

HIGH PEAK HOSPICECARE

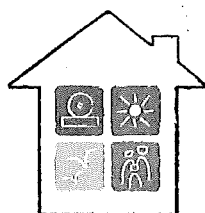
(A company limited by guarantee)

Directors and Trustees Report and Accounts

For The Year Ended 31 March 2021

Company number 2880281

Registered Charity number 1031192



Blythe House
Hospicecare

High Peak Hospicecare

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High Peak Hospicecare

Report of the trustees for the year ended 31 March 2021

Chairman's Report

This year has undoubtedly been one of the most challenging years for the charity. The Covid pandemic has impacted right across the whole organisation affecting both the delivery of clinical services and our ability to generate the required levels of income. We have also experienced a significant increase in demand for Hospice at Home service following our close working and subsequent merger with Helens Trust. As a care provider who puts people and community at its heart, we were determined that we would continue to support everyone that needed us despite the challenges and restrictions placed on us. The senior management team were quick to respond to the rapidly changing situation, providing leadership and innovative solutions that enabled support and care to continue throughout the year in a Covid safe environment.

Despite the severe restrictions to income generation across both retail and fundraising our accounts show a healthy surplus for the year. This was largely as a result of various Covid financial support measures such as the Coronavirus Job Retention Scheme, Government Funding for Hospices via Hospice UK and a number of other Covid related grants and donations. In terms of reserves, the Board of Trustees continues to regularly review reserve levels against current and future financial requirements. In the Board's view; given the continuing impact of Covid, uncertainty around core commissioning and a significant increase in demand for our Hospice at Home service, it remains justifiable and prudent to hold the level of reserves shown in these accounts. I am pleased to once again be able to report that the hospice has sufficient reserves to continue to meet its charitable obligations and remains financially sustainable.

Throughout Covid, the Board of Trustees continued to meet quarterly to review clinical activity, management, HR and finance against our strategic aims and goals; Services, Environment, Workforce and Finance, and that we continued to meet our Mission Statement. Trustees also supported the Covid senior management group providing both operational and strategic management in response to the impact of and regulatory requirements of Covid. As a Board, we remain committed to effective leadership, strong governance, regulatory compliance and fulfilling our legal, custodial and morale responsibilities as Trustees. We regularly cover other areas including board development, training, risk and strategic planning.

The AGM in December 2020 saw several changes to trustees; John McNamara another long-standing trustee retired from the Board of Trustees after 27 years. John a chartered accountant served as Treasurer and Finance Trustee and was key in establishing strong financial governance, ensuring the hospice had good levels of reserves and was financially sustainable. On behalf of the Board, I extend our genuine thanks to John and wish him all the best in the future. Following the merger with Helen's Trust, Dr Louise Jordan, Roger Eccleston and Sarah Rowland were all appointed to the Board of Trustees. I am delighted that Dr Louise Jordan agreed to be a Deputy Chair and support the development of services in the Derbyshire Dales and the Helen's Trust legacy.

Finally, this has been a year of many challenges and I am immensely proud and grateful to everyone involved with Blythe House Hospicecare and Helen's Trust for your support and loyalty throughout the past year. It has never been more appropriate to thank a truly dedicated and outstanding team of Janet Dunphy CEO, senior managers, staff, our many loyal and dedicated volunteers, supporters, donors and corporate sponsors. We continue to be both extremely fortunate and privileged to have experienced your unwavering commitment and belief in the values of Blythe House Hospicecare and Helen's Trust throughout this year.

Timothy J Mournie

Chair, Board of Trustees

High Peak Hospicecare

Report of the trustees for the year ended 31 March 2021

Our Purpose

The purpose of the charity is to promote the relief of sickness and relief of people in need living in Derbyshire, Cheshire and Staffordshire.

Organisational Aim

The principal activities are the provision of palliative care and support to people with cancer and other life limiting illnesses, and the extension of support to their families and carers.

Mission Statement

Blythe House Hospicecare has a clear mission statement which provides overarching guidance on the purpose of the organisation as follows:

Blythe House Hospicecare provides the highest levels of care and support for people with cancer and other life limiting illnesses.

Strategic Objectives

High Peak Hospicecare (Blythe House) exists to provide support and palliative care in the community of the High Peak and Derbyshire Dales for people with cancer and other life limiting illnesses and to offer support to their families, carers and those who have been bereaved.

Values

The strategic plan for Blythe House Hospicecare was reviewed in 2019 and it details clear values for the workforce of being: Caring, Aspirational and Professional. The strategic aims of the organisation are to:

- Deliver services which support all life limiting illnesses.
- Maintain high professional standards and organisational cohesiveness.
- Support people and their families to die at home, if that is their wish.
- Increase community resilience and connectivity by developing our volunteer workforce and clinical partnerships.
- Further develop a range of income streams.
- Build community relationships to increase financial and clinical efficiency.

The organisational strategy is due to be reviewed in January 2022.

Current Climate and Challenges: COVID-19 changed the clinical and economic landscape. Increased deaths and increased anxiety have directly correlated with an increased volume of care delivered. The Hospice at Home service has doubled their clinical output during the last eighteen months. Reaching out to the community and enabling resilience has never been more important. Digital support became an everyday practice for all hospice professionals and the isolation and fear of the community has been ameliorated by Blythe House Hospicecare's Community Volunteers services and the 'Here to Help' campaign which began April 2020. This was followed by a campaign of 'Here to help – Here to Stay' which was designed to reassure our community during uncertain times.

The retail sector was unable to function for the first five months of the year and all physical fundraising events were cancelled during this time.

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Report of the trustees for the year ended 31 March 2021

Funds from central government for Personal Protective Equipment have continued, to cover an increase in Hospice at Home hours, to extend the Community services in the High Peak and into the Derbyshire Dales and to support a new patient database. Funds were also brokered by Hospice UK from central government to support hospices up to July 2020 and local authority grants were made to the retail sector. The grants received during the COVID pandemic ensures that as a small charity relying on 79% public funding we have avoided a deficit budget.

The clinical and economic future remains uncertain. Clinical needs will increase and will need to be met in new ways, funds will need to be raised differently, and as an organisation, Blythe House Hospicecare has become more digitalised and remodelled their services in preparation for a different future.

Blythe House Hospicecare operates within a competitive funding environment which has now moved back into austerity measures. NHS reforms will see Clinical Commissioning Groups replaced by Integrated Care Systems. Approximately 1% of an area's population will die each year; in Derbyshire this equates to approximately 7,500 individuals. Research suggests that 75% of deaths would benefit from end of life care. Three-quarters of people would prefer to die at home, but across England, the majority often die in hospital. In addition, people have an average of 3½ hospital admissions in the last year of their life. However, 2020 has seen the level of non covid deaths rise to the level anticipated for 2030 reaffirming the need to increase community capacity by providing the services of hospice at home and community volunteers.

