DR KERSHAW'S HOSPICE

England & Wales · Charity number 1105924

Details

Other names	THE OLDHAM HOSPICE APPEAL
Status	Registered
Legal form	Charitable company
Company number	05221414
Registered	2004-09-16
Register	View on the Charity Commission register

Contact

Address	Dr Kershaws Hospice Turf Lane Royton Oldham OL2 6EU
Phone	0161-624-2727
Email	info@drkh.org.uk
Website	www.drkh.org.uk

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Activities

Objects: TO PROMOTE THE RELIEF OF ILLNESS AND SUFFERING IN SUCH WAYS AS THE TRUSTEES THINK FIT:-3(1) BY ESTABLISHING, MAINTAINING AND CONDUCTING RESIDENTIAL NURSING AND CONVALESCENT HOMES FOR THE RECEPTION AND CARE OF PERSONS OF EITHER SEX WHO ARE SUFFERING AT ANY AGE FROM ANY CHRONIC OR TERMINAL ILLNESS OR FROM ANY DISABILITY OR DISEASE ATTRIBUTABLE TO OLD AGE OR FROM ANY OTHER PHYSICAL OR MENTAL INFIRMITY, DISABILITY OR DISEASE AND SO THAT ANY SUCH HOME MAY BE RESTRICTED AS AFORESAID TO PATIENTS SUFFERING FROM ANY PARTICULAR TYPE OR TYPES OF ILLNESS, DISABILITY OR INFIRMITY AND BY PROVIDING MEDICAL OR OTHER TREATMENT OR ATTENTION FOR ANY SUCH PERSONS AS AFORESAID IN THEIR OWN HOME;3(2) BY CONDUCTING AND PROMOTING OR ENCOURAGING RESEARCH IN TO THE CARE AND TREATMENT OF PERSONS SUFFERING FROM ANY SUCH ILLNESS, DISABILITY, DISEASE OR INFIRMITY AND PARTICULARLY IN TO THE CARE AND TREATMENT OF PERSONS SUFFERING FROM CANCER OR TERMINAL ILLNESSES AND BY PROVIDING FOR THE DISSEMINATION OF THE RESULTS OF SUCH RESEARCH;3(3) BY PROMOTING OR ENCOURAGING OR ASSISTING IN THE TEACHING OR TRAINING OF DOCTORS, NURSES, PHYSIOTHERAPISTS AND OTHER PERSONS ENGAGED IN ANY BRANCH OF MEDICINE SURGERY, NURSING OR ALLIED SERVICES AND IN THE TEACHING OR TRAINING OF STUDENTS IN ANY BRANCH OF MEDICINE, SURGERY OR NURSING OR ALLIED SERVICES

Activities: Provides palliative care services for local people with life limiting illness

Classification

- **How:** Provides Services, Provides Advocacy/advice/information
- **What:** The Advancement Of Health Or Saving Of Lives
- **Who:** Elderly/old People, People With Disabilities

Geography

- **Area of benefit:** OLDHAM AND DISTRICT
- Oldham

Finances

Period end	Income	Expenditure	Assets	Employees
2025-03-31	£5,977,268	£5,346,862	£12,584,351	130
2024-03-31	£5,840,084	£4,870,117	£11,850,035	112
2023-03-31	£4,573,336	£4,381,733	£10,543,775	110
2022-03-31	£4,324,141	£3,687,717	£10,383,661	102
2021-03-31	£4,374,094	£3,377,819	£9,692,894	101

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Trustees

Name	Role	Appointed
DARYL IAN MARTIN KITCHENER		2024-11-21
David Macdonald		2022-11-17
Dr PAUL RUSSELL COOK		2018-01-11
Eileen Jones		2022-11-17
JULIE HESSELGROVE WARD		2024-11-21
Jonathan Richard Lipton		2014-11-13
KATHRYN TAYLOR		2024-11-21
MATTHEW FLEMING		2024-11-21
Mark Hadfield		2022-11-17
NICOLA NICHOLLS		2024-11-21
Rachel Louise Damianou		2019-10-09
Richard Buchanan		2022-11-17
Stephen Schofield		2021-01-27

Linked charities

- THE OLDHAM HOSPICE APPEAL (1105924-1)

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DR KERSHAW'S HOSPICE

England & Wales - Charity number 1105924

Accounts

Doctor Kershaw's Hospice



ANNUAL REPORT & FINANCIAL REVIEW

Year Ended 31 March 2025



You are at the heart of everything we do!




Doctor
Kershaw
Hospice
heart of



Contents.

Mission Statement 7
Our Values 8
About Dr Kershaw's 11
Management & Financial Details 12
Structure, Governance & Management 13
Clinical Services 16
The Medical Team 25
Safeguarding 26
Information Governance 27
Quality, Innovation & Improvement 28
Staff Wellbeing 36
Volunteering 40
Corporate Services 42
Income Development 48
Strategic Report & Financial Review 60
Statement of Board of Trustees' Responsibilities for the Financial Statements 63



Mission Statement.

Our Mission is ‘to add quality to the lives of people with life-limiting illnesses.’

Our Values.

Our Core Value:

You are at the heart of everything we do!

Inclusiveness

We recognise, respect and embrace the diversity of our communities and will ensure and promote equality in all that we do.

Openness & Transparency

We promote and encourage an open culture across all our services and departments and encourage you to share your opinions and ideas with us.

Dignity & Respect

We will treat you with respect and uphold your privacy and dignity at all times.

Responsiveness

We will be responsive to your individual and changing needs and preferences and will be proactive in how we manage these within the wider health and social care system.

Compassion

We will treat you with compassion and be sensitive to your personal needs and wishes.

High Quality Care

We are dedicated to providing the highest quality, holistic care that delivers the very best outcomes for you.






We are
supporting
Kershaw's
Hospice













About Dr Kershaw's Hospice.

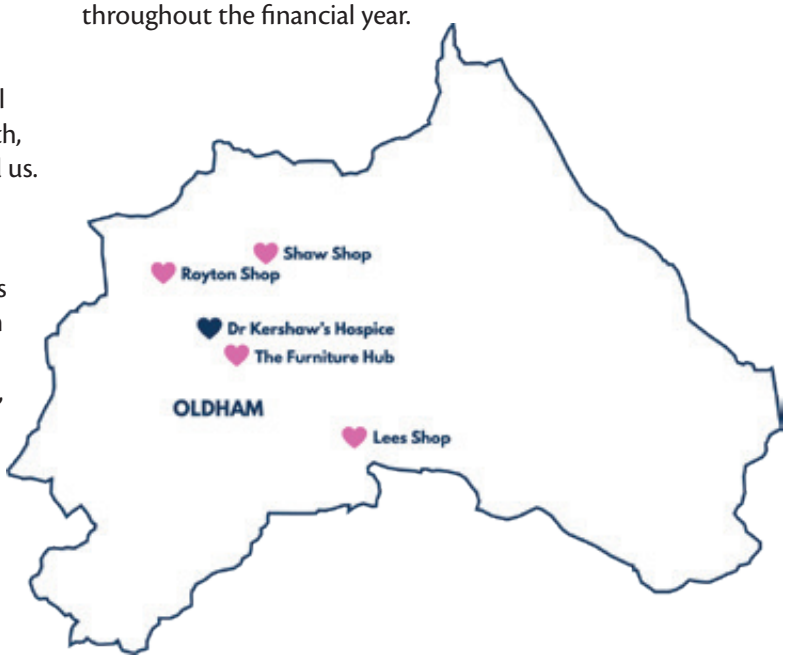
Dr Kershaw's Hospice is an adult hospice serving the Oldham community and its surrounding areas, providing specialist end-of-life and palliative care for those with life-limiting illnesses as well as support for those who are important to them - loved ones, families, friends and even pets.

Dr Kershaw's Hospice opened its doors in 1989 and has been providing high quality care and support for the people of Oldham and the local boroughs, both during a person's illness, at death, and into bereavement - for as long as they need us.

The Hospice has a devoted and highly skilled Clinical Team of doctors, nurses and healthcare assistants who support patients in the Hospice's Inpatient Unit and Wellbeing Centre along with supporting patients in the community through the Hospice at Home service and Caring Hands, the Hospice's domiciliary care service.

The Hospice reaches out into family homes, hospitals and care homes. We pride ourselves on our ability to offer and provide emotional, spiritual and practical support to our colleagues.

The Trustees (who are also Directors of the charity for purposes of company law) present their financial statements and annual report for the year ended 31 March 2025. The other general information given in this report has been collated from Steering Groups, which have taken place throughout the financial year.



Acknowledgements.

Dr Kershaw's Hospice's Board of Trustees would like to express their thanks and appreciation to all the funders and supporters, from over the past year, for their invaluable financial contributions. Your donations have enabled Dr Kershaw's to continue its vital work and support patients, and their families, within the community of Oldham.

It has been a pleasure working in partnership with the Greater Manchester Integrated Care System (ICS) and we thank them for their support.

Thanks, must also be given to our Corporate Partners for their generous support, which included, but was not limited to; BS Entwistle Electrical Contractors, Molnlycke, Monarch Metals Limited, Olympic Construction Limited, Diodes Zetex Semiconductors, Life For A Life Memorial Forests, Roma Publications Ltd, Grains Bar Hotel, Wiggett Construction Ltd, Ribble Packaging, Oldham Business Awards, Pilgrim International Ltd, Landlord Furniture Co, Garratts Solicitors, HSBC, Best Food Logistics, Urban Green Space, N Brown, Howards Domestics, Willmow Reclamation and Salvage, Furniture By Lauren and Spindle's Shopping Centre.

We are also extremely grateful to all the Trusts and Foundations who have given generously to the Hospice throughout the year, including The Albert Hunt Trust, The Crane Fund for Widows and Children, The February Foundation, Hospital Saturday Fund, The Treeside Trust, Action Together and The Roger Tanner Trust.

The Hospice relies on our local community for their continued support, and we express our sincere thanks to all the individual donors and event participants, without whom our work would not be possible, and to the generous people who left a gift to Dr Kershaw's in their Will, or have pledged to do so in the future. Thank you to you all for your unfaltering support and kindness.

Management & Financial Details.

Trustees.

Dr Paul Cook (Chair)	Appointed January 2020
Jacqueline Wood (Vice Chair)	Appointed January 2021-resigned 11th June 2024
Jonathan Lipton (Vice Chair)	Appointed January 2015
Rachel Damianou	Appointed October 2019
Kim Wrigley	Appointed January 2021- resigned 1st April 2024
Stephen Schofield	Appointed January 2021
Eileen Jones	Appointed November 2022
Richard Buchanan	Appointed November 2022
Mark Hadfield	Appointed November 2022
David Macdonald	Appointed November 2022
Ian Chapman	Appointed November 2022-resigned 26th June 2024
Daryl Kitchener	Appointed November 2024
Kathryn Taylor	Appointed November 2024
Nicola Nicholls	Appointed November 2024
Matthew Flemming	Appointed November 2024
Julie Hesselgrove-Ward	Appointed November 2024

Trading Company.

Dr Kershaw's Hospice Ltd	Company Secretary – Rachel Damianou
Company Number – 05221414	Charity Number – 1105924

Senior Management Team.

Adele Doherty	Chief Executive Officer
Dr Matthias Hohmann	Medical Director
Lindsey Harper	Director of Clinical Services
Rebecca Bentham	Director of Income Development & Marketing
Sabrina Dawson	Director of Finance
Lyndsey Donbavand	Corporate Services Manager
Kelly Foster	Inpatient Unit Manager
Sarah Longmore	End-of-Life Nurse Educator
Kathryn Harding	Wellbeing Centre Manager
Nicola Heppenstall	Community Services Manager
Mandi Halton	HR Manager

Banking Services.

Barclays Bank PLC	Market Street, Manchester, M1 1PD
RBC Brewin Dolphin	1 The Avenue, Spinningfields Square, Manchester, M3 3AP
Royal Bank of Canada	1 The Avenue, Spinningfields Square, Manchester, M3 3AP

External Auditors.

Chadwick & Company - Chartered Accountants
Capital House, 272 Manchester Road
Droylsden, Manchester M43 6PW

Structure, Governance & Management.

Dr Kershaw's Hospice organisational governance structure is shown in the diagram below.

Board Governance Structure - 2024/25.

Trustee		Advisory Role
Chair:	Dr Paul Cook	Executive Support
Vice Chair:	Jonathan Lipton	Medical / Finance
Company Secretary:	Rachel Damianou	Legal
	Kathryn Taylor	Clinical / Governance
	Nichola Nicholls	Clinical / Governance / HR
	Daryl Kitchener	Quality / Governance
	Stephen Schofield	Income Development
	Richard Buchanan	Income Development / Marketing
	Eileen Jones	Income Development / Communications
	Mark Hadfield	Construction / Estates / Governance
	David Macdonald	Information Governance
	Matthew Flemming	Information Governance / IT
	Julie Hesselgrove-Ward	Organisational Governance / Business

Secretary to the Board
Beverley Schofield

Executive Team	
CEO	Adele Doherty
Medical Director	Dr Matthias Hohmann
Director of Clinical Services	Lindsey Harper
Director of Finance	Sabrina Dawson
Director of Income Development & Marketing	Rebecca Bentham

Exended Senior Management Team	
Corporate Services Manager	Lyndsey Donbavand
Inpatient Unit Manager	Kelly Foster
End-of-Life Educator	Sarah Longmore
Wellbeing Centre Manager	Kathryn Harding
Community Services Manager	Nicola Heppenstall
Human Resources Manager	Mandi Halton

Steering Group	Chair	Vice Chair
Clinical Governance	Lindsey Harper	Dr Matthias Hohmann
Financial Resourcing	Adele Doherty	Sabrina Dawson
Information Governance	Dr Matthias Hohmann	Rebecca Bentham
Safety, Quality, Workforce, Innovation & Development	Adele Doherty	Mandi Halton

Structure, Governance & Management.

Organisational Governance.

The Board of Trustees are fully committed to the values and principles of the Hospice. They are accountable to the Charity Commission to act in the best interests of the Hospice and to manage its resources responsibly whilst seeking to minimise risks.

They have continued to ensure that Dr Kershaw's has a clear strategy, that it remains true to its original vision, and that it complies with all necessary rules and legal obligations.

The day-to-day management of the Hospice is under the direction of the Chief Executive and the accompanying Executive Team. The Hospice, with oversight from the Board, has progressed well with the 2020-25 strategy, completing 35 objectives in total. The Board of Trustees, in partnership with the Extended Senior Management have developed the new strategic plan covering 2025-28.

The Chair wishes to thank all our staff and volunteers in delivering another successful year, despite challenges within the healthcare system, and our Trustees for the significant time commitment and contribution to improving outcomes for users of Dr Kershaw's services.

The year saw the recruitment of five new Trustees to the Board, with a range of experience, which will add real value to the Hospice and support the Senior Management Team with the implementation of the new Strategic Plan. Dr Kershaw's Hospice is in a good position to serve the Oldham community, that continues to support us unwaveringly. Thank you to all our supporters.

Throughout the year, the Hospice maintained strong financial governance, ensuring effective oversight and accountability in all financial matters. Prudent financial management and strategic decision-making have contributed to a positive financial performance, allowing us to meet our goals and continue investing in key areas. The stability ensures the long-term sustainability of our services and supports ongoing infrastructure improvements.

Dr Kershaw's Hospice is a charitable company limited by guarantee and is registered under the Companies Act 1985, Company Registration Number 05221414, Charity Registration Number 1105924. Its activities are governed by its Memorandum and Articles of Association listed at Companies House on 3 September 2004 and amended on 18 January 2024. The principal and registered office is Turf Lane, Royton, Oldham, Lancashire, OL2 6EU. In the event of the charity being wound up, the liability in respect of the guarantee is limited to £10 per member of the charity.





Trustee Recruitment.

Trustee recruitment is undertaken when a vacancy or skill gap is identified via our skills analysis.

Opportunities advertised to both broad and targeted audiences, to give us the best chance of securing interested individuals with the appropriate skills and diversity mix.

Potential trustees are invited to apply by submitting an expression of interest and then invited to a formal interview, in front of a panel made up of the Chief Executive and 3 other Trustees, to discuss skills, expectations and commitment as well as to ensure that the candidate has a clear understanding of the role and responsibilities of being a trustee of Dr Kershaw's Hospice.

If successful, a candidate trustee will be welcomed for a term of office as laid out in our Memorandum and Articles of Association. The new trustee is issued with an Induction Pack including details of the Board and Hospice Structure, role specifications, the Trustee Code of Conduct, Nolan Principles for Standards in Public Life and Trustee Declaration of Interests along with a number of other supporting guidance documents. Attendance is required at a formal induction half-day, meeting with selected members of our Senior Management Team and fellow Trustees.

Trustees are required to complete a programme of mandatory training, enhanced DBS checks and are provided with access to Dr Kershaw's Trustee SharePoint and Vantage, ensuring access to the risk register, policies, strategies and all strategic actions.

Clinical Services.

Inpatient Unit.

Dr Kershaw's Hospice worked closely with the NHS commissioning teams in Oldham to develop a range of additional clinical services that enhance patient choice, patient flow and utilisation of hospital beds. The Hospice received additional NHS funding for these services and has been more financially sustainable as a result.

> **Dr Kershaw's is such a wonderful facility and we are so lucky to have this so close to home. Nothing was too much trouble, we could take our dog in which was great for morale. All the staff were exceptional, professional, caring and thoughtful.**

Due to the success of the Step-down and In-reach services last year, we were able to continue with these services from April 24. The services support patient flow and discharges from the acute sector, whilst also allowing our Hospice senior nurses to recognise patients in need of end-of-life care during their daily attendance at the hospital site.

Step-Down: The Step-down Service allows us to offer care for patients that are to be discharged to their home or to a care/nursing home safely with appropriate social support. A number of Hospice beds were made available to accept patients from hospital who no longer need to be in hospital and who do not meet the Hospice's usual admission criteria. This helps with patient flow at the Royal Oldham Hospital: patients are discharged more quickly so that hospital bed capacity is utilised to its best potential. The Hospice will then identify the best suited next place of care and provide proactive discharge support.

In-Reach: The In-reach Service aims to recognise patients who need end-of-life care and would be more suitably cared for in a hospice setting. A dedicated nursing sister liaises directly with the Royal Oldham Hospital's Emergency Department (A&E), Acute Medical Unit (AMU) and Integrated Discharge Team every working day. This scheme has helped identify patients suitable for transfer to the Hospice and has prevented avoidable hospital admissions when patients were transferred straight from A&E to the Hospice.

Palliative Care: We continue to provide excellent palliative and end-of-life care and we accept referrals for end-of-life care and complex symptom control. From April 24 – March 25 the total admissions to the IPU were 253, an increase of 13.5% on the previous year. Preferred Place of Death achieved was 90%.

> **We will be forever grateful to Dr Kershaw's for the care and compassion shown to my mum in her last days. Dr Kershaw's is an amazing place and will always hold a special place in my heart.**
>
> **Thank you to everyone!**

253
Admissions to the IPU

13.5%
increase in IPU admissions

90%
Preferred Place of Death achieved





Clinical Services.

Hospice at Home.

Our Hospice at Home service continues to benefit the local community by providing individualised, responsive and flexible end-of-life care. The Hospice at Home Team work alongside and in addition to services provided by the Community Nursing Team, Home Care providers and Specialist Palliative Care Nurses. It is a rapid response service aiming to reduce the need for hospital admissions and allows patients, in their last weeks of life, to fulfil their wish to die comfortably at home. In total, 247 patients were cared for in their own homes with 683 of the visits made being deemed urgent. These urgent visits would have resulted in a hospital admission if our Hospice at Home Team had not been able to respond so quickly and support these patients and their loved ones when they needed it most. The team made 5,867 phone calls to patients, relatives and other health professionals whilst supporting the delivery of quality care, and working in collaboration with our community colleagues. Preferred Place of Death achieved was 95%.

247
Total patients cared for

95%
Preferred Place of Death achieved

683
Urgent visits (hospital admission avoided)

5,867
Phone calls

Hospice at Home Visits	2022/23	2023/24	2024/25
	2,261	2,255	2,495

> My mum was sent home from hospital on palliative care with heart failure and respiratory problems, it was a great comfort to know we had the support of the nurses from Dr Kershaw's. Along with their knowledge and care, they were able to make mum comfortable in her last days.

> I thought the service was excellent and a comfort to know we could contact Dr Kershaw's when needed. The nurses explained everything in great depth and came across as very professional but also very caring and considerate.


















Kershaw's
Hospice







Clinical Services.

Caring Hands.

Caring Hands is a domiciliary care service and has an excellent reputation for providing high quality, personalised care for patients with a rapidly deteriorating life-limiting illness. The team is specially chosen with well-trained Health Care Assistants visiting patients in their last weeks or months of life in their own homes. The service offers individualised care that is flexible and responsive to the patient and their loved ones. Throughout the year, the team cared for 85 patients and put in place an individualised care package for each service user. They have provided 8,325 hours of care for people in their own homes when they need it most. This year we have been working on moving to a digital system to record care for our Caring Hands service users. Ensuring that a live record is available to record and share information is a national requirement. Preferred Place of Death achieved was 97%.

6,581
Visits

85
Patients cared for

8,325
Hours

97%
Preferred Place of Death achieved

Caring Hands Visits	2022/23	2023/24	2024/25
	7,792	7,622	6,581

> **All the staff who entered my house were respectful, courteous, kind and caring with a great sense of humour.**

> **All the carers were kind and treated my husband with dignity and respect, keeping me informed and supported at such a difficult time.**

Clinical Services.

Wellbeing Centre.

Our Wellbeing Centre services have grown significantly, with the overall number of attendances for this year being 3,148, which in comparison is an 80% increase on the previous year. Confirming that our new model of care better meets the needs of specific populations and service users. Carers have represented a further 2,473 attendances at Wellbeing Centre Sessions.

We run groups that are targeted and specialised, and have worked with teams from Macmillan, The Christie, Oldham Memory Assessment Service and other local care providers to ensure that our support is accessible and equitable to those who need it.

The majority of our groups are now well established and are regularly well attended, with new people accessing services week on week.

Dementia Hub
A weekly nurse led drop-in support service run in collaboration with Oldham Memory Assessment Service, and specially chosen Hospice volunteers, which has been running since November 2022. We have seen numbers increasing week on week, and in response to this we have developed the service by introducing an additional afternoon session. This has allowed us to better manage the number of attendees and offer more time and space to new attendees in the afternoon session. The Dementia Hub supports anyone who is affected by dementia: people living with dementia, carers, people who have concerns about themselves or a loved one. Nurses specialising in dementia care and palliative care are available for support. There are opportunities to socialise with a brew and a biscuit and offer and receive peer support from others in similar circumstances.

Music in Mind
Music Café for Dementia. This is a weekly group bringing moments of joy, connection and true expression to people living with dementia, their carers, their family and friends. Group sessions are designed to provide support to all who attend, delivering genuine care through the power of music, delivered by our in-house trained Music Champions.

Men's Group
A fortnightly, counsellor led small group exclusively for men living with life-limiting illnesses. Attendees have the opportunity to meet regularly, spend time with those who have similar experiences, offload about and explore the impact of illness, and offer and receive peer-led support.

Social Group
A fortnightly social meeting open to anyone connected to the Hospice was facilitated until early 2023, when the group was reduced to monthly due to declining numbers. In December 2024 the social group held its last meeting due to the reducing numbers.

Complementary Therapy and Crafts
Our Complementary Therapist supports patients, relatives/unpaid carers and bereaved people with one-to-one sessions in the Complementary Therapy room or in the patient rooms on the IPU. Our Complementary Therapist also facilitates an ad-hoc Complementary Therapy and Craft Group with support from our volunteers. The focus of this group is to enhance wellbeing and relaxation through craft and complementary therapies. Anyone with a connection to Dr Kershaw's is welcome to attend this group.

Carer Support Group
A fortnightly group that is specifically for carers of people living with dementia, led by a Therapist. This group was reviewed last year and a 10-week programme was developed to enhance the experience of the carers attending. Sessions provide a compassionate and safe space for attendees to connect, share experiences, and receive emotional support alongside others on a similar journey. The new programme explores, living loss, self-care and self-compassion, challenging thoughts and feelings, and accessing practical support which includes sessions with professional speakers for added guidance.





> **All the help we have had from the Dementia Hub has been tremendous, it's been like a godsend. It's been nice to come here and talk to others about how we are feeling.**

Relaxation Group
A weekly guided relaxation session, facilitated by our Complementary Therapist. This group is open to patients living with a life-limiting illness, carers of people living with a life-limiting illness and those who are accessing our bereavement support services. The session is delivered in a relaxed group setting. A new 12-week running programme was developed this year and sessions now include wellbeing/health promotion advice along with guided relaxation.

The Nightbird Project
This is a Creative Wellbeing initiative running from March – September specifically for people living with life-limiting illness. Each session explores a different artform alongside facilitated therapeutic discussion, and peer-lead support. Sessions are delivered collaboratively by a Counsellor and Artist, and attends to the emotional and psychological impact of living with life-limiting illness. The project was inspired by a former patient who died in the Hospice in September 2021 after receiving care from us for the last year of her life. She discovered and found comfort in her creative self during the course of her illness, and also wanted to share her life story with others. Reflecting on this with her husband, we wanted to facilitate this experience for others affected by serious illness, and so The Nightbird Project was designed to support people to share their life stories in creative ways. We have brought together a supportive group of incredible people all impacted by life-limiting illness, and have shared our stories, our laughter, our creativity and our friendship to wonderful effect. The first Nightbird Project ran from March 2022 – September 2023 and was funded by The Hospital Saturday Fund. The continued delivery of this project is reliant on external funding, and we were grateful to receive funding from The Rose of Lancaster Fundraisers to run the project for the third year.

Clinical Services.

Bereavement Support.

We understand that individual grief, and dealing with a bereavement is different for everyone, and this year we have continued with our bereavement services in recognition of this. Giving our patients' loved ones a choice of how to access and experience bereavement support.

Bereavement Support Groups

A facilitated group that is counsellor led, with volunteer support. Open to the bereaved community of Dr Kershaw's Hospice patients, the group runs from Winter through to Spring. Attendees receive a mixture of facilitated time and space for understanding and normalising grief and loss, alongside peer-led discussions and group support of people who have experienced the loss of a loved one who was being cared for by one of our Hospice services. This service is offered 6 months+ post bereavement. There was a 70% attendance at group sessions this year, with 298 attendances in total.

70%
Attendance at group sessions this year

Wellbeing Walks

A regular group, meeting on the last Friday of each month, promoting overall wellbeing for those affected by loss. This is a wellbeing initiative open to the bereaved community of Dr Kershaw's Hospice. The walk is facilitated at a gentle pace, enjoying a different local park each month. All walks are fully risk assessed with a recce undertaken by the counsellor prior to introducing the walk to the group. This forms part of the bereavement support offered. Group members are responsible for their own health and safety, and must arrive in appropriate attire. The walk lasts approximately 1 hour and members stay for brews and conversation afterwards in the park café.

We provide bereavement and wellbeing resources in collaboration with Me and My Therapy, a counselling service specialising in bereavement and loss, to support children to communicate and process complex feelings about loss and bereavement. We also provide books with messages that are evidence-based and age appropriate to support children and young people as their loved ones are accessing Hospice services.



Counselling.



276
Counselling sessions

Our full-time Counsellor started at the Hospice in August 2022, and has made a strikingly positive impact across our Inpatient and Wellbeing Services. We employed a second counsellor in May 2024 and have facilitated 276 counselling sessions this year.

The Counsellors offer specialist psychological support where required on the Inpatient Unit, as well as one-to-one counselling sessions and group support to people accessing our Wellbeing and Bereavement Support Services.

The Medical Team.

The Senior Medical Team at Dr Kershaw's Hospice is a small team of experienced doctors, the vast majority of whom have been at Dr Kershaw's Hospice for many years. In 2024/25, we were thrilled to welcome Dr James Killeen as one of our regular senior medics. Following his 12-month fixed-term employment here, he decided to stay on for regular weekend on-call cover. Just like all our other senior doctors, he has been a real asset to the organisation.

Training

Dr Kershaw's Hospice has been a training environment for resident (junior) doctors for many years. In 2024/25, we trained nine Foundation Doctors and four GP Specialist Trainees. Doctors in training find their hospice placements extremely valuable. Hospice experience is beneficial for any future medical career, and some doctors have even changed their career plans and gone into specialist palliative medicine training as a result of their placement here.

Working collaboratively

We are increasingly working across organisational boundaries, in particular with other hospices in Greater Manchester. A good example is our active collaboration with Bolton Hospice in teaching our doctors in training. We run a fortnightly joint teaching session for resident doctors at both hospices. On the back of this we have now opened up our Journal Club to Bolton Hospice and we take turns on a monthly basis reviewing and appraising papers from medical journals. It helps us keep up-to-date with emerging evidence in palliative medicine and sharpens our critical reading skills.

Electronic Prescribing

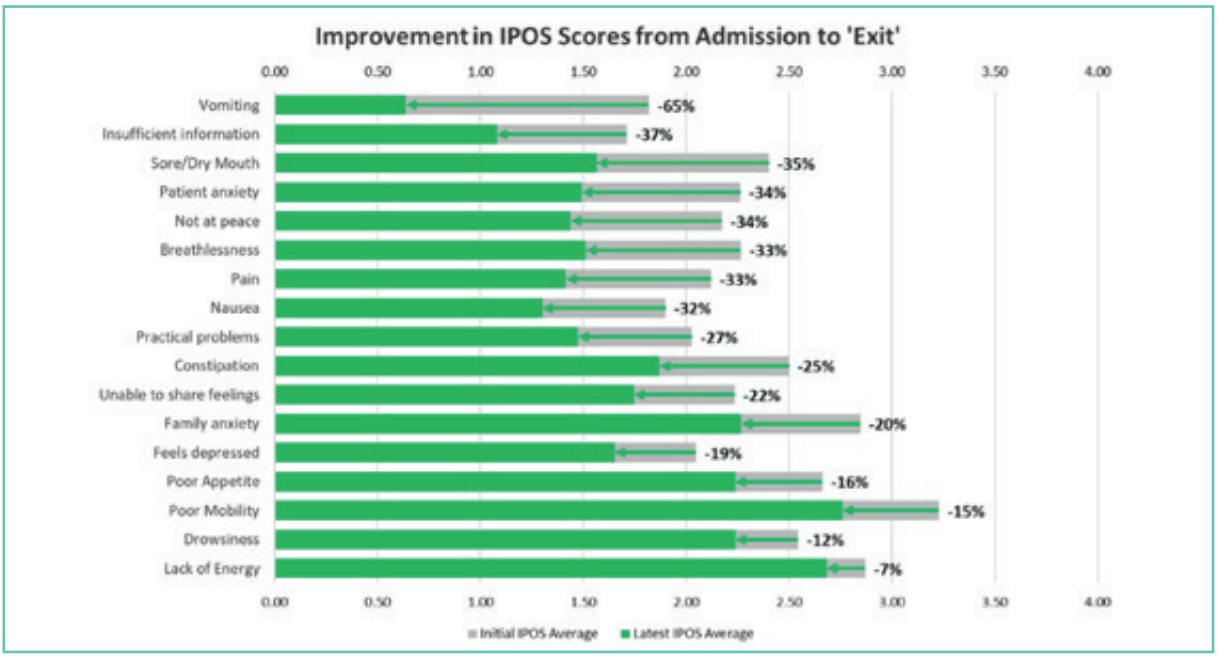
Historically, we prescribed medication for our inpatients on paper drug charts. In May 2024, we commissioned Ashtons Live View, an electronic prescribing and medicines administration software. Prescribing safety has improved and the risk of medication errors is reduced. Our senior doctor on-call is able to access the system remotely and review and adjust prescriptions as required. This makes the service more efficient and more responsive. Record keeping has improved and by reducing paper usage, we are also helping environmental sustainability.

Research

At the end of 2024, we completed data collection for the CHELsea II trial, a large national multi-centre randomised controlled study. It examines burdens and benefits of hydration support ("drip") in the final days of someone's life. Despite having a shortened recruitment period, we completed the full study protocol, collecting data on 20 participants who had agreed to take part in this research. We received accolades for the pace and quality of our work. We are now eagerly anticipating the publication of the trial results and are looking for future opportunities to get involved in palliative and end-of-life care research.

Outcomes (IPOS)

The Hospice's Medical Team collects patient reported data about the positive difference that an admission to the Inpatient Unit makes to people's lives. Most symptoms and issues are very significantly improved when a patient receives care on the Hospice Inpatient Unit:



Safeguarding.



Dr Kershaw's Hospice is fully committed to safeguarding the welfare of all those we care for, our visitors and staff. We promote an ethos that embraces diversity and inclusion and respects the rights of all involved within our services. We recognise our responsibility to promote safe practice and to protect all from harm. We have measures in place to ensure we are able to handle safeguarding issues effectively:

- The Hospice has proactive membership within the Oldham Safeguarding Adults Board governance structure and is an active participant in Greater Manchester Hospices Safeguarding Forum.
- The Safeguarding Vulnerable Adults and Safeguarding Children Policies form part of our core policies that all staff must read.
- We have a Safeguarding and Deputy Safeguarding Lead for the organisation, who completes Level 5 Safeguarding training every three years.
- The Hospice ensures that it adheres to the six principles of safeguarding and this is referred to throughout the core mandatory training and delivered in line with RCN intercollegiate document recommendations.
- The Hospice has promoted all aspects of safeguarding training in a bespoke manner. All staff must undertake a range of training including:
  - Safeguarding Adults
  - Safeguarding Children
  - Prevent
  - Restraint
  - Mental Capacity Act, Deprivation of Liberty (DoLs) and Restraint (Clinical Staff)
  - Equality, Diversity and Human Rights
  - Learning Disabilities, Autism and Mental Health Awareness
  - LGBTQ+ Awareness
  - Chaperones and Consent (Clinical Staff)

- Our volunteers are required to complete Safeguarding Training upon joining and every two years.
- We have increased the number of staff members trained as Mental Health First Aiders.
- Established safeguarding supervision for staff with an associated policy adhering to the supervision standards.
- The Hospice has tried and tested systems in place for reporting safeguarding incidents and concerns. Safeguarding incidents at the Hospice are rare but processes are in place to manage these.
- The Hospice has an ethos and a culture of proactive and reflective learning. Any incident or safeguarding concern is seen as an opportunity to drive quality and improve systems.
- Safeguarding, DoLS and DBS audits form part of the Audit Calendar.
- We have robust recruitment practices in place with mandatory DBS processes for staff and volunteers including renewals.

Information Governance.

In 2024/25, the Hospice continued to enhance its Information Governance policies and procedures and improve data security across all teams. We satisfied the mandatory requirements of the Data Security & Protection Toolkit (DSPT) and extended our Cyber Essentials accreditation to include our retail operations.

Data Security Protection Toolkit

The Information Governance Team worked hard to achieve full compliance with the standards outlined in the Data Security and Protection Toolkit. In June 2024, we successfully submitted our annual assessment, meeting all mandatory requirements.

Cyber Essentials

In July 2024, after expanding the scope of our Cyber Essentials assessment we successfully submitted our evidence to achieve accreditation.

Due to changes to the 'Bring Your Own Device' section, a Hospice-wide audit commenced to document the staff devices being used for work purposes. This procedure has now become embedded and is managed throughout the year.

Clinical Business Continuity Plan

Business Continuity continued to be a key focus over the past year. To enhance IT resilience for our clinical data systems, we installed a new 4G router in the Inpatient Unit as a backup in case of HSCN broadband failure. A comprehensive Business Continuity Guide was developed, tested by staff, and is now fully embedded into our operations.

Improvements were also made to the network with an additional broadband line being installed so the non-clinical traffic could be re-directed to improve speeds and efficiency and to improve contingency measures should one broadband line fail.

Information Governance Team Structure

Towards the end of the financial year, the Hospice reviewed its position in terms of Information Governance. We made the decision to source a new Data Protection Officer with more experience specifically in charities and fundraising.



Quality, Innovation & Improvement.

Following a successful business case, the Quality Team has welcomed a new Quality Lead to the Team, who will progress the Quality Improvements in the next Financial Year. The entire Hospice was proud to see our Director of Clinical Services receive a Queen's Nurse Award this year, recognising her commitment to ongoing learning, leadership and excellence in healthcare. The Hospice has further strengthened its Board of Trustees this year after a successful Trustee Recruitment campaign. Five new Trustees have brought with them a wealth of knowledge, which will complement the Hospice's areas of development.

Vantage

We have continued to utilise our Vantage system to create more modules to support robust operational and data management procedures and to support quality initiatives. These modules have become an integral part of Hospice systems now and help us to move towards becoming a paperless organisation.

Additional modules have been developed to support various departments across the organisation including the creation of a suite of Facilities Management Modules alongside the development of a Contracts and Purchase Order Module to support the Finance Team.

Strategic Plan

The 5-year strategic plan was successfully completed by the end of March 2024 and a new 3-year strategic plan developed following workshops with the Board of Trustees and the Senior Management Team. All Strategic Objectives are regularly reviewed by the relevant Steering Group and progress is monitored via the associated action plans on Vantage.

Audit Calendar

The Quality Team has also developed a new calendar of audits for a number of non-clinical teams, to ensure the Hospice is achieving a high quality service consistently across the wider organisation to mirror our Clinical Services.

Dashboards

The team have worked alongside the Information Governance and Data Systems Lead to create role specific dashboards on our Vantage system to ensure actions, responsibilities and priorities are more easily accessible to staff.

Key Performance Indicators

The Hospice Key Performance Indicators (KPIs) are calculated every quarter to showcase our achievements and areas of improvement across the five CQC domains.

The KPIs are calculated based on national, regional and internal averages from the previous financial year and the various sources are listed in the document for clarity – these are re-calculated every year. The KPIs are presented in a document that is distributed to all staff and displayed on noticeboards throughout the Hospice, our top 12 KPIs are also displayed in The Learning Hub.




DO NOT DISTURB
DRUG ROUND
IN PROGRESS


Kershaw's Hospice



Quality, Innovation & Improvement.

Audits.

The Quality Team continues to coordinate a well-established audit calendar that includes both clinical and non-clinical departments. The audit results, summaries and associated action plans are displayed in the Hospice so that staff are able to engage with the audits.

The Vantage Audit and Action Plan module allows for effective oversight of all audits and action plans, enabling the team to track overdue audits, schedule in audits that need to be recompleted, analyse compliance and observe trends over time.

The Quality Monitoring Calendar is regularly updated, this provides assurance and monitors all of the audits across the 5 CQC domains. All audits are assigned to a responsible staff member with a specified frequency of completion.

This year the Quality Team have further developed the Facilities audit calendar and introduced a number of additional audits across non-clinical departments, to better monitor processes.

Departments include:

- Retail
- Lottery
- Marketing
- Events
- Community and Partnerships

Overall Audit Compliance 2024-25

98% Overall Clinical

93% Overall Non-Clinical

95% Overall

Quality, Innovation & Improvement.

Patient Experience.

Dr Kershaw's is always looking to initiate service improvements; therefore, feedback is extremely important to us. In the last year (April 2024 to March 2025) we received 302 compliments from service users and their loved ones in the form of surveys, cards and feedback forms.

Within the survey, we include the Friends & Family Test questions enabling us to participate in national data collection activities. The annual results of the Friends & Family Test show that 95% of respondents rated our service as 'Very Good', the highest rating.

Within our surveys, we ask patients and their loved ones whether there is anything that we could do to improve our services in order to gain insightful and constructive feedback. In this financial year, we received 9 concerns raised in survey responses. These concerns were investigated thoroughly by our Senior Clinical Team and the respondents were contacted and all concerns were resolved satisfactorily with actions taken to improve services.

The common themes in the responses were around communication. In order to improve services, we have implemented several new processes. Additional training has been developed in relation to communication and rolled out to all clinical staff. One concern raised was around access to food outside of normal Catering hours, which we have since rectified with the introduction of an out of hours offer of pre-packaged foods.

In our Steering Group meetings, we have further developed the dashboards, which include compliments, complaints and incidents so that positive feedback and learning outcomes are shared. We share feedback and patient stories at each Steering Group meeting to ensure everything we do enables the highest quality care.



> When my wife died and the Dr Kershaw's Team came to tend to her they left three small knitted red hearts, one for my wife, one for me and one for our son. I carry mine always as a reminder of her, it was a lovely touch.

Friends and Family Test Data 2024-25

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
Very Good	29	36	38	39	142
Good	4	1	0	1	6
Neither Good nor Poor	0	0	1	0	1
Poor	0	0	0	0	0
Very Poor	0	0	0	0	0
Don't Know	0	0	0	0	0
Not Answered	1	0	0	0	1

> Everyone at Dr Kershaw's was understanding, helpful, calming, showed compassion and made me and my family feel that my husband was in the best place he could possibly be. We stayed with him day and night and this meant a great deal to us and it helped keep my husband calm too. We held his hands and told him we loved him, so he wasn't alone at the end.

> From the moment we walked in and were greeted by the girls on reception we could tell it was a very special place. You were not only there for my sister but for me also and for this I will be eternally grateful. No words are enough to say thank you for all the kindness, love and care you gave us.

Quality, Innovation & Improvement.

Learning & Organisational Development.

Dr Kershaw's Hospice is committed to the development of its staff and aims to provide a working environment in which staff are able to maximise their performance, commitment and contribution. This is supported by the End-of-Life Nurse Educator based at the Hospice.

At the Hospice, we provide a mandatory training programme via a blended approach to learning including face-to-face, online and practical methods of teaching. This reflects current practice and is consistent with relevant national and local regulations/legislation. Mandatory training compliance has been consistently high all year and we have expanded the programme to include Preventing Sexual Harassment in the Workplace Training for all staff and Medicine Calculations Training for members of the Clinical Team.

We arrange a comprehensive two-day induction for all staff who are new to the Hospice, they are welcomed with a full orientation to help them settle into their new roles and ensure that they have the knowledge and support they need to perform their roles. We aim to give them background on the Hospice and its culture, information on the services we provide and our core values that we expect all staff to adhere to. During the induction, staff are introduced to their mandatory training requirements. Face-to-face sessions are presented over the two-day induction and time is also allocated to gain IT access and complete their computer based/ online mandatory training.

Our Education and Training Prospectus is published on our website for ease of access to the most current offer of courses available. It is our mission to provide excellent education and training to improve the knowledge, skills and attitudes of our staff and volunteers. We also deliver training to our external partners in order to share our specialist knowledge in palliative and end-of-life care and to promote best practice in the wider community. We receive excellent feedback on our training sessions from both external candidates and staff in-house at the Hospice.

We deliver a wide range of specialist palliative, end-of-life and non-clinical in-house training, including but not limited to:

- Naso-Gastric (NG) Tube Placement & Management for Gastric Drainage
- Verification of Expected Death by Trained Nurses
- Non-Invasive Ventilation
- Venepuncture & IV Cannula Insertion & Care
- Syringe Driver Management
- Grief Awareness
- Mayfly Advance Care Planning Programme
- Palliative Care Emergency Training
- Delegation
- Team Building
- Skills for Appraisal
- Presentation Skills

> **I just want to say how amazing the trainer was, the training was definitely a credit to your team.**
>
> Trainee Nurse Associate

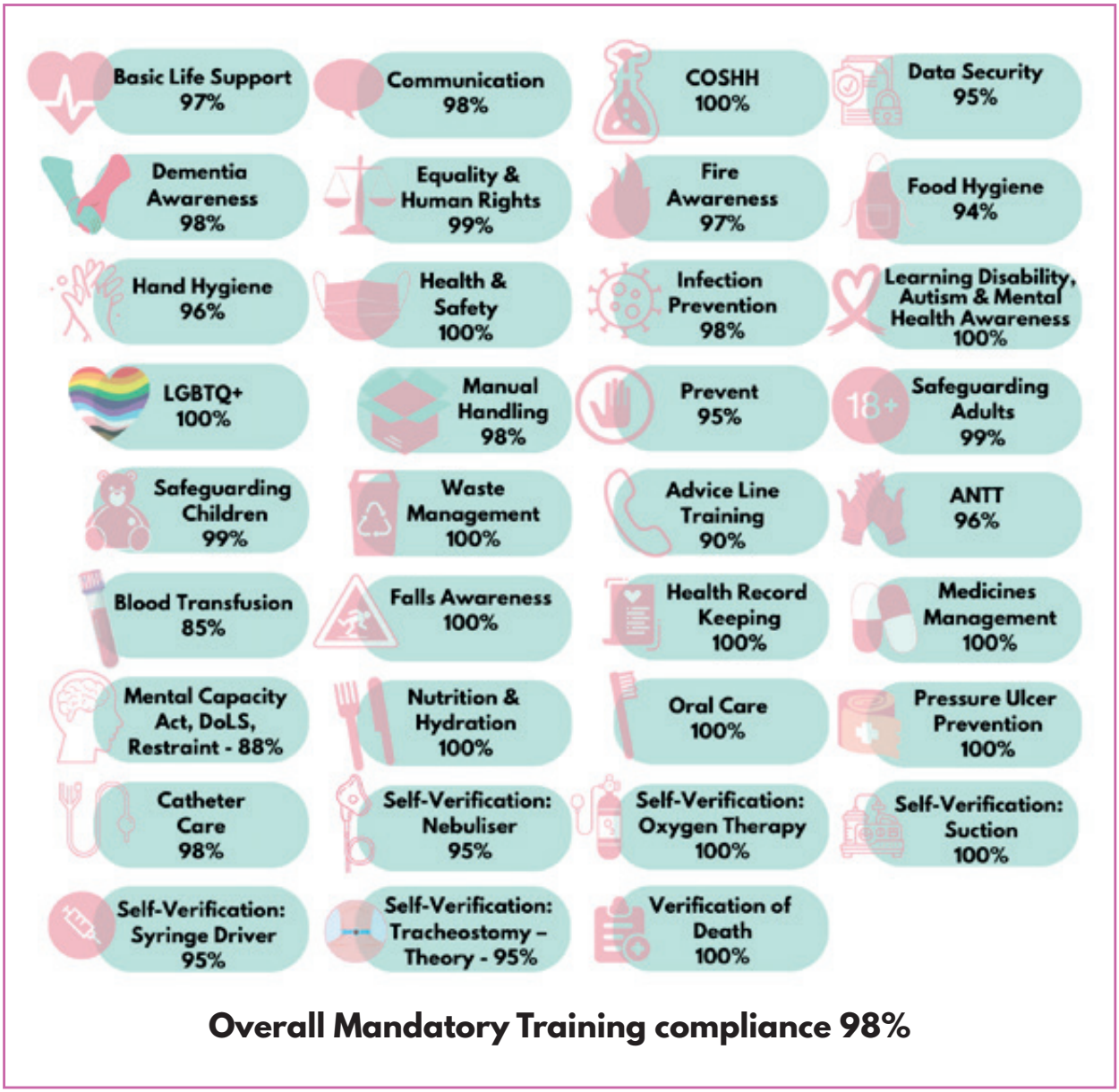
> **I found training really interesting and look forward to doing a spoke placement at the Hospice.**
>
> Trainee Nurse Associate

In order to deliver this training, we use specialist equipment including a training defibrillator and a patient care simulator mannequin for hands-on training in a wide range of skills required for day-to-day patient care. We are in the final stages of completing a clinical skills training suite based on the Hospice IPU. We received funding from the Hospital Saturday Fund to equip the room with training additional equipment.

This environment will enable us to provide clinical training in a realistic simulated environment, allowing us to capture more staff within our training, as they will remain close to the patients should they be required to assist on the Inpatient Unit. By practising skills in a realistic environment, with real equipment, staff will feel more confident and familiar with the required equipment.

This space will also enable training to be revisited as often as staff require as they will have the opportunity to 'practise' their clinical skills without an arranged formal training session on an ad-hoc basis.

We also work in collaboration with our partner organisations, Northern Care Alliance and Pennine Care NHS Foundation Trust, to provide on-site training to Trainee Nurse Associates (TNAs) and spoke placements.



Overall Mandatory Training compliance 98%

Staff Wellbeing.

We have continued to consolidate much of our Wellbeing support for our staff whilst looking for opportunities to develop areas of activity. We remain committed to focusing on maintaining a healthy, content, resilient and productive workforce ensuring staff are able to work to the best of their ability.

Continuing Activities have included:

Annual Staff Survey
This valuable snapshot of our staff's opinions and views about the Hospice, their roles and working environment, focused on our Values this year and how we live these through our work at the Hospice. The feedback staff share anonymously provides us with ideas, observations and comments from across all departments, which we analyse and can then act upon to make improvements where possible.

Mental Health First Aiders (MHFA)
Our existing trained MHFA's underwent re-training and qualification and a number of new MHFA's became qualified for the first time, broadening the support and members of the team who can offer support and signpost any staff feeling overwhelmed or experiencing crisis.

Stay Interviews
We have continued to issue Stay Interview questionnaires to our staff throughout the year, via our electronic system (Vantage), to gather insights into why our staff enjoy working at the Hospice. This feedback supports our efforts into making the Hospice the best environment it can be, for staff, patients and visitors.

Wellbeing Week
Our Wellbeing Team planned a fabulous staff wellbeing week in February, full of activities to brighten the darker winter period. The focus of this week was spreading love and kindness, including sending messages of support to colleagues, a staff wellbeing walk, a dance and movement session, some guided relaxation and a shared staff lunch.

Reflection Rounds
Our programme of Reflection Rounds continues to run quarterly, providing the opportunity for staff across departments of the Hospice to come together to focus on the specific topic of the round, offering insights and sharing ideas and thoughts with each other, helping to create a stronger understanding and appreciation of each other's roles and challenges.

Vision & Values Sessions Run by the CEO
The CEO expanded the series of Vision and Values presentations for all staff Hospice-wide continuing to share the bigger picture of our incredible organisation and its direction for the future. As a result, staff are much more informed and engaged and are fully aware of the direction that the Hospice is going in.




Kershaw's
Hospice



Staff Wellbeing.

New developments this year have been on:

Menopause Friendly Workplace
We are proud to employ a large proportion of female staff, many of whom have reached or are approaching menopause and we want to retain their invaluable experience, in providing care to our community. A number of initiatives are in place including a Menopause awareness session for staff, lighter uniform options, and a section on our intranet with useful and supportive information. The Hospice hopes to achieve the Menopause Friendly Workplace Accreditation in the near future.

Suggestion Box
The Senior Management Team have implemented a digital feedback system alongside a traditional suggestion box to encourage feedback from staff. Feedback and actions are then considered and actioned where reasonably possible.

Activity & Movement-structured Exercise Sessions
To further enhance future staff wellbeing, we are currently looking into expanding our offer to staff to include accessible functional movement exercise sessions delivered on site at the Hospice by an experienced Coach, designed to improve our staff health, and resilience.

Oldham Business Awards
Finally, this year we are proud to announce we achieved a Finalist Award at the Oldham Business Awards in the category of 'Workforce Health & Wellbeing'.

The Hospice received recognition and was one of three organisations to be awarded Finalist status in the Workforce Health & Wellbeing category and celebrated with the other finalists from across all award categories, at a glittering event held at the Queen Elizabeth Hall. We are proud to be recognised for all our staff health and wellbeing activities.







Volunteering.

In the last financial year, we have been incredibly lucky to have 404 volunteers contribute 39,947 hours of their time to the Hospice, an increase of 10.4% on the previous year. This equates to a huge cost saving of £539,812.30 to the Hospice.

Despite the growth of the volunteer team the department has continued to run a varied calendar of events, with the financial support of an Action Together Grant, and continues to prioritise recognition and engagement. The monthly events all have a wellbeing focus and aim to bring together volunteers from different departments, providing an element of peer support.

Volunteer Welcome Sessions ensure new volunteers are able to access information on the Hospice staffing structure, and the impact volunteers have on the wider organisation. Alongside a robust Volunteer Handbook and a designated staff member acting as a Volunteer Lead, volunteers are welcomed to the team and provided with sufficient support to complete their roles.

The Hospice continues to be amazed by the growth of the volunteer team and the continuous support which the community provide to Dr Kershaw's. We do not take for granted how generous people are in giving their time to us.

This year volunteers continue to be able to access a small library of specialist training modules on an optional basis, with a focus on inclusion, diversity and dementia support. Volunteers in specific roles have also benefitted from access to; Cyber Resilience sessions, Tool Box Talk Training packs, Basic Life Support and Difficult Conversation Training. Additional training opportunities are always well received with good attendance levels.

Through working closely with other Hospice teams the Volunteer Department has strengthened the volunteer team for events substantially and been able to offer more student placements than previously possible.

£539,812
Cost Saving

39,947
Hours

404
Volunteers

> **Absolutely love coming to the Hospice. It has given me my self-worth back after my retirement.**

> **Possibly the most enjoyable voluntary job I have ever done.**

> **Everyone has been very kind and welcoming since day one of my volunteering journey.**




Welcome
Reception


Kershaw's Hospice


Food Allergy
or
Intolerance?





Corporate Services.

Housekeeping.

The Housekeeping Team pride themselves on high standards of cleanliness and this is reflected in the Hospice's annual Housekeeping audit, most recently scoring 96%. We consistently receive great feedback on the Hospice's facilities from patients and families.

The Housekeeping Vantage module, which has digitalised the Housekeeping checklists and provides further audit opportunities, has been developed ready for launch in 2025.

Preparation has also taken place for the implementation of Simpler Recycling Legislation, ensuring we are able to segregate our waste at source. A new range of cleaning equipment has been purchased and the Housekeeping Team are being trained to use these to the optimum level.

The PLACE inspection this year highlighted a number of minor suggestions but that overall the service user felt very confident that 'a good level of patient care and experience will be delivered in the environment.'

Quotes from surveys:

> **The Hospice was always clean and tidy and everyone had a great manner about them.**

> **The Inpatient Unit was spotlessly clean.**



Corporate Services.

Reception.



The Reception staff and volunteers have continued to provide a professional and friendly front-of-house reception service throughout 2024-25 ensuring all visitors to the Hospice feel welcome and valued. This year we have fully implemented the use of an electronic signing in system at the Hospice for all staff, volunteers, trustees and visitors. The checking out process now allows us to gain feedback from visitors as they exit the building, through an additional feature.

Being heavily supported by volunteers, a request was made for additional training in handling difficult conversations and supporting emotional families. This training course has now been run on several occasions and the feedback has been incredibly positive. Our reception volunteers feeling more confident and well equipped to support visitors will undoubtedly mean a more supportive and positive experience for visitors to the Hospice.

All Reception Standard Operating Procedures have been updated this year and cascaded to the team, to ensure a consistent experience for all visitors to the Hospice.

Corporate Services.

Catering.

The Catering Team are proactive and continue to make improvements to menus, taking on board feedback from patients and visitors. With the development of our new café, providing more work space, we are also now able to offer fresh, nutritious smoothies and have launched a Take Away menu.

Patient diet sheets have been revised and the process upon admission improved to ensure Catering are informed of patient choices and dietary requirements at the earliest opportunity.

The Hospice has invested in Catering Equipment to ensure we continue to offer high quality catering options and that our team have the resources they need to do this consistently. Our new breakfast trolley means that breakfast options can be delivered directly to patients and can be prepared at each patient's room.

IPU Patient Survey Responses

Quality of meals provided

Average Score: **4.8/5**

Food options available that catered to yours or our patient's dietary requirements

Average Score: **4.8/5**

Access to food other than at set meal times

Average Score: **4.5/5**

Positive comments received included:

> "The onsite cafe and staff are amazing. Staff always happy, chatty and food variety was good."

> "The quality of catering helped to provide a high level of care."






Kershaw's
Hospice










Kershaw's
Hospice


RHS

Corporate Services.

Facilities, Health & Safety & Risk Management.



Throughout 2024-25 the Facilities Team have continued to effectively support the Hospice by ensuring a safe, comfortable and efficient environment for everyone through the maintenance works completed. Over 657 reactive jobs were resolved during 2024-25 in addition to the many verbal maintenance requests received.

The Facilities Department have made a number of improvements this year, supported by the development of new Vantage Modules, and a more robust Audit Calendar. The department have completed a full internal asset register, which will allow the team to plan ahead for the replacement of items, and ensure assets are not being used beyond their lifespan. The new Cyclical Maintenance Schedule links in with the Asset register to ensure suitable internal and external maintenance happens in a timely manner, reducing the need to replace assets unnecessarily and reducing the risk of faults and failures. A consistent approach to Fleet Management has also been rolled out, across all vehicles to guarantee they are in excellent condition and all drivers are provided with consistent and accurate information should they experience any difficulties during their working day.

The team have dedicated a significant amount of time to enhancing Fire Safety practices at the Hospice and supporting staff members in the wider team to fully understand their roles in Fire Safety. Having obtained a Conditional Survey report the team have now prioritised and mapped out the workload and required financial resources over a 10-year period, allowing the team to work more proactively, and less reactively.

Much of the year has been focused upon continued landscaping work, in partnership with Urban Green. The Hospice is currently awaiting planning permission for a modular build which will increase the footprint of our Wellbeing Centre and mean that additional sessions can be introduced, without impacting our existing offer. The landscaping has been thoroughly considered with input from the Clinical Team, to ensure it adds to the experience of those on the IPU, Wellbeing Centre users, and visitors, but also can be utilised for events. Particular time has been spent ensuring the gardens will be dementia friendly. This year we were delighted to have our gardens recognised by North West in Bloom, being awarded a 'Level 5 – Outstanding' by judges from the prestigious Royal Horticultural Society.

Income Development.

The Income Development Department is responsible for all income generation, covering Retail, the Hospice Lottery, Fundraising, and Marketing and Communications. The Department's core objective is to raise sustainable income in support of the Hospice's overarching strategy. Dr Kershaw's receives only one third of its funding from the Integrated Care System (ICS), with the remaining £3.8 million annual budget being raised through fundraising activities and donations.

During the 2024/25 financial year, the Hospice saw a drop in its Retail income. However, the Hospice maintained its income from legacies, which enabled the Department to exceed its fundraising target for the year. In addition, our loyal supporters continued to champion the Hospice, and through their donations we were able to achieve some key highlights throughout the year. Most notably, there has been a significant increase in income from Gift Aid, not only from our retail settings, but the Income Development Team as a whole, with a £42,734 increase on last year.

Hospice Retail.





2024-25 has been a challenging year for our Retail arm, with changes to staffing, and the staffing structure. With a new Head of Retail appointed in October 2024, there has been a clear focus on streamlining and standardising processes across all of our shops.

A seasonal calendar has also been introduced to provide consistency in the Hospice's brand expectations across all settings. Research is underway to establish the viability of introducing Hospice merchandise across Retail and the Hospice as a further source of income. During the year it became apparent that The Business Centre at The Furniture Hub was not going to be as profitable as anticipated, and in order to make the most of the space available to us, to bring in the most income, the decision was made to utilise this space for retail sales and stock management.

Significant progress has been made into improving communications amongst the team, with the implementation of monthly budget meetings, and quarterly 1 to 1s. The successful improvement in Gift Aid should continue to grow with the recent introduction of electronic gift aid.

During the year Retail brought in £644,504 under budget. However, this was a gross increase of £71,656 on the previous financial year (inclusive of Gift Aid).

A huge thank you to all our customers and donors who continue to support our shops and help to raise vital income for the Hospice.


Accessorize




Doctor
Kershaw's
Hospice



Income Development.

Hospice Lottery.





Our Weekly Lottery continues to be a crucial and sustainable source of income, helping to fund the specialist care we provide to patients and their families across our community.

In 24/25, £705,304 was raised through our Lottery – funds that go directly toward providing compassionate end-of-life care, supporting families, and helping patients make the most of every moment.

We now have over 13,600 active players, and we're incredibly grateful to everyone who takes part – whether playing every week, participating in our bi-annual raffles, purchasing gift vouchers and wedding favours, or encouraging others to sign up.

This year we've focused on:

- Growing our player base through in-person canvassing
- Improving the supporter experience with clearer communication and digital campaigns in accordance with our supporters consent & preferences
- Ensuring full compliance with Gambling Commission regulations and responsible fundraising practices

Our Lottery door-to-door and venue canvassers have continued to grow members. Due to the cost of living crisis and the reduction in winter fuel payments for many, we saw an increase in cancellations. This said our income was up £44,640 on the previous year.

