ST CHRISTOPHERS HOSPICE

England & Wales · Charity number 210667

Details

Other names	ST CHRISTOPHER'S HOSPICE LIMITED
Status	Registered
Legal form	Charitable company
Company number	00681880
Registered	1962-10-23
Register	View on the Charity Commission register

Contact

Address	51-59 Lawrie Park Road Sydenham London SE26 6DZ
Phone	02087684500
Email	info@stchristophers.org.uk
Website	www.stchristophers.org.uk

Activities

Objects: The objects for which the Charity is established (the "Objects") are to promote the relief of suffering (so far as such purpose is charitable) in such ways as the Trustees shall from time to time think fit, and in particular (but without prejudice to the generality of such object) by:3.1 establishing, maintaining and providing hospice care and home care services in England and Wales for the reception and care of people of who are suffering (at any age) from any chronic or terminal illness, or from any disability of disease attributable to old age, or from any other physical or mental infirmity, disability or disease;3.2 providing or assisting in or encouraging the provision of spiritual help and guidance for such people, their families and carers;3.3 providing such other care, support and assistance to the families and carers of such people as the Trustees shall from time to time think fit;3.4 conducting, promoting or encouraging research into the care of such people, particularly but not exclusively those who are suffering from cancer or terminal illness;3.5 promoting, encouraging or assisting in the teaching or training of doctors, nurses, physiotherapists and other persons engaged in health and social care, and of students in any branch of medicine, surgery, nursing, health and social care or allied services; and3.6 providing bereavement counselling services for adults and children.

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Activities: St Christopher's Hospice exists to promote and provide skilled and compassionate palliative care of the highest quality. This high quality service is delivered to over 2,000 dying individuals and their families, friends and carers every year. We share our skills and expertise with others in the field through our extensive education and training programme and research into improving care.

Classification

- **How:** Provides Human Resources, Provides Services, Provides Advocacy/advice/information, Sponsors Or Undertakes Research
- **What:** Education/training, The Advancement Of Health Or Saving Of Lives
- **Who:** Children/young People, Elderly/old People, People With Disabilities

Geography

- **Area of benefit:** ENGLAND AND WALES
- Bromley
- Croydon
- Lambeth
- Lewisham
- Southwark

Finances

Period end	Income	Expenditure	Assets	Employees
2025-03-31	£29,419,000	£31,514,000	£44,533,000	500
2024-03-31	£27,541,000	£28,528,000	£46,755,000	475
2023-03-31	£27,229,000	£25,320,000	£45,538,480	486
2022-03-31	£29,487,000	£22,552,000	£44,568,686	348
2021-03-31	£27,337,000	£22,867,000	£37,387,000	376

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Trustees

Name	Role	Appointed
NEIL GOULDEN	Chair	2021-02-22
Ann Kenrick		2025-04-01
Anthony John Hunter		2020-11-12
David Lockyer		2024-11-01
Deepti Townsend		2020-11-12
Glenda Bonde		2023-07-01
John Andrew King		2020-11-12
Nicholas Diamond		2020-11-12
PROF DANIEL KELLY		2018-09-27
Philippa Martinelli		2025-04-01
Professor Ian Judson		2017-04-06
Rhoda Iranloye		2025-04-01
Satvinder Reyatt		2023-07-01
Simon Hall		2025-04-01

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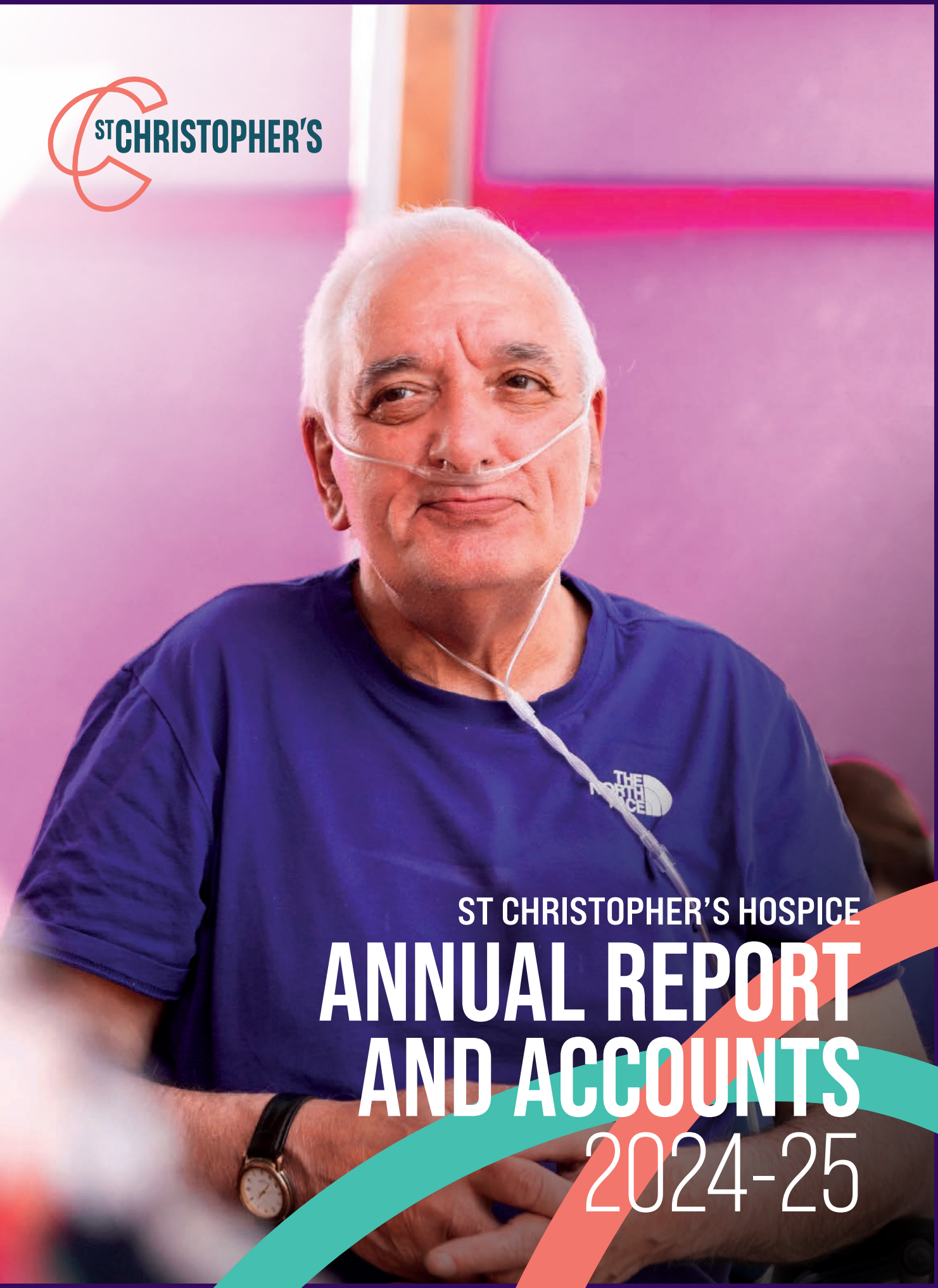
ST CHRISTOPHERS HOSPICE

England & Wales - Charity number 210667

Accounts

ST CHRISTOPHER'S



ST CHRISTOPHER'S HOSPICE

ANNUAL REPORT AND ACCOUNTS 2024-25

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"You matter because you are you and you matter until the last moment of your life"

DAME CICELY SAUNDERS Founder of St Christopher's and the modern hospice movement

ABOUT ST CHRISTOPHER'S

Caroline, one of over 1,200 amazing volunteers

At St Christopher's Hospice (referred to as 'St Christopher's' in this document), we have a vision of a world in which all dying people, and those close to them, have access to care and support, whenever and wherever they need it.

St Christopher's believes that people matter. Every person who comes into contact with the hospice, whatever their background or circumstance, will receive the care and support they need. After all, each person is unique.

For some, that may mean being cared for in their own home, surrounded by family and things that are important to them. For others, it may mean being able to talk openly about their illness with people who are going through a similar experience. It may even be as simple as being able to listen to their favourite music whilst eating breakfast during a stay at the hospice.

Whatever the wish, we do our best to make it happen. That's because we aim to help people live well until they die and support those affected by the death of someone close.

Operating from two locations, one in Sydenham and one in Orpington, our efforts are focused on meeting the goals of people with a life-shortening condition and supporting their families and carers wherever we can. Our reach spans across a diverse population of approximately 1.6 million people within the five London boroughs of Bromley, Croydon, Lambeth, Lewisham and Southwark.

Last year, we provided care and support for 6,864 people across our five boroughs. In this report you'll hear some of those people's stories and what we did to help them through these challenging times.

We also offer more than you might expect – below you will see examples of the different professionals who provide care and support for people in our community, to give you a flavour of the breadth of support available.

WELCOME TO THE REPORT

Welcome to the Annual Report and Accounts of St Christopher's Hospice for 2024-25.

In total, last year, we provided end of life care and support to 6,864 patients, families and carers, which is an increase of 6% on the year before.

While we're proud of the number of people we care for and support, one of our five strategic ambitions is **tackling inequalities**. In practice, that means working tirelessly and effectively to remove the barriers that are preventing people from accessing care.

I am delighted to report that, as we enter the final year of our three-year strategy, that we are making good progress in pursuit of this ambition. The establishment of our Inequalities Committee has seen us identify and deliver this work through the lens of three priority groups – those from global majority populations, resource poor populations and older people at risk of poor dying experiences, while recognising that our local population varies from borough to borough and within each borough.

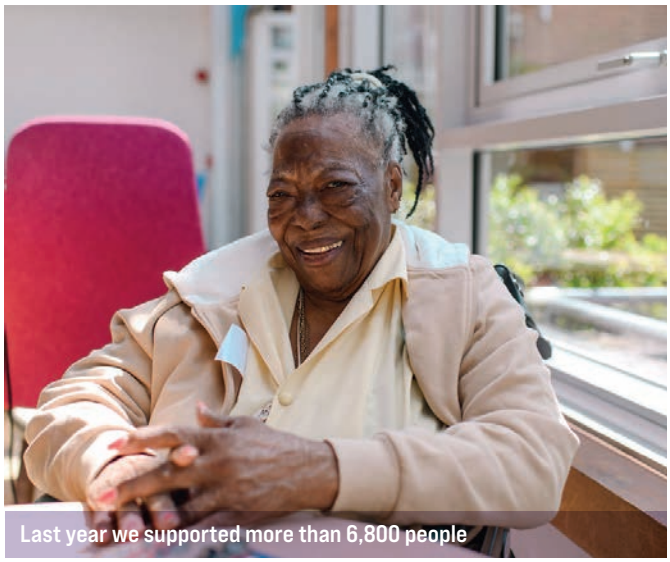
You can read more about our work in tackling inequalities on pages 9 to 14.

Public debate of the precarious state of hospice funding and the passage of Terminally Ill Adults (Assisted Dying) Bill through the House of Commons have placed end of life care under the media spotlight over the last year.

I am pleased to say that, in pursuit of another one of our five strategic ambitions – to **tackle ethical issues** – we have not shied away from the debate. On the contrary, we submitted evidence and recommendations for the Terminally Ill Adults (Assisted Dying) Bill at the Committee stage. In addition to this, we also submitted evidence to the recently established Palliative and End of Life Care Commission and to the NHS for their 10-year plan and received more than 900 pieces of high-profile media coverage in the process. We also shared a briefing paper with MPs summarising the main themes and findings of 50 conversations we conducted with members of our local community about their views on assisted dying.

With only 34% of our own funding coming from the NHS in 2024-25, and growing patient need, we continue to rely on our community for us to **create a sustainable business model**. £17.7m (60%) of our income in 2024-25 came from people in our community through a combination of our charity shops, fundraising activities or gifts to us in Wills.

We were pleased therefore that, on 19 December, Health Secretary Wes Streeting announced £100m of much needed funding for adult hospices. However, a long-term funding solution is needed for the hospice sector, and we continue to work with Hospice UK on this.



Last year we supported more than 6,800 people

At the heart of another of our strategic ambitions, **equipping the future workforce**, is ensuring we reflect the communities we serve. One highlight was receiving the Investors in Diversity Silver accreditation from the National Centre for Diversity in late 2024. This was a significant achievement and we now aim to achieve gold.

It is also important to us that we provide learning opportunities for both our own workforce and the wider sector. This report highlights a number of programmes (mainly delivered by St Christopher's Centre for Awareness and Response to End of life (CARE)) where we are helping to upskill the sector both nationally and internationally, as part of our ambition to **fulfil a national and global leadership role**.

This year, we also began refurbishing our wards, a significant capital project, to enhance the experience for those staying with us. We look forward to completing the project in 2025-26 and welcoming people to our new wards.

Finally, I'd like to take this opportunity to thank everyone – staff, volunteers, trustees and supporters – for helping us achieve everything you'll read about in this report and for committing to be a part of our ongoing commitment to remove barriers to accessing quality end of life care. We could not have done it without you.

JAN NOBLE
Director of Quality and Innovation
Interim Chief Executive (October 2024 to June 2025)

OUR **VISION, VALUES** AND **AMBITIONS**

OUR VISION

A world in which all dying people and those close to them have access to equitable care and support when and wherever they need it.

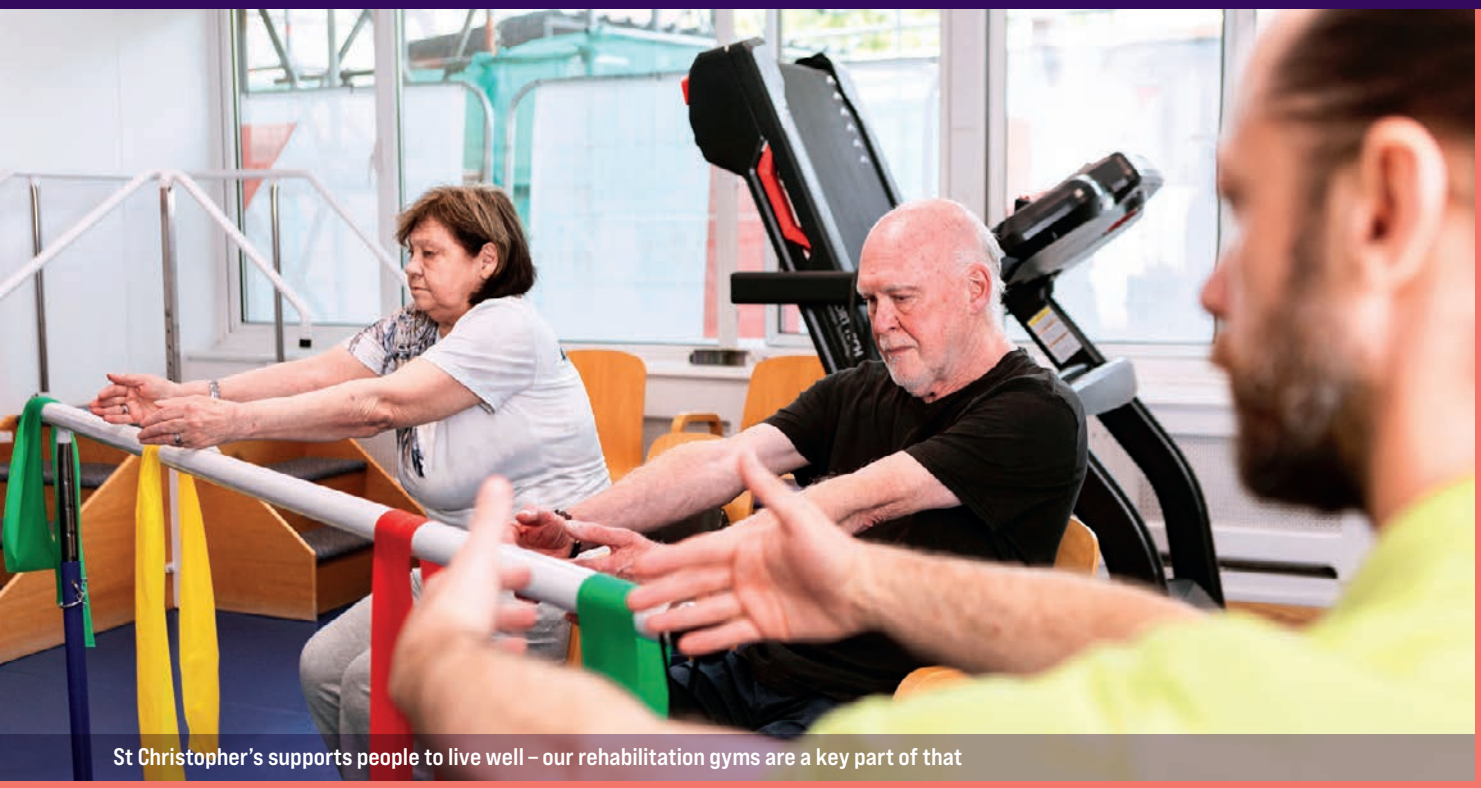
OUR VALUES

- Pioneering and bold
- Of and for the community
- Empowering and compassionate
- One team working together
- Expert
- Stronger through partnerships

OUR STRATEGIC AMBITIONS

- Tackle inequalities
- Equip the future workforce
- Fulfil a national and global leadership role
- Create a sustainable business model
- Tackle ethical issues

We launched our new strategic ambitions in 2023. Throughout this report you'll read about our progress against these ambitions in 2024-25, this being the second year of our three-year strategy.



St Christopher's supports people to live well – our rehabilitation gyms are a key part of that

OUR YEAR IN SUMMARY
2024-25

We provided care and support for 6,864 people

We provided care and support for 4,776 patients

We supported 364 children through our Candle bereavement service

We supported 760 people with in-person or face-to-face adult bereavement sessions

We supported 1,724 carers

We had 664 inpatient admissions

We carried out 25,459 home visits

We provided 8,729 outpatient appointments

CARE reached 76 countries worldwide

98% of learners would recommend the learning to their colleagues

More than 6,000 professionals attended CARE events

We provided over 220 learning events

697 people attended seven CARE conferences

Through our learners we reached more than 40% of UK hospices – 87 in total

We delivered 960 outreach programmes including peer groups, compassionate chats and workshops in the community, resulting in over 8,000 attendances

24,315 supporters donated money to us

1,960 walkers took part in our 2024 Fun Walk and raised more than £200,000

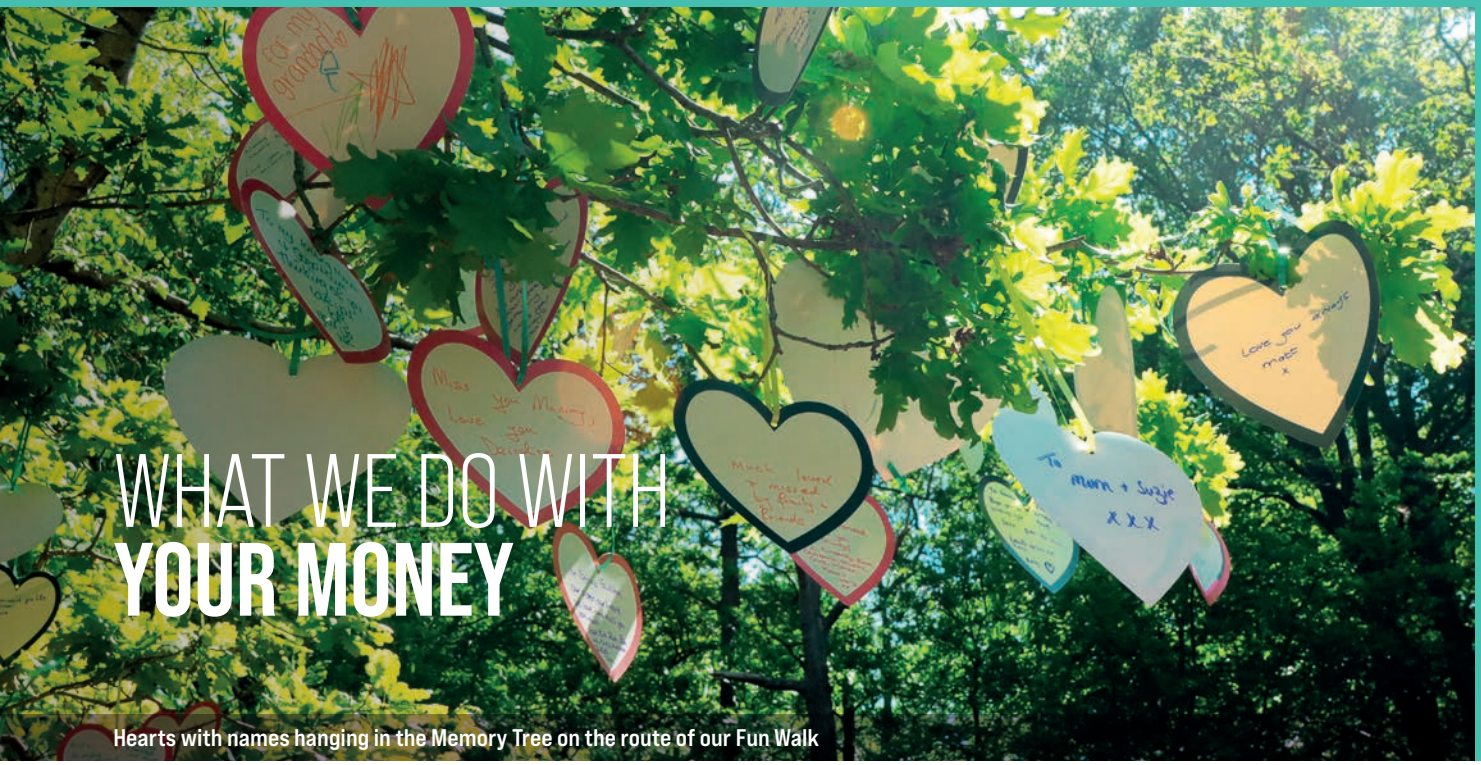
640,000 customers supported us in our shops

1.4 million items were sold in our shops

1,225 volunteers supported us, of which 43% had done so for more than three years

The cost to run all St Christopher's services was £25m

We need to raise over £19.4m every single year to provide our services



WHAT WE DO WITH **YOUR MONEY**

Hearts with names hanging in the Memory Tree on the route of our Fun Walk

It is thanks to the incredible generosity of our supporters that we are here. Your kindness means we are able to provide care and support for people in south east London and beyond when they need us most.

WHERE OUR MONEY COMES FROM

An incredible £17.7m (60%) of our income is from people in our community, donated through fundraising activities, leaving gifts in Wills or buying pre-loved items in our shops. We are so very grateful for the money you donate, and we are careful to spend and invest it wisely in ways that will best serve the people who need our support.

We are also very thankful for the money we have received from the NHS, which comprised £10.0m (34%) of our total income.

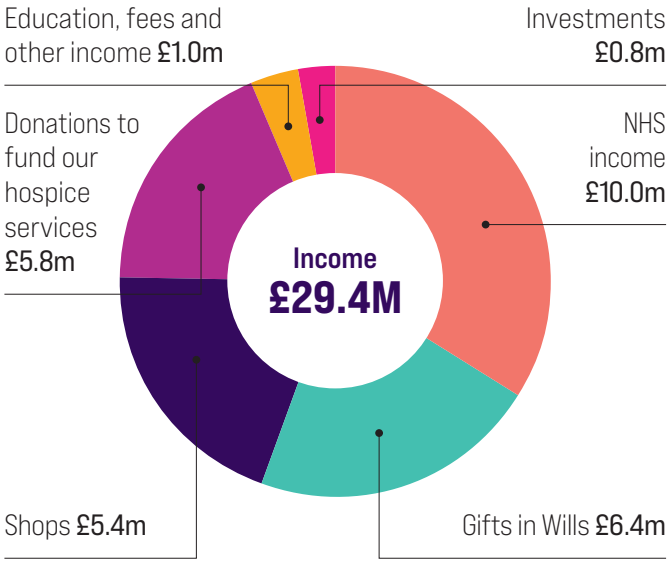
Our remaining income comprised £1.7m (6%) that we generated from education, fees and investments, and other income.

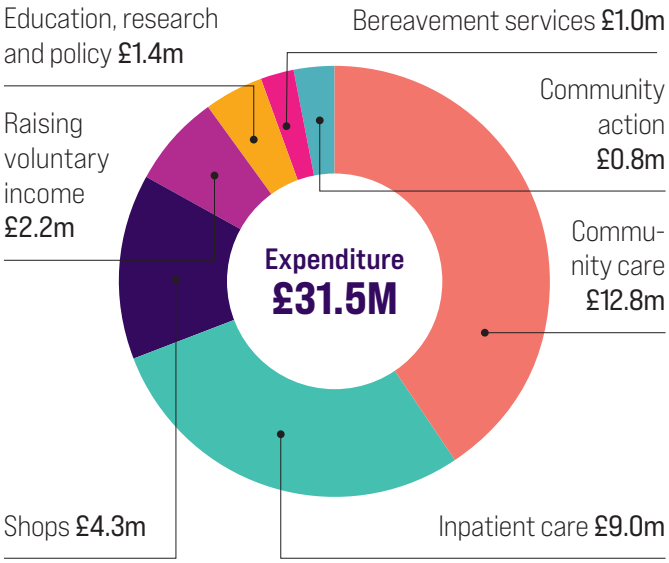
The total income of £29.4m raised this year enabled us to continue providing care to people who live in the boroughs we serve – Bromley, Croydon, Lewisham, Lambeth and Southwark – as well as shaping care for people across the globe through education, research and innovation.

WHERE OUR MONEY GOES

It cost £31.5m to run St Christopher's in 2024-25. Here's a breakdown of how we spent the money you gave us.

Our full financial review starts on page 34.





WHAT PEOPLE SAY ABOUT US

At St Christopher's, we're committed to continually improving and developing the support and services we offer, ensuring they meet the changing and diverse needs of the communities we serve.

To make sure we're doing this effectively, we regularly measure and report on the impact we have, both to the health and wellbeing of people receiving our support and their experience of our care.

In 2024-25, we also received 986 compliments from patients, carers or other family members who received support from our services, compared with 845 in 2023-24.

Overall, people were satisfied with the care and support received from St Christopher's, with 94% of people sharing they were extremely likely or likely to recommend us.

"As individuals and as a team you were brilliant. Made unbearable, bearable. Don't know how we would have coped without you."

"Everybody was so helpful, friendly and supportive at the time of my husband's death. Lovely place. Peaceful, private and such lovely caring staff."

"My brother has learning difficulties and the team at St Christopher's went above and beyond. There is help and support whenever needed, whether you are the patient or relative."

"St Christopher's team supported my husband in the later stages of dementia. Allowed him to be cared for at home right to his death."

"Thank you so much, I would love it, my biggest problem is loneliness so I'd not only love it, I need it. That is like medicine to me." Community Action after a compassionate neighbour match

Lauren, one of our physiotherapists in the Rehabilitation team

PROGRESS AGAINST OUR AMBITIONS

In 2023 we set out a new strategy based around five key ambitions. We're continuing to make good progress in pursuit of all of them. The next few pages of the report capture some of the positive steps we've taken over the last year, illustrated by people with lived experience of the hospice.

≠ Tackle inequalities

SUPPORT FOR PATIENTS, FAMILIES AND CARERS

At St Christopher's, we support people in their own homes as well as in our hospice, and engage with people to understand what matters most to them so that we can help them live well until they die.

In 2024-25, we cared for 6,864 patients. On our wards, 664 people stayed with us, which represents a small increase on the number of people who stayed with us in 2023-24. The vast majority of people we cared for were in their own homes. We completed 25,459 home visits and our teams also carried out 8,729 outpatient appointments. The number of home visits, which continues to grow year-on-year, represents the fully holistic care and support we provide, and the depth and breadth of support we offer across our boroughs.

Danni and Andy's story

When water-lover Danni Mason suggested going for a swim in a lake after being admitted to St Christopher's inpatient unit, she was not sure it would be possible.

But after an almighty effort by different teams across the hospice, as well as support from Beckenham Place Park Lake, Danni, 45, and husband Andy Ratcliffe, 44, were able to take a dip in the water. The couple, from Sydenham, were regular swimmers at Beckenham and were amazed the team could pull it off.

"It's a treasured place for us," Andy said. "We have so many memories from there, Christmas and New Year's Day swims, five-minute dips in February. It was such a profound experience, it was pure joy."

"There aren't enough superlatives to describe how amazing it was," Danni said.

"Water is Danni's happy place," added Andy. "Water and nature, just floating, and so the team here were absolutely incredible. Until it happened, I don't think we had any expectation that it would actually be possible."

Danni and Andy were joined in the water by Katie Grace, Clinical Team Lead, and Helena Talbot-Rice, Rehabilitation and Wellbeing Consultant Lead, while Specialised Physiotherapist Simone Clark and Ward Manager Emily Alcock were on the sidelines on standby.

The couple were so grateful for the dip that they ordered a custom-made cake for the team at St Christopher's. The cake read "I can't feel my feet, hands or face, but I f***** love this."**

"Thank you to absolutely everyone from St Christopher's who helped to get me to the lake on Tuesday. It was literally a dream come true," Danni said.

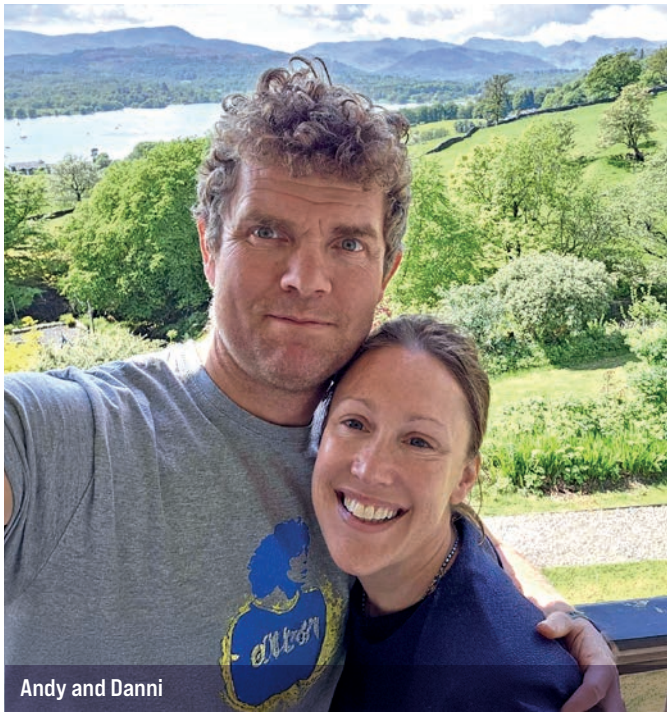
Danni's ambition to swim in the lake was in response to a question we ask all our patients – "What matters to you?"

"It's so different to hospital," Andy said. "It's such a calm place. After the swim, Danni had a shower and then was given a massage, it was like a spa day!"

"The team are taking care of me too," he added. "I've had a massage too."

Before the swim, Andy had been taking Danni down to the garden in the hospice and putting her feet in the stream to get her as close to water and nature as possible.

Helena Talbot-Rice said: "We were so delighted to be able to support Danni and Andy to do what mattered most to them. We couldn't have done it without the amazing team at Beckenham Place Park Lake who opened up especially for us. This is why asking 'What matters to you?' is so important – it improves outcomes for patients and those closest to them."



Andy and Danni

The BRIT School continues to be an important source of joy

STRENGTHENING STRATEGIC ACTION

To help formalise the positive work the hospice has done in recent years to break down inequalities, and to make sure we do much more, we established an Inequalities Committee in 2024-25, with representation from across the hospice, as part of our ongoing organisational commitment to tackle inequalities.

To launch the work of the Inequalities Committee we carried out a data review to help us understand the gaps in provision and where and on whom we should focus our work to improve access to and knowledge about our services.

The review identified under-representation in specific population groups that we need to address and where we need to support local people who are most at risk of health inequalities at the end of life. We are prioritising three population groups: global majority populations, resource-poor populations and older people at risk of poor dying experiences.

UNDERSTANDING OUR WORK AND ITS IMPACT

We also conducted a review of the hospice's existing initiatives to tackle inequalities.

By March 2025, we had a directory of 34 active projects incorporating: 12 that involved global majority communities, incorporating staff training and improving representation; nine that supported people with limited economic resources, such as targeted outreach and bereavement services; and five that aimed to improve care for older adults, including research and care home support.

The directory is being updated quarterly to inform planning and measure progress.

UNDERSTANDING LOCAL POPULATION NEEDS AND WANTS

The Community Action team at St Christopher's works with local charities, schools, faith groups and members of the public to support people living with inequalities to improve experiences of end of life.

In the past year the team has worked with people sitting within each priority area, including: refugees and asylum seekers; people seeking support with housing and homelessness; people with learning disabilities; and people within global majority groups.

The team has also led the development of a new Lived Experience Strategy, which will enhance our ability to work with people who have experience of end of life matters and our service provision to help shape and develop the work we do.

Importantly, the work of the team allows us to collaborate with local people and groups to explore what local people need and want. It also maximises its impact in our local area by training and supporting local groups to address non-medical needs.

Jaheem and Sam's story

A year after his first bereavement therapy session at St Christopher's and 18 months since the sudden death of his baby sister, Jahniyah, Jaheem Pascal and his mother Sam Rodney credit his bereavement worker for his emotional wellbeing.

From the little boy who at the first session said he didn't want to talk about his sister, to the apparently confident seven-year-old at ease addressing the emotions of this most sensitive subject, it is quite a transformation. Jaheem is clear that the Candle Bereavement programme of five 50-minute sessions, plus three additional check-in meetings with Karen Chapman, made a huge difference.

"When I first knew I was coming to talk about Jahniyah, I felt a bit nervous because I felt Jahniyah dying was like a secret," he recalls. "But it isn't any more. I just love being with Karen. She is very good – a thousand out of 10! It feels like I should be here because it's a nice place and it always helps me. I like being here because it has all the right things I need."

Jaheem demonstrated his comfort speaking about Jahniyah, saying: "I loved my sister. She was always by my side, always followed me and always wanted to come where I was going. She was just so cute."

Mum, Sam, is equally grateful for the St Christopher's Candle service. "Coming here was very refreshing," she adds. "It was what we needed. I felt they were here for him and he knew it was his time to be vulnerable to be himself, to go off with Karen to have his session in private, in a safe space, knowing Mummy was just downstairs.

"I think what's been amazing is Candle has been in our life through the process of losing his only sister and then the emotions of Mummy being pregnant again. It's been an amazing support he's had through the different parts of his journey."

Sam proudly describes how Jaheem is often the one to mention his little sister: "I think it's really important they live on in our lives because you can't just push those feelings and emotions to the side. You can't pretend that little person didn't wear those shoes that are still by the door.

"It's a way for us to keep her alive in our hearts and Jaheem does that so well in our family. We'll be doing something, and he'll say, 'Jahniyah would do such and such'. He does such a good job of keeping her alive in our family. I love it. He looks after me and he's a special boy who is able to share his experience."

Jaheem and Sam

Sasha, our new hospice doulla

CROYDON DEATH DOULA PROJECT

In September 2024, St Christopher's started a pilot death doula programme in Croydon. We recruited a specialist death doula to support people living in the borough who are reaching the end of life to help reduce some of the existing health inequalities and to link up the clinical and emotional support they receive. We have since started work with our Volunteering team to enhance our offer using volunteers who are retired palliative care nurses. Through this new service we have provided care and support to 59 people.

CROYDON DEATH LITERACY NETWORK

We've continued to deliver free community training and workshops on grief, loss and end-of-life conversations to members of the public in Croydon, as well as community groups working with people who are disadvantaged. This network has deepened public confidence in discussing experiences and matters related to the end of life and improved local understanding of available support.

PEER SUPPORT GROUPS

We have established peer support groups for people experiencing end of life, including carers and people who are bereaved, through Coach4Care and Bereavement Help Points. These groups offer a way for people to explore their feelings and experiences with others who have a similar experience, and often help them normalise their perspectives and find strategies for dealing with them.

We have been able to deliver 960 outreach programmes which have resulted in more than 8,000 attendances. We have also delivered more than 200 hours of training for volunteers, students, carers, charity staff, community organisations and faith groups.

CROYDON HEART FAILURE PROJECT

In the context of heart failure, the role of palliative care can be and often is misunderstood by patients, carers and healthcare professionals. This leads to an increased risk for people living with heart failure to have unmanaged high symptom burden, over medicalised and less supportive care, and a higher risk of dying in hospital.

We've run a successful collaborative research project with Croydon and Bromley teams to improve care pathways for patients with heart failure.

Over one year we supported 185 people and 76% of them died where they wanted to. Other outcomes included reduced hospital admissions, better symptom management, and a new outpatient model shaped by patient feedback.

CONNECTIONS FRAILTY PROJECT

Care homes are a space where increasing numbers of older people are living and dying with frailty, but the need for palliative care is under-recognised and under-researched in this setting.

Art therapy is one of the services offered by the Psychological and Spiritual Care team

In 2024-25, we teamed up with Age UK and key Integrated Care Board representatives to deliver targeted support to frail older adults living in six of the care homes in one of our boroughs which broadly did not specialise in offering dementia care, focusing on developing a better understanding of their palliative needs.

More than 70 residents participated and among the key insights were that the residents were keen to engage in discussions about 'What Matters Most', and few had received bereavement support. Also, care home staff had little opportunity to engage in training. It was also apparent that these older people wanted to discuss their end of life wishes but were not often provided with the opportunity to do so. We used these insights to inform our developing frailty strategy and shared the findings nationally via a report to the Hospice UK conference in November 2024.

WORK WITH BRIXTON PRISON

In January 2025, we began work with Brixton Prison to understand their offer to prisoners who may be approaching the end of life. Working closely with the prison healthcare provider, the St Christopher's nurse has identified some objectives of this project to improve end of life care in prisons, including the creation of a palliative care pathway, the introduction of bereavement support and supporting staff training for both the care provider and prison staff.

LEARNING DISABILITIES

With one in 50 people in the UK living with a learning disability, many of whom will have end of life and palliative care needs, St Christopher's became the first hospice to appoint a Clinical Nurse Specialist (Learning Disabilities) in February 2023. In the two years since Phoebe Mooney was appointed to the role, she has, working closely with colleagues in the hospice and professionals in the community, increased the number of people we care for with a learning disability from 30 to 80 a year. In October 2025, the hospice is hosting its first-ever conference addressing this issue: Advancing Palliative Care for Individuals with Learning Disabilities.

Valerie and Tim's story

Valerie, 82, cared for Tim, 47, who had learning difficulties, all his life. Her total trust and confidence in St Christopher's weren't derived from long stays or frequent visits to the Sydenham site. Rather, they flowed from a total belief in the expertise and understanding of the nurses and a very real sense that, even if she and Tim didn't access their help all the time, it was there when they did need it.

Phoebe, Tim and Harriet

"We had such good feelings about St Christopher's even though we didn't go there much. We knew it was there any time and when you know you have support there when you need it, it enables you to carry on. I didn't value them by how many times I contacted them, but by being there and being so good."

A big factor in Valerie and Tim's sense of wellbeing and ease with the care and support they received from St Christopher's came from the expert care provided by Clinical Nurse Specialist (Learning Disabilities) Phoebe Mooney.

Since her first visit to see Tim and Valerie in August 2023, patient, carer and nurse developed a very strong bond, Valerie says."The nurses we had before were amazing, but with Phoebe being a learning disability nurse it meant I didn't have to explain anything. She understood why he wouldn't open his eyes for several minutes for example and was happy to use a stethoscope to check his breathing every visit because Tim thought that's what nurses should do. And after all those years of explaining, it was great having someone who just got it.

"He always loved talking to people, but Phoebe and Tim were so close. I just totally trusted her on everything and from my point of view I think she understood what it's like being the parent of someone with a learning disability and that was very important to me. I just couldn't imagine her not being there really because I trusted her completely."

HOSPITAL AT HOME

To further extend access to our care and support, the last year has witnessed the growth of our Hospital at Home programme – formerly known as Virtual Wards. It provides intensive care over a 10 day period with the aim of avoiding unnecessary and wanted hospital admissions. The initiatives in Bromley, and Lambeth and Southwark continued to develop in 2024-25 and saw senior St Christopher's nurses work closely with a local GP to contact patients either in-person or via phone for up to seven days. Lambeth and Southwark Hospital at Home had a steady increase from none to 10 beds from May 2024 to November 2024 as we staffed and grew the offer. We are now offering the full 10 beds each weekday. Meanwhile, in Bromley we are commissioned to provide five beds and respond to varying numbers of referrals.

Equip the future workforce

St Christopher's Centre for Awareness and Response to End of life (CARE) is our state-of-the-art community and learning centre. Through professional learning and community training we aim to support people to explore living with dying and bereavement.

Over the course of 2024–25, St Christopher's CARE has provided more than 220 learning events for the local, national and global workforce to enhance their knowledge of palliative and end of life care. Over 6,000 professionals attended events which included conferences, skills workshops, formal courses, peer-led communities of learning, webinars, talks and demonstrations.

INNOVATING TO MAKE LEARNING MORE ACCESSIBLE

One of the standout recent successes has been the introduction of on-demand modules, which enable learners to study independently online. Since October 2024, four on-demand palliative care modules have attracted over 360 sign-ups. Other online developments include the move to hybrid conferences which has enabled a much wider reach and access for attendees. In 2024-25, virtual attendees for events such as our Heart Failure, Future of Ageing and MND conferences all exceeded the numbers of in-person tickets sold. This, in turn, increased revenue, helping St Christopher's to continue to support more people.

Another notable addition has been the virtual reality scenarios in the Meaningful Conversations course to support ongoing practice in handling challenging discussions. Through the power of generative AI, we have been able to use virtual humans to simulate real-world scenarios. This allows learners to practice at their own pace, receive personalised feedback, and build their skills over time, without the risks and ethical concerns associated with holding conversations with real patients or clients.

SUPPORTIVE LEARNING FROM QUALIFICATION ONWARDS

Early-career nurses often feel unprepared for the emotional and clinical complexities of end of life care. In response, St Christopher's and The Community Hospice, in partnership with the South East London Integrated Care Board, co-developed a 10-month, evidence-informed programme through the Hospice Education and Learning Partnership (HELP) – the Nurse Development Programme. Designed for Band 5 and 6 nurses across diverse care settings, the programme aims to build essential palliative care knowledge, confidence and resilience.

The programme includes structured learning days, clinical placements, group coaching and reflective practice. Co-designed with local leaders, it reflects real-world service needs and supports long-term career development. The programme welcomed 30 participants and received an impressive 60 applications during 2024-25, highlighting the strong demand for this much-needed initiative.

Early feedback has been overwhelmingly positive, with participants describing the experience as 'eye-opening' and 'transformative'.

This initiative directly supports the ambition of equipping the future workforce by investing in early-career professionals, strengthening their capabilities, and fostering a sustainable, skilled palliative care workforce. It offers a scalable model for workforce development that can be adapted across regions and specialisms.

DEVISE AND IMPLEMENT A PEOPLE STRATEGY TO SUPPORT STAFF AND VOLUNTEERS

We were delighted to achieve Investors in Diversity Silver accreditation from the National Centre for Diversity in late 2024. Our work for this award commenced in 2022, with St Christopher's undertaking an initial staff survey to provide baseline data and develop an action plan. This plan, supported by the St Christopher's FREDIE (Fairness, Respect, Equality, Diversity, Inclusion and Engagement) Group, focused on the accreditation standards relating to culture, strategy, wellbeing, recruitment, reward, performance management and communications.

Whilst receiving the accreditation was a significant achievement for St Christopher's, it is a waypoint on our

The children's play area in our Garden Café at Sydenham

journey as we strive to have an inclusive and diverse workforce that reflects the communities we serve. The assessment also highlighted additional actions that we can take to improve even further, and these are being taken forward across the organisation.

The year also saw St Christopher's ask staff for their views via our biennial engagement survey. It was conducted by Birdsong Charity Consulting on behalf of Hospice UK and provides us with vital information and insight from our employees about their experience with us, their roles and our workplace. It was therefore pleasing to see results improving across most of the key indicators of the survey.

Developing our people is important

The overall engagement score at St Christopher's increased from 2022 to 2024, and nine out of 10 employees were proud to work for us. There was also an improvement in staff morale and the belief that the leadership team were committed to making St Christopher's a great place to work. Notwithstanding this, both this survey and that from Investors In Diversity highlighted areas that can be improved upon and the Executive Team are committed to doing so. This commitment to improvement is underscored by our People Strategy, with a sustained and engaged workforce one of five key outcomes included.

We also sought to improve our sickness absence rates and the support we provide for the management of sickness across the organisation. Overall rates of sickness amongst our staff improved through 2024-25, and we launched a winter wellbeing drive at the start of 2025. This eight-week initiative encouraged staff to focus on their health and wellbeing and included activities such as yoga and Pilates, a team step count competition, financial webinars, wellbeing and resilience workshops, and a number of curated videos and resources on self-care.

Having introduced a new online learning platform in 2023, MyLearning, the benefits of both improved and more engaging content, allied to improved reporting, saw mandatory training levels at our target level of 90% across much of the year. We also introduced new learning for staff around sustainability to support our ambitions to reduce our environmental impact.

Beth

Beth's story

It was a desire to work more closely with individuals and their families that drew Beth Kwesiga to the job at St Christopher's, after a number of years working as a social worker in Accident and Emergency and hospital discharge. Five years on, and Beth definitely has no regrets.

She adds: "I work here out of passion. Social worker jobs in palliative care are few and far between and I really love my job. Often, it's very hard for people to know what to ask for because they don't know what's on offer. So, we need to spell out the options and then establish what they want to achieve and look at the best ways we can help them to do that. Knowing that person has died having achieved their goal is what success feels like to me."

A recent case illustrates the challenging and emotional nature of Beth's work. She spent a year supporting a young woman of 27 and as she approached the end of life, she asked Beth for help making a video for her mother. Beth sat in as the St Christopher's media team filmed the woman recording her message to her mother, before Beth later sat watching it through with her and picking the bits to edit. It was then that the really challenging part came.

"When I asked when she'd like me to give the film to her mother, she told me that, having worked with her for a year, I'd know when the time was right! Her mother had said all along she didn't want anything like this, and sure enough when I phoned her a few weeks after the funeral, she repeated that. When I said that it was what her daughter really wanted, she started to relax and understand. I know that for me I've supported the daughter to do something that was important to her."

It's these kinds of challenges that motivate Beth to come into work every day. "There are always cases that stick with you. Some weekends, if I'm working with someone with whom I've built a relationship and they're approaching the final stages of life, then there's nothing that will take my mind off it."

That certainly doesn't dim Beth's passion for her work though and feedback from patients and families always helps too. "We receive some lovely cards and letters and that really helps to make you feel like you've made a difference and gives validation for what you do."

SUPPORTING OUR VALUED VOLUNTEERS

In 2024–25, volunteers have remained at the heart of our organisation, generously giving their time, energy and expertise to help us achieve our goals. With over 1,200 volunteers contributing around 258,752 hours across the hospice this year, their dedication has made a real and lasting difference to those we care for. Whether it's offering a listening ear, a warm cup of tea, helping at events or sorting donations in our shops – this vital support does not go unnoticed.

This year we've expanded our volunteer training programme to help ensure each volunteer feels supported and valued in their role. We've also recently refreshed the structure and purpose of our Volunteer Voices group to better support the volunteering experience at St Christopher's and align with our organisational strategy. The group is now run by volunteers, with a newly elected Chair and Vice Chair, meaning that the group now has greater autonomy and representation, meeting regularly to discuss key issues. We're also actively recruiting new members to ensure all volunteer roles and communities are represented.

We are deeply grateful for the continued dedication of our volunteers and thank them sincerely for all their support throughout the year.

Lesley's story

Turn the clock back a couple of years, and volunteering in the garden at St Christopher's in Sydenham is probably the last thing Lesley Morris would imagine she'd have been doing, mostly because she's always hated gardening.

That was before the deputy head teacher's husband, Trevor, died of leukaemia. "When I lost my husband,

Lesley

it changed everything about me and about our life, everything that holds life together," Lesley says.

Over the months that Trevor spent under the care of St Christopher's, Lesley says they both developed an enormous connection with the hospice.

"They just came into our lives like a wonderful group of guardian angels. They helped us apply for a Blue Badge for the car, for the benefits we were entitled to and while all around us felt like turmoil they were always so kind and calm."

After Trevor's death, Lesley attended a couple of bereavement group sessions at St Christopher's and the bereavement coordinator suggested she might like to volunteer. "She said they were looking for people to help in the garden. It was still such an important place for me and I wanted to keep that thread of connection with St Christopher's. While I do find gardening a chore, I also love being outside, so I said yes.

"Fourteen months later I love it. I love being part of the group and love being in the gardens. Everyone has a story to tell and a reason for being there and understands that everyone else is the same, but no one ever actually says, 'Why are you here?'.

"It's so nice to do something physical outside. You can't ignore the cycle of life when you're in nature. By giving me the opportunity to volunteer in its garden, St Christopher's is continuing to support me on my bereavement journey while also enabling me to feel that close connection with Trevor."

Volunteers, like Judith, provide a warm welcome at St Christopher's

Events, like our annual MND Conference, create space for professional learning and networking

Fulfil a national and global leadership role

CO-CREATING LEARNING GLOBALLY AND LOCALLY

St Christopher's Professional Learning offer continues to advance national and global leadership in palliative care through a range of impactful initiatives.

This includes a new Pathfinders Programme to develop the hospice leaders of the future. It also includes Beacons of CARE, which we launched in October 2024 with support from Women in Fellowship.

The Beacons of CARE initiative empowers palliative care leaders in their home countries to co-develop education programmes with St Christopher's. As of March 2025, six Beacons have been established, in Bangladesh, Brazil, France, Hong Kong, Mexico and Abu Dhabi.

As part of the Global Fellowship in Palliative Care, Professor Heather Richardson MBE led international site visits to Bangladesh and Kerala. In addition, St Christopher's Professional Learning team delivered online dementia training for Gibraltar Health Authority in April and May 2024 to strengthen knowledge of dementia care provision.

More locally, we commissioned Do Not Attempt Cardiopulmonary Resuscitation (DNACPR) training for leading practitioners in Bromley Healthcare. Bromley fed back that the training was "immensely useful and supportive" and that it "will make a significant difference to our patients and to the continuity and quality of care delivered".

All of these activities reflect St Christopher's commitment to sharing expertise, building capacity, and shaping the future of end of life care locally, nationally and internationally.

SUPPORTING AND SHAPING THE PALLIATIVE CARE LEADERS OF THE FUTURE: THE PATHFINDERS PROGRAMME

St Christopher's recognises that courageous, visionary leadership has been central to the growth of palliative care over the past 50 years and that the next half-century will demand equally bold leadership to navigate rising demand and limited resources. In response, St Christopher's has launched the new Pathfinders Programme, a seven-month leadership development course for leaders and managers within the hospice and wider palliative care sector. It builds skills in individuals who aspire to shape care, build partnerships and form services that are future-focused.

The programme is hybrid in format, enabling participation from both UK-based and international professionals. It combines leadership theory, real-world insights from experienced leaders, and reflective practice. Participants engage in three-hour sessions, workplace-based projects, and receive coaching and mentoring. A dedicated online community and wellbeing resources further support their development.

With 18 participants in its first cohort, the programme has already demonstrated its national and global appeal and contextual relevance. Feedback confirms its unique value in complementing formal leadership training and helping individuals harness their strengths in diverse settings.

By nurturing confident, resilient leaders and fostering international collaboration, the Pathfinders Programme exemplifies St Christopher's ambition to lead nationally and globally. A second cohort, focused on nurse leaders, is planned for late 2025 – further extending its impact across the sector.

INTERNATIONAL COLLABORATION AND RECOGNITION: GLOBAL FELLOWSHIP IN PALLIATIVE CARE

The Global Fellowship in Palliative Care is a six-month, virtual, 40-hour a month training programme designed to cultivate the next generation of palliative care leaders, particularly from low- and middle-income countries (LMICs). It is a collaborative, co-designed initiative run with our partners: Institute of Palliative Medicine, Kozhikode (India), Bangabandhu Sheikh Mujib Medical University (Bangladesh) and Sanjeevan (Puducherry, India).

It aims to build leadership beyond the current faculty, ensuring sustainability and scalability, and invites participation from individuals who are actively shaping or planning to establish palliative care services in their regions, thereby fostering local ownership and leadership.

Up to 400 people from a wide range of roles apply for 200 places each year.

In 2024, fellows selected for their strong leadership potential attended a week-long masterclass which provided intensive, in-person mentorship and networking.

We have evaluated the programme over the years and can report that some participants have not only enjoyed the course and its content but have gone on to have real practical impact as a result of learning with the Fellowship. Of note are projects that help establish community-led initiatives to improve end of life, new academic partnerships, new national networks to support nurses, and the generation of policy/guidelines that reflect local needs.

This Fellowship exemplifies a strategic, scalable and globally recognised model for developing palliative care leaders. By empowering professionals from LMICs to lead change in their own contexts, it directly contributes to St Christopher's ambition of national and global leadership in palliative care.

EIGHTY COUNTRIES, 1,000 LEARNERS, ONE COMMON GOAL

The Global Palliative Nursing Network (GPNN) offers free peer support and professional development to any nurse working in palliative care anywhere in the world. Currently there are 1,000 members, working across more than 80 countries. It was established to support nurses at risk of professional isolation, to increase their professional confidence and capabilities, and strengthen their professional identity. Members enjoy a variety of benefits and access to high-quality webinars, an annual conference and the opportunity to grow as a Champion nurse through training and access to online resources and material.

In 2025-26, we aim to develop the GPPN further with a Nursing Fellowship and investment in regional leaders, encouraging members to publish and build strategic relationships that endorse the network.

Yangden and Halima's story

Yangden and Halima shared their experience of the GPNN and the Pathfinders Programme, and the impact of their connection to each other and hundreds of other fellow palliative care nurses.

"It's given us a platform, opened my eyes and widened my horizons," says Yangden. "I feel like I have benefitted professionally and personally. We are all nurses with a similar dream, facing similar challenges. The network provides a sense of belonging and is a safe space where you can express yourself honestly. I now have global friends and see the work they do despite the challenges they face which inspired me to move forwards."

Halima feels equally connected with her colleagues across the world. "It's a way of communicating with nurses globally. Before, I felt alone but now I know I am not isolated and we share the same problems, can learn from each other and help each other."

Yangden and Halima

NATIONAL RESEARCH PROJECTS

With one of the largest caseloads in the UK, we are in a strong position to be able to carry out research so that we can share cutting-edge thinking and expertise to influence care on a global scale.

St Christopher's patients, carers and staff participated in several research projects. As of April 2025, we have 38 ongoing or potential research studies of which nine are live, including the nationally important multi-site Palliative Care Outcomes Registry.

We are also involved in a National Institute for Health and Care Research (NIHR)-funded multi-site portfolio study seeking to develop and refine a virtual reality intervention to help to manage pain for people living with advanced cancer.

Recently we were one of 80 sites across the UK that provided evidence for the CHELsea2 study to determine if providing clinically assisted hydration improves outcomes for people in the last week of life.

Create a sustainable business model

It's important that St Christopher's has sufficient resources to enable us to provide a high quality of service and welcome to those at end of life and those close to them.

In doing so, we want our infrastructure to be resilient, to have a low impact on the environment, and to be financially sustainable for the long term.

REFRESHING OUR PREMISES TO MEET NEED AND TO INCREASE OUR WELCOME

After some years in the planning, we started a refurbishment of the wards – the first in over a decade. Aside from addressing essential infrastructure issues, including drainage and air conditioning, we are also aiming to make them feel more welcoming and less clinical as well as to cater for our changing patient demographic which includes more people with dementia.

The cafés at Orpington and Sydenham provide a refreshing space to meet and chat

Computer-generated view of what one of the new bedrooms will look like after the ward refurbishment

We will retain the 32 beds and, by having some bigger bedrooms, we'll improve the patient environment. Installation of hoists will mean we can move people safely and comfortably, and there will also be more opportunities for patients to personalise their space.

Work started on site in February 2025, and we are on schedule to complete by early 2026. We will continue to deliver inpatient care throughout the programme, aiming to minimise disruption as much as possible.

We continued to further improve other areas of our premises during 2024-25, to enhance our welcome for all visitors. At both our main sites we refreshed our communal areas (reception and cafés), improved accessibility and introduced clearer wayfinding, alongside the introduction of our new brand on site.

USING RESILIENT TECHNOLOGY THAT EMPOWERS PEOPLE

With the number of potential cyber-threats continually growing, we were pleased that our technology remained resilient throughout the year to support ongoing services. Our phishing awareness campaigns have also demonstrated greater staff appreciation of the threat.

In addition, we achieved the 'Cyber Essentials' accreditation during the year.

While resilient, our technology also needs to empower the whole workforce to perform their roles. To that end we installed a new Customer Relationship Management (CRM) tool, provided community nurses with lone working devices to keep them safe, and initiated an audio project which enables patients with dementia to listen to music with their partners.

AI offers many exciting opportunities, and we will be further exploring its potential in 2025-26.

ROLLING OUT A GREEN STRATEGY TO REDUCE OUR ENVIRONMENTAL IMPACT

We are committed to ensuring that the end of life care we provide has a minimal impact on the environment.

In its first full year, our Green Group helped raise the profile of environmental issues within the hospice and targeted specific projects. These included extending the roll out of LED lighting, actions to minimise waste, and successfully completing our reporting to the Environment Agency as part of ESOS stage 3.

We also scoped and selected a new finance and expenses system in time to implement it on the first day of the new financial year. Aside from improving our financial controls and management information, this new system will also reduce paper use, further minimising our environmental impact.

Our stores are now even more welcoming and attractive to people wanting to support us across south east London

GENERATE SUFFICIENT FINANCES TO FULFIL OUR AMBITIONS

We received around £10 million – 34% of our income – from the NHS in 2024-25.

However with growing patient need, we depend even more on the money raised from our community, whether this be through our charity shops, our fundraising or money left in Wills.

In 2024-25, our community raised an incredible £17.7 million – 60% of our total income. This means that we were able to support three out of every five people thanks to our local population.

RETAIL REFRESH AND REBRAND REAPS REWARD

The last year has seen the completion of the rebrand of all 24 of St Christopher's shops across south London, making the stores even more welcoming and attractive to people looking to buy outstanding pre-loved items at affordable prices while also contributing to our ongoing fundraising efforts.

Overall, sales across the stores were up by £174k on the previous year, an incredible effort by all of the 77 paid staff and more than 600 tireless volunteers. We also sold 1,380,135 items to 639,758 customers.

Other significant improvements to the estate included moving our children's store in East Dulwich to new premises on Lordship Lane and completing a full renovation of the Crystal Palace shop. Both of these initiatives have resulted in increased trade.

In line with the organisation's goal to minimise our impact on the environment, we've introduced offer and clearance lines – providing the public with an outlet for thousands of value items that would otherwise end up in landfill.

Similarly, the last year has seen us establish active stock donation relationships with two major organisations – Transport for London and Marks & Spencer. We'll be looking to build on this excellent platform by attracting new corporate partners in the next year.

Adele and Veronica's story

With decades of experience working with some of the best-known high-street brands, Adele Bambridge and Veronica Herranz are putting their fashion knowhow to profitable use volunteering for St Christopher's.

Adele, who only recently retired after a career that saw her work as a director of Debenhams, and Veronica, whose CV includes names like Austin Reed and M&S, devised and are executing an effective e-commerce strategy for selling the best donations St Christopher's receives.

Volunteering one day a week in the Streatham shop, friends Veronica, from Balham, and Adele, who lives in Clapham, are earning the hospice £1,000 a month selling middle- to high-end items via eBay.

While they both appreciate the greater flexibility of volunteering over working for money, both Adele and Veronica treat their role exactly as they did while in full-time paid employment – with the utmost professionalism.

Knowing where the proceeds of the sales they process go is the motivation that drives them.

“Having seen palliative care in action you realise that everything we do here helps make it happen and for me that’s a strong personal connection,” adds Veronica.

On their designated volunteering day, Tuesday, the pair arrive for work and immediately go online to see how the 15-20 items they list each week are selling.

“The reach of e-commerce is much broader,” says Veronica. “We are selling to people all over the country and can demand a higher price than in-store because we have a much wider reach.

“With our strong knowledge of fashion brands and understanding of their worth, we know how to price and sell them.”

Using all their retail nous, Veronica and Adele work as effectively as they can in their limited time slot, selecting the items for sale, before photographing, listing and then pricing them.

As if their small office at the back of the Streatham shop wasn’t busy enough, with rails, boxes and computers, it also doubles as an occasional repair shop, as Adele and Veronica put their sewing skills to good work fixing belt loops or adding missing buttons to ensure items attract the best possible price.

Both women say they can see the potential to grow St Christopher’s online presence and are keen to encourage others to try volunteering in St Christopher’s stores.

Adele and Veronica

We had 640,000 customers supporting us in our 24 shops

A disco-themed Fun Walk marshal point

FUNDRAISING ACTIVITIES MAKING AN IMPACT

In 2024-25, we raised over £12 million across all our diverse fundraising activities including money left to us in Wills. We introduced new campaigns and built on the successes of established events, nurturing new and existing relationships. It is only with the generous support of the public that we are able to support as many people as we do each year.

Our in-memory giving reached £866,000, and our Trusts income exceeded £900,000. The range of our activity also included community and events, major donors, corporate partnerships, lottery, legacies, Gift Aid and direct mail.

FUN WALK A RESOUNDING SUCCESS

On 12 May 2024, we held a fantastic Fun Walk at Keston Common, attended by 1,960 walkers as well as many families, friends and supporters, who helped us deliver a unique day of community, celebration and remembrance raising over £200,000.

Collin Wimble, who took part in the event in memory of his brother Chris, said: "The Fun Walk is the best organised walk I have ever done, and I have done a lot of walks. There is just something about it. I had a triple heart valve replacement, and I was determined to be fit enough to carry Chris into the church for his funeral. That is why I took up walking. Then I saw about the Fun Walk on St Christopher's Facebook page and thought, I have to do this for Chris." Every walker at Fun Walk has a story like Collin's, making Fun Walk not only our biggest fundraising event of the year, but also a wonderful moment to come together as a community to remember our loved ones.

Fun Walk is a wonderful moment to come together as a community to remember our loved ones as well as fundraise

Our new Christmas Appeal showed the vibrancy, fun and warmth of St Christopher's

A NEW CHRISTMAS APPEAL

In December 2024, we launched our first Christmas fundraising appeal since 2018, which succeeded in raising over £100,000 from both loyal supporters and new donors in our community. This is a huge increase from the last Christmas appeal, which raised around £11,000.

The appeal, which asked donors to fund Christmas meals at the hospice, was brought to life through the words of one of St Christopher's nurses, who from his own perspective told the story of what Christmas is like at St Christopher's, and how joyful and heart-warming the atmosphere is. As well as raising vital funds, the campaign was successful in helping to dispel commonly held stereotypes about life in a hospice, showing the vibrancy, fun and warmth of St Christopher's.

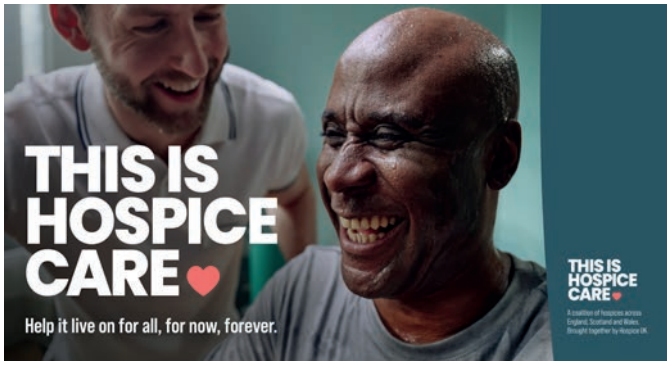
THIS IS HOSPICE CARE: THE SECTOR UNITES TO CHAMPION LEGACY GIVING

In February 2025, we took part in a national, collaborative campaign led by Hospice UK alongside over 140 other hospices across England and Wales to raise awareness of the vital need for gifts in Wills and to help drive legacy donations for the sector.

While St Christopher's raised £6.4 million in 2024-25 through legacy giving, as the need for our services rises, so will the reliance on this steady and highly valued income stream that helps us plan for the future. This first burst of This is Hospice Care brought the sector together for the first time in a collaborative effort to champion the importance of end of life care to our national health provision.

Neil Diamond, a Trustee for St Christopher's, told his and his wife Linda's story as part of the campaign to help bring to life vividly why end of life care matters so much. Linda, who died in 2018, was cared for at home by the St Christopher's team. "Lots of people think about including St Christopher's in their Will, but don't get around to it and then the moment passes. My advice would be, don't miss the opportunity," Nick said. "Even 1% can be left to St Christopher's in your Will so those closest to you still inherit 99%. Every gift makes a difference and means St Christopher's can continue to provide the wonderful support I've been fortunate enough to experience."

The campaign will continue next year, with future bursts planned for September 2025 and February 2026.



Tackle ethical issues

ADVOCATE FOR IMPROVED FUNDING FOR END OF LIFE CARE

Funding for hospices in the UK gained even greater prominence as a hot button news topic in 2024-25 and St Christopher's, which receives just a third of its funding from the NHS, was an active voice in the campaign for an increase in government funding.

With nearly all hospices receiving a similar proportion of funding (or less) by government, and this also not keeping up with both inflation and the growing patient need, St Christopher's believes the national funding model for hospices needs review.

In October 2024, we hosted a pop-up shop in the Houses of Parliament to highlight the fact that retail income for hospices nationally is now greater than the NHS income they receive, and that a number of hospices have been forced to make redundancies and cut services as a result of growing financial pressure.

More than 100 MPs attended the pop-up which we ran in partnership with Hospice UK. Throughout the day we had many fruitful conversations on the need for short- and long-term funding solutions.

We also secured 61 signatures on our Open Letter to Care Minister Stephen Kinnock calling for improved funding provision for hospices.

On 19 December 2024, Health Secretary Wes Streeting announced a short-term funding solution of £100m across 2024-25 and 2025-26 for adult hospices across the UK, with another £26m going to hospices for children and young people. This marked a step in the right direction, but longer-term funding reform is needed for the sector.

On 13 January 2025, a Backbench Business Debate on Hospice and Palliative Care was hosted in the House of Commons. We wrote to all our local MPs encouraging them to attend and Liam Conlon, MP for Penge and Beckenham, attended and spoke in support of St Christopher's and hospices across the UK and the call for longer-term sustainable funding.

ADVOCATE FOR IMPROVED PALLIATIVE AND END OF LIFE CARE

As part of the NHS consultation process to shape its 10-Year Health Plan, we submitted a formal response highlighting the critical role of hospice and palliative care in a future-fit health system. Our response reflects our vision for a system that values compassionate care at the end of life as a core part of healthcare delivery, not an optional add-on.

We used this opportunity to advocate for:

- Increased community care
- Fairer funding for hospices
- Greater support for non-medicalised care
- Better integrated systems and technology
- Improved death literacy
- End of life care planning
- Addressing inequalities in end of life care.

In the response we outlined the issues, case for change and the change we want to see under each area to ensure a more equitable and accessible healthcare landscape where the nuances of end of life care are acknowledged and addressed.

We also submitted a consultation response to the End of Life Care Commission, helping to highlight both the strengths and shortfalls of palliative and end of life provision. We shared evidence and insights from our clinical practice, research and partnerships to inform recommendations for a more inclusive, coordinated and compassionate model of care. Our aim is to ensure that the Commission's findings contribute meaningfully to broader policy, including the NHS 10-Year Health Plan, and lead to practical improvements in care for people approaching the end of life.

ENGAGING IN AND INFORMING THE DEBATE ON ASSISTED DYING

At St Christopher's we continue to hold a neutral position on assisted dying and we acknowledge the wide-ranging views held by the public and professionals.

The Assisted Dying Bill which was passed through parliament has significant implications for society, policy-makers, health systems and hospices. All stages of the Bill call for informed debate and understanding about why someone might request an assisted death, who should respond and the implications for those working in palliative care. That's why we have engaged in this topic throughout; sharing our learning and expertise with policy-makers, other hospices and any other stakeholders interested to hear more.

Prior to the Second Reading of the Terminally Ill Adults (End of Life) Bill on 29 November 2024 we actively engaged with MPs to ensure they were informed and prepared ahead of the debate.

During our Hospice Funding event in the Houses of Parliament, assisted dying was raised in almost every conversation and there was much interest in our community research on the topic.

Prior to the reading, we published a preliminary report which was shared with all MPs outlining the broad range of experiences and perspectives held by the more than 50 community members across south London who took part in our Assisted Dying Community Research Project. It provided learning, data and insight into people's perspectives on life, death, healthcare and assisted dying, including insight from people who, throughout this debate, have been largely unheard.

We also invited our local MPs in to visit the hospice to find out more. Liam Conlon MP visited, meeting with staff, patients and families.

Earlier this year we submitted written evidence to the Public Bill Committee considering the Terminally Ill Adults (End of Life) Bill. Our submission drew on our extensive expertise in end of life care and sets out specific concerns and recommendations to ensure any future legislation prioritises safe, equitable and compassionate person-centred care.

We focused on three core areas: safeguarding mental capacity and protecting against coercion; embedding a mandatory multidisciplinary team (MDT) approach to support complex decision-making; and addressing health inequalities to ensure universal, inclusive access to support.

RAISING OUR VOICE ON THESE IMPORTANT ISSUES

Throughout the year we appeared in more than 900 pieces of high-profile media coverage on assisted dying and the importance of hospice care, including in *The Times* and *The Guardian* and on Sky News, BBC and ITV.

Our 'shop' during the Hospice Funding event in Parliament

Liam Conlon MP visited us to meet patients and families

In advance of the Bill's Second Reading, *Sky News* recorded an in-depth news item at St Christopher's demonstrating hospice and palliative care and included interviews with Interim Chief Executive Jan Noble and Clinical Nurse Specialist (Learning Disabilities) Phoebe Mooney.

Notably, on the day of the Bill's Second Reading, we were featured on Sky News, LBC and BBC Radio 1.

Sunday Times journalist Steve Bleach spent two days with our teams in November resulting in a long-form, thought-provoking and considered piece around the issues and the repercussions and considerations for the hospice sector.

In February 2025, Social Work, Welfare and Safeguarding Lead Michele King was interviewed on Sky News at the hospice. This was in response to the proposed amendment (which has since been approved) removing the requirement for a high court judge to sign off on the process and replacing it with a panel of experts, including a social worker, psychiatrist and senior legal representative. Michele spoke about the expertise social workers could bring to this process.

In October 2024, as part of Hospice Care Week coverage on hospice funding, our Clinical Team Lead Eva Trowers was quoted in a story issued by PA Media which ran across 330 national, broadcast and regional publications.

Statements we issued from Director of Finance and Corporate Services John Vickers and Jan Noble both before and after the Labour government's first budget received coverage in a number of national newspapers.

Our vice president Dame Sheila Hancock, briefed by us on the crisis in hospice funding, used an appearance on ITV's *Lorraine* and *Channel 5 News* to raise the issue and cited us as an example of excellent palliative care.

Frank, pictured in our garden at Sydenham

STRUCTURE, GOVERNANCE AND MANAGEMENT

St Christopher's Hospice was incorporated as a company limited by guarantee on 21 January 1961 and is governed by its Articles of Association. St Christopher's Hospice is registered with the Charity Commission for England and Wales.

St Christopher's Hospice has a wholly owned subsidiary, St Christopher's (Trading) Limited, company number 02604519. The registered office of St Christopher's Hospice and its subsidiary is 51-59 Lawrie Park Road, Sydenham, London SE26 6DZ.

HOW WE ARE GOVERNED

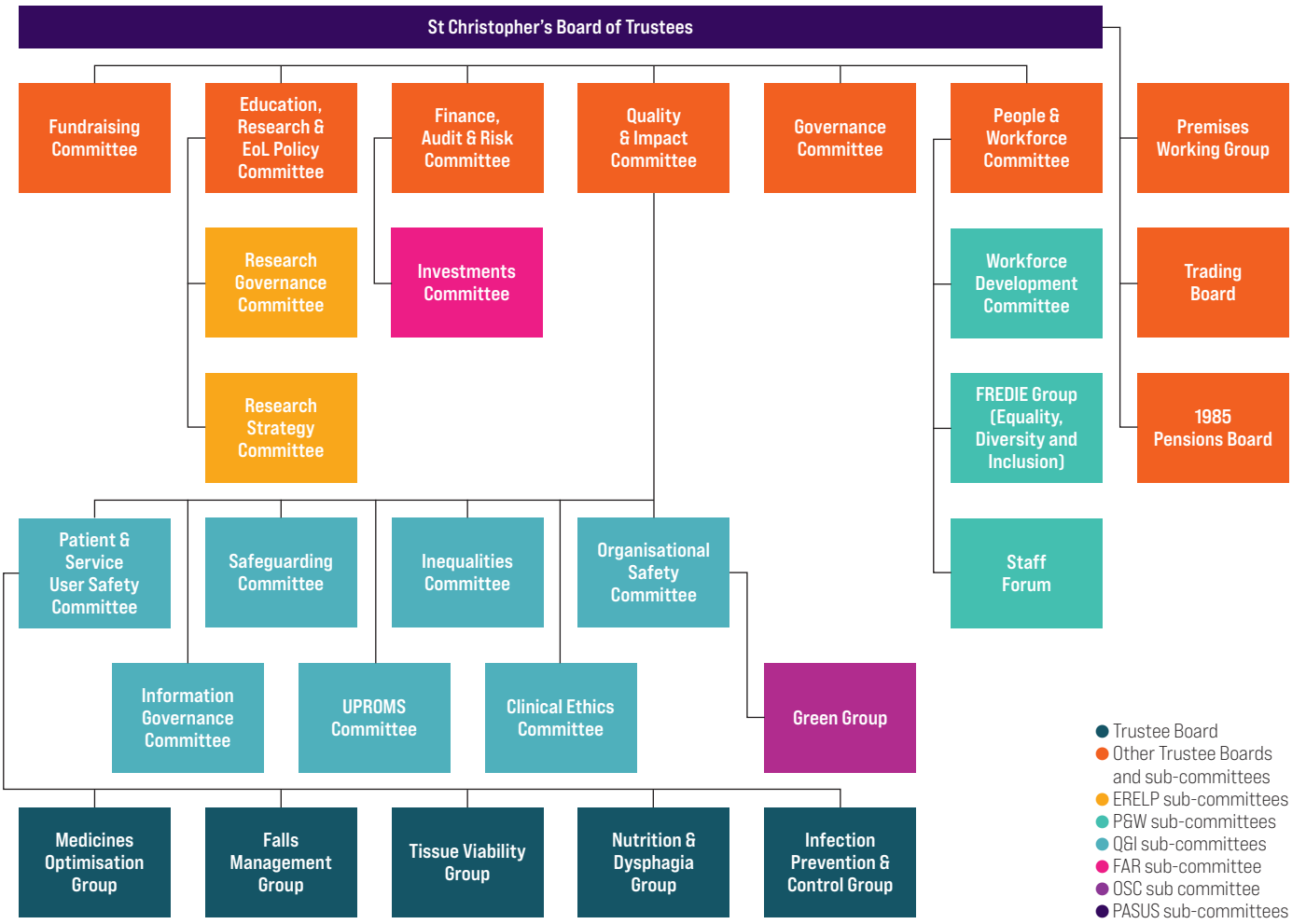
The Board, consisting of the Trustees named at the back of this report, has ultimate responsibility for the proper and effective management of St Christopher's Hospice. The Board is responsible for all major strategic decisions, for monitoring the organisation's performance, and ensuring that it complies with its Articles of Association and applicable laws and regulations.

Neil Goulden has been the Chair of the Trustees since 1 April 2021 and Eleanor Brown has been the Vice Chair since 21 July 2022.

The Board delegates day-to-day management and decision-making to the Executive Team, which is led by the Chief Executive. The Executive Team is required to act in furtherance of the Charity's strategy. The Board holds the Chief Executive and Executive Team to account for its leadership of the organisation.

The current governance structure is below. Each of the six Board sub-committees (Governance; People & Workforce; Quality & Impact; Finance Audit & Risk; Education, Research & End of Life Policy; and Fundraising Committee) and the Investment Committee, the Premises Working Group, St Christopher's Trading Board and 1985 Pensions Board are chaired by a Trustee and at least one other Trustee sits on each.

Committee terms of reference define responsibilities and delegated responsibilities and are reviewed annually.



The Board may delegate any of its powers to one of its sub-committees. The committees report to the Board after each meeting. Each sub-committee usually meets quarterly face to face.

Trustees commissioned an external governance and effectiveness review by Bayes Business School in 2023 and the recommendations and action plan are being monitored by the Governance Committee. A follow-up external governance review is planned to start at the beginning of 2026.

St Christopher's also has Trustees with the following key responsibilities: Safeguarding; Equality, Diversity & Inclusion; and Freedom to Speak Up. Each has a role description and has received the relevant training for these roles.

TRUSTEES' DUTY TO PROMOTE THE SUCCESS OF THE CHARITY – SECTION 172 STATEMENT

The Trustees are the directors of St Christopher's Hospice and have a duty to promote the success of the Charity and, in doing so, are required by section 172(1) of the Companies Act 2006 to have regard to various specific factors, including:

- the likely consequences of decisions in the long term
- the interests of employees
- the need to foster the Charity's relationships with third-party stakeholders, which, in the case of St Christopher's Hospice, includes dying people and those close to them, the local community, the NHS and our supporters
- the impact of the Charity's operations on the community and the environment
- the desirability of the Charity maintaining a reputation for high standards of business conduct.

The Charity's strategy takes into account the likely consequence of any decision in the long term. The Trustees approved a three-year organisational strategy for 2023-26, and this Annual Report and Accounts gives updates on progress against the second year of that strategy.

The Board meets at least quarterly throughout the year. It assesses progress against the strategy, identifies areas for focus for the following year and receives updates on the Charity's performance and plans. Its committees also review plans with regard to the particular activities overseen by the committee concerned. The Board also has an annual away day for strategic planning.

The Board obtains assurance that attention is given to the factors set out in section 172 when promoting the success of the Charity, by monitoring that the Executive Team and the wider organisation are delivering the strategy and complying with specific policies.

Engagement with the Charity's primary stakeholder groups is set out on pages 9 to 27. The Executive Team regularly reports to the Board on key stakeholder relations and engagement activities, current issues and relevant feedback from interactions with stakeholders.

The Trustees also follow a formal process to regularly manage and review risks faced by the Charity, set out on page 33.

The Charity ensures that it maintains a reputation for high standards of business conduct by having in place a range of policies and processes that promote corporate responsibility and ethical behaviour. Areas covered include: fundraising (our fundraising practices are discussed below); gifts, hospitality and anti-bribery; conflicts of interest; safeguarding, bullying and harassment; and whistleblowing. Policies are reviewed periodically.

APPOINTMENT OF NEW TRUSTEES

The Board is made up of individuals who have a diverse, varied and balanced cross section of life, skills and experience. When embarking on the recruitment process, the Trustee vacancy is advertised on the St Christopher's website, in various publications and on social media. The specialist services of a recruitment agency may also be employed where necessary. Prospective candidates are invited to apply, outlining their relevance for the role. After the closing date, applicants are shortlisted against the person specification, and potential candidates are invited to interview. The interviews are usually carried out by the Chair, Vice Chair and a subset of other Trustees. Successful candidates are then formally appointed by a resolution of the Board.

Trustees are appointed by resolution of the Board for a term of up to three years. Upon expiry, they shall be eligible for re-appointment for a further term or terms of up to three years. All Trustees sign a code of conduct on appointment. The Trustees, Chair and Vice Chair carry out their responsibilities in line with a documented description of their role.

New Trustees undertake an induction process designed to equip them with the information and understanding they need to become effective and valuable members of the Board as quickly as possible. The induction process involves the following:

- An induction pack containing key information about St Christopher's, the governance structure, the roles and responsibilities of Trustees and the organisational work of the Board of Trustees and its committees
- A Trustee mentor for at least the first year

- An induction programme which enables new Trustees to gain a good understanding of the operations of the organisation
- An informal review meeting with the Chair of the Board at the end of a Trustee's first year and annually thereafter.