The NICE Quality Standards on End of Life Care defines that people are 'approaching the end of life' when they are likely to die within the next 12 months. Currently, a number of services are commissioned that support individuals at the end of their life, and these include specialist end of life care services, general health and social care services and voluntary sector services. People at the end of life have special needs that are often poorly met, especially out of normal surgery hours (two thirds of the week), or while on an acute busy medical ward.

Care should be arranged around the needs of the patient rather than the needs of the service and care should be delivered by carers who have a good level of knowledge, care and compassion for end of life care. Patients and their families should be able to identify and contact those who deliver their care and care should be delivered with continuity. The Hospice at Home service commenced 2016 and has been able to provide these services and meet the needs outlined and this service continues to develop in both scope and impact.

Service users can access different services according to their needs at every stage of their illness. The comprehensive services at Blythe House Hospicecare provide a continuity of care which is vital for people suffering the effects of the diagnosis of a life limiting illness.

The national cancer registry reports that there are 3 million people living with cancer in the UK. By 2025 they estimate there will be a further increase of 500,000 bringing the total to 3.5 million. This figure is likely to grow to 4,000,000 by 2030.

Services

Blythe House Hospicecare offers supports and specialist clinical care from pre-diagnosis through to bereavement. The main activities of Blythe House Hospicecare are:

- Clinical hub delivering structured programmes of clinical careClinical outreach services
- Hospice at Home
- Medical services. A consultant palliative medicine clinic is provided by Dr Sarah Parnacott on a weekly basis in line with standards from National Institute Clinical Excellence.

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Report of the trustees for the year ended 31 March 2021

- Information and support
- Counselling for adults and children Pre and Post bereavement.
- Support groups for life limiting disease, including cancer, and neurological diseases.
- Bereavement support groups
- Carer's support clinic and group.
- Family support events
- Out- patient clinics
- Internal and external programmes of education, including workshops.
- Mindfulness groups.
- A wide range of complementary therapies
- In house spiritual care support.

The clinical services have been designed and are delivered to meet the needs of people affected by life limiting illness. Evidence from relevant Clinical Commissioning Groups has been analysed to shape services which meet the needs according to the disease profiles of the demographic. The range of problems for those affected by life limiting illness is wide; the wide range of services delivered reflects this.

Clinical Governance

The quality initiatives aim to improve the structure, process and outcomes of healthcare. They are not a set of targets or mandatory indicators for performance management. Healthcare is needs driven and commissioners require levels of activity to design and plan care.

Numerous clinical tools are in place to measure the impact of the services.

The clinical tools and quality initiatives used are:

- Integrated patient outcomes scale (IPOS)
- Evaluations which record the service user's views on the timeliness of response, quality of care, the impact of care on levels of satisfaction, anxiety and fatigue.
- Electronic tools which collect data to demonstrate whether the patient's preferred place of death has been achieved and which phase of illness each patient is in at the time of referral and review.
- Hospital anxiety depressions tool (HADS)
- Sheffield profile for assessment and referral for care. (SPARC)
- Measure yourself concerns and wellbeing (MYCAW)

High Peak Hospicecare

Report of the trustees for the year ended 31 March 2021

Levels of Activity

Clear processes are in place to collect and report data to relevant stakeholders, such as Clinical Commissioning Groups (CCG) and to accurately produce reports which demonstrate the level of activity, clinical impact and social value of all services. Reports containing this information are produced quarterly for the Board of Trustees, annually for the CCG and at inspection for the Care Quality Commission (CQC). The CCG carries out a quality review quarterly. The last CQC inspection took place in August 2021. This report states that Blythe House Hospicecare is performing well in all areas, with a number of areas described as outstanding..

Organisational processes are structured to ensure good governance and include setting and measuring against clear quality markers set by National Institute of Clinical Excellence., namely:

- Provide information at the time of need for patients and their loved ones.
- Improve quality of life.
- Reduce hospital admissions by providing care which avoids crisis admissions.
- Expedite referrals home from hospital by supporting discharges,
- Support carers to support their loved ones in times of crisis
- Reduce the need for GP visits and prescriptions by providing clinical support and improving self-reliance.
- Support people to have their care and death in the place of their choice in line with national strategy.

Clinical Impact. Robust data collection, reporting and analysis are integrated into all organisational clinical procedures which enables the trustees of Blythe House Hospice to consider and measure the impact that it has on its beneficiaries. Evidence of quality is required to prove patient satisfaction, i.e., .80% increasing year on year to increase annually by 5% to an upper threshold of 90%

Social Value The management team of Blythe House Hospice closely engages with all other service providers to strengthen the connection between local services to maximise the impact of the community they serve. This level of engagement ensures that the workforce of Blythe House Hospice maintains a high level of understanding of the wider context in which the organisation operates.

Partnerships, clinical and community liaison impact greatly on increasing the social value of the services provided, Blythe House communicates openly and clearly to the community it serves.

Volunteers

The level of engagement is demonstrated by the recruitment of 300 volunteers who support all areas of activity.

Blythe House Hospice recognises and rewards the skills and commitment of the volunteers' workforce. An open culture of communication fosters strong community links and deep levels of understanding with regard to organisational aims and activities and the money raised from the community is spent on meeting the needs of the community.

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Report of the trustees for the year ended 31 March 2021

The Community Volunteer service which was launched in May 2018 to recruit and train volunteers to work alongside other professionals in their homes has been much needed and appreciated during the unpredicted pandemic. There are 48 active volunteers to date. The evaluations from service users and volunteers have been excellent. This service addresses the problems which often fall between the criteria of health and social care services and provide invaluable support, increasing community resilience. Since the merger with Helens Trust it has been extended into the Derbyshire Dales.

Supporting the Workforce

Educational programmes are designed to ensure the workforce are supported and trained to a high standard, in line with the Care and Quality Commission. Robust recruitment procedures are in place and staff are monitored and appraised in order to maintain standards and reach organisational strategic aims and objectives.

Staff satisfaction surveys take place annually and consistently demonstrate the highest levels of satisfaction.

Short Term Objectives

- Embed the remodelled services into the local healthcare systems post lockdown using a hybrid approach to contact methods.
- Embed new clinical database across the organisation utilising the improved functionality to measure and evidence outcomes.
- Support workforce post transformation of services to increase clinical efficacy and staff satisfaction.
- Continue organisational representation at regional and local levels to assure appropriate clinical pathways and commissioning continues with new NHS systems.

Long Term Objectives

- Ensure strong integration within new health social care systems.
- Secure higher level of core commissioning for services, particularly hospice at home and revised service specifications/contracts.
- Further develop collaboration with Glossop and provide services in partnership where needed and sustainable.
- Continue to be a major contributor and strong influencer to increasing community capacity for end of life care.
- Uphold local charity values alongside NHS reforms in line with charitable objectives.
- Continue to support the workforce in terms of competencies and rewarding careers.
- Further utilise technology and increase digitalisation across the whole organisation in particularly income generation.

Financial Review

The trustees consider the financial position at the year-end to be robust as the charity has significant reserves, cash and investments. This enables us to plan for the future with confidence.