Our bi-annual Raffle Draws took place in May and October raising £25,468 for patient care, and saw us introduce our first digital mailing, responding to donor preferences whilst helping to reduce costs.

Dr Kershaw's Hospice Lottery is committed to ensuring that the Lottery is operated in a secure, fair and socially responsible way and endorses responsible gambling amongst its members. Dr Kershaw's Hospice Lottery is a member of the Hospice Lotteries Association, which is committed to working together to encourage responsible gambling and provide access to support if needed.

Dr Kershaw's Hospice is licensed and regulated in Great Britain by the Gambling Commission under account number 5224.

89p* of every £1 goes directly towards providing patient care, 10p* towards Lottery prizes, and the remaining 1p* is spent on Lottery administration, training, staff costs, licenses and marketing. Average number of players in the Draw is 13,482*.

*These figures are based on income and expenditure for May 2024.

The continued support from every player who participates in our Weekly Lottery and bi-annual Raffle Draws is greatly appreciated. Thank you for making a difference!


Kershaw's
Hospice

Income Development.

Events.

The 2024/25 calendar was bursting with an array of events and there was something for everyone to get involved in, from golf, to dance and everything in between. The first event in the calendar saw the return of Rose to Remember, for the third year running our local community gathered together at the Hospice to remember their loved ones. With the opportunity to buy a pink rose in memory of a lost loved one, guests gathered to see their roses in the Hospice gardens, tuck into a cream tea, and enjoy the remembrance service. Sponsored for the third year running by the Co-op, over 750 roses were sold and the event and the campaign collectively raised £13,262.70 for patient care.

Our Summer Fayre followed on Sunday 21st July, sponsored by Booth's Garden Centre. The carnival themed event was a great success and, with the sun shining, we saw a fantastic turnout for a fun-filled afternoon. Children enjoyed the helter-skelter, face painting, and carnival games, while adults browsed stalls, raffles, and refreshment stands. Our mascot, Hartley welcomed guests, and many relaxed in the gardens with ice cream, hotdogs, or a refreshing 1989 gin cocktail! The event raised £9,126.37 for patient care.

Our biggest, sell-out event, Dr Kershaw's Strictly, took place on Friday 28th February, with eight couples competing for the glitterball trophy. Themed a 'Night in the Musicals', local businessman and Hospice supporter, Frank Rothwell displayed his very own Chitty Chitty Bang Bang car at the entrance – setting the scene for a truly amazing evening. Guests enjoyed a three-course meal, fabulous live entertainment from West End Star Melanie Marshall, and lots of dancing! The night was a roaring success and feedback highlighted it was the best Strictly to date. With sponsorship from our dancers, ticket sales, and on the night fundraising, the event raised a record-breaking gross income of £53,289.37, an increase of £24,424 on the previous year

The events programme for the year also included a Golf Day, Light Up a Life, the Christmas Carol Concert and the Christmas Fayre. Collectively the Hospice's events programme raised £108,737, which was 20% over target.

A heartfelt thank you to our incredible local community for volunteering, participating, attending, and supporting our events throughout the year. Your involvement has been key to their success. These events not only bring us all together but also raise essential funds for the clinical services that care for patients across the Oldham area.













Income Development.

Corporate Fundraising.

The 1989 Club, Corporate Partnership Scheme, has grown throughout the year with new and existing partners including; Ribble Packaging, Pilgrim International, Olympic Construction, Oldham Community Radio, OMC Group, ROC Fire & Security and Northern Pest Management.

We have also seen growth in our 'Charity of the Year' partnerships, sponsorship opportunities, volunteering, and donations from new supporters, and continued support from our longstanding corporate partners.

December 2024 saw our first Corporate Indoor Mini Golf Event bringing together new and old corporate supporters for a day of fun, exploring a new way to network whilst supporting the Hospice. As their chosen Charity of the Year, Diodes Semi-Conductors held their very own Light Up A Life Service within their own grounds with our mascot, Hartley switching on the tree lights.

Many of our corporate supporters give in many different ways, including their services in kind, to the Hospice. Thanks to Raw Green Energy Group for servicing our solar panels, helping to keep them efficient and our costs down.

Thanks also to Booth's Garden Centre for donating plants to keep our gardens as beautiful as they are, Bid Food Logistics for keeping us well hydrated during our events and Holroyd's Skip Hire for their continued support with our Waste Management. We are incredibly grateful for Gifts in Kind we receive from Corporate and Community Partners. During 24/25 Gifts in Kind alone equated to £49,378, which is a remarkable saving for the Hospice.

We love working with the local business community and want to express our thanks to all our corporate supporters.









Legacies (Gifts in Wills).

This year, Legacy income exceeded an incredible £1.3 million including a substantial legacy of £420,847.07 — a testament to the enduring generosity of those who have chosen to remember the Hospice in their Will. We are deeply grateful for these gifts, which play a vital role in sustaining and developing the compassionate care we provide to patients and families.

As part of our commitment to growing this essential source of income, the Hospice joined the national Hospice UK Legacy Campaign. We are proud that a member of our team sits on the campaign's national steering group, helping shape the future of legacy giving across the sector.

Alongside this, we have begun developing a dedicated Legacy strategy to ensure we continue building strong relationships with our supporters and honouring their wishes. Every legacy left to us makes a lasting difference — and we are truly thankful for this powerful expression of care and trust.

Trust, Grants & Foundations.

Through applications submitted the Hospice was able to secure grant funding of £50,261 towards core costs, capital items and the Wellbeing Centre.

We also received £93,262 through the Hospice UK Grant scheme which ensured we could progress with our substantial landscaping project.

Dr Kershaw's is extremely grateful to the Trusts and Foundations that supported us throughout the year:

- The Albert Hunt Trust
- The Crane Fund for Widows and Children
- The February Foundation
- Hospital Saturday Fund
- The Treeside Trust
- Action Together

Income Development.

Community Fundraising.

Dr Kershaw's Hospice is always overwhelmed by the unfaltering support we receive from our local community. We thank each and every one of our supporters for their dedication and loyalty throughout the year.

During the past 12 months, members of the public have hosted their own events or fundraising activities to raise vital funds for the Hospice. Activities have included climbing the Yorkshire Three Peaks, hosting musical concerts, a zumbathon, taking on sponsored walks, swims and runs, obstacle courses, and more. Thank you to everyone who took on an activity, be it large or small, to support our Hospice and helped to raise awareness and essential funds for patients who need our care now and in the future.

In addition to all our supporters' events, our Hospice Community Team also hosted a range of challenges and events that people could sign up to, including the Bunny Hop, Morecambe Bay Walk, and Festive Fundraisers; Jolly Jumper Day, the Reindeer Run and Cards for Care.

The Reindeer Run was ran as a mass participation event this year in Alexandra Park with 1,000 children from local schools taking part. The first ever Morecambe Bay Walk had over 100 walkers joining the King's Guide. For the second year our Fundraising Team took part in the Royton Pubs and Bars 6-a-side Cricket and Family Fun Day organised by Royton Cricket Club and they can't wait to take part again in 2025.

The team introduced a new initiative; Junior Dragons' Den, each and every child from the schools impressed everybody with their commitment, imagination and entrepreneurship, accumulating in a grand finale which left a lasting impression on all our dragons. Participating schools included: Medlock Valley Community Primary School, Alexandra Park Primary School, Fir Bank Primary School, Thorpe Primary School, Burnley Brow Community School, Blackshaw Lane Primary School, Crompton Primary School, Medlock Valley Primary School and Thornham St James Primary School.

Since his launch Hartley has become a very popular addition to our events and is in demand to attend our third-party community events.

We ran a Christmas Tree Collection campaign for the second year. It was well received and we were delighted by how many people got behind the initiative. We would like to thank Life for a Life Memorial Forests, WillMow Reclamation & Salvage Ltd, Howard's Domestics, and Poplar Tree Company for all of their support. This year, 184 trees were recycled by Poplar Tree Company and the campaign raised just over £2,400 for patient care, inclusive of Gift Aid.

Dr Kershaw's Hospice Friends continued to give generously with over £20,000 donated within the year to support clinical services.

Over £325,413 was raised by the community throughout the year, and our sincere thanks go to everyone who supported us including, but not limited to; Booths Garden Centre, Brooklands Private Day Nursery, Co-op Royton, Halfway House Royton, Mossley Cancer Committee, Newbank Garden Centre, OCL, Oldham Athletic Football Club, Oldham & District Ladies Bowling League, Rotary Club of Oldham, Saddleworth Old School Tractor Group, The Oddfellows, Thorp Primary School, Whitegate End Primary School and Shaw Freemasons.

We have been incredibly fortunate to have the support of a number of Major Donors this financial year, with Shobna Gulati donating £16,000, The Roger Tanner Trust making a donation of £10,000 and numerous other individuals generously donating to the Hospice.








5K
Kershaw's
Hospice


Kershaw's
Hospice


Kershaw's
Hospice


Tracheostomy Care
Managing Breathlessness & Anxiety
Adding quality to the lives of those with life-limiting illnesses
Providing inclusive, compassionate care and support for the Oldham community

Income Development.

Marketing & Communications.

This year, our Marketing and Communications Team have continued to deliver dynamic, digitally driven campaigns to raise awareness of our Hospice's care, share powerful patient stories, and dispel common myths about hospice services.

Much of the year has focused on preparing our new website which will offer a more accessible, mobile-friendly experience for supporters and patients — with key features including simpler online donations and event bookings, clearer patient resources, and multi-language access in Bengali and Urdu.

As part of our wider digital strategy, the team has also started to send email campaigns to supporters. Work has begun developing a 360 video tour of the Hospice to help families visualise our care environment.

Engagement continues to grow across Facebook, Instagram, LinkedIn and YouTube, whilst activity on X (formerly Twitter) has declined, we will continue to monitor its value moving forward. We were proud to host the North West Hospices Marketing and Communications meeting in September, receiving excellent feedback on our branding and communications from regional colleagues. Internally, we've also strengthened our marketing efforts, shifting to a more digital approach for our staff newsletters to improve engagement and accessibility.

Our weekly Oldham Times column and regular coverage across local print, radio and online media remain key tools for sharing updates. We're especially grateful to our local media outlets for including our Hospice in their coverage, in particular The Oldham Times and Oldham Community Radio 99.7FM for their ongoing support.



Strategic Report & Financial Review.

Financial Review.

The Statutory Accounts for the year ended 31st March 2025, have been prepared in accordance with the Statement of Recommended Practice Accounting and Reporting by Charities (SORP 2019), and comply with all statutory requirements. Following the appointment of the Hospice's Accountants and External Auditors, Chadwick & Company Chartered Accountants, both the format and content of the Statutory Accounts embrace the advice and recommendations of our Auditors.

The overall net increase in funds was £734,316 (2024: £1,306,260).

The Hospice's principal sources of income are donations, legacies, NHS income, our retail outlets, fundraising, Lottery and trading surpluses. A total Income of £5,977,268 was achieved in the current financial year – an increase on the previous financial year of 2.3%

The Hospice recognises, and would like to give special thanks to Greater Manchester Integrated Care who continue to support the Hospice, and contributed £2,446,327 to Dr Kershaw's. These funds are secured through our block contract to support both our Inpatient Unit and Hospice at Home services. Greater Manchester Integrated Care additionally continue to support further care in the community provided by our Caring Hands Domiciliary Service. This year this also included a contribution of £443,000 towards the costs of providing the Step-down Service to support patient flow in local hospitals.

Legacies received for the year-ended 31st March 2025 totalled £1,338,490, including a substantial legacy of £420,847.07. This is an increase of £141,605 (2024: £1,196,885)

Dr Kershaw's Lottery continued to performed well and contributions to patient care were £360,000 of regularly monthly transfers.

Elsewhere, income generally held up well, with retail income totalling £644,504, an increase of £71,656 from the previous year. (2024: £572,848)

The Hospice continued to see increases in the cost of goods and services, with a spend of £4,376,447 a rise of 8.5% to the previous financial year. This reflects both increased staffing costs and a significant increase in overhead costs alike.

As of 31st March 2025, the funds balance of the Hospice sits at £12,584,351. A detailed analysis of funds held can be found in notes 24 in the Hospices Statutory Accounts.

The Hospice would like to express its sincere thanks and appreciation to everyone who contributes to our running. Whether this be in time, gifts or monetary donations. The work we do would not be possible without our loyal supporters.





Investments.

For the year ended 31 March 2025 this was a net gain of £103,910 (2024: gain of £336,294; 2023: loss of £31,500).

During the year a total of £1,250,000 was invested into the Hospice's investment portfolio, which is maintained to support long-term growth. The portfolio continues to be professionally managed and closely monitored by RBC Brewin Dolphin, with the Finance and Resourcing Steering Group providing ongoing oversight to ensure strong governance and prudent risk management.

Investment markets in 2025 were mixed. Inflation moderated but remained above central-bank targets, prompting interest rates to stay higher for longer and creating short-term volatility in equities and bonds. Geopolitical tensions also contributed to market swings. Nevertheless, structural growth sectors such as technology and healthcare—fuelled by advances in artificial intelligence and innovation—remained resilient.

The combination of a carefully managed higher-risk strategy and significant new capital, positions the Hospice for stronger long-term returns while maintaining appropriate risk management. Although immediate gains were modest, the portfolio is now aligned to capture growth opportunities as global conditions stabilise and interest rates ease. Looking ahead, the Board anticipates that over the next three to five years this strategy will provide enhanced income and capital growth to further advance the work of the Hospice. Changes in the market valuation of the Investment Portfolio are recorded within Other Recognised Gains and Losses.



Reserves.

A Statement of Unrestricted Funds is shown in Note 23 of the Statutory Accounts. During the year, the Trustees reviewed the reserves policy and set out the criteria required to hold designated reserves going forward.

Firstly, an Absolute Minimum level of Free Reserves will be held, equal to the funds required to ensure the orderly closure of the Hospice. This includes the fulfilment of all financial obligations, predominantly but not limited to staff notice/redundancy and lease commitments.

Secondly, the Hospice designates an element of its reserves to ensure the resilience and continuity of its core operations. To include both provision for a period of loss making, arising from, for example, a shortfall in income and secondly, to fund essential expenditure required over a 3-year period (e.g. repairs, equipment replacement and building works).

Thirdly, remaining free reserves are available for designation into both the Maintenance Fund and the Development Fund. This will provide the financial resources to further develop services and maintain facilities in line with the Hospice's strategic objectives.

Reserves in excess of that designated, are available to spend on any of the charity's purposes and further enable the Hospice to meet its financial commitments and obligations. This excludes all fixed assets, restricted and designated funds.

Note 24 of the Statutory Accounts provides further detail around the Designated Funds of the Hospice.



Financial and Reputational Risk.

Dr Kershaw's Hospice recognises the risks associated with the nature of its operating activities. There have always been uncertainties, the only predictable income the Hospice receives is from our Commissioning Partners. Non-commissioned and voluntary income is more difficult to budget for. The continuing impact of COVID-19, the cost of living crisis and high inflationary environment means that the Hospice now operates in a different, more volatile and possibly riskier environment. The Hospice continues to identify new opportunities to improve the financial sustainability of the organisation.

The Hospice is pro-active in mitigating these risks via its Risk Management process. The Senior Management Team meet regularly to discuss current and potential risks, and put controls in place to mitigate these. Our main external risk, is that of Cyber Crime / Attack. Dr Kershaw's Hospice continues to work very closely with its partnering Hospices, and has for a number of years held a Service Level Agreement with St Ann's Hospice to secure the invaluable skills of their Data Protection Officer. While we have chosen to move to an external Data Protection Officer we continue to be active members in the GM Hospice Provider Collaborative.

Statement of Board of Trustees' Responsibilities for the Financial Statements.

The Trustees are responsible for preparing the Trustees Report and the Financial Statements in accordance with applicable law and United Kingdom Generally Accepted Accounting Practice.

Company law requires the Board of 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 of the incoming resources and application of resources, including the income and expenditure, of the charitable company for that period. In preparing those financial statements the Trustees are required to:

- Select suitable accounting policies and then apply them consistently
- Observe the methods and principles in the Charity Statements of Recommended Practice (SORP);
- Make judgements and estimates that are reasonable and prudent
- State whether applicable accounting standards have been following, subject to any material departures disclosed and explained in the financial statements
- Prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charity company will continue in business.

The Trustees are responsible for keeping proper accounting records, which disclose with reasonable accuracy at any time the financial position of the charitable company 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 charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

So far as the Trustees are aware, there is no relevant information (as defined by section 418 of the Companies Act 2006) of which the charitable companies' auditors are unaware, and each Trustee has taken all steps necessary in order to make them aware of any audit information and to establish that the charitable company's auditors are aware of that information.



Dr Kershaw's Trustees 2024/25.

Statement of Board of Trustees' Responsibilities for the Financial Statements.

Public Benefit Statement.

In setting our objectives and planning our services, the Trustees of Dr Kershaw's Hospice have considered the Charity Commission's general guidance on public benefit. Dr Kershaw's Hospice provides hospice services free of charge to those individuals aged over 18 years with life-limiting illness living in the Oldham Borough. The charity also provides supportive care for their families and carers and our care services are available, without restriction, to all groups in the communities we serve.

Charitable Purpose & Social Investment Policies.

To promote the relief of illness and suffering in such ways as the Trustees think fit:

(1) by establishing, maintaining and conducting residential nursing and convalescent homes for the reception and care of persons of either sex who are suffering at any age from any chronic or terminal illness or from any disability or disease attributable to old age or from any other physical or mental infirmity, disability or disease and so that any such home may be restricted as aforesaid to patients suffering from any particular type or types of illness, disability or infirmity and by providing medical or other treatment or attention for any such persons as aforesaid in their own home;

(2) by conducting and promoting or encouraging research in to the care and treatment of persons suffering from any such illness, disability, disease or infirmity and particularly in to the care and treatment of persons suffering from cancer or terminal illnesses and by providing for the dissemination of the results of such research;

(3) by promoting or encouraging or assisting in the teaching or training of doctors, nurses, physiotherapists and other persons engaged in any branch of medicine surgery, nursing or allied services and in the teaching or training of students in any branch of medicine, surgery or nursing or allied services.



Auditors.

In accordance with the company's articles, a resolution proposing that Chadwick & Company (Manchester) Limited, be reappointed as auditors of Dr Kershaw's Hospice, will be put to the Board of Trustees at the Annual General Meeting.

Approval.

The Trustees report including Accounts and Strategic Review was approved by the Trustees on 18 September 2025, and signed on 31st October 2025 on their behalf by:

NAME:	Rachel Damianou	NAME:	Dr Paul Cook
POSITION:	COMPANY SECRETARY	POSITION:	CHAIR / TRUSTEE



“Dr Kershaw’s Hospice would like to express its sincere thanks and gratitude to everyone who fundraised, supported, or donated to the Hospice during the past year. Your generosity enables the Hospice to remain open and provide free, quality, specialist care to our local community. On behalf of all our staff, patients and their families we thank you.”

Adele Doherty, CEO




STAFF
STAFF
STAFF

DR KERSHAW'S HOSPICE

INDEPENDENT AUDITOR'S REPORT

TO THE TRUSTEES OF DR KERSHAW'S HOSPICE

Opinion

We have audited the financial statements of Dr Kershaw's Hospice (the 'charity') for the year ended 31 March 2025 which comprise the statement of financial activities, the balance sheet, the statement of cash flows and notes to the financial statements, including significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 *The Financial Reporting Standard applicable in the UK and Republic of Ireland* (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 31 March 2025 and of its incoming resources and application of resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

Basis for opinion

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

Conclusions relating to going concern

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

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

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

Other information

The other information comprises the information included in the annual report other than the financial statements and our auditor's report thereon. The trustees are responsible for the other information contained within the annual report. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon. Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the course of the audit, or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

Opinions on other matters prescribed by the Companies Act 2006

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

- the information given in the trustees' report, which includes the strategic and directors' report and the strategic 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.

Matters on which we are required to report by exception

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

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

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

Responsibilities of trustees

As explained more fully in the statement of trustees' responsibilities, the trustees, who are also the directors of the charity 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 charity's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the trustees either intend to liquidate the 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 is available on the Financial Reporting Council's website at: https://www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditor's report.

Extent to which the audit was considered capable of detecting irregularities, including fraud

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

- At the planning stage of the audit we gain an understanding of the laws and regulations which apply to the Group and how management seek to comply with them. This helps us to make appropriate risk assessments.
- The principal risks of non-compliance with laws and regulations which we identified as being significant to the company related to UK Financial Reporting Standards, Company Law, Charity Law, UK Tax Legislation and Health & Safety regulations.
- During the audit we focus on relevant risk areas and review compliance with laws and regulations through making relevant enquiries and corroboration by, for example, reviewing Trustees Minutes and other documentation.
- We assess the risk of material misstatement in the financial statements including as a result of fraud and undertake procedures including:
  - I. Review of controls set in place by management
  - II. Enquiry of management as to whether they consider fraud or other irregularities may have occurred or where such opportunity might exist
  - III. Challenge of management assumptions with regard to accounting estimates
  - IV. Identification and testing of journal entries, particularly those which may appear to be unusual by size or nature.

Because of the inherent limitations of an audit, there is a risk that we will not detect all irregularities, including those leading to a material misstatement in the financial statements or non-compliance with regulations. This risk increases the more that compliance with a law or regulation is removed from the events and transactions reflected in the financial statements, as we will be less likely to become aware of instances of non-compliance. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.

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.



Michael Royle BA(Hons)FCA (Senior Statutory Auditor)
for and on behalf of Chadwick & Company (Manchester) Limited

Chartered Accountants
Statutory Auditors
Capital House
272 Manchester Road
Droylsden
Manchester
M43 6PW

31 October 2025

DR KERSHAW'S HOSPICE

STATEMENT OF FINANCIAL ACTIVITIES INCLUDING INCOME AND EXPENDITURE ACCOUNT

FOR THE YEAR ENDED 31 MARCH 2025

	Notes	Unrestricted funds 2025 £	Restricted funds 2025 £	Total 2025 £	Unrestricted funds 2024 £	Restricted funds 2024 £	Total 2024 £
Income and endowments from:							
Donations and legacies	**3**	2,091,193	131,062	2,222,255	1,783,401	34,672	1,818,073
Charitable activities	**4**	2,446,327	-	2,446,327	2,575,418	-	2,575,418
Other trading activities	**5**	1,113,241	-	1,113,241	1,320,577	-	1,320,577
Investments	**6**	156,019	8,489	164,508	74,994	8,722	83,716
Other income	**7**	30,937	-	30,937	42,300	-	42,300
Total income		5,837,717	139,551	5,977,268	5,796,690	43,394	5,840,084
Expenditure on:							
Raising funds	**8**	970,415	-	970,415	838,294	-	838,294
Charitable activities	**9**	4,152,516	223,931	4,376,447	3,841,566	190,257	4,031,823
Total expenditure		5,122,931	223,931	5,346,862	4,679,860	190,257	4,870,117
Net gains/(losses) on investments	**15**	92,937	10,973	103,910	298,303	37,990	336,293
Net income/(expenditure) and movement in funds		807,723	(73,407)	734,316	1,415,133	(108,873)	1,306,260
Reconciliation of funds:							
Fund balances at 1 April 2024		7,372,026	4,478,009	11,850,035	5,956,893	4,586,882	10,543,775
Fund balances at 31 March 2025		8,179,749	4,404,602	12,584,351	7,372,026	4,478,009	11,850,035

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

The statement of financial activities also complies with the requirements for an income and expenditure account under the Companies Act 2006.

DR KERSHAW'S HOSPICE

BALANCE SHEET

AS AT 31 MARCH 2025

	Notes	2025		2024	
		£	£	£	£
Fixed assets					
Tangible assets	**17**		4,153,357		4,065,777
Investments	**18**		5,331,119		3,951,879
			9,484,476		8,017,656
Current assets					
Debtors	**19**	831,394		1,412,796	
Cash at bank and in hand		2,573,974		2,623,595	
		3,405,368		4,036,391	
Creditors: amounts falling due within one year	**20**	(305,493)		(204,012)	
Net current assets			3,099,875		3,832,379
Total assets less current liabilities			12,584,351		11,850,035
The funds of the charity					
Restricted income funds	**22**		4,404,602		4,478,009
Unrestricted funds	**23**		8,179,749		7,372,026
			12,584,351		11,850,035

The financial statements were approved by the trustees on 31 October 2025

Dr P Cook
Trustee

R Damianou
Trustee

Company registration number 05221414 (England and Wales)

DR KERSHAW'S HOSPICE

STATEMENT OF CASH FLOWS

FOR THE YEAR ENDED 31 MARCH 2025

	Notes	2025 £	2025 £	2024 £	2024 £
Cash flows from operating activities					
Cash generated from operations	**28**		1,383,929		211,846
Investing activities					
Purchase of tangible fixed assets		(322,728)		(155,021)	
Purchase of investments		(1,275,330)		(503,680)	
Investment income received		164,508		83,716	
Net cash used in investing activities			(1,433,550)		(574,985)
Net decrease in cash and cash equivalents			(49,621)		(363,139)
Cash and cash equivalents at beginning of year			2,623,595		2,986,734
Cash and cash equivalents at end of year			2,573,974		2,623,595

1 Accounting policies

Charity information

Dr Kershaw's Hospice is a private company limited by guarantee incorporated in England and Wales. The registered office is Turf Lane, Royton, Oldham, Lancashire, OL2 6EU. In the event of the charity being wound up, the liability in respect of the guarantee is limited £10 per member of the charity.

1.1 Accounting convention

The financial statements have been prepared in accordance with the charity's governing document, the Companies Act 2006 and "Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019)". The charity is a Public Benefit Entity as defined by FRS 102.

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

The financial statements have been prepared under the historical cost convention, modified to include the revaluation of freehold properties and to include certain financial instruments at fair value. The principal accounting policies adopted are set out below.

1.2 Going concern

At the time of approving the financial statements, the trustees have a reasonable expectation that the charity has adequate resources to continue in operational existence for the foreseeable future. Thus the trustees continue to adopt the going concern basis of accounting in preparing the financial statements.

1.3 Charitable funds

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. The aim and purpose of each designated fund is set out in the notes to the financial statements.

Restricted funds are donations and grants which have been specified by the donor to be solely used for particular areas of the Hospice's work.

1.4 Income

Income is recognised when the charity is legally entitled to it after any performance conditions have been met, the amounts can be measured reliably, and it is probable that income will be received.

Cash donations are recognised on receipt. Other donations are recognised once the charity has been notified of the donation, unless performance conditions require deferral of the amount. Income tax recoverable in relation to donations received under Gift Aid or deeds of covenant is recognised at the time of the donation.

Legacies are recognised on receipt or otherwise if the charity has been notified of an impending distribution, the amount is known, and receipt is expected. If the amount is not known, the legacy is treated as a contingent asset.

Grants of a capital nature are treated as deferred credits and credited through the Statement of Financial Activities over the estimated use of the relevant fixed assets.

Income received in advance for a future fundraising event or for other income received relating to the following year are deferred until the criteria for income recognition are met.

1 Accounting policies **(Continued)**

1.5 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. Direct expenditure on charitable activities is classified under the following headings:

- In-patient care
- Medical services
- Day-care
- Hospice at home
- Caring Hands

The charity is registered for VAT and is able to recover input VAT on the majority of its activities. The charity operates VAT under partial exemption. Irrecoverable VAT is charged as a cost against the activity for which the expenditure was incurred.

Costs of raising funds includes expenditure incurred in generating donations; arranging, organising and participation in funding events; costs of operating the charity shops.

Support costs are those functions that assist the work the charity but do not directly undertake charitable activities. Support costs include staff and overhead costs for finance, governance and general overheads.

1.6 Tangible fixed assets

Tangible fixed assets are initially measured at cost and subsequently measured at cost or valuation, net of depreciation and any impairment losses.

Depreciation is recognised so as to write off the cost or valuation of assets less their residual values over their useful lives on the following bases:

Leasehold improvements	Over length of the lease
Fixtures and fittings	20% straight line
Motor vehicles	25% reducing balance
Long term leasehold property	Revaluation basis

Leasehold improvements comprise all improvements made to the main hospice site at Turf Lane, Royton, including the new in-patient unit and Barras legacy gardens.

The gain or loss arising on the disposal of an asset is determined as the difference between the sale proceeds and the carrying value of the asset, and is recognised in net income/(expenditure) for the year.

The long term leasehold property value is confirmed by the board of trustees each year. Professional revaluations are performed with sufficient regularity such that the carrying amount does not differ materially from that which could be determined using fair values at the reporting end date.

1.7 Fixed asset investments

Fixed asset investments are initially measured at transaction price excluding transaction costs, and are subsequently measured at fair value at each reporting date. Changes in fair value are recognised in net income/(expenditure) for the year. Transaction costs are expensed as incurred.

Shares in the trading subsidiary are carried at cost.

1 Accounting policies **(Continued)**

1.8 Impairment of fixed assets

At each reporting end date, the charity reviews the carrying amounts of its tangible assets to determine whether there is any indication that those assets have suffered an impairment loss. If any such indication exists, the recoverable amount of the asset is estimated in order to determine the extent of the impairment loss (if any).

1.9 Stocks

Goods donated to the Hospice shops are principally given as gift aid donations. When the goods are sold the value realised is communicated to the donor to confirm it is their wish that the receipt be retained by the Hospice as a gift aided donation. Accordingly, stock held has no value because the charity only has control over the value and income when the donation is confirmed by the donor.

1.10 Cash and cash equivalents

Cash and cash equivalents include cash in hand, deposits held at call with banks, other short-term liquid investments with original maturities of three months or less, and bank overdrafts. Bank overdrafts are shown within borrowings in current liabilities.

1.11 Financial instruments

The Hospice 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.

1.12 Creditors and provisions

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.

1.13 Employee benefits

The cost of any unused holiday entitlement is recognised in the period in which the employee's services are received.

Termination benefits are recognised immediately as an expense when the charity is demonstrably committed to terminate the employment of an employee or to provide termination benefits.

1.14 Retirement benefits

Payments to defined contribution retirement benefit schemes are charged as an expense as they fall due.

1.15 Leases

Rentals payable under operating leases, including any lease incentives received, are charged as an expense on a straight line basis over the term of the relevant lease.

2 Critical accounting estimates and judgements

In the application of the charity's accounting policies, the trustees are required to make judgements, estimates and assumptions about the carrying amount 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 where the revision affects only that period, or in the period of the revision and future periods where the revision affects both current and future periods.

3 Donations and legacies

	Unrestricted funds 2025 £	**Restricted funds 2025 £**	**Total 2025 £**	Unrestricted funds 2024 £	Restricted funds 2024 £	Total 2024 £
Donations and gifts	712,442	27,800	740,242	567,349	19,672	587,021
Legacies receivable	1,338,490	-	1,338,490	1,196,885	-	1,196,885
Grants receivable	40,261	103,262	143,523	19,167	15,000	34,167
	2,091,193	131,062	2,222,255	1,783,401	34,672	1,818,073
Donations and gifts						
General donations	376,985	12,127	389,112	305,991	12,894	318,885
In memoriam	213,503	-	213,503	191,966	-	191,966
Friends of the Hospice	20,094	-	20,094	18,454	-	18,454
Income tax recoverable	101,860	-	101,860	50,938	-	50,938
Keira's Wishes	-	3,741	3,741	-	4,418	4,418
Rebecca Taylor	-	11,932	11,932	-	2,360	2,360
	712,442	27,800	740,242	567,349	19,672	587,021
Legacies receivable						
Other	1,338,490	-	1,338,490	1,196,885	-	1,196,885
	1,338,490	-	1,338,490	1,196,885	-	1,196,885
Grants receivable						
Other grants	40,261	10,000	50,261	19,167	15,000	34,167
Hospice UK	-	93,262	93,262	-	-	-
	40,261	103,262	143,523	19,167	15,000	34,167

4 Charitable activities

	In-patient Care 2025	Hospice at Home 2025	Caring Hands 2025	Total 2025	In-patient Care 2024	Hospice at Home 2024	Caring Hands 2024	Total 2024
	£	£	£	£	£	£	£	£
Government funding	1,770,962	382,351	293,014	2,446,327	1,968,290	359,019	248,109	2,575,418

5 Income from other trading activities

	Unrestricted funds 2025 £	Unrestricted funds 2024 £
Fundraising events	108,737	63,729
Shop income	644,504	572,848
Sponsorships and social lotteries	360,000	684,000
Other trading activities	1,113,241	1,320,577

6 Investments

	Unrestricted funds 2025 £	Restricted funds 2025 £	Total 2025 £	Unrestricted funds 2024 £	Restricted funds 2024 £	Total 2024 £
Dividends	71,800	7,695	79,495	59,315	7,925	67,240
Investments interest	82,243	793	83,036	15,589	796	16,385
Bank interest	1,976	1	1,977	90	1	91
	156,019	8,489	164,508	74,994	8,722	83,716

7 Other income

	Unrestricted funds 2025 £	Unrestricted funds 2024 £
Room hire	24,625	23,468
Training	6,312	18,832
	30,937	42,300

8 Expenditure on raising funds

	Unrestricted funds 2025 £	Unrestricted funds 2024 £
Fundraising and publicity		
Staging fundraising events	64,631	55,539
Other fundraising costs	6,311	15,347
Staff costs	344,886	279,887
	415,828	350,773
Trading costs		
Operating charity shops	163,509	176,315
Other trading activities	21,349	48,161
Staff costs	369,729	263,045
	554,587	487,521
Total costs	970,415	838,294

9 Charitable activities

	In-patient Care 2025 £	Medical Services 2025 £	Daycare / Wellbeing 2025 £	Hospice at Home 2025 £	Caring Hands 2025 £	Total 2025 £	Total 2024 £
Staff costs	1,502,838	534,253	218,451	450,322	516,675	3,222,539	3,053,342
Other direct costs	40,920	4,060	26,586	8,278	16,323	96,167	81,223
Medical costs	70,405	-	-	-	-	70,405	54,014
	1,614,163	538,313	245,037	458,600	532,998	3,389,111	3,188,579
Share of support costs (see note 10)	453,528	161,228	65,924	135,899	155,923	972,502	829,593
Share of governance costs (see note 10)	6,918	2,459	1,006	2,073	2,378	14,834	13,651
	2,074,609	702,000	311,967	596,572	691,299	4,376,447	4,031,823
Analysis by fund							
Unrestricted funds	1,979,023	668,484	277,802	568,321	658,886	4,152,516	3,841,566
Restricted funds	95,586	33,516	34,165	28,251	32,413	223,931	190,257
	2,074,609	702,000	311,967	596,572	691,299	4,376,447	4,031,823

9 Charitable activities **(Continued)**

For the year ended 31 March 2024

	In-patient Care £	Medical Services £	Daycare / Wellbeing £	Hospice at Home £	Caring Hands £	Total 2024 £
Staff costs	1,588,800	476,526	230,306	269,884	487,826	3,053,342
Other direct costs	34,176	18	25,221	6,983	14,825	81,223
Medical costs	54,014	-	-	-	-	54,014
	1,676,990	476,544	255,527	276,867	502,651	3,188,579
Share of support costs (see note 10)	431,676	129,472	62,574	73,328	132,543	829,593
Share of governance costs (see note 10)	7,103	2,130	1,030	1,207	2,181	13,651
	2,115,769	608,146	319,131	351,402	637,375	4,031,823
Analysis by fund						
Unrestricted funds	2,026,021	581,647	287,257	336,394	610,247	3,841,566
Restricted funds	89,748	26,499	31,874	15,008	27,128	190,257
	2,115,769	608,146	319,131	351,402	637,375	4,031,823

10 Support costs allocated to activities

	2025	2024
	£	£
Staff costs	207,582	201,554
Depreciation	235,149	218,828
Support direct costs	94,123	103,395
Support equipment & premises costs	435,649	305,817
Governance costs	14,833	13,650
	987,336	843,244
Analysed between:		
In-patient Care	460,446	438,779
Medical Services	163,687	131,602
Daycare / Wellbeing	66,930	63,604
Hospice at Home	137,972	74,535
Caring Hands	158,301	134,724
	987,336	843,244

Governance costs comprise:	2025 £	2024 £
Audit fees	13,000	12,000
Legal and professional	1,833	1,650
	14,833	13,650

Support and governance costs are allocated between the various charitable activities, based on the number of staff operating within that function of the charity.

11 Net movement in funds

	2025	2024
	£	£
Net movement in funds is stated after charging/(crediting)		
Depreciation of owned tangible fixed assets	235,149	218,828
Operating lease charges	89,932	90,328

12 Auditor's remuneration

The analysis of auditor's remuneration is as follows:

Fees payable to the charity's auditor and associates:	2025 £	2024 £
Audit of the charity's annual accounts	13,000	12,000

13 Trustees

None of the trustees (or any persons connected with them) received any remuneration or benefits in their role as trustees, or reimbursement of expenses from the charity during the year.

14 Employees

The average monthly number of employees during the year was:

	2025 Number	2024 Number
Direct charitable services	73	61
Fundraising services	23	21
Support services	34	30
Total	130	112

Employment costs	2025 £	2024 £
Wages and salaries	4,144,736	3,797,828

Volunteers continued to support us and contributed 39,947 hours of their time, equating to a staff cost saving of £540,000 (2024 - 34,759 hours, saving of £360,000).

The full time equivalent average monthly head count was 99 (2024: 81).

The number of employees whose annual remuneration was more than £60,000 is as follows:

	2025 Number	2024 Number
£60,001 - £70,000	1	-
£70,001 - £80,000	1	2
£80,001 - £90,000	1	-
£150,001 - £160,000	-	1
£160,001 - £170,000	1	-

Remuneration of key management personnel

The remuneration of key management personnel, including employers NI and pension contributions is as follows.

	2025 £	2024 £
Aggregate compensation	469,380	446,690

14 Employees **(Continued)**

The Hospice considers that the key management personnel comprise the Trustees and the Senior Management Team - who currently are the Chief Executive Officer, Medical Director, Director of Clinical Services, Director of Quality and Governance, Director of Finance, Director of Income Development and Marketing.

15 Gains and losses on investments

	Unrestricted funds 2025	Restricted funds 2025	Total 2025	Unrestricted funds 2024	Restricted funds 2024	Total 2024
Gains/(losses) arising on:	£	£	£	£	£	£
Revaluation of investments	92,937	10,973	103,910	298,303	37,990	336,293

16 Taxation

The charity is exempt from Corporation Tax in line with paragraph 1 of Schedule 6 of the Finance Act 2010.

17 Tangible fixed assets

	Leasehold improvements	Leasehold improvements post 2002	Fixtures and fittings	Motor vehicles	Long term leasehold property	Leasehold improvement projects	Barras legacy garden	Total
	£	£	£	£	£	£	£	£
Cost or valuation								
At 1 April 2024	540,693	2,644,406	469,304	44,380	124,000	2,973,081	236,816	7,032,680
Additions	-	-	49,934	-	-	-	272,794	322,728
At 31 March 2025	540,693	2,644,406	519,238	44,380	124,000	2,973,081	509,610	7,355,408
Depreciation and impairment								
At 1 April 2024	540,693	1,713,490	332,015	35,116	-	328,512	17,076	2,966,902
Depreciation charged in the year	-	38,789	63,604	2,316	-	110,190	20,250	235,149
At 31 March 2025	540,693	1,752,279	395,619	37,432	-	438,702	37,326	3,202,051
Carrying amount								
At 31 March 2025	-	892,127	123,619	6,948	124,000	2,534,379	472,284	4,153,357
At 31 March 2024	-	930,916	137,288	9,264	124,000	2,644,569	219,740	4,065,777

17 Tangible fixed assets **(Continued)**

Leasehold improvements - represents expenses incurred on the main hospice property at Turf Lane, Royton, prior to obtaining a lease on the premises. Accordingly, all expenditure in the Oldham Hospice Appeal during the years ending on 30 September 2001 was written off as incurred. From 1 October 2001 the OIdham Hospice Appeal occupied the property under a lease with the Pennine Acute Hospital Trust (formerly the Oldham NHS Trust) for a period of 25 years at a peppercorn rent, due to expire October 2025. However, as the directors wished to carry out a major rebuild, further negotiations took place during 2018 and a new lease was signed on 29 March 2018, for a further 30 years with a view to two subsequent 30-year extensions.

Leasehold improvements post 2002 - represents costs incurred on the main hospice property from 2002 onwards by The Oldham Hospice Appeal and Dr. Kershaw's Hospice towards which the hospice has received grants and other financial assistance. The net book value of this asset equates to the restricted leased building fund reserve. The costs and the reserves will be depreciated/amortised over the remaining committed lease period.

Long term leasehold property - is the building owned by the Hospice and used as part of the Shaw shop at 50 Market Street, Shaw. The property was last revalued by Breakey & Nuttall, Chartered Surveyors, on 4 November 2022.

Leasehold improvement projects - represents costs incurred on the IPU, reception, car park and modular unit. The costs and the reserves will be depreciated/amortised over the remaining committed lease period.

Barras legacy garden - represents costs to create a memorial garden, funded primarily through the Barras legacy with additional funding from Hospice UK as well as general hospice funds. The costs and the reserves will be depreciated/amortised over the remaining committed lease period.

18 Fixed asset investments

	Listed investments	Cash in portfolio	Other investments	Total
	£	£	£	£
Cost or valuation				
At 1 April 2024	3,901,090	50,689	100	3,951,879
Additions	1,250,000	-	-	1,250,000
Valuation changes	103,948	-	-	103,948
Cash movements	(485,160)	510,452	-	25,292
At 31 March 2025	4,769,878	561,141	100	5,331,119
Carrying amount				
At 31 March 2025	4,769,878	561,141	100	5,331,119
At 31 March 2024	3,901,090	50,689	100	3,951,879

The Hospice invests in a mixture of Fixed Interest deposits, Securities and Equities. Investment performance is monitored on behalf of the Board of Trustees by the Financial Resource Steering Group (FRSG).

FRSG are responsible for the ongoing review of the Investment Policy statement, monitoring the cashflows of the Hospice and maintaining liquidity required to fund operations.

18 Fixed asset investments **(Continued)**

Other investments comprise:	Notes	2025 £	2024 £
Investments in subsidiaries	27	100	100

Investments at fair value comprise:	2025 £	2024 £
Corporate bonds - cost £25,000	26,536	26,876
Investment shares bequested	2,077	1,698
Brewin Dolphin RBC investments	5,302,406	3,923,205
	5,331,019	3,951,779

19 Debtors

Amounts falling due within one year:	2025 £	2024 £
Trade debtors	179,859	751,165
Amounts owed by subsidiary undertakings	57,779	41,652
Other debtors	81,783	73,589
Prepayments and accrued income	511,973	546,390
	831,394	1,412,796

20 Creditors: amounts falling due within one year

	2025 £	2024 £
Trade creditors	109,334	44,539
Other taxation and social security	96,944	87,511
Other creditors	58,734	23,246
Accruals and deferred income	40,481	48,716
	305,493	204,012

21 Retirement benefit schemes

The charity operates a defined contribution pension scheme for all qualifying employees. The assets of the scheme are held separately from those of the charity in an independently administered fund.

The charge to profit or loss in respect of defined contribution schemes was £281,373 (2024 - £270,010).

22 Restricted funds

The restricted funds of the charity comprise the unexpended balances of donations and grants held on trust subject to specific conditions by donors as to how they may be used.

	At 1 April 2024 £	Incoming resources £	Resources expended £	Transfers £	Gains and losses £	At 31 March 2025 £
Restricted capital funds	3,793,304	93,263	(166,112)	106,671	-	3,827,126
Keira's Wishes	43,290	3,741	(1,122)	-	-	45,909
Rebecca Taylor fundraising	11,949	11,932	(10,473)	-	-	13,408
Barras legacy garden	604,224	8,488	(33,296)	(96,671)	10,973	493,718
Other restricted funds	25,242	22,127	(12,928)	(10,000)	-	24,441
	4,478,009	139,551	(223,931)	-	10,973	4,404,602

Previous year:	At 1 April 2023 £	Incoming resources £	Resources expended £	Transfers £	Gains and losses £	At 31 March 2024 £
Restricted capital funds	3,932,140	12,326	(157,783)	18,945	(7,893)	3,797,735
Keira's Wishes	40,208	4,418	(1,336)	-	-	43,290
Rebecca Taylor fundraising	10,800	17,360	(16,210)	-	-	11,950
Barras legacy garden	588,261	8,722	(11,803)	(18,945)	37,990	604,225
Other restricted funds	15,473	568	(3,125)	-	7,893	20,809
	4,586,882	43,394	(190,257)	-	37,990	4,478,009

23 Unrestricted funds

The unrestricted funds of the charity comprise the unexpended balances of donations and grants which are not subject to specific conditions by donors and grantors as to how they may be used. These include designated funds which have been set aside out of unrestricted funds by the trustees for specific purposes.

	At 1 April 2024 £	Incoming resources £	Resources expended £	Transfers £	Gains and losses £	At 31 March 2025 £
Development fund	889,100	-	(101,207)	12,107	-	800,000
Maintenance fund	1,512,000	-	(86,247)	(125,753)	-	1,300,000
Closure reserve	1,650,760	-	-	649,240	-	2,300,000
Adversity reserve	612,525	-	-	(112,525)	-	500,000
Income risk reserve	1,739,000	-	-	411,000	-	2,150,000
Revaluation reserve	54,000	-	-	-	-	54,000
General funds	914,641	5,837,717	(4,935,477)	(834,069)	92,937	1,075,749
	7,372,026	5,837,717	(5,122,931)	-	92,937	8,179,749

Previous year:	At 1 April 2023 £	Incoming resources £	Resources expended £	Transfers £	Gains and losses £	At 31 March 2024 £
Development fund	889,100	-	-	-	-	889,100
Maintenance fund	212,000	-	-	1,300,000	-	1,512,000
Closure reserve	1,700,756	-	-	(49,996)	-	1,650,760
Adversity reserve	608,400	-	-	4,125	-	612,525
Income risk reserve	1,545,200	-	-	193,800	-	1,739,000
Revaluation reserve	54,000	-	-	-	-	54,000
General funds	947,437	5,796,690	(4,679,860)	(1,447,929)	298,303	914,641
	5,956,893	5,796,690	(4,679,860)	-	298,303	7,372,026

The Financial Resource Steering Group (FRSG) of the Board meets regularly to review the reserves policy and the criteria required to hold reserves on an ongoing basis. FRSG adopt the following principles, as set out in the Reserves Policy:

1. Firstly, reserves are allocated to fund the orderly closure of the Hospice.
2. Secondly, the Hospice allocates reserves to ensure the resilience and continuity of its core operations.
3. Remaining reserves are available for designation into the Development fund. This sets aside funds required to develop and improve services in line with the Hospice's strategic objectives.

23 Unrestricted funds **(Continued)**

Development Fund
In 2023/2024, funds were allocated for the Hospice to invest in its infrastructure over a three year period. This initiative is still ongoing, ensuring continued improvements and upgrades to the hospice's facilities and services during the remaining years of the plan.

Maintenance Fund
Funds have been allocated to support the Hospice's estate strategy, which includes the ongoing maintenance of internal and external areas, as well as fixtures and fittings. These funds will also be used to address essential equipment needs on a rolling basis, ensuring the Hospice and retail shops remain fully operational and fit for purpose.

Closure Reserve
Sets funds aside to cover the orderly closure of the Hospice. Predominantly but not limited to staff notice/ redundancy and lease commitments.

Adversity Reserve
Protects the Hospice against unplanned events. For 2024/25 this covers the risk of a material fall in the market valuation of the recently established Investment fund.

Income Risk Reserve
Sets funds aside to cover a fall in income levels, ensuring the activities of the Hospice can continue until income recovers or adjustments are made. The trustees consider a fallow income period of 2 years to be appropriate. Each income stream has been assessed and a reduction factor applied in each case.

24 Analysis of net assets between funds

	Unrestricted funds 2025 £	**Restricted funds 2025 £**	**Total 2025 £**	Unrestricted funds 2024 £	Restricted funds 2024 £	Total 2024 £
Fund balances at 31 March 2025 are represented by:						
Tangible assets	326,233	3,827,124	4,153,357	272,472	3,793,305	4,065,777
Investments	4,907,852	423,267	5,331,119	3,510,207	441,672	3,951,879
Current assets/(liabilities)	2,945,664	154,211	3,099,875	3,589,347	243,032	3,832,379
	8,179,749	4,404,602	12,584,351	7,372,026	4,478,009	11,850,035

25 Operating lease commitments

Lessee
At the reporting end date the charity had outstanding commitments for future minimum lease payments under non-cancellable operating leases, which fall due as follows:

	2025 £	2024 £
Within one year	75,658	91,094
Between two and five years	144,722	197,130
In over five years	46,292	69,542
	266,672	357,766

26 Related party transactions

There were no disclosable related party transactions during the year (2024 - none).

27 Subsidiaries

Details of the charity's subsidiaries at 31 March 2025 are as follows:

Name of undertaking	Registered office	Nature of business	Class of shares held	% Held
Dr Kershaw's Hospice (Trading) Limited	England & Wales	Dormant company	Ordinary	100.00

The aggregate capital and reserves and the result for the year of subsidiaries excluded from consolidation was as follows:

Name of undertaking	Profit/(Loss) Transferred £	Capital and Reserves £
Dr Kershaw's Hospice (Trading) Limited	-	100

The subsidiary has not been consolidated within the accounts as it is no longer trading and is not considered to be material to the overall results of the charity.

Unincorporated undertakings
Dr Kershaw's Hospice Lottery is related to the Hospice but is independently registered with and regulated by the Gambling Commission, with whom accounts are filed annually. The lottery exists solely to contribute surpluses to the Hospice and at 31 March 2025 had distributable reserves of £391,790 (2024: £252,390).

28	Cash generated from operations	2025 £	2024 £
	Surplus for the year	734,316	1,306,260
	Adjustments for:		
	Investment income recognised in statement of financial activities	(164,508)	(83,716)
	Fair value gains and losses on investments	(103,910)	(336,293)
	Depreciation and impairment of tangible fixed assets	235,149	218,828
	Movements in working capital:		
	Decrease/(increase) in debtors	581,402	(732,895)
	Increase/(decrease) in creditors	101,480	(160,338)
	Cash generated from operations	1,383,929	211,846

Doctor Kershaw's Hospice

Dr Kershaw's Hospice, Turf Lane, Royton, Oldham, OL2 6EU
www.drkh.org.uk

Tel: 0161 624 2727
Email: info@drkh.org.uk

Reg. Charity No: 1105924

DR KERSHAW'S HOSPICE

England & Wales - Charity number 1105924

Accounts

Doctor Kershaw's Hospice



ANNUAL REPORT & FINANCIAL REVIEW

Year Ended 31 March 2024




You are at the heart of everything we do!





Contents.

Mission Statement 7
Our Values 8
About Dr Kershaw's 11
Management & Financial Details 12
Structure, Governance & Management 13
Our Hospice 14
Audits 19
Patient Experience 20
Clinical Services 22
Learning & Organisational Development 32
Staff Resilience 34
Volunteering 38
Corporate Services 40
Quality, Innovation & Improvement 46
Income Development 48
Strategic Report & Financial Review 56
Statement of Board of Trustees' Responsibilities for the Financial Statements 59
Independent Auditors Report & Financial Statement 64


U'RE
MY
PERHERO
HAPPY
FATHER'S
DAY!
THER'S

Mission Statement.

Our Mission is ‘to add quality to the lives of people with life-limiting illnesses.’

Our Values.

Our Core Value:

You are at the heart of everything we do!

Inclusiveness

We recognise, respect and embrace the diversity of our communities and will ensure and promote equality in all that we do.

Openness & Transparency

We promote and encourage an open culture across all our services and departments and encourage you to share your opinions and ideas with us.

Dignity & Respect

We will treat you with respect and uphold your privacy and dignity at all times.

Responsiveness

We will be responsive to your individual and changing needs and preferences and will be proactive in how we manage these within the wider health and social care system.

Compassion

We will treat you with compassion and be sensitive to your personal needs and wishes.

High Quality Care

We are dedicated to providing the highest quality, holistic care that delivers the very best outcomes for you.




Kershaw
Hospice








Love life
strong
Warrior
Inspiration
Hopeful
The Nightbird Project
2013
My Magical life
laughing
eating
sharing
Happy
Times
together
Grateful




#LOVEDRKERSHAWS
I'M SUPPORTING DR KERSHAW'S HOSPICE
Kershaw's
Hospice



About Dr Kershaw's Hospice.

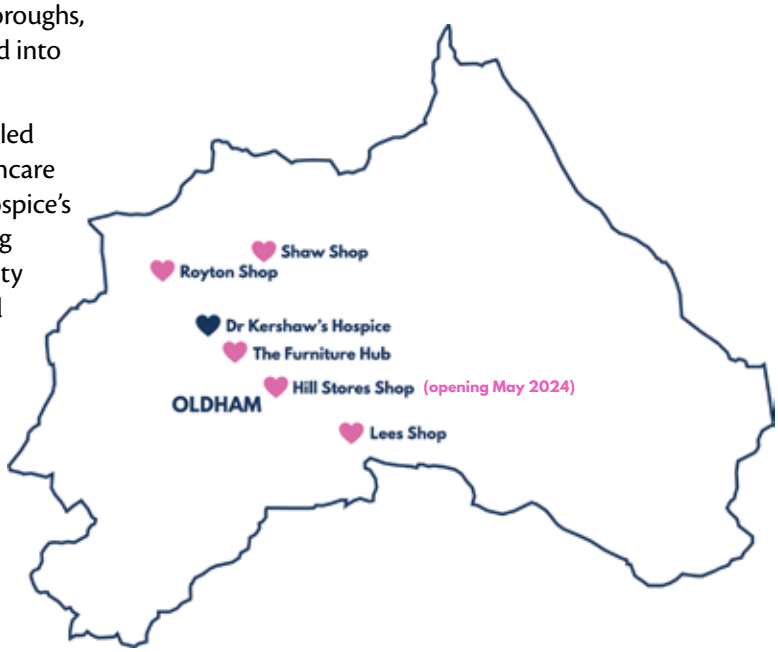
Dr Kershaw's Hospice is an adult hospice serving the Oldham community and its surrounding areas, providing specialist end-of-life and palliative care for those with life-limiting illnesses as well as support for those who are important to them - loved ones, families, friends and even pets.

Dr Kershaw's Hospice opened its doors in 1989 and has been providing high quality care and support for the people of Oldham and the local boroughs, both during a person's illness, at death, and into bereavement - for as long as they need us.

The Hospice has a devoted and highly skilled clinical team of doctors, nurses and healthcare assistants who support patients in the Hospice's Inpatient Unit and Wellbeing Centre along with supporting patients in the community through the Hospice at Home service and Caring Hands, the Hospice's domiciliary care service.

The Hospice reaches out into family homes, hospitals and care homes. We pride ourselves on our ability to offer and provide emotional, spiritual and practical support to our colleagues.

The Trustees (who are also Trustees of the charity for purposes of company law) present their financial statements and annual report for the Year Ended 31 March 2024. The other general information given in this report covers the year between Annual General Meetings.



Acknowledgements.

Dr Kershaw's Hospice's Board of Trustees would like to express their thanks and appreciation to all the funders and supporters, from over the past year, for their invaluable financial contributions. Your donations have enabled Dr Kershaw's to continue its vital work and support patients, and their families, within the community of Oldham.

It has been a pleasure working in partnership with the Greater Manchester Integrated Care System (ICS) and we thank them for their support.

Thanks, must also be given to our Corporate Partners for their generous support, which included, but was not limited to; Comfortex, Co-op, Delete-A-Dent, Molnlycke, Monarch Metals Ltd, NatWest Bank, Northern Pest Management, Olympic Construction Ltd, Park Cakes Bakery, Pilgrim International Ltd, Ribble Packaging, ROC Fire & Security, Roma Publications Ltd, Ryder & Dutton, Spindles Shopping Centre, Tuco Ltd, Urban Green Space Ltd and Yodel – Middleton.

We are also extremely grateful to all the Trusts and Foundations who have given generously to the Hospice throughout the year, including: Action Together, Crane Fund for Widows and Children, Sarah Lees Relief Trust, The Albert Hunt Trust, The Treehouse Trust and Tyl Giveback Community Fund.

The Hospice relies on our local community for their continued support, and we express our sincere thanks to all the individual donors and event participants, without whom our work would not be possible, and to the generous people who left a gift to Dr Kershaw's in their Will, or have pledged to do so in the future. Thank you to you all for your unfaltering support and kindness.

Management & Financial Details.

Trustees.

Dr Paul Cook (Chair)	Appointed January 2020
Jacqueline Wood (Vice Chair)	Appointed January 2021, Resigned 11th June 2024
Jonathan Lipton (Vice Chair)	Appointed January 2015
Sue Briscall	Appointed April 2014, Resigned 28th April 2023
Peter Wakefield	Appointed December 2018, Resigned 20th July 2023
Rachel Damianou	Appointed October 2019
Kim Wrigley	Appointed January 2021
Stephen Schofield	Appointed January 2021
Eileen Jones	Appointed November 2022
Richard Buchanan	Appointed November 2022
Mark Hadfield	Appointed November 2022
David Macdonald	Appointed November 2022
Ian Chapman	Appointed November 2022, Resigned 26th June 2024

Trading Company.

Dr Kershaw's Hospice Ltd	Company Secretary – Rachel Damianou
Company Number – 05221414	Charity Number – 1105924

Senior Management Team.

Adele Doherty	Chief Executive Officer
Dr Matthias Hohmann	Medical Director
Lindsey Harper	Director of Clinical Services
Rebecca Bentham	Director of Income Development & Marketing
Sabrina Dawson	Finance Manager
Lyndsey Donbavand	Corporate Services Manager
Kelly Foster	Inpatient Unit Manager
Sarah Longmore	End-of-Life Nurse Educator
Kathryn Harding	Wellbeing Centre Manager
Corinne Collier	Community Services Manager
Mandi Halton	HR Manager

Banking Services.

Barclays Bank PLC	25 High Street, Oldham, OLI 3AZ
RBC Brewin Dolphin	1 The Avenue, Spinningfields Square, Manchester, M3 3AP
Royal Bank of Canada	1 The Avenue, Spinningfields Square, Manchester, M3 3AP

External Auditors.

Chadwick & Company - Chartered Accountants
Capital House, 272 Manchester Road
Droylsden, Manchester M43 6PW

Structure, Governance & Management.

Dr Kershaw's Hospice organisational governance structure is shown in the diagram below.

Board Governance Structure - 2023/24.

Board of Trustees		Advisory Role
Chair:	Dr Paul Cook	Executive Support
Vice Chair:	Jacquie Wood	Community Engagement, HR, Volunteers/OD
Vice Chair:	Jonathan Lipton	Medical /Finance
Vice Chair:	Peter Wakefield	Finance
Company Secretary:	Rachel Damianou	Legal
	Sue Briscall	Clinical
	Kim Wrigley	Clinical
	Stephen Schofield	Income Development
	Eileen Jones	Income Development
	Richard Buchanan	Income Development
	Mark Hadfield	SQuWiD
	David Macdonald	Information Governance
	Ian Chapman	Finance

PA to the Board
Beverley Schofield

Executive Team	
CEO	Adele Doherty
Medical Director	Dr Matthias Hohmann
Director of Clinical Services	Lindsey Harper
Director of income Development & Marketing	Rebecca Bentham

Sub Committee	Chair	Vice Chair
Strategic Governance	Dr Paul Cook	Adele Doherty
Clinical Governance	Lindsey Harper	Sue Briscall
Financial Resourcing	Peter Wakefield	Adele Doherty
Information Governance	Rebecca Sarbutts	Paul Cook
Income Development & Communications	Rebecca Bentham	Stephen Schofield
Safety, Quality, Workforce, Innovation & Development	Adele Doherty	Jacquie Wood

Exended Senior Management Team	
Inpatient Unit Manager	Kelly Foster
Corporate Services Manager	Lyndsey Donbavand
Human Resources Manager	Mandi Halton
End-of-Life Educator	Sarah Longmore
Community Services Manager	Corinne Collier
Wellbeing Centre Manager	Kathryn Harding

Our Hospice.

