,228

New Patient Referrals



610,000Retail Customers



£ £

26%
CCG
Main Grant



15,500

Facebook Followers



118
Student Placements

640

External Healthcare Professionals Trained



100
BEST NOT-FOR-PROFIT
ORGANISATIONS
TO WORK FOR
2019

List ranking

67th

13 days

Average In-Patient Length of Stay









The Sisters of the **Cross and Passion**

The Sisters of the Cross and Passion identified the need for a hospice caring for terminally ill patients and a public meeting was held to launch an appeal for funds.

New **Hospice Opens**

The Prince & Princess of Wales opened the new 45 bed Hospice on 30th March and met patients, staff and supporters.



Education Centre Opens

Princess Diana returned to open the Elizabeth Prout Education Centre. Teaching has always been an important part of St Gemma's.











of the Hospice buildings and grounds began in 2000 at a cost of £5million.







Establishing the Hospice

A building on Harrogate Road which had previously been a private school was converted into a 9 bed Hospice, and St Gemma's Hospice was opened on 12th March 1978.

First Shop

St Gemma's opened its first charity shop in Harehills. The Hospice now has 24 shops around Leeds.

Kathleen. the first shop manager, is still in post today!



Caring for the people of Leeds

St Gemma's has been part of the Leeds community since 1978. Here are a few of the significant events and milestones we have seen over the last four decades...

For more details about our history and ways to get involved please visit www.st-gemma.co.uk/40



Garden Awards

The gardens received the Yorkshire in Bloom Award, one of many that they have won up to the present day.



365 Days of Care

After a very successful appeal, home visiting by the Community Clinical Nurse Specialists was extended to include Saturdays and Sundays.



St Gemma's was formally recognised as the country's first **University Teaching** Hospice, the first hospice to achieve this in the UK and the world.













40th Anniversary



Academic Unit of Palliative Care

The St Gemma's Academic Unit of Palliative Care was inaugurated in 2012. The AUPC improves the care of those approaching the end of life through research, teaching and clinical practice.

Outstanding Care

St Gemma's was awarded the top rating of 'Outstanding' by the Care Quality





Outstanding!

Strategic Report

St Gemma's Hospice is a registered charity. The Charity's objectives as set out in the company's Memorandum and Articles of Association are:

- the palliative care, treatment or relief of people with active, progressive and advanced illness without regard to their means, culture, faith or belief at St Gemma's Hospice in Leeds and such other places as the Charity thinks fit and in the community
- the relief of those who have experienced loss and bereavement, in particular families, friends and carers, through the provision of counselling, advice and support
- the provision of education and training for professionals and volunteers engaged in palliative care.

The Trustees have referred to the guidance contained

in the Charity Commission's general guidance on public benefit when reviewing the aims and objectives of the Hospice and in planning future activities which are set out in this report.



The Hospice benefits the public by providing services free of charge to patients, families, friends and carers within the St Gemma's catchment area. Our services are open to patients over the age of 18 regardless of race, religion, sexual orientation, age or diagnosis. We provide care to people with a range of diagnoses including cancer, neurological conditions and end stage respiratory and heart disease. We also provide support to families and carers including children and young people.

The Hospice team provides specialist palliative care, where the patient has unresolved needs that exceed the expertise of the referring team, and end of life care. Care is provided by our specialist team of doctors, nurses, social workers, therapists, counsellors and spiritual care workers and by our team of vital support staff. Much of our care is provided in people's own homes and care homes, with care also offered in our In-Patient Unit and Day Services in Moortown.

St Gemma's care is individual and holistic, seeking to alleviate symptoms such as pain and breathlessness as well as supporting people's emotional and spiritual wellbeing. We recognise the unique physical, emotional, social and spiritual needs of each person and place a high value on respect, choice and empowerment.

Our services are free to patients and those close to them, but they are not free to provide. The local community continues to provide thousands of volunteer hours every year as well as providing the majority of our funding through donations,

> fundraising and gifts in wills. We are extremely grateful for the amazing generosity

> > received from the NHS also provides essential funding, which in 2018/19 represented 26% of the total income generated by St Gemma's Hospice.

The Hospice is subject to periodic review by the Care Quality Commission. The latest review was an

unannounced inspection on 13 July

2016 where St Gemma's Hospice services were rated as Outstanding.





The Year Under Review

Strategic Priorities

We have made strong progress in each of the areas we identified as a priority for focus in 2018/19:

- In-Patient Services model: we have reviewed the provision of beds on our two wards, modelling expected demographic changes and complexity of need to predict future requirements. A core part of providing effective care is enabling people to die where they wish. This year we have extended our nurse led end of life care beds to provide admissions over 7 days rather than 5. to meet need in a more timely way which is so important when prognosis may be short; 16% of admissions to these beds are now made at weekends. We have worked with colleagues from Leeds Teaching Hospitals to improve the identification of patients nearing the end of life to enable more patients to access St Gemma's where this is their preferred place of death. It is challenging to build new pathways of care and this work will continue into 2019/20. We have established a new pathway for transfer of patients from the hospital Emergency Departments to Leeds hospices.
- Community Services model: we have reviewed our Community Services model, recognising the growing demand for community services particularly in terms of complexity of need.
 We have recognised the increased need to give timely advice to patients, families and professionals and to effectively prioritise workload for the team to ensure appropriate, high quality care. This work has informed one of our Quality Account priorities for 2019/20.
- Day Services model: we have reviewed our Day Services model, creating a more flexible and responsive service, expanding care and providing options for accessing multi-disciplinary support. The changes are still in their early days but include: a drop-in services for patients and carers to empower people and facilitate earlier engagement with palliative care; a weekly carers' group, and groups for breathlessness and fatigue management. We have changed our staffing model and recruited additional volunteers to support the services.
- Hospice Culture: this significant priority area is addressed further under the section titled Staff below.

Sincere thanks for the care and support you gave my mum. I am so grateful that her illness was short, her care exemplary and her death was as she wanted it to be. I cannot speak highly enough of your care, compassion or expertise you made all the difference.

St Gemma's is a wonderful place but it's the people who make it exceptional.

Community Service Feedback

• Enhanced digitisation: we continue to integrate digital technology into services to optimise, innovate and enhance clinical care, patient experience and education. During the year we have agreed the main digital transformation themes and key areas for investment. We have upgraded our internet lines and updated PCs in all our retail outlets and upgraded laptops to support mobile working, particularly for the community Clinical Nurse Specialists.

I was physically, mentally and emotionally worn out... the support group was a life saver to me.

Carers' Group Feedback

Patient and Family Care

The number of new patient referrals to St Gemma's fell slightly in 2018/19 compared with the prior year, but remained consistent with a longer term trend of rising first referrals. Many patients accessed more than one St Gemma's service, for example specialist care at home, attendance at Day Services and In-Patient admissions.

Long term trends show a steady increase in the number of patients with a non-cancer diagnosis accessing our services. We continue to see patients with increasingly complex needs admitted to the wards. In-Patient admissions have fallen slightly this year, in part due to nursing staffing shortages which have sometimes restricted admissions; this is a national problem and we continue to take steps to recruit, retain and develop our nursing workforce, as well as developing new models of staffing. We are also working proactively with partners to drive improvements in the identification and transfer of patients to St Gemma's, where this is their preferred place of care.

Community visits have fallen this year compared to last year due to a range of factors. These include the fact that most of our specialist community nursing team are now able to prescribe medicines to patients at home, resulting in a more comprehensive first assessment and reducing the number of follow up visits needed. We have also invested in the training and development of the team resulting in some short-term loss of capacity. A more flexible and responsive Day Services offer with an increased number of attendances has also contributed to this change.

The love and kindness shown to us all deeply moved us, we will never forget this whole experience.

Thank you.

Equality of Access

As part of our community engagement work, the Hospice continues to work with the Community Engagement Steering Group facilitated by Leeds Involving People, engaging black and minority ethnic citizens living in the Leeds 7 and 8 postcode areas. The Steering Group acts as an advisory panel guiding development of culturally aware and accessible services. This year, we have hosted a myth-busting event for local communities to encourage increased access to Hospice services.

During the year the Hospice started the implementation of our Dementia Strategy (2018-23) which aims to support people living with dementia and other forms of chronic cognitive impairment. This could be patients, relatives or members of the public using our services. In 2018/19 we have trained staff in any role within the Hospice about dementia at induction and have made changes to the environment to be more conducive to the care of this group.

Improving Clinical Care

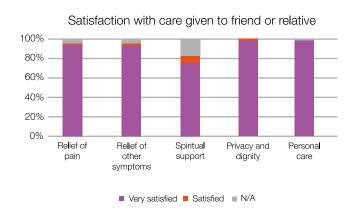
Each year St Gemma's identifies priorities for clinical quality improvement; these are set out in our Quality Account. This year we made strong progress against our three priorities:

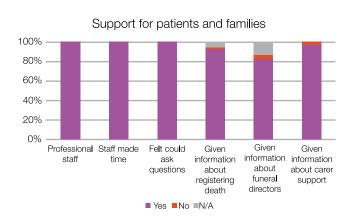
- Patient Safety: management of the acutely deteriorating patient
- Patient Experience: improving end of life care for homeless people
- Clinical Effectiveness: improving patient feedback

We measure the quality of our clinical care in a variety of ways including patient outcome measures, patient and family feedback, complaints, service evaluation and audit, patient safety incidents, benchmarking, staff views and the findings of national and local reviews.

Our key performance indicators for 2018/19 do not give rise to any significant areas of concern. Patient falls on the wards have continued to reduce since the introduction of safety huddles in 2017/18 following work with Leeds Teaching Hospitals NHS Trust and the NHS Improvement Academy.

A survey was sent to all relatives of patients who died on the In-Patient wards between 1 October and 31 December 2018; of 99 deaths in total we received 70 responses, a rate of 71% which is significantly better than prior years and a very high rate for this type of survey.





100% of respondents told us that they felt their relative died in the right place. The charts on the previous page show the satisfaction with care provided (no respondents indicated they were dissatisfied with care) and the support offered to patient and families.

During 2018/19 we have improved our bereavement care for adults to provide a more responsive and focussed service that is led by the needs of clients. This has led to reductions in the waiting times for access to one to one counselling. We have worked with longer standing members of our monthly bereavement support group to empower them to care for themselves and each other and so create capacity for the more recently bereaved. We have also expanded the bereavement team with volunteers and students on placement.

Our bereavement support service for children and young people has continued to provide one to one and family counselling sessions. Some special events this year included a Christmas party for 40 bereaved children, A Day of Dance, a pottery day and A Day to Remember. The events give children the opportunity to interact with other young people who are also living with bereavement.

Coordination of Care

We recognise the critical importance of working with others in the city to improve care. The Leeds Palliative Care Network is hosted by St Gemma's Hospice and brings together organisations with experience of, and responsibility for, palliative and end of life care. We have come together to do all we can to achieve for everyone what we would want for our own families. Working together we can overcome the boundaries that sometimes get in the way of excellent care and make it so difficult for people to navigate their way through a complex healthcare system.

Examples of improvements in care include:

- Enhancing end of life care for people with a non-cancer diagnosis, including improving the transfer of care from hospital to hospice
- Understanding care and identifying inequities through work with the St Gemma's Academic Unit of Palliative Care, Optum Health Alliance and the Leeds Bereaved Carers Survey
- Delivering expert education for community and hospital staff, GPs and care homes, including tele-education, to support improved care and the integration of research and evidence into all developments.
- Integrating with other key partners including the Leeds Academic Health Partnership, Leeds Clinical Senate, GP Confederation and Leeds Informatics Board.

Staff were amazing.
They made sure mum was pain free,
clean, comfortable and that
she felt loved and safe.

Academic Unit of Palliative Care (AUPC)

The AUPC has continued to develop over the last year and has consolidated its position as a leading centre nationally for research and education in palliative care.