During the year we have 510k surplus. The result for the year was better than expected due to increased income of £493k from central government via Hospice UK in response to the pandemic, and from the CCG after organisational appeal for financial support to meet the growing numbers of people supported to die at home. The retail sector was unable to trade for 7 months of the year which led to retail takings being 50% behind budget. Similarly, lockdown meant that many fundraising events were cancelled therefore fundraising income ended the year at £77k. The increasing need for Hospice at Home means that we are forecasting an outflow of resources of 475k in the year to March 2022.

High Peak Hospicecare

Report of the trustees for the year ended 31 March 2021

Our principal funding sources for the year were donations and legacies 28%; CCG contract 28%; Hospice at Home funding 13%; grants 7%; trading activities 33% and other amounts 1%. All of these amounts were used to support the delivery of services to patients.

The principal risks and uncertainties facing the charity are the funding climate within healthcare which remains challenging both because of the lack of agreed long term contribution to funding from the CCG; the changing priorities of the NHS which we have to support; and securing continuing funding for our Hospice at Home service. As detailed above evidence of the efficacy of our services is supplied to the CCG to help ensure continued commitment to funding.

Total funds held at the end of the period were £2,763k of which general reserves were £1,188k and restricted reserves £176k Designated reserves of £1,344k are held to support the tangible fixed assets which are essential for our charitable activities and to launch our Hospice at Home service. The Hospice at Home designated funds of £475k are expected to be spent in the year to 31 March 2022. The trustees in conjunction with the reserves policy may consider designating a further amount from general reserves to Hospice at Home. The tangible fixed asset designated fund of £871k can only be realised by the disposal of tangible fixed assets.

General reserves are held to enable the charity to continue its work effectively and seamlessly if income levels fall, to fund capital projects, to contribute to general expenditure in times of growth and change and to give flexibility to respond quickly to new demands and take on innovative projects. The reserves policy is to hold general reserves of 4-6 months of budgeted unrestricted expenditure. This level is currently exceeded and the trustees have determined that they should allow unrestricted reserves of 12 months of budgeted unrestricted expenditure due to the uncertainty around funding levels and the competing demands on the charity arising from the ongoing pandemic.

Investment Policy

The trustees take a conservative policy with regard to investments because of the changing nature of the NHS and also because they are conscious that the primary sources of funding are public money and funding raised by fundraisers and volunteers. Available funds are therefore kept in cash deposits or in short term bonds. Non-financial considerations are not currently part of our assessment of deposit takers.

High Peak Hospicecare

Report of the trustees for the year ended 31 March 2021

Reference and Administrative Details

Name of the Charity High Peak Hospicecare

Working Name Blythe House Hospice

Company Number 2880281

Charity Number 1031192

Registered Office Blythe House
Eccles Fold
Chapel-en-le-Frith
High Peak
SK23 9TJ

Auditors Mitten Clarke Audit Limited
2nd Floor
St George's House
56 Peter Street
Manchester
M2 3NQ

Bankers Yorkshire Bank
15 Market Place
Macclesfield
SK10 1AG

High Peak Hospicecare

Report of the trustees for the year ended 31 March 2021

Directors and Trustees

The directors of the charitable company (the charity) are its trustees for the purpose of charity law. The trustees and officers serving during the year and since the year end were as follows:

TJ Mourne FCCA - Chairman
DM Butler BSc (Econ), FCA
JS Dunlop
JM McNamara BSc (Econ), FCA (resigned 9/11/20)
LH Middleton LL.B (resigned 7/12/2020)
S King (resigned 22/2/21)
M Hardman
B McGee
N Capper
A Cawthorn
E Przychodzki
S Parnacott
R Eccleston (resigned 2/6/21)
L Jordan (appointed 7/12/20)
S Rowland (appointed 7/12/20)

Company Secretary

S Rowland (appointed 7/12/20)
LH Middleton LL.B (resigned 7/12/20)

Senior Management Team

Alistair Rogerson (Business Development Manager)
Shane O'Reilly (Clinical Services Manager)
Wendy Brown (HR Advisor)
Victoria Wild (Volunteer and Support Services Manager)
Ruth Brown (Senior Hospice at Home Manager)
Jill Davies (End of Life Care Lead)

Chief Executive Officer (CEO)

J Dunphy RGN, MA, BSs, Cert Ed, Dip Palliative Care

Structure, Governance and Management

Governing Document

High Peak Hospicecare is a company limited by guarantee governed by its Memorandum and Articles of Association dated 16 October 2006. It is registered as a charity with the Charity Commission.

Appointment of Trustees

New trustees are identified through targeted recruitment, personal recommendation and existing volunteer roles. Trustees are appointed at the annual general meeting in November.

Trustee Induction and Training

All Trustees undergo a programme of induction which covers awareness of their legal obligations and responsibilities under charity and company law, the structure, governance and management of Blythe House Hospice including the role of the Board of Trustees and committees, understanding of the aims and objectives of Blythe House Hospice and a tailored induction day at Blythe House, meeting with senior staff and observing day to day activities. On an ongoing basis, the board as a whole undertakes formal training and development sessions throughout the year.

Organisation

The board of trustees, which can have up to fourteen members, administers and has overall responsibility for the charity. The board normally meets quarterly and there are sub-committees covering clinical, finance, income generation and remuneration. The CEO is appointed by the trustees to manage the day-to-day operations of the charity.

High Peak Hospicecare

Report of the trustees for the year ended 31 March 2021

Related Parties

None of our trustees receive remuneration or other benefit from their work with the charity. Any connection between a trustee or senior manager and any supplier must be disclosed in full to the board of trustees. In the current year no such related party transactions were disclosed. The charity's wholly owned subsidiary, High Peak Hospicecare Trading Co Ltd, is established to operate our shops. It gift aids the majority of its profits to the charity.

Pay Policy for Senior Staff

The directors consider that the board, who are the charity's trustees, and the CEO comprise the key management personnel of the charity in charge of directing and controlling, running and operating the charity on a day to day basis. All directors give their time freely and no director received any remuneration or expenses in the year.

The pay of senior staff is reviewed annually and normally increased in line with NHS Agenda for Change guidelines.

Trustees Responsibilities in Relation to the Financial Statements

The charity trustees (who are also the directors of High Peak Hospicecare for the purposes of company law) are responsible for preparing a trustees annual report and financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company law requires the charity trustees to prepare financial statements for each 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 the financial statements the trustees are required to:

- select suitable accounting policies and apply them consistently;
- observe the methods and principles of the Charities SORP;
- make judgements and estimates that are reasonable and prudent;
- state whether applicable UK accounting standards have been followed, subject to any material departures disclosed and explained in the financial statements
- prepare the financial statements on a going concern basis unless it is inappropriate to presume that the charity will continue in business.