All Trustees give their time voluntarily and receive no benefit from the Charity. Out-of-pocket expenses incurred by the Trustees in carrying out the role can be reimbursed in accordance with the organisation's expenses policy. £588 of expenses were claimed from the Charity this financial year. All Trustees were required to complete and sign an annual declaration of interests, and declare any relevant gifts received.

PUBLIC BENEFIT

The Board is aware of the Charity Commission's guidance in relation to public benefit. The report indicates how our activities have delivered public benefit.

FUNDRAISING DISCLOSURE

St Christopher's Hospice has voluntarily subscribed to the Fundraising Regulator and is committed to adherence to the Code of Fundraising Practice set by the Fundraising Regulator. We encourage any fundraising service providers we engage with to also sign up to the code, and we received no complaints logged with the Fundraising Regulator in 2024-25.

The Fundraising team at St Christopher's is predominently employed by the charity, led by the Director of Income Generation and Communications, with the exception of the Trust and Grants fundraising which is delivered by contract through Compton Fundraising Consultants, who are members of the Association of Professional Fundraisers (AFC). Financial performance and reporting, compliance against the fundraising code and other legislation, complaints and incident handling, and the overall leadership of our fundraising activity sits inside the Charity's Executive Team structure and now reports to a new Fundraising sub-committee of the Board of Trustees.

The Fundraising team engages professional third-party suppliers to help raise funds particularly where we do not have the expertise in-house. We have safeguards in place when working with suppliers so that we protect our supporters and the reputation of our Charity, including Lottery Fundraising Services and Engage and Connect, the companies which support our lottery. We ensure all these agents observe the highest standards in terms of fundraising practice and monitor their performance through the use of mystery shopping and random checks with donors.

St Christopher's Hospice is a member of the Hospice Income Generation Network, the Hospice Lottery Association and many of our fundraisers are members of the Chartered Institute of Fundraising. The Director of Income Generation and Communications chairs the Hospice UK Income Generation Leaders Network.

Our website outlines our complaints policy for the public. We received five fundraising complaints in 2024-25 (2023-24: two fundraising complaints). Our policy is to respond to all complaints within 10 days. Serious complaints are escalated to our Executive Team and Trustees to consider lessons learnt. We report to the Fundraising Regulator and Gambling Commission on the totality of our complaints.

We have policies and procedures in place to safeguard the vulnerable and we ensure our fundraisers and third-party suppliers adhere to these policies. We are also signed up to the Fundraising Preference Service to enable individuals to opt out from receiving fundraising communications from us. We received zero requests through this service last year.

PAY POLICY FOR SENIOR STAFF

The pay of the Chief Executive is set by the Governance Committee with any changes authorised by the Chair of the Trustee Board. The pay for the remainder of the Executive Team is agreed by the Governance Committee in consultation with the Chief Executive. The pay for other senior staff is agreed by the Chief Executive in consultation with the Director of People & Organisational Development and the member of the Executive Team for the Directorate.

EQUALITY AND DIVERSITY

In addition to St Christopher's Investors being awarded Diversity Silver accreditation from the National Centre for Diversity in late 2024, St Christopher's is also a 'Disability Confident' employer. This means that we undertake full and fair consideration of all applications for employment including those made by people with a disability. We offer a guaranteed interview to applicants who qualify under the 'Disability Confident' scheme and we are committed to supporting both disabled people back into the workplace and those who become disabled whilst employed by the organisation.

St Christopher's works with an occupational health service and in partnership with external organisations such as Access to Work, to provide support and advice to disabled people working with us. We have recently developed our own wellbeing information resource for staff to signpost

them to a range of internal and external wellbeing resources.

St Christopher's Hospice has been a signatory to the 'Mindful Employer Charter' since August 2016. Our practices were reviewed in 2023-24 and were found to demonstrate our commitment to supporting individuals with mental health illnesses and actively seeking to alleviate causes of workplace stress wherever possible. We are an Age-Inclusive Employer as recognised by the Centre for Ageing Better and have embedded a supportive culture, offering flexibility and aiming to be an inclusive employer for all ages across our workforce.

GENDER PAY GAP

St Christopher's is compliant with legislation in relation to equal pay regardless of gender or other protected characteristics

The gender pay gap shows the difference in the average earnings between all men and all women employed across the organisation on 5 April each year. This information is reported annually on the national Gender Pay Gap website. The April 2024 data identified that of our 545 staff, 82.6% were women and 17.4% were men.

This year we reported that, as in the previous four years, women at St Christopher's earn, on average, slightly higher pay than men. Overall the St Christopher's mean gender pay gap has shifted from -3.69% (2023) to -4.09% (2024). There has been a significant widening in the median gender pay gap, from -9.94% (2023) to -22.56% in 2024. The median position is in the upper middle quartile for women with the median wage increasing by 11.68% since last year. The median position for men is in the lower middle quartile with a 1.42% increase since last year.

It is, however, recognised that having a predominantly female workforce means small fluctuations across the male workforce has an impact on the gender pay gap.

EMPLOYEE INFORMATION

St Christopher's is committed to providing information to employees, when appropriate and feasible, and consulting with them and/or their representatives on a regular basis. One way this is achieved is through our Staff Forum which seeks feedback, when appropriate, on proposed changes to terms and conditions of service or ways of working. Staff representatives also bring matters of concern or suggestions for improvement to the attention of senior management through this group, with the working environment and organisational initiatives also discussed. This feedback mechanism enables our employees' views to be heard and considered on an ongoing basis.

STREAMLINED ENERGY AND CARBON REPORTING (SECR)

As part of SECR, our UK greenhouse gas (GHG) emissions and energy use for the last two years are as set out below:

UK GHG EMISSIONS AND ENERGY USE DATA FOR THE PERIOD 1 APRIL TO 31 MARCH

	2024-25	2023-24
Energy consumption used to calculate emissions (kWh)	2,753,854	2,585,986
Energy consumption breakdown (kWH): • Gas • Electricity • Transport fuel		
Direct GHG emissions: gas consumption	268.21	230.56
Indirect energy emissions: purchased electricity	228.87	226.64
Other indirect emissions: employee mileage while undertaking activities for St Christopher's Hospice	51.00	60.97
Total gross emissions in metric tonnes CO2e	548.08	518.17
Intensity ratio in in metric tonnes CO2e per staff FTE	1.30	1.29

QUANTIFICATION AND REPORTING METHODOLOGY

We have followed the 2019 HM Government Environmental Reporting Guidelines. We have also used the GHG Reporting Protocol – Corporate Standard and the UK Government's Conversion Factors for Company Reporting.

INTENSITY MEASUREMENT

The chosen intensity measurement ratio is total gross emissions in metric tonnes per staff FTE.

MEASURES TO IMPROVE ENERGY EFFICIENCY

Total energy use increased during 2024-25, but this has been driven by an increase to headcount. The average carbon usage per employee has remained relatively stable at 1.30 CO2e compared to 1.29 CO2e per staff member during the previous year.

It is important to St Christopher's and its staff that we reduce our environmental impact where possible.

A cross-organisational Green Group, which meets quarterly, was in place for the first full year last year. The group has five strategic aims with associated plans, in order to reduce our environmental impact further:

- Demonstrate commitment and engagement
- Improve energy efficiency
- Minimise waste
- Reduce carbon emissions
- Enhance our natural environment.

We completed our ESOS stage 3 reporting to the Environment Agency during 2024-25. No significant issues were identified.

Future areas of focus include replacement of some windows at our Sydenham site, and feasibility studies to have more solar panels and to install a business management system. We will also be recruiting a dedicated safety, health and environment manager during 2025-26.

PRINCIPAL RISKS AND UNCERTAINTIES

The Board, in conjunction with the Executive Team, follows a formal process to manage the risks faced by the Charity.

This process focuses on six potential risk areas – strategic, financial, services, premises, workforce and information. Risks are assessed as to the severity of the risk to the organisation and accompanied by strategies to eliminate or mitigate the risk.

The risk management process is conducted at least annually and comprises the following:

1. Identification and review of key risks facing the organisation, accompanied by consideration of strategies/plans to be employed to mitigate risks by the Executive Team
2. Review of the updated risk register and the mitigation plans by the Finance, Audit & Risk Committee and the Board of Trustees
3. Review and agreement of the risk register and mitigation plans by the Finance, Audit & Risk Committee and the Board of Trustees
4. Receipt of reports regarding progress and success of mitigation plans by the Finance, Audit & Risk Committee and the Board of Trustees.

This process has confirmed that key risks facing the organisation are:

- Failure to agree a level of NHS funding which pays for a sufficient proportion of NHS contract work; the NHS currently only pays for a minority of the work we do for them
- Delivery and disruption of ward refurbishment impacts on patient care, safety or staff
- Cyber-attacks such as corruption via computer viruses and other malware, in an ever-changing cyber security environment.

Actions intended to mitigate these risks include:

- Ongoing work to develop relationships with local commissioners and key influencers within the health system
- Additional governance processes and resourcing to oversee delivery of the ward refurbishment programme
- Further measures to enhance our IT resilience including ongoing improvements to our IT infrastructure, staff training, and business continuity testing in the event of a cyber-attack.

FINANCIAL REVIEW

These financial statements include the results of St Christopher's Hospice and its trading subsidiary, St Christopher's (Trading) Limited for the year ended 31 March 2025.

The charitable activities of St Christopher's Hospice are identified under five main headings in the Statement of Financial Activities:

- Inpatient care
- Community care/outpatients
- Education, research and policy
- Bereavement services
- Community action.

Except for education, research and policy, the services provided to a patient could include one or more of these activities during their care. The cost of individual patient care may span across one or more of the charitable activities identified.

In addition to these charitable activities, St Christopher's Hospice has a trading company. The activity of this company is shown on the Statement of Financial Activities as income/costs of trading company.

For the year ended 31 March 2025, at an operational level, St Christopher's Hospice recorded a net loss, before other recognised gains and losses, of £2,095k (2024: £987k net loss).

Overall, St Christopher's Hospice generated a net decrease in funds of £2,222k (2024: a net increase in funds of £159k). This was after recognising other unrealised gains and losses as follows:

1 **Unrealised loss from the investment portfolio of £160k (2024: unrealised gain of £1,185k) and a realised gain from the portfolio of £33k (2024: realised loss of £39k)**

Our investment portfolio managed by Cazenove Capital Management increased in value from £16,433k in March 2024 to £16,571k in March 2025. The increase of £138k is the net amount of investment income and the investment gains and losses mentioned above. We have not drawn down on our investment portfolio during 2024-25, and there are no plans to draw down on it during 2025-26.

Our bank deposits decreased from £8,924k in March 2024 to £797k in March 2025.

Taking our investment portfolio and bank deposits together, our overall investments decreased from £25,357k in March 2024 to £17,368k in March 2025.

While there has been a significant decrease to our investments figure, our interest-bearing accounts increased to £6,914k at March 2025 from £4,807k at March 2024, and we had higher amounts due to us from trade debtors at March 2025 (£3,122k) compared to March 2024 (£924k), which have since been paid post year-end.

2 **An actuarial gain/loss from the FRS 102 valuation of the St Christopher's Hospice (1985) Pension Scheme of £0k (2024: also £0k)**

The FRS 102 actuarial loss is nil as a result of four factors:

- An actuarial gain on the scheme liabilities of £719k (2024: gain of £212k) arising from a change in the demographic and financial assumptions.
- An actuarial loss on the scheme investments portfolio of £770k (2024: loss of £385k)
- Experience losses arising on the plan liabilities of £6k (2024: losses of £17k)
- A gain of £57k to reflect the amount of the pension surplus that is not recoverable (2024: gain of £190k).

INCOME

Total income received in 2024-25 was £29,419k which was a 6.8% increase on the previous year (2024: £27,541k). Legacies income was £175k less than the previous year. Along with a decrease to investment income of £71k, this was more than offset by increases to other income streams, namely donations and gifts (+£1,028k), NHS income (+£630k), income from trading company (+£174k) and income from education, fees and other income (+£292k).

Further details on our income variances are shown below.

DONATIONS AND GIFTS

Income from donations and gifts was £5,863k, which was £1,028k higher than the previous year (2024: £4,835k).

£537k of this increase relates to a grant from the Department of Health and Social Care via Hospice UK, this being St Christopher's share of the £25m awarded to the English hospice sector for the purposes of capital expenditure in 2024-25.

The other £491k related to increases across a number of fundraising streams including income from trusts and community events. We were pleased that our community income showed some growth during the year following the challenges to this fundraising stream during and following the Covid years.

We continue to rely on the generosity of our community to fund our hospice services, for which we are enormously appreciative.

LEGACIES

Legacies income of £6,360k was less than the previous year (2024: £6,535k). We remain incredibly grateful for those people who choose to remember St Christopher's in their Wills. Given the nature of this income, it is hard to project income levels as accurately as for other income streams.

NHS CONTRACTS

Income from the NHS of £9,987k was £630k (6.7%) more than the previous year (2024: £9,357k). Part of this increase is a result of carrying out Hospice at Home services to the boroughs of Lambeth and Southwark.

While we are thankful for this money, St Christopher's is caring for an ever-increasing number of people, which means that the NHS pays for only a minority of the services we provide for it, and at a decreasing proportion.

INCOME AND PERFORMANCE OF TRADING SUBSIDIARIES

The core activity of St Christopher's (Trading) Limited is the operation of shops, with 24 shops as of March 2025 (24 shops as at March 2024), whose purpose is to raise money for the Charity to spend on charitable activities.

Revenue from St Christopher's (Trading) Limited increased by 3% to £5,469k (2024: £5,295k), with a net contribution to the Charity of £1,203k (2024: a net contribution of £1,467k). While income has increased the high street is increasingly competitive and challenging during the current economic high climate.

INVESTMENT INCOME

Investment income for the year of £780k was £71k lower than the previous year (2024: £851k). This is reflective of both lower interest rates and lower cash balances.

EDUCATION, FEES AND OTHER INCOME

Education, fees and other income was £960k, which was higher than last year (2024: £668k). The increase is due to income from catering, and a full year of work delivering our Hospital at Home work service in Bromley.

EXPENDITURE

Total expenditure in 2024-25 was £31,514k, which was 10.4% higher than the previous year's figure (£28,528k). This was largely due to a deliberate growth in headcount (+5%) to support our charitable activities and growing patient need, and to fund cost of living increases.

The cost of raising voluntary income was £2,161k, which was 22.6% higher than the previous year's figure (2024: £1,762k). With core NHS funding paying for a reducing proportion of our activity, it is important that we are investing to grow our other income streams.

STAFF COSTS

During the year, the total average FTE headcount increased to 421 (2024: 401). Staff costs account for 72.3% of the organisation's total costs (2024: 71.6%). Further details of staff costs and staffing levels can be found in note 7 to the accounts.

RESERVES POLICY AND GOING CONCERN

St Christopher's Hospice holds reserves to improve both the financial security and the operational flexibility of the hospice. The Trustees believe the level of reserves held should be sufficient to cover the risks the Charity is exposed to, including safeguarding against the volatility of key income streams.

The Trustees have taken a risk-based approach to assess the level of free reserves required by the Charity. They have also reviewed this alongside the level needed to operate effectively. Considering both aspects, the Trustees believe St Christopher's Hospice should aim to hold free reserves equivalent to 9-12 months of its operating expenditure, currently equal to £23.6m-£31.5m. The Charity considers free reserves to be the total unrestricted Group reserves, less designated funds. The designated funds held by the Charity are listed in the notes to the accounts. They include a fund to manage the variability of year-on-year legacy income, a fund to expand our charitable impact and to support our long-term sustainability, funds for capital commitments and the net book value of fixed assets. On this basis, free reserves as of 31 March 2025 were £24,511k (2024: £25,780k), equivalent to 9.3 months of operating expenditure (2024: 10.8 months of operating expenditure).

The Trustees have reviewed the financial position of the Charity and its subsidiaries, its forecast cash flows, and its liquidity position for the foreseeable future. This includes the impact of risks as described in the principal risks and uncertainties section above. The Trustees believe that the Charity has adequate resources to continue operational existence for the foreseeable future. As a result, they continue to adopt the going concern basis of accounting in preparing the Annual Report and Accounts.

INVESTMENT POLICY

The Board of Trustees has approved an investment policy and strategy, which is supervised by the Investment Committee.

The primary objective of the investment policy is to provide financial security and stability for the operation

of St Christopher's Hospice. The investment policy also recognises that the organisation is exposed to the risk of a sharp fall in its income due to the variability of legacy income and donations and uncertainty of funds from the NHS. To reflect this position, the Investment Committee with Cazenove Capital Management continues to invest in a varied portfolio in accordance with an asset allocation approved by the Investment Committee.

Investment income has decreased to £780k (2024: £851k), of which £444k (2024: £570k) is interest from cash deposits, and £336k (2024: £281k) is dividend and interest income from the Cazenove Capital Management charity portfolio.

The Investment Policy states that, among other things, Trustees will not invest directly in a company if it carries out activities contrary to the Charity's purposes and, therefore, against its interests and those of its beneficiaries.

The Investment Committee encourages responsible investment. They are committed to appointing investment managers involved in applying Environment, Social and Governance (ESG) criteria across the investment process. Our existing investment manager, Cazenove Capital Management, has demonstrated that it uses these criteria.

STATEMENT OF BOARD'S RESPONSIBILITIES

The Board members (directors for the purposes of Company law) who served during the year, and the period for which they were in office, are detailed on page 62.

The Board is responsible for preparing the Report of the Board of Trustees and the financial statements in accordance with applicable law and regulations.

Company law requires the Board to prepare financial statements for each financial year. Under that law, the Board has elected to prepare the financial statements in accordance with United Kingdom Generally Accepted Accounting Practice (United Kingdom Accounting Standards and applicable law). Under company law, the Board must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the Charity and of the result of the Group for that period. In preparing these financial statements, the Board is required to:

- select suitable accounting policies and then apply them consistently
- make judgments and accounting estimates that are reasonable and prudent
- follow applicable accounting standards
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the Group will continue in business.

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

STATEMENT AS TO DISCLOSURE OF INFORMATION TO AUDITORS

The Trustees have taken all necessary steps to make themselves aware of any relevant audit information and establish that the auditors are aware of that information.

As far as the Trustees are aware, there is no relevant audit information that the Charity's auditors are unaware of.

APPOINTMENT OF AUDITORS

Moore Kingston Smith LLP were appointed as auditor to the Charity and in accordance with section 485 of the Companies Act 2006, a resolution proposing that they be reappointed will be put at a general meeting.

Signed on behalf of the Board of Trustees

NEIL GOULDEN
Chair of the Board of Trustees
St Christopher's Hospice, 51-59 Lawrie Park Road,
London SE26 6DZ
1 October 2025

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF ST CHRISTOPHER'S HOSPICE

OPINION

We have audited the financial statements of St Christopher's Hospice (the 'parent charitable company') and its subsidiaries (the 'group') for the year ended 31 March 2025 which comprise the Group Statement of Financial Activities, the Group and Parent Charitable Company Balance Sheets, the Group Cash Flow Statement 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 group's and the parent charitable company's affairs as at 31 March 2025 and of the group's incoming resources and application of resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been 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 charitable company 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 group's and parent charitable company's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

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

OTHER INFORMATION

The other information comprises the information included in the annual report, other than the financial statements and our auditor's report thereon. The trustees are responsible for the other information contained in 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 there is 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 the audit:

- the information given in the strategic report and the trustees' annual report for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the strategic report and the trustees' annual 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 group and parent charitable company and their environment obtained in the course of the audit, we have

not identified material misstatements in the strategic report or the trustees' annual report.

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

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

RESPONSIBILITIES OF TRUSTEES

As explained more fully in the trustees' responsibilities statement set out on page 36, the trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

AUDITOR'S RESPONSIBILITIES FOR THE AUDIT OF THE FINANCIAL STATEMENTS

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

As part of an audit in accordance with ISAs (UK) we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. 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.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purposes of expressing an opinion on the effectiveness of the group and parent charitable company's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the trustees.
- Conclude on the appropriateness of the trustees' use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the group and parent charitable company's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the group or parent charitable company to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.
- Obtain sufficient appropriate audit evidence regarding the financial information of the entities or business activities within the group to express an opinion on the consolidated financial statements. We are responsible for the direction, supervision and performance of the group audit. We remain solely responsible for our audit report.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

EXPLANATION AS TO WHAT EXTENT 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.

The objectives of our audit in respect of fraud, are; to identify and assess the risks of material misstatement of the financial statements due to fraud; to obtain sufficient appropriate audit evidence regarding the assessed risks of material misstatement due to fraud, through designing and implementing appropriate responses to those assessed risks; and to respond appropriately to instances of fraud or suspected fraud identified during the audit. However, the primary responsibility for the prevention and detection of fraud rests with both management and those charged with governance of the charitable company.

Our approach was as follows:

- We obtained an understanding of the legal and regulatory requirements applicable to the charitable company and considered that the most significant are the Companies Act 2006, the Charities Act 2011, the Charity SORP, and UK financial reporting standards as issued by the Financial Reporting Council.
- We obtained an understanding of how the charitable company complies with these requirements by discussions with management and those charged with governance.
- We assessed the risk of material misstatement of the financial statements, including the risk of material misstatement due to fraud and how it might occur, by holding discussions with management and those charged with governance.
- We inquired of management and those charged with governance as to any known instances of non-compliance or suspected non-compliance with laws and regulations.
- Based on this understanding, we designed specific appropriate audit procedures to identify instances of non-compliance with laws and regulations. This included making enquiries of management and those charged with governance and obtaining additional corroborative evidence as required.

There are inherent limitations in the audit procedures described above. We are less likely to become aware of instances of non-compliance with laws and regulations that are not closely related to events and transactions reflected in the financial statements. Also, the risk of not detecting a material misstatement due to fraud is higher than the risk of not detecting one resulting from error, as fraud may involve deliberate concealment by, for example, forgery or intentional misrepresentations, or through collusion.

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 which 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 any party other than the charitable company and charitable company's members as a body, for our audit work, for this report, or for the opinions we have formed.

Moore Kingston Smith LLP.

JAMES SAUNDERS
Senior Statutory Auditor
for and on behalf of
Moore Kingston Smith LLP, Statutory Auditor
9 Appold Street, London EC2A 2AP

9 October 2025

CONSOLIDATED STATEMENT OF FINANCIAL ACTIVITIES FOR THE YEAR ENDED 31 MARCH 2025

	Notes	Unrestricted funds £'000	Restricted funds £'000	2025 £'000	2024 £'000
Income from					
Donations and gifts		4,713	1,150	5,863	4,835
Legacies		6,360	–	6,360	6,535
Charitable activities					
NHS funding	2	9,987	–	9,987	9,357
Education, fees and other income	3	960	–	960	668
Other trading activities					
Income of trading company	4	5,469	–	5,469	5,295
Investment income		780	–	780	851
Total income		28,269	1,150	29,419	27,541
Expenditure on					
Raising voluntary income		2,161	–	2,161	1,762
Trading company	4	4,315	–	4,315	3,828
		6,476	–	6,476	5,590
Charitable activities					
Inpatient care		8,936	99	9,035	8,599
Community care/outpatients		12,748	91	12,839	11,450
Bereavement services		861	132	993	891
Community action		761	58	819	871
Education, research and policy		845	507	1,352	1,127
		24,151	887	25,038	22,938
Total expenditure	5	30,627	887	31,514	28,528
Net (expenditure)/income before transfers	6	(2,358)	263	(2,095)	(987)
Transfer between funds		605	(605)	–	–
Net (expenditure) before other recognised gains and losses		(1,753)	(342)	(2,095)	(987)
Other recognised gains/(losses)					
Actuarial (losses) on defined benefit pension scheme	19	–	–	–	–
Gains/(losses) on investments: realised	10	33	-	33	(39)
(Losses)/gains on investments: unrealised	10	(160)	-	(160)	1,185
Net movement in funds		(1,880)	(342)	(2,222)	159
Total funds at 1 April 2024	15, 16, 17	44,394	2,361	46,755	46,596
Total funds at 31 March 2025	15, 16, 17	42,514	2,019	44,533	46,755

All recognised gains and losses are included in the consolidated statement of financial activities. St Christopher's Hospice and St Christopher's (Trading) Limited transactions are derived from continuing activities. An analysis of the results by company is shown in Note 4.

CONSOLIDATED BALANCE SHEET
AS AT 31 MARCH 2025

	Notes	2025 £'000	2024 £'000
Fixed assets			
Tangible fixed assets	9	10,949	10,294
Intangible fixed assets	9	179	110
Investments	10	17,368	25,357
		28,496	35,761
Current assets			
Debtors	11	11,597	8,538
Interest-bearing accounts		6,914	4,807
		18,511	13,345
Creditors			
Amounts falling due within one year	12	(2,474)	(2,351)
Net current assets		16,037	10,994
Net assets		44,533	46,755
Funds			
Restricted	15	2,019	2,361
Unrestricted			
General		24,511	25,780
Designated	16	17,995	18,606
Non-charitable		8	8
Total unrestricted funds		42,514	44,394
Total funds		44,533	46,755

The financial statements were approved by The Board of Trustees on 1 October 2025 and signed on its behalf by:

NEIL GOULDEN
Chair of Trustees

CATHERINE MCDONALD
Trustee

BALANCE SHEET: ST CHRISTOPHER'S HOSPICE ENTITY ONLY AS AT 31 MARCH 2025

	Notes	2025 £'000	2024 £'000
Fixed assets			
Tangible fixed assets	9	10,759	10,085
Intangible fixed assets	9	179	110
Investments	10	17,768	25,757
		28,706	35,952
Current assets			
Debtors	11	11,571	10,418
Interest-bearing accounts		6,435	2,462
		18,006	12,880
Creditors			
Amounts falling due within one year	12	(2,138)	(2,086)
Net current assets		15,868	10,794
Net assets excluding pension scheme asset		44,574	46,746
Defined benefit pension scheme asset	19	–	–
Net assets		44,574	46,746
Funds			
Restricted	15	2,019	2,361
Unrestricted			
General		24,560	25,779
Designated	16	17,995	18,606
Total unrestricted funds		42,555	44,385
Total funds		44,574	46,746

As permitted by Section 408 of the Companies Act 2006, the Statement of Financial Activities of the parent charity is not presented as part of these financial statements. The Charity's deficit for the year before distribution from the trading subsidiary was £3,376k (2024: £1,308k).

The financial statements were approved by The Board of Trustees on 1 October 2025 and signed on its behalf by:

NEIL GOULDEN
Chair of Trustees

CATHERINE MCDONALD
Trustee

CONSOLIDATED STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 31 MARCH 2025

	Notes	2025 £'000	2024 £'000
Net cash (used in) operating activities	A	(4,939)	(1,739)
Cash flows from investing activities			
Interest and dividends received		780	851
Purchase of tangible and intangible fixed assets		(1,563)	(952)
Decrease/(increase) in investments		7,829	(4,810)
Net cash released from/(used in) investing activities		7,046	(4,911)
Change in cash and cash equivalents in the year		2,107	(6,650)
Cash at the beginning of the year		4,807	11,457
Cash at the end of the year		6,914	4,807

Reconciliation of net movement in funds to net cash inflow from operating activities	Notes	2025 £'000	2024 £'000
	A		
Net movement in funds		(2,222)	159
Interest and dividends receivable		(780)	(851)
Depreciation and amortisation charges		839	772
Unrealised loss/(gain) on investments		160	(1,185)
Profit on the disposal of fixed assets		(3)	(4)
Cash received from sale of assets		3	4
Increase in debtors		(3,059)	(353)
Increase/(decrease) in creditors		33	(301)
Increase in dilapidation provision		90	20
Net cash used in operating activities		(4,939)	(1,739)

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2025

1 PRINCIPAL ACCOUNTING POLICIES

1.1 Basis of accounting

The financial statements are prepared under the historical cost basis and comply with the Companies Act 2006. The financial statements have been prepared in accordance with the Statement of Recommended Practice (*Accounting and Reporting by Charities*), issued in October 2019 (FRS 102), other relevant provisions of the memorandum and articles of association, and with applicable UK accounting standards.

The figures for both years reflect the full adoption of FRS (Financial Reporting Standard) 102.

The Charity meets the definition of a public benefit entity under FRS 102.

1.2 Going concern

These financial statements have been prepared on a going concern basis.

The Trustees therefore consider that the Charity holds sufficient reserves for the going concern basis to be appropriate.

1.3 Basis of consolidation

The statement of financial activities and balance sheet consolidate the financial statements of the Charity and its wholly owned subsidiary St Christopher's (Trading) Limited.

No separate Statement of Financial Activities is presented for the Charity as permitted by Section 408 of the Companies Act 2006 and SORP (FRS102). The net deficit dealt with in the Charity's Statement of Financial Activities before the distribution from St Christopher's (Trading) Limited for the year ended 31 March 2025 was £3,376k (2024: deficit £1,308k), and the net deficit dealt with in the Charity's Statement of Financial Activities after the distribution was £2,173k (2024: net surplus of £159k).

1.4 Fund accounting

Restricted income funds

Restricted funds are funds subject to specific restricted conditions requested by the donors. Where the restriction relates to the purchase of a capital item then the condition will be treated as having been met when the asset is purchased.

Unrestricted income funds

Unrestricted funds comprise accumulated surpluses and deficits on general funds. They are available for use at the discretion of the Board in furtherance of the general charitable objects.

Designated funds are amounts included within unrestricted funds that have been set aside by the Board for particular purposes. Designated funds include:

- **Fixed assets** This reflects the net book value of unrestricted tangible and intangible fixed assets
- **Ward refurbishment** These are designated monies to fund a wards refurbishment at the Sydenham site
- **Strategic Ambitions Fund** This is a designated fund to focus on projects which will expand St Christopher's charitable impact and to support its long-term sustainability
- **Legacies Fund** To set aside legacies income, when it has been higher than budgeted in a particular year. This money will be drawn down to support future years, when legacies income is lower than budgeted.

Details on the level of funds in each element are provided in notes 15 and 16.

1.5 Income

Income represents the total income receivable during the year comprising donations, legacies, NHS contracts, grants, fees, interest and other income generated during the year.

Legacies must be recognised when the following conditions are confirmed:

- There has been grant of probate
- The executors have established that there are sufficient funds to pay the legacy
- Any conditions attached to the legacy are either within the control of the Charity or have been met.

NHS contracts and fees are recognised when it can reasonably be assumed that the Charity is entitled to the income and the amount can be estimated with sufficient reliability.

Income from trading companies arises from sales of goods in charity shops.

1.6 Expenditure

The costs of inpatient care; community care/outpatients; bereavement services; community action; education, research and policy; and raising voluntary income comprise expenditure both directly and indirectly attributable to the activity concerned. Indirectly attributable costs such as physiotherapy and social work have been allocated to activities using an appropriate cost allocation basis.

Support costs have been allocated to activities on the basis of staff time spent. Governance costs, which are charitable, relate to the stewardship of the Charity's assets, organisational administration and compliance with constitutional and statutory requirements.

1.7 Taxation

St Christopher's Hospice is a registered charity. Income and chargeable gains, which are applied for charitable purposes, are exempt from liability to direct taxation. Income tax recoverable in respect of donations under Gift Aid, investment income and legacies is included with the income to which it relates.

1.8 Capitalisation and depreciation

Tangible fixed assets are capitalised with a £1k de minimis limit where relevant.

If items are individually less than £1k, but are part of a project greater than £10k (e.g. as part of an agreed budget) then these are also capitalised as part of this project.

Equipment is not capitalised if it is less than £1k per individual item, and purchased on a rolling basis.

Assets under construction are not depreciated. Depreciation and amortisation are calculated to write off the cost of tangible fixed assets on a straight-line basis over the expected useful lives of the assets concerned at the following rates:

Leasehold buildings:	over the term of the lease
Freehold buildings:	2% straight-line basis
Freehold refurbishments and fixtures and fittings:	10% straight-line basis
Equipment and motor vehicles:	10% to 33⅓% straight-line basis
Motor vehicles:	33⅓% straight-line basis
Intangible assets:	20% straight-line basis
Shops dilapidations:	straight line over the length of the shop lease

1.9 Pension schemes

St Christopher's Hospice contributes to the St Christopher's Hospice (1985) Pension Scheme, a defined benefit scheme. The pension scheme is administered by Trustees and is separate from the hospice. See note 19 for further details.

St Christopher's Hospice also contributes to a defined contribution scheme. Contributions in respect of the year are charged to the Statement of Financial Activities in the year to which they relate.

St Christopher's Hospice has an arrangement with the NHS that permits members of the NHS final salary pension scheme to maintain their membership when they are subsequently employed by the hospice. The NHS currently provides a subsidy on the contributions payable by the hospice. This subsidy, along with the contribution from St Christopher's Hospice, are recognised in the Statement of Financial Activities in the year to which they relate.

1.10 Operating leases

Rentals payable under operating leases are charged on a straight-line basis over the term of the lease.

1.11 Estimation uncertainty and key judgements

Key judgements and areas of uncertainty are considered to be any defined pension liability and accrued legacy income.

Please refer to note 19 for a detailed review of the relevant assumptions in relation to the defined benefit pension scheme.

Accrued legacy income is calculated on the basis of the valuation of the net estate of each testator, based on management's best estimate. The source of estimation uncertainty is that the valuation of the estates at a point in time is inherently uncertain and can change significantly over a short period of time.

The carrying amount of legacies accrued (note 11) as at 31 March 2025 was £6,861k (2024: £5,857k).

2 NATIONAL HEALTH SERVICE

	2025 £'000	2024 £'000
NHS contracts	9,987	9,357
	9,987	9,357

3 EDUCATION, FEES AND OTHER INCOME

	2025 £'000	2024 £'000
Education	370	250
Fees and other income	590	418
	960	668

4 GROUP UNDERTAKINGS

Summary of results of group undertakings:

2025	St Christopher's Hospice £'000	St Christopher's (Trading) Ltd £'000	Group total £'000
Income	23,950	5,469	29,419
Expenditure	(27,199)	(4,315)	(31,514)
(Deficit)/surplus	(3,249)	1,154	(2,095)
Other recognised losses	(127)	–	(127)
Distributions	1,203	(1,203)	–
Net income for the year	(2,173)	(49)	(2,222)

The net assets of St Christopher's (Trading) Limited were £359k at 31 March 2025.

2024	St Christopher's Hospice £'000	St Christopher's (Trading) Ltd £'000	Group total £'000
Income	22,246	5,295	27,541
Expenditure	(24,700)	(3,828)	(28,528)
(Deficit)/surplus	(2,454)	1,467	(987)
Other recognised gains	1,146	–	1,146
Distributions	1,467	(1,467)	–
Net income for the year	159	–	159

The net assets of St Christopher's (Trading) Limited were £408k at 31 March 2024.

St Christopher's Hospice has one wholly owned subsidiary:

Company	Activity	Company number
St Christopher's (Trading) Limited	Operation of charity shops for the hospice	02604519

Related party transactions

During the year the company entered into transactions with related parties. Transactions entered into and balances outstanding are as follows:

	2025 St Christopher's (Trading) Ltd £'000	2024 St Christopher's (Trading) Ltd £'000
Re-charged to related parties		
Management charge	175	138
Salaries	2,330	2,125
Leasehold depreciation	30	34
Other costs	44	46
Total	2,579	2,343
Balance owed at 31 March	348	2,251

5 EXPENDITURE

	Direct costs £'000	Support costs £'000	Total 2025 £'000	Total 2024 £'000
Costs of generating funds				
Fundraising and publicity	1,868	293	2,161	1,762
Trading activities	4,315	–	4,315	3,828
	6,183	293	6,476	5,590
Charitable activities				
Inpatient care	7,365	1,670	9,035	8,599
Community care/outpatients	10,439	2,400	12,839	11,450
Bereavement services	795	198	993	891
Community action	622	197	819	871
Education, research and policy	1,179	173	1,352	1,127
Total cost of charitable activities	20,400	4,638	25,038	22,938
Total expenditure	26,583	4,931	31,514	28,528

Analysis of support costs

	2025 £'000	2024 £'000
Chief Executive office and governance	302	287
Facilities	1,027	1,022
IT management	1,226	1,197
Finance	433	448
Workforce	1,943	1,730
	4,931	4,684

Support costs have been allocated to activities on the basis of staff time spent.

Included in the costs above are governance costs of £127k (2024: £146k).

6 NET INCOME

	2025 £'000	2024 £'000
Net income is stated after charging/(crediting)		
Auditors' remuneration: audit fee	39	36
Auditors' remuneration: tax and tagging compliance services	5	6
Auditors' remuneration: prior year	(16)	(1)
Auditors' remuneration: pension	9	9
Operating lease rentals: land and buildings	845	797
Operating lease rentals: vehicles and equipment	73	91
Depreciation and amortisation	839	772
Interest receivable	(496)	(620)

7 STAFF COSTS

	2025 £'000	2024 £'000
Salaries and wages	17,162	15,348
Social security costs	1,764	1,552
Pension costs (see note 19 below)	1,356	1,229
Staff costs of the Charity	20,282	18,129
Staff costs of trading activities, which includes pension costs of £99k (2024: £91k)	2,509	2,288
	22,791	20,417

Two payments were made under a voluntary severance scheme this year (2024: £Nil).

The average number of employees during the year (excluding bank) was:

	Head count 2025	Head count 2024	FTEs 2025	FTEs 2024
Inpatient care	86	90	80	82
Community care/outpatients	145	135	122	114
Bereavement services	17	14	11	10
Community action	13	14	11	12
Education, research and policy	12	9	9	7
Fundraising	19	14	16	13
Other hospice (includes support staff)	131	128	105	102
Charity shops	77	71	67	61
	500	475	421	401

The number of employees whose earnings fell within the band:

	2025	2024
£60,000 to £69,999	26	15
£70,000 to £79,999	7	2
£80,000 to £89,999	2	4
£90,000 to £99,999	3	1
£100,000 to £109,999	1	1
£110,000 to £119,999	3	–
£120,000 to £129,999	–	1
£130,000 to £139,999	–	–
£140,000 to £149,999	–	1
£150,000 to £159,999	–	1
£160,000 to £169,999	2	–
£170,000 to £179,999	1	–

Pension contributions of £367k (2024: £220k) were paid in respect of these employees.

The Board of Trustees consider the key management personnel to be the Executive Team of 7.3 FTEs (2024: 7 FTEs) and the total benefit paid to the key management personnel was £960k (2024: £831k).

8 BOARD OF TRUSTEES

Remuneration and reimbursed expenses

No remuneration was paid to members of the Board during either year. Expenses reimbursed to Trustees totalled £525 (2024: £420). £24k was incurred in respect of recruiting Trustees (2024: £15k).

St Christopher's Hospice paid £3,623 (2024: £3,529) for Trustee Liability Insurance for its Trustees.

St Christopher's Hospice also paid £4,234 (2024: £4,032) for indemnity insurance for the Trustees of the St Christopher's Hospice (1985) Pension Scheme.

Donations from Trustees

The Trustees have donated a total of £8k (2024: £14k) during the year, of which £6k was restricted to St Christopher's CARE (2024: £5k).

9.1 TANGIBLE FIXED ASSETS

	Freehold land and buildings £'000	Freehold refurb-ishment £'000	Equipment and motor vehicles £'000	Leasehold land and buildings £'000	Assets under construction £'000	Total £'000
Group						
Cost						
At 1 April 2024	13,192	3,786	2,076	546	12	19,612
Additions	12	321	542	149	437	1,461
Disposals	–	–	(173)	–	–	(173)
At 31 March 2025	13,204	4,107	2,445	695	449	20,900
Depreciation						
At 1 April 2024	3,971	3,758	1,120	469	–	9,318
Amount provided	263	16	404	123	–	806
Disposals	–	–	(173)	–	–	(173)
At 31 March 2025	4,234	3,774	1,351	592	–	9,951
Net book values						
At 31 March 2025	8,970	333	1,094	103	449	10,949
At 1 April 2024	9,221	28	956	77	12	10,294
Charity						
Cost						
At 1 April 2024	12,872	3,786	2,034	466	12	19,170
Additions	12	321	544	59	437	1,373
Disposals	–	–	(173)	–	–	(173)
At 31 March 2025	12,884	4,107	2,405	525	449	20,370
Depreciation						
At 1 April 2024	3,840	3,758	1,088	399	–	9,085
Amount provided	257	16	396	30	–	699
Disposals	–	–	(173)	–	–	(173)
At 31 March 2025	4,097	3,774	1,311	429	–	9,611
Net book values						
At 31 March 2025	8,787	333	1,094	96	449	10,759
At 1 April 2024	9,032	28	946	67	12	10,085

Caritas House, the freehold property in Orpington, was revalued by Jones Lang Lasalle in April 2014. Under the transitional arrangements of FRS 102, the valuation at the date of transition is considered to be the deemed cost of this property.

Additions of £537k within the 'Assets under construction' and 'Freehold refurbishment' categories were funded by the DHSC Capital Grant described in Note 15.

9.2 INTANGIBLE FIXED ASSETS

	2025 £'000	2024 £'000
Group and charity cost		
Cost		
At 1 April 2024	687	656
Additions	102	62
Disposals	–	(31)
At 31 March 2025	789	687
Depreciation		
At 1 April 2024	577	536
Amount provided	33	72
Disposals	–	(31)
At 31 March 2025	610	577
Net book values		
At 31 March 2025	179	110
At 1 April 2024	110	120

10 INVESTMENTS

	Group 2025 £'000	Group 2024 £'000	Charity 2025 £'000	Charity 2024 £'000
At 1 April 2024	25,357	19,362	25,757	19,762
Additions	4,529	4,184	4,529	4,184
Disposals	(3,742)	(2,892)	(3,742)	(2,892)
Increase/(decrease) in market value: realised	33	(39)	33	(39)
(Decrease)/increase in market value: unrealised	(160)	1,185	(160)	1,185
	26,017	21,800	26,417	22,200
Movement in cash balance	(8,649)	3,557	(8,649)	3,557
At 31 March 2025	17,368	25,357	17,768	25,757
Funds managed by Cazenove Capital Management				
UK equities	1,125	1,019	1,125	1,019
International equities	10,751	9,750	10,751	9,750
Bonds	1,104	1,399	1,104	1,399
Property	694	714	694	714
Alternatives: other and commodities	1,716	1,848	1,716	1,848
Cash	1,181	1,703	1,181	1,703
	16,571	16,433	16,571	16,433
Other investments				
Bank deposits	797	8,924	797	8,924
Investment in subsidiary undertaking	–	–	400	400
	797	8,924	1,197	9,324
Total investments	17,368	25,357	17,768	25,757

The historical cost of the investments managed by Cazenove Capital Management is £14,171k (2024: £13,575k).

The Charity owns all of the 400,000 £1 ordinary shares in St Christopher's (Trading) Limited.

11 DEBTORS

	Group 2025 £'000	Group 2024 £'000	Charity 2025 £'000	Charity 2024 £'000
Trade debtors	3,122	924	3,120	923
Legacies receivable	6,861	5,857	6,861	5,857
Sundry debtors, prepayments and accrued income	1,614	1,757	1,242	1,387
Amount due from St Christopher's (Trading) Limited	–	–	348	2,251
	11,597	8,538	11,571	10,418

12 CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	Group 2025 £'000	Group 2024 £'000	Charity 2025 £'000	Charity 2024 £'000
Trade creditors	77	449	77	408
Payroll taxes and social security	701	634	701	633
Other creditors and accruals	1,591	1,148	1,255	925
Income received in advance	105	120	105	120
	2,474	2,351	2,138	2,086

13 LEASE COMMITMENTS

The Group leases a number of properties, motor vehicles and office equipment under operating leases.

	Land and buildings 2025 £'000	Land and buildings 2024 £'000	Motor vehicles and office equipment 2025 £'000	Motor vehicles and office equipment 2024 £'000
Operating leases payments to be made				
Within one year	303	632	58	45
In two to five years	440	1,044	62	83
Over five years	–	–	–	–
	743	1,676	120	128

Land and buildings lease commitments are based on whichever is earlier out of the lease end date and the lease break-point date.

14 FINANCIAL COMMITMENTS

As at 31 March 2025, the following approved commitments were authorised by the Board of Trustees:

- Up to £2.9 million in respect of ward refurbishments. This will be funded through unrestricted, restricted and designated funds.

15 RESTRICTED FUNDS

	Balance 1 April 2024 £'000	Income £'000	Expenditure £'000	Transfers £'000	Balance 31 March 2025 £'000
3 IS Project	11	49	60	-	-
Bromley Homelessness Project	17	-	13	-	4
Candle	102	40	132	15	25
Carers	17	20	20	-	17
Caritas House Building Fund	1,035	-	27	-	1,008
Celebrating Nursing	27	5	6	-	26
Community Action	-	39	38	-	1
Community of Nursing	28	6	5	(24)	5
Dementia-focused training and education	40	-	15	-	25
Developing the practice of palliative nursing	7	-	1	-	6
DHSC Capital Grant	-	537	-	(537)	-
Education (bursaries)	21	17	25	-	13
Home Care	27	20	19	(12)	16
Lavender Room	28	-	2	-	26
Leadership development training	30	-	11	-	19
Nightingale Fellowship hardship bursaries	60	-	27	-	33
NIHR Research	-	115	94	-	21
Patient equipment/premises extension	161	-	-	(91)	70
Research: Stern Legacy	199	-	47	-	152
Room hoists	-	80	-	-	80
Support for St Christopher's CARE	390	-	236	-	154
Wards refurbishment project	70	78	-	-	148
Women in Fellowship Fund	28	16	-	-	44
Other funds	63	128	109	44	126
Total restricted funds	2,361	1,150	887	(605)	2,019

Caritas House Building Fund: this fund was originally established to cover the cost of building Harris HospisCare premises and offices. It now reflects the net book value of Caritas House.

Community Action: supporting older, frail and socially isolated people within the local community.

Community of Nursing: shared learning and support for newly qualified nurses.

DHSC Capital Grant: grant from the Department of Health and Social Care (administered by Hospice UK). Transfers within this fund relate to capital expenditure during the year.

Nightingale Fellowship: hardship bursaries to nurses to assist with living costs.

NIHR Research: grants from the National Institute for Health and Care Research to support research projects.

Patient equipment/premises extension: an amount left in a Will with a specific request for expenditure to be spent on either patient equipment or a premises extension. Transfers within this fund relate to capital expenditure during the year.

Research: Stern Legacy: St Christopher's Hospice was the beneficiary of a restricted legacy for use in research into myeloma and end of life palliative care. Accordingly, the funds have been used to establish a research project into myeloma at the Cicely Saunders International research institution and are being used to fund other research projects in end of life care.

Support for St Christopher's CARE: this fund is restricted to supporting expenditure for St Christopher's CARE in its first years of operating.

Wards refurbishment project: relates to grant funding in respect of our inpatient unit wards refurbishment.

16 DESIGNATED FUNDS

	Balance at 1 April 2024 £'000	New designations and transfers £'000	Balance at 31 March 2025 £'000
Fixed assets	9,369	751	10,120
Strategic Ambitions Fund	3,160	(1,709)	1,451
Wards refurbishment	1,690	347	2,037
Legacies Fund	4,387	–	4,387
	18,606	(611)	17,995

Fixed assets: this reflects the net book value of unrestricted tangible and intangible fixed assets.

Strategic Ambitions Fund: this is a designated fund to focus on projects which will expand St Christopher's charitable impact and to support its long-term sustainability.

Wards refurbishment: these are designated monies to fund a wards refurbishment at the Sydenham site.

Legacies Fund: to set aside legacies income when it has been higher than budgeted in a particular year. This money will then be released to general funds in future years if legacies income is lower than budgeted.

17 ANALYSIS OF GROUP NET ASSETS BETWEEN FUNDS

	Fixed assets £'000	Current assets £'000	Creditors £'000	Total £'000
Restricted income	1,008	1,011	-	2,019
Unrestricted income				
Designated	10,120	7,875	–	17,995
General	17,368	9,625	(2,474)	24,519
	28,496	18,511	(2,474)	44,533

18 CONSOLIDATED STATEMENT OF FINANCIAL ACTIVITIES FOR THE YEAR ENDED 31 MARCH 2024

	Unrestricted funds restated Total £'000	Restricted funds Total £'000	2024 Total £'000	2023 restated Total £'000
Income from				
Donations and gifts	4,482	353	4,835	4,508
Legacies	6,473	62	6,535	7,168
Charitable activities				
NHS funding	9,357	–	9,357	9,013
Education, fees and other income	668	–	668	678
Other trading activities				
Income of trading company	5,295	–	5,295	5,005
Investment income	851	–	851	368
Total income	27,126	415	27,541	26,740
Expenditure on				
Raising voluntary income	1,762	–	1,762	1,552
Trading company	3,828	–	3,828	3,383
	5,590	–	5,590	4,935
Charitable activities				
Inpatient care	8,509	90	8,599	7,819
Community care/outpatients	11,325	125	11,450	9,957
Bereavement services	820	71	891	687
Community action	797	74	871	708
Education, research and policy	785	342	1,127	1,214
	22,236	702	22,938	20,385
Total expenditure	27,826	702	28,528	25,320
Net (expenditure)/income before transfers	(700)	(287)	(987)	1,420
Transfer between funds	83	(83)	–	–
Net (expenditure)/income before other recognised gains and losses	(617)	(370)	(987)	1,420
Other recognised gains/(losses)				
Actuarial (losses) on defined benefit pension scheme	–	–	–	(127)
(Losses)/gains on investments: realised	(39)	–	(39)	479
Gains/(losses) on investments: unrealised	1,185	–	1,185	(1,292)
Net movement in funds	529	(370)	159	480
Total funds at 1 April 2023	43,865	2,731	46,596	46,116
Total funds at 31 March 2024	44,394	2,361	46,755	46,596

19 PENSION SCHEMES

a St Christopher's Hospice (1985) scheme

The hospice operates a pension scheme, the St Christopher's Hospice (1985) Pension Scheme, which provides benefits based on final pensionable salary. The assets of the scheme are held separately from those of the hospice. The scheme was closed to new members in April 2002 and closed to future accruals from March 2010.

Contributions are charged to the Statement of Financial Activities so as to spread the cost of pensions over employees' working lives. The pension charge for the year was £Nil (2024: £Nil).

Triennial valuation

The contribution rates are determined by a qualified actuary on the basis of triennial valuation. The results of the last triennial valuation at 31 March 2022 showed that the value of the scheme's assets was £12,279k (2019: £10,413k) and that this represented 111% (2019: 94%) funding level, with a surplus of £1,226k (2019: deficit of 695k). The actuary confirmed that the minimum funding requirement regulations had been met.

In accordance with the actuarial valuation, the hospice has agreed with the scheme Trustees that it will meet the expenses of the scheme and levies payable to the Pension Protection Fund.

FRS (Financial Reporting Standard) 102: Disclosure Report

FRS 102 is fully effective for accounting periods beginning on or after 1 January 2015. The Statement of Financial Activities, the balance sheet and the disclosures in the notes to these financial statements meet the requirements of FRS 102. The major assumptions used by the actuary are shown below.

Present values of defined benefit obligation, fair value of assets and defined benefit asset (liability)

	Period ended 31 March 2025 £'000	Period ended 31 March 2024 £'000	Period ended 31 March 2023 £'000
Fair value of plan assets	7,546	8,280	8,612
Present value of defined benefit obligation	(6,686)	(7,406)	(7,597)
Unrecognised surplus	(860)	(874)	(1,015)
Defined benefit asset to be recognised	–	–	–

Reconciliation of opening and closing balances of the defined benefit obligation

	Period ended 31 March 2025 £'000	Period ended 31 March 2024 £'000
Net defined benefit obligation at start of period	7,406	7,597
Interest expense	354	360
Acturial losses	(713)	(195)
Benefits paid	(361)	(356)
Defined benefit obligation at end of year	6,686	7,406

Reconciliation of opening and closing balances of the fair value of plan assets

	Period ended 31 March 2025 £'000	Period ended 31 March 2024 £'000
Fair value of plan assets at start of period	8,280	8,612
Interest income	397	409
Actuarial losses	(770)	(385)
Contributions by the Charity	–	–
Benefits paid	(361)	(356)
Fair value of plan assets at end of period	7,546	8,280

The actual loss on the plan assets over the period ended 31 March 2025 was £373k (2024: a gain of £24k).

Defined benefit costs recognised in net (expenditure)/income

	Period ended 31 March 2025 £'000	Period ended 31 March 2024 £'000
Net interest cost	–	–

Defined benefit costs recognised in other gains and losses

	Period ended 31 March 2025 £'000	Period ended 31 March 2024 £'000
Return on plan assets (excluding amounts included in net interest cost): (loss)	(770)	(385)
Experience gains and losses arising on the plan liabilities: (loss)	(6)	(17)
Effects of changes in the demographic and financial assumptions underlying the present value of the plan liabilities: gain	719	212
Effects of changes in the amount of surplus that is not recoverable (excluding amounts included in net interest cost): gain	57	190
Total amount recognised in other gains and losses	–	–

Assets

	Period ended 31 March 2025 £'000	Period ended 31 March 2024 £'000	Period ended 31 March 2023 £'000
Diversified growth assets	2,895	4,082	5,225
Debt instruments	3,292	2,104	–
Liability-driven investments	1,165	1,900	2,913
Cash and cash equivalents	194	194	474
Total assets	7,546	8,280	8,612

None of the fair values of the assets shown above include any direct investments in the hospice's own financial instruments or any property occupied by, or other assets used by, the hospice.

Assumptions

	Period ended 31 March 2025 %pa	Period ended 31 March 2024 %pa	Period ended 31 March 2023 %pa
Discount rate	5.80	4.90	4.85
Inflation (RPI)	3.40	3.40	3.50
Allowance for revaluation of deferred pensions of RPI or 5% p.a. if less	3.40	3.40	3.50
Allowance for pension in payment increases of RPI or 5% p.a. if less	3.20	3.20	3.20
Allowance for commutation of pension for cash at retirement	0.75	0.75	0.75

The mortality assumptions adopted at 31 March 2025 imply the following life expectancies at age 65 years:

Male retiring in 2025:	21
Female retiring in 2025:	23
Male retiring in 2045:	22
Female retiring in 2045:	25

As the pension scheme is in surplus, there is not expected to be any contributions paid by the hospice to the scheme for the period commencing 1 April 2024.

Calculation of pension scheme asset

	£'000
Triennial valuation surplus in 2022	1,226
Less amounts paid by charity 2022-23	(125)
Surplus not recognised	1,101

b St Christopher's defined contribution scheme

The St Christopher's defined contribution scheme was set up in September 2001. In April 2010, the St Christopher's Personal Pension (2010) defined contribution scheme was established and members of the existing defined contribution scheme transferred to this new scheme with effect from January 2011. The contribution of the hospice was on average 21% for former members of the St Christopher's (1985) scheme and 5% for all other members, which represented a total charge for the year of £674k (2024: £622k) to the St Christopher's GPP (2010) defined contribution scheme.

c NHS Pension Scheme

Details of the scheme are provided in note 1.9. The contribution of the hospice was 14.38%, which was offset by a 29% subsidy on the contribution. This represented a net charge for the year of £781k (2024: £698k).

LOOKING TO **THE FUTURE**

In last year's Annual Report and Accounts from St Christopher's, we reported on the first year of our strategy for 2023 to 2026. Two years in, we have made significant progress on our objectives and are on track to achieve considerable results in all areas of our work, as you will have seen from the report on our progress on pages 9 to 27.

We have a lot to look forward to for the future, as we enter the final year of our current strategy and start to plan our next strategic phase.

First and foremost, Steve Smith joined as our new Chief Executive at the end of June 2025. Steve was previously Chief Executive of Havens Hospices and is well known and highly respected in the hospice sector. Both myself and the whole Board look forward to working with him and welcoming him to our community.

St Christopher's has always remained true to Dame Cicely Saunders' legacy as a pioneering and progressive hospice serving the people of south east London. Steve is an innovative and ambitious leader who will be an ideal fit for St Christopher's going forward. The hospice sector faces many challenges at the moment, and that requires strong leadership in the hospice and the sector. I am confident we shall have this in Steve.

As we look forward to this new phase, I also want to express my thanks to the fantastic leadership team at St Christopher's, who have driven the organisation forward over the past 12 months. In particular, I want to thank Jan Noble, who as Interim Chief Executive provided inspirational leadership through a period of inevitable uncertainty.

As the next financial year unfolds, we will start our planning for our next strategic period. This will see us building on the strengths and the successes of the current strategy, with our organisational values as our steadfast guide for the path we will take, and the care and support of our community, diverse and personalised, at the heart of everything that we do.

To achieve this, tackling inequalities, including the ability to access end of life care and bereavement support within our community, will remain central to our work and our mission as an organisation. As is shown in our report on progress from pages 9 to 27, this area of our work underpins so much of the care and support we provide, and is central to our mission, as a hospice and a charity.

In our work to break down barriers and improve accessibility to all, we need to look inwards, as well as outwards. This is why we will embark on a comprehensive training programme for all our staff and volunteers, to ensure we are all skilled and knowledgeable about diversity and belonging. This is so we can make sure we speak to everyone, we include everyone, and open our doors to anyone who might need us.

> **"I must pay tribute to the outstanding work carried out – day in, day out – by everyone at St Christopher's to make sure we provide holistic, personalised and compassionate care to all our patients and their families, here in the hospice and in their own homes."**

With our work on tackling inequalities remaining a solid foundation for how we operate as an organisation, we will also continue to take a leading role, as the first modern hospice, in shaping palliative care for the better, nationally and internationally. Our work towards influencing the NHS 10 Year Plan, in championing the importance of end of life care within the broader national health provision and the need for greater, sustained investment and funding, will continue and grow over the next strategic phase, building on all that we have achieved so far, through partnerships and collaboration, with the voices of our community at the heart of everything that we do.

The Terminally Ill Adults (End of Life) Bill has recently had a third reading in the Commons, which has been passed by a small majority onto the next parliamentary phase, which will see it go under review in the House of Lords. We continue to monitor the process closely, take all opportunities to make our voice heard and to influence policy-makers around the complex and highly sensitive nuances and resource considerations that a potential new law could mean for the hospice sector. At the same time, we remain acutely aware of the many concerns and emotions our staff and volunteers are facing throughout this process, and we will remain absolutely committed to supporting them each step of the way. The Board and the Executive Team will continue to have an open-door policy to anyone who wishes to ask questions, express their concerns or who may need support as the legislation progresses.

Our chefs, like Michael, provide a variety of meals throughout the day for all tastes

As I mention our staff and volunteers, I must pay tribute to the outstanding work carried out – day in, day out – by everyone at St Christopher's to make sure we provide holistic, personalised and compassionate care to all our patients and their families, here in the hospice and in their own homes. With all my heart, thank you, all of you.

The demand for our services will continue to grow in the coming years, so the need for highly skilled, committed and passionate individuals and teams, whether in clinical or non-clinical roles, will also continue to grow, and will be fundamental to St Christopher's being able to deliver care and support to our community, as it always has since 1967.

I am proud to be able to chair this Board, and to be able to speak of the great successes St Christopher's achieves year-on-year so consistently. Here's to another challenging, rich and inspiring year.

NEIL GOULDEN
Chair of Trustees

THANK YOU TO ALL OUR SUPPORTERS

We are, as always, immensely grateful to the individuals, corporate sponsors and trusts who continue to support us at St Christopher's.

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- Addington Court Golf Club Veterans
- Aitch & Aitch
- Alan De Maid Estate Agents
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- Berry Palmer & Lyle Limited
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- IdentityE2E
- Irwin Mitchell
- Jet's Charitable Trust
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- Lancashire Insurance Company (UK) Limited
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- Masonic Charitable Foundation
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- Mazzini Garibaldi Foundation
- Merriman Charitable Foundation
- Metropolitan Police (Hayes) Bowls Club
- Michelmores LLP
- Mishcon De Reya LLP
- Mr & Mrs A M Hendry Charitable Trust
- National Lottery Community Fund
- North Downs Orbit Club
- Oakfield Lodge Number 7011
- Old Askean Masonic Lodge No. 6986
- Old Wilsonian Lodge No 6602
- Orpington Road Runners
- PaulFest
- Payne Hicks Beach LLP
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- Pentex Ltd
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- Ray Jones Roofing Ltd
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- TEAM LEWIS Foundation
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- The Ali Cowden Golf Day
- The Anthony and Elizabeth Mellows Charitable Settlement
- The Anthony Gold Solicitors Charitable Trust
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- The Burdett Trust for Nursing
- The CA Redfern Charitable Foundation
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- The Douglas-Morris Charitable Trust
- The Elizabeth & Prince Zaiger Trust
- The Elizabeth Frankland Moore and Star Foundation
- The Eversley Charitable Trust
- The February Foundation
- The Florabella Trust
- The Freddie Green and Family Charitable Foundation
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- The Hill Public House
- The Hit or Miss
- The Horner Family Charitable Fund
- The Hospital Saturday Fund
- The Institute of Our Lady of Mercy
- The John Horseman Trust
- The K.P Ladd Charitable Trust
- The Lord and Lady Lurgan Trust
- The Mackie Foundation
- The Mageni Trust
- The Margaret and David Walker Trust
- The Michael and Anna Wix Charitable Trust
- The Michael Cowan Foundation
- The Milton-Lloyd Charitable Trust
- The Morgan and Sarah Charitable Trust
- The Oddfellows
- The Percy Bilton Charity
- The Peter and Olive Ward Charitable Trust
- The Robert Holman Memorial Trust
- The Screwfix Foundation
- The Timothy Franey Charitable Foundation
- The Weald Of Kent Golf Club
- The William Allen Young Charitable Trust
- The Woodroffe Benton Foundation
- Universal Music Operations Limited
- Victoria Miro Gallery
- Walder Wyss Ltd
- Wandle Lodge No. L2699
- Wates Foundation
- West Kent Golf Club
- West Wickham Allotment Association
- West Wickham Lodge No. 2948
- Westminster Waste Ltd
- Wilsons Solicitors LLP
- Withers LLP
- Women in Fellowship.

MEET THE TEAM

EXECUTIVE TEAM

STEVE SMITH
Chief Executive

TOM ABBOTT
Director of Income Generation and Communications

AMANDA MAYO
Care Director

JAN NOBLE
Director of Quality and Innovation

GUY PERYER
Director of Education and Research

DR JOY ROSS
Lead Consultant in Palliative Care

JOHN VICKERS
Director of Finance and Corporate Services

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Chair

ELEANOR BROWN
Vice Chair

VIVIAN BAZALGETTE
Trustee

GLENDA BONDE
Trustee

NICK DIAMOND
Trustee

SIMON HALL*
Trustee

TONY HUNTER
Trustee

RHODA IRANLOYE*
Trustee

IAN JUDSON
Trustee

DANIEL KELLY OBE
Trustee

ANN KENRICK OBE*
Trustee

JOHN KING
Trustee

DAVID LOCKYER**
Trustee

PHILIPPA MARTINELLI*
Trustee

CATHERINE MCDONALD
Trustee

SATVINDER REYATT
Trustee

DEEPTI TOWNSEND
Trustee

*Appointed 1 April 2025 **Appointed 1 November 2024

PATRON

HRH PRINCESS ALEXANDRA

AMBASSADOR

TOM ALLEN

PRESIDENT

LORD IAN MCCOLL

VICE PRESIDENTS

MORGAN JONES MBE
RODNEY BENNION OBE
DR CATHERINE DENT
DR TYRRELL EVANS
DR GILLIAN FORD CB
DAME SHEILA HANCOCK OBE
DAME PAULINE HARRIS DBE DL
JOHN RHODES
BARBARA RICHARDSON
COLIN RUSSELL
Deceased July 2024
RUTH SAUNDERS

COMPANY SECRETARY

JOHN VICKERS

REGISTERED OFFICE

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Sydenham
London SE26 6DZ

BANKERS

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A SPECIAL THANK YOU

We'd like to remember and acknowledge the significant contribution of Colin Russell to St Christopher's. Colin first became involved with St Christopher's in the early 2000s and his support enabled us to launch initiatives including the school engagement programme that has been emulated internationally. His kindness and generosity continue to make a difference to the people we support.

ST CHRISTOPHER'S

END OF LIFE CARE **THAT'S ALL ABOUT YOU**

ST CHRISTOPHER'S

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Registered charity 210667
registered with the Fundraising Regulator
Registered company number 00681880

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If you would like this information in a different format, such as audio tape, braille or large print, or in another language, please speak to the Communications team on **020 8768 4500** or email **communications@stchristophers.org.uk**.

ST CHRISTOPHERS HOSPICE

England & Wales - Charity number 210667

Accounts

ST CHRISTOPHER'S

ST CHRISTOPHER'S HOSPICE

ANNUAL REPORT AND ACCOUNTS 2023-24

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"You matter because you are you and you matter until the last moment of your life"

DAME CICELY SAUNDERS Founder of St Christopher's and the modern hospice movement

ABOUT ST CHRISTOPHER'S

St Christopher's supported almost 6,500 people in the last year

At St Christopher's Hospice (referred to as 'St Christopher's' in this document), we have a vision of a world in which all dying people, and those close to them, have access to care and support, whenever and wherever they need it.

St Christopher's believes that people matter. Every person who comes into contact with the hospice, whatever their background or circumstance, will receive the care and support they need. After all, each person is unique.

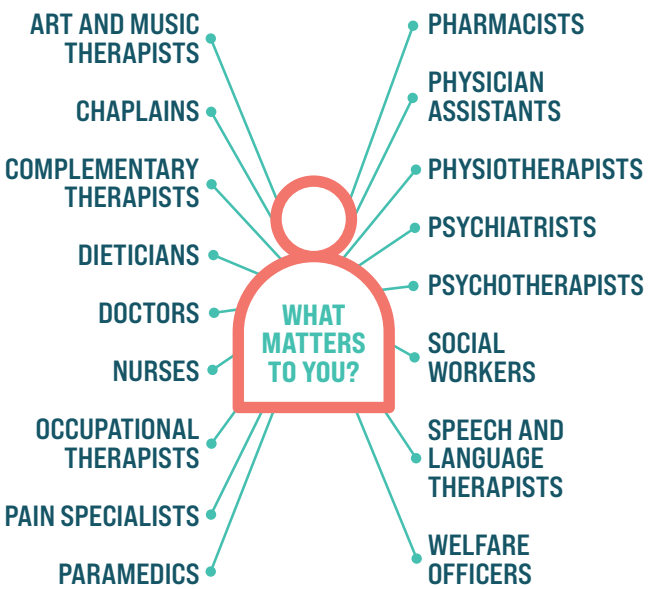
For some that may mean being cared for in their own home surrounded by family and things that are important to them. For others, it may mean being able to talk openly about their illness with people who are going through a similar experience. It may even be as simple as being able to listen to their favourite music whilst eating breakfast during a stay at the hospice.

Whatever the wish, we do our best to make it happen. That's because we aim to help people live well until they die and support those affected by the death of someone close.

Operating from two locations, one in Sydenham and one in Orpington, our efforts are focused on meeting the goals of people with a life shortening condition and supporting their families and carers wherever we can. Our reach spans across a diverse population of approximately 1.6 million people within the five London boroughs of Bromley, Croydon, Lambeth, Lewisham and Southwark.

Last year, we provided care and support for almost 6,500 people across our five boroughs. In this report you'll hear some of those people's stories and what we did to help them through these challenging times.

We also offer more than you might expect – below you will see examples of the different professionals who provide care and support for people in our community, to give you a flavour of the breadth of support available.



ENSURING WE ARE THERE **WHEN YOU NEED US**

Welcome to the Annual Report and Accounts of St Christopher's Hospice.

In recent months, hospices and end of life care have been getting significant press and political coverage – largely due to the ongoing government and societal discussions on funding as well as the debate on whether assisted dying should be legalised in the UK. Both of these topics have been a focal point at St Christopher's.

You may not be aware that we receive just 34% of funding towards our running costs from the NHS. That means that the majority of our care and support is funded by the community who run marathons, visit our charity shops and leave gifts to us in their Wills. Thanks to them we can be there for people when they need it most. However, with growing numbers of people needing our care and support, we need to ensure our income levels are sustainable. That's why St Christopher's, along with 220 other hospices across the UK, have been working with Hospice UK to try to improve the current funding regime. Whilst a recent House of Commons debate was a step forward, this journey is still in its early stages. You can read more about how our work is funded on page 7.

We have also been engaging with staff, volunteers and the public to better understand their views on assisted dying and begin to consider, together, whether assisted dying might be considered to be part of palliative care in the UK in the future. This is a challenging issue and we acknowledge the wide-ranging views held by the public and professionals. However, it is important we engage with this complex issue so we are all informed and prepared – a feeling shared by those who participated in these discussions. You can read more about our work in this area on page 26.

Last year we provided care and support for almost 6,500 people whilst our teams completed 15,208 visits to support people in their own homes. This represents an increase of 10% on the number of visits completed the previous year. With this consistent rise in need year on year, coupled with the marginal funding available via the NHS, it's imperative we explore new ways to raise income. This year, our Fundraising and Communications teams joined forces to create our first-ever online fundraising campaign called *What Matters Most*. Lasting just 36 hours, the campaign raised an outstanding £625,000! You can read more about this phenomenal feat on page 22. To support income generation, our Retail team also proudly opened a new shop in West Dulwich offering high-end clothing and accessories. In the first three months this store has raised £53,700 as well as generating an additional £7,500 through Gift Aid – read more on page 23.

St Christopher's offers a wide range of support, including carers support groups

"Without people like you, we wouldn't be able to be there for people when they need us most."

The Board of Trustees at St Christopher's is committed to reducing inequalities in end of life care and to meeting the growing demand for the specialist care that we provide to those approaching end of life.

Throughout this report, you'll read about our continued work to tackle inequalities so that everyone who needs us, no matter who they are or their background, feels able to and can access our services. We continued to meet this need through introducing new roles and services as well as working directly with people in our community to better understand why they may choose not to access our services. We've already acted on these findings through developing a new visual and verbal identity that breaks down those barriers and by launching a campaign to raise awareness of who we are, what we do and how we might help. You can read more about this work on pages 9 to 18.

I do hope you enjoy reading about the work of St Christopher's over the past year. I'd like to take this opportunity to personally thank the staff, volunteers and my fellow Trustees for their continued hard work and dedicated service. I'd also like to thank you for your ongoing support of the charity – without people like you, we wouldn't be able to be there for people when they need us most. Thank you.

NEIL GOULDEN
Chair of the Board of Trustees

OUR **VISION, VALUES AND AMBITIONS**

OUR VISION

A world in which all dying people and those close to them have access to equitable care and support when and wherever they need it.

OUR VALUES

- Pioneering and bold
- Of and for the community
- Empowering and compassionate
- One team working together
- Expert
- Stronger through partnerships

OUR STRATEGIC AMBITIONS

- Tackle inequalities
- Equip the future workforce
- Fulfil a national and global leadership role
- Create a sustainable business model
- Tackle ethical issues

Last year, we launched our new strategic ambitions for the next three years. Throughout this report, you'll read about our progress against these strategic ambitions in the year one of our strategy.

St Christopher's supports people to live well – our rehabilitation gyms are a key part of that

OUR YEAR IN SUMMARY
2023-24

We provided care and support for 6,459 people

We provided care and support for 4,276 patients

We supported 466 children through our Candle bereavement service

We ran 5,243 in-person or face-to-face adult bereavement sessions

We supported 1,717 carers

We had 650 inpatient admissions

We carried out 15,208 home visits

We provided 5,199 outpatient appointments

People connected to learn with CARE almost 15,000 times

CARE reached 92 countries worldwide

99% of learners were likely or somewhat likely to recommend CARE to others

6,901 people attended CARE events

493 people attended eight CARE conferences – that's an average of 61 per event

Through our learners, we reached over a third of UK hospices – that's 82 other hospices

14,417 supporters donated money to us

8,185 supporters played our lottery and raised £574,670

1,855 supporters raised £625,000 when they took part in our 'What Matters Most' campaign

620,000 customers supported us in our shops

1.3 million items were sold in our shops

1,215 volunteers supported us, of which 39% had done so for more than three years

The cost to run all St Christopher's services was £28.5m

We need to raise over £16.4m every single year to provide our services

WHAT WE DO WITH **YOUR MONEY**

Just 34% of our services are funded by the NHS – for the rest we rely on the generosity of our supporters

It is thanks to the incredible generosity of our supporters that we are here. Your kindness means we are able to provide care and support for people in south east London and beyond when they need us most.

WHERE OUR MONEY COMES FROM

An incredible £16.7m (61%) of our income is from people in our community, donated through fundraising activities, leaving gifts in Wills or buying pre-loved items in our shops. We are so very grateful for the money you donate, and we are careful to spend and invest it wisely in ways that will best serve the people who need our support.

We are also very thankful for the money we have received from the NHS, which comprised £9.4m (34%) of our total income.

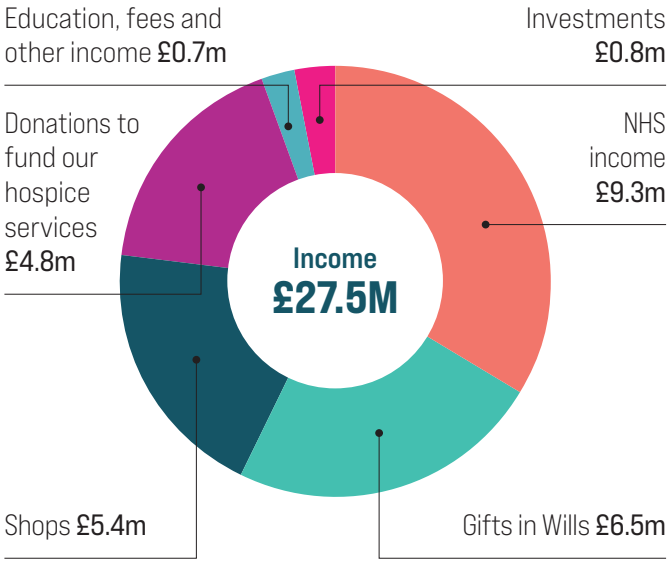
Our remaining income comprised £1.5m (6%) that we generated from education, fees and investments, and other income.

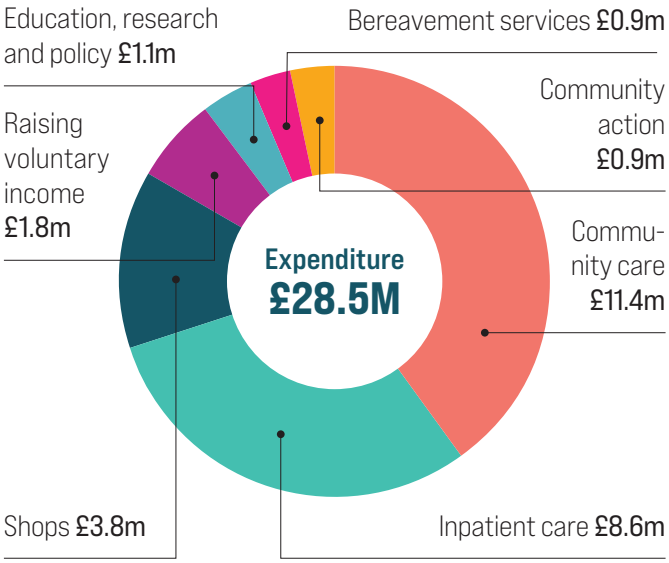
The total income of £27.5m raised this year enabled us to continue providing care to people who live in the boroughs we serve – Bromley, Croydon, Lewisham, Lambeth and Southwark – as well as shaping care for people across the globe through education, research and innovation.

WHERE OUR MONEY GOES

It cost £28.5m to run St Christopher's in 2023-24. Here's a breakdown of how we spent the money you gave us.

Our full financial review starts on page 34.





WHAT PEOPLE SAY ABOUT US

At St Christopher's, we're committed to continually improving and developing the support and services we offer, ensuring they meet the changing and diverse needs of the communities we serve.

To make sure we're doing this effectively, we regularly measure and report on the impact we have, both to the health and wellbeing of people receiving our support and their experience of our care.

Over the last year:

- **98%** of people who used our service felt they were always or usually treated with respect and dignity by hospice staff (*Your views on our care* survey)
- **96%** of outpatients/patient visitors said they were very satisfied or satisfied with the support they received at our Sydenham site (captured via our Inventory signing-in/out system)
- **93%** found the staff/volunteers very helpful or helpful (captured via our Inventory signing-in/out system).

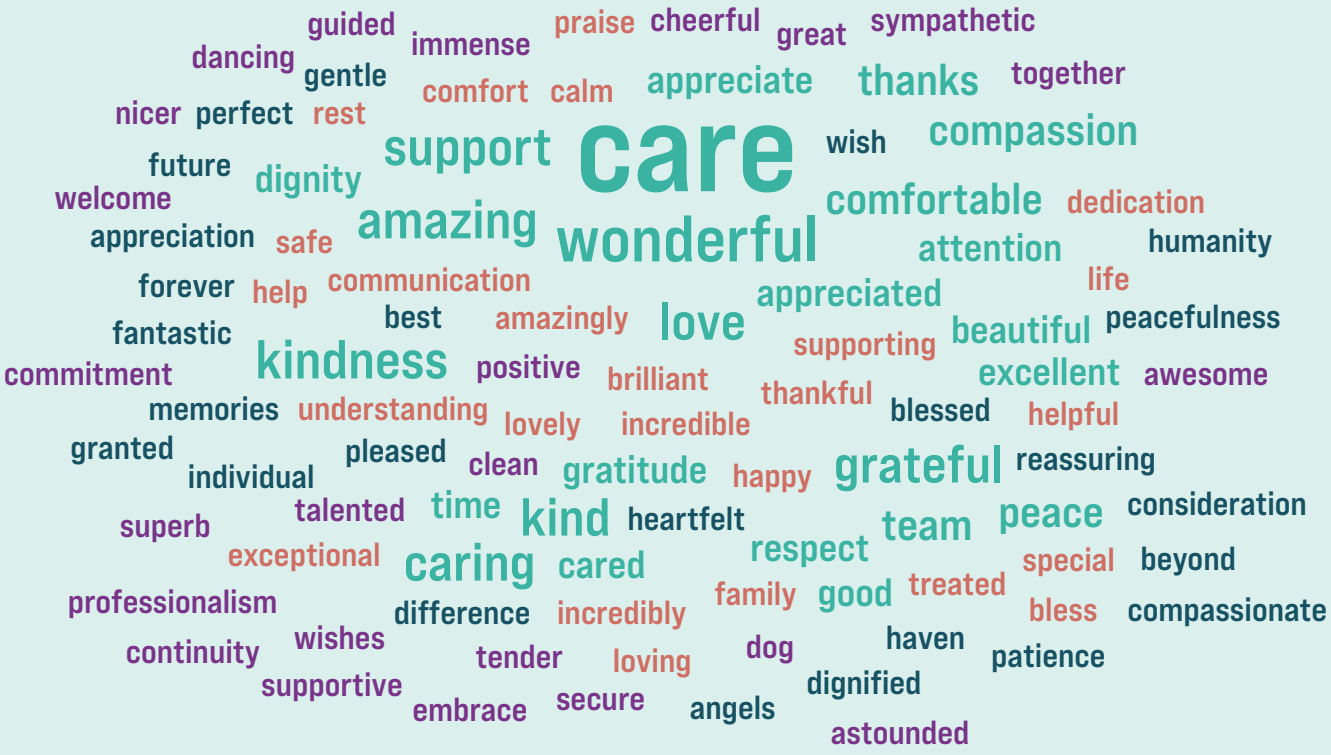
The team on our wards also received 292 compliments. Below is a word cloud of just some of the words people used.

"It was a haven where finally there seemed to be some peace."

"I know Mum was a stranger to you, but she was treated like a family member."

"I had never been to a hospice before. I was really nervous walking in but from my first step inside, all I felt was love and kindness. It is an amazing place."

"Everyone has been very friendly and helpful and welcoming, which made me feel as though I was at home."



PROGRESS AGAINST OUR AMBITIONS

Last year, we launched our new strategy – with five key ambitions for the next three years. Over the next few pages we've shared our progress against these so far.

≠ Tackle inequalities

CONTINUE TO DEVELOP CLINICAL EXPERTISE TO DELIVER HIGH-CLASS PALLIATIVE AND END OF LIFE CARE ACROSS OUR FIVE BOROUGHS, AND TO DEVELOP SUSTAINABLE AND IMPROVED RELATIONSHIPS ACROSS THE WHOLE HEALTH ECONOMY

SUPPORT FOR PATIENTS, FAMILIES AND CARERS

In 2023-24, we supported 4,276 patients. On our wards, 650 people stayed with us, which represents an increase of 18% compared to the 547 people who stayed with us in 2022-23. However, the majority of people we cared for were in their own homes. Our Community teams completed 15,208 home visits – an increase of 10% on the previous year. The team also completed 5,199 outpatient appointments.