Research

Researchers in the St Gemma's AUPC have been successful in winning grant income throughout 2018/19 and have been engaged with mostly homegrown research projects including:

- The Leeds Cancer Pain assessment study, which aims to develop a quick and affordable method of assessing cancer pain to use in routine clinical practice, so allowing for earlier use of effective pain control methods.
- The Access to Medicines at the End of Life (ActMED) programme, evaluating barriers and facilitators to accessing medicines for symptom control in the last year of life.
- The Resolve programme, including access to palliative care from primary care, development of brief symptom interventions, and systematic use of outcome measures.
- Supporting Timely Engagement with Palliative Care (STEP), using patient stories about their experience of being referred to palliative care to inform positive conversations between cancer doctors and patients at the time of referral.

We received national press and media attention in the summer of 2018 for our research that showed that most patients are referred to palliative care services only a short time before they die. This was an analysis of national hospice data which also uncovered that older patients and those with non-cancer diseases were especially disadvantaged. The TV and radio interviews demonstrated the broad interest in the work of hospices and prompted a review of strategies to encourage earlier referral.

The focus of our current research remains on finding ways to help patients with advanced disease get access to the help and medicines they need, including support for managing pain and other important symptoms. Examples include: leading a

European project with partners in Milan, Aachen and Edinburgh to find out whether abnormalities in the sensory nervous system can help us understand the nature of cancer pain; how we might improve access to pain medicines at the end life; how can people from south Asian communities get better access to palliative care and pain management; and developing digital algorithms to identify patients early that may benefit from palliative care assessment.

We have expanded our research team further which now comprises 10 post-PhD research fellows, two academic clinical fellows (doctors in training with academic time), two research nurses, six PhD students and one senior administrator.

Education

The AUPC has provided education & training to 640 external healthcare professionals in 2018/19. We have hosted 118 placements for a wide range of students including medical, nursing and therapies, including a doctor from Nigeria. We have delivered the European Certificate in Palliative Care. In addition, we have delivered GP education, training in dementia, symptom management, Ethics and Advanced Communications Skills. Also we have provided teaching to pre-registration nursing students at degree and Masters Level and have supported the development of the nursing degree apprenticeship at Leeds Beckett University and nursing associate students on the first ever programme.

For Hospice staff we have fully implemented the electronic Learning Management System (LMS) and have developed a totally revised appraisal system which includes a 360 feedback mechanism and will be piloted over the summer period. We continue to implement the Health Education England Yorkshire & Humber End of Life Care Learning Outcomes which support a unified approach to the delivery of high quality palliative and end of life care through supporting workforce development. We have introduced an IT Skills Pathway and provided a comprehensive internal training programme including bereavement and loss for non-clinical staff who have patient contact, leadership training and dementia care.

A small team of St Gemma's Hospice staff have received training through Hospice UK to allow St Gemma's Hospice to become an ECHO hub. This is a regional centre bringing a multidisciplinary team of experts together. We will work with palliative and end of life care specialists across the city in developing and delivering this form of tele-education. Our first ECHO programme

commenced in January 2019 which is being delivered to twelve GP practices in Leeds, with the programme being delivered over ten months.

Evaluations from training undertaken continue to show that it has helped healthcare professionals utilise their learning in practice, increased their confidence in communication, and updated them on new evidence and being able to support and teach other colleagues. Placement evaluations are extremely positive.

St Gemma's was the best experience I have had so far in my entire medical career... everyone was helpful and friendly, they were approachable, always ready to teach and involve me in patient management.

Overall it was an excellent placement.

4th Year Medical Student



Staff

St Gemma's values highly the compassion, dedication, hard work and professionalism of our staff.

We continue to develop our work as an equal opportunities and Disability Confident Employer, we have Leeds Commitment to Carers Status, including active participation in the Leeds Working Carers Employers Forum run in conjunction with Carers Leeds.

We are committed to engaging all our staff in the whole life of the Hospice and to hearing their experience of working life at St Gemma's and responding to any concerns. In 2018/19 we participated for the second time in The Sunday Times 100 Best Companies to Work For survey. We achieved a One Star accreditation, which shows very good levels of engagement, and an improvement on the previous year which moved us up to 67th in the 100 Best Not-For-Profit Organisations list. In particular, the survey highlighted that staff feel proud to work at the Hospice, that it makes a positive difference to the world we live in and it is run on strong values and principles; they value their colleagues and benefit from a calm and friendly environment.

We have taken seriously the feedback provided by staff. This year as part of our strategic focus on enhancing Hospice culture we have concentrated on:

- Staff wellbeing, including the introduction of a staff benefits scheme; running staff wellbeing initiatives; and continuing to work with the Hospice's Employee Engagement Group to promote wellbeing across the organisation
- Developing our leadership and management capability, by providing leadership training for senior clinical staff and bringing together middle managers from across the Hospice to identify key areas for development
- Working with specific departments to improve engagement and respond to staff concerns
- Clarifying expectations of culture and behaviours at St Gemma's, working with staff and volunteers to relaunch our values and develop a new behaviours framework.

Volunteers

St Gemma's continues to benefit from the enormous contribution made by over 900 volunteers, who contribute time, skills and passion to the Hospice. This year, we celebrated and promoted volunteering as part of the Hospice's 40th Anniversary activities. A thank you event for volunteers was held at Leeds City Museum and volunteers with 40 years' service were also recognised at a special Mass of Thanksgiving at Leeds Cathedral.

We were truly delighted when one of

our long standing volunteers was awarded a British Empire Medal for the difference she has made to patients and staff as a spiritual care volunteer.

As part of our aim to encourage all areas of the local community to engage with, and benefit from, involvement in volunteering, we have developed new volunteer recruitment materials, incorporating a short film, in conjunction with local

groups including Leeds Compassionate Communities and the Leeds Race, Equality & Community Forum. Our new volunteer recruitment website highlights the diversity of volunteer roles and the wide variety of voluntary work across the Hospice.

Environment

We continue to invest in our Hospice environment to make it safe and welcoming for patients, families, staff and volunteers. Our gardens continue to provide a calm and comforting environment in every season of the year. This year they received a Gold Award for both Leeds in Bloom and Yorkshire in Bloom, thanks to the hard work, dedication, and forward planning of our staff and volunteer team.

We were awarded a 5 star rating for food safety by Leeds Environmental Health after a rigorous, unannounced inspection found excellent food hygiene standards at the Hospice.

Community Engagement & Raising Funds

St Gemma's is part of the Leeds community and we engage with the public in a variety of ways. We aim to promote the services of the Hospice to patients and families, working hard to ensure that communications are engaging and inclusive of our diverse communities.

St Gemma's is a member of the Leeds Dying Matters Partnership and we fully engage each year in Dying Matters week, aiming to encourage people to talk about death and dying and discuss their end of life plans and to help health and social care professionals and volunteers to engage their own clients around planning for the last years of life. We engage in a range of events across the community including giving talks in schools and building links with faith communities. We also work with a Hospice Community Engagement Steering Group.

We have various 'touch-points' including social media channels, websites, our chain of charity shops across Leeds, a supporter newsletter and a monthly e-bulletin. The Hospice also advertises on local radio, in newspapers, magazines, buses and even featured as part of a region-wide TV advert in spring 2019 aimed at reaching a wider audience. This was followed up by a mailing to 100,000

than 1,200 people donate each month and these gifts are greatly valued.

households promoting regular giving. More

Gifts to honour and celebrate the life of a loved one continue to play a major part in caring for today's patients. In 2018 the Summer Forever Flowers initiative raised more than £20,000 towards patient care. Our Christmas Light up a Life campaign raises funds and also provides support to the bereaved at what can be a difficult time of year.

The Hospice's retail chain goes from strength to strength and enjoyed its most successful year ever. Income from shops is a real community effort relying equally on the generosity of those who donate goods and those volunteers who donate time to work in the shops sorting and preparing items for sale as well as greeting more than 600,000 customers.

Another important way the community supports local patients is by participating in events run by the Hospice's team or by 'getting stuck in' and organising their own fundraising initiatives. From balls to runs, cake sales to raffles, supporters continue to amaze and delight us with their

willingness to go to any lengths to raise funds for local people facing life threatening illnesses.

It would simply not be possible to raise the money needed to care for patients and their families without the fantastic team of volunteers who donate their time across all areas of income generation and the wider Hospice.

We are extremely grateful to all those who make donations, take part in fundraising events, leave a gift in their Will or help the Hospice in any way to continue its caring work.

Our Anniversary Year

2018/19 marked the 40th Anniversary of St Gemma's Hospice and was a special year in the charity's history for the whole community. A Night to Remember brought together 1,000 supporters and special guests at the Town Hall to enjoy an evening of recognition and remembrance. A Mass of Thanksgiving at Leeds Cathedral recognised our Catholic roots and was led by our Patron, Bishop Marcus Stock. Many of the Sisters of the Cross and Passion attended, some even travelling from overseas to be there for this special occasion.

From June to September an exhibition entitled 40 Faces of St Gemma's Hospice took place at Leeds

City Museum. Visited by over 40,000 people in the summer months, the portraits and accompanying stories showed the reality of hospice care and the many different people involved. The photographs subsequently toured around various community sites across Leeds, including Wetherby, Chapeltown, Beeston and Seacroft

and including two Sikh Temples, Leeds Trinity University and the Jewish MAAZ Centre. This helped us to engage with a wide cross-section of the community and tell the Hospice's story to diverse audiences.

The year culminated with a Looking to the Future event held in Leeds Civic Hall in March, which brought together Hospice Patrons, supporters and healthcare partners from across the city. The evening was a chance to round off the special year and launch the Hospice's 10 year strategy, demonstrating that our 40th Anniversary has been an opportunity to look forward as well as reflect.

Looking Ahead

St Gemma's Strategy provides a framework for the long-term development of services under three pillars of Impact, Connect and Extend, supported by foundations of scope, quality and sustainability. Our Strategy has been developed considering

national best practice, the needs and wishes of patients, families and staff, as well as the social and economic environment, anticipated growth in need, and the requirement for services to be flexible and responsive to user needs. Our Strategy is consistent with the city wide End of Life Care Strategy adopted by providers and commissioners across Leeds.

We recognise that in the coming years population changes are likely to increase the numbers of people who need our care. Not everyone who would benefit from St Gemma's care receives it, and there are inequalities in access to services, for example for those over age 85 or those with a non-cancer diagnosis. Working with others, we aim to transform and strengthen our clinical services to meet the needs of more people.

In 2019/20 we will continue to focus on four priority areas from our Strategy:

- Future In-Patient Services model: we will gain further clarity on the number of end of life care beds needed for the longer term at St Gemma's; this will require close working with Leeds Teaching Hospitals NHS Trust and the Leeds Clinical Commissioning Group (CCG). We will improve the way patients move between care settings, continue planning our future workforce needs and continue to improve our environment.
- Future Community Services model: we
 will introduce a new patient triage process,
 further extend our Day Services offer, review
 improvements to our environment, and begin
 to scope opportunities for improving community
 services together with other service providers.
- Enhancement of Hospice culture: we will roll out and embed our new Behaviours Framework, increase use of the Learning Management System for mandatory training and wider personal development, continue to respond

to areas for improvement identified in the staff survey and deliver and grow our staff wellbeing programme.

 Enhanced digitisation: we will upgrade internal infrastructure and develop

city wide digital collaborations; we will continue to integrate digital technology into clinical services and improve staff IT skills and knowledge.

We are making progress on four further areas of the Strategy: building on the successes of the Academic Unit of Palliative Care; developing our future workforce model; extending clinical provision to include seven-day services across a wider range of areas; and improving the Hospice estate.

We will also progress our work on foundation priorities including long term financial health, compliance with standards and regulations, and wider patient and public involvement in our work.

Each year the Hospice sets priorities for improving care; these are outlined in our annual Quality Account. For 2019/20 the priorities are: introducing electronic prescribing and medicines administration; improving discharge processes from the wards; and improving response and assessment, based on the urgency of need, for patients at home in the community.