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

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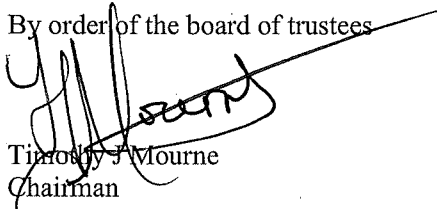
Report of the trustees for the year ended 31 March 2021

Statement as to Disclosure to Auditors

In so far as the trustees are aware at the time of approving our trustee's annual report:

- there is no relevant information, being information needed by the auditor in connection with preparing their report, of which the group's auditor is unaware, and
- The trustees, having made enquiries of fellow directors and the group's auditor that they ought to have individually taken, have each taken all steps that he/she is obliged to take as a director in order to make themselves aware of any relevant audit information and to establish that the auditor is aware of that information.

By order of the board of trustees



Timothy J. Mourne
Chairman

High Peak Hospicecare

Report of the independent auditors to the trustees of High Peak Hospicecare for the year ended 31 March 2021

Opinion

We have audited the financial statements of High Peak Hospicecare for the year ended 31 March 2021 (which comprise the Consolidated Statement of Financial Activities, the Consolidated and Parent Charitable Company Balance Sheets, the Statement of Cash Flows and Consolidated Statement of Cash Flows and the related notes) on pages 16 to 31. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice) including Financial Reporting Standard 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland".

Opinion on financial statements

In our opinion the financial statements:

give a true and fair view of the state of the group's and the parent charitable company's affairs as at 31 March 2021, and of the group's incoming resources and application of resources, including its income and expenditure, for the year then ended;

have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and have been properly prepared in accordance with the requirements of the Companies Act 2006 and the Charities Act 2011.

Basis for opinion

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

Conclusions relation to going concern

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

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

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

Other information

The 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 Report of the Independent Auditors thereon.

Our opinion on the financial statements does not cover the other information and we do not express any form of assurance conclusion thereon.

High Peak Hospicecare

Report of the independent auditors to the trustees of High Peak Hospicecare for the year ended 31 March 2021

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

material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

Opinion on other matter 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' Annual Report, which includes the Directors' Report and the Strategic Report for the financial year for which the financial statements are prepared is consistent with the financial statements;
- the Trustees' Annual Report has been prepared in accordance with applicable legal requirements.

Matters on which we are required to report by exception

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

We have nothing to report in respect of the following matters where the Companies Act 2006 and the Charities Act 2011 requires us to report to you if, in our opinion:

- the parent charitable company has not kept adequate and sufficient accounting records, or returns adequate for our audit have not been received from branches not visited by us; or the parent charitable company financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specified by law are not made; or we have not received all the information and explanations we require for our audit; or the trustees were not entitled to prepare the financial statements in accordance with the small companies' regime and take advantage of the small companies' exemptions in preparing the Report of the Trustees.

Responsibilities of trustees

As explained more fully in the Trustee's Responsibilities Statement (set out on page 10), the trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of the financial statements that are free from material misstatement, whether due to fraud or error.

High Peak Hospicecare

Report of the independent auditors to the trustees of High Peak Hospicecare for the year ended 31 March 2021

In preparing the financial statements, the trustees are responsible for assessing the group's and parent charitable company's ability to continue as a going concern, disclosing, as applicable, matters relating 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

We have been appointed as auditors under Section 144 of the Charities Act 2011 and report in accordance with the Act and relevant regulations made or having effect thereunder.

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

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

In preparation for our audit we identified areas of laws and regulations which we considered could have a material effect on the financial statements. This information was obtained via discussions with management and from our general commercial and sector experience. The directors also provide us with written representation of all the key and fundamental industry specific laws and regulations with they are required to adhere to. These were then communicated to the whole of the audit team at our audit planning meeting.

As a charitable company, non-compliance with the Charities Act 2011, Companies Act 2006 and the conditions of government and non-government grant funding, in particular those linked to the covid-19 pandemic were assessed to be most relevant. Our audit

procedures to respond to these risks included:

- Enquiries with management;
- Inspection of regulatory records, inspection reports, submissions and other correspondence;
- Challenging of management assumptions and judgements in relation to accounting estimates.
- Review of journals entered throughout the year;
- Substantive transaction testing.

Despite appropriate planning and performing our work in accordance with International Auditing Standards, there are always inherent limitations that non-compliance is not detected. Non-compliance with laws and regulations is often further removed from the events and transactions reflected in the financial statements and material misstatements due to fraud can be deliberately concealed from auditors, for example through misrepresentation, forgery or collusion.

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

High Peak Hospicecare

Report of the independent auditors to the trustees of High Peak Hospicecare for the year ended 31 March 2021

Use of our report

This report is made solely to the charitable company's trustees, as a body, in accordance with Section 144 of the Charities Act 2011 and regulations made under Section 154 of that Act. Our audit work has been undertaken so that we might state to the charitable company's trustees 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 any responsibility to anyone other than the charitable company and the charitable company's trustees as a body, for our audit work, for this report, or for the opinions we have formed.

Mitten Clarke Audit Limited

Mitten Clarke Audit Limited

Chartered Accountants and Statutory Auditors

Eligible to act as an auditor in terms of Section 1212 of the Companies Act 2006

St George's House, 56 Peter Street, Manchester M2 3NQ

Date: 23 December 2021

High Peak Hospicecare

Consolidated Statement of Financial Activities (including consolidated income and expenditure account) for the year ended 31 March 2021

| | Note | Unrestricted Funds | Restricted Funds | Total Funds 2021 | Total Funds 2020 |
|---|------|--------------------|------------------|------------------|------------------|
| | | £'000 | £'000 | £'000 | £'000 |
| Income | | | | | |
| Donations and legacies | 4 | 987 | 77 | 1,064 | 645 |
| Income from charitable activities: operation of Blythe House Hospice | 5 | 574 | 51 | 625 | 537 |
| Income from other trading activities | 6 | 335 | - | 335 | 636 |
| Transfer from Helen's Trust | 26 | 190 | 69 | 259 | - |
| Investment income | 7 | 16 | - | 16 | 14 |
| Total income | | 2,102 | 197 | 2,299 | 1,832 |
| Expenditure | | | | | |
| Costs of raising funds | 8 | 449 | - | 449 | 398 |
| Expenditure on charitable activities: operation of Blythe House Hospice | 9 | 1,280 | 115 | 1,395 | 1,154 |
| Total expenditure | | 1,729 | 115 | 1,844 | 1,552 |
| Net income/(expenditure) | | 373 | 82 | 455 | 280 |
| Other recognised gains | | | | | |
| Movement on revaluation of investment property | | 55 | - | 55 | - |
| Net movement in funds for the year | | 428 | 82 | 510 | 280 |
| Reconciliation of funds | | | | | |
| Total funds brought forward | | 2,161 | 94 | 2,255 | 1,975 |
| Total funds carried forward | | 2,589 | 176 | 2,765 | 2,255 |

The statement of financial activities includes all gains and losses recognised in the year. All income and expenditure derive from continuing activities.