This large increase in home visits, which continues to grow year on year, represents the fully holistic care and support we provide, and the depth and breadth of support we offer across our boroughs. This increase also reflects a new referral process, a new model of working and projects such as Virtual Wards – you can read more about this on page 11.

Panna's story

For nurse Panna Siddiqui, the hardest thing about having inoperable, Stage 4 cancer is giving up the job she's loved for 40 years and accepting care and support from St Christopher's.

That's not to say she doesn't appreciate the care she's received. In fact, she can't speak highly enough of what the hospice has done for her and the way in which everyone involved in her care has treated her. It's just the challenge of coming to terms with having to trade places.

"I want to be giving care, not taking it," Panna, 63, insists. "It's not easy to accept the role reversal. I just love being a nurse, helping anyone I can. And I love it when I can see how appreciative they are and the smile on their face."

What matters most to Panna now is staying at home. Her family and the team from St Christopher's have made her feel confident she can fulfil that wish.

"Even before I had my diagnosis, I always told my boys that I would want them to bring me home. I don't want to be anywhere else in the last stages of life and Helen, one of the consultant nurses at St Christopher's, has reassured me that she will be here with me when I need her. With everyone's support and help I can be strong and I can die in my own house."

A programme of sessions with a cognitive behavioural therapist from St Christopher's at her home, has helped Panna reconcile the need to accept care and to feel more comfortable asking for help. That's just one of the services Panna has accessed since her referral to St Christopher's in 2022 following her diagnosis.

"Thankfully they just took over. I was in so much pain that I couldn't do even the most basic tasks. With the pain management regime they worked out together I am much better and I'm able to do more things myself. I can't thank them enough, they are all so supportive.

Looking back to when the hospital consultant referred her to St Christopher's, Panna recalls her immediate response: "My first thought was this is the end of life. It's just going to be comfort measures now. It was scary because only a few months before I had been symptom-free and now I was in the care of a hospice and coming to the end of life.

"But it's not quite like that with hospice support. I'm not able to live completely independently, but I have quite a bit of independence and I am certainly not bedridden. If they hadn't helped me, I would be done. I realise now that I can't work and have lost a lot of my independence, but I have got my family and they support me so much."

Panna takes huge comfort not only from the hospice team, but also from her family – husband Dilbagh, sons Arman and Aqeel and two-year-old grandson Adam who visits every day.

Panna with her family at home

NEW REFERRAL PROCESS

In the summer of 2023, the Clinical team embarked on a project to enhance the hospice's referral system. The aim of the streamlining process was to further accelerate referrals and ensure even greater continuity of care. The new system, introduced at the end of 2023, sees referrals colour coded in terms of clinical need, as previously, and then the hospice's senior nurse will call the person immediately to introduce themselves and the hospice and to arrange a convenient time for a home visit or for them to come to outpatients. The feedback has been overwhelmingly positive, with people sharing how impressed they are when a member of the team contacts them on the same day. Continuity has also improved and the total number of referrals to the hospice has increased by more than 13%.

HOMELESS PROJECT

The Bromley Homelessness Project started in April 2023 with one-year funding to build on a previous, similar project in Croydon The two boroughs have very different populations, with very varied demographics, so we wanted to know if the learning from one borough could be applied to the other, or whether a completely different strategy would be required. The goal was to develop, pilot and roll out a sustainable model for embedding multidisciplinary, person-centred care and support for sick homeless people.

The aim was for palliative care specialists to deliver training and support for hostel and outreach staff and Community Palliative Care teams, with a focus on supporting residents with advanced or deteriorating health by integrating multidisciplinary working into routine practice. The hope is for this to be developed in a way that can be sustained, and embedded, into the normal practice of the hospice/palliative care community.

The Bromley Community Palliative Care team identified two members of staff to become the 'Homelessness Champions' for their service who would take on the work for this project; one clinical nurse specialist and one social worker. Leadership, further involvement and support is provided by a senior social worker, a nurse consultant and a medical consultant on an as needed basis.

WHAT MATTERS TO YOU

Every person who receives care and support from St Christopher's is asked this powerful question: 'What matters to you?' We pride ourselves on providing person-centred care and by asking this important question we can

Alan's story

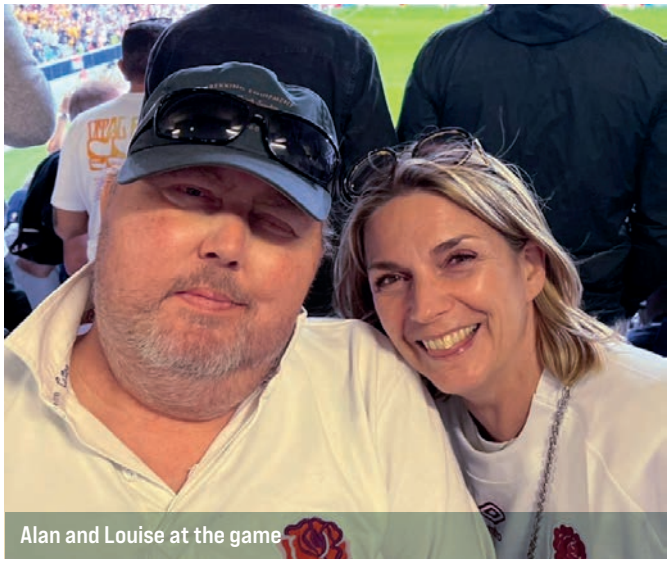
When Alan was asked 'What matters to you?' his response was instant: watching England's Rugby World Cup game against Samoa in Lille. "Once they realised it was a goal that he wanted to achieve, Dr Sara and the team were all over the pain relief," Louise, Alan's wife, shares.

To prepare for the trip to Lille, Alan had a brief admission to the hospice's inpatient unit – fittingly on Rugby Ward – to get his medication levels right. After that first match, buoyed with optimism, Alan secured tickets for England's quarter-final win against Fiji and then the subsequent semi-final defeat in Paris against eventual winners South Africa. That trip was booked with all the lads in the pub at 10.30pm, just six hours before they left for Paris.

It was not all plain sailing during the trips over to France, though. With Louise not there in Paris, his nephew and sons were in charge of the medication as well as helping with the wheelchair. "They nearly piled me out of it a few times," Alan says, adding: "To be honest, people looked at us like we were mad."

The couple are also full of praise for the support they have received from the NHS and St Christopher's."I've been blown away by the amount of support we've had," says Louise. "When you first hear about palliative care in hospital, you think 'have we been written off?' A lot of people don't realise that palliative care means helping with pain and helping to live. They just think you've got hours to live but it's not like that," she adds.

"That's what I thought, to be honest," says Alan. "But it's not true. St Christopher's has been amazing, the place is really great, Dr Sara, the nurses, receptionists, everyone is amazing."



Alan and Louise at the game

Last year, Miguel and his team completed over 15,000 visits to support people in their own homes

make sure we work with people to achieve the things that are important to them. This might be being able to take a trip to the pub, visiting elephants at the zoo or meeting a Crystal Palace player – all goals we have supported people to achieve in the last year. "Life may be short but that doesn't mean it can't be lived in glorious technicolour" – as one person so eloquently said when we recorded their story recently.

VIRTUAL WARDS

Collaborating with Bromley Healthcare, we started on a Hospital at Home (Virtual Ward) project in June 2023 to support people to be cared for in their own homes and to save five acute hospital beds a day. Two senior nurses from St Christopher's plus a local GP contact a caseload of up to five patients, either in-person or via a phone call, for up to seven days. The project has succeeded in keeping people at home and out of hospital and two thirds were seen within four hours of referral. Half of them went back under St Christopher's care. Meanwhile, in Lambeth and Southwark, the hospice has just launched a similar programme with the aim of saving 10 hospital beds a day by the end of 2024.

DOULA SERVICE

As part of St Christopher's ongoing commitment to overcome inequalities and inequities in health, and specifically end of life care, the hospice has successfully secured funding for a trained, professional end of life doula. An end of life doula is a non-medical, holistic practitioner who assists in the dying process offering support, presence, companionship, education and advocacy for both the dying person and their family. In a 15-month project starting in the summer of 2024, the doula will support anywhere between one and five people at a time, identified by the Croydon Community team. The doula will advocate for them, signpost them to available services and effectively walk the end of life journey with them, helping them understand what it means to have meaningful conversations and to achieve what they want at the end of life.

MORTALITY MEETINGS

Mortality Meetings (MMs) play an integral part in reflective practice and improving patient care whilst also identifying learning needs and improving clinical practice. The aim of the meetings is to maximise learning from patients' deaths to improve patient care and allow multidisciplinary team debriefing and support.

In the last six months, MMs have been increasingly well attended. Initially there were around 20 participants, and this has increased to increased to around 50 attendees. Participation has been wide reaching with fundraising, telephone administrators, Trustees, bereavement,

psychosocial and all clinical teams joining. The inclusion of local hospital palliative care teams and district nurses has helped to further stimulate debate and collaboration.

Keyworkers affected by deaths have found these sessions a supportive space in which to debrief. In the coming year further consideration needs to be given to how best we share this learning.

BEREAVEMENT SUPPORT

Our Bereavement services are receiving more referrals for support which contain indicators of vulnerability or risk. We have worked collaboratively and creatively to keep developing our approach to assessing risk and managing safeguarding.

The specific focus this year has been upskilling all staff to be able to hold a tender conversation about suicidality with grieving individuals. We are also extending the reach of our early intervention strategy. Since the inception of Helping Your Bereaved Child information sessions in April 2023 – introduced to offer psycho-educative support whilst families are waiting to be seen – 68 parents/carers/trusted adults have attended.

Jane's story

September 26 marked the second anniversary of Michael Mogford's death. For his widow Jane, there was a long period when she really didn't think she could cope without him. That is until she found the Bereavement Help Point group at St Christopher's. Now, after a year or so of weekly get-togethers, with a new, tight-knit group of friends, Jane feels strong enough to rebuild her life, has moved away from London and is looking for work.

Nursery worker Jane, 55, and university superintendent Michael, married in 2004, 14 years after meeting for the first time, and lived happily in Crystal Palace for seven years, until he was diagnosed with dementia. Jane then juggled work and caring for Michael at home right up until his death in September 2021 aged 82.

Two months after Michael died, Jane was struggling to come to terms with her grief and decided to seek help. "Because I'd had the experience of losing both my parents by the age of 21 and knew how terrible I felt then and how long that feeling had lasted, I thought maybe I should get some help, but I was worried they'd think I was stupid because it had only been a couple of months."

When Bromley Hub suggested contacting St Christopher's, Jane dismissed the idea at first, even though Michael had been a volunteer driver for us many years earlier.

"I knew nothing about the hospice. I just thought, why would I go there. I'm not going to die. But I phoned them and of course they didn't think I was an idiot. Instead, they just showed me love, care and humour. The first few times I went to the group, I spent a lot of time in tears. It was just a small group then with everyone in a similar position – they've all lost someone and are all on the same wavelength."

Jane says for any outsider observing them you'd sometimes struggle to know they were a bereavement group. "We don't tend to look ill, upset or worried and sometimes people just want to talk about the football or even just sit and listen. But it has been amazing and really changed my life. Recently, I've been helping some of the newcomers settle in too. Like a true south Londoner, I tell them 'this c*#p does get better!'"

Moving to the Isle of Wigh (another place she and Michael used to enjoy visiting) this month means Jane won't be able to attend the Thursday morning sessions anymore. Jane says though that she definitely won't be severing ties with the group that now boasts around 20 regulars, about half and half, men and women, with a good mix of ages too.

"There's a core group of us that have become very close, and we've been on trips together to Greenwich and Battersea Power Station. In fact, a posse is threatening to come and visit me here on the island.

"It's so different to anything else I have ever experienced in my life and the volunteers are amazing. I want Michael back, especially now I'm living here as it's perfect for him. But this group of all different personalities has been the best possible therapy for me and I would recommend it to absolutely anyone."

Jane at the Bereavement Help Point group

Isobel

Isobel's story

Isobel, Heart Failure Nurse for St Christopher's, joined the hospice to lead this project in Bromley which has seen the successful integration of palliative care and mainstream heart failure nurses and doctors.

What does that success look like? Isobel's proud to relate that the success is threefold. A huge drop in hospital bed days, substantial cost savings and improved quality of life. "By treating the psychological impact of a life-limiting condition and adopting a rehabilitative approach we've been able to add life to years and not just years to life."

Building on that success in Bromley means Isobel and her colleagues are now extending their reach in that borough and are taking the model to Croydon. It's certainly going to plan so far. The aim was to reach 150 new patients across Bromley and Croydon within 12 months. They've exceeded that target after just nine months.

Long term, she says, the hope is to roll it out across all the boroughs St Christopher's covers. And, perhaps even more ambitiously, Isobel wonders if this integrated approach could be applied to other conditions, like neurological.

Isobel is keen to share real-life examples of the difference this integrated service is making to the lives of south London people living with heart failure. She shares the experience of a woman in her late 80s who has dementia as well as heart failure. It came as a shock to her and her husband when the hospital referred her to St Christopher's, and they didn't understand that the condition was life-limiting nor see the need for palliative care.

"I went to see them with a colleague and the referral really hadn't gone down well," Isobel recalls. "But we were able to win them over quite quickly because we were able to administer some treatment there and then that wouldn't normally be done outside hospital.

"She went back to living a pretty good life, she received some rehabilitative care to build up her mobility and we supported them to get the benefits she was entitled to. We also spent time with them talking about end of life care, what mattered to her and her wishes.

"Her husband was particularly full of praise because he could see how the focus had shifted from treatment that wasn't really working, to an emphasis on quality of life for them to spend together."

It's not just the patients and their carers who are feeling the benefit, Isobel says. "The reception from our health colleagues across the borough has been so positive. Being a point of contact and another source of support has made a real difference. Doctors are saying thank goodness they've got somewhere they can go that gives them and their patients hope. And the engagement with and support from consultant cardiologists has been excellent. We're both happy to ask each other for advice."

TACKLE MISCONCEPTIONS ABOUT HOSPICE CARE AND SUPPORT

ENSURING PEOPLE SEE ST CHRISTOPHER'S AS A PLACE FOR THEM

Over the last year we worked with our communities and key stakeholders across London to better understand the misconceptions people have around hospice care and what barriers may stop them from accessing our services.

Over 1,000 people shared their views with us and, together, we reimagined how we look and describe what we offer. By doing so, we hope to ensure people feel comfortable engaging with the hospice and see St Christopher's as a place for them.

Our new branding was officially launched in Hospice Care Week (9-15 October 2023) and the roll out continues across our hospice sites and shops. We also created an awareness-raising campaign which ran in November and February. The campaign featured stories of real people across the communities we serve and focussed on breaking down the barriers to access identified through the public research. These stories featured on almost 200 out of home poster sites across all five of the London boroughs we serve as well as through short films on our social media channels. Each poster site was tailored to reflect the

Our team of volunteers provide support and companionship at the hospices

Zaffar shares what matters to him – a question we strive to ask everyone we support

area of the community it was displayed in so people could 'see people like them' – one of the key feedback themes we heard through the research. We also translated each quote featured to the second most highly spoken language in each area to improve access for people whose first language isn't English.

BRINGING DEATH AND GRIEF TO MAINSTREAM MEDIA

We know that many people don't feel confident talking about death and their wishes for end of life with people close to them. In a recent survey of 2,189 people in the UK 70% of people hadn't heard of an Advance Care Plan (ACP) and only 3% had one in place. An ACP gives you the opportunity to plan your future care and support, including medical treatment, while you have capacity to do so Doing this while you are well is proven to reduce burden and improve your future care experiences.

We're on a mission to transform the wider conversation around death and grief by bringing the conversation into the mainstream, normalising these often-avoided topics and, in doing so, remove the fear.

Two highlights from the past year included ITV London covering the story of Eddie Robinson who shared with his nurses that he wanted to be able to dance with his wife one last time. Using a mobility aid, his nurse, Leonor, steered him through the moves whilst another member of the team played piano and a bouquet of red roses was arranged for Eddie's wife, Rita, as part of the surprise. Laraine, Eddie's daughter shared: "It was such a great day, to see them dance made me so happy. When Dad smiled I can see the Dad we know and love again." Through sharing Eddie's heart-warming story we helped to break down the misconception that hospices are a place you go to die – instead they are places that help people to live well until the very last moment.

In February, the hospice also featured on BBC's *Songs of Praise*. Presenter Pam Rhodes spoke to a number of staff and people receiving hospice support, including John who was being supported in his own home. Viewers learned how the majority of St Christopher's work takes place in the community – in people's homes or care homes. For us it was important to use this opportunity to tackle one of the most widely held myths about hospices: that they are buildings you come into and never leave again.

UNDERSTAND AND RESPOND TO THE NEEDS OF OUR DIVERSE MINORITY COMMUNITIES

INEQUALITIES WORKING GROUP

To help formalise the positive work the hospice has done in recent years to break down inequalities, 2023 saw the establishment of our Inequalities Working Group. This committee aims to break down health inequalities at the end of life locally and ensure equitable practice across the organisation.

The group has formed workstreams and will focus on priority population groups following the organisational strategy. These are ethnically minoritised people, people who are resource poor/socio-economically deprived and people aged over 75 at risk of a poor dying experience. The group has established its terms of reference, will help to establish an organisation-wide strategy and create accountability.

SUPPORTING PEOPLE WITH LEARNING DISABILITIES

In the last year we recruited our first-ever learning disabilities clinical nurse specialist to better address the inequities this group of people face when trying to access support at the end of life. This post works closely with people with learning disabilities to identify how we

can improve their experience of our care, as well as with teams at the hospice and across the wider healthcare system to enact these changes. Working with our Communications team we also produced our first-ever easy read version of the *Welcome to St Christopher's* booklet to improve accessibility. This publication has received great feedback and was recognised externally through being shortlisted for the Accessible Comms Award at this year's Inspiring Communicator Awards hosted by CharityComms.

IMPROVING END OF LIFE SUPPORT IN PRISON

Our Clinical Director, Director of Quality & Innovation and Head of Professional Learning, visited HMP Brixton and met with the health provider and the prison governor to increase our understanding of the health needs of prisoners and to share what the hospice could offer. Now, the hospice has secured funding from the Linder Foundation for a St Christopher's nurse to spend a day a week in the prison. The nurse will share knowledge with healthcare and prison staff to identify prisoners approaching the end of life, encourage advance care planning and initiate referrals.

COMMUNITY ACTION OUTREACH WORK

The Community Action team continues to support those in the community who experience inequalities, working in new ways to encourage community-based support and social change. One key area is meeting with people and organisations to explore feelings and actions around end of life, to support capacity building in communities. They particularly focus on working with communities who may be exposed to poor dying experiences.

Arts projects use different forms of communication to explore concepts around dying, loss and legacy. One example is a local weaving project in Lewisham with community volunteers and activists. Another is the Be Happy Be Sad Project working with Croydon Mencap. This used community arts principles and approaches to co-produce a party exploring the complex feelings around end of life with people with learning difficulties. The team also offer training, workshops and events to support a range of community organisations, staff and participants there to become more confident about supporting each other with end of life.

The team has built close ties with schools in Lewisham and Southwark, initiating those conversations aimed at increasing death literacy in classrooms through workshops and talks. It has now established close, long-standing and consequently fruitful relationships with a number of organisations – including Croydon Mencap and the borough's Black and Minority Ethnic (BME) Forum. The 2023 Young Changemakers leadership development programme for 16–18 year-olds from all five boroughs, successfully inspired 22 young people to think about how they could support people in their community and create change.

Faye and Jay's story

Two members of the Croydon Death Literacy project, Faye and Jay, share how coming along to the Compassionate Chat at Croydon BME Forum has helped them and others.

Faye shared she had really felt the loss of her father when he died in 1986. "I've always felt isolated, like I needed him to be there, and his presence had gone, and I'd never really talked about it. Listening to other people's experiences and struggles has opened up my mind, given me a greater sense of acceptance and help put my bereavement and loss into perspective. I am definitely in a better place."

Jay has suffered a number of bereavements and never trusted anyone enough to share her feelings. She adds: "Malcolm (Project Coordinator) was brilliant. Some people don't really listen. He listened, was patient and never hurried anyone. You can also have a private word with him and he's just really nice, honest, calm and softly spoken.

"I've had a real breakthrough thanks to the group. I was very wary talking to anyone at first. But I soon found that I could trust Faye, Malcolm and Shelly. They will listen to you, no one will judge you and it's a warm, kind and understanding place. I'm now sleeping better, feel lighter and have recommended the group to a family member."

Faye and Jay at the Compassionate Chat

The Bereavement Help Points we offer have been a big support for people navigating grief

DEVELOP FURTHER AGE-ATTUNED PALLIATIVE CARE FOR YOUNGER PEOPLE RIGHT THROUGH TO OLDER PEOPLE

Over the last year, we've successfully worked in Croydon to better meet the palliative and end of life care needs of older people living with frailty. We have done this through the Connections Project, collaborating with nine residential care homes, local GPs, pharmacists, Age UK and members of the Croydon Integrated Care Network, and funded by Hospice UK. As a result, care home staff are feeling more confident to initiate conversations with residents, supporting them to think about their wishes, write Wills and consider the kind of care they want at the end of life.

More widely, the hospice has cared for more older people in this period, with those aged over 65 making up 83% of our caseload, up from 76% in the previous year. This reflects the ageing population and our commitment to increase access for this patient group. We will continue this commitment with a two-day on this subject at the hospice in October 2024.

Equip the future workforce

DEVELOP PATHWAYS OF LEARNING TO REFLECT CAREER DEVELOPMENT OPPORTUNITIES IN PALLIATIVE AND END OF LIFE CARE

Just as the NHS was designed to care for people from cradle to grave, so St Christopher's is shaping its education and learning offer to support health

"I learnt a lot about palliative care and about myself."

"I loved the fact that the course focused on me first, as often, nurses forget about themselves."

"Excellently presented, knowledge and experience shone through. The course was engaging and interesting."

Leonor and her team on the wards supported 650 people last year

professionals' careers from registration to retirement. Over the last year we have completed a successful mapping process for nurses, ensuring the learning opportunities we offer track each stage of their career pathway and that they can always look to the Centre for Awareness and Response to End of life, known as St Christopher's CARE, for professional development, from novice to expert. Over the next 12 months we will roll this out for lifelong learning for doctors and allied health professionals. By the end of this year, the CARE website will reflect this new approach – providing learners with a tailored, straightforward user experience.

DEVELOP NEW WAYS OF LEARNING TO REFLECT CONTEMPORARY PREFERENCES AND PRESSURES

Over the last year, CARE has reached almost 15,000 people through its varied learning programmes.

More than two thirds of learners now access CARE's offer via on-demand and virtual learning. This reflects the huge increase in demand for this way of learning, which was accelerated by the pandemic. In 2023 the team introduced three self-study modules, focusing on the *Introduction to Palliative Care*, *Meaningful Conversations* and *Nurse Verification of Expected Death*. These bite-sized modules, which employ active learning principles, have seen a sizeable increase in both learner take-up and engagement.

Equally, our skills workshops are more experiential and dynamic and our core course – *Principles and Practice of Palliative and End of Life Care* – is seeing record sign-ups amongst nurses and health care assistants thanks to their new, more interactive format, that's aligned with our *Lantern Model* and rehabilitative palliative care approach.

The last year has also seen our conference programme tackle new and challenging topics in a fresh and engaging manner. *Future Planning: Advance Care Planning Reconsidered*, was a case in point – a much-discussed subject approached in a new and provocative way – while *The Case for Contemplative Care* included contributions from Buddhist monks at the New York Zen Centre. These are both illustrations of our desire to welcome new learners to ask fresh questions on issues that have been, as yet, under explored. Advocates of lived experiences have now become a key part of every conference.

Two of our learning offers received external recognition in 2023. Our *Working in Childhood Bereavement* course, run jointly with Hospice UK, was accredited by Middlesex University while the *Better Lives, Better Endings* toolkit, co-designed with Octavia Care to help its staff feel more confident dealing with end of life care, won the London Housing with Care Workforce Development Award.

CONTINUE DEVELOPING, AND THEN IMPLEMENT, OUR PEOPLE STRATEGY

The People team has implemented a number of new initiatives and programmes, all with the shared aim of further upskilling management within St Christopher's and enhancing the experience of those working for the hospice.

At the forefront of these changes is the new *People Management Essentials* programme. Introduced in May 2023, this in-house-developed programme is designed to support all people managers at St Christopher's to manage the 'St Christopher's way', emphasising the organisation's core values.

In response to feedback from recent new joiners, the department has also created a new induction programme. From September 2023, each new starter has had access to an e-learning module – *Welcome to St Christopher's* – providing them with all the basic information they need about the organisation in addition to their mandatory training. The development of the *Welcome to St Christopher's* session has enabled the in-person induction sessions to be more interactive; offering new joiners the chance to meet the Executive Team as well as representatives from the various staff groups and forums.

Mandatory training at St Christopher's – including practical moving and handling, care skills and safeguarding, has also undergone a complete transformation. Staff report that the new online platform, MyLearning, is more

Abdul and his team ensure the smooth running of our IT and systems

engaging and managers like its agility – allowing them to develop and introduce new modules more quickly. Since its launch, 530 staff have taken part in over 3,000 hours of training in more than 450 e-learning lessons.

The final piece of this new jigsaw is MyPerformance, an extension of the MyLearning platform. This has digitised the probation, one-to-one, and appraisal processes for staff. By leveraging the digital capability of the platform to share and receive information, staff are able to focus contact time on richer, more personalised conversations which put the organisation's values and their impact on our services at the forefront.

In addition to continuing to seek to enhance the experience of those working for the hospice, we similarly remain committed to being an inclusive employer. Of the 127 new staff who joined St Christopher's in the last year, 29% are from a minority ethnic background. This underscores the importance of the work the organisation has been undertaking in ensuring an inclusive culture, with the aim of the workforce reflecting the community we serve.

SUPPORTING VOLUNTEERS

Over 1,200 volunteers generously give their time and expertise to the hospice and, over the last year, the focus has been on enriching their experience. We're also fortunate to receive the support of people who bring huge expertise to the organisation and volunteers now support St Christopher's strategically on many important committees.

The appointment of a volunteering recruitment coordinator and a volunteering adviser this year is enabling us to increase accessibility to volunteering at the hospice and grow the number of roles we offer. These new team members have also allowed us to streamline the volunteer onboarding process and their ongoing management. These changes aim to increase satisfaction by providing the best possible experience for our volunteers.

A new volunteer management training programme, launched in 2023, has received positive feedback. Staff said it has helped them practice good volunteer management and improve engagement with the volunteers in their teams.

Over 1,200 volunteers generously share their skills and expertise with St Christopher's

Fellowship programme nurses from 2022 chose to stay connected and collaborate as 2023 GPNN champions

Marie's story

When St Christopher's established the Pioneering Nurses community as the start of a major initiative to connect and support palliative care nurses back in 2020, its architects, Heather Richardson and Marie Cooper, hadn't quite appreciated the scale of global demand for such a programme! Now, four years on, Marie says the success of St Christopher's international work, exemplified by the Global Palliative Nursing Network (GPNN), is inspiring us to build further on the programme.

"Pioneering Nurses was an amazing opportunity to bring nurses together and they really valued having that connection. With the GPNN, we've extended that, provided a programme of learning, seen nurses supporting each other and given agency to nurses with no voice."

Marie picks out two in particular who, with GPNN support, have thrived. "We first met Anu Savio in India back in 2018. She became a Pioneer on the 2020 programme, then did a research module at University of Surrey, before joining the editorial board on the Indian Palliative Care Journal. Anu, in addition to working as a nurse consultant, founded a nurse-led palliative care service for marginalised people in her home state in India. Anu is a real champion within the network supporting nurses in Asia, Africa and Europe helping them write publications and develop training programmes for local delivery.

"Then there's Christian Tsotie in Cameroon who I've had the privilege of mentoring. As he has increased his knowledge of palliative care and connected to global colleagues, his conviction and confidence has grown and he has set up a charity called Soigner La Vie (Take Care of Life) and now offers training for registered nurses wanting to provide palliative care."

More than anything, Marie believes it has helped palliative care nurses find a community of professionals. "Many have told us they wanted to find people who think like them, to be inspired, to inspire and to stand up for what they think really matters. We are now connected to 680 nurses from 59 countries – a phenomenal number!"

Fulfil a national and global leadership role

GLOBAL PALLIATIVE NURSING NETWORK

Launched in May 2023, the most significant mark of our global leadership over the last year has been the Global Palliative Nursing Network (GPNN). With 680 nurses signed up from 59 countries for the busy programme of formal and informal learning events, the network is constantly growing and creating a network of champions across the world. GPNN builds on the success of recent programmes like Pioneering Nurses and is helping to meet demand for peer support and professional development on a global scale. With the generous support of a private donor, the network is also free to join for all nurses for at least the next 12 months.

Such is the international interest in our learning offer that 30% of CARE learners were from outside the UK in 2023. St Christopher's CARE welcomed record numbers of organised group visits in 2023, including undergraduates from the United States and academics from China and Japan.

SHARE CUTTING-EDGE THINKING CLARIFYING CONTEMPORARY END OF LIFE ISSUES AND TESTING SOLUTIONS

Throughout 2023, our Honorary Senior Clinical Lecturer at St Christopher's, Dr Libby Sallnow, has helped oversee the operationalisation of the Lancet report she co-authored: *The Value of Death*. With funding from Great Causes II, we hosted an in-person event and a webinar as well as building a website – all to encourage and inspire practitioners from across the world to take the principles of the report and translate them into local action on a global scale. She shared the report's findings and ideas for implementation more than 30 times, on the national and international stage, on podcasts and in policy meetings.

Meanwhile, over the last 12 months, we have collaborated with the Worldwide Hospice Palliative Care Alliance and local organisations on the ground in Bangladesh on a context-specific palliative and end of life care training programme suitable for the informal settlements in cities like Dhaka. By this time next year, we're aiming to make this even more accessible, via an app.

REPRESENTATION AT HOSPICE UK

As part of our ongoing commitment to research, sharing knowledge and developing expertise on a national scale, a

group of staff attended the annual Hospice UK conference in November. As an organisation we shared our learning on eight topics and our Head of Community Action & Learning led two sessions. These focussed on working differently with communities, co-production and our bereavement buddies programme. We also took an exhibition stand promoting the professional learning offer available through St Christopher's CARE.

SHARE EXPERTISE GENERATED THROUGH PRACTICE AND RESEARCH

Clinical teams at St Christopher's participated in a number of research projects during the year. Notable among these were; the CHELsea2 study, overseen by University of Surrey. St Christopher's is one of 80 sites across the UK providing evidence to determine if providing clinically assisted hydration improves outcomes for people in the last week of life. Another research project, ongoing at the hospice, involves a PhD student who is examining spiritual experiences at the end of life for people suffering delirium and our response to those experiences.

Simultaneously, we've been conducting extensive community research. This has involved multiple dialogues with different communities, all with the aim of building our understanding of their experiences of death, dying and loss and to listen to what underserved communities might like us to do differently to better cater for their needs.

INFLUENCE AND WORK IN PARTNERSHIP

The Global Fellowship programme has 400 applicants from 45 countries. St Christopher's runs this in partnership with the Institute of Palliative Medicine, India, the Sanjeevan Palliative Care Project, Pondicherry, in India, and Bangabandhu Sheikh Mujib Medical University, Bangladesh. This programme is a major mark of the leadership role, which CARE has adopted in recent years. The most recent six-month programme has been the best evaluated ever, and with the establishment of mentor networks in 20 countries we have developed a sustainable partnership model that is influencing the provision of palliative care all over the world.

That international influence was further demonstrated recently, when St Christopher's responded to a request from the United Arab Emirates and Burjeel Holdings, one of the leading healthcare providers in the Middle East. As a result, the two organisations signed a Memorandum of Understanding to develop a compassionate community in the UAE with a hospice as the focal point of the initiative.

Create a sustainable business model

REDUCE OUR ENVIRONMENTAL IMPACT

DEVELOP AND IMPLEMENT A NEW GREEN STRATEGY FOR ST CHRISTOPHER'S

A key strand of St Christopher's strategic ambition of creating a sustainable business model is for St Christopher's to minimise its environmental impact without compromising on its quality of care.

We were pleased that we agreed our strategic green priorities during the year – with a newly set-up Green Group – and that we also reduced our carbon footprint by approximately 9%.

In the future we aim to: reduce carbon emissions further e.g. via our vehicle fleet; complete the replacement of our lighting with LEDs; go further towards being a paperless office with new technology systems; and engage and encourage our staff further in minimising waste.

SUSTAINABLE WEDDING FAIR

In July 2023, to raise money for the hospice, we hosted our first-ever Sustainable Wedding Fair boasting 50 brand-new wedding dresses alongside outfits and accessories donated by local wedding businesses.

A dress with a story was also donated – as it had been worn by actress Charlotte Jordan, who plays *Coronation Street* character Daisy Midgeley, in an iconic scene earlier in the year. The spectacular event gave soon-to-be brides the opportunity to bag a bargain, support their local hospice and create a more sustainable wedding day.

Staff modelling at our Sustainable Wedding Fair

At St Christopher's we focus on creating moments that matter for families

REFRESH OUR PREMISES TO MEET NEED AND TO INCREASE OUR WELCOME

We continue to focus on improving our facilities so they are welcoming, accessible and create a sense of wellbeing and calm for everyone who visits. In the last year we have focussed on refurbishing our counselling rooms, introducing soft, warm colours to the walls, new furnishings and pictures to create a soothing and restful environment for people at a difficult time. It is also important to us that we offer world class learning facilities both in person and online – enhancements made to our AV set-up during the year in St Christopher's CARE mean that this is now the case.

Works also began to improve the Anniversary Centre at our Sydenham hospice through the introduction of comfy, vibrant furniture to lift the space and improve visitors' comfort. In the coming year, we have plans to further improve this space along with the Reception areas at both sites. We know that people often feel apprehensive on their first visit to the hospice so we will be focusing on creating a reassuring environment that embraces natural elements and textures to bring life and softness to these spaces.

One big area of focus throughout the year was planning for the upcoming refurbishment of our wards with works due to begin in the next financial year. These extensive works will improve our wards so they feel welcoming and homely for the people staying with us as well as creating a dementia-friendly environment throughout these spaces to meet the needs of this growing group of people.

A Bereavement Help Point at the hospice

A Breathlessness Management Group at the hospice

David's story

With a grandfather and uncle who were cared for at home by St Christopher's, a grandmother who was employed in various roles in the hospice for 25 years and a sister who has volunteered in a number of its shops, there was never any doubt which charity David Shaw would be running for in his first London Marathon.

When you add in that David's father and four uncles used to participate regularly in a very different kind of a fundraising race for the hospice 50 years ago, it really was a done a deal.

"The whole family just loves St Christopher's," says David, 31, of Crystal Palace. "It all started with my grandmother Ann who worked in the kitchen and various other roles up to the early '90s. Dame Cicely Saunders attended her funeral in 2001. Then they looked after my grandfather Jack, when he died of cancer in 1996. I always wanted to give something back."

David's uncle, Anthony Shaw, was also cared for at home at the end of his life. As a result, David's family, particularly his mother Janet Shaw, have participated in many events and been involved in numerous fundraising efforts, including bake and plant sales, over the years.

David, who was brought up in Petts Wood and now lives in Crystal Palace, passes the hospice regularly on his training runs and is glad of the reminder of the cause for which he'll be running in April.

Those training runs also see David cover the same ground as his father, John and four uncles in the 1970s and '80s when they competed in fancy dress in the St Christopher's Pram Race, down Sydenham High Street from the top of Wells Park Road to The Bell pub at Bell Green.

"Dad and his brothers grew up in Kingsthorpe Road and competed in this event many times and even won it one year, in the late '70s I believe. This was our family's first recorded instance of organised fundraising for St Christopher's and we have participated in many other fun events since then – it's nice to think that we are still trying to do our small bit (in race form too!) to support the hospice 50 odd years later."

David is hoping to beat three-and-a-half hours, both for personal achievement and because it will mean doubting friends will have to make good on offers to up their sponsorship, helping to drive him towards his £6,000 target.

David will be running to support St Christopher's

ENSURE WE HAVE SUFFICIENT FINANCES TO MATCH OUR AMBITIONS

We receive only 34% of our income from the NHS and, with growing patient need, we need to raise increasing amounts from other sources and rely on our community more than ever.

WHAT MATTERS MOST: A FUNDRAISING APPEAL WITH A DIFFERENCE

In 2023, we launched our largest and arguably most innovative fundraising appeal yet. The *What Matters Most* appeal raised over £600,000 in just 36 hours! The appeal featured the stories of patients, bereaved family members and staff all sharing what matters most to them and called on the support of donors to help fund the vital care and support provided by the hospice. Team champions led the fundraising by reaching out to their networks to seek support and every donation during the 36-hour period was doubled by match funders to boost the kind gifts. This was a phenomenal response which truly highlighted the power of the community.

SHOPPING WITH A DIFFERENCE

Our Retail team continues to go from strength to strength generating vital income to fund hospice care and support. Across the 24 stores, the team served 620,000 customers in the last year selling more than 1.3 million items. Not only has this generated income for the charity but it also stops pre-loved items going to landfill and encourages shoppers to be more sustainable in their shopping habits.

In January 2024, MP Helen Hayes officially opened our new store in West Dulwich. In the first three months this store has raised £53,700 as well as generating an additional £7,500 through Gift Aid. It has also established us as a part of this local community bringing with it new support and donations.

Our network of stores is reliant on the support of volunteers to stay open. This amazing team works alongside paid staff to create welcoming environments to visit, shop and donate to. In the last year this group grew to over 600 strong and so it felt fitting that we focus our efforts on thanking them for their significant contribution during Volunteers Week. Each shop team was visited by a member of our senior team who spent time hearing from and helping volunteers in their daily tasks and, of course, saying that all-important thank you.

We also embarked on the process of refitting and rebranding our stores giving them a fresh, modern look. The new look has received great feedback so far with our stores really standing out on the high street and attracting new customers. This work continues into the next financial year.

Lastly, we welcomed three new non-executive directors to the Trading Board. Between them they bring a wealth of knowledge and expertise to help strengthen our retail offering further still.

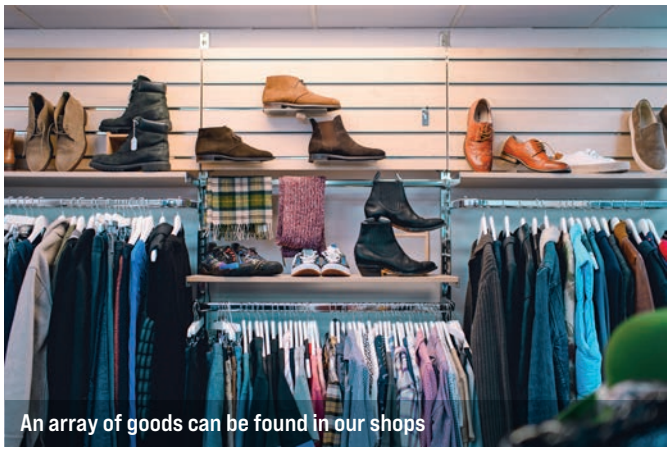
The opening of our new store in West Dulwich

Jacqui's story

Jacqui is the store manager at our Chatterton Road store. "I'm originally from Sydenham so knew about St Christopher's as my mum volunteered there, and my best friend had just died there when I saw the job advertised at the Chatterton Road store in Bromley," she says. "It's the best move I've ever made. I would highly recommend it. It's so rewarding to see what not just this shop, but all the shops are achieving."

Jacqui is quick to acknowledge the major role played by her team of 11 volunteers, two of whom have been working in the store for well over a decade and are in their 80s. She says that all the volunteers are motivated by the cause of the hospice, and they are highly valued and treated with purpose, respect and appreciation.

Together, Jacqui and the team are receiving more and better-quality donations all the time, which in turn means they're selling more and raising more for the hospice. Using all the skills and knowledge from decades of experience in retail, Jacqui has brought a real sense of style to the Chatterton Road store. She says proudly:



An array of goods can be found in our shops

"Customers come in and say it feels like a little boutique. Some even call it a little Harrods."

Jacqui's pride in the look of the store is at least matched by the way she feels about its place at the heart of the community. "We're situated behind the main road in what's classed as a village, and everyone waves to us when they walk past the shop. We have so many loyal customers who come in at least three times a week which makes for a real community atmosphere."

Our new-look East Dulwich shop

Complementary Therapist Paula with Mary in the Rehabilitation Gym at our Sydenham site

USE RESILIENT AND SECURE TECHNOLOGY THAT EMPOWERS PEOPLE

KEEPING OUR DATA SAFE

One of the most significant and ever-increasing risks facing St Christopher's, as with most organisations, is that of a cyber attack. Cybercriminals have shown that they will attack all organisations, and hospices are no different. Any attack has the potential to harm our services, and our finances. While it is impossible to protect ourselves against everything, we have invested during the year to minimise the risk.

This has included investment in our IT infrastructure, staff education (cyber skills training and phishing emails), and the recruitment of a dedicated information and data protection manager. We have nearly achieved our Cyber Essentials accreditation, which we expect to meet in 2024-25.

TECHNOLOGY AND CARE

Over the last year we've also explored ways to use technology to improve care and support. Our Digital Transformation Group has worked to improve the accessibility of the information we provide online and trialled the use of virtual reality on the wards. Virtual reality is proven to help reduce pain, anxiety and feelings of fear and isolation for people with chronic conditions and is being used by growing numbers of hospice and palliative care providers for these reasons.

Our IT team have also worked to host family film nights for young patients and their families staying with us on the wards, setting up screens and finding favourite films to create special moments and lasting memories for people.

Robust and safe technology is key to providing outstanding care

Our Community Action team offer a range of opportunities for the community to engage with the important topics of death, dying and loss

Tackle ethical issues

TACKLE THE SENSITIVE TOPIC OF ASSISTED DYING

In the UK it is currently illegal to use drugs to assist someone to die. However, the law might be changing in the next few years and the palliative care sector needs to be prepared to respond to this. This is an incredibly sensitive and complex topic, yet we felt it was important to begin exploring this area and better understanding the views of the community and our teams so we can be prepared.

Last year, we responded by recruiting a community action researcher to lead a programme of public engagement around this issue. Through community-based conversations in south London we aimed to provide learning, data and insight for interested parties into people's perspectives on life, death, healthcare and assisted dying.

Rather than surveying attitudes or opinions, which to date has shown polarisation and doesn't allow for an understanding of why people think as they do, we adopted a qualitative research method to allow for deeper engagement. The research has captured the views of 50+ members of the public depicting a broad range of experiences, occupations and perspectives. Over the coming year these findings will be developed into clear recommendations for the sector, policy makers and other interested parties to consider and respond to.

Throughout the year, we also held various events for staff and volunteers, offering a safe space to explore this sensitive topic as well as drawing on professionals with lived experience of assisted dying in practice to inform, equip and reassure.

The first, a talk from Dr Ali Giles, a palliative care doctor working in Australia, shared the experiences of her team in adapting to the legalisation of assisted dying. Dr Giles spoke about the practicalities of the change in the law and answered queries from the team. We then worked with external facilitators, Public Service Works, to host 16 workshops for staff and volunteers. These offered teams a chance to share views, listen to others and consider how palliative care might prepare for any future changes in the law. Over 140 people participated in workshops which were open, respectful and overwhelmingly positive.

Through completing this work, we will be better prepared should a change in the law occur and have a much richer insight into people's views and wishes around this complex area.

ADVOCATE FOR IMPROVEMENT IN FUNDING CENTRALLY TO SUPPORT CORE PALLIATIVE AND END OF LIFE CARE ACROSS COMMUNITIES

St Christopher's, along with other UK hospices, has been working with Hospice UK to campaign for increased funding for hospices and end of life care. During 2023, we were one of a number of hospices who contributed to a report coordinated by Hospice UK, on government funding, which was reviewed by the All-Party Parliamentary Group responsible for Hospice and End of Life Care.

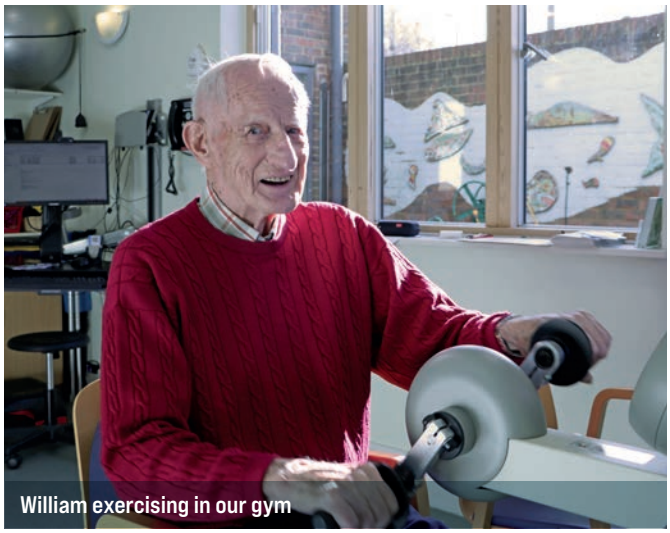
Funding for hospices differs greatly throughout the UK and, at St Christopher's, we receive just 34% of our funding from the NHS. Annual uplifts from the NHS are also not keeping up with inflation or the increased number of patients we are looking after. There is a desperate need for increased public funding, if we want to care for those who need it most.

With an ageing population and people living with more complex care needs the numbers and demands on hospices continues to grow; making the current model unstable and unsustainable in the long term.

Together we have raised awareness of this challenge in mainstream media and with MPs. At St Christopher's, our Director of Quality & Innovation referenced the need for better funding in a recent interview with *Nursing Times*. Following the cumulative coverage and increased pressure on MPs, this issue was debated in Westminster in April 2024. All MPs spoke passionately about the invaluable role of the hospice sector and the need for hospices to be better supported. The debate culminated with a call for the NHS's Integrated Care Boards to increase funding provision.

Over the coming year, we will continue to champion the need for more sustainable funding models to ensure we can meet the growing needs of our communities.

An ageing population increases demands on hospices



William exercising in our gym

William's story

Before coming to St Christopher's, William's experience with the hospice was limited at best: the few people he knew who had come here had only done so for their final days. It was only when he started visiting St Christopher's in Orpington, after heart failure last year, that he began to experience how much is done here.

An initial three-week course for breathlessness was recommended following William's heart failure, and once this was completed he took the opportunity to start a six-week course of exercises to build up the muscles in his body. He has covered a wide range of movements in each session, including resistance exercises with weights, balance exercises, and cardio training, all of which his therapist says he has made great progress with.

When asked what he wanted to achieve at the start of his programme, William told the team that he wanted to be fitter for his gardening. "I can't get on my knees for gardening, so standing and doing it I'd have to stop every half-hour. But since doing this, I've been able to go for much longer than I have been able to do before."

It was truly heart-warming to hear how William had improved, and what it meant to him to have energy to do what he loves.

"I would encourage anyone who is given the same opportunity to say yes. Right from the first time I visited St Christopher's everyone has been very friendly and helpful and welcoming, which made me feel as though I was at home. I am very grateful for all the help and encouragement I have received from the physios, who are excellent."

The majority of our care and support is provided in people's own homes

STRUCTURE, GOVERNANCE AND MANAGEMENT

St Christopher's Hospice was incorporated as a company limited by guarantee on 21 January 1961 and is governed by its Articles of Association. St Christopher's Hospice is registered with the Charity Commission for England and Wales.

St Christopher's Hospice has a wholly owned subsidiary, St Christopher's (Trading) Limited, company number 02604519. The registered office of St Christopher's Hospice and its subsidiary is 51-59 Lawrie Park Road, Sydenham, London SE26 6DZ.

HOW WE ARE GOVERNED

The Board, consisting of the Trustees named at the back of this report, has ultimate responsibility for the proper and effective management of St Christopher's Hospice. The Board is responsible for all major strategic decisions, for monitoring the organisation's performance, and to ensure that it complies with its Articles of Association and applicable laws and regulations.

Neil Goulden has been the Chair of the Trustees since 1 April 2021 and Eleanor Brown has been the Vice Chair since 21 July 2022.

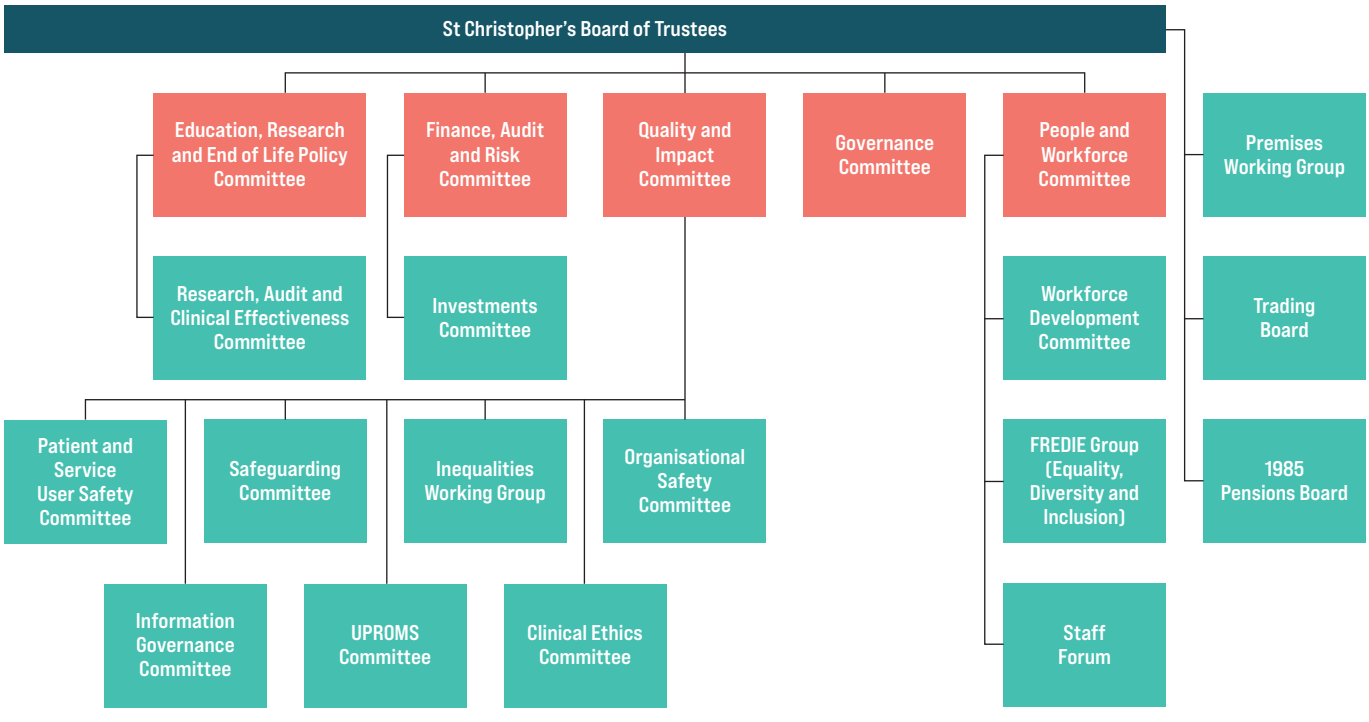
The Board delegates day-to-day management and decision making to the Executive Team, which is led by the Chief Executive. The Executive Team is required to act in furtherance of the Charity's strategy. The Board holds the Chief Executive and Executive Team to account for its leadership of the organisation.

The current governance structure is below. Each of the five Board sub-committees (Governance; People & Workforce; Quality & Impact; Finance Audit & Risk; and Education, Research & End of Life Policy) and the Investment Committee, the Premises Working Group, Trading Board, 1985 Pensions Board are chaired by a Trustee and at least one other Trustee sits on each.

Committee terms of reference define responsibilities and delegated responsibilities and are reviewed annually. The Board may delegate any of its powers to one of its sub-committees. The committees report to the Board after each meeting. Each sub-committee usually meets quarterly face to face.

Trustees commissioned an external governance and effectiveness review by Bayes Business School in 2023 and the recommendations and action plan are being monitored by the Governance Committee.

St Christopher's also has Trustees with the following key responsibilities: Safeguarding; Equality, Diversity and Inclusion; and Freedom to Speak Up. Each has a role description, has prior knowledge of the area and has received the relevant training for these roles.



● Main Board of Trustees ● Board sub-committees ● Other Trustee boards and working groups

TRUSTEES' DUTY TO PROMOTE THE SUCCESS OF THE CHARITY – SECTION 172 STATEMENT

The Trustees are the directors of St Christopher's Hospice and have a duty to promote the success of the Charity and, in doing so, are required by section 172(1) of the Companies Act 2006 to have regard to various specific factors, including:

- the likely consequences of decisions in the long term
- the interests of employees
- the need to foster the Charity's relationships with third-party stakeholders, which, in the case of St Christopher's Hospice, includes dying people and those close to them, the local community, the NHS and our supporters
- the impact of the Charity's operations on the community and the environment
- the desirability of the Charity maintaining a reputation for high standards of business conduct.

The Charity's strategy takes into account the likely consequence of any decision in the long term. The Trustees approved a three year organisational strategy for 2023-26, and this Annual Report and Accounts gives updates on progress against the first year of that strategy.

The Board meets at least quarterly throughout the year. It assesses progress against the strategy, identifies areas for focus for the following year and receives updates on the Charity's performance and plans. Its committees also review plans with regard to the particular activities overseen by the committee concerned. The Board also has an annual away day for strategic planning.

The Board obtains assurance that attention is given to the factors set out in section 172 when promoting the success of the Charity, by monitoring that the Executive Team and the wider organisation are delivering the strategy and complying with specific policies.

Engagement with the Charity's primary stakeholder groups is set out on pages 9 to 27. The Executive Team regularly reports to the Board on key stakeholder relations and engagement activities, current issues and relevant feedback from interactions with stakeholders.

The Trustees also follow a formal process to regularly manage and review risks faced by the Charity, set out on page 33.

The Charity ensures that it maintains a reputation for high standards of business conduct by having in place a range of policies and processes that promote corporate responsibility and ethical behaviour. Areas covered include fundraising (our fundraising practices are discussed below), gifts, hospitality and anti-bribery, conflicts of interest, safeguarding, bullying and harassment, and whistleblowing. Policies are reviewed periodically.

APPOINTMENT OF NEW TRUSTEES

The Board is made up of individuals who have a diverse, varied and balanced cross section of life, skills and experience. When embarking on the recruitment process, the Trustee vacancy is advertised on the St Christopher's website, in various publications and on social media. The specialist services of a recruitment agency may also be employed where necessary. Prospective candidates are invited to apply, outlining their relevance for the role. After the closing date, applicants are shortlisted against the person specification, and potential candidates are invited to interview. The interviews are usually carried out by the Chair, Vice Chair and a subset of other Trustees. Successful candidates are then formally appointed by a resolution of the Board.

Trustees are appointed by resolution of the Board for a term of up to three years. Upon expiry, they shall be eligible for re-appointment for a further term or terms of up to three years. All Trustees sign a code of conduct on appointment. The Trustees, Chair and Vice Chair carry out their responsibilities in line with a documented description of their role.

New Trustees undertake an induction process designed to equip them with the information and understanding they need to become effective and valuable members of the Board as quickly as possible. The induction process involves the following:

- An induction pack containing key information about St Christopher's, the governance structure, the roles and responsibilities of Trustees and the organisational work of the Board of Trustees and its committees
- A Trustee mentor for at least the first year
- An induction programme which enables new Trustees to gain a good understanding of the operations of the organisation
- An informal review meeting with the Chair of the Board at the end of a Trustee's first year and annually thereafter.

All Trustees give their time voluntarily and receive no benefit from the Charity. Out-of-pocket expenses incurred by the Trustees in carrying out the role can be reimbursed in accordance with the organisation's expenses policy. £420 of expenses were claimed from the Charity this financial year. All Trustees were required to complete and sign an

annual declaration of interests, and declare any relevant gifts received.

PUBLIC BENEFIT

The Board is aware of the Charity Commission's guidance in relation to Public Benefit. The report indicates how our activities have delivered public benefit.

FUNDRAISING DISCLOSURE

St Christopher's Hospice has voluntarily subscribed to the Fundraising Regulator and is committed to adherence to the Code of Fundraising Practice set by the Fundraising Regulator. We encourage any fundraising service providers we engage with to also sign up to the code, and we received no complaints logged with the Fundraising Regulator in 2023-24.

The fundraising efforts at St Christopher's had previously been led by Compton Fundraising Consultants who are members of the Association of Professional Fundraisers (AFC). However during the year 2023-24 the leadership of our fundraising was brought in-house with the appointment of a Director of Income Generation & Marketing. Starting in position in October 2024, this new role has meant that financial performance and reporting, compliance against the fundraising code and other legislation and the overall leadership of our fundraising activity now sits fully inside the Charity's Executive Team structure. St Christopher's continues to engage with Compton Fundraising Consultants to deliver both Trust and Grant & Corporate fundraising. This is managed through the team structure, reporting to the Director.

In addition, the Fundraising team engages professional third-party suppliers to help raise funds particularly where we do not have the expertise in-house. We have safeguards in place when working with suppliers so that we protect our supporters and the reputation of our Charity, including Lottery Fundraising Services and Engage and Connect, the companies which support our lottery. We ensure all these agents observe the highest standards in terms of fundraising practice and monitor their performance through the use of mystery shopping and random checks with donors.

St Christopher's Hospice is a member of the Hospice Income Generation Network, the Hospice Lottery Association and many of our fundraisers are members of the Chartered Institute of Fundraising.

Our website outlines our complaints policy for the public. We received two fundraising complaints in 2023-24 (2022-23: three fundraising complaints). Our policy is to respond to all complaints within 10 days. Serious complaints are escalated to our Executive Team and Trustees to consider lessons learnt. We report to the Fundraising Regulator and Gambling Commission on the totality of our complaints.

We have policies and procedures in place to safeguard the vulnerable and we ensure our fundraisers and third-party suppliers adhere to these policies. We are also signed up to the Fundraising Preference Service to enable individuals to opt out from receiving fundraising communications from us. We received one request through this service last year.

PAY POLICY FOR SENIOR STAFF

The pay of the Chief Executive is set by the Governance Committee with any changes authorised by the Chair of the Trustee Board. The pay for the remainder of the Executive Team is agreed by the Governance Committee in consultation with the Chief Executive. The pay for other senior staff is agreed by the Chief Executive in consultation with the Director of People & Organisational Development and the member of the Executive Team for the Directorate.

EQUALITY AND DIVERSITY

St Christopher's is working with the National Centre for Diversity to achieve their Investors in Diversity accreditation. Following a staff survey in mid-2022 to provide initial data, St Christopher's developed an action plan to ensure demonstrable progress in line with the accreditation standards relating to culture, strategy, wellbeing, recruitment, reward, performance management and communications. This work is supported by the St Christopher's FREDIE (Fairness, Respect, Equality, Diversity, Inclusion and Engagement) Group and progress is overseen and monitored by the People & Workforce Committee. In 2024, St Christopher's is embarking on its initial attempt at Investors in Diversity accreditation. The number of staff from minority ethnic backgrounds at St Christopher's increased in 2023-24 from 114 to 124. We are proud to have a diverse workforce at St Christopher's with 25 different nationalities represented across our staff.

St Christopher's Hospice is a 'Disability Confident' Employer. This means that we undertake full and fair consideration of all applications for employment including those made by people with a disability. We offer a guaranteed interview to applicants who qualify under the 'Disability Confident' scheme and we are committed to supporting both disabled people back into the workplace as well as supporting those were they to become disabled whilst employed by the organisation.

St Christopher's works with an occupational health service and in partnership with external organisations such as

Access to Work, to provide support and advice to disabled people working with us. We have recently developed our own wellbeing information resource for staff to signpost them to a range of internal and external wellbeing resources.

St Christopher's Hospice has been a signatory to the 'Mindful Employer Charter' since August 2016. Our practices were reviewed in 2023-24 and were found to demonstrate our commitment to supporting individuals with mental health illnesses and actively seeking to alleviate causes of workplace stress wherever possible.

In March 2024, St Christopher's trained eight more members of staff to act as Mental Health First Aiders or, as we refer to them, Mental Health Champions, to strengthen the support available to our workforce. We have also invested in the support of these Mental Health Champions by providing ongoing learning opportunities, resources and exclusive events via Mental Health First Aid England.

We are an age-inclusive employer as recognised by the Centre for Ageing Better. Our workforce comprises 53% of staff who are aged over 50 and we have historically – and continue to – hire age positively. We have embedded a supportive culture, offering flexibility and aiming to be an inclusive employer for all ages across our workforce.

GENDER PAY GAP

Individuals performing the same role are paid equally regardless of gender or other protected characteristics.

The gender pay gap shows the difference in the average earnings between all men and all women employed across the organisation on 5 April each year. This information is reported annually on the national Gender Pay Gap website. The April 2023 data identified that of our 506 staff, 81.6% were women and 18.4% were men.

This year we reported, for the third year in succession, that women at St Christopher's earn, on average, slightly higher pay than men. Overall the St Christopher's gender pay gap has shifted from -2.29% to -3.69% from 2021-22 to 2022-2023. From 2021-2022 to 2022-2023, we have seen a 6.05% increase in the number of women working in the higher three quartiles – upper, upper middle and lower middle – and more men positioned in the lower quartile. It is, however, recognised that having a predominantly female workforce means small fluctuations across the male workforce has an impact on the gender pay gap.

EMPLOYEE INFORMATION

St Christopher's is committed to providing information to employees, when appropriate and feasible, and consulting with them and/or their representatives on a regular basis.

One way this is achieved is through our Staff Forum which seeks feedback, when appropriate, on proposed changes to terms and conditions of service or ways of working. Staff representatives also bring matters of concern or suggestions for improvement to the attention of senior management through this group, with the working environment and organisational initiatives also discussed. This feedback mechanism enables our employees' views to be heard and considered on an ongoing basis.

STREAMLINED ENERGY AND CARBON REPORTING (SECR)

As part of SECR, our UK greenhouse gas (GHG) emissions and energy use for the last two years are as set out below:

UK GHG EMISSIONS AND ENERGY USE DATA FOR THE PERIOD 1 APRIL TO 31 MARCH

	2023-24	2022-23
Energy consumption used to calculate emissions (kWh)	2,585,986	2,853,275
Energy consumption breakdown (kWH): • Gas • Electricity • Transport fuel		
Direct GHG emissions: gas consumption	230.56	254.71
Indirect energy emissions: purchased electricity	226.64	228.69
Other indirect emissions: employee mileage while undertaking activities for St Christopher's Hospice	60.97	108.16
Total gross emissions in metric tonnes CO2e	518.17	591.57
Intensity ratio in in metric tonnes CO2e per staff FTE	1.29	1.60

QUANTIFICATION AND REPORTING METHODOLOGY

We have followed the 2019 HM Government Environmental Reporting Guidelines. We have also used the GHG Reporting Protocol – Corporate Standard and the UK Government's Conversion Factors for Company Reporting.

INTENSITY MEASUREMENT

The chosen intensity measurement ratio is total gross emissions in metric tonnes per staff FTE.

MEASURES TO IMPROVE ENERGY EFFICIENCY

Total energy use decreased during 2023-24. Because of this, and an increase in headcount, the average carbon usage per employee also decreased from 1.60 C02e to 1.29 C02e per staff member.

Aside from a milder winter than previous years – which meant less energy for heating was needed – other improvements have been due to:

- an increased awareness of energy efficiency
- a gradual move to the installation of LED lighting across both main sites and our 24 shops
- the introduction of some electric vehicles to our car fleet.

It is important to St Christopher's and its staff that we reduce our environmental impact where possible.

A cross-organisational Green Group was launched during the year, and now meets quarterly. While St Christopher's already has many green initiatives in place, more can be done. The group has agreed on the following as its strategic aims to reduce its environmental impact further. Each of these strands has a programme of work of planned and potential activities:

- Demonstrate commitment and engagement
- Improve energy efficiency
- Minimise waste
- Reduce carbon emissions
- Enhance our natural environment.

Our ESOS stage 3 reporting to the Environment Agency will take place in 2024-25. This will provide an assessment of current environmental impact, as well as other initiatives to take forward.

PRINCIPAL RISKS AND UNCERTAINTIES

The Board, in conjunction with the Executive Team, follows a formal process to manage the risks faced by the Charity.

This process focuses on six potential risk areas – strategic, financial, services, premises, workforce and information. Risks are assessed as to the severity of the risk to the organisation and accompanied by strategies to eliminate or mitigate the risk.

The risk management process is conducted at least annually and comprises the following:

1. Identification and review of key risks facing the organisation, accompanied by consideration of strategies/plans to be employed to mitigate risks by the Executive Team – this includes committee-level risk registers within the relevant committee
2. Review of the updated corporate risk register and the mitigation plans by the Finance, Audit & Risk Committee and the Board of Trustees
3. Review and agreement of the corporate risk register and mitigation plans by the Finance, Audit & Risk Committee and the Board of Trustees
4. Receipt of reports regarding progress and success of mitigation plans by the Finance, Audit & Risk Committee and the Board of Trustees.

This process has confirmed that key risks facing the organisation are:

- Failure to agree a level of NHS funding which pays for a sufficient proportion of NHS contract work; the NHS currently only pays for a minority of the work we do for them
- Failure to recruit/retain staff in a competitive recruitment market which impacts on business continuity
- Voluntary income growth does not keep up with annual ongoing expenditure, which means we make an unsustainable deficit
- Cyber-attacks such as corruption via computer viruses and other malware, in an ever-changing cyber security environment.

Actions intended to mitigate these risks include:

- Ongoing work to develop relationships with local commissioners and key influencers within the health system
- Listening to and addressing staff feedback and an external review of salaries to confirm competitiveness
- Implementing our People & Workforce Strategy
- Ongoing reviews of our trading and fundraising strategies
- Putting remaining measures in place to achieve the IT security accreditation, Cyber Essentials Plus.

FINANCIAL REVIEW

These financial statements include the results of St Christopher's Hospice and its trading subsidiary, St Christopher's (Trading) Limited for the year ended 31 March 2024.

The charitable activities of St Christopher's Hospice are identified under five main headings in the Statement of Financial Activities:

- Inpatient care
- Community care/outpatients
- Education, research and policy
- Bereavement services
- Community action.

Except for education, research and policy, the services provided to a patient could include one or more of these activities during their care. The cost of individual patient care may span across one or more of the charitable activities identified.

In addition to these charitable activities, St Christopher's Hospice has a trading company. The activity of this company is shown on the Statement of Financial Activities as income/costs of trading companies.

For the year ended 31 March 2024, at an operational level, St Christopher's Hospice recorded a net loss, before other recognised gains and losses, of £987k (2023: £1,420k net income).

Overall, the St Christopher's Hospice generated a net increase in funds of £159k (2023: a net increase in funds of £480k). This was after recognising other unrealised gains and losses as follows:

1 **Unrealised gain from the investment portfolio of £1,185k (2023: unrealised loss of £1,292k) and a realised loss from the portfolio of £39k (2023: realised gain £479k)**

Our investment portfolio managed by Cazenove Capital Management increased in value from £13,059k in March 2023 to £16,433k in March 2024. This increase is due to £2,000k cash transferred into the fund, and £1,374k from a combination of investment gains and investment income. We have not drawn down on our investment portfolio during 2023-24, and there are no plans to draw down on it during 2024-25.

Our bank deposits increased from £6,303k in March 2023 to £8,924k in March 2024.

Taking our investment portfolio and bank deposits together, our overall investments increased from £19,362k in March 2023 to £25,357k in March 2024.

2 **An actuarial gain/loss from the FRS 102 valuation of the St Christopher's Hospice (1985) Pension Scheme of £0k (2023: loss £127k)**

The FRS 102 actuarial loss is a result of four factors:

- An actuarial gain on the scheme liabilities of £212k (2023: gain of £3,497k) arising from a change in the demographic and financial assumptions
- An actuarial loss on the scheme investments portfolio of £385k (2023: loss of £3,801k)
- Experience losses arising on the plan liabilities of £17k (2023: losses of £704k)
- A gain of £190k to reflect the amount of the pension surplus that is not recoverable (2023: gain of £881k).

INCOME

Total income received in 2023-24 was very similar to the previous year, a small increase of 3.0% to £27,541k (2023: £26,740k). While legacies income was £633k less than the previous year, this was offset by increases to other income streams, namely donations and gifts (+£327k), NHS income (+£344k), income from trading company (+£290k) and investment income (+£483k).

Further details on our income variances are shown below.

DONATIONS AND GIFTS

Income from donations and gifts was £4,835k, which was £327k higher than the previous year (2023: £4,508k).

Key to achieving this was the money raised by our community as part of our *What Matters Most* campaign, where we were able to raise £625k. We continue to be overwhelmed and appreciative of the enormous generosity of our local community. As we feel the impact of the increase in demand for our services, we rely on our local community more than ever.

LEGACIES

Legacies income of £6,535k was not quite as high as the previous year of £7,168k. We remain incredibly grateful for those people who choose to remember St Christopher's in their Wills.

NHS CONTRACTS

Income from the NHS of £9,357k was £344k (3.8%) more than the previous year (2023: £9,013k).

St Christopher's is caring for an increasing number of patients, which means that the NHS pays for only a minority of the services we provide for it, and at a decreasing proportion.

INCOME AND PERFORMANCE OF TRADING SUBSIDIARIES

The core activity of St Christopher's (Trading) Limited is the operation of shops with 24 shops as of March 2024 (23 shops as at March 2023), whose purpose is to raise money for the Charity to spend on charitable activities.

Revenue from St Christopher's (Trading) Limited increased by 6% to £5,295k (2023: £5,005k), with a net contribution to the Charity of £1,467k (2023: a net contribution of £1,622k). While income has increased the high street is increasingly competitive and challenging during the current economic high climate.

INVESTMENT INCOME

Investment income for the year of £851k was £483k higher than last year (2023: £368k). This is reflective of higher interest rates which have brought in more bank interest on our fixed term deposits.

EDUCATION, FEES AND OTHER INCOME

Education, fees and other income was £668k, which was a little lower than last year (2023: £678k). This includes new work to deliver our Hospice at Home work in Bromley (virtual wards).

EXPENDITURE

Total expenditure in 2023-24 was £28,528k, which was 12.7% higher than the previous year's figure (2023: £25,320k). This was largely due to deliberate growth in full time equivalent staff headcount (+9%) to support our charitable activities and growing patient need, and to fund cost of living increases.

The costs of raising voluntary income were £1,762k, which was 13.5% higher than the previous year's figure (2023: £1,552k).

STAFF COSTS

During the year, the total average FTE headcount increased to 401 (2023: 369). Staff costs account for 71.6% of the organisation's total costs (2023: 72.6%). Further details of staff costs and staffing levels can be found in note 7 to the accounts.

RESERVES POLICY AND GOING CONCERN

St Christopher's Hospice holds reserves to improve both the financial security and the operational flexibility of the hospice. The Trustees believe the level of reserves held should be sufficient to cover the risks the Charity is exposed to, including safeguarding against the volatility of key income streams.

The Trustees have taken a risk-based approach to assess the level of free reserves required by the Charity. They have also reviewed this alongside the level needed to operate effectively. Considering both aspects, the Trustees believe St Christopher's Hospice should aim to hold free reserves equivalent to 9-12 months of its operating expenditure, currently equal to £21.4m-£28.5m. The Charity considers free reserves to be the total unrestricted Group reserves, less designated funds. The designated funds held by the Charity are listed in the notes to the accounts. They include a fund to manage the variability of year on year legacy income, a fund to expand our charitable impact and to support our long-term sustainability and funds for capital commitments and the net book value of fixed assets. On this basis, free reserves as of 31 March 2024 were £25,788k (2023: £24,038k), equivalent to 10.8 months of operating expenditure (2023: 11.4 months of operating expenditure).

The Trustees have reviewed the financial position of the Charity and its subsidiaries, its forecast cash flows, and its liquidity position for the foreseeable future. This includes the impact of risks as described in the principal risks and uncertainties section above. The Trustees believe that the Charity has adequate resources to continue operational existence for the foreseeable future. As a result, they continue to adopt the going concern basis of accounting in preparing the Annual Report and Accounts.

INVESTMENT POLICY

The Board of Trustees has approved an investment policy and strategy, which is supervised by the Investment Committee.

The primary objective of the investment policy is to provide financial security and stability for the operation of St Christopher's Hospice. The investment policy also recognises that the organisation is exposed to the risk of a sharp fall in its income due to the variability of legacy income and donations and uncertainty of funds from the NHS. To reflect this position, the Investment Committee with Cazenove Capital Management continues to invest in a varied portfolio in accordance with an asset allocation approved by the Investment Committee.

Investment income has increased to £851k (2023: £368k), of which £570k (2023: £208k) is interest from cash deposits, and £281k (2023: £160k) is dividend and interest income from the Cazenove Capital Management charity portfolio.

The Investment Policy states that, among other things, Trustees will not invest directly in a company if it carries out activities contrary to the Charity's purposes and, therefore, against its interests and those of its beneficiaries.

The Investment Committee encourages responsible investment. They are committed to appointing investment

managers involved in applying Environment, Social and Governance (ESG) criteria across the investment process. Our existing investment manager, Cazenove Capital Management, has demonstrated that they use these criteria.

STATEMENT OF BOARD'S RESPONSIBILITIES

The Board members (directors for the purposes of Company law) who served during the year, and the period for which they were in office, are detailed on page 62.

The Board is responsible for preparing the Report of the Board of Trustees and the financial statements in accordance with applicable law and regulations.

Company law requires the Board to prepare financial statements for each financial year. Under that law, the Board has elected to prepare the financial statements in accordance with United Kingdom Generally Accepted Accounting Practice (United Kingdom Accounting Standards and applicable law). Under company law, the Board must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the charity and of the result of the group for that period. In preparing these financial statements, the Board is required to:

- select suitable accounting policies and then apply them consistently
- make judgments and accounting estimates that are reasonable and prudent
- follow applicable accounting standards
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the group will continue in business.

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

STATEMENT AS TO DISCLOSURE OF INFORMATION TO AUDITORS

The Trustees have taken all necessary steps to make themselves aware of any relevant audit information and establish that the auditors are aware of that information.

As far as the Trustees are aware, there is no relevant audit information that the charity's auditors are unaware of.

APPOINTMENT OF AUDITORS

Moore Kingston Smith LLP were appointed as auditor to the Charity and in accordance with section 485 of the Companies Act 2006, a resolution proposing that they be reappointed will be put at a general meeting.

Signed on behalf of the Board of Trustees

NEIL GOULDEN
Chair of the Board of Trustees
St Christopher's Hospice, 51-59 Lawrie Park Road,
London SE26 6DZ
18 July 2024

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF ST CHRISTOPHER'S HOSPICE

OPINION

We have audited the financial statements of St Christopher's Hospice (the 'parent charitable company') and its subsidiaries (the 'group') for the year ended 31 March 2024 which comprise the Group Statement of Financial Activities, the Group and Parent Charitable Company Balance Sheets, the Group Cash Flow Statement 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 group's and the parent charitable company's affairs as at 31 March 2024 and of the group's incoming resources and application of resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been 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 charitable company 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 group's and parent charitable company's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

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

OTHER INFORMATION

The other information comprises the information included in the annual report, other than the financial statements and our auditor's report thereon. The Trustees are responsible for the other information contained in 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 there is 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 the audit:

- the information given in the strategic report and the Trustees' annual report for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the strategic report and the Trustees' annual 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 group and parent charitable company and their environment obtained in the course of the audit, we have

not identified material misstatements in the strategic report or the Trustees' annual report.

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

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

RESPONSIBILITIES OF TRUSTEES

As explained more fully in the Trustees' responsibilities statement set out on page 36, the Trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the Trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

AUDITOR'S RESPONSIBILITIES FOR THE AUDIT OF THE FINANCIAL STATEMENTS

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

As part of an audit in accordance with ISAs (UK) we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. 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.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purposes of expressing an opinion on the effectiveness of the group and parent charitable company's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the Trustees.
- Conclude on the appropriateness of the Trustees' use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the group and parent charitable company's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the group or parent charitable company to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.
- Obtain sufficient appropriate audit evidence regarding the financial information of the entities or business activities within the group to express an opinion on the consolidated financial statements. We are responsible for

the direction, supervision and performance of the group audit. We remain solely responsible for our audit report.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

EXPLANATION AS TO WHAT EXTENT 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.

The objectives of our audit in respect of fraud, are; to identify and assess the risks of material misstatement of the financial statements due to fraud; to obtain sufficient appropriate audit evidence regarding the assessed risks of material misstatement due to fraud, through designing and implementing appropriate responses to those assessed risks; and to respond appropriately to instances of fraud or suspected fraud identified during the audit. However, the primary responsibility for the prevention and detection of fraud rests with both management and those charged with governance of the charitable company.

Our approach was as follows:

- We obtained an understanding of the legal and regulatory requirements applicable to the charitable company and considered that the most significant are the Companies Act 2006, the Charities Act 2011, the Charity SORP, and UK financial reporting standards as issued by the Financial Reporting Council.
- We obtained an understanding of how the charitable company complies with these requirements by discussions with management and those charged with governance.
- We assessed the risk of material misstatement of the financial statements, including the risk of material misstatement due to fraud and how it might occur, by holding discussions with management and those charged with governance.
- We inquired of management and those charged with governance as to any known instances of non-compliance or suspected non-compliance with laws and regulations.
- Based on this understanding, we designed specific appropriate audit procedures to identify instances of non-compliance with laws and regulations. This included making enquiries of management and those charged with governance and obtaining additional corroborative evidence as required.

There are inherent limitations in the audit procedures described above. We are less likely to become aware of instances of non-compliance with laws and regulations that are not closely related to events and transactions reflected in the financial statements. Also, the risk of not detecting a material misstatement due to fraud is higher than the risk of not detecting one resulting from error, as fraud may involve deliberate concealment by, for example, forgery or intentional misrepresentations, or through collusion.

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 which 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 any party other than the charitable company and charitable company's members as a body, for our audit work, for this report, or for the opinions we have formed.

Moore Kingston Smith LLP.

JAMES SAUNDERS
Senior Statutory Auditor
for and on behalf of
Moore Kingston Smith LLP, Statutory Auditor
9 Appold Street, London EC2A 2AP

2 August 2024

CONSOLIDATED STATEMENT OF FINANCIAL ACTIVITIES FOR THE YEAR ENDED 31 MARCH 2024

	Notes	Unrestricted funds £'000	Restricted funds £'000	2024 £'000	2023 restated £'000
Income from					
Donations and gifts		4,482	353	4,835	4,508
Legacies		6,473	62	6,535	7,168
Charitable activities					
NHS funding	2	9,357	–	9,357	9,013
Education, fees and other income	3	668	–	668	678
Other trading activities					
Income of trading company	4	5,295	–	5,295	5,005
Investment income		851	–	851	368
Total income		27,126	415	27,541	26,740
Expenditure on					
Raising voluntary income		1,762	–	1,762	1,552
Trading company	4	3,828	–	3,828	3,383
		5,590	–	5,590	4,935
Charitable activities					
Inpatient care		8,509	90	8,599	7,819
Community care/outpatients		11,325	125	11,450	9,957
Bereavement services		820	71	891	687
Community action		797	74	871	708
Education, research and policy		785	342	1,127	1,214
		22,236	702	22,938	20,385
Total expenditure	5	27,826	702	28,528	25,320
Net (expenditure)/income before transfers	6	(700)	(287)	(987)	1,420
Transfer between funds		83	(83)	–	–
Net (expenditure)/income before other recognised gains and losses		(617)	(370)	(987)	1,420
Other recognised gains/(losses)					
Actuarial (losses) on defined benefit pension scheme	19	–	–	–	(127)
(Losses)/gains on investments: realised	10	(39)	–	(39)	479
Gains/(losses) on investments: unrealised	10	1,185	–	1,185	(1,292)
Net movement in funds		529	(370)	159	480
Total funds at 1 April 2023	15, 16, 17	43,865	2,731	46,596	46,116
Total funds at 31 March 2024	15, 16, 17	44,394	2,361	46,755	46,596

All recognised gains and losses are included in the consolidated statement of financial activities. St Christopher's Hospice and St Christopher's (Trading) Limited transactions are derived from continuing activities. An analysis of the results by company is shown in Note 4.