The Leeds Palliative Care Network will continue to build more seamless services with citizens and other providers and commissioners of care. A key part of this vision centres on people at home, with opportunities to improve the use of digital technology to support high quality care and the future potential for a single point of contact for those diagnosed with a terminal illness. The Network is also working alongside the Leeds CCG to develop new strategy for palliative and end of life care across Leeds.

We will build on our successful research programme in partnership with the University of Leeds. This includes patients in St Gemma's and more widely taking part in research studies into new medications, treatments and approaches.

Our learning programme will also grow as we share our expertise with others, such as GPs, to broaden the base of palliative care knowledge and improve care and support for people wherever they receive it. We will continue to use evidence to make positive changes to patient and family care, not least by understanding what makes the biggest difference to people on a day to day basis.

We as patients influence care and treatments in the future.
We might benefit, but more so our families and other people will benefit from understanding more about whatever disease it is.

Jean Gallagher, research patient



Financial Review



The Financial Statements comply with the Charities Act 2011, the Companies Act 2006 and the Charities Statement of Recommended Practice (SORP) applicable to charities preparing their accounts in accordance with the Financial Reporting Standard (FRS102).

The statement of financial activities shows an overall surplus for the year of £498,937 (2018: deficit £532,593). This strong financial position has been influenced by record legacy income of £1,957,721 (2018: £1,234,329) and strong performance in the shops. Over the last decade legacies have averaged approximately £1,282,000 per annum. Legacy income remains an unpredictable income stream with 2018/19 being an exceptional year.

Total income for the year was £10,848,502 (2018: £9,721,348) representing an overall increase of £1,127,154 (11.6%). This is mainly attributable to the increase in shops' income and legacies.

Shops' income of £3,046,918 (2018: £2,795,965) represents a year on year increase of £250,953 (9.0%) across twenty four charity shops. Investment in larger retail units and the full year impact of new units continue to drive income growth. Total net surplus from charity shops was £877,941 (2018:

£805,547) representing year on year

growth of 9.0%.

Income from donations, trusts and fundraising events of £2,425,577 (2018: £2,331,849) has increased by £93,728 (4.0%). This reflects strong growth in trust grants £155,677 (2018: £110,852) with moderate growth of 2.2% across donations and events in our 40th anniversary year. Fundraising continues to be challenging in a very competitive Leeds market.

Total expenditure of £10,650,449 (2018: £10,332,696) increased by £317,753 which represents an increase of 3.1%. This increase is due to the annual pay award and additional costs associated with fundraising and shops. We continue

to control expenditure and drive improvements in line with the long term financial plan and Hospice strategy.

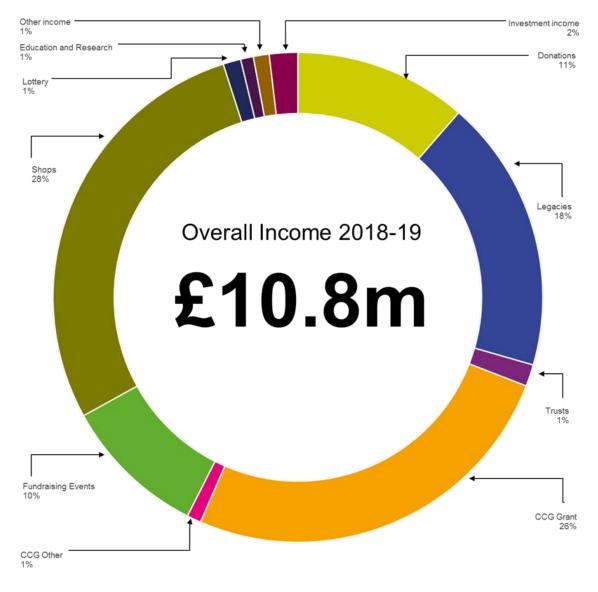
The investment portfolio generated a capital gain of £300,884 (2018: £78,755). The year to 31 March 2019 showed good returns in all asset classes with the best returns seen in the holdings of equities, infrastructure funds, and commercial property unit trusts; cash returns remain very low. Overall the portfolio saw a return of +8.6% which compared with the benchmark return of +6.8%. The portfolio continues to be managed and held for the long term. The 3 year return was a cumulative +32.4% compared with the benchmark return of +29.9%.

At year end the investment portfolio was valued at £5,998,550 (2018: £5,728,453) with investment management fees of £26,560 (2018: £30,481). Overall investment income was £203,631 (2018: £191,581) of which the investment portfolio contributed £183,838 (2018: £172,297). The remaining £19,793 (2018: £19,284) was generated from bank interest on approved short and medium term deposits.

The portfolio is managed by external fund managers (Investec) and performance is monitored by the Finance and Business Committee. All investment decisions are made in accordance with the approved investment policy. This policy sets out the investment powers, objectives, the types of investment and the benchmarks used for performance monitoring. A range of benchmarks are used to assess investment performance including a bespoke benchmark, agreed with the external fund managers, that reflects the Trustees' wish for good returns balanced with the need to limit risk. At the year end the portfolio was invested in a mixture of equities (75%), fixed interest bonds (15%), property (4%), cash (1%) and infrastructure assets (5%).

St Gemma's Hospice Services Ltd (trading subsidiary) continued to sell bought in goods and provide room hire on a commercial basis in the Academic Unit of Palliative Care. The company made a net surplus of £24,379 (2018: £17,487) in the year which will be transferred to the Hospice under Gift Aid.

Total Income



Reserves

The Board of Trustees operates a risk based approach to determine the levels of reserves needed to cover key financial risks and support the long term strategy and underpinning ten-year financial plan.

The general reserves are drawn from unrestricted funds, excluding funds designated for future expenditure and those funds already invested in tangible fixed assets. The unrestricted general reserve is currently £7,329,373 (2018: £6,281,759) which covers the assessed financial risks.

Total designated reserves at 31 March 2019 were £4,277,291 (2018: £4,717,652) of which £3,425,695 (2018: £3,728,910) has been invested in fixed assets. £499,804 (2018: £529,235) is held for the continuing upkeep of the Hospice and for the development of the gardens.

The Board approved additional designated funds to support the transformational needs of the Hospice (£150,000), leadership and development (£50,000) and staff well-being initiatives (£25,000) to support the ongoing culture programme. See notes 16 and 17 of the financial statements for further information on reserve utilisation.

Fixed Assets and Investments

The movements in fixed assets and investments during the period are set out in notes 10 and 11 to the financial statements. The Board of Trustees has the power to invest the charity's money in the manner they consider most beneficial for the purposes of St Gemma's Hospice.





Structure, Governance and Management

St Gemma's Hospice was founded in 1978 by the Sisters of the Cross and Passion who retain ultimate control of the company. The members of the company all belong to this congregation.

The Hospice is a charitable company limited by guarantee and a registered charity. The company was set up under a Memorandum of Association which established the objects and powers of the company and is governed under its Articles of Association.

The directors of the company are also charity Trustees for the purposes of charity law and are known as the Board of Trustees. Trustee Indemnity Insurance is provided for the benefit of the Trustees.

The Trustees have complied with the duty (set out in section 4 of the Charities Act 2006) to have due regard to public benefit guidance published by the Charity Commission.

The Board of Trustees consists of the current members of the company who serve for a term of five years and such other persons who are elected in a general meeting to hold office for an initial term of three years after which they are eligible for re-election.

At 31 March 2019 there were five members of the Board of Trustees who were representatives of the Sisters of the Cross and Passion. The remaining members of the Board of Trustees have been recruited for their experience and skills in relevant

areas including medicine and nursing, finance, legal and commerce. The Trustees who served during the year are set out on page 4.

The Board of Trustees is responsible for overseeing the Hospice's strategy and performance. It is

chaired by Dr Peter Belfield. The Board has overall responsibility for ensuring the organisation is managed

efficiently, approves the strategy and oversees its implementation. The Board powers are detailed in the Memorandum of Association and Articles of Association which govern the company.

St Gemma's has a formal code of conduct for Trustees with job descriptions and role profiles for key positions (e.g. Chair). There is an

induction programme in place for all new Trustees to familiarise them with the operation of the Hospice. This includes meeting with the Hospice Leadership Team (HLT) and familiarising themselves with the Hospice strategy and governance arrangements. Development opportunities are available for Trustees to ensure we continue to develop skills, knowledge and expertise to support effective Board performance.

Full meetings of the Board of Trustees are held at least four times a year to review the performance of the Hospice and to agree any major changes to the strategy or financial plans. These are supported by two focussed strategy and development sessions during the year.

The Board is supported by three Committees that meet on a quarterly basis:

Clinical Governance Committee – Chair, June Toovey

This Committee has delegated responsibility for oversight of clinical governance, clinical strategy and academic delivery.

Corporate Governance Committee - Chair, Sue Ansbro

This Committee has delegated responsibility for oversight of Hospice corporate governance arrangements and compliance with the Charity Governance Code. The Committee is also responsible for overseeing the major risks of the Hospice.

Finance and Business Committee - Chair, Angus Martin

This Committee has delegated responsibility for oversight of the financial strategy, annual budget, income generation and longer term financial planning. The Committee is also responsible for overseeing the investment of Hospice funds and recommending the appointment of an investment manager to the Board.

Scheme of Delegation

The Board has approved a scheme of delegation under which the majority of operational

management and decision making is delegated to the Chief Executive.

The Chief Executive has a key role in the management and monitoring of service delivery, patient satisfaction, financial performance, the assessment and control of risk, and the prioritisation and allocation of resources.

St Gemma's has a well-established HLT, reporting to the Board and its Committees, leading on strategy development,

overseeing the provision of Hospice services and managing risk. The HLT is supported by Heads of Department,

closely managing day to day service provision. The HLT comprises the Chief Executive, Kerry Jackson; Chief Nurse, Heather McClelland; Chief Medical Officer and Consultant in Palliative Care, Dr Mike Stockton; and Chief Operating Officer, Jason Kirk. The Chief Executive and HLT are not members of the Board and have no beneficial interest in the company.

Senior Staff Pay

The pay of the senior staff is reviewed by the Board of Trustees, through its Remuneration Committee. The amount paid to senior employees is carefully considered, comparable to other roles in the market and is benchmarked against other local hospices and national hospice reward and charity reward surveys and data. Best practice recommendations on setting remuneration, including those of the National Council for Voluntary Organisations (NCVO) are also taken into consideration. The Hospice also directly employs three medical consultants on NHS equivalent contracts, in line with national agreements.

The levels paid are those necessary to ensure a well-run, effective organisation in line with regulatory requirements. Competitive salaries also help the Hospice to attract, recruit and retain the best possible calibre of staff, in a competitive environment.

Risk Management and Principal Risks

The Board has overall responsibility for establishing and maintaining the whole system of internal control and the management of risk, including

reviewing the effectiveness of internal controls. The Board has adopted a risk-based approach to establishing and maintaining internal controls, which

are embedded within day to day management and governance processes.

The Board of Trustees assesses and reviews the management of the major risks to which the charity and its subsidiary company, St Gemma's Hospice Services Limited, are exposed, including financial, clinical and business risks.

The risk register is developed by the HLT and is scrutinised by the relevant Committees and Board on a quarterly basis. The Chief Executive prepares an Annual Governance Statement (AGS) which identifies how the Hospice ensures effective governance in compliance with the voluntary Charity Governance Code.

The key risks facing the Hospice are:

- Our ability to attract, recruit and retain clinical staff to support quality service delivery. Rising demand for healthcare services and an unsustainable nursing workforce shortage, locally and nationally, means recruitment of staff continues to be a significant risk. We monitor supply and demand carefully and manage this risk through innovative ways of recruitment and continued investment in staff training to diversify the skills mix of our clinical workforce.
- Ability to meet current and future demand for our services. We regularly monitor national and regional trends in order to forecast how they will impact the services we offer and how these services need to be adapted to meet these changing requirements. We have developed a ten year Strategy that considers longer term trends, supports service transformation and integrates with Leeds city wide providers.
- The achievement of voluntary income targets to support financial sustainability. This remains a key risk due to the challenging and competitive

economic environment within which we operate. To mitigate this we have developed an income strategy that supports a well-diversified income portfolio and ensures we target investment to grow income and explore new fundraising opportunities. During 2019 we will commission a formal review of our income generation activities to support the achievement of the longer term strategy.