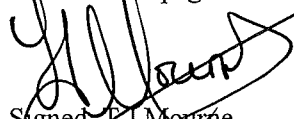
High Peak Hospicecare

Consolidated and Company Balance Sheet As at 31 March 2021

| | Note | Group 2021 £'000 | Group 2020 £'000 | Charity 2021 £'000 | Charity 2020 £'000 |
|---|------|------------------------|------------------------|--------------------------|--------------------------|
| Fixed assets | | | | | |
| Tangible assets | 16 | 721 | 727 | 719 | 726 |
| Investments | 17 | - | - | 1 | 1 |
| Investment property | 18 | 205 | 150 | 205 | 150 |
| Total fixed assets | | 926 | 877 | 925 | 877 |
| Current assets | | | | | |
| Stock | 19 | 2 | 2 | 2 | 2 |
| Debtors | 20 | 483 | 240 | 530 | 273 |
| Investments: bonds with less than 12 months to maturity | | 761 | 684 | 761 | 684 |
| Cash at bank and in hand | | 732 | 519 | 682 | 481 |
| Total current assets | | 1,978 | 1,445 | 1,975 | 1,440 |
| Liabilities | | | | | |
| Creditors falling due within one year | 21 | (139) | (67) | (137) | (63) |
| Net current assets | | 1,839 | 1,378 | 1,838 | 1,377 |
| Net assets | | 2,765 | 2,255 | 2,763 | 2,254 |
| The funds of the charity: | | | | | |
| Unrestricted income funds | 23 | 2,589 | 2,161 | 2,587 | 2,160 |
| Restricted income funds | 23 | 176 | 94 | 176 | 94 |
| Total charity funds | | 2,765 | 2,255 | 2,763 | 2,254 |

The trustees have prepared group accounts in accordance with section 398 of the Companies Act 2006 and section 138 of the Charities Act 2011. These accounts are prepared in accordance with the special provisions of Part 15 of the Companies Act relating to small companies and constitute the annual accounts required by the Companies Act 2006 and are for circulation to members of the company.

The notes on pages 19 to 31 form part of these accounts.



Signed: T J Mourne

Name: TIMOTHY JOHN MOURNE, Chair of trustees on behalf of the trustees

Approved by the trustees on 21st December 2021

High Peak Hospicecare

Statement of Cash Flows and Consolidated Statement of Cash Flows for the year ending 31 March 2021

| | Note | Group 2021 £'000 | Group 2020 £'000 | Charity 2021 £'000 | Charity 2020 £'000 |
|---|------|------------------------|------------------------|--------------------------|--------------------------|
| Cash generated in operating activities | 27 | 308 | 143 | 295 | 164 |
| Cash flows from investing activities | | | | | |
| Interest income | | 16 | 14 | 16 | 14 |
| Purchase of tangible fixed assets | | (34) | (9) | (33) | (9) |
| Purchase of investment property | | - | (150) | - | (150) |
| Sale of short term investments | | (77) | 60 | (77) | 60 |
| Cash provided by (used in) investing activities | | (95) | (85) | (94) | (85) |
| Increase(decrease) in cash and cash equivalents in the year | | 213 | 58 | 201 | 79 |
| Cash and cash equivalents at the beginning of the year | | 519 | 461 | 481 | 402 |
| Total cash and cash equivalents at the end of the year | | 732 | 519 | 682 | 481 |

High Peak Hospicecare

Notes to the Financial Statements for the Year Ended 31 March 2021

1. Accounting Policies

The principal accounting policies adopted, judgements and key sources of estimation and uncertainty in the preparation of the financial statements are as follows:

1.1 Basis of preparation

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2015).

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

1.2 Basis of consolidation

The financial statements consolidate the results of the charity and its wholly owned subsidiary High Peak Hospicecare Trading Co Limited on a line-by-line basis. A separate Statement of Financial Activities and income and expenditure account for the charity has not been presented because the charity has taken advantage of the exemptions afforded by section 408 of the Companies Act 2006.

1.3 Preparation of the accounts on a going concern basis

The trustees are of the view that given the level of available cash and investments the immediate future is secure and that on that basis the charity is a going concern.

The major uncertainty that we face is that approximately 15% of our income comes from a contract with North Derbyshire CCG. This income is awarded on an annual basis and the charity remains in regular contact with the CCG to secure their ongoing financial support.

1.4 Stocks

Stocks are valued at the lower of cost or net realisable value using a first in, first out basis.

1.5 Tangible fixed assets

All tangible fixed assets are capitalised at cost and depreciated over their estimated useful economic lives on a straight line basis as follows:

| | | |
|------------------------|---|-----------------|
| Fixtures and equipment | - | 20% |
| Computer equipment | - | 20% |
| Building | - | 2% |
| Land | - | Not depreciated |

1.6 Investment Properties

Investment properties are measured initially at cost and subsequently at fair value at the reporting date. Depreciation is not provided.

1.7 Fund accounting

Unrestricted funds are available to spend on activities that further any of the purposes of the charity. Designated funds are unrestricted funds of the charity which the trustees have decided at their discretion to set aside to use for a specific purpose. Restricted funds are donations which the donor has specified are to be solely used for specific areas of the charity's work or for specific projects being undertaken by the charity.

High Peak Hospicecare

Notes to the Financial Statements For the Year Ended 31 March 2021

1.8 Income

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

Income from government and other grants, whether capital or revenue, is recognised when the charity has entitlement to the funds, any performance conditions have been met and it is probable that the income will be received, and the amount can be measured reliably and is not deferred.

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 to the charity that a distribution will be made, or when a distribution is received from the estate. Receipt of a legacy, in whole or in part, is only considered probable when the amount can be measured reliably and the charity has been notified of the executors intention to make a distribution. When legacies have been notified to the charity, or the charity is aware of the granting of probate, and the criteria for income recognition have not been met, then the legacy is treated as contingent asset and disclosed if material.

Income received in advance of fundraising events or other specified service is deferred until the criteria for income recognition are met (see note 24).

1.9 Donated services and facilities

Donated goods are only recognised when the economic benefit can be measured reliably, which is considered to be when the donated item is sold.

General volunteer time is not recognised. Please refer to the trustees annual report for more information about their contribution.

1.10 Interest receivable

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

1.11 Expenditure and irrecoverable VAT

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 headings:

- Costs of raising funds comprise the costs of commercial trading including our shops
- Expenditure on charitable activities includes the cost of providing our services to clients

Most VAT is recoverable. Any amounts which are not recoverable are included within support costs.

1.12 Allocation of support costs

Support costs are those functions that assist the work of the charity but do not directly undertake charitable activities. Support costs include back office costs, finance, personnel, payroll and governance costs which support the charity's service delivery and activities. 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 11.

High Peak Hospicecare

Notes to the Financial Statements For The Year Ended 31 March 2021

1.13 Operating leases

The charity classifies the lease of printing equipment as operating leases: the title to the equipment remains with the lessor. Rental charges are charged on a straight line basis over the term of the lease.