Safeguarding.



Dr Kershaw's Hospice is fully committed to safeguarding the welfare of all those we care for, our visitors and staff. We promote an ethos that embraces diversity and inclusion and respects the rights of all involved within our services. We recognise our responsibility to promote safe practice and to protect all from harm. We have measures in place to ensure we are able to handle safeguarding issues effectively:

- The Hospice has proactive membership within the Oldham Safeguarding Adults Board governance structure and is an active participant in Greater Manchester Hospices Safeguarding Forum.
- The Safeguarding Vulnerable Adults and Safeguarding Children Policies form part of our core policies that all staff must read.
- We have a Safeguarding and Deputy Safeguarding Lead for the organisation, they complete Level 5 Safeguarding training every three years.
- The Hospice ensures that it adheres to the six principles of safeguarding and this is referred to throughout the core mandatory training and delivered in line with RCN intercollegiate document recommendations.
- The Hospice has promoted all aspects of safeguarding training in a bespoke manner. All staff must undertake a range of training including:
  - Safeguarding Adults
  - Safeguarding Children
  - Prevent
  - Restraint
  - Mental Capacity Act, Deprivation of Liberty (DoLs) and Restraint (Clinical Staff)
  - Equality, Diversity and Human Rights
  - Learning Disabilities, Autism and Mental Health Awareness
  - LGBTQ+ Awareness
  - Chaperones and Consent (Clinical Staff)

- Our volunteers are required to complete Safeguarding Training upon joining and every three years.
- We have a number of staff members trained as Mental Health First Aiders.
- Established safeguarding supervision for staff with an associated policy adhering to the supervision standards.
- The Hospice has tried and tested systems in place for reporting safeguarding incidents and concerns. Safeguarding incidents at the Hospice are rare but processes are in place to manage these.
- The Hospice has an ethos and a culture of proactive and reflective learning. Any incident or safeguarding concern is seen as an opportunity to drive quality and improve systems.
- Safeguarding, DoLS and DBS audits form part of the Audit Calendar.
- We have robust recruitment practices in place with mandatory DBS processes for staff and volunteers including renewals.

Our Hospice.

Information Governance.

During 2023/24, the Hospice has continued to develop the Information Governance programme and has made several developments with the support of our partners – our contracted Data Protection Officer from St Ann's Hospice, North West Cyber Resilience and Foresight I.T. Services.

Data Security Protection Toolkit

The team worked hard to meet all of the standards set out in the Data Security Protection Toolkit and in June 2023, we submitted our annual toolkit and met all of the mandatory requirements.

Cyber Essentials

This year we took the important decision to expand the scope of our Cyber Essentials accreditation and included the trading company. Foresight I.T. Services have continued to assist in meeting all of the technical requirements set out by Cyber Essentials. Due to the expanded scope and the extra requirements around 'bring your own device' we plan to submit our evidence for certification in 2024-25.

North West Cyber Resilience

The Hospice continues to utilise the services offered by North West Cyber Resilience and complete bi-annual phishing campaigns to support awareness amongst staff and find compliance issues. Overall, we have been happy with the outcome of the phishing campaigns and extra training has been delivered where necessary.

Senior Information Risk Owner

The Chief Executive became the Senior Information Risk Owner (SIRO) and completed training in April 2023 along with the Clinical Data & Quality Manager. In January 2024, we strengthened the information governance workforce which led to a change of role for the Clinical Data & Quality Manager to Information Governance & Data Systems Lead.



Our Hospice.

Organisational Governance.

The Board of Trustees are fully committed to the values and principles of the Hospice.

They are accountable to the Charity Commission to act in the best interests of the Hospice and to manage its resources responsibly whilst seeking to minimise risks.

They have continued to ensure that Dr Kershaw's has a clear strategy, that it remains true to its original vision, and that it complies with all necessary rules and legal obligations.

The day-to-day management of the Hospice is under the direction of the Chief Executive and the accompanying Executive Team. The Hospice, with oversight from the Board, has progressed well with the strategic objectives set out in its current 5-Year Strategy.

The Chair wishes to thanks all our staff and volunteers in delivering another successful year, despite challenges within the healthcare system, and our Trustees for the significant time commitment and contribution to improving outcomes for users of Dr Kershaw's services.

2023-24 has been a year of change with a new Chair and Chief Executive Officer starting in April 2023, following handovers from their predecessors. The year saw constructive changes in organisational governance, with a thorough review of Board policies and procedures and a round of Board development workshops. Lines of responsibility and authority are clearer to both Board and the Executive Team.

This has put Dr Kershaw's Hospice in a better position to continue serving the Oldham community that continues to support us unwaveringly. Thank you to all our supporters.

Our implemented investments strategy has provided a welcome new income stream to the Hospice, and improved financial and risk management processes are bearing fruit.

Throughout the year, the Hospice maintained strong financial governance, ensuring effective oversight and accountability in all financial matters. Prudent financial management and strategic decision-making have contributed to a positive financial performance, allowing us to meet our goals and continue investing in key areas. The stability ensures the long-term sustainability of our services and supports ongoing infrastructure improvements.

Dr Kershaw's Hospice is a charitable company limited by guarantee and is registered under the Companies Act 1985, company registration number 05221414, charity registration number 1105924. Its activities are governed by its Memorandum and Articles of Association given at Companies House on 3 September 2004 as amended on 18 January 2024. The principal and registered office is Turf Lane, Royton, Oldham, Lancashire, OL2 6EU. In the event of the charity being wound up, the liability in respect of the guarantee is limited to £10 per member of the charity.









Audits.

In 2023, the Quality Team continued to progress a number of initiatives and developments throughout the year. There is a well-established audit calendar that includes all clinical and non-clinical departments. The audit results, summaries and associated action plans are displayed in the Hospice so that all staff are able to engage with the audits.

The Quality Team continue to have an effective oversight of all audits and action plans therefore enabling the team to track audits to completion, schedule in audits that need to be recompleted and analyse compliance.

The Quality Monitoring Calendar is regularly updated, this provides assurance and monitors all of the audits that are completed throughout the Hospice alongside the responsible staff member and how frequently it is completed and this is split into the five CQC domains.

Within the Clinical Audit Calendar, we introduced the Hospice Assessment and Accreditation System Audit (HAAS), this is a framework that incorporates key clinical indicators and the five standards set out by the Care Quality Commission (CQC) measuring the quality of care. In June 2023, this annual audit was carried out and we achieved a very impressive 100%. We have added this to our audit calendars and will complete annually.

Overall Audit Compliance 2023-24

94% Overall Clinical

93% Overall Non-Clinical

94% Overall

Patient Experience.

Dr Kershaw's is always looking to initiate service improvements; therefore, feedback is extremely important to us. In the last year (April 2023 to March 2024) we received 343 compliments from service users and their loved ones in the form of surveys, cards and feedback forms.

Within the survey, we include the Friends & Family Test questions enabling us to participate in national data collection activities. The annual results of the Friends & Family Test show that 96% of respondents rated our service as 'Very Good', the highest rating.

Within our surveys, we ask patients and their loved ones whether there is anything that we could do to improve our services in order to gain insightful and constructive feedback. In this financial year, we received nine concerns raised in survey responses. These concerns were investigated thoroughly by our Senior Clinical Team and the respondents were contacted and all concerns were resolved satisfactorily with actions taken to improve services.

The common themes in the responses were around communication. In order to improve services, we have implemented several new processes. These have included, additional information being added to the patient handover sheet, discharge planning meetings being held for every patient who is being discharged from the Hospice, and clear identification of the patient's chosen next of kin is now documented on the patient care electronic recording system.

In our Steering Group Meetings, we have developed dashboards which include compliments and complaints so that positive feedback and learning outcomes could be shared. We share feedback and patient stories at our Steering Group Meetings to ensure everything we do enables the highest quality care.



> Excellent service, very supportive staff were attentive, caring and treated us with dignity and respect, nothing was too much trouble.

Friends and Family Test Data 2023-24

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
Very Good	38	30	23	39	130
Good	1	1	0	0	2
Neither Good nor Poor	0	0	0	0	0
Poor	0	0	0	0	0
Very Poor	0	0	0	0	0
Don't Know	0	0	0	0	0
Not Answered	0	2	1	2	5

> I would recommend your services to anyone who is going through this sad event in their lives. I have so many fond memories of the girls joking with mum regarding her pjs. They were like a breath of fresh air every time they came. I honestly don't know how they do it. My thanks goes out to them!

> The girls were a godsend and I felt very relieved when they arrived. I don't know what I would have done without them. They gave me as my mother's carer the strength to carry on.

Clinical Services.

Inpatient Unit.

Dr Kershaw's Hospice worked closely with the NHS commissioning teams in Oldham to develop a range of additional clinical services that enhance patient choice, patient flow and utilisation of hospital beds. The Hospice received additional NHS funding for these services and has been more financially sustainable as a result.

> **The staff provided me with a bed, so that I could lie next to my wife. I was alerted in the night and was able to share her final moments. I was able to embrace her and say the words I needed to say. For this I am deeply grateful.**

Due to the success of the Step-down and In-reach services last year, we were able to continue with these services from September 2023. The services support patient flow and discharges from the acute sector, whilst also allowing our Hospice senior nurses to recognise patients in need of end-of-life care during their daily attendance at the hospital site.

Step-down: The Step-down Service allows us to offer care for patients that are to be discharged to their home or to a care/nursing home safely with appropriate social support. A number of Hospice beds were made available to accept patients from hospital who no longer need to be in hospital and who do not meet the Hospice's usual admission criteria. This helps with patient flow at the Royal Oldham Hospital: patients are discharged more quickly so that hospital bed capacity is utilised to its best potential. The Hospice will then identify the best suited next place of care and provide proactive discharge support.

In-reach: The In-reach Service aims to recognise patients that need end-of-life care that would be more suitably cared for in a hospice setting. A dedicated nursing sister liaises directly with the Royal Oldham Hospital's Emergency Department (A&E), Acute Medical Unit (AMU) and Integrated Discharge Team every working day. This scheme has helped identify patients suitable for transfer to the Hospice and has prevented avoidable hospital admissions when patients were transferred straight from A&E to the Hospice.

Palliative Care: We continue to provide excellent palliative and end-of-life care and we accept referrals for end-of-life care and complex symptom control. From April 23 – March 24 the total admissions to the IPU were 223, an increase of 14.5% on the previous year, and overall occupancy was 74%. This is an increase of 6% on the previous year. Preferred Place of Death achieved 99%, and average referral to admission time for palliative, Step-down and in-reach patients was 2 days.

Virtual Ward: Community palliative care services were nurse-led in 2023/24. More complex pain and symptom management patients typically required admission to the Hospice Inpatient Unit so that they can receive intensive specialist medical input in order to achieve better symptom control. Not every person agrees to Hospice inpatient admission, though, for a variety of reasons. The Virtual Ward service provides similarly intensive medical input for patients who choose to remain at home. This has given patients more choice.

223
Admissions to the IPU

2 days
Average referral to admission time for In-reach & Step-down

99%
Preferred Place of Death achieved




Kershaw's Hospice
Kershaw's Hospice

Hospice at Home.

Our Hospice at Home service continues to benefit the local community by providing individualised, responsive and flexible end-of-life care. The Hospice at Home Team work alongside and in addition to services provided by the Community Nursing Team, Home Care providers and Specialist Palliative Care Nurses.

It is a rapid response service aiming to reduce the need for hospital admissions and allows patients, in their last weeks of life, to fulfil their wish to die comfortably at home. In total, 257 patients were cared for in their own homes with 504 of the visits made being deemed urgent. These urgent visits would have resulted in a hospital admission if our Hospice at Home Team had not been able to respond so quickly and support these patients and their loved ones when they needed it most. The team made 5,884 phone calls to patients, relatives and other health professionals whilst supporting the delivery of quality care, and working in collaboration with our community colleagues.

457
Urgent visits within 1 hour

257
Total patients cared for

95%
Preferred Place of Death achieved

504
Urgent visits (hospital admission avoided)

5,884
Phone calls

Hospice at Home Visits	2021/22	2022/23	2023/24
	2,051	2,261	2,255

> **Excellent care received for my mum who died at home. Everyone involved was kind, caring and respected my mum's dignity. They were also very kind to me during what was a difficult time.**

> **When you're getting help from the staff of Hospice at Home it provides care for the patient, but also helps to keep your head in the right place at a time when you may not be thinking as logically as usual.**


















Kershaw's
Hospice







Caring Hands.

Caring Hands is a domiciliary care service and has an excellent reputation for providing high quality, personalised care for patients with a rapidly deteriorating life-limiting illness. The team is specially chosen with well-trained Health Care Assistants visiting patients in their last weeks or months of life in their own homes.

The service offers individualised care that is flexible and responsive to the patient and their loved ones. Throughout the year, the team cared for 136 patients and put in place an individualised care package for each service user. They have provided 9,709 hours of care for people in their own homes when they need it most.

This year we hoped to expand this essential end-of-life care service to include support over-night. We produced a business case and applied for funding via several routes, including local commissioners, and a Hospice UK grant. Unfortunately, we were unable to secure funding, however this is something that we are hoping to re-visit, due to the gap in provision and the need of our local community.

In the new financial year, we will be moving to a digital system to record care for our Caring Hands service users. Ensuring that a live record is available to record and share information is a national requirement with 80% of CQC registered social care providers expected to be utilising digital social care records by March 2024.

7,622
Visits

136
Patients cared for

9,709
Hours

93%
Preferred Place of Death achieved

Caring Hands Visits	2021/22	2022/23	2023/24
	8,468	7,792	7,622

> They bathed her, they helped her with her comfort and they not only cared for her but they CARED. They were kind, they were patient and they were interested. It didn't seem to be just a job for them, it was as if they were our friends (as indeed they very quickly became).

> The Caring Hands Team gave my husband all the help he needed to wash and shave, they were always very pleasant, with a smile and a joke when needed.

Wellbeing Centre.

Our Wellbeing Centre services have grown significantly, with the overall number of attendees for this year being 1745, which in comparison is more than double the 691 attendees of the previous year. Confirming that our new model of care better meets the needs of specific populations and service users.

We run groups that are targeted and specialised, and have worked with teams from Macmillan, The Christie, Oldham Memory Assessment Service and other local care providers to ensure that our support is accessible and equitable to those who need it.

The majority of our groups are now well established and are regularly well attended, with new people accessing services week on week.

Dementia Hub: A weekly nurse led drop-in support service run in collaboration with Oldham Memory Assessment Service, and specially chosen Hospice volunteers, which has been running since November 2022. We have seen numbers increasing week on week, and in response to this we have developed the service by introducing an additional afternoon session. This has allowed us to better manage the number of attendees and offer more time and space to new attendees in the afternoon session. The Dementia Hub supports anyone who is affected by dementia: people living with dementia, carers, people who have concerns about themselves or a loved one. Nurses specialising in dementia care and palliative care will be available for support. There are opportunities to socialise with a brew and a biscuit and offer and receive peer support from others in similar circumstances.

Music in Mind: Music Café for Dementia. This is a weekly group bringing moments of joy, connection and true expression to people living with dementia, their carers, their family and friends. Group sessions are designed to provide support to all who attend, delivering genuine care through the power of music, delivered by our in-house trained Music Champions.

Men's Group: A fortnightly, counsellor led small group exclusively for men living with life-limiting illnesses. Attendees have the opportunity to meet regularly, spend time with those who have similar experiences, offload about and explore the impact of illness, and offer and receive peer-led support.

Social Group: A fortnightly social meeting open to anyone connected to the Hospice was facilitated until early 2023, when the group was reduced to monthly due to reducing numbers. We will continue to monitor and review this group in the new year.

Complementary Therapy and Crafts: Our Complementary Therapist supports patients, relatives/unpaid carers and bereaved people with one-to-one sessions in the Complementary Therapy room or in the patient rooms on the IPU. Our Complementary Therapist also facilitates a monthly Complementary Therapy and Craft Group with support from our volunteers. The focus of this group is to enhance wellbeing and relaxation through craft and complementary therapies. Anyone with a connection to Dr Kershaw's is welcome to attend this monthly group.

Carer Support Group: A fortnightly group that is specifically for carers of people living with dementia. Lead by a Therapist, each session includes opportunities to share about the ways being a carer may impact on wellbeing. There is space for peer support, facilitated conversations, and each session ends with a group relaxation delivered by our Complementary Therapist.

Relaxation Group: A weekly guided relaxation session, facilitated by our Complementary Therapist. This group is open to patients living with a life-limiting illness, carers of people living with a life-limiting illness and those who are accessing our bereavement support services. The session is delivered in a relaxed group setting. We are developing this session currently to include wellbeing/health promotion advice and will be producing a 12-week running programme in the new financial year.





> **I love going to the Dementia Hub, it's a release for me. My husband is so within himself normally, but at the Hub he just laughs. I can't wait for Wednesday mornings. It's just nice to have someone else to share your problems with.**

The Nightbird Project: This is a Creative Wellbeing initiative running from March – September specifically for people living with life-limiting illness. Each session explores a different artform alongside facilitated therapeutic discussion, and peer-lead support. Sessions are delivered collaboratively by a Counsellor and Artist, and attends to the emotional and psychological impact of living with life-limiting illness.

The project was inspired by a former patient who died in the Hospice in September 2021 after receiving care from us for the last year of her life. She discovered and found comfort in her creative self during the course of her illness, and also wanted to share her life story with others.

Reflecting on this with her husband, we wanted to facilitate this experience for others affected by serious illness, and so The Nightbird Project was designed to support people to share their life stories in creative ways.

We have brought together a supportive group of incredible people all impacted by life-limiting illness, and have shared our stories, our laughter, our creativity and our friendship to wonderful effect.

The first Nightbird Project ran from March 2022 – September 2023 and was funded by The Hospital Saturday Fund.

The continued delivery of this project is reliant on external funding, and we were grateful to receive funding from the Albert Hunt Trust to run the project for the second year.

Bereavement Support.

Bereavement.

We understand that individual grief, and dealing with a bereavement is different for everyone, and this year we have expanded our bereavement services in recognition of this, giving our patients' loved ones more choice with how to access and experience bereavement support.

Bereavement Support Groups:
A facilitated group that is counsellor led, with volunteer support. Open to the bereaved community of Dr Kershaw's Hospice patients, the group runs from Winter through to Spring. Attendees receive a mixture of facilitated time and space for understanding and normalising grief and loss, alongside peer-led discussions and group support of people who have experienced the loss of a loved one who was being cared for by one of our Hospice services. This service is offered 6 months+ post bereavement. There was a 45% increase in attendances at group sessions this year compared to the previous year.

45%
Increase in attendances at group sessions this year

Wellbeing Walks: A regular group, meeting on the last Friday of each month, promoting overall wellbeing for those affected by loss. This is a wellbeing initiative open to the bereaved community of Dr Kershaw's Hospice. The walk is facilitated at a gentle pace, enjoying a different local park each month. All walks are fully risk assessed with a recce undertaken by the counsellor prior to introducing the walk to the group. This forms part of the bereavement support offered. Group members are responsible for their own health and safety, and must arrive in appropriate attire. The group meets at 10.45am, and the walk starts promptly at 11am for approximately 1 hour. Members stay for brews and conversation afterwards in the park café.

We provide bereavement and wellbeing resources in collaboration with Me and My Therapy, a counselling service specialising in bereavement and loss, to support children to communicate and process complex feelings about loss and bereavement. We also provide books with messages that are evidence-based and age appropriate to support children and young people as their loved ones are accessing Hospice services.



Counselling.

Our full-time Counsellor started at the Hospice in August 2022, and has made a strikingly positive impact across our Inpatient and Wellbeing Services. The Counsellor offers specialist psychological support where required on the Inpatient Unit, as well as one-to-one counselling sessions and group support to people accessing our Wellbeing and Bereavement Support Services. We have seen a 104% increase in the number of one-to-one counselling sessions facilitated this year.

In response to this increase and a desire to introduce a Counsellor led carer support group, we have employed a second full-time Counsellor who has been a very welcome addition to the growing Counsellor Team, and Wellbeing Centre Services.

103
One-to-one sessions

The Medical Team.

The Senior Medical Team at Dr Kershaw's Hospice is a small group of experienced doctors, the vast majority of whom have been Hospice employees for many years. In 2023, we welcomed Dr Thorley to the Hospice Team. In her day role, she is the Palliative Care Consultant at the Royal Oldham Hospital. In her Hospice employment, she provides weekend on-call duties. In January 2024, Dr Killeen joined the team on a 12-month fixed-term basis to cover maternity leave. Both integrated seamlessly and have been highly respected and valuable additions to the team.

Training

Dr Kershaw's Hospice is a training environment for junior doctors. In 2023/24, we trained nine Foundation Doctors and four GP Specialist Trainees. Feedback on these placements at Dr Kershaw's Hospice is always excellent. The Hospice and palliative care experience is beneficial for any future medical career, and some doctors may even choose to go into a career in palliative medicine themselves.

Journal Club

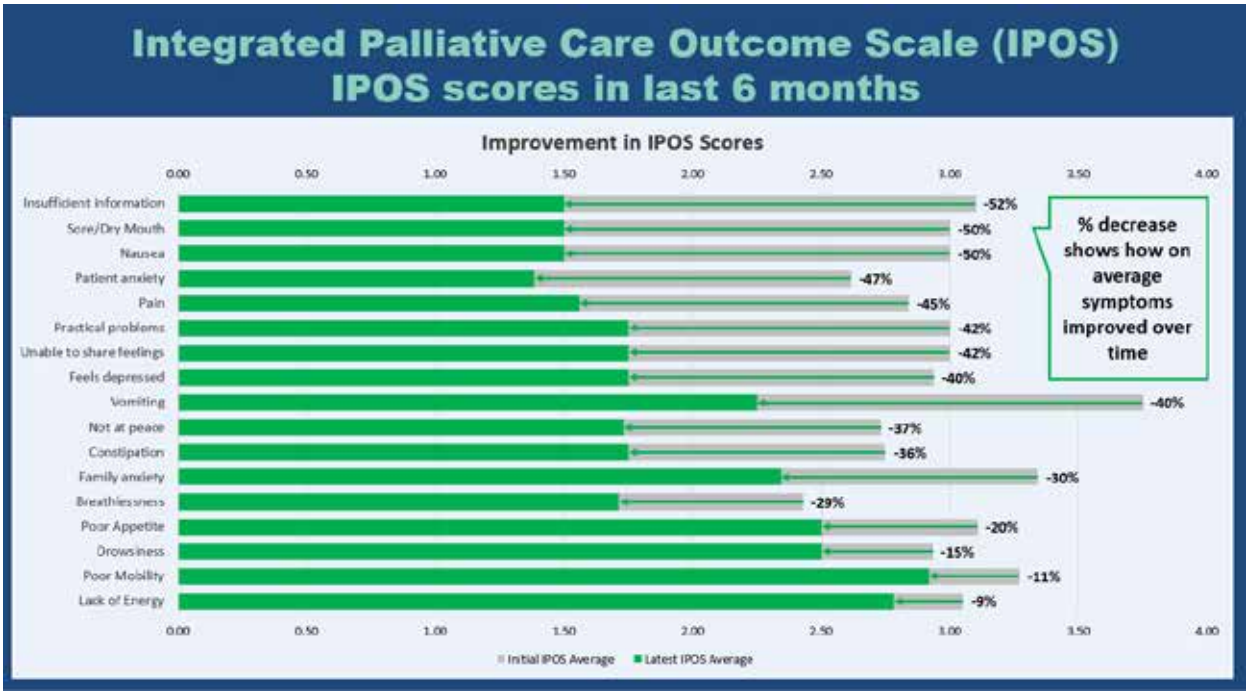
The doctors meet every other month to present, dissect and analyse 2 papers from medical journals. This helps us understand and keep up-to-date with evidence and developments in clinical practice and sharpens our evidence appraisal skills. We discuss whether we should change our clinical practice and rate the paper for its impact. It has been a very positive experience for both senior and junior doctors and contributed to our continuing professional development.

Research

In September 2023, Dr Kershaw's Hospice became a Research Hospice. This has been a long-term strategic aim and marks a milestone in the Hospice's history. We successfully enrolled in the CHELsea II trial, a large national multi-centre randomised controlled trial sponsored by the University of Surrey. The trial examines burdens and benefits of hydration support ("drip") in the final days of someone's life. We received praise from the University of Surrey for the quality of our research work and for our proactive recruitment efforts.

Outcomes (IPOS)

The Hospice's Medical Team collects patient reported data about the positive difference that an admission to the Inpatient Unit makes to people's lives. Most symptoms and issues are very significantly improved when a patient receives care on the Hospice ward:



Learning & Organisational Development.

Dr Kershaw's Hospice is committed to the development of its staff and aims to provide a working environment in which staff are able to maximise their performance, commitment and contribution. This is supported by the End-of-Life Nurse Educator based at the Hospice.

At the Hospice, we provide a Mandatory Training Programme via a blended approach to learning including face-to-face, online and practical methods of teaching. This reflects current practice and is consistent with relevant national and local regulations/legislation. Mandatory training compliance has been consistently high all year and we have expanded the programme to include Learning Disabilities, Autism & Mental Health Awareness and LGBTQ+ Awareness for all staff to promote inclusive practices.

We arrange a comprehensive two-day induction for all staff that are new to the Hospice, they are welcomed with a full orientation to help them settle into their new roles and ensure that they have the knowledge and support they need to perform their roles. We aim to give them background on the Hospice and its culture, information on the services we provide and our core values that we expect all staff to adhere to. During the induction, staff are introduced to their mandatory training requirements. Face-to-face sessions are presented over the two-day induction and time is also allocated to gain IT access and complete their computer based/online mandatory training.

The Education, Training, Learning & Development Strategy which was developed in 2022 has been recently updated outlining our objectives, vision and values. This has enhanced our high-quality care to all patients.

Our Education and Training Prospectus is published on our website for ease of access to the most current offer of courses available. It is our mission to provide excellent education and training to improve the knowledge, skills and attitudes of our staff and volunteers. We also deliver training to our external partners in order to share our specialist knowledge in palliative and end-of-life and to promote best practice. We receive excellent feedback on our training sessions from both external candidates and staff in-house at the Hospice.

We deliver a wide range of specialist palliative, end-of-life and non-clinical in-house training, including but not limited to:

- Naso-Gastric (NG) Tube Placement & Management for Gastric Drainage
- Tracheostomy Care & Management
- Non-Invasive Ventilation
- Venepuncture & IV Cannula Insertion & Care
- Supporting a Healthy Bereavement
- Grief Awareness
- Mayfly Advance Care Planning Programme
- Palliative Care Emergency Training
- Delegation
- Team Building
- Communication Skills
- Presentation Skill

In order to deliver this training, we use specialist equipment including a training defibrillator and a patient care simulator mannequin for hands-on training in a wide range of skills required for day-to-day patient care. Work has commenced on a clinical skills suite on the Inpatient Unit to facilitate and simulate clinical training in the clinical environment.

We also work in collaboration with our partner organisations, Northern Care Alliance and Pennine Care NHS Foundation Trust, to provide on-site training to Trainee Nurse Associates (TNAs) and bespoke placements.

> **Prior to my training at the Hospice I viewed end-of-life care negatively and was almost fearful of having to be involved. This training has taught me that it is actually an honour and a privilege to be involved with someone's end-of-life care.**

- Basic Life Support 96%
- Communication 100%
- COSHH 100%
- Data Security/ IG 98%
- Dementia Awareness 100%
- Equality & Diversity 100%
- Fire Awareness 98%
- Food Hygiene 100%
- Hand Hygiene 100%
- Health & Safety 100%
- Infection Prevention 100%
- Manual Handling 97%
- Prevent 100%
- Safeguarding Adults 100%
- Safeguarding Children 99%
- Waste Management 100%
- ANTT 100%
- Blood Transfusion 93%
- Falls Awareness 97%
- Health Record Keeping 100%
- Medicines Management 89%
- Nutrition & Hydration 100%
- Oral Care 100%
- Pressure Ulcer Prevention 98%
- Syringe Driver 95%
- Nebuliser 95%
- Oxygen Therapy 100%
- Suction 95%
- Chaperones & Consent 100%
- Tracheostomy – Theory 90%
- Verification of Death 100%
- Mental Capacity Act 90%
- Mental Health Awareness 100%

Overall Mandatory Training compliance 99%



Staff Resilience.

Healthy Workforce.

Our Wellbeing support for our Staff has continued to both consolidate and grow throughout the year. Our commitment and focus on maintaining a healthy, content, resilient and productive workforce ensures they are able to work to the best of their ability.

Recognition of Staff
Thanking staff for their excellent attendance in work, demonstrating their dedication and commitment to their roles over the last 12 months. Being a small organisation, wherever our staff work across the Hospice, it is important that they remain well and able to attend work, as they are at the heart of everything we do.

High rates of attendance across the Hospice also ensure we can continue to provide the high quality care and all of our services for our patients and the community.

In celebration of the King's Coronation, all staff were awarded extra annual leave, giving additional down time for staff to switch off and re-charge from their busy roles at the Hospice.

People Management Programme (PMP)
PMP is a 12 month programme delivered internally covering a range of management and HR processes to engage and develop our team leaders and managers currently in post and those who aim to be a manager in future. Our first 10 attendees graduated in November 2023 and we hope to run another programme for our staff again soon.

The aim of PMP is to enable our staff to be better able to:
- Understand themselves better
- Select staff using a fair process
- Manage and motivate staff at work
- Assess staff skill levels
- Take action in dealing with absence and conduct/ disciplinary issues
- Recognise the value of employment legislation
- Support and develop their team

Annual Staff Survey
Each year we take a snapshot of our staff's opinions and views about the Hospice, their roles and working environment, often focusing on specific topics. The feedback staff share anonymously is then analysed and actions can be drawn from this to make any improvements where possible.

Expansion of our Mental Health First Aiders (MHFA)
Staff wellbeing and resilience is vital at the Hospice and we are supported by a growing team of qualified MHFAs who can offer support and signpost any staff feeling overwhelmed or in a crisis. This year we have gained an additional two MHFA's to the team in place.




Kershaw's
Hospice



Staff Resilience.

Healthy Workforce.

Stay Interviews Set Up to go Out to Staff
Our electronic system Vantage is helping to give us information about why our staff enjoy working at the Hospice by sending out the Stay Interviews designed by HR. Rather than wait until a staff member is leaving the organisation to discover if we could make improvements at the Hospice we now ask staff in post why they stay and what their views are on a variety of issues. This feedback is invaluable in our continuing to add value towards making the Hospice the best environment it can be, for staff, patients and visitors.

May - Wellbeing Week (including issuing of first long service recognition award badges to all staff)
To recognise the service and commitment of our staff we introduced a pin badge celebrating the different years of length of service. These were given out to all staff during our Spring Wellbeing week, which offered staff the opportunity to take part in complementary therapy, craft and wellbeing activities along with a self-funded staff lunch, creating time for colleagues to catch up and spend time with one another.

January Wellbeing Week
Post- Christmas we offer another week of wellbeing activities to staff. This Wellbeing week introduced a dance and movement session, sweet treats from our kitchen and paraffin wax treatments for tired hands, along with the popular complementary therapy offerings and our staff self- funded lunch get together.

Submission for Oldham Business Awards – Workforce Health & Wellbeing
The Hospice focuses on staff wellbeing in many ways and recently submitted an application to the Oldham Business Awards in recognition of these efforts, in the Workforce Health & Wellbeing category.

Reflection Rounds
Our programme of Reflection Rounds continues quarterly, giving the opportunity for staff across the disciplines and departments of the Hospice to come together briefly to focus on the topic of the round and offer insight and share ideas and thoughts with each other, helping create a stronger understanding and appreciation of each other.

Vision & Values Sessions Run by the CEO
The CEO launched a series of Vision and Values presentations for all staff Hospice-wide with the purpose of sharing the bigger picture of our incredible organisation and its direction for the future. With four Vision and Values presentations now complete, it has assured that staff are much more engaged and are now fully aware of the direction that the Hospice is going in.





Volunteering.

The growth of the Volunteer Team and the offer available to volunteers has led to the successful development of a new role within the Volunteer Department this year.

The addition of this role has allowed for the team to develop a more diverse range of social opportunities for volunteers, not only to recognise their contribution but to allow them to engage with the Hospice further. A successful grant application through the One Oldham Fund enabled the team to source the required resources to implement this social calendar. The new role of Volunteer Engagement Assistant has also brought about the introduction of Volunteer Welcome Sessions, an improved Volunteer Handbook and the creation of a Volunteer Lead Handbook to better support staff in their roles.

A priority for the Volunteer Department this year has been to develop and implement an engagement plan with a strong focus on more diverse recruitment opportunities. Particular focus has been paid to retail volunteer opportunities, including the staffing of the new Hill Stores shop. The Volunteer Team have experienced particular success with retail taster sessions, allowing applicants to meet the incredible teams already in situ, and also through community engagement opportunities.

This year, volunteers have been offered a small library of specialist training modules on an optional basis, with a focus on inclusion, diversity and dementia support. Volunteers in specific roles have also benefitted from access to Me and My Therapy workshops, Cyber Resilience sessions, Tool Box Talk Training packs and Music in Mind Training. Additional training opportunities are always well received with good attendance levels.

Through working closely with other Hospice teams to understand their volunteer requirements, the Wellbeing Centre now has a full team of experienced volunteers, there is increased support available to events and marketing and a new companion role has been launched on the Inpatient Unit.

In the last financial year, we have been incredibly lucky to have 392 volunteers contribute 36,195 hours of their time to the Hospice, with a cost saving of £374,967 to the Hospice.

£374,967
Cost Saving

36,195
Hours

392
Volunteers

> It is such a privilege to volunteer at Dr Kershaw's.

> I absolutely love volunteering! The staff are fabulous!

> Dr. Kershaw's is a beautiful place to volunteer. I feel so valued.

> Volunteering is fun and I feel like it will assist me to get a job in the future.






Human Resources.

With the cost of living crisis and increase in utility bills, our focus in HR, this year is on a healthy workforce, as a top priority at the Hospice. Our commitment is to providing a working environment that supports the wellbeing of our staff, and we continue to look for new activities to suit all staff during our Wellbeing Weeks. Retraining is also due to take place for our team of Mental Health First Aiders.

Remaining in place across the Hospice is clinical supervision, Reflection Rounds, staff meet and greets, staff surveys tips and techniques for general wellbeing. We also continue to offer staff counselling sessions, a cycle to work scheme, a staff discount card, access to a staff food and toiletries pantry, membership of a discounted food shop, and the opportunity to enjoy a discounted meal from our Catering Team, or in Café K which has just had a fabulous re-fit thanks to one of our Corporate Volunteers.

Both our Wellbeing Strategy and Recruitment & Retention Strategy have been reviewed this year and are firmly embedded and in place across the Hospice.

HR undertake all our recruitment processes as our staff numbers continue to grow in order to meet the needs of our community. From Induction to providing bespoke training, in line with our values, HR continue to endeavour to be as responsive as possible to all staff requests and requirements.

Corporate Services.

Housekeeping.

The Housekeeping Team have effectively responded to the increased service activity during 2023-24 by maintaining a clean and safe environment throughout the Hospice. This was positively reflected in the PLACE inspection conducted in 2023 where the Hospice environment was complimented on for being 'exceptionally clean and well maintained' throughout.

An assessment of the cleaning schedules was completed, which optimised workflow and factored in additional cleaning frequencies including routine and deep cleaning, where required. A full review of the approved cleaning products was also carried out during 2023-24 and following a successful trial of Buckeye International Eco-Friendly Pro the Housekeeping Team have integrated a range of their cleaning supplies, which is supporting the high standard of cleanliness and hygiene whilst prioritising the health and safety of the Hospice environment.

Feedback received from the survey of your experience of our services in 2023-24 in relation to the housekeeping service were positive with 98% rating the cleanliness of the premises excellent.

> "High standard of hygiene and care, lovely atmosphere."

> "Lovely care in a peaceful, lovely environment."

> "Better than a 5-star hotel, really excellent service all round."



Corporate Services.

Reception.



The Reception staff and volunteers have continued to provide a professional and friendly front-of-house Reception service throughout 2023-24 ensuring all visitors to the Hospice feel welcome and valued.

A range of standard operational procedures have been developed and implemented to ensure continuity of agreed processes and procedures are applied during each reception shift and this has proved beneficial following the positive feedback received from reception volunteers and the enhanced confidence they feel they have gained.

Communication has been a development area, which has had positive interdepartmental success and is contributing to delivering an efficient reception service.

In March 2024, the Hospice invested in an electronic signing in and out system for Reception. The system will add a range of benefits including:

- increased efficiency in streamlining signing in and out processes for staff, volunteers, visitors and contractors
- security in protecting sensitive information and to facilitate compliance with regulatory requirements and standards related to visitor management and data privacy
- enhanced fire evacuation procedures by providing real-time monitoring to better protect the safety and wellbeing of all individuals present inside the Hospice at the time of an evacuation and ensuring everyone has safely left the Hospice building and accounted for
- offering a professional, modern and user-friendly experience for visitors to the Hospice

Corporate Services.

Catering.

The Hospice's Catering service has developed significantly during 2023-24.

Café K is now a striving and popular feature within the Hospice for staff, volunteers and visitors. The Catering Team have slowly but surely worked hard to have the right balance of options available including breakfast, rotational menus, daily specials and showstopping cakes. Feedback received throughout the year has been exceptionally positive and through many conversations held with the Hospice's Wellbeing Centre staff they have reported that service users feel that the café has provided a safe space for people to go for lunch without worries and support limitations. The café has been described as 'social and therapeutic – not feeling like a clinical setting' and has given the opportunity for many friendships forming outside of the Wellbeing Centre activities with people arranging to meet for coffee and lunch. Loyalty schemes and meal deal options have been introduced and have been well received by all Café K customers.

Café K received a generous makeover courtesy of City Engineering Services who redesigned the serving area, which has offered the Catering Team a spacious working environment and supported the opportunity to increase the number of volunteers to help meet service demand. The décor in Café K was also refreshed including new furnishings and flooring.

The Catering Team have worked effortlessly to provide nutritious, comforting and personalised meals that meets the dietary needs and preferences of patients. Feedback received from the survey of your experience of our services in 2023-24 in relation to the catering service were positive with 92% rating the quality of food excellent.

Positive comments received about the Hospice's catering included:

> My mam loved the meals, especially the puddings, she said they were very tasty and just enough.

> Food excellent in the cafe too!

> Always excellent meals for my husband and the family.

> The food was very good and varied, it was always very hot, tasty and there was a good variety.

> They double-checked regarding my mums' dietary needs with her having diabetes.

> Dad was non-verbal and not eating or drinking but me and other visitors were offered refreshments at each visit.

> My wife was on end-of-life treatment and not taking normal food, but alternatives were offered.


Kershaw's Hospice






Kershaw's Hospice
Café K
You are at the heart of everything we do!



Facilities, Health & Safety & Risk Management.

Throughout 2023-24 ,the Facilities Team have continued to effectively support the Hospice by ensuring a safe, comfortable and efficient environment for everyone through the maintenance works completed. Over 800 reactive jobs were resolved during 2023-24 in addition to the many verbal maintenance requests received.

In line with regulatory requirements, internal inspection schedules are in place and any findings including deficiencies have been responded to efficiently. In addition to regulatory requirements, key areas throughout the Hospice premises, including grounds are included within the inspection schedules to ensure acceptable standards in relation to compliance with safety standards, hazard prevention, emergency preparedness and operational efficiency.

Servicing and inspections for all critical equipment and mechanical systems were completed by Hospice approved contracts throughout 2023/24 in line with the Hospice Planned Maintenance schedule to ensure the safety and operational efficiency of Hospice assets and conformance to regulation requirements.

In addition to a Facilities Helpdesk and Planned Maintenance, further modules were successfully created and added to the Vantage database system including:

- Control of Contractors module – providing a centralised platform for storing, organising and managing information to allow the Facilities Department to maintain a comprehensive and up-to-date inventory of data, including contact information, certifications and insurance documentation. This newly created module will become a valuable tool to streamline contractor management, mitigate risks, ensure compliance, and drive continuous improvement in contractor relationships.
- Asset Management module – to provide a comprehensive system to track, monitor, and manage all Hospice assets throughout their lifecycle and the critical information pertaining to them.

In November 2023, the Facilities Department welcomed a dedicated administrator to the team who has enhanced the communication acting as a liaison between the Maintenance Team and other departments providing regular updates on facility-related issues. This role will support the development of the facilities suite of modules on Vantage through the optimisation of information that will be captured and recorded to support a wide range of reporting functions for the department.

Significant progress has been made in the grounds of the Hospice following the appointment of two Gardeners who have revitalised and transformed the existing landscaping over a short space of time. The improvements made will support the next phase of landscaping due to commence in 2024/25.

A repeat RISKMap review was undertaken by PIB Risk Management (external Health & Safety approved specialist provider) in 2023. A structured and combinational method was used to understand the Hospice strategic and operation risk management processes and structures. The risk management action plan provided assurance that risk management controls, processes and procedures were working effectively with no high risks being reported. Additional retail health & safety audits and a fundraising review was included within the scope of work that had been developed through PIB for 2023/24.

The re-audit of the RISKMap has given assurance that the Hospice remains resilient against potential threats, adaptable to changing environments and proactively make adjustments as necessary.

Significant investment was made during 2023-24 to enhance fire safety measures including the upgrade of the entire fire alarm system, replacement fire doors on the 1st floor and integrated electromagnetic hold open fire door mechanisms upgrade on the IPU and main corridors.

Business continuity table top exercises were held throughout 2023/24 with the Senior Management Team, which gave the opportunity to test and review emergency preparedness plans to ensure that all necessary resources and supplies are readily available. Supportive improvements were identified during the various crisis scenarios and procedures further refined to better prepare for unforeseen disruption to Hospice services and safeguard long-term sustainability, building confidence through practice and familiarity with the emergency plans in place.

IOSH Managing Safely training has been introduced to the Senior Management Team including the Chair and Vice Chairs of Trustees to enhance risk awareness and health and safety responsibilities.



Quality, Innovation & Improvement.

Vantage.

We have continued to utilise our Vantage system to create more modules to support robust operational and data management procedures and to support quality initiatives. These modules have become an integral part of Hospice systems now and help us to move towards becoming a paperless organisation.

A new CQC Module has been developed to store all of our evidence for each Quality Statement. A project to add all evidence has been completed and has been rolled out to the Senior Management Team to oversee, monitor and update statements that they are responsible for. Tweaks and upgrades will be completed throughout the next financial year.

Log a Compliment

A Compliments Module has been added to Vantage to share compliments from external and internal sources. We have promoted this to staff to share compliments where colleagues have gone above and beyond. All compliments are sent to the Senior Management Team to share.

HR Module Improvements

The HR Module has undergone some improvements including:

- Communications Log: To enable the department to write in reminders or prompts.
- Appraisal Reminder System: To assist functionality and accessibility for all staff who manage appraisals.
- Core Policy Monitoring: This process has been passed to HR to oversee and the HR Module has been updated to track staff compliance.

Actions and Audits Module

The Audit and Action Plans Module has been improved to include Strategic Objectives and Risk Register action plans. The action plan element from these two modules has been removed and linked to the Audit and Action Plans Module. This has improved oversight of actions for all of the modules.









Trustee Dashboard

A Trustee Dashboard was introduced on Vantage to give the Trustee's oversight of the organisations Risk Register, action plans, strategic objectives, policies and strategies and to monitor their own Mandatory Training.

Policy Process

In order to provide assurance around our policies, we introduced a system whereby staff would need to read a set of core policies relating to their role and sign to say that they have read and understood them. Staff were very understanding of this process and within a month all sheets were signed.

Key Performance Indicators

The Hospice Key Performance Indicators (KPIs) are calculated every quarter to showcase our achievements and areas of improvement across the five CQC domains. This was a strategic objective which was achieved in 2022/23 and has continued to be maintained throughout the following year.

The KPIs are calculated based on national, regional and internal averages from the previous financial year and the various sources are listed in the document for clarity – these are re-calculated every year. The KPIs are presented in a document that is distributed to all staff and displayed on noticeboards throughout the Hospice, our top 12 KPIs are also displayed in the Learning Hub.

Income Development.

The Income Development Department is responsible for all income generation, covering Retail, the Hospice Lottery, Fundraising, and Marketing and Communications. The Department's core objective is to raise sustainable income in support of the Hospice's overarching strategy. Dr Kershaw's receives only one third of its funding from the Integrated Care System (ICS), with the remaining £4,689,772 annual budget being raised through fundraising activities and donations.

During the 2023/24 financial year, the Hospice saw a drop in its Retail income due to the cost of living crisis. However, our Legacy income had significant growth, by 69%, which enabled the Department to exceed its fundraising target for the year. In addition, our loyal supporters continued to champion the Hospice, and through their donations we were able to achieve some key highlights throughout the year.

In January 2023, the Department invested in the recruitment of an Information Governance & Data Systems Lead. This role is Hospice wide, supporting data and Information Governance, but focuses on the Fundraising Database within Income Development; ensuring committed stewardship of our Hospice donors.

Hospice Retail.





2023/24 saw the launch of a new initiative within our Retail offering, Dr Kershaw's Business Centre. Based upstairs at The Furniture Hub, the Centre opened on 19th May with an Open Day for the local business community. The Centre offers hourly, daily, and weekly hires of a therapy room, office spaces, and a boardroom / training room. Providing a new income stream for the Hospice, the Centre also utilises spaces within The Furniture Hub that are not currently used and thus enables us to secure income from our whole building.

Due to the cost of living crisis in the UK, and households' disposable income reducing, the shops came in just under budget by £67,757, securing a gross income of £544,443. However, this was a gross increase of £74,984 on the previous financial year.

During the year, The Furniture Hub continued to go from strength to strength securing on average just over £14,000 a month in gross income, which is up by just over 40% a month from last financial year. Due to the store's growing success, one of the Warehouse Assistants & Drivers was promoted to Assistant Retail Manager and two additional Warehouse Assistant & Drivers were recruited, who provide a collections and delivery service to the local Community.

A huge thank you to all our customers and donors who continue to support our shops and help to raise vital income for the Hospice.


Kershaw's Hospice
THE FURNITURE HUB
Giving furniture a second chance






Kershaw's Hospice
You are at the heart of everything we do!
www.dkh.org.uk






Kershaw's Hospice
29.09.23
THIS COULD BE YOU!
FIVE THOUSAND POUNDS
£5,000
LOTTERY TEAM


Kershaw's Hospice




AW'S!
OUR
TEAM!
KH.ORG.UK
9984


Kershaw's Hospice
Date 29.09.23
Pay THIS COULD BE YOU!
LUXURY CRUISE!!
Only
£
LOTTERY TEAM

Hospice Lottery.

Following a piece of research conducted in 2022/23, with Lottery members, the Team embedded a new framework, in this financial year, in order to evolve the Lottery offer and reduce overheads. The new offer included:

- The use of tickets and ticketless Draws
- Reducing the number of Bumper Draws per year to two
- Reducing the number of editions of the Hospice newsletter from four to two per year
- Increasing the prize pot for each Bumper Draw

The new framework was well received by members, with 86.8% of those who replied to the survey stating they would be happy to double their tickets for the two Draws, therefore, making the same monetary contribution across the year. Our door-to-door and venue canvassers for the Lottery have continued to grow members, and the numbers of players increased throughout the year from 13,800 to 14,292 at the end of the fiscal year.

The first of the two Bumper Draws took place on Friday 28th April 2023, raising £20,621 for patient care, and due to our longstanding members and their generosity, during 2023/24, the Lottery contributed £684,000 to the Hospice in support of patient care, compared to £360,000 in 2022/23.

The second Bumper Draw was a celebratory Draw for our Hospice Lottery, as we celebrated our 20th Anniversary. To mark the occasion, we held an Anniversary Draw on Friday 29th September, with a prize pot worth a total of £20,000 which included a donated £12,000 cruise to the Northern Lights for two, and a number of cash prizes. Tickets were sold through a number of outlets, including our own Hospice shops and Hospice events, and for the first time online. The Draw was a huge success, generating £36,288 for the Hospice.

Dr Kershaw's Hospice Lottery is committed to ensuring that the Lottery is operated in a secure, fair and socially responsible way and endorses responsible gambling amongst its members. Dr Kershaw's Hospice Lottery is a member of the Hospice Lotteries Association, which is committed to working together to encourage responsible gambling and provide access to support if needed.

Dr Kershaw's Hospice is licensed and regulated in Great Britain by the Gambling Commission under account number 5224.

80p* of every £1 goes directly towards providing patient care, 9.5p* towards lottery prizes, and the remaining 10.5p* is spent on lottery administration, training, staff costs, licenses and marketing. Average number of players in the Draw is 13,862*.

*These figures are based on income and expenditure for May 2023.

Thank you to all our members and players of the Lottery and Bumper Draws, for your continuous support. Every £1 you play helps the Hospice to care for patients and their families when they need it most.



Luxury Cruise Prize for Lottery 20th Anniversary Winner

Fundraising.

Event Fundraising.

The 2023/24 calendar was bursting with an array of events and there was something for everyone to get involved in, from golf, to dance, to shopping. The first event in the calendar saw the return of Rose to Remember, for the second year running our local Community gathered together at the Hospice to remember their loved ones. With the opportunity to buy a yellow rose to remember a lost loved one, guests gathered to see their roses in the Hospice gardens, tuck into a cream tea, and enjoy the remembrance service. Sponsored for the second year running by the Co-op, over 660 roses were sold and the event and the campaign collectively raised just over £13,000 for patient care, an increase of 53% on the year before.

Less than a month later, our Summer Fayre followed, on Sunday 30th July, and it was wonderful to see the event back on our calendar. The event was a great success with a good turn out, despite the rain. Attendees could enjoy a spot of shopping, tea and cake in Café K, dance performances, cocktails, and even take part in some games. The event raised just under £6,000 for patient care.

Our biggest event, Dr Kershaw's Strictly, took place on Friday 15th March, with five couples competing for the glitterball trophy. Themed a 'Night at the Movies', guests enjoyed popcorn and fizz on arrival, a three-course meal, fabulous live entertainment, and lots of dancing! The night was a huge success, with a great atmosphere, and feedback highlighted it was the best Strictly to date. With sponsorship from our dancers, ticket sales, and on the night fundraising, the event raised a gross income of over £28,200.

Staff changes within the Team saw the recruitment of a new Fundraising Events Lead, who joined the Hospice on 26th February.

The events programme for the year also included Ascot Ladies Day, Light Up a Life, the Christmas Concert and the Christmas Fayre. Collectively, the Hospice's events programme raised £72,572, which was 21% over target.

A huge thank you to our local Community for volunteering, participating, attending and supporting our events this year; our success is due to you. Our events bring our Community together but also help to raise vital funds towards our clinical services that support patients from the Oldham Community.

Corporate Fundraising.

We have had limited resource within the Team during this fiscal year, with an unsuccessful recruitment campaign for a Corporate Fundraiser. However, support through The 1989 Club, Corporate Partnership Scheme, has grown throughout the year with new and existing partners including; Ribble Packaging, Pilgrim International, Olympic Construction, Oldham Community Radio, OMC Group, ROC Fire & Security and Northern Pest Management.

We have also seen growth in our 'Charity of the Year' partnerships, sponsorship opportunities, volunteering, and donations from new supporters, and continued support from our longstanding corporate partners.

We love working with the local business community and want to express our thanks to all our Corporate supporters.

Trusts & Foundations Fundraising.

The Hospice was without a dedicated Trust Fundraiser in post from August 2022 to November 2023, limiting the number of applications we have been able to submit for funding. However, a new Legacy and Grants Fundraising Lead was recruited in November in a permanent role.

Despite the limited resource, the Hospice was still able to secure grant funding of £40,082 towards core costs, volunteering, and The Nightbird Project.

Dr Kershaw's is extremely grateful to the Trusts and Foundations that supported us throughout the year.






CORPORATE MEMBERS






Kershaw's
Hospice


We are supporting
Kershaw's
Hospice


Caritas
AJBell
RYAN
1842


Kershaw's
Hospice


JACOBS WELL
We are supporting
Kershaw's
Hospice


£650


3278

Fundraising & Marketing.

Community Fundraising.

Dr Kershaw's Hospice is always overwhelmed by the unfaltering support we receive from our local Community. We thank each and every one of our supporters for their dedication and loyalty throughout the year.

During the past 12 months, members of the public have hosted their own events or fundraising activities to raise vital funds for the Hospice. Activities have included climbing the Yorkshire Three Peaks, hosting musical concerts, holding a community fun day, taking on sponsored walks, competing on an obstacle course, and more. Thank you to everyone who took on an activity, be it large or small, to support our Hospice and helped to raise awareness and essential funds for patients who need our care now and in the future.

In addition to all our supporters' events, our Hospice Community Team also hosted a range of challenges and events that people could sign up to, including; the Bunny Hop, a Firewalk & Lego Walk, Saddleworth Three Peaks, Yorkshire Three Peaks, Skydiving, and Festive Fundraisers; Jolly Jumper Day, Cards for Care, and the Reindeer Run.

In the Summer of 2023, we were excited to launch our new Hospice Mascot, a loveable dog called Hartley. With his heart shaped nose, cheeky spirit, and funky jeans and trainers, he has proved to be popular with adults and children alike, with appearances at our fayres and lots of events across the community. In addition, Hartley fans can purchase their very own Hartley plushie to take home and play with, whilst also raising vital funds for the Hospice.

The Team launched a new initiative this year, to our local community, our Christmas Tree Collection campaign. It was well received and we were delighted by how many people got behind the initiative. We would like to thank Life for a Life Memorial Forests, WillMow Reclamation & Salvage Ltd, Howard's Domestics, and our army of volunteers for all their support in helping to get the new campaign off the ground. In our first year, we collected 138 trees which were all recycled by Oldham Council, and raised just over £2,000 for patient care.

Dr Kershaw's Hospice Friends continued to give generously with over £22,323 donated within the year to support clinical services.

Over £237,000 was raised by the Community throughout the year, and our sincere thanks go to everyone who supported us including, but not limited to; Ambrose Nursery, Booths Garden Centre, Brooklands Private Day Nursery, Co-op Group, Co-op Royton, Daisy Nook Garden Centre, Firbank Primary School, Halfway House Royton, Kidz Matter Nursery, Mossley Cancer Committee, Newbank Garden Centre, OCL Saddleworth, Oldham Assembly, Oldham Athletic Football Club, Oldham & District Ladies Bowling League, Pike Fold Golf Club, Rotary Club of Oldham, Saddleworth Old School Tractor Group, St Martins C of E Primary School, The Oddfellows, Thorp Primary School, Tymbuktu Health and Beauty Clinic, Whitegate End Primary School, and the White Lion Inn.

Marketing & Communications.

Our Communications Team continues to focus on dynamic, digitally driven communications; drawing on online activities, using patients and their families' stories, and dispelling the myths surrounding Hospices.

Online support has increased throughout the year with engagement and followers on Facebook, X, Instagram, LinkedIn, and YouTube increasing. The Hospice has continued with its weekly page in the Oldham Times, featuring key updates and stories on patient care. Coverage has also been included in the local press and on the radio, including The Oldham Times, Oldham Reporter, The Oldham Chronicle (online), Saddleworth Monthly, Saddleworth Life, Saddleworth Independent, Manchester Evening News and Oldham Community Radio 99.7FM.

Many thanks to all local media for their support with special thanks to the Oldham Times and Oldham Community Radio 99.7FM for their continued support of the Hospice.

Strategic Report & Financial Review.

Financial Review.

The Statutory Accounts for the year ended 31st March 2024, have been prepared in accordance with the Statement of Recommended Practice Accounting and Reporting by Charities (SORP 2019), and comply with all statutory requirements. Following the appointment of the Hospice's Accountants and External Auditors, Chadwick & Company Chartered Accountants, both the format and content of the Statutory Accounts embrace the advice and recommendations of our Auditors.

The overall net increase in funds was £1,306,260 (2023: 160,114).

The Hospice's principal sources of income are donations, legacies, NHS income, our retail outlets, fundraising, lottery and trading surpluses. A total income of £5,840,084 was achieved in the current financial year – an increase on the previous financial year of 28%.

The Hospice recognises, and would like to give special thanks to Greater Manchester Integrated Care who continue to support the Hospice, and contributed £2,327,309 to Dr Kershaw's. These funds are secured through our block contract to support both our Inpatient Unit and Hospice at Home services. Greater Manchester Integrated Care additionally continue to support further care in the community provided by our Caring Hands Domiciliary Service.

Legacies received for the year-ended 31st March 2024 totalled £1,196,885. This is an increase of £673,391 (2023: £523,494). Whilst this is higher than the long-term average, the figure includes a substantial legacy of £537,500 within the year.

Dr Kershaw's Lottery continued to performed well and contributions to patient care were £360,000 of regular monthly transfers and an additional one-off transfer of £324,000.

The Hospice continued to see increases in the cost of goods and services, with an increased spend of £488,384 a rise of 11% to the previous financial year. This primarily reflects cost of living impacts on both staff and non-staff costs alike.

As of 31st March 2024, the funds balance of the Hospice sits at £11.850m. A detailed analysis of funds held can be found in notes 22 to 25 in the Hospices Statutory Accounts.

The Hospice would like to express its sincere thanks and appreciation to everyone who contributes to our running. Whether this be in time, gifts or monetary donations. The work we do would not be possible without our loyal supporters.

Investments.

Following a tendering exercise, RBC Brewin Dolphin were appointed as Fund Managers in December 2022. Financial Assets, primarily backing the Reserves of the Hospice, were subsequently transferred into a balanced, medium risk Investment Portfolio which over the longer term will generate returns which can be used to further advance the aims of the Hospice.

The Investment Portfolio is managed and monitored on behalf of the Board of Trustees by the Finance Resourcing Steering Group.

Change in the market valuation of the Investment Portfolio are recorded within Other Recognised Gains and Losses. For the year ended 31st March 2024 this was a net gain of £336,293 (2023: loss of £31,500). The year to March 2024 has been very different. Economic growth was far more resilient than predicted, inflation began to ebb away and central banks have taken their foot off the interest rate hiking pedal. Interest rate rises quickly turned into expectation around interest rate cuts. Enthusiasm also started to bubble around AI and the transformation power it holds. This was quickly reflected in the shares of technology companies across the world, and that strength spread to global investment markets.


Kirkhaw's
Hospice

Financial Review.

Reserves.

A Statement of Unrestricted Funds is shown in Note 22 of the Statutory Accounts. During the year, the Trustees reviewed the reserves policy and set out the criteria required to hold designated reserves going forward.

Firstly, an *Absolute Minimum level of Free Reserves* will be held, equal to the funds required to ensure the orderly closure of the Hospice. This includes the fulfilment of all financial obligations, predominantly but not limited to staff notice/redundancy and lease commitments.

Secondly, the Hospice designates an element of its reserves to ensure the resilience and continuity of its core operations. To include both provision for a period of loss making, arising from, for example, a shortfall in income and secondly, to fund essential expenditure required over a 3-year period (e.g. repairs, equipment replacement and building works).

Thirdly, remaining free reserves are available for designation into the *Development and Maintenance Fund*. This will provide the financial resources to further develop services in line with the Hospice's strategic objectives.

Reserves in excess of that designated, are available to spend on any of the charity's purposes and further enable the Hospice to meet its financial commitments and obligations. This excludes all fixed assets, restricted and designated funds.

Note 22 of the Statutory Accounts provides further detail around the *Designated Funds* of the Hospice.



Financial and Reputational Risk.

Dr Kershaw's Hospice recognises the risks associated with the nature of its operating activities. There have always been uncertainties, the only predictable income the Hospice receives is from our Commissioning Partners. Non-commissioned and voluntary income is more difficult to budget for. The impact of COVID-19, the current cost of living crisis and high inflationary environment means that the Hospice now operates in a different, more volatile and possibly riskier environment.