 Uncertainty in statutory funding. We have successfully secured inflation proofed CCG funding until March 2020. We are working closely with Leeds CCG in negotiating a longer term contract that supports our funding requirements and delivers continuous improvement in outcomes for local people.

Information Governance

When General Data Protection Regulations (GDPR) came into force in May 2018, this represented a significant change in data protection legislation that required greater transparency from those who handle personal data, with enhanced rights for individuals in respect of their information, and raised the profile of data protection by introducing stronger sanctions for breaches. It has expanded the rights of individuals to control how their personal data is collected and processed, and places a range of new obligations on us and other organisations to be more accountable for data protection.

Over the last 12 months we have galvanised our approach to Information Governance (IG) and continue to develop and embed a robust and comprehensive IG framework throughout the Hospice in line with the Information Commissioner's

Office (ICO) guidelines. This approach means we can confidently give assurance to the Board of Trustees on IG arrangements.

We have introduced two IG Modules through our Learning Management System (LMS) for all staff to develop and apply good IG practice every day. These are part of our mandatory training programme.

In March 2019 we successfully completed the Data Security and Protection Toolkit (online self-assessment tool) which enables us to measure and publish performance against the National Data Guardian's ten data security standards for review by NHS Digital or our local CCG.

Trustees Fundraising Statement

Income Generation at St Gemma's is conducted by a team of fundraisers and retail staff directly employed by the charity and led by the Director of Income Generation. No external professional fundraisers have been utilised during the year. The Hospice benefited from some relatively low value commercial participation partnerships with local companies which were managed by the Senior Fundraiser (Corporate) and governed by written agreements. St Gemma's Hospice is registered with the Fundraising Regulator. The Director of Income Generation is a member of the Institute of Fundraising and the whole Income Generation team are members of the National Association of Hospice Fundraisers. There have been no failures to comply with the standards set by these organisations.

The Trustees of the Hospice monitor the activities of the Income Generation team via quarterly meetings



of the Finance and Business Committee. The Chair of the Committee also meets monthly with the Chief Operating Officer and Director of Income Generation. Policies to protect vulnerable individuals are in place and all fundraisers are aware of their responsibilities in this area. During 2018/19 there were two complaints relating to the Hospice's fundraising activities and seven relating to the chain of charity shops. All were resolved during the year.

Going Concern

The Trustees have reviewed the cash position of the Hospice and the cash forecasts for twelve months from the date of signing the financial statements. They are satisfied that the charity has a reasonable expectation of continuing in operational existence for the foreseeable future and so they have continued to adopt the going concern basis in preparing the financial statements. During 2018/19 a ten year financial plan was considered by the Board of Trustees to support the new Hospice Strategy. This includes a long term cashflow plan and reserves statements to further support the operational sustainability of the Hospice.

In so far as the Trustees are aware:

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

This confirmation is given and should be interpreted in accordance with the provisions of s418 of the Companies Act 2006.

Auditor

Deloitte LLP have expressed their willingness to continue as auditor for the next financial year.

The Trustees' Report, including the Strategic Report, was approved by the Board and signed on its behalf on 20th September 2019 by:

Dr Peter Belfield Chair



Trustees' Responsibilities Statement

The Trustees (who are also directors of St Gemma's Hospice for the purposes of company law) are responsible for preparing the Trustees' Annual Report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice) including FRS 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland".

Company law requires the Trustees to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the charitable company and the group and of the incoming resources and application of resources, including the income and expenditure, of the charitable group for that period. In preparing these financial statements the Trustees are required to:

- · select suitable accounting policies and then apply them consistently;
- observe the methods and principles in the Charities SORP;
- · make judgements and estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards have been followed; and
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in operation.

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

In so far as the Trustees are aware:

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

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



Independent Auditor's Report to the members of St Gemma's Hospice

Opinion

In our opinion the financial statements of St Gemma's Hospice (the 'charitable company') and its subsidiaries (the 'group'):

- give a true and fair view of the state of the group's and the parent charitable company's affairs as at 31 March 2019 and of the group's incoming resources and application of resources, including the group's income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice, including Financial Reporting Standard 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland"; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

We have audited the financial statements which comprise:

- the consolidated statement of financial activities (including the consolidated income and expenditure account);
- the group and parent charitable company balance sheets:
- · the consolidated cash flow statement;
- · the statement of accounting policies; and
- · the related notes 1 to 23.

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).

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 group and of the parent charitable company in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the Financial Reporting Council's (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 are required by ISAs (UK) to report in respect of the following matters where:

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

We have nothing to report in respect of these matters.

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.

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 respect of these matters.

Responsibilities of Trustees

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

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

Auditor's responsibilities for the audit of the financial statements

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

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

Report on other legal and regulatory requirements

Opinions on other matters prescribed by the Companies Act 2006

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

 the information given in the Trustees' report, which includes the strategic report and the directors' report prepared for the purposes of company law for the financial year for which the financial statements are prepared is consistent with the financial statements; and the strategic report and the directors' report included within the Trustees' report have been prepared in accordance with applicable legal requirements.

In the light of the knowledge and understanding of the company and its environment obtained in the course of the audit, we have not identified any material misstatements in the strategic report or the directors' report included within the Trustees' report.

Matters on which we are required to report by exception

Under the Companies Act 2006 we are required to report in respect of the following matters if, in our opinion:

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

We have nothing to report in respect of these matters.

Use of our report

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

Sach Ardem

Sarah Anderson FCCA (Senior statutory auditor)

For and on behalf of Deloitte LLP Statutory Auditor Leeds, United Kingdom

3rd October 2019

Consolidated Statement of Financial Activities (Including consolidated income and expenditure account) For the year ended 31 March 2019

		Unrestricted Funds	Designated Funds	Restricted Funds	Total Funds 2019	Total funds 2018
	Notes	£	£	£	£	£
INCOME FROM						
Donations, legacies and trusts	2	3,195,308	-	155,053	3,350,361	2,550,595
Other trading activities:	3					
Sale of donated goods		2,977,979	-		2,977,979	2,732,384
Fundraising events		1,032,937	-	2	1,032,937	1,015,583
Lottery		126,677	- 2	_	126,677	216,458
Commercial trading operations		94,466	-	-	94,466	83,361
		4,232,059			4,232,059	4,047,786
Charitable activities - Provision of H	ospice	4,202,000			4,202,000	4,047,700
Services:	oopico					
CCG funding	4	2,779,158	20,000	81,838	2,880,996	2,739,045
Other grants		2,770,100	20,000	01,000	2,000,000	14,631
Education and research		91,574	-		91,574	90,174
Bistro			-	-		700000000000000000000000000000000000000
		89,482	-	-	89,482	86,686
Other		399			399	850
		2,960,613	20,000	81,838	3,062,451	2,931,386
Investments	5	203,631	-	-	203,631	191,581
Total income		10,591,611	20,000	236,891	10,848,502	9,721,348
EXPENDITURE ON						
Raising funds: Cost of selling donated goods Costs of raising income from donar	tions.	2,066,186	50,888	Ü	2,117,074	1,942,218
legacies, trusts and fundraising eve		1,318,224	12,094	9	1,330,318	1,237,540
Investment management fees		26,560	,00 ;	9	26,560	30,481
Cost of Lotteries		20,000	12	0	20,000	77,413
Commercial trading operations		70,087		-	70,087	65,874
		3,481,057	62,982		3,544,039	3,353,526
Charitable activities – Provision of H	ospice					
Services		6,318,711	559,666	228,033	7,106,410	6,979,170
Total Expenditure	6	9,799,768	622,648	228,033	10,650,449	10,332,696

Consolidated Statement of Financial Activities (Including consolidated income and expenditure account)

For the year ended 31 March 2019

	Notes	Unrestricted Funds	Designated Funds £	Restricted Funds	31 March 2019 Total Funds £	Total funds 2018 £
Net income/(expenditure) before				Parada		
investment gains/(losses)	8	791,843	(602,648)	8,858	198,053	(611,348)
Net gains on investments	11	300,884	-		300,884	78,755
Net income/(expenditure)		1,092,727	(602,648)	8,858	498,937	(532,593)
Transfer between funds	16/17	(45,113)	162,287	(117,174)		
Net movement in funds		1,047,614	(440,361)	(108,316)	498,937	(532,593)
RECONCILIATION OF FUNDS:						
Total funds brought forward		6,281,759	4,717,652	358,497	11,357,908	11,890,501
Net movement in funds for the year		1,047,614	(440,361)	(108,316)	498,937	(532,593)
Total funds carried forward	18	7,329,373	4,277,291	250,181	11,856,845	11,357,908

There were no other recognised gains or losses other than those listed above and the net income for the year.

All income and expenditure derive from continuing activities.

The surplus of parent charity for the year for Companies Act purposes is £474,558 (2018: Deficit £550,080). As permitted by Section 408 of the Companies Act 2006, no separate Statement of Financial Activities is presented in respect of the parent charity.

See note 15 for comparative Consolidated Statement of Financial Activities analysed by funds.

The notes on pages 42 to 54 form part of these financial statements.

Balance Sheets

As at 31 March 2019

		Gro	up	Cha	rity
	Note	2019 £	2018 £	2019 £	2018
FIXED ASSETS					
Tangible assets	10	3,425,695	3,728,910		3,728,910
Investments	11	5,998,550	5,728,453	5,998,552	5,728,455
		9,424,245	9,457,363	9,424,247	9,457,365
CURRENT ASSETS					
Stocks		18,426	20,092	-	-
Debtors	12	976,960	666,328	1,017,897	703,595
Current asset investments		1,516,166	2,007,186	1,516,166	2,007,186
Cash at bank and in hand		724,424	295,059	698,241	272,046
		3,235,976	2,988,665	3,232,304	2,982,827
CREDITORS: amounts falling due within					
one year	13	(803,376)	(1,088,120)	(799,706)	(1,082,284)
NET CURRENT ASSETS		2,432,600	1,900,545	2,432,598	1,900,543
NET ASSETS		11,856,845	11,357,908	11,856,845	11,357,908
Represented by:					100
FUNDS					
Unrestricted funds:					
Designated fund	16	4,277,291	4,717,652	4,277,291	4,717,652
General fund	16	7,329,373	6,281,759	7,329,373	6,281,759
Restricted funds	17	250,181	358,497	250,181	358,497
TOTAL FUNDS		11,856,845	11,357,908	11,856,845	11,357,908

The financial statements of St Gemma's Hospice on pages 42 to 54 were approved and authorised for issue by the Board of Trustees on 20th September 2019 and signed on its behalf by:

Moret

Chair to the Board of Trustees Company Number: 02773867

The notes on pages 42 to 54 form part of these financial statements.

Consolidated Cash Flow Statement

For year ended 31 March 2019

	Notes	Group 2019	Group 2018
		£	£
NET CASH PROVIDED BY OPERATING ACTIVITIES	19	(68,274)	(115,056)
CASH FLOWS FROM INVESTING ACTIVITIES			
Dividends and interest received		203,631	191,581
Purchase of tangible fixed assets		(231,083)	(282,666)
Proceeds on sale of fixed assets		3,284	_
Purchase of investments		(478,531)	(727,499)
Proceeds on sale of investments		200,136	1,006,301
Movement on cash held by Investment Managers		309,182	(327,294)
Net cash outflow from investing activities		6,619	(139,577)
Change in cash and cash equivalents during the year		(61,655)	(254,633)
Cash and cash equivalents at the beginning of the year		2,302,245	2,556,878
Total cash and cash equivalents at the end of the year		2,240,590	2,302,245
Reconciliation to balance sheet:			
Cash at bank and in hand		724,424	295,059
Current asset investments		1,516,166	2,007,186
Balance at 31 March 2019		2,240,590	2,302,245

The notes on pages 42 to 54 form part of these financial statements.