1.14 Debtors

Trade and other debtors are recognised at the settlement amount. Prepayments are valued at the amount prepaid.

1.15 Cash at bank and in hand

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

1.16 Creditors and provisions

Creditors and provisions are recognised when 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.

1.17 Financial instruments

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

1.18 Pensions

Some employees are members of the NHS Pension Scheme which is funded by contributions from employee and employer or alternatively they may have opted to join, or been auto-enrolled in, the group money purchase defined contribution scheme operated by The Pensions Trust called The Ethical Fund. From October the charity switched the group's money purchase defined contribution scheme to Aviva. A small number of employees have private money purchase arrangements to which the employer contributes.

The employer contributions made to the NHS Pension Scheme in the year were £46k (2020:£48k) with an employer contribution rate of 14.3% and employee rates varying between 5.6% and 13.5% of pensionable pay. The scheme is an unfunded defined benefit scheme that covers NHS employers and other bodies allowed under the direction of the Secretary of State. The scheme is not designed to be run in a way that would enable bodies to identify their share of the underlying scheme assets and liabilities. Therefore, the scheme is accounted for as if it were a defined contribution scheme: the cost to the charity of participating in the scheme is taken as equal to the contributions payable to the scheme for the accounting period.

Employees joining the money purchase pension scheme operated by The Pensions Trust and Aviva from October 2020 contract directly with that company. The charity makes a contribution of 4% (where auto-enrolled), or 6% and acts as an agent in collecting and paying over employee pension contributions. The contributions made for the accounting period and treated as an expense were £31k (2020:£21k).

2. Legal status of the charity

The charity is a company limited by guarantee and has no share capital. The liability of each member in the event of a winding-up is limited to £1.

High Peak Hospicecare

Notes to the Financial Statements For The Year Ended 31 March 2021

3. Financial performance of the charity

The consolidated statement of financial activities includes the results of the charity's wholly owned subsidiary which operates our charity shops.

The summary financial performance of the charity alone is:

| | 2021 £'000 | 2020 £'000 |
|------------------------------------|---------------|---------------|
| Income | 1,975 | 1,366 |
| Gift aid from subsidiary company | 58 | 289 |
| | 2,033 | 1,655 |
| Expenditure | 1,668 | (1,375) |
| Net income | 365 | 280 |
| Transfer from reserves | - | - |
| Total funds brought forward | 2,254 | 1,974 |
| Total funds carried forward | 2,619 | 2,254 |
| Represented by: | | |
| Restricted income funds | 86 | 94 |
| Unrestricted income funds | 2,533 | 2,160 |
| | 2,619 | 2,254 |

4. Income from donations and legacies

| | 2021 £'000 | 2020 £'000 |
|-----------|---------------|---------------|
| Donations | 333 | 461 |
| Legacies | 82 | 184 |
| Grants | 649 | - |
| | 1,064 | 645 |

Of the income from donations and legacies £987k was unrestricted (2020: £566k) and £77k restricted (2020: £79k).

| | 2021 £'000 | 2021 £'000 |
|----------------------------------|---------------|---------------|
| Coronavirus Job Retention Scheme | 66 | - |
| Hospice UK Covid support | 493 | - |
| Other Grants | 90 | - |
| Total Grants | 649 | - |

The charity benefits greatly from the involvement and enthusiastic support of its many volunteers, details of which are given in our annual report. In accordance with FRS102 and the Charities SORP (FRS102), the economic contribution of volunteers are not recognised in the accounts.

5. Income from charitable activities

| | Unrestricted funds 2021 £'000 | Restricted funds 2021 £'000 | Total funds 2021 £'000 | Total funds 2020 £'000 |
|--|--|--------------------------------------|------------------------------|------------------------------|
| CCG contracts and other income for palliative care | 344 | 51 | 395 | 328 |
| Hospice at Home | 219 | - | 219 | 189 |
| Information and support | 11 | - | 11 | 15 |
| Outpatient clinics | - | - | - | 5 |
| | 574 | 51 | 625 | 537 |

High Peak Hospicecare

Notes to the Financial Statements For The Year Ended 31 March 2021

6. Income from other trading activities

| | Unrestricted funds | Restricted funds | Total funds | Total funds |
|-------------------------------|-----------------------|---------------------|---------------|---------------|
| | 2021 £'000 | 2021 £'000 | 2021 £'000 | 2020 £'000 |
| Commercial trading operations | 258 | - | 258 | 522 |
| Fundraising events | 77 | - | 77 | 114 |
| | 335 | - | 335 | 636 |

The primary component of commercial trading operations comprises our charity shops which are operated by the wholly owned trading subsidiary High Peak Hospicecare Trading Co. Ltd which is incorporated in the United Kingdom (company number 3002849) and pays most of its profits to the charity under the gift aid scheme.

The summary financial performance of the subsidiary alone is:

| | 2021 £'000 | 2020 £'000 |
|---|---------------|---------------|
| Turnover | 234 | 467 |
| Cost of sales and administrative expenses | (176) | (178) |
| Net profit | 58 | 289 |
| Amount gift aided to the charity | (57) | (289) |
| Retained in subsidiary | 1 | - |

The assets and liabilities of the subsidiary were:

| | | |
|---|----------|----------|
| Fixed assets | 1 | 1 |
| Current assets | 61 | 104 |
| Current liabilities | (60) | (104) |
| Total net assets | 2 | 1 |
| Aggregate share capital and reserves | 2 | 1 |

7. Investment income

All the group's investment income of £16k (2020: £14k) arises from money held in interest bearing deposit accounts or from bonds with a maturity date of one year or less.

8. Analysis of expenditure of cost of raising funds

| | Unrestricted funds | Restricted funds | Total funds | Total funds |
|-------------------------------|-----------------------|---------------------|-------------|---------------|
| | 2021 | 2021 | 2021 | 2020 £'000 |
| Commercial trading operations | 253 | - | 253 | 199 |
| Fundraising expenses | 196 | - | 196 | 199 |
| | 449 | - | 449 | 398 |

High Peak Hospicecare

Notes to the Financial statements For the Year Ended 31 March 2021

9. Analysis of expenditure on charitable activities

| | Activities undertaken directly | Support costs | Total |
|-------------------------|-----------------------------------|---------------|--------------|
| | £'000 | £'000 | £'000 |
| Living Well day care | 361 | 196 | 557 |
| Bereavement services | - | - | - |
| Hospice at Home | 479 | 246 | 725 |
| Support groups | 14 | 9 | 23 |
| Information and support | 57 | 33 | 90 |
| Outpatient clinics | - | - | - |
| | 911 | 484 | 1,395 |

Expenditure on charitable activities was £1,395k (2020: £1,154k) of which £1,280k was unrestricted (2020: £1,063k) and £115k was restricted (2020: £91k)

