



ST CHRISTOPHER'S HOSPICE
**ANNUAL REPORT
AND ACCOUNTS**
2023-24

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**“You matter because you are you and you
matter until the last moment of your life”**

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

A photograph of two Black women looking at a book together. The woman on the left is wearing a green headwrap and a colorful striped top. The woman on the right has long braids and is wearing a floral top. They are both smiling and looking at the book. The background is slightly blurred, showing what appears to be a community center or library.

ABOUT ST CHRISTOPHER'S

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

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

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

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

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

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

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

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



ENSURING WE ARE THERE WHEN YOU NEED US

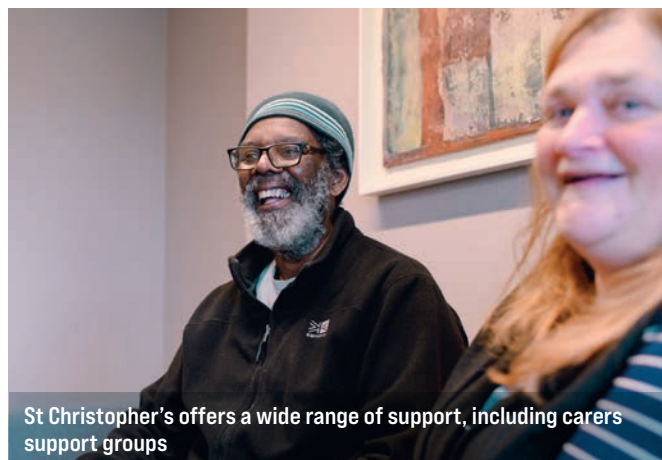
Welcome to the Annual Report and Accounts of St Christopher's Hospice.