The Hospice is pro-active in mitigating these risks via its Risk Management process. The Senior Management Team meet regularly to discuss current and potential risks, and put controls in place to mitigate these. Our main external risk, and this is reflected as the highest risk on our Risk Register, is that of Cyber Crime / Attack. Dr Kershaw's Hospice continues to work very closely with its partnering Hospices, and has for a number of years held a Service Level Agreement with St Ann's Hospice to secure the invaluable skills of their Data Protection Officer.

Statement of Board of Trustees' Responsibilities for the Financial Statements.

The Trustees are responsible for preparing the Trustees Report and the Financial Statements in accordance with applicable law and United Kingdom Generally Accepted Accounting Practice.

Company law requires the Board of 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 of the incoming resources and application of resources, including the income and expenditure, of the charitable company for that period. In preparing those financial statements the Trustees are required to:

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

The Trustees are responsible for keeping proper accounting records, which disclose with reasonable accuracy at any time the financial position of the charitable company 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 charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

So far as the Trustees are aware, there is no relevant information (as defined by section 418 of the Companies Act 2006) of which the charitable companies' auditors are unaware, and each Trustee has taken all steps necessary in order to make them aware of any audit information and to establish that the charitable company's auditors are aware of that information.



Dr Kershaw's Trustees 2023/24.

Statement of Board of Trustees' Responsibilities for the Financial Statements.

Public Benefit Statement.

In setting our objectives and planning our services, the Trustees of Dr Kershaw's Hospice have considered the Charity Commission's general guidance on public benefit. Dr Kershaw's Hospice provides hospice services free of charge to those individuals aged over 18 years with life-limiting illness living in the Oldham Borough. The charity also provides supportive care for their families and carers and our care services are available, without restriction, to all groups in the communities we serve.

Charitable Purpose & Social Investment Policies.

To promote the relief of illness and suffering in such ways as the Trustees think fit:

(1) by establishing, maintaining and conducting residential nursing and convalescent homes for the reception and care of persons of either sex who are suffering at any age from any chronic or terminal illness or from any disability or disease attributable to old age or from any other physical or mental infirmity, disability or disease and so that any such home may be restricted as aforesaid to patients suffering from any particular type or types of illness, disability or infirmity and by providing medical or other treatment or attention for any such persons as aforesaid in their own home;

(2) by conducting and promoting or encouraging research into the care and treatment of persons suffering from any such illness, disability, disease or infirmity and particularly into the care and treatment of persons suffering from cancer or terminal illnesses and by providing for the dissemination of the results of such research;

(3) by promoting or encouraging or assisting in the teaching or training of doctors, nurses, physiotherapists and other persons engaged in any branch of medicine surgery, nursing or allied services and in the teaching or training of students in any branch of medicine, surgery or nursing or allied services.



Auditors.

In accordance with the company's articles, a resolution proposing that Chadwick & Company (Manchester) Limited, be reappointed as auditors of Dr Kershaw's Hospice, will be put to the Board of Trustees at the Annual General Meeting.

Approval.

The Trustees report including Accounts and Strategic Review was approved by the Trustees on 4 October 2024, and signed on their behalf by:



NAME: Rachel Damianou

POSITION: COMPANY SECRETARY



NAME: Paul Cook

POSITION: CHAIR / TRUSTEE



NAME: Jonathan Lipton
POSITION: VICE CHAIR / TRUSTEE



Dr Kershaw's Hospice would like to express its sincere thanks and gratitude to everyone who fundraised, supported, or donated to the Hospice during the past year. Your generosity enables the Hospice to remain open and provide free, quality, specialist care to our local community. On behalf of all our staff, patients, and their families we

THANK YOU!





DR KERSHAW'S HOSPICE

INDEPENDENT AUDITOR'S REPORT
TO THE TRUSTEES OF DR KERSHAW'S HOSPICE

Opinion
We have audited the financial statements of Dr Kershaw's Hospice (the 'charity') for the year ended 31 March 2024 which comprise the statement of financial activities, the balance sheet, the statement of cash flows and notes to the financial statements, including significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 *The Financial Reporting Standard applicable in the UK and Republic of Ireland* (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:
- give a true and fair view of the state of the charitable company's affairs as at 31 March 2024 and of its incoming resources and application of resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

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

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

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

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

Other information
The other information comprises the information included in the annual report other than the financial statements and our auditor's report thereon. The trustees are responsible for the other information contained within the annual report. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon. Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the course of the audit, or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

Opinions on other matters prescribed by the Companies Act 2006
In our opinion, based on the work undertaken in the course of our audit:
- the information given in the trustees' report, which includes the strategic and directors' report and the strategic 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.

Matters on which we are required to report by exception

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

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

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

Responsibilities of trustees

As explained more fully in the statement of trustees' responsibilities, the trustees, who are also the directors of the charity 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 charity's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the trustees either intend to liquidate the 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 is available on the Financial Reporting Council's website at: https://www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditor's report.

Extent to which the audit was considered capable of detecting irregularities, including fraud

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

- At the planning stage of the audit we gain an understanding of the laws and regulations which apply to the Group and how management seek to comply with them. This helps us to make appropriate risk assessments.
- The principal risks of non-compliance with laws and regulations which we identified as being significant to the company related to UK Financial Reporting Standards, Company Law, Charity Law, UK Tax Legislation and Health & Safety regulations.
- During the audit we focus on relevant risk areas and review compliance with laws and regulations through making relevant enquiries and corroboration by, for example, reviewing Trustees Minutes and other documentation.
- We assess the risk of material misstatement in the financial statements including as a result of fraud and undertake procedures including:
    I. Review of controls set in place by management
    II. Enquiry of management as to whether they consider fraud or other irregularities may have occurred or where such opportunity might exist
    III. Challenge of management assumptions with regard to accounting estimates
    IV. Identification and testing of journal entries, particularly those which may appear to be unusual by size or nature.

Because of the inherent limitations of an audit, there is a risk that we will not detect all irregularities, including those leading to a material misstatement in the financial statements or non-compliance with regulations. This risk increases the more that compliance with a law or regulation is removed from the events and transactions reflected in the financial statements, as we will be less likely to become aware of instances of non-compliance. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.

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.

Michael Royle BA(Hons)FCA (Senior Statutory Auditor)
for and on behalf of Chadwick & Company (Manchester) Limited

Chartered Accountants
Statutory Auditors
Capital House
272 Manchester Road
Droylsden
Manchester
M43 6PW

7 October 2024

DR KERSHAW'S HOSPICE

STATEMENT OF FINANCIAL ACTIVITIES INCLUDING INCOME AND EXPENDITURE ACCOUNT

FOR THE YEAR ENDED 31 MARCH 2024

	Notes	Unrestricted funds 2024 £	Restricted funds 2024 £	Total 2024 £	Unrestricted funds 2023 £	Restricted funds 2023 £	Total 2023 £
Income and endowments from:							
Donations and legacies	2	1,783,401	34,672	1,818,073	1,084,183	41,572	1,125,755
Charitable activities	3	2,575,418	-	2,575,418	2,026,485	-	2,026,485
Other trading activities	4	1,320,577	-	1,320,577	1,352,700	-	1,352,700
Investments	5	74,994	8,722	83,716	29,353	568	29,921
Other income	6	42,300	-	42,300	38,475	-	38,475
Total income		5,796,690	43,394	5,840,084	4,531,196	42,140	4,573,336
Expenditure on:							
Raising funds	7	838,294	-	838,294	637,051	-	637,051
Charitable activities	8	3,841,566	190,257	4,031,823	3,559,694	184,988	3,744,682
Total expenditure		4,679,860	190,257	4,870,117	4,196,745	184,988	4,381,733
Net gains/(losses) on investments	14	298,303	37,990	336,293	(39,382)	7,893	(31,489)
Net income/(expenditure)		1,415,133	(108,873)	1,306,260	295,069	(134,955)	160,114
Transfers between funds		-	-	-	(49,339)	49,339	-
Net movement in funds	10	1,415,133	(108,873)	1,306,260	245,730	(85,616)	160,114
Reconciliation of funds:							
Fund balances at 1 April 2023		5,956,893	4,586,882	10,543,775	5,711,163	4,672,498	10,383,661
Fund balances at 31 March 2024		7,372,026	4,478,009	11,850,035	5,956,893	4,586,882	10,543,775

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

The statement of financial activities also complies with the requirements for an income and expenditure account under the Companies Act 2006.

DR KERSHAW'S HOSPICE

BALANCE SHEET

AS AT 31 MARCH 2024

	Notes	2024 £	2024 £	2023 £	2023 £
Fixed assets					
Tangible assets	16		4,065,777		4,129,584
Investments	17		3,951,879		3,111,906
			8,017,656		7,241,490
Current assets					
Debtors	18	1,412,796		679,901	
Cash at bank and in hand		2,623,595		2,986,734	
		4,036,391		3,666,635	
Creditors: amounts falling due within one year	19	(204,012)		(364,350)	
Net current assets			3,832,379		3,302,285
Total assets less current liabilities			11,850,035		10,543,775
The funds of the charity					
Restricted income funds	21		4,478,009		4,586,882
Unrestricted funds	22		7,372,026		5,956,893
			11,850,035		10,543,775

The financial statements were approved by the trustees on 4 October 2024

Dr P Cook
Trustee

R Damianou
Trustee

Company registration number 05221414 (England and Wales)

DR KERSHAW'S HOSPICE

STATEMENT OF CASH FLOWS

FOR THE YEAR ENDED 31 MARCH 2024

	Notes	2024 £	2024 £	2023 £	2023 £
Cash flows from operating activities					
Cash generated from operations	**27**		211,846		466,699
Investing activities					
Purchase of tangible fixed assets		(155,021)		(88,625)	
Purchase of investments		(503,680)		(3,111,171)	
Investment income received		83,716		29,921	
Net cash used in investing activities			(574,985)		(3,169,875)
Net decrease in cash and cash equivalents			(363,139)		(2,703,176)
Cash and cash equivalents at beginning of year			2,986,734		5,689,910
Cash and cash equivalents at end of year			2,623,595		2,986,734

1 Accounting policies

Charity information

Dr Kershaw's Hospice is a private company limited by guarantee incorporated in England and Wales. The registered office is Turf Lane, Royton, Oldham, Lancashire, OL2 6EU. In the event of the charity being wound up, the liability in respect of the guarantee is limited £10 per member of the charity.

1.1 Accounting convention

The financial statements have been prepared in accordance with the charity's governing document, the Companies Act 2006 and "Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019)". The charity is a Public Benefit Entity as defined by FRS 102.

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

The financial statements have been prepared under the historical cost convention, modified to include the revaluation of freehold properties and to include certain financial instruments at fair value. The principal accounting policies adopted are set out below.

1.2 Going concern

At the time of approving the financial statements, the trustees have a reasonable expectation that the charity has adequate resources to continue in operational existence for the foreseeable future. Thus the trustees continue to adopt the going concern basis of accounting in preparing the financial statements.

1.3 Charitable funds

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. The aim and purpose of each designated fund is set out in the notes to the financial statements.

Restricted funds are donations and grants which have been specified by the donor to be solely used for particular areas of the Hospice's work.

1.4 Income

Income is recognised when the charity is legally entitled to it after any performance conditions have been met, the amounts can be measured reliably, and it is probable that income will be received.

Cash donations are recognised on receipt. Other donations are recognised once the charity has been notified of the donation, unless performance conditions require deferral of the amount. Income tax recoverable in relation to donations received under Gift Aid or deeds of covenant is recognised at the time of the donation.

Legacies are recognised on receipt or otherwise if the charity has been notified of an impending distribution, the amount is known, and receipt is expected. If the amount is not known, the legacy is treated as a contingent asset.

Grants of a capital nature are treated as deferred credits and credited through the Statement of Financial Activities over the estimated use of the relevant fixed assets.

Income received in advance for a future fundraising event or for other income received relating to the following year are deferred until the criteria for income recognition are met.

1 Accounting policies **(Continued)**

1.5 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. Direct expenditure on charitable activities is classified under the following headings:

- In-patient care
- Medical services
- Day-care
- Hospice at home
- Caring Hands

The charity is registered for VAT and is able to recover input VAT on the majority of its activities. The charity operates VAT under partial exemption. Irrecoverable VAT is charged as a cost against the activity for which the expenditure was incurred.

Costs of raising funds includes expenditure incurred in generating donations; arranging, organising and participation in funding events; costs of operating the charity shops.

Support costs are those functions that assist the work the charity but do not directly undertake charitable activities. Support costs include staff and overhead costs for finance, governance and general overheads.

1.6 Tangible fixed assets

Tangible fixed assets are initially measured at cost and subsequently measured at cost or valuation, net of depreciation and any impairment losses.

Depreciation is recognised so as to write off the cost or valuation of assets less their residual values over their useful lives on the following bases:

Leasehold improvements	Over length of the lease
Fixtures and fittings	20% straight line
Motor vehicles	25% reducing balance
Long term leasehold property	Revaluation basis

Leasehold improvements comprise all improvements made to the main hospice site at Turf Lane, Royton, including the new in-patient unit and Barras legacy gardens.

The gain or loss arising on the disposal of an asset is determined as the difference between the sale proceeds and the carrying value of the asset, and is recognised in net income/(expenditure) for the year.

The long term leasehold property value is confirmed by the board of trustees each year. Professional revaluations are performed with sufficient regularity such that the carrying amount does not differ materially from that which could be determined using fair values at the reporting end date.

1.7 Fixed asset investments

Fixed asset investments are initially measured at transaction price excluding transaction costs, and are subsequently measured at fair value at each reporting date. Changes in fair value are recognised in net income/(expenditure) for the year. Transaction costs are expensed as incurred.

Shares in the trading subsidiary are carried at cost.

1 Accounting policies **(Continued)**

1.8 Impairment of fixed assets

At each reporting end date, the charity reviews the carrying amounts of its tangible assets to determine whether there is any indication that those assets have suffered an impairment loss. If any such indication exists, the recoverable amount of the asset is estimated in order to determine the extent of the impairment loss (if any).

1.9 Stocks

Goods donated to the Hospice shops are principally given as gift aid donations. When the goods are sold the value realised is communicated to the donor to confirm it is their wish that the receipt be retained by the Hospice as a gift aided donation. Accordingly, stock held has no value because the charity only has control over the value and income when the donation is confirmed by the donor.

1.10 Cash and cash equivalents

Cash and cash equivalents include cash in hand, deposits held at call with banks, other short-term liquid investments with original maturities of three months or less, and bank overdrafts. Bank overdrafts are shown within borrowings in current liabilities.

1.11 Financial instruments

The Hospice 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.

1.12 Creditors and provisions

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.

1.13 Employee benefits

The cost of any unused holiday entitlement is recognised in the period in which the employee's services are received.

Termination benefits are recognised immediately as an expense when the charity is demonstrably committed to terminate the employment of an employee or to provide termination benefits.

1.14 Retirement benefits

Payments to defined contribution retirement benefit schemes are charged as an expense as they fall due.

1.15 Leases

Rentals payable under operating leases, including any lease incentives received, are charged as an expense on a straight line basis over the term of the relevant lease.

2 Donations and legacies

	Unrestricted funds 2024	**Restricted funds 2024**	**Total 2024**	Unrestricted funds 2023	Restricted funds 2023	Total 2023
	£	**£**	**£**	£	£	£
Donations and gifts	567,349	19,672	587,021	560,689	20,243	580,932
Legacies receivable	1,196,885	-	1,196,885	523,494	-	523,494
Grants receivable	19,167	15,000	34,167	-	21,329	21,329
	1,783,401	34,672	1,818,073	1,084,183	41,572	1,125,755
Donations and gifts						
General donations	305,991	12,894	318,885	332,733	15,535	348,268
In memoriam	191,966	-	191,966	159,720	-	159,720
Friends of the Hospice	18,454	-	18,454	21,517	-	21,517
Income tax recoverable	50,938	-	50,938	46,719	-	46,719
Keira's Wishes	-	4,418	4,418	-	4,708	4,708
Rebecca Taylor	-	2,360	2,360	-	-	-
	567,349	19,672	587,021	560,689	20,243	580,932
Legacies receivable						
Other	1,196,885	-	1,196,885	523,494	-	523,494
	1,196,885	-	1,196,885	523,494	-	523,494
Grants receivable						
Other grants	19,167	15,000	34,167	-	21,329	21,329
	19,167	15,000	34,167	-	21,329	21,329

3 Charitable activities

	In-patient Care 2024	Hospice at Home 2024	Caring Hands 2024	Total 2024	In-patient Care 2023	Hospice at Home 2023	Caring Hands 2023	Total 2023
	£	£	£	£	£	£	£	£
Government funding	1,968,290	359,019	248,109	2,575,418	1,450,851	350,572	225,062	2,026,485

4 Income from other trading activities

	Unrestricted funds 2024 £	Unrestricted funds 2023 £
Fundraising events	63,729	37,037
Shop income	572,848	455,663
Hospice lottery	684,000	860,000
Other trading activities	1,320,577	1,352,700

5 Investments

	Unrestricted funds 2024 £	Restricted funds 2024 £	Total 2024 £	Unrestricted funds 2023 £	Restricted funds 2023 £	Total 2023 £
Dividends	59,315	7,925	67,240	7,413	568	7,981
Investments interest	15,589	796	16,385	19,783	-	19,783
Bank interest	90	1	91	2,157	-	2,157
	74,994	8,722	83,716	29,353	568	29,921

6 Other income

	Unrestricted funds 2024 £	Unrestricted funds 2023 £
Room hire	23,468	16,330
Training	18,832	22,145
	42,300	38,475

7 Expenditure on raising funds

	Unrestricted funds 2024 £	Unrestricted funds 2023 £
Fundraising and publicity		
Staging fundraising events	55,539	38,357
Other fundraising costs	15,347	9,001
Staff costs	279,887	216,621
	350,773	263,979
Trading costs		
Operating charity shops	176,315	143,525
Other trading activities	48,161	23,759
Staff costs	263,045	205,788
	487,521	373,072
Total costs	838,294	637,051

8 Charitable activities

	In-patient Care 2024	Medical Services 2024	Daycare / Wellbeing 2024	Hospice at Home 2024	Caring Hands 2024	Total 2024	Total 2023
	£	£	£	£	£	£	£
Staff costs	1,588,800	476,526	230,306	269,884	487,826	3,053,342	2,841,439
Other direct costs	34,176	18	25,221	6,983	14,825	81,223	76,163
Medical costs	54,014	-	-	-	-	54,014	42,402
	1,676,990	476,544	255,527	276,867	502,651	3,188,579	2,960,004
Share of support costs (see note 9)	431,676	129,472	62,574	73,328	132,543	829,593	762,317
Share of governance costs (see note 9)	7,103	2,130	1,030	1,207	2,181	13,651	22,361
	2,115,769	608,146	319,131	351,402	637,375	4,031,823	3,744,682
Analysis by fund							
Unrestricted funds	2,026,021	581,647	287,257	336,394	610,247	3,841,566	3,559,694
Restricted funds	89,748	26,499	31,874	15,008	27,128	190,257	184,988
	2,115,769	608,146	319,131	351,402	637,375	4,031,823	3,744,682

8 Charitable activities **(Continued)**

For the year ended 31 March 2023

	In-patient Care £	Medical Services £	Daycare / Wellbeing £	Hospice at Home £	Caring Hands £	Total 2023 £
Staff costs	1,369,200	375,701	171,418	354,689	570,431	2,841,439
Other direct costs	44,176	1,500	10,753	5,287	14,447	76,163
Medical costs	42,402	-	-	-	-	42,402
	1,455,778	377,201	182,171	359,976	584,878	2,960,004
Share of support costs (see note 9)	367,192	101,178	46,151	95,417	152,379	762,317
Share of governance costs (see note 9)	10,771	2,967	1,354	2,799	4,470	22,361
	1,833,741	481,346	229,676	458,192	741,727	3,744,682
Analysis by fund						
Unrestricted funds	1,752,898	460,011	212,153	438,072	696,560	3,559,694
Restricted funds	80,843	21,335	17,523	20,120	45,167	184,988
	1,833,741	481,346	229,676	458,192	741,727	3,744,682

9 Support costs allocated to activities

	2024 £	2023 £
Staff costs	201,554	209,950
Depreciation	218,828	192,061
Support direct costs	103,395	93,420
Support equipment & premises costs	305,817	266,886
Governance costs	13,650	22,361
	843,244	784,678
Analysed between:		
In-patient Care	438,779	377,963
Medical Services	131,602	104,145
Daycare / Wellbeing	63,604	47,505
Hospice at Home	74,535	98,216
Caring Hands	134,724	156,849
	843,244	784,678

Governance costs comprise:	2024 £	2023 £
Audit fees	12,000	11,000
Legal and professional	1,650	11,361
	13,650	22,361

Support and governance costs are allocated between the various charitable activities, based on the number of staff operating within that function of the charity.

10 Net movement in funds

Net movement in funds is stated after charging/(crediting)	2024 £	2023 £
Depreciation of owned tangible fixed assets	218,828	192,061
Operating lease charges	90,328	94,378

11 Auditor's remuneration

The analysis of auditor's remuneration is as follows:

Fees payable to the charity's auditor and associates:	**2024** **£**	**2023** **£**
Audit of the charity's annual accounts	12,000	11,000
Non-audit services		
Payroll services	-	1,200

12 Trustees

None of the trustees (or any persons connected with them) received any remuneration or benefits in their role as trustees, or reimbursement of expenses from the charity during the year.

13 Employees

The average monthly number of employees during the year was:

	2024 **Number**	**2023** **Number**
Direct charitable services	61	59
Fundraising services	21	21
Support services	30	30
Total	112	110

Employment costs	**2024** **£**	**2023** **£**
Wages and salaries	3,797,828	3,473,798

Volunteers continued to support us and contributed 34,759 hours of their time, equating to a staff cost saving of £360,000 (2023 - 30,914 hours, saving of £315,000).

The full time equivalent average monthly head count was 81 (2023: 84).

The number of employees whose annual remuneration was more than £60,000 is as follows:

	2024 **Number**	**2023** **Number**
£70,001 - £80,000	2	3
£90,001 - £100,000	-	1
£150,000 - £160,000	1	-

13 Employees

(Continued)

Remuneration of key management personnel

The remuneration of key management personnel, including employers NI and pension contributions is as follows.

	2024	2023
	£	£
Aggregate compensation	446,690	479,968

The Hospice considers that the key management personnel comprise the Trustees and the Senior Management Team - who currently are the Chief Executive Officer, Medical Director, Director of Clinical Services, Director of Quality and Governance, Director of Finance, Director of Income Development and Marketing.

14 Gains and losses on investments

	Unrestricted funds 2024	Restricted funds 2024	Total 2024	Unrestricted funds 2023	Restricted funds 2023	Total 2023
Gains/(losses) arising on:	£	£	£	£	£	£
Revaluation of investments	298,303	37,990	336,293	(39,382)	7,893	(31,489)

15 Taxation

The charity is exempt from Corporation Tax in line with paragraph 1 of Schedule 6 of the Finance Act 2010.

16 Tangible fixed assets

	Leasehold improvements	Leasehold improvements post 2002	Fixtures and fittings	Motor vehicles	Long term leasehold property	Leasehold improvement projects	Barras legacy garden	Total
	£	£	£	£	£	£	£	£
Cost or valuation								
At 1 April 2023	540,693	2,644,406	347,227	32,380	124,000	2,971,081	217,871	6,877,658
Additions	-	-	122,076	12,000	-	2,000	18,945	155,021
At 31 March 2024	540,693	2,644,406	469,303	44,380	124,000	2,973,081	236,816	7,032,679
Depreciation and impairment								
At 1 April 2023	540,693	1,674,701	274,137	32,028	-	218,322	8,193	2,748,074
Depreciation charged in the year	-	38,789	57,878	3,088	-	110,190	8,883	218,828
At 31 March 2024	540,693	1,713,490	332,015	35,116	-	328,512	17,076	2,966,902
Carrying amount								
At 31 March 2024	-	930,916	137,288	9,264	124,000	2,644,569	219,740	4,065,777
At 31 March 2023	-	969,705	73,090	352	124,000	2,752,760	209,677	4,129,584

16 Tangible fixed assets (Continued)

Leasehold improvements - represents expenses incurred on the main hospice property at Turf Lane, Royton, prior to obtaining a lease on the premises. Accordingly, all expenditure in the Oldham Hospice Appeal during the years ending on 30 September 2001 was written off as incurred. From 1 October 2001 the Oldham Hospice Appeal occupied the property under a lease with the Pennine Acute Hospital Trust (formerly the Oldham NHS Trust) for a period of 25 years at a peppercorn rent, due to expire October 2025. However, as the directors wished to carry out a major rebuild, further negotiations took place during 2018 and a new lease was signed on 29 March 2018, for a further 30 years with a view to two subsequent 30-year extensions.

Leasehold improvements post 2002 - represents costs incurred on the main hospice property from 2002 onwards by The Oldham Hospice Appeal and Dr. Kershaw's Hospice towards which the hospice has received grants and other financial assistance. The net book value of this asset equates to the restricted leased building fund reserve. The costs and the reserves will be depreciated/amortised over the remaining committed lease period.

Long term leasehold property - is the building owned by the Hospice and used as part of the Shaw shop at 50 Market Street, Shaw. The property was last revalued by Breakey & Nuttall, Chartered Surveyors, on 4 November 2022.

Leasehold improvement projects - represents costs incurred on the IPU, reception, car park and modular unit. The costs and the reserves will be depreciated/amortised over the remaining committed lease period.

Barras legacy garden - represents costs to create a memorial garden, funded through the Barras legacy. The costs and the reserves will be depreciated/amortised over the remaining committed lease period.

17 Fixed asset investments

	Listed investments	Cash in portfolio	Other investments	Total
	£	£	£	£
Cost or valuation				
At 1 April 2023	3,042,032	69,774	100	3,111,906
Additions	500,000	-	-	500,000
Valuation changes	336,294	-	-	336,294
Cash movements	22,764	(19,085)	-	3,679
At 31 March 2024	3,901,090	50,689	100	3,951,879
Carrying amount				
At 31 March 2024	3,901,090	50,689	100	3,951,879
At 31 March 2023	3,042,032	69,774	100	3,111,906

The Hospice invests in a mixture of Fixed Interest deposits, Securities and Equities. Investment performance is monitored on behalf of the Board of Trustees by the Financial Resource Steering Group (FRSG).

FRSG are responsible for the ongoing review of the Investment Policy statement, monitoring the cashflows of the Hospice and maintaining liquidity required to fund operations.

17 Fixed asset investments (Continued)

Other investments comprise:	Notes	2024 £	2023 £
Investments in subsidiaries	26	100	100

Investments at fair value comprise:	2024 £	2023 £
Corporate bonds - cost £25,000	26,876	(29,949)
Investment shares bequested	1,698	(1,910)
Brewin Dolphin RBC investments	3,923,205	3,079,947
	3,951,779	3,111,806

18 Debtors

Amounts falling due within one year:	2024 £	2023 £
Trade debtors	751,165	270,915
Amounts owed by subsidiary undertakings	41,652	57,779
Other debtors	73,589	36,463
Prepayments and accrued income	546,390	314,744
	1,412,796	679,901

19 Creditors: amounts falling due within one year

	2024 £	2023 £
Trade creditors	44,539	52,643
Other taxation and social security	87,511	62,594
Other creditors	23,246	46,105
Accruals and deferred income	48,716	203,008
	204,012	364,350

20 Retirement benefit schemes

The charity operates a defined contribution pension scheme for all qualifying employees. The assets of the scheme are held separately from those of the charity in an independently administered fund.

The charge to profit or loss in respect of defined contribution schemes was £270,010 (2023 - £232,582).

21 Restricted funds

The restricted funds of the charity comprise the unexpended balances of donations and grants held on trust subject to specific conditions by donors as to how they may be used.

	At 1 April 2023	Incoming resources	Resources expended	Transfers	Gains and losses	At 31 March 2024
	£	£	£	£	£	£
Restricted capital funds	3,932,140	-	(157,783)	18,945	-	3,793,302
Keira's Wishes	40,208	4,418	(1,336)	-	-	43,290
Rebecca Taylor fundraising	10,800	17,360	(16,210)	-	-	11,950
Barras legacy garden	588,261	8,722	(11,803)	(18,945)	37,990	604,225
Other restricted funds	15,473	12,894	(3,125)	-	-	25,242
	4,586,882	43,394	(190,257)	-	37,990	4,478,009

Previous year:	At 1 April 2022	Incoming resources	Resources expended	Transfers	Gains and losses	At 31 March 2023
	£	£	£	£	£	£
Restricted capital funds	4,000,609	-	(157,092)	88,625	-	3,932,142
Keira's Wishes	36,209	4,708	(710)	-	-	40,207
Rebecca Taylor Fundraising	12,943	-	(2,143)	-	-	10,800
Barras legacy garden	622,737	568	(3,652)	(39,286)	7,893	588,260
Other restricted funds	-	36,864	(21,391)	-	-	15,473
	4,672,498	42,140	(184,988)	49,339	7,893	4,586,882

22 Unrestricted funds

The unrestricted funds of the charity comprise the unexpended balances of donations and grants which are not subject to specific conditions by donors and grantors as to how they may be used. These include designated funds which have been set aside out of unrestricted funds by the trustees for specific purposes.

	At 1 April 2023	Incoming resources	Resources expended	Transfers	Gains and losses	At 31 March 2024
	£	£	£	£	£	£
Development fund	889,100	-	-	-	-	889,100
Maintenance fund	212,000	-	-	1,300,000	-	1,512,000
Closure reserve	1,700,756	-	-	(49,996)	-	1,650,760
Adversity reserve	608,400	-	-	4,125	-	612,525
Income risk reserve	1,545,200	-	-	193,800	-	1,739,000
Revaluation reserve	54,000	-	-	-	-	54,000
General funds	947,437	5,796,690	(4,679,860)	(1,447,929)	298,303	914,641
	5,956,893	5,796,690	(4,679,860)	-	298,303	7,372,026

Previous year:	At 1 April 2022	Incoming resources	Resources expended	Transfers	Gains and losses	At 31 March 2023
	£	£	£	£	£	£
Development fund	1,000,000	-	-	(110,900)	-	889,100
Maintenance fund	700,000	-	-	(488,000)	-	212,000
Closure reserve	2,250,000	-	-	(549,244)	-	1,700,756
Adversity reserve	-	-	-	608,400	-	608,400
Income risk reserve	-	-	-	1,545,200	-	1,545,200
Revaluation reserve	54,000	-	-	-	-	54,000
General funds	1,707,163	4,531,196	(4,196,745)	(1,054,795)	(39,382)	947,437
	5,711,163	4,531,196	(4,196,745)	(49,339)	(39,382)	5,956,893

The Financial Resource Steering Group (FRSG) of the Board meets regularly to review the reserves policy and the criteria required to hold reserves on an ongoing basis. FRSG adopt the following principles, as set out in the Reserves Policy:

1. Firstly, reserves are allocated to fund the orderly closure of the Hospice.
2. Secondly, the Hospice allocates reserves to ensure the resilience and continuity of its core operations.
3. Remaining reserves are available for designation into the Development fund. This sets aside funds required to develop and improve services in line with the Hospice's strategic objectives.

22 Unrestricted funds (Continued)

Development Fund
In 2023/2024, funds were allocated for the Hospice to invest in its infrastructure over a three year period. This initiative is still ongoing, ensuring continued improvements and upgrades to the hospice's facilities and services during the remaining years of the plan.

Maintenance Fund
Funds have been allocated to support the Hospice's estate strategy, which includes the ongoing maintenance of internal and external areas, as well as fixtures and fittings. These funds will also be used to address essential equipment needs on a rolling basis, ensuring the Hospice and retail shops remain fully operational and fit for purpose.

Closure Reserve
Sets funds aside to cover the orderly closure of the Hospice. Predominantly but not limited to staff notice/ redundancy and lease commitments.

Adversity Reserve
Protects the Hospice against unplanned events. For 2024/25 this covers the risk of a material fall in the market valuation of the recently established Investment fund.

Income Risk Reserve
Sets funds aside to cover a fall in income levels, ensuring the activities of the Hospice can continue until income recovers or adjustments are made. The trustees consider a fallow income period of 2 years to be appropriate. Each income stream has been assessed and a reduction factor applied in each case.

23 Analysis of net assets between funds

	Unrestricted funds 2024	**Restricted funds 2024**	**Total 2024**	Unrestricted funds 2023	Restricted funds 2023	Total 2023
	£	**£**	**£**	£	£	£
Fund balances at 31 March 2024 are represented by:						
Tangible assets	272,472	3,793,305	4,065,777	197,442	3,932,142	4,129,584
Investments	3,510,207	441,672	3,951,879	2,703,445	408,461	3,111,906
Current assets/(liabilities)	3,589,347	243,032	3,832,379	3,056,005	246,280	3,302,285
	7,372,026	4,478,009	11,850,035	5,956,892	4,586,883	10,543,775

24 Operating lease commitments

Lessee
At the reporting end date the charity had outstanding commitments for future minimum lease payments under non-cancellable operating leases, which fall due as follows:

	2024 £	2023 £
Within one year	91,094	86,994
Between two and five years	197,130	228,720
In over five years	69,542	92,792
	357,766	408,506

25 Related party transactions

There were no disclosable related party transactions during the year (2023 - none).

26 Subsidiaries

Details of the charity's subsidiaries at 31 March 2024 are as follows:

Name of undertaking	Registered office	Nature of business	Class of shares held	% Held
Dr Kershaw's Hospice (Trading) Limited	England & Wales	Trading company	Ordinary	100.00

The aggregate capital and reserves and the result for the year of subsidiaries excluded from consolidation was as follows:

Name of undertaking	Profit/(Loss) Transferred £	Capital and Reserves £
Dr Kershaw's Hospice (Trading) Limited	-	100

The trading subsidiary has not been consolidated within the accounts as it is not considered to be material to the overall results of the charity.

Unincorporated undertakings
Dr Kershaw's Hospice Lottery is related to the Hospice but is independently registered with and regulated by the Gambling Commission, with whom accounts are filed annually. The lottery exists solely to contribute surpluses to the Hospice and at 31 March 2024 had distributable reserves of £252,390 (2023: £487,240).

27	**Cash generated from operations**	**2024**	**2023**
		£	**£**
	Surplus for the year	1,306,260	160,113
	Adjustments for:		
	Investment income recognised in statement of financial activities	(83,716)	(29,921)
	Fair value gains and losses on investments	(336,293)	31,489
	Depreciation and impairment of tangible fixed assets	218,828	192,061
	Movements in working capital:		
	(Increase)/decrease in debtors	(732,895)	27,621
	(Decrease)/increase in creditors	(160,338)	85,336
	Cash generated from operations	211,846	466,699

Doctor Kershaw's Hospice

Dr Kershaw's Hospice, Turf Lane, Royton, Oldham, OL2 6EU
www.drkh.org.uk

Tel: 0161 624 2727
Email: info@drkh.org.uk

Reg. Charity No: 1105924

DR KERSHAW'S HOSPICE

England & Wales - Charity number 1105924

Accounts

Doctor Kershaw's Hospice



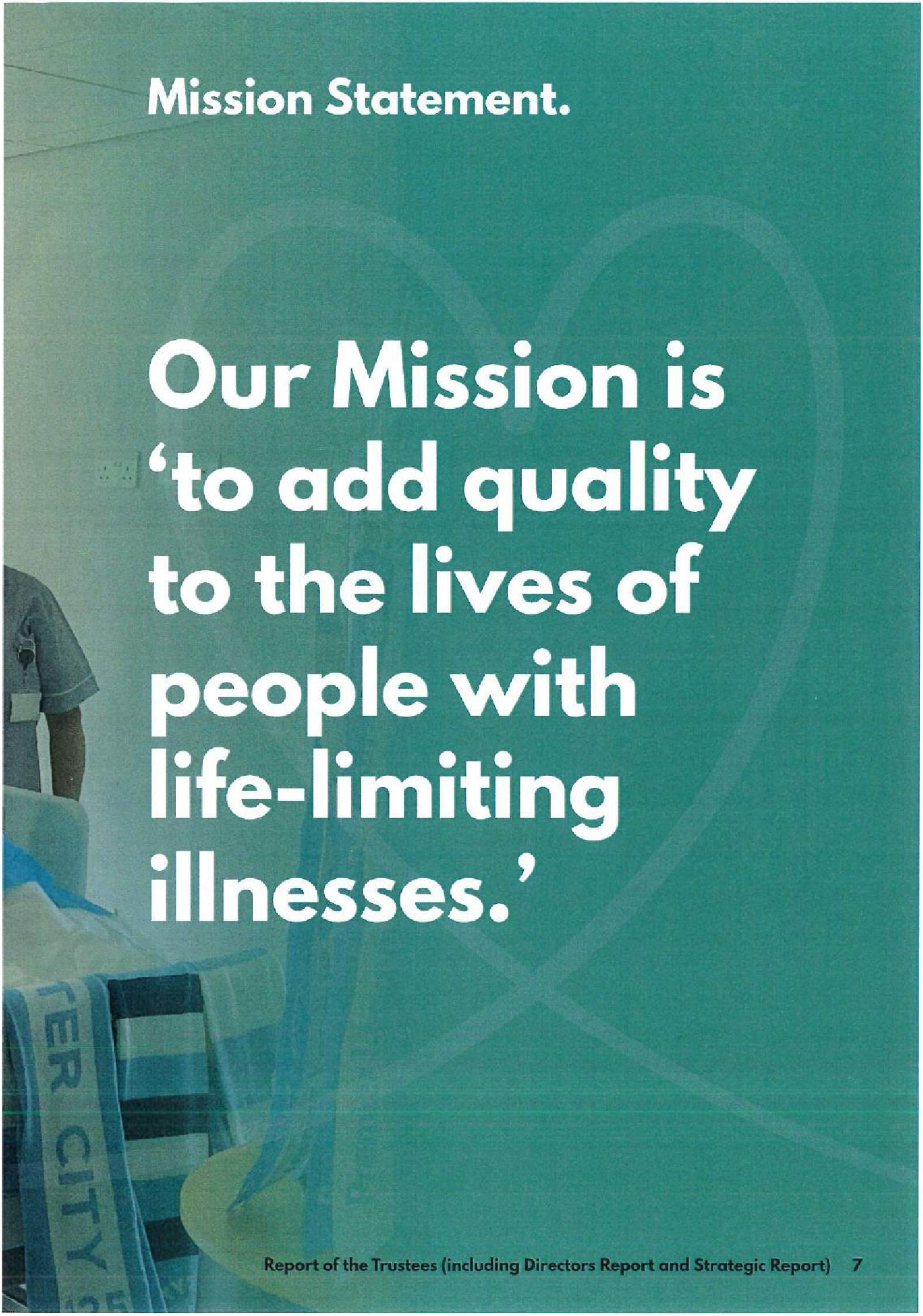
ANNUAL REPORT & FINANCIAL REVIEW

Year Ending 31 March 2023



Mission Statement.

Our Mission is 'to add quality to the lives of people with life-limiting illnesses.'



Our Values.

Our Core Value:

You are at the heart of everything we do!

Inclusiveness

We recognise, respect and embrace the diversity of our communities and will ensure and promote equality in all that we do.

Openness & Transparency

We promote and encourage an open culture across all our services and departments and encourage you to share your opinions and ideas with us.

Dignity & Respect

We will treat you with respect and uphold your privacy and dignity at all times.

Responsiveness

We will be responsive to your individual and changing needs and preferences and will be proactive in how we manage these within the wider health and social care system.

Compassion

We will treat you with compassion and be sensitive to your personal needs and wishes.

High Quality Care

We are dedicated to providing the highest quality, holistic care that delivers the very best outcomes for you.




You are at the heart of everything we do!



Contents.

Mission Statement ____ 7
Our Values ____ 8
About Dr Kershaw's ____ 11
Management & Financial Details ____ 12
Structure, Governance & Management 13
Our Hospice ____ 14
Audits ____ 17
Patient Experience ____ 18
Clinical Services ____ 20
Learning & Organisational Development ____ 30
Staff Resilience ____ 32
Volunteering ____ 34
Corporate Services ____ 37
Quality, Innovation & Improvement ____ 40
Income Development ____ 42
Strategic Report & Financial Review ____ 48
Statement of Board of Trustees' Responsibilities for the Financial Statements ____ 51


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UNE 2023

About Dr Kershaw's Hospice.

Dr Kershaw's Hospice is an adult hospice for Oldham and its surrounding areas. As a charity, we provide free specialist care for those with life-limiting illnesses as well as support for those who are important to them - loved ones, families, friends and even pets.

Since the Hospice first opened its doors in 1989, we have been providing care and support for the people of Oldham and the local boroughs, both during a person's illness, at death, and into bereavement - for as long as they need us.

The Hospice has a team of dedicated clinical staff including doctors, nurses and healthcare assistants who support patients in the Hospice's Inpatient Unit and Wellbeing Centre along with supporting patients in the community through the Hospice at Home service and Caring Hands, the Hospice's domiciliary care service.

As leaders in our field, we reach out into family homes, hospitals, care homes and out to colleagues; offering emotional, spiritual and practical support.

The Trustees (who are also Trustees of the charity for purposes of company law) present their financial statements and annual report for the year ending 31 March 2023. The other general information given in this report covers the year between Annual General Meetings.

Acknowledgements.

The Trustees would like to thank all its funders and supporters for their invaluable financial contributions throughout the past year, enabling Dr Kershaw's to continue its vital work and support patients, and their families, within the community of Oldham.

It has been a pleasure working in partnership with the Greater Manchester Integrated Care System (ICS) and we thank them for their support.

Thanks must also be given to our Corporate Partners for their generous support, which included, but was not limited to; Ashton-under-Lyne Golf Club, Costco, Keller Postman UK, Mellor Solicitors, Norcross Lees & Riches Solicitors, Olympic Construction, Pilgrim International, Plumbase, Professional Oldham, Ribble Packaging, ROC Fire & Security, Roma Fundraising, The Mailing Room, Touch Solicitors, Urban Green Space and Wrigley Claydon Solicitors.

We are also extremely grateful to all the Trusts and Foundations who have given generously to the Hospice throughout the year, including, but not limited to: Action Together, Cash for Kids, Crane Fund for Widows and Children, Gay and Peter Hartley's Hillards Charitable Trust, Kasguma Health and Welfare Trust, The Albert Hunt Trust, The February Foundation, Gannett Foundation, Skelton Charity, The Treehouse Trust, The TK Maxx and Homesense Foundation and The Hospital Saturday Fund.

The Hospice relies on the continued support of our local community. To all the individual donors and event participants, without whom our work would not be possible, and to the generous people who left a gift to Dr Kershaw's in their Will, or have pledged to do so in the future, we thank you all for your unwavering support and generosity.

Management & Financial Details.

Trustees.

Mirriam Lawton (Chair)	Appointed January 2020
Dr Paul Cook (Vice Chair)	Appointed January 2020
Jacqueline Wood (Vice Chair)	Appointed January 2021
Jonathan Lipton	Appointed January 2015
Sue Briscall	Appointed April 2014
Peter Wakefield	Appointed December 2018
Rachel Damianou	Appointed October 2019
Kim Wrigley	Appointed January 2021
Stephen Schofield	Appointed January 2021
Jonathan Edwards	Appointed January 2021
Eileen Jones	Appointed November 2022
Richard Buchanan	Appointed November 2022
David Macdonald	Appointed November 2022
Mark Hadfield	Appointed November 2022
Ian Chapman	Appointed November 2022

Trading Company.

Dr Kershaw's Hospice Ltd
Company Number - 5221414

Company Secretary - Rachel Damianou
Charity Number - 1105924

Senior Management Team.

Joanne Sloan	Chief Executive Officer
Adele Doherty	Chief Executive Officer / Director of Clinical Services & Deputy CEO
Dr Matthias Hohmann	Medical Director
Maria Papaleo	Director of Finance
Lyndsey Donbavand	Director of Quality & Governance
Rebecca Bentham	Director of Income Development & Marketing
Lindsey Harper	Lead Nurse for Clinical Services / Lead Nurse for Community Services
Kelly Foster	Senior Sister
Sarah Longmore	End-of-Life Nurse Educator
Kathryn Harding	Bereavement Support Nurse
Mandi Halton	HR Manager

Banking Services.

Barclays Bank PLC
Charities Aid Foundation (CAF)

25 High Street, Oldham, OL1 3AZ
Kings Hill, West Mallin, Kent, ME19 4TA

External Auditors.

Chadwick & Company - Chartered Accountants
Capital House, 272 Manchester Road, Droylsden, Manchester, M43 6PW

Structure, Governance & Management.

Dr Kershaw's Hospice organisational governance structure is shown in the diagram below.

Board Governance Structure - 2022/23.

	Trustee	Advisory Role
Chair:	Mirriam Lawton	Executive Support
Vice Chair:	Dr Paul Cook	Special Projects, Information Governance, Safeguarding
Vice Chair:	Jacquie Wood	Community Engagement, HR, Volunteers
Vice Chair:	Jonathan Lipton	Medical
Company Secretary:	Rachel Damianou	Legal
	Sue Briscall	Clinical
	Kim Wrigley	Clinical
	Stephen Schofield	Income Development
	Peter Wakefield	Finance
	Jonathan Edwards	Corporate Finance
	Eileen Jones	Income Development
	Richard Buchanan	Income Development
	Mark Hadfield	Assets, Facilities & Estates, H&S
	David Macdonald	Information Governance
	Ian Chapman	Finance

Secretary to the Board
Beverley Schofield

Senior Management Team	
CEO	Joanne Sloan
CEO / Director of Clinical Services & Deputy CEO	Adele Doherty
Medical Director	Dr Matthias Hohmann
Lead Nurse for Clinical Services / Lead Nurse for Community Services	Lindsey Harper
Director of Quality & Governance	Lyndsey Donbavand
Director of Finance	Maria Papaleo
Director of Income Development & Marketing	Rebecca Bentham
Senior Sister	Kelly Foster
End-of-Life Nurse Educator	Sarah Longmore
Bereavement Support Nurse	Kathryn Harding
HR Manager	Mandi Halton

Sub Committee	Chair	Vice Chair
Strategic Governance	Mirriam Lawton	Joanne Sloan
Clinical Governance	Adele Doherty	Sue Briscall
Financial Resourcing	Peter Wakefield	Maria Papaleo
Information Governance	Rebecca Sarbutts	Dr Paul Cook
Income Development & Communications	Rebecca Bentham	Stephen Schofield
Safety, Quality, Workforce, Innovation & Development	Lyndsey Donbavand	Jacquie Wood

Our Hospice.

Safeguarding.

Dr Kershaw's Hospice is fully committed to safeguarding the welfare of all those we care for, our visitors and staff. We promote an ethos that embraces diversity and inclusion and respects the rights of all involved within our services. We recognise our responsibility to promote safe practice and to protect all from harm. We have measures in place to ensure we are able to handle safeguarding issues effectively:

- The Safeguarding Vulnerable Adults and Safeguarding Children Policies form part of our core policies that all staff must read
- All staff must undertake a range of training including:
  - o Safeguarding Adults
  - o Safeguarding Children
  - o Prevent
  - o Mental Capacity Act, Deprivation of Liberty (DoLs) and Restraint (Clinical Staff)
  - o Equality, Diversity and Human Rights
  - o Learning Disabilities, Autism and Mental Health Awareness
  - o LGBTQ+ Awareness
  - o Chaperones and Consent (Clinical Staff)
- Our volunteers are required to complete Safeguarding Training upon joining and every three years thereafter
- We have robust reporting mechanisms through our Incident Reporting Module
- We have a number of staff members trained as Mental Health First Aiders
- The Safeguarding Audit is part of the Clinical Audit Calendar
- The DoLs Audit is included in the Clinical Audit Calendar
- We have robust recruitment practices in place
- We have mandatory DBS processes for staff and volunteers including renewals
- The DBS Audit is part of the Non-Clinical Audit Calendar

Information Governance.

Work has continued throughout 2022/23 to ensure that the Hospice was able to fulfil the requirements of the NHS Data Security and Protection (DSP) Toolkit.

We have continued to review data flow maps, impact assessments and risk assessments to give assurance that our information is secure and complies with General Data Protection Regulations. We have continued to develop and review Information Governance policies in order to refresh and develop our suite of policies in this area.

In December 2022, we employed the services of the North West Cyber Resilience Centre to complete a Cyber Risk Exposure Assessment. Overall, they found that Dr Kershaw's Hospice risk exposure was low with multiple categories across control areas fully meeting the standards set out. An action plan was developed so that we could make further improvements in a small number of areas and we worked on completing these actions over the remainder of the financial year.

We hold a Service Level Agreement with St Ann's Hospice to secure the invaluable skills of their Data Protection Officer. The Hospice also procures the specialist skills of an external IT company, Foresight IT Solutions. Together, with the assistance of Foresight and the Data Protection Officer, we gained certification to the Cyber Essentials Scheme. At Dr Kershaw's, we understand the importance of data security and work very closely with both partners.

We recognise the heightened risk of cyber attack and fully understand how this could affect the organisation should it occur. We have invested time and resource into upskilling our workforce by inviting and encouraging all staff to attend training sessions hosted by North West Cyber Resilience on the prevention and mitigation of cyber attacks. We have also taken specialist advice in this area to ensure that our organisation, information and service users are protected as much as possible.

Our Hospice.

Organisational Governance.

The Board of Trustees is fully committed to the values and principles of the Hospice. They are responsible for ensuring that Dr Kershaw's has a clear strategy, that it remains true to its original vision, and that it complies with all necessary rules and legal obligations. The Hospice, with oversight from the Board, has continued progressing with the strategic objectives set out in the 5 Year Strategy and made good progress throughout 2022-23.

Trustees are appointed following advertisement and interview by a panel of existing Trustees. References and Disclosure and Barring Service checks are taken up before a formal recommendation to appoint the individual is made to the Board by the Chair. Trustees also have an annual appraisal, conducted by the Chair. The Trustees participate in a mandatory training programme which includes Data Security, Health & Safety, Fire Awareness, Safeguarding Adults, Prevent and Equality & Diversity.

Trustees are recruited to ensure that the Board has a wide range of business experience and clinical knowledge. In 2022, Dr Kershaw's recruited five new Trustees with expertise in Finance, Income Development, Health & Safety, Risk Management, Assets, Facilities and Estates.

The Trustees are responsible for effectively managing our resources so that we are able to meet our objectives, this includes but is not limited to, monitoring spending in the best interests of the Hospice, approving the annual financial statement and budget and seeking to minimise risk. The day-to-day management of the Hospice is under the direction of the Chief Executive and the accompanying Senior Management Team.

All potential risks to the organisation are held within our Risk Register – this is a live document, updated at all Sub Committee Meetings with key issues reviewed at every Board Meeting by both the Chief Executive and the Trustees.

The Board meets with the Chief Executive and Medical Director on a bi-monthly basis to discuss pertinent matters taking place at the Hospice and its shops. Particular attention is given to financial resourcing, quality improvements, clinical data and training compliance and decisions are made to ensure that we are using our resources effectively without compromising quality of care.

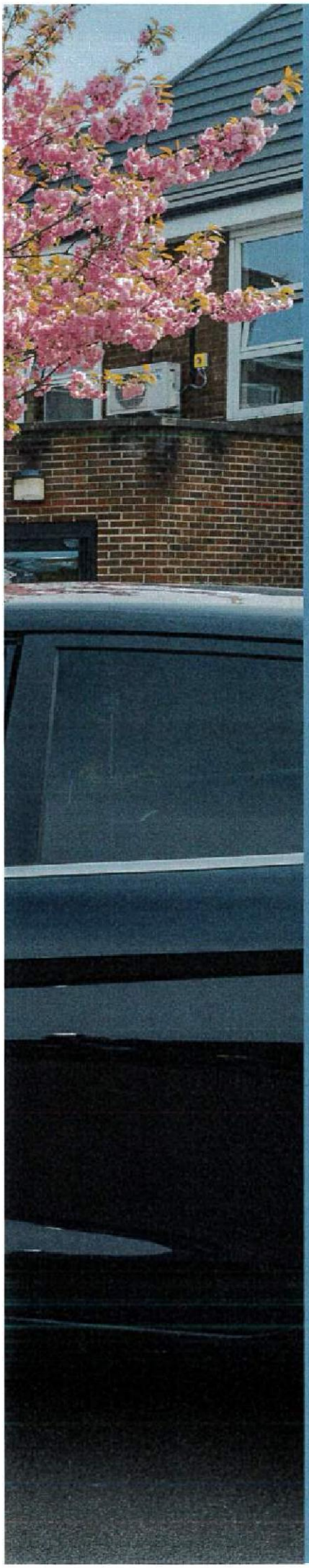
By November 2022, the Board comprised of fourteen Trustees. Jonathan Edwards stepped down in May 2022 as a result of limited availability. Mirriam Lawton (Chair) thanked him for the valuable contribution to the Income Development Sub Committee during his year supporting the Hospice Board. We recruited five new Trustees in November 2022 – Eileen Jones, Richard Buchanan, David Macdonald, Mark Hadfield and Ian Chapman. We wish to welcome them to Dr Kershaw's Hospice and look forward to working with them.

Mirriam Lawton (Chair) announced that she would be stepping down on 31st March 2023 and Paul Cook would take over as Chair from 1st April 2023. We would like to thank Mirriam for all of her hard work and dedication to the Hospice over the years. Jonathan Lipton took the position of Vice Chair in March 2023 alongside Jacquie Wood.

The Chair thanks the Trustees for the significant time commitment, excellent attendance records and contribution to improving outcomes for users of Dr Kershaw's services.

Joanne Sloan announced that she would be stepping down on 31st March 2023 as the Chief Executive Officer after 5 years in post and 9 years at the Hospice. Adele Doherty accepted the post of Chief Executive Officer and a handover period began in November 2022. Adele would like to thank Joanne for her many achievements over the years, her dedication to the Hospice and the continued support that she has extended to Adele personally.


Kershaw's Hospice



Audits.

In 2022, we developed further audit calendars to complement our existing Clinical Audit Calendar, these included Non-Clinical, HR and Volunteer Audit Calendars. The clinical and non-clinical audit results, summaries and associated action plans are displayed throughout the Hospice so that all staff are able to engage with the audits.

In August 2022, we developed an Audits and Action Plans module on Vantage resulting in the Quality Team having more effective oversight of this process. We are now able to track audits to completion, schedule in audits that need to be recompleted and analyse compliance.

We also introduced a Quality Monitoring Calendar to clearly outline how our audits meet the requirements set out in the five CQC domains. It outlines the frequency of audits and sets out a clear schedule in order to offer ongoing assurance.

91%
Overall Audit Compliance

Patient Experience.

Dr Kershaw's Hospice is always looking to initiate service improvements; therefore, feedback is extremely important to us. In the last year (April 2022 to March 2023) we received 224 compliments from service users and their loved ones in the form of surveys, cards and feedback forms.

Within the survey, we include the Friends & Family Test questions enabling us to participate in national data collection activities. The annual results of the Friends & Family Test show that 96% of respondents rated our service as 'Very Good', the highest rating.

Within our surveys, we ask patients and their loved ones whether there is anything that we could do to improve our services in order to gain insightful and constructive feedback. In this financial year, we received 6 concerns raised in survey responses. These concerns were investigated thoroughly by our Senior Clinical Team and the respondents were contacted and all concerns were resolved satisfactorily with actions taken to improve services.

The common themes in the responses were around delays in treatment or medication. To enable us to improve services, a new process was implemented on our Inpatient Unit, in order to map more clearly when medication was requested and when medication was given. An audit was completed following this and on average, pain medication was given within 15 minutes of a request. In terms of delays in treatment, our Hospice at Home sent a reminder to Community Services, to explain that we are a rapid response service and that scheduled visits for syringe drivers should be completed by other services where possible.

In our Sub Committee Meetings, we have developed dashboards which include compliments and complaints so that positive feedback and learning outcomes can be shared. We share feedback and patient stories at our Sub Committee Meetings to ensure everything we do enables the highest quality care.



> Excellent care given during a difficult time as a family. Staff were very professional.
>
> I cannot think of anything to improve the service, it was 10/10.

FFT Data 2022-23	Quarter 1	Quarter 2	Quarter 3	Quarter 4	TOTAL
Very Good	48	50	25	27	150
Good	2	2	0	0	4
Neither Good nor Poor	0	0	0	0	0
Poor	0	0	0	0	0
Very Poor	0	0	0	0	0
Don't Know	1	0	0	1	2

> At a very difficult time when my husband needed end-of-life-care our family felt great relief and comfort knowing he was in caring, professional 24-hour care. It truly is a wraparound service of the highest order.

> Staff were very attentive and treated my husband with kindness and respect. Staff were sympathetic after he died and explained what would happen carefully, I felt they cared about me as well as my husband.

Clinical Services.

Inpatient Unit.

In January 2023, we were able to use our two double rooms to their full capacity following a decision to use them as single rooms to control the infection risks during the pandemic. This brought our total beds up to twelve. With the increased number of beds, we were able to deliver two new services that worked in conjunction with Royal Oldham Hospital in order to relieve winter pressures until March 2023. The two services were:

In-Reach: The In-Reach Service worked to recognise patients who needed end-of-life-care who would be more suitably cared for in a hospice setting. The Hospice was able to care for 16 patients during the two months that the service was commissioned.

Step-Down: The Step-Down Service offered care for patients who were to be discharged to their home or to a care/nursing home safely with appropriate social support. The Hospice was able to care for 7 patients during the two months that the service was commissioned.

A member of our Senior Nursing Team visited Royal Oldham Hospital every morning to establish whether there were any patients suitable for a hospice admission. If a patient was found to be appropriate, we arranged for them to be admitted to the Hospice on the same day. Our Nursing Team also offered specialist advice on other palliative and end-of-life patients who were unable to be admitted to the Hospice.



195
Admissions to the IPU

0.5 days
Average referral to admission time for In-Reach & Step-Down

99%
Preferred Place of Death achieved

> "Dr Kershaws provided a perfect environment for my mother's final month. I only have excellent words and thanks for the care she received. THANK YOU!"



Hospice at Home.

Our Hospice at Home service continues to benefit the local community by providing individualised, responsive and flexible end-of-life-care. Hospice at Home work alongside and in addition to services provided by the Community Nursing Team, Home Care Providers and Specialist Palliative Care Nurses.

It is a rapid response service aiming to reduce the need for hospital admissions and allows patients, in their last weeks of life, to fulfil their wish to die comfortably at home. In total, 575 visits were deemed urgent and would have resulted in a hospital admission if our Hospice at Home Team were not there to help.

515
Urgent visits within 1 hour

265
Total patients cared for

99.5%
Preferred Place of Death achieved

575
Urgent visits (hospital admission avoided)

6,611
Phone calls

Hospice at Home Visits	2020/21	2021/22	2022/23
	3,300	2,051	2,261

> As my wife's life drew to its close because of Dementia, Dr Kershaw's Hospice at Home were a very welcome addition to our support services.

> I already knew about the high standard of care that the Hospice at Home team provide, but being on the receiving end of it really highlighted the true professionalism, dedication and warmth that they give in abundance.






Kershaw's
Hospice



















Caring Hands.

Caring Hands is a domiciliary care service with an excellent reputation for providing high quality, personalised care for patients with life-limiting illnesses. The team is specially chosen with well-trained Healthcare Assistants visiting patients in their last weeks or months of life in their own homes.

The service offers individualised care that is flexible and responsive to the patient and their loved ones. Throughout the year, the team cared for 141 patients and put in place an individualised care package for each service user.









Caring Hands Visits	2020/21	2021/22	2022/23
	8,723	8,468	7,792

> The care, help and kindness received from Caring Hands was greatly appreciated by us all. We could not have managed without them. Mum actually said the day before she died "what would we do without you?" The ladies made mums last days comfortable and allowed her to keep her respect and dignity with personal care. They also looked after me and checked how I was feeling too. Thank you so much!

> Staff were amazingly compassionate and professional. The level of care and support was exceptional.

Wellbeing Centre.