10. Summary analysis of expenditure and related income for charitable activities

This table shows the cost of the four main charitable activities and the sources of income directly to support those activities

| | Living Well day care | Hospice Home | at Support groups | Information and support | Total |
|------------------------------------|----------------------------|-----------------|-------------------------|----------------------------|------------|
| | £'000 | £'000 | £'000 | £'000 | £'000 |
| Costs | 557 | 725 | 23 | 90 | 1,395 |
| Direct grant support and recharges | 395 | 219 | - | 11 | 625 |
| Net cost funded from other income | 162 | 506 | 23 | 79 | 770 |

11. Analysis of governance and support costs

The charity identifies the costs of its governance and support functions which are then apportioned between the four key charitable activities undertaken (see note 9) in the year in proportion to direct salaries.

| | Living Well day care | Hospice at home | Support group | Information and support |
|----------------------------------|-------------------------|--------------------|------------------|----------------------------|
| | £'000 | £'000 | £'000 | £'000 |
| Salaries wages and related costs | 95 | 148 | 4 | 15 |
| General office costs | 24 | 37 | 1 | 4 |
| Maintenance and utilities | 58 | 30 | 4 | 11 |
| Depreciation | 13 | 20 | - | 2 |
| Audit fees and insurance | 4 | 7 | - | 1 |
| Governance | 2 | 4 | - | - |
| House expenses | - | - | - | - |
| | 196 | 246 | 9 | 33 |

High Peak Hospicecare

Notes to the Financial Statements For the Year Ended 31 March 2021

12. Net income/(expenditure) for the year

| This is stated after charging: | 2021 £'000 | 2020 £'000 |
|--|---------------|---------------|
| Depreciation | 40 | 37 |
| Auditor's remuneration: audit fees | 9 | 5 |
| Auditor's remuneration: non-audit fees | 7 | 4 |

13. Analysis of staff costs, trustee remuneration and expenses and the cost of key management personnel

| | 2021 £'000 | 2020 £'000 |
|-----------------------|---------------|---------------|
| Salaries and wages | 1,084 | 922 |
| Social security costs | 84 | 67 |
| Pension costs | 131 | 120 |
| | 1,299 | 1,109 |

Number of employees with employee benefits excluding employer pension contributions:

| | | |
|-------------------|---|---|
| • £80,000-£90,000 | 1 | 1 |
|-------------------|---|---|

One employee received benefits in excess of £60,000 (2020:1). Pension costs are allocated to activities with related staffing costs. Trustees are not paid nor did they receive any benefits from the charity or its subsidiary in the year or prior year, neither were they reimbursed expenses during the year or prior year. No trustee received payment for professional or other services supplied during the year or prior year. The key management personnel of the charity and the group comprise the trustees and the CEO. The total employee benefits of the key management personnel were £88k. (2020:£82k).

14. Staff numbers

The average monthly number of full-time equivalent employees (including casual and part-time staff) during the year were as follows:

| | 2021 Number | 2020 Number |
|------------------------------------|----------------|----------------|
| Services to clients | 22.8 | 23.0 |
| Fundraising and commercial trading | 8.9 | 8.2 |
| Administration and support | 5.6 | 4.6 |
| | 37.3 | 35.8 |

High Peak Hospicecare

Notes to the Financial Statements For the Year Ended 31 March 2021

15 Corporation tax

The charity is exempt from tax on income and gains falling within section 505 of the Taxes Act 1988 or section 252 of the Taxation of Chargeable Gains Act 1992 to the extent that these are applicable to its charitable objects.

16 Tangible fixed assets – group

| | Land and buildings | Fixtures and equipment | Total |
|---------------------|--------------------|---------------------------|------------|
| | £'000 | £'000 | £'000 |
| Cost: | | | |
| As at 1 April 2020 | 832 | 127 | 959 |
| Additions | 20 | 15 | 35 |
| Disposals | - | - | - |
| As at 31 March 2021 | <u>852</u> | <u>142</u> | <u>992</u> |
| Depreciation: | | | |
| As at 1 April 2020 | 143 | 89 | 232 |
| Charge for the year | 22 | 19 | 41 |
| On disposals | - | - | - |
| As at 31 March 2021 | <u>165</u> | <u>108</u> | <u>273</u> |
| Net book value | | | |
| As at 1 April 2020 | 689 | 38 | 727 |
| As at 31 March 2021 | <u>687</u> | <u>34</u> | <u>721</u> |

£27,000 of the net book value of land and buildings represents the cost of land.

High Peak Hospicecare

Notes to the Financial Statements For the Year Ended 31 March 2021

Tangible fixed assets – charity

| | Land and buildings | Fixtures and equipment | Total |
|---------------------|--------------------|------------------------|------------|
| | £'000 | £'000 | £'000 |
| Cost: | | | |
| As at 1 April 2020 | 832 | 115 | 947 |
| Additions | 20 | 13 | 33 |
| Disposals | - | - | - |
| As at 31 March 2021 | 852 | 128 | 980 |
| Depreciation: | | | |
| As at 1 April 2020 | 143 | 78 | 221 |
| Charge for the year | 22 | 18 | 40 |
| On disposals | - | - | - |
| As at 31 March 2021 | 165 | 95 | 261 |
| Net book value | | | |
| As at 1 April 2020 | 689 | 38 | 726 |
| As at 31 March 2021 | 687 | 33 | 719 |

£27,000 of the net book value of land and buildings represents the cost of land.

17. Fixed asset investments

The charity holds 1,000 shares of £1 each in its wholly owned trading subsidiary company High Peak Hospicecare Trading Co. Ltd which is incorporated in the United Kingdom. These are the only shares allotted, called up and fully paid. The activities and results of this company are summarised in note 6.

18 Investment Property

During the previous year a residential property was bequeathed to the charity. A decision was made by trustees to hold this property for capital appreciation purposes and to secure rental income.

A valuation of the property was undertaken by Croft Lettings qualified surveyors and valuers in 2021. The open market value was determined to be £205,000.

Cost or valuation at 31 March 2021 is represented by:

| | Investment Property |
|--------------------------|---------------------|
| | £ |
| | £'000 |
| Balance at 1 April 2020 | 150 |
| Valuation 2021 | 55 |
| Balance at 31 March 2021 | <u>205</u> |

On the historical cost basis using a fair value policy, the property would have been included in the accounts as follows:

| | £ |
|--|------------|
| | £'000 |
| Cost at 1 April 2020 and 31 March 2021 | <u>150</u> |

High Peak Hospicecare

Notes to the Financial Statements For the Year Ended 31 March 2021

19. Stocks

| | Group 2021 £'000 | Group 2020 £'000 | Charity 2021 £'000 | Charity 2020 £'000 |
|------------------|---------------------|---------------------|-----------------------|-----------------------|
| Goods for resale | 2 | 2 | 2 | 2 |
| | <u>2</u> | <u>2</u> | <u>2</u> | <u>2</u> |