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

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

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

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



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

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

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

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

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

NEIL GOULDEN
Chair of the Board of Trustees

OUR VISION, VALUES AND AMBITIONS

OUR VISION



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

OUR VALUES



Pioneering and bold



Of and for the community



Empowering and compassionate



One team working together



Expert



Stronger through partnerships

OUR STRATEGIC AMBITIONS



Tackle inequalities



Equip the future workforce



Fulfil a national and global leadership role



Create a sustainable business model



Tackle ethical issues

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



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

OUR YEAR IN SUMMARY

2023-24



We provided care and support for 6,459 people



We carried out 15,208 home visits



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



620,000 customers supported us in our shops



We provided care and support for 4,276 patients



We provided 5,199 outpatient appointments



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



1.3 million items were sold in our shops



We supported 466 children through our Candle bereavement service



People connected to learn with CARE almost 15,000 times



14,417 supporters donated money to us



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



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



CARE reached 92 countries worldwide



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



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



We supported 1,717 carers



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



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



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



We had 650 inpatient admissions



6,901 people attended CARE events

WHAT WE DO WITH YOUR MONEY

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

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

WHERE OUR MONEY COMES FROM

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

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

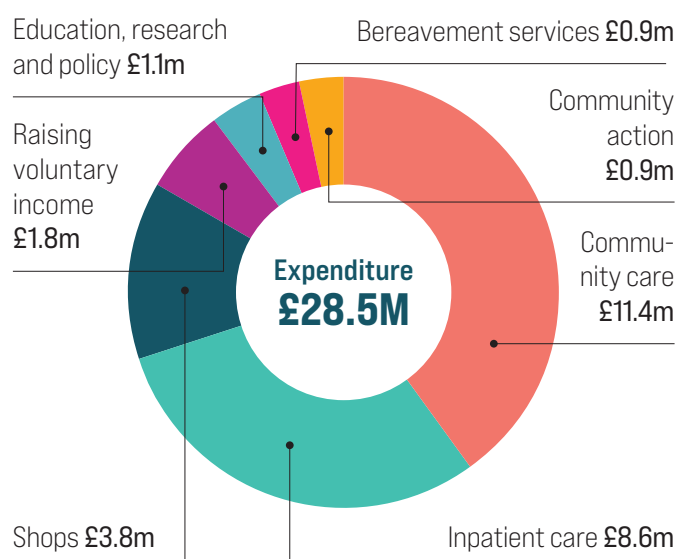
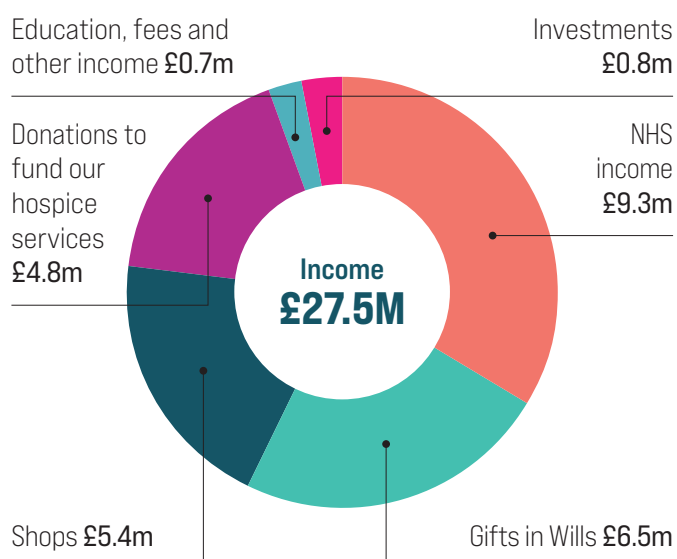
Our remaining income comprised £1.5m (6%) that we generated from education, fees and investments, and other income.

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

WHERE OUR MONEY GOES

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

Our full financial review starts on page 34.



WHAT PEOPLE SAY ABOUT US

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

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

Over the last year:

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

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

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

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

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

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



PROGRESS AGAINST OUR AMBITIONS

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

Tackle inequalities

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

SUPPORT FOR PATIENTS, FAMILIES AND CARERS

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

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

Panna's story

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

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

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

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

"Even before I had my diagnosis, I always told my boys that I would want them to bring me home. I don't want

to be anywhere else in the last stages of life and Helen, one of the consultant nurses at St Christopher's, has reassured me that she will be here with me when I need her. With everyone's support and help I can be strong and I can die in my own house."

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

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

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

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

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



Panna with her family at home

NEW REFERRAL PROCESS

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

HOMELESS PROJECT

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

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

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

WHAT MATTERS TO YOU

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

Alan's story

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

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

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

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

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



Alan and Louise at the game



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

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

VIRTUAL WARDS

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

DOULA SERVICE

As part of St Christopher’s ongoing commitment to overcome inequalities and inequities in health, and

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

MORTALITY MEETINGS

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

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

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

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

BEREAVEMENT SUPPORT

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

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

Jane's story

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

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

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

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

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

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

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

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

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



Jane at the Bereavement Help Point group



Isobel's story

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

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

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

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

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

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

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

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

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

TACKLE MISCONCEPTIONS ABOUT HOSPICE CARE AND SUPPORT

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

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

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

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



Our team of volunteers provide support and companionship at the hospices



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

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

BRINGING DEATH AND GRIEF TO MAINSTREAM MEDIA

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

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

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

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

UNDERSTAND AND RESPOND TO THE NEEDS OF OUR DIVERSE MINORITY COMMUNITIES

INEQUALITIES WORKING GROUP

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

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

SUPPORTING PEOPLE WITH LEARNING DISABILITIES

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

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

IMPROVING END OF LIFE SUPPORT IN PRISON

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

COMMUNITY ACTION OUTREACH WORK

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

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

The team has built close ties with schools in Lewisham and Southwark, initiating those conversations aimed at increasing death literacy in classrooms through workshops and talks. It has now established close, long-standing and consequently fruitful relationships with a number of organisations – including Croydon Mencap and the

borough's Black and Minority Ethnic (BME) Forum. The 2023 Young Changemakers leadership development programme for 16–18 year-olds from all five boroughs, successfully inspired 22 young people to think about how they could support people in their community and create change.