The closure of our Wellbeing Centre provided us with the opportunity to rethink how we were providing our Wellbeing services. We devised a new model of care that allows us to better meet the needs of specific populations and service users.

Groups have been arranged that are targeted and specialised. We have developed strong working relationships and collaborated with Macmillan, the Christie, Oldham Memory Assessement Service and other local care providers to ensure that our support is accessible to those who need it.

We have opened a number of groups in the Wellbeing Centre including:

The Nightbird Project: A creative life story project to support people affected by life-limiting illness started in February 2023.

Dementia Hub: A weekly drop-in support service in collaboration with Oldham Memory Assessment Service has been running since November 2022.

Men's Group: A counsellor-led Men's Group to support men with life-limiting illnesses began in January 2023 and has developed into an open group.

Social Group: A fortnightly social meeting open to anyone connected to the Hospice.

In the new financial year, we will be expanding our services to include:

- Wellbeing Walks
- Complementary Therapy and Crafts
- Carer Support Groups

691
Wellbeing Centre attendees

> **I went to the Wellbeing Centre after my father had passed away to collect some memory boxes for his grandchildren, the staff were brilliant and so caring, once again helping me during a very painful time.**



The Nightbird Project

We were awarded £10,000 from The Hospital Saturday Fund in early 2022 to set up The Nightbird Project, and after much planning, the project commenced in February 2023.

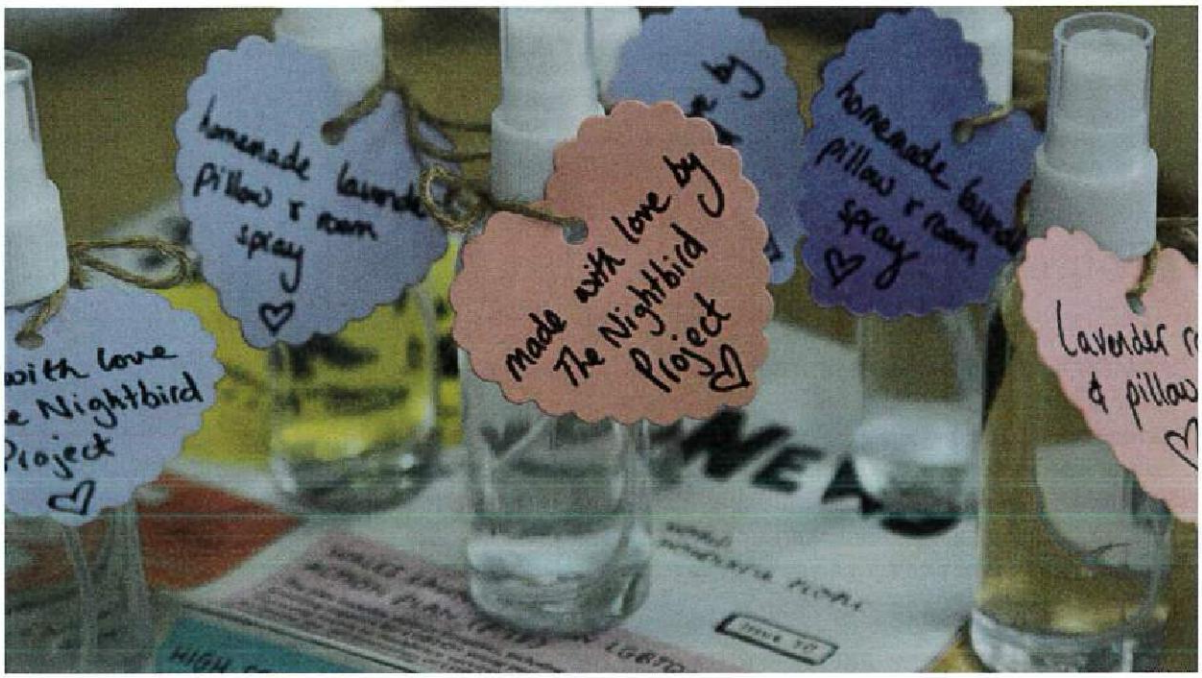
It was inspired by a former patient who died in the Hospice in September 2021 after receiving care from us for the last year of her life. She discovered and found comfort in her creative self during the course of her illness, and also wanted to share her life story with others.

Reflecting on this with her husband, we wanted to facilitate this experience for others affected by serious illness, and so The Nightbird Project was designed to support people to share their life stories in creative ways.

We have brought together a supportive group of incredible people all impacted by life-limiting illness, and have shared our stories, our laughter, our creativity and our friendship to wonderful effect.

8
Participants

> **It's such a beautiful atmosphere. Feels like I'm with friends even though we've just met.**



Bereavement Support.

Bereavement.

In terms of the expansion of our Bereavement Support Services, throughout the year we have seen a higher demand for more support and were able to offer three Bereavement Support Groups. As a result, and following an initial fixed term contract, the Hospice recognised the valuable contribution that the counsellor made and made the decision to make the role permanent.

We also provide bereavement and wellbeing resources in collaboration with Me and My Therapy, a counselling service specialising in bereavement and loss, to support children to communicate and process complex feelings about loss and bereavement. We also provide books with messages that are evidence-based and age appropriate to support children and young people as their loved ones are accessing Hospice services.



174
Attendances at group sessions

> **The uniqueness of our experience meant we experienced a care beyond end-of-life and were engaged months in advance with the Bereavement Support Nurse. This enabled us to live with cancer and also achieve our wishes at the end. The staff exceeded their vocational role throughout.**

Counselling.

Our full-time counsellor started at the Hospice in August 2022, and made a strikingly positive impact across our Inpatient and Wellbeing Services. The counsellor offers specialist psychological support where required on the Inpatient Unit, as well as one-to-one counselling sessions and group support to people accessing our Wellbeing and Bereavement Support Services.

103
One-to-One sessions*

** Over an eight month period*


STAFF
STAFF
Kershaw's Hospice

Learning & Organisational Development.

Dr Kershaw's Hospice is committed to the development of its staff and aims to provide a working environment in which staff are able to maximise their performance, commitment and contribution. This is supported by the End-of-Life Nurse Educator based at the Hospice.

At the Hospice, we provide a mandatory training programme via a blended approach to learning including face-to-face, online and practical methods of teaching. This reflects current practice and is consistent with relevant national and local regulations/legislation. Mandatory training compliance has been consistently high all year and we have expanded the programme to include Learning Disabilities, Autism & Mental Health Awareness and LGBTQ+ Awareness for all staff to promote inclusive practices.

We arrange a comprehensive induction for staff who are new to the Hospice, they are welcomed with a full orientation to help them settle into their new roles and ensure that they have the knowledge and support they need to perform their roles. We aim to give them background on the Hospice and its culture, information on the services we provide and our core values that we expect all staff to adhere to.

In October 2022 the Education, Training, Learning & Development Strategy was developed which outlines our objectives and visions to enhance and maintain the highest standards of quality directly in patient care and throughout all departments.

In line with the strategy, one of the objectives was to launch an Education and Training Prospectus as it is our mission to provide excellent education and training to improve the knowledge, skills and attitudes of our staff and volunteers. We also deliver training to our external partners in order to share our specialist knowledge in palliative and end-of-life-care and to promote best practice.

We deliver a wide range of specialist palliative, end-of-life and non-clinical in-house training, including but not limited to:

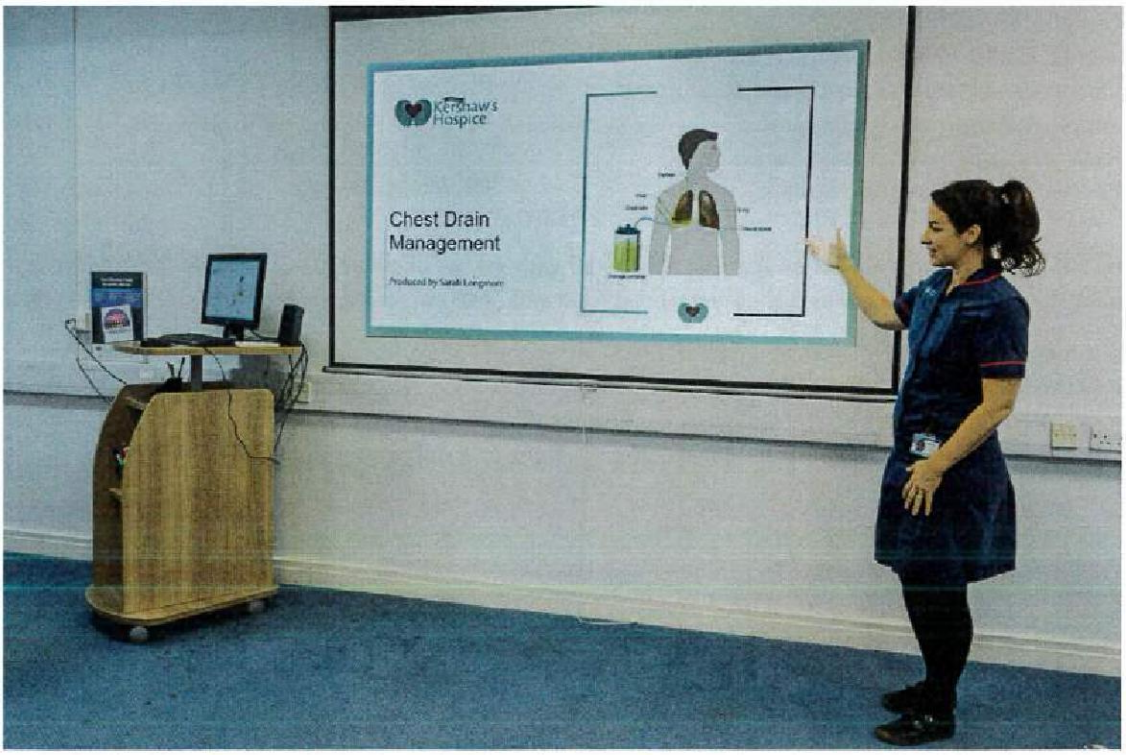
- Naso-Gastric (NG) Tube Placement & Management for Gastric Drainage
- Tracheostomy Care & Management
- Non-Invasive Ventilation
- Venepuncture & IV Cannula Insertion & Care
- Supporting a Healthy Bereavement
- Grief Awareness
- Mayfly Advance Care Planning Programme
- Palliative Care Emergency Training
- Delegation
- Team Building
- Communication Skills
- Presentation Skills

In order to deliver this training, we use specialist equipment including a training defibrillator and a patient care simulator mannequin for hands-on training in a wide range of skills required for day-to-day patient care.

We also work in collaboration with our partner organisations, Northern Care Alliance and Pennine Care NHS Foundation Trust, to provide on-site training to Trainee Nurse Associates (TNAs) to whom we also offer bespoke placements.

> **The training was extremely interesting, informative and useful. Thank you!**

- Basic Life Support 98%
- Communication 98%
- COSHH 100%
- Data Security / IG 97%
- Dementia Awareness 99%
- Equality & Diversity 100%
- Fire Awareness 96%
- Food Hygiene 100%
- Hand Hygiene 96%
- Health & Safety 98%
- Infection Prevention 99%
- Manual Handling 99%
- Prevent 100%
- Safeguarding Adults 99%
- Safeguarding Children 100%
- Waste Management 100%
- ANTT 100%
- Blood Transfusion 96%
- Falls Awareness 100%
- Health Record Keeping 95%
- Medicines Management 98%
- Nutrition & Hydration 100%
- Oral Care 98%
- Pressure Ulcer Prevention 96%
- Respiratory Training Day 100%
- Self-Verification: Nebuliser 100%
- Self-Verification: Oxygen Therapy 100%
- Self-Verification: Suction 100%
- Self-Verification: Syringe Driver 100%
- Self-Verification: Tracheostomy – Theory - 100%
- Verification of Death 100%
- Mental Health Awareness 100%
- Chaperones & Consent 95%
- Mental Capacity Act 98%



Staff Resilience.

Healthy Workforce.

In October 2022, we released the Wellbeing Strategy to establish how we would maintain a healthy, content, resilient and productive workforce who are able to work to the best of their ability. There are five key areas of focus within the strategy, they are:

- Mental Wellbeing
- Physical Wellbeing
- Social Wellbeing
- Financial Wellbeing
- Environmental Wellbeing

We are committed to the continuation of a regular wellbeing programme that was introduced in the previous financial year. We have extended our wellbeing offer and now organise for two wellbeing weeks to be held throughout the year where staff can attend a range of free complementary therapies and treatments.

Our cohort of Mental Health First Aiders recompleted their annual training to ensure that they are up-to-date with all relevant procedures.

We host Staff Forums each quarter following implementation in the previous year, a member of each team shares their current areas of focus, a recent high and a recent low. It has a steady membership and allows staff to engage with organisational updates including the risk register and current projects. The Nurse Forum continues to be held monthly with engagement from different members of the Clinical Team.

Current Wellbeing and Staff Progression Initiatives:

- Clinical Supervision
- Connect 5 Training
- Cycle to Work Scheme
- Discounted Staff Meals
- Mental Health First Aiders Bulletins
- Occupational Health Referral and Support
- People Management Programme
- Recognition of national days/weeks
- Recruitment & Retention Strategy
- Schwartz Rounds
- Significant Events Analysis meetings
- Staff Complementary Therapy Sessions
- Staff Discount Card
- Staff Surveys
- Themed Staff Wellbeing Weeks
- Trainee counsellors providing one-to-one support
- Wellbeing Pinboards
- Wellbeing Strategy

The HR Department is always on hand to assist staff with any wellbeing or HR concerns. It has gone from strength to strength following a member of staff successfully completing a HR Administration Qualification.

Four members of the Senior Management Team completed Neuro-linguistic Programming (NLP) training and have learnt the benefits of NLP techniques in the workplace. NLP can be used for improving mental health, team-building, effective workplace communication and goal-setting. The participants have trained as Coach NLP Practitioners and are able to offer coaching and mentoring to other Managers.


Kirkshaw's
Hospice

Volunteering.

The Volunteer Department has made significant progress implementing the Volunteer Development Programme over the last 12 months following successful development of the Volunteer Strategy. The development of specialist roles means almost all departments at Dr Kershaw's now have some level of specialist administrative support available to them.

The growth of the team and the offer available to volunteers has led to the successful development of a new role within the Volunteer Department which will commence in the new financial year.

One of the highlights of the year has been the ability to relaunch a social calendar for our volunteers, with a Christmas Social, Volunteer Week Celebrations and a number of small coffee mornings. Plans are now in place to develop a meaningful wellbeing offer for our Volunteer Team.

We now have systems in place which mean we can maintain a high level of training compliance through our robust renewal process. We have also sought opportunities to offer specialist training and development opportunities to our volunteers, e.g. Me and My Therapy Workshops, Deaf Awareness and Sign Language. This is something which we plan to expand upon; developing training sessions to support volunteers in their roles and as an opportunity for personal and professional development.

Despite the uncertainty of recent years, we have been fortunate and retained a large number of our volunteers and we are seeing an increase in applicants wanting to support us. In the last financial year, 318 volunteers contributed 30,914 hours of their time making a cost saving of £315,359.68 to the Hospice.

Without volunteer support there are a number of services we would struggle to continue to deliver and the pressures on our staff would increase significantly. Moving forward with implementing the Volunteer Strategy, we will be focusing on developing additional support for clinical services.

£315,359
Cost Saving

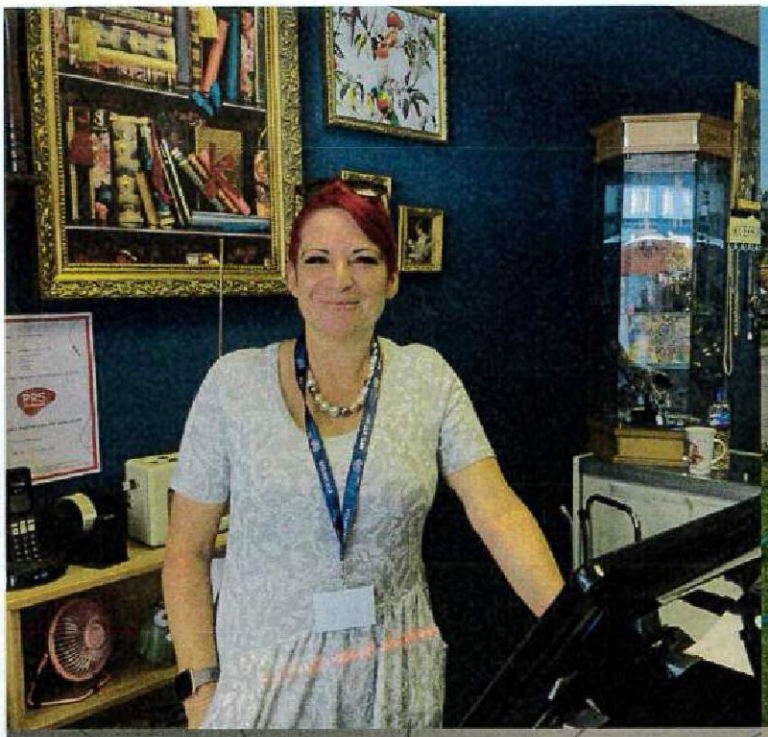
> **Dr Kershaws is a special place I am happy to be part of the team.**

> **I feel that I gain so much more than I give as a volunteer.**

30,914
Hours

318
Volunteers

> **It is always a pleasure to volunteer in the shop, there is an excellent team spirit and everyone is valued.**















Corporate Services.

Housekeeping.

The Housekeeping Team has continued to deliver high quality cleaning services and maintained excellent cleaning standards throughout the Hospice environment. This has been evidenced within the Patient-Led Assessments of the Care Environment (PLACE) audit report and surveys of experience responses where the cleanliness of the Hospice has met expectations.

> **Dr Kershaw's is such a beautiful, clean and calm hospice that is set in such lovely and tranquil gardens and surroundings.**

> **Every part of the building was kept lovely and clean.**



Corporate Services.

Reception.

The Reception Team has maintained a professional and friendly front-of-house reception service that delivers an exceptional customer service experience, making visitors to the Hospice feel welcome and valued.

A review of the reception services was completed to optimise processes and procedures. Role-related training has also been introduced to ensure that the team meet expectations with regards to providing a professional, helpful and polite response to enquiries in person and over the telephone.

Catering.

The Catering Team has continued to provide the highest quality and most appropriate meals for inpatients and ensure they receive the best possible nutrition during their stay at the Hospice.

Seasonal menus have been designed to offer a varied choice of home-cooked food for lunch and evening meals. The Catering Team also support specific dietary requirements, as required.

Dr Kershaw's Hospice has maintained its food hygiene rating of 5 following the unannounced inspection from the Foods Standard Agency, who were reassured with the catering procedures in place and very good standards were found with regards to hygienic food handling, cleanliness, the condition of facilities and management of food safety.

Due to the pandemic, restrictions were in place within the Hospice and the Wellbeing Centre was temporarily closed, this meant that activity within the onsite café was impacted as a result. In 2022/23, the Catering Team took the opportunity to remodel the café service and expand the menu options including the introduction of fresh sandwiches, jacket potatoes, homemade soup, tempting homemade treats and a special of the day.

Since the relaunch of Café K and the reopening of Dr Kershaw's Wellbeing Centre, it has been fantastic to see it is back to its vibrant self and complementing the activities that are taking place at the Hospice.

> **The food provided not just to the patient but for visitors too was excellent, even in the early hours of the morning they would provide a hot drink and a sandwich if you wanted one.**

> **They catered to Mums food needs and always provided a suitable choice.**

Facilities, Health & Safety & Risk Management.

The approved contractor process was refined to ensure all service providers and contractors carrying out work on Hospice premises are satisfactorily organised and competent in Health and Safety management, in regard to their own activities and their impact to staff, volunteers, the public and Hospice services. A full review of all existing principle and secondary contractors was completed and robust procedures were put in place to ensure mandatory requirements including the completion of a Hospice Contractor Questionnaire has been scrutinised and all due diligence checks have been approved prior to any planned maintenance and servicing being scheduled.

Developments have continued throughout 2022/23 to create bespoke maintenance modules on the Vantage electronic system, which is enhancing the effectiveness of record management and reporting functions within the Facilities Department.

In addition to verbal internal maintenance requests, a total of 665 work requisitions reported on the electronic Facilities Helpdesk were completed by the Facilities Department during 2022/23.

Throughout the year testing and servicing included within the preventative maintenance schedule was completed by the Facilities Department and approved contractors, which has supported the prevention of failures, malfunctions or breakdowns by performing regular inspections, testing, cleaning and replacement of parts as needed.

During 2022/23, the Hospice took the opportunity to proactively review the internal strategic and health and safety operational management processes and structures. PIB Risk Management (External Hospice Health & Safety Specialist Provider) completed an independent RiskMAP to inform the Hospice overall risk profile and actions for improvement.

Following receipt of the Risk Management Action Plan in April 2022 the Hospice enhanced operational controls including:

- Implementation of a Hospice Safety Management System developed in line with the Health & Safety Policy core values
- Development of a Hospice Legal Register outlining all related organisational regulations and legislation to evidence how the Hospice meets its moral and legal duty obligations
- Internal Hospice risk assessment review to ascertain if any further additional control measures could be identified to assist and support the reduction of impact and likelihood to the exposure of a hazard
- Safe system of work information sheets developed to enhance staff awareness relating to the control measures arising from internal risk assessments
- Mandatory training sessions to support working safely have been introduced
- Inclusion of a dedicated Health & Safety section on the Hospice intranet, which includes all relevant documentation and information for staff to access

In the ever-changing world of risk management, the RiskMAP has become a live process and will be kept under constant review.



665
Work requisitions completed

Quality, Innovation & Improvement.

Vantage.

We have continued to utilise our Vantage system to create more modules to support robust operational and data management procedures and to support quality initiatives. These modules have become an integral part of Hospice systems and help us to move towards becoming a paperless organisation. We are also able to manage personal data securely, improve efficiency and effectively manage processes.

New modules in 2022/23 include Audits and Action Plans, Strategic Objectives and CAS Alerts.

Actions and Audits Module

This module has allowed us to bring all paper-based action plans into one place so that actions are more visible, allowing staff to follow through with actions and provide progress updates. It is also easier to schedule in re-audits and ensure that we maintain high levels of compliance across the board.

Strategic Objectives Module

The Strategic Objectives module was launched to track our progress against the objectives set out in our 5 Year Strategy. The module allows permitted users to update the progress of an objective and the aim is to do this within Sub Committee Meetings where objectives have always been reviewed. Each objective has an associated action plan and tracks the percentage of completion.

CAS Alerts Module

The CAS Alerts Module was launched in November 2022 in order to record and track actions taken as a result of alerts from the Central Alerts System and Food Safety Alerts. The module is working really well and following an audit in March 2023 on its usage, the audit compliance was 93%.

Static Dashboards

Throughout the year, following development by Vantage, we were able to launch various static dashboards to all staff. This allows staff to easily check their upcoming training, core policies, annual leave, actions and much more. Senior Dashboards were developed for Line Managers and the Senior Team to allow them to keep track of their teams training compliance, annual leave requests, incidents, complaints and actions from audits or strategic objectives.

19
Strategic objectives achieved

241
Recorded actions completed



Income Development.

The Income Development Team's core objective is to secure sustainable income in support of the Hospice strategy. Only one third of Dr Kershaw's funding comes from the Integrated Care System (ICS), with the remaining £4.1 million annual budget being raised through fundraising activities and donations.

During the 2022/23 financial year, the Hospice saw a drop in fundraising income due to the cost of living crisis impacting the UK. However, our loyal supporters continued to donate enabling us to achieve some key highlights during the year.

Hospice Shops.

The stores went through a period of refurbishment during the fiscal year, focusing on a new boutique style and aligning with our revised branding, with all materials being sourced in-kind and the work carried out by Hospice staff and volunteers. Due to closures for the refurbishments the shops came in just under budget by £84,141, securing a gross income of £469,459. However, despite coming in just under budget, comparing activities with the year previous in 2021/22, sales increased by 40%, footfall increased by 8.3% and Average Transaction Value (ATV) was up by 23%.

The Hospice's newest asset, The Furniture Hub, which opened in November 2021, continues to go from strength to strength securing on average just over £10,000 a month in gross income, which is up by 53% a month from last financial year. The store has its own Facebook page and exceeded its target of 1,000 followers in just a couple of months. The store has also ventured into new opportunities to raise income, including rentable furniture, craft fayres, and selling children's sporting footwear.

Throughout the year there has been a number of retail recruitment campaigns, with staff retiring and to meet the growing demands on the Team. To support the Retail Team and to develop our warehouse activities we appointed two new part-time drivers, who provide much-needed collections and deliveries throughout the community.

A huge thank you to all our customers and donors who support our shops and help to raise vital income for patient care both in our Inpatient Unit and out in the community.

Hospice Lottery.

2022/23 saw our door-to-door and venue canvassers for the Lottery back in full swing, and in new venues. However, due to the cost of living crisis membership numbers started to fall slowly and numbers of players has stayed within the 13,700-13,800 region for some time, with small increases and decreases each month; offsetting the final number of members in play.

The Hospice was only able to run three bumper Draws in the year due to a lack of resource and the migration to a new Lottery software. Players were asked to donate instead of the usual Spring Draw. The three bumper Draws during Summer, Autumn and at Christmas raised £18,072.35 vs £47,544.24 in 2021 (which held four Draws). However, due to our longstanding members and their generosity, during 2022/23 the Lottery contributed £360,000 to the Hospice in support of patient care, compared to £300,000 in 2021/22.

To help the Lottery recover from the repercussions of the pandemic, to diversify our offering for members, and to reduce overheads, the Lottery Team conducted a piece of research with members to help inform the development of a new Lottery framework.

With a 4% response rate to questionnaires, the Lottery Team were able to use members' feedback to evolve the Lottery offer which included:

- The use of tickets and ticketless draws
- Reducing the number of bumper draws per year to two
- Reducing the number of editions of the Hospice newsletter from four to two per year
- Increasing the prize pot for each bumper Draw

This new framework will be embedded in the new financial year going forward.

Dr Kershaw's Hospice Lottery is committed to ensuring that the Lottery is operated in a secure, fair and socially responsible way and endorses responsible gambling amongst its members. Dr Kershaw's Hospice Lottery is a member of the Hospice Lotteries Association, which is committed to working together to encourage responsible gambling and provide access to support if needed. Dr Kershaw's Hospice is licensed and regulated in Great Britain by the Gambling Commission under account number 5224. 80p* of every £1 goes directly towards providing patient care, 9.9p* towards lottery prizes, and the remaining 10.1p* is spent on lottery administration, training, staff costs, licenses and marketing. The average number of players in the Draw is 13,858*.

Thank you to all our members and players of the Lottery and bumper Draws, for your continuous support. Every £1 you play helps the Hospice to care for patients and their families when they need it most.

**These figures are based on income and expenditure for December 2022.*

Quality, Innovation & Improvement.

Other Quality Developments.

The Quality Team worked on various other projects throughout the year including policy processes, audits and Key Performance Indicators.

Policy Process

In order to provide assurance around our policies, we introduced a system whereby staff would need to read a set of core policies relating to their role and sign to say that they have read and understood them. Staff were very understanding of this process and within a month all sheets were signed.

Audits

In order to align with the governance of clinical teams, we introduced audit calendars for non-clinical processes and teams. The Non-Clinical Audit Calendar covers many areas and the HR and Volunteer Teams introduced audits specific to their teams. We introduced a Quality Monitoring Calendar to provide assurance as to the audits that were to be completed throughout the year and the frequency in which the audits should be done.

Within the Clinical Audit Calendar, we introduced the Hospice Assessment and Accreditation System (HAAS) Audit. A similar tool is used in the community and we adapted it to measure the quality of care that is provided at the Hospice. The framework incorporates key clinical indicators and the five standards set out by the Care Quality Commission (CQC). In August we achieved 94% and developed an action plan to make improvements. We re-completed the audit in December 2022 and achieved a very impressive 98%.

Key Performance Indicators

In 2022/23, we began to develop our Key Performance Indicators and one of our main goals was to engage all staff with this. We settled on a document that covered the five CQC domains and set out our indicators within each of these. A research project was completed to find the best way to set targets, for example, against national targets or based on our own previous data. The template was completed in early 2023, ready for the data relating to Quarter 4 of 2022/23 to be collated and displayed in the new financial year.

As well as the document which we intend to be on display throughout the Hospice, a main display showcasing a selection of our Key Performance Indicators will be displayed in the Learning Hub.

GM Hospice Quality & Governance Group

In November 2022, GM Hospices created a new group to bring together the Quality and Governance Leads from each hospice. Our Clinical Data / Quality Manager was invited to join and the aim is:

- To establish a platform for discussing and improving the quality and governance practices within the Greater Manchester Hospices
- To foster collaboration and knowledge sharing among key stakeholders to enhance overall hospice performance
- To identify and address quality and governance issues, risks, and opportunities
- To develop strategies, policies and guidelines to promote a culture of quality and effective governance

We look forward to working with other hospices within Greater Manchester and sharing best practices and ideas.






Kershaw's Hospice
Thank you!
members for helping raise
in our community
co op












Kershaw's Hospice
Kershaw's Hospice


NEO
THE BUSINESS CENTRE
THE FURNITURE HUB


Kershaw's Hospice
YOUR PURCHASE HAS HELPED TO SUPPORT PATIENT CARE!


Kershaw's Hospice
29th April 201
Audrey Laycock
£1,000 00
ONE THOUSAND POUNDS

Fundraising & Marketing.

Community Fundraising.

Our community's support, as ever, did not waver throughout the year. The dedication and loyalty of our supporters is overwhelming and our thanks go out to all who supported us.

Throughout the year, members of the public hosted their own events or fundraising activities to raise vital funds for the Hospice. Activities ranged from dress down days, dance showcases, marathons, sponsored walks, hosting concerts, saving pocket money, to Facebook birthday fundraising, and more. To all our fundraisers, thank you to everyone who did something in aid of our Hospice and helped to raise awareness and essential funds for patients who need our care now and in the future.

In addition to all our supporters' events, our Hospice Community Team also hosted a range of challenges and events that people could sign up to, including; the Bunny Hop, Colours Fashion Show, Yorkshire 3 Peaks and a Sky Dive.

Dr Kershaw's Hospice Friends continued to give generously with over £25,950 donated to support clinical services.

Over £200,000 was raised by the community throughout the year, and our sincere thanks go to everyone who supported us including, but not limited to; Adventure Based Learning, Albert Lodge of Freemasons No854, Booths Garden Centre, Brooklands Private Day Nursery, CH Medical Practice, Co-Op Royton, Crompton & Royton Rotary Club, Crompton House School, Daisy Nook Garden Centre, Enterprise Rent-A-Car UK Ltd, Hollinwood Academy, Hope Congregational Church, Mossley Cancer Committee, Newbank Garden Centre, North Chadderton School, Oldham Hulme Grammar School, Oldham Metro Rotary, Primark Stores, Rotary Club of Oldham, Life for a Life, Saddleworth Tractor Group, Shaw and Crompton Parish Council, St Anne's Church of England Primary School, St Chad's CE Primary School, St Herbert's RC Primary School, The Village Day Nursery and Woodhouses Voluntary Primary School.

Marketing & Communications.

Our Communications Team has grown over the past year and continues to focus on dynamic, digitally-driven communications; drawing on online activities, using patients and their families' stories, and dispelling the myths surrounding hospices.

Online support has increased throughout the year with engagement and followers on Facebook, Twitter, Instagram, LinkedIn, and YouTube increasing. The Hospice has continued with its weekly page in the Oldham Times, featuring key updates and stories on patient care. Coverage has also been included in the local press and on the radio, including the Oldham Times, Oldham Reporter, The Oldham Chronicle (online), Saddleworth Monthly, Saddleworth Life, Saddleworth Independent and Oldham Community Radio 99.7FM.

Many thanks to all local media for their support with special thanks to the Oldham Times and Oldham Community Radio 99.7FM for their continued support of the Hospice.


HOSPICE HEROES

'We can't do this without your help and support'

New business centre offers firms fine range of facilities

Latics owner signs up for hospice event

Fundraising.

Event Fundraising.

The 2022/23 events calendar saw the return of our usual events, with the addition of some new activities for supporters to get involved with. However, we retained a virtual element to some of our events so that supporters from further afield or internationally could participate.

The first event of the fiscal year was a new event, Rose to Remember, which saw our community once again come together at the Hospice after such a long break due to the pandemic. The event had a lovely atmosphere and gave families the chance to a buy a rose to remember a lost loved one. The event received wonderful feedback, with members of the community stating how pleased they were that the Hospice was finally open once again. Over 400 roses were sold generating just over £8,000 in income for patient care.

Another new event for the year was the Dr Kershaw's Cup. This time, twenty-two corporate companies supported the Hospice by competing head-to-head on the golf course for the coveted trophy. In addition to a round of golf, participants enjoyed a welcome breakfast and a fundraising dinner with prizes presented after the game. The sell-out event raised just under £10,000 for the Hospice, and will now be a regular feature in our annual events calendar.

The calendar also saw the return of Strictly Dance, Light Up a Life, the Christmas Carol Concert and the Christmas Fayre. Collectively the Hospice's events programme raised £67,333 which was 22% over target.

The success of our events is due to our local community, and we want to thank everyone who has volunteered, participated, attended and supported our events this year. Our events bring our community together but also help to raise vital funds towards our clinical services that support patients in the Oldham Community.

Corporate Fundraising.

Corporate Partnerships have been slow to pick up following the pandemic, as companies recover and due to limited resources within the Hospice. However, staff recruitment and new initiatives have helped to revive this income stream for the Hospice.

The 1989 Club was launched in February 2023, which rewards businesses that enter into a Corporate Partnership with Dr Kershaw's. Membership of the club runs consecutively over a 3-year period, and includes a range of benefits for each business. Our founding members of the Club were Ribble Packaging, Pilgrim International and Olympic Construction.

New and longstanding supporters from local businesses continued to support the Hospice throughout the year through 'Charity of the Year' partnerships, sponsorship opportunities, volunteering, and donations. We are delighted to be working with the local business community and want to thank all our Corporate supporters.

Trusts & Foundations Fundraising.

Trust Fundraising had started to grow for the Hospice due to a dedicated Fundraiser in post. However, from August 2022 onwards this post has been vacant, limiting the number of applications we have been able to submit for funding.

Nonetheless, grant funding towards Hospice initiatives has been secured for:

- Bereavement boxes
- Comfort packs
- Volunteering
- Core costs
- Specific projects including The Nightbird Project

Dr Kershaw's is extremely grateful to the Trusts and Foundations that supported us throughout the year.

Strategic Report & Financial Review.

Financial Review.

The Statutory Accounts for the year ended 31st March 2023, have been prepared in accordance with the Statement of Recommended Practice Accounting and Reporting by Charities (SORP 2019), and comply with all statutory requirements. Following the appointment of the Hospice's Accountants and External Auditors, Chadwick & Company Chartered Accountants, both the format and content of the Statutory Accounts embrace the advice and recommendations of our Auditors.

The overall net increase in funds was £160,114 (2022: £690,767).

The Hospice's principal sources of income are donations, legacies, NHS income, our retail outlets, fundraising, Lottery and trading surpluses. A total income of £4.573 million was achieved in the current financial year – an increase on the previous financial year of 6%.

The Hospice recognises, and would like to give special thanks to Greater Manchester Integrated Care who continue to support the Hospice, and contributed £1.665 million to Dr Kershaw's. These funds are secured through our block contract to support both our Inpatient Unit and Hospice at Home services. Greater Manchester Integrated Care additionally continue to support further care in the community provided by our Caring Hands Domiciliary Service.

The Hospice was able to provide support services and capacity to Royal Oldham Hospital through the Winter Surge and received £360,000 for this.

Legacies received for the year ended 31st March 2023 totalled £523,494. Whilst this is higher than the long-term average, the figure is below the previous year which benefited from the exceptional Barras bequeathment of £802,038 to be used to develop the Hospice gardens.

Dr Kershaw's Lottery continued to performed well and contributions to patient care were £360,000 for 2022/23, an increase of £60,000 on the previous year. Following discussion with the Auditors, it was agreed that the unincorporated Lottery undertaking should make a payment to the Hospice of £500,000 from its surplus - this is recorded within *Other Trading* activities. The remainder of the surplus (£324,000) will be paid in the 2023/24 financial year.

Elsewhere, income generally held up well, with retail income benefiting from the first full year of trading at the Furniture Hub.

The Hospice continued to see increases in the cost of goods and services, with an increased spend of almost £694,000, a rise of 18.8% to the previous financial year. This primarily reflects cost of living impacts on both staff and non-staff costs alike.

As of 31st March 2023, the funds balance of the Hospice sits at £10.544 million. A detailed analysis of funds held can be found in notes 21 to 24 in the Hospices Statutory Accounts.

The Hospice would like to express its sincere thanks and appreciation to everyone who contributes to our running. Whether this be in time, gifts or monetary donations. The work we do would not be possible without our loyal supporters.

Investments.

Following a tendering exercise, RBC Brewin Dolphin were appointed as Fund Managers in December 2022. Financial Assets, primarily backing the Reserves of the Hospice, were subsequently transferred into a balanced, medium risk Investment Portfolio which over the longer term will generate returns which can be used to further advance the aims of the Hospice.

The Investment Portfolio is managed and monitored on behalf of the Board of Trustees by the Finance Resourcing Sub Committee.

Change in the market valuation of the Investment Portfolio are recorded within *Net Gains/(Losses) on Investments*. For the year ended 31st March 2023 this was a loss of £31,489.


Kershaw's Hospice
Kershaw's Hospice




Kershaw's Hospice
Dr Kershaw's Hospice
One Thousand and Six Pounds
and Ninety Seven Pence
£1006-97
Kershaw's Hospice


We are supporting
Kershaw's Hospice


THANK YOU
Kershaw's Hospice
Eight Hundred and Forty
Five Pounds Only
£945-00



Financial Review.

Reserves.

At 31st March 2023, the Hospice held total reserves of £10.544m of which £4.586m is restricted, with the main restriction being over the Hospice Building (£3.932m). The other principle component of restricted reserves relates to the Barras legacy (£588,260) which is disclosed seperately in Note 21 of the Statutory Accounts.

Statement of Unrestricted Funds is shown in Note 22 of the Statutory Accounts. During the year, the Trustees reviewed the reserves policy and set out the criteria required to hold designated reserves going forward.

Firstly, an *Absolute Minimum level of Free Reserves* will be held, equal to the funds required to ensure the orderly closure of the Hospice. This includes the fulfilment of all financial obligations, predominantly but not limited to staff notice/redundancy and lease commitments.

Secondly, the Hospice designates an element of its reserves to ensure the resilience and continuity of its core operations. This covers a period of loss making arising from, for example, a shortfall in income and set aside funds for essential expenditure (e.g. repairs, equipment replacement and building works).

Remaining free reserves are available for designation into the *Development Fund*. This will provide the financial resources required to further develop services in line with the Hospice's strategic objectives.

Reserves in excess of that designated, are available to spend on any of the charity's purposes and further enable the Hospice to meet its financial commitments and obligations. This excludes all fixed assets, restricted and designated funds.

Note 23 of the Statutory Accounts provides further detail around the *Designated Funds* of the Hospice.

Financial and Reputational Risk.

Dr Kershaw's Hospice recognises the risks associated with the nature of its operating activities. There have always been uncertainties - non-commissioned and voluntary income is less predictable and more difficult to budget for. The recent impact of COVID-19, the current cost of living crisis and high inflationary environment means that the Hospice now operates in a different, more volatile and possibly riskier environment.

The Hospice is pro-active in mitigating these risks via its Risk Management process. The Senior Management Team meet regularly to discuss current and potential risks, and put controls in place to mitigate these. Our main external risk, and this is reflected as the highest risk on our Risk Register, is that of Cyber Crime / Attack. Dr Kershaw's Hospice continues to work very closely with its partnering Hospices, and has for a number of years held a Service Level Agreement with St Ann's Hospice to secure the invaluable skills of their Data Protection Officer.



Statement of Board of Trustees' Responsibilities for the Financial Statements.

The Trustees are responsible for preparing the Trustees Report and the Financial Statements in accordance with applicable law and United Kingdom Generally Accepted Accounting Practice.

Company law requires the Board of 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 of the incoming resources and application of resources, including the income and expenditure, of the charitable company for that period. In preparing those financial statements the Trustees are required to:

- Select suitable accounting policies and then apply them consistently
- Observe the methods and principles in the Charity Statements of Recommended Practice (SORP)
- Make judgements and estimates that are reasonable and prudent
- State whether applicable accounting standards have been followed, subject to any material departures disclosed and explained in the financial statements
- Prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charity company will continue in business

The Trustees are responsible for keeping proper accounting records, which disclose with reasonable accuracy at any time the financial position of the charitable company 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 charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

So far as the Trustees are aware, there is no relevant information (as defined by section 418 of the Companies Act 2006) of which the charitable companies' auditors are unaware, and each Trustee has taken all steps necessary in order to make them aware of any audit information and to establish that the charitable company's auditors are aware of that information.



Dr Kershaw's Trustees 2022/23.

Statement of Board of Trustees' Responsibilities for the Financial Statements.

Public Benefit Statement.

In setting our objectives and planning services, the Trustees of Dr Kershaw's Hospice have considered the Charity Commission's general guidance on public benefit. Dr Kershaw's Hospice provides hospice services free of charge to those individuals aged over 18 years with life-limiting illnesses living in the Oldham Borough. The charity also provides supportive care for their families and carers and our care services are available, without restriction, to all groups in the communities we serve.

Charitable Purpose & Social Investment Policies.

To promote the relief of illness and suffering in such ways as the Trustees think fit:

(1) by establishing, maintaining and conducting residential nursing and convalescent homes for the reception and care of persons of either sex who are suffering at any age from any chronic or terminal illness or from any disability or disease attributable to old age or from any other physical or mental infirmity, disability or disease and so that any such home may be restricted as aforesaid to patients suffering from any particular type or types of illness, disability or infirmity and by providing medical or other treatment or attention for any such persons as aforesaid in their own home;

(2) by conducting and promoting or encouraging research into the care and treatment of persons suffering from any such illness, disability, disease or infirmity and particularly into the care and treatment of persons suffering from cancer or terminal illnesses and by providing for the dissemination of the results of such research;

(3) by promoting or encouraging or assisting in the teaching or training of doctors, nurses, physiotherapists and other persons engaged in any branch of medicine surgery, nursing or allied services and in the teaching or training of students in any branch of medicine, surgery or nursing or allied services





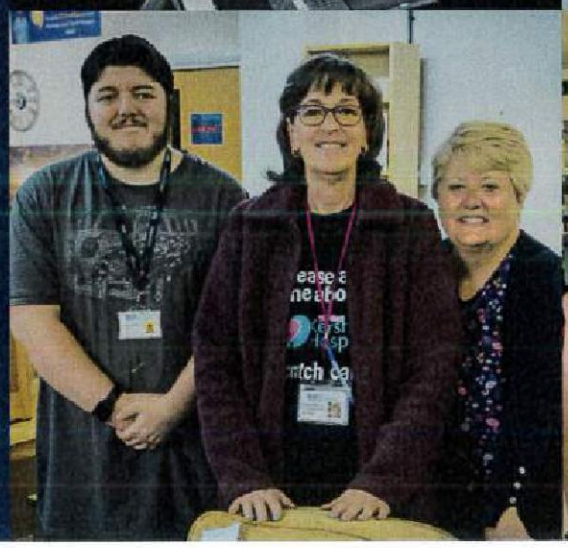









Love life
strong
Warrior
My magical life
The Nightbird Project
2023







Auditors.

In accordance with the company's articles, a resolution proposing that Chadwick & Company (Manchester) Limited, be reappointed as auditors of Dr Kershaw's Hospice, will be put to the Board of Trustees at the Annual General Meeting.

Approval.

The Trustees report including Accounts and Strategic Review was approved by the Trustees on 1 December 2023, and signed on their behalf by:

NAME:	Rachel Damianou	NAME:	Paul Cook
POSITION:	COMPANY SECRETARY	POSITION:	CHAIR / TRUSTEE
NAME:	Jacquie Wood	NAME:	Jonathan Lipton
POSITION:	VICE CHAIR / TRUSTEE	POSITION:	VICE CHAIR / TRUSTEE



Dr Kershaw's Hospice would like to express its sincere thanks and gratitude to everyone who fundraised, supported, or donated to the Hospice during the past year. Your generosity enables the Hospice to remain open and provide free, quality, specialist care to our local community. On behalf of all our staff, patients, and their families we

THANK YOU!




THANK
YOU!

DR KERSHAW'S HOSPICE

INDEPENDENT AUDITOR'S REPORT

TO THE TRUSTEES OF DR KERSHAW'S HOSPICE

Opinion

We have audited the financial statements of Dr Kershaw's Hospice (the 'charity') for the year ended 31 March 2023 which comprise the statement of financial activities, the balance sheet, the statement of cash flows and the notes to the financial statements, including significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including FRS 102 *The Financial Reporting Standard applicable in the UK and Republic of Ireland* (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 31 March 2023 and of its incoming resources and application of resources, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

Basis for opinion

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

Conclusions relating to going concern

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

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

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

Other information

The other information comprises the information included in the annual report other than the financial statements and our auditor's report thereon. The trustees are responsible for the other information contained within the annual report. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon. Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the course of the audit, or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

Opinions on other matters prescribed by the Companies Act 2006

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

- the information given in the trustees' report, which includes the strategic and directors' report and the strategic 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.

Matters on which we are required to report by exception

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

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

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

Responsibilities of trustees

As explained more fully in the statement of trustees' responsibilities, the trustees, who are also the directors of the charity 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 charity's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the trustees either intend to liquidate the 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 is available on the Financial Reporting Council's website at: https:// www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditor's report.

Extent to which the audit was considered capable of detecting irregularities, including fraud

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.

- At the planning stage of the audit we gain an understanding of the laws and regulations which apply to the Group and how management seek to comply with them. This helps us to make appropriate risk assessments.
- The principal risks of non-compliance with laws and regulations which we identified as being significant to the company related to UK Financial Reporting Standards, Company Law, Charity Law, UK Tax Legislation and Health & Safety regulations.
- During the audit we focus on relevant risk areas and review compliance with laws and regulations through making relevant enquiries and corroboration by, for example, reviewing Trustees Minutes and other documentation.
- We assess the risk of material misstatement in the financial statements including as a result of fraud and undertake procedures including:
  - I. Review of controls set in place by management
  - II. Enquiry of management as to whether they consider fraud or other irregularities may have occurred or where such opportunity might exist
  - III. Challenge of management assumptions with regard to accounting estimates
  - IV. Identification and testing of journal entries, particularly those which may appear to be unusual by size or nature.

Because of the inherent limitations of an audit, there is a risk that we will not detect all irregularities, including those leading to a material misstatement in the financial statements or non-compliance with regulations. This risk increases the more that compliance with a law or regulation is removed from the events and transactions reflected in the financial statements, as we will be less likely to become aware of instances of non-compliance. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.

Use of our report

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

Michael Royle BA(Hons)FCA (Senior Statutory Auditor)
for and on behalf of Chadwick & Company (Manchester) Limited

Chartered Accountants
Statutory Auditors
Capital House
272 Manchester Road
Droylsden
Manchester
M43 6PW

4 December 2023

DR KERSHAW'S HOSPICE

STATEMENT OF FINANCIAL ACTIVITIES INCLUDING INCOME AND EXPENDITURE ACCOUNT

FOR THE YEAR ENDED 31 MARCH 2023

	Notes	Unrestricted funds 2023 £	Restricted funds 2023 £	Total 2023 £	Unrestricted funds 2022 £	Restricted funds 2022 £	Total 2022 £
Income and endowments from:							
Donations and legacies	2	1,084,183	41,572	1,125,755	782,344	1,241,309	2,023,653
Charitable activities	3	2,026,485	-	2,026,485	1,597,153	-	1,597,153
Other trading activities	4	1,352,700	-	1,352,700	666,011	-	666,011
Investments	5	29,353	568	29,921	19,017	2	19,019
Other income	6	38,475	-	38,475	18,305	-	18,305
Total income		4,531,196	42,140	4,573,336	3,082,830	1,241,311	4,324,141
Expenditure on:							
Raising funds	7	637,051	-	637,051	521,366	1,095	522,461
Charitable activities	8	3,559,694	184,988	3,744,682	3,016,943	148,313	3,165,256
Total resources expended		4,196,745	184,988	4,381,733	3,538,309	149,408	3,687,717
Net gains/(losses) on investments	14	(39,382)	7,893	(31,489)	343	-	343
Net incoming/ (outgoing) resources before transfers		295,069	(134,955)	160,114	(455,136)	1,091,903	636,767
Gross transfers between funds		(49,339)	49,339	-	366,388	(366,388)	-
Net incoming/(outgoing) resources		245,730	(85,616)	160,114	(88,748)	725,515	636,767
Other recognised gains and losses							
Revaluation of tangible fixed assets		-	-	-	54,000	-	54,000
Net movement in funds		245,730	(85,616)	160,114	(34,748)	725,515	690,767
Fund balances at 1 April 2022		5,711,163	4,672,498	10,383,661	5,745,911	3,946,983	9,692,894
Fund balances at 31 March 2023		5,956,893	4,586,882	10,543,775	5,711,163	4,672,498	10,383,661

The statement of financial activities includes all gains and losses recognised in the year.

All income and expenditure derive from continuing activities.

The statement of financial activities also complies with the requirements for an income and expenditure account under the Companies Act 2006.

DR KERSHAW'S HOSPICE

BALANCE SHEET

AS AT 31 MARCH 2023

	Notes	2023 £	2023 £	2022 £	2022 £
Fixed assets					
Tangible assets	16		4,129,584		4,233,020
Investments	17		3,111,906		32,223
			7,241,490		4,265,243
Current assets					
Debtors	18	679,901		707,522	
Cash at bank and in hand		2,986,734		5,689,910	
		3,666,635		6,397,432	
Creditors: amounts falling due within one year	19	(364,350)		(279,014)	
Net current assets			3,302,285		6,118,418
Total assets less current liabilities			10,543,775		10,383,661
Income funds					
Restricted funds	21		4,586,882		4,672,498
Unrestricted funds					
Designated funds	23	4,955,456		3,950,000	
General unrestricted funds		947,437		1,707,163	
Revaluation reserve		54,000		54,000	
			5,956,893		5,711,163
			10,543,775		10,383,661

The financial statements were approved by the Trustees on 1 December 2023

R Damianou
Trustee

I Chapman
Trustee

Company Registration No. 05221414

DR KERSHAW'S HOSPICE

STATEMENT OF CASH FLOWS

FOR THE YEAR ENDED 31 MARCH 2023

	Notes	2023 £	2023 £	2022 £	2022 £
Cash flows from operating activities					
Cash generated from operations	**29**		466,699		466,884
Investing activities					
Purchase of tangible fixed assets		(88,625)		(505,929)	
Purchase of investments		(3,111,171)		-	
Investment income received		29,921		19,019	
Net cash used in investing activities			(3,169,875)		(486,910)
Net decrease in cash and cash equivalents			(2,703,176)		(20,026)
Cash and cash equivalents at beginning of year			5,689,910		5,709,936
Cash and cash equivalents at end of year			2,986,734		5,689,910

1 Accounting policies

Charity information

Dr Kershaw's Hospice is a private company limited by guarantee incorporated in England and Wales. The registered office is Turf Lane, Royton, Oldham, Lancashire, OL2 6EU. In the event of the charity being wound up, the liability in respect of the guarantee is limited £10 per member of the charity.

1.1 Accounting convention

The financial statements have been prepared in accordance with the charity's governing document, the Companies Act 2006 and "Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019)". The charity is a Public Benefit Entity as defined by FRS 102.

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

The financial statements have been prepared under the historical cost convention, modified to include the revaluation of freehold properties and to include investment properties and certain financial instruments at fair value. The principal accounting policies adopted are set out below.

1.2 Going concern

At the time of approving the financial statements, the trustees have a reasonable expectation that the charity has adequate resources to continue in operational existence for the foreseeable future. Thus the trustees continue to adopt the going concern basis of accounting in preparing the financial statements.

1.3 Charitable funds

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. The aim and purpose of each designated fund is set out in the notes to the financial statements.

Restricted funds are donations and grants which have been specified by the donor to be solely used for particular areas of the Hospice's work.

1.4 Income

Income is recognised when the charity is legally entitled to it after any performance conditions have been met, the amounts can be measured reliably, and it is probable that income will be received.

Cash donations are recognised on receipt. Other donations are recognised once the charity has been notified of the donation, unless performance conditions require deferral of the amount. Income tax recoverable in relation to donations received under Gift Aid or deeds of covenant is recognised at the time of the donation.

Legacies are recognised on receipt or otherwise if the charity has been notified of an impending distribution, the amount is known, and receipt is expected. If the amount is not known, the legacy is treated as a contingent asset.

Grants of a capital nature are treated as deferred credits and credited through the Statement of Financial Activities over the estimated use of the relevant fixed assets.

Income received in advance for a future fundraising event or for other income received relating to the following year are deferred until the criteria for income recognition are met.

1 Accounting policies **(Continued)**

1.5 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. Direct expenditure on charitable activities is classified under the following headings:

- In-patient care
- Medical services
- Day-care
- Hospice at home
- Caring Hands

The charity is registered for VAT and is able to recover input VAT on the majority of its activities. The charity operates VAT under partial exemption. Irrecoverable VAT is charged as a cost against the activity for which the expenditure was incurred.

Costs of raising funds includes expenditure incurred in generating donations; arranging, organising and participation in funding events; costs of operating the charity shops.

Support costs are those functions that assist the work the charity but do not directly undertake charitable activities. Support costs include staff and overhead costs for finance, governance and general overheads.

1.6 Tangible fixed assets

Tangible fixed assets are initially measured at cost and subsequently measured at cost or valuation, net of depreciation and any impairment losses.

Depreciation is recognised so as to write off the cost or valuation of assets less their residual values over their useful lives on the following bases:

Leasehold improvements	Over length of the lease
Fixtures and fittings	20% straight line
Motor vehicles	25% reducing balance
Long term leasehold property	Revaluation basis

Leasehold improvements comprise all improvements made to the main hospice site at Turf Lane, Royton, including the new in-patient unit and Barras legacy gardens.

The gain or loss arising on the disposal of an asset is determined as the difference between the sale proceeds and the carrying value of the asset, and is recognised in net income/(expenditure) for the year.

The long term leasehold property value is confirmed by the board of trustees each year. Professional revaluations are performed with sufficient regularity such that the carrying amount does not differ materially from that with could be determined using fair values at the reporting end date.

1.7 Fixed asset investments

Fixed asset investments are initially measured at transaction price excluding transaction costs, and are subsequently measured at fair value at each reporting date. Changes in fair value are recognised in net income/(expenditure) for the year. Transaction costs are expensed as incurred.

Shares in the trading subsidiary are carried at cost.

1 **Accounting policies** **(Continued)**

1.8 Impairment of fixed assets

At each reporting end date, the charity reviews the carrying amounts of its tangible assets to determine whether there is any indication that those assets have suffered an impairment loss. If any such indication exists, the recoverable amount of the asset is estimated in order to determine the extent of the impairment loss (if any).

1.9 Stocks

Goods donated to the Hospice shops are principally given as gift aid donations. When the goods are sold the value realised is communicated to the donor to confirm it is their wish that the receipt be retained by the Hospice as a gift aided donation. Accordingly, stock held has no value because the charity only has control over the value and income when the donation is confirmed by the donor.

1.10 Cash and cash equivalents

Cash and cash equivalents include cash in hand, deposits held at call with banks, other short-term liquid investments with original maturities of three months or less, and bank overdrafts. Bank overdrafts are shown within borrowings in current liabilities.

1.11 Financial instruments

The Hospice 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.

1.12 Creditors and provisions

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.

1.13 Employee benefits

The cost of any unused holiday entitlement is recognised in the period in which the employee's services are received.

Termination benefits are recognised immediately as an expense when the charity is demonstrably committed to terminate the employment of an employee or to provide termination benefits.

1.14 Retirement benefits

Payments to defined contribution retirement benefit schemes are charged as an expense as they fall due.

1.15 Leases

Rentals payable under operating leases, including any lease incentives received, are charged as an expense on a straight line basis over the term of the relevant lease.

2 Donations and legacies

	Unrestricted funds 2023	Restricted funds 2023	Total 2023	Unrestricted funds 2022	Restricted funds 2022	Total 2022
	£	£	£	£	£	£
Donations and gifts	560,689	20,243	580,932	565,925	21,769	587,694
Legacies receivable	523,494	-	523,494	204,854	802,038	1,006,892
Grants receivable	-	21,329	21,329	11,565	417,502	429,067
	1,084,183	41,572	1,125,755	782,344	1,241,309	2,023,653
Donations and gifts						
General donations	332,733	15,535	348,268	272,509	3,085	275,594
In memoriam	159,720	-	159,720	203,615	-	203,615
Friends of the Hospice	21,517	-	21,517	23,757	-	23,757
Income tax recoverable	46,719	-	46,719	66,044	-	66,044
Keira's Wishes	-	4,708	4,708	-	5,741	5,741
Rebecca Taylor	-	-	-	-	12,943	12,943
	560,689	20,243	580,932	565,925	21,769	587,694
Legacies receivable						
Barras memorial garden	-	-	-	-	802,038	802,038
Other	523,494	-	523,494	204,854	-	204,854
	523,494	-	523,494	204,854	802,038	1,006,892
Grants receivable						
Other grants	-	21,329	21,329	11,565	-	11,565
Covid-19 response	-	-	-	-	1,999	1,999
NHS England	-	-	-	-	415,503	415,503
	-	21,329	21,329	11,565	417,502	429,067

The NHSE awarded funding to allow the hospice to make available bed capacity and community support from April 2021 to March 2022 to provide support to people with complex needs in the context of the COVID-19 situation.