The Statement of Financial Activities (SOFA) for 2023 has been restated to reflect the new approach adopted in respect of legacy accrual recognition outlined in Note 1.5. The effect on the 2023 legacy income reflected has been a reduction of £489k.

CONSOLIDATED BALANCE SHEET
AS AT 31 MARCH 2024

	Notes	2024 £'000	2023 restated £'000
Fixed assets			
Tangible fixed assets	9	10,294	10,104
Intangible fixed assets	9	110	120
Investments	10	25,357	19,362
		35,761	29,586
Current assets			
Debtors	11	8,538	8,185
Interest-bearing bank accounts		4,807	11,457
		13,345	19,642
Creditors			
Amounts falling due within one year	12	(2,351)	(2,632)
Net current assets		10,994	17,010
Net assets		46,755	46,596
Funds			
Restricted	15	2,361	2,731
Unrestricted			
General		25,780	24,030
Designated	16	18,606	19,827
Non-charitable		8	8
Total unrestricted funds		44,394	43,865
Total funds		46,755	46,596

The financial statements were approved by The Board of Trustees on 18 July 2024 and signed on its behalf by:

NEIL GOULDEN
Chair of Trustees

CATHERINE MCDONALD
Trustee

BALANCE SHEET: ST CHRISTOPHER'S HOSPICE ENTITY ONLY AS AT 31 MARCH 2024

	Notes	2024 £'000	2023 restated £'000
Fixed assets			
Tangible fixed assets	9	10,085	9,864
Intangible fixed assets	9	110	120
Investments	10	25,757	19,762
		35,952	29,746
Current assets			
Debtors	11	10,418	11,653
Interest-bearing accounts		2,462	7,630
		12,880	19,283
Creditors			
Amounts falling due within one year	12	(2,086)	(2,441)
Net current assets		10,794	16,842
Net assets excluding pension scheme asset		46,746	46,588
Defined benefit pension scheme asset	19	–	–
Net assets		46,746	46,588
Funds			
Restricted	15	2,361	2,731
Unrestricted			
General		25,779	24,030
Designated	16	18,606	19,827
Total unrestricted funds		44,385	43,857
Total funds		46,746	46,588

As permitted by Section 408 of the Companies Act 2006, the Statement of Financial Activities of the parent charity is not presented as part of these financial statements. The Charity's deficit for the year before distribution from the trading subsidiary was £1,308k (2023: £1,142k).

The financial statements were approved by The Board of Trustees on 18 July 2024 and signed on its behalf by:

NEIL GOULDEN
Chair of Trustees

CATHERINE MCDONALD
Trustee

CONSOLIDATED STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 31 MARCH 2024

	Notes	2024 £'000	2023 restated £'000
Net cash (used in)/generated by operating activities	A	(1,739)	4,570
Cash flows from investing activities			
Interest and dividends received		851	368
Purchase of tangible and intangible fixed assets		(952)	(449)
Increase in investments		(4,810)	(1,646)
Net cash used in investing activities		(4,911)	(1,727)
Change in cash and cash equivalents in the year		(6,650)	2,843
Cash at the beginning of the year		11,457	8,614
Cash at the end of the year		4,807	11,457

Reconciliation of net movement in funds to net cash inflow from operating activities	Notes	2024 £'000	2023 £'000
	A		
Net movement in funds		159	480
Interest and dividends receivable		(851)	(368)
Depreciation and amortisation charges		772	675
Unrealised (gain)/loss on investments		(1,185)	1,292
Profit on the disposal of fixed assets		(4)	(2)
Cash received from sale of assets		4	3
(Increase)/decrease in debtors		(353)	1,917
(Decrease)/increase in creditors		(301)	523
Increase/(decrease) in dilapidation provision		20	50
Net cash (used in)/generated by operating activities		(1,739)	4,570

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2024

1 PRINCIPAL ACCOUNTING POLICIES

1.1 Basis of accounting

The financial statements are prepared under the historical cost basis and comply with the Companies Act 2006. The financial statements have been prepared in accordance with the Statement of Recommended Practice (*Accounting and Reporting by Charities*), issued in October 2019 (FRS 102), other relevant provisions of the memorandum and articles of association, and with applicable UK accounting standards.

The figures for both years reflect the full adoption of FRS (Financial Reporting Standard) 102.

The Charity meets the definition of a public benefit entity under FRS 102.

1.2 Going concern

These financial statements have been prepared on a going concern basis.

The Trustees therefore consider that the Charity holds sufficient reserves for the going concern basis to be appropriate.

1.3 Basis of consolidation

The statement of financial activities and balance sheet consolidate the financial statements of the Charity and its wholly owned subsidiary St Christopher's (Trading) Limited.

No separate Statement of Financial Activities is presented for the Charity as permitted by Section 408 of the Companies Act 2006 and SORP (FRS102). The net deficit dealt with in the Charity's Statement of Financial Activities before the distribution from St Christopher's (Trading) Limited for the year ended 31 March 2024 was £1,308k (2023: deficit £1,142k), and the net surplus dealt with in the Charity's Statement of Financial Activities after the distribution was £159k (2023: restated surplus of £480k).

1.4 Fund accounting

Restricted income funds

Restricted funds are funds subject to specific restricted conditions requested by the donors. Where the restriction relates to the purchase of a capital item then the condition will be treated as having been met when the asset is purchased.

Unrestricted income funds

Unrestricted funds comprise accumulated surpluses and deficits on general funds. They are available for use at the discretion of the Board in furtherance of the general charitable objects.

Designated funds are amounts included within unrestricted funds that have been set aside by the Board for particular purposes. Designated funds include:

- **Fixed assets** This reflects the net book value of unrestricted tangible and intangible fixed assets
- **Ward refurbishment** These are designated monies to fund a modest wards refurbishment at the Sydenham site
- **Strategic Ambitions Fund** This is a designated fund to focus on projects which will expand St Christopher's charitable impact and to support its long-term sustainability
- **Future Challenge Fund** This is a designated fund to allow for future years of financial challenge expected as a result of COVID-19
- **Legacies Fund** To set aside legacies income, when it has been higher than budgeted in a particular year. This money will be drawn down to support future years, when legacies income is lower than budgeted.

Details on the level of funds in each element are provided in notes 15 and 16.

1.5 Income

Income represents the total income receivable during the year comprising donations, legacies, NHS contracts, grants, fees, interest and other income generated during the year.

Legacies must be recognised when the following conditions are confirmed:

- There has been grant of probate
- The executors have established that there are sufficient funds to pay the legacy
- Any conditions attached to the legacy are either within the control of the Charity or have been met.

Historically, accrued legacy income has been recognised based on the estate valuation received less a 20% contingency. However, we have completed a review using historical data, and based on that evidence we are now recognising the accrued income at the estate value with no contingency applied, as this is a more reasonable estimate of what will be received. This change in accounting policy has had the effect of increasing both the legacy debtor balance and the legacy designated fund by £1,387k (2023: £1,058K); and of increasing the 2024 legacies income by £329k (2023: a reduction of legacies income of £489k).

NHS contracts and fees are recognised when it can reasonably be assumed that the Charity is entitled to the income and the amount can be estimated with sufficient reliability.

Income from trading companies arises from sales of goods in charity shops.

1.6 Expenditure

The costs of inpatient care; community care/outpatients; bereavement services; community action; education, research and policy; and raising voluntary income comprise expenditure both directly and indirectly attributable to the activity concerned. Indirectly attributable costs such as physiotherapy and social work have been allocated to activities using an appropriate cost allocation basis.

Support costs have been allocated to activities on the basis of staff time spent. Governance costs, which are charitable, relate to the stewardship of the Charity's assets, organisational administration and compliance with constitutional and statutory requirements.

1.7 Taxation

St Christopher's Hospice is a registered charity. Income and chargeable gains, which are applied for charitable purposes, are exempt from liability to direct taxation. Income tax recoverable in respect of donations under Gift Aid, investment income and legacies is included with the income to which it relates.

1.8 Capitalisation and depreciation

Tangible fixed assets are capitalised with a £1k de minimis limit where relevant.

If items are individually less than £1k, but are part of a project greater than £10k (e.g. as part of an agreed budget) then these are also capitalised as part of this project.

Equipment is not capitalised if it is less than £1k per individual item, and purchased on a rolling basis.

Assets under construction are not depreciated. Depreciation and amortisation are calculated to write off the cost of tangible fixed assets on a straight-line basis over the expected useful lives of the assets concerned at the following rates:

Leasehold buildings:	over the term of the lease
Freehold buildings:	2% straight-line basis
Freehold refurbishments and fixtures and fittings:	10% straight-line basis
Equipment and motor vehicles:	10% to 33⅓% straight-line basis
Motor vehicles:	33⅓% straight-line basis
Intangible assets:	20% straight-line basis
Shops dilapidations:	straight line over the length of the shop lease

1.9 Pension schemes

St Christopher's Hospice contributes to the St Christopher's Hospice (1985) Pension Scheme, a defined benefit scheme. The pension scheme is administered by Trustees and is separate from the hospice. See note 19 for further details.

St Christopher's Hospice also contributes to a defined contribution scheme. Contributions in respect of the year are charged to the Statement of Financial Activities in the year to which they relate.

St Christopher's Hospice has an arrangement with the NHS that permits members of the NHS final salary pension scheme to maintain their membership when they are subsequently employed by the hospice. The NHS currently provides a subsidy on the contributions payable by the hospice. This subsidy, along with the contribution from St Christopher's Hospice, are recognised in the Statement of Financial Activities in the year to which they relate.

1.10 Operating leases

Rentals payable under operating leases are charged on a straight-line basis over the term of the lease.

1.11 Estimation uncertainty and key judgements

Key judgements and areas of uncertainty are considered to be any defined pension liability and accrued legacy income.

Please refer to note 19 for a detailed review of the relevant assumptions in relation to the defined benefit pension scheme.

Accrued legacy income is calculated on the basis of the valuation of the net estate of each testator, based on management's best estimate. The source of estimation uncertainty is that the valuation of the estates at a point in time is inherently uncertain and can change significantly over a short period of time.

The carrying amount of legacies accrued (note 11) as at 31 March 2024 was £5,857k (2023 restated: £6,630k).

2 NATIONAL HEALTH SERVICE

	2024 £'000	2023 £'000
NHS contracts	9,357	9,013
	9,357	9,013

3 EDUCATION, FEES AND OTHER INCOME

	2024 £'000	2023 £'000
Education	250	332
Fees and other income	418	346
	668	678

4 GROUP UNDERTAKINGS

Summary of results of group undertakings:

2024	St Christopher's Hospice £'000	St Christopher's (Trading) Ltd £'000	Group total £'000
Income	22,246	5,295	27,541
Expenditure	(24,700)	(3,828)	(28,528)
(Deficit)/Surplus	(2,454)	1,467	(987)
Other recognised gains	1,146	–	1,146
Distributions	1,467	(1,467)	–
Net income for the year	159	–	159

The net assets of St Christopher's (Trading) Limited were £408k at 31 March 2024.

2023	St Christopher's Hospice restated £'000	St Christopher's (Trading) Ltd £'000	Group total restated £'000
Income	21,735	5,005	26,740
Expenditure	(21,937)	(3,383)	(25,320)
Surplus	(202)	1,622	1,420
Other recognised losses	(940)	–	(940)
Distributions	1,622	(1,622)	–
Net income for the year	480	–	480

The net assets of St Christopher's (Trading) Limited were £408k at 31 March 2023.

St Christopher's Hospice has one wholly owned subsidiary:

Company	Activity	Company number
St Christopher's (Trading) Limited	Operation of charity shops for the hospice	02604519

Related party transactions

During the year the company entered into transactions with related parties. Transactions entered into and balances outstanding are as follows:

	2024 St Christopher's (Trading) Ltd £'000	2023 St Christopher's (Trading) Ltd £'000
Re-charged to related parties		
Management charge	138	131
Salaries	2,125	1,899
Leasehold depreciation	34	36
Other costs	46	77
Total	2,343	2,143
Balance owed at 31 March	2,251	3,738

5 EXPENDITURE

	Direct costs £'000	Support costs £'000	Total 2024 £'000	Total 2023 £'000
Costs of generating funds				
Fundraising and publicity	1,535	227	1,762	1,552
Trading activities	3,828	–	3,828	3,383
	5,363	227	5,590	4,935
Charitable activities				
Inpatient care	6,901	1,698	8,599	7,819
Community care/outpatients	9,221	2,229	11,450	9,957
Bereavement services	715	176	891	687
Community action	650	221	871	708
Education, research and policy	994	133	1,127	1,214
Total cost of charitable activities	18,481	4,457	22,938	20,385
Total expenditure	23,844	4,684	28,528	25,320

Included in the costs above are governance costs of £146k (2023: £101k).

Analysis of support costs

	2024 £'000	2023 £'000
Chief Executive office and governance	287	376
Facilities	1,022	860
IT management	1,197	1,161
Finance	448	434
Workforce	1,730	1,409
	4,684	4,240

Support costs have been allocated to activities on the basis of staff time spent.

6 NET INCOME

	2024 £'000	2023 £'000
Net income is stated after charging/(crediting)		
Auditors' remuneration: audit fee	36	34
Auditors' remuneration: tax and tagging compliance services	6	6
Auditors' remuneration: prior year	(1)	1
Auditors' remuneration: pension	9	6
Operating lease rentals: land and buildings	797	784
Operating lease rentals: vehicles and equipment	91	69
Depreciation and amortisation	772	675
Interest receivable	(620)	(368)

7 STAFF COSTS

	2024 £'000	2023 £'000
Salaries and wages	15,348	13,845
Social security costs	1,552	1,352
Pension costs (see note 19 below)	1,229	1,156
Staff costs of the Charity	18,129	16,353
Staff costs of trading activities, which includes pension costs of £91k in 2024 (2023: £77k)	2,288	2,030
	20,417	18,383

No payments were made under a voluntary severance scheme this year (2023: £35k).

The average number of employees during the year (excluding bank) was:

	Head count 2024	Head count 2023	FTEs 2024	FTEs 2023
Inpatient care	90	87	82	78
Community care/outpatients	135	114	114	93
Bereavement services	14	12	10	8
Community action	14	11	12	10
Education, research and policy	9	10	7	8
Fundraising	14	11	13	10
Other hospice (includes support staff)	128	136	102	108
Charity shops	71	61	61	54
	475	442	401	369

The number of employees whose earnings fell within the band:

	2024	2023
£60,000 to £69,999	15	4
£70,000 to £79,999	2	6
£80,000 to £89,999	4	4
£90,000 to £99,999	1	1
£100,000 to £109,999	1	1
£110,000 to £119,999	–	–
£120,000 to £129,999	1	1
£130,000 to £139,999	–	–
£140,000 to £149,999	1	–
£150,000 to £159,999	1	1

Pension contributions of £220k (2023: £158k) were paid in respect of these employees.

The Board of Trustees considers the key management personnel to be the Executive Team of 7 FTEs (2023: 5.40 FTEs) and the total benefit paid to the key management personnel was £831k (2023: £594k).

8 BOARD OF TRUSTEES

Remuneration and reimbursed expenses

No remuneration was paid to members of the Board during either year. Expenses reimbursed to Trustees totalled £420 (2023: £nil). £15k was incurred in respect of recruiting Trustees (2023: £11k).

St Christopher's Hospice paid £3,529 (2023: £3,416) for Trustee Liability Insurance for its Trustees.

St Christopher's Hospice also paid £4k (2023: £3k) for indemnity insurance for the Trustees of the St Christopher's Hospice (1985) Pension Scheme.

Donations from Trustees

The Trustees have donated a total of £14k (2023: £10k) during the year. Of this, £5k was restricted to St Christopher's CARE (2023: £9k).

9.1 TANGIBLE FIXED ASSETS

	Freehold land and buildings £'000	Freehold refurb-ishment £'000	Equipment and motor vehicles £'000	Leasehold land and buildings £'000	Assets under con-truction £'000	Total £'000
Group						
Cost						
At 1 April 2023	12,920	3,786	1,509	501	12	18,728
Additions	272	–	573	45	–	890
Disposals	–	–	(6)	–	–	(6)
At 31 March 2024	13,192	3,786	2,076	546	12	19,612
Depreciation						
At 1 April 2023	3,714	3,717	790	403	–	8,624
Amount provided	257	41	336	66	–	700
Disposals	–	–	(6)	–	–	(6)
At 31 March 2024	3,971	3,758	1,120	469	–	9,318
Net book values						
At 31 March 2024	9,221	28	956	77	12	10,294
At 1 April 2023	9,206	69	719	98	12	10,104
Charity						
Cost						
At 1 April 2023	12,600	3,786	1,461	441	12	18,300
Additions	272	–	573	25	–	870
Disposals	–	–	–	–	–	–
At 31 March 2024	12,872	3,786	2,034	466	12	19,170
Depreciation						
At 1 April 2023	3,589	3,717	764	366	–	8,436
Amount provided	251	41	324	33	–	649
Disposals	–	–	–	–	–	–
At 31 March 2024	3,840	3,758	1,088	399	–	9,085
Net book values						
At 31 March 2024	9,032	28	946	67	12	10,085
At 1 April 2023	9,011	69	697	75	12	9,864

Caritas House, the freehold property in Orpington, was revalued by Jones Lang Lasalle in April 2014. Under the transitional arrangements of FRS 102, the valuation at the date of transition is considered to be the deemed cost of this property.

Following review, some assets from the prior year have been re-classified into more appropriate categories and opening balances restated, however there has been no change to the total opening cost, accumulated depreciation or net book value.

9.2 INTANGIBLE FIXED ASSETS

	2024 £'000	2023 £'000
Group and charity cost		
Cost		
At 1 April 2023	656	657
Additions	62	57
Disposals	(31)	(58)
At 31 March 2024	687	656
Depreciation		
At 1 April 2023	536	478
Amount provided	72	115
Disposals	(31)	(57)
At 31 March 2024	577	536
Net book values		
At 31 March 2024	110	120
At 1 April 2023	120	179

10 INVESTMENTS

	Group 2024 £'000	Group 2023 £'000	Charity 2024 £'000	Charity 2023 £'000
At 1 April 2023	19,362	19,008	19,762	19,408
Additions	4,184	2,657	4,184	2,657
Disposals	(2,892)	(3,185)	(2,892)	(3,185)
(Decrease)/Increase in market value: realised	(39)	479	(39)	479
Increase/(Decrease) in market value: unrealised	1,185	(1,292)	1,185	(1,292)
	21,800	17,667	22,200	18,067
Movement in cash balance	3,557	1,695	3,557	1,695
At 31 March 2024	25,357	19,362	25,757	19,762
Funds managed by Cazenove Capital Management				
UK equities	1,019	1,419	1,019	1,419
International equities	9,750	6,821	9,750	6,821
Bonds	1,399	1,403	1,399	1,403
Property	714	807	714	807
Alternatives: other and commodities	1,848	1,842	1,848	1,842
Cash	1,703	767	1,703	767
	16,433	13,059	16,433	13,059
Other investments				
Bank deposits	8,924	6,303	8,924	6,303
Investment in subsidiary undertaking	–	–	400	400
	8,924	6,303	9,324	6,703
Total investments	25,357	19,362	25,757	19,762

The historical cost of the investments managed by Cazenove Capital Management is £13,575k (2023: £11,340k).

The Charity owns all of the 400,000 £1 ordinary shares in St Christopher's (Trading) Limited.

11 DEBTORS

	Group 2024 £'000	Group 2023 restated £'000	Charity 2024 £'000	Charity 2023 restated £'000
Trade debtors	924	341	923	341
Legacies receivable	5,857	6,630	5,857	6,630
Sundry debtors, prepayments and accrued income	1,757	1,214	1,387	944
Amount due from St Christopher's (Trading) Limited	–	–	2,251	3,738
	8,538	8,185	10,418	11,653

12 CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	Group 2024 £'000	Group 2023 £'000	Charity 2024 £'000	Charity 2023 £'000
Trade creditors	449	344	408	322
Payroll taxes and social security	634	558	633	558
Other creditors and accruals	1,148	904	925	735
Income received in advance	120	826	120	826
	2,351	2,632	2,086	2,441

13 LEASE COMMITMENTS

The Group leases a number of properties, motor vehicles and office equipment under operating leases.

	Land and buildings 2024 £'000	Land and buildings 2023 £'000	Motor vehicles and office equipment 2024 £'000	Motor vehicles and office equipment 2023 £'000
Operating leases payments to be made				
Within one year	632	681	45	27
In two to five years	1,044	1,010	83	–
Over five years	–	47	–	–
	1,676	1,738	128	27

Land and buildings lease commitments are based on whichever is earlier out of the lease end date and the lease break-point date.

14 FINANCIAL COMMITMENTS

As at 31 March 2024, the following approved commitments were authorised by the Board of Trustees:

- Up to £2 million in respect of ward refurbishments. This will be funded through restricted and designated funds.

15 RESTRICTED FUNDS

	Balance 1 April 2023 £'000	Income £'000	Expenditure £'000	Transfers £'000	Balance 31 March 2024 £'000
3 IS Project	49	–	38	–	11
Bromley Homelessness Project	9	26	18	–	17
Candle	–	172	70	–	102
Carers	37	–	20	–	17
Caritas House Building Fund	1,062	–	27	–	1,035
Celebrating Nursing	10	25	8	–	27
Connected in Loss	53	–	50	–	3
Community Action	56	55	71	(40)	–
Community of Nursing	19	13	4	–	28
Dementia-focused training and education	45	–	5	–	40
Developing the practice of palliative nursing	26	–	19	–	7
Education (bursaries)	21	15	15	–	21
Inpatient equipment	13	17	29	–	1
Lavender Room	30	2	4	–	28
Leadership development training	–	24	–	6	30
Nightingale Fellowship hardship bursaries	64	–	4	–	60
Patient equipment/premises extension	161	–	–	–	161
Research: Stern Legacy	229	–	30	–	199
Support for St Christopher's CARE	627	–	237	–	390
Ward refurbishment project	77	–	7	–	70
Women in Fellowship Fund	31	3	–	(6)	28
Other funds	112	63	46	(43)	86
Total restricted funds	2,731	415	702	(83)	2,361

Caritas House Building Fund: this fund was originally established to cover the cost of building Harris HospisCare premises and offices. It now reflects the net book value of Caritas House.

Connected in Loss (formerly Coach4Care): supporting carers through end of life and bereavement experiences.

Community Action: supporting older, frail and socially isolated people within the local community.

Community of Nursing: shared learning and support for newly qualified nurses.

Nightingale Fellowship: hardship bursaries to nurses to assist with living costs.

Patient equipment/premises extension: an amount left in a Will with a specific request for expenditure to be spent on either patient equipment or a premises extension.

Research: Stern Legacy: St Christopher's Hospice was the beneficiary of a restricted legacy for use in research into myeloma and end of life palliative care. Accordingly, the funds have been used to establish a research project into myeloma at the Cicely Saunders International research institution and are being used to fund other research projects in end of life care.

Support for St Christopher's CARE: this fund is restricted to supporting expenditure for St Christopher's CARE in its first years of operating.

Wards refurbishment project: relates to grant funding in respect of our upcoming inpatient unit wards refurbishment.

16 DESIGNATED FUNDS

	Balance at 1 April 2023 £'000	New designations and transfers £'000	Balance at 31 March 2024 £'000
Fixed assets	9,162	207	9,369
Strategic Ambitions Fund	5,521	(2,361)	3,160
Wards refurbishment	750	940	1,690
Future Challenge Fund	336	(336)	–
Legacies Fund	4,058	329	4,387
	19,827	(1,221)	18,606

Fixed assets: this reflects the net book value of unrestricted tangible and intangible fixed assets.

Strategic Ambitions Fund: this is a designated fund to focus on projects which will expand St Christopher's charitable impact and to support its long-term sustainability.

Wards refurbishment: these are designated monies to fund a wards refurbishment at the Sydenham site.

Future Challenge Fund: this was a designated fund to allow for future years of financial challenge expected as a result of COVID-19.

Legacies Fund: to set aside legacies income when it has been higher than budgeted in a particular year. This money will then be released to general funds in future years if legacies income is lower than budgeted.

17 ANALYSIS OF GROUP NET ASSETS BETWEEN FUNDS

	Fixed assets £'000	Current assets £'000	Creditors £'000	Total £'000
Restricted income	1,035	1,326	–	2,361
Unrestricted income				
Designated	9,369	9,237	–	18,606
General	25,357	2,782	(2,351)	25,788
	35,761	13,345	(2,351)	46,755

18 CONSOLIDATED STATEMENT OF FINANCIAL ACTIVITIES FOR THE YEAR ENDED 31 MARCH 2023

	Unrestricted funds restated Total £'000	Restricted funds Total £'000	2023 restated Total £'000	2022 restated Total £'000
Income from				
Donations and gifts	3,966	542	4,508	4,037
Legacies	7,168	–	7,168	11,504
Charitable activities				
NHS funding for patient care	9,013	–	9,013	10,036
Education, fees and other income	678	–	678	867
Other trading activities				
Income of trading companies	5,005	–	5,005	4,436
Investment income	368	–	368	153
Total income	26,198	542	26,740	31,033
Expenditure on				
Raising voluntary income	1,552	–	1,552	1,508
Trading companies	3,383	–	3,383	3,125
	4,935	–	4,935	4,633
Charitable activities				
Inpatient care	7,789	30	7,819	6,861
Community care/outpatients	9,809	148	9,957	8,847
Bereavement services	614	73	687	701
Community action	638	70	708	444
Education, research and policy	866	348	1,214	1,066
	19,716	669	20,385	17,919
Total expenditure	24,651	669	25,320	22,552
Net income/(expenditure) before transfers	1,547	(127)	1,420	8,481
Transfer between funds (relates to capital programmes)	97	(97)	–	–
Net income/(expenditure) before other recognised gains and losses	1,644	(224)	1,420	8,481
Other recognised gains/(losses)				
Actuarial (losses) on defined benefit pension scheme	(127)	–	(127)	(303)
Gains on investments: realised	479	–	479	198
(Losses)/gains on investments: unrealised	(1,292)	–	(1,292)	352
Net movement in funds before transfer	704	(224)	480	8,728
Net movement in funds	704	(224)	480	8,728
Total funds at 1 April 2022	43,161	2,955	46,116	37,388
Total funds at 31 March 2023	43,865	2,731	46,596	46,116

19 PENSION SCHEMES

a St Christopher's Hospice (1985) scheme

The hospice operates a pension scheme, the St Christopher's Hospice (1985) Pension Scheme, which provides benefits based on final pensionable salary. The assets of the scheme are held separately from those of the hospice. The scheme was closed to new members in April 2002 and closed to future accruals from March 2010.

Contributions are charged to the Statement of Financial Activities so as to spread the cost of pensions over employees' working lives. The pension charge for the year was £Nil (2023: £127k).

Triennial valuation

The contribution rates are determined by a qualified actuary on the basis of triennial valuation. The results of the last triennial valuation at 31 March 2022 showed that the value of the scheme's assets was £12,279k (2019: £10,413k) and that this represented 111% (2019: 94%) funding level, with a surplus of £1,226k (2019: deficit of 695k). The actuary confirmed that the minimum funding requirement regulations had been met.

In accordance with the actuarial valuation, the hospice has agreed with the Trustees that it will meet the expenses of the scheme and levies payable to the Pension Protection Fund.

FRS (Financial Reporting Standard) 102: Disclosure Report

FRS 102 is fully effective for accounting periods beginning on or after 1 January 2015. The Statement of Financial Activities, the balance sheet and the disclosures in the notes to these financial statements meet the requirements of FRS 102. The major assumptions used by the actuary are shown below.

Present values of defined benefit obligation, fair value of assets and defined benefit asset (liability)

	Period ended 31 March 2024 £'000	Period ended 31 March 2023 £'000	Period ended 31 March 2022 £'000
Fair value of plan assets	8,280	8,612	12,279
Present value of defined benefit obligation	(7,406)	(7,597)	(10,434)
Unrecognised surplus	(874)	(1,015)	(1,845)
Defined benefit asset to be recognised	–	–	–

Reconciliation of opening and closing balances of the defined benefit obligation

	Period ended 31 March 2024 £'000	Period ended 31 March 2023 £'000
Net defined benefit obligation at start of period	7,597	10,434
Interest expense	360	283
Acturial losses	(195)	(2,793)
Benefits paid	(356)	(327)
Defined benefit obligation at end of year	7,406	7,597

Reconciliation of opening and closing balances of the fair value of plan assets

	Period ended 31 March 2024 £'000	Period ended 31 March 2023 £'000
Fair value of plan assets at start of period	8,612	12,279
Interest income	409	336
Actuarial losses	(385)	(3,801)
Contributions by the Charity	–	125
Benefits paid	(356)	(327)
Fair value of plan assets at end of period	8,280	8,612

The actual gain on the plan assets over the period ended 31 March 2024 was £24k (2023: a loss of £3,465k).

Defined benefit costs recognised in net (expenditure)/income

	Period ended 31 March 2024 £'000	Period ended 31 March 2023 £'000
Net interest cost	–	(2)

Defined benefit costs recognised in other gains and losses

	Period ended 31 March 2024 £'000	Period ended 31 March 2023 £'000
Return on plan assets (excluding amounts included in net interest cost): (loss)/gain	(385)	(3,801)
Experience gains and losses arising on the plan liabilities: (loss)	(17)	(704)
Effects of changes in the demographic and financial assumptions underlying the present value of the plan liabilities: gain	212	3,497
Effects of changes in the amount of surplus that is not recoverable (excluding amounts included in net interest cost): gain/(loss)	190	881
Total amount recognised in other gains and losses	–	(127)

Assets

	Period ended 31 March 2024 £'000	Period ended 31 March 2023 £'000	Period ended 31 March 2022 £'000
Diversified growth assets	4,082	5,225	9,071
Debt instruments	2,104	–	–
Liability-driven investments	1,900	2,913	3,025
Cash and cash equivalents	194	474	183
Total assets	8,280	8,612	12,279

None of the fair values of the assets shown above include any direct investments in the hospice's own financial instruments or any property occupied by, or other assets used by, the hospice.

Assumptions

	Period ended 31 March 2024 %pa	Period ended 31 March 2023 %pa	Period ended 31 March 2022 %pa
Discount rate	4.90	4.85	2.75
Inflation (RPI)	3.40	3.50	4.00
Allowance for revaluation of deferred pensions of RPI or 5% p.a. if less	3.40	3.50	4.00
Allowance for pension in payment increases of RPI or 5% p.a. if less	3.20	3.20	4.00
Allowance for commutation of pension for cash at retirement	0.75	0.75	0.75

The mortality assumptions adopted at 31 March 2024 imply the following life expectancies at age 65 years:

Male retiring in 2024:	21
Female retiring in 2024:	23
Male retiring in 2044:	22
Female retiring in 2044:	25

As the pension scheme is in surplus, there is not expected to be any contributions paid by the hospice to the scheme for the period commencing 1 April 2024.

Calculation of pension scheme asset

	£'000
Triennial valuation surplus in 2022	1,226
Less amounts paid by charity 2022-23	(125)
Surplus not recognised	1,101

b St Christopher's defined contribution scheme

The St Christopher's defined contribution scheme was set up in September 2001. In April 2010 the St Christopher's Personal Pension (2010) defined contribution scheme was established and members of the existing defined contribution scheme transferred to this new scheme with effect from January 2011. The contribution of the hospice was on average 21% for former members of the St Christopher's (1985) scheme and 5% for all other members, which represented a total charge for the year of £622k (2023: £483k) to the St Christopher's GPP (2010) defined contribution scheme.

c NHS Pension Scheme

Details of the scheme are provided in note 1.9. The contribution of the hospice was 14.38%, which was offset by a 29% subsidy on the contribution. This represented a net charge for the year of £698k (2023: £571k).

LOOKING TO **THE FUTURE**

In St Christopher's last Annual Report and Accounts, we introduced our new strategy for the next three years. One year in, we're already making great strides – as you'll have seen from the report on our progress from pages 9 to 27.

One key area of focus for us remains tackling inequalities to ensure that everyone has equitable access to care and support at the end of life whoever and wherever they are. Our recently formed Inequalities Working Group will be focussing on specifically tackling three key areas of inequality including: ethnic minority communities, socio-economically disadvantaged and people aged over 75.

Through our public perceptions research last year, we gained greater insights into why people, specifically from ethnic minority and socio-disadvantaged communities, may not choose to access St Christopher's care and support. This ranged from not realising our services are free to the belief that we would not be able to meet their cultural or spiritual needs. We have and will continue to tackle this.

Most people told us how important it was for them to be able to play a caring role in supporting their loved one, ideally at home, and so did not want an admission to the hospice wards. In fact, only 47% of the public surveyed were aware that hospice care could be provided at home. Surprisingly for many, that is where the majority of our care and support is provided. In the last year, our teams completed 15,208 visits to support people in their own homes– a 10% increase on the number of visits completed the year previous – and we expect this to continue to rise.

We're also not afraid to work in new and innovative ways to tackle these inequalities and meet the growing demands for our care and support. At last year's Hospice UK conference Professor Chris Whitty outlined how our ageing population will significantly increase demand for palliative and end of life care. One way we are looking to address this is by working side-by-side with care homes, helping them to be ready to support end of life care in the future.

I have first-hand experience of seeing a nursing care home make the journey from providing good palliative care, with around 75% of its residents dying in the care home, with support from its local hospice, to a place where it is providing outstanding palliative care, with over 95% of its residents dying in the care home, independent of the local hospice.

I believe the main change needed in the hospice sector is an acknowledgement of the expertise of the best care homes and close partnership working with them to co-produce and co-deliver education, support and advice to local care homes open to making that same journey.

We should be seeking to lay the foundations for hospices retreating from supporting care home residents in all but the most complex cases requiring our highly specialist palliative care, so that hospices can focus on expanding community services to those in their own homes and providing support on the wards.

Later this year, St Christopher's will be co-delivering a reflective two-day conference for both leaders in care homes and leaders in hospices together, partnering with Nightingale Hammerson – an outstanding care home provider in south London – to bring some of these concepts to reality. This is one of the many cutting-edge learning events we will be hosting through St Christopher's Centre for Awareness and Response to End of life (also known as CARE) throughout the year.

Through St Christopher's CARE, we also continue to influence and improve end of life care globally and, in the last year, reached 92 countries (up from 56 in the year previous). We continue to work in partnership with the Institute of Palliative Medicine, India, the Sanjeevan Palliative Care Project, Pondicherry, in India, and Bangabandhu Sheikh Mujib Medical University, Bangladesh, to deliver the Global Fellowship Programme. Each year this transformative programme spans countries, time zones and professions and has become a hugely valued and sustainable partnership model which influences palliative care globally. The Professional Learning team also continue to develop our online offer, host international visits and form networks for professionals to support their continued development.

Over the coming year we will also embark on large-scale projects to improve our facilities and their accessibility. One of these is our ward refurbishment programme due to start in autumn 2024. These works will improve our wards so they feel welcoming and homely for the people staying with us. They will also focus on creating a dementia-friendly environment throughout these spaces so that people with dementia feel safe, supported, and understood.

"I hope you are inspired by our plans and that we can rely on your support to make these aspirations a reality. Working together, we can and will improve end of life care across south east London and beyond."

We want everyone who stays with us to feel welcome and at home

You will have read about our courageous approach to the ethical challenge of assisted dying and its potential legalisation in the UK (on page 26). We've been working with the communities we serve to develop recommendations for policy makers and the wider sector to consider and, over the coming year, our focus will be on ensuring these are shared. We've heard very different perspectives from the community on this complex issue to those being portrayed in the media. Our view is that it is important to hear unheard voices on this important topic – especially those whose current healthcare experience is poor due to structural inequalities. We are also committed to sharing our learnings with other hospices across the UK so that, together, we can be prepared for any potential change in the law. The openness, willingness to engage and understanding shown of differing views throughout our workshops has been humbling to see.

This is just a taster of our ambitions for the future and we look forward to sharing our impact with you in next year's Annual Report and Accounts. I hope you are inspired by our plans and that we can rely on your support to make these aspirations a reality. Working together, we can and will improve end of life care across south east London and beyond.

I must end by thanking the 1,200+ volunteers who so generously share their time, expertise and goodwill with us each and every day. These individuals keep our shops open, provide valuable insights on various committees and provide invaluable support to people nearing the end of their lives or living through bereavement.

Thank you also to St Christopher's staff for their continued hard work to reach the growing numbers of people who need us in our community with such care, dedication and determination. Without these key teams and the generosity of our supporters, vital end of life care and support would not be available for people when they need it most. Thank you for being part of this transformative community.

Helen Simmons

HELEN SIMMONS
Chief Executive

THANK YOU TO ALL OUR SUPPORTERS

We are hugely grateful to the individuals, corporate sponsors and trusts who continue to support us at St Christopher's. Thanks to you we've been able to provide care and support for almost 6,500 people in the last year. Thank you for making this possible.

- 5 Stone Buildings
- 5th Beckenham South Scouts
- Addington Court Golf Club
- Addington Palace Golf Club
- Ambulance Wish Foundation
- AMETEK Airtechnology Group Ltd
- Amphlett Lissimore
- Anthony Gold Solicitors LLP
- APSCo
- Aquarius Golf Club
- B&Q Foundation
- Baltic Exchange
- BBC Children in Need
- BDB Pitmans LLP
- Beauty with a Purpose
- Birketts LLP
- Bluecoat Engineering Ltd
- Blythe Hill Tavern
- BNY Mellon
- Boodle Hatfield LLP
- Brilliant Solutions
- Bromley Football Club
- Bromley Well Innovation Fund
- C Brewer & Sons Ltd Trust
- Capital Generation Partners
- Charles Russell Speechlys
- Collyer Bristow LLP
- Connor Norris
- COOK
- Cosmetics for Charities
- CRASH Charity
- Currey & Co LLP
- Diane and John Brazil and family
- Direct Line Group
- Dixon Wilson
- Dr Friedrich Stock Memorial Trust
- Dulwich Champagne Reception Committee
- Dulwich Friends of St Christopher's
- EG Foundation
- Elliot Dallen Trust
- Ernst & Young Foundation
- Evelyn Partners
- Eventim Apollo
- Ewings & Co Solicitors
- Farrer & Co LLP
- Fb Coales No 4 (Family)Trust
- Forsters LLP
- General Napier Public House
- George and Dragon Pub
- Grant Saw Solicitors
- Harapan Trust
- Heidi Newnham and family
- IdentityE2E
- ING Bank
- Irwin Mitchell
- Jackie Gray and Queenie
- Jet's Charitable Trust
- Jodie and the Cowden family
- John Lamb Hill Oldridge
- K&T Heating Ltd
- Laura's Light
- Lilley Plummer Risks Ltd
- London Catalyst
- Marquee Magic
- Maurice Turnor Gardner LLP
- Meerali Beedle
- Metropolitan Public Gardens Association
- Michelmores LLP
- Mike Twomey
- Milton-Lloyd Limited
- Mishcon De Reya LLP
- MM! The Party Limited
- Panagua Bikes
- Payne Hicks Beach LLP
- Penguins Against Cancer
- Poppy Younger
- Rawlinson & Hunter
- Ray Jones Roofing Ltd
- RJ and AH Daniels Charitable Trust
- Rockcliffe Charitable Trust
- Ros Harding Trust
- Rosie Pound
- Rothschild & Co
- Sainsbury's – Locksbottom
- Sarah Campbell
- Schroder Investment Management Ltd
- ShareGift
- Shortlands Tavern (Shaun Romeril)
- Sinclair Gibson LLP
- Sotheby's
- South London Jazz Orchestra
- St David's College
- St George's German Lutheran Church – Imke Siegerist, Immo Huneke, Peter Croucher (church treasurer)
- STEP - Society of Trust & Estate Practitioners
- Stonehage Fleming Family and Partners

- Taylor Wessing
- The Albert Hunt Trust
- The Anthony Hart Charity Trust
- The Ardwick Trust
- The B & P Glasser Charitable Trust
- The Balcombe Charitable Trust
- The Barleycorn Trust
- The Blyth Watson Charitable Trust
- The Bothwell Charitable Trust
- The Bricklayers Arms
- The Cazenove Charitable Trust
- The Cecil Rosen Foundation
- The City Bridge Trust
- The Daisy Foundation
- The Douglas-Morris Charitable Trust
- The Dyers' Company Charitable Trust
- The Elizabeth & Prince Zaiger Trust
- The Elizabeth Frankland Moore and Star Foundation
- The February Foundation
- The Freddie Green and Family Charitable Foundation
- The Goldsmiths' Company
- The Hayes (Kent) Trust
- The Health Foundation
- The Horner Family Charitable Fund
- The James Wise Charitable Trust
- The JC and KC Foundation
- The Jimmy Knapp Cancer Fund
- The John Horseman Trust
- The Mageni Trust
- The Margaret and David Walker Trust
- The Michael and Anna Wix Charitable Trust
- The P M Charitable Trust
- The Rest-Harrow Trust
- The Robert Holman Memorial Trust
- The Thomas J. Horne Memorial Trust
- The Timothy Franey Charitable Foundation
- The Veale Wasbrough Charitable Trust
- The Woodroffe Benton Foundation
- Tom Allen
- Universal Music Operations Limited
- Walder Wyss Ltd
- Whitehill Chase Foundation Trust
- Wilsons Solicitors LLP
- Withers Worldwide
- Women in Fellowship.

A SPECIAL THANK YOU

Over the last year two individuals, who both dedicated their time and expertise to the hospice for many years, sadly died. We'd like to remember them and acknowledge their significant contribution.

David White was our Director of Commercial Projects and, for many years, successfully led our Retail team. David's vision brought with it huge growth to our network of shops bringing in record profits for the organisation. David is very much missed but his legacy lives on as his team continues to go from strength to strength.

Dr Sam Klagsbrun was an important figure in the history of St Christopher's and the modern hospice movement and was one of our Vice Presidents. He worked alongside Dame Cicely Saunders on the psychosocial elements of the care of people dying or grieving. His regular visits to the hospice, right up until the recent pandemic, and his guidance to the organisation and its leadership were always extremely supportive. They are part of a significant legacy he leaves to the organisation, which we will continue to reflect on and honour in our work moving forward.

We feel lucky to have worked with both David and Sam and will remember them and the work of other similar leaders who have shaped our history and our future.

MEET THE TEAM

EXECUTIVE TEAM

HELEN SIMMONS
Chief Executive

TOM ABBOTT*
Director of Income Generation and Communications

AMANDA MAYO
Care Director

JAN NOBLE
Director of Quality and Innovation

DAVID TULLETT
Director of People and Organisational Development

DR JOY ROSS
Lead Consultant in Palliative Care

JOHN VICKERS
Director of Finance and Corporate Services

*Appointed 16 October 2023
**Appointed 1 July 2023

TRUSTEES

NEIL GOULDEN
Chair

ELEANOR BROWN
Vice Chair

VIVIAN BAZALGETTE
Trustee

GLENDA BONDE**
Trustee

NICK DIAMOND
Trustee

TONY HUNTER
Trustee

IAN JUDSON
Trustee

DANIEL KELLY OBE
Trustee

JOHN KING
Trustee

CATHERINE MCDONALD
Trustee

SATVINDER REYATT**
Trustee

DEEPTI TOWNSEND
Trustee

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Registered company number 00681880

VAT registration number 523613961

ST CHRISTOPHER'S

END OF LIFE CARE **THAT'S ALL ABOUT YOU**

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Registered charity 210667
registered with the Fundraising Regulator
Registered company number 00681880

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If you would like this information in a different format, such as audio tape, braille or large print, or in another language, please speak to the Communications team on **020 8768 4500** or email **communications@stchristophers.org.uk**.

ST CHRISTOPHERS HOSPICE

England & Wales - Charity number 210667

Accounts

Annual report and accounts 2022-23

St Christopher's Hospice
annual report and accounts 2022-23
www.stchristophers.org.uk

StChristopher's
More than just a hospice

About St Christopher's

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At St Christopher's Hospice, we have a vision of a world in which all dying people, and those close to them, have access to care and support, whenever and wherever they need it. That means everyone should have access to the best care at the end of their lives.

Operating from two locations, one in Sydenham and one in Orpington, our efforts are focused on meeting the goals of people with a life-shortening condition and supporting their families and carers wherever we can. Our reach spans a diverse population of approximately 1.6 million people within the five London boroughs of Bromley, Croydon, Lambeth, Lewisham and Southwark.

Our ambition is to help people live well until they die, and support those affected by the death of a friend or relative. Each person is unique, so we ask "What matters most?" and then tailor our care to meet social, emotional and spiritual needs, as well as manage physical symptoms.

Everyone should have access to the best care at the end of their lives. We provide this through a mix of expert clinical care, support at home, research and education, and strategic partnerships with other organisations that have the same aspiration. We are proud that last year we provided care and support to 5,785 patients, 1,358 carers and 445 children across south east London.

It costs over £25m to run St Christopher's each year. We receive £9m of funding from the NHS and we need to raise over £16 million every year to continue to care for people when it matters most. This would not be possible without the support of our local communities, our donors, our staff and our volunteers, so a huge thank you for your support, from us all.

A family share a moment together in our Sydenham cafe

Meeting increased need during tough times

Over the last year we provided care and support for over 7,500 people

Welcome to the Annual Report and Accounts of St Christopher's Hospice (referred to as 'St Christopher's' in this document).

Not everyone who dies in the five boroughs we serve will need access to our support, but the demand for our services continues to grow. Referrals for our inpatient unit (IPU) and community services increased by 4% during 2022-23 compared to the prior year, and these were also 23% higher compared to four years ago.

Our services are free at the point of need, which means no one, irrespective of background, will pay for the care and support offered by our multi-disciplinary team to ensure they're able to live well until they die.

Meeting this increased need comes at a cost. On top of this, St Christopher's has experienced the effects of the rising cost of living over the last year. This means an increase to our running costs, such as staff costs and energy costs to keep our hospice open 24/7; we are expecting further cost increases in the future too. The pressures on cost of living also means that it's harder for St Christopher's to fundraise, as donors in our community have less money to give. All of this gives St Christopher's additional financial challenges as we go into 2023-24.

However, the rising cost of living has hit some of our patients, their carers and families much harder. We have seen a 13% increase in referrals to our Welfare Team specifically – this includes many people who previously may not have been anxious about their finances, but have concerns about the rising costs of their energy bills. This is at a time when it would already have been a particularly difficult period in their lives.

Helen Simmons joined as our Chief Executive in May 2022. To help ensure that we address this increased need fairly during these tough times, Helen has been taking a fresh look to ensure we're at the forefront of breaking down inequalities in end of life care. Alongside this important work, she has also been encouraging us to review the ethical challenges facing palliative care, and to support our aspirational vision for St Christopher's position on a global stage. You can read more about our new organisational strategy and what we're going to do next on pages 58-59. We'd also like to extend a heartfelt thank you to Heather Richardson, who held the position of interim Chief Executive from December 2021 until Helen joined, when Heather then moved to our Professional Learning Team and to support with research and policy.

We have continued to make excellent progress with our recently opened centre, St Christopher's Centre for Awareness and Response to End of Life (CARE). In 2022-23, just over 10,000 learners from 56 countries engaged with CARE, compared with 4,366 in the previous year. From this centre, we have increased the skills, capabilities and insights of palliative care workers in the UK and beyond. We have also encouraged new ways of thinking in relation to palliative and end of life care in both the community and the wider health system.

We appreciate times are very difficult for many at the moment with money being tight. We would therefore like to extend a huge thank you to all those who support us financially: alongside the NHS, this includes our donors, our fundraisers, our charity shop customers and those people who remember us in their Wills.

We would also like to thank those who help us deliver high-quality care: from our staff and volunteers to our delivery partners in the health system and the local community; we could not help those people who need us most without your unwavering dedication and support.

Neil Goulden
Chair of the Board of Trustees

What we do with your money

People are often surprised to see we have a gym at the hospice but our focus is helping people to live well and maintain independence

It is thanks to the incredible generosity of our supporters that we are here. Your kindness means we are able to continue to provide vital services for people in south east London and beyond.

Where our money comes from

An incredible £17.2m (63%) of our income is from people in our community, donated through fundraising activities, leaving gifts in Wills or buying goods in our shops. We are so very grateful for the money you donate, and we are careful to spend and invest it wisely in ways that will best serve the people who need our support.

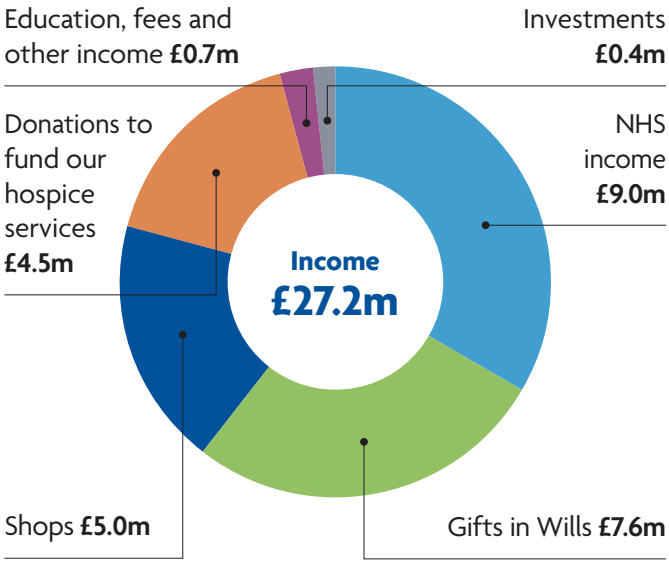
We are also very thankful for the money we have received from the NHS which comprised £9.0m (33%) of our total income.

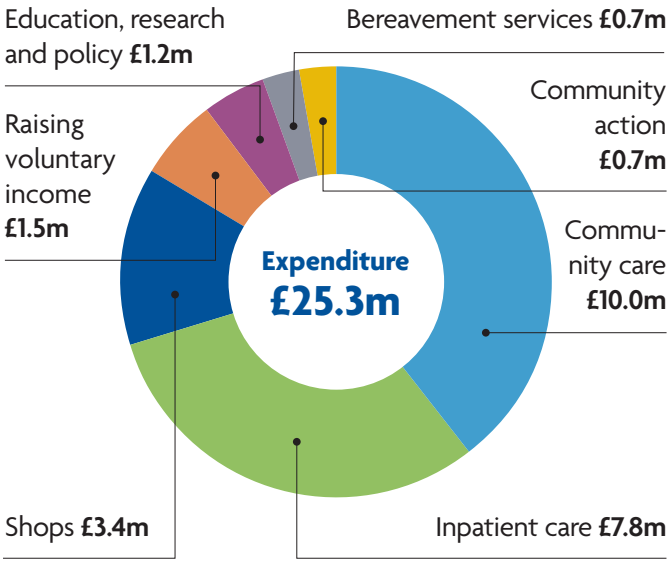
Our remaining income comprised £1.0m (4%) that we generated from education, fees and investments, and other income.

The total income of £27.2m raised this year enabled us to continue providing care to people who live in the boroughs we serve – Bromley, Croydon, Lewisham, Lambeth and Southwark – as well as shaping care for people across the globe through education, research and innovation.

Where our money goes

It cost £25.3m to run St Christopher's in 2022-23. Here's a breakdown of how we spent the money you gave us. Our full financial review starts on page 32.





What people say about us

At St Christopher's, we're committed to continually improving and developing the support and services we offer, ensuring they meet the changing and diverse needs of the communities we serve.

To make sure we're doing this effectively, we regularly measure and report on the impact we have both to the health and wellbeing of people receiving our support and their experience of our care. Over the last year we continued to invest in learning about and use of patient and other user reported outcome measures, working closely with the academic team at Hull and York Medical School and University. Our Quality Account 2022-23 also explores this work and we were heartened to see a reduction in physical and psychological concerns whilst people were supported by our teams.

In December 2022, we asked people using our services for feedback, helping us to understand what we're doing well and where we need to improve.

The results were overwhelmingly positive:

- **88%** of patients said they were very satisfied or satisfied with our care
- **89%** of carers were very satisfied or satisfied with our care
- **93%** of patients and carers felt we had listened to their needs always or most of the time
- **97%** of people who used our service felt they were treated with respect and helped to feel dignified always or most of the time.

"We feel we can trust you and not be judged by our thoughts and feelings of going forward without mum"

"I feel I always have someone to turn to and talk as I have some bad days; I know they are there for me"

Our team are committed to providing the best individualised care and support

Maintaining and improving our high standards of care

Manzoor at home with a picture of his late wife

Patient-centred care

We provide care and support for people at the end of life, carers and those who are bereaved through a range of services. This was to over 7,500 people in 2022-23. Operating in an environment of continuous improvement means putting the needs of the individual first, supporting people wherever they want to be and always ensuring a high quality of care. Over the last year, we've retained our Outstanding Care Quality Commission (CQC) rating and were early adopters of the CQC's new self-service portal.

What matters to you, matters to us

As an organisation, we've officially joined the **What matters to you?** (WMTY) movement, which has now spread to over 49 countries worldwide.

WMTY is a simple question that can have a profound impact on a person's engagement, overall experience and moves the culture away from starting with a diagnosis or solution to a symptom, to doing what matters most to the individual.

Healthcare staff can be reluctant to ask "What matters to you?" because they're concerned, in some cases, the response will not be actionable, but this holistic and patient-centred approach has proven to improve outcomes for patients and those closest to them.

Following our work on a contemporary model of holistic rehabilitative palliative care at St Christopher's, we wanted to be part of the movement by making WMTY central to all our conversations. It's early days, but we've already seen incredible examples of where this question has supported a better overall outcome for people and we've appointed WMTY Ambassadors across the organisation to support staff to continue to make WMTY an essential part of each and every initial conversation.

Knowing what matters to someone is also linked to happiness at work so we're making it part of our staff culture too and are including it in our new appraisal process.

Continuously learning to improve individualised care

Over the last year, we've revamped our research audit process and established a **Research, Audit and Clinical Effectiveness (RACE) Committee** to engage a wider range of staff in these aspects of quality and

We provided care and support for over 7,500 people

We had 547 inpatient admissions

ensure we're continuously improving. In practice, this means we've increased focus on recent audits, quality improvements, and where we need to undertake any research to progress in a particular area.

In June and July 2022, we held our second annual inpatient unit (IPU) quality days which were attended by 81 staff and the theme was 'Enriching our care – enriching ourselves.' The days included a variety of sessions from looking at feedback from people who have used our services and learning from complaints to helping staff to develop strategies when a situation is challenging and staff wellbeing and resilience.

Over four days in September and October 2022, we held our second annual community quality days for all members of the multi-disciplinary team including nurses, administrators, doctors and members of the rehab and psychosocial teams. This year's theme was empowerment: of the people we care for to live well and die well and of staff to have control and autonomy over their work and to strive for continuous improvement. The day was well evaluated by all 78 staff.

We also introduced three clinical staff as **Quality Champions**. Representing three different teams, they work on a number of quality improvement areas including: audits; recruitment of people for focus groups and co-facilitating focus groups; the investigation of complaints/feedback, reviewing the quality of data and supporting staff with the implementation of learning from incidents and complaints.

Another way we cemented our commitment to continuous improvement was through **recording our phone calls** from December 2022. This has been instrumental in supporting care provision as well as providing us with a valuable opportunity for enhanced training for staff and to aid in the investigation of complaints.

Early patient referral is crucial to create an individualised care plan and ensure anyone who needs us can gain access to our services, for free, as soon as possible. To better support our community teams and improve early patient referral, we've also increased the GP influence in our service care provision across all five boroughs.

Manzoor and Nayeem's story

Manzoor was supported by the St Christopher's team within his own home. When asked "What matters to you?" by Maria, one of our clinical nurse specialists, Manzoor shared: "My family, my children, they mean so much to me." He added: "If I can do anything for them it's very encouraging."

Manzoor went on to speak lovingly about his late wife: "We never quarrelled, we never fought. Since I lost my wife I've tried to be independent and encourage myself as much as I can."

Maria then took the time to speak to Manzoor's son Nayeem and ease his concerns about his father's condition. Sadly, Manzoor died shortly after this visit.

After we shared the photos that we took of Manzoor at his home, his son Nayeem told us: "I will treasure them for a long time to come. They are frame worthy! I'm so glad you were able to meet him."

Nayeem and his father at home

We had 5,256 outpatient appointments – a 30% increase on the previous year

We made 13,813 home visits – a 5% increase on the previous year

We cared for 5,785 patients – a 4% increase on the previous year

Care on our wards

At the hospice, it's our job to make sure that we do all we can to offer help and support for those who need it. A big part of this is making sure people feel comfortable and at home whilst they stay with us on our wards. We only have one chance to get it right and we know that how people die remains in the memory of those who live on.

Refreshing our wards

Our wards need some essential works to reflect the changing needs of the population and we want to make the spaces brighter and more welcoming, as well as better equipped, so we can support the people who stay with us each year in any way they need.

Planned work to **refresh our wards** includes:

- Making our wards the best they can be for people living with dementia – a significant number of people who stay with us are living with dementia and it's vital we create an environment which is easy to navigate to minimise confusion and where they feel supported and understood
- Converting some of our multiple occupancy rooms into larger, family-sized rooms – we know how important it is for different types of families to make the most of the precious time they have together
- Ensuring we can best support larger patients. The number of people who are obese has almost

Over 540 people stayed at the hospice last year with the majority of our care provided in people's own homes

"They've restored my confidence and made it easier for me to want to engage. I'm not just going to sit at home, waiting to die"

We restored Eileen's confidence

Eileen's story

Eileen was diagnosed with motor neurone disease (MND) in August 2022 following months of investigations for various symptoms, and ultimately, a respiratory failure she has no memory of. The news she had MND "knocked her sideways" and she described it as "receiving a death sentence". St Christopher's intervened when the local authority's support for personal care stopped.

The team sent an occupational therapist to Eileen's home to assess her needs and come up with an ongoing plan to support her and enable continued independence. In addition to the at-home care, she also comes into the hospice for wellbeing and peer groups and to use our rehabilitation gym. Eileen said: "Everyone is so approachable, respectful and helpful. They've restored my confidence and made it easier for me to want to engage. I'm not just going to sit at home, waiting to die."

doubled in the past 20 years to 13 million, which is approximately 30% of the adult population. This requires an enhanced physical environment, including hoists and sufficient space.

We've secured the support of CRASH – a charity that specialises in helping hospices and homelessness charities create spaces for people when they are at their most vulnerable.

We are currently working with CRASH on plans for how we make the most of our wards space and plan to commence the project and the associated fundraising in 2023-24.

Trialling innovative equipment

We partnered with Eitan Medical to trial a new prototype **syringe drive pump**, which can be used to administer subcutaneous medications. The pump has variations in settings, allowing larger volumes to be administered over differing times as well as enhanced software to support the review of individual patient treatments, which may be useful in community settings.

The four-month trial supported 135 treatments for 15 patients over a range of 1-26 days. Thirty-three nursing staff from our IPU were trained to use the new pump, found it easy to use and are proposing to change to these new pumps following their evaluation.

Community care

We know the majority of people want to remain at home, where they are most comfortable and in familiar surroundings, rather than be admitted to a hospital or hospice. We see the majority of patients wherever they call home with the supportive partnership of primary care providers, carers and family members. We made 13,813 home visits in 2022-23 – a 5% increase on the previous year.

Improved services for people at home

We've also introduced individual caseloads for groups of St Christopher's nurses, aligned to the patient's primary healthcare team in order to provide better **continuity of care**. This means each group of nurses only sees around 30-40 patients (rather than hundreds), which enables our staff to get to know each individual better and provide a friendly, reliable face to patients who may otherwise feel very isolated.

To continue to deliver comprehensive care for people with a prognosis of two to three weeks left to live, who wish to remain in their own homes, we expanded our **Choose Home** service across all five boroughs in 2022-23. We saw a 31% increase in the number of patients who were able to access this service and this team is now supporting ward discharge with a 'day after discharge' visit from a nurse known to the patient,

This year we had 5,256 outpatient appointments – a 30% increase on the previous year

providing better continuity of care. This visit is in addition to any ongoing at-home care package arranged with St Christopher's and partner organisations upon discharge.

We're also involved in a new initiative in Bromley, known as **Virtual Wards**, which is currently being trialled and aims to provide intensive, hospital-level care for people with conditions that would normally require a hospital bed, or regular visits to a hospital, in the place they call home (including care homes).

If this pilot in Bromley is successful, it will be a service we look to develop and offer across all five boroughs we serve in the future.

Planning for the future

Croydon Commissioners approached us to work with one primary care network to identify people who would benefit from having an **urgent care plan** written to improve their quality of life. This work began in January 2023 and ran until mid-April, where a dedicated St Christopher's nurse is having conversations with 71 people identified as fitting the project criteria. The aim is to have meaningful discussions about their wishes and life goals, which the nurse can translate into a plan and can be accessed by any healthcare service they may need to access now or in the future.

In addition, we've secured funding from One Croydon to train five **end of life doulas** to support people who are reaching the end of life. An end of life doula is a non-medical, holistic practitioner who offers support, presence, companionship, education and advocacy for both the patient and their family during the dying process.

There's a marked inequity in Croydon for people accessing end of life services and it's proposed that end of life doulas would support person-centred care and help reduce some of the existing health inequalities in the following groups:

- people in mental health/learning disability care provision
- people living in care homes
- the homeless population
- refugees
- other minority groups
- prioritising those in the most deprived postcodes in Croydon.

This role will be alongside current specialist care provision and people who may benefit from the care of an end of life doula will also need to be under the care of St Christopher's.

And finally, a nurse-led project, funded by the Burdett Trust, is aiming to create and test an integrated model of community support for people living with, and dying from, **advanced heart failure** in Bromley and Croydon.

We're aiming to reach more than 150 patients (where heart failure is the primary reason for referral) across Bromley and Croydon and to support 75 carers for people with advanced heart failure diagnoses. Desired outcomes include improved quality of life, reduced hospital admissions and the ability to reach patients who may currently struggle to access the support they need.

At the end of this project, we'd like to develop a variety of learning opportunities for others who share our ambition to keep more people with advanced heart failure out of hospital and at home, where this is clinically appropriate and consistent with the patient's wishes.

"Everybody seemed to know who I was. They took time to listen to me and to understand what I was going through"

Peter's story

At the age of 74, Peter had never been in hospital before, and then in August 2022 he was diagnosed with chronic obstructive pulmonary disease.

He started to experience significant breathlessness and was really frightened he was going to die.

Peter was referred to St Christopher's later that month for a series of breathlessness management sessions, where the team were able to guide him through exercises to help his breathlessness, which in turn alleviated his anxiety.

Peter has a new sense of freedom

He felt that the team at St Christopher's took the time to get to know him, saying: "Everybody seemed to know who I was. They took time to listen to me and to understand what I was going through."

Peter is much calmer now and this support has given him a new sense of freedom; he is able to enjoy his independence again.

Talking and learning about death and grief

Professional learning

Through St Christopher's CARE, we continued to provide a broad range of learning opportunities for professionals involved in health, social care and beyond. Over the last year our diverse learning programmes reached people globally, with 100% of learners rating their experience four or five stars (from a total of five).

Conferences with a difference

Over the last year, we co-designed and provided cutting-edge, **in-person conferences** for more than 500 delegates, touching on new topics and engaging with new audiences. The conference programme addressed a range of diverse topics, including:

- **Joining the Dots of Motor Neurone Disease Care** which we ran in partnership with King's College, London, Power in Partnership. This conference focused on the urgent need for clearer, more transparent communication and a greater emphasis on patient and carer wishes, including compelling contributions from patients themselves
- Recognising the limited or total lack of care at the end of life for people who are homeless, we hosted **Reaching the Forgotten** to raise awareness of the issues and start the process of developing a model of engagement and a network of professionals to support this growing population

More than 10,000 learners engaged with St Christopher's CARE over the last year

More than 10,000 learners engaged with St Christopher's CARE

Learners attended from nearly a third of UK hospices

100% of learners who evaluated our learning events gave their experience four or five stars

Maxine enjoyed learning with CARE

Maxine's story

Maxine is a clinical nurse specialist based at Ipswich Hospital in Suffolk and completed the Lantern Model programme through St Christopher's CARE. Maxine shared:

"I would like to say a massive thank you to all involved in the development of the Lantern Model programme. Every member of St Christopher's team I have liaised with over the year have been helpful, engaging, compassionate and kind. They push us out of our comfort zones to think and explore palliative and end of life care in new and creative ways.

I personally enjoy the fact it is multi-faceted with webinars, community of practice forums, use of the communication platform Discord, the Lantern Model reflection tool and a never-ending bank of resources. I enjoy attending every session and exploring ideas and thoughts from all over the world with real people working in palliative and end of life care, from nurses to professors.

I would highly recommend this programme to anyone with a keen interest in palliative and end of life care and can absolutely confirm it has made me a better clinical nurse specialist in every way possible."

- **Rehabilitation in Palliative Care: Contemporary Opportunities** which encouraged allied health professionals and their clinical colleagues to work more closely in delivering patients' goals and wishes.

Improving global skills in palliative care

Our work to increase the capabilities and insights of palliative care leaders globally, has also gone from strength to strength – most notably, through our continued flourishing partnership with the Institute of Palliative Medicine in Kerala, India. The **Fellowship in Palliative Care** saw 200 professionals aspiring to lead palliative care services benefit from this six-month learning programme.

We also shaped a new initiative to improve the experience of dying for slum dwellers in Dhaka, Bangladesh, through direct support and a tailored training programme delivered to 53 professionals.

Creating collaborative nursing communities

Working in partnership with Central and North-West London NHS Foundation Trust and University College Hospitals NHS Foundation Trust, we launched **Palliative Discovery**, a free network designed by and for clinical nurse specialists (CNS).

Via the free online platform, more than 1,400 CNSs were able to access opportunities for learning in the form of talks, classes, roundtable discussions, as well as online tools, all tailored to sustain them as they continue to fulfil their key role in supporting people at the end of life.

Carmel O'Donnell, Clinical Nursing Specialist at Letterkenny University Hospital, said: "As a senior nurse it's so important to keep learning and Palliative Discovery has helped me do that. I've enhanced my knowledge, and this can only be good for the person-centred care I want to provide my patients."

Our Director of Academic Learning and Action, Heather Richardson, was the recipient of one of 14 **Burdett Hero** awards from the Burdett Trust for Nursing on behalf of the team that has led Palliative Discovery.

Building on the success of Palliative Discovery, this year, we'll be launching a **Global Palliative Care Nursing Network** to meet the ongoing demand for a place for nurses to learn, share and grow together.

Tom Pursglove, Minister for Disabled People, Health and Work, pictured with colleagues from across the hospice on a recent visit

Research and policy

At St Christopher's our vision is of a world in which all dying people and those close to them have access to care and support when and wherever they need it.

It is that drive, to improve care on a wider scale, which shapes our ambition to better understand the changing needs of people at the end of life, share our findings with others to evolve their service offers and lobby for wider policy change to improve people's experiences at end of life.

Assisted dying community project

We're planning to understand more about people's views on medically assisted death. In the UK it is currently illegal to use drugs to assist someone to die.

However, the law might be changing in the next few years and the palliative care sector needs to be prepared to respond to this.

In spring 2023 we launched a programme of public engagement around this issue, with those we serve in south east London. Through community-based conversations we will look to provide learning, data and insight for interested parties into people's perspectives on assisted dying.

This research will be with 50+ members of the public with a range of views, experiences, occupations and perspectives across five boroughs of south east London.

Rather than surveying attitudes or opinions, which to date has shown polarisation and doesn't allow for an understanding of why people think as they do, we will be adopting a qualitative research method to allow for deeper engagement.

This approach will provide an openness to hearing community viewpoints on this challenging and complex issue. Through completing this work, we will be better prepared should a change in the law occur and have a much richer insight into people's views and wishes around this complex area.

Representation at Hospice UK

As part of our ongoing commitment to research, sharing knowledge and developing expertise on a national scale, 13 members of staff attended the annual Hospice UK conference in November.

As an organisation, we shared our learning on 13 topics, our Nurse Consultant, Helen King and our Lead Palliative Care Consultant, Dr Joy Ross, led a panel discussion on Frailty and, for the first time, we took an exhibition stand promoting

1,358 carers received support – 953 had formal post-death bereavement support and 693 accessed pre-bereavement support from our wider multi-disciplinary team

We supported 445 children through our Candle bereavement service

the professional learning offer available through St Christopher's CARE.

Fast-tracked benefits for people at the end of life

Tom Pursglove, the Minister for Disabled People, Health and Work, visited the hospice in March 2023 to mark new positive changes in the Special Rules Policy, which enable people at end of life to claim fast-tracked benefits paid at the highest rate. Under the new rules, which came into effect on Monday 3 April 2023, people with a prognosis of 12 months are now entitled to claim – up from six months previously.

St Christopher's submitted evidence in support of these changes as part of the consultation process – one of the many reasons we were chosen as the venue to launch this improved support.

"It's been a big help to me to open up and get things off my chest. I have ups and downs, but talking about my mum and grandad helps me to smile again"

Bereavement

As the demand for bereavement services continues to increase we've reviewed and invested in our offer for all bereaved people, recognising the continued change in bereavement needs.

Improving our support

Recognising that reaching out for support is hard enough, we've created new roles to ensure people calling in to receive bereavement support can immediately book a triage appointment with a bereavement specialist, enabling us to respond more quickly to their specific needs.

Offering support at a time of public loss

In September 2022, we were deeply saddened to hear of the death of Her Majesty Queen Elizabeth II. A visit from Her Majesty on our 21st anniversary in 1988 remains a treasured memory in our organisation's history and we extended our most heartfelt condolences to our Patron, HRH Princess Alexandra, The Honourable Lady Ogilvy, and to the Royal Family.

There may be those in our communities who found this loss to be particularly difficult or unsettling. A public loss can also cause people to reflect on their own personal bereavements and brings their own mortality into view. We'd like to remind our communities that we

We have helped Ben smile again

Ben's story

Ben was just 12 years old when his mum died. A school friend referred him to St Christopher's for support where he accessed counselling on a regular basis through our child and young person's bereavement service, known as Candle.

Just a few years later, Ben also lost his grandfather and was overwhelmed by the deaths of two significant people in his life at such a young age.

The team continue to support Ben and he said talking about it really helps: "It's been a big help to me to open up and get things off my chest. I have ups and downs, but talking about my mum and grandad helps me to smile again."

offer formal one-to-one sessions and peer-led groups to talk about and learn techniques to cope with grief.

Collaborative community action

Through our Community Action team, we aim to find gaps and spaces in current support provisions to redress inequalities. We do this through: facilitated peer-to-peer support for those who are carers, bereaved or socially isolated for any reason; partnerships with other like-minded organisations; and community-based learning.

One-to-one matched support

With our programmes offering one-to-one matched support, we match people with a volunteer who has been specifically trained to provide support and, in most cases, has lived experience of dealing with care, death, bereavement or isolation.

Compassionate Neighbours

Funded by the City Bridge Trust, Compassionate Neighbours is a community-led initiative for people living with or caring for a person with a long term, life limiting or terminal illness, or people who are older and socially isolated. It's a network of people who offer their time, companionship and support to people living in their local area.

This initiative is extremely popular and we've had another great year supporting many people across the community who would otherwise have no one to turn to.

Bereavement Buddies (pilot project)

Funded by The Mercer Trust, this brand-new initiative is designed to give early intervention bereavement support, and people are usually matched before the bereavement occurs.

We offer a range of peer support and championship programmes for people across south east London

Hilary, Kathleen and Issac take a moment to reflect in our hospice gardens

Born out of work with people who have lived experience of bereavement, in just two months since launch we've had more than 50 people volunteer to become Bereavement Buddies. There is such a need for this peer-to-peer support before and immediately following the death of someone close when it can be confusing, overwhelming and frightening. We're excited to see how this initiative develops over the next year.

Carer Champions

Funded by Women in Fellowship, this project sees volunteers who have been carers themselves partnered up with people who are currently caring for someone with a long-term, life-limiting or terminal illness. The volunteers offer companionship to those who could otherwise feel quite isolated.

As an organisation, we support carers in many ways, but this one-to-one connection with someone who is able to understand the daily challenges and obstacles which carers face, is invaluable.

Therapy through creativity

Made possible by the Heritage Lottery Fund, we worked with artist Christopher Green to explore a new artistic concept reflecting on what we leave behind and how we choose how we'd like to be remembered. Working with Entelechy Arts, Christopher supported participants to build an online platform where everyone at any stage of their life can make or choose art, such as songs, poems or images, to create a digital legacy.

One of our existing support groups is for households where someone is living with neurological conditions. Last year, we partnered with the City of London Symphonia and worked with our own music therapy team to facilitate a six-week project using music to tell stories.

Community learning

One of our key objectives is to encourage people to talk about death and grief earlier. As part of this, we facilitated a number of initiatives over the last year including:

- Developing and delivering a number of **community learning courses** from bespoke sessions, to open access groups for the public on the topics of 'loss and legacy' and 'caring for carers'. Our open-to-all courses are free to access and explore subjects that may help give people a formative understanding of how we can approach and understand death, dying and grief experiences. They are offered both in

The Voices That Shaped Us: Modern Hospice in the Making exhibition at St Christopher's CARE

person and online, and in the last year we have held 108 sessions which reached 708 attendees.

- An **art-based session for teenagers** from South Bank University Academy exploring death, dying and bereavement, changemaking and social action. The teenagers used clothing from the St Christopher's charity shops to weave their individual pieces, which all became part of the collective weavin
- Hosting a **summer school for young people** (16-18 year-olds) where they had the space to work together to create their own end of life discussion, shifting the balance of power away from organisations and professionals.

Stimulating conversations

We're on a mission to transform the wider conversation around death and dying with thought-provoking dialogue and, in doing so, elevate the standards of end of life care for all. While we will all face our own death, it is still seen as one of society's taboos.

Death and grief on a national scale

We were thrilled to be part of two high-profile national television shows – **Kelsey Parker: Life After Tom** on ITV in January 2023 and **Antiques Roadshow: Nursing Special** on BBC 1 in February 2023.

ITV's six-part documentary following Kelsey Parker as she comes to terms with her husband's death was also viewed by over four million people. The piece featured Kelsey returning to St Christopher's and meeting up with members of staff who cared for Tom (from the boyband The Wanted) in the last few weeks of his life.

During our segment on Antiques Roadshow, our Spiritual Care and Quality Lead and one of our Ward Managers were filmed speaking to antiques expert Siobhan Tyrrell about a number of items that were either previously owned by Dame Cicely Saunders or which provided insight into the origin of hospice care in the UK and St Christopher's as an institution. The show regularly brings in up to eight million viewers per episode through live broadcasting and BBC iPlayer.

"I didn't know what I was going to do, how I was going to survive, where my next pay cheque was going to come from and how I would pay the rent. I was like a lost little girl"

Kathy credits us with saving her life

Kathy's story

Kathy's husband Ernie was cared for at St Christopher's by our ward teams.

When Ernie died, his death plunged Kathy into poverty. Kathy was at risk of being evicted from her house, and the stress and anxiety on top of her bereavement led to her suffering from severe anxiety and depression. She had nowhere to turn until she received a phone call from our Welfare Team, who assisted with her financial support and provided a listening ear.

The team managed to write off Kathy's inherited debt and secure her housing, and also introduced her to a number of benefits that could help maximise her income. Kathy credits our Welfare Team lead and St Christopher's with keeping her alive, repeatedly telling us "I wouldn't be here without you."

Cost of living campaign

The devastating impact of the rise in cost of living is particularly poignant for people facing the end of life and those closest to them. That's why during Hospice Care Week in October 2022, we filmed a video with Kathy who was plunged into debt following the death of her husband and was supported by the Welfare Team at St Christopher's. You can read her story above.

When shared, Kathy's film had a combined reach of over 9,500 impressions across Twitter, Facebook, Instagram and LinkedIn, and the video was viewed over 5,000 times. Off the back of this campaign, Kathy was also invited to speak live at the Death Festival in Brighton in November 2022, and joined a panel alongside representatives from Hospice UK, Marie Curie and Down To Earth.

Dead Good

In a bid to get people talking about death, we launched our very first podcast – **Dead Good**. Hosted by comedian Sajeela Kershi, it adopts a playful, at times humorous and, above all, thought-provoking tone. Each episode, a high-profile guest shares their own experiences around the topic, challenging the taboos that exist within society.

The podcast is available to listen to on all major podcast platforms including iTunes and Spotify and over 1,200 people from 33 countries have tuned in to listen so far. We are looking to launch season two in autumn 2023.

The Voices That Shaped Us

After more than 18 months of planning and interviews, our oral history exhibition – **The Voices That Shaped Us: Modern Hospice in the Making** – launched in August 2022 both online and in person at St Christopher's CARE.

This groundbreaking exhibition told the story of St Christopher's over the past seven decades using interviews with 77 people who helped shape our history. More than 800 people viewed the exhibition in person and a further 3,000 enjoyed reading and listening to the personal recollections of the doctors, nurses, volunteers and relatives at the heart of our story online.

Meanwhile in Edinburgh, a new play, **Cicely and David** (sponsored by St Christopher's) premiered at the Fringe, written by Dame Cicely Saunders' biographer David Clark and produced by one of her former colleagues, Jo Hockley.

It tells the story of Dame Cicely's relationship with Polish migrant, David Tasma, how she helped him to find some resolution to what he felt had been a worthless life while also sparking her idea for what became modern end of life care, as part of the launch of St Christopher's Hospice. The five-night run was sold out.

How we've worked

We're working hard to challenge people's views of a hospice, ensuring our communities are aware of the breadth of services that we offer for everyone

With local communities

We're here for anyone in our community that needs us, but we know that not everyone accesses our services. Many people still see a hospice as a place where people spend their final days, when in reality we offer so much more.

We also know some people don't see St Christopher's as a place for them. We're committed to changing this, ensuring that everyone, no matter who they are, feels welcome and able to access our services. We also rely heavily on our community of volunteers to help deliver our services, redress inequalities and ensure we can provide best-in-class care.

Listening to our community

One way we are doing this is by better **understanding the views of our community**. In January 2023, we completed an extensive piece of public research to better understand people's awareness of St Christopher's and what we do, as well as gaining clarity on the barriers or misconceptions that stop people from accessing our support. Over 630 members of the public and 260 people already connected to the hospice shared their views with us.

We're now using those valuable insights to ensure we describe and position St Christopher's as a place that meets their needs and challenges those misconceptions.

We have 1,017 volunteers, of which 19% have been with us for more than five years

84% of staff shared that they feel comfortable being themselves at work

In January, we published and distributed the first edition of our **rebranded hospice magazine**, formerly called *Connections* and now known as *Connect*. *Connect* is larger, longer and more lifestyle focused, and contains stories, advice and features about death and grief as well as the usual information about our services and fundraising events. The first edition was well received, with many people commenting how much they're enjoying the new content and layout!

We also ran a collaborative community project to better understand people's experiences of living with and supporting **people living with dementia**. Funded by the Hospice UK Masonic Charitable Foundation, we engaged with 20 people (and their households) plus 30 subject-matter stakeholders across Lewisham and Bromley.

Partnering with others

Over the last year, we've been busy **rebuilding our volunteer base** as activities restarted post COVID-19. We've developed new roles and opportunities for volunteers to engage with us, providing some stability for our current volunteers and attracting new volunteers to St Christopher's. This includes our new group of reception volunteers who welcome visitors to the hospice and help people to overcome any nervousness and preconceptions they may have when they arrive.

Our **Volunteer Voices group** was also relaunched to advocate on behalf of all volunteers at St Christopher's. We're very grateful to this group who have shared useful insight about how we can improve our communication with volunteers and also recognise volunteer achievements appropriately.

Following our successful **retail consultancy partnerships** with Greenwich & Bexley Community Hospice and our ongoing consultancy with Princess Alice Hospice, last year, we started retail consultancy with St Wilfrid's Hospice looking at their property portfolio with the vision of increasing the number of shops. So far, we've completed one refit and are currently supporting them with negotiations on two new shops. These partnerships provide both financial income for St Christopher's, and also results in more income for hospice care to be delivered in other parts of the country.