Faye and Jay's story

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

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

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

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



Faye and Jay at the Compassionate Chat



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

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

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

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



Equip the future workforce

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

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

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

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

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



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

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

DEVELOP NEW WAYS OF LEARNING TO REFLECT CONTEMPORARY PREFERENCES AND PRESSURES

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

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

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

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

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

CONTINUE DEVELOPING, AND THEN IMPLEMENT, OUR PEOPLE STRATEGY

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

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

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

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



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

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

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

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

SUPPORTING VOLUNTEERS

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

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

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



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



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

Marie's story

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

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

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

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

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



Fulfil a national and global leadership role

GLOBAL PALLIATIVE NURSING NETWORK

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

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

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

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

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

REPRESENTATION AT HOSPICE UK

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

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

SHARE EXPERTISE GENERATED THROUGH PRACTICE AND RESEARCH

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

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

INFLUENCE AND WORK IN PARTNERSHIP

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

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

Create a sustainable business model

REDUCE OUR ENVIRONMENTAL IMPACT

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

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

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

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

SUSTAINABLE WEDDING FAIR

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

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



Staff modelling at our Sustainable Wedding Fair



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

REFRESH OUR PREMISES TO MEET NEED AND TO INCREASE OUR WELCOME

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

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

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



A Bereavement Help Point at the hospice



A Breathlessness Management Group at the hospice

David's story

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

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

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

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

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

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

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

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



David will be running to support St Christopher's

ENSURE WE HAVE SUFFICIENT FINANCES TO MATCH OUR AMBITIONS

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

WHAT MATTERS MOST: A FUNDRAISING APPEAL WITH A DIFFERENCE

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

SHOPPING WITH A DIFFERENCE

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

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

Our network of stores is reliant on the support of volunteers to stay open. This amazing team works alongside paid staff to create welcoming environments to

visit, shop and donate to. In the last year this group grew to over 600 strong and so it felt fitting that we focus our efforts on thanking them for their significant contribution during Volunteers Week. Each shop team was visited by a member of our senior team who spent time hearing from and helping volunteers in their daily tasks and, of course, saying that all-important thank you.

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

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



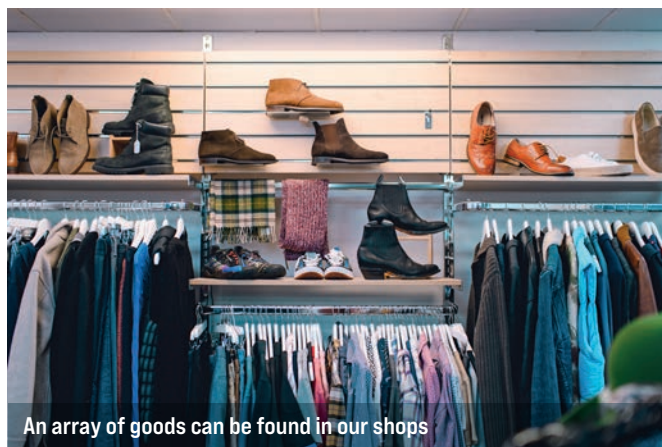
The opening of our new store in West Dulwich

Jacqui's story

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

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

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



An array of goods can be found in our shops

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

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



Our new-look East Dulwich shop

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SHOP PRE-LOVED

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

USE RESILIENT AND SECURE TECHNOLOGY THAT EMPOWERS PEOPLE

KEEPING OUR DATA SAFE

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

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

TECHNOLOGY AND CARE

Over the last year we've also explored ways to use technology to improve care and support. Our Digital Transformation Group has worked to improve the accessibility of the information we provide online and trialled the use of virtual reality on the wards. Virtual reality

is proven to help reduce pain, anxiety and feelings of fear and isolation for people with chronic conditions and is being used by growing numbers of hospice and palliative care providers for these reasons.