3 Charitable activities

	In-patient Care 2023	Hospice at Home 2023	Caring Hands 2023	Total 2023	In-patient Care 2022	Hospice at Home 2022	Caring Hands 2022	Total 2022
	£	£	£	£	£	£	£	£
Government funding	1,450,851	350,572	225,062	2,026,485	1,035,917	295,556	265,680	1,597,153

4 Other trading activities

	Unrestricted funds 2023 £	Unrestricted funds 2022 £
Fundraising events	37,037	42,518
Shop income	455,663	322,125
Hospice lottery	860,000	300,000
Donated by trading company	-	1,368
Other trading activities	1,352,700	666,011

5 Investments

	Unrestricted funds 2023 £	Restricted funds 2023 £	Total 2023 £	Unrestricted funds 2022 £	Restricted funds 2022 £	Total 2022 £
Dividends - equities	7,413	-	7,413	642	-	642
Income from unlisted investments	-	568	568	-	-	-
Interest - fixed interest securities	19,783	-	19,783	18,328	-	18,328
Bank interest	2,157	-	2,157	47	2	49
	29,353	568	29,921	19,017	2	19,019

6 Other income

	Unrestricted funds 2023 £	Unrestricted funds 2022 £
Room hire	16,330	9,700
Job Retention Scheme	-	3,439
Training	22,145	5,166
	38,475	18,305

7 Raising funds

	Unrestricted funds 2023	Unrestricted funds 2022	Restricted funds 2022	Total 2022
	£	£	£	£
Fundraising and publicity				
Staging fundraising events	38,357	42,709	1,095	43,804
Other fundraising costs	9,001	7,678	-	7,678
Staff costs	216,621	225,191	-	225,191
Fundraising and publicity	263,979	275,578	1,095	276,673
Trading costs				
Operating charity shops	143,525	103,697	-	103,697
Other trading activities	23,759	20,117	-	20,117
Staff costs	205,788	121,974	-	121,974
Trading costs	373,072	245,788	-	245,788
	637,051	521,366	1,095	522,461

8 Charitable activities

	In Patient Care 2023	Medical Services 2023	Daycare / Wellbeing 2023	Hospice at Home 2023	Caring Hands 2023	Total 2023	Total 2022
	£	£	£	£	£	£	£
Staff costs	1,369,200	375,701	171,418	354,689	570,431	2,841,439	2,506,312
Other direct costs	44,176	1,500	10,753	5,287	14,447	76,163	28,947
Medical costs	42,402	-	-	-	-	42,402	42,421
	1,455,778	377,201	182,171	359,976	584,878	2,960,004	2,577,680
Share of support costs (see note 9)	367,192	101,178	46,151	95,417	152,379	762,317	559,337
Share of governance costs (see note 9)	10,771	2,967	1,354	2,799	4,470	22,361	28,239
	1,833,741	481,346	229,676	458,192	741,727	3,744,682	3,165,256
Analysis by fund							
Unrestricted funds	1,752,898	460,011	212,153	438,072	696,560	3,559,694	3,016,943
Restricted funds	80,843	21,335	17,523	20,120	45,167	184,988	148,313
	1,833,741	481,346	229,676	458,192	741,727	3,744,682	3,165,256

8 **Charitable activities** **(Continued)**

For the year ended 31 March 2022

	In Patient Care	Medical Services	Daycare / Wellbeing	Hospice at Home	Caring Hands	Total 2022
	£	£	£	£	£	£
Staff costs	1,205,953	362,724	112,742	322,426	502,467	2,506,312
Other direct costs	16,830	242	2,789	6,690	2,396	28,947
Medical costs	42,421	-	-	-	-	42,421
	1,265,204	362,966	115,531	329,116	504,863	2,577,680
Share of support costs (see note 9)	267,978	81,272	25,261	72,243	112,583	559,337
Share of governance costs (see note 9)	13,530	4,103	1,275	3,647	5,684	28,239
	1,546,712	448,341	142,067	405,006	623,130	3,165,256
Analysis by fund						
Unrestricted funds	1,475,655	426,791	135,369	385,850	593,278	3,016,943
Restricted funds	71,057	21,550	6,698	19,156	29,852	148,313
	1,546,712	448,341	142,067	405,006	623,130	3,165,256

9 Support costs

	Support costs	Governance costs	2023	Support costs	Governance costs	2022
	£	£	£	£	£	£
Staff costs	209,950	-	209,950	164,229	-	164,229
Depreciation	192,061	-	192,061	182,008	-	182,008
Support direct costs	93,420	-	93,420	53,370	-	53,370
Support equipment & premises costs	266,886	-	266,886	159,730	-	159,730
Audit fees	-	11,000	11,000	-	8,500	8,500
Legal and professional	-	11,361	11,361	-	19,739	19,739
	762,317	22,361	784,678	559,337	28,239	587,576
Analysed between						
Charitable activities	762,317	22,361	784,678	559,337	28,239	587,576

Support and governance costs are allocated between the various charitable activities, based on the number of staff operating within that function of the charity.

Governance costs includes payments to the auditors of £11,000 (2022- £8,500) for audit fees.

10 Net movement in funds

	2023	2022
	£	£
Net movement in funds is stated after charging/(crediting)		
Depreciation of owned tangible fixed assets	192,061	182,008
Operating lease charges	94,378	83,097

11 Auditor's remuneration

The analysis of auditor's remuneration is as follows:

Fees payable to the charity's auditor and associates:	2023	2022
	£	£
Audit of the charity's annual accounts	11,000	8,500
Non-audit services		
Payroll services	1,200	4,450

12 Trustees

None of the trustees (or any persons connected with them) received any remuneration or benefits in their role as trustees, or reimbursement of expenses from the charity during the year.

P Wakefield received £1,010 in respect of accountancy services to cover a long term absence.
K Wrigley received £2,832 in their role as a healthcare assistant.

13 Employees

The average monthly number of employees during the year was:

	2023 Number	2022 Number
Direct charitable services	59	57
Fundraising services	21	18
Support services	30	27
Total	110	102

Employment costs	2023 £	2022 £
Wages and salaries	2,978,410	2,575,804
Social security costs	262,806	228,848
Other pension costs	232,582	213,054
	3,473,798	3,017,706

Volunteers continued to support us and contributed 30,914 hours of their time, equating to a staff cost saving of £315,000 (2022 - 28,375 hours, saving of £262,000).

The full time equivalent average monthly head count was 84 (2022: 80).

The number of employees whose annual remuneration, excluding pension contributions, was £60,000 or more were:

	2023 Number	2022 Number
£70,001 - £80,000	3	2
£90,001 - £100,000	1	1

14 Net gains/(losses) on investments

	Unrestricted funds 2023 £	Restricted funds 2023 £	Total 2023 £	Unrestricted funds 2022 £
Revaluation of investments	(39,382)	7,893	(31,489)	343

15 Taxation

The charity is exempt from Corporation Tax in line with paragraph 1 of Schedule 6 of the Finance Act 2010.

16 Tangible fixed assets

	Leasehold improvements	Leasehold improvements post 2002	Fixtures and fittings	Motor vehicles	Long term leasehold property	New inpatient unit project	Barras legacy garden	Total
	£	£	£	£	£	£	£	£
Cost or valuation								
At 1 April 2022	540,693	2,644,406	347,227	32,380	124,000	2,921,743	178,584	6,789,033
Additions	-	-	-	-	-	49,339	39,286	88,625
At 31 March 2023	540,693	2,644,406	347,227	32,380	124,000	2,971,082	217,870	6,877,658
Depreciation and impairment								
At 1 April 2022	540,693	1,635,912	239,285	31,911	-	108,212	-	2,556,013
Depreciation charged in the year	-	38,789	34,852	117	-	110,110	8,193	192,061
At 31 March 2023	540,693	1,674,701	274,137	32,028	-	218,322	8,193	2,748,074
Carrying amount								
At 31 March 2023	-	969,705	73,090	352	124,000	2,752,760	209,677	4,129,584
At 31 March 2022	-	1,008,494	107,942	469	124,000	2,813,531	178,584	4,233,020

16 Tangible fixed assets **(Continued)**

Leasehold improvements - represents expenses incurred on the main hospice property at Turf Lane, Royton, prior to obtaining a lease on the premises. Accordingly, all expenditure in the Oldham Hospice Appeal during the years ending on 30 September 2001 was written off as incurred. From 1 October 2001 the Oldham Hospice Appeal occupied the property under a lease with the Pennine Acute Hospital Trust (formerly the Oldham NHS Trust) for a period of 25 years at a peppercorn rent, due to expire October 2025. However, as the directors wished to carry out a major rebuild, further negotiations took place during 2018 and a new lease was signed on 29 March 2018, for a further 30 years with a view to two subsequent 30-year extensions.

Leasehold improvements post 2002 - represents costs incurred on the main hospice property from 2002 onwards by The Oldham Hospice Appeal and Dr. Kershaw's Hospice towards which the hospice has received grants and other financial assistance. The net book value of this asset equates to the restricted leased building fund reserve. The costs and the reserves will be depreciated/amortised over the remaining committed lease period.

Long term leasehold property - is the building owned by the Hospice and used as part of the Shaw shop at 50 Market Street, Shaw. The property was last revalued by Breakey & Nuttall, Chartered Surveyors, on 4 November 2022.

New inpatient unit project - represents costs incurred on the IPU, reception and car park. The costs and the reserves will be depreciated/amortised over the remaining committed lease period.

Barras legacy garden - represents costs to create a memorial garden, funded through the Barras legacy. The costs and the reserves will be depreciated/amortised over the remaining committed lease period.

17 Fixed asset investments

	Listed investments	Cash in portfolio	Other investments	Total
	£			£
Cost or valuation				
At 1 April 2022	32,123	-	100	32,223
Additions	3,041,397	69,774	-	3,111,171
Valuation changes	(31,488)	-	-	(31,488)
At 31 March 2023	3,042,032	69,774	100	3,111,906
Carrying amount				
At 31 March 2023	3,042,032	69,774	100	3,111,906
At 31 March 2022	32,123	-	100	32,223

The Hospice invests in a mixture of Fixed Interest deposits, Securities and Equities. Investment performance is monitored on behalf of the Board of Trustees by the Finance Resourcing Sub-Committee. (FRSC)

FRSC are responsible for the ongoing review of the Investment Policy statement, monitoring the cashflows of the Hospice and maintaining liquidity required to fund operations.

17 Fixed asset investments (Continued)

Other investments comprise:	Notes	2023 £	2022 £
Investments in subsidiaries	28	100	100

Investments at fair value comprise:	2023 £	2022 £
Corporate bonds - cost £25,000	29,949	29,949
Investment shares bequested	1,910	2,174
Brewin Dolphin RBC investments	3,079,947	-
	3,111,806	32,123

18 Debtors

Amounts falling due within one year:	2023 £	2022 £
Trade debtors	270,915	113,415
Amounts owed by subsidiary undertakings	57,779	74,757
Other debtors	36,463	19,661
Prepayments and accrued income	314,744	499,689
	679,901	707,522

19 Creditors: amounts falling due within one year

	2023 £	2022 £
Trade creditors	52,643	55,256
Other taxation and social security	62,594	57,840
Other creditors	46,105	35,591
Accruals and deferred income	203,008	130,327
	364,350	279,014

20 Retirement benefit schemes

The charity operates a defined contribution pension scheme for all qualifying employees. The assets of the scheme are held separately from those of the charity in an independently administered fund.

The charge to profit or loss in respect of defined contribution schemes was £232,582 (2022 - £213,054).

21 Restricted funds

The income funds of the charity include restricted funds comprising the following unexpended balances of donations and grants held on trust for specific purposes:

	Movement in funds				Movement in funds				
	Balance at 1 April 2021	Incoming resources	Resources expended	Transfers	Balance at 1 April 2022	Incoming resources	Resources expended	Transfers	Balance at 31 March 2023
	£	£	£	£	£	£	£	£	£
Restricted capital funds	3,693,812	-	(147,001)	453,798	4,000,609	-	(157,092)	88,625	3,932,142
Designated capital funds	186,989	-	-	(186,989)	-	-	-	-	-
Covid-19 response funds	-	417,502	(594)	(416,908)	-	-	-	-	-
Keira's Wishes	30,590	5,741	(122)	-	36,209	4,708	(710)	-	40,207
Furnished with Love	35,592	-	(973)	(34,619)	-	-	-	-	-
Rebecca Taylor Fundraising	-	12,943	-	-	12,943	-	(2,143)	-	10,800
Barras legacy garden	-	802,039	(718)	(178,584)	622,737	8,461	(3,652)	(39,286)	588,260
Other	-	3,086	-	(3,086)	-	36,864	(21,391)	-	15,473
	3,946,983	1,241,311	(149,408)	(366,388)	4,672,498	50,033	(184,988)	49,339	4,586,882

22 Unrestricted funds

These are unrestricted funds which are material to the charity's activities made up as follows:

		Movement in funds					Movement in funds			
	Balance at 1 April 2021	Incoming resources	Resources expended	Transfers	Revaluations	Balance at 1 April 2022	Incoming resources	Resources expended	Transfers	Balance at 31 March 2023
	£	£	£	£	£	£	£	£	£	£
General fund	2,529,746	3,083,173	(3,538,309)	(367,447)	-	1,707,163	4,531,196	(4,236,127)	(1,054,795)	947,437
Revaluation reserve	-	-	-	-	54,000	54,000	-	-	-	54,000
	2,529,746	3,083,173	(3,538,309)	(367,447)	54,000	1,761,163	4,531,196	(4,236,127)	(1,054,795)	1,001,437

23 Designated funds

The income funds of the charity include the following designated funds which have been set aside out of unrestricted funds by the trustees for specific purposes:

	Balance at 1 April 2021	Transfers	Balance at 1 April 2022	Transfers	Balance at 31 March 2023
	£	£	£	£	£
Development fund	770,985	229,015	1,000,000	(110,900)	889,100
Maintenance fund	700,000	-	700,000	(488,000)	212,000
Closure reserve	1,745,180	504,820	2,250,000	(549,244)	1,700,756
Adversity reserve	-	-	-	608,400	608,400
Income risk reserve	-	-	-	1,545,200	1,545,200
	3,216,165	733,835	3,950,000	1,005,456	4,955,456

The Financial Resource Sub Committee (FRSC) of the Board meets regularly to review the reserves policy and the criteria required to hold reserves on an ongoing basis. FRSC adopt the following principles, as set out in the Reserves Policy:

1. Firstly, reserves are allocated to fund the orderly closure of the Hospice.
2. Secondly, the Hospice allocates reserves to ensure the resilience and continuity of its core operations.
3. Remaining reserves are available for designation into the Development fund. This sets aside funds required to develop and improve services in line with the Hospice's strategic objectives.

Development Fund
Sets monies aside to enable the Hospice to further develop its service and invest in its infrastructure over a 3 year period. For 2022/23 this includes a new outdoor facility for the Wellbeing Centre, introduction of a Night sitting service plus a number of capital projects in both clinical services and the Hospice's support functions.

Maintenance Fund
Covers essential one off repairs, maintenance and essential equipment replacement.

Closure Reserve
Sets funds aside to cover the orderly closure of the Hospice. Predominantly but not limited to staff notice/ redundancy and lease commitments.

Adversity Reserve
Protects the Hospice against unplanned events. For 2022/23 this covers the risk of a material fall in the market valuation of the recently established Investment fund.

Income Risk Reserve
Sets funds aside to cover a fall in income levels, ensuring the activities of the Hospice can continue until income recovers or adjustments are made. The trustees consider a fallow income period of 2 years to be appropriate. Each income stream has been assessed and a reduction factor applied in each case.

24 Analysis of net assets between funds

	Unrestricted funds 2023 £	Restricted funds 2023 £	Total 2023 £	Unrestricted funds 2022 £	Restricted funds 2022 £	Total 2022 £
Fund balances at 31 March 2023 are represented by:						
Tangible assets	197,442	3,932,142	4,129,584	232,411	4,000,609	4,233,020
Investments	2,703,445	408,461	3,111,906	32,223	-	32,223
Current assets/(liabilities)	3,056,005	246,280	3,302,285	5,446,529	671,889	6,118,418
	5,956,892	4,586,883	10,543,775	5,711,163	4,672,498	10,383,661

25 Operating lease commitments

At the reporting end date the charity had outstanding commitments for future minimum lease payments under non-cancellable operating leases, which fall due as follows:

	2023 £	2022 £
Within one year	86,994	74,343
Between two and five years	228,720	265,083
In over five years	92,792	116,042
	408,506	455,468

26 Capital commitments

	2023 £	2022 £
At 31 March 2023 the charity had capital commitments as follows:		
Contracted for but not provided in the financial statements:		
Acquisition of property, plant and equipment	-	48,936

27 Related party transactions

Remuneration of key management personnel

The remuneration of key management personnel, including employers NI and pension contributions is as follows.

	2023 £	2022 £
Aggregate compensation	479,968	454,062

The Hospice considers that the key management personnel comprise the Trustees and the Senior Management Team - who currently are the Chief Executive Officer, Medical Director, Director of Clinical Services, Director of Quality and Governance, Director of Finance, Director of Income Development and Marketing.

28 Subsidiaries

Details of the charity's subsidiaries at 31 March 2023 are as follows:

Name of undertaking	Registered office	Nature of business	Class of shares held	% Held
Dr Kershaw's Hospice (Trading) Limited	England & Wales	Trading company	Ordinary	100.00

The aggregate capital and reserves and the result for the year of subsidiaries excluded from consolidation was as follows:

Name of undertaking	Profit/(Loss) Transferred £	Capital and Reserves £
Dr Kershaw's Hospice (Trading) Limited	-	100

The trading subsidiary has not been consolidated within the accounts as it is not considered to be material to the overall results of the charity.

Unincorporated undertakings

Dr Kershaw's Hospice Lottery is related to the Hospice but is independently registered with and regulated by the Gambling Commission, with whom accounts are filed annually. The lottery exists solely to contribute surpluses to the Hospice and at 31 March 2023 had distributable reserves of £487,240 (2022: £854,773).

29	**Cash generated from operations**	**2023**	**2022**
		£	**£**
	Surplus for the year	160,113	636,768
	Adjustments for:		
	Investment income recognised in statement of financial activities	(29,921)	(19,019)
	Fair value gains and losses on investments	31,489	(343)
	Depreciation and impairment of tangible fixed assets	192,061	182,008
	Movements in working capital:		
	Decrease in debtors	27,621	1,263,911
	Increase/(decrease) in creditors	85,336	(1,596,441)
	Cash generated from operations	466,699	466,884

DR KERSHAW'S HOSPICE

England & Wales - Charity number 1105924

Accounts

Doctor Kershaw's Hospice



ANNUAL REPORT & FINANCIAL REVIEW

Year Ending 31 March 2022


You are at the heart of
everything we do!

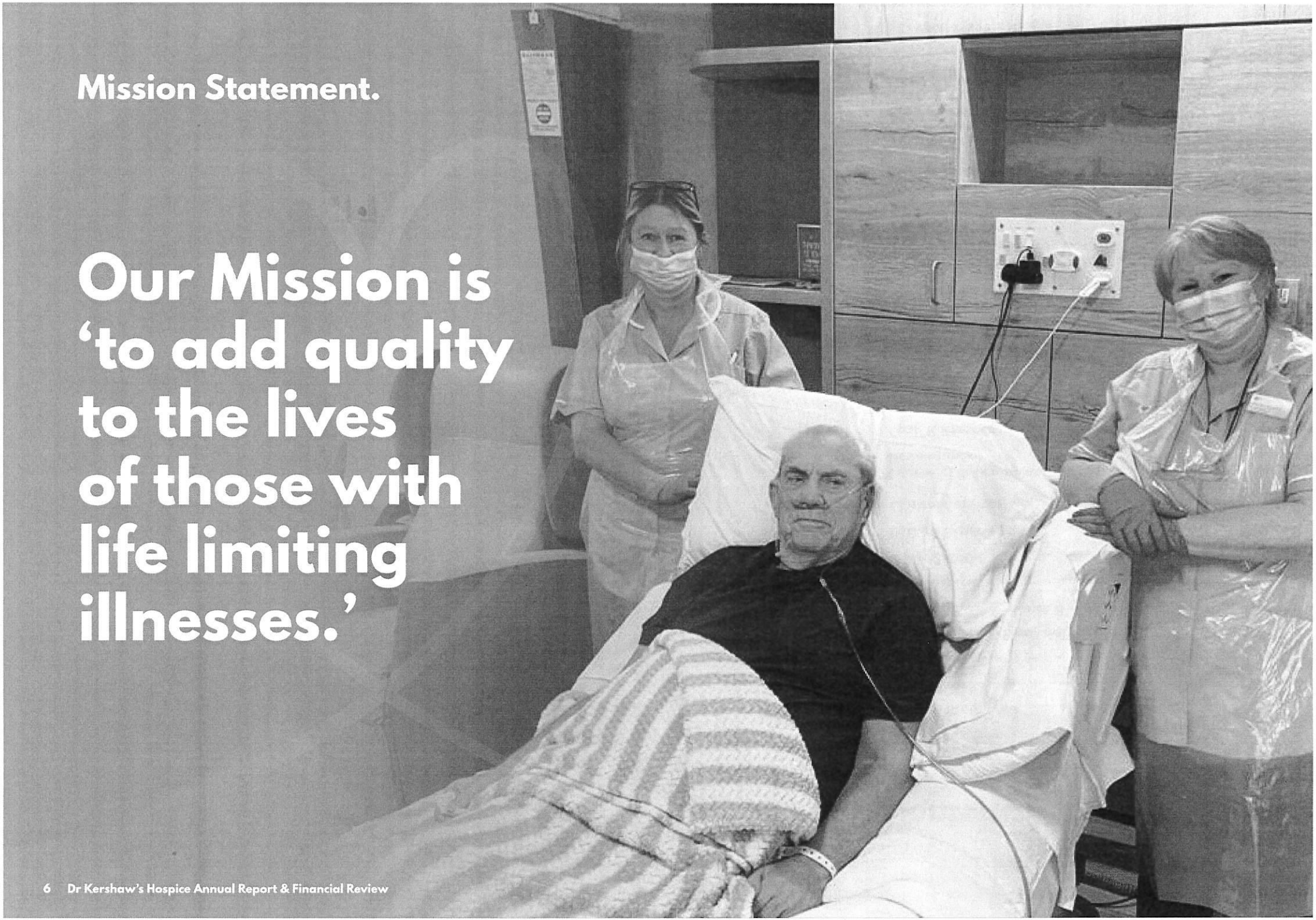


Contents.

Mission Statement	6
Our Values	8
About Dr Kershaw's	11
Management & Financial Details	12
Structure, Governance & Management	13
Our Hospice	14
Clinical Audit	19
Patient Experience	20
Clinical Services	22
Learning & Organisational Development	32
Staff Resilience	34
Volunteering	36
Human Resources	38
Quality, Innovation & Improvement	39
Income Development	42
Financial Review	48
Statement of Board of Trustees' Responsibilities for the Financial Statements	52
Independent Auditors' Report	54
Statement of Financial Activities	57
Balance Sheet	58
Statement of Cash Flows	59
Notes to the Financial Statements	60

Mission Statement.

Our Mission is ‘to add quality to the lives of those with life limiting illnesses.’



Our Values.

Inclusiveness

We recognise, respect and embrace the diversity of our community, promoting equality in all that we do.

Openness & Transparency

Our openness and transparency reflects our duty to the patient and our statutory obligations.

Dignity & Respect

We treat our patients with the utmost respect, maintaining privacy and dignity at all times.

Responsiveness

We are responsive to the individual needs of our patient, their families and carers.

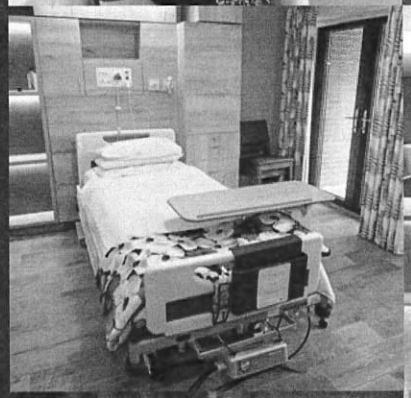
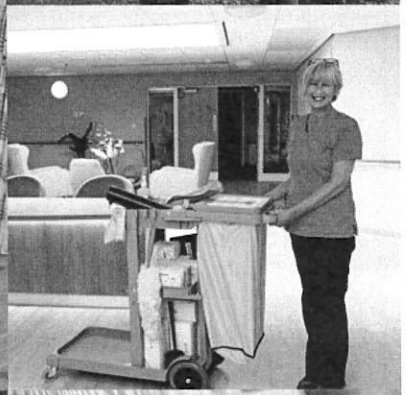
Compassion

We treat our patients, families and carers with compassion.

High Quality Care

We are dedicated to the provision of the highest quality evidence-based care.









About Dr Kershaw's Hospice.



Dr Kershaw's Hospice is an adult hospice for Oldham and its surrounding areas. As a charity, we provide free specialist care for those with life-limiting illnesses as well as support for those who are important to them - loved ones, families, friends and even pets.

Since the Hospice first opened its doors in 1989, we have been providing care and support for the people of Oldham and the local boroughs, both during a person's illness, at death, and into bereavement - for as long as they need us.

We endeavour to be a caring organisation for all our patients, our staff, our volunteers and our partners across the community - other hospices, NHS & non-NHS organisations.

As leaders in our field, we reach out into family homes, hospitals, care homes and out to colleagues; offering emotional, spiritual and practical support.

The Trustees (who are also Trustees of the charity for purposes of company law) present their financial statements and annual report for the year ended 31 March 2022. The other general information given in this report covers the year between annual meetings.

Acknowledgements.

The Trustees would like to thank Hospice UK for its invaluable financial support throughout this difficult year, enabling Dr Kershaw's to continue its vital work whilst also navigating the impact of the COVID-19 pandemic.

Thanks must also be given to our Corporate Partners for their generous support, including, but not limited to; Interserve, The Co-Op, Colorplas, Jackson and Jackson, Radial, Ribble Packaging, Professional Oldham, Norcoss Lees & Riches Solicitors, Widdop and Co, Primark, Cuttle & Co Solicitors, Pearson Solicitors and Financial Advisers, Touch Solicitors Ltd, and Wrigley Claydon Solicitors.

We are also extremely grateful to all the Trusts and, Foundations who have given generously to the Hospice throughout the year, including: The Albert Hunt Trust, The Hospital Saturday Fund, The Treeside Trust, Greater Manchester High Sheriff Police Trust, and The Masonic Charitable Foundation.

The Hospice relies on the continued support of our local community, and to all the individual donors and event participants, without whom our work would not be possible, and to the generous people who left a gift to Dr Kershaw's in their Will, or have pledged to do so in the future, we thank you all for your unwavering support and generosity.

Management & Financial Details.

Trustees.

Mirriam Lawton (Chair)	Appointed January 2020
Dr Paul Cook (Vice Chair)	Appointed January 2020
Jacqueline Wood (Vice Chair)	Appointed January 2021
Jonathan Lipton	Appointed January 2015
Sue Briscall	Appointed April 2014
Peter Wakefield	Appointed December 2018
Rachel Damianou	Appointed October 2019
Kim Wrigley	Appointed January 2021
Stephen Schofield	Appointed January 2021
Jonathan Edwards	Appointed January 2021

Trading Company.

Dr Kershaw's Hospice Ltd	Company Secretary - Rachel Damianou
Company Number - 5221414	Charity Number - 1105924

Senior Management Team.

Joanne Sloan	Chief Executive Officer
Adele Doherty	Director of Clinical Services
Dr Matthias Hohmann	Medical Director
Maria Papaleo	Director of Finance
Lyndsey Donbavand	Director of Quality & Governance
Rebecca Bentham	Director of Income Development & Marketing
Lindsey Harper	Lead Nurse for Community Services
Kelly Foster	Senior Sister
Sarah Longmore	End-of-Life Nurse Educator

Banking Services.

Barclays Bank PLC	25 High Street, Oldham, OLl 3AZ
National Westminster Bank PLC	8 Rochdale Road, Royton, Oldham, OL2 8QJ
Charities Aid Foundation (CAF)	Kings Hill, West Mallin, Kent, ME19 4TA

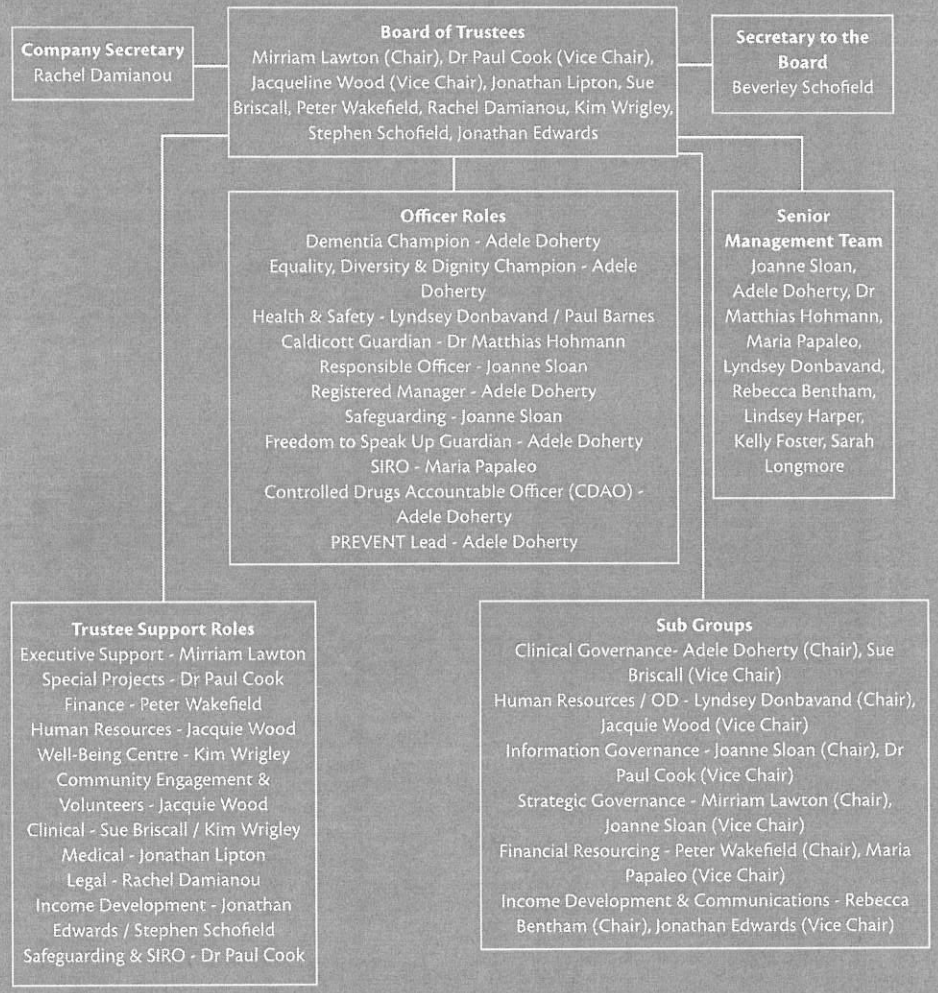
External Auditors.

Chadwick & Company - Chartered Accountants
Capital House, 272 Manchester Road
Droylsden, Manchester
M43 6PW

Structure, Governance & Management.

The organisation's governance structures are shown in the diagram below...

Board Governance Structure - 2022.



Our Hospice.

Safeguarding.

Dr Kershaw's Hospice are fully committed to safeguarding the welfare of all those we care for. We recognise our responsibility to promote safe practice and to protect all from harm.

We work together to encourage an ethos which embraces diversity and respects the rights of all involved within our services. We support the rights of all to live free from abuse with respect, dignity and equality, believing that all should receive the support they need to reach their full potential and remain safe.

We promote a culture of listening to, and seeking the views of those we care for in a way that is appropriate to their understanding, taking into account those views in individual decisions and in the establishment or development of services. All staff are appropriately trained and key personnel attend relevant safeguarding meetings such as the Oldham Safeguarding Adults Board Policy, Procedure and Workforce Development Sub Group.

The Board of Trustees reviewed the safeguarding governance and management arrangements of the charity and is satisfied that we fulfil the expectations and requirements as set out in guidance issued by the Charity Commission.

Information Governance.

Work has continued throughout 2021/2022 to ensure that the Hospice is able to fulfil the requirements of the NHS Data Security and Protection (DSP) Toolkit. Data flow maps and impact assessments have been completed and are reviewed continuously to ensure all relevant control measures are in place to ensure that the personal data obtained is justified and complies with data minimisation principles.

Privacy issues have been identified and risk analysis has been completed giving reassurance that the information asset is secure and complies with General Data Protection Regulations.

An area of significant investment, has been around the Hospice's Information Technology infrastructure.

Dr Kershaw's Hospice works very closely with its partnering Hospices, and has for a number of years held a Service Level Agreement with St Ann's Hospice to secure the invaluable skills of their Data Protection Officer. The Hospice also procures the specialist skills of an external IT company, Foresight IT Solutions.

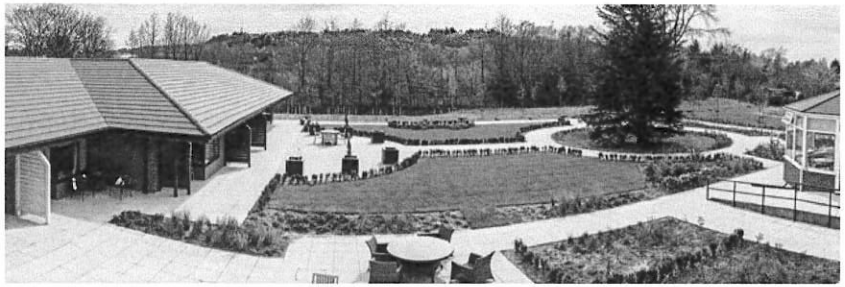
At Dr Kershaw's we understand the importance of Data Security and work very closely with both partners. We have regular meetings to discuss information governance and data security at our dedicated Information Governance Sub Group.

Grounds and Gardens.

The generous legacy we received in 2020 enabled work to progress further in our grounds and gardens, providing a beautiful place for patients, families and staff to relax in and a pleasant outlook for our patients from their rooms. Our grounds now also offer a flexible outdoor space for hospice events, garden parties and weddings.

Time spent in the outdoors can have a positive impact on the well-being of people living with the challenge of a long-term condition or a terminal illness and with our newly acquired raised beds and greenhouse we intend to provide therapeutic horticulture as part of our Well-Being Centre offer.

This is a two phased project and with council approval work will extend into a woodland area, an area of biodiversity for nature walks and a place of reflection.









Our Hospice.

Organisational Governance.

The Board of Trustees are fully committed to the values and principles of the Hospice. They contribute in their various ways to the organisation's safety and continued improvement and strive to ensure good governance is applied to all decision-making processes.

Trustees are recruited to ensure that the Board has a wide range of business experience and knowledge. This ensures that the company is organised on a sound basis and that all decisions are well founded and financially viable.

The Trustees are responsible for main funding decisions with the day-to-day management of the Hospice being under the direction of the Chief Executive Officer and her Executive Officers.

All potential risks to the organisation are held within our Risk Register – this is a live document, updated at every Senior Managers Monthly Sub Group meeting with key issues reviewed at every Board meeting by both the Executive Managers and Trustees.

Quality, performance reports and statistics are considered at every meeting of the Board. Particular attention is given to mandatory training, the admissions/episodes in both the In-Patient Unit and the Well-Being Centre, to ensure that best use is being made of available beds and resources without compromising quality of care.

During the financial year 2021/22, the Board retained a compliment of ten Trustees. Anne Sykes stepped down from the Board in December 2020 after many years' service to the Hospice and Joanne Jones also stepped down from the Board in October 2021. Dr Kershaw's Hospice wish to thank them both their time, expertise, and dedication to the Hospice.

Jacquie Wood was appointed as a second Vice Chair in May 2021 to work alongside Dr Paul Cook (Vice Chair role, 2020) supporting the role of Chair. Both have undertaken specific projects around Capital Developments, Organisational Developments, CQC inspection preparation, and recruitment to key management posts.

The Chair thanked them together with the full complement of Trustees for their significant time commitment, excellent attendance records and contribution to improving outcomes for users of Dr Kershaw's services.

> **I was always able to make contact with Hospice at Home and the response was always spot on, we never had to wait at all. The staff were very friendly and reassuring. What would Oldham do without Dr Kershaw's Hospice?**





Clinical Audit.

The clinical audit calendar is systematic and responsive to clinical requirements. The audit results from 2021/2022 are displayed in a prominent place for all staff to observe and includes a results summary that highlights good practice and areas of practice where it could be improved. There is also an associated action plan displayed to provide the finer detail regarding each audit. The audit findings are discussed in the monthly Nurses Forum and Clinical Governance Sub Group.

Overall Audit Compliance 2021/22 = 95%

Patient Experience.



Dr Kershaw's is always looking to develop and improve services and therefore, feedback is vitally important to us. In the last year (April 2021 to March 2022) we received 302 compliments from service users and their loved ones in the form of surveys and cards.

Our surveys include the mandatory Friends & Family Test questions enabling us to participate in national data collection activities. The annual results of the Friends & Family Test show that 97% of our respondents rated our service as 'Very Good,' the highest grade.

We also give patients and their loved ones the opportunity to provide constructive feedback. Throughout the year we noted nine concerns raised via our surveys. The themes of these concerns were primarily around communication issues and the availability of between-meal snacks and food. They were all investigated thoroughly and actions were taken to make improvements. Senior Members of our teams discussed concerns with the respondents and resolved them satisfactorily.

We discuss compliments, complaints and concerns at relevant Sub Groups and the Senior Management Team Meetings. We also share feedback and patient stories at all of our Sub Groups to remind us that everything we do is to ensure high quality care for our patients.

Feedback is used in the community and we regularly share patient and family stories on social media. This information is important and allows future patients to make an informed decision when choosing to use our services.

302
compliments

> We cannot thank you enough for the care that you gave Dad when he was with you.
>
> We will always be indebted to you for what you did.

FFT Data 2021-22	Quarter 1	Quarter 2	Quarter 3	Quarter 4	TOTAL
Very Good	84	53	42	40	219
Good	2	2	0	1	5
Neither Good nor Poor	1	0	0	0	1
Poor	0	0	0	0	0
Very Poor	0	0	0	0	0
Don't Know	0	0	0	1	1

> I found the nurses to be kind, considerate and compassionate in the expert way that they treated both my late wife and myself.

> A perfect place. A peaceful atmosphere. Dignified, calm, honest, friendly and welcoming.

Clinical Services.

In-Patient Unit.

The In-Patient Unit was fully completed by February 2021 so in this financial year we were back to business as usual, caring for patients in our newly built In-Patient Unit as well as in the community.

The facility includes eight single and two twin rooms, all of which have en-suite facilities, a smart TV, recliner chair and storage unit along with double doors looking out and accessible to the garden. The in-patient family lounge features sofas and dining facilities and is available for patients to spend time with their families and friends outside their rooms.



168
admissions to the IPU

> From our first moment of stepping inside the Hospice we were treated by welcoming and caring staff. Because of the kindness and generosity of time shown by all who cared for mum it made a traumatic event become more manageable.

> The new facility is like a 5* hotel and it was such a shame Mum didn't really know of the services provided but we as her family certainly did. THANK YOU!

98%
Preferred Place of Death achieved

Well-Being Centre.

The Well-Being Centre did unfortunately have to close due to restrictions, however existing patients received regular contact via our friendship service.

Virtual sessions continued throughout the year ensuring that patients could access via Microsoft Teams with volunteers being able to facilitate most sessions.

In March 2022, we made the decision to stop virtual sessions so that we could turn our attention to re-opening our Well-Being Centre in the new financial year with a brand new model.

257
Well-Being Centre attendees

> Being able to be part of the quiz has brightened up my day as I live alone and have been shielding.



Hospice at Home.

Dr Kershaw's Hospice at Home Service continues to benefit the local community providing high quality, individualised and flexible end-of-life care. Now in its fifth year, Hospice at Home is a thriving, well established, relied on and respected service in our local community.

The Hospice at Home Service continued to be business as usual, working in collaboration with our partner organisations.

2,051 visits

92% urgent visits arrived within 1 hour

99% Preferred Place of Death achieved

480 urgent visits (hospital admission avoided)

273 new patients cared for

Hospice at Home Visits	2019/20	2020/21	2021/22
	2,073	3,300	2,051

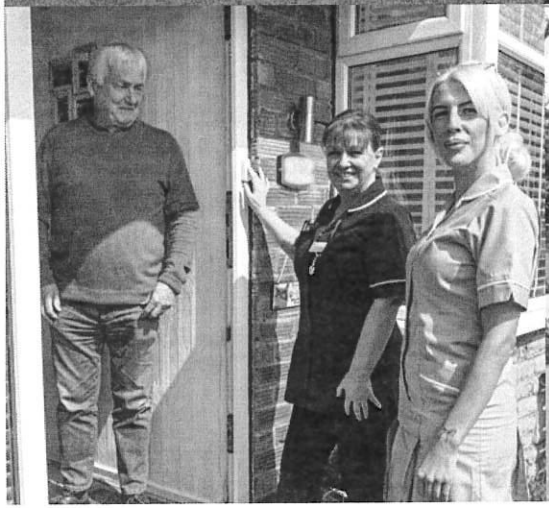
6,030 phone calls

> "The Hospice at Home team were all very friendly, caring and committed. They felt like family."

> "Dr Kershaw's Hospice At Home is the perfect solution to provide the much needed care for loved ones in their own home. It is very comforting to know this is possible and you are guaranteed the support required for yourself and family."




















Caring Hands.

Our Domiciliary Care service, Caring Hands is now well-established with an excellent reputation in our community for providing high-quality care and we are able to provide qualitative evidence to support our belief. The Continuing Healthcare Commissioner (CHC) have also received overwhelmingly positive feedback regarding the care we provide, and we have been requested by name and reputation by several families.

8,468 visits

11,089.5 hours

99% Preferred Place of Death achieved

145 patients cared for

Caring Hands Visits	2019/20	2020/21	2021/22
	8,018	8,723	8,468

> The carers always brought a ray of sunshine on their arrival. I could not have contemplated having my loved one at home without them. They are special people.

> The Caring Hands Team were absolutely wonderful. They always treated Dad with care and respect. He really bonded with the team and enjoyed their company.

Bereavement Support Services.

The Bereavement Support Service has continued to develop and innovate in supporting bereaved people within the Hospice community and in the wider locality as we continue to navigate our way through the complexities of the pandemic. Outreach work has continued to be important, as people have contended with changing risks and regulations around COVID-19.



Telephone Service.

Our telephone support, which reaches out to all those bereaved across Hospice clinical services, is ongoing and effective.

It is managed by our Bereavement Support Nurse with HCA support.

> "The uniqueness of our experience meant we experienced a care beyond end-of-life and were engaged months in advance with the Bereavement Support Nurse. This enabled us to live with cancer and also achieve our wishes at the end. The staff exceeded their vocational role throughout."

Bereavement Support Resources.

We have been awarded funding from Greater Manchester High Sheriff Police Trust and Cash for Kids to support us in providing resources for children and young people who are bereaved, or experiencing the terminal illness of a significant person. In collaboration with Me and My Therapy, we provide age appropriate, evidence-based tool kits comprised of creative activities to support the well-being of children and young people, and to support families to engage in open conversations with their children about their thoughts and feelings.





Counselling Support.

Based on an assessment of needs in developing the Bereavement Support Service, we have secured funds for a one year, fixed-term, full-time counselling post. The post was advertised in March 2022 and we hope to appoint early in the new financial year.

The Nightbird Project.

In January 2022, The Hospital Saturday Fund awarded the Bereavement Support Service £10,000 to set up The Nightbird Project, an initiative to support people affected by terminal and life-limiting illnesses to tell their stories in creative ways. Planning has commenced and will continue during 2022 and The Nightbird Project will run through 2023.



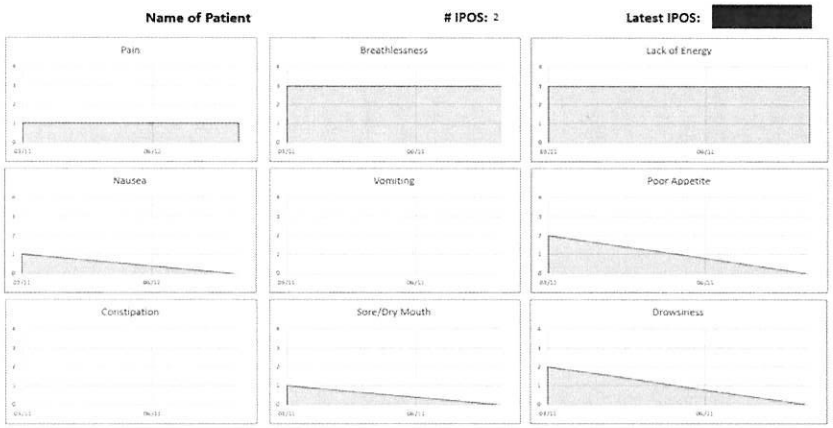
Using Data to Improve Clinical Services.

Integrated Palliative Care Outcome Scale (IPOS).

In January 2022, we developed the IPOS tool in order to measure the palliative care needs of patients and their families. It is well-validated and can be used in clinical care, audit, research and training. The tool allows us to capture information around symptom control but also extends to information needs, practical concerns, anxiety or low mood, family anxieties and the overall feeling of being at peace.

We began using the tool in the In-Patient Unit in February 2022 and we created an internal dashboard tool with graphical information showing the improvement or decline of a patient over the course of their care. This allows our Clinical Team to manage patient symptoms and other needs more effectively.

In terms of its broader value, it allows us to assess themes and trends of patients' needs so that we can pinpoint exactly what services we may need to invest in for the future.



Patient Safety Project

We began participating in the Patient Safety Project in April 2021. The Patient Safety Project enables clinical benchmarking within hospices across the UK. The Hospice Patient Safety Project collects three core patient safety metrics and two patient activity metrics:

- Falls
- Pressure ulcers
- Medication incidents
- Bed occupancy
- Throughput

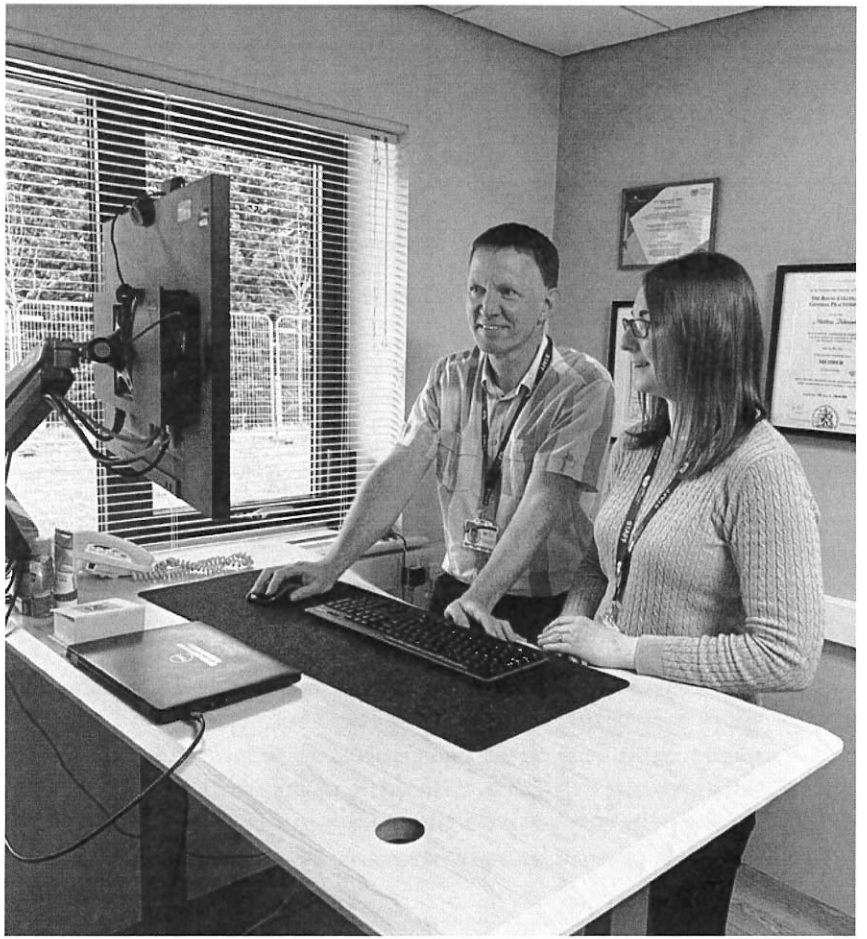
Data is treated in strict confidence and results in each hospice receiving a quarterly report that enables benchmarking against hospices of similar size and patient activity. In 2020/21, 120 Hospices participated within this project and we are able to utilise this data in discussions at our Clinical Governance Sub Group.

Care and Safety Evaluation.

Following a Business Case Proposal, in June 2021 we began to use the Patient Safety Project data to support a daily patient huddle within the In-Patient Unit known as Case and Safety Evaluation (CASE).

CASE huddles involve identifying any key issues resulting from bed occupancy/utilisation (for example any actual or potential quality and safety issues resulting from admissions, discharges or expected deaths) and any issues relating to actual/potential quality and safety issues linked to falls, pressure ulcers and/or medication.

Used daily, safety huddles help to increase safety awareness amongst front-line staff and allow our Clinical Team to develop action plans to address identified safety issues and foster a culture of safety.



Learning and Organisational Development.

Dr Kershaw's Hospice is committed to the development of its staff and aims to provide a working environment in which staff are able to maximise their performance, commitment and contribution. This is supported by the End-of-Life Nurse Educator based at the Hospice.

Our comprehensive statutory and mandatory training program includes face to face sessions, e-learning and electronic MS Forms as methods of teaching. This reflects current practice and is consistent with relevant national and local regulations/legislation.

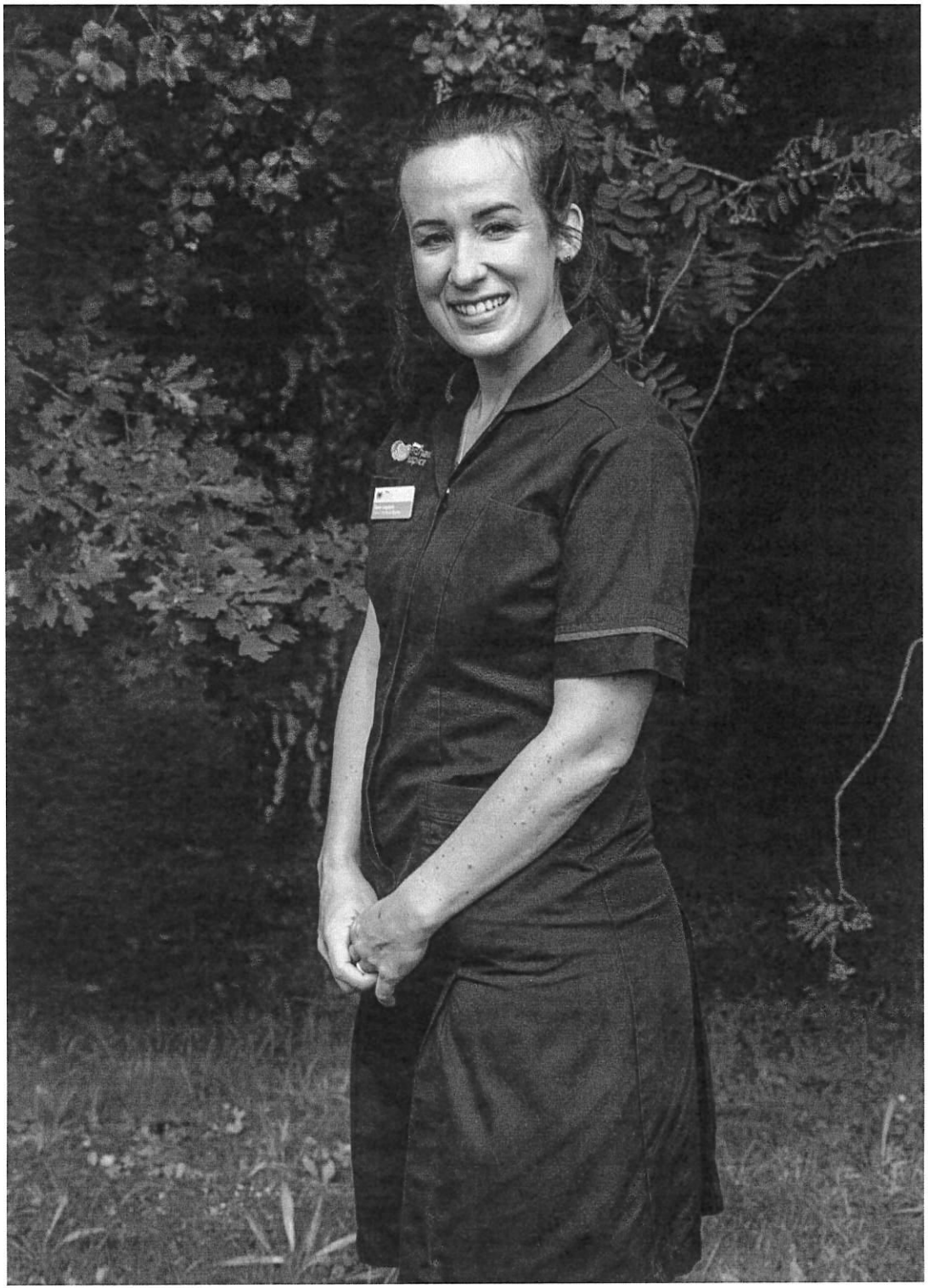
The Senior Management Team have completed Neuro Linguistic Programming Practitioner Certification, which provides insight for the team over a series of eight modules to transform and improve connections and communications between the team, working towards lasting behavioural change at work.

There is a comprehensive Organisational Induction for all staff that are new to the Hospice, they are welcomed with a full induction to help them settle into their new roles, with a mix of clinical and non-clinical staff attending and getting to know one another.

Compliance with the Hospice mandatory training programme has been consistently high all year:

Basic Life Support 86%	Communication 95%	COSHH 97%	Data Security / IG 94%
Dementia Awareness 92%	Equality & Human Rights 97%	Fire Awareness 91%	Food Hygiene 94%
Hand Hygiene 96%	Health & Safety 100%	Infection Prevention 98%	Manual Handling 95%
Prevent 85%	Safeguarding Adults 97%	Safeguarding Children 100%	Waste Management 99%
ANTT 80%	Blood Transfusion 92%	Falls Awareness 70%	Health Record Keeping 98%
Medicines Management 96%	Nutrition & Hydration 94%	Oral Care 98%	Pressure Ulcer Prevention 100%
Respiratory Training Day 81%	Self-Verification: Nebuliser 86%	Self-Verification: Oxygen Therapy 86%	Self-Verification: Suction 86%
Self-Verification: Syringe Driver 86%	Self-Verification: Tracheostomy – Theory - 95%	Verification of Death 100%	

In 2021/22 we have developed a comprehensive Education, Training, Learning and Development Strategy which demonstrates how the Hospice assesses, implements and evaluates the learning needs of all staff within a robust framework that supports equality of opportunity and provides quality assurance. This will be supported by the development of a prospectus that will highlight education, training, learning and development opportunities available at the Hospice.



Staff Resilience.

Healthy Workforce.

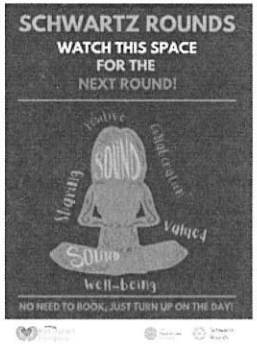
A regular well-being programme was introduced creating a toolkit of support that gave all staff the opportunity to take some time out of their usual working day to sign up to a number of workshops focused on wellness and mindfulness. The main aim was to encourage our team to stop, take a breath and relax and to continue this practice moving forwards. A range of free Complementary Therapies were also made available to staff, offering a selection of treatments including Reiki.

The workplace well-being launch, which was just the start of our initiative, received excellent feedback from those who attended and we now run a well-being week, twice a year.

We have trained nine dedicated mental health first aiders and have expanded our well-being services, bringing our workplace resources together in one impactful toolkit.

Currently in place:

- Clinical Supervision
- Mental Health First Aiders Regular Bulletins
- Staff Surveys
- Schwartz Rounds
- Occupational Health Referral and Support
- Cycle to Work Scheme
- Recognition of national days/weeks, e.g. World Mental Health Day, stress awareness, menopause awareness, Hospice Care Week and Black History Month
- Significant events analysis meetings
- Connect 5 Training
- Themed Staff Well-being Weeks
- Staff Complementary Therapy Sessions
- Pin boards – monthly well-being ideas / suggestions
- Staff Discount Card
- Discounted Staff Meals
- Trainee counsellors on site providing one-to-one support





Staff Resilience.

Future Framework (in addition to everything currently in place):

- Drop in clinics for all staff to access
- Mental Health First Aiders quarterly meeting
- Upgrading office environments
- Staff Healthcare Plan
- Formal training - resilience specific
- Development of a Clinical Skills Directory and training
- Development of Management Development Programme
- Development of an Organisational Development Directory and training
- Regular Complementary Therapy slots available to staff
- Recruitment & Retention Strategy
- Well-being strategy





Volunteering.

The Volunteer Department have made real progress implementing the Volunteer Development Programme and has produced a Volunteer Strategy to demonstrate the overall aim, goals and priorities of the strategic objectives we are working towards.

As part of the Volunteer Development Programme the team have worked closely with departments to identify Volunteer Leads, who support with the day-to-day management of volunteers. This has improved overall communication, enhanced the induction process and supported the integration of volunteers into their respective teams. The Volunteer Department have a calendar of spot checks to maintain engagement with volunteer-involving departments and have become involved in task and finish groups, allowing for more effective workforce planning.

During 2021/2022 the Volunteer Department have focused on developing further specialist roles to support services, meaning we now have over 40 different volunteer roles. Through making changes to our recruitment process we have been able to better engage with volunteers and identify individuals who have skillsets which may benefit future projects. Department spot checks have also identified potential for developing volunteer-led supplementary services.

Recognising the contribution of volunteers in a meaningful way continues to be a priority. We have implemented regular social media posts, promoted volunteer journeys, launched a recognition scheme including 'special mentions' and now send annual recognition letters to all of our volunteers.

This year has been great for engagement, building upon the progress made during the pandemic, the Volunteer Team now have regular opportunities to promote volunteering through social media, local newspapers and internal publications. Volunteers are definitely becoming much more visible and in turn, attracting a wider demographic of potential supporters.

Despite continuing COVID-19 restrictions during 2021/2022 volunteers continued to support us and contributed 28,375 hours of their time, equating to a staff cost saving of over £262,000. Active Volunteers has grown from 251 in April 2021 to 302 in March 2022.

£262,000
cost saving

> I really enjoy volunteering at Dr Kershaw's and feel part of the family atmosphere!

> I love being part of such a worthwhile charity that helps so many people.

28,375
hours

302
volunteers

> I feel extremely valued and appreciated as a Volunteer at Dr Kershaw's Hospice.



Human Resources.

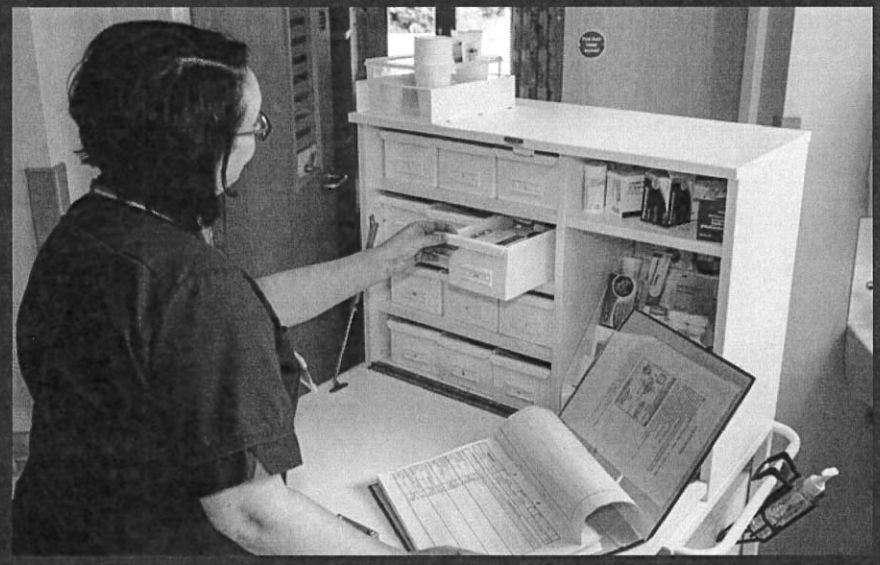
In September 2021, as the Hospice continued to grow, a full-time HR Advisor was appointed, to support our staff and their well-being and to ensure we remained compliant with regards to employment legislation. Initially a key area of importance was helping ensure staff were kept working safely and informed with the ever changing situation throughout the COVID-19 pandemic. Focusing on bringing recruitment in-house including for all our Clinical Team, following the successful TUPE transfer of over 50 clinical staff from the local NHS Trust, establishing a regular audit calendar along with a review of policies, procedures, and HR documentation, the role of HR at the Hospice is both demanding and ever changing.

Our new electronic HR systems were also launched meaning we are now paperless and all HR documentation and staff information is stored even more securely.



Quality, Innovation & Improvement.

Internal systems have further developed across all departments through the utilisation of Vantage Technologies, data management software. Individual modules have been created to support robust operational and data management procedures. Each module has been tailored and with the versatility of the system it has given the flexibility to continuously develop with the needs of the Hospice. Vantage has become an integral digital platform, which has supported the Hospice to move towards becoming a paperless organisation, providing effective security of personal information, improving efficiency, saving time/resources, effective monitoring of information through timely reporting and email alerts. Interactive custom dashboards have also been introduced to the module, which have enhanced the variation of monitoring data at a glance.



Quality, Innovation & Improvement.

To date the following modules have been created and launched on Vantage:

Annual Leave, Incidents, HR Management, Volunteer Management, Training, Patient Survey, Facilities Helpdesk and Planned Maintenance.