Inclusivity

Ensuring everyone feels St Christopher's is a place for them, where they are welcomed and included, is of the upmost importance to us. Over the last year, we've asked our teams what is most important to them when it comes to creating an inclusive environment and made sure we are responding accordingly, as described below.

Creating a more equitable workplace

As an organisation, we're working towards the **Investors in Diversity (IiD) accreditation**. Over the last year, this has included a staff survey, multiple workshops and the creation of an action plan to ensure we're actively becoming a more inclusive place of work.

We've also signed the pledge to become an **Age Friendly Employer**.

Our people said, we did

In May we ran our **Birdsong staff survey** for the first time since 2019, which had a 65% overall response rate (an increase of 7% from the previous survey in 2019). We saw an increase in staff morale and people said they took pride in their role, had faith in the organisation and enjoyed working with great colleagues, as evidenced by the stats below:

- 92% enjoy working with the people at St Christopher's
- 90% are proud to work at St Christopher's
- 84% feel comfortable being themselves at work
- 82% feel supported by their manager.

There were several areas where colleagues asked for further support, these are noted below and we've begun to address these in the months since. They said they'd like:

- improved training and development opportunities
- support to improve wellbeing at work
- more effective communication between teams.

Supporting staff

To ensure **staff feel supported financially**, we conducted a benchmarking pay review exercise across

12,524 people donated money to St Christopher's

583,000 customers supported us in our shops

8,933 people raised £587,465 through our hospice lottery

the organisation and provided support for those struggling with the effects of the cost of living crisis.

From April to December 2022, we extended our **Elevate Programme of Managers** to a further 30 participants, meaning 70% of our current people managers have completed the programme since its launch.

In March, we invested in a **brand-new online learning management system** to support engagement with mandatory training and collaborative peer-to-peer learning across the organisation.

Sustainability

Ensuring the future sustainability of St Christopher's and the planet remains a key priority for the hospice.

Despite the financial pressures of the cost of living crisis, our Fundraising and Retail teams have worked hard to ensure we continue to raise much-needed funds to provide our caring services. It cost £25,320k to run the hospice last year, of which £17,170k came from our fundraising, shops and money people have left in Wills.

We've been heartened by the support of our communities and thank you for choosing to support us in this way.

Community support to raise funds

Post COVID-19, we have been delighted to see our communities and volunteers returning to take part in **in-person events**. Twenty-nine people took part in the London Marathon to raise funds for

Ensuring everyone feels St Christopher's is a place for them, where they are welcomed and included, is of the utmost importance to us

Over 1,000 walkers joined us at Bluebell Walk to raise much-needed funds for the hospice

St Christopher's in October 2022, and raised over £60,000 between them.

Volunteers have made a major contribution to our fundraising this year by organising events on our behalf and supporting our St Christopher's events. Without them, we would not be able to do our work and we are incredibly grateful for their time, enthusiasm and commitment.

The largest of our events was the much-loved **Bluebell Walk**, which returned in May 2022 with over 1,000 walkers registering for the event, raising an amazing £43,000. Thank you to everyone who took part in the walk, donated, came along on the day, sang, chanced it on the tombola and volunteered their time.

In November, the annual legal dinner in support of St Christopher's at the Great Hall of the **Goldsmiths' Company** in the City of London took place. This dinner, attended by close to 200 private client lawyers and legal professionals, has been a firm fixture in the legal calendar since 2000. We were delighted to be joined by Heather Phillips, High Sheriff of Greater London (2022-23) who kindly gave up her time to be our engaging after-dinner speaker. We are grateful to our loyal sponsors as well as the generous donors who raised almost £90,000 on the night.

In February, we held our second-ever **Snowdrops for St Christopher's** installation at Down House, former home of Charles Darwin. Featuring 1,300 handcrafted iron snowdrops, supporters were invited to dedicate a snowdrop in memory of a loved one and to visit the installation to reflect and remember. This year's Snowdrop campaign raised £44,001 during the year. We're grateful to the staff and volunteers at Down House for facilitating the installation at no cost to St Christopher's.

Many of our donors and volunteers have a personal connection to St Christopher's and we've once again, benefitted from **generous legacy donations** for which we are very grateful. Alongside our biannual Will Week campaign to encourage people in the community to make a Will for a small donation to us, people remembering us in their Wills is a fundamental to our financial sustainability and our ability to operate as a hospice.

Our shops raised £5m last year and supported environmental sustainability enabling people to donate and buy pre-loved items

Our shops sold between £20-30k worth of items each and every week

We sold more than 20,000 paper bags last year, saving plastic from going to landfill

We opened our second children's shop in Crystal Palace

Rallying for retail

This year, we have seen strong growth in our shops, and have generated more money from them than ever before, to help fund care for our patients. Selling 20-30k items every week, our shops have brought in £1,622k profit, which increases to £2,115k if the Gift Aid generated via our shops is also included. Continuing to innovate and specialise, we opened our second children's shop in Crystal Palace in August 2022, which has been a great success to date and continues to grow weekly as reputation increases in the local area.

Our shops provide goods to our community at cheaper prices than the rest of the high street, which is especially beneficial for our community during a cost of living crisis.

Offering the ability to buy pre-loved and upcycle, they also support environmental sustainability. Another way that we have considered the environmental impact of people shopping with us, is that we decided to provide paper bags and charge shoppers, to incentivise them to bring their own bags. We sold more than 20,000 St Christopher's paper bags in the last year, saving a lot of plastic from going to landfill.

Structure, governance and management

St Christopher's Hospice was incorporated as a company limited by guarantee on 21 January 1961 and is governed by its Articles of Association. St Christopher's Hospice is registered with the Charity Commission for England and Wales.

St Christopher's Hospice has a wholly owned subsidiary, St Christopher's (Trading) Limited, company number 02604519. The registered office of St Christopher's Hospice and its subsidiary is 51-59 Lawrie Park Road, Sydenham, London SE26 6DZ.

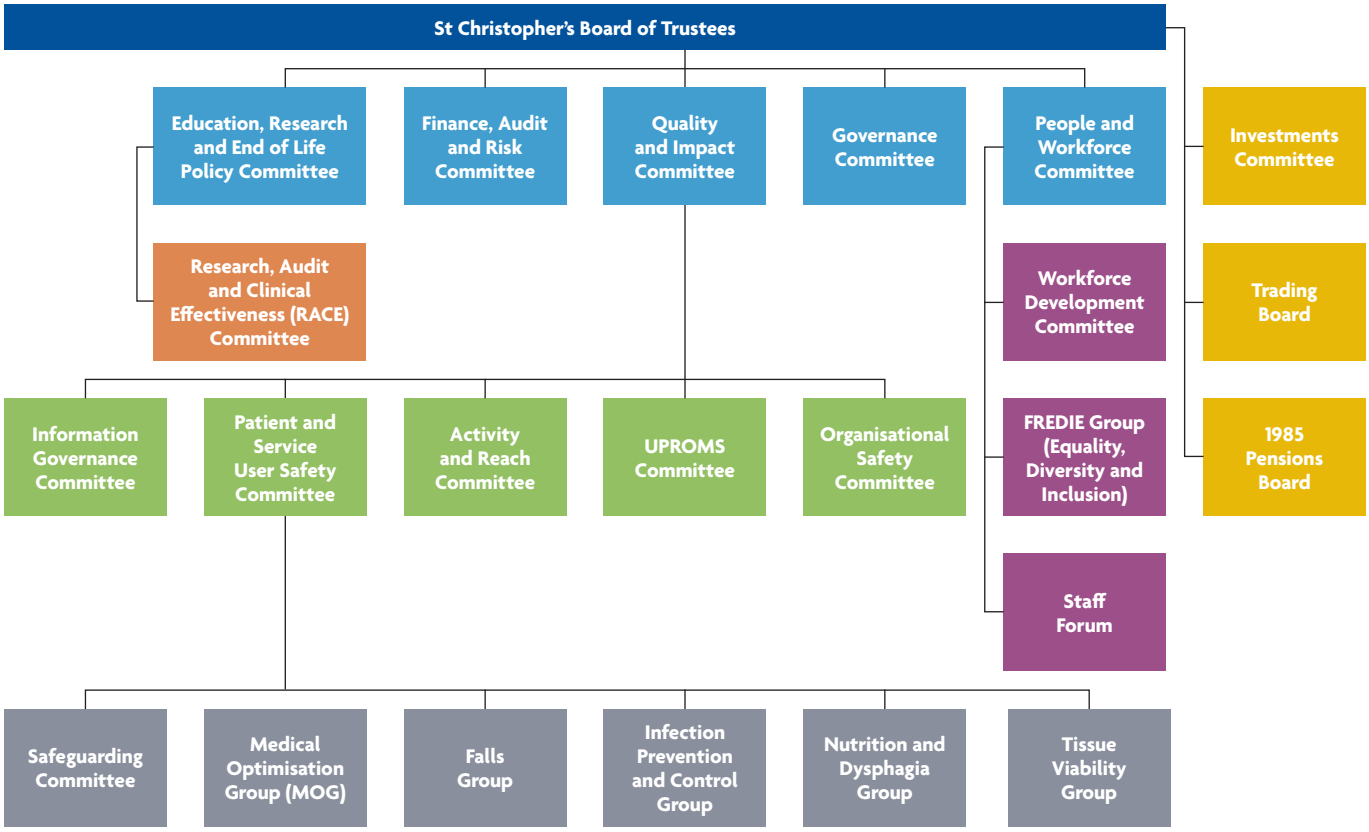
How we are governed

The Board, consisting of the Trustees named at the back of this report, has ultimate responsibility for the proper and effective management of St Christopher's Hospice. The Board is responsible for all major strategic decisions, for monitoring the organisation's performance, and to ensure that it complies with its Articles of Association and applicable laws and regulations.

Neil Goulden has been the Chair of the Trustees since 1 April 2021. The Vice Chair is Eleanor Brown, who took on the role following Jane Walters' retirement as a Trustee on 21 July 2022.

The Board delegates day-to-day management and decision making to the Executive Team, which is led by the Chief Executive. The Executive Team is required to act in furtherance of the charity's strategy. The Board holds the Chief Executive and Executive Team to account for its leadership of the organisation.

The governance structure is below. The Board has Trustee representation on the following five Board sub-committees: Governance, People & Workforce, Quality & Impact, Finance, Audit & Risk and Education, Research & End of Life Policy. Trustee representation is also in place on the following Boards and committees: Investment Committee, St Christopher's Hospice Trading Board and 1985 Pension Scheme Board.



Committee terms of reference define responsibilities and delegated responsibilities and are reviewed annually. The Board may delegate any of its powers to one of its committees. The committees report to the Board after each meeting.

Trustees commissioned an external governance and effectiveness review during the year. This was carried out by Bayes Business School, who were selected as part of an external tender process. Following this review, Trustees received and discussed a report of recommendations from Bayes Business School. The Trustees will be addressing these recommendations from 2023-24.

Trustees' duty to promote the success of the Charity – Section 172 statement

The Trustees are the directors of St Christopher's Hospice and have a duty to promote the success of the Charity and, in doing so, are required by section 172(1) of the Companies Act 2006 to have regard to various specific factors, including:

- the likely consequences of decisions in the long term
- the interests of employees
- the need to foster the Charity's relationships with third-party stakeholders which, in the case of St Christopher's Hospice, includes dying people and those close to them, the local community, the NHS and our supporters
- the impact of the Charity's operations on the community and the environment
- the desirability of the Charity maintaining a reputation for high standards of business conduct.

The Charity's strategy takes into account the likely consequence of any decision in the long term. The Trustees have recently approved the organisation's strategy for the next three years. The areas of focus for our updated strategy for 2023-26 are set out on pages 58-59.

The Board meets at least quarterly throughout the year. It assesses progress against the strategy, identifies areas for focus for the following year and receives updates on the Charity's performance and plans. Its committees also review plans, strategies and activities with regard to the particular terms of reference overseen by the committee concerned. The Board also has an annual away day for strategic planning.

The Board obtains assurance that attention is given to the factors set out in section 172 when promoting the success of the Charity, by monitoring that the Executive Team and the wider organisation are delivering the strategy and complying with specific policies.

Engagement with the Charity's main stakeholder groups are as set out on pages 6-24. The Executive Team reports to the Board on key stakeholder relations and engagement activities, current issues and relevant feedback received from interactions with stakeholders.

The Trustees also follow a formal process to regularly manage and review risks that are faced by the Charity, set out on page 30.

The Charity ensures that it maintains a reputation for high standards of business conduct by having in place a range of policies and processes that promote corporate responsibility and ethical behaviour. Areas covered include fundraising (our fundraising practices are discussed below), gifts, hospitality and anti-bribery, conflicts of interest, safeguarding, bullying and harassment, and whistleblowing. Policies are reviewed periodically. We have also dedicated leads for equality, diversity and inclusion, safeguarding and whistleblowing within the Executive Team and the Board of Trustees.

Appointment of new Trustees

The Board is made up of individuals who have a diverse, varied and balanced cross section of life, skills and experience. When embarking on the recruitment process, the Trustee vacancy is advertised on the St Christopher's website, in various publications and on social media. The specialist services of a recruitment agency may also be employed where necessary. Prospective candidates are invited to apply, outlining their relevance for the role. After the closing date, applicants are shortlisted against the person specification, and potential candidates are invited to interview. The interviews are usually carried out by

the Chair and a subset of other Trustees. Successful candidates are then formally appointed by a resolution of the Board.

Trustees are appointed by resolution of the Board for a term of up to three years. Upon expiry, they shall be eligible for re-appointment for a further term or terms of up to three years. All Trustees sign a code of conduct on appointment. The Trustees, Chair and Vice Chair carry out their responsibilities in line with a documented description of their role.

New Trustees undertake an induction process designed to equip them with the information and understanding they need to become effective and valuable members of the Board as quickly as possible. The induction process involves the following:

- An induction pack containing key information about St Christopher's, the governance structure, the roles and responsibilities of Trustees and the organisational work of the Board of Trustees and its committees
- A Trustee mentor for at least the first year
- An induction programme which enables new Trustees to gain a good understanding of the operations of the organisation
- An informal review meeting with the Chair of the Board at the end of a Trustee's first year.

All Trustees give their time voluntarily and receive no benefit from the Charity. Out of pocket expenses incurred by the Trustees in carrying out the role can be reimbursed in accordance with the organisation's expenses policy. No expenses were claimed from the Charity this financial year. All Trustees were required to complete and sign an annual declaration of interests and any relevant gifts received.

Public benefit

The Board is aware of the Charity Commission's guidance in relation to public benefit. The report indicates how our activities have delivered public benefit.

Fundraising disclosure

St Christopher's Hospice has voluntarily subscribed to the Fundraising Regulator and is committed to the Fundraising Promise and adherence to the Code of Fundraising Practice set by the Fundraising Regulator.

We encourage the fundraising service providers we engage with to also sign up to the code. Our fundraising effort is led by Compton Fundraising Consultants who are members of the Association of Fundraising Consultants (AFC) promoting best practice and mission to set the very highest standards of fundraising. As a member of AFC, Compton Fundraising Consultants have signed the AFC code of practice together with the Fundraising Regulator's code of practice. Compton Fundraising Consultants work very closely with the in-house Fundraising Team on a day-to-day basis and set and agree the annual fundraising targets with the St Christopher's Executive Team. Performance against targets are monitored and formally presented monthly to the Chief Executive and the Director of Finance & Corporate Services.

In addition, the Fundraising Team engages professional third-party suppliers to help us raise funds particularly where we do not have the expertise in-house. We have safeguards in place when working with suppliers so that we protect our supporters and the reputation of our charity, including Lottery Fundraising Services and Engage and Connect, the companies which support our lottery. We ensure all these agents observe the highest standards in terms of fundraising practice and monitor their performance through the use of mystery shopping and random checks with donors.

St Christopher's Hospice is a member of the Hospice Income Generation Network and many of our fundraisers are members of the Chartered Institute of Fundraising.

Our website outlines our complaints policy for the public. We received three fundraising complaints in 2022-23 (2021-22: five fundraising complaints). Our policy is to respond to all complaints within 10 days. Serious complaints are escalated to our Executive Team and Trustees to consider lessons learnt. We report to the Fundraising Regulator and Gambling Commission on the totality of our complaints.

We have policies and procedures in place to safeguard the vulnerable and we ensure our fundraisers and third-party suppliers adhere to these policies. We are also signed up to the Fundraising Preference Service to enable individuals to opt out from receiving fundraising

communications from us. We received one request through this service last year.

Pay policy for senior staff

The pay of the Chief Executive is set by the Governance Committee with any changes authorised by the Chair of the Board of Trustees. The pay for the remainder of the Executive Team is agreed by the Governance Committee in consultation with the Chief Executive. The pay for other senior staff is agreed by the Chief Executive in consultation with the Director of People & Organisational Development.

People with a disability

St Christopher's Hospice is a 'Disability Confident' Employer. This means that we undertake full and fair consideration of all applications for employment including those made by people with a disability. We offer a guaranteed interview to those applicants who qualify under the 'Disability Confident' scheme and we are also committed to supporting both people with a disability coming in to our workplace as well as supporting those people who develop a disability whilst employed by the organisation. St Christopher's works with an occupational health service and in partnership with external organisations such as Access to Work, to provide support and advice to people with a disability working with us.

St Christopher's Hospice has been a signatory to the 'Mindful Employer Charter' since August 2016, demonstrating a commitment to supporting individuals with mental health illnesses and actively seeking to alleviate causes of workplace stress wherever possible. St Christopher's trained ten members of staff to act as Mental Health First Aiders in 2021 to strengthen the support available to our workforce and provided refresher training in 2022 to these individuals to keep their skills and knowledge up to date. We have further upheld the values of the Mindful Charter by:

- Providing mental health training from Mind to those managers who are managing individuals with complex mental health issues
- Coaching managers in the management of mental health related issues
- Improving the data capture of mental health issues to enable early intervention.

Equality and diversity

St Christopher's is working with the National Centre for Diversity to achieve their Investors in Diversity accreditation. Following a staff survey in July 2022 to provide initial data, St Christopher's developed an action plan to ensure demonstrable progress in line with the accreditation standards relating to culture, strategy, wellbeing, recruitment, reward, performance management and communications. This work is supported by the St Christopher's FREDIE (Fairness, Respect, Equality, Diversity, Inclusion and Engagement) Group and progress is overseen and monitored by the People and Workforce Committee.

The organisation has continued to carefully monitor and report on its workforce ethnicity rates. In the year to March 2023, St Christopher's staff diversity of ethnic minority groups increased slightly to 21.8% (114). We are proud to have a diverse workforce at St Christopher's with over 20 different nationalities represented across our staff. St Christopher's was furthermore successful in its application to be an Employment Visa Sponsor Licence holder. This licence will help increase the diversity of our workforce whilst also helping to recruit hard to fill vacancies.

Gender pay gap

Individuals performing the same role at St Christopher's are paid equally regardless of gender or other protected characteristics.

The Gender Pay Gap information shows the difference in the average earnings between all men and all women employed across the organisation on 5 April each year. This information is reported annually on the national Gender Pay Gap website. The April 2022 data identified that of our 465 staff (excluding bank workers), 83.4% were women and 16.6% were men.

This year, we reported, for the second year in succession, that the average female salary was higher than the average male salary. Our gender pay gap has moved from -1.4% to -2.29%, which shows that

at St Christopher's, women were on average earning slightly more than men.

As a predominantly female workforce, however, even small fluctuations across the male workforce, such as the number of men employed in roles paid in the upper and upper middle quartiles, have a large impact on our gender pay gap.

Employee information

St Christopher's is committed to providing information to employees, when appropriate and feasible, on matters of concern to them and consulting with employees and/or their representatives on a regular basis. This is achieved through our Staff Forum which seeks feedback, when appropriate, on proposed changes to terms and conditions of service or ways of working. This feedback mechanism enables our employees' views to be heard and considered during decision-making processes.

Streamlined energy and carbon reporting (SECR)

In our third year of SECR, our UK greenhouse gas (GHG) emissions and energy use for the year were as set out in the table on the right.

Quantification and reporting methodology

We have followed the 2019 HM Government Environmental Reporting Guidelines. We have also used the GHG Reporting Protocol – Corporate Standard and the UK Government's Conversion Factors for Company Reporting.

Intensity measurement

The chosen intensity measurement ratio is total gross emissions in metric tonnes per staff FTE.

Measures taken to improve energy efficiency

Total energy use decreased during 2022-23 despite an increase in headcount. The average carbon usage per employee also decreased from 1.73 CO2e to 1.60 CO2e per staff member.

Aside from an increased awareness of energy efficiency the most significant changes made during the year were:

UK GHG emissions and energy use data for the period 1 April to 31 March

	2022-23	2021-22
Energy consumption used to calculate emissions (kWh)	**2,853,275**	**2,918,826**
Energy consumption breakdown (kWh): • Gas • Electricity • Transport fuel		
Direct GHG emissions: gas consumption	**254.71**	**270.56**
Indirect energy emissions: purchased electricity	**228.69**	**229.71**
Other indirect emissions: employee mileage while undertaking activities for St Christopher's Hospice	**108.16**	**100.93**
Total gross emissions in metric tonnes CO2e	**591.57**	**601.20**
Intensity ratio metric tonnes CO2e per staff FTE	**1.60**	**1.73**

- A gradual move to the installation of LED lighting across both main sites and our 23 shops
- The introduction of electric vehicles to our car fleet.

Our hospice building has solar panels on its roof. In addition, St Christopher's CARE (completed in 2021) was designed and built using the latest methods in energy efficiency. The includes natural cooling in the majority of the building.

Measures in progress to improve our energy efficiency further in future include:

- Commissioning an environmental audit to better understand current energy usage
- Further reducing use of plastic

- Completing the installation of LED lighting throughout the rest of our premises
- Transitioning more of our car fleet to electric vehicles over a period of time.

Principal risks and uncertainties

The Trustees, in conjunction with the Executive Team, follow a formal process to manage the risks faced by the hospice.

This process focuses on six potential areas of risk – strategic, financial, services, premises, workforce and information. Risks under each of these headings are assessed as to the severity of the risk to the organisation and accompanied with strategies to eliminate or mitigate the risk.

The risk management process is conducted at least annually and comprises the following:

1. Identification and review of key risks facing the organisation, accompanied by consideration of strategies/plans to be employed to mitigate risks by the Executive Team
2. Review of the updated risk register and the mitigation plans by the Finance, Audit & Risk Committee
3. Review and agreement of the risk register and mitigation plans by the Board of Trustees
4. Receipt of reports regarding progress and success of mitigation plans by the Board of Trustees

This process has confirmed that key risks facing the organisation pertain to:

- Pressures within the health and social care system impact on our ability to deliver our services
- Failure to recruit/retain staff in a competitive recruitment market impacts on business continuity
- Failure to strike an appropriate balance between fair and affordable pay rises impacts on either staff moral or financial sustainability
- A data breach
- Cyber-attacks such as corruption via computer viruses and other malware, in an ever-changing cyber security environment

Actions intended to mitigate these risks include:

- Ongoing work to develop relationships with local commissioners and key influencers within the health system
- Listening to and addressing staff feedback and an external review of salaries to confirm competitiveness
- Implementing our People and Workforce Strategy
- Ongoing reviews of our trading and fundraising strategies
- Quality governance processes including our Information Governance Committee
- Putting remaining measures in place to achieve the IT Security accreditation Cyber Essentials (Plus).

COVID-19

The Trustees have considered the ongoing impact of COVID-19 on St Christopher's Hospice and its subsidiary, St Christopher's (Trading) Limited.

COVID-19 has historically brought additional pressures on the wider health system. As a provider of health services, we will continue to support the wider health system and to provide capacity for it, where it is within our charitable remit.

We deliver our services within COVID-19 health guidelines. This is with the support of our clinical teams and managed through our internal governance processes. This includes procedures to minimise infection risk and to identify infections.

Should the COVID-19 pandemic re-emerge strongly, the most significant financial risk related to COVID-19 is that the shops operated by St Christopher's (Trading) Limited have to close for an interim period to comply with public health guidelines. To date, St Christopher's (Trading) Limited has received COVID-19 relief funding when there have been lockdowns. If further shops closures had to take place over the next year, without receipt of further relief funding, St Christopher's Hospice has agreed to support St Christopher's (Trading) Limited, and the Trustees consider that it has sufficient reserves to be able to do this.

Ukraine

The Trustees have also considered the ongoing impact of the conflict in Ukraine. There are uncertainties as to how the conflict will pan out and therefore the impact of this on St Christopher's Hospice and its subsidiary, St Christopher's (Trading) Limited.

We consider the most likely impact of the conflict on St Christopher's to be:

- The conflict puts increased pressure on the UK economy (and cost inflation) and this increases costs and limits the money that our donors and the NHS can give to St Christopher's
- There are pressures on the supply of core goods (such as petrol, food and other consumables) which has an impact on the delivery of our services.

While this would reduce the net income that we receive, Trustees consider that it has sufficient reserves to mitigate the financial impact of this in the short term. We also have procedures in place to reduce the impact of core goods not being available at short notice.

Financial review

These financial statements include the results of St Christopher's Hospice and its trading subsidiary, St Christopher's (Trading) Limited for the year ended 31 March 2023.

The charitable activities of St Christopher's Hospice are identified under five main headings in the Statement of Financial Activities:

- **Inpatient care**
- **Community care/outpatients**
- **Education, research and policy**
- **Bereavement services**
- **Community action**.

Except for education, research and policy, the services provided to a patient could include one or more of these activities during their care. The cost of individual patient care may span across one or more of the charitable activities identified.

We have updated the five headings of charitable expenditure in 2022-23 (and restated the amounts allocated to these categories for prior years 2021-22 and 2020-21). This is so that the categories better reflect current activity undertaken by St Christopher's Hospice, in particular the newly included categories of bereavement services and community action.

In addition to these charitable activities, St Christopher's Hospice has a retail company. The activity of this company is shown on the Statement of Financial Activities as income/costs of trading companies.

For the year ended 31 March 2023, at an operational level, St Christopher's Hospice recorded net income, before other recognised gains and losses, of £1,909k (2022: £6,935k net income).

Overall, St Christopher's Hospice generated a net increase in funds of £969k (2022: a net increase in funds of £7,182k). This was after recognising other unrealised gains and losses as follows:

1 **Unrealised loss from the investment portfolio of £1,292k (2022: unrealised gain of £352k) and a realised gain from the portfolio of £479k (2022: realised gain £198k)**

Our investment portfolio managed by Cazenove Capital Management decreased in value from £13,720k in March 2022 to £13,059k in March 2023. This reduction is in line with market trends and the general downturn seen in the stock market during 2022-23. We have not drawn down on our investment portfolio during 2022-23, and there are no plans to draw down on it during 2023-24.

Our bank deposits increased from £5,288k in March 2022 to £6,303k in March 2023.

Taking our investment portfolio and bank deposits together, our overall investments increased from £19,008k in March 2022 to £19,362k in March 2023.

2 **An actuarial loss from the FRS 102 valuation of the St Christopher's Hospice (1985) Pension Scheme of £127k (2022: loss £303k)**

The FRS 102 actuarial loss is a result of four factors:

- An actuarial gain on the scheme liabilities of £3,497k (2022: gain of £454k) arising from a change in the demographic and financial assumptions
- An actuarial loss on the scheme investments portfolio of £3,801k (2022: gain of £286k)
- Experience losses arising on the plan liabilities of £704k (2022: losses of £121k)
- A gain of £881k to reflect the amount of the pension surplus that is not recoverable (2022: loss of £922k).

Income

Total income received in 2022-23 decreased by 7.7% to £27,229k (2022: £29,487k). The biggest variance was due to legacies income – we received £2,301k less legacies income during 2022-23 after an exceptionally high figure the previous year.

Further details on our income variances are shown below.

Donations and gifts

Income from donations and gifts was £4,508k, which was higher than the previous year (2022: £4,037k). We were pleased that, following the COVID-19 restrictions of the previous two years, our community were able to carry out community fundraising and to hold and support public events. As such, because of income

from initiatives such as our Bluebell Walk and Challenge events (e.g. London Marathon) income from donations and gifts was £471k (12%) higher than the previous year.

We are overwhelmed by the generosity of our local community who were able to fundraise in innovative ways, and to donate this incredible amount during the year.

Legacies

Legacies income of £7,657k was very strong compared to recent years, but was still less than 2021-22 (£9,958k), when we received our highest ever individual legacy, of approximately £3.6m. We have ringfenced a portion of this money to expand our charitable impact and to support our long-term sustainability, particularly for future years when legacy income may not be so substantial. See note 16 to the accounts.

NHS contracts

Income from the NHS of £9,013k is significantly less than the prior year (2022: £10,036k), as income in 2021-22 included £1,653k from NHS England distributed via Hospice UK as part of COVID-19 relief monies when the Omicron variant and other winter pressures were present.

Income and performance of trading subsidiaries

The core activity of St Christopher's (Trading) Limited is the operation of shops with 23 shops as at March 2023 (23 shops as at March 2022), whose purpose is to raise money for the Charity to spend on charitable activities.

Revenue from St Christopher's (Trading) Limited increased by 13% to £5,005k (2022: £4,436k), and a net contribution to the Charity of £1,622k (2021: a net contribution of £1,311k).

We are pleased to see that trade is surpassing the levels seen prior to the pandemic, with good income growth.

Investment income

Investment income for the year of £368k was £215k higher than last year (2022: £153k). This is reflective of higher interest rates which brought in more bank interest.

Education, fees and other income

Education, fees and other income was £678k, which was lower than last year (2022: £867k) partly due to specific projects ending in 2021-22.

Expenditure

Total expenditure in 2022-23 was £25,320k, which was 12.3% higher than the previous year's figure (£22,552k). This was largely due to a deliberate growth in headcount (+6%) to support our charitable activities and growing patient need, and to fund cost of living increases.

The costs of raising voluntary income were £1,552k, which was slightly higher than the previous year's figure (2022: £1,508k).

Staff costs

During the year, the total average FTE headcount increased to 369 (2022: 348). Staff costs account for 76.6% of the organisation's total costs (2022: 76.9%). Further details of staff costs and staffing levels can be found in note 7 to the accounts.

Reserves policy and going concern

St Christopher's Hospice holds reserves to improve both the financial security and the operational flexibility of the Hospice. The Trustees believe the level of reserves held should be sufficient to cover the risks the Charity is exposed to, including safeguarding against the volatility of key income streams.

The Trustees have taken a risk-based approach to assess the level of free reserves required by the Charity. They have also reviewed this alongside the level needed to operate effectively. Considering both aspects, the Trustees believe St Christopher's Hospice should aim to hold free reserves equivalent to 9-12 months of its operating expenditure, currently equal to £19.0m - £25.3m. The Charity considers free reserves to be the total unrestricted Group reserves, less designated funds. The designated funds held by the Charity are listed in the notes to the accounts. They include a fund to manage the variability of year on year legacy income, a fund to

ringfence money for anticipated future financial challenges resulting from the impact of COVID-19, a fund to expand our charitable impact and to support our long-term sustainability and funds for capital commitments and the net book value of fixed assets. On this basis, free reserves as of 31 March 2023 were £24,038k (2022: £21,543k), equivalent to 11.4 months of operating expenditure (2022: 11.5 months of operating expenditure).

The Trustees have reviewed the financial position of the Charity and its subsidiaries, its forecast cash flows, and its liquidity position for the foreseeable future. This includes the impact of risks as described in the principal risks and uncertainties section above. The Trustees believe that the Charity has adequate resources to continue operational existence for the foreseeable future. As a result, they continue to adopt the going concern basis of accounting in preparing the Annual Report and Accounts.

Investment policy

The Board of Trustees has approved an investment policy and strategy, which is supervised by the Investment Committee.

The primary objective of the investment policy is to provide financial security and stability for the operation of St Christopher's Hospice. The investment policy also recognises that the organisation is exposed to the risk of a sharp fall in its income due to the variability of legacy income and donations and uncertainty of funds from the NHS. To reflect this position, the Investment Committee with Cazenove Capital Management continues to invest in a varied portfolio in accordance with an asset allocation approved by the Investment Committee.

Investment income has increased to £368k (2022: £153k), of which £208k (2022: £9k) is interest from cash deposits, and £160k (2022: £144k) is dividend and interest income from the Cazenove Capital Management charity portfolio.

The Investment Policy states that, among other things, Trustees will not invest directly in a company if it carries out activities contrary to the Charity's purposes and, therefore, against its interests and those of its beneficiaries.

The Investment Committee encourages responsible investment. They are committed to appointing investment managers involved in applying Environment, Social and Governance (ESG) criteria across the investment process. Our existing investment manager, Cazenove Capital Management, has demonstrated that they use these criteria.

Statement of Board's responsibilities

The Board members (directors for the purposes of Company law) who served during the year, and the period for which they were in office, are detailed on page 62.

The Board is responsible for preparing the Report of the Board of Trustees and the financial statements in accordance with applicable law and regulations.

Company law requires the Board to prepare financial statements for each financial year. Under that law, the Board has elected to prepare the financial statements in accordance with United Kingdom Generally Accepted Accounting Practice (United Kingdom Accounting Standards and applicable law). Under company law, the Board must not approve the financial statements unless it is satisfied that they give a true and fair view of the state of affairs of the Charity and of the result of the Group for that period. In preparing these financial statements, the Board is required to:

- select suitable accounting policies and then apply them consistently
- make judgments and accounting estimates that are reasonable and prudent
- follow applicable accounting standards
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the group will continue in business.

The Board is responsible for keeping adequate accounting records which are sufficient to show and explain the Group and Charity's transactions and disclose with reasonable accuracy at any time the financial position of the group and enable it to ensure that the financial statements comply

with the Companies Act 2006. It is also responsible for safeguarding the assets of the Group and the Charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

Statement as to disclosure of information to auditors

The Trustees have taken all necessary steps to make themselves aware of any relevant audit information and to establish that the auditors are aware of that information.

As far as the Trustees are aware, there is no relevant audit information that the charity's auditors are unaware of.

Appointment of auditors

Moore Kingston Smith LLP were appointed as auditor to the Charity and in accordance with secion 485 of the Companies Act 2006, a resolution proposing that they be reappointed will be put at a general meeting.

Signed on behalf of The Board of Trustees

Neil Goulden
Chair of the Board of Trustees
St Christopher's Hospice, 51-59 Lawrie Park Road,
London SE26 6DZ
31 August 2023

Independent auditor's report to the Members and Trustees of St Christopher's Hospice

Opinion

We have audited the financial statements of St Christopher's Hospice (the 'parent charitable company') and its subsidiaries (the 'group') for the year ended 31 March 2023 which comprise the Group Statement of Financial Activities, the Group and Parent Charitable Company Balance Sheets, the Group Cash Flow Statement 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 group's and the parent charitable company's affairs as at 31 March 2023 and of the group's incoming resources and application of resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been 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 charitable company 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 group's and parent charitable company's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

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

Other information

The other information comprises the information included in the annual report, other than the financial statements and our auditor's report thereon. The trustees are responsible for the other information contained in 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 there is 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 the audit:

- the information given in the strategic report and the trustees' annual report for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the strategic report and the trustees' annual 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 group and parent charitable company and their environment obtained in the course of the audit, we have not identified material misstatements in the strategic report or the trustees' annual report.

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

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

Responsibilities of trustees

As explained more fully in the trustees' responsibilities statement set out on page 34, the trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

Auditor's responsibilities for the audit of the financial statements

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

As part of an audit in accordance with ISAs (UK) we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. 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.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purposes of expressing an opinion on the effectiveness of the group and parent charitable company's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the trustees.
- Conclude on the appropriateness of the trustees' use of the going concern basis of accounting and, based

on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the group and parent charitable company's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the group or parent charitable company to cease to continue as a going concern.

- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.
- Obtain sufficient appropriate audit evidence regarding the financial information of the entities or business activities within the group to express an opinion on the consolidated financial statements. We are responsible for the direction, supervision and performance of the group audit. We remain solely responsible for our audit report.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Explanation as to what extent 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.

The objectives of our audit in respect of fraud, are; to identify and assess the risks of material misstatement of the financial statements due to fraud; to obtain sufficient appropriate audit evidence regarding the assessed risks of material misstatement due to fraud, through designing and implementing appropriate responses to those assessed risks; and to respond appropriately to instances of fraud or suspected fraud identified during the audit. However, the primary responsibility for the prevention and detection of fraud rests with both management and those charged with governance of the charitable company.

Our approach was as follows:

- We obtained an understanding of the legal and regulatory requirements applicable to the charitable company and considered that the most significant are the Companies Act 2006, the Charities Act 2011, the Charity SORP, and UK financial reporting standards as issued by the Financial Reporting Council.
- We obtained an understanding of how the charitable company complies with these requirements by discussions with management and those charged with governance.
- We assessed the risk of material misstatement of the financial statements, including the risk of material misstatement due to fraud and how it might occur, by holding discussions with management and those charged with governance.
- We inquired of management and those charged with governance as to any known instances of non-compliance or suspected non-compliance with laws and regulations.
- Based on this understanding, we designed specific appropriate audit procedures to identify instances of non-compliance with laws and regulations. This included making enquiries of management and those charged with governance and obtaining additional corroborative evidence as required.

There are inherent limitations in the audit procedures described above. We are less likely to become aware of instances of non-compliance with laws and regulations that are not closely related to events and transactions reflected in the financial statements. Also, the risk of not detecting a material misstatement due to fraud is higher than the risk of not detecting one resulting from error, as fraud may involve deliberate concealment by, for example, forgery or intentional misrepresentations, or through collusion.

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 which 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 any party other than the charitable company and charitable company's members as a body, for our audit work, for this report, or for the opinions we have formed.

James Saunders
Senior Statutory Auditor
for and on behalf of Moore Kingston Smith LLP,
Statutory Auditor
9 Appold Street, London EC2A 2AP

4 September 2023

Consolidated statement of financial activities for the year ended 31 March 2023

	Notes	Unrestricted funds £'000	Restricted funds £'000	2023 total £'000	2022 restated £'000
Income from					
Donations and gifts		3,966	542	4,508	4,037
Legacies		7,657	–	7,657	9,958
Charitable activities					
NHS funding for patient care	**2**	9,013	–	9,013	10,036
Education, fees and other income	**3**	678	–	678	867
Other trading activities					
Income of trading companies	**4**	5,005	–	5,005	4,436
Investment income		368	–	368	153
Total income		26,687	542	27,229	29,487
Expenditure on					
Raising voluntary income		1,552	–	1,552	1,508
Trading companies	**4**	3,383	–	3,383	3,125
		4,935	–	4,935	4,633
Charitable activities					
Inpatient care		7,789	30	7,819	6,861
Community care/outpatients		9,809	148	9,957	8,847
Bereavement services		614	73	687	701
Community action		638	70	708	444
Education, research and policy		866	348	1,214	1,066
		19,716	669	20,385	17,919
Total expenditure	**5**	24,651	669	25,320	22,552
Net income/(expenditure) before transfers	**6**	2,036	(127)	1,909	6,935
Transfer between funds (relate to capital programme)		97	(97)	–	–
Net income/(expenditure) before other recognised gains and losses		2,133	(224)	1,909	6,935
Other recognised gains/(losses)					
Actuarial (losses) on defined benefit pension scheme	**19**	(127)	–	(127)	(303)
Gains on investments: realised	**10**	479	–	479	198
(Losses)/gains on investments: unrealised	**10**	(1,292)	–	(1,292)	352
Net movement in funds		1,193	(224)	969	7,182
Total funds at 1 April 2022	**15, 16, 17**	41,614	2,955	44,569	37,387
Total funds at 31 March 2023	**15, 16, 17**	42,807	2,731	45,538	44,569

All recognised gains and losses are included in the consolidated statement of financial activities. St Christopher's Hospice and St Christopher's (Trading) Limited transactions are derived from continuing activities. An analysis of the results by company is shown in Note 4.

The Statement of Financial Activities (SOFA) for 2022 has been restated to show a revised allocation between expenditure categories to better reflect current activity. Total expenditure for 2022 remains the same at £22,552k.

The allocation between unrestricted and restricted funds for 2021-22 is shown in Note 18.

Consolidated balance sheet as at 31 March 2023

	Notes	2023 £'000	2022 £'000
Fixed assets			
Tangible fixed assets	**9**	10,104	10,322
Intangible assets	**9**	120	179
Investments	**10**	19,362	19,008
		29,586	29,509
Current assets			
Debtors	**11**	7,127	8,555
Interest-bearing bank accounts		11,457	8,614
		18,584	17,169
Creditors			
Amounts falling due within one year	**12**	(2,632)	(2,109)
Net current assets		15,952	15,060
Net assets		45,538	44,569
Funds			
Restricted	**15**	2,731	2,955
Unrestricted			
General		24,030	21,535
Designated	**16**	18,769	20,071
Non-charitable		8	8
Total unrestricted funds		42,807	41,614
Total funds		45,538	44,659

The financial statements were approved by The Board of Trustees on 31 August 2023 and signed on its behalf by:

Neil Goulden
Chair of Trustees

Catherine McDonald
Trustee

Balance sheet: St Christopher's Hospice entity only as at 31 March 2023

	Notes	2023 £'000	2022 £'000
Fixed assets			
Tangible fixed assets	**9**	9,864	10,070
Intangible assets	**9**	120	179
Investments	**10**	19,762	19,408
		29,746	29,657
Current assets			
Debtors	**11**	10,595	9,852
Interest-bearing bank accounts		7,630	6,945
		18,225	16,797
Creditors			
Amounts falling due within one year	**12**	(2,441)	(1,894)
Net current assets		15,784	14,903
Net assets excluding pension scheme asset		45,530	44,560
Defined benefit pension scheme asset	**19**	–	–
Net assets including pension scheme asset		45,530	44,560
Funds			
Restricted	**15**	2,731	2,955
Unrestricted			
General		24,030	21,534
Designated	**16**	18,769	20,071
Total unrestricted funds		42,799	41,605
Total funds		45,530	44,560

The financial statements were approved by The Board of Trustees on 31 August 2023 and signed on its behalf by:

Neil Goulden
Chair of Trustees

Catherine McDonald
Trustee

Consolidated statement of cash flows for the year ended 31 March 2023

	Notes	2023 £'000	2022 £'000
Net cash generated by operating activities	A	4,570	6,915
Cash flows from investing activities			
Interest and dividends received		368	153
Purchase of tangible and intangible fixed assets		(449)	(889)
Increase in investments		(1,646)	(4,475)
Net cash used in investing activities		(1,727)	(5,211)
Change in cash and cash equivalents in the year		2,843	1,704
Cash at the beginning of the year		8,614	6,910
Cash at the end of the year		11,457	8,614

Reconciliation of net movement in funds to net cash inflow from operating activities	Notes	2023 £'000	2022 £'000
	A		
Net income		969	7,182
Interest and dividends receivable		(368)	(153)
Depreciation and amortisation charges		675	746
Unrealised loss/(gain) on investments		1,292	(352)
Loss on the disposal of fixed assets		(2)	11
Cash received from the sale of assets		3	–
Decrease/(increase) in debtors		1,428	(1,159)
Increase in creditors		523	640
Decrease in dilapidations provision		50	–
Net cash generated by operating activities		4,570	6,915

Notes to the financial statements for the year ended 31 March 2023

1 Principal accounting policies

1.1 Basis of accounting

The financial statements are prepared under the historical cost basis and comply with the Companies Act 2006. The financial statements have been prepared in accordance with the Statement of Recommended Practice (*Accounting and Reporting by Charities*), issued in October 2019 (FRS 102), other relevant provisions of the memorandum and articles of association, and with applicable UK accounting standards.

The figures for both years reflect the full adoption of FRS (Financial Reporting Standard) 102.

The Charity meets the definition of a public benefit entity under FRS 102.

1.2 Going concern

These financial statements have been prepared on a going concern basis.

The Trustees therefore consider that the Charity holds sufficient reserves for the going concern basis to be appropriate.

1.3 Basis of consolidation

The statement of financial activities and balance sheet consolidate the financial statements of the charity and its wholly owned subsidiary St Christopher's (Trading) Limited.

No separate Statement of Financial Activities is presented for the charity as permitted by Section 408 of the Companies Act 2006 and SORP (FRS102). The net deficit dealt with in the Charity's Statement of Financial Activities before the distribution from St Christopher's (Trading) Limited for the year ended 31 March 2023 was £653k (2022: Income £5,871k), and the net income dealt with in the Charity's Statement of Financial Activities after the distribution was £969k (2022: £7,096k).

1.4 Fund accounting

Restricted income funds

Restricted funds are funds subject to specific restricted conditions requested by the donors. Where the restriction relates to the purchase of a capital item then the condition will be treated as having been met when the asset is purchased.

Unrestricted income funds

Unrestricted funds comprise accumulated surpluses and deficits on general funds. They are available for use at the discretion of the Board in furtherance of the general charitable objects.

Designated funds are amounts included within unrestricted funds that have been set aside by the Board for particular purposes. Designated funds include:

- **Fixed assets** This reflects the net book value of unrestricted tangible and intangible fixed assets
- **Pension liability** These are designated funds held against the defined benefit pension scheme deficit. The amount shown relates to the deficit from the most recent triennial valuation, less pension contributions made following this valuation, less the liability disclosed under FRS 102
- **Ward refurbishment** These are designated monies to fund a modest wards refurbishment at the Sydenham site
- **Strategic Ambitions Fund** This is a designated fund to focus on projects which will expand St Christopher's charitable impact and to support its long-term sustainability
- **Future Challenge Fund** This is a designated fund to allow for future years of financial challenge expected as a result of COVID-19
- **Legacies Fund** To set aside legacies income, when it has been higher than budgeted in a particular year. This money will be drawn down to support future years, when legacies income is lower than budgeted.

Details on the level of funds in each element are provided in notes 15 and 16.

1.5 Income

Income represents the total income receivable during the year comprising donations, legacies, NHS contracts, grants, fees, interest and other income generated during the year.

Legacies must be recognised when the following conditions are confirmed:

- There has been grant of probate
- The executors have established that there are sufficient funds to pay the legacy
- Any conditions attached to the legacy are either within the control of the Charity or have been met.

NHS contracts and fees are recognised when it can reasonably be assumed that the Charity is entitled to the income and the amount can be estimated with sufficient reliability.

Income from trading companies arises from sales of goods in charity shops.

1.6 Expenditure

The costs of inpatient care; community care/outpatients; bereavement services; community action; education, research and policy; and raising voluntary income comprise expenditure both directly and indirectly attributable to the activity concerned. Indirectly attributable costs such as physiotherapy and social work have been allocated to activities using an appropriate cost allocation basis.

Support costs have been allocated to activities on the basis of staff time spent. Governance costs, which are charitable, relate to the stewardship of the Charity's assets, organisational administration and compliance with constitutional and statutory requirements.

1.7 Taxation

St Christopher's Hospice is a registered charity. Income and chargeable gains, which are applied for charitable purposes, are exempt from liability to direct taxation. Income tax recoverable in respect of donations under Gift Aid, investment income and legacies is included with the income to which it relates.

1.8 Capitalisation and depreciation

Tangible fixed assets are capitalised with a £1k de minimis limit where relevant.

If items are individually less than £1k, but are part of a project greater than £10k (e.g. as part of an agreed budget) then these are also capitalised as part of this project.

Equipment is not capitalised if it is less than £1k per individual item, and purchased on a rolling basis.

Assets under construction are not depreciated. Depreciation and amortisation are calculated to write off the cost of tangible fixed assets on a straight-line basis over the expected useful lives of the assets concerned at the following rates:

Leasehold buildings:	over the term of the lease
Freehold buildings:	2% straight-line basis
Freehold refurbishments and fixtures and fittings:	10% straight-line basis
Equipment and motor vehicles:	10% to 33⅓% straight-line basis
Motor vehicles:	33⅓% straight-line basis
Intangible assets:	20% straight-line basis
Shops dilapidations:	straight line over the length of the shop lease

1.9 Pension schemes

St Christopher's Hospice contributes to the St Christopher's Hospice (1985) Pension Scheme, a defined benefit scheme. The pension scheme is administered by Trustees and is separate from the hospice. See note 19 for further details.

St Christopher's Hospice also contributes to a defined contribution scheme. Contributions in respect of the year are charged to the Statement of Financial Activities in the year to which they relate.

St Christopher's Hospice has an arrangement with the NHS that permits members of the NHS final salary pension scheme to maintain their membership when they are subsequently employed by the hospice. The NHS currently provides a subsidy on the contributions payable by the hospice. This subsidy, along with the contribution from St Christopher's Hospice, are recognised in the Statement of Financial Activities in the year to which they relate.

1.10 Operating leases

Rentals payable under operating leases are charged on a straight-line basis over the term of the lease.

1.11 Estimation uncertainty and key judgements

Key judgements and areas of uncertainty are considered to be any defined pension liability and accrued legacy income.

Please refer to note 19 for a detailed review of the relevant assumptions in relation to the defined benefit pension scheme.

Accrued legacy income is calculated on the basis of the valuation of the net estate of each testator, based on management's best estimate. The source of estimation uncertainty is that the valuation of the estates at a point in time is inherently uncertain and can change significantly over a short period of time.

The carrying amount of legacies accrued (note 11) as at 31 March 2023 was £5,572k (2022: £6,276k).

2 National Health Service

	2023 £'000	2022 £'000
NHS contracts	9,013	8,383
NHSE funding (restricted see note 15)	–	1,653
	9,013	10,036

3 Education, fees and other income

	2023 £'000	2022 £'000
Education	332	173
Fees and other income	346	694
	678	867

4 Group undertakings

Summary of results of group undertakings:

2023	St Christopher's Hospice £'000	St Christopher's (Trading) Ltd £'000	Group total £'000
Income	22,224	5,005	27,229
Expenditure	(21,937)	(3,383)	(25,320)
Surplus/profit for the year	287	1,622	1,909
Other recognised losses	(940)	–	(940)
Distributions	1,622	(1,622)	–
Net income for the year	969	–	969

The net assets of St Christopher's (Trading) Limited were £408k at 31 March 2023.

2022	St Christopher's Hospice £'000	St Christopher's (Trading) Ltd £'000	Group total £'000
	£'000	£'000	£'000
Income	25,051	4,436	29,487
Expenditure	(19,427)	(3,125)	(22,552)
Surplus/profit for the year	5,624	1,311	6,935
Other recognised gains	247	–	247
Distributions	1,225	(1,225)	–
Net income for the year	7,096	86	7,182

The net assets of St Christopher's (Trading) Limited were £408k at 31 March 2022.

St Christopher's Hospice has one wholly owned subsidiary:

Company	Activity	Company number
St Christopher's (Trading) Limited	Operation of charity shops for the hospice	02604519

Related party transactions

During the year the company entered into transactions with related parties. Transactions entered into and balances outstanding are as follows:

	2023 St Christopher's (Trading) Ltd £'000	2022 St Christopher's (Trading) Ltd £'000
Re-charged to related parties		
Management charge	131	72
Salaries	1,899	1,663
Leasehold depreciation	36	35
Other costs	77	43
Total	2,143	1,813
Balance owed at 31 March	3,738	1,566

5 Expenditure

	Direct costs £'000	Support costs £'000	Total 2023 £'000	Total 2022 £'000
Costs of raising funds				
Fundraising and publicity	1,379	173	1,552	1,508
Trading activities	3,383	–	3,383	3,125
	4,762	173	4,935	4,633
Charitable activities				
Inpatient care	6,189	1,630	7,819	6,861
Community care/outpatients	7,968	1,989	9,957	8,847
Bereavement services	545	142	687	701
Community action	538	170	708	444
Education, research and policy	1,078	136	1,214	1,066
Total cost of charitable activities	16,318	4,067	20,385	17,919
Total expenditure	21,080	4,240	25,320	22,552

Expenditure for 2022 has been restated to show a revised allocation between expenditure categories to better reflect current activity. Total expenditure for 2022 remains the same at £22,552k.

Included in the costs above are governance costs of £101k (2022: £77k).

Analysis of support costs

	2023 £'000	2022 £'000
Chief Executive office and governance	376	335
Facilities	860	745
IT	1,161	993
Finance	434	388
Workforce	1,409	1,108
	4,240	3,569

Support costs have been allocated to activities on the basis of staff time spent.

6 Net income

	2023 £'000	2022 £'000
Net income is stated after charging/(crediting)		
Auditors' remuneration: audit fee	34	36
Auditors' remuneration: tax and tagging compliance services	6	5
Auditors' remuneration: prior year	1	–
Auditors' remuneration: pension	6	6
Operating lease rentals: land and buildings	784	802
Operating lease rentals: vehicles and equipment	69	–
Depreciation and amortisation	675	746
Interest receivable	(368)	(153)

7 Staff costs

	2023 £'000	2022 £'000
Salaries and wages	14,866	13,297
Social security costs	1,352	1,125
Pension costs (see note 19 below)	1,156	1,195
Staff costs of the Charity	17,374	15,617
Staff costs of trading activities (includes pension costs of £77k in 2023 (2022: £67k)	2,030	1,735
	19,404	17,352

Payments were made under a voluntary severance scheme of £35k (2022: £36k).

The average number of employees during the year (excluding bank) was:

	Head count 2023	Head count restated 2022	FTEs 2023	FTEs restated 2022
Inpatient care	87	88	78	73
Community care/outpatients	117	109	93	83
Bereavement services	12	12	8	8
Community action	11	7	10	7
Education, research and policy	11	19	8	10
Fundraising	15	14	10	11
Other hospice (includes support staff)	147	120	108	104
Charity shops	86	75	54	52
	486	444	369	348

The headcount and FTE figures for 2022 have been restated to show a revised allocation between categories to better reflect current activity.

The number of employees whose earnings fell within the band:

	2023	2022
£60,000 to £69,999	4	6
£70,000 to £79,999	6	6
£80,000 to £89,999	4	2
£90,000 to £99,999	1	2
£100,000 to £109,999	1	1
£120,000 to £129,999	1	1
£150,000 to £159,999	1	–

Pension contributions of £158k (2022: £142k) were paid in respect of these employees.

The Board of Trustees consider the key management personal to be the Executive Team of 5.40 FTEs (2022: 5.85 FTEs) and the total benefit paid to the key management personnel was £594k (2022: £572k).

8 Board of Trustees

Remuneration and reimbursed expenses

No remuneration was paid to members of the Board during either year. No expenses were reimbursed to Trustees (2022: £nil). £11k was incurred in respect of recruiting Trustees (2022: £nil).

St Christopher's Hospice paid £3,300 (2022: £3,969) for indemnity insurance for the Trustees of the St Christopher's Hospice (1985) Pension Scheme.

St Christopher's Hospice also paid £3,416 (2022: £3,360) for Trustee Liability Insurance for its Trustees.

Donations from Trustees

The Trustees have donated a total of £10k (2022: £17k) during the year. Of this, £9k was restricted to St Christopher's CARE.

9.1 Tangible fixed assets

	Freehold land and buildings £'000	Freehold refurb-ishment £'000	Equipment and motor vehicles £'000	Leasehold land and buildings £'000	Assets under con-truction £'000	Total £'000
Group						
Cost						
At 1 April 2022	12,890	3,896	434	1,177	–	18,397
Additions	30	–	7	343	12	392
Disposals	–	(50)	–	(11)	–	(61)
At 31 March 2023	12,920	3,846	441	1,509	12	18,728
Depreciation						
At 1 April 2022	3,448	3,745	332	550	–	8,075
Amount provided	266	9	34	251	–	560
Disposal	–	–	–	(11)	–	(11)
At 31 March 2023	3,714	3,754	366	790	–	8,624
Net book values						
At 31 March 2023	9,206	92	75	719	12	10,104
At 31 March 2022	9,442	151	102	627	–	10,322
Charity						
Cost						
At 1 April 2022	12,573	3,786	434	1,137	–	17,930
Additions	27	–	7	324	12	370
At 31 March 2023	12,600	3,786	441	1,461	12	18,300
Depreciation						
At 1 April 2022	3,332	3,676	330	522	–	7,860
Amount provided	257	41	36	242	–	576
At 31 March 2023	3,589	3,717	366	764	–	8,436
Net book values						
At 31 March 2023	9,011	69	75	697	12	9,864
At 31 March 2022	9,241	110	104	615	–	10,070

Caritas House, the freehold property in Orpington, was revalued by Jones Lang Lasalle in April 2014. Under the transitional arrangements of FRS 102, the valuation at the date of transition is considered to be the deemed cost of this property.

9.2 Intangible fixed assets

	Software £'000
Group and Charity cost	
At 1 April 2022	657
Additions	57
Disposals	(58)
At 31 March 2023	656
Amortisation	
At 1 April 2022	478
Amount provided	115
Disposals	(57)
At 31 March 2023	536
Net book values	
At 31 March 2023	120
At 1 April 2022	179

The net book value at 31 March 2023 represents fixed assets used for:

	Freehold land and buildings £'000	Leasehold land and buildings £'000	Equipment and motor vehicles £'000	Software £'000	Total £'000
Charitable purposes					
Inpatient care	5,277	–	419	78	5,774
Community care/outpatients	1,984	–	175	22	2,181
Education, research and policy	1,773	–	41	8	1,822
	9,034	–	635	108	9,777
Charity shops	276	75	84	12	447
	9,310	75	719	120	10,224

10 Investments

	Group 2023 £'000	Group 2022 £'000	Charity 2023 £'000	Charity 2022 £'000
At 1 April 2022	19,008	14,181	19,408	14,581
Additions	2,657	4,168	2,657	4,168
Disposals	(3,185)	(1,969)	(3,185)	(1,969)
Increase in market value: realised	479	198	479	198
(Decrease)/increase in market value: unrealised	(1,292)	352	(1,292)	352
	17,667	16,930	18,067	17,330
Movement in cash balance	1,695	2,078	1,695	2,078
At 31 March 2023	19,362	19,008	19,762	19,408
Analysed as follows:				
Funds managed by Cazenove Capital Management				
UK equities	1,419	1,848	1,419	1,848
International equities	6,821	7,453	6,821	7,453
Bonds	1,403	954	1,403	954
Property	807	1,053	807	1,053
Multi asset	–	512	–	512
Alternatives: other and commodities	1,842	1,813	1,842	1,813
Cash	767	87	767	87
	13,059	13,720	13,059	13,720
Other investments				
Bank deposits	6,303	5,288	6,303	5,288
Investment in subsidiary undertakings (below)	–	–	400	400
	6,303	5,288	6,703	5,688
Total investments	19,362	19,008	19,762	19,408

The historical cost of the investments managed by Cazenove Capital Management is £11,340k (2022: £11,391k)

The Charity owns all of the 400,000 £1 ordinary shares in St Christopher's (Trading) Limited.

11 Debtors

	Group 2023 £'000	Group 2022 £'000	Charity 2023 £'000	Charity 2022 £'000
Trade debtors	341	74	341	64
Legacies receivable	5,572	6,276	5,572	6,276
Sundry debtors, prepayments and accrued income	1,214	2,205	944	1,946
Amount due from St Christopher's (Trading) Limited	–	–	3,738	1,566
	7,127	8,555	10,595	9,852

12 Creditors: amounts falling due within one year

	Group 2023 £'000	Group 2022 £'000	Charity 2023 £'000	Charity 2022 £'000
Trade creditors	344	358	322	345
Payroll taxes and social security	558	478	558	477
Other creditors and accruals	904	609	735	408
Income received in advance	826	664	826	664
	2,632	2,109	2,441	1,894

13 Lease commitments

The Group leases a number of properties and motor vehicles under operating leases.

	Land and buildings 2023 £'000	Land and buildings 2022 £'000	Motor vehicles and office equipment 2023 £'000	Motor vehicles and office equipment 2022 £'000
Operating leases payments to be made				
Within one year	681	688	27	59
In two to five years	1,010	1,268	–	16
Over five years	47	2	–	–
	1,738	1,958	27	75

Land and buildings lease commitments are based on whichever is earlier out of the lease end date and the lease break-point date.

14 Financial commitments

As at 31 March 2023, the following approved commitments were authorised by the Board of Trustees:

- Up to £750k in respect of ward refurbishments. This will be funded through restricted and designated funds.

15 Restricted funds

	Balance 1 April 2022 £'000	Income £'000	Expenditure £'000	Transfers £'000	Balance 31 March 2023 £'000
3 IS Project	–	49	–	–	49
Candle	–	73	73	–	–
Carers	63	–	26	–	37
Caritas House Building Fund	1,094	–	32	–	1,062
Choose Home	41	–	41	–	–
Connected in Loss	43	43	33	–	53
Community Action	37	54	35	–	56
Community of Nursing	27	–	8	–	19
Dementia Caring Pathways	(6)	23	17	–	–
Dementia–focused training and education	54	–	9	–	45
Developing the practice of palliative nursing	–	26	–	–	26
Education (bursaries)	47	15	41	–	21
Inpatient equipment	–	21	8	–	13
Lavender Room	30	–	–	–	30
Nightingale Fellowship	94	–	30	–	64
Oral History	(13)	71	56	–	2
Palliative Works	27	–	27	–	–
Patient equipment/premises extension	161	–	–	–	161
Research: Stern Legacy	260	–	31	–	229
Support for St Christopher's CARE	884	–	169	(88)	627
Ward refurbishment project	2	75	–	–	77
Women in Fellowship Fund	37	29	35	–	31
Other funds	73	63	(2)	(9)	129
Total restricted funds	2,955	542	669	(97)	2,731

Caritas House Building Fund: this fund was originally established to cover the cost of building Harris HospisCare premises and offices. It now reflects the net book value of Caritas House.

Connected in Loss (formerly Coach4Care): supporting carers through end of life and bereavement experiences.

Community Action: supporting older, frail and socially isolated people within the local community.

Community of Nursing: shared learning and support for newly qualified nurses.

Nightingale Fellowship: hardship bursaries to nurses to assist with living costs.

Patient equipment/premises extension: an amount left in a Will with a specific request for expenditure to be spent on either patient equipment or a premises extension.

Research: Stern legacy: St Christopher's Hospice was the beneficiary of a restricted legacy for use in research into myeloma and end of life palliative care. Accordingly, the funds have been used to establish a research project into myeloma at the Cicely Saunders International research institution and are being used to fund other research projects in end of life care.

Support for St Christopher's CARE: this fund is restricted to supporting expenditure for St Christopher's CARE in its first years of operating.

Wards refurbishment project: Relates to grant funding in respect of our upcoming inpatient unit wards refurbishment.

16 Designated funds

	Balance at 1 April 2022 £'000	New designations and transfers £'000	Balance at 31 March 2023 £'000
Fixed assets	9,407	(245)	9,162
Strategic Ambitions Fund	6,292	(771)	5,521
Wards refurbishment	750	–	750
Future Challenge Fund	622	(286)	336
Legacies Fund	3,000	–	3,000
	20,071	(1,302)	18,769

Fixed assets: this reflects the net book value of unrestricted tangible and intangible fixed assets.

Wards refurbishment: these are designated monies to fund a wards refurbishment at the Sydenham site.

Future Challenge Fund: this is a designated fund to allow for future years of financial challenge expected as a result of COVID-19.

Legacies Fund: to set aside legacies income when it has been higher than budgeted in a particular year. This money will then be released to general funds in future years if legacies income is lower than budgeted.

Strategic Ambitions Fund: this is a designated fund to focus on projects which will expand St Christopher's charitable impact and to support its long-term sustainability.

17 Analysis of group net assets between funds

	Fixed assets £'000	Current assets £'000	Creditors £'000	Total £'000
Restricted income	1,062	1,669	–	2,731
Unrestricted income				
Designated	9,162	9,607	–	18,769
General	19,362	7,308	(2,632)	24,038
	29,586	18,584	(2,632)	45,538

18 Consolidated statement of financial activities for the year ended 31 March 2022

	Unrestricted funds Total £'000	Restricted funds Total £'000	2022 Total £'000	2021 Restated total £'000
Income from				
Donations and gifts	3,484	553	4,037	4,242
Legacies	9,793	165	9,958	6,104
Charitable activities				
NHS funding for patient care	8,383	1,653	10,036	12,607
Education, fees and other income	867	–	867	1,000
Other trading activities				
Income of trading companies	4,436	–	4,436	3,241
Investment income	153	–	153	143
Total income	27,116	2,371	29,487	27,337
Expenditure on				
Raising voluntary income	1,508	–	1,508	1,499
Trading companies	3,125	–	3,125	3,592
	4,633	–	4,633	5,091
Charitable activities				
Inpatient care	5,672	1,189	6,861	6,971
Community care/outpatients	8,122	725	8,847	8,978
Bereavement services	658	43	701	606
Community action	444	–	444	255
Education, research and policy	605	461	1,066	966
	15,501	2,418	17,919	17,776
Total expenditure	20,134	2,418	22,552	22,867
Net income/(expenditure) before transfers	6,982	(47)	6,935	4,470
Transfer between funds (relate to capital programme)	111	(111)	–	–
Net income/(expenditure) before other recognised gains and losses	7,093	(158)	6,935	4,470
Other recognised gains/losses				
Actuarial losses on defined benefit pension scheme	(303)	–	(303)	(300)
Gains on investments: realised	198	–	198	132
Gains on investments: unrealised	352	–	352	2,162
Net movement in funds	7,340	(158)	7,182	6,464
Total funds at 1 April 2021	34,274	3,113	37,387	30,923
Total funds at 31 March 2022	**41,614**	**2,955**	**44,569**	**37,387**

The SOFAs for 2021 and 2022 have been restated to show revised allocations between expenditure categories to better reflect current activity. Total expenditure for 2021 and 2022 remains the same at £22,867k and £22,552k.

19 Pension schemes

a St Christopher's Hospice (1985) scheme

The hospice operates a pension scheme, the St Christopher's Hospice (1985) Pension Scheme, which provides benefits based on final pensionable salary. The assets of the scheme are held separately from those of the hospice. The scheme was closed to new members in April 2002 and closed to future accruals from March 2010.

Contributions are charged to the Statement of Financial Activities so as to spread the cost of pensions over employees' working lives. The pension charge for the year was £127k (2022: £303k).

Triennial valuation

The contribution rates are determined by a qualified actuary on the basis of triennial valuation. The results of the last triennial valuation at 31 March 2022 showed that the value of the scheme's assets was £12,279k (2019: £10,413k) and that this represented 111% (2019: 94%) funding level, with a surplus of £1,226k (2019: deficit of 695k). The actuary confirmed that the minimum funding requirement regulations had been met.

In accordance with the actuarial valuation, the hospice has agreed with the Trustees that it will meet the expenses of the scheme and levies payable to the Pension Protection Fund.

FRS (Financial Reporting Standard) 102: Disclosure Report

FRS 102 is fully effective for accounting periods beginning on or after 1 January 2015. The statement of financial activities, the balance sheet and the disclosures in the notes to these financial statements meet the requirements of FRS 102. The major assumptions used by the actuary are shown below.

Present values of defined benefit obligation, fair value of assets and defined benefit asset (liability)

	Period ended 31 March 2023 £'000	Period ended 31 March 2022 £'000	Period ended 31 March 2021 £'000
Fair value of plan assets	8,612	12,279	11,736
Present value of defined benefit obligation	(7,597)	(10,434)	(10,832)
Unrecognised surplus	(1,015)	(1,845)	(904)
Defined benefit asset to be recognised	–	–	–

Reconciliation of opening and closing balances of the defined benefit obligation

	Period ended 31 March 2023 £'000	Period ended 31 March 2022 £'000
Net defined benefit obligation at start of period	10,434	10,832
Interest expense	283	224
Acturial losses	(2,793)	(333)
Benefits paid	(327)	(289)
Defined benefit obligation at end of year	7,597	10,434

Reconciliation of opening and closing balances of the fair value of plan assets

	Period ended 31 March 2023 £'000	Period ended 31 March 2022 £'000
Fair value of plan assets at start of period	12,279	11,736
Interest income	336	246
Actuarial (losses)/gains	(3,801)	286
Contributions by the Charity	125	300
Benefits paid	(327)	(289)
Fair value of plan assets at end of period	8,612	12,279

The actual loss on the plan assets over the period ended 31 March 2023 was £3,465k (2022 a return of £532k).

Defined benefit costs recognised in net (expenditure)/income

	Period ended 31 March 2023 £'000	Period ended 31 March 2022 £'000
Net interest cost	(2)	(3)

Defined benefit costs recognised in other gains and losses

	Period ended 31 March 2023 £'000	Period ended 31 March 2022 £'000
Return on plan assets (excluding amounts included in net interest cost): (loss)/gain	(3,801)	286
Experience gains and losses arising on the plan liabilities: (loss)	(704)	(121)
Effects of changes in the demographic and financial assumptions underlying the present value of the plan liabilities: gain	3,497	454
Effects of changes in the amount of surplus that is not recoverable (excluding amounts included in net interest cost): gain/(loss)	881	(922)
Total amount recognised in other gains and losses	(127)	(303)

Assets

	Period ended 31 March 2023 £'000	Period ended 31 March 2022 £'000	Period ended 31 March 2021 £'000
Diversified growth assets	5,225	9,071	3,688
Debt instruments	–	–	2,360
Liability-driven investments	2,913	3,025	2,845
Equity instruments	–	–	2,722
Cash and cash equivalents	474	183	121
Total assets	8,612	12,279	11,736

None of the fair values of the assets shown above include any direct investments in the hospice's own financial instruments or any property occupied by, or other assets used by, the hospice.

Assumptions

	Period ended 31 March 2023 % pa	Period ended 31 March 2022 % pa	Period ended 31 March 2021 % pa
Discount rate	4.85	2.75	2.10
Inflation (RPI)	3.50	4.00	3.50
Allowance for revaluation of deferred pensions of RPI or 5% p.a. if less	3.50	4.00	3.50
Allowance for pension in payment increases of RPI or 5% p.a. if less	3.20	4.00	3.50
Allowance for commutation of pension for cash at retirement	75%	75%	75%

The mortality assumptions adopted at 31 March 2023 imply the following life expectancies at age 65 years:

Male retiring in 2023:	20.8
Female retiring in 2023:	22.1
Male retiring in 2043:	22.1
Female retiring in 2043:	24.9

As the pension scheme is in surplus, there are not expected to be any contributions paid by the hospice to the scheme for the period commencing 1 April 2023.

Calculation of pension scheme asset

	£'000
Triennial valuation surplus in 2022	1,296
Less amounts paid by charity 2022-23	(125)
Surplus not recognised	1,171

b St Christopher's defined contribution scheme

The St Christopher's defined contribution scheme was set up in September 2001. In April 2010 the St Christopher's Personal Pension (2010) defined contribution scheme was established and members of the existing defined contribution scheme transferred to this new scheme with effect from January 2011. The contribution of the hospice was on average 21% for former members of the St Christopher's (1985) scheme and 5% for all other members, which represented a total charge for the year of £483k (2022: £431k) to the St Christopher's GPP (2010) defined contribution scheme.

c NHS Pension Scheme

Details of the scheme are provided in note 1.9. The contribution of the hospice was 14.38%, which was offset by a 29% subsidy on the contribution. This represented a net charge for the year of £571k (2022: £492k).

What we are going to do next

We're proud to launch our new strategy focusing on improving end of life care locally, nationally and internationally

St Christopher's reach covers a diverse population of 1.6 million people across the five south east London boroughs of Bromley, Croydon, Lambeth, Lewisham and Southwark.

We have made great strides and progress over the last year, and we are proud of the care and support we have given to our patients and those close to them in south east London. We have also taken our learning from these services and shared this with others, as part of education and research.

However, we know that not everyone currently has access to sufficient palliative and end of life care whether this be locally, nationally, or globally.

In addition, the need for palliative and end of life care is growing. For example, within the UK we have an ageing population, which is resulting in more patients needing palliative and end of life care, and also an increase in conditions such as dementia and frailty.

One key aspect of improving palliative and end of life care is to ensure that we challenge the inequalities on our doorstep. We know that access to services is neither equitable or equal. This is for many reasons including:

- lack of knowledge about what is available and how it can help
- marginalisation
- some not accessing palliative care early enough through fear or misunderstanding
- poor death literacy with many not considering or putting in place plans for the end of their life
- poor referral processes meaning many don't receive this support early enough or at all
- lack of resources within the health system.

Therefore, more needs to be done. As part of St Christopher's determination to address this we have updated our strategy for the next three years (2023-2026) and this focuses on the five areas below.

These are shown alongside our respective ambitions for each area.

1 Break down inequalities in palliative and end of life care

- Understand and respond to the needs of our diverse minority communities

We want everyone to know St Christopher's is there for them and that we offer a broad range of support

- Develop further age-attuned palliative care for younger people right through to older people
- Continue to develop clinical expertise to deliver high-class palliative and end of life care across our five boroughs, and to develop sustainable and improved relationships across the whole health economy
- Tackle the misconceptions about hospice care and support.

2 Equip the workforce in palliative and end of life care, for the future

- Develop pathways of learning to reflect career development opportunities
- Develop new ways of learning to reflect contemporary preferences and pressures
- Continue developing, and then to implement our people strategy.

3 Maintain global leadership in palliative and end of life care

- Share cutting-edge thinking clarifying contemporary end of life issues and testing solutions
- Share expertise generated through practice and research
- Influence and work in partnership.

4 Embed a sustainable business model

- Refresh our premises, while protecting the environment
- Ensure we have sufficient finances to match our ambitions
- Use resilient and secure technology that empowers people.

5 Tackle the ethical challenges of the day

- Tackle the sensitive topic of assisted dying
- Identify and highlight services under pressure and system wide gaps in provision
- Advocate for improvement in funding centrally to support core palliative and end of life care across communities.

A huge thank you to all our supporters

We are hugely grateful to the individuals, corporate sponsors, trusts and all those who have so kindly chosen to remember St Christopher's in their Wills. Thanks to you, we provided care and support to over 7,500 people last year. Thank you for making this possible.

5 Stone Buildings
5th Beckenham South Scout Group
Addington Court Golf Club
Addington Palace Golf Club
Amphlett Lissimore
Anand International Ltd
Anthony Gold Solicitors LLP
Arnold Clarke Community Fund
Baltic Exchange
Batchelors Solicitors
BBC Children in Need
BDB Pitmans
Beckenham United Reformed Church
BNY Mellon
Boodle Hatfield LLP
BOOHOO.COM PLC
Brilliant Solutions
Bromley Reform Synagogue
Bromley Well Innovation Fund
C Brewer & Sons Ltd Trust
Cabaret vs Cancer
Capital Generation Partners
Cecil Rosen Foundation
Charles Russell Speechlys
Chatterton Arms
Chelsfield Lakes Golf Club
Christ Church – Chislehurst
Christ Church Beckenham
Collyer Bristow LLP
Coney Hall Village WI
Croham Hurst Lodge 3968
Croydon Chantry Lodge No. 5063
Croydon Seventh-day Aventist Church
Currey & Co LLP
Day Lewis Plc - Head Office
Direct Line Group
Dixon Wilson
Dr Friedrich Stock Memorial Trust
Dulwich and Sydenham Hill Golf Club
Dulwich Champagne Reception Committee
Dulwich Friends of St Christopher's
EDF Trading
EIG Ecclesiastical
Evelyn Partners
Ewings & Co
Farrer & Co LLP
Fb Coales No 4 (Family)Trust
Forsters Charitable Fund
Forsters LLP
Future Directions Financial Services Ltd
Gower Associates
Grant Saw
Great Causes II
Grips Tyres & Wheels Ltd
Hospice Aid UK
Hospice UK
IdentityE2E
Irwin Mitchell
Jacob Charitable Trust
Jet's Charitable Trust
John Lamb Hill Oldridge
Knole Park Golf Club Ltd
Kristina Martin Charitable Trust
Lavender Lodge Of Instruction No. 6429
Linda Ruprai Memorial Event
Link Group
Linmara Trust
Lloyd Eist Foundation
London Catalyst
London Metal Exchange Benevolent Fund
Masonic Charitable Foundation
Masonic Province Of West Kent
Maurice Turnor Gardner LLP
Maybrey Precision Castings Ltd
Meerali Beedle
Michelmores LLP
Mishcon De Reya LLP
Mrs Maud Van Norden's Charitable Foundation

National Lottery Heritage Fund
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PA Media
Payne Hicks Beach LLP
Penguins Against Cancer
Petts Woodstock
Quartet Community Foundation
Ravensbourne Trefoil Guild
Rawlinson & Hunter
Ray Jones Roofing Ltd
Roseberys Auction House
Rotary Club Of Bromley
Rotary Club Of West Wickham
Rothschild & Co
Scannell Properties
Shirley and District Probus Club
Shirley Methodist Church
Sinclair Gibson LLP
Sir Walter St John Lodge
Sotheby's
St Augustine Church
St Bartholomew's Church
St Paul's Parish Church Crofton
STEP - Society of Trust & Estate Practitioners
Stonehage Fleming Family and Partners
Sundridge Park Golf Club Limited
Sydenham Catholic Club
Taylor Wessing
The Albert Hunt Trust
The Anthony Hart Charity Trust
The Ardwick Trust
The B & P Glasser Charitable Trust
The Barleycorn Trust
The Barnes Ouzounian Foundation
The Bricklayers Arms
The Burdett Trust for Nursing
The Charity of Sir Richard Whittington
The City Bridge Trust
The Douglas-Morris Charitable Trust
The Dulwich Almshouse Charity
The Elizabeth & Prince Zaiger Trust
The Elizabeth Frankland Moore and Star Foundation
The Eversley Charitable Trust
The February Foundation
The Florabella Trust
The G D Herbert Charitable Trust
The Goldsmiths' Company
The Gower Family Trust
The Green Hall Foundation
The Guild of Nineteen Lubricators
The Hayes (Kent) Trust
The Health Foundation
The Horner Family Charitable Fund
The Hospital Saturday Fund
The Hyne Trust
The Incorporated Church Institute (Upper Tooting) Ltd
The Irving Memorial Trust
The Jack Petchey Foundation
The John Horseman Trust
The Kate Whiteman Trust
The Kathleen Hannay Memorial Charity
The Kathleen Smith Foundation
The Light Fund
The Mageni Trust
The Margaret and David Walker Trust
The Michael and Anna Wix Charitable Trust
The Milton-Lloyd Charitable Trust
The Outback Hair Salon
The Thomas J. Horne Memorial Trust
The Timothy Franey Charitable Foundation
TK Maxx and Homesense Foundation
Touron Trust
Trustee Fire & Security
Waitrose - Green Street Green
Walder Wyss Ltd
Wandle Lodge No. L2699
Wedlake Bell
West Norwood Cemetery and Crematorium
Wilsons Solicitors LLP
Withers Worldwide
Women in Fellowship

Who's who at St Christopher's

Executive Team

Helen Simmons
Chief Executive[1]

Jan Noble
Director of Quality & Innovation

David Tullett Director of People & Organisational Development[3]

John Vickers
Director of Finance & Corporate Services

Amanda Mayo
Care Director

Dr Joy Ross
Lead Consultant in Palliative Care[2]

David White Director of Commercial Projects[4]

Trustees

Neil Goulden
Chair

Glenda Bonde
Trustee[5]

Ian Judson
Trustee

Catherine McDonald
Trustee

Eleanor Brown
Trustee/Vice Chair

Nick Diamond
Trustee

Daniel Kelly
Trustee

Satvinder Reyatt
Trustee[6]

Vivian Bazalgette
Trustee

Tony Hunter
Trustee

John King
Trustee

Deepti Townsend
Trustee

Executive Team and Trustees who were appointed after 1 April 2022

1 30 May 2022
2 1 November 2022
3 27 February 2023
4 1 April 2023
5 1 July 2023
6 1 July 2023

Trustees who resigned in 2022-23

7 21 July 2022
8 21 July 2022
9 31 October 2022
10 31 January 2023
11 21 July 2022

Trustees who resigned in 2022-23

Terrence Collis
Trustee[7]

Joanna Donaldson
Trustee[8]

Nita Rogers
Trustee[9]

Lila Thompson
Trustee[10]

Jane Walters
Trustee[11]

Patron

HRH Princess Alexandra

President

Lord Ian McColl

Vice Presidents

Rodney Bennion OBE
Dr Catherine Dent
Dr Tyrrell Evans
Dr Gillian Ford CB
Sheila Hancock OBE
Dame Pauline Harris DBE DL
Dr Sam Klagsbrun
John Rhodes
Barbara Richardson
Colin Russell
Ruth Saunders

Company Secretary

John Vickers

Registered office

51-59 Lawrie Park Road,
Sydenham, London SE26 6DZ

Bankers

HSBC Bank plc, 165 Fleet Street,
London EC4A 2DY

Independent auditor

Moore Kingston Smith LLP, 9 Appold Street,
London EC2A 2AP

Registration numbers

Registered charity number 210667
Registered company number 00681880
VAT registration number 523613961

StChristopher's
More than just a hospice

If you would like this information in a different format, such as audio tape, braille or large print, or in another language, please speak to the Communications Team on **020 8768 4500** or email **communications@stchristophers.org.uk**.