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



Robust and safe technology is key to providing outstanding care



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



Tackle ethical issues

TACKLE THE SENSITIVE TOPIC OF ASSISTED DYING

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

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

Rather than surveying attitudes or opinions, which to date has shown polarisation and doesn't allow for an understanding of why people think as they do, we adopted a qualitative research method to allow for deeper engagement. The research has captured the views of 50+ members of the public depicting a broad range of

experiences, occupations and perspectives. Over the coming year these findings will be developed into clear recommendations for the sector, policy makers and other interested parties to consider and respond to.

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

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

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

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

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

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

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

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

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



William's story

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

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

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

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

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



An ageing population increases demands on hospices



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

STRUCTURE, GOVERNANCE AND MANAGEMENT

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

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

HOW WE ARE GOVERNED

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

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

The Board delegates day-to-day management and decision making to the Executive Team, which is led by the Chief Executive. The Executive Team is required to act

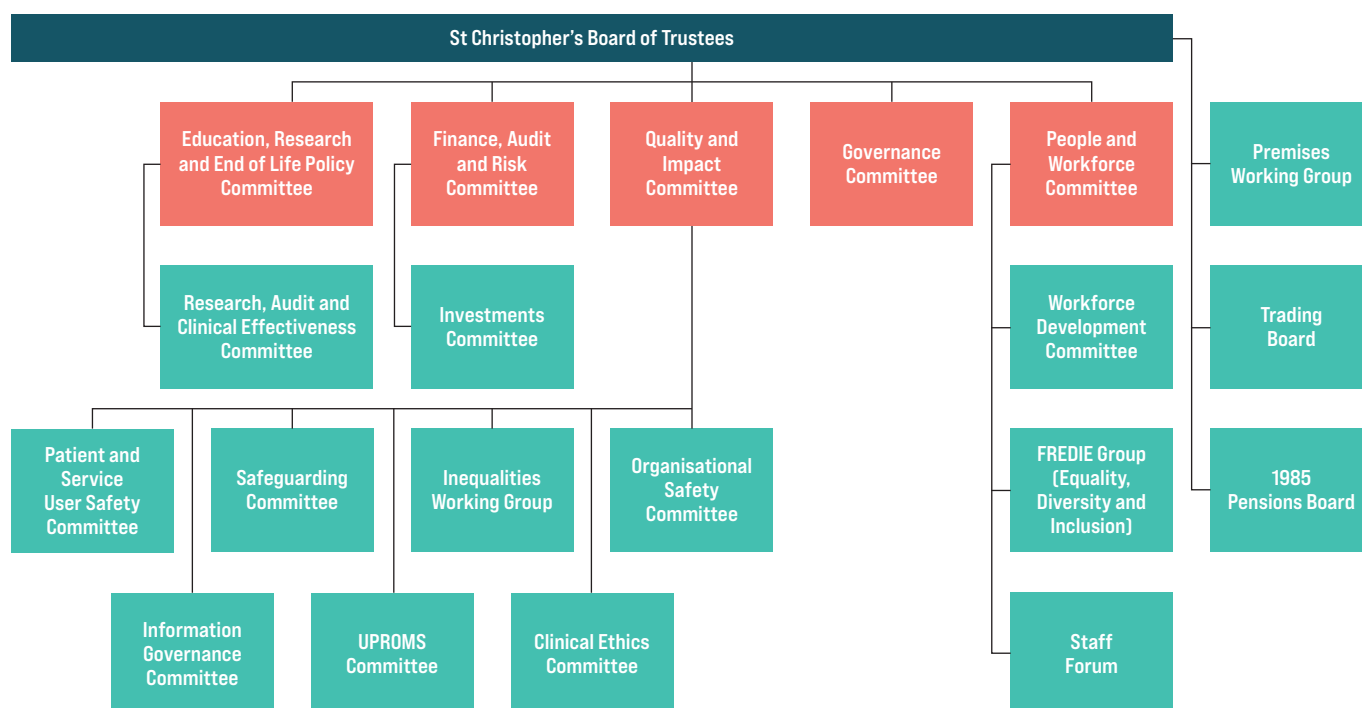
in furtherance of the Charity's strategy. The Board holds the Chief Executive and Executive Team to account for its leadership of the organisation.