Additional modules are currently being created including CAS Alerts, Policy Management & Library, Audits, Acceptance of Gifts and Concerns & Complaints.

In February 2022, changes were implemented to the HR, Organisational Development Sub Group to capture a wider range of key areas including Safety, Quality, Workforce, Innovation and Development. This Sub-Group has been formed to:

- Oversee assigned key objectives from the Hospice's strategic plan relating to Governance, Workforce and Collaborative Working.
- Advise and assure the Board of Trustees that the Hospice meets its legal responsibilities under The Health and Safety at Work Act, associated legislation and all matters relating to Fire, Security and Health and Safety.
- Ensure that the Hospice has effective systems for the management of health and safety for the whole workforce and any visitors to Hospice premises including appropriate reporting, monitoring and training.
- Develop and oversee adoption of a Quality Assurance Framework to enable effective safety, quality and performance improvement systems for all Hospice activity.
- Support the Chief Executive in developing a culture of safety within the Hospice that focuses on effective teamwork, communication, and risk management.
- Develop an annual programme of quality goals after discussion with key service leads.
- Enable development of a non-clinical audit programme and development of associated action plans for any agreed improvement.
- Ensure the Hospice's risk management process effectively monitors non-clinical risks using the agreed risk management process.
- Provide strategic oversight and direction for any re/structural staffing and/or pay-scale reviews.
- Review workforce organisational monitoring of recruitment, induction, sickness/absence, performance management, appraisal, and disciplinary activity.
- Provide oversight and approval of planned organisational change /non-clinical innovation/development and its methodology.
- Monitor organisational wide learning and development activity and its associated objectives.
- Initiate and monitor annual staff opinion surveys and subsequent action planning.

Quality, Innovation & Improvement.

In 2021/22 the End-of-Life Care for Adults NICE Guidance quality standard was implemented focusing on three key areas:

- Local availability of end-of-life care information in a variety of formats and languages.
- Local service user feedback relating to end-of-life care, in the form of surveys, compliments and complaints, is collected, analysed and acted upon.
- Local arrangements to ensure that people approaching the end-of-life and their families and carers know who to contact for advice.

Progress and updates have been continuously shared through Clinical Governance Sub Group and detailed within the Quality Narrative Report, which forms part of the Hospice NHS Contractual Standards and commissioning requirements.

The NICE quality standard identified opportunities for improvement in particular with the 24 Hour Advice Line and as part of the statement this enabled the Hospice to evidence good governance and supported the development of related policies and procedures.

Innovative ways of reporting have been introduced internally through the creation of a dashboard, providing a visual representation of quality-related information, including patient service activity, audit, incidents, service user survey feedback including constructive comments and concerns/complaints. The dashboard has effectively been incorporated into the Clinical Governance Sub Group Agenda contributing a positive and meaningful impact.

The Hospice continues to provide assurance in meeting the Clinical Commissioning Group NHS Standard Contract requirements for quality and performance indicators. The continuous developments and functionality of the EMIS system has enabled the ability to effectively provide a range of numerical and narrative reports each quarter.

> **Every member of Dr Kershaw's team was respectful, caring and thoughtful of the patient and family. Without them my brothers passing would have been much more difficult.**

> **Outstanding service, highly recommended. Thank you for all the outstanding care you provided throughout end of life care for our resident.**

Income Development.

The Income Development Team's core objective is to secure sustainable income in support of the Hospice's strategy. During the 2021/22 financial year, the impact of COVID-19 continued to have a huge impact on fundraising income for the Hospice, however, despite this our loyal supporters enabled us to achieve some key highlights.

Hospice Shops.

Returning to normal opening hours, our shops reopened full-time following closures the year prior. Despite a fall in footfall by 11%, income from the shops returned to pre-COVID times, securing a gross income of £322,125, which was £74,401 below budget.

Due to making an on-going loss the Hospice closed the Oldham Charity shop, redeploying the Shop Manager and volunteers to other shops.

The highlight of the year for the Retail Team was the opening of a new store; The Furniture Hub. Based in Neo House in Oldham, the store sells high quality new and used furniture ranging from small coffee tables to three piece suites, and offers customers a delivery service and collection service for donated large furniture items. The store has been a thriving success since its opening, going from strength to strength.

New effective processes for management of stores were embedded; including individual store Health and Safety assessments. Work took place to fix minor issues within the stores to ensure compliance and also to ensure a 'best place to work' ethic in all stores. New digital tills were secured for all stores for free, including an iPad system to run in conjunction with the tills, and a new digital system with a stock taking option were embedded.

Hospice Lottery.

2021/22 saw the return of door-to-door and venue canvassing for the lottery, but with COVID restrictions starting and stopping this was on an ad hoc basis and at reduced numbers. The telesales campaign continued for part of the year with Integrated Promotions Ltd, until canvassers returned full-time.

Membership numbers started to increase slowly, and supporters were still extra generous during the bumper draws. Through the four bumper draws (Spring, Summer, Autumn and Christmas) £47,544.24 was raised vs £57,595.93 in 2020. This was over £17,000 up on the 2019 draws with £26,000 in donations alone. During 2021/22, the Lottery contributed £300,000 to the Hospice in support of patient care, compared to £240,000 in 2020/21.

Dr Kershaw's Hospice Lottery is committed to ensuring that the Lottery is operated in a secure, fair and socially responsible way and to endorsing responsible gambling amongst its members. Dr Kershaw's Hospice Lottery is a member of the Hospice Lotteries Association, which is committed to working together to encourage responsible gambling and provide access to support if needed.

Dr Kershaw's Hospice is licensed and regulated in Great Britain by the Gambling Commission under account number 5224.

85.9p* of every £1 goes directly towards providing patient care, 9.5p* towards lottery prizes, and the remaining 4.6p* is spent on lottery administration, training, staff costs, licenses and marketing. Average number of players in the draw is 12,879*.

*These figures are based on income and expenditure for Dec 2020.















Fundraising.

Event Fundraising.

Due to Government restrictions we were unable to move forward with most of our live planned events for 2021, and had to cancel all activities. However, some events were adapted to virtual activities to enable us to engage with the community in some form. Our Light Up a Life service was held virtually on Facebook and YouTube, with a promotion on Oldham Community Radio 99.7 FM. Light Up a Life was a huge success with 1,160 dedications made in memory of lost loved ones. The service received 1,900 views on Facebook and 593 views on YouTube, from local, national, and international supporters watching. The service raised a gross income of just under £26,000, which was a 35% increase on the 2019 service, but a 5% decrease on the 2020 service. The 2021/22 events calendar will include a mix of live and virtual events to account for any safety measures that may still need to be adhered to.

The end of the financial year saw the return of our first live event, Strictly Dance, which was a joint fundraiser with Willow Wood Hospice in March 2022. The event was a huge success, and a great way to relaunch our event programme for 2022. Each of the 10 dancers were set a minimum fundraising target of £1,000, but raised a collective £18,500. The event overall raised a gross profit of over £28,500. Attendees from the event said the evening was 'incredible', 'a great atmosphere' and 'a real buzz'.

The 2022/23 events calendar will see all our usual events return to live settings, with the addition of some new activities for supporters to get involved with.

Corporate Fundraising.

In the previous financial year the Hospice's Corporate support diminished due to the pandemic, and this has been slow to pick up in 2021/22 as Corporate organisations try to recover. However, some loyal, local businesses were still able to support the Hospice through 'Charity of the Year' partnerships, sponsorship opportunities, and donations. Corporate support included, but was not limited to, Interserve, The Co-Op, Colorplas, Jackson and Jackson, Radial, Ribble Packaging, Professional Oldham, Norcoss Lees & Riches Solicitors, Widdop and Co, Primark, Cuttle & Co Solicitors, Pearson Solicitors and Financial Advisers, Touch Solicitors Ltd, and Wrigley Claydon Solicitors.

Trusts & Foundations Fundraising.

Fundraising for the Hospice through grant support took place during the fiscal year, with a number of applications submitted to Trusts and Foundations. Grant funding towards core costs, bereavement boxes, and our new initiative The Nightbird Project, which supports people affected by terminal and life-limiting illnesses to tell their stories in creative ways, was secured from The Albert Hunt Trust, The Hospital Saturday Fund, The Treeside Trust, Greater Manchester High Sheriff Police Trust, and The Masonic Charitable Foundation. Dr Kershaw's Hospice is extremely grateful to these Trusts and Foundations for their generous support.

Fundraising & Marketing.

Community Fundraising.

The community's support for Dr Kershaw's Hospice, as always, did not waver throughout the year. Our thanks go out to all who supported us, including but not limited to, Royal Oldham Hospital Pharmacy, Adventure Based Learning, Mark Master Masons Grand Lodge, Iceland Foods Charitable Foundation, Rotary Club of Chadderton and Failsworth, TK Maxx and Homesense Foundation, and The Masonic Charitable Foundation.

Members of the public hosted their own events or fundraising activities to support the Hospice. Activities included a golf tournament, coffee morning, Easter street party, a bowling tournament, a tractor rally, and Facebook birthday fundraising. Thank you to everyone who did something in aid of our Hospice and raised vital funds towards patient care.

Our Community Team hosted a range of different activities and events, which included 'Move it March', 'Yorkshire 3 Peaks', and a 'Virtual Hospice Walk', all of which the community got behind and supported, raising funds for the Hospice. The activities didn't stop there, with physical and virtual runners also taking part in the London Marathon, raising over £3,000 for Dr Kershaw's.

One of the Hospice's youngest fundraisers, Keira Arnold, continued her phenomenal fundraising for the Hospice; reaching £40,000 for Keira's Wishes just in time for Christmas 2021. She was also honoured once again, this time by the Prime Minister Boris Johnson, with the daily Points of Light award; which recognises outstanding individuals who are making a change in their community.

The Friends of Dr Kershaw's Hospice continued to give regularly, with over £23,757 being given to support clinical services and patient care.

Marketing & Communications.

The Communications Team continues to grow from strength to strength, with a focus on dynamic, digitally driven communications; drawing on online activities, using patient and their families' stories, and dispelling the myths surrounding Hospices.

Online support has grown throughout the year with engagement and followers on Facebook, Twitter, Instagram, LinkedIn, and YouTube increasing. The Hospice also has a weekly page in the Oldham Times featuring key updates and stories on patient care. Features have also been included in the local press and on the radio, including the Oldham Times, Oldham Reporter, The Oldham Chronicle (online), Saddleworth Monthly, Around Saddleworth, Saddleworth Life, Saddleworth Independent, and Oldham Community Radio 99.7FM.


HOSPICE HEROES

Hospice had a flipping good Pancake day

Staff encourage people to back Dr Kershaw's Will month

Support your chosen cancer



Financial Review.

The Statutory Accounts for the year ended 31st March 2022, have been prepared in accordance with the Statement of Recommended Practice Accounting and Reporting by Charities (SORP 2019), and comply with all statutory requirements. Following the appointment of the Hospice's Accountants and External Auditors, Chadwick & Company Chartered Accountants, both the format and content of the Statutory Accounts embrace the advice and recommendations of our Auditors.

There was an overall net decrease in funds for the year-ended 31st March 2022. Total Income of £4.324 million was achieved in the current financial year - a small reduction on the previous financial year, £4.374 million for the year-ended 31st March 2021. A fall of just over 1%.

The Hospice continued to see increases in the cost of goods and services, with an increased spend of almost £310,000, a rise of 9.17% to the previous financial year.

The overall net movement in funds was £690,767, a reduction of £305,508 on the previous year. Following the revaluation of the Hospice's Shaw Retail premises, a gain of £54,000 was recognised, and is reflected within the Statement of Financial Activities.

The Hospice's principal sources of income are donations, legacies, NHS income, our Retail Outlets, Fundraising and Lottery and Trading surpluses.

The Hospice recognises, and would like to give special thanks to Oldham Clinical Commissioning Group who continue to support the Hospice, and contributed £1.597 million to Dr Kershaw's. These funds are secured through our block contract to support both our In-Patient Unit and Hospice at Home Service. Oldham Clinical Commissioning Group, continue to support further Care in the Community provided by our Caring Hands Domiciliary Service. With the integral involvement and negotiations of Hospice UK, the Hospice continued to receive much needed financial support from NHS England, who made contributions of £415,503, providing vital funds to enable the Hospice to continue its work across the community.

Legacies received for the year-ended 31st March 2022 totalled £1,006,892. An increase on last years' figure of almost 98%. (Recognised as received or as due under FRS102). The Hospice was very fortunate to be the beneficiary of a ring-fenced legacy. £802,038 was bequeathed to Dr Kershaw's Hospice to develop its gardens. Due to the conditions of the legacy, this has been reported separately in the notes to the Statutory Accounts.

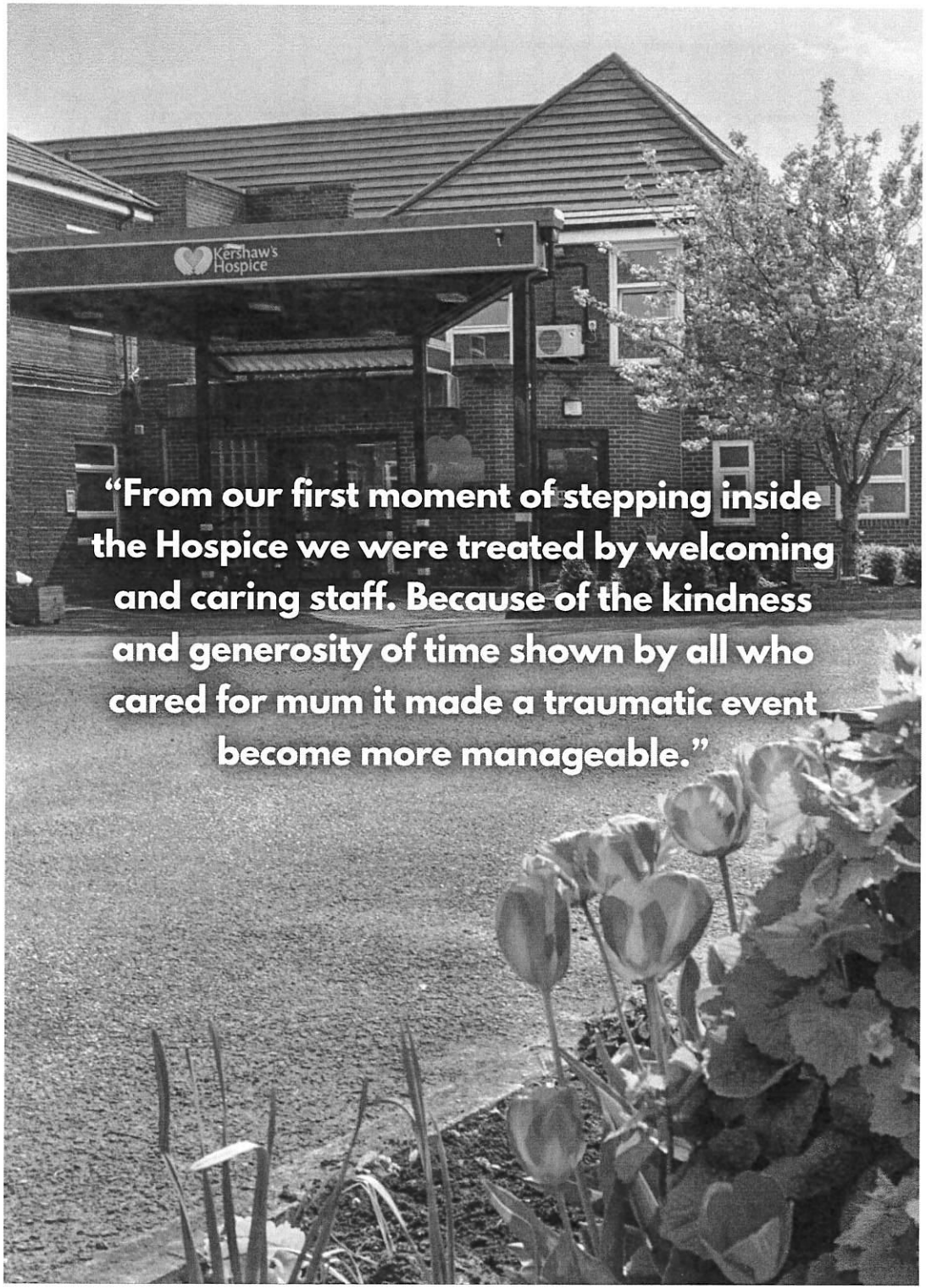
As at 31st March 2022, the funds balance of the Hospice sits at £10.383 million. A detailed analysis of funds held can be found in notes 22 to 25 in the Hospices Statutory Accounts.

The Hospice would like to express its sincere thanks and appreciation to everyone who contributes to our running. Whether this be in time, gifts or monetary donations. The work we do would not be possible without our loyal supporters.

Dr Kershaw's Trading Company donated £1,368 to the Hospice. A decrease in funds of £21,301 on the previous financial year.

Dr Kershaw's Lottery continued to go from strength to strength, increasing contributions to patient care of £300,000 for 2021/22, an increase of £60,000 on the previous year.

Investments continued to fall on previous years. The Hospice received £19,019 from dividends and interest, a fall of £14,070 on the previous financial year. The Hospices Board of Trustees and Financial Resourcing Sub-Committee have tasked a dedicated team to look at the Hospice's assets. An Investments Group has been created to look at an investment portfolio. The Group will invite Investment Companies to present a portfolio based on the ethics and other requirements or the Hospice. Investing in a combination of short, medium and long-term investments, to maximise the returns the Hospice can generate from its working capital.



Financial Review.

Reserves.

A Statement of Unrestricted Funds is shown in Note 23 of the Statutory Accounts. The Charities SORP defines reserves as that part of a charity' funds that is freely available to spend. The Trustees have agreed a Business Continuity Reserve of £2.25m. The Reserve acknowledges, and enables the Hospice to meet its financial commitments and obligations.

Note 24 of the Statutory Accounts provides further detail around the Designated Funds of the Hospice.

Financial and Reputational Risk.

Dr Kershaw's Hospice recognises the risks associated with the nature of its operating activities. There are many uncertainties, and the only predictable income the Hospice receives is from our Commissioning Partners. We understand the volatility and unpredictability surrounding voluntary income. The ongoing impact of COVID-19, compounded by changes in legislation, cost of living increases and the global economic downturn has made balancing the budget increasingly difficult.

Within the Hospice's top 5 risks, as documented in our Risk Register, is the uncertainty and decline of income from voluntary income, such as fundraising, events, legacies and corporate and community. Compounding this is the difficulty of recruiting and retaining staff with the necessary skills set to work with, nurture, and build and maintain good working relationships with our supporters.

The Hospice is proactive in trying to mitigate these potential risks, and works regularly with local firms of Solicitors to promote events such as 'Will Month', where Solicitors the Hospice has fostered close working relationships with, and who support Dr Kershaw's, will prepare a Will free of charge, but ask that a suggested donation be made to Dr Kershaw's. Solicitors also ask participants if they would consider leaving Dr Kershaw's a donation in their Will.

The Hospice recognises the many risks it faces, and the Senior Management Team meet regularly to discuss current and potential risks, and put controls in place to mitigate these. Our main external risk, and this is reflected as the highest risk on our Risk Register, is that of Cyber Crime / Attack. Significant investment, has been and continues to be around the Hospice's Information Technology infrastructure.



Dr Kershaw's Trustees 2022.

Statement of Board of Trustees' Responsibilities for the Financial Statements.

The Trustees are responsible for preparing the Trustees Report and the Financial Statements in accordance with applicable law and United Kingdom Generally Accepted Accounting Practice.

Company law requires the Board of 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 of the incoming resources and application of resources, including the income and expenditure, of the charitable company for that period. In preparing those financial statements the Trustees are required to:

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

The Trustees are responsible for keeping proper accounting records, which disclose with reasonable accuracy at any time the financial position of the charitable company 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 charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

So far as the Trustees are aware, there is no relevant information (as defined by section 418 of the Companies Act 2006) of which the charitable companies' auditors are unaware, and each Trustee has taken all steps necessary in order to make them aware of any audit information and to establish that the charitable company's auditors are aware of that information.



Auditors.

In accordance with the company's articles, a resolution proposing that Chadwick & Company (Manchester) Limited, be reappointed as auditors of Dr Kershaw's Hospice, will be put to the Board of Trustees at the Annual General Meeting.

Approval.

This report was approved by the Trustees on the 17th November 2022, and signed on their behalf by:

NAME	**Rachel Damianou**	**NAME**	**Mirriam Lawton**
POSITION	**COMPANY SECRETARY**	**POSITION**	**CHAIR / TRUSTEE**
NAME	**Paul R Cook**	**NAME**	**Peter Wakefield**
POSITION	**VICE CHAIR / TRUSTEE**	**POSITION**	**TRUSTEE**

Dr Kershaw's Hospice would like to express its sincere thanks and gratitude to everyone who fundraised, supported, or donated to the Hospice during the year. Your generosity enables the Hospice to remain open and provide free, quality, specialist care to the local community. On behalf of all our staff, patients, and their families we THANK YOU!



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DR KERSHAW'S HOSPICE

INDEPENDENT AUDITOR'S REPORT

TO THE TRUSTEES OF DR KERSHAW'S HOSPICE

Opinion

We have audited the financial statements of Dr Kershaw's Hospice (the 'charity') for the year ended 31 March 2022 which comprise the statement of financial activities, the balance sheet, the statement of cash flows and the notes to the financial statements, including significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including FRS 102 *The Financial Reporting Standard applicable in the UK and Republic of Ireland* (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

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

Basis for opinion

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

Conclusions relating to going concern

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

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

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

Other information

The other information comprises the information included in the annual report other than the financial statements and our auditor's report thereon. The trustees are responsible for the other information contained within the annual report. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon. Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the course of the audit, or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

Opinions on other matters prescribed by the Companies Act 2006

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

- the information given in the trustees' report, which includes the strategic and 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 directors' report included within the trustees' report has been prepared in accordance with applicable legal requirements.

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the charity and its environment obtained in the course of the audit, we have not identified material misstatements in the directors' report included within the trustees' report.

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

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

Responsibilities of trustees

As explained more fully in the statement of trustees' responsibilities, the trustees, who are also the directors of the charity 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 charity's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the trustees either intend to liquidate the 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 is available on the Financial Reporting Council's website at: https://www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditor's report.

Extent to which the audit was considered capable of detecting irregularities, including fraud

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.

- At the planning stage of the audit we gain an understanding of the laws and regulations which apply to the Group and how management seek to comply with them. This helps us to make appropriate risk assessments.
- During the audit we focus on relevant risk areas and review compliance with laws and regulations through making relevant enquiries and corroboration by, for example, reviewing Trustees Minutes and other documentation.
- We assess the risk of material misstatement in the financial statements including as a result of fraud and undertake procedures including:
    I. Review of controls set in place by management
    II. Enquiry of management as to whether they consider fraud or other irregularities may have occurred or where such opportunity might exist
    III. Challenge of management assumptions with regard to accounting estimates
    IV. Identification and testing of journal entries, particularly those which may appear to be unusual by size or nature.

Because of the inherent limitations of an audit, there is a risk that we will not detect all irregularities, including those leading to a material misstatement in the financial statements or non-compliance with regulations. This risk increases the more that compliance with a law or regulation is removed from the events and transactions reflected in the financial statements, as we will be less likely to become aware of instances of non-compliance. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.

Use of our report

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

Michael Royle BA(Hons)FCA (Senior Statutory Auditor)
for and on behalf of Chadwick & Company (Manchester) Limited

Chartered Accountants
Statutory Auditors
Capital House
272 Manchester Road
Droylsden
Manchester
M43 6PW

18 November 2022

DR KERSHAW'S HOSPICE

STATEMENT OF FINANCIAL ACTIVITIES INCLUDING INCOME AND EXPENDITURE ACCOUNT

FOR THE YEAR ENDED 31 MARCH 2022

	Notes	Unrestricted funds 2022 £	Restricted funds 2022 £	Total 2022 £	Unrestricted funds 2021 £	Restricted funds 2021 £	Total 2021 £
Income and endowments from:							
Donations and legacies	3	782,344	1,241,309	2,023,653	1,054,907	1,332,848	2,387,755
Charitable activities	4	1,597,153	-	1,597,153	1,449,547	-	1,449,547
Other trading activities	5	666,011	-	666,011	413,728	-	413,728
Investments	6	19,017	2	19,019	33,089	-	33,089
Other income	7	18,305	-	18,305	89,975	-	89,975
Total income		3,082,830	1,241,311	4,324,141	3,041,246	1,332,848	4,374,094
Expenditure on:							
Raising funds	8	521,366	1,095	522,461	379,372	9,093	388,465
Charitable activities	9	3,016,943	148,313	3,165,256	2,837,100	41,765	2,878,865
Other	14	-	-	-	110,489	-	110,489
Total resources expended		3,538,309	149,408	3,687,717	3,326,961	50,858	3,377,819
Net gains/(losses) on investments	15	343	-	343	-	-	-
Net (outgoing)/ incoming resources before transfers		(455,136)	1,091,903	636,767	(285,715)	1,281,990	996,275
Gross transfers between funds		366,388	(366,388)	-	1,078,446	(1,078,446)	-
Net (outgoing)/incoming resources		(88,748)	725,515	636,767	792,731	203,544	996,275
Other recognised gains and losses							
Revaluation of tangible fixed assets		54,000	-	54,000	-	-	-
Net movement in funds		(34,748)	725,515	690,767	792,731	203,544	996,275
Fund balances at 1 April 2021		5,745,911	3,946,983	9,692,894	4,953,180	3,743,439	8,696,619
Fund balances at 31 March 2022		5,711,163	4,672,498	10,383,661	5,745,911	3,946,983	9,692,894

The statement of financial activities includes all gains and losses recognised in the year.

All income and expenditure derive from continuing activities.

The statement of financial activities also complies with the requirements for an income and expenditure account under the Companies Act 2006.

DR KERSHAW'S HOSPICE

BALANCE SHEET

AS AT 31 MARCH 2022

	Notes	2022 £	2022 £	2021 £	2021 £
Fixed assets					
Tangible assets	**17**		4,233,020		3,855,100
Investments	**18**		32,223		31,880
			4,265,243		3,886,980
Current assets					
Debtors	**19**	707,522		1,971,433	
Cash at bank and in hand		5,689,910		5,709,936	
		6,397,432		7,681,369	
Creditors: amounts falling due within one year	**20**	(279,014)		(1,875,455)	
Net current assets			6,118,418		5,805,914
Total assets less current liabilities			10,383,661		9,692,894
Income funds					
Restricted funds	**22**		4,672,498		3,946,983
Unrestricted funds					
Designated funds	**24**	3,950,000		3,216,165	
General unrestricted funds		1,707,163		2,529,746	
Revaluation reserve		54,000		-	
			5,711,163		5,745,911
			10,383,661		9,692,894

The financial statements were approved by the Trustees on 17 November 2022

M Lawton
Trustee

Dr P Cook
Trustee

P Wakefield
Trustee

R Damianou
Trustee

Company Registration No. 05221414

DR KERSHAW'S HOSPICE

STATEMENT OF CASH FLOWS

FOR THE YEAR ENDED 31 MARCH 2022

	Notes	2022 £	2022 £	2021 £	2021 £
Cash flows from operating activities					
Cash generated from operations	**30**		466,884		1,384,071
Investing activities					
Purchase of tangible fixed assets		(505,929)		(1,725,122)	
Investment income received		19,019		33,089	
Net cash used in investing activities			(486,910)		(1,692,033)
Net decrease in cash and cash equivalents			(20,026)		(307,962)
Cash and cash equivalents at beginning of year			5,709,936		6,017,898
Cash and cash equivalents at end of year			5,689,910		5,709,936

1 Accounting policies

Charity information

Dr Kershaw's Hospice is a private company limited by guarantee incorporated in England and Wales. The registered office is Turf Lane, Royton, Oldham, Lancashire, OL2 6EU. In the event of the charity being wound up, the liability in respect of the guarantee is limited £10 per member of the charity.

1.1 Accounting convention

The financial statements have been prepared in accordance with the charity's governing document, the Companies Act 2006 and "Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019)". The charity is a Public Benefit Entity as defined by FRS 102.

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

The financial statements have been prepared under the historical cost convention, modified to include the revaluation of freehold properties and to include investment properties and certain financial instruments at fair value. The principal accounting policies adopted are set out below.

1.2 Going concern

At the time of approving the financial statements, the trustees have a reasonable expectation that the charity has adequate resources to continue in operational existence for the foreseeable future. Thus the trustees continue to adopt the going concern basis of accounting in preparing the financial statements.

1.3 Charitable funds

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. The aim and purpose of each designated fund is set out in the notes to the financial statements.

Restricted funds are donations and grants which have been specified by the donor to be solely used for particular areas of the Hospice's work.

1.4 Income

Income is recognised when the charity is legally entitled to it after any performance conditions have been met, the amounts can be measured reliably, and it is probable that income will be received.

Cash donations are recognised on receipt. Other donations are recognised once the charity has been notified of the donation, unless performance conditions require deferral of the amount. Income tax recoverable in relation to donations received under Gift Aid or deeds of covenant is recognised at the time of the donation.

Legacies are recognised on receipt or otherwise if the charity has been notified of an impending distribution, the amount is known, and receipt is expected. If the amount is not known, the legacy is treated as a contingent asset.

Grants of a capital nature are treated as deferred credits and credited through the Statement of Financial Activities over the estimated use of the relevant fixed assets.

Capital grants and other funds received towards the leasehold building refurbishment programme have been recognised in reserves are are to be amortised over the lease of the building.

1 Accounting policies **(Continued)**

Income received in advance for a future fundraising event or for other income received relating to the following year are deferred until the criteria for income recognition are met.

1.5 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. Direct expenditure on charitable activities is classified under the following headings:

- In-patient care
- Medical services
- Day-care
- Hospice at home
- Caring Hands

The charity is registered for VAT and is able to recover input VAT on the majority of its activities. The charity operates VAT under partial exemption. Irrecoverable VAT is charged as a cost against the activity for which the expenditure was incurred.

Costs of raising funds includes expenditure incurred in generating donations; arranging, organising and participation in funding events; costs of operating the charity shops.

Support costs are those functions that assist the work the charity but do not directly undertake charitable activities. Support costs include staff and overhead costs for finance, governance and general overheads.

1.6 Tangible fixed assets

Tangible fixed assets are initially measured at cost and subsequently measured at cost or valuation, net of depreciation and any impairment losses.

Depreciation is recognised so as to write off the cost or valuation of assets less their residual values over their useful lives on the following bases:

Leased building refurbishment	Over length of the lease
Fixtures and fittings	20% straight line
Motor vehicles	25% reducing balance
Barras legacy garden	Over length of the lease

Assets in the course of construction are not depreciated.

The gain or loss arising on the disposal of an asset is determined as the difference between the sale proceeds and the carrying value of the asset, and is recognised in net income/(expenditure) for the year.

1.7 Fixed asset investments

Fixed asset investments are initially measured at transaction price excluding transaction costs, and are subsequently measured at fair value at each reporting date. Changes in fair value are recognised in net income/(expenditure) for the year. Transaction costs are expensed as incurred.

Shares in the trading subsidiary are carried at cost.

1 Accounting policies **(Continued)**

1.8 Impairment of fixed assets

At each reporting end date, the charity reviews the carrying amounts of its tangible assets to determine whether there is any indication that those assets have suffered an impairment loss. If any such indication exists, the recoverable amount of the asset is estimated in order to determine the extent of the impairment loss (if any).

1.9 Stocks

Goods donated to the Hospice shops are principally given as gift aid donations. When the goods are sold the value realised is communicated to the donor to confirm it is their wish that the receipt be retained by the Hospice as a gift aided donation. Accordingly, stock held has no value because the charity only has control over the value and income when the donation is confirmed by the donor.

1.10 Cash and cash equivalents

Cash and cash equivalents include cash in hand, deposits held at call with banks, other short-term liquid investments with original maturities of three months or less, and bank overdrafts. Bank overdrafts are shown within borrowings in current liabilities.

1.11 Financial instruments

The Hospice 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.

1.12 Creditors and provisions

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.

1.13 Employee benefits

The cost of any unused holiday entitlement is recognised in the period in which the employee's services are received.

Termination benefits are recognised immediately as an expense when the charity is demonstrably committed to terminate the employment of an employee or to provide termination benefits.

1.14 Retirement benefits

Payments to defined contribution retirement benefit schemes are charged as an expense as they fall due.

1.15 Leases

Rentals payable under operating leases, including any lease incentives received, are charged as an expense on a straight line basis over the term of the relevant lease.

2 Critical accounting estimates and judgements

In the application of the charity's accounting policies, the trustees are required to make judgements, estimates and assumptions about the carrying amount 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 where the revision affects only that period, or in the period of the revision and future periods where the revision affects both current and future periods.

3 Donations and legacies

	Unrestricted funds 2022 £	Restricted funds 2022 £	Total 2022 £	Unrestricted funds 2021 £	Restricted funds 2021 £	Total 2021 £
Donations and gifts	565,925	21,769	587,694	538,719	62,828	601,547
Legacies receivable	204,854	802,038	1,006,892	508,688	-	508,688
Grants receivable	11,565	417,502	429,067	7,500	1,270,020	1,277,520
	782,344	1,241,309	2,023,653	1,054,907	1,332,848	2,387,755
Donations and gifts						
General donations	272,509	3,085	275,594	316,402	-	316,402
In memoriam	203,615	-	203,615	159,367	-	159,367
Friends of the Hospice	23,757	-	23,757	25,551	-	25,551
Income tax recoverable	66,044	-	66,044	37,399	-	37,399
Covid-19 response	-	-	-	-	13,465	13,465
Keira's Wishes	-	5,741	5,741	-	9,553	9,553
Furnished with Love	-	-	-	-	39,810	39,810
Rebecca Taylor	-	12,943	12,943	-	-	-
	565,925	21,769	587,694	538,719	62,828	601,547
Legacies receivable						
Barras memorial garden	-	802,038	802,038	-	-	-
Other	204,854	-	204,854	508,688	-	508,688
	204,854	802,038	1,006,892	508,688	-	508,688
Grants receivable						
Other grants	11,565	-	11,565	7,500	-	7,500
Covid-19 response	-	1,999	1,999	-	29,796	29,796
NHS England	-	415,503	415,503	-	1,090,824	1,090,824
New IPU fund	-	-	-	-	149,400	149,400
	11,565	417,502	429,067	7,500	1,270,020	1,277,520

The NHSE awarded funding to allow the hospice to make available bed capacity and community support from April 2021 to March 2022 to provide support to people with complex needs in the context of the COVID-19 situation.

4 Charitable activities

	In-patient Care 2022	Hospice at Home 2022	Caring Hands 2022	Total 2022	In-patient Care 2021	Hospice at Home 2021	Caring Hands 2021	Total 2021
	£	£	£	£	£	£	£	£
Government funding	1,035,917	295,556	265,680	1,597,153	960,154	297,116	192,277	1,449,547

5 Other trading activities

	Unrestricted funds 2022 £	Unrestricted funds 2021 £
Fundraising events	42,518	37,199
Shop income	322,125	113,860
Hospice lottery	300,000	240,000
Donated by trading company	1,368	22,669
Other trading activities	666,011	413,728

6 Investments

	Unrestricted funds 2022 £	Restricted funds 2022 £	Total 2022 £	Unrestricted funds 2021 £
Dividends - equities	642	-	642	992
Interest - fixed interest securities	18,328	-	18,328	31,951
Bank interest	47	2	49	146
	19,017	2	19,019	33,089

7 Other income

	Unrestricted funds 2022 £	Unrestricted funds 2021 £
Room hire	9,700	6,900
Job Retention Scheme	3,439	64,700
Training	5,166	18,375
	18,305	89,975

8 Raising funds

	Unrestricted funds 2022 £	Restricted funds 2022 £	Total 2022 £	Unrestricted funds 2021 £	Restricted funds 2021 £	Total 2021 £
Fundraising and publicity						
Staging fundraising events	42,709	1,095	43,804	6,998	9,093	16,091
Other fundraising costs	7,678	-	7,678	10,297	-	10,297
Staff costs	225,191	-	225,191	179,897	-	179,897
Fundraising and publicity	275,578	1,095	276,673	197,192	9,093	206,285
Trading costs						
Operating charity shops	103,697	-	103,697	77,244	-	77,244
Other trading activities	20,117	-	20,117	10,407	-	10,407
Staff costs	121,974	-	121,974	94,529	-	94,529
Trading costs	245,788	-	245,788	182,180	-	182,180
	521,366	1,095	522,461	379,372	9,093	388,465

9 Charitable activities

	In Patient Care 2022	Medical Services 2022	Daycare / Wellbeing 2022	Hospice at Home 2022	Caring Hands 2022	Total 2022	Total 2021
	£	£	£	£	£	£	£
Staff costs	1,205,953	362,724	112,742	322,426	502,467	2,506,312	2,354,988
Other direct costs	16,830	242	2,789	6,690	2,396	28,947	19,022
Medical costs	42,421	-	-	-	-	42,421	22,274
	1,265,204	362,966	115,531	329,116	504,863	2,577,680	2,396,284
Share of support costs (see note 10)	267,978	81,272	25,261	72,243	112,583	559,337	456,191
Share of governance costs (see note 10)	13,530	4,103	1,275	3,647	5,684	28,239	26,390
	1,546,712	448,341	142,067	405,006	623,130	3,165,256	2,878,865
Analysis by fund							
Unrestricted funds	1,475,655	426,791	135,369	385,850	593,278	3,016,943	2,837,100
Restricted funds	71,057	21,550	6,698	19,156	29,852	148,313	41,765
	1,546,712	448,341	142,067	405,006	623,130	3,165,256	2,878,865

9 Charitable activities **(Continued)**

For the year ended 31 March 2021

	In Patient Care £	Medical Services £	Daycare / Wellbeing £	Hospice at Home £	Caring Hands £	Total 2021 £
Staff costs	983,666	370,580	134,045	429,210	437,487	2,354,988
Other direct costs	6,815	65	873	9,393	1,876	19,022
Medical costs	22,274	-	-	-	-	22,274
	1,012,755	370,645	134,918	438,603	439,363	2,396,284
Share of support costs (see note 10)	190,548	71,786	25,966	83,144	84,747	456,191
Share of governance costs (see note 10)	11,023	4,153	1,502	4,810	4,902	26,390
	1,214,326	446,584	162,386	526,557	529,012	2,878,865
Analysis by fund						
Unrestricted funds	1,196,881	440,012	160,009	518,945	521,253	2,837,100
Restricted funds	17,445	6,572	2,377	7,612	7,759	41,765
	1,214,326	446,584	162,386	526,557	529,012	2,878,865

10 Support costs

	Support costs	Governance costs	2022	Support costs	Governance costs	2021
	£	£	£	£	£	£
Staff costs	164,229	-	164,229	197,487	-	197,487
Depreciation	182,008	-	182,008	36,670	-	36,670
Support direct costs	53,370	-	53,370	79,581	-	79,581
Support equipment & premises costs	159,730	-	159,730	142,453	-	142,453
Audit fees	-	8,500	8,500	-	8,500	8,500
Legal and professional	-	19,739	19,739	-	17,890	17,890
	559,337	28,239	587,576	456,191	26,390	482,581
Analysed between						
Charitable activities	559,337	28,239	587,576	456,191	26,390	482,581

Support and governance costs are allocated between the various charitable activities, based on the number of staff operating within that function of the charity.

Governance costs includes payments to the auditors of £8,500 (2021- £8,500) for audit fees.

11 Net movement in funds

	2022	2021
	£	£
Net movement in funds is stated after charging/(crediting)		
Fees payable to the company's auditor for the audit of the company's financial statements	8,500	8,500
Depreciation of owned tangible fixed assets	182,008	36,670
Operating lease charges	83,097	79,990

12 Trustees

None of the trustees (or any persons connected with them) received any remuneration, benefits or reimbursement of expenses from the charity during the year.

13 Employees

The average monthly number of employees during the year was:

	2022 Number	2021 Number
Direct charitable services	57	55
Fundraising services	18	17
Support services	27	29
Total	102	101

Employment costs	2022 £	2021 £
Wages and salaries	2,575,804	2,411,359
Social security costs	228,848	206,200
Other pension costs	213,054	209,342
	3,017,706	2,826,901

Despite continuing Covid restrictions during 2021/2022 volunteers continued to support us and contributed 28,375 hours of their time, equating to a staff cost saving of over £262,000 (2021 - 10,815 hours, saving of £94,000).

The full time equivalent average monthly head count was 80 (2021: 79).

The number of employees whose annual remuneration, excluding pension contributions, was £60,000 or more were:

	2022 Number	2021 Number
£60,001 - £70,000	-	1
£70,001 - £80,000	2	-
£90,001 - £100,000	1	1

14 Other

	Total 2022	Unrestricted funds 2021
Exceptional item - hire of portacabin	-	110,489
	-	110,489

15 Net gains/(losses) on investments

	Unrestricted funds 2022	Total 2021
	£	£
Revaluation of investments	343	-

16 Taxation

The charity is exempt from Corporation Tax in line with paragraph 1 of Schedule 6 of the Finance Act 2010.

Doctor Kershaw's Hospice

Dr Kershaw's Hospice, Turf Lane, Royton, Oldham, OL2 6EU
www.drkh.org.uk

Tel: 0161 624 2727
Email: info@drkh.org.uk

Reg. Charity No: 1105924

DR KERSHAW'S HOSPICE

England & Wales - Charity number 1105924

Accounts

Doctor Kershaw's Hospice



ANNUAL REPORT & FINANCIAL ACCOUNTS

Year Ended 31 March 2021

Dr Kershaw's Hospice
(a company Limited by Guarantee)

Charity Number: 1105924
Company Number: 5221414


You are at the heart of everything we do!



Contents.

Our Values 8
About Dr Kershaw's 11
Management & Financial Details 12
Structure, Governance & Management 13
Response to Covid 14
Our Business as Usual 20
Patient Safety & Quality of Care 22
Patient Experience 24
Clinical Services 26
Learning & Organisational Development 34
Staff Resilience 36
Volunteering 40
Quality Improvement & HR 42
Income Development 44
Financial Review 50
Statement of Board of Trustees' Responsibilities for the Financial Statements 52
Independent Auditors' Report to the Members of Dr Kershaw's Hospice 54
Statement of Financial Activities for the Year Ended March 31, 2021 57
Balance Sheet 58
Statement of Cash Flows 59
Notes to Financial Statements 60

Mission Statement.

Our Mission is ‘to add quality to the lives of those with life limiting illnesses.’



Our Values.

Inclusiveness

We recognise, respect and embrace the diversity of our community, promoting equality in all that we do.

Openness & Transparency

Our openness and transparency reflects our duty to the patient and our statutory obligations.

Dignity & Respect

We treat our patients with the utmost respect, maintaining privacy and dignity at all times.

Responsiveness

We are responsive to the individual needs of our patient, their families and carers.

Compassion

We treat our patients, families and carers with compassion.

High Quality Care

We are dedicated to the provision of the highest quality evidence-based care.












About Dr Kershaw's Hospice.



Dr Kershaw's Hospice is an adult Hospice for Oldham and its surrounding areas. As a charity, we provide free specialist care for those with life limiting illnesses as well as support for those who are important to them - loved ones, families, friends, even pets.

Since the Hospice first opened its doors initially in 1989, we care and support the people we are in contact with both during a person's illness, at death and into bereavement - for as long as they need us.

We endeavour to be a caring organisation for all our patients, our staff, our volunteers and our partners across the community - other hospices, NHS & non-NHS organisations.

As leaders in our field, we reach out into family homes, hospitals, care homes and colleagues; offering emotional, spiritual and practical support.

Acknowledgements.

The Trustees would like to thank all our funders for their generous support over the past twelve months, in particular:

The Beaverbrooks Charitable Trust, The Wolfson Foundation, Garfield Weston Foundation, Life for a Life, CRASH Charity, and the Screwfix Foundation for supporting our In-Patient Unit Capital Campaign and enabling us to complete our project despite Covid-19 delays.

We are extremely grateful to all the Trusts and Foundations, Corporate supporters, individual donors, Friends, Lottery players, event participants, and community fundraisers who support us, without whom our work would not be possible, and to the generous people who left a gift to Dr Kershaw's in their Will, or have pledged to do so in the future.

Management & Financial Details.

Trustees.

The Trustees (who are also Directors of the charity for purposes of company law) present their financial statements and annual report for the year ended 31 March, 2021. The other general information given in the report covers the year between annual meetings.

Mirriam Lawton (Chair)	Appointed January 2020
Dr Paul Cook (Vice Chair)	Appointed January 2020
Anne Sykes	Appointed May 2011
Jonathan Lipton	Appointed January 2015
Sue Briscall	Appointed April 2014
Peter Wakefield	Appointed December 2018
Rachel Damianou	Appointed October 2019
Joanne Jones	Appointed October 2019
Jacqueline Wood	Appointed January 2021
Kim Wrigley	Appointed January 2021
Jonathan Edwards	Appointed January 2021
Stephen Schofield	Appointed January 2021

Trading Company.

Dr Kershaw's Hospice Ltd
Company Number - 5221414

Company Secretary - Rachel Damianou
Charity Number - 1105924

Senior Management Team.

Joanne Sloan	Chief Executive Officer
Dr Matthias Hohmann	Medical Director
Adele Doherty	Director of Clinical Services
Maria Papaleo	Director of Finance
Lyndsey Donbavand	Director of Quality and Governance
Rebecca Bentham	Director of Income Development & Marketing
Lindsey Harper	Lead Nurse Community Services
Kelly Foster	Senior Sister
Sarah Longmore	End of Life Nurse Educator

Banking Services.

Barclays Bank PLC	25 High Street, Oldham, OLl 3AZ
National Westminster Bank PLC	8 Rochdale Road, Royton, Oldham, OL2 8QJ
Charities Aid Foundation (CAF)	Kings Hill, West Mallin, Kent, ME19 4TA

External Auditors.

Chadwick & Company - Chartered Accountants
Capital House, 272 Manchester Road
Droylsden, Manchester
M43 6PW

Structure, Governance & Management.

The organisation's governance structures are shown in the diagram below...

Board Governance Structure - 2021.

Company Secretary
Rachel Damianou

Board of Trustees
Chair - Mirriam Lawton, Paul Cook (Vice Chair), Peter Wakefield, Sue Briscall, Anne Sykes, Jonathan Lipton, Joanne Jones, Rachel Damianou, Jacqueline Wood, Kim Wrigley, Stephen Schofield, Jonathan Edwards

Secretary to the Board
Beverley Schofield

Officer Roles
Dementia Champion - Adele Doherty
Equality, Diversity & Dignity Champion - Adele Doherty
Health & Safety - Lyndsey Donbavand / Paul Barnes
Caldicott Guardian - Dr Matthias Hohmann
Responsible Officer - Joanne Sloan
Registered Manager - Adele Doherty
Safeguarding - Joanne Sloan
Freedom to Speak Up Guardian - Adele Doherty
SIRO - Maria Papaleo
Controlled Drugs Accountable Officer (CDAO) - Adele Doherty
PREVENT Lead - Adele Doherty

Senior Management Team
Joanne Sloan, Dr Matthias Hohmann, Lyndsey Donbavand, Adele Doherty, Lindsey Harper, Maria Papaleo, Rebecca Bentham, Kelly Foster, Sarah Longmore

Trustee Support Roles
Executive Support - Mirriam Lawton
Special Projects - Paul Cook
Finance - Peter Wakefield
Human Resources - Jacquie Wood
Well-Being Centre - Anne Sykes / Kim Wrigley
Community Engagement & Volunteers - Jacquie Wood
Clinical - Sue Briscall / Kim Wrigley
Medical - Jonathan Lipton
Legal - Joanne Jones / Rachel Damianou
Income Development - Jonathan Edwards / Stephen Schofield
Safeguarding & SIRO - Paul Cook

Sub Groups
Clinical Governance- Adele Doherty (Chair), Sue Briscall (Vice Chair)
Human Resources / OD - Lyndsey Donbavand (Chair), Jacquie Wood (Vice Chair)
Information Governance - Joanne Sloan (Chair), Paul Cook (Vice Chair)
Strategic Governance - Mirriam Lawton (Chair), Joanne Sloan (Vice Chair)
Financial Resourcing - Peter Wakefield (Chair), Maria Papaleo (Vice Chair)
Income Development & Communications - Rebecca Bentham (Chair), Jonathan Edwards (Vice Chair)

Dr Kershaw's Collective Response to the Covid-19 Crisis.

Covid-19.

The Covid-19 pandemic has posed a unique challenge to Dr Kershaw's Hospice and it has been vital to ensure that palliative care considerations have been incorporated into the pandemic planning.

Nursing and medical staff have had to quickly adapt to a new way of working 'safely' and have responded with amazing tenacity. Alternative delivery methods of palliative care were explored throughout to ensure that the continuity of a high-quality service that Dr Kershaw's prides itself on remained unchanged.

Inside the Hospice, we completely adapted the physical layout, with doctors and nurses working within the Well-Being Centre, art rooms and café so that the Hospice's staff could effectively practice government guidelines on social-distancing. The new layout also enabled cross-communication and allowed for staff to closely support each other during a difficult time.

The temporary closure of the In-Patient Unit in November 2020 presented the Hospice with an opportunity to do things differently in response to the pandemic. We significantly increased the number of patients cared for in the community, this included our medical staff, who were able to directly support primary and community care services. We deployed our In-Patient Night Nursing team into the community, working with the Out of Hours Community Nursing team, supporting the need for a rapid response during the night for all palliative patients across Oldham.

Palliative patients were also given access to a specialist mobile number by either their District Nurse or Community Palliative Nurse and could use this number to contact nursing services as and when required.

Our Caring Hands service continued to provide domiciliary care across the Oldham borough with no disruptions to the service.



Covid-19.

The Hospice launched a successful online appeal for nursing staff to populate a Covid-19 nurse bank, which allowed us to respond promptly and effectively to service demand. The level of interest was overwhelming and it has been amazing to have high quality Healthcare Assistant's fulfilling the roles exceptionally well and supplementing our existing staff.

The Hospice dealt with more patients than ever before, tripling our offer within the community of Oldham, with two teams operating day shifts and one at night, providing vital support to families across the borough.

We used the opportunity to invest and enhance digital technology which has supported the Hospice throughout the pandemic and enabled us to continue functioning throughout the lockdown periods.

All of the staff and volunteers swiftly adapted to the required changes. They ensured our patients remained at the heart of everything we do, offering a calming presence through the difficult days, and their unfaltering dedication to Dr Kershaw's Hospice.

We were delighted to be presented with a 'Special Recognition Award' by Eamonn O'Neil, the High Sheriff of Manchester! Presented to those who have made an outstanding contribution to the community during the difficult circumstances brought about by Covid-19. Well-deserved recognition indeed for all our staff's hard work and dedication to duty.

As we reflect on what has been a difficult year, we are also optimistic for the future and are very much looking forward to welcoming everyone back into the Hospice to enjoy our array of services, our café and our fundraising events.





Covid 19.

Over 2020 and 2021 as a direct response to Covid-19, we have adapted our usual working practices to support the community.

Medical Services.

Over 2020 and 2021 as a direct response to Covid-19, we have adapted our usual working practices to support the community.

Caring for patients in the community regularly resulted in our doctors needing to prescribe additional or new medication. However, we weren't set up as a community prescribing organisation, with any prescriptions having to be issued by the patient's own GP or out-of-hours clinic which could take a substantial amount of time; leaving a patient without necessary medication.

Our clinical team took steps to become a community prescribing organisation; enabling us to issue prescriptions remotely and direct to the patient's pharmacy, providing vital medication quickly.

Since launching, patients have benefited from the speed and ease of accessing their medication.

With our innovative electronic prescribing system fully in use and making a huge difference to our patients, we shared our results with the Greater Manchester Hospices Group (GMHG) to see if other local Hospices were interested in the same opportunity. GMHG with our support submitted a bid to NHS England for funding to support implementing this initiative and the group was successful, receiving £50,000 in funding to be shared between the hospices.

The Hospice's Medical Team also adapted to meet demand and began working 7 days a week, providing a new 24/7 advice and support service directly to Hospice at Home staff, GPs, and community teams - a service which was not available 7 days a week prior to the pandemic.



Covid 19.

Non-Clinical Services Response

The long-term effects of Covid-19 are currently unknown, however, all charities have been significantly impacted by the pandemic and anticipate this continuing for some time. In response to the difficulties we faced in meeting the target for our new In-Patient Unit Capital Campaign, the Income Development team launched a new Appeal to engage with the local community; Furnished with Love – Give the Gift of Comfort. The focus of the Appeal was to raise funds to address the deficit, but with a specific ask for donations to purchase furniture for the new In-Patient Unit Family Lounge. The Appeal was a great success with social media followers, schools, and local corporate organisations getting involved.

With over 225 individual donations, 4 sponsored events, and a grant, a total of £39,810 was raised. We also produced a promotional video reaching over 6,900 people on Facebook.

Despite the Appeal's success, the initial plans for the Income Development 5-year strategy had to be completely revised to reflect the current economic climate, focusing on fundraising activities responding to the new environment. The strategy centres on reducing fundraising events and diversifying income streams; with Trusts & Foundations being a central focus and reviewing possible partnerships with other Greater Manchester Hospices (GMH) for additional income streams.

Volunteer Services.

Our wonderful team of volunteers are pivotal to the Hospice's day to day functionality. During 2020 many had to stand down as our shops closed, events were cancelled and some were shielding during the crisis. We made every effort to keep in regular contact with our volunteers during periods of lockdown by weekly phone calls, emails, Facebook and activities - virtual tours, app recommendations, online puzzles, audio books, zoo cams, free craft patterns, isolation bingo, a gardening competition, best DIY project and a poetry competition. Volunteer contact has been good and feedback from the calls has been extremely positive.

Because of this, we have identified volunteers who have additional struggles in life, beyond Covid-19, that we would not normally be aware of. The crisis has allowed us to make more time and effort in ensuring these volunteers have a voice, are able to talk and feel they have been supported when they needed it the most.

Education and Training.

Current night staff and returning day staff (from sick, isolation or maternity leave) were all offered training and support to adjust safely to their roles in the Covid-19 safe model of practice.

Mandatory training continued to be delivered, with a flexible approach leading to enhanced compliance across all subjects and all groups of staff.

A 'Pop up Learning Hub' was introduced in the clinical workspace to support staff with their learning and development, including training on safe and appropriate use of PPE. Resources provided to ensure staff are current and up to date with all the clinical developments affecting palliative and end-of-life care in relation to Covid-19.

Staff health and well-being has also been a priority throughout the pandemic. We created a 'Calm Zone' where staff can get away and access a range of supportive and self-help materials with the emphasis being on their emotional health.









Our Business as Usual.

Safeguarding.

Dr Kershaw's Hospice and Palliative Care Services are fully committed to safeguarding the welfare of all those we care for. We recognise our responsibility to promote safe practice and to protect all from harm.

We work together to encourage an ethos which embraces diversity and respects the rights of all involved within our services. We support the right of all to live free from abuse with respect; dignity and equality, believing that all should receive the support they need to reach their full potential and remain safe.

We promote a culture of listening to, and seeking the views of those we care for in a way that is appropriate to their understanding taking into account those views in individual decisions and in the establishment or development of services.

The Board of Trustees reviewed the safeguarding governance and management arrangements of the charity and its performance and is satisfied that we fulfil the expectations and requirements as set out in guidance issued by the Charity Commission.

New Build.

Construction of our new In-Patient Unit which started in September 2019, completed in February 2021 and includes en-suite facilities for 12 patients; additional facilities for relatives and visitors; medical piped gases and suction, new staff and storage facilities and additional car parking on the existing site. Alongside the New Build, the Hospice has taken the opportunity to upgrade the remaining building stock and utilities, including reroofing, solar panels and extended car-parking.

A generous legacy has enabled work to begin on our grounds and gardens to create a landscape which will be enjoyed by patients, relatives and staff alike for years to come.





Information Governance.

Work has continued throughout 2020/21 to ensure that the Hospice is able to fulfil the requirements of the NHS Data Security and Protection (DSP) Toolkit.

Data flow maps and impact assessments have been completed and are reviewed continuously to ensure all relevant control measures are in place ensuring that the personal data obtained is justified and complies with data minimisation principles.

Due to the Covid-19 pandemic Health, Safety and Security Self-Assessment Checklists were implemented for all staff working from home. The checklist was introduced to highlight any potential risks associated with information governance, confidentiality and data security and relevant control measures have been applied, where required.

Privacy issues have been identified and risk analysis has been completed giving reassurance that the information asset is secure and complies with General Data Protection Regulations.

Organisational Governance.

The Board of Trustees are fully committed to the principles of the Hospice, good governance and contributing to the organisation's safety and continued improvement.

Trustees are recruited to ensure that the Board has a wide range of business experience and knowledge. This ensures that the company is organised on a sound basis and that all decisions are well founded and financially viable.

The Trustees are responsible for making policy and main funding decisions with the day-to-day management of the Hospice being under the direction of the Chief Executive Officer and her Executive Officers.

All potential risks to the organisation are held within our Risk Register – this is a live document, updated at every Senior Managers Monthly Sub-group meeting with key issues reviewed at every Board meeting by both the Executive Managers and Trustees.

Quality and performance reports and statistics are considered at every meeting of the Board. Particular attention is given to mandatory training, the admissions/episodes in both In-Patient Unit and the Well-Being Centre, to ensure that best use is being made of available beds and resources without compromising quality of care.

During this year the Board welcomed Jacqueline Wood, Kim Wrigley, Stephen Schofield, and Jonathan Edwards who bring their individual talents and expertise to the Board.

Trustee Gordon Russell stepped down from the Board in December 2020 after many years' service to the Hospice. Dr Kershaw's Hospice wish to thank him for his time, expertise, and dedication to the hospice. Former Chairman Vernon Cressey stepped down in January 2020. The Board acknowledged his retirement as Chair of the Board of Trustees. Vernon became a council member in November 1999 and was Secretary to the Trustees and also Secretary of the Governing Council from August 2000. He has been Company Secretary from September 2004 to January 2015 and a Trustee since December 2005 and he was appointed Chair of the Board in November 2014. Vernon was thanked for his long and valuable service

Thanks are also extended to Dr Paul Cook for his ongoing work in the role of Special Projects Advisor in relation to our new build and renovations project. He has devoted considerable time and effort to ensuring that our project is brought to fruition on target, obtaining significant NHS Capital monies and Charitable grants towards its funding.

Patient Safety and Quality of Care.

The clinical audit calendar is systematic and responsive to clinical requirements. The audit results from 2020/21 are displayed in a prominent place for all staff to observe and includes a results summary that highlights good practice and areas of practice where it could be improved. There is also an associated action plan displayed to provide the finer detail regarding each audit. The audit findings are discussed in the monthly Nurses Forum and Clinical Governance Group.

Overall compliance 2020/21 = 93%

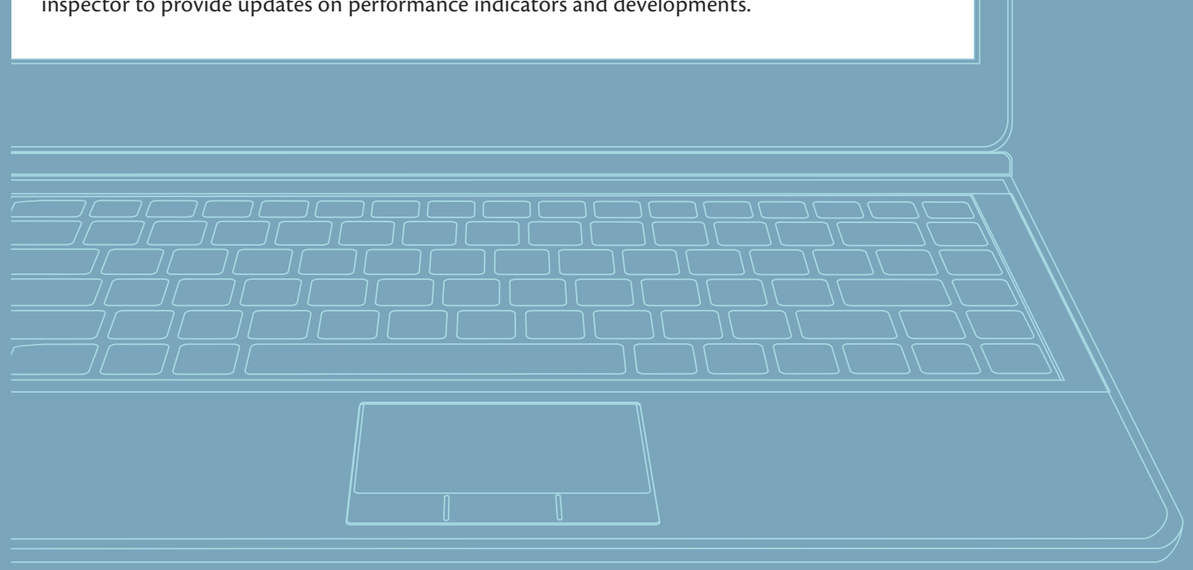
CQC Transitional Regulatory Approach.