Statement of Accounting Policies

For year ended 31 March 2019

Company and charitable status

St Gemma's Hospice, a public benefit entity, is incorporated in England and Wales as a charitable company limited by guarantee not having a share capital. All Trustees are the members of the company. Each member has undertaken to contribute to the assets in the event of winding up a sum not exceeding £1. The charity is a registered charity. The registered office is given on page 3.

Basis of accounting

The financial statements have been prepared under the historical cost convention with the exception of investments which have been included at market

value. The financial statements have been prepared in accordance with Statement of Recommended Practice "Accounting and Reporting by Charities (SORP 2015)" applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102),

effective 1 January 2016

and the Companies Act

2006.

The Company meets the definition of a qualifying entity under FRS 102 and has therefore taken advantage of the disclosure exemption available to it in respect of its separate financial statements in relation to presentation of a cash flow statement.

The principal accounting policies are set out below.

Basis of consolidation

The consolidated financial statements comprise St Gemma's Hospice and its wholly-owned subsidiary undertaking, St Gemma's Hospice Services Limited. The summarised profit and loss account for the subsidiary is shown in note 1. The results of the subsidiary are consolidated on a line by line basis.

Preparation of the financial statements – going concern basis

The principal risks facing the charity are discussed in the Trustees' report. The Trustees have reviewed the cash position of the charity and cash forecasts at the date of signing the financial statements and are satisfied that the charity will be able to meet all of its financial commitments.

As a consequence, the Trustees believe that the charity is well placed to manage its financial risks successfully. After making enquiries, the Trustees have a reasonable expectation that the charity has adequate reserves to continue in operational existence for the foreseeable future. Accordingly,

the Trustees continue to adopt the going concern basis in preparing the financial statements.

Income

Income is recognised when the Group and Charity has entitlement to the funds, any performance conditions attached to the items of income have been met, it is probable that the income will be received and the amount can be measured reliably.

Income received by way of

donations, fundraising events,

trading, legacies and Leeds Clinical
Commissioning Groups receipts are
credited in the accounts when the charity is legally
entitled to the income and the amount can be
quantified with reasonable accuracy. These are
shown gross before deductions of related expenses
and net of VAT.

For legacies, entitlement is taken as the earlier of the date on which either: the charity is aware that probate has been granted, the estate has been finalised and notification has been made by the executor(s) to the Trust that a distribution will be made, or when a distribution is received from the estate. Where legacies have been notified to the charity, or the charity is aware of the granting of probate, and the criteria for income recognition

have not been met, then the legacy is a treated as a contingent asset and disclosed where material.

Income tax recoverable on income received and bank interest received are included in these accounts on the accruals basis.

Deferred income includes amounts received in respect of grants received for work to be carried out in the next financial year.

Donated professional services and donated facilities are recognised as income when the charity has control over the item, any conditions associated with the donated item have been met, the receipt of economic benefit from the use by the charity of the item is probable and that economic benefit can be measured reliably.

On receipt, donated professional services and donated facilities are recognised on the basis of the value of the gift to the charity, which is the amount the charity would have been willing to pay to obtain services or facilities of equivalent economic benefit on the open market; a corresponding amount is then recognised in expenditure in the period of receipt. The full value of the freehold peppercorn rent is not valued due to the prohibitive cost of doing so.

All income arises in the United Kingdom.

Expenditure

Expenditure is recognised once there is a legal or constructive obligation to make a payment to a third party, it is probable that settlement will be required and the amount of the obligation can be measured reliably. Expenditure is classified under the following activity headings as follows.

Costs of raising funds include the costs incurred in generating voluntary income, fundraising trading costs, including the costs of running the charity shops, and investment management costs.

Charitable expenditure has been analysed by activity, these costs enable the Hospice to meet its charitable aims and objectives.

Support costs are those functions that assist the work of the Hospice but do not directly undertake charitable activities. Support costs include back office costs, finance, personnel, payroll and governance costs which support the charity's activities. Governance costs are associated with the governance arrangements of the charity.

They include compliance with statutory and constitutional requirements, expenditure incurred on Board of Trustees meetings and legal advice for the Trustees. These costs have been allocated between cost of raising funds and expenditure on charitable activities. The bases on which support costs have been allocated are set out in note 7.

Expenditure is included in the Statement of Financial Activities inclusive of any VAT which cannot be recovered.

Fund accounting

General funds are unrestricted funds which are available for use at the discretion of the Board of Trustees in the furtherance of the general objectives of the charity. Designated funds are amounts that have been put aside at the discretion of the Board of Trustees. Restricted funds are funds subject to specific conditions imposed by donors. Where restricted funds are received for the purchase of fixed assets then the funds are transferred to designated funds once the purchase has been made. See Notes 16 and 17 for further information on funds and funds utilisation.

Tangible fixed assets

Tangible fixed assets are stated at cost, net of depreciation.

Tangible fixed assets individually costing more than £1,000 are capitalised and included in the accounts at cost. Provision is made for depreciation on all tangible assets at rates calculated to write off the cost of each asset over its expected useful life as follows:

Improvements to leasehold property costs

- 5% per annum on a straight line basis

Fixtures and fittings

- 10% per annum on a straight line basis

Motor vehicles

- 25% per annum on reducing balance basis

Computers

- 25% per annum on a straight line basis

Investments

Investments are included in the financial statements at market value. The Statement of Financial Activities includes the net gains and losses arising

on revaluations and disposals throughout the year. Current investments represent monies invested in short-term liquid money market instruments.

In the parent charity balance sheet, investments in subsidiary undertakings are measured at cost less impairment.

Stock

Stock of purchased goods is valued at the lower of cost and net realisable value. Items donated for resale are not included in the financial statements until they are sold.

Employee benefits

The Hospice operates two pension schemes. A defined benefit scheme with the National Health Service Superannuation Scheme, is only available to staff who have previously contributed to the scheme. The administration of this scheme is dealt with by the National Health Service Pension agencies. In addition there is a Group Personal Pension Scheme administered by Standard Life which is available to all other employees. Contributions to both Schemes are charged directly to the Statement of Financial Activities. Differences between contributions payable in the year and contributions actually paid are shown as either accruals or prepayments in the balance sheet.

Operating leases

Rentals under operating leases are charged on a straight-line basis over the lease term, even if the payments are not made on such a basis. Benefits received and receivable as an incentive to sign an operating lease are similarly spread on a straight-line basis over the lease term.

Financial instruments

Financial assets and financial liabilities are recognised when the Group becomes a party to the contractual provisions of the instrument. All financial assets and liabilities are initially measured at transaction price (including transaction costs). The charity and group only have financial assets and financial liabilities of a kind that qualify as basic financial instruments. With the exception of fixed asset investments, basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value.

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

offered. Prepayments are valued at the amount prepaid net of any trade discounts due. Current asset investments includes short term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account. Creditors and provisions are recognised where the charity has a present obligation resulting from a past event that will probably result in the transfer of funds to a third party and the amount due to settle the obligation can be measured or estimated reliably. Creditors and provisions are normally recognised at their settlement amount after allowing for any trade discounts due.

Taxation

The company is a registered charity and has no liability to corporation tax on its charitable activities.

The trading subsidiary is liable to corporation tax on its taxable profits. Current tax, including UK corporation tax and foreign tax, is provided at amounts expected to be paid (or recovered) using the tax rates and laws that have been enacted or substantively enacted by the balance sheet date.

Deferred tax is recognised in respect of all timing differences that have originated but not reversed at the balance sheet date where transactions or events that result in an obligation to pay more tax in the future or a right to pay less tax in the future have occurred at the balance sheet date. Timing differences are differences between the group's taxable profits and its results as stated in the financial statements that arise from the inclusion of gains and losses in tax assessments in periods different from those in which they are recognised in the financial statements.

Deferred tax is measured at the average tax rates that are expected to apply in the periods in which the timing differences are expected to reverse, based on tax rates and laws that have been enacted or substantively enacted by the balance sheet date. Deferred tax is measured on a non-discounted basis.

Critical accounting judgements and key sources of estimation uncertainty

In the application of the Group's accounting policies described above, the Trustees are required to make judgements, estimates and assumptions about the carrying amounts of assets and liabilities that are not readily apparent from other sources. The estimates and associated assumptions are based

on historical experience and other factors that are considered to be relevant. Actual results may differ from these estimates.

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

The Trustees do not consider there are any critical judgements or sources of estimation uncertainty requiring disclosure.



Notes to the Group Financial Statements

For year ended 31 March 2019

1. NET INCOME FROM TRADING ACTIVITIES OF SUBSIDIARY

The charity has a wholly owned subsidiary, St Gemma's Hospice Services Limited which is incorporated in the UK and registered in England. The company undertakes trading activities including the sale of bought in goods and the provision of room hire within St Gemma's Academic Unit of Palliative Care. A summary of its trading results for the period is shown below. The company donates its taxable profit to St Gemma's Hospice under Gift Aid. Audited accounts will be filed with the Registrar of Companies.

Profit and Loss account			2019 £	2018 £
Turnover			94,466	83,361
Cost of sales			(40,279)	(36,906)
Gross profit			54,187	46,455
Administrative expenses			(1,674)	(1,711)
Management charge			(28,134)	(27,257)
Operating profit			24,379	17,487
Charitable donation to St Gemma's	s Hospice		(24,379)	(17,487)
Retained in subsidiary			•	-
Aggregate Capital and reserves			2	2
2. INCOME FROM DONA	TIONS, LEGACIES	AND TRUSTS	2019	2018
	Unrestricted Funds	Restricted Funds	Total	Total
	£	£	£	£
Donations	1,212,384	24,579	1,236,963	1,205,414
Legacies	1,957,721	-	1,957,721	1,234,329
General grants from Trusts	25,203	130,474	155,677	110,852
	3,195,308	155,053	3,350,361	2,550,595
2018 Comparative				
	2018	2018	2018	
	Unrestricted	Restricted	Total	
	Funds	Funds		
	£	£	£	
Donations	1,199,724	5,690	1,205,414	
Legacies	1,217,365	16,964	1,234,329	
General grants from Trusts	19,205	91,647	110,852	
	2,436,294	114,301	2,550,595	

At 31 March 2019 there were legacies totalling £141,300 (2018: £216,640) that had been notified as receivable to the charity but have not been included in the financial statements as their value cannot be reliably quantified.

Included in donations income is gift aid received or receivable of £140,947 (2018: £152,423).