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

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

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

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



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

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

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

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

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

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

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

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

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

The Charity ensures that it maintains a reputation for high standards of business conduct by having in place a range of policies and processes that promote corporate responsibility and ethical behaviour. Areas covered include

fundraising (our fundraising practices are discussed below), gifts, hospitality and anti-bribery, conflicts of interest, safeguarding, bullying and harassment, and whistleblowing. Policies are reviewed periodically.

APPOINTMENT OF NEW TRUSTEES

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

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

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

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

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

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

PUBLIC BENEFIT

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

FUNDRAISING DISCLOSURE

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

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

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

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

Our website outlines our complaints policy for the public. We received two fundraising complaints in 2023-24 (2022-23: three fundraising complaints). Our policy is to respond

to all complaints within 10 days. Serious complaints are escalated to our Executive Team and Trustees to consider lessons learnt. We report to the Fundraising Regulator and Gambling Commission on the totality of our complaints.

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

PAY POLICY FOR SENIOR STAFF

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

EQUALITY AND DIVERSITY

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

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

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

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

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

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

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

GENDER PAY GAP

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

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

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

EMPLOYEE INFORMATION

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

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

STREAMLINED ENERGY AND CARBON REPORTING (SECR)

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

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

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

QUANTIFICATION AND REPORTING METHODOLOGY

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

INTENSITY MEASUREMENT

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

MEASURES TO IMPROVE ENERGY EFFICIENCY

Total energy use decreased during 2023-24. Because of this, and an increase in headcount, the average carbon usage per employee also decreased from 1.60 CO₂e to 1.29 CO₂e per staff member.

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

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

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

A cross-organisational Green Group was launched during the year, and now meets quarterly. While St Christopher's already has many green initiatives in place, more can be done. The group has agreed on the following as its strategic aims to reduce its environmental impact further. Each of these strands has a programme of work of planned and potential activities:

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

Our ESOS stage 3 reporting to the Environment Agency will take place in 2024-25. This will provide an assessment of current environmental impact, as well as other initiatives to take forward.

PRINCIPAL RISKS AND UNCERTAINTIES

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

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

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

- 1 Identification and review of key risks facing the organisation, accompanied by consideration of

strategies/plans to be employed to mitigate risks by the Executive Team – this includes committee-level risk registers within the relevant committee

- 2 Review of the updated corporate risk register and the mitigation plans by the Finance, Audit & Risk Committee and the Board of Trustees
- 3 Review and agreement of the corporate risk register and mitigation plans by the Finance, Audit & Risk Committee and the Board of Trustees
- 4 Receipt of reports regarding progress and success of mitigation plans by the Finance, Audit & Risk Committee and the Board of Trustees.

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

- Failure to agree a level of NHS funding which pays for a sufficient proportion of NHS contract work; the NHS currently only pays for a minority of the work we do for them
- Failure to recruit/retain staff in a competitive recruitment market which impacts on business continuity
- Voluntary income growth does not keep up with annual ongoing expenditure, which means we make an unsustainable deficit
- Cyber-attacks such as corruption via computer viruses and other malware, in an ever-changing cyber security environment.

Actions intended to mitigate these risks include:

- Ongoing work to develop relationships with local commissioners and key influencers within the health system
- Listening to and addressing staff feedback and an external review of salaries to confirm competitiveness
- Implementing our People & Workforce Strategy
- Ongoing reviews of our trading and fundraising strategies
- Putting remaining measures in place to achieve the IT security accreditation, Cyber Essentials Plus.