StChristopher's
More than just a hospice

Sydenham site
51-59 Lawrie Park Road, Sydenham, London SE26 6DZ

Orpington site
Caritas House, Tregony Road, Orpington BR6 9XA

Telephone **020 8768 4500**
Email **info@stchristophers.org.uk**
www.stchristophers.org.uk
stchrishospice

Registered charity 210667 registered with the Fundraising Regulator
Registered company number 00681880
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ST CHRISTOPHERS HOSPICE

England & Wales - Charity number 210667

Accounts

Annual report and accounts 2021-22

St Christopher's Hospice
annual report and accounts 2021-22
www.stchristophers.org.uk

StChristopher's
More than just a hospice

About St Christopher's

At St Christopher's Hospice, we have a vision of a world in which all dying people, and those close to them, have access to care and support whenever and wherever they need it.

Our goal is to help people live well until they die and support those affected by the death of a friend or relative. Each person is unique, and we tailor our care to meet social, emotional, and spiritual needs as well as manage people's physical symptoms. As our founder, Dame Cicely Saunders said: "You matter because you are you, and you matter until the last moment of your life."

Everyone should have access to the best care at the end of their lives. We aim to provide this through a mix of expert clinical care, support at home, research and education, and strategic partnerships with other organisations with the same aspiration. We are proud that last year we provided care and support to nearly 5,000 patients, more than 2,000 carers, and nearly 2,000 bereaved people across south east London.

It costs approximately £23m to run St Christopher's Hospice each year. We receive £8m of core funding from the NHS in a normal year. We need to raise the other £15 million to continue to care for people when it matters most. This would not be possible without the support of our local communities. Thank you, from us all, for your support.

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One of our clinical nurse specialists and her patient chatting at our Orpington site

High-quality care in a difficult climate

Our clinical care staff work diligently to keep patients and families safe in uncertain times

Welcome to the Annual Report and Accounts of St Christopher's Hospice (referred to as 'St Christopher's' in this document).

2021-22 continued to be a challenging year for society and St Christopher's with the emergence of the Omicron COVID-19 variant, continued pressures on the wider health system, increased financial pressures as the cost of living continued to rise, and shortages in healthcare workers across the UK.

Despite this, we have provided care and support for more than 8,000 people, delivering high quality palliative care and actively supporting people whose friends and relatives have died. Through supporting growing numbers of people, we have relieved the burden on the wider healthcare system so more people are able to access the care and support they need. Despite this, we have continued to innovate and develop our model of care to meet people's changing needs.

However, there is more to be done to make sure that even more people in south east London, nationally and globally have equal access to high-quality end of life care.

We were therefore pleased to formally launch our new state-of-the-art education centre, St Christopher's Centre for Awareness and Response to End of Life (CARE) during the year. The Centre explores living with dying and loss and provides training for those who need to provide care for people who are grieving or dying, whatever their professional discipline or personal situation. Since its opening in September 2021 by our Royal Patron, HRH Princess Alexandra, we have successfully hosted our first face-to-face conferences since 2019 and expanded the range of training on offer and our research capability.

We said a sad farewell to Heather Richardson and Shaun O'Leary in their roles as Joint Chief Executives during the year (and Heather's role as Chief Executive in the interim period after Shaun's departure). Aside from the delivery of St Christopher's CARE, and leading the organisation through two years of a pandemic, Heather and Shaun have enhanced the quality of all we do as an organisation, and they have improved its sustainability. We are delighted that Heather is staying with St Christopher's to lead Education, Research and End of Life Policy at St Christopher's CARE.

I'd like to extend a warm welcome to Helen Simmons, our new Chief Executive who joined us in June 2022. I speak for us all, the Executive Team and the Board of Trustees, when I say we are very much looking forward to working with Helen and building upon our success to make St Christopher's the best it can be for everyone who uses our services, as well as for our staff and volunteers.

And finally, whether you're in one of the communities we serve, a donor or a retail customer, a fundraiser or a care delivery partner, or one of our dedicated team of staff and volunteers: I'd like to thank you for your continued support of St Christopher's in what has been a challenging year for many people. We could not have got through the last year without your valued contribution.

Neil Goulden
Chair of the Board of Trustees

What we do with your money

It takes a lot of skilled and multi-disciplined people to run St Christopher's

It is thanks to the incredible generosity of our supporters that we are here. Your kindness means we are able to continue to provide vital services for people in south east London and beyond.

Where our money comes from

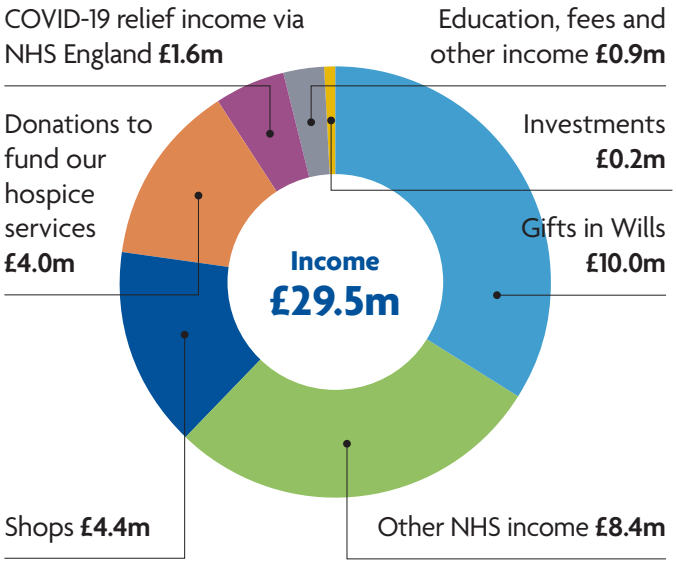
An incredible 66% of our income is from people in our community, donated through fundraising activities, leaving gifts in Wills or buying goods in our shops. Our income this year included an unusually high level of legacies income of £10.0m. We have set aside a portion of this income to invest in our future charitable objectives, and for us to do this sustainably. We are so very grateful for the money you donate, and we are careful to spend and invest it wisely in ways that will best serve the people who need our support.

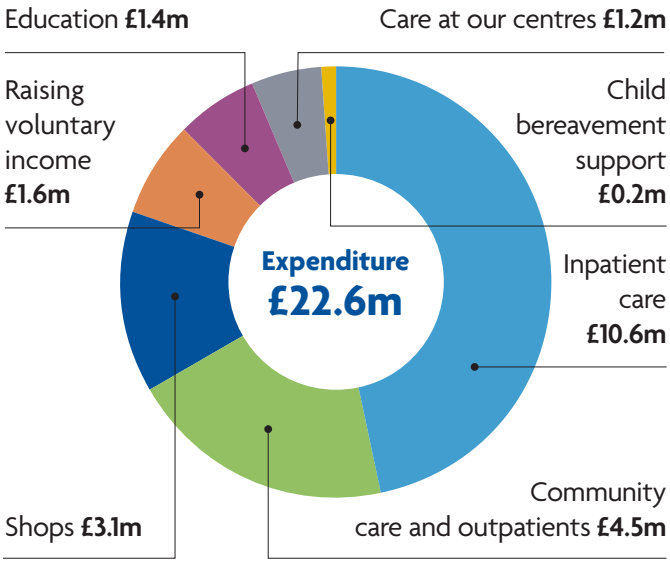
With the emergence of the COVID-19 Omicron variant, we received £1.6m COVID-19 relief money from NHS England (6% of our income). This reflects the additional capacity and support we provided to the wider and stretched health system over the last year. We're very thankful for both this money and the income we receive from the local (NHS) Clinical Commissioning Group (£8.4m), whose funding represented around 28% of our revenue.

The astounding £29.5m raised this year enabled us to continue providing care to people who live in the boroughs we serve – Bromley, Croydon, Lewisham, Lambeth and Southwark – as well as shaping care for people across the globe through education, research and innovation.

Where our money goes

It cost £22.6m to run St Christopher's in 2021-22. Here's a breakdown of how we spent the money you gave us. Our full financial review starts on page 31.





What people say about us

St Christopher's is committed to continually improving and developing the support and services we offer.

To do this effectively, we regularly measure and report on the impact we have both to the health of people in our care as well as their experience. We have been investing in learning about and using patient and other user reported outcome measures over the last few years. Our Quality Account for 2021-22 sets out in detail the efforts we made to improve our quality wherever we can during the year.

In December 2021, we asked people using our services for feedback, helping us understand what we are doing well and where we need to improve. The results were overwhelmingly positive.

- **92%** of patients said they were very satisfied or satisfied with our care
- **95%** of carers were very satisfied or satisfied with our care
- **93%** of patients and carers felt we had listened to their needs always or most of the time
- **97%** of people who used our service felt they were treated with respect and helped to feel dignified always or most of the time.

"I felt so out of my depth at 26 with a dual caring role looking after my mum but knowing I could pick up the phone literally whenever was so valuable"

"Without your support with pain management, I do not know where I'd be today. Staff have made living liveable again"

A patient and her nurse on our inpatient unit at our Sydenham site

Our vision, values and ambitions

Shaped by our overall vision and values, 2021-22 was the second year of our three-year strategy. Despite the ongoing challenges, we've continued to progress against our key ambitions and supporting themes.

- We've carried on adapting our services and providing high-quality care and support to **help people to live well and achieve the goals that are most important to them**
- We've strived for continuous improvement through **research, pilots and collaboration with others**
- We've remained focused on **breaking down barriers and improving death literacy** by encouraging discussions about end of life preparation and care
- We've **opened the doors to our new education centre** St Christopher's CARE for face-to-face training and collaboration
- We've **increased community-based support (including care at home and in care homes)** and done things differently to serve our patients, carers and families better
- We've kept people engaged, inspired and informed as we continue to **address inequalities**
- We've **supported bereaved people** with online services, unique events and new partnerships.

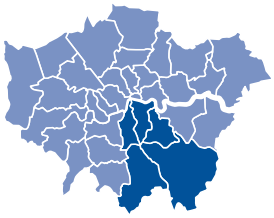
Our **values** are:

- **Pioneering and bold**
- **Of and for the community**
- **Expert**
- **Empowering and compassionate**
- **One team working together**
- **Stronger through partnerships**

At the centre of these ambitions remains our core vision, informing every decision we make and our values which shape the behaviours of everyone who acts on behalf of St Christopher's.

Our **vision** is a world in which all dying people and those close to them have access to care and support when and wherever they need it. Through our key themes of **community**, **inclusivity** and **sustainability**, our **ambitions** are:

Adapt our care services to meet people's changing needs



...to improve people's experience of end of life locally

Invest in hospice-led innovation related to death, dying and loss

...to strengthen hospices' contribution nationally

Increase public and professional confidence and knowledge about end of life

...to transform end of life care globally

We cared for 4,675 patients

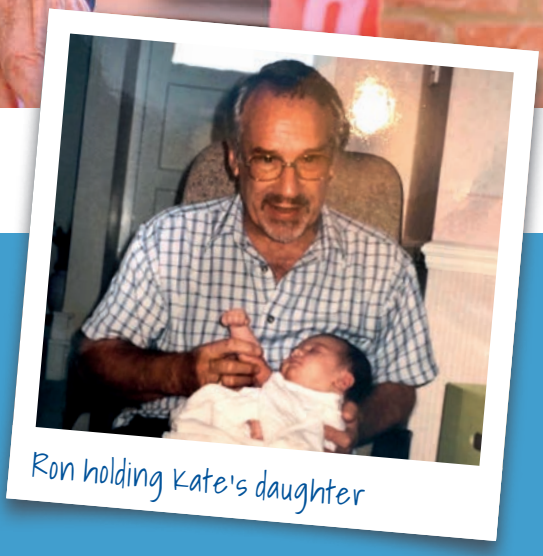
We had 586 inpatient admissions

We made 13,124 home visits

Hospice pioneer and psychiatrist Dr Colin Murray Parkes was an honoured guest at the grand opening of our new education centre

Kate's story

When Kate's dad Ron became ill in 2015, he moved to Orpington to be closer to Kate and the family. St Christopher's became his local hospice offering care and support for them all. Though his family visited the hospice, Ron's wish was to stay at home – a desire the hospice was able to make happen by supporting his family.



Ron holding Kate's daughter

"If we could have hand-picked the team, we couldn't have picked better people. Not only were they good with my dad but they were good with us as a family," says Kate. "We wouldn't have known what he was entitled to or where to get access to carers, equipment and these sorts of things.

"Everything was completed by St Christopher's and kind of fell into place," she continues. "It's not until you look back and think it just kind of happened seamlessly because they just did everything."

"I particularly remember that the St Christopher's team who came out to us on a regular basis always seemed to know the right thing to say," she adds. "They always had the right answers for difficult questions."

How we've met our strategic ambitions in 2021-22

Adapt our care services to meet people's changing needs **to improve people's experience of end of life locally**

Working differently to help people live well until they die

- We implemented e-prescribing to make administering complex and high-risk medicines more efficient and more reliable, mitigating the risk of patient harm from drug related incidents. This replaced the more manual process that was in place previously. By reporting on our clinical database, we regularly audit the prescription and administration of medicines, lowering risk and increasing efficiency.
- We revised our care model to improve the continuity of our care for the people we are supporting and to ensure they get the best and most appropriate care when they need it. We did this in two ways. Firstly, by improving our referral process to make sure we are effectively capturing all information needed so we can get the right support in place quickly for people who need us. Secondly, we brought together our Outpatient and Community caseload, making sure everyone has a designated member of staff. This reduces internal transfers and guarantees people are seen in the right place at the right time by people who are familiar with their history. We are committed to providing easier access to advice and support; clarifying what we can offer; and delivering more personalised services for patients and community partners such as GPs and hospitals.
- Our Choose Home service (which was launched in October 2020) offers comprehensive care for people with a prognosis of two to three weeks left to live so they can remain in their own home, which is their wish. This significantly reduces the burden on unpaid carers and people who live alone and ensures that more people receive the help and guidance they need at difficult times. We expanded this service in 2021-22 and provided care via Choose Home for 334 patients during the year.
- We continue to invest in the development of our heart failure services with dedicated support in Bromley as part of our core offer.

Gladys' story

Gladys is 40 and a mother to two young children. She was referred to St Christopher's a year ago after being diagnosed with Motor Neurone Disease and has been supported at home by the community team and stayed at the hospice on our wards.

"When I was referred to St Christopher's, Nigel (one of the consultant nurses) came to see me at home. Nigel and the team kept checking on me and the following month I started coming into the hospice. I've met some lovely people. Doctors, nurses, social workers – I can't even count all of them! I'm so, so happy to have come across St Christopher's.

"When I turned 40 they even threw me a birthday party! It's so nice for people to organise something for you and they treated me like a celebrity. It made me feel really, really good. I said to myself: for me to see that number of people and kind of love even if I do die my spirit will be happy as I've seen people show me love. That's what I need and I got what I need. There were decorations, a DJ, a photographer, really nice cake and food. They've done a lot for me here. They've never let me down."

Gladys during a stay at the hospice

Two of our Choose Home Team prepare to leave for a home visit

Continuity despite ongoing COVID-19 challenges

While the country emerged from lockdown at the start of 2021-22, and was forced to navigate a new Omicron variant of COVID-19 a few months later, we worked hard to ensure we kept everyone informed, safe, and we continued to deliver individualised care during this time of uncertainty by:

- Reviewing latest guidance and applying this to St Christopher's to keep patients, visitors, volunteers, shoppers and staff safe
- Continuing to welcome visitors to spend time with family members and friends receiving care at our hospice site, recognising how important this precious time together is for people, but doing so within a safe set of parameters to keep risk to a minimum
- Delivering uninterrupted service for people we are supporting in the community, with the added option of virtual consultations
- Regular on-site testing for staff and volunteers to identify asymptomatic infections and reduce the likelihood of COVID-19 spreading
- Preparation for compulsory vaccination status for our patient facing staff (the requirement for this having since been removed).

Working in collaboration to improve experience

We've continued our strong relationship with the NHS, supporting the healthcare system to overcome winter pressures made more difficult by Omicron, and by testing new programmes.

We also continue to partner with hospices in the local area, notably Greenwich & Bexley Community Hospice, on initiatives such as Staff Health and Wellbeing Month (May 2021) and our ongoing joint education programme known as the Hospice Education Learning Partnership (HELP). HELP provides training and support for healthcare professionals across the entirety of south east London helping to ensure more people receive the best support at the end of life – no matter where they are being cared for.

Rehabilitation pilot

Our rehabilitation team launched a new pilot during the year to support care homes to embed a rehabilitative approach in their practice to better support residents who have lived through the COVID-19 pandemic. Funded by Bromley CCG, the team worked with eight care homes across Bromley that had experienced adverse effects from the pandemic, supporting 370 residents and approximately 390 care staff.

The project provided tools for rehabilitative palliative care, including training rehabilitation champions in each home and developing mini exercise programmes, supporting staff to embed a person-centred approach to encompass the psychological, emotional and spiritual needs of the residents they are supporting.

Feedback about the pilot was that it was "very helpful in raising the confidence of our staff and carers" and, "the residents who come to the activities space now ask about when the class is happening and look forward to it."

Michael enjoys our food and gym

Michael's story

Michael is 62 and has been receiving support from the hospice after being diagnosed with mouth cancer. Michael shared with us what he looks forward to most about his visits to the hospice.

"What do I look forward to? Food! I look forward to eating something tasty. When I was in hospital I was offered pulverised foods, which is okay but it's a bit middle of the road. The food I'm offered here is far superior. They make everything from scratch and ingredients seem to be better than what I've been offered elsewhere.

"For me, being a foodie, I've always looked forward to meals. I enjoy food. Since I've had mouth cancer that's a big part of my enjoyment that's just gone. Until it's taken away you don't realise what a big part food plays in the quality of your life. The stuff that puts a smile on your face. As the cancer has progressed my ability to chew things has been compromised as I cannot use my tongue to manoeuvre the food.

"Since I've been unable to eat properly I've lost a couple of stones or more in a short period of time. Since I've been here I've put on about four kilos in just over two weeks through having protein drinks and milkshakes. They've got time for you as well so you can explain what's worked and what hasn't worked for you.

"What's important to me today is quality of life. I want to enjoy myself and have a laugh. I enjoy going to the gym at St Christopher's and having a bit of a laugh with David (one of the rehabilitation team). I spend about half hour to 45 mins in the gym when I come in."

Invest in hospice-led innovation related to death, dying and loss **to strengthen hospices' contribution nationally**

Hosting research projects

St Christopher's has hosted several research projects, some of which were developed into posters and presented at the Hospice UK conference in November 2021. These included:

- A quality improvement project for the administration of subcutaneous fluids (SCFs) in the community setting which included identifying patients suitable for SCF administration in the home/care home setting.
- Exploring a personhood-based approach to caring for people living and dying with dementia – this created a programme of interactive training activities for staff, clinicians, non-clinicians, volunteers, fundraisers and trustees – encouraging the principle that dementia is everybody's business.
- The Cascade Project: promoting age-attuned palliative care – highlighting that the palliative care needs of older people with frailty are poorly met and exploring how this can be improved.

In addition, Dr Sarah Combes, Research Fellow in Palliative Care and Ageing and Associate Clinical Nurse Specialist St Christopher's, contributed to papers on several palliative care topics, including:

- A study of the barriers and enablers to engaging frail elders with advance care planning
- The use of the behavioural change wheel to increase engagement with advance care planning in cognitively-able frail elders
- Common elements of service delivery models that optimise quality of life and health service use among older people with advanced progressive conditions.

These and many more research projects and paper submissions in 2021-22 showcased the breadth of St Christopher's impact across south east London and beyond.

We had 3,217 outpatient appointments

We undertook 2,707 video consultations

We referred 1,092 people for rehabilitation

Alleviating winter pressures in care homes

Following the secondment of senior doctors and nurses to the Bromley GP Practice to support care home patients during the first winter wave of COVID-19 (December 2020 to March 2021), we developed a programme to increase our support to those in care homes ahead of the next winter wave of COVID-19. The St Christopher's team was seconded to care homes in Bromley from December 2021 to March 2022 to:

- keep patients in their care home, where possible
- deliver face-to-face visits for quicker patient triage
- offer clear guidance and easily accessible support for care home staff
- improve communication with families and carers.

Teach with CARE

Teach with CARE was launched in 2022. A four-day in-person and online course for Health and Social Care Professionals that supports individuals in developing their teaching skills.

Key topics include considering different perspectives of adult learning, planning, presentation skills, and evaluating learner feedback. The course received excellent feedback from delegates who reported improving their teaching practices.

One learner commented, "I've now incorporated a variety of techniques into my teaching that I wouldn't have been brave enough to try prior to the course."

St Christopher's CARE provides learners with an open and inspiring place to learn together

Dr Libby Sallnow presenting on the *Report of the Lancet Commission on the Value of Death*

Breaking down barriers and spreading the word

We have generated **high-profile media coverage**, increasing our profile and raising awareness of our vital work.

Co-authored and promoted by Dr Libby Sallnow, Honorary Senior Lecturer at St Christopher's Hospice, the ***Report of the Lancet Commission on the Value of Death: bringing death back into life*** resulted in global press features in the health and social care sectors and mainstream media including BBC Radio 4, *The Times* and *The Daily Telegraph*. This coverage enabled both professional and public audiences to learn more about palliative care and for their perceptions of death, dying and loss to be challenged.

We teamed up with like-minded organisations, charities, and support providers such as WeCare and Octavia to **improve the quality of care and housing at end of life**. Together, we launched a suite of resources endorsed by the Mayor of Bromley. We also gave evidence to an All-Party Parliamentary Group about the impact of unsuitable housing for people at end of life. This work enabled us to share our expertise within a policymaking sphere.

We also began **a three-year campaign focusing on carers** to establish ourselves as a leading voice within the carer sector. We've been exploring different ways of supporting and promoting carers' rights and improving carers lived experiences through events, media, case studies, workshops, and creative social media campaigns and taking advantage of the new educational opportunities available through St Christopher's CARE.

Our **social media channels have increased followers and engagement**, including launching a new St Christopher's shops account, which significantly encouraged people back into our shops after lockdown. Since last year, we've seen a 10% rise in visitors to our website, our highest number of visitors per year yet.

The launch of St Christopher's CARE welcomed 600 people over three days

Increase public and professional confidence and knowledge about end of life **to transform end of life care globally**

Welcoming people to St Christopher's CARE

We were excited to hold the official opening for our new £6.7m Centre for Awareness and Response to End of Life (CARE) in September 2021, which enabled us to welcome and engage with new visitors both in person and virtually.

This launch was spread over three days, welcoming 600 people and embedding our vision for St Christopher's CARE to be a place for clinicians and carers, from Sydenham to Singapore, to explore living with dying and loss, whether online or in person.

On the first day, we welcomed our Patron, HRH Princess Alexandra, who unveiled a plaque and a sculpture that featured all of the benefactors' names who made this £6.7m building possible.

The second launch day allowed health and social care professionals to engage in clinical skills masterclasses and to sample the breadth of topics our curriculum covers.

Our local south east London community was the focus of the third day. More than 250 people took the opportunity to come and connect, and to explore death and dying, via a series of interactive stalls and events.

Since its opening we have hosted training sessions and courses to upskill staff, educate community partners and support people globally to become champions and experts in palliative and end of life care.

A return to conferences

After nearly two years of almost exclusively online learning events, it was especially rewarding to welcome 150 people in person to our conferences held in October and November 2021. **Frailty and End of Life: It's Time to Act** in October was the first time we'd hosted a major conference on this increasingly important issue. It attracted health and social care professionals, home carers, people with lived experience of frailty, and community leaders committed to changing the experience of people living and dying with frailty. Speakers from the British Geriatrics Society, Age UK and Centre for Ageing Better, underlined the inequalities in the current system and what needs to change for people living and dying with frailty.

Our **Facing Death Creatively** conference was the fifth year we've brought together arts and music therapists alongside palliative and bereavement practitioners to share their successes and challenges in using creative arts to help people deal with death and dying. Former Children's Laureate, Michael Rosen, shared his experience of how occupational therapy and poetry helped him recover from a life-threatening experience with COVID-19.

Among many positive pieces of feedback, one particularly stood out: "This was the best CPD session I have attended in a long time".

Sharing our story

Since early 2021, thanks to the National Lottery Heritage Fund, we've been recording interviews, gathering artefacts and materials to build **the story of our hospice**, from its creation in 1967 right through to the present day. We will be showcasing this work in a major oral history exhibition later in 2022, portraying the real life experiences of patients and families and illustrating the hospice's role in advancing care.

Extending access to our work remains a priority. Funded by Women in Fellowship, we've developed an app that gives users the ability to take a journey through **our history and a tour of our site**. One app user from the other side of the globe said: "When I was opening [the app], I truly felt like I was in St Christopher's. I opened it slowly and quietly so as not to disturb the patients. I now feel like I know St Christopher's without travelling there and really know what palliative care is."

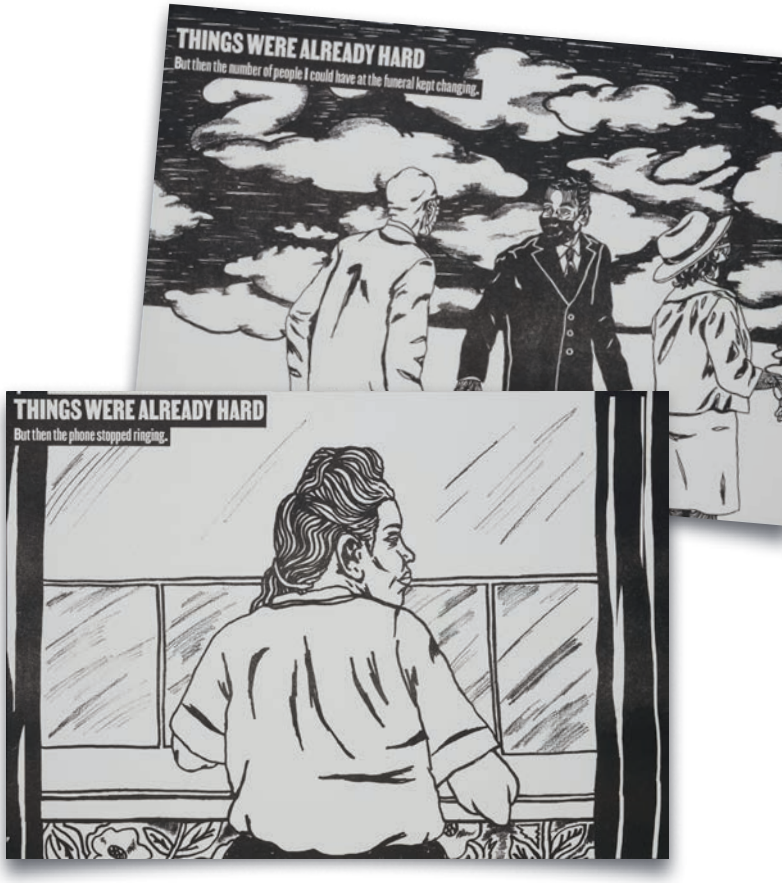
Finding new ways to discuss death and grief

With generous support from Arts Council England, we've been working on the **Telling Stories** project, which will culminate in an exhibition at St Christopher's CARE. Works created for this project will eventually join the permanent collection at the Museum of London.

Former Children's Laureate, Michael Rosen, captivated the audience at our Facing Death Creatively Conference

The pandemic substantially affected people's experience of grief and bereavement. We asked 10 people to share their experiences and produce a collective story for this project. Artist Olivia Twist created six illustrations (two shown right) based on the themes, which, with testimony and photographic portraits, will be displayed in St Christopher's CARE. We hope these two exhibitions will bring visitors comfort and help them understand they are not alone in their challenging experiences of grief.

In partnership with Croydon CCG, we embarked on the **Croydon Death Literacy** project working with groups who don't usually access our services directly or who are generally under-served by the hospice community in areas of deprivation. Our multi-disciplinary team hosted training sessions, created safe spaces for conversations, and arranged hospice visits to get people more comfortable with the idea of loss through reflection and collaboration. We will use the project (which received tremendous support from the local community) as a template to roll out to all of the five boroughs we serve.



Our friendly Community Action Team works to support and empower those in the communities we serve

St Christopher's launched three new networks for nurses this year

Launching three new networks for nurses

In recognition of the hugely significant role nurses play in end of life care, we launched three new networks for nurses at different stages of their careers.

Following our successful launch of the first new model of palliative care in 30 years, the **Lantern Model** has been developed into a programme for all nurses working in end of life care. The one-year membership programme will start in April 2022, and this weaves together inspiration, learning and networking for nurses interested in making a real difference.

Palliative Discovery is a new online platform created by and for clinical nurse specialists (CNSs). It addresses the educational, wellbeing and career development needs of this critical workforce. The aim is to make Palliative Discovery a vehicle for remodelling the role of the palliative care CNS, raising the profile of CNSs and boosting resilience.

Just as important as supporting experienced members of the workforce is nurturing those nurses starting their careers. Our **Community of Practice for Newly Qualified Nurses** provides opportunities for shared learning, continuous development, and pastoral support. Nurses up to three years post qualification can join this community for free, thanks to the generosity of the family and friends of one of our patients, retired nurse Siân Evans.

Recognition for the Palliative Care Fellowship

We were pleased to be told that The Palliative Care Fellowship which is run by St Christopher's in partnership with the Institute of Palliative Medicine in Kerala, won the Leadership Award from the European Association for Palliative Care and the European Palliative Care Academy.

The award recognised the success of bringing palliative care leaders from low and middle-income countries to learn together and develop care at a grassroots level in their locality. March 2022 saw the fourth running of The Fellowship.

The ongoing success of the Fellowship was also recognised as an exemplar project in the *Report of the Lancet Commission on the Value of Death*: bringing death back into life, published in January 2022. Co-author, Dr Libby Sallnow, Honorary Senior Lecturer at St Christopher's, highlighted the accessibility and impact of this global programme.

Christian supporting one of his patients in Cameroon

Christian finds our support invaluable

Christian's story

Palliative care is a new concept in Cameroon and Christian, who had been a nurse in the first hospital palliative care unit in the Cameroon capital Yaoundé, left his job with a bigger goal in mind two years ago. Christian's ambitious plan is to spread a palliative care culture across the country, both through education and in practice in hospitals and out in the community.

Education forms a big part of Christian's model, running workshops for hospital professionals as well as regular training sessions at three nurse training schools. "My aim is to raise awareness, to tell them what palliative care is and how essential it is for people with life-threatening conditions. I want my team to become like the St Christopher's of Cameroon."

When Christian started planning his freelance palliative care model, he felt he needed 'some guidance' on the journey and joined an online one day conference for Pioneering Nurses run by St Christopher's. Christian adds: "I couldn't believe it. It was exactly what I was looking for. There were 100 nurses from all over the world sharing their experience. It was amazing."

Subsequently, Christian joined the St Christopher's Palliative Care Fellowship, a course designed to address practical issues in organising palliative care services, particularly in low- and middle-income countries, with a problem-solving approach.

Christian says: "It is absolutely wonderful. I had no idea it would be so exciting and so practical and interactive. I now have many tools to develop and to help me to realise my dream. The amazing thing is that while all the nurses on the Fellowship are experiencing a different reality in their country, we all share the same fundamental problems, like the taboo around speaking about death and dying. It is wonderful to see so many people trying to improve access to palliative care."

"The Fellowship is so good because everything we are learning is adaptive. In all of the group sessions we are looking at how we can make things work in the reality we face in our countries. It is not generic education, rather it is about adapting the resources to suit your own situation. I will be trying my best to take as much of the knowledge as possible and transferring that into my competency."

"I now feel like, in St Christopher's, I have a mentor to help me realise my dream of developing the palliative care history in my own country," he adds.

How we've achieved our results

Community Partnering with those around us

Continuing to raise funds, despite challenges

Some of our face-to-face fundraising events had to be cancelled, as we worked to COVID-19 public health guidelines, or because of concerns from our supporters about mixing in public.

We were therefore grateful that members of our community were able to raise much-needed funds via alternative means, for example, by online events, or by regular giving via our lottery. We continue to deliver care when people need it most, thanks to the dedication of our community fundraisers.

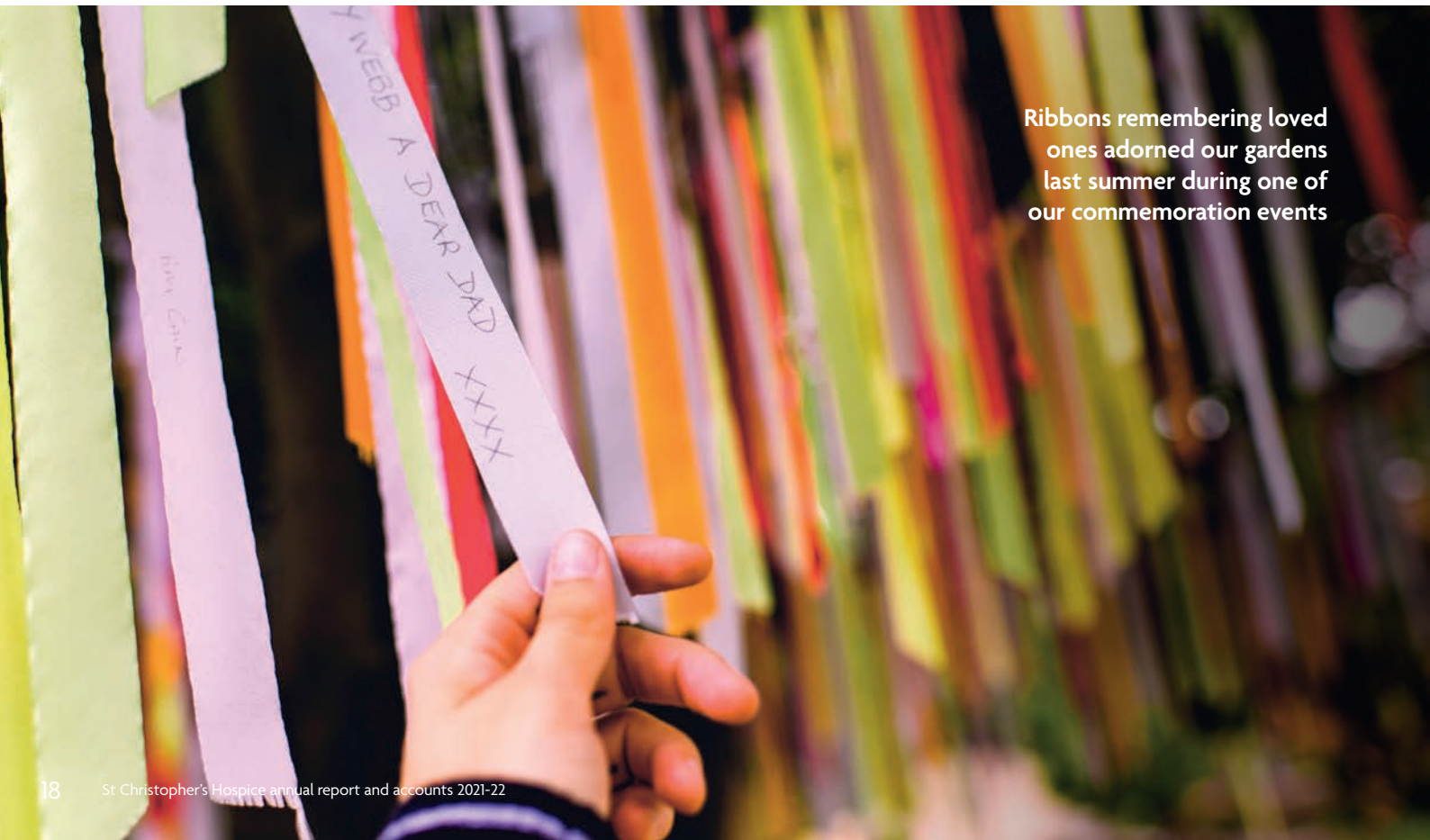
Our online commemoration events also received an outpouring of support. A total of 839 people viewed **Remembering with Ribbons** in the summer and **Remembering with St Christopher's** in December online, raising £85k between them.

Community-based support

Across the hospice, we offer formal support across a variety of areas to help patients, carers, friends, and families navigate everything from pain management to grief. One of our ambitions in the coming years is to upskill those in our communities to offer more informal peer to peer and community-based support.

One of the projects brought to life last year was our carers development work. Led by our Community Action Team, we involved 40 carers in co-creating a programme of activities, support groups and peer-based mentoring to help carers feel heard.

We're now developing plans to offer educational courses for carers and to re-launch our Coach for Carers initiative.



Ribbons remembering loved ones adorned our gardens last summer during one of our commemoration events

1,758 people had formal bereavement support

2,039 carers received support

Jackie has connected with others

Jackie's story

When Jackie Bryan's husband, Barry, died 13 months ago she was referred to St Christopher's for bereavement support. Since then Jackie has had telephone counselling and regularly attends our Bereavement Help Points and Healthy Walks to connect with others going also living with grief.

"I got very, very low as we were also having to isolate [due to the pandemic]. I was out walking one day and went into Age UK who gave me the information about St Christopher's. I had telephone counselling for an hour a week and I didn't stop talking the whole time. They seem to have this way of getting you to talk about your husband and your life together. I think she knew almost as much about Barry as I did by the end as I just used to tell her absolutely everything about him.

"I also go on the Healthy Walks every week. Everyone is really nice and friendly and it gives you time to talk about anything and just tell each other about ourselves. One of the people I've met – his circumstances are exactly the same as mine. He lost his wife about the same time I lost Barry and we're both going through exactly the same sort of thing.

"It's made a big difference to meet people in similar circumstances to me. Before I had that feeling that I'm the only person it's happened to. Now I know that people are also going through the same thing as me and they know how you feel and what you're going though. They've put me at ease."

Exploring how to best support carers is an ongoing focus for St Christopher's

Staff wellbeing is a high priority at St Christopher's

Inclusivity
Encouraging everyone to feel and be involved

Health and wellbeing

This year we launched our Health and Wellbeing Strategy to promote and provide a diverse range of accessible support, training and information to support our colleagues. The strategy is based on Six Petals of Wellness, recognising that a person's whole self comes to work:

- **Emotional and mental wellbeing** To thrive, not just strive
- **Physical health** Commit to being fit
- **Connections and community** Together, we are stronger
- **Financial wellbeing** Work to live
- **Purpose and growth** Our vision for your future
- **Healthy work-life balance** Work hard to play hard.

We partnered with Greenwich & Bexley Community Hospice to run our first ever Health and Wellbeing Month, and funded by a grant from Mental Health and Wellbeing Support to South East London Hospitals, we ran online and face-to-face sessions on a variety of wellbeing topics. It was well received, with 373 attendees taking part. We also created calm, safe places for staff who need some time alone.

One colleague who attended several sessions said: "It was nice to be given the opportunity to focus on our health and wellbeing and to see the organisation understand the importance [of this] and [genuinely] care for their staff."

Since March 2020, we've introduced a flexible working framework, encouraging managers to assess individual needs against the team and organisation's needs to create a supportive and inclusive work schedule.

Taking equality seriously

With a predominantly female workforce, we understand the importance of reviewing how women are paid for their work compared to male colleagues.

We're proud that our gender pay gap has decreased again, with latest reported figures showing women paid 1.4% more than men on average (compared to the prior the year when they were paid 7.1% lower than men), and we continue our work in this area.

To reduce discrimination and bias in the recruitment process, we have an anonymous system for all job applications.

We were pleased to be able to open our shops with measures in place to keep people safe

Sustainability
Remaining resilient and ensuring our future

Bringing people back on site

This year saw the return of many face-to-face outpatient appointments, as well as the return of face-to-face support from our patient and family support volunteers.

Roles that welcome patients into our Anniversary Centre, or ones that support ward staff with small requests and companionship so that they can focus on patient care, are pivotal to the daily running of the hospice. We redeveloped some of these roles when we couldn't have as many people in the hospice, ensuring they were tailored to meet current and future patient needs.

Following the winter 2020 lockdown, we celebrated our 'big spring back' on 12 April 2021, when our 24 shops returned to full trading. The sales from this opening week broke previous records and we were delighted that income from our shops was more than £4.4 million this year.

Thank you to our dedicated supporters who donated goods and continued to shop with us.

Over 500,000 customers visited our shops

Our shops sold 1.2m items to the public

We achieved £4.4m in shop sales

The cost to run our services last year was £22.6m

The amount we have to fundraise every year is £15m

Welcoming a special guest to our Goldsmith's dinner

St Christopher's was delighted to welcome back almost 200 private client lawyers to the annual legal dinner held at The Goldsmiths' Company in the Great Hall in the City of London last November, following the enforced cancellation of the dinner in 2020 due to COVID-19. This year, the Goldsmiths' dinner was even more special than normal. Not only was it a particular pleasure to catch up with the many loyal attendees who have become friends of the hospice over the years and to make the acquaintance of new up and coming lawyers and partners but also we were honoured to hold the event in the presence of HRH Princess Alexandra.

As always we were very grateful to our sponsors (thanked in this review) and our generous donors who together raised £70,000 on the evening in support of the work of St Christopher's.

Keeping people engaged and inspired

Given some of the external events we had to contend with, sustaining and motivating a workforce has brought additional challenges. With the requirement for COVID-19 vaccinations for patient-facing health and social care professionals (since dropped), and a turbulent recruitment market, we've had to work harder to maintain a resilient workforce.

We've continued to invest in our workforce's personal and professional development, including peer-to-peer and expert-led training. Over the last year, we've offered workshops and training to staff and volunteers, including:

- **Sensitive conversations** Giving volunteers more confidence when approaching delicate end of life conversations with patients and their families
- **Empowering managers** Providing managers with the tools to inspire and lead a team
- **Consultant Development Programme Investing in Leadership** Equipping managers with the skills they need to be capable leaders of the future
- **Quality training days and ongoing learning panels** Giving staff a voice in our continued improvement planning and ensuring compliance
- **Volunteer Voices** Involving volunteers when planning new projects and activities to ensure we provide a high-quality experience to all our volunteers.

HRH Princess Alexandra pictured with former Joint Chief Executive, Shaun O'Leary and an attendee at our Goldsmith's dinner

23,285 people donated money to us

Including community groups and organisations

7,103 people raised £514,002 through our hospice lottery

Trying new things

With many restrictions on in person events still in place, we moved some of our fundraising efforts online. From 9-19 September 2021, we launched an online mystery auction where hundreds of original, postcard-sized pieces of art went up for auction on eBay. Only when lots of postcards were sold was the identity of each artist revealed, which added a real buzz to the auction. Several world-renowned artists and celebrities took part in creating a mini masterpiece, as well as local school children, patrons of St Christopher's and many more contributors. Those who bid on a piece of art could have been the next owner of an original piece by actor Joanna Lumley, world-renowned artist Humphrey Ocean, or even comedian and St Christopher's ambassador Tom Allen! Along with the eBay auction site, the postcards could be seen in person at an exhibition at St Christopher's CARE. 242 postcards were auctioned, raising over £20k, with £2,200 being the highest price paid for a single piece.

The effects of COVID-19 on shopper behaviour also gave us a good excuse to think a little differently about our charity shop offer. On 30 October 2021, we unveiled our first KiDS Store in East Dulwich, filled with pre-loved clothes, toys, and books for children. Aside from making sure that these children's goods find another home, and support the environment, our Dulwich shop has increased its takings by 20% since the transformation.

Our financial results

We received an unusually large amount of income during the year (£10.0m) from people who had left money to us in their Wills (legacies income).

We are enormously appreciative of people who choose to remember us in our Wills. Legacies income is one of our most significant income streams, and we rely on this to be able to carry out the work that we do. High legacies income is the main reason that our financial results show a net income of £6.9m for the year (before movements in pension and investment funds).

We have ringfenced this money to expand our charitable impact and to support our long-term sustainability. We are particularly concerned by external factors such as high inflation and pressures on the wider health system, as well as uncertainty around future income streams. Please see the financial review section, starting on page 31, for more detail on our finances.

Comedian Tom Allen was one of the many famous faces to donate a piece of artwork to our Mystery Masterpieces auction

The view across the bright and welcoming atrium at St Christopher's CARE

Structure, governance and management

St Christopher's Hospice was incorporated as a company limited by guarantee on 21 January 1961 and is governed by its Articles of Association. St Christopher's Hospice is registered with the Charity Commission in England and Wales.

St Christopher's Hospice has a wholly owned subsidiary, St Christopher's (Trading) Ltd, company number 02604519. The registered office of St Christopher's Hospice and its subsidiary is 51-59 Lawrie Park Road, Sydenham, London SE26 6DZ.

How we are governed

The Board, consisting of the Trustees named at the back of this report, has ultimate responsibility for the proper and effective management of St Christopher's Hospice. The Board is responsible for all major strategic decisions, for monitoring the organisation's performance, and to ensure that it complies with its Articles of Association and applicable laws and regulations.

Neil Goulden is the Chair of Trustees. Neil Goulden joined us as Chair of Trustees on 1 April 2021 following our previous chair, Morgan Jones, who retired on 31 March 2021. The Vice Chair is Eleanor Brown. Jane Walters was Vice Chair up to her retirement on 21 July 2022.

The Board delegates day-to-day management and decision making to the Executive Team, which was led by the Joint Chief Executives (JCEs) up to 31 December 2021, and thereafter the Chief Executive. The Executive Team is required to act in furtherance of the Charity's strategy. The Board holds the Chief Executive and Executive Team to account for its leadership of the organisation.

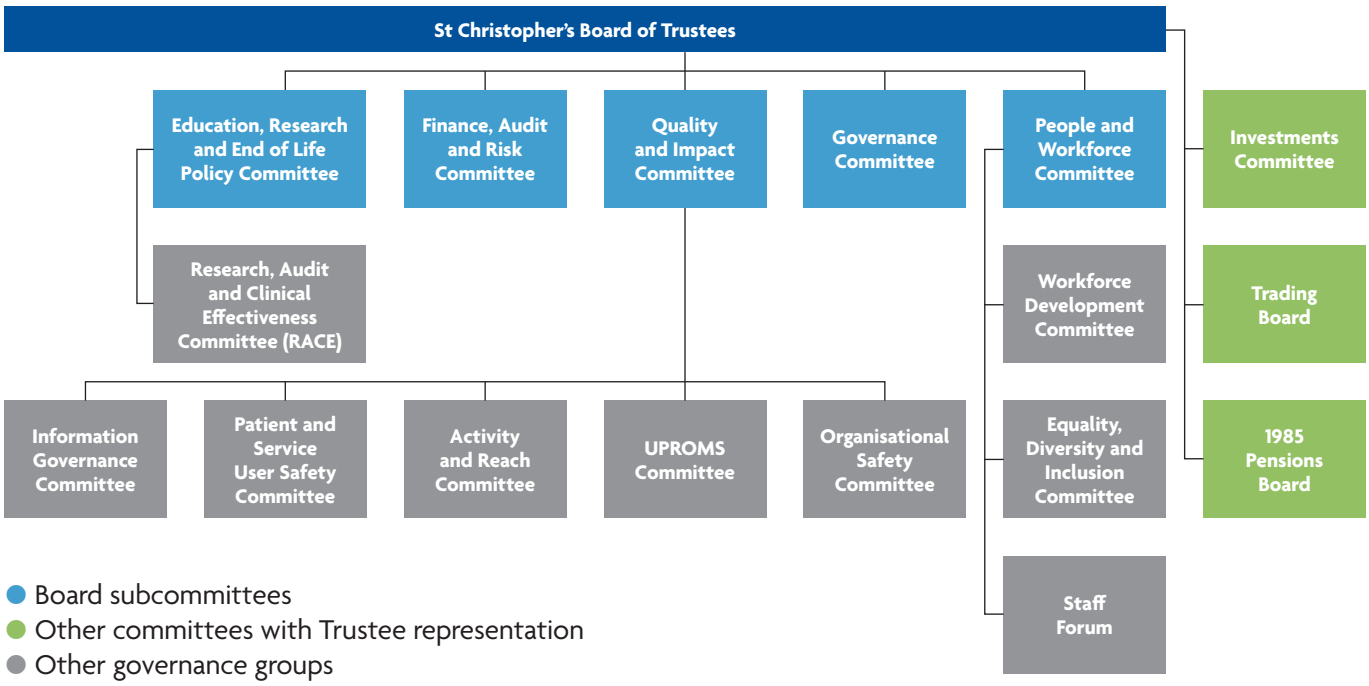
In September 2021 the Board of Trustees reviewed our governance structure in order to:

- improve the overall effectiveness of the Board
- provide greater assurance to the Board
- improve opportunities for Trustee engagement on a broader range of the Charity's activities.

The new structure is below.

The Board has Trustee representation on the following five Board sub-committees: Governance, People & Workforce, Quality & Impact, Finance, Audit & Risk and Education, Research & End of Life Policy.

Trustee representation is also in place on the following Boards and committees: Investment Committee, St Christopher's Hospice Trading Board and 1985 Pension Scheme Board.



Committee terms of reference define responsibilities and delegated responsibilities and are reviewed annually. The Board may delegate any of its powers to one of its committees. The committees report to the Board after each meeting.

Trustees' duty to promote the success of the Charity – Section 172 statement

The Trustees are the directors of St Christopher's Hospice and have a duty to promote the success of the Charity and, in doing so, are required by section 172(1) of the Companies Act 2006 to have regard to various specific factors, including:

- the likely consequences of decisions in the long term
- the interests of employees
- the need to foster the Charity's relationships with third-party stakeholders which, in the case of St Christopher's Hospice, includes dying people and those close to them, the local community, the NHS and our supporters
- the impact of the Charity's operations on the community and the environment
- the desirability of the Charity maintaining a reputation for high standards of business conduct.

The Charity's strategy takes into account the likely consequence of any decision in the long term. The Trustees have previously approved a plan for strategic ambitions for 2020-23. An update on progress against this plan is set out on pages 8-23.

The Board meets at least quarterly throughout the year where it assesses progress against the strategy, identifies areas for focus for the following year and receives updates on the Charity's performance and plans. Its committees also review plans with regard to the particular activities overseen by the committee concerned. The Board typically also has an annual away day for strategic planning.

The Board obtains assurance that attention is given to the factors set out in section 172 when promoting the success of the Charity, by monitoring that the Executive Team and the wider organisation are delivering the agreed strategy, and are complying with specific policies.

Engagement with the Charity's main stakeholder groups are as set out on pages 8-23. The Executive Team regularly reports to the Board on key stakeholder relations and engagement activities, current issues and relevant feedback received from interaction with stakeholders.

The Trustees also follow a formal process to regularly manage and review risks that are faced by the Charity, set out on page 29.

The Charity ensures that it maintains a reputation for high standards of business conduct by having in place a range of policies and processes that promote corporate responsibility and ethical behaviour. Areas covered include: fundraising (our fundraising practices are discussed below); gifts, hospitality and anti-bribery; conflicts of interest; safeguarding, bullying and harassment; and whistleblowing. All these policies are reviewed periodically. We also have dedicated leads for safeguarding and whistleblowing within the Executive Team and the Board of Trustees.

Recruitment and appointment of new Trustees

The Board is made up of individuals who have a diverse, varied and balanced cross section of life, skills and experience. When embarking on the recruitment process, the Trustee vacancy is advertised on the St Christopher's website, in various publications and on social media. Prospective candidates are invited to apply outlining their relevance for the role. After the closing date, applicants are shortlisted against the person specification and potential candidates are invited to interview. The interviews are usually carried out by the Chair, Vice Chair and a subset of other Trustees. Successful candidates are then formally appointed by a resolution of the Board.

Trustees are appointed by resolution of the Board for a term of up to three years. Upon expiry, they shall be eligible for re-appointment for a further term or terms of up to three years. All Trustees sign a code of conduct on appointment. The Trustees, Chair and Vice Chair

carry out their responsibilities in line with a documented description of their role.

New Trustees undertake an induction process designed to equip them with the information and understanding they need to become effective and valuable members of the Board as quickly as possible. The induction process involves the following:

- An induction pack containing key information about St Christopher's; the governance structure; the roles and responsibilities of Trustees; and the organisational work of the Board of Trustees and its committees
- A Trustee mentor for at least the first year
- An induction programme which enables new Trustees to gain a good understanding of the operations of the organisation
- An informal review meeting with the Chair of the Board at the end of a Trustee's first year.

All Trustees give their time voluntarily and receive no benefit from the Charity. Out-of-pocket expenses incurred by the Trustees in the course of carrying out the role can be reimbursed in accordance with the organisation's expenses policy. No expenses were claimed from the Charity this financial year. All Trustees were required to complete and sign an annual declaration of interests and any relevant gifts received.

Public benefit

The Board is aware of the Charity Commission's guidance in relation to public benefit. The report indicates how our activities have delivered public benefit.

Fundraising disclosure

St Christopher's Hospice has voluntarily subscribed to the Fundraising Regulator and is committed to the Fundraising Promise and adherence to the Code of Fundraising Practice set by the Fundraising Regulator.

We encourage the fundraising service providers we engage with to also sign up to the code. Our fundraising effort is led by Compton Fundraising Consultants who are members of the Association of Fundraising Consultants (AFC) promoting best practice and mission to set the very highest standards of fundraising. As a member of AFC, Compton Fundraising Consultants have signed the AFC code of practice together with the Fundraising Regulator's code of Practice. Compton Fundraising Consultants work very closely with the in-house Fundraising Team on a day-to-day basis and set and agree the annual fundraising targets with the St Christopher's Executive Team. Performance against targets are monitored and formally presented monthly to the Chief Executive and the Director of Finance & Corporate Services.

In addition, the Fundraising Team engages professional third-party suppliers to help us raise funds particularly where we do not have the expertise in-house. We have safeguards in place when working with suppliers so that we protect our supporters and the reputation of our charity, including Lottery Fundraising Services and Engage and Connect, the companies which support our lottery. We ensure all these agents observe the highest standards in terms of fundraising practice and monitor their performance through the use of mystery shopping and random checks with donors.

St Christopher's Hospice is a member of the Hospice Income Generation Network and many of our fundraisers are members of the Chartered Institute of Fundraising.

Our website outlines our complaints policy for the public. We received five fundraising complaints in 2021-22 (2020-21: three fundraising complaints). Our policy is to respond to all complaints within 10 days. Serious complaints are escalated to our Executive Team and Trustees to consider lessons learnt. We report to the Fundraising Regulator and Gambling Commission on the totality of our complaints.

We have policies and procedures in place to safeguard the vulnerable and we ensure our fundraisers and third-party suppliers adhere to these policies. We are also signed up to the Fundraising Preference Service to enable individuals to opt out from receiving fundraising communications from us. We received no requests through this service last year

Pay policy for senior staff

The pay of the Chief Executive is set by the Governance Committee with any changes authorised by the Chair

of the Board of Trustees. The pay for the remainder of the Executive Team is agreed by the Governance Committee in consultation with the Chief Executive. The pay for other senior staff is agreed by the Chief Executive in consultation with the Director of People & Organisational Development.

Disabled people

St Christopher's Hospice is a 'Disability Confident' Employer. This means that we undertake full and fair consideration of all applications for employment including those made by disabled persons. We offer a guaranteed interview to those applicants who qualify under the 'Disability Confident' scheme and we are also committed to supporting both disabled people back into the workplace as well as supporting those people who become disabled whilst employed by the organisation.

We operate partnerships with a number of external organisations, including the Wolfson Neurorehabilitation Centre, which provides further support and advice to disabled people working with us.

Equality and diversity

St Christopher's Hospice has been signed up to the 'Mindful Employer Charter' since August 2016 and demonstrates a strong commitment to supporting individuals with mental health illnesses and to actively seek to alleviate causes of workplace stress, where possible. During the past year, 12 members of staff became internal Mental Health First Aiders to strengthen the support available to the workforce, as and when it was needed.

The organisation has continued to carefully monitor and report on its workforce ethnicity rates, which has remained at around 21% throughout 2021-22, despite implementing a number of new initiatives during 2020-2021 that were designed to increase representation from Black, Asian and Minority Ethnic (BAME) groups. Further work to improve the organisation's diversity levels will continue, through the introduction of a new and dedicated Equality, Diversity & Inclusion Strategy, currently being developed as part of an overarching People & Organisational Development Strategy, expected to be launched in 2022-2023.

Gender pay gap

The gender pay gap information shows any difference in the average earnings between all men and all women employed across the organisation on 5 April each year. This information is reported annually on the national Gender Pay Gap website. The April 2021 data identified that of our 469 staff (excluding bank workers) 82% were women and 18% were men.

Compared to previous years, we were, for the first time, able to report that on 5 April 2021, men were no longer earning higher salaries than women in the organisation. We reported that the gender pay gap had reduced from +7.1% to -1.4%, which highlighted that, on that date, women were, on average, earning slightly higher pay than men.

We believe that this is likely to be attributable to the closure of our Personal Care Service which took place in September 2020 and which resulted in the loss of a number of lower-paid job roles, which were predominantly occupied by women. We also saw an increase in the number of women working in higher-paid roles across the organisation as well as an increase in the number of men employed in lower-paid roles, all of which contributed to the overall rebalancing of our gender pay gap.

Employee information

St Christopher's is committed to providing information to employees on matters of concern to them and consulting with employees and/or their representatives, on a regular basis (e.g. via our Staff Forum) and in relation to any proposed changes to their terms and conditions of service or ways of working, so that their views can be heard and considered ahead of making any decisions that may affect them.

Streamlined energy and carbon reporting (SECR)

In our second year of SECR, our UK greenhouse gas (GHG) emissions and energy use for the year were as set out below.

UK GHG emissions and energy use data for the period 1 April to 31 March

	2021-22	2020-21
Energy consumption used to calculate emissions (kWh)	**2,918,826**	**2,676,264**
Energy consumption breakdown (kWh): • Gas • Electricity • Transport fuel		
Direct GHG emissions: gas consumption	**270.56**	**267.56**
Indirect energy emissions: purchased electricity	**229.71**	**293.47**
Other indirect emissions: employee mileage while undertaking activities for St Christopher's Hospice	**100.93**	**69.40**
Total gross emissions in metric tonnes CO2e	**601.20**	**630.43**
Intensity ratio metric tonnes CO2e per staff FTE	**1.73**	**1.68**

Quantification and reporting methodology

We have followed the 2019 HM Government Environmental Reporting Guidelines. We have also used the GHG Reporting Protocol – Corporate Standard and have used the 2020 UK Government's Conversion Factors for Company Reporting.

Intensity measurement

The chosen intensity measurement ratio is total gross emissions in metric tonnes per staff FTE.

Measures taken to improve energy efficiency

Total energy use increased during 2021-22 as we had more staff working on site and our shops were open throughout the year from 12 April (compared to the prior year when we had a greater proportion of staff working from home, and our shops were closed for seven months due to the pandemic).

Our hospice building has solar panels on its roof. In addition, our new building, St Christophers CARE has been designed and built using the latest methods in energy efficiency. For example, this has resulted in St Christopher's CARE having:

- less than 50% the boiler capacity of the previous Education building, even though its footprint is more than 25% larger than of the previous Education building
- natural cooling in the majority of the new building
- LED lighting throughout the new building.

Measures in progress to improve our energy efficiency further in future include:

- Installing LED lighting throughout the rest of our premises
- Transitioning our car fleet over a period a time to electric vehicles.

Principal risks and uncertainties

The Trustees, in conjunction with the Executive Team, follow a formal process to manage the risks faced by the hospice.

This process focuses on six potential areas of risk – strategic, financial, services, premises, workforce and information. Risks under each of these headings are assessed as to the severity of the risk to the organisation and accompanied with strategies to eliminate or mitigate the risk.

The risk management process is conducted at least annually and comprises the following:

1. Identification and review of key risks facing the organisation, accompanied by consideration of strategies/plans to be employed to mitigate risks by the Executive Team
2. Review of the updated risk register and the mitigation plans by the Finance, Audit & Risk Committee and the Board of Trustees
3. Review and agreement of the risk register and mitigation plans by the Finance, Audit & Risk Committee and the Board of Trustees
4. Receipt of reports regarding progress and success of mitigation plans by the Finance, Audit & Risk Committee and the Board of Trustees

This process has confirmed that key risks facing the organisation pertain to:

- Not being able to recruit/retain staff, with competitive salaries, at a sufficient skill level, from a challenging recruitment market
- Shortfalls in fundraising and trading income because of a 'cost of living' crisis and people prioritising what money they have elsewhere
- Non-compliance with regulatory requirements, including a data breach
- Cyber-attacks such as corruption via computer viruses and other malware, in an ever-changing cyber security environment.

Actions intended to mitigate these risks include:

- Listening to and addressing staff feedback and an external review of salaries to confirm competitiveness
- Ongoing reviews of our trading and fundraising strategies
- Several cross-organisational groups report into our Quality & Governance Committee. These groups cover areas such as information governance and health and safety
- Putting remaining measures in place to achieve the IT Security accreditation, Cyber Essentials Plus.

COVID-19

The Trustees have considered the ongoing impact of COVID-19 on St Christopher's Hospice and its subsidiary, St Christopher's (Trading) Ltd.

COVID-19 has brought additional pressures on the wider health system and is expected to continue to do so. As a provider of health services, we will continue to support the wider health system and to provide capacity for it, where it is within our charitable remit.

We deliver our services with best practice COVID-19 health guidelines. This is with the support of our clinical teams and managed through our internal governance processes. This includes procedures to minimise infection risk and to identify infections.

The most significant financial risk related to COVID-19 is that the shops operated by St Christopher's (Trading) Ltd have to close for an interim period to comply with public health guidelines. To date, St Christopher's (Trading) Ltd has received COVID-19 relief funding when there have been lockdowns. If further shops closures have to take place over the next year, without receipt of further relief funding, St Christopher's Hospice has agreed to support St Christopher's (Trading) Ltd, and the Trustees consider that it has sufficient reserves to be able to do this.

Ukraine

The Trustees have also considered the ongoing impact of the conflict in Ukraine.

There are uncertainties as to how the conflict will pan out and therefore the impact of this on St Christopher's Hospice and its subsidiary, St Christopher's (Trading) Ltd.

We consider the most likely impact of the conflict on St Christopher's to be:

- The conflict puts increased pressure on the UK economy (and cost inflation) and this increases costs and limits the money that our donors and the NHS can give to St Christopher's
- There are pressures on the supply of core goods (such as petrol, food and other consumables) which has an impact on the delivery of our services.

While this would reduce the net income that we receive, Trustees consider that it has sufficient reserves to mitigate the financial impact of this in the short term. We also have procedures in place to reduce the impact of core goods not being available at short notice.

Financial review

These financial statements include the results of St Christopher's Hospice and its trading subsidiary, St Christopher's (Trading) Ltd for the year ended 31 March 2022.

The charitable activities of St Christopher's Hospice are identified under five main headings in the Statement of Financial Activities:

- **Inpatient care**
- **Community care/outpatients**
- **Education and training**
- **Care at our centres**
- **Candle Child Bereavement Service.**

With the exception of education and training, the services provided to a patient could include one or more of these activities during the course of their care. Therefore, the cost of individual patient care may span across one or more of the charitable activities identified.

In addition to these charitable activities, St Christopher's Hospice has a retail company. The activity of this company is shown on the Statement of Financial Activities as income/costs of trading companies.

For the year ended 31 March 2022, at an operational level, St Christopher's Hospice recorded net income, before other recognised gains and losses, of £6,935k (2021: £4,470k net income).

Overall, St Christopher's Hospice generated a net increase in funds of £7,182k (2021: a net increase in funds of £6,464k). This was after recognising other unrealised gains and losses as follows:

1 **Unrealised gain from the investment portfolio of £352k (2021: unrealised gain of £2,162k) and a realised gain from the portfolio of £198k (2021: realised gain £132k)**

Our investment portfolio managed by Cazenove Capital Management increased in value from £11,130k in March 2021 to £13,720k in March 2022. Aside from other gains to the portfolio this increase is due to the investment of £2,000k of cash into the portfolio. We have not drawn down on our investment portfolio during 2021-22, and there are no plans to draw down on it during 2022-23.

Our bank deposits increased from £3,051k in March 2021 to £5,288k in March 2022.

Taking our investment portfolio and bank deposits together, our overall investments increased from £14,181k in March 2021 to £19,008k in March 2022.

2 **An actuarial loss from the FRS 102 valuation of the St Christopher's Hospice (1985) Pension Scheme of £303k (2021: loss £300k)**

The FRS 102 actuarial loss is a result of four factors:

- An actuarial gain on the scheme liabilities of £454k (2021: loss of £1,412k) arising from a change in the demographic and financial assumptions.
- An actuarial gain on the scheme investments portfolio of £286k (2021: gain of £1,314k)
- Experience losses arising on the plan liabilities of £121k (2021: gains of £111k)
- A loss of £922k to reflect the amount of the pension surplus that is not recoverable (2021: loss of £313k).

Income

Total income received in 2021-22 increased by 7.9% to £29,487k (2021: £27,337k). Details of how this has arisen are shown below.

Donations and gifts

Income from donations and gifts for the year was £4,037k, slightly lower than the prior year (2021: £4,242k). It continued to be a difficult climate to fundraise, largely due to COVID-19 restrictions or their after-affect making it harder for community fundraising and to hold public events.

Despite this we were overwhelmed by the generosity of our local community who were able to fundraise in innovative ways, and to donate this incredible amount during the year.

Legacies

Legacies income of £9,958k was exceptionally high this year, and this follows a high year prior to that (2021: £6,104k). Our 2021-22 outcome was driven by our highest ever individual legacy, of approx. £3.6m. We have ringfenced a portion of this money to expand

our charitable impact and to support our long term sustainability, particularly for future years when legacy income may not be so substantial. See note 16 to the accounts.

NHS contracts

Income from the NHS of £10,036k is significantly less than the prior year (2021: £12,607k). This year's NHS income included £1,653k from NHS England distributed via Hospice UK as part of COVID-19 relief monies following the emergence of the Omicron variant and winter pressures. This is lower than COVID-19 relief money received the previous year (2021: £3,459k) resulting in an overall drop in NHS income.

Income and performance of trading subsidiaries

The core activity of St Christopher's (Trading) Ltd is the operation of shops (23 shops as at March 2022), whose purpose is to raise money for the Charity to spend on charitable activities.

Our shops had to close for seven months during 2020-21 to abide by public health guidelines related to COVID-19. Positively, our shops were able to remain open for the whole of 2021-22, aside from the tail end of a lockdown up to 12 April 2021.

This resulted in revenue from St Christopher's (Trading) Ltd increasing by 63% to £4,436k (2021: £2,716k), and a net contribution to the Charity of £1,311k (2021: a loss of £84k). We are pleased to see that trade has returned to the levels seen prior to the pandemic.

St Christopher's Hospice had a second wholly owned subsidiary, St Christopher's Personal Care Services Limited (company number 08872082), at the start of the financial year. Revenue from St Christopher's Personal Care Services Limited was £525k in 2020-21. It delivered a net loss of £222k in 2020-21 and was dissolved on 1 March 2022 following a decision to cease trading during 2020-21. All activity had been completed by 31 March 2021, meaning there were no financial transactions for St Christopher's Personal Care Services Limited during 2021-22.

Investment income

Investment income for the year of £153k was slightly higher than last year (2021: £143k). Our investment portfolio focuses on capital growth, rather than to be income generating.

Education, fees and other income

Education, fees and other income was £867k, which was lower than last year (2021: £1,000k) as our 2020-21 figures included furlough income.

Expenditure

Total expenditure in 2021-22 was £22,552k, slightly lower than the prior year's figure (£22,867k). The reduction in costs from not operating St Christopher's Personal Care Services Limited (£747k) has been offset by year-on-year salary increases.

The costs of raising voluntary income was £1,641k, which was 7% higher than the previous year (2021: £1,536k).

Staff costs

During the year, the total average FTE headcount decreased to 348 (2021: 376) following the closure of St Christopher's Personal Care Services Limited. Staff costs account for 77% of the organisation's total costs (2021: 78%). Further details of staff costs and staffing levels can be found in note 7 to the accounts.

Costs of generating funds

The cost of generating funds includes fundraising, publicity expenditure and the expenses of the trading companies.

Reserves policy and going concern

St Christopher's Hospice holds reserves to improve both the financial security and the operational flexibility of the hospice. The Trustees believe that the level of reserves held should be sufficient to cover the risks to which the Charity is exposed, including safeguarding against volatility of key income streams.

The Trustees have taken a risk-based approach to assess the level of free reserves required by the Charity. They

have also reviewed this alongside the level needed to operate effectively. Considering both aspects, the Trustees consider that St Christopher's Hospice should aim to hold free reserves equivalent to 9-12 months of its operating expenditure, currently equivalent to £16.9m-£22.6m. The Charity considers free reserves to be the total unrestricted Group reserves, less designated funds. The designated funds held by the Charity are listed in the notes to the accounts. They include a fund to manage the variability of year on year legacy income, a fund to ringfence money for anticipated future financial challenges resulting from COVID-19, a fund to expand our charitable impact and to support our long-term sustainability and funds for capital commitments and the net book value of fixed assets. On this basis, free reserves as of 31 March 2022 were £21,543k (2021: £20,693k), equivalent to 11.5 months of operating expenditure (2021: 10.9 months of operating expenditure).

The Trustees have reviewed the financial position of the Charity and its subsidiaries, its forecast cash flows, and its liquidity position for the foreseeable future. This includes the impact of risks as described in the principal risks and uncertainties section above. The Trustees believe that the Charity has adequate resources to continue operational existence for the foreseeable future. As a result, they continue to adopt the going concern basis of accounting in preparing the Annual Report and Accounts.

Investment policy

The Board of Trustees has approved an investment policy and strategy, which is supervised by the Investment Committee.

The primary objective of the investment policy is to provide financial security and stability for the operation of St Christopher's Hospice. The investment policy also recognises that the organisation is exposed to the risk of a sharp fall in its income due to the variability of legacy income and donations, and uncertainty of funds from the NHS. To reflect this position, the Investment Committee with Cazenove Capital Management continues to invest in a varied portfolio, in accordance with an asset allocation approved by the Investment Committee.

Investment income has increased to £153k (2021: £143k), of which £9k (2021: £9k) is interest from cash deposits, and £144k (2021: £134k) is dividend and interest income from the Cazenove Capital Management charity portfolio.

The Investment Policy states that, among other things, Trustees will not invest directly in a company if it carries out activities contrary to the Charity's purposes and, therefore, against its interests and those of its beneficiaries.

The Investment Committee encourages responsible investment. They are committed to appointing investment managers involved in applying Environment, Social and Governance (ESG) criteria across the investment process. Our existing investment manager, Cazenove Capital Management, has demonstrated that they use these criteria.

Statement of Board's responsibilities

The Board members (directors for the purposes of Company law) who served during the year, and the period for which they were in office, are detailed on page 62.

The Board is responsible for preparing the Report of the Board of Trustees and the financial statements in accordance with applicable law and regulations.

Company law requires the Board to prepare financial statements for each financial year. Under that law, the Board has elected to prepare the financial statements in accordance with United Kingdom Generally Accepted Accounting Practice (United Kingdom Accounting Standards and applicable law). Under company law the Board must not approve the financial statements unless it is satisfied that they give a true and fair view of the state of affairs of the Charity and of the result of the Group for that period. In preparing these financial statements, the Board is required to:

- select suitable accounting policies and then apply them consistently
- make judgments and accounting estimates that are reasonable and prudent

- follow applicable accounting standards
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the group will continue in business.

The Board is responsible for keeping adequate accounting records which are sufficient to show and explain the Group and Charity's transactions and disclose with reasonable accuracy at any time the financial position of the group and enable it to ensure that the financial statements comply with the Companies Act 2006. It is also responsible for safeguarding the assets of the Group and the Charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

Statement as to disclosure of information to auditors

The Trustees have taken all necessary steps to make themselves aware of any relevant audit information and to establish that the auditors are aware of that information.

As far as the Trustees are aware, there is no relevant audit information that the charity's auditors are unaware of.

Signed on behalf of The Board of Trustees

Neil Goulden
Chair of the Board of Trustees
St Christopher's Hospice, 51-59 Lawrie Park Road,
London SE26 6DZ
21 July 2022

Independent auditor's report to the Members and Trustees of St Christopher's Hospice

Opinion

We have audited the financial statements of St Christopher's Hospice (the 'charity') for the year ended 31 March 2022, which comprise the Consolidated Statement of Financial Activities, the Consolidated and Charity Balance Sheets, the Consolidated Statement of Cash Flows and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including 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 charity and the group's affairs as of 31 March 2022 and of the group's 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 according to the ethical requirements 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 trustees' responsibilities 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 Strategic Report and Trustees' Report, other than the financial statements and our auditor's report thereon. The trustees are responsible for the other information. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

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

We have nothing to report in this regard.

Opinions on other matters prescribed by the Companies Act 2006

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

- the information given in the Trustees' Report, which includes the Strategic Report and the Directors'

Report prepared for the purposes of company law, for the financial year for which the financial statements are prepared is consistent with the financial statements; and

- the Strategic Report and the Directors' Report included within the Trustees' Report has been prepared in accordance with applicable legal requirements.

Matters on which we are required to report by exception

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

Responsibilities of Trustees

As explained more fully in the trustees' responsibilities statement set out on page 33, the trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the trustees are responsible for assessing the 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 charity 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 the financial statements.

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

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.

Based on our understanding of the charity and its industry, we considered that non-compliance with the following laws and regulations might have a material effect on the financial statements: employment regulation, health and safety regulation, anti-money laundering regulation, non-compliance with implementation of government support schemes relating to COVID-19.

To help us identify instances of non-compliance with these laws and regulations, and in identifying and assessing the risks of material misstatement in respect to non-compliance, our procedures included, but were not limited to:

- Inquiring of management and, where appropriate, those charged with governance, as to whether the charity is in compliance with laws and regulations, and discussing their policies and procedures regarding compliance with laws and regulations;

- Inspecting correspondence, if any, with relevant licensing or regulatory authorities;
- Communicating identified laws and regulations to the engagement team and remaining alert to any indications of non-compliance throughout our audit; and
- Considering the risk of acts by the charity which were contrary to applicable laws and regulations, including fraud.

We also considered those laws and regulations that have a direct effect on the preparation of the financial statements, such as tax legislation, pension legislation, the Companies Act 2006, the Charities Act 2011 and the Charities Statement of Recommended Practice.

In addition, we evaluated the trustees' and management's incentives and opportunities for fraudulent manipulation of the financial statements, including the risk of management override of controls, and determined that the principal risks related to posting manual journal entries to manipulate financial performance, management bias through judgements and assumptions in significant accounting estimates, in particular in relation to accrued income, income recognition (which we pinpointed to the cut-off assertion), and significant one-off or unusual transactions.

Our audit procedures in relation to fraud included but were not limited to:

- Making enquiries of the trustees and management on whether they had knowledge of any actual, suspected or alleged fraud;
- Gaining an understanding of the internal controls established to mitigate risks related to fraud;
- Discussing amongst the engagement team the risks of fraud; and
- Addressing the risks of fraud through management override of controls by performing journal entry testing.

There are inherent limitations in the audit procedures described above and the primary responsibility for the prevention and detection of irregularities including fraud rests with management. As with any audit, there remained a risk of non-detection of irregularities, as these may involve collusion, forgery, intentional omissions, misrepresentations or the override of internal controls.

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

Use of the audit report

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

Nicola Wakefield
Senior Statutory Auditor
for and on behalf of Mazars LLP
Chartered Accountants and Statutory Auditor
6 Sutton Plaza, Sutton Court Road, Sutton, Surrey SM1 4FS
13 September 2022

Consolidated statement of financial activities for the year ended 31 March 2022

	Notes	Unrestricted funds £'000	Restricted funds £'000	2022 £'000	2021 £'000
Income from					
Donations and gifts		3,484	553	4,037	4,242
Legacies		9,793	165	9,958	6,104
Charitable activities					
NHS funding for patient care	**2**	8,383	1,653	10,036	12,607
Education, fees and other income	**3**	867	–	867	1,000
Other trading activities					
Income of trading companies	**4**	4,436	–	4,436	3,241
Investment income		153	–	153	143
Total income		27,116	2,371	29,487	27,337
Expenditure on					
Raising voluntary income		1,641	–	1,641	1,536
Trading companies	**4**	3,125	–	3,125	3,547
		4,766	–	4,766	5,083
Charitable activities					
Inpatient care		9,375	1,189	10,564	10,886
Community care/outpatients		3,772	725	4,497	4,314
Education and training		902	461	1,363	1,258
Care at our centres		1,169	–	1,169	1,146
Candle Child Bereavement Service		150	43	193	180
		15,368	2,418	17,786	17,784
Total expenditure	**5**	20,134	2,418	22,552	22,867
Net income/(expenditure) before transfers	**6**	6,982	(47)	6,935	4,470
Transfer between funds (mostly relate to capital programmes)		111	(111)	–	–
Net income/(expenditure) before other recognised gains and losses		7,093	(158)	6,935	4,470
Other recognised gains/(losses)					
Actuarial (losses) on defined benefit pension scheme	**19**	(303)	–	(303)	(300)
Gains on investments: realised	**10**	198	–	198	132
Gains on investments: unrealised	**10**	352	–	352	2,162
Net movement in funds		7,340	(158)	7,182	6,464
Total funds at 1 April 2021	**15, 16, 17**	34,274	3,113	37,387	30,923
Total funds at 31 March 2022	**15, 16, 17**	41,614	2,955	44,569	37,387

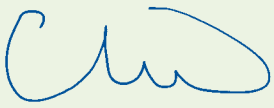
All recognised gains and losses are included in the consolidated statement of financial activities. St Christopher's Hospice and St Christopher's (Trading) Ltd transactions are derived from continuing activities. An analysis of the results by company is shown in Note 4. The allocation between unrestricted and restricted funds for 2021 is shown in Note 18.

Consolidated balance sheet as at 31 March 2022

	Notes	2022 £'000	2021 £'000
Fixed assets			
Tangible fixed assets	**9**	10,322	10,114
Intangible assets	**9**	179	255
Investments	**10**	19,008	14,181
		29,509	24,550
Current assets			
Debtors	**11**	8,555	7,396
Interest-bearing bank accounts		8,614	6,910
		17,169	14,306
Creditors			
Amounts falling due within one year	**12**	(2,109)	(1,469)
Net current assets		15,060	12,837
Net assets excluding pension scheme asset		44,569	37,387
Defined benefit pension scheme asset	**19**	–	–
Net assets including pension scheme asset		44,569	37,387
Funds			
Restricted	**15**	2,955	3,113
Unrestricted			
General		21,535	20,771
Designated	**16**	20,071	13,581
Non-charitable		8	(78)
Total unrestricted funds excluding pension asset		41,614	34,274
Pension scheme asset		–	–
Total unrestricted funds including pension asset		41,614	34,274
Total funds		44,569	37,387

The financial statements were approved by The Board of Trustees on 21 July 2022 and signed on its behalf by:

Neil Goulden
Chair of Trustees



Catherine McDonald
Trustee

Balance sheet: St Christopher's Hospice entity only as at 31 March 2022

	Notes	2022 £'000	2021 £'000
Fixed assets			
Tangible fixed assets	**9**	10,070	9,903
Intangible assets	**9**	179	255
Investments	**10**	19,408	14,581
		29,657	24,739
Current assets			
Debtors	**11**	9,852	7,453
Interest-bearing bank accounts		6,945	6,637
		16,797	14,090
Creditors			
Amounts falling due within one year	**12**	(1,894)	(1,359)
Net current assets		14,903	12,731
Net assets excluding pension scheme liability		44,560	37,470
Defined benefit pension scheme liability	**19**	–	–
Net assets including pension scheme liability		44,560	37,470
Funds			
Restricted	**15**	2,955	3,113
Unrestricted			
General		21,534	20,776
Designated	**16**	20,071	13,581
Total unrestricted funds excluding pension liability		41,605	34,357
Pension reserve		–	–
Total unrestricted funds including pension liability		41,605	34,357
Total funds		44,560	37,470

The financial statements were approved by The Board of Trustees on 21 July 2022 and signed on its behalf by:

Neil Goulden
Chair of Trustees

Catherine McDonald
Trustee

Consolidated statement of cash flows for the year ended 31 March 2022

	Notes	2022 £'000	2021 £'000
Net cash generated by operating activities	A	6,915	2,594
Cash flows from investing activities			
Interest and dividends received		153	143
Purchase of tangible and intangible fixed assets		(889)	(2,076)
(Increase)/decrease in investments		(4,475)	3,017
Net cash (used in)/provided by investing activities		(5,211)	1,084
Change in cash and cash equivalents in the year		1,704	3,678
Cash at the beginning of the year		6,910	3,232
Cash at the end of the year		8,614	6,910

Reconciliation of net movement in funds to net cash inflow from operating activities	Notes	2022 £'000	2021 £'000
	A		
Net income		7,182	6,464
Interest and dividends receivable		(153)	(143)
Depreciation and amortisation charges		746	532
Unrealised (gain) on investments		(352)	(2,162)
Loss on the disposal of fixed assets		11	16
(Increase) in debtors		(1,159)	(1,855)
Increase/(Decrease) in creditors		640	(258)
Increase/(Decrease) in defined benefit pension scheme deficit		–	–
Net cash generated by operating activities		6,915	2,594

Notes to the financial statements for the year ended 31 March 2022

1 Principal accounting policies

1.1 Basis of accounting

The financial statements are prepared under the historical cost basis and comply with the Companies Act 2006. The financial statements have been prepared in accordance with the Statement of Recommended Practice (*Accounting and Reporting by Charities*), issued in October 2019 (FRS 102), other relevant provisions of the memorandum and articles of association, and with applicable UK accounting standards.