3. INCOME FROM OTHER TRADING ACTIVITIES

	2019 £	2018 £
Sale of donated goods	2,977,979	2,732,384
Fundraising events	1,032,937	1,015,583
Lottery	126,677	216,458
Income from wholly owned subsidiary:		
Room hire	23,209	19,780
Sale of purchased goods	68,939	63,581
Lottery License fee	2,318	
	4,232,059	4,047,786

The sales of donated and purchased goods in 2019 includes donations under retail gift aid of £692,409 (2018: £733,420) and the associated gift aid of £171,025 (2018: £181,155). St Gemma's Hospice had 24 shops at the year end (2018: 24)

4. INCOME FROM CHARITABLE ACTIVITES

	2019 Unrestricted Funds	2019 Restricted Funds	2019 Total	2018 Total
	£	£	£	£
Provision of Hospice services				
Grant income from NHS Leeds	2,799,158	81,838	2,880,996	2,739,045
Hospice UK grant	-	0.500	201-201-201-201-201-201-201-201-201-201-	14,631
Education and research	91,574	2	91,574	90,174
Bistro	89,482	(2)	89,482	86,686
Other	399	-	399	850
	2,980,613	81,838	3,062,451	2,931,386
2018 Comparatives				
Annual transfer of the Control of th	2018	2018	2018	
	Unrestricted Funds	Restricted Funds	Total	
	£	£	£	
Provision of Hospice services				
Grant income from NHS Leeds	2,526,723	212,322	2,739,045	
Hospice UK grant		14,631	14,631	
Education and research	90,174		90,174	
Bistro	86,686	-	86,686	
Other	850		850	
	2,704,433	226,953	2,931,386	

5. INVESTMENT INCOME

	2019 £	2018 £
Listed securities Bank and other interest	183,838 19,793	172,297 19,284
	203,631	191,581

6. **ANALYSIS OF EXPENDITURE**

	2019 Direct Costs	2019 Support Costs	2019 Total	2018 Total
L	£	£	£	£
Expenditure on raising funds Costs of selling donated goods	1,993,618	123,456	2,117,074	1,942,218
Costs of raising income from donations, legacies, trusts and fundraising events Investment management fees	1,229,383 26,560	100,935	1,330,318 26,560	1,237,540 30,481
Cost of lotteries Cost of wholly owned subsidiary:	-	- 3	20,300	77,413
Room hire	18,184	0.20	18,184	17,674
Purchased goods	51,903		51,903	48,200
	3,319,648	224,391	3,544,039	3,353,526
Expenditure on charitable activities Provision of Hospice services				
Inpatient Care	4,190,568	601,125	4,791,693	4,759,356
Community Care	1,019,696	85,780	1,105,476	1,078,100
Day Services	555,756	14,367	570,123	581,891
Bereavement Support	141,304	12,609	153,913	151,039
Education and research	460,714	24,491	485,205	408,783
	6,368,038	738,372	7,106,410	6,979,170
Total expenditure	9,687,686	962,763	10,650,449	10,332,696
2018 Comparatives	2018 Direct	2018	2040	
	Costs	Support Costs	2018 Total	
5000 10 1 1 9500 1 1 500 FM 500 Hg/m 8 800 mgg 1		C - C C C - C C C C C C C C C C C C C C		
Expenditure on raising funds Costs of selling donated goods	Costs	Costs	Total	
Costs of selling donated goods Costs of raising income from donations,	Costs £ 1,839,754	Costs £ 102,464	Total £ 1,942,218	
Costs of selling donated goods Costs of raising income from donations, legacies, trusts and fundraising events	Costs £ 1,839,754 1,141,517	Costs	Total £ 1,942,218 1,237,540	
Costs of selling donated goods Costs of raising income from donations, legacies, trusts and fundraising events Investment management fees	Costs £ 1,839,754 1,141,517 30,481	Costs £ 102,464	Total £ 1,942,218 1,237,540 30,481	
Costs of selling donated goods Costs of raising income from donations, legacies, trusts and fundraising events Investment management fees Cost of lotteries	Costs £ 1,839,754 1,141,517	Costs £ 102,464	Total £ 1,942,218 1,237,540	
Costs of selling donated goods Costs of raising income from donations, legacies, trusts and fundraising events Investment management fees	Costs £ 1,839,754 1,141,517 30,481	Costs £ 102,464	Total £ 1,942,218 1,237,540 30,481	
Costs of selling donated goods Costs of raising income from donations, legacies, trusts and fundraising events Investment management fees Cost of lotteries Cost of wholly owned subsidiary:	1,839,754 1,141,517 30,481 77,413	Costs £ 102,464	Total £ 1,942,218 1,237,540 30,481 77,413	
Costs of selling donated goods Costs of raising income from donations, legacies, trusts and fundraising events Investment management fees Cost of lotteries Cost of wholly owned subsidiary: Room hire	Costs £ 1,839,754 1,141,517 30,481 77,413 17,674	Costs £ 102,464	Total £ 1,942,218 1,237,540 30,481 77,413 17,674	
Costs of selling donated goods Costs of raising income from donations, legacies, trusts and fundraising events Investment management fees Cost of lotteries Cost of wholly owned subsidiary: Room hire	Costs £ 1,839,754 1,141,517 30,481 77,413 17,674 48,200	f. 102,464 96,023	Total £ 1,942,218 1,237,540 30,481 77,413 17,674 48,200	
Costs of selling donated goods Costs of raising income from donations, legacies, trusts and fundraising events Investment management fees Cost of lotteries Cost of wholly owned subsidiary: Room hire Purchased goods Expenditure on charitable activities Provision of Hospice services Inpatient Care	1,839,754 1,141,517 30,481 77,413 17,674 48,200 3,155,039	102,464 96,023 - - - 198,487	Total £ 1,942,218 1,237,540 30,481 77,413 17,674 48,200 3,353,526	
Costs of selling donated goods Costs of raising income from donations, legacies, trusts and fundraising events Investment management fees Cost of lotteries Cost of wholly owned subsidiary: Room hire Purchased goods Expenditure on charitable activities Provision of Hospice services Inpatient Care Community Care	1,839,754 1,141,517 30,481 77,413 17,674 48,200 3,155,039 4,172,091 990,426	102,464 96,023 - - - 198,487 587,265 87,674	Total £ 1,942,218 1,237,540 30,481 77,413 17,674 48,200 3,353,526 4,759,356 1,078,100	
Costs of selling donated goods Costs of raising income from donations, legacies, trusts and fundraising events Investment management fees Cost of lotteries Cost of wholly owned subsidiary: Room hire Purchased goods Expenditure on charitable activities Provision of Hospice services Inpatient Care Community Care Day Services	1,839,754 1,141,517 30,481 77,413 17,674 48,200 3,155,039 4,172,091 990,426 553,869	102,464 96,023 - - 198,487 587,265 87,674 28,022	Total £ 1,942,218 1,237,540 30,481 77,413 17,674 48,200 3,353,526 4,759,356 1,078,100 581,891	
Costs of selling donated goods Costs of raising income from donations, legacies, trusts and fundraising events Investment management fees Cost of lotteries Cost of wholly owned subsidiary: Room hire Purchased goods Expenditure on charitable activities Provision of Hospice services Inpatient Care Community Care Day Services Bereavement Support	1,839,754 1,141,517 30,481 77,413 17,674 48,200 3,155,039 4,172,091 990,426 553,869 138,860	102,464 96,023 - - - 198,487 587,265 87,674 28,022 12,179	Total £ 1,942,218 1,237,540 30,481 77,413 17,674 48,200 3,353,526 4,759,356 1,078,100 581,891 151,039	
Costs of selling donated goods Costs of raising income from donations, legacies, trusts and fundraising events Investment management fees Cost of lotteries Cost of wholly owned subsidiary: Room hire Purchased goods Expenditure on charitable activities Provision of Hospice services Inpatient Care Community Care Day Services	1,839,754 1,141,517 30,481 77,413 17,674 48,200 3,155,039 4,172,091 990,426 553,869 138,860 379,508	102,464 96,023 	Total £ 1,942,218 1,237,540 30,481 77,413 17,674 48,200 3,353,526 4,759,356 1,078,100 581,891 151,039 408,783	
Costs of selling donated goods Costs of raising income from donations, legacies, trusts and fundraising events Investment management fees Cost of lotteries Cost of wholly owned subsidiary: Room hire Purchased goods Expenditure on charitable activities Provision of Hospice services Inpatient Care Community Care Day Services Bereavement Support	1,839,754 1,141,517 30,481 77,413 17,674 48,200 3,155,039 4,172,091 990,426 553,869 138,860	102,464 96,023 - - - 198,487 587,265 87,674 28,022 12,179	Total £ 1,942,218 1,237,540 30,481 77,413 17,674 48,200 3,353,526 4,759,356 1,078,100 581,891 151,039	

				FIGURIAL DI MOSPICE SELVICES	Sei Nices		
2019	Raising	Inpatient	Community	Day	Bereavement	Education &	Total
	Funds	Care £	care £	Services	3 3	Kesearch	G.
Governance	14,713	39,414	5,624	942	827	1,606	63,126
Finance	42,794	114,641	16,359	2,740	2,405	4,671	183,610
E	34,422	92,212	13,159	2,204	1,934	3,757	147,688
光	15,633	41,880	5,976	1,001	878	1,706	67,074
Admin	39,985	107,117	15,285	2,560	2,247	4,364	171,558
Estates and Facilities	60,011	160,767	22,942	3,842	3,372	6,550	257,484
Depreciation	16,833	45,094	6,435	1,078	946	1,837	72,223
Total	224,391	601,125	85,780	14,367	12,609	24,491	962,763
2018	Raising Funds	Inpatient Care	Community	Day Hospice	Bereavement Support	Education & Research	Total
	£	£	GI.	Ü	G.	3	Ġ.
Governance	12,770	37,782	5,641	1,803	784	1,883	60,663
Finance	43,799	129,592	19,346	6,183	2,688	6,461	208,069
<u></u>	30,191	89,326	13,336	4,262	1,852	4,453	143,420
光	12,877	38,099	5,688	1,818	790	1,899	61,171
Admin	30,782	91,074	13,597	4,346	1,889	4,540	146,228
Estates and Facilities	53,563	158,476	23,659	7,562	3,286	2,900	254,446
Depreciation	14,505	42,916	6,407	2,048	890	2,139	68,905
Total	198,487	587,265	87,674	28,022	12,179	29,275	942,902

The allocation is based upon the headcount in these areas, adjusted for those costs which were only incurred on the Hospice site, being IT, Finance and administration together with a proportion of building and maintenance costs.

8. NET INCOME/EXPENDITURE FOR THE YEAR	2019	2018
This is stated after charging:	£	£
Auditor's remuneration:		
- Fees payable to the charity's auditor for the audit of the charity's		
annual financial statements	15,700	15,250
- Fees payable to the charity's auditor for other services to the		
group:		
taxation services	2,600	7,450
the audit of the charity's subsidiary	3,600	3,500
reporting to group auditors	1,000	1,000
Depreciation		
- on owned fixed assets	178,164	159,196
- on leased fixed assets	354,208	354,212
Rental of land and buildings under operating leases	456,273	419,241
Hire of equipment under operating leases	8,581	8,581

9. ANALYSIS OF STAFF COSTS, TRUSTEES' REMUNERATION AND EXPENSES AND THE COST OF KEY MANAGEMENT PERSONNEL

	£	£
Aggregate remuneration comprised:		
Wages and salaries	6,503,316	6,352,183
Social security costs	569,203	561,714
Other pension costs	519,806	519,882
	7,592,325	7,433,779

The average monthly number of whole time equivalent (WTE) employees during the period was as follows:

	2019		2018	
	No.	WTE	No.	WTE
Provision of Hospice Services	153	122	160	125
Raising funds	68	57	65	55
Support functions	37	31	36	32
	258	210	261	212

The number of Group employees whose emoluments, excluding pension contributions and employers' national insurance, but including benefits in kind, were in excess of £60,000 was:

	2019	2018
	No.	No.
£60,001 - £70,000	1	3
£70,001 - £80,000	1	_
£80,001 - £90,000	4	1
£90,001 - £100,000		1
£100,001 - £110,000	1	-
£120,001 - £130,000	1	1
£140,001 - £150,000	1	1

The key management personnel of the parent Charity are the same of the Group. The total remuneration (including pension contributions and employers' national insurance) of the key management personnel of the Group for the year totalled £440k (2018: £562k).

As shown above, St Gemma's Hospice employs five individuals who were paid over £60,000. Two of these are medical consultants who are directly employed on NHS equivalent contracts, in line with national agreements. The others are members of the Hospice Leadership Team (HLT), responsible for running the Hospice. The Chief Executive is not the highest paid employee.

No Trustees received remuneration during the current or prior year. No travel and subsistence expenses were paid to Trustees during the current or prior year.

10. TANGIBLE FIXED ASSETS

CHARITY AND GROUP	Improvements to Leasehold Property	Computer Equipment	Fixtures And Fittings	Motor Vehicles	Total
	£	£	£	£	£
Cost					
At 1 April 2018	6,670,892	427,637	2,969,743	54,055	10,122,327
Additions		83,839	115,690	31,554	231,083
Disposals		-	-	(44,060)	(44,060)
At 31 March 2019	6,670,892	511,476	3,085,433	41,549	10,309,350
Depreciation					
At 1 April 2018	3,813,099	325,137	2,203,474	51,707	6,393,417
Charge for year	354,207	63,906	106,265	7,994	532,372
Disposals	-	-	-	(42, 134)	(42,134)
At 31 March 2019	4,167,306	389,043	2,309,739	17,567	6,883,655
Net book value					
At 31 March 2019	2,503,586	122,433	775,694	23,982	3,425,695
At 31 March 2018	2,857,793	102,500	766,269	2,348	3,728,910

All tangible fixed assets are used for or to support charitable purposes.