FINANCIAL REVIEW

These financial statements include the results of St Christopher's Hospice and its trading subsidiary, St Christopher's (Trading) Limited for the year ended 31 March 2024.

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

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

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

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

For the year ended 31 March 2024, at an operational level, St Christopher's Hospice recorded a net loss, before other recognised gains and losses, of £987k (2023: £1,420k net income).

Overall, the St Christopher's Hospice generated a net increase in funds of £159k (2023: a net increase in funds of £480k). This was after recognising other unrealised gains and losses as follows:

- 1 Unrealised gain from the investment portfolio of £1,185k (2023: unrealised loss of £1,292k) and a realised loss from the portfolio of £39k (2023: realised gain £479k)**

Our investment portfolio managed by Cazenove Capital Management increased in value from £13,059k in March 2023 to £16,433k in March 2024. This increase is due to £2,000k cash transferred into the fund, and £1,374k from a combination of investment gains and investment income. We have not drawn down on our investment portfolio during 2023-24, and there are no plans to draw down on it during 2024-25.

Our bank deposits increased from £6,303k in March 2023 to £8,924k in March 2024.

Taking our investment portfolio and bank deposits together, our overall investments increased from £19,362k in March 2023 to £25,357k in March 2024.

- 2 An actuarial gain/loss from the FRS 102 valuation of the St Christopher's Hospice (1985) Pension Scheme of £0k (2023: loss £127k)**

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

- An actuarial gain on the scheme liabilities of £212k (2023: gain of £3,497k) arising from a change in the demographic and financial assumptions
- An actuarial loss on the scheme investments portfolio of £385k (2023: loss of £3,801k)
- Experience losses arising on the plan liabilities of £17k (2023: losses of £704k)
- A gain of £190k to reflect the amount of the pension surplus that is not recoverable (2023: gain of £881k).

INCOME

Total income received in 2023-24 was very similar to the previous year, a small increase of 3.0% to £27,541k (2023: £26,740k). While legacies income was £633k less than the previous year, this was offset by increases to other income streams, namely donations and gifts (+£327k), NHS income (+£344k), income from trading company (+£290k) and investment income (+£483k).

Further details on our income variances are shown below.

DONATIONS AND GIFTS

Income from donations and gifts was £4,835k, which was £327k higher than the previous year (2023: £4,508k).

Key to achieving this was the money raised by our community as part of our *What Matters Most* campaign, where we were able to raise £625k. We continue to be overwhelmed and appreciative of the enormous generosity of our local community. As we feel the impact of the increase in demand for our services, we rely on our local community more than ever.

LEGACIES

Legacies income of £6,535k was not quite as high as the previous year of £7,168k. We remain incredibly grateful for those people who choose to remember St Christopher's in their Wills.

NHS CONTRACTS

Income from the NHS of £9,357k was £344k (3.8%) more than the previous year (2023: £9,013k).

St Christopher's is caring for an increasing number of patients, which means that the NHS pays for only a minority of the services we provide for it, and at a decreasing proportion.

INCOME AND PERFORMANCE OF TRADING SUBSIDIARIES

The core activity of St Christopher's (Trading) Limited is the operation of shops with 24 shops as of March 2024 (23 shops as at March 2023), whose purpose is to raise money for the Charity to spend on charitable activities.

Revenue from St Christopher's (Trading) Limited increased by 6% to £5,295k (2023: £5,005k), with a net contribution to the Charity of £1,467k (2023: a net contribution of £1,622k). While income has increased the high street is increasingly competitive and challenging during the current economic high climate.

INVESTMENT INCOME

Investment income for the year of £851k was £483k higher than last year (2023: £368k). This is reflective of higher interest rates which have brought in more bank interest on our fixed term deposits.