The figures for both years reflect the full adoption of FRS (Financial Reporting Standard) 102.

The Charity meets the definition of a public benefit entity under FRS 102.

1.2 Going concern

These financial statements have been prepared on a going concern basis.

The ongoing status of the COVID-19 pandemic and how it affects the Charity has a level of uncertainty.

However, after carrying out scenario analysis to plan for the impact on both our operating surplus/(deficit) and overall reserves of a range of possible COVID-19 scenarios over the short to medium term, the Trustees are confident that the Charity can meet its liabilities as they fall due.

The Trustees therefore consider that the Charity holds sufficient reserves for the going concern basis to be appropriate.

1.3 Basis of consolidation

The statement of financial activities and balance sheet consolidate the financial statements of the charity, its wholly owned subsidiary St Christopher's (Trading) Limited, and (up to 2020-21) its wholly owned subsidiary St Christopher's Personal Care Services Limited.

No separate Statement of Financial Activities is presented for the charity as permitted by Section 408 of the Companies Act 2006 and SORP (FRS102). The net income dealt with in the Charity's Statement of Financial Activities for the year ended 31 March 2022 was £7,096k (2021: £6,548k).

1.4 Fund accounting

Restricted income funds

Restricted funds are funds subject to specific restricted conditions requested by the donors. Where the restriction relates to the purchase of a capital item then the condition will be treated as having been met when the asset is purchased.

Unrestricted income funds

Unrestricted funds comprise accumulated surpluses and deficits on general funds. They are available for use at the discretion of the Board in furtherance of the general charitable objects.

Designated funds are amounts included within Unrestricted Funds that have been set aside by the Board for particular purposes. Designated funds include:

- **Fixed assets** This reflects the net book value of unrestricted tangible and intangible fixed assets
- **Pension liability** These are designated funds held against the defined benefit pension scheme deficit. The amount shown relates to the deficit from the most recent Triennial valuation, less pension contributions made following this valuation, less the liability disclosed under FRS 102
- **St Christopher's CARE** These are designated monies to fund the construction of our new Centre for Awareness and Response to End of Life (St Christopher's CARE, formerly known as the Learning Hub)
- **Ward refurbishment** These are designated monies to fund a modest wards refurbishment at the Sydenham site
- **Strategic Ambitions Fund** This is a designated fund to focus on projects which will expand St Christopher's charitable impact and to support its long-term sustainability
- **Future Challenge Fund** This is a designated fund to allow for future years of financial challenge expected as a result of COVID-19
- **Legacies Fund** To set aside legacies income, when it has been higher than budgeted in a particular year. This money will be drawn down to support future years, when legacies income is lower than budgeted.

Details on the level of funds in each element are provided in notes 15 and 16.

1.5 Income

Income represents the total income receivable during the year comprising donations, legacies, NHS contracts, grants, fees, interest and other income generated during the year.

Legacies must be recognised when the following conditions are confirmed:

- There has been grant of probate
- The executors have established that there are sufficient funds to pay the legacy
- Any conditions attached to the legacy are either within the control of the Charity or have been met.

NHS contracts and fees are recognised when it can reasonably be assumed that the Charity is entitled to the income and the amount can be estimated with sufficient reliability.

Income from trading companies arises from two sources:

- Sales of goods in charity shops
- Provision of personal care services (up to 2020-21 only).

1.6 Expenditure

The costs of inpatient care, community care/outpatients, education and training, care at our centres, Candle Child Bereavement Service and cost of raising voluntary income comprise expenditure both directly and indirectly attributable to the activity concerned. Indirectly attributable costs such as physiotherapy and social work have been allocated to activities using an appropriate cost allocation basis.

Support costs have been allocated to activities on the basis of staff time spent. Governance costs, which are charitable, relate to the stewardship of the Charity's assets, organisational administration and compliance with constitutional and statutory requirements.

1.7 Taxation

St Christopher's Hospice is a registered charity. Income and chargeable gains, which are applied for charitable purposes, are exempt from liability to direct taxation. Income tax recoverable in respect of donations under Gift Aid, investment income and legacies is included with the income to which it relates.

1.8 Capitalisation and depreciation

Tangible fixed assets are capitalised with a £1k de minimis limit where relevant.

If items are individually less than £1k, but are part of a project greater than £10k (e.g. as part of an agreed budget) then these are also capitalised as part of this project.

Equipment is not capitalised if it is less than £1k per individual item, and purchased on a rolling basis.

Assets under construction are not depreciated. Depreciation and amortisation are calculated to write off the cost of tangible fixed assets on a straight-line basis over the expected useful lives of the assets concerned at the following rates:

Leasehold buildings:	over the term of the lease
Freehold buildings:	2% straight-line basis
Freehold refurbishments and fixtures and fittings:	10% straight-line basis
Equipment and motor vehicles:	10% to 33⅓% straight-line basis
Motor vehicles:	33⅓% straight-line basis
Intangible assets:	33⅓% straight-line basis
Shops dilapidations:	straight line over the length of the shop lease

1.9 Pension schemes

St Christopher's Hospice contributes to the St Christopher's Hospice (1985) Pension Scheme, a defined benefit scheme. The pension scheme is administered by Trustees and is separate from the hospice. See note 19 for further details.

St Christopher's Hospice also contributes to a defined contribution scheme. Contributions in respect of the year are charged to the Statement of Financial Activities in the year to which they relate.

St Christopher's Hospice has an arrangement with the NHS that permits members of the NHS final salary pension scheme to maintain their membership when they are subsequently employed by the hospice. The NHS currently provides a subsidy on the contributions payable by the hospice. This subsidy, along with the contribution from St Christopher's Hospice, are recognised in the Statement of Financial Activities in the year to which they relate.

1.10 Operating leases

Rentals payable under operating leases are charged on a straight-line basis over the term of the lease.

1.11 Estimation uncertainty and key judgements

Key judgements and areas of uncertainty are considered to be the defined pension liability and accrued legacy income.

Please refer to note 19 for a detailed review of the relevant assumptions in relation to the defined benefit pension liability.

Accrued legacy income is calculated on the basis of the valuation of the net estate of each testator, based on management's best estimate. The source of estimation uncertainty is that the valuation of the estates at a point in time is inherently uncertain and can change significantly over a short period of time.

The carrying amount of legacies accrued (note 11) as at 31 March 2022 was £6,276k (2021: £4,554k).

1.12 Investments

Listed investments are included in the balance sheet at market value. Realised gains and losses on deposits in the year and unrealised gains and losses on investments at the balance sheet date are included in the consolidated statement of financial activities. The movement in the valuation of investments during the year is set out in Note 10.

2 National Health Service

	2022 £'000	2021 £'000
NHS contracts	8,383	9,148
NHSE funding (restricted see note 15)	1,653	3,459
	10,036	12,607

3 Education, fees and other income

	2022 £'000	2021 £'000
Education	173	115
Fees and other income	694	885
	867	1,000

4 Group undertakings

Summary of results of group undertakings:

2022	St Christopher's Hospice £'000	St Christopher's (Trading) Ltd £'000	St Christopher's Personal Care Services Ltd £'000	Group total £'000
Income	25,051	4,436	–	29,487
Expenditure	(19,427)	(3,125)	–	(22,552)
Profit for the year	5,624	1,311	–	6,935
Other recognised gains	247	–	–	247
Distributions	1,225	(1,225)	–	–
Net income for the year	7,096	86	–	7,182

The net assets of St Christopher's (Trading) Ltd were £408k at 31 March 2022. St Christopher's Personal Care Services Ltd was dissolved during the year.

2021	St Christopher's Hospice	St Christopher's (Trading) Ltd	St Christopher's Personal Care Services Ltd	Group total
	£'000	£'000	£'000	£'000
Income	24,096	2,716	525	27,337
Expenditure	(19,320)	(2,800)	(747)	(22,867)
Surplus/Profit/(Loss) for the year	4,776	(84)	(222)	4,470
Other recognised gains	1,772	–	222	1,994
Distributions	–	–	–	–
Net income/result for the year	6,548	(84)	–	6,464

The net assets of St Christopher's (Trading) Ltd were £322k at 31 March 2021. The net assets of St Christopher's Personal Care Services Ltd were £0 at 31 March 2021. Activities for St Christopher's Personal Care Services Ltd constituted discontinuing operations.

St Christopher's Hospice has one wholly owned subsidiary, and one subsidiary which was dissolved during the year:

Company	Activity	Company number
St Christopher's (Trading) Ltd	Operation of charity shops for the hospice	02604519
St Christopher's Personal Care Services Ltd	Provision of personal care services – ceased trading during 2020-21, dissolved during 2021-22	08872082

The directors of St Christopher's Personal Care Services Limited decided the company should cease trading during 2020-21. As such the 2020-21 financial statements for St Christopher's Personal Care Services Limited were prepared on a basis other than that of a going concern.

Related party transactions

During the year the company entered into transactions with related parties. Transactions entered into and balances outstanding are as follows:

	2022 St Christopher's (Trading) Ltd	2022 St Christopher's Personal Care Services Ltd	2021 St Christopher's (Trading) Ltd	2021 St Christopher's Personal Care Services Ltd
	£'000	£'000	£'000	£'000
Re-charged to related parties				
Management charge	72	–	72	–
Salaries	1,663	–	1,572	679
Leasehold depreciation	35	–	40	–
Other costs	43	–	56	43
Group debt adjustments	–	–	–	(222)
Total	1,813	–	1,740	500
Balance owed at 31 March	1,566	–	451	–

5 Expenditure

	Direct costs £'000	Support costs £'000	Total 2022 £'000	Total 2021 £'000
Costs of raising funds				
Fundraising and publicity	1,502	139	1,641	1,536
Trading activities	3,125	–	3,125	3,547
	4,627	139	4,766	5,083
Charitable activities				
Inpatient care	9,701	863	10,564	10,886
Community care/outpatients	4,411	86	4,497	4,314
Education and training	1,252	111	1,363	1,258
Care at our centres	1,131	38	1,169	1,146
Candle Child Bereavement Service	185	8	193	180
Total cost of charitable activities	16,680	1,106	17,786	17,784
Total expenditure	21,307	1,245	22,552	22,867

Included in the costs above are governance costs of £77k (2021: £41k).

Analysis of support costs

	2022 £'000	2021 £'000
Facilities management	256	228
IT management	380	433
Finance	275	271
Personnel	334	355
	1,245	1,287

Support costs have been allocated to activities on the basis of staff time spent.

6 Net income

	2022 £'000	2021 £'000
Net income is stated after charging/(crediting)		
Auditors' remuneration: audit fee	36	30
Auditors' remuneration: tax and tagging compliance services	5	12
Auditors' remuneration: pension	6	5
Operating lease rentals: land and buildings	802	782
Depreciation and amortisation	746	532
Interest receivable	(153)	(143)

7 Staff costs

	2022 £'000	2021 £'000
Salaries and wages	13,297	13,154
Social security costs	1,125	1,152
Pension costs (see note 19 below)	1,195	1,235
Staff costs of the Charity	15,617	15,541
Staff costs of trading activities (includes pension costs of £67k in 2022 (2021: £90k))	1,735	2,319
	17,352	17,860

Payments were made under a voluntary severance scheme of £36k (2021: £196k).

The average number of employees during the year (excluding bank) was:

	Head count 2022	Head count 2021	FTEs 2022	FTEs 2021
Hospice (includes support staff)	282	273	226	241
Community care/outpatients	51	76	43	45
Education and training	13	12	10	10
Care at our centres	23	6	16	5
Personal Care Services	–	26	–	20
Charity shops	75	63	53	55
	444	456	348	376

The number of employees whose earnings fell within the band:

	2022	2021
£60,000 to £69,999	6	10
£70,000 to £79,999	6	5
£80,000 to £89,999	2	2
£90,000 to £99,999	2	–
£100,000 to £109,999	1	1
£110,000 to £119,999	–	1
£120,000 to £129,999	1	1
£150,000 to £159,999	–	1

Pension contributions of £142k (2021: £178k) were paid in respect of these employees.

In addition to the Board of Trustees themselves, the Board of Trustees consider the key management personnel to be the Executive Team of 5.85 FTEs (2021: 6.20 FTEs) and the total benefit paid to the Executive Team in their role as key management personnel was £572k (2021: £710k).

8 Board of Trustees

Remuneration and reimbursed expenses

No remuneration was paid to members of the Board during either year. No expenses were reimbursed to Trustees (2021: £nil). No costs were incurred in respect of recruiting Trustees (2021: £15,000).

St Christopher's Hospice paid £3,969 (2021: £2,100) for indemnity insurance for the Trustees of the St Christopher's Hospice (1985) Pension Scheme.

St Christopher's Hospice also paid £3,360 (2021: £5,769) for Trustee Liability Insurance for its Trustees.

Donations from Trustees

The Trustees have donated a total of £17k (2021: £81k) during the year. Of this, £10k was restricted to St Christopher's CARE and £4k for community nursing.

9.1 Tangible fixed assets

	Freehold land and buildings £'000	Freehold refurb-ishment £'000	Leasehold land and buildings £'000	Equipment and motor vehicles £'000	Total £'000
Group					
Cost					
At 1 April 2021	12,395	3,786	434	961	17,576
Additions	495	110	–	226	831
Disposal	–	–	–	(10)	(10)
At 31 March 2022	12,890	3,896	434	1,177	18,397
Depreciation					
At 1 April 2021	3,197	3,634	296	335	7,462
Amount provided	251	111	36	223	621
Disposal	–	–	–	(8)	(8)
At 31 March 2022	3,448	3,745	332	550	8,075
Net book values					
At 31 March 2022	9,442	151	102	627	10,322
At 31 March 2021	9,198	152	138	626	10,114
Charity					
Cost					
At 1 April 2021	12,076	3,786	434	927	17,223
Additions	497	–	–	210	707
At 31 March 2022	12,573	3,786	434	1,137	17,930
Depreciation					
At 1 April 2021	3,087	3,635	295	303	7,320
Amount provided	245	41	35	219	540
At 31 March 2022	3,332	3,676	330	522	7,860
Net book values					
At 31 March 2022	9,241	110	104	615	10,070
At 31 March 2021	8,989	151	139	624	9,903

Caritas House, the freehold property in Orpington, was revalued by Jones Lang Lasalle in April 2014. Under the transitional arrangements of FRS 102, the valuation at the date of transition is considered to be the deemed cost of this property.

9.2 Intangible fixed assets

	Software £'000
Group and Charity cost	
At 1 April 2021	832
Additions	56
Disposals	(231)
At 31 March 2022	657
Amortisation	
At 1 April 2021	577
Amount provided	125
Disposals	(224)
At 31 March 2022	478
Net book values	
At 31 March 2022	179
At 1 April 2021	255

The net book value at 31 March 2022 represents fixed assets used for:

	Freehold land and buildings £'000	Leasehold land and buildings £'000	Equipment and motor vehicles £'000	Software £'000	Total £'000
Charitable purposes					
Inpatient care	5,485	–	403	117	6,005
Community care/outpatients	1,401	–	90	26	1,517
Education and training	1,814	–	39	11	1,864
Care at our centres	612	–	24	7	643
	9,312	–	556	161	10,029
Charity shops	280	104	70	18	472
	9,592	104	626	179	10,501

10 Investments

	Group 2022 £'000	Group 2021 £'000	Charity 2022 £'000	Charity 2021 £'000
At 1 April 2021	14,181	15,034	14,581	15,434
Additions	4,168	3,334	4,168	3,334
Disposals	(1,969)	(3,479)	(1,969)	(3,479)
Increase in market value: realised	198	132	198	132
Increase in market value: unrealised	352	2,162	352	2,162
	16,930	17,183	17,330	17,583
Movement in cash balance	2,078	(3,002)	2,078	(3,002)
At 31 March 2022	19,008	14,181	19,408	14,581
Analysed as follows:				
Funds managed by Cazenove Capital Management				
UK equities	1,858	1,626	1,858	1,626
International equities	7,458	6,599	7,458	6,599
Bonds	963	763	963	763
Property	1,127	898	1,127	898
Multi asset	514	461	514	461
Alternatives: other and commodities	1,705	537	1,705	537
Cash	95	246	95	246
	13,720	11,130	13,720	11,130
Other investments				
Bank deposits	5,288	3,051	5,288	3,051
Investment in subsidiary undertakings (below)	–	–	400	400
	5,288	3,051	5,688	3,451
Total investments	19,008	14,181	19,408	14,581

The historical cost of the investments managed by Cazenove Capital Management is £11,391k (2021: £8,957k).

The Charity owns all of the 400,000 £1 ordinary shares in St Christopher's (Trading) Ltd.

11 Debtors

	Group 2022 £'000	Group 2021 £'000	Charity 2022 £'000	Charity 2021 £'000
Trade debtors	74	1,053	64	1,053
Legacies receivable	6,276	4,554	6,276	4,554
Sundry debtors, prepayments and accrued income	2,205	1,789	1,946	1,395
Amount due from St Christopher's (Trading) Ltd	–	–	1,566	451
	8,555	7,396	9,852	7,453

12 Creditors: amounts falling due within one year

	Group 2022 £'000	Group 2021 £'000	Charity 2022 £'000	Charity 2021 £'000
Trade creditors	358	227	345	223
Payroll taxes and social security	478	492	477	492
Other creditors and accruals	609	634	408	528
Income received in advance	664	116	664	116
	2,109	1,469	1,894	1,359

13 Lease commitments

The Group leases a number of properties and motor vehicles under operating leases.

	Land and buildings 2022 £'000	Land and buildings restated 2021 £'000	Motor vehicles and office equipment 2022 £'000	Motor vehicles and office equipment 2021 £'000
Operating leases payments to be made				
Within one year	688	688	59	57
In two to five years	1,268	1,666	16	53
Over five years	2	29	–	–
	1,958	2,383	75	110

Lease commitments are based on whichever is earlier out of the lease end date and the lease break point date. Lease commitments as at 31 March 2021 have been restated so that they are shown on the same basis.

14 Financial commitments

As at 31 March 2022, the following approved commitments were authorised by the Board of Trustees:

- Up to £750k in respect of ward refurbishments. This will be funded through restricted and designated funds.

15 Restricted funds

	Balance 1 April 2021 £'000	Income £'000	Expenditure £'000	Transfers £'000	Balance 31 March 2022 £'000
Candle Child Bereavement Service	–	43	43	–	–
Carers	77	–	27	13	63
Caritas House Building Fund	1,119	–	25	–	1,094
Choose Home	28	50	37	–	41
Coach4care	29	14	–	–	43
Community Action	52	43	58	–	37
Community of Nursing	–	22	2	7	27
COVID-19 Community	11	–	1	–	10
Dementia-focused training and education	58	–	4	–	54
Education (Bursaries)	32	15	–	–	47
Lavender Room ongoing upkeep	–	–	–	30	30
St Christopher's CARE: Capital Fund	–	129	9	(120)	–
NHSE Funding	–	1,653	1,653	–	–
Nightingale Fellowship hardship bursaries	94	–	–	–	94
Palliative Works: digital platform for CNSs	22	73	68	–	27
Patient equipment/premises extension	–	165	4	–	161
Research: Stern legacy	280	–	20	–	260
Support for St Christopher's CARE	1,144	–	260	–	884
Ward refurbishment project	31	1	–	(30)	2
Women in Fellowship Fund: various projects	30	20	–	(13)	37
Other funds	106	143	207	2	44
Total restricted funds	3,113	2,371	2,418	(111)	2,955

Caritas House Building Fund

This fund was originally established to cover the cost of building Harris HospisCare premises and offices. It now reflects the net book value of Caritas House.

Coach4Care

Supporting carers through end of life and bereavement experiences.

Community Action

Spporting older, frail and socially isolated people within the local community.

Community of Nursing

Shared learning and support for newly qualified nurses.

St Christopher's CARE: Capital Fund

This fund represents monies received to build St Christopher's CARE. Transfers within this fund relate to capital expenditure on St Christopher's CARE during the year.

NHSE funding

NHSE awarded funding for St Christopher's Hospice to provide support to people with complex needs during the COVID-19 pandemic. This being bed capacity and community support from December 2021 to March 2022.

Research: Stern legacy

St Christopher's Hospice was the beneficiary of a restricted legacy for use in research into myeloma and end of life palliative care. Accordingly, the funds have been used to establish a research project into myeloma at the Cicely Saunders International research institution and are being used to fund other research projects in end of life care.

Support for St Christopher's CARE

This fund is restricted to supporting expenditure for St Christopher's CARE in its first years of operating.

16 Designated funds

	Balance at 1 April 2021 £'000	New designations and transfers £'000	Balance at 31 March 2022 £'000
Fixed assets	9,249	158	9,407
Pension liability	95	(95)	–
Strategic Ambitions	–	6,292	6,292
St Christopher's CARE	370	(370)	–
Wards refurbishment	469	281	750
Future Challenge Fund	894	(272)	622
Legacies Fund	2,504	496	3,000
	13,581	6,490	20,071

Fixed assets: this reflects the net book value of unrestricted tangible and intangible fixed assets.

Pension liability: these are designated funds held against the defined benefit pension scheme deficit. The amount shown relates to the deficit from the most recent triennial valuation, less pension contributions made following this valuation, less the liability disclosed under FRS 102.

St Christopher's CARE: these are designated monies to fund the construction of St Christopher's CARE.

Wards refurbishment: these are designated monies to fund a modest wards refurbishment at the Sydenham site.

Future Challenge Fund: this is a designated fund to allow for future years of financial challenge expected as a result of COVID-19.

Legacies Fund: to set aside legacies income when it has been higher than budgeted in a particular year. This money will then be released to general funds in future years if legacies income is lower than budgeted.

Strategic Ambitions: this is a designated fund to focus on projects which will expand St Christopher's charitable impact and to support its long-term sustainability.

17 Analysis of group net assets between funds

	Fixed assets £'000	Current assets £'000	Creditors £'000	Pension scheme assets £'000	Total £'000
Restricted funds	1,094	1,861	–	–	2,955
Unrestricted funds					
Designated	9,407	10,664	–	–	20,071
General	19,008	4,644	(2,109)	–	21,543
	29,509	17,169	(2,109)	–	44,569

18 Consolidated statement of financial activities for the year ended 31 March 2021

	Unrestricted funds Discontinuing Operations £'000	Unrestricted funds Continuing Operations £'000	Unrestricted funds Total £'000	Restricted funds Total £'000	2021 Total £'000	2020 Total £'000
Income from						
Donations and gifts	–	3,753	3,753	489	4,242	4,355
Legacies	–	6,089	6,089	15	6,104	3,743
Charitable activities						
NHS funding for patient care	–	9,148	9,148	3,459	12,607	7,923
Education, fees and other income	–	1,000	1,000	–	1,000	859
Other trading activities						
Income of trading companies	525	2,716	3,241	–	3,241	5,631
Investment income	–	143	143	–	143	339
Total income	525	22,849	23,374	3,963	27,337	22,850
Expenditure on						
Raising voluntary income	–	1,536	1,536	–	1,536	1,561
Trading companies	747	2,800	3,547	–	3,547	4,527
	747	4,336	5,083	–	5,083	6,088
Charitable activities						
Inpatient care	–	9,084	9,084	1,802	10,886	10,415
Community care/outpatients	–	2,361	2,361	1,953	4,314	3,853
Education and training	–	1,023	1,023	235	1,258	1,244
Care at our centres	–	1,136	1,136	10	1,146	1,106
Candle Child Bereavement Service	–	125	125	55	180	181
	–	13,729	13,729	4,055	17,784	16,799
Total expenditure	747	18,065	18,812	4,055	22,867	22,887
Net (expenditure)/income before transfers	(222)	4,784	4,562	(92)	4,470	(37)
Transfer between funds (relate to capital programme)	–	69	69	(69)	–	–
Net (expenditure)/income before other recognised gains and losses	(222)	4,853	4,631	(161)	4,470	(37)
Other recognised gains/losses						
Actuarial (losses) on defined benefit pension scheme	–	(300)	(300)	–	(300)	(92)
Gains/(Losses) on Discontinued Operations	222	(222)	–	–	–	–
Gains on investments: realised	–	132	132	-	132	335
Gains/(Losses) on investments: unrealised	–	2,162	2,162	–	2,162	(1,286)
Net movement in funds	–	6,625	6,625	(161)	6,464	(1,080)
Total funds at 1 April 2020	–	27,649	27,649	3,274	30,923	32,003
Total funds at 31 March 2021	–	**34,274**	**34,274**	**3,113**	**37,387**	**30,923**

19 Pension schemes

a St Christopher's Hospice (1985) scheme

The hospice operates a pension scheme, the St Christopher's Hospice (1985) Pension Scheme, which provides benefits based on final pensionable salary. The assets of the scheme are held separately from those of the hospice. The scheme was closed to new members in April 2002 and closed to future accruals from March 2010.

Contributions are charged to the Statement of Financial Activities so as to spread the cost of pensions over employees' working lives. The pension charge for the year was £303k (2021: £300k).

Triennial valuation

The contribution rates are determined by a qualified actuary on the basis of triennial valuation. The results of the last triennial valuation at 31 March 2019 showed that the value of the scheme's assets was £10,413k (2016: £8,600k) and that this represented 94% (2016: 87%) funding level, with a deficit of £695k (2016: £1,297k). The actuary confirmed that the minimum funding requirement regulations had been met.

This most recent actuarial valuation showed a deficit of £695k. This was subsequently updated to 31 March 2021 and showed a surplus of £579k. This will be updated for the valuation as at 31 March 2022 during 2022-23. The hospice has agreed with the Trustees that it will aim to eliminate the deficit over a period of five years and two months from 1 July 2017 by the payment of annual contributions of £300,000. In addition and in accordance with the actuarial valuation, the hospice has agreed with the Trustees that it will meet the expenses of the scheme and levies payable to the Pension Protection Fund.

FRS (Financial Reporting Standard) 102: Disclosure Report

FRS 102 is fully effective for accounting periods beginning on or after 1 January 2015. The statement of financial activities, the balance sheet and the disclosures in the notes to these financial statements meet the requirements of FRS 102. The major assumptions used by the actuary are shown below.

Present values of defined benefit obligation, fair value of assets and defined benefit asset (liability)

	Period ended 31 March 2022 £'000	Period ended 31 March 2021 £'000	Period ended 31 March 2020 £'000
Fair value of plan assets	12,279	11,736	10,190
Present value of defined benefit obligation	(10,434)	(10,832)	(9,616)
Unrecognised surplus	(1,845)	(904)	(574)
Defined benefit asset/(liability) to be recognised	–	–	–

Reconciliation of opening and closing balances of the defined benefit obligation

	Period ended 31 March 2022 £'000	Period ended 31 March 2021 £'000
Net defined benefit obligation at start of period	10,832	9,616
Interest expense	224	227
Acturial (gains)/losses	(333)	1,301
Benefits paid	(289)	(312)
Defined benefit obligation at end of period	10,434	10,832

Reconciliation of opening and closing balances of the fair value of plan assets

	Period ended 31 March 2022 £'000	Period ended 31 March 2021 £'000
Fair value of plan assets at start of period	11,736	10,190
Interest income	246	244
Acturial gains	286	1,314
Contributions by the Charity	300	300
Benefits paid	(289)	(312)
Fair value of plan assets at end of period	12,279	11,736

The actual return on the plan assets over the period ended 31 March 2022 was £532k.

Defined benefit costs recognised in net (expenditure)/income

	Period ended 31 March 2022 £'000	Period ended 31 March 2021 £'000
Net interest cost	(3)	–

Defined benefit costs recognised in other gains and losses

	Period ended 31 March 2022 £'000	Period ended 31 March 2021 £'000
Return on plan assets (excluding amounts included in net interest cost): gain	286	1,314
Experience gains and losses arising on the plan liabilities: (loss)/gain	(121)	111
Effects of changes in the demographic and financial assumptions underlying the present value of the plan liabilities: gain/(loss)	454	(1,412)
Effects of changes in the amount of surplus that is not recoverable (excluding amounts included in net interest cost): (loss)	(922)	(313)
Total amount recognised in other gains and losses	(303)	(300)

Assets

	Period ended 31 March 2022 £'000	Period ended 31 March 2021 £'000	Period ended 31 March 2020 £'000
Diversified growth assets	9,061	3,688	3,219
Debt instruments	–	2,360	2,015
Index-linked gilts	–	–	664
Liability-driven investments	3,035	2,845	3,013
Equity instruments	–	2,722	1,128
Cash and cash equivalents	183	121	151
Total assets	12,279	11,736	10,190

None of the fair values of the assets shown above include any direct investments in the hospice's own financial instruments or any property occupied by, or other assets used by, the hospice.

Assumptions

	Period ended 31 March 2022 % pa	Period ended 31 March 2021 % pa	Period ended 31 March 2020 % pa
Discount rate	2.75	2.10	2.40
Inflation (RPI)	4.00	3.50	2.90
Allowance for revaluation of deferred pensions of RPI or 5% p.a. if less	4.00	3.50	2.90
Allowance for pension in payment increases of RPI or 5% p.a. if less	4.00	3.50	2.90
Allowance for commutation of pension for cash at retirement	75%	75%	75%

The mortality assumptions adopted at 31 March 2022 imply the following life expectancies at age 65 years:

Male retiring in 2022:	22.1
Female retiring in 2022:	23.9
Male retiring in 2042:	23.4
Female retiring in 2042:	25.4

The best estimate of contributions to be paid by the hospice to the scheme for the period commencing 1 April 2022 is £125k.

b St Christopher's defined contribution scheme

The St Christopher's defined contribution scheme was set up in September 2001. In April 2010 the St Christopher's Personal Pension (2010) defined contribution scheme was established and members of the existing defined contribution scheme transferred to this new scheme with effect from January 2011. The contribution of the hospice was on average 21% for former members of the St Christopher's (1985) scheme and 5% for all other members, which represented a total charge for the year of £431k (2021: £432k) to the St Christopher's GPP (2010) defined contribution scheme.

c NHS Pension Scheme

Details of the scheme are provided in note 1.9. The contribution of the hospice was 14.38%, which was offset by a 29% subsidy on the contribution. This represented a net charge for the year of £492k (2021: £529k).

What we are going to do next

As a team, we have made significant progress over the last year. The coming year brings fresh challenges and further ambitions. We're excited about these new projects and look forward to our new Chief Executive, Helen Simmons, working with us during the next stage of St Christopher's Hospice.

Our plans for next year, and the third year of our three year strategy (2022-23), will include six areas of focus. Outlined below are our plans for what we will do in the second year of our three-year strategy for 2020-23.

Responding afresh to meet population needs

Informed by the needs of our local population and the most recent census data, we will review and adapt our services as necessary to make sure we provide a high standard of care, and that our care can be accessed by everyone in our local community.

This includes both our clinical response (patients we care for on our wards or in people's homes) as well as our response via community action, bereavement support or through other partnerships.

We will invest in innovation and IT to address inequalities and gaps in provision.

Maintaining quality and leadership

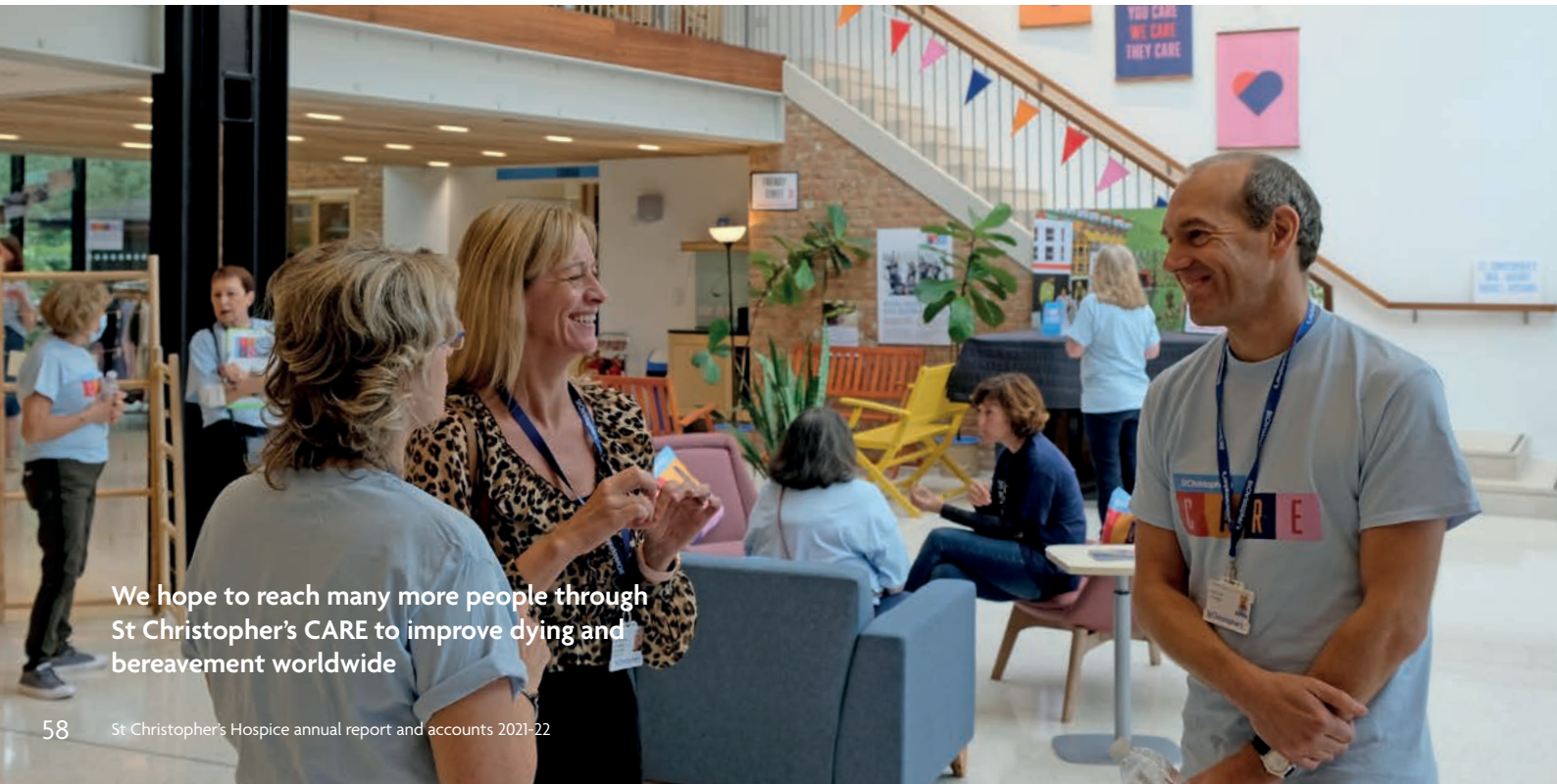
Continuous improvement is at the heart of everything we do at St Christopher's. We want to share knowledge and learning so that we continue to provide the high-quality care and support we are known for and maintain our CQC rating of 'Outstanding'.

This includes ensuring we have the right governance structures in place, and that we invest in our managers and their training so that they feel empowered to carry out their roles.

More people learning with St Christopher's CARE

We want as many people as possible to take advantage of the benefits at St Christopher's CARE, and to learn about dying and bereavement, whether in a professional or non-professional capacity.

We will do this by providing a variety of education and research programmes, webinars, training, workshops,



We hope to reach many more people through St Christopher's CARE to improve dying and bereavement worldwide

conferences, exhibitions and events at St Christopher's CARE and online for a local, national and international audience.

Maintaining a happy and sustainable workforce

The current job market is exceptionally challenging, and cost inflation is high.

We will do all we can to retain and look after our excellent staff and volunteers, and to be an employer of choice so we continue to attract new staff. This includes listening to staff feedback, and implementing our health and wellbeing strategy.

We will also focus on the training needs of our staff to maintain our high standards of care and to enable staff to continue their own personal development.

Communicating and improving access to our services

We will be talking with our community to check whether people are aware of all our services, how they can access them, and how this can best be communicated to our local population.

This will ensure that we truly are a hospice that is here for and accessible for everyone in our community so that we provide a high standard of end of life care to as many people as possible.

Enhancing our premises

We work hard to maintain our high-quality standards as a leader in palliative and end of life care, and it is essential St Christopher's premises continue to be a welcoming home away from home if we are to continue to do this well.

That's why we will make plans for the long term upkeep of our site and necessary renovations to our wards to make everyone's stay at St Christopher's as pleasant as possible.

We will make sure our spaces support patients with changing and different needs. For example, people living with dementia and other forms of neurodiversity which represents an increasing number of the people we are supporting.

Our Bereavement Help Points continue to be a huge source of comfort for people

A huge thank you to all our supporters

We are hugely grateful to the individuals, corporate sponsors, trusts and all those who have so kindly chosen to remember St Christopher's in their Wills. Thanks to you, we provided care and support to over 8,000 people last year. Thank you for making this possible.

5 Stone Buildings
Agape Family Trust
Amphlett Lissimore
Anthony Gold Solicitors LLP
Baltic Exchange
B-Amazing C.I.C
Barton Trust
Batchelors Solicitors
BBC Children in Need
BDB Pitmans LLP
Beazley Management Ltd
Beckenham Crematorium Ltd
Bigfoot CC
BlackRock (UK) Charitable Trust
Boodle Hatfield LLP
Capital Generation Partners
Catford & Bellingham Short Mat Bowling Cb
Charles Russell Speechlys
Chatterton Arms
Collyer Bristow LLP
Coney Hall Village WI
Croham Road Baptist Church
Crystal Palace Short Mat Bowls Club
Cudham Village Club
Currey & Co LLP
Dentons UKMEA LLP Charitable Trust
Direct Line Group
Dixon Wilson
Dr Friedrich Stock Memorial Trust
Dulwich & Sydenham Hill Golf Club
Dulwich Champagne Reception Committee
Dulwich Friends of St Christopher's
Ewings & Co Solicitors
Farrer & Co LLP
Fb Coales No 4 (Family)Trust
Fischer Ramp Buchmann
Forsters Charitable Fund
Forsters LLP
Future Directions Financial Services Ltd
G.M. Morrison Charitable Trust
GAM (UK) Ltd
Glazer Delmar Solicitors
Grips Wheels and Tyres
Harapan Trust
Hither Green Crematorium
Hospice UK
Hospice UK St James's Place Foundation
IdentityE2E
Irwin Mitchell
Jacob Charitable Trust
James Hambro & Partners
Jet's Charitable Trust
John Laing Charitable Trust
John Lamb Hill Oldridge
Jumping Jacks
Link Asset Services
Lloyds TSB Foundation For England & Wales
London Catalyst
Lund Trust
Manak Solicitors LLP
Martin's Management Services Ltd
Masonic Charitable Foundation
Masonic Province of London
Masonic Province Of West Kent
Maurice Turnor Gardner LLP
Maybrey Precision Castings Ltd
Michelmores LLP
Mishcon De Reya LLP
Mohabir Solicitors
Mrs F B Laurence Charitable Trust
Mrs Maud Van Norden's Charitable Foundation
National Lottery Heritage Fund
Offshore Construction Associates
Panagua Bikes
Payne Hicks Beach LLP
Pedder
Petts Wood Runners
Powis Investment Co Ltd
Property Sevices Department
Ray Jones Roofing Ltd

Recognition Express - Bromley & Dartford
RHJ Devonshire Solicitors
Ros Harding Trust
Roseberys Auction House
Rotary Club of Addiscombe & Shirley
Rotary Club Of Beckenham
Rotary Club Of Bromley
Rotary Club of Orpington
Rotary Club Of Orpington Crofton
Rotary Club of Ravensbourne
Rotary Club of Sidcup
Rotary Club Of West Wickham
Rothschild & Co
Sainsbury's - Locksbottom
Sainsbury's - Upper Norwood
Shirley Woolmer Chapter No. 2530
Shortlands Golf Club
Shortlands Tavern
Sinclair Gibson LLP
Skillcrown Homes Ltd
Skipton Building Society Charitable Foundation
Smith & Williamson
Sotheby's
SSP Foundation
STEP – Society of Trust & Estate Practitioners
Stonehage Fleming Family and Partners
Taylor Wessing
Tesco Charity Trust
The Alan Greenaway Foundation
The Albert Hunt Trust
The Anthony and Elizabeth Mellows Charitable Settlement
The Arthur and Audrey Silkin Charitable Trust
The B & P Glasser Charitable Trust
The Beaverbrooks Charitable Trust
The Bothwell Charitable Trust
The Bricklayers Arms
The Burdett Trust for Nursing
The Cazenove Charitable Trust
The Charity of Sir Richard Whittington
The City Bridge Trust
The Douglas-Morris Charitable Trust
The Dulwich Almshouse Charity
The Elizabeth & Prince Zaiger Trust
The Eversley Charitable Trust
The February Foundation
The Florabella Trust
The G D Herbert Charitable Trust
The Gail Wilson Charitable Trust
The Goldsmiths' Company
The Guild of Freemen of the City of London's Charity
The Hayes (Kent) Trust
The Health Foundation
The Horner Family Charitable Fund
The Hospital Saturday Fund
The Institute of Our Lady of Mercy
The Jack Petchey Foundation
The John Horseman Trust
The Kathleen Hannay Memorial Charity
The Linder Foundation
The Mageni Trust
The Margaret and David Walker Trust
The Michael and Anna Wix Charitable Trust
The Milton-Lloyd Charitable Trust
The P M Charitable Trust
The Pat Allsop Charitable Trust
The Rest-Harrow Trust
The Robert Holman Memorial Trust
The Root & Branch Charitable Foundation
The Sundarama Trust
The Thomas J. Horne Memorial Trust
The Timothy Franey Charitable Foundation
The Toler Foundation
Tinklin Springall
Waitrose Green St Green
Walder Wyss Ltd
Walsingham Motor Insurance Limited
Warlingham Rugby Club
Wedlake Bell
West Norwood Cemetery and Crematorium
Wilsons Solicitors LLP
Withers Worldwide
Women in Fellowship

Who's who at St Christopher's

Executive Team

Helen Simmons
Chief Executive[1]

Shaun O'Leary
Joint Chief Executive[3]

Mandy Piper-Killick
Director of People & Organisational Development

Jan Noble
Director of Quality & Innovation

Heather Richardson
Joint Chief Executive
Chief Executive[2]

Amy Proffitt[4]
Head of Medicine & Clinical Care

Amanda Mayo
Care Director

John Vickers Director of Finance & Corporate Services

1 Appointed 30 May 2022 **2** JCE up to 31 December 2021, then CE from 1 January 2022 to 29 May 2022 **3** Resigned 31 December 2021 **4** Resigned 26 November 2021

Trustees

Neil Goulden
Chair[1]

Eleanor Brown
Trustee/Vice Chair[4]

Tony Hunter
Trustee

Catherine McDonald
Trustee

Jane Walters
Vice Chair[2]

Terrence Collis
Trustee[2]

Ian Judson
Trustee

Nita Rogers
Trustee

Gill Baker
Trustee[3]

Nick Diamond
Trustee

Daniel Kelly
Trustee

Lila Thompson
Trustee

Vivian Bazalgette
Trustee

Joanna Donaldson
Trustee[2]

John King
Trustee

Dee Townsend
Trustee

1 Appointed 1 April 2021 **2** Retired 21 July 2022 **3** Retired 31 July 2021 **4** Vice Chair from 21 July 2022

Patron

HRH Princess Alexandra

President

Lord Ian McColl

Vice Presidents

Dr Gillian Ford CB
Sheila Hancock OBE
Dame Pauline Harris DBE DL
Colin Russell
John Rhodes
Rodney Bennion OBE
Dr Sam Klagsbrun
Barbara Richardson
Ruth Saunders
Dr Catherine Dent
Dr Tyrrell Evans

Company Secretary

Shaun O'Leary (resigned 31 December 2021)
John Vickers (appointed 1 January 2022)

Registered office

51-59 Lawrie Park Road,
Sydenham, London SE26 6DZ

Bankers

HSBC Bank plc, 165 Fleet Street,
London EC4A 2DY

Independent auditor

Mazars LLP, 2nd Floor,
6 Sutton Plaza, Sutton Court Road,
Sutton, Surrey SM1 4FS

Registration numbers

Registered charity number 210667
Registered company number 00681880
VAT registration number 523613961

StChristopher's
More than just a hospice

If you would like this information in a different format, such as audio tape, braille or large print, or in another language, please speak to the Communications Team on **020 8768 4500** or email **communications@stchristophers.org.uk**.

StChristopher's
More than just a hospice

Sydenham site
51-59 Lawrie Park Road, Sydenham, London SE26 6DZ

Orpington site
Caritas House, Tregony Road, Orpington BR6 9XA

Telephone **020 8768 4500**
Email **info@stchristophers.org.uk**
www.stchristophers.org.uk
stchrishospice

Registered charity 210667 registered with the Fundraising Regulator
Registered company number 00681880
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ST CHRISTOPHERS HOSPICE

England & Wales - Charity number 210667

Accounts

Annual report and accounts 2020-21

St Christopher's Hospice
annual report and accounts 2020-21
www.stchristophers.org.uk

StChristopher's
More than just a hospice

About St Christopher's

At St Christopher's Hospice our vision is of a world in which all dying people and those close to them have access to care and support, whenever and wherever they need it.

Each person is unique and we tailor our care to meet social, emotional and spiritual needs, as well as manage physical symptoms. Our goal is to help people live well until they die and support those affected by the loss of a friend or relative. Last year we provided care and support to nearly 5,000 patients and 2,000 carers and family members, across south east London, both at home and in the hospice.

We strongly believe that everyone should have access to the best care at the end of their lives, and through a blend of expert practice, education and research, we work with people across the world, to improve and develop hospice care.

We were founded in 1967 by Dame Cicely Saunders and, more than 50 years later, her words still remain at the heart of everything we do: "You matter because you are you and you matter until the last moment of your life."

As a registered charity we need to raise £15 million every year to continue to care for people when it matters most. Without the support of our local communities this wouldn't be possible. Thank you, from us all, for your support.

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How we've met our strategic ambitions in 2020-21	8
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StChristopher's
More than just a hospice

A year of transformation

Welcome to the Annual Report and Accounts 2020-21 of St Christopher's Hospice (referred to as 'St Christopher's' in this document).

The last year has been a momentous one. As a society, we have learnt to adjust many aspects of our lives to deal with a global pandemic. When the virus first hit and the UK lockdown was announced our focus at St Christopher's was on keeping core services running: making sure we could still support the people who needed us most, whilst keeping everyone safe; trying to secure adequate PPE during a national shortage and supporting people to work in new and different ways. But, just a few weeks in, we could see the transformational impact that COVID-19 was going to have.

During this period, we have reached more people than ever before – in fact we supported 11% more patients, carers and family members than the prior year. Most patients prefer to be cared for at home, in line with people's preferences, and we have cared for an even greater proportion of patients in their homes during the pandemic. We stepped in to support the growing numbers of people needing end of life care as hospitals struggled to cope with rising numbers of COVID-19 admissions and increasing number of deaths. Care was provided over the phone, through video consultation and online group sessions as well as face-to-face when needed. The combination of support in these proportions was new to us, but had many unexpected benefits. For example, feedback to our bereavement teams showed that many felt more comfortable and able to speak openly over the phone; our community teams were able to support many more people without the travel time between people's homes and people were joining our online wellbeing groups who, previously, may have been unable or fearful of coming into the hospice in person.

We have witnessed a strong spirit of innovation – not just in how we provide care but from all areas of the organisation. Our Fundraising Team pivoted to live-streaming events online when we couldn't meet in person. Our Retail Team upped our presence on eBay when our shops were unable to open. We also set up community aid initiatives at speed, such as delivering essential medication and food to people who had to stay at home as they were self-isolating.

Our approach to education and training was similar, as virtual learning quickly assumed a central role. Nearly 3,500 people tuned in across the year, giving us an opportunity to affect real, widespread change. This included developing a webinar series to mark the launch of the first palliative care nursing model in three decades, the dissemination of a new toolkit to improve end of life care for those with No Recourse to Public Funds and a session exploring Dame Cicely Saunders and her legacy. In early 2021, we took ownership of a new state-of-the art building, St Christopher's CARE (St Christopher's Centre for Awareness and Response to End of Life), a real achievement given the uncertainty and restrictions throughout 2020.

We want to acknowledge our colleagues whose 'nothing can stop us' attitude really pulled us through and provided insight about new ways of working to stay ahead. We also couldn't be more grateful for the outpouring of support we experienced from our community. Beyond financial donations, our local community provided donations of PPE, food, letters of support and other thoughtful items to keep staff morale high. These kind gestures were so appreciated, and left us truly humbled.

This year has not been without its losses for individuals, our partner organisations and indeed the hospice sector. We want to acknowledge, in particular, the death of Dr Mary Baines, a pioneer in palliative care and supporter of St Christopher's over many years, most recently as one of our valued vice presidents. Her legacy in terms of home-based palliative care, management of distressing symptoms and the value of education live on in much of our organisational life. Thank you, Mary.

In what has been an impossibly difficult year for everyone, thank you to everyone else also, for keeping us going and being there for the people of south east London when they needed you most.

Heather Richardson Shaun O'Leary

Heather Richardson and Shaun O'Leary
Joint Chief Executives, St Christopher's Hospice

What we do with your money

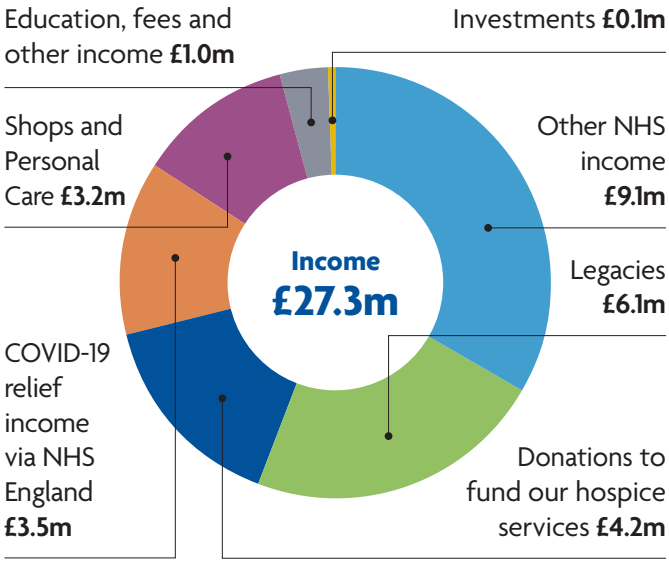
We're here thanks to the generosity of our supporters. Your kindness means that we are able to continue to provide vital services to people in south east London and beyond.

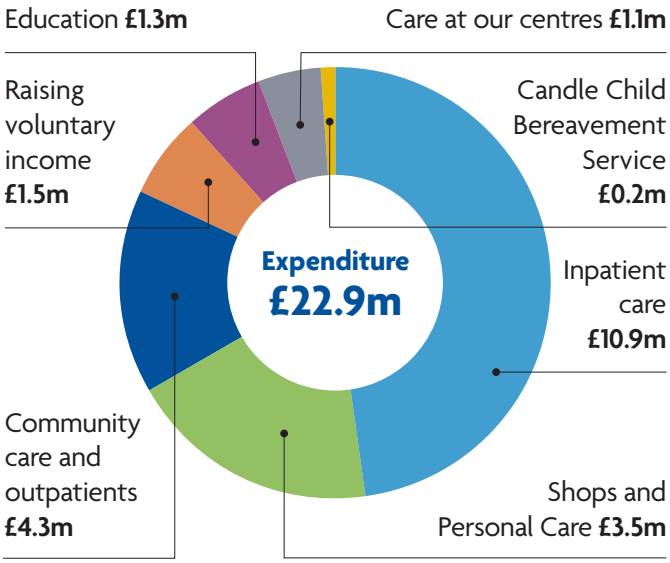
Where our money comes up from

An incredible 54% of income is down to you; be this through fundraising activities, leaving gifts in Wills or buying goods in our shops. We are so very grateful for the money you donate and we are careful to invest it wisely, in ways that will best serve the people who need our support. This is a lower percentage than a typical year (2019-20 was 64%) because our shops had to close for seven months due to COVID-19 restrictions, and because we received additional COVID-19 relief money from NHS England. We are very thankful for both this money, and the income we receive from the local Clinical Commissioning Group whose funding represents around 35% of our income in a normal year. The astounding £27.3m raised this year enabled us to continue providing care to people who live in the boroughs we serve – Bromley, Croydon, Lewisham, Lambeth and Southwark – as well as shaping care for people well beyond through education, research and innovation.

Where our money goes

It cost £22.9m to run St Christopher's in 2020-21. Here's a breakdown of how we spent the money that you gave us. Please also see our full financial review starting on page 31.





Our year in numbers 2020-21

Number of patients we provided care for (approximate)

5,000

Number of carers and family members we supported (approximate)

2,000

Number of inpatient admissions

768

Number of Bereavement Service contacts

3,118

Total cared for in the community

4,993

Number of out of hours visits to patients or families

1,944

*In a normal year

Number of home visits we made

10,664

Number of complementary therapies we delivered

1,432

Number of rehabilitation sessions we delivered

6,142

Number of staff, including bank staff

504

Number of active volunteers

745

Percentage of our active volunteers who have been with us for more than five years (approximate)

20%

Number of people who attended one of our learning events

3,275

Number of countries we provided education and training to (274 delegates)

48

Our hospice lottery raised a grand total of

£454,247

Number of lottery players

5,947

Number of customers who visited our 26 shops

220,000+

Donations weight in tons that our shops received and sorted through

1,680

Number of people who donated money to us

23,589

Number of community groups and organisations who donated money to us

665

The cost every year to run our services

£22.9m

The amount we have to fundraise every year is

£15m*

What our patients and carers say

In December 2020, we sent questionnaires to patients and carers so we can better understand what we are doing well and where we need to improve, to ensure we're providing the best possible end of life care.

We were heartened by the results and have included a few key highlights below:

- **97% of patients said they were very satisfied or satisfied with our care**
- **92% of carers said they were very satisfied or satisfied with our care**
- **99% of patients felt they were treated with respect and helped to feel dignified always or most of the time**
- **94% of patients and carers felt we had listened to their needs always or most of the time**
- **91% of patients thought our online wellbeing group was very good or good**
- **90% of carers thought our online clinical consultations were very good or good.**

We can better understand what we are doing well and where we need to improve, to ensure we're providing the best possible end of life care

Our vision, values and ambitions

Last year, we set out three new key ambitions and three supporting themes, which would underpin our 2020-23 strategy and enable us to report back on our progress.

When we started 2020-21, we were just at the beginning of the COVID-19 pandemic and its duration and impact were unclear. This year, despite continued and unprecedented challenges, we've thrived and made significant progress against our 2020-23 strategy:

- We've increased our community support (both locally and nationally) and successfully adapted our services in order to not only maintain, but to extend our reach despite COVID-19
- We've continued to contribute to wider conversations about death, dying and loss, particularly focusing on increasing public knowledge and encouraging discussions about end of life preparation and care
- We've transformed our professional education and training with a new curriculum (delivered in a new way), new partnerships (both locally and globally) and even have a brand-new building to welcome learners when we're able to once again deliver face-to-face training
- We've continued to highlight and redress inequalities in healthcare both in practice and through our investment into research and training
- We've supported those bereaved with online services, unique events and new partnerships.

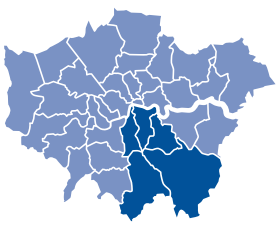
At the centre of these ambitions remains our overall vision, which informs every decision we make and our values, which shape the behaviours of everyone who acts on behalf of St Christopher's.

Our **values** are:

- **Pioneering and bold**
- **Of and for the community**
- **Expert**
- **Empowering and compassionate**
- **One team working together**
- **Stronger through partnerships**

Our **vision** is a world in which all dying people and those close to them have access to care and support when and wherever they need it. Through our key themes of **community, inclusivity and sustainability**, our **ambitions** are:

Adapt our care services to meet people's changing needs



...to improve people's experience of end of life locally

Invest in hospice-led innovation related to death, dying and loss

...to strengthen hospices' contribution nationally

Increase public and professional confidence and knowledge about end of life

...to transform end of life care globally

How we've met our strategic ambitions in 2020-21

Adapt our care services to meet people's changing needs **to improve people's experience of end of life locally**

Supporting people and their families

Our strapline 'more than just a hospice' embodies everything we do at St Christopher's. Our services extend far beyond admission to our Inpatient Unit (IPU) and the last year has brought unrivalled challenges to service delivery, which we've continued to develop in collaboration with patients, carers and staff.

At the start of the pandemic, we amended our model for care, to ensure services were maintained and we continued a two-way relationship with our patients, families and community members, despite the challenges of COVID-19. Some examples of this include:

- Increasing our home-based care using a blend of virtual and face-to-face consultations
- Maintaining a focus on helping people live well, despite lack of access to gym sessions, by offering both individual and group virtual rehabilitation and complementary therapy sessions
- Moving our entire wellbeing offering – an extensive timetable of activities from art and music sessions to quizzes and exercise classes – online, giving people a chance to share experiences and chat to others, no matter where they were
- Shifting support for both our adult bereavement and our Candle childhood bereavement services from face-to-face to telephone consultations.

The pandemic has affected us all, but care home staff, in particular, have really felt the pressure, as they found themselves supporting many more people at the end of life. As a hospice we have always supported our local care homes to provide exemplary care and support for their residents at the end of life and, during the pandemic, we stepped this support up. We increased the frequency of our visits from all members of the team, gave access to medications as needed and increased the training and support on offer through virtual communities.

Throughout the pandemic, we worked closely with the **NHS and local Clinical Commissioning Groups (CCGs)** to ensure we were able to support the wider healthcare system. We were dynamic, particularly in our response to local COVID-19 outbreaks and were able to provide additional levels of care. We opened up our doors to patients testing positive for COVID-19 from acute hospitals and home, and continued to test anyone displaying symptoms who was staying with us in the IPU.

Supporting other hospices

This year, more than ever, it was important that we worked with and supported others in the hospice sector.

- We've been providing remote, on-call support to **Ardgowan Hospice** in Greenock, Scotland since 2019. From sharing best-practice tips for adapting services to supporting with our medical expertise and leadership, largely through virtual platforms, we've been able to ensure that a hospice supporting their local community had the consultant medical support required to remain viable
- We've also continued to develop our close relationship with **Greenwich & Bexley Community Hospice**. This has included providing shared medical support and joint palliative care learning initiatives, helping to ensure that end of life care is provided across the whole of south east London
- When local hospices had to close service temporarily during COVID-19 we offered beds to their residents where this was essential.

Care home staff, in particular, have really felt the pressure, as they found themselves supporting many more people at the end of life

Supporting our community

When the pandemic hit in March 2020, we wanted our communities to know that we were not going anywhere. That's why we proactively gave as much support as we could, particularly to those who were isolated and without access to help.

Lockdown did not mean shut down for St Christopher's and so we created a series of lockdown reassurance videos to show the community that we were still here. This content featured various members of staff talking directly to our communities and was distributed across all of our digital platforms.

We then launched **Community Aid, our COVID-19 initiative** working with local people to support the wellbeing of community members who were at home and isolated during lockdown for a variety of reasons. Some were shielding because they were approaching the end of life, had a chronic condition or were carers. Others had been recently bereaved and could not access their usual support networks.

We supported local people who volunteered their time to ensure they felt part of the community and that their needs were met. We linked people together in a one-to-one 'match' to develop a mutually supportive relationship, providing opportunities for reflection and to learn new skills, such as dementia training.

"I just wanted to drop you a line to say how helpful the volunteers are and what a difference they make to each shift. Sometimes, I'm sure we wouldn't make it through the day without them!"

Fiona Hodson, Consultant Nurse

Together we provided help to people at home, such as:

- social support and relationship building
- creative and wellbeing activities
- shopping pickup and delivery
- medication pickup and delivery
- daily phone calls
- support with health, wellbeing, goal-setting and mobility
- problem-solving or accessing healthcare services in the community
- support with accessing other groups in the community
- support for households during a death or loss of a loved one
- weekly online meet ups and chances to learn new skills.

We worked with partner organisations such as **Tate Modern** and the **Horniman Museum** to produce creative arts booklets and activities that people could do at home. Our Complementary Therapies Team produced a guide for at-home relaxation which we distributed with essential oils to people. We also worked with local community and mutual aid groups to meet people's specific needs. One example is **London Rainbow**, who we worked with to distribute donated tablets and phones. Another is **GoodGym**, a national programme working with volunteers to perform tasks for charities, such as supporting members of the community to connect to the internet and sign into online programmes.

Feedback from community members confirmed they felt cared for, connected with others during a difficult time and that this created valued relationships. Those volunteering their time received training and daily support from our team and reflected a growth in knowledge, skills and confidence. Many shared that they felt their own wellbeing had improved as they'd found a sense of purpose by being involved in doing something for themselves and others during a difficult time. Overall 437 people received support at home from 216 community members volunteering their time, and today, 160 community members are still giving long-term social and practical support to 237 people through the Community Aid programme.

From June 2020 to January 2021, 12 volunteers completed 228 deliveries and/or collections of food and medication as part of Community Aid. This new 'driver' role made such an impact that it has become a permanent volunteer role, with eight volunteers embedded and working within the Community Care Teams on an ongoing basis.

"[The chats] make her feel better. [The] two-way relationship is a real joy and they have lots in common, despite [a] large age gap"

Relative of a community member matched as part of Community Aid

Remembering with the bereaved

It's important to provide moments to talk about, remember and celebrate the lives of those who are no longer here. Over the last year, this has proved incredibly difficult, as the restrictions during the pandemic meant no one was able to gather and grieve as they normally would... but that didn't stop St Christopher's offering to help in different ways.

In October, we took on **Lewisham Bereavement Counselling Service (LBC)**, a well-established community bereavement service supported by local counsellors for the local community, regardless of the type of death. We've been providing bereavement support to people in our local communities for over 45 years and LBC already ran their service in a similar way, transitioning well into our wider bereavement team during challenging times. We hope to utilise their existing base in Deptford to better support people in south east London.

We estimate that over 2,500 patients died during 2020-21 in the geographical patch covered by King's College Hospital on Denmark Hill, Princess Royal University Hospital in Orpington and Orpington Hospital. Each one of these patients left friends and relatives distraught by the traumatic nature of the loss during the COVID-19 pandemic. In response to this crisis, a new collaboration of several partners, including St Christopher's, formed **Kings College Hospital Charity (KCHC) Bereavement Service**. The purpose of the KCHC Bereavement Service is to support people throughout their grief and is open to anyone who has lost someone at one of these hospitals during the pandemic; support is not limited to those deaths associated with a COVID-19 diagnosis.

So far, this partnership has successfully delivered over 1,100 therapeutic sessions, triaged over 250 clients and has recently been extended to the staff at the three hospitals who have been bereaved during the COVID-19 pandemic.

August saw the return of our **Remembering with Ribbons** event where people were invited to dedicate a ribbon in memory of a friend or relative, which hospice staff tied to a tree in the grounds at our Sydenham site to create a colourful, vibrant and fluttering memorial to those we love.

Then in December, we invited people to join our annual **Remembering with St Christopher's** event to reflect on the year and remember people that we love who are no longer with us. The event was open to everyone, not just families who have been supported by St Christopher's, and offered an opportunity to mark loss as part of the wider community. The online service included an opportunity to dedicate a light in memory of a loved one, which was one of many displayed all around the hospice gardens in Sydenham.

In January, we launched the first ever **Snowdrops for St Christopher's** to give people the opportunity to celebrate the lives of friends or relatives by dedicating a Snowdrop in their memory. We commissioned 1,300 beautiful hand-crafted Snowdrops, making them unique like the individuals they represent. Working with the restrictions still in place, everyone who dedicated a Snowdrop received an invitation to book a slot to attend an installation at Down House, former home of Charles Darwin, in April 2021. When the installation finished, each Snowdrop was sent for the recipient to keep forever in their house, garden or special place of remembrance.

Invest in hospice-led innovation related to death, dying and loss **to strengthen hospices' contribution nationally**

Supporting people's choices

Part of being independent for every individual is the right to choose the environment in which they die. Many people, given the choice, would like to die at home and we make every effort to support those decisions.

In October 2020, thanks to funding from the Burdett Trust, we started a new service known as **Choose Home** which, initially, serves the communities of Bromley and Lewisham. This service was developed to offer wrap-around care support to people with a prognosis of two to three weeks left to live so they could remain in their own home, where this is their wish. We knew there was a real need for such a service as, over the previous 12 months, 39% of people admitted to the hospice died within hours to three days of admission, and most of those would have preferred to stay at home.

Choose Home is care, provided in people's home, by trained volunteers, carers and registered nurses who are supported by consultant nurses, clinical nurse specialists and doctors, over phone and video, as needed. Our Choose Home volunteers provide a listening ear, make a cup of tea and provide company for those living alone between care visits, drawing on the cultivated skills of our carers and nurses as required. This aims to improve people's quality of life, reduce isolation and help them to stay at home in surroundings they are comfortable in. In the first three months the service supported 79 people and received positive feedback from patients and families. One daughter of a person we supported to die at home said: "your care assistants took my fear away".

In an effort to enhance **support to care homes** at a time of intense pressure during the second national lockdown, we made available a consultant nurse and doctor to work in specific care homes in Bromley. We supported several care homes with outbreaks of COVID-19 to ensure the immediate response was working closely with Public Health England, the NHS Bromley CCG and the local council.

COVID-19 has forced everyone to reflect on dying, death and bereavement in some shape or form. Whilst serving to increase pressure on systems, leading to stress for staff, people and families, it also acted as a catalyst for significant change and innovation across healthcare and communities. To better understand these changes, and how we can harness our learnings from the last year to reshape future experiences of death and bereavement, we embarked on a joint venture with **Marie Curie** and **Nesta**.

Together, we gathered insights from a diverse range of perspectives, held virtual events and ran a social media campaign to gather views and start conversations. We have published our initial findings in an Insights Summary paper which outlines five key areas of opportunity available to hospices and others, that could help transform people's future experiences at end of life. These focus on ensuring care is equitable and person-centred, supporting people to feel comfortable talking about death, encouraging community-led response, fostering greater opportunities for collaboration and increased use and access to digital tools. Our aspiration is to continue this work and inspire a movement of people to come together with a shared purpose to effect real change.

Working in partnership

We know that part of delivering the best care and support is through collaboration. This year, more than ever, we've relied on family and at-home carers to be our window into the daily needs of many patients.

We want to do our best to support every person who stays with us, and their carers. In an effort to improve communication between carers and members of our multi-disciplinary teams (MDT), we've developed the **Carers' Diary** initiative. Its purpose is to be a reflective tool for carers' experience of end of life care, help 'fill in the gaps' for carers when they are not present and to gain useful feedback from carers to influence daily care. All staff and family/friends will be invited to write in the diary, which will be kept at the bedside while at the hospice.

In an effort to better support carers to provide end of life care for people who wish to be at home, we've provided outlets for those isolated (particularly due to COVID-19) to connect with other carers and clinical colleagues at St Christopher's. In addition, we've invested in remote training to pass on practical skills which will be of use to carers on a daily basis, such as teaching people to give injections.

This year, more than ever, we've relied on family and at-home carers to be our window into the daily needs of many patients

Highlighting and redressing inequalities

Death does not discriminate but, unfortunately, sometimes the system of care does. As people live longer and develop more complex needs, it's important that we consider the needs of all those in the communities we support.

In 2019 we became aware of the growing number of people who, due to restrictions placed on them as part of their immigration status, had **No Recourse to Public Funds (NRFP)**, severely limiting access to healthcare and benefits. Many, we discovered, found themselves in this unenviable position while also caring for a family member approaching the end of life.

In pursuit of our mission to offer high quality, holistic care to everyone who needs it, whenever and wherever that may be, we embarked on a major piece of work to tackle this challenge and support this vulnerable group.

In January 2021, after 18 months of research and collaboration with expert partners as well as the generous support of **Hospice UK** and **St James's Place Charitable Foundation**, we published ***Do You See Us?***, a guide to help hospice and palliative care teams, migrant centre workers, social workers and welfare teams be better prepared to support this community to access the same quality of end of life care extended to the rest of the UK population.

We're confident that with this guide and the launch webinar which attracted 175 people, we've created a resource that will facilitate the extension of economic, social, health and spiritual support to a hidden group in desperate need, by providing hospice professionals with the essential information they'll need to identify people with NRPF, give them appropriate support and introduce them to other agencies who can help them.

We want to share our knowledge and enable others to provide excellent end of life care for people who live into late old age. For that reason, we developed **Cascade** – a two-year project now in its second year – which aims to increase the quality of end of life care for older people with severe frailty, generously funded by the Burdett Trust for Nursing.

Through collaborative working between community nursing and hospice teams, Cascade has identified key skills for nurses in a variety of settings and, despite the obstacles presented by the pandemic, provided training for 28 individuals in the last year to support the development and growth of these essential skills and improve care. The pandemic has heightened people's awareness of how older people are treated, especially as people were forced to self-isolate for most of the last year without the social interaction and support that we all need as humans. In the coming year we hope to harness this increased awareness and societal drive to improve support for older people as we share our learnings with the wider community through co-working with external agencies and hosting a national conference.

Staff from St Christopher's were one of the first two hospices to partake in a new model to improve **end of life care for homeless people**. This project was established by Dr Caroline Shulman in light of the growing numbers of people who were dying in unsupported, unacceptable situations.

During this pandemic, 253,000 people in England have been identified as homeless and are living in temporary accommodation, the highest figure for 14 years. With more than two-thirds (68%) of those living in temporary accommodation based in London, we were keen to be involved in supporting people in this situation who were approaching the end of their life.

The project focussed on embedding multi-disciplinary, person-centred care and support for sick homeless people, by bringing together palliative care and multi-disciplinary support into homeless hostels and day centres. Over the last two years we have worked with two hostels in Croydon to support staff to access tools and resources to facilitate better health and palliative care outcomes for the people in its service. Now, the model established between academics at University College London and St Christopher's, has been rolled out to other hospices across the UK to help reduce inequalities in care for this disadvantaged and marginalised group.

Over the last two years we have worked with two hostels in Croydon to support staff to access tools and resources to facilitate better health and palliative care outcomes for the people in its service

Increase public and professional confidence and knowledge about end of life **to transform end of life care globally**

Demystifying death through public education

At St Christopher's, we often use the term 'death literacy' to describe the knowledge and confidence people have when talking about death. One of our core ambitions is to support that literacy to reduce fear and demystify taboos.

We believe that conversations with people about end of life care and advanced care planning are much easier when these ideas are already part of public consciousness. That's why we're committed to changing public perceptions of death, dying and loss through ongoing education and two-way discussion. One of the ways we do this is through contribution to local and national media stories.

Over the last year, St Christopher's has participated in a variety of media coverage. Some notable contributions to national conversations over the last year are:

'Living with Grief' hosted by Esther Rantzen on Channel 5

This documentary featured Durone, who was supported by our Candle Child Bereavement Service following the death of this brother when he was just 11. Esther interviewed Durone, who is now in his 20s, in what was an extremely moving interview.

We promoted the documentary on our social media channels and signposted people to our Virtual Bereavement Help Points.

BBC Radio London

Care Director Amanda Mayo was interviewed live on air with presenter Jo Good, about the importance of hospice support to mark Hospice Care Week.

Hospice Care Week with Hospice UK

Adil, a member of our Young Adults Group, was the focus of a social media campaign from Hospice UK to mark Hospice Care Week, where he shared what it's like at one of our Saturday sessions and what the group means to him.

Community collaboration

Over the last year, we've worked with community members to run several sessions with the aim of increasing public knowledge and confidence about death, dying and loss:

- Online death cafes and bereavement cafes for community members - three a week across the five boroughs we serve
- Online training and learning sessions for professionals - hundreds of people attended these sessions from all around the country.

We collaborated with members of the community to create and curate the 'Scrolled Life' Exhibition at the Horniman Museum in Forest Hill.

The exhibition shared the stories of creative arts participants with marginal lived experiences, including hospice patients, asylum seekers and people living with long-term mental health conditions. The artwork attempted to articulate on papyrus scrolls their lived experiences and, in some cases, their deaths. These were displayed next to their life story in text.

We arranged special trips for carers and community events where we were able to discuss death, dying and loss with members of the public visiting the exhibition.

Transforming professional education and training

As the leading provider of education in palliative care, we believe in pushing boundaries and life-long learning, which is why we've not let the COVID-19 pandemic stop us from innovation, collaboration and progress.

Unable to welcome visitors in person to our new £6.7m **Centre for Awareness and Response to End of Life (CARE)**, we instead launched it with a four-part webinar series 'Connect with CARE'.

More than 700 people joined the online sessions, each of which introduced a new initiative or model, with a virtual tour of the new centre, the first meeting of the Cicely Saunders Society, and the launch of two ground-breaking new guides, the **Lantern Model**, and our No Recourse to Public Funds toolkit, *Do You See Us?*

To complement and capitalise on the new facilities, we've refreshed our curriculum, with an increased focus on public engagement as well as a range of new products for professionals.

This includes a new suite of dementia resources, skills workshops and a regular webinar series focusing on topical issues like grief and loss. Among the products designed to ensure enrichment for a wider audience will be two conferences aimed at opening up the conversation around death and dying.

St Christopher's CARE
THE CENTRE FOR AWARENESS & RESPONSE TO END OF LIFE

"I am excited about the future of St Christopher's CARE because it will equip, enable and empower ordinary people living in families and local communities to talk more about death dying and loss, thereby increasing understanding about ways we can all make a difference to our fellow human beings by helping them through some of the most challenging times in their lives"

Shaun O'Leary, Joint Chief Executive

"St Christopher's CARE will help us to break down the taboos surrounding death, dying and loss. Giving people the skills, knowledge and ability to speak openly and prepare for death. What can be more important?"

Emily Baddeley, Head of Communications & Marketing

"St Christopher's CARE will build nurse leaders of the future, help us to work together globally, platform innovation and be a guardian to the art and science of palliative nursing"

Marie Cooper, Nurse and Project Lead for Celebrating Palliative Care Nursing

"St Christopher's CARE gives us new opportunities to really make a difference; drawing on the alchemy of learning, research, innovation and expert practice made all the richer through partnership between professionals and the public"

Heather Richardson,
Joint Chief Executive

We responded to the learning needs of health and social care professionals in all settings with a suite of new products designed to provide nurses, doctors and allied health professionals with the tools to respond to the increase in demand for end-of-life care. During the first wave 1,227 people logged on to the 20 free webinars and online learning sessions we provided. Many of these individuals, including GPs, hadn't benefitted from support from the hospice before. Many returned for our six-part **Second Wave** webinar series in November and December.

Developing ever closer ties with local health providers has helped us further increase engagement. This has been demonstrated by the continuation of the **Hospice Education & Learning Partnership (HELP)** with Greenwich & Bexley Community Hospice and exemplified with the recognising dying training delivered to NHS staff at the **Nightingale Hospital** in London. New partnerships with **Oxleas NHS Trust** and **Bromley Healthcare** have seen widespread take-up of our Introduction to End of Life Care courses in particular.

We marked the first ever **International Year of the Nurse** in style. The President of the Royal College of Nursing, a pioneer in American palliative care nursing, a former MP and a lifelong campaigner for better conditions for nurses were among the inspiring speakers at our seven-part series of webinars. In addition, we searched the world, identified and celebrated 30 Pioneering Nurses driving palliative nursing forward to change the experience of people approaching the end of life.

Our third means of marking the Year of the Nurse was to launch the first new model of palliative care in 30 years – the **Lantern Model**. With almost 600 people joining the four-part webinar series, it's clear this new model articulating the unique, vital and skilled role of nurses caring for people at the end-of-life, was long overdue. Made possible by the support of the Florence Nightingale Foundation and Burdett Trust, the model is designed to support individual nurses as well as organisations looking to improve care in any setting.

As well as increasing engagement locally and nationally, our strategic partnership with the **Institute of Palliative Medicine Kerala**, **Sanjeevan Palliative Care Project Puducherry**, and **Bangabandhu Sheikh Mujib Medical University**, Bangladesh, has seen us reach an even greater global audience. More than 136 delegates from 43 mostly low- and middle-income countries, joined the six-month **Palliative Care Fellowship** online in February as we continue to identify and support new leaders to establish and expand palliative care services across the world.

How we've been able to do it

Community: partnering with those around us to become stronger together

Increased community support

We're proud of how we've continued to support those most vulnerable in our communities during a global pandemic, but nothing could have prepared us for the incredible generosity from our community to us.

Living through a pandemic has placed a strain on all of us and, at St Christopher's, we also felt the challenges imposed by the pandemic. When the virus first hit, our main priority was continuing to support people living with a terminal illness whilst making sure we kept the people we were caring for and our staff safe. This became increasingly difficult as we, and the NHS, struggled to secure adequate PPE for staff.

After exploring all avenues, we put out a plea to the local community on social media and were overwhelmed by the response. Deliveries arrived each day of surgical masks, aprons, visors and goggles (including swimming, cycling and science lab goggles!). We also had local people making gowns and scrubs for staff (some made from costumes from cancelled theatre shows) and deliveries of everything from food parcels to hand cream kept staff morale high during some of the most stressful conditions we have ever experienced.

Then, a few weeks later as we started to feel the financial pinch of closing our charity shops and cancelling our fundraising events, we saw an outpouring of financial gifts in response to our **Emergency Appeal** which raised over £130,000. One family sent in a donation of £500 – the amount they would have spent on their annual holiday which had been cancelled as a result of the virus. Not only did these gifts mean we could keep supporting the growing numbers of people who needed us, they also highlighted how St Christopher's is very much part of the local community.

And as we've already mentioned, our Community Action Team supported people to volunteer their time to help others and, in some cases, even took some strain off of our clinical teams. It was a genuinely reciprocal partnership.

Inclusivity: encouraging everyone to be their authentic self, feel valued and get involved

Learning and growing together

It's only through education, discussion and understanding that we can truly say we stand for equality and diversity at St Christopher's.

2020 was a tough year as we battled an international pandemic and people gathered around the world to stand up against racism following the death of George Floyd. In response to this, many organisations, including St Christopher's, made a commitment to improving equality, diversity and inclusion within the workplace.

We began by holding two externally facilitated workshops, open to all staff, to explore what it means to be a truly inclusive organisation and understand what we are doing well and where we need to focus our efforts to improve. These workshops were attended by more than 30 people and their recommendations formed a roadmap for our newly formed Steering Committee known as **FREDIE (Fairness, Respect, Equality, Diversity, Inclusion and Engagement)**.

We also continue in our commitment to ensure people from Black, Asian and Minority Ethnic (BAME) groups are represented across our workforce with processes such as anonymised shortlisting for vacancies, thus removing any unconscious bias and active encouragement to people from BAME groups to apply for our new roles as they become vacant, especially those on our Trustee Board and in more senior positions.