11. FIXED ASSET INVESTMENTS

	Valuation	Cost	CHARITY
Total	Listed	Unlisted	
£	£	£	
5,728,455	5,728,453	2	Cost / market value at 1 April 2018
478,531	478,531	-	Additions
(200, 136)	(200, 136)		Disposal proceeds
275,691	275,691	-	Unrealised gains
25,193	25,193	-	Realised gains
(309,182)	(309,182)		Increase in cash deposits
5,998,552	5,998,550	2	Cost / market value at 31 March 2019
	Valuation	5 -	
Total	Listed		GROUP
£	£		
5,728,453	5,728,453		Market value at 1 April 2018
478,531	478,531		Additions
(200, 136)	(200, 136)		Disposal proceeds
275,691	275,691		Unrealised gains
25,193	25,193		Realised gain
(309,182)	(309,182)		Increase in cash deposits
5,998,550	5,998,550		Market value at 31 March 2019

The unlisted investment represents an investment in the subsidiary undertaking:

Name of Subsidiary
St Gemma's Hospice Services Limited

Class of Shares Held
Ordinary

Percentage of Shares Held
100%

St Gemma's Hospice also holds a minority share in an unlisted investment, Hospice Quality Partnership, which was acquired for £10.

11. FIXED ASSET INVESTMENTS (continued)

Listed Investments

The historic cost of listed fixed asset investments at 31 March 2019 was £4,621,381 (2018: £4,264,242). The investments are managed by an external fund manager. The funds can be analysed as follows:

	2019	2018
	£	£
Fixed interest	880,300	623,094
UK Equities	3,149,497	3,012,175
Overseas equities	1,323,941	1,170,913
Property	270,532	267,039
Alternative Assets	284,570	256,040
Cash deposits	90,010	399,192
	5,998,850	5,728,453

12. DEBTORS

	Grou	Jp.	Char	rity
	2019	2018	2019	2018
	£	£	£	£
Amounts falling due within one year:				
Trade debtors	8,569	3,974	-	
Amounts due from subsidiary undertaking	-	-	49,506	41,241
Income tax recoverable	49,880	55,034	49,880	55,034
Other debtors	797,948	496,258	797,948	496,258
Prepayments	120,563	111,062	120,563	111,062
	976,960	666,328	1,017,897	703,595

13. CREDITORS: amounts falling due within one year

	Group		Ch	narity
	2019	2018	2019	2018
	£	£	£	£
Trade creditors	512	3,002		
Other creditors	578,174	881,864	575,016	879,030
Accruals and deferred income	224,690	203,254	224,690	203,254
	803,376	1,088,120	799,706	1,082,284

Included in Other Creditors are monies received by St Gemma's in the role of host of the Leeds Palliative Care Network, which involves collaborative working with other palliative and end of life care providers in Leeds.

14. DEFERRED INCOME

	Grou	Cha	rity	
	2019	2018	2019	2018
	£	£	£	£
Brought forward		2,640		-
Released in the year	-	(2,640)	-	-
Other creditors	49,380		49,380	-
	49,380		49,380	—
	49,360		49,360	

The deferred income figure includes £35k for monies received from the National Dementia Pilot to support our Academic Unit of Palliative Care in the delivery and mentorship of the Advanced Care Planning and Communication Skills train the trainer programme. £12.5k has been received from the Clinical Commissioning Group for controlled drugs funding. In addition, £1.9k has been received in advance for training courses delivered by the Academic Unit of Palliative Care.

15. COMPARATIVE CONSOLIDATED STATEMENT OF FINANCIAL ACTIVITIES

Notes E E E E E E E E E			Unrestricted	Designated		31 March 2018 Total
NCOME FROM Donations, legacies and trusts 2 2,436,294 - 114,301 2,550,595	Not					Funds
Donations, legacies and trusts 2	1,7,7,7	es	L	L	L	L
Other trading activities: Sale of donated goods 2,732,384 - 2,732,384 Fundraising events 1,015,583 - 1,015,583 Lottery 216,458 - 216,458 Commercial trading operations 83,361 - 83,361 Charitable activities – Provision of Hospice - 4,047,786 - 4,047,786 Services: CCG funding 2,526,723 - 212,322 2,739,045 Health Foundation grant - 14,631 14,63		2	2 426 204	102	114 201	2 550 505
Sale of donated goods Fundraising events Lottery Lotte	Donations, legacies and trusts	~	2,430,294	-	114,301	2,550,555
Sale of donated goods Fundraising events Lottery Lotte	Other trading activities:					
Fundraising events Lottery 216,458 - 216,458 Commercial trading operations 83,361 - 83,361 Charitable activities – Provision of Hospice Services: CCG funding 2,526,723 - 212,322 2,739,045 Health Foundation grant - 14,631 14,			2,732,384	-	_	2,732,384
Lottery Commercial trading operations 83,361 - 216,458 83,361 - 83	Fundraising events		1,015,583	_		1,015,583
Commercial trading operations 83,361 - 83,361 3 4,047,786 - 4,047,786 Charitable activities – Provision of Hospice Services: CCG funding 2,526,723 - 212,322 2,739,045 Health Foundation grant - 14,631 14,631 Education and research 90,174 - 90,174 Bistro 86,686 - 86,686 Other 850 - 850 4 2,704,433 - 226,953 2,931,386 Investments 5 191,581 - 191,581 Total income 9,380,094 - 341,254 9,721,348 EXPENDITURE ON Raising funds: Cost of selling donated goods 1,880,696 61,522 - 1,942,218 Costs of raising income from donations, legacies, trusts and fundraising events Investment management fees 30,481 - 30,481 Cost of lotteries 77,413 - 77,413 Commercial trading operations 65,874 - 65,874 Charitable activities – Provision of Hospice Services 6,280,606 516,406 182,158 6,979,170			216,458	-		216,458
Charitable activities – Provision of Hospice Services: CCG funding	Commercial trading operations		83,361	-	-	83,361
Charitable activities – Provision of Hospice Services: CCG funding		3	4 047 786			4 047 786
Services CCG funding 2,526,723 212,322 2,739,045 Health Foundation grant 14,631 14,631 14,631 Education and research 90,174 90,174 Bistro 86,686 6850 850 Other 850 226,953 2,931,386 Investments 5 191,581 191,581 191,581 Total income 9,380,094 341,254 9,721,348 EXPENDITURE ON Raising funds: Cost of selling donated goods 1,880,696 61,522 1,942,218 Cost of raising income from donations, legacies, trusts and fundraising events 1,221,335 16,205 1,237,540 Investment management fees 30,481 30,481 30,481 30,481 Cost of lotteries 77,413 77,413 77,413 Commercial trading operations 65,874 65,874 Charitable activities - Provision of Hospice 6,280,606 516,406 182,158 6,979,170 Charitable activities - Provision of Hospice 6,280,606 516,406 182,158 6,979,170 Charitable activities - Provision of Hospice 6,280,606 516,406 182,158 6,979,170 Control of Hospice 6,280,606 6,280,606 6,280,606 6,280,606 6,280,606 6,280,606 6,280,606 6,2	Charitable activities - Provision of Hospice		4,041,100			4,047,700
Health Foundation grant						
Health Foundation grant	CCG funding		2,526,723	-	212,322	2,739,045
Bistro Other	Health Foundation grant		10 No. 10 No.		14,631	14,631
Other 850 - - 850 4 2,704,433 - 226,953 2,931,386 Investments 5 191,581 - - 191,581 Total income 9,380,094 - 341,254 9,721,348 EXPENDITURE ON Raising funds: - 341,254 9,721,348 Cost of selling donated goods 1,880,696 61,522 - 1,942,218 Costs of raising income from donations, legacies, trusts and fundraising events Investment management fees 30,481 - - 30,481 Cost of lotteries 77,413 - - 77,413 Cost of lotteries 77,413 - - 77,413 Commercial trading operations 65,874 - - 65,874 3,275,799 77,727 - 3,353,526 Charitable activities – Provision of Hospice 6,280,606 516,406 182,158 6,979,170	Education and research		90,174	-	-	90,174
A 2,704,433 - 226,953 2,931,386	Bistro		86,686	-		86,686
Investments 5	Other		850	-	-	850
Section Sect		4	2,704,433	-	226,953	2,931,386
EXPENDITURE ON Raising funds: Cost of selling donated goods Costs of raising income from donations, legacies, trusts and fundraising events Investment management fees Cost of lotteries Commercial trading operations Commercial trading operations Charitable activities – Provision of Hospice Services 1,880,696 1,880,696 61,522 - 1,942,218 61,205 - 1,237,540 - 30,481 30,481 - 77,413 - 77,413 - 77,413 - 65,874 - 65,874 - 3,353,526 Charitable activities – Provision of Hospice Services 6,280,606 516,406 182,158 6,979,170	Investments	5	191,581	-	2	191,581
Raising funds: Cost of selling donated goods Costs of raising income from donations, legacies, trusts and fundraising events Investment management fees Cost of lotteries Commercial trading operations Charitable activities – Provision of Hospice Services 1,880,696 61,522 - 1,942,218 61,205 - 1,237,540 - 1,237,540 - 30,481 30,481 77,413 - 77,413 - 77,413 - 65,874 65,874 3,353,526 Charitable activities – Provision of Hospice Services 6,280,606 516,406 182,158 6,979,170	Total income		9,380,094		341,254	9,721,348
Cost of selling donated goods 1,880,696 61,522 - 1,942,218 Costs of raising income from donations, legacies, trusts and fundraising events Investment management fees 1,221,335 16,205 - 1,237,540 Cost of lotteries 30,481 30,481 - 77,413 - 77,413 Commercial trading operations 65,874 65,874 - 65,874 3,275,799 77,727 - 3,353,526 Charitable activities – Provision of Hospice Services 6,280,606 516,406 182,158 6,979,170						
Costs of raising income from donations, legacies, trusts and fundraising events Investment management fees 30,481 - 30,481 Cost of lotteries 77,413 - 77,413 Commercial trading operations 65,874 - 65,874 - 65,874 Charitable activities – Provision of Hospice Services 6,280,606 516,406 182,158 6,979,170			1 990 606	61 522		1 0/2 218
legacies, trusts and fundraising events						
Cost of lotteries 77,413 - 77,413 - 65,874 - 65,874 - 65,874 - 3,353,526 - 3,353,526 - 6,280,606 516,406 182,158 6,979,170	legacies, trusts and fundraising events		1,221,000	10,200		1,207,040
Commercial trading operations 65,874 - 65,874 3,275,799 77,727 - 3,353,526 Charitable activities – Provision of Hospice Services 6,280,606 516,406 182,158 6,979,170	Investment management fees		30,481	-		30,481
3,275,799 77,727 - 3,353,526 Charitable activities – Provision of Hospice Services 6,280,606 516,406 182,158 6,979,170	Cost of lotteries		77,413	-		77,413
Charitable activities – Provision of Hospice Services 6,280,606 516,406 182,158 6,979,170	Commercial trading operations		65,874			65,874
Services 6,280,606 516,406 182,158 6,979,170			3,275,799	77,727	-	3,353,526
Services 6,280,606 516,406 182,158 6,979,170	Charitable activities - Provision of Hospice					
Total Expenditure 6 9,556,405 594,133 182,158 10,332,696			6,280,606	516,406	182,158	6,979,170
######################################	Total Expenditure	6	9,556,405	594,133	182,158	10,332,696