20. Debtors

| | Group 2021 £'000 | Group 2020 £'000 | Charity 2021 £'000 | Charity 2020 £'000 |
|--------------------------------------|---------------------|---------------------|-----------------------|-----------------------|
| Amounts due from subsidiary | - | - | 58 | |
| Prepayments and accrued income | 152 | 95 | 150 | 42 |
| Trade debtors | 21 | 127 | 21 | 127 |
| Other debtors | 8 | 15 | (1) | 7 |
| Amounts owed by related undertakings | 302 | | 302 | |
| | <u>483</u> | <u>240</u> | <u>530</u> | <u>273</u> |

21. Creditors: amounts falling due within one year

| | Group 2021 £'000 | Group 2020 £'000 | Charity 2021 £'000 | Charity 2020 £'000 |
|------------------------------|---------------------|---------------------|-----------------------|-----------------------|
| Other creditors and accruals | 56 | 42 | 54 | 38 |
| Deferred income | 83 | 25 | 83 | 25 |
| | <u>139</u> | <u>67</u> | <u>137</u> | <u>63</u> |

High Peak Hospicecare

Notes to the Financial Statements For the Year Ended 31 March 2021

22. Deferred income

Deferred income comprises amounts received in advance of fundraising events of £3k and £20k of restricted grant income for which the performance and entitlement conditions had not been met at the balance sheet date.

| | Group and Charity £'000 |
|---|-------------------------------|
| Balance as at 1 April 2020 | 25 |
| Amount released to income earned from charitable activities | - |
| Amount released to income earned from other activities | (4) |
| Amount deferred in year | 61 |
| Balance as at 31 March 2021 | <u>82</u> |

23. Analysis of charitable funds

Analysis of movements in unrestricted funds - group

| | Balance April 2020 | 1 Incoming resources | Resources expended | Transfers | Funds March 2021 | 31 £'000 |
|-------------------------------|-----------------------|----------------------------|-----------------------|-----------|------------------------|--------------|
| | £'000 | £'000 | £'000 | £'000 | | £'000 |
| General fund | 944 | 1,883 | (1,210) | (429) | | 1,188 |
| Designated | 340 | 219 | (479) | 395 | | 475 |
| Hospice at Home fund | | | | | | |
| Designated | 877 | - | (40) | 34 | | 871 |
| tangible fixed assets fund | | | | | | |
| Fair value fund | - | 55 | - | - | | 55 |
| Total | <u>2,161</u> | <u>2,157</u> | <u>(1,729)</u> | <u>-</u> | | <u>2,589</u> |

Analysis of movements in unrestricted funds - charity

| | Balance April 2020 | 1 Incoming resources | Resources expended | Transfers | Funds March 2021 | 31 |
|-------------------------------|-----------------------|----------------------------|-----------------------|-----------|---------------------|--------------|
| | £'000 | £'000 | £'000 | £'000 | £'000 | £'000 |
| General fund | 943 | 1,706 | (1,034) | (427) | | 1,188 |
| Designated | 340 | 219 | (479) | 395 | | 475 |
| Hospice at Home fund | | | | | | |
| Designated | 877 | - | (40) | 32 | | 869 |
| tangible fixed assets fund | | | | | | |
| Fair value fund | - | 55 | - | - | | 55 |
| Total | <u>2,160</u> | <u>1,980</u> | <u>(1,553)</u> | <u>-</u> | | <u>2,587</u> |

Name of unrestricted fund

General fund

Description, nature and purpose of the fund

The "free reserves" after allowing for all designated funds

Designated Hospice at Home Fund

An amount set aside to fund the core costs of our Hospice at Home service

High Peak Hospicecare

Notes to the Financial Statements For the Year Ended 31 March 2021

| | |
|---------------------------------------|--|
| Designated tangible fixed assets fund | An amount equal to the tangible fixed assets owned and used by the charity on an ongoing basis which are essential for its charitable activities |
| Fair value fund | Fair value adjustment for revaluation of investment property |

Analysis of movements in restricted funds

| | Balance 1 April 2020 £'000 | Incoming resources £'000 | Resources expended £'000 | Transfers £'000 | Funds March 2021 £'000 | 31 |
|------------------------|----------------------------------|--------------------------------|--------------------------------|--------------------|------------------------------|------------|
| CCG | 79 | 29 | (20) | - | | 88 |
| Other funds | 15 | 43 | (21) | - | | 37 |
| Barclays 100 x100 fund | - | 48 | (15) | - | | 33 |
| Westfield | - | 42 | (24) | - | | 18 |
| Reception refurb fund | - | 35 | (35) | - | | - |
| Total | 94 | 197 | (115) | - | | 176 |

| Name of restricted fund | Description, nature and purpose of the fund |
|------------------------------|--|
| CCG | Software Support & Community Engagement Project |
| Other funds | Mainly the funding of support groups |
| Barclays | Community Volunteers Programme, Hospice at Home and delivery of equipment and PPE. |
| Westfield | Purchase of furniture and equipment for hub refurbishment and therapy room rehabilitation. |
| Reception refurbishment fund | To refurbishment of the hub reception area. |

24. Analysis of group net assets between funds

| | General fund £'000 | Designated funds £'000 | Restricted funds £'000 | Total £'000 |
|--|--------------------------|------------------------------|------------------------------|----------------|
| Tangible fixed assets | - | 926 | - | 926 |
| Cash at bank, in hand and cash investments | 995 | 475 | 23 | 1,493 |
| Other net current assets (liabilities) | 193 | - | 153 | 346 |
| Total | 1,188 | 1,401 | 176 | 2,765 |

High Peak Hospicecare

Notes to the Financial Statements For the Year Ended 31 March 2021

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

| | Group 2021 £'000 | Group 2020 £'000 | Charity 2021 £'000 | Charity 2020 £'000 |
|--|------------------------|------------------------|-----------------------|-----------------------|
| Net movement in funds | 366 | 280 | 361 | 280 |
| Add back depreciation charge | 40 | 37 | 40 | 36 |
| Add back loss on disposal of fixed assets | - | - | - | - |
| Deduct interest income shown in investing activities | (16) | (14) | (16) | (14) |
| Decrease (increase) in stock | - | 3 | - | 2 |
| Decrease (increase) in debtors | (247) | (142) | (257) | (128) |
| Increase (decrease) in creditors | 165 | (21) | 167 | (12) |
| Net cash from operating activities | 308 | 143 | 295 | 164 |

26. Transfer from Helen's Trust

As a result of the merge with Helens Trust (charity number:1142370) on 7 September 2020 £259k of restricted and unrestricted funds have been gifted to High Peak Hospicecare. Helen's Trust has trustees in common with High Peak Hospicecare and at the balance sheet date Helen's Trust owed High Peak Hospicecare £502k.

27. Related party note

In 2021 the following transactions took place between the charity and its wholly owned subsidiary High Peak Hospicecare Trading Co. Ltd:

- The transfer under gift aid of the trading profits of the subsidiary to the charity of £57k (2020: £289k)
- At 31 March 2021 £58k (2020: £97k) was due to the charity

