

Annual report and accounts 2020-21



St Christopher's Hospice
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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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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 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.

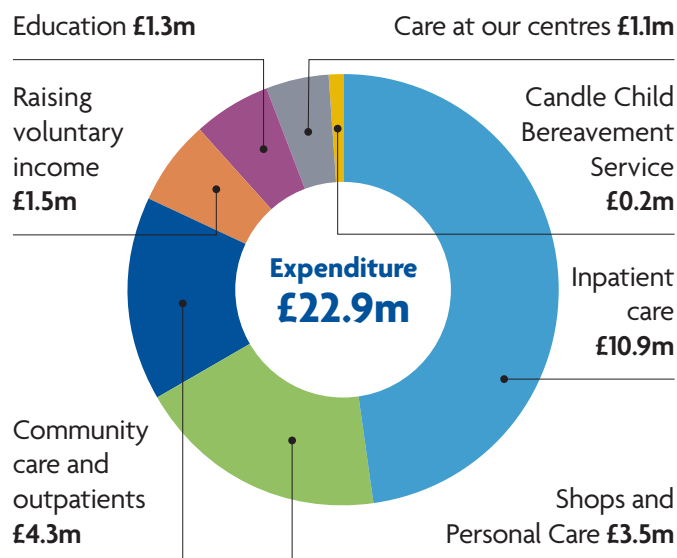
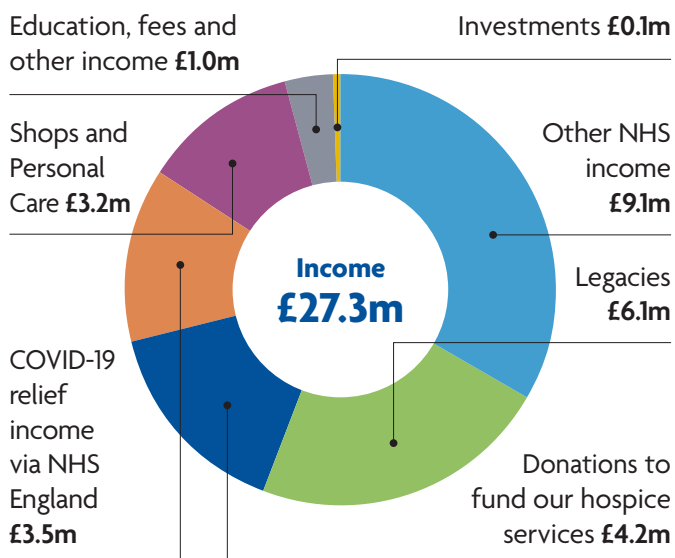
Where our money comes up from

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 home visits we made

10,664



Number of carers and family members we supported (approximate)

2,000



Number of complementary therapies we delivered

1,432



Number of people who attended one of our learning events

3,275



Donations weight in tons that our shops received and sorted through

1,680



Number of inpatient admissions

768



Number of rehabilitation sessions we delivered

6,142



Number of countries we provided education and training to (274 delegates)

48



Number of people who donated money to us

23,589



Number of Bereavement Service contacts

3,118



Number of staff, including bank staff

504



Our hospice lottery raised a grand total of

£454,247



Number of community groups and organisations who donated money to us

665



Total cared for in the community

4,993



Number of active volunteers

745



Number of lottery players

5,947



The cost every year to run our services

£22.9m



Number of out of hours visits to patients or families

1,944



Percentage of our active volunteers who have been with us for more than five years (approximate)

20%



Number of customers who visited our 26 shops

220,000+



The amount we have to fundraise every year is

£15m*

*In a normal year

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

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



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.



Choose Home is provided by trained volunteers, carers and registered nurses who are supported by consultant nurses, clinical nurse specialists and doctors, over phone and video, as needed



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

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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.

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.



"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.

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.

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

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

		Unrestricted funds Discontinuing Operations	Unrestricted funds Continuing Operations	Unrestricted funds Total	Restricted funds Total	2021 Total £'000	2020 Total £'000
	Notes	£'000	£'000	£'000	£'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
		<u>24,550</u>	<u>23,877</u>
Current assets			
Debtors	11	7,396	5,541
Interest-bearing bank accounts		6,910	3,232
		<u>14,306</u>	<u>8,773</u>
Creditors			
Amounts falling due within one year	12	(1,469)	(1,727)
Net current assets		<u>12,837</u>	<u>7,046</u>
Net assets excluding pension scheme asset		<u>37,387</u>	<u>30,923</u>
Defined benefit pension scheme asset	19	—	—
Net assets including pension scheme asset		<u>37,387</u>	<u>30,923</u>
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		<u>34,274</u>	<u>27,649</u>
Pension scheme asset		—	—
Total unrestricted funds including pension asset		<u>34,274</u>	<u>27,649</u>
Total funds		<u>37,387</u>	<u>30,923</u>