EDUCATION, FEES AND OTHER INCOME

Education, fees and other income was £668k, which was a little lower than last year (2023: £678k). This includes new work to deliver our Hospice at Home work in Bromley (virtual wards).

EXPENDITURE

Total expenditure in 2023-24 was £28,528k, which was 12.7% higher than the previous year's figure (2023: £25,320k). This was largely due to deliberate growth in full time equivalent staff headcount (+9%) to support our charitable activities and growing patient need, and to fund cost of living increases.

The costs of raising voluntary income were £1,762k, which was 13.5% higher than the previous year's figure (2023: £1,552k).

STAFF COSTS

During the year, the total average FTE headcount increased to 401 (2023: 369). Staff costs account for 71.6% of the organisation's total costs (2023: 72.6%). Further details of staff costs and staffing levels can be found in note 7 to the accounts.

RESERVES POLICY AND GOING CONCERN

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

The Trustees have taken a risk-based approach to assess the level of free reserves required by the Charity. They have

also reviewed this alongside the level needed to operate effectively. Considering both aspects, the Trustees believe St Christopher's Hospice should aim to hold free reserves equivalent to 9-12 months of its operating expenditure, currently equal to £21.4m-£28.5m. The Charity considers free reserves to be the total unrestricted Group reserves, less designated funds. The designated funds held by the Charity are listed in the notes to the accounts. They include a fund to manage the variability of year on year legacy income, a fund to expand our charitable impact and to support our long-term sustainability and funds for capital commitments and the net book value of fixed assets. On this basis, free reserves as of 31 March 2024 were £25,788k (2023: £24,038k), equivalent to 10.8 months of operating expenditure (2023: 11.4 months of operating expenditure).

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

INVESTMENT POLICY

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

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

Investment income has increased to £851k (2023: £368k), of which £570k (2023: £208k) is interest from cash deposits, and £281k (2023: £160k) is dividend and interest income from the Cazenove Capital Management charity portfolio.

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

The Investment Committee encourages responsible investment. They are committed to appointing investment

managers involved in applying Environment, Social and Governance (ESG) criteria across the investment process. Our existing investment manager, Cazenove Capital Management, has demonstrated that they use these criteria.

STATEMENT OF BOARD'S RESPONSIBILITIES

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

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

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

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

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

STATEMENT AS TO DISCLOSURE OF INFORMATION TO AUDITORS

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

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

APPOINTMENT OF AUDITORS

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

Signed on behalf of the Board of Trustees



NEIL GOULDEN

Chair of the Board of Trustees

St Christopher's Hospice, 51-59 Lawrie Park Road,
London SE26 6DZ
18 July 2024

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

OPINION

We have audited the financial statements of St Christopher's Hospice (the 'parent charitable company') and its subsidiaries (the 'group') for the year ended 31 March 2024 which comprise the Group Statement of Financial Activities, the Group and Parent Charitable Company Balance Sheets, the Group Cash Flow Statement and notes to the financial statements, including significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

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

BASIS FOR OPINION

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

CONCLUSIONS RELATING TO GOING CONCERN

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

Based on the work we have performed, we have not identified any material uncertainties relating to events

or conditions that, individually or collectively, may cast significant doubt on the group's and parent charitable company's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

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

OTHER INFORMATION

The other information comprises the information included in the annual report, other than the financial statements and our auditor's report thereon. The Trustees are responsible for the other information contained in the annual report. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the course of the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements themselves. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

OPINIONS ON OTHER MATTERS PRESCRIBED BY THE COMPANIES ACT 2006

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

- the information given in the strategic report and the Trustees' annual report for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the strategic report and the Trustees' annual report have been prepared in accordance with applicable legal requirements.