Sustainability: remaining resilient and ensuring our future

Stability amongst uncertainty

We've taken some significant steps over the last year to ensure the long-term sustainability of our organisational direction and our finances.

Last year, we welcomed four new Trustees to our Board: Nick Diamond, Tony Hunter, John King and Dee Townsend. Neil Goulden also joined us from 1 April

2021 as our new Chair of Trustees, bringing with him a wealth of experience and a passion for social justice, innovation, education and clinical excellence.

We also said goodbye to three long-standing members of our Board during the year: Barbara Noble, Richard Saunders and Morgan Jones, our retiring Chair. Over the years Morgan has overseen many significant developments and improvements across the hospice. In that time, we've more than doubled the number of patients we care for and seen St Christopher's CARE (a £6.7m new education facility that aims to be a space to explore living with death, dying and loss) develop from an initial idea through to construction.

During the pandemic, the Board met regularly to support the Executive Team and to assure itself on progress in the management of the associated risks. This was in addition to the core schedule of previously planned Board meetings.

After great consideration and many years of effort to turn **St Christopher's Personal Care** into a financially viable business we reluctantly took the decision to close this service. We had continued to implement measures to grow income and client numbers for the service but sadly, this did not prove to be financially sustainable. Once the decision had been made our priority was ensuring our clients care needs continued to be met until an alternative care provider had been found, as well as supporting the Personal Care workforce to find suitable employment – both at the hospice and with other care providers.

2020-21 could have been a very damaging year for our finances but, due to exceptional one-offs, we have generated net income (before movements in pensions and investments funds) of £4.5m.

Our shops which we rely on to generate money for the hospice had to close for seven months and our Fundraising Team could not hold events in public as they would do in a normal year. We are therefore grateful for the generous donations which we have received from the local community during the last year, and £3.5m of funding which we received from **NHS England via Hospice UK** as part of the nationwide government COVID-19 response to hospices.

On top of this, it has been an unusually high year for legacies income – with £6.1m generated, this was £2.4m higher than the previous year. We have also received £0.9m of one-off funding from the NHS (via the South East London CCG) which has been allocated to support us in future years of expected future challenge. Both of these factors combined are the key reason that our financial results in this report show our net income being £4.5m (before movements in pensions and investment funds).

This additional legacies income, and one-off NHS funding, have been ringfenced in newly created designated funds to support us in future years of expected financial challenge; we are concerned as to how the COVID-19 pandemic has damaged the wider economy, and donors' individual finances, meaning that we expect it to be hard for us to raise the money we need in future years, beyond 2020-21.

See the Financial Review section from page 31 for further details.

Keeping everyone safe

From extra cleaning to regular COVID-19 testing we've prioritised safety. While doing this, we have tried to remain human-centred to support our patients at the end of their life.

As with any organisation, over the last year we've developed additional procedures to ensure that our workforce, patients and visitors were kept as safe as possible during the COVID-19 pandemic, bearing in mind heightened levels of the virus within the community, and that we were caring for patients with COVID-19. For example, we increased our cleaning protocols, wore additional PPE, and reduced our on-site presence in line with public health guidelines. Staff also had to socially isolate if they were infected or in close contact with someone who had been infected.

We allowed a restricted number of visitors onto the IPU throughout the pandemic. Each case was considered in a personalised way, depending on the situation, so we could ensure that we were keeping people safe, but also connected. We also offered warm water for our visitors for handwashing outside the hospice – just a small way to support them while visiting friends or relatives at the end of life.

We have tested staff regularly to ensure that any asymptomatic infection is identified. We have actively encouraged vaccine take-up and the benefits of the vaccine to workforce, and worked with the local health system to ensure that our frontline staff could access the vaccine as early as possible.

Keeping people well

Much more than just looking after physical wellbeing, we've made every effort to ensure that staff and volunteers at St Christopher's had vital outlets to vent, relax and find support during an incredibly difficult time.

Looking after our colleagues is always a top priority but never more so than over the last year, when it's been more difficult to meet face-to-face to support each other.

For staff, we created more opportunities to access digital support at both a team and wider organisational level. We booked virtual wellbeing sessions with experts and commissioned videos to share on our intranet to support staff while working remotely. Most recently, we've launched a new three-year health and well-being strategy and planned our first ever Health & Wellbeing Month, in partnership with Greenwich & Bexley Community Hospice. With a variety of activities (online and in person), this month of activities aims to invest in services and training to encourage staff to be mindful, and take care of, their own wellbeing.

We also kept in contact with our volunteers, ensuring regular contact and redeploying people where we could to support the changing needs of the organisation during the pandemic. We involved several volunteers in our application for the Investing in Volunteers (IiV) quality standard for good practice in volunteer management. We were awarded with this accolade for the management and effectiveness of our work volunteers at St Christopher's. We're hugely proud of this achievement and hope it shows current and potential volunteers how much they're valued and gives them confidence in our ability to provide an outstanding volunteer experience.

Staff and volunteers at St Christopher's Hospice had vital outlets to vent, relax and find support during an incredibly difficult time.

The rise of a global pandemic meant that we weren't able to host... mass events but, undefeated, we did things a little differently

Finding new ways to fundraise

Almost overnight we went from hosting events face-to-face to live-streaming. The team has been creative, versatile and, most importantly, resilient.

At St Christopher's we're well known for our events – whether that's walking through gorgeous countryside in fancy dress for Fun Walk, taking on a sporting challenge or coming together to remember family and friends who have died. The rise of a global pandemic meant that we weren't able to host these mass events but, undefeated, we did things a little differently.

For those looking to keep active in lockdown we launched **Step Up for St Christopher's** which saw 157 people walking 32,896,511 steps and raising almost £5,000 for the hospice. To provide some light entertainment we teamed up with our new Ambassador, comedian **Tom Allen**, to host two live-streamed quiz nights on YouTube and Facebook with 1,500 people tuning in and raising over £22,000 across the two events.

We made sure people still had the opportunity to remember those they have lost which, due to restrictions on funerals, was more important than ever before

Most importantly, we made sure people still had the opportunity to remember those they have lost which, due to restrictions on funerals, was more important than ever before. We held two live-streamed events – Remembering with Ribbons in the summer and Remembering with St Christopher's in December – which shared the virtual lighting of our trees and invited people at home to light a candle with us in memory. Over 5,500 people watched these events and, combined, they raised over £100,000 for St Christopher's.

Rallying for retail

Like all other high street shops, ours were closed for seven months over the last year. Staff were furloughed and 20% of our loyal volunteers decided they would not be in a position to carry on because they felt unsafe or needed to shield due to medical vulnerabilities.

Our retail arm usually brings in well over £1m of much-needed net income per year, so things could have been rather bleak during the last year. But, rather than feel discouraged by the challenges ahead, we rallied:

- Increased our activity on eBay and Discogs, using our social media channels, website and regular supporter

updates to drive traffic to our online stores, where we saw an 100% increase in online sales

- Used the time closed to do some refurbishment to our Addiscombe, Dulwich, Chatterton Road, Downham, Penge and St Paul's Cray branches, ensuring the long-term sustainability and upkeep of our buildings, and utilising volunteers who were keen to help
- Developed the space and populated the very first **St Christopher's Library Shop**, at our Streatham branch, which now houses over 3,500 books.

We never stopped taking donations, even when our shops had to close and our drop-off centres were busy throughout the year. In the 20 weeks we were open between April 2020 and March 2021, the generosity of our retail supporters was incredible and we managed to ensure the trading company was in good shape for the future. Since reopening on 12 April 2021, we've been extremely busy with record-breaking sales and donations, and we give thanks to all our supporters staff and volunteers for their continued commitment.

We've had new volunteers join our team, we've launched a retail Instagram account (**@stchrishospiceshop**) and are looking forward to offering a more hybrid (online and in-store) retail experience moving forward.

Structure, governance and management

St Christopher's Hospice is a company limited by guarantee and is governed by its Articles of Association. St Christopher's Hospice is also a Charity registered with the Charity Commission in England and Wales.

St Christopher's Hospice has two wholly owned subsidiaries, St Christopher's (Trading) Ltd and St Christopher's Personal Care Services Ltd. The registered office of St Christopher's Hospice and its subsidiaries is 51-59 Lawrie Park Road, Sydenham, London SE26 6DZ.

How we are governed

The Board, consisting of the Trustees named at the back of this report, has ultimate responsibility for the proper and effective management of St Christopher's Hospice. The Board is responsible for all major strategic decisions, for monitoring the organisation's performance, and to ensure that it complies with its Articles of Association and applicable laws and regulations.

As mentioned previously, Neil Goulden is the Chair of the Trustees following the retirement of our previous chair, Morgan Jones on 31 March 2021. The Vice Chair is Jane Walters.

The Board has Trustee representation on the following committees: Nominations & Remunerations Committee, Audit Committee, Investment Committee, Pensions Trust Board, Trading Board, Quality Governance Committee, Safeguarding Committee, Research, Audit & Clinical Evaluation Committee (RACE). Committee terms of reference define responsibilities and delegated responsibilities and are reviewed annually. The Board may delegate any of its powers to one of its committees. The committees report to the Board after each meeting.

The Board delegates day-to-day management and decision making to the Executive Team which is led by the Joint Chief Executives (JCEs). The Executive Team is required to act in furtherance of the Charity's strategy. The Board holds the Joint Chief Executives and Executive Team to account for its leadership of the organisation.

With Neil Goulden our new Chair in place, our Board of Trustees will be reviewing our governance arrangements and their effectiveness from 2021-22.

Trustees' duty to promote the success of the Charity – Section 172 statement

The Trustees are the directors of St Christopher's Hospice and have a duty to promote the success of the Charity and, in doing so, are required by section 172(1) of the Companies Act 2006 to have regard to various specific factors, including:

- the likely consequences of decisions in the long term
- the interests of employees
- the need to foster the Charity's relationships with third-party stakeholders which, in the case of St Christopher's, includes dying people and those close to them, the local community, the NHS and our supporters
- the impact of the Charity's operations on the community and the environment
- the desirability of the Charity maintaining a reputation for high standards of business conduct

The Charity's strategy takes into account the likely consequence of any decision in the long term. The Trustees have previously approved a plan for strategic ambitions for 2020-23. An update on progress against this plan is set out on pages 8-25.

The Board meets at least quarterly throughout the year where it assesses progress against the strategy, identifies areas for focus for the following year and receives updates on the Charity's performance and plans. Its committees also review plans with regard to the particular activities overseen by the committee concerned. The Board typically also has an annual away day for strategic planning.

The Board obtains assurance that attention is given to the factors set out in section 172 when promoting the success of the Charity, by monitoring that the Executive Team and the wider organisation are delivering the agreed strategy, and are complying with specific policies.

Engagement with the Charity's main stakeholder groups are as set out on pages 8-25. The Executive Team regularly reports to the Board on key stakeholder

relations and engagement activities, current issues and relevant feedback received from interaction with stakeholders.

The Trustees also follow a formal process to regularly manage and review risks that are faced by the Charity as set out on page 29.

The Charity ensures that it maintains a reputation for high standards of business conduct by having in place a range of policies and processes that promote corporate responsibility and ethical behaviour. Areas covered include: fundraising (our fundraising practices are discussed below); gifts, hospitality and anti-bribery; conflicts of interest; safeguarding, bullying and harassment; and whistleblowing. All these policies are reviewed periodically. We also have dedicated leads for safeguarding and whistleblowing within the Executive Team and the Board of Trustees.

Recruitment and appointment of new Trustees

The Board is made up of individuals who have a diverse, varied and balanced cross section of life, skills and experience. When embarking on the recruitment process, the Trustee vacancy is advertised on the St Christopher's website, in various publications and on social media. Prospective candidates are invited to apply outlining their relevance for the role. After the closing date, applicants are shortlisted against the person specification and potential candidates are invited to interview. The interviews are usually carried out by the Chair, Vice Chair and a subset of other Trustees. Successful candidates are then formally appointed by a resolution of the Board.

Trustees are appointed by resolution of the Board for a term of up to three years, upon expiry of which they shall be eligible for re-appointment for a further term or terms of up to three years. All Trustees also sign a code of conduct on appointment. The Trustees, Chair and Vice Chair carry out their responsibilities in line with a documented description of their role.

New Trustees undertake an induction process designed to equip them with the information and understanding they need to become effective and valuable members of the Board as quickly as possible. The induction process involves the following:

- An induction pack containing key information about St Christopher's; the governance structure; the roles and responsibilities of Trustees; and the organisational work of the Board of Trustees and its committees
- A Trustee mentor for at least the first year
- An induction programme which enables new Trustees to gain a good understanding of the operations of the organisation
- An informal review meeting with the Chair of the Board at the end of a Trustee's first year.

All Trustees give their time voluntarily and receive no benefit from the Charity. Out of pocket expenses incurred by the Trustees in the course of carrying out the role can be reimbursed in accordance with the organisation's expenses policy. No expenses were claimed from the Charity this financial year. All Trustees were required to complete and sign an annual declaration of interests and of any relevant gifts received during the year.

Public benefit

The Board is aware of the Charity Commission's guidance in relation to public benefit. This report indicates how our activities have delivered public benefit.

Fundraising disclosure

St Christopher's Hospice has voluntarily subscribed to the Fundraising Regulator and is committed to the Fundraising Promise and adherence to the Code of Fundraising Practice set by the Fundraising Regulator.

We encourage the fundraising service providers we engage with to also sign up to the code. Our fundraising effort is led by Compton Fundraising Consultants who are members of the Association of Fundraising Consultants (AFC) promoting best practice and mission to set the very highest standards of fundraising. As a member of AFC, Compton Fundraising Consultants have signed the AFC code of practice together with the Fundraising Regulator's code of Practice. Compton Fundraising Consultants work very closely with the

in-house Fundraising Team on a day-to-day basis and set and agree the annual fundraising targets with the St Christopher's Executive Team. Performance against targets are monitored and formally presented monthly to the Joint Chief Executives and the Director of Finance & Corporate Services.

In addition, the Fundraising Team engages professional third-party suppliers to help us raise funds particularly where we do not have the expertise in-house. We have safeguards in place when working with suppliers so that we protect our supporters and the reputation of our charity, including Lottery Fundraising Services the company which supports our lottery. We ensure all these agents observe the highest standards in terms of fundraising practice and monitor their performance through the use of mystery shopping and random checks with donors.

St Christopher's Hospice is a member of the Hospice Income Generation Network and many of our fundraisers are members of the Chartered Institute of Fundraising.

Our website outlines our complaints policy for the public. We received three fundraising complaints in 2020-21 (2019-20: 0 fundraising complaints). Our policy is to respond to all complaints within 10 days. Serious complaints are escalated to our Executive Team and Trustees to consider lessons learnt. We report to the Fundraising Regulator and the Gambling Commission on the totality of our complaints.

We have policies and procedures in place to safeguard the vulnerable and we ensure our fundraisers and third-party suppliers adhere to these policies. We are also signed up to the Fundraising Preference Service to enable individuals to opt out from receiving fundraising communications from us. We received no requests through this service last year

Pay policy for senior staff

The pay of the Joint Chief Executives is set by the Remuneration & Nominations Committee with any changes authorised by the Chair of the Board of Trustees. The pay for the remainder of the Executive Team and other senior staff is agreed by the Joint Chief Executives in consultation with the Director of People & Organisational Development.

Disabled people

St Christopher's Hospice is a 'Disability Confident' Employer. This means that we undertake full and fair consideration of all applications for employment including those made by disabled persons. We offer a guaranteed interview to those applicants who qualify under the 'Disability Confident' scheme and we are also committed to supporting both disabled people back into the workplace as well as supporting those people who become disabled whilst employed by the organisation. We operate partnerships with a number of external organisations, including the Wolfson Neurorehabilitation Centre, which provides further support and advice to disabled people working with us.

Equality and diversity

St Christopher's Hospice has been signed up to the 'Mindful Employer Charter' since August 2016 and demonstrates a strong commitment to supporting individuals with mental health illnesses and to actively seek to alleviate causes of workplace stress, where possible. Work is currently underway to train up internal Mental Health First Aiders, to strengthen the support available.

The organisation has continued to work hard to maintain its BAME staff representation which remained at 21% by the end of 2020-21, initiatives such as implementing a new Applicant Tracking System which anonymises personal information and additional training for recruiting staff have supported the organisation's endeavours in this regard.

Gender pay gap

The gender pay gap information shows any difference in the average earnings between all men and all women employed across the organisation. The April 2020 data identified that of our 559 staff (excluding bank workers) 85.5% were women and 14.5% were men.

Our data identified that the average hourly rate was 7.1% higher for men in April 2020 compared to 8.1% in April 2019, which is an improvement for the organisation. However, we recognise that having a workforce which is predominantly female means that

even small fluctuations in our male workforce can negatively impact on the mean data. In addition, due to a small decrease in the number of full-time female workers during 2020, this moderately affected the median data, which increased from 0.61% in 2019 to 3.4% in 2020.

Employee information

St Christopher's Hospice is committed to providing information to employees on matters of concern to them and consulting employees, or their representatives (e.g. via our Staff Forum), on a regular basis and in relation to any proposed changes, so that their views can be heard and considered when making decisions.

Streamlined energy and carbon reporting (SECR)

In our first year of SECR, our UK greenhouse gas (GHG) emissions and energy use for the year were as set out below.

UK GHG emissions and energy use data for the period 1 April 2020 to 31 March 2021

Energy consumption used to calculate emissions (kWh)	**2,676,264**
Energy consumption breakdown (kWh): • Gas • Electricity • Transport fuel	
Direct GHG emissions: gas consumption	**267.56**
Indirect energy emissions: purchased electricity	**293.47**
Other indirect emissions: employee mileage while undertaking activities for St Christopher's Hospice	**69.40**
Total gross emissions in metric tonnes CO2e	**630.43**
Intensity ratio metric tonnes CO2e per staff FTE	**1.68**

Quantification and reporting methodology

We have followed the 2019 HM Government Environmental Reporting Guidelines. We have also used the GHG Reporting Protocol – Corporate Standard and have used the 2020 UK Government's Conversion Factors for Company Reporting.

Intensity measurement

The chosen intensity measurement ratio is total gross emissions in metric tonnes per staff FTE.

Measures taken to improve energy efficiency

Our new building St Christopher's CARE was completed during the year, and our old Education building was demolished.

St Christopher's CARE has been designed and built using the latest methods in energy efficiency. For example, this has resulted in St Christopher's CARE having:

- less than 50% the boiler capacity of the previous Education building, even though its footprint is more than 25% larger than of the previous Education building
- natural cooling in the majority of the new building
- LED lighting throughout the new building.

Principal risks and uncertainties

The Trustees, in conjunction with the Executive Team, follow a formal process to manage the risks faced by the hospice.

This process focuses on six potential areas of risk – strategic, financial, services, premises, workforce and information. Risks under each of these headings are assessed as to the severity of the risk to the organisation and accompanied with strategies to eliminate or mitigate the risk.

The risk management process is conducted at least annually and comprises the following:

1. Identification and review of key risks facing the organisation, accompanied by consideration of strategies/plans to be employed to mitigate risks by the Executive Team
2. Review of the updated risk register and the mitigation plans, by the Board of Trustees

3 Review and agreement of the risk register and mitigation plans by the Board of Trustees

4 Receipt of reports regarding progress and success of mitigation plans by the Board of Trustees.

This process has confirmed that key risks facing the organisation pertain to:

- Shortfalls in anticipated income, particularly from our shops (St Christopher's Trading Ltd) and voluntary income (our fundraising)
- A current gap in a normal year between levels of income received and expenditure incurred to run the organisation – including the level of NHS funding received for NHS contracted work
- Compliance with regulatory requirements, including a data breach
- Cyber-attacks such as corruption via computer viruses and other malware, in an ever-changing cyber security environment
- Not learning from COVID-19 (e.g. not maintaining the benefits of flexible working), and ongoing events outside of our control related to the virus

Actions intended to mitigate these risks include:

- Ongoing reviews of our trading and fundraising strategies
- Working closely with our local CCG to agree the future funding for our core NHS work
- A number of cross-organisational groups which report into our Quality and Governance Committee. These groups cover areas such as information governance and health and safety
- Upgrading our firewalls and putting remaining measures in place to achieve the IT security accreditation, Cyber Essentials Plus
- Organisational structures are in place to capture learnings from the prior period, and to ramp up our COVID-19 response should this be needed.

Risks associated with the United Kingdom's decision to leave the EU

The Trustees are continuing to assess the impact on the Charity of the United Kingdom's decision to leave the EU. The Charity has reviewed the potential risks to operations in the context of the Department of Health & Social Care's 'EU Exit Operational Readiness Guidance'. This exercise identified possible risks to the availability of some key drugs and supplies. Measures aimed at mitigating the potential impact of these risks have been considered.

The Trustees have also considered the impact of the ongoing economic and political uncertainty on the generation of income and will continue to hold reserves in order to mitigate potential income volatility.

Financial review

These financial statements include the results of St Christopher's Hospice and its trading subsidiaries, St Christopher's (Trading) Ltd and St Christopher's Personal Care Services Ltd, for the year ended 31 March 2021.

The charitable activities of St Christopher's Hospice are identified under five main headings in the Statement of Financial Activities:

- **Inpatient care**
- **Community care/outpatients**
- **Education and training**
- **Care at our centres**
- **Candle Child Bereavement Service.**

With the exception of education and training, the services provided to a patient could include one or more of these activities during the course of their care. Therefore, the cost of individual patient care may span across one or more of the charitable activities identified.

In addition to these charitable activities, St Christopher's Hospice has a retail company and a personal care company. The activity of these companies is shown on the Statement of Financial Activities as income/costs of trading companies.

For the year ended 31 March 2021, at an operational level, St Christopher's Hospice recorded net income, before other recognised gains and losses, of £4,470k (2020: £37k net expenditure).

Overall, the St Christopher's Hospice generated a net increase in funds of £6,464k (2020: net decrease in funds £1,080k). This was after recognising other unrealised gains and losses as follows:

1 **Unrealised gain from the investment portfolio of £2,162k (2020: unrealised loss of £1,286k) and a realised gain from the portfolio of £132k (2020: realised gain £335k)**

   Our investment portfolio managed by Cazenove Capital Management increased in value from £8,899k at March 2020 to £11,130k at March 2021. This increase in value was after the year started from a low base following turbulence in the market at the end of 2019-20 (driven by uncertainty and concerns as a result of the COVID-19 pandemic). We have not drawn down on our investment portfolio during 2020-21 and there are no plans to draw down on it during 2021-22.

   Our bank deposits reduced from £6,135k at March 2020 to £3,051k at March 2021.

   Taking our investment portfolio and bank deposits together, our overall investments reduced from £15,035k at March 2020 to £14,181k at March 2021.

2 **An actuarial loss from the FRS 102 valuation of the St Christopher's Hospice (1985) Pension Scheme of £300k (2020: loss £92k)**

   The FRS 102 actuarial loss is a result of four factors:

   - An actuarial loss on the scheme liabilities of £1,412k (2020: gain of £1,079k) which arises from a change in the demographic and financial assumptions
   - An actuarial gain on the scheme investments portfolio of £1,314k (2020: loss of £456k)
   - Experience gains arising on the plan liabilities of £111k (2020: losses of £141k)
   - A loss of £313k to reflect the amount of the pension surplus that is not recoverable (2020: loss of £574k).

Income

Total income received in 2020-21 increased by 20% to £27,337k (2020: £22,850k). Details of how this has arisen are shown below.

Donations and gifts

Income from donations and gifts for the year was £4,242k, only slightly lower than the prior year figure of £4,355k. When taking into consideration the lack of opportunity to hold fundraising events in public due to COVID-19 restrictions, this is evidence of the generosity of our local community at a time of need, and our Fundraising Team's ability to be innovative in finding new ways of fundraising.

Legacies

Legacies income for the year of £6,104k was significantly higher than last year (2020: £3,743k) and bucks the general trend of decline seen in recent years. As such, we envisage this may be an unusually high year for legacy income, and so we have ringfenced this money to

support us in future years when legacy income may not be so strong. See note 16 to the accounts.

NHS contracts

Income from the NHS of £12,607k is significantly higher than that of the prior year (2020: £7,923k).

This money includes £3,459k from NHS England, this being St Christopher's Hospice's share of the COVID-19 relief money given to hospices nationwide, and £894k of one-off funding from NHS South East London CCG which has been allocated in a newly created designated fund to support us in future years of expected future challenge.

Income and performance of trading subsidiaries

The core activity of St Christopher's (Trading) Ltd is the operation of shops (24 shops as at March 2021), whose purpose is to raise money for the Charity to spend on charitable activities. All shops had to close for seven months of the year to abide by public health guidelines related to COVID-19.

This meant that revenue from St Christopher's (Trading) Ltd decreased by 35% to £2,716k (2020: £4,194k) and it made an overall loss of £84k (2020: a profit of £1,376k). In previous years, prior to COVID-19, St Christopher's (Trading) Ltd has been highly profitable and effective in bringing in money for the Charity.

The revenue and net loss would have been significantly worse had we not received COVID-19 relief funding via retail grants from local London councils and the Coronavirus Job Retention Scheme (furlough).

Our shops reopened on 12 April 2021, with good trade seen to date. The directors are confident that (uncertainties around COVID-19 allowing) St Christopher's (Trading) Ltd will revert to generating surplus money for the Charity.

The revenue from St Christopher's Personal Care Services Ltd has decreased to £525k (2020: £1,437k). A net loss of £222k was made during 2020-21, which follows a loss in the previous year of £272k.

After successive years of operating losses, the directors of St Christopher's Personal Care Services Ltd decided the company should cease trading during 2020-21. The majority of activities ended in September 2020, with one remaining contract completing in March 2021. As such, the accounts for St Christopher's Personal Care Services Ltd incorporated within this Annual Report and Accounts have been prepared on a basis other than going concern.

Investment income

Investment income was less than last year at £143k (2020: £339k) due to market conditions during 2020-21, and our investment portfolio focusing on investments with capital growth, rather than those which are income generating.

Education, fees and other income

Education, fees and other income of £1,000k was higher than last year (2020: £859k) and includes new contracts to deliver bereavement support.

Expenditure

Total expenditure in 2020-21 was £22,867k, which was similar to the prior year figure (£22,887k). The reduction in costs from closing St Christopher's Personal Care Services Ltd has been offset by year-on-year salary increases.

The costs of raising voluntary income were similar to last year at £1,536k (2020: £1,561k).

Staff costs

Staff costs account for 78% of the total costs of the organisation (2020: 76%). During the year the total average FTE headcount decreased to 376 (2020: 391) following the closure of St Christopher's Personal Care Services Ltd. Further details of staff costs and staffing levels can be found in note 7 to the accounts.

Costs of generating funds

The cost of generating funds includes fundraising, publicity expenditure, and the expenses of the trading companies.

Reserves policy and going concern

St Christopher's Hospice holds reserves to improve both the financial security and the operational flexibility

of the hospice. The Trustees believe that the level of reserves held should be sufficient to cover the risks to which the Charity is exposed, including safeguarding against volatility of key income streams.

The Trustees have taken a risk-based approach to assess the level of free reserves required by the Charity. They have also reviewed this alongside the level needed to operate effectively. Taking both aspects into account, the Trustees consider that St Christopher's Hospice should aim to hold free reserves equivalent to 9–12 months of its operating expenditure, currently equivalent to £17.2m–£22.9m. The Charity considers free reserves to be the total of unrestricted Group reserves, less designated funds. The designated funds held by the Charity are listed in the notes to the accounts and include a fund to manage the variability of year on year legacy income, a fund to ring-fence money for anticipated future financial challenges as a result of COVID-19, funds for capital commitments and the net book value of fixed assets. On this basis, free reserves as at 31 March 2021 were £20,693k (2020: £17,555k, when calculated on the same basis), or the equivalent to 10.9 months of operating expenditure (2020: 9.2 months of operating expenditure when calculated on the same basis).

The Trustees have reviewed the financial position of the Charity and its subsidiaries, its forecast cash flows, and its liquidity position for the foreseeable future. This includes the impact of risks as described in the principal risks and uncertainties section below. The Trustees believe that the charity has adequate resources to continue in operational existence for the foreseeable future. As a result, they continue to adopt the going concern basis of accounting in preparing the Annual Report and Accounts.

Investment policy

The Board of Trustees has approved an investment policy and strategy, which is supervised by the Investment Committee.

The primary objective of the investment policy is to provide financial security and stability for the operation of St Christopher's Hospice. The investment policy also recognises that the organisation is exposed to the risk of a sharp fall in its income due to the variability of legacy income and donations, and to uncertainty of funds from the NHS. To reflect this position, the Investment Committee with Cazenove Capital Management continues to invest in a varied portfolio, in accordance with an asset allocation approved by the Investment Committee.

The Bank of England base rate is at a historically low level of 0.1%, and, as a result, interest rates on the cash deposits set out in note 10 to the accounts have shown little improvement. Investment income has decreased to £143k (2020: £339k) of which £9k (2020: £76k) is interest from cash deposits and £134k (2020: £263k) is dividend and interest income from the Cazenove Capital Management charity portfolio.

The investment policy states that, among other things, Trustees will not invest directly in a company if it carries out activities which are directly contrary to the Hospice's purposes and, therefore, against its interests and those of its beneficiaries.

The Investment Committee encourages responsible investment. They are committed to appointing Investment Managers who are actively involved in applying Environmental, Social and Governance (ESG) criteria across the investment process. Our existing investment manager, Cazenove Capital Management, has demonstrated that they apply these criteria.

Statement of Board's responsibilities

The Board members (directors for the purposes of Company law) who served during the year, and the period for which they were in office, are detailed on page 62.

The Board is responsible for preparing the Report of the Board of Trustees and the financial statements in accordance with applicable law and regulations.

Company law requires the Board to prepare financial statements for each financial year. Under that law the Board has elected to prepare the financial statements in accordance with United Kingdom Generally Accepted Accounting Practice (United Kingdom Accounting Standards and applicable law). Under company law the Board must not approve the financial statements unless they are satisfied that they give a true and fair view of

the state of affairs of the Charity and of the result of the Group for that period. In preparing these financial statements, the Board are required to:

- select suitable accounting policies and then apply them consistently
- make judgments and accounting estimates that are reasonable and prudent
- follow applicable accounting standards
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the group will continue in business.

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

Statement as to disclosure of information to auditors

The Trustees have taken all necessary steps to make themselves aware, as Trustees, of any relevant audit information and to establish that the auditors are aware of that information.

As far as the Trustees are aware, there is no relevant audit information of which the Charity's auditors are unaware.

Signed on behalf of The Board of Trustees

Neil Goulden
Chair of the Board of Trustees
St Christopher's Hospice, 51-59 Lawrie Park Road,
London SE26 6DZ
22 July 2021

Independent auditor's report to the Members and Trustees of St Christopher's Hospice

Opinion

We have audited the financial statements of St Christopher's Hospice (the 'charity') for the year ended 31 March 2021 which comprise the Consolidated Statement of Financial Activities, the Consolidated and Charity Balance Sheets, the Consolidated Statement of Cash Flows and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including 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 charity and the group's affairs as at 31 March 2021 and of the group's 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 Strategic Report and Trustees' Report, other than the financial statements and our auditor's report thereon. The trustees are responsible for the other information. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

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

We have nothing to report in this regard.

Opinions on other matters prescribed by the Companies Act 2006

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

- the information given in the Trustees' Report which includes the Strategic Report and the Directors' Report prepared for the purposes of company law, for

the financial year for which the financial statements are prepared is consistent with the financial statements; and

- the Strategic Report and the Directors' Report included within the Trustees' Report has been prepared in accordance with applicable legal requirements.

Matters on which we are required to report by exception

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

Responsibilities of Trustees

As explained more fully in the trustees' responsibilities statement set out on page 33, the trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the trustees are responsible for assessing the 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 charity 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 the financial statements.

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. Based on our understanding of the charity and its activities, we identified that the principal risks of non-compliance with laws and regulations related to the Charities Act 2011, UK tax legislation, pensions legislation, employment regulation and health and safety regulation, anti-bribery, corruption and fraud, money laundering, non-compliance with implementation of government support schemes relating to COVID-19, and we considered the extent to which non-compliance might have a material effect on the financial statements. We also considered those laws and regulations that have a direct impact on the preparation of the financial statements, such as the Companies Act 2006 and the Charities Statement of Recommended Practice.

We evaluated the trustees' and management's incentives and opportunities for fraudulent manipulation of the financial statements (including the risk of override of controls) and determined that the principal risks were related to posting manual journal entries to manipulate financial performance, management bias through judgements and assumptions in significant accounting estimates, in particular in relation to use of restricted

and endowment funds, and significant one-off or unusual transactions.

Our audit procedures were designed to respond to those identified risks, including non-compliance with laws and regulations (irregularities) and fraud that are material to the financial statements. Our audit procedures included but were not limited to:

- Discussing with the trustees and management their policies and procedures regarding compliance with laws and regulations;
- Communicating identified laws and regulations throughout our engagement team and remaining alert to any indications of non-compliance throughout our audit; and
- Considering the risk of acts by the charity which were contrary to applicable laws and regulations, including fraud.

Our audit procedures in relation to fraud included but were not limited to:

- Making enquiries of the trustees and management on whether they had knowledge of any actual, suspected or alleged fraud;
- Gaining an understanding of the internal controls established to mitigate risks related to fraud;
- Discussing amongst the engagement team the risks of fraud; and
- Addressing the risks of fraud through management override of controls by performing journal entry testing.

There are inherent limitations in the audit procedures described above and the primary responsibility for the prevention and detection of irregularities including fraud rests with management. As with any audit, there remained a risk of non-detection of irregularities, as these may involve collusion, forgery, intentional omissions, misrepresentations or the override of internal controls.

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

Use of the audit report

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

Stephen Mills
Senior Statutory Auditor
for and on behalf of Mazars LLP
Chartered Accountants and Statutory Auditor
6 Sutton Plaza, Sutton Court Road, Sutton, Surrey SM1 4FS
3 September 2021

Consolidated statement of financial activities for the year ended 31 March 2021

	Notes	Unrestricted funds Discontinuing Operations £'000	Unrestricted funds Continuing Operations £'000	Unrestricted funds Total £'000	Restricted funds Total £'000	2021 Total £'000	2020 Total £'000
Income from							
Donations and gifts		–	3,753	3,753	489	4,242	4,355
Legacies		–	6,089	6,089	15	6,104	3,743
Charitable activities							
NHS funding for patient care	**2**	–	9,148	9,148	3,459	12,607	7,923
Education, fees and other income	**3**	–	1,000	1,000	-	1,000	859
Other trading activities							
Income of trading companies	**4**	525	2,716	3,241	-	3,241	5,631
Investment income		–	143	143	-	143	339
Total income		525	22,849	23,374	3,963	27,337	22,850
Expenditure on							
Raising voluntary income		–	1,536	1,536	–	1,536	1,561
Trading companies	**4**	747	2,800	3,547	–	3,547	4,527
		747	4,336	5,083	–	5,083	6,088
Charitable activities							
Inpatient care		–	9,084	9,084	1,802	10,886	10,415
Community care/outpatients		–	2,361	2,361	1,953	4,314	3,853
Education and training		–	1,023	1,023	235	1,258	1,244
Care at our centres		–	1,136	1,136	10	1,146	1,106
Candle Child Bereavement Service		–	125	125	55	180	181
		–	13,729	13,729	4,055	17,784	16,799
Total expenditure	**5**	747	18,065	18,812	4,055	22,867	22,887
Net (expenditure)/income before transfers	**6**	(222)	4,784	4,562	(92)	4,470	(37)
Transfer between funds (relate to capital programme)		–	69	69	(69)	–	–
Net (expenditure)/income before other recognised gains and losses		(222)	4,853	4,631	(161)	4,470	(37)
Other recognised gains/(losses)							
Actuarial (losses) on defined benefit pension scheme	**19**	–	(300)	(300)	–	(300)	(92)
Gains/(losses) on Discontinuing Operations	**4**	222	(222)	–	–	–	–
Gains on investments: realised	**10**	–	132	132	–	132	335
Gains/(losses) on investments: unrealised	**10**	–	2,162	2,162	–	2,162	(1,286)
Net movement in funds		–	6,625	6,625	(161)	6,464	(1,080)
Total funds at 1 April 2020	**15, 16, 17**	–	27,649	27,649	3,274	30,923	32,003
Total funds at 31 March 2021	**15, 16, 17**	–	34,274	34,274	3,113	37,387	30,923

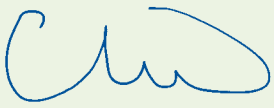
All recognised gains and losses are included in the consolidated statement of financial activities. St Christopher's Hospice and St Christopher's (Trading) Ltd transactions are derived from continuing activities. St Christopher's Personal Care Service Ltd transactions are discontinuing with no further activity expected for 2021-22. An analysis of the results by company is shown in Note 4. The allocation between unrestricted and restricted funds for 2019-2020 is shown in Note 18.

Consolidated balance sheet as at 31 March 2021

	Notes	2021 £'000	2020 £'000
Fixed assets			
Tangible fixed assets	**9**	10,114	8,487
Intangible assets	**9**	255	355
Investments	**10**	14,181	15,035
		24,550	23,877
Current assets			
Debtors	**11**	7,396	5,541
Interest-bearing bank accounts		6,910	3,232
		14,306	8,773
Creditors			
Amounts falling due within one year	**12**	(1,469)	(1,727)
Net current assets		12,837	7,046
Net assets excluding pension scheme asset		37,387	30,923
Defined benefit pension scheme asset	**19**	–	–
Net assets including pension scheme asset		37,387	30,923
Funds			
Restricted	**15**	3,113	3,274
Unrestricted			
General		20,771	8,650
Designated	**16**	13,581	18,993
Non-charitable		(78)	6
Total unrestricted funds excluding pension asset		34,274	27,649
Pension scheme asset		–	–
Total unrestricted funds including pension asset		34,274	27,649
Total funds		37,387	30,923

The financial statements were approved by The Board of Trustees on 22 July 2021 and signed on its behalf by:

Neil Goulden
Chair of Trustees



Catherine McDonald
Trustee

Balance sheet: St Christopher's Hospice entity only as at 31 March 2021

	Notes	2021 £'000	2020 £'000
Fixed assets			
Tangible fixed assets	**9**	9,903	8,266
Intangible assets	**9**	255	355
Investments	**10**	14,581	15,434
		24,739	24,055
Current assets			
Debtors	**11**	7,453	5,664
Interest-bearing bank accounts		6,637	2,819
		14,090	8,483
Creditors			
Amounts falling due within one year	**12**	(1,359)	(1,621)
Net current assets		12,731	6,862
Net assets excluding pension scheme asset		37,470	30,917
Defined benefit pension scheme asset	**19**	–	–
Net assets including pension scheme asset		37,470	30,917
Funds			
Restricted	**15**	3,113	3,274
Unrestricted			
General		20,776	8,650
Designated	**16**	13,581	18,993
Total unrestricted funds excluding pension asset		34,357	27,643
Pension reserve		–	–
Total unrestricted funds including pension asset		37,470	27,643
Total funds		37,470	30,917

The financial statements were approved by The Board of Trustees on 22 July 2021 and signed on its behalf by:

Neil Goulden
Chair of Trustees

Catherine McDonald
Trustee

Consolidated statement of cash flows for the year ended 31 March 2021

	Notes	2021 £'000	2020 £'000
Net cash generated by/(used in) operating activities	A	2,594	(645)
Cash flows from investing activities			
Interest and dividends received		143	339
Purchase of tangible and intangible fixed assets		(2,076)	(2,552)
Increase in investments		3,017	141
Net cash generated by/(used in) investing activities		1,084	(2,072)
Change in cash and cash equivalents in the year		3,678	(2,717)
Cash at the beginning of the year		3,232	5,949
Cash at the end of the year		6,910	3,232

Reconciliation of net movement in funds to net cash outflow from operating activities	Notes	2021 £'000	2020 £'000
	A		
Net income/(expenditure)		6,464	(1,080)
Interest and dividends receivable		(143)	(339)
Depreciation and amortisation charges		532	541
Unrealised (gain)/loss on investments		(2,162)	1,286
Loss on the disposal of fixed assets		16	–
(Increase) in debtors		(1,855)	(972)
(Decrease)/Increase in creditors		(258)	125
Increase/(Decrease) in defined benefit pension scheme deficit		–	(206)
Net cash generated by/(used in) operating activities		2,594	(645)

Notes to the financial statements for the year ended 31 March 2021

1 Principal accounting policies

1.1 Basis of accounting

The financial statements are prepared under the historical cost basis and comply with the Companies Act 2006. The financial statements have been prepared in accordance with the Statement of Recommended Practice (*Accounting and Reporting by Charities*), issued in October 2019 (FRS 102), other relevant provisions of the memorandum and articles of association, and with applicable UK accounting standards.

The figures for both years reflect the full adoption of FRS (Financial Reporting Standard) 102.

The Charity meets the definition of a public benefit entity under FRS 102.

1.2 Going concern

These financial statements have been prepared on a going concern basis.

The ongoing status of the COVID-19 pandemic and how it affects the Charity has a level of uncertainty.

However, after carrying out scenario analysis to plan for the impact on both our operating surplus/(deficit) and overall reserves of a range of possible COVID-19 scenarios over the short to medium term, the Trustees are confident that the Charity can meet its liabilities as they fall due.

The Trustees therefore consider that the Charity holds sufficient reserves for the going concern basis to be appropriate.

1.3 Basis of consolidation

The statement of financial activities and balance sheet consolidate the financial statements of the charity, its wholly owned subsidiaries St Christopher's (Trading) Ltd and St Christopher's Personal Care Services Ltd.

No separate Statement of Financial Activities is presented for the charity as permitted by Section 408 of the Companies Act 2006 and SORP (FRS 102). The net income dealt with in the charity's Statement of Financial Activities for the year ended 31 March 2021 was £6,553k (2020: £1,258k net expenditure)

1.4 Fund accounting

Restricted income funds

Restricted funds are funds subject to specific restricted conditions requested by the donors. Where the restriction relates to the purchase of a capital item then the condition will be treated as having been met when the asset is purchased.

Unrestricted income funds

Unrestricted funds comprise accumulated surpluses and deficits on general funds. They are available for use at the discretion of the Board in furtherance of the general charitable objects.

Designated funds are amounts included within Unrestricted Funds that have been set aside by the Board for particular purposes. Designated funds include:

- **Fixed assets** This reflects the net book value of unrestricted tangible and intangible fixed assets
- **Pension liability** These are designated funds held against the defined benefit pension scheme deficit. The amount shown relates to the deficit from the most recent Triennial valuation, less pension contributions made following this valuation, less the liability disclosed under FRS 102
- **St Christopher's Fund** This represents investments held and managed by Cazenove Capital Management for the purposes of generating income. This money was previously included as a designated fund at 31 March 2020. Following a review of our Reserves Policy, this money has been included as part of general funds from 2020-21
- **St Christopher's CARE** These are designated monies to fund the construction of our new Centre for Awareness and Response to End of Life (St Christopher's CARE, formerly known as the Learning Hub)
- **Ward refurbishment** These are designated monies to fund a modest wards refurbishment at the Sydenham site
- **Future Challenge Fund** This is a designated fund to allow for future years of financial challenge expected as a result of COVID-19
- **Legacies Fund** To set aside legacies income, when it has been higher than budgeted in a particular year. This money will be released to general funds over future years, and in doing so will backfill for any futures years, when legacies income is lower than budgeted.

Details on the level of funds in each element are provided in notes 15 and 16.

1.5 Income

Income represents the total income receivable during the year comprising donations, legacies, NHS contracts, grants, fees, interest and other income generated during the year.

Legacies must be recognised when the following conditions are confirmed:

- There has been grant of probate
- The executors have established that there are sufficient funds to pay the legacy
- Any conditions attached to the legacy are either within the control of the Charity or have been met.

NHS contracts and fees are recognised when it can reasonably be assumed that the Charity is entitled to the income and the amount can be estimated with sufficient reliability.

Income from trading companies arises from two sources:

- Sales of goods in charity shops
- Provision of personal care services.

1.6 Expenditure

The costs of inpatient care, community care/outpatients, education and training, care at our centres, Candle Child Bereavement Service and cost of raising voluntary income comprise expenditure both directly and indirectly attributable to the activity concerned. Indirectly attributable costs such as physiotherapy and social work have been allocated to activities using an appropriate cost allocation basis.

Support costs have been allocated to activities on the basis of staff time spent. Governance costs, which are charitable, relate to the stewardship of the Charity's assets, organisational administration and compliance with constitutional and statutory requirements.

1.7 Taxation

St Christopher's Hospice is a registered charity. Income and chargeable gains, which are applied for charitable purposes, are exempt from liability to direct taxation. Income tax recoverable in respect of donations under Gift Aid, investment income and legacies is included with the income to which it relates.

1.8 Capitalisation and depreciation

Tangible fixed assets are capitalised with a £1k de minimis limit where relevant.

If items are individually less than £1k, but are part of a project greater than £10k (e.g. as part of an agreed budget) then these are also capitalised as part of this project.

Equipment is not capitalised if it is less than £1k per individual item, and purchased on a rolling basis.

Assets under construction are not depreciated. Depreciation and amortisation are calculated to write off the cost of tangible fixed assets on a straight-line basis over the expected useful lives of the assets concerned at the following rates:

Leasehold buildings:	over the term of the lease
Freehold buildings:	2% straight-line basis
Freehold refurbishments and fixtures and fittings:	10% straight-line basis
Equipment and motor vehicles:	10% to 33⅓% straight-line basis
Motor vehicles:	33⅓% straight-line basis
Intangible assets:	33⅓% straight-line basis

1.9 Pension schemes

St Christopher's Hospice contributes to the St Christopher's Hospice (1985) Pension Scheme, a defined benefit scheme. The pension scheme is administered by Trustees and is separate from the hospice. See note 19 for further details.

St Christopher's Hospice also contributes to a defined contribution scheme. Contributions in respect of the year are charged to the Statement of Financial Activities in the year to which they relate.

St Christopher's Hospice has an arrangement with the NHS that permits members of the NHS final salary pension scheme to maintain their membership when they are subsequently employed by the hospice. The NHS currently

provides a subsidy on the contributions payable by the hospice. This subsidy along with the contribution from St Christopher's Hospice, are recognised in the Statement of Financial Activities in the year to which they relate.

1.10 Operating leases

Rentals payable under operating leases are charged on a straight-line basis over the term of the lease.

1.11 Estimation uncertainty and key judgements

Key judgements and areas of uncertainty are considered to be the defined pension liability and accrued legacy income.

Please refer to note 19 for a detailed review of the relevant assumptions in relation to the defined benefit pension liability.

Accrued legacy income is calculated on the basis of the valuation of the net estate of each testator, based on management's best estimate. The source of estimation uncertainty is that the valuation of the estates at a point in time is inherently uncertain and can change significantly over a short period of time.

The carrying amount of legacies accrued (note 11) as at 31 March 2021 was £4,554k (2020: £3,345k).

2 National Health Service

	2021 £'000	2020 £'000
NHS contracts	9,148	7,923
NHSE funding (restricted see note 15)	3,459	–
	12,607	7,923

3 Education, fees and other income

	2021 £'000	2020 £'000
Education	115	271
Fees and other income	885	588
	1,000	859

4 Group undertakings

Summary of results of group undertakings:

2021	St Christopher's Hospice £'000	St Christopher's (Trading) Ltd £'000	St Christopher's Personal Care Services Ltd £'000	Group total £'000
Income	24,096	2,716	525	27,337
Expenditure	(19,320)	(2,800)	(747)	(22,867)
Surplus/(loss) for the year	4,776	(84)	(222)	4,470
Other recognised gains	1,772	–	222	1,994
Distributions	–	–	–	–
Net income/(expenditure) for the year	6,548	(84)	–	6,464

The net assets of St Christopher's Trading Ltd were £322k at 31 March 2021. The net assets of St Christopher's Personal Care Services Ltd were £0 at 31 March 2021. Activities for St Christopher's Personal Care Services Ltd constitute discontinuing operations.

2020	St Christopher's Hospice	St Christopher's (Trading) Ltd	St Christopher's Personal Care Services Ltd	Group total
	£'000	£'000	£'000	£'000
Income	17,219	4,194	1,437	22,850
Expenditure	(18,360)	(2,818)	(1,709)	(22,887)
(Deficit)/profit/(loss) for the year	(1,141)	1,376	(272)	(37)
Other recognised (losses)/gains	(1,409)	–	366	(1,043)
Distributions	1,290	(1,290)	–	–
Net (expenditure)/income for the year	(1,260)	86	94	(1,080)

The net assets of St Christopher's Trading Ltd were £407k at 31 March 2020. The net assets of St Christopher's Personal Care Services Ltd were £0 at 31 March 2020.

St Christopher's Hospice has three wholly owned subsidiaries:

Company	Activity	Company number
St Christopher's (Trading) Ltd	Operation of charity shops for the hospice	02604519
St Christopher's Personal Care Services Ltd	Provision of personal care services ceased trading during 2020-21	08872082
SCH (Trading) Ltd	Dormant	02055682

The directors of St Christopher's Personal Care Services Ltd have decided the company should cease trading during 2020-21. As such, the accounts and the value of the assets for St Christopher's Personal Care Services Ltd have been prepared on a basis other than going concern.

Related party transactions

During the year the company entered into transactions with related parties. Transactions entered into and balances outstanding are as follows:

	2021 St Christopher's (Trading) Ltd	2021 St Christopher's Personal Care Services Ltd	2020 St Christopher's (Trading) Ltd	2020 St Christopher's Personal Care Services Ltd
	£'000	£'000	£'000	£'000
Re-charged to related parties				
Management charge	72	–	66	–
Salaries	1,572	679	1,403	1,520
Leasehold depreciation	40	–	38	–
Other costs	56	43	21	122
Group debt adjustments	–	(222)	–	(366)
Re-charged by related parties				
Shop fit-out costs	–	–	(71)	–
Total	1,740	500	1,457	1,276
Balance owed at 31 March	451	0	847	243

The intercompany balance owed by St Christopher's Personal Care Services Ltd to St Christopher's Hospice was reduced by £222k during the financial year, with operations within St Christopher's Personal Care Services Ltd being discontinued.

This reduction represented two elements:

- £105k of costs incurred by St Christopher's Personal Services Ltd in undertaking charitable activities on behalf of the hospice
- £117k of its remaining debt to bring the total amount owed St Christopher's Hospice as at 31 March 2021 to £0.

5 Expenditure

	Direct costs £'000	Support costs £'000	Total 2021 £'000	Total 2020 £'000
Costs of raising funds				
Fundraising and publicity	1,399	137	1,536	1,561
Trading activities	3,547	-	3,547	4,527
	4,946	137	5,083	6,088
Charitable activities				
Inpatient care	9,974	912	10,886	10,415
Community care/outpatients	4,226	88	4,314	3,853
Education and training	1,152	106	1,258	1,244
Care at our centres	1,110	36	1,146	1,106
Candle Child Bereavement Service	172	8	180	181
Total cost of charitable activities	16,634	1,150	17,784	16,799
Total expenditure	21,580	1,287	22,867	22,887

Included in the costs above are governance costs of £41k (2020: £43k).

Analysis of support costs

	2021 £'000	2020 £'000
Facilities management	228	268
IT management	433	378
Finance	271	249
Personnel	355	330
	1,287	1,225

Support costs have been allocated to activities on the basis of staff time spent.

6 Net income/(expenditure)

	2021 £'000	2020 £'000
Net income/(expenditure) is stated after charging/(crediting)		
Auditors' remuneration: audit fee	30	32
Auditors' remuneration: tax and tagging compliance services	12	4
Auditors' remuneration: pension	5	5
Depreciation and amortisation	532	541
Interest receivable	(143)	(339)

7 Staff costs

	2021 £'000	2020 £'000
Salaries and wages	13,154	12,397
Social security costs	1,152	1,082
Pension costs (see note 19 below)	1,235	977
Staff costs of the Charity	15,541	14,456
Staff costs of trading activities (includes pension costs of £90k in 2021 (2020: £116k)).	2,319	3,049
	17,860	17,505

Payments were made under a voluntary severance scheme of £196k (2020: £34k).

The average number of employees during the year (excluding bank) was:

	Head count 2021	Head count 2020	FTEs 2021	FTEs 2020
Hospice (includes support staff)	273	275	241	225
Community care/outpatients	76	55	45	48
Education and training	12	13	10	10
Care at our centres	6	6	5	5
Personal Care Services	26	67	20	53
Charity shops	63	59	55	50
	456	475	376	391

The number of employees whose earnings fell within the band:

	2021	2020
£60,000 to £69,999	10	10
£70,000 to £79,999	5	6
£80,000 to £89,999	2	1
£90,000 to £99,999	-	1
£100,000 to £109,999	1	-
£110,000 to £119,999	1	-
£120,000 to £129,999	1	1
£150,000 to £159,999	1	1

Pension contributions of £178k (2020: £169k) were paid in respect of these employees.

The Board of Trustees considers the key management personal to be the Executive Team of 6.20 FTEs (2020: 6.18 FTEs) and the total benefit paid to the key management personnel was £710k (2020: £684k).

8 Board of Trustees

Remuneration and reimbursed expenses

No remuneration was paid to members of the Board during during either 2020-21 or 2019-20. No expenses were reimbursed to Trustees (2020: £nil). Costs incurred in respect of recruiting Trustees were £15,000 (2020: £nil).

St Christopher's Hospice paid £2,100 (2020: £2,100) for indemnity insurance for the Trustees of the St Christopher's Hospice (1985) Pension Scheme.

St Christopher's Hospice also paid £5,769 (2020: £3,164) for Trustee Liability Insurance for its Trustees.

Donations from Trustees

The Trustees have donated a total of £81k (2020: £50k) during the year. Of this, £5k was restricted to St Christopher's CARE and £13k for the provision of PPE to support care during the COVID-19 pandemic.

9.1 Tangible fixed assets

	Freehold land and buildings £'000	Assets under construction £'000	Freehold refurb-ishment £'000	Leasehold land and buildings £'000	Equipment and motor vehicles £'000	Total £'000
Group						
Cost						
At 1 April 2020	6,533	4,383	3,786	452	554	15,708
Additions	–	1,630	–	–	407	2,037
Transfers	6,013	(6,013)	–	–	–	–
Disposals	(151)	–	–	(18)	–	(169)
At 31 March 2021	12,395	–	3,786	434	961	17,576
Depreciation						
At 1 April 2020	3,189	–	3,578	263	191	7,221
Amount provided	152	–	56	41	144	393
Disposal	(144)	–	–	(8)	–	(152)
At 31 March 2021	3,197	–	3,634	296	335	7,462
Net book values						
At 31 March 2021	9,198	–	152	138	626	10,114
At 31 March 2020	3,344	4,383	208	189	363	8,487
Charity						
Cost						
At 1 April 2020	6,214	4,383	3,786	452	520	15,355
Additions	–	1,630	–	–	407	2,037
Transfers	6,013	(6,013)	–	–	–	–
Disposal	(151)	–	–	(18)	–	(169)
At 31 March 2021	12,076	–	3,786	434	927	17,223
Depreciation						
At 1 April 2020	3,085	–	3,578	263	163	7,089
Amount provided	146	–	57	40	140	383
Disposals	(144)	–	–	(8)	–	(152)
At 31 March 2021	3,087	–	3,635	295	303	7,320
Net book values						
At 31 March 2021	8,989	–	151	139	624	9,903
At 31 March 2020	3,129	4,383	208	189	357	8,266

Caritas House, the freehold property in Orpington, was revalued by Jones Lang Lasalle in April 2014. Under the transitional arrangements of FRS 102, the valuation at the date of transition is considered to be the deemed cost of this property.

9.2 Intangible fixed assets

	Software £'000
Group and Charity cost	
At 1 April 2020	793
Additions	39
At 31 March 2021	832
Amortisation	
At 1 April 2020	438
Amount provided	139
At 31 March 2021	577
Net book values	
At 31 March 2021	255
At 1 April 2020	355

The net book value at 31 March 2021 represents fixed assets used for:

	Freehold land and buildings £'000	Leasehold land and buildings £'000	Equipment and motor vehicles £'000	Software £'000	Total £'000
Charitable purposes					
Inpatient care	5,301	–	408	166	5,875
Community care/outpatients	1,389	–	91	38	1,518
Education and training	1,780	–	39	16	1,835
Care at our centres	600	–	25	10	635
	9,070	–	563	230	9,863
Charity shops	280	138	63	25	506
	9,350	138	626	255	10,369

10 Investments

	Group 2021 £'000	Group 2020 £'000	Charity 2021 £'000	Charity 2020 £'000
At 1 April 2020	15,034	16,462	15,434	16,862
Additions	3,334	3,377	3,334	3,377
Disposals	(3,479)	(3,007)	(3,479)	(3,007)
Increase in market value: realised	132	335	132	335
Increase/(decrease) in market value: unrealised	2,162	(1,286)	2,162	(1,286)
	17,183	15,881	17,583	16,281
Movement in cash balance	(3,002)	(847)	(3,002)	(847)
At 31 March 2021	14,181	15,034	14,581	15,434
Analysed as follows:				
Funds managed by Cazenove Capital Management				
UK equities	1,626	2,065	1,626	2,065
International equities	6,599	3,505	6,599	3,505
Bonds	763	486	763	486
Property	898	1,054	898	1,054
Multi asset	461	1,113	461	1,113
Alternatives: other and commodities	537	511	537	511
Cash	246	165	246	165
	11,130	8,899	11,130	8,899
Other investments				
Bank deposits	3,051	6,135	3,051	6,135
Investment in subsidiary undertakings (below)	–	–	400	400
	3,051	6,135	3,451	6,535
Total investments	14,181	15,034	14,581	15,434

The historical cost of the investments managed by Cazenove Capital Management is £8,957k (2020: £9,040k).

The charity owns all of the 400,000 £1 ordinary shares in St Christopher's (Trading) Ltd and the £1 share capital in St Christopher's Personal Care Services Ltd. SCH (Trading) Ltd is a dormant subsidiary.

The directors of St Christopher's Personal Care Services Ltd decided the company should cease trading during 2020-21. As such, these financial statements have been prepared on a basis other than that of a going concern.

11 Debtors

	Group 2021 £'000	Group 2020 £'000	Charity 2021 £'000	Charity 2020 £'000
Trade debtors	1,053	502	1,053	325
Legacies receivable	4,554	3,345	4,554	3,345
Sundry debtors, prepayments and accrued income	1,789	1,694	1,395	904
Amount due from St Christopher's (Trading) Ltd	–	–	451	847
Amount due from St Christopher's Personal Care Services Ltd	–	–	–	243
	7,396	5,541	7,453	5,664

12 Creditors: amounts falling due within one year

	Group 2021 £'000	Group 2020 £'000	Charity 2021 £'000	Charity 2020 £'000
Trade creditors	227	307	223	303
Payroll taxes and social security	492	465	492	465
Other creditors and accruals	634	799	528	697
Income received in advance	116	156	116	156
	1,469	1,727	1,359	1,621

13 Lease commitments

The Group leases a number of properties and motor vehicles under operating leases.

	Land and buildings 2021 £'000	Land and buildings 2020 £'000	Motor vehicles and office equipment 2021 £'000	Motor vehicles and office equipment 2020 £'000
Operating leases payments to be made				
Within one year	689	737	57	67
In two to five years	2,550	2,315	53	111
Over five years	1,869	1,914	–	–
	5,108	4,966	110	178

14 Financial commitments

As at 31 March 2021, the following approved commitments were authorised by the Board of Trustees:

- Up to £661k in respect of the construction of the new Centre for Awareness and Response to End of Life (St Christopher's CARE). This will be funded through restricted and designated funds
- Up to £500k in respect of ward refurbishments. This will be funded through restricted and designated funds.

15 Restricted funds

	Balance 1 April 2020 £'000	Income £'000	Expenditure £'000	Transfers £'000	Balance 31 March 2021 £'000
Bereavement Help Points	12	5	17	–	–
Better Lives: Improving EOL in Social Housing	–	21	–	–	21
Candle Child Bereavement Service	–	55	55	–	–
Carers	–	77	–	–	77
Caritas House Building Fund	1,144	–	25	–	1,119
Cascade Project	95	–	60	–	35
Celebrating Nursing	–	10	9	–	1
Choose Home	54	28	54	–	28
Coach4care	29	–	–	–	29
Community Action	41	40	29	–	52
Community Action Dementia	–	15	5	–	10
COVID–19 Community	–	27	16	–	11
COVID–19 PPE	–	11	11	–	–
Dementia–focused training and education	59	–	1	–	58
Education (Bursaries)	17	16	1	–	32
Inpatient equipment	30	19	44	–	5
St Christopher's CARE: Capital Fund	–	100	31	(69)	–
NHSE funding	–	3,459	3,459	–	–
Nightingale Fellowship	100	–	6	–	94
Palliative Works	–	24	2	–	22
Research: Stern Legacy	323	–	43	–	280
Support for St Christopher's CARE	1,144	–	–	–	1,144
Virtual Bereavement Projects	–	10	3	–	7
Walking App	–	15	4	–	11
Wards refurbishment project	32	–	1	–	31
Women in Fellowship Fund	123	–	93	–	30
Young Adults Group	3	6	9	–	–
Other funds	68	25	77	–	16
Total restricted funds	3,274	3,963	4,055	(69)	3,113

Research: Stern legacy

St Christopher's Hospice was the beneficiary of a restricted legacy for use in research into myeloma and end of life palliative care. Accordingly, the funds have been used to establish a research project into myeloma at the Cicely Saunders International research institution and are being used to fund other research projects in end of life care.

Caritas House

This fund was originally established to cover the cost of building Harris HospisCare premises and offices. It now reflects the net book value of Caritas House.

St Christopher's CARE

This fund represents monies received to build St Christopher's CARE. Transfers within this fund relate to capital expenditure on St Christopher's CARE during the year.

Support for St Christopher's CARE

This fund is restricted to supporting expenditure for St Christopher's CARE in its first years of operating.

NHSE funding

NHSE awarded funding for St Christopher's Hospice to provide support to people with complex needs during the COVID-19 pandemic. This being:

- bed capacity and community support from April 2020 to July 2020
- bed capacity and community support from November 2020 to March 2021.

16 Designated funds

	Balance at 1 April 2020 £'000	New designations and transfers £'000	Balance at 31 March 2021 £'000
Fixed assets	7,699	1,550	9,249
Pension liability	395	(300)	95
St Christopher's Fund	8,899	(8,899)	–
St Christopher's CARE	2,000	(1,630)	370
Wards refurbishment	–	469	469
Future Challenge Fund	–	894	894
Legacies Fund	–	2,504	2,504
	18,993	(5,412)	13,581

Fixed assets: this reflects the net book value of unrestricted tangible and intangible fixed assets.

Pension liability: these are designated funds held against the defined benefit pension scheme deficit. The amount shown relates to the deficit from the most recent triennial valuation, less pension contributions made following this valuation, less the liability disclosed under FRS 102.

St Christopher's Fund: this represents investments held and managed by Cazenove Capital Management for the purposes of generating income. This money was previously included as a designated fund at 31 March 2020. Following a review of our Reserves Policy, this money has been included as part of general funds from 2020-21.

St Christopher's CARE: these are designated monies to fund the construction of St Christopher's CARE.

Wards refurbishment: these are designated monies to fund a modest wards refurbishment at the Sydenham site.

Future Challenge Fund: this is a designated fund to allow for future years of financial challenge expected as a result of COVID-19.

Legacies Fund: to set aside legacies income when it has been higher than budgeted in a particular year. This money will then be released to general funds over future years, and in doing so will backfill for any futures years, when legacies income is lower than budgeted.

17 Analysis of group net assets between funds

	Pension scheme £'000	Other specific funds £'000	Fixed assets £'000	Working capital £'000	Total £'000
Restricted income	–	1,994	1,119	–	3,113
Unrestricted income					
Designated	95	4,237	9,249	–	13,581
General	–	–	–	20,693	20,693
	95	6,231	10,368	20,693	37,387

18 Consolidated statement of financial activities for the year ended 31 March 2020

	Unrestricted funds £'000	Restricted funds £'000	2020 Total £'000	2019 Total £'000
Income from				
Donations and gifts	3,769	586	4,355	8,133
Legacies	3,743	–	3,743	3,949
Charitable activities				
NHS funding for patient care	7,923	–	7,923	6,652
Education, fees and other income	859	–	859	793
Other trading activities				
Income of trading companies	5,631	–	5,631	4,737
Investment income	339	–	339	346
Total income	22,264	586	22,850	24,610
Expenditure on				
Raising voluntary income	1,561	–	1,561	1,728
Trading companies	4,527	–	4,527	4,013
	6,088	–	6,088	5,741
Charitable activities				
Inpatient care	10,356	59	10,415	9,576
Community care/outpatients	3,699	154	3,853	3,617
Education and training	1,113	131	1,244	1,473
Care at our centres	1,020	86	1,106	936
Candle Child Bereavement Service	138	43	181	163
	16,326	473	16,799	15,765
Total expenditure	22,414	473	22,887	21,506
Net (expenditure)/income before transfers	(150)	113	(37)	3,104
Transfer between funds (relate to capital programme)	2,053	(2,053)	–	–
Net income/(expenditure) before other recognised gains and losses	1,903	(1,940)	(37)	3,104
Other recognised gains/losses				
Actuarial (losses)/gains on defined benefit pension scheme	(92)	–	(92)	(239)
Gain on investments: realised	335	–	335	945
Loss on investments: unrealised	(1,286)	–	(1,286)	(779)
Net movement in funds	860	(1,940)	(1,080)	3,031
Total funds at 1 April 2019	26,789	5,214	32,003	28,972
Total funds at 31 March 2020	**27,649**	**3,274**	**30,923**	**32,003**

19 Pension schemes

a St Christopher's Hospice (1985) scheme

The hospice operates a pension scheme, the St Christopher's Hospice (1985) Pension Scheme, which provides benefits based on final pensionable salary. The assets of the scheme are held separately from those of the Hospice. The scheme was closed to new members in April 2002 and closed to future accruals from March 2010.

Contributions are charged to the Statement of Financial Activities so as to spread the cost of pensions over employees' working lives. The pension charge for the year was £300k (2020: £300k).

Triennial valuation

The contribution rates are determined by a qualified actuary on the basis of triennial valuation. The results of the last triennial valuation at 31 March 2019 showed that the value of the scheme's assets was £10,413k (2016: £8,600k) and that this represented 94% (2016: 87%) funding level, with a deficit of £695k (2016: £1,297k). The actuary confirmed that the minimum funding requirement regulations had been met.

This most recent actuarial valuation showed a deficit of £695k. This was subsequently updated to 31 March 2021 and showed a surplus of £579k. The hospice has agreed with the Trustees that it will aim to eliminate the deficit over a period of five years and two months from 1 July 2017 by the payment of annual contributions of £300,000. In addition and in accordance with the actuarial valuation, the hospice has agreed with the Trustees that it will meet the expenses of the scheme and levies payable to the Pension Protection Fund.

FRS (Financial Reporting Standard) 102: Disclosure Report

FRS 102 is fully effective for accounting periods beginning on or after 1 January 2015. The statement of financial activities, the balance sheet and the disclosures in the notes to these financial statements meet the requirements of FRS 102. The major assumptions used by the actuary are shown below.

Present values of defined benefit obligation, fair value of assets and defined benefit asset (liability)

	Period ended 31 March 2021 £'000	Period ended 31 March 2020 £'000	Period ended 31 March 2019 £'000
Fair value of plan assets	11,736	10,190	10,414
Present value of defined benefit obligation	(10,832)	(9,616)	(10,620)
Unrecognised surplus	(904)	(574)	–
Defined benefit asset/(liability) to be recognised	–	–	(206)

Reconciliation of opening and closing balances of the defined benefit obligation

	Period ended 31 March 2021 £'000	Period ended 31 March 2020 £'000
Net defined benefit obligation at start of period	9,616	10,620
Interest expense	227	241
Acturial losses/(gains)	1,301	(938)
Benefits paid	(312)	(307)
Defined benefit obligation at end of period	10,832	9,616

Reconciliation of opening and closing balances of the fair value of plan assets

	Period ended 31 March 2021 £'000	Period ended 31 March 2020 £'000
Fair value of plan assets at start of period	10,190	10,414
Interest income	244	239
Acturial gains/(losses)	1,314	(456)
Contributions by the hospice	300	300
Benefits paid	(312)	(307)
Fair value of plan assets at end of period	11,736	10,190

The actual return on the plan assets over the period ended 31 March 2021 was £1,158k.

Defined benefit costs recognised in net (expenditure)/income

	Period ended 31 March 2021 £'000	Period ended 31 March 2020 £'000
Net interest cost	–	2

Defined benefit costs recognised in other gains and losses

	Period ended 31 March 2021 £'000	Period ended 31 March 2020 £'000
Return on plan assets (excluding amounts included in net interest cost): gain/(loss)	1,314	(456)
Experience gains and losses arising on the plan liabilities: gain/(loss)	111	(141)
Effects of changes in the demographic and financial assumptions underlying the present value of the plan liabilities: (loss)/gain	(1,412)	1,079
Effects of changes in the amount of surplus that is not recoverable (excluding amounts included in net interest cost): (loss)	(313)	(574)
Total amount recognised in other gains and losses	(300)	(92)

Assets

	Period ended 31 March 2021 £'000	Period ended 31 March 2020 £'000	Period ended 31 March 2019 £'000
Diversified growth assets	3,688	3,219	3,266
Corporate bonds	2,360	2,025	1,525
Index-linked gilts	–	664	520
Liability-driven investments	2,845	3,013	3,671
Overseas equity	2,722	1,128	1,298
Cash and other	121	151	134
Total assets	11,736	10,190	10,414

None of the fair values of the assets shown above include any direct investments in the hospice's own financial instruments or any property occupied by, or other assets used by, the hospice.

Assumptions

	Period ended 31 March 2021 % pa	Period ended 31 March 2020 % pa	Period ended 31 March 2019 % pa
Discount rate	2.10	2.40	2.30
Inflation (RPI)	3.50	2.90	3.50
Allowance for revaluation of deferred pensions of RPI or 5% p.a. if less	3.50	2.90	3.50
Allowance for pensions in payment increases of RPI or 5% p.a. if less	3.50	2.90	3.50
Allowance for commutation of pension for cash at retirement	75%	75%	75%

The mortality assumptions adopted at 31 March 2021 imply the following life expectancies at age 65 years:

Male retiring in 2021:	22.1
Female retiring in 2021:	23.8
Male retiring in 2041:	23.4
Female retiring in 2041:	25.4

The best estimate of contributions to be paid by the hospice to the scheme for the period commencing 1 April 2021 is £300k.

b St Christopher's defined contribution scheme

The St Christopher's defined contribution scheme was set up in September 2001. In April 2010 the St Christopher's Personal Pension (2010) defined contribution scheme was established and members of the existing defined contribution scheme transferred to this new scheme with effect from January 2011. The contribution of the hospice was on average 21% for former members of the St Christopher's (1985) scheme and 5% for all other members, which represented a total charge for the year of £432k (2020: £427k) to the St Christopher's GPP (2010) defined contribution scheme.

c NHS Pension Scheme

Details of the scheme are provided in note 1.9. The contribution of the hospice was 14.38%, which was offset by a 27% subsidy on the contribution. This represented a net charge for the year of £529k (2020: £497k).

20 Post balance sheet event

There remains a level of uncertainty as to how future stages of the COVID-19 pandemic may play out.

If further lockdowns have to take place, we would expect this to result in less income from gifts and donations and our retail subsidiary during 2021-22.

However, the last year has shown that our wide range of income streams gives St Christopher's Hospice a level of stability. As such, we would not expect all income streams to be adversely affected.

What we are going to do next

Along with the rest of the world, our work during the recovery from COVID-19 will be alongside continued uncertainty as to future stages of the pandemic. However, we want to build on the momentum for change and the transformation that we've made in the last year.

Outlined below are our plans for what we will do in the second year of our three-year strategy for 2020-23.

We will commit to building on our learnings to ensure we continuously evaluate what we need to stop, start and continue. In the coming year, we will:

- Continue virtual consultations to reflect patient and family preferences
- Continue our work with care homes, including the addition of a new rehabilitation offer
- Build on the success of the Community Aid initiative and investigate emerging opportunities for our Community Action Team
- Ensure the health and wellbeing of our workforce with the implementation of a new strategy, flexible working policy and ongoing wellbeing initiatives
- Invest in IT to ensure that we're technologically sound as an organisation and always looking out for new opportunities in this space
- Invest in innovation to address inequalities and gaps in provision, particularly for our bereavement services
- Work with the NHS to confirm our role and funding to support it going forward
- Make the most of the new St Christopher's CARE and its state-of-the-art facilities to educate for the transformation of end of life care going forward.

A word from our new Chair

I was drawn to working with St Christopher's because of its reputation for clinical excellence and innovation.

I am excited about the opportunity to support the increased influence of St Christopher's, positioning the hospice as a major player in national conversations about death, dying, palliative care and bereavement support.

I also see the potential for international influence with the role of St Christopher's CARE to educate about and promote the hospice movement, as well as continue to be a leading voice in clinical innovation wand palliative education.

As one of the leading providers of palliative care, St Christopher's is already punching well above its weight and has clearly thrived during the last year, despite extraordinary challenges. In the coming year, I am keen to ensure St Christopher's has a sustainable recovery post-COVID-19 across all aspects of the organisation. At the heart of this is ensuring that we continue to have an outstanding delivery of care.

While we're aware that this is not exhaustive of everyone that we need to thank, to all of the supporters mentioned on pages 60-61, please accept our gratitude.

I'd also like to extend a personal thank you to my predecessor, Morgan Jones, for 19 years of dedicated service to the St Christopher's Board of Trustees, the last seven years as Chair.

Whether you're a donor, a volunteer, a member of staff or someone in one of the communities we serve, we could not have survived, much less thrived, over the last year without you. Thank you for being part of the St Christopher's journey so far and here's to the future!

A huge thank you to all our supporters

We are hugely grateful to the individuals, corporate sponsors, trusts and all those who have so kindly chosen to remember St Christopher's in their Wills. Thanks to you, we've been able to provide care and support to approximately 7,000 people in the last year. Thank you for making this possible.

Trusts

Agape Family Trust
Barton Trust
BBC Children in Need
Conrad Hilton Foundation
Croydon Charitable Foundation
Fb Coales No 4 (Family)Trust
Hospice Aid UK
Jacob Charitable Trust
John and Sally Reeve Charity
L&Q Foundation
Linnell Charitable Trust
Lloyd Eist Foundation
Lloyd's of London Tercentenary Foundation
Masonic Charitable Foundation
Merriman Charitable Foundation
Mr & Mrs A M Hendry Charitable Trust
Mrs F B Laurence Charitable Trust
Mrs Maud Van Norden's Charitable Foundation
R.U.B. White Charitable Trust
National Lottery Community Fund
Penelope Gluckstein Trust
Sabina Sutherland Charitable Trust
ShareGift
South East London Breast Cancer Trust (SELBCT)
The Anthony and Elizabeth Mellows Charitable Settlement
The Ardwick Trust
The Arthur and Audrey Silkin Charitable Trust
The B & P Glasser Charitable Trust
The Burdett Trust for Nursing
City Bridge Trust, the funding arm of The City of London Corporation's charity, Bridge House Estates
The Douglas-Morris Charitable Trust
The Dulwich Almshouse Charity
The Elizabeth Frankland Moore and Star Foundation
The Eversley Charitable Trust
The Florabella Trust
The G D Herbert Charitable Trust
The Gail Wilson Charitable Trust
The Hedley Foundation
The Horner Family Charitable Fund
The Jack Petchey Foundation
The Joan Wyatt Charitable Trust
The John Greenwood Trust
The John Horseman Trust
The Kate Wilson Oliver Trust
The Kathleen Hannay Memorial Charity
The Kathleen Smith Foundation
The Lynn Foundation
The Mageni Trust
The Margaret and David Walker Trust
The Michael and Anna Wix Charitable Trust
The Milton-Lloyd Charitable Trust
The P M Charitable Trust
The Rachel Fund
The Rest-Harrow Trust
The Robert Holman Memorial Trust
The Stanley Foster Charitable Trust
The Sundarama Trust
The Thomas J. Horne Memorial Trust
The Timothy Franey Charitable Foundation
The Toler Foundation
The Charity of Sir Richard Whittington
The Wolfson Foundation
TK Maxx and Homesense Foundation

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Direct Line Group
Dulwich & Sydenham Hill Golf Club
Dulwich Champagne Reception Committee
Dulwich Friends of St Christopher's
Dulwich Sports Club
Future Directions Financial Services Ltd
Grips Wheels and Tyres
Guardian Angel
IdentityE2E
Langley Park Golf Club Limited
Link Asset Services
Marks & Spencer – Beckenham
Masonic Province Of West Kent
Maybrey Precision Castings Ltd
Mohabir Solicitors
Morgan Hunt Ltd
Mudano
Pedder
Ray Jones Roofing Ltd
RIG Healthcare Recruit
Roseberys Auction House
Rotary Club of Addiscombe & Shirley (prev Croydon East)
Rotary Club Of Beckenham
Rotary Club of Langley Park
Rotary Club of Ravensbourne
Rotary Club Of West Wickham
Shortlands Golf Club
St Anthony's Catholic Primary School
The Albert Tavern Public House
The Institute of Our Lady of Mercy
TK Maxx
Waitrose - Bromley South
West Kent Golf Club
West Norwood Cemetery and Crematorium
Willis Towers Watson
Women in Fellowship

Who's who at St Christopher's

Executive Team

Heather Richardson
Joint Chief Executive

Rob George[1]
Medical Director

Amanda Mayo
Care Director

John Vickers Director of Finance & Corporate Services

Shaun O'Leary
Joint Chief Executive

Mandy Piper-Killick
Director of People & Organisational Development

Jan Noble
Director of Quality & Innovation

Amy Proffitt[2]
Head of Medicine & Clinical Care

Trustees

Neil Goulden
Chair[3]

Terrence Collis
Trustee

Daniel Kelly
Trustee

Dee Townsend
Trustee[4]

Jane Walters
Vice Chair

Nick Diamond
Trustee[4]

John King
Trustee[4]

Morgan Jones
Chair[5]

Gill Baker
Trustee[6]

Joanna Donaldson
Trustee

Catherine McDonald
Trustee

Barbara Noble
Trustee[5]

Vivian Bazalgette
Trustee

Tony Hunter
Trustee[4]

Nita Rogers
Trustee

Richard Saunders
Trustee[5]

Eleanor Brown
Trustee

Ian Judson
Trustee

Lila Thompson
Trustee

1 Up to 31 May 2021
2 From 1 May 2021
3 Appointed 1 April 2021
4 Appointed 12 November 2020
5 Retired 31 March 2021
6 Retired 31 July 2021

Patron

HRH Princess Alexandra

President

Lord Ian McColl

Vice Presidents

Dr Gillian Ford CB
Sheila Hancock OBE
Dame Pauline Harris DBE DL
Colin Russell
John Rhodes
Rodney Bennion OBE
Dr Sam Klagsbrun
Phyllis Cunningham CBE
Barbara Richardson
Ruth Saunders
Dr Catherine Dent
Dr Tyrrell Evans

Company Secretary

Shaun O'Leary

Registered office

51-59 Lawrie Park Road,
Sydenham, London SE26 6DZ

Bankers

HSBC Bank plc
165 Fleet Street, London EC4A 2DY

Independent auditor

Mazars LLP
2nd Floor, 6 Sutton Plaza,
Sutton Court Road,
Sutton, Surrey SM1 4FS

Registration numbers

Registered charity number 210667
Registered company number 00681880
VAT registration number 523613961

StChristopher's
More than just a hospice

If you would like this information in a different format, such as audio tape, braille or large print, or in another language, please speak to the Communications Team on **020 8768 4500** or email **communications@stchristophers.org.uk**.

StChristopher's
More than just a hospice

Sydenham site
51-59 Lawrie Park Road, Sydenham, London SE26 6DZ

Orpington site
Caritas House, Tregony Road, Orpington BR6 9XA

Telephone **020 8768 4500**
Email **info@stchristophers.org.uk**
www.stchristophers.org.uk
stchrishospice

Registered charity 210667 registered with the Fundraising Regulator
Registered company number 00681880
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