Due to the pandemic the CQC (Care Quality Commission) Inspectors have adapted their methods of inspection by introducing a transitional approach to monitoring services.

On 19th February 2020, members of the Senior Management Team took part in a CQC Transitional Monitoring inspection interview, focusing on safety, how effectively our services are led and how easily people can access our services.

In preparation for the interview a 17,000-word document was submitted The interview took place via Microsoft Teams, and afterwards our Inspector and his Line Manager prepared a summary of their findings and we were delighted to receive positive feedback and thanked for all of our time and efforts. It was reassuring to know that all of the additional control measures that have been implemented due to Covid-19 were recognised and praised by the CQC inspectors and that as a result of this there were no further regulatory action required.

Our Registered Manager, Director of Clinical Services, continues to liaise with our local CQC inspector to provide updates on performance indicators and developments.



Patient Experience



Feedback, good and bad, is vitally important and allows us to make improvements where it might be needed. In the last year (April 2020 to March 2021) we received 381 types of feedback from service users and received 2 complaints.

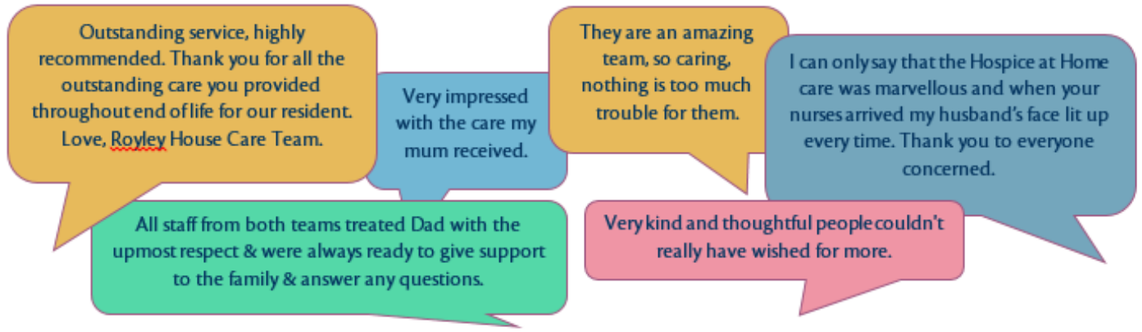
The 2 complaints received were not related to patient care. Both complaints were investigated and discussed with the parties involved and have been resolved satisfactorily.

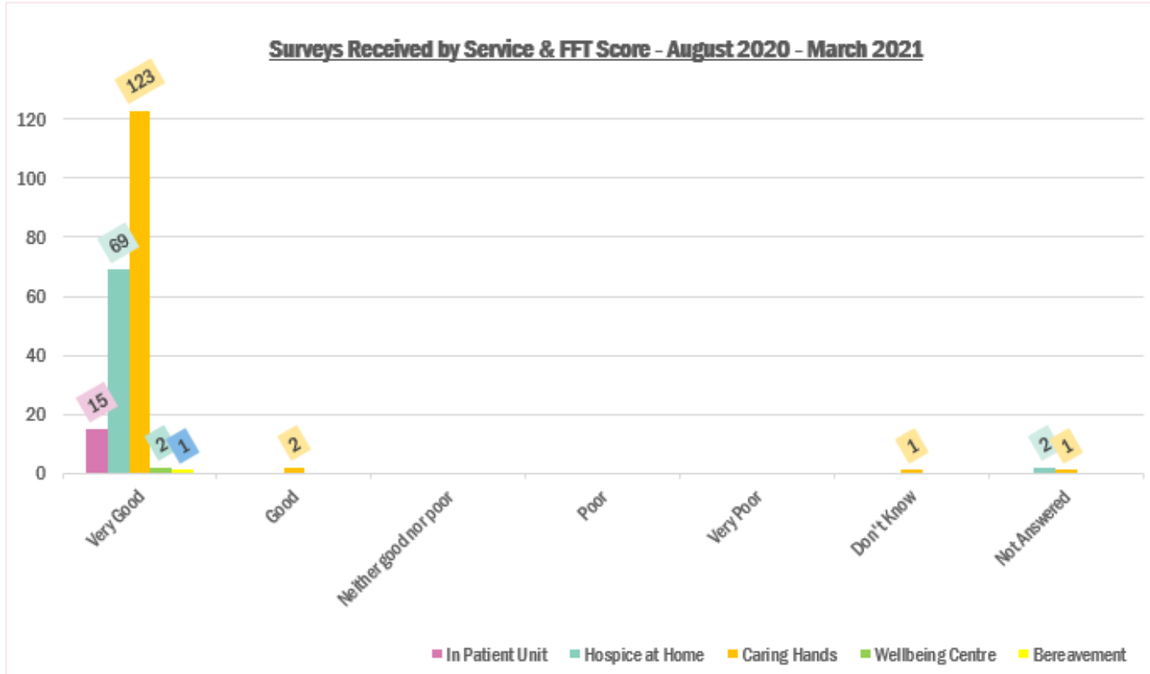
We discuss themes from compliments and concerns we receive at the Clinical Governance and Senior Management Team Meetings, which are also reported to the Board of Trustees.

During 2020 we improved on an integrated strategy to collect, review, learn from and apply patient and carer feedback across all Hospice services.

Internal mechanisms have been further developed as a result to allow the collection of patient feedback in a systematic way. Patient and carer 'satisfaction surveys' have been redesigned across all service areas which incorporate the friends and family test. This allows us to summarise patient feedback responses and use the information to analyse findings, to share success and address any required improvements through hospice sub groups.

Since the launch of the new survey in August 2020 we have continually monitored the progress and it is clear from the survey responses received that it has had a positive impact. Internal and external reporting has become much more effective since recording patient experience on an electronic database.





Clinical Services.

Despite the challenges the global pandemic presented the Hospice had another successful year. We delivered much needed care to hundreds of patients and their loved ones across Oldham and the surrounding areas, at no cost to themselves.

The Hospice is proactively working in collaboration with our partner organisations ensuring care is focused and coordinated, which has further enhanced end-of-life care for the people of Oldham. Our input has increased and has helped reduce the numbers of avoidable hospital admissions for people whose preferred place is the Hospice or their home.

Well-Being Centre.

The Well-Being Centre did unfortunately have to close due to restrictions, however existing patients continued to receive a weekly phone call from clinical staff and an escalation process was in place to assist with any clinical advice required.

Due to Covid-19 and the closure of the Well-Being Centre, a focus has been on the delivery of a virtual version of the Well-Being Centre that patients can access via Microsoft Teams with volunteers being able to facilitate most sessions.

All existing patients were contacted to discuss their interest in the virtual service. Twelve patients felt unable to participate, mainly due to lack of technology but have since been offered a place on the Friendship Service.

This is also addressing social isolation and prompting positive mental health and well-being for the involved patients.

696
Phone calls to Well-Being Centre patients



Virtual Well-Being Centre Sessions.

The virtual sessions that are established include:

Quiz

The quiz is facilitated by an experienced volunteer on a Tuesday afternoon. The quiz is a chance for the patients to have some fun and prompts discussions.

"Being able to be part of the quiz has brightened up my day as I live alone and have been shielding".

Exercise

The exercise class is being run by Oldham Community Leisure Centre who are volunteering their time and expertise for our patients. The sessions start with some discussion amongst the patients and the volunteer to establish their needs and capabilities. The exercises are tailored to each individual and the patients are not pushed to exert themselves beyond their capabilities. Patients had a dumbbell and exercise band delivered to their homes so that they can use these during the sessions.

Yoga

A volunteer offers gentle and restorative yoga therapy sessions.

Relaxation

This is a volunteer led session and uses relaxation techniques for patients to listen and respond to. This session has been most popular with the patients and has again received positive feedback from all patients.

"This has really helped me deal with my anxiety I really look forward to a little 'me time' when I can completely relax."



58
Virtual Well-Being Centre sessions facilitated

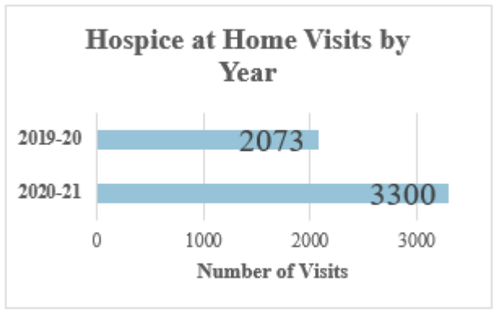
Hospice at Home.

Dr Kershaw's Hospice at Home Service continues to benefit the local community providing high quality, individualised and flexible end-of-life care. Now in its fifth year, Hospice at Home is a thriving, well established, relied on and respected service in our local community.

During the pandemic the Hospice at Home Service continued to be business as usual, working in collaboration with our partner organisations.

We reintroduced our "Community Hub" in the Well-Being Centre conservatory to house staff whilst the next phase of the new build and removal of the modular unit was undertaken. We secured a second vehicle to support the increase in patients currently being cared for in the community, with great thanks to Ford Oldham.

Following the success of the Hospice community overnight support, a business case was produced and included an analysis of the data that was collected through a successful 6-month pilot. This data fully supports an extension of the current Hospice at Home model with the addition of the rapid response palliative calls between the hours of 21.00hrs- 07.00hrs.



1,135 urgent visits attended by Hospice at Home

8,807 telephone calls with Hospice at Home

398 out of hours visits over 6 months











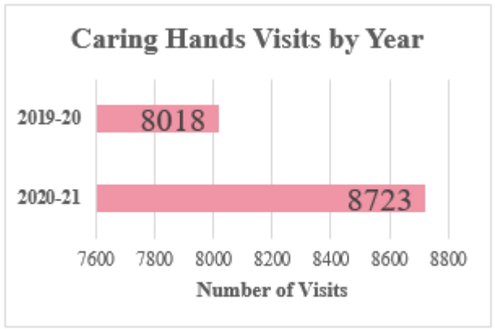


Dr Kershaw's Caring Hands.

Our domiciliary care service, Caring Hands is now well-established with an excellent reputation in our community for providing high-quality care and we are able to provide qualitative evidence to support our belief. The Continuing Healthcare Commissioner (CHC) have also received overwhelmingly positive feedback regarding the care we provide, and we have been requested by name and reputation by several families.

The staged expansion of Caring Hands continues, and a revised advertisement for community Healthcare Assistant's has been released via our website and social media platforms. We are hopeful this will attract high calibre applicants that are required to support the expansion.

Initial conversations with the CCG and CHC regarding a new proposed way of working and a block commission of our service have not progressed as intended due to the constraints of the pandemic and the limitations this has placed on all involved. Regular meetings have been scheduled to discuss the future contract for Caring Hands as the current 3 year contract is reaching its natural end. We are hopeful an agreement will be reached to ensure that this essential service can continue and develop further.







Dr Kershaw's Caring Hands.

Nursing Times Awards 2020 Finalists

The Caring Hands service became finalists following nominations in the 'Cancer Nursing' and the 'Nursing in the Community' Nursing Times Award categories.

Carer satisfaction from people accessing our community care services has been overwhelmingly positive and has been an outstanding feature of the service provided. We have also had excellent feedback from our district nursing colleagues who are often providing care for the same patients we are visiting.







Spiritual Care and Bereavement Support.

The Bereavement service continues to provide support to the bereaved within the Hospice community and also to the wider community, led by our Spiritual Care Nurse who is supported by a small but dedicated group of skilled volunteers across a range of roles.



Our Bereavement Service Through Covid.

However, due to the restrictions on visiting the Hospice and face to face contacts imposed during the pandemic we had to completely rethink how we could best reach those in need of this particular service.

As more people were forced to isolate the Bereavement Support Nurse has been pivotal in ensuring we reach as many people as possible and offer our support at the most difficult of times.

We continued to provide mementos for families across all Hospice services, including memory boxes, fingerprints, locks of hair, teddy bears and hearts.



Telephone Service.

The telephone support service introduced at the start of the pandemic continues to work well. Healthcare Assistant and volunteer support started in January 2021 and is complementing the service. A volunteer counsellor works with the Bereavement Support Nurse.

Dementia Support.

Collaborative work with Oldham Memory Services to support a bereaved dementia sufferer is ongoing, and a 'dementia toolbox' of support strategies, resources and relevant contacts is in development to better support dementia sufferers accessing hospice services in future, in line with the Hospice's dementia friendly status.

Dementia Friends
An Alzheimer's Society initiative

Friendship Service.

A Friendship Service has been developed to address loneliness and isolation by facilitating a weekly phone call from a volunteer to a service user. It is modelled on similar support services run by Age UK and other organisations. Initially the service was introduced to people who have accessed the Well-Being Centre prior to lockdown and people who have accessed the Bereavement Support Service and are ready to move on to a less intensive intervention than bereavement support. Healthcare Assistants and volunteers began working with the Bereavement Service in March 2021 to facilitate the creation of this Friendship Service.

Learning and Organisational Development.

Dr Kershaw's Hospice is committed to the development of its staff and aims to provide a working environment in which staff are able to maximise their performance, commitment and contribution.

Our comprehensive statutory and mandatory training program includes face-to-face sessions, e-learning and workbooks as methods of teaching. This reflects current practice and is consistent with relevant national and local regulations/legislation.

Compliance with the Hospice mandatory training programme has been consistently high throughout the year:



In 2021/22 we will continue to develop the Learning Strategy demonstrating how the Hospice assesses, implements and evaluates the learning needs of all staff within a robust framework that supports equality of opportunity.



Staff Resilience.

The past year has been an incredibly challenging one for everyone. Anxiety and mental health issues have become much more prevalent. Dr Kershaw's has always treasured and supported our staff and volunteers and the work they do, but the pandemic has put a greater emphasis on mental health and well-being. In turn we have made it our focus to strengthen our measures to support the well-being of our staff.

A 'temperature check' was introduced in August 2020 and repeated in November to gain a better understanding of how staff were feeling and to continuously work on creating an environment where staff feel valued and satisfied in a period where there are so many challenges.

The survey results allowed us to learn where things are working well or not so well, expand on them and also benchmark staff engagement. There has been a need to ensure that staff are supported in a robust manner - using the temperature checks gave the opportunity to support staff in a more meaningful way.

Healthy Workforce.

A Healthy Workforce program was introduced which gave all staff the opportunity to take some time out of their usual working day to sign up to a number of workshops focused on wellness and mindfulness. The main aim was to encourage our team to stop, take a breath and relax and to continue this practice moving forwards.

A range of free complementary therapies were also made available to staff, offering a selection of treatments including Reiki.

The Workplace Well-being Launch which was just the start of our initiative has received excellent feedback from those who attended.

We have trained 11 dedicated Mental Health First Aiders and have expanded our well-being services, bringing our workplace resources together in one impactful toolkit.

Currently in place:

- Clinical supervision
- Mental Health First Aiders
- Staff surveys
- Significant events analysis meetings
- Connect 5 training
- Staff Well-being days
- Pin boards – monthly well-being ideas and suggestions
- Trainee counsellors on site providing one to one support



Staff Resilience.

Future Framework (in addition to everything currently in place):

- Drop in clinics for all staff to access
- Support for Mental Health First Aiders
- Schwartz rounds
- Formal training - resilience specific
- Development of a clinical skills directory and training
- Development of an organisational development directory and training
- Regular complementary therapy slots available to staff



Internal Communications & Community Engagement:

- In 2020/21 our Marketing and Communications Manager brought a new focus to the team – both internally and externally.
- A new staff newsletter, Connect, has been launched to aid better communication across all teams and to celebrate achievements within the Hospice.
- The work put in by our Marketing and Communications team has increased our social media followers and our press coverage is rising.


CONNECT

NURSING TIMES AWARDS FINALISTS!

HOSPICE PHOTO DAY!

Thank You Week.

In December 2020, we launched our first ever Dr Kershaw's 'Thank You Week' in recognition of the hard work that everyone does and to say thank you for going above and beyond during the pandemic. The Senior Management Team and Board of Trustees took the opportunity to share their thanks and appreciation with a series of messages and videos sent out to everyone via email and social media.

Each member of staff also received an extra day's holiday as a 'Thank You day' for each person's exceptional contribution in what has been the most challenging of years.



Positive and Appreciative Feedback from Staff.

"The extra day's holiday was gratefully received by the nursing team and was a huge boost to morale, giving the team an extra day to spend with their loved ones."

Adele Doherty, Director of Clinical Services



"This year has been very strange, but I have been around incredibly professional, friendly, positive people staff, volunteers and patients, and together we have got through this. So, thank you for having the trust in me to carry out my role in a professional manner too!"

Alison Taylor, Deputy Shop Manager



"The personal Thank You letter from Joanne and the extra day holiday was such a lovely surprise! It's not something I've experienced in other places of work and it gave me a real boost. Thank you!"

Kathryn Harding, Bereavement Support Nurse



"Thank you for my 'Thank You' day holiday. What a lovely thought and such lovely words in your letter. I'm hoping that 2021 brings some stability and enables us to once more engage in face to face contact with our supporters to generate much needed income for this amazing place!"

Joanne Penketh, Head of Lottery & Donor Stewardship



Volunteering.

During 2020/2021 the Volunteer Department has focused upon developing existing roles to ensure they are fit for purpose and creating new specialist roles to add value to the Hospice workforce.

We would like to thank all of the volunteers who continue to support us.



Our Volunteer Department at the Hospice has worked hard to keep in touch with our network of volunteers to help them combat loneliness.

The team have been busy delivering care packages to the most vulnerable, to help those who have been self-isolating. In addition, we have been providing the community with fun, uplifting, activities via our website and our social media pages. Our network of supporters could participate alone or as a family, from the comfort of their own homes to help combat boredom during isolation.

A program of support was designed as they isolated, ensuring we have kept in touch with our volunteers. Packages, puzzles and regular phone calls have all been actioned to ensure our volunteers felt safe and cared for, wherever possible we ensured vulnerable volunteers had everything they needed.



The Volunteer Mandatory Training Program has been a huge success in 2020/21 with 95% compliance to date.





Volunteering.

We got a great response to the Volunteer Satisfaction Survey this year despite a large proportion of volunteers being unable to physically volunteer due to restrictions.

Our main actions from the survey will be to continue to improve communication, work on ways to make everyone feel like part of the Dr Kershaw's team and demonstrate just how volunteers make a difference through their efforts.

"I feel part of a big family who care for each other."

"I think that the shops have been well organised to deal with the safety issues."

"Keeping me informed has made me still feel part of the team!!"

One of the unexpected results that came out of the survey was the substantial increase in how informed and valued volunteers now felt compared to last year. This is absolutely something we want to continue to build upon, as volunteers return to their roles.



Average Response Scores (out of 10)

Despite the unusual nature of 2020 and the many challenges we all faced, we have been so lucky to still have our huge team of volunteers on hand to support in any way they can. In 2020, our volunteers dedicated over 18,548 hours of their time. Their commitment never ceases to amaze us!

On Monday 2 November 2020, Helpforce, an organisation which partners with health and care organisations to increase volunteering opportunities and accelerate their impact launched their Wall of Fame. This was to say a big thank you to all volunteers and recognise their amazing support and achievements, especially during the last difficult year. Dr Kershaw's Hospice volunteers were not just included once, but four times!



Quality Improvement and Human Resources.

Internal systems have been developed to support the effectiveness of data collection and reporting. The appointment of the Clinical Services Administrator in January 2020 has given us the opportunity to concentrate on enhancing the functionality and reporting element of the EMIS system including the creation of modules to support new services working collaboratively with the medical and clinical teams. This has been a huge success and is enabling the Hospice to use performance information in a range of ways from internal communications, supporting internal audits and to fulfil external commissioning requirements.

2020 to date has presented many challenges for the Hospice. Policies, procedures and guidelines have been developed and introduced to support the changes and have been instrumental to managing the impact of Covid-19 safely and effectively.

During these unprecedented times we have been able to react promptly and the changes that have been implemented have had a positive impact in changing ways of working to maximise efficiency and productivity.

Relevant control measures have been implemented to ensure the environment and personal safety is not compromised and is continually monitored through inspection, internal audit, staff/volunteer risk assessment and survey feedback.





Income Development.

The Income Development team's core objective is to secure sustainable income in support of the Hospice's strategy. The Covid-19 pandemic continued to have a huge impact on fundraising income for the Hospice; please see our Covid-19 response summary.

Hospice Shops

Throughout the financial year the Hospice shops were closed for a total of 6 months and the majority of shops' staff furloughed. This had a huge impact on revenue as retail is a vital income stream for the Hospice. Throughout the year the shops secured a gross income of £113,860, against a budget of £483,700, with therefore a shortfall of 76.5%.

During the year the Hospice appointed an E-Commerce and Trading Manager to lead on the expansion of all e-commerce activities and non-shop trading in order to maximise income for the Hospice; with an initial focus on eBay. Unfortunately, the pandemic impacted on the success of this income stream which resulted in a financial loss and the redundancy of the E-Commerce and Trading Manager post.

September brought the appointment of a new Area Retail and Trading Manager, with a background in Corporate Retail, who brought a new lease of life to our shops. A 5-year strategy was developed to align with the overarching Income Development strategy – focussing on new target driven processes, the introduction of new revenue streams, brand enhancements and shop refurbishments, and new store developments. The initial priority centred on an evaluation of the current retail model with a restructure and cost saving exercise; ensuring all activities secured a solid return on investment or were replaced with a more stable, profitable, and forecastable alternative.

Hospice Lottery

The Hospice Lottery saw a huge reduction in weekly players, with over 1,600 members cancelling their memberships due to the pandemic. Throughout the whole year, we were also unable to canvass door to door due to the lock downs and the Tier system put in place; reducing the ability to secure additional memberships and players.

However, in October 2020 the Hospice launched a telesales campaign working with Integrated Promotions Ltd. This proved most successful with over 600 new members being secured by the end of March 2021. Lottery promotions also took place via the Hospice website, social media platforms, Hospice newsletter and staff Newsletter.

Despite the fall in weekly players the local community showed great support to the Hospice through the four bumper draws (spring, summer, autumn and Christmas) which raised over £57,000. This was over £27,000 up on the 2019 draws with £16,000 of that in donations alone. During 2020/21 the lottery contributed £240,000 to the Hospice in support of patient care.

Dr Kershaw's Hospice Lottery is committed to ensuring that the Lottery is operated in a secure, fair and socially responsible way and to endorsing responsible gambling amongst its members. Dr Kershaw's Hospice Lottery is a member of the Hospice Lotteries Association, which is committed to working together to encourage responsible gambling and provide access to support if needed.

Dr Kershaw's Hospice is licensed and regulated in Great Britain by the Gambling Commission under account number 5224.

85.9p* of every £1 goes directly towards providing patient care, 9.5p* towards lottery prizes, and the remaining 4.6p* is spent on lottery administration, training, staff costs, licenses and marketing. Average number of players in the draw is 12879*.

*These figures are based on income and expenditure for Dec 2020.













Fundraising.

Event Fundraising.

Due to Government restrictions we were unable to move forward with our live planned events for 2020 and 2021, and had to cancel all activities. However, some events were adapted to virtual activities to enable us to engage with the community in some form. Our Light Up a Life service was held virtually on Facebook and YouTube, with a promotion on Oldham Community Radio 99.7 FM, and dedication names published in the Oldham Times. Light Up a Life was a huge success with 1,040 dedications made in memory of lost loved ones. The service received 2,900 views on Facebook and 1,005 views on YouTube, from local, national, and international supporters watching. The service raised a gross income of just over £27,000, which was a 70% increase on the 2019 service. The 2021/22 events calendar will include a mix of live and virtual events to account for any safety measures that may still need to be adhered to.

Corporate Fundraising.

Corporate support diminished during the pandemic, but some loyal local businesses were still able to support the Hospice through 'charity of the year' partnerships, sponsorship opportunities, and donations. Corporate support included, but was not limited to, Tesco, Amazon UK, Schneider Electric, Studio, Corptel, Primark, Asda, Crane Payment Innovations, Touch Solicitors, Radial, Ribble Packaging, and Remedian IT Solutions. Due to the pandemic and limited corporate support the 2020 Corporate Challenge was postponed and the Hospice's Corporate Fundraiser was made redundant.



Trusts & Foundations Fundraising.

Fundraising for the new In-Patient Unit Capital Campaign continued into 2020/21 with a number of applications submitted to Trusts and Foundations in request of financial support. Grant funding towards the capital campaign was secured from The Beaverbrooks Charitable Trust, The Wolfson Foundation, Garfield Weston Foundation, Life for a Life, CRASH Charity, and Screwfix Foundation. Additional funds were also sort for general running costs and support with Covid-19, support was granted from Oldham Council, The Masonic Charitable Foundation, Crane Fund for Widows and Children, OneFamily Foundation, Action Together, Tesco Community Grants - Groundwork. Dr Kershaw's Hospice is extremely grateful to these Trusts and Foundations for their generous support.







Fundraising.

Community Fundraising.

The community's support for Dr Kershaw's Hospice continued throughout the pandemic, all be it in peaks and troughs throughout the year. Key organisations supported the Hospice with PPE, donated goods, and monetary donations. Our thanks go out to all who helped us, including but not limited to, Oldham Metro Rotary and Rotary Club of Oldham, the Freemasons, the Oldham Mayor (Cllr Alexandra), the Big White Charity Van, and Saddleworth Round Table.

Members of the public hosted their own events or fundraising activities to support the Hospice. Activities included head shaves, pub quizzes, and Facebook birthday fundraising. Our Community Team created a new 'Do It for Dr Kershaw's' Campaign which included a virtual balloon race and 'Bake It' competition, sharing initiatives, bespoke activity sheets, and ideas for supporters to do their own fundraising; which the community got behind.

Keira Arnold, one of the Hospice's youngest fundraisers, had another year of successful fundraising for Dr Kershaw's; celebrating reaching £36,000 for Keira's Wishes. Through her initiative Keira kindly provided the funding for the TV's in the new In-Patient Unit patient rooms.

In October 2020 we launched a new fundraising Appeal; Furnish with Love – Give the Gift of Comfort. The Appeal focussed on raising funds to address the then deficit in income for the new In-Patient Unit; specifically asking for donations to purchase furniture for the new In-Patient Unit Family Lounge. The Appeal was promoted via our shops, advertising, social media, and via marketing drops. It was also our focus for Christmas; adapting it to a third party fundraising campaign for schools and corporate organisations. With Senior Sister, Kelly Foster, as the avatar face of the Appeal it was a great success securing £39,810 gross income, and just under 7,000 engagement interactions via our social media platforms.

The Friends of Dr Kershaw's Hospice continued to give regularly, with over £25,551 being given to support clinical services and patient care.



Marketing & Communications.

The Communications Team has grown from strength to strength over the past year, with the appointment of a new Marketing and Communications Manager and a Digital Marketing and Events Executive. The team has been focussed on developing dynamic, digitally driven communications; drawing on online activities, using patient and their families' stories, and dispelling the myths surrounding Hospices.

The Hospice's Brand Guidelines have been redeveloped, a new staff newsletter introduced, the Hospice's website has had a makeover, and the Hospice's newsletter has been renamed the Heart of the Hospice and been resized and redesigned.

Online support has grown throughout the year with engagement and followers on Facebook, Twitter, Instagram, LinkedIn, and YouTube increasing. The Hospice secured a weekly page in the Oldham Times featuring key updates and stories on patient care. Features have also been included in the local press and on the radio, including the Oldham Times, Oldham Reporter, The Oldham Chronicle (online), Saddleworth Monthly, Saddleworth Life, Saddleworth Independent, The Metro, Manchester Evening News and Oldham Community Radio 99.7FM.







Financial Review.

2020/21 saw the Hospice face and overcome some of its biggest and toughest challenges to date. The global impact of Covid-19 affected patients, staff, volunteers physically, mentally and emotionally, and saw the worlds' economy dive, resulting in closure of businesses and redundancies.

The way the Hospice delivered its care to those who most need us, changed overnight. Internal investment and the overwhelming support from local community, businesses and our business partners, saw the introduction of a 24/7 telephone advice line, a dedicated bank of nurses, and trebled care in the community. Investment and support form Oldham NHS, was received to help secure additional equipment to help combat Covid and purchase additional IT equipment to support staff working from home and conference meetings.

Special thanks must be given to NHS England, and the support of Hospice UK, for their work in helping secure the vital funding Hospices across the country needed to survive this very difficult Financial Year. Many thanks to North Manchester NHS, for their support during the pandemic and our heartfelt thanks you to our loyal community and local businesses, who continue to support us through everything, with a variety of donations, from food, gifts, PPE, cash, to vehicles.

During 2020/21 the Hospice was again fortunate to be the beneficiary of legacies and bequests, totalling £508k. These went a long way to help improve our patient care. The Hospice could not continue to function without these very generous gifts.

2020/21 saw the completion and opening of our new In-Patient Unit in February 2021. The Unit offers modern facilities and equipment to our patients and their loved ones. The Hospice has drawn on reserves accumulated over a number of years, and were successful in securing ringfenced funding, help from the Community, our Furnish with Love Appeal and Dr Kershaw's Lottery made this possible.

The Hospice finished the year with £996k across restricted and unrestricted funds.The Hospice plans to designate approximately £500k to capital, as we plan to continue improvements to our reception area, and external grounds.

Without the support of the NHS, our commissioners, supporters, our piers, staff and volunteers, it could have been a very different story for the Hospice, and our most sincere thanks go out to you all.

Despite the challenges the last year has presented, the Hospice and its staff remain positive, strong and committed to the work we do, in providing and maintaining the highest standard of care to our patients, and looking after visitors, volunteers and staff.









Dr Kershaw's Trustees 2021.

Statement of Board of Trustees' Responsibilities for the Financial Statements.

The Trustees are responsible for preparing the Trustees Report and the Financial Statements in accordance with applicable law and United Kingdom Generally Accepted Accounting Practice.

Company law requires the Board of 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 of the incoming resources and application of resources, including the income and expenditure, of the charitable company for that period. In preparing those financial statements the Trustees are required to

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

The Trustees are responsible for keeping proper accounting records, which disclose with reasonable accuracy at any time the financial position of the charitable company 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 charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

So far as the Trustees are aware, there is no relevant information (as defined by section 418 of the Companies Act 2006) of which the charitable companies' auditors are unaware, and each Trustee has taken all steps necessary in order to make them aware of any audit information and to establish that the charitable company's auditors are aware of that information.



Auditors.

In accordance with the company's articles, a resolution proposing that Chadwick & Company (Manchester) Limited be reappointed as auditor of the company will be put at a General Meeting.

Approval.

This report was approved by the Trustees on the 16th December 2021 and signed on their behalf by:-

NAME	Rachel Damianou	**NAME**	Mirriam Lawton
POSITION	COMPANY SECRETARY	**POSITION**	CHAIR/TRUSTEE
NAME	Paul R Cook	**NAME**	Peter Wakefield
POSITION	VICE CHAIR/TRUSTEE	**POSITION**	TRUSTEE

DR KERSHAW'S HOSPICE

INDEPENDENT AUDITOR'S REPORT

TO THE TRUSTEES OF DR KERSHAW'S HOSPICE

Opinion

We have audited the financial statements of Dr Kershaw's Hospice (the 'charity') for the year ended 31 March 2021 which comprise the statement of financial activities, the balance sheet, the statement of cash flows and the notes to the financial statements, including significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including FRS 102 *The Financial Reporting Standard applicable in the UK and Republic of Ireland* (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 31 March 2021 and of its incoming resources and application of resources, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

Basis for opinion

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

Conclusions relating to going concern

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

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

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

Other information

The other information comprises the information included in the annual report other than the financial statements and our auditor's report thereon. The trustees are responsible for the other information contained within the annual report. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon. Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the course of the audit, or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

Opinions on other matters prescribed by the Companies Act 2006

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

- the information given in the trustees' report, which includes 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 directors' report included within the trustees' report has been prepared in accordance with applicable legal requirements.

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the charity and its environment obtained in the course of the audit, we have not identified material misstatements in the directors' report included within the trustees' report.

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

- adequate accounting records have not been kept, or returns adequate for our audit have not been received from branches not visited by us; or
- the financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit; 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 trustees' report and from the requirement to prepare a strategic report.

Responsibilities of trustees

As explained more fully in the statement of trustees' responsibilities, the trustees, who are also the directors of the charity 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 charity's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the trustees either intend to liquidate the 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 is available on the Financial Reporting Council's website at: https://www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditor's report.

Extent to which the audit was considered capable of detecting irregularities, including fraud

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.

- At the planning stage of the audit we gain an understanding of the laws and regulations which apply to the Group and how management seek to comply with them. This helps us to make appropriate risk assessments.
- During the audit we focus on relevant risk areas and review compliance with laws and regulations through making relevant enquiries and corroboration by, for example, reviewing Trustees Minutes and other documentation.
- We assess the risk of material misstatement in the financial statements including as a result of fraud and undertake procedures including:
    I. Review of controls set in place by management
    II. Enquiry of management as to whether they consider fraud or other irregularities may have occurred or where such opportunity might exist
    III. Challenge of management assumptions with regard to accounting estimates
    IV. Identification and testing of journal entries, particularly those which may appear to be unusual by size or nature.

Because of the inherent limitations of an audit, there is a risk that we will not detect all irregularities, including those leading to a material misstatement in the financial statements or non-compliance with regulations. This risk increases the more that compliance with a law or regulation is removed from the events and transactions reflected in the financial statements, as we will be less likely to become aware of instances of non-compliance. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.

Use of our report

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

Michael Royle BA(Hons)FCA (Senior Statutory Auditor)
for and on behalf of Chadwick & Company (Manchester) Limited

Chartered Accountants
Statutory Auditors
Capital House
272 Manchester Road
Droylsden
Manchester
M43 6PW

16 December 2021

DR KERSHAW'S HOSPICE

STATEMENT OF FINANCIAL ACTIVITIES INCLUDING INCOME AND EXPENDITURE ACCOUNT

FOR THE YEAR ENDED 31 MARCH 2021

	Notes	Unrestricted funds 2021 £	Restricted funds 2021 £	Total 2021 £	Unrestricted funds 2020 £	Restricted funds 2020 £	Total 2020 £
Income and endowments from:							
Donations and legacies	**3**	1,054,907	1,332,848	2,387,755	765,162	1,434,118	2,199,280
Charitable activities	**4**	1,449,547	-	1,449,547	1,406,484	-	1,406,484
Other trading activities	**5**	413,728	-	413,728	969,162	-	969,162
Investments	**6**	33,089	-	33,089	43,028	-	43,028
Other income	**7**	89,975	-	89,975	5,743	-	5,743
Total income		3,041,246	1,332,848	4,374,094	3,189,579	1,434,118	4,623,697
Expenditure on:							
Raising funds	**8**	379,372	9,093	388,465	443,712	-	443,712
Charitable activities	**9**	2,837,100	41,765	2,878,865	2,724,748	12,037	2,736,785
Other	**13**	110,489	-	110,489	221,253	-	221,253
Total resources expended		3,326,961	50,858	3,377,819	3,389,713	12,037	3,401,750
Net gains/(losses) on investments	**14**	-	-	-	(2,087)	-	(2,087)
Net (outgoing)/ incoming resources before transfers		(285,715)	1,281,990	996,275	(202,221)	1,422,081	1,219,860
Gross transfers between funds		1,078,446	(1,078,446)	-	-	-	-
Net movement in funds		792,731	203,544	996,275	(202,221)	1,422,081	1,219,860
Fund balances at 1 April 2020		4,953,180	3,743,439	8,696,619	5,155,401	2,321,358	7,476,759
Fund balances at 31 March 2021		5,745,911	3,946,983	9,692,894	4,953,180	3,743,439	8,696,619

The statement of financial activities includes all gains and losses recognised in the year.

All income and expenditure derive from continuing activities.

The statement of financial activities also complies with the requirements for an income and expenditure account under the Companies Act 2006.

DR KERSHAW'S HOSPICE

BALANCE SHEET

AS AT 31 MARCH 2021

	Notes	2021 £	2021 £	2020 £	2020 £
Fixed assets					
Tangible assets	**15**		3,855,100		2,166,648
Investments	**16**		31,880		31,880
			3,886,980		2,198,528
Current assets					
Debtors	**17**	1,971,433		2,349,446	
Cash at bank and in hand		5,709,936		6,017,898	
		7,681,369		8,367,344	
Creditors: amounts falling due within one year	**18**	(1,875,455)		(1,869,253)	
Net current assets			5,805,914		6,498,091
Total assets less current liabilities			9,692,894		8,696,619
Income funds					
Restricted funds	**20**		3,946,983		3,743,439
Unrestricted funds					
Designated funds	**21**	3,216,165		770,985	
General unrestricted funds		2,529,746		4,182,195	
			5,745,911		4,953,180
			9,692,894		8,696,619

The financial statements were approved by the Trustees on 16 December 2021

M Lawton
Trustee

Dr P Cook
Trustee

P Wakefield
Trustee

R Damianou
Trustee

Company Registration No. 05221414

DR KERSHAW'S HOSPICE

STATEMENT OF CASH FLOWS

FOR THE YEAR ENDED 31 MARCH 2021

	Notes	2021 £	2021 £	2020 £	2020 £
Cash flows from operating activities					
Cash generated from operations	**26**		1,384,071		643,558
Investing activities					
Purchase of tangible fixed assets		(1,725,122)		(789,996)	
Investment income received		33,089		43,028	
Net cash used in investing activities			(1,692,033)		(746,968)
Net cash used in financing activities			-		-
Net decrease in cash and cash equivalents			(307,962)		(103,410)
Cash and cash equivalents at beginning of year			6,017,898		6,121,308
Cash and cash equivalents at end of year			5,709,936		6,017,898

1 Accounting policies

Charity information

Dr Kershaw's Hospice is a private company limited by guarantee incorporated in England and Wales. The registered office is Turf Lane, Royton, Oldham, Lancashire, OL2 6EU. In the event of the charity being wound up, the liability in respect of the guarantee is limited £10 per member of the charity.

1.1 Accounting convention

The financial statements have been prepared in accordance with the charity's [governing document], the Companies Act 2006 and "Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019)". The charity is a Public Benefit Entity as defined by FRS 102.

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

The financial statements have been prepared under the historical cost convention, modified to include the revaluation of freehold properties and to include investment properties and certain financial instruments at fair value. The principal accounting policies adopted are set out below.

1.2 Going concern

During the previous period, Covid-19 was designated a pandemic by the World Health Organisation (WHO). The trustees continue to review the impact on the charity, ensuring provisions are put in place to mitigate any risk to the charity's ability to operate as a going concern. At the date of signing the financial statements, in the opinion of the trustees, Covid-19 will not impact on the charity's ability to operate as a going concern. Consequently, the charity continues to adopt the going concern basis in preparing the financial statements.

1.3 Charitable funds

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. The aim and purpose of each designated fund is set out in the notes to the financial statements.

Restricted funds are donations and grants which have been specified by the donor to be solely used for particular areas of the Hospice's work.

1.4 Income

Income is recognised when the charity is legally entitled to it after any performance conditions have been met, the amounts can be measured reliably, and it is probable that income will be received.

Cash donations are recognised on receipt. Other donations are recognised once the charity has been notified of the donation, unless performance conditions require deferral of the amount. Income tax recoverable in relation to donations received under Gift Aid or deeds of covenant is recognised at the time of the donation.

Legacies are recognised on receipt or otherwise if the charity has been notified of an impending distribution, the amount is known, and receipt is expected. If the amount is not known, the legacy is treated as a contingent asset.

1 Accounting policies **(Continued)**

Grants of a capital nature are treated as deferred credits and credited through the Statement of Financial Activities over the estimated use of the relevant fixed assets.

Capital grants and other funds received towards the leasehold building refurbishment programme have been recognised in reserves are are to be amortised over the lease of the building.

Income received in advance for a future fundraising event or for other income received relating to the following year are deferred until the criteria for income recognition are met.

1.5 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. Direct expenditure on charitable activities is classified under the following headings:

- In-patient care
- Medical services
- Day-care
- Hospice at home
- Caring Hands

The charity is registered for VAT and is able to recover input VAT on the majority of its activities. The charity operates VAT under partial exemption. Irrecoverable VAT is charged as a cost against the activity for which the expenditure was incurred.

Costs of raising funds includes expenditure incurred in generating donations; arranging, organising and participation in funding events; costs of operating the charity shops.

Support costs are those functions that assist the work the charity but do not directly undertake charitable activities. Support costs include staff and overhead costs for finance, governance and general overheads.

1.6 Tangible fixed assets

Tangible fixed assets are initially measured at cost and subsequently measured at cost or valuation, net of depreciation and any impairment losses.

Depreciation is recognised so as to write off the cost or valuation of assets less their residual values over their useful lives on the following bases:

Leased building refurbishment	Over length of the lease
Fixtures and fittings	20% straight line
Motor vehicles	25% reducing balance

Assets in the course of construction are not depreciated.

The gain or loss arising on the disposal of an asset is determined as the difference between the sale proceeds and the carrying value of the asset, and is recognised in net income/(expenditure) for the year.

1.7 Fixed asset investments

Fixed asset investments are initially measured at transaction price excluding transaction costs, and are subsequently measured at fair value at each reporting date. Changes in fair value are recognised in net income/(expenditure) for the year. Transaction costs are expensed as incurred.

Shares in the trading subsidiary are carried at cost.

1 Accounting policies **(Continued)**

1.8 Impairment of fixed assets

At each reporting end date, the charity reviews the carrying amounts of its tangible assets to determine whether there is any indication that those assets have suffered an impairment loss. If any such indication exists, the recoverable amount of the asset is estimated in order to determine the extent of the impairment loss (if any).

1.9 Stocks

Goods donated to the Hospice shops are principally given as gift aid donations. When the goods are sold the value realised is communicated to the donor to confirm it is their wish that the receipt be retained by the Hospice as a gift aided donation. Accordingly, stock held has no value because the charity only has control over the value and income when the donation is confirmed by the donor.

1.10 Cash and cash equivalents

Cash and cash equivalents include cash in hand, deposits held at call with banks, other short-term liquid investments with original maturities of three months or less, and bank overdrafts. Bank overdrafts are shown within borrowings in current liabilities.

1.11 Financial instruments

The Hospice 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.

1.12 Creditors and provisions

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.

1.13 Employee benefits

The cost of any unused holiday entitlement is recognised in the period in which the employee's services are received.

Termination benefits are recognised immediately as an expense when the charity is demonstrably committed to terminate the employment of an employee or to provide termination benefits.

1.14 Retirement benefits

Payments to defined contribution retirement benefit schemes are charged as an expense as they fall due.

1.15 Leases

Rentals payable under operating leases, including any lease incentives received, are charged as an expense on a straight line basis over the term of the relevant lease.

2 Critical accounting estimates and judgements

In the application of the charity's accounting policies, the trustees are required to make judgements, estimates and assumptions about the carrying amount 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 where the revision affects only that period, or in the period of the revision and future periods where the revision affects both current and future periods.

3 Donations and legacies

	Unrestricted funds general 2021 £	**Restricted funds 2021 £**	**Total 2021 £**	Unrestricted funds general 2020 £	Restricted funds 2020 £	Total 2020 £
Donations and gifts	538,719	62,828	601,547	394,856	1,434,118	1,828,974
Legacies receivable	508,688	-	508,688	293,306	-	293,306
Grants receivable	7,500	1,270,020	1,277,520	77,000	-	77,000
	1,054,907	1,332,848	2,387,755	765,162	1,434,118	2,199,280
Donations and gifts						
General donations	309,532	-	309,532	187,632	-	187,632
In memoriam	159,367	-	159,367	133,887	-	133,887
Friends of the Hospice	25,551	-	25,551	24,621	-	24,621
Income tax recoverable	37,399	-	37,399	34,370	-	34,370
Donations building fund	-	-	-	-	1,434,118	1,434,118
Covid-19 response	-	13,465	13,465	-	-	-
Keira's Wishes	-	9,553	9,553	14,346	-	14,346
Furnished with Love	-	39,810	39,810	-	-	-
Other	6,870	-	6,870	-	-	-
	538,719	62,828	601,547	394,856	1,434,118	1,828,974
Grants receivable						
Other grants	7,500	-	7,500	-	-	-
Covid-19 response	-	29,796	29,796	-	-	-
NHS England	-	1,090,824	1,090,824	-	-	-
New IPU fund	-	149,400	149,400	77,000	-	77,000
	7,500	1,270,020	1,277,520	77,000	-	77,000

The NHSE awarded funding to allow the hospice to make available bed capacity and community support from April 2020 to July 2020 to provide support to people with complex needs in the context of the COVID-19 situation and to provide bed capacity and community support from November 2020 to March 2021 for the same purpose.

4 Charitable activities

	In-patient Care 2021	Hospice at Home 2021	Caring Hands 2021	Total 2021	In-patient Care 2020	Day-care / Well Being 2020	Hospice at Home 2020	Caring Hands 2020	Total 2020
	£	£	£	£	£	£	£	£	£
Government funding	960,154	297,116	192,277	1,449,547	926,907	23,051	288,778	167,748	1,406,484

5 Other trading activities

	Unrestricted funds general 2021 £	Unrestricted funds general 2020 £
Fundraising events	37,199	208,388
Shop income	113,860	444,342
Hospice lottery	240,000	300,000
Donated by trading company	22,669	16,432
Other trading activities	413,728	969,162

6 Investments

	Unrestricted funds general 2021 £	Unrestricted funds general 2020 £
Dividends - equities	992	1,295
Interest - fixed interest securities	31,951	41,057
Bank interest	146	676
	33,089	43,028

7 Other income

	Unrestricted funds general 2021 £	Unrestricted funds general 2020 £
Room hire	6,900	2,500
Job Retention Scheme	64,700	-
Training	18,375	3,243
	89,975	5,743

8 Raising funds

	Unrestricted funds general 2021 £	Restricted funds 2021 £	Total 2021 £	Unrestricted funds general 2020 £
Fundraising and publicity				
Staging fundraising events	6,998	9,093	16,091	42,484
Other fundraising costs	10,297	-	10,297	27,411
Staff costs	179,897	-	179,897	158,097
Fundraising and publicity	197,192	9,093	206,285	227,992
Trading costs				
Operating charity shops	77,244	-	77,244	97,446
Other trading activities	10,407	-	10,407	16,785
Staff costs	94,529	-	94,529	101,489
Trading costs	182,180	-	182,180	215,720
	379,372	9,093	388,465	443,712

9 Charitable activities

	In Patient Care 2021	Medical Services 2021	Daycare / Wellbeing 2021	Hospice at Home 2021	Caring Hands 2021	Total 2021	Total 2020
	£	£	£	£	£	£	£
Staff costs	983,666	370,580	134,045	429,210	437,487	2,354,988	2,364,312
Depreciation and impairment	-	-	-	-	-	-	21,374
Other direct costs	6,815	65	873	9,393	1,876	19,022	212,212
Medical costs	22,274	-	-	-	-	22,274	26,807
Equipment & premises	-	-	-	-	-	-	86,860
	1,012,755	370,645	134,918	438,603	439,363	2,396,284	2,711,565
Share of support costs (see note 10)	190,548	71,786	25,966	83,144	84,747	456,191	-
Share of governance costs (see note 10)	11,023	4,153	1,502	4,810	4,902	26,390	25,220
	1,214,326	446,584	162,386	526,557	529,012	2,878,865	2,736,785
Analysis by fund							
Unrestricted funds - general	1,196,881	440,012	160,009	518,945	521,253	2,837,100	2,724,748
Restricted funds	17,445	6,572	2,377	7,612	7,759	41,765	12,037
	1,214,326	446,584	162,386	526,557	529,012	2,878,865	2,736,785

9 Charitable activities **(Continued)**

For the year ended 31 March 2020

	In Patient Care £	Medical Services £	Daycare / Wellbeing £	Hospice at Home £	Caring Hands £	Premises Costs £	Support Costs £	Total 2020 £
Staff costs	831,980	306,383	43,116	244,691	244,884	168,838	524,420	2,364,312
Depreciation and impairment	-	-	-	-	-	-	21,374	21,374
Other direct costs	25,975	948	906	5,896	1,748	10,774	165,965	212,212
Medical costs	26,807	-	-	-	-	-	-	26,807
Equipment & premises	-	-	-	-	-	28,462	58,398	86,860
	884,762	307,331	44,022	250,587	246,632	208,074	770,157	2,711,565
Share of governance costs (see note 10)	-	-	-	-	-	-	25,220	25,220
	884,762	307,331	44,022	250,587	246,632	208,074	795,377	2,736,785
Analysis by fund								
Unrestricted funds - general	884,762	307,331	44,022	250,587	246,632	208,074	783,340	2,724,748
Restricted funds	-	-	-	-	-	-	12,037	12,037
	884,762	307,331	44,022	250,587	246,632	208,074	795,377	2,736,785

10 Support costs

	Support costs	Governance costs	2021	Support costs	Governance costs	2020
	£	£	£	£	£	£
Staff costs	197,487	-	197,487	-	-	-
Depreciation	36,670	-	36,670	-	-	-
Support direct costs	79,581	-	79,581	-	-	-
Support equipment & premises costs	142,453	-	142,453	-	-	-
Audit fees	-	8,500	8,500	-	9,650	9,650
Legal and professional	-	17,890	17,890	-	15,570	15,570
	456,191	26,390	482,581	-	25,220	25,220
Analysed between						
Charitable activities	456,191	26,390	482,581	-	25,220	25,220

Governance costs includes payments to the auditors of £8,500 (2020- £9,650) for audit fees.

11 Trustees

None of the trustees (or any persons connected with them) received any remuneration or benefits from the charity during the year.

12 Employees

The average monthly number of employees during the year was:

	2021 Number	2020 Number
Direct charitable services	55	58
Fundraising services	17	23
Support services	29	28
Total	101	109

Employment costs	2021 £	2020 £
Wages and salaries	2,411,359	2,289,363
Social security costs	206,200	187,142
Other pension costs	209,342	147,393
	2,826,901	2,623,898

The full time equivalent average monthly head count was 79 (2020: 82).

12 Employees **(Continued)**

The number of employees whose annual remuneration, excluding pension contributions, was £60,000 or more were:

	2021 Number	**2020 Number**
£60,001 - £70,000	1	1
£80,001 - £90,000	-	1
£90,001 - £100,000	1	-

The above salaries are in relation to Dr Kershaw's medical personnel.

13 Other

	Unrestricted funds general 2021	Unrestricted funds general 2020
Prior year irrecoverable VAT	**-**	75,000
Exceptional item - hire of portacabin	110,489	146,253
	110,489	221,253

14 Net gains/(losses) on investments

	Total 2021 £	Unrestricted funds general 2020 £
Revaluation of investments	**-**	(2,087)

15 Tangible fixed assets

	Leasehold property	Leased building refurbishment	Fixtures and fittings	Motor vehicles	Long term leasehold property	New inpatient unit project	Total
	£	£	£	£	£	£	£
Cost							
At 1 April 2020	540,693	2,644,406	201,218	32,380	70,000	1,015,285	4,503,982
Additions	-	-	93,878	-	-	1,631,244	1,725,122
At 31 March 2021	540,693	2,644,406	295,096	32,380	70,000	2,646,529	6,229,104
Depreciation and impairment							
At 1 April 2020	540,693	1,585,086	180,008	31,547	-	-	2,337,334
Depreciation charged in the year	-	12,037	24,425	208	-	-	36,670
At 31 March 2021	540,693	1,597,123	204,433	31,755	-	-	2,374,004
Carrying amount							
At 31 March 2021	-	1,047,283	90,663	625	70,000	2,646,529	3,855,100
At 31 March 2020	-	1,059,320	21,210	833	70,000	1,015,285	2,166,648

15 Tangible fixed assets **(Continued)**

Leasehold property - represents expenses incurred on the property prior to obtaining a lease on the premises. Accordingly, all expenditure in the Oldham Hospice Appeal during the years ending on 30 September 2001 was written off as incurred. From 1 October 2001 the Oldham Hospice Appeal occupied the property under a lease with the Pennine Acute Hospital Trust (formerly the Oldham NHS Trust) for a period of 25 years at a peppercorn rent, due to expire October 2025. However, as the directors wished to carry out a major rebuild, further negotiations took place during 2018 and a new lease was signed on 29 March 2018, for a further 30 years with a view to two subsequent 30-year extensions.

Leased building refurbishment - represents costs incurred on the property from 2002 onwards by The Oldham Hospice Appeal and Dr. Kershaw's Hospice towards which the hospice has received grants and other financial assistance. The net book value of this asset equates to the restricted leased building fund reserve. The costs and the reserves will be depreciated/amortised over the remaining lease period which has now been extended to ninety years following the creation of the new lease.

Long term leasehold property - is the building owned by the Hospice and used as part of the Shaw shop at 50 Market Street, Shaw. The property was revalued for the financial statements to 31 March 2017, and the directors consider this continues to be a fair value of the property at 31 March 2021.

New inpatient unit project - Planning and work has continued during the year which incorporates improvements to the grounds and car parking. No depreciation charged as yet - to be introduced upon final completion of all related works.

16 Fixed asset investments

	Unlisted investments	Other investments	Total
	£		£
Cost or valuation			
At 1 April 2020 & 31 March 2021	31,780	100	31,880
Carrying amount			
At 31 March 2021	31,780	100	31,880
At 31 March 2020	31,780	100	31,880

Other investments comprise:	Notes	2021 £	2020 £
Investments in subsidiaries	**25**	100	100

	2021 £	2020 £
Investments at fair value comprise:		
Corporate bonds - cost £25,000	30,304	30,304
Investment shares bequested	1,476	1,476
	31,780	31,780

17 Debtors

	2021	2020
Amounts falling due within one year:	**£**	**£**
Trade debtors	112,765	319,444
Amounts owed by subsidiary undertakings	58,781	35,271
Other debtors	1,389,666	1,301,828
Prepayments and accrued income	410,221	692,903
	1,971,433	2,349,446

18 Creditors: amounts falling due within one year

	2021	2020
	£	**£**
Trade creditors	223,027	442,968
Other taxation and social security	30,355	26,060
Other creditors	1,309,859	1,306,323
Accruals and deferred income	312,214	93,902
	1,875,455	1,869,253

19 Retirement benefit schemes

Defined contribution schemes

The charity operates a defined contribution pension scheme for all qualifying employees. The assets of the scheme are held separately from those of the charity in an independently administered fund.

The charge to profit or loss in respect of defined contribution schemes was £209,342 (2020 - £147,393).

20 Restricted funds

The income funds of the charity include restricted funds comprising the following unexpended balances of donations and grants held on trust for specific purposes:

	Movement in funds				Movement in funds			
	Balance at 1 April 2019	Incoming resources	Resources expended	Balance at 1 April 2020	Incoming resources	Resources expended	Transfers	Balance at 31 March 2021
	£	£	£	£	£	£	£	£
Restricted capital funds	1,317,951	768,692	(12,037)	2,074,606	-	(12,037)	1,631,243	3,693,812
Designated capital funds	1,003,407	665,426	-	1,668,833	149,399	-	(1,631,243)	186,989
Covid-19 response funds	-	-	-	-	1,134,086	(29,727)	(1,104,359)	-
Keira's Wishes	-	-	-	-	9,553	(4,876)	25,913	30,590
Furnished with Love	-	-	-	-	39,810	(4,218)	-	35,592
	2,321,358	1,434,118	(12,037)	3,743,439	1,332,848	(50,858)	(1,078,446)	3,946,983

21 Designated funds

The income funds of the charity include the following designated funds which have been set aside out of unrestricted funds by the trustees for specific purposes:

	Balance at 1 April 2019	Balance at 1 April 2020	Transfers	Balance at 31 March 2021
	£	£	£	£
Development fund	770,985	770,985	-	770,985
Capital projects fund	-	-	700,000	700,000
Business continuation funds	-	-	1,745,180	1,745,180
	770,985	770,985	2,445,180	3,216,165

22 Analysis of net assets between funds

	Unrestricted funds 2021	Restricted funds 2021	Total 2021	Unrestricted funds 2020	Restricted funds 2020	Total 2020
	£	£	£	£	£	£
Fund balances at 31 March 2021 are represented by:						
Tangible assets	161,287	3,693,813	3,855,100	92,042	2,074,606	2,166,648
Investments	31,880	-	31,880	31,880	-	31,880
Current assets/ (liabilities)	5,552,742	253,172	5,805,914	4,829,258	1,668,833	6,498,091
	5,745,909	3,946,985	9,692,894	4,953,180	3,743,439	8,696,619

23 Operating lease commitments

At the reporting end date the charity had outstanding commitments for future minimum lease payments under non-cancellable operating leases, which fall due as follows:

	2021	2020
	£	£
Within one year	20,327	45,248
Between two and five years	3,949	48,166
	24,276	93,414

24 Related party transactions

Remuneration of key management personnel

The remuneration of key management personnel, including employers NI and pension contributions is as follows.

	2021 £	2020 £
Aggregate compensation	436,379	419,814

The Hospice considers that the key management personnel comprise the Trustees and the Senior Management Team - who currently are the Chief Executive Officer, Medical Director, Director of Clinical Services, Director of Quality and Governance, Director of Finance, Director of Income Development and Marketing.

25 Subsidiaries

Details of the charity's subsidiaries at 31 March 2021 are as follows:

Name of undertaking	Registered office	Nature of business	Class of shares held	% Held
Dr Kershaw's Hospice (Trading) Limited	England & Wales	Trading company	Ordinary	100.00

The aggregate capital and reserves and the result for the year of subsidiaries excluded from consolidation was as follows:

Name of undertaking	Profit/(Loss) Transferred £	Capital and Reserves £
Dr Kershaw's Hospice (Trading) Limited	22,669	100

Unincorporated undertakings

Dr Kershaw's Hospice Lottery is related to the Hospice but is independently registered with and regulated by the Gambling Commission, with whom accounts are filed annually. The lottery exists solely to contribute surpluses to the Hospice and at 31 March 2021 had distributable reserves of £678,755 (2020: £352,712).

26	Cash generated from operations	2021 £	2020 £
	Surplus for the year	996,275	1,219,860
	Adjustments for:		
	Investment income recognised in statement of financial activities	(33,089)	(43,028)
	Fair value gains and losses on investments	-	2,087
	Depreciation and impairment of tangible fixed assets	36,670	21,374
	Movements in working capital:		
	Decrease/(increase) in debtors	378,013	(1,675,592)
	Increase in creditors	6,202	1,118,857
	Cash generated from operations	1,384,071	643,558

Dr Kershaw's Hospice would like to express its thanks and gratitude to everyone who supported and donated to the Hospice during the year. Your generosity enables the Hospice to remain open and provide free, quality, specialist care to the local community. On behalf of all our staff, patients and their families we

Thank You!





"It brings me great comfort that Dad had his wish to die at home. Thank you for the care, kindness and professionalism during the last hours of his life."

- A Patient's Family

Doctor Kershaw's Hospice

Dr Kershaw's Hospice, Turf Lane, Royton, Oldham, OL2 6EU
www.drkh.org.uk

Tel: 0161 624 2727
Email: info@drkh.org.uk

Reg. Charity No: 1105924