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
		<u>24,739</u>	<u>24,055</u>
Current assets			
Debtors	11	7,453	5,664
Interest-bearing bank accounts		6,637	2,819
		<u>14,090</u>	<u>8,483</u>
Creditors			
Amounts falling due within one year	12	(1,359)	(1,621)
Net current assets		<u>12,731</u>	<u>6,862</u>
Net assets excluding pension scheme asset		<u>37,470</u>	<u>30,917</u>
Defined benefit pension scheme asset	19	—	—
Net assets including pension scheme asset		<u>37,470</u>	<u>30,917</u>
Funds			
Restricted	15	3,113	3,274
Unrestricted			
<i>General</i>		20,776	8,650
<i>Designated</i>	16	13,581	18,993
Total unrestricted funds excluding pension asset		<u>34,357</u>	<u>27,643</u>
Pension reserve		—	—
Total unrestricted funds including pension asset		<u>37,470</u>	<u>27,643</u>
Total funds		<u>37,470</u>	<u>30,917</u>

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	—
	<u>12,607</u>	<u>7,923</u>

3 Education, fees and other income

	2021 £'000	2020 £'000
Education	115	271
Fees and other income	885	588
	<u>1,000</u>	<u>859</u>

4 Group undertakings

Summary of results of group undertakings:

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/(loss) for the year	<u>4,776</u>	<u>(84)</u>	<u>(222)</u>	<u>4,470</u>
Other recognised gains	1,772	—	222	1,994
Distributions	—	—	—	—
Net income/(expenditure) for the year	<u>6,548</u>	<u>(84)</u>	<u>—</u>	<u>6,464</u>

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
	<u>4,946</u>	<u>137</u>	<u>5,083</u>	<u>6,088</u>
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	<u>16,634</u>	<u>1,150</u>	<u>17,784</u>	<u>16,799</u>
Total expenditure	<u>21,580</u>	<u>1,287</u>	<u>22,867</u>	<u>22,887</u>

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
	<u>1,287</u>	<u>1,225</u>

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)	<u>1,235</u>	<u>977</u>
Staff costs of the Charity	15,541	14,456
Staff costs of trading activities (includes pension costs of £90k in 2021 (2020: £116k)).	<u>2,319</u>	<u>3,049</u>
	<u>17,860</u>	<u>17,505</u>

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
	<u>456</u>	<u>475</u>	<u>376</u>	<u>391</u>

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 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
	<u>1,469</u>	<u>1,727</u>	<u>1,359</u>	<u>1,621</u>

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	—	—
	<u>5,108</u>	<u>4,966</u>	<u>110</u>	<u>178</u>

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 design- ations 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
	<u>18,993</u>	<u>(5,412)</u>	<u>13,581</u>

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 future 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
	<u>95</u>	<u>6,231</u>	<u>10,368</u>	<u>20,693</u>	<u>37,387</u>

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				
<i>NHS funding for patient care</i>	7,923	—	7,923	6,652
<i>Education, fees and other income</i>	859	—	859	793
Other trading activities				
<i>Income of trading companies</i>	5,631	—	5,631	4,737
<i>Investment income</i>	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				
<i>Inpatient care</i>	10,356	59	10,415	9,576
<i>Community care/outpatients</i>	3,699	154	3,853	3,617
<i>Education and training</i>	1,113	131	1,244	1,473
<i>Care at our centres</i>	1,020	86	1,106	936
<i>Candle Child Bereavement Service</i>	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
Actuarial 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
Actuarial gains/(losses)	1,314	(456)
Contributions by the hospice	300	300
Benefits paid	(312)	(307)
Fair value of plan assets at end of period	<u>11,736</u>	<u>10,190</u>

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	<u>(300)</u>	<u>(92)</u>

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	<u>11,736</u>	<u>10,190</u>	<u>10,414</u>

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 and 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!



Neil Goulden
Chair of Trustees



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.

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Who's who at St Christopher's

Executive Team



Heather Richardson
Joint Chief Executive



Rob George¹
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 Proffitt²
Head of Medicine
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Neil Goulden
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Jane Walters
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Nick Diamond
Trustee⁴



John King
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Morgan Jones
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Eleanor Brown
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Ian Judson
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Lila Thompson
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- 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

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Company Secretary

Shaun O'Leary

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Sutton, Surrey SM1 4FS

Registration numbers

Registered charity number 210667
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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

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