15. COMPARATIVE CONSOLIDATED STATEMENT OF FINANCIAL ACTIVITIES (continued)

				31 March 2018
	Unrestricted Funds	Designated Funds	Restricted Funds	Total Funds
Notes	£	£	£	£
8	(176,311)	(594,133)	159,096	(611,348)
11	78,755	-	-	78,755
	(97,556)	(594,133)	159,096	(532,593)
16/17	(148,226)	208,333	(60,107)	
	(245,782)	(385,800)	98,989	(532,593)
	6,527,541	5,103,452	259,508	11,890,501
	(245,782)	(385,800)	98,989	(532,593)
18	6,281,759	4,717,652	358,497	11,357,908
	8 11 16/17	Notes £ 8 (176,311) 11 78,755 (97,556) 16/17 (148,226) (245,782) 6,527,541 (245,782)	Notes	Notes Funds £ Funds £ Funds £ 2 2 9 9

16. UNRESTRICTED FUNDS

CHARITY AND GROUP	01 April	Income and	Expenditure	Transfers	31 March
	2018	net gain on			2019
	£	investments £	£	£	£
Designated Funds					
Maintenance and gardens	529,235			(29,431)	499,804
Investing in People	9,037		(8,156)	-	881
AUPC refurbishment	231,159	_	-	(231, 159)	-
IT Development fund	49,399	20,000		(30,849)	38,550
Service Transformation fund	169,481		(82,120)	150,000	237,361
Leadership and development	_		2	50,000	50,000
Staff wellbeing	-	2.20	38	25,000	25,000
Securing your Hospice	431			(431)	1000011100
Fixed assets	3,728,910	1-1	(532,372)	229,157	3,425,695
	4,717,652	20,000	(622,648)	162,287	4,277,291
General Fund	6,281,759	10,892,495	(9,799,768)	(45,113)	7,329,373
Total unrestricted funds	10,999,411	10,912,495	(10,422,416)	117,174	11,606,664

The Maintenance and Gardens Fund is for ongoing building maintenance work to ensure that the Hospice building is kept to the highest possible standard. The IT Development Fund supports the strategic and transformational projects across the Hospice. The Transformation Fund is designated to support ongoing service development needs of the Hospice. The Leadership and Development and Staff Wellbeing Funds were designated during the year, being transferred from general funds. The Fixed Asset Fund represents reserves invested in Fixed Assets and each year a transfer is made equivalent to the value of additions in the year.

16. UNRESTRICTED FUNDS (continued)

YEAR ENDED 31 MARCH 2018 COMPARATIVES

CHARITY AND GROUP	01 April 2017	Income and net gain on investments	Expenditure	Transfers	31 March 2018
	£	£	£	£	£
Designated Funds					
Maintenance and gardens	563,526	-	-	(34,291)	529,235
Investing in People	9,037	-		-	9,037
AUPC refurbishment	242,306	100	-	(11,147)	231,159
IT Development fund	78,294	-	-	(28,895)	49,399
Service Transformation	250,000	-	(80,519)		169,481
Securing your Hospice	638		(207)		431
Fixed assets	3,959,651	-	(513,407)	282,666	3,728,910
	5,103,452		(594,133)	208,333	4,717,652
General Fund	6,527,541	9,458,849	(9,556,405)	(148,226)	6,281,759
Total unrestricted funds	11,630,993	9,458,849	(10,150,538)	60,107	10,999,411

17. RESTRICTED FUNDS

CHARITY AND GROUP	1 April 2018	Income	Expenditure	Transfers	31 March 2019
	£	£	£	£	£
IPU & Day Hospice	44,318	-	0.00	(21,170)	23,148
Children's bereavement service	11,718	38,005	(49,723)	1 2	
Informatics Consultancy	13,355	-	(450)	(12,905)	-
Competency Framework/EOL care outcomes	68,609	_	(24,613)		43,996
Companion's scheme	6,743	-	- Control - Cont	(6,743)	10000
City wide education programme	33,982	-	(1,650)	S. S. S.	32,332
DoLS training	2,605	-	-	(2,605)	-
Conference update in symptom management	1,805	_		(1,805)	-
Leeds Compassionate Communities	839	-	(101)		738
Purchase and replacement of equipment	2,418	-	-	(2,418)	-
Restricted Trust Income		92,469	(14,046)	(28,428)	49,995
Sundry restricted donations	537	24,579	(8,385)	(10,000)	6,731
Health Foundation - Nurse led beds	370	-	(370)	_	-
St Gemma's Hospice to Hospital In Reach	60,548	-	(30,965)	-	29,583
Enhanced Digitisation for In Patient Unit (IPU)	38,175	-	(9,572)	-	28,603
Wireless Nurse Call System Upgrade	20,000	-	25.55	(20,000)	
Mental Health Clinical Nurse Specialist	38,175	-	(6,320)	-	31,855
Patient & Family Engagement	14,300	-		(11,100)	3,200
Leeds Palliative Care Network		81,838	(81,838)		
Balance	358,497	236,891	(228,033)	(117,174)	250,181

The children's bereavement project is funded by Children in Need to employ children's bereavement workers.

The Leeds Palliative Care Network, funded by the CCG, is hosted by the Hospice to deliver the city's Palliative and End of Life Care strategy.

The city-wide education programme was set up to improve the provision of palliative care education across the city.

The competency framework for nursing staff was funded by the CCG; Health Education England provided funding to support the End of Life Care Outcomes project being undertaken within the Academic Unit of Palliative Care.

The Hospice to Hospital In Reach, Enhanced Digitisation for IPU, Wireless Nurse Call System Upgrade, Mental Health Clinical Nurse Specialist and Patient and Family Engagement projects are all funded by the CCG.

17. RESTRICTED FUNDS (continued)

YEAR ENDED 31 MARCH 2018 COMPARATIVES

CHARITY AND GROUP	1 April 2017 £	Income £	Expenditure £	Transfers £	31 March 2018 £
IPU & Day Hospice	49,229	-	(1,220)	(3,691)	44,318
Children's bereavement service	-	57,831	(46,113)	-	11,718
Informatics Consultancy	14,723	-	(1,368)	2.5	13,355
Competency Framework/EOL care outcomes	102,797	-	(34, 188)		68,609
Companions' scheme	6,743	-			6,743
AV Equipment/Education	26,918	-	-	(26,918)	-
City wide education programme	33,982		-		33,982
Volunteer coordinator	10,300	-	(10,300)	-	
DoLS training	2,605	-	***************************************	-	2,605
Conference update in symptom management	1,805	-		100	1,805
Dementia EOL training for care homes	2,560	-	(2,560)	-	-
Communication skills training	1,336	-	(1,336)	_	
Leeds Compassionate Communities	2,936	-	(2,097)	-	839
Purchase and replacement of equipment	-	33,816	(1,900)	(29,498)	2,418
Sundry restricted donations	2,000	5,690	(7,153)		537
Health Foundation - Nurse led beds	1,574		(1,204)	-	370
Restricted legacy	-	16,964	(16,964)	39	-
St Gemma's Hospice to Hospital In Reach	-	60,548	2	-	60,548
Enhanced Digitisation for IPU	_	38,175	2	2	38,175
Wireless Nurse Call System Upgrade		20,000		-	20,000
Mental Health Clinical Nurse Specialist		38,175		1.7	38,175
Patient & Family Engagement	-	14,300	MARKET TO THE REST.	-	14,300
Hospice UK	-	14,631	(14,631)	(a)	-
Managed Clinical Network		41,124	(41,124)		
Balance	259,508	341,254	(182,158)	(60,107)	358,497

18. ANALYSIS OF NET ASSETS BETWEEN FUNDS

Charity	Unrestricted Fund £	Designated Fund £	Restricted Funds £	Total 2019 £	Total 2018 £
Tangible assets	-	3,425,695	-	3,425,695	3,728,910
Investments	5,998,552		-	5,998,552	5,728,455
Current assets	2,130,527	851,596	250,181	3,232,304	2,982,827
Current liabilities	(799,706)			(799,706)	(1,082,284)
Total net assets	7,329,373	4,277,291	250,181	11,856,845	11,357,908
Group	Unrestricted Fund	Designated Fund	Restricted Funds	Total 2019	Total 2018
	£	£	£	£	£
Tangible assets	-	3,425,695	-	3,425,695	3,728,910
Investments	5,998,550	-	-	5,998,550	5,728,453
Current assets	2,134,199	851,596	250,181	3,235,976	2,988,665
Current liabilities	(803,376)			(803,376)	(1,088,120)
Total net assets	7,329,373	4,277,291	250,181	11,856,845	11,357,908

18. ANALYSIS OF NET ASSETS BETWEEN FUNDS (continued)

2018 Comparatives

Unrestricted Fund £	Designated Fund £	Restricted Funds £	Total 2018 £
-	3,728,910		3,728,910
5,728,455	-		5,728,455
	988,742	358,497	2,982,827
(1,082,284)			(1,082,284)
6,281,759	4,717,652	358,497	11,357,908
	5,728,455 1,635,588 (1,082,284)	Fund £ S,728,910 5,728,455 1,635,588 988,742 (1,082,284)	Fund £ £ £ £ - 3,728,910 - 5,728,455 - 1,635,588 988,742 358,497 (1,082,284) -

Group	Unrestricted Fund £	Designated Fund £	Restricted Funds £	Total 2018 £
Tangible assets	-	3,728,910		3,728,910
Investments	5,728,453	-	-	5,728,453
Current assets	1,641,426	988,742	358,497	2,988,665
Current liabilities	(1,088,120)			(1,088,120)
Total net assets	6,281,759	4,717,652	358,497	11,357,908

19. NOTES TO THE CASHFLOW STATEMENT

2019 £	2018 £
498,937	(532,593)
(203,631)	(191,581)
532,372	513,407
(300,884)	(78,755)
(1,358)	
1,666	1,900
(310,632)	(57,789)
(284,744)	230,355
(68,274)	(115,056)
	498,937 (203,631) 532,372 (300,884) (1,358) 1,666 (310,632) (284,744)

20. FINANCIAL COMMITMENTS

At the balance sheet date the total future minimum lease payments under non-cancellable operating leases:

	Land & Buildings		Other	
	2019	2018	2019	2018
	£	£	£	£
Within one year	419,415	410,400	11,797	11,797
Between one and five years	766,692	833,318	14,890	26,687
	1,186,107	1,243,718	26,687	38,484

21. PENSION COMMITMENTS

The Hospice contributes to two pension schemes. A defined benefit scheme operated by the National Health Service Superannuation Scheme is only available to staff who have previously contributed to the scheme. The administration of the scheme is dealt with by the National Health Service Pension agencies. Contributions to this scheme are paid in respect of current service, and there is no liability to the Hospice in respect of past service. In addition there is a Group Personal Pension Scheme, which is a defined contribution pension scheme, administered by Standard Life which is available to all employees.

The charge to the Statement of Financial Activities of £519,806 (2018: £519,882) represents contributions to the funds during the period. Contributions payable to the schemes at the year end date totalling £20,044 (2018: £24,972) are included in creditors.

22. RELATED PARTIES

Control

Throughout the period, St Gemma's Hospice was ultimately controlled by the Congregation of the Sisters of the Cross and Passion of our Lord Jesus Christ. The members of the company all belong to this Congregation.

Transactions

The Congregation retains freehold title to the Hospice which is let to the company on a long term lease for peppercorn rent.

Trustee donations

The aggregate amount of cash donations received from Trustees during the year was £2,318 (2018: £270). This does not include income received from Trustees in relation to the purchase of tickets or items at fundraising events.

Trustee relationships

Schofield Sweeney have provided legal advice in relation to our Lottery and Data Protection arrangements. Chris Schofield (Trustee) is Chairman of Schofield Sweeney.

23. JOINT ARRANGEMENT

St Gemma's Hospice has an arrangement with Sue Ryder Wheatfields to operate a joint lottery for fundraising purposes, which is administered by Sterling Lotteries.

The income received during the year from the joint lottery was £121,877 (2018 net income: £139,045) and from Local Hospice Lottery was £4,800. Total lottery income of £126,677 is included in note 3.



St Gemma's Hospice is a local, independent charity, providing expert medical and nursing care to thousands of local people every year – all free of charge to patients and their families.

If you would like more information about our work, please contact us:

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