MATTERS ON WHICH WE ARE REQUIRED TO REPORT BY EXCEPTION

In the light of the knowledge and understanding of the group and parent charitable company and their environment obtained in the course of the audit, we have

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

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

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

RESPONSIBILITIES OF TRUSTEES

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

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

AUDITOR'S RESPONSIBILITIES FOR THE AUDIT OF THE FINANCIAL STATEMENTS

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

decisions of users taken on the basis of these financial statements.

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

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

the direction, supervision and performance of the group audit. We remain solely responsible for our audit report.

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

EXPLANATION AS TO WHAT EXTENT THE AUDIT WAS CONSIDERED CAPABLE OF DETECTING IRREGULARITIES, INCLUDING FRAUD

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

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

Our approach was as follows:

- We obtained an understanding of the legal and regulatory requirements applicable to the charitable company and considered that the most significant are the Companies Act 2006, the Charities Act 2011, the Charity SORP, and UK financial reporting standards as issued by the Financial Reporting Council.
- We obtained an understanding of how the charitable company complies with these requirements by discussions with management and those charged with governance.
- We assessed the risk of material misstatement of the financial statements, including the risk of material misstatement due to fraud and how it might occur, by holding discussions with management and those charged with governance.
- We inquired of management and those charged with governance as to any known instances of non-

compliance or suspected non-compliance with laws and regulations.

- Based on this understanding, we designed specific appropriate audit procedures to identify instances of non-compliance with laws and regulations. This included making enquiries of management and those charged with governance and obtaining additional corroborative evidence as required.

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

USE OF OUR REPORT

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

Moore Kingston Smith LLP.

JAMES SAUNDERS

Senior Statutory Auditor

for and on behalf of

Moore Kingston Smith LLP, Statutory Auditor
9 Appold Street, London EC2A 2AP

2 August 2024

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

	Notes	Unrestricted funds £'000	Restricted funds £'000	2024 £'000	2023 restated £'000
Income from					
Donations and gifts		4,482	353	4,835	4,508
Legacies		6,473	62	6,535	7,168
Charitable activities					
<i>NHS funding</i>	2	9,357	–	9,357	9,013
<i>Education, fees and other income</i>	3	668	–	668	678
Other trading activities					
<i>Income of trading company</i>	4	5,295	–	5,295	5,005
<i>Investment income</i>		851	–	851	368
Total income		<u>27,126</u>	<u>415</u>	<u>27,541</u>	<u>26,740</u>
Expenditure on					
Raising voluntary income		1,762	–	1,762	1,552
Trading company	4	3,828	–	3,828	3,383
		<u>5,590</u>	<u>–</u>	<u>5,590</u>	<u>4,935</u>
Charitable activities					
<i>Inpatient care</i>		8,509	90	8,599	7,819
<i>Community care/outpatients</i>		11,325	125	11,450	9,957
<i>Bereavement services</i>		820	71	891	687
<i>Community action</i>		797	74	871	708
<i>Education, research and policy</i>		785	342	1,127	1,214
		<u>22,236</u>	<u>702</u>	<u>22,938</u>	<u>20,385</u>
Total expenditure	5	<u>27,826</u>	<u>702</u>	<u>28,528</u>	<u>25,320</u>
Net (expenditure)/income before transfers	6	<u>(700)</u>	<u>(287)</u>	<u>(987)</u>	<u>1,420</u>
Transfer between funds		83	(83)	–	–
Net (expenditure)/income before other recognised gains and losses		<u>(617)</u>	<u>(370)</u>	<u>(987)</u>	<u>1,420</u>
Other recognised gains/(losses)					
Actuarial (losses) on defined benefit pension scheme	19	–	–	–	(127)
(Losses)/gains on investments: realised	10	(39)	–	(39)	479
Gains/(losses) on investments: unrealised	10	1,185	–	1,185	(1,292)
Net movement in funds		<u>529</u>	<u>(370)</u>	<u>159</u>	<u>480</u>
Total funds at 1 April 2023	15, 16, 17	<u>43,865</u>	<u>2,731</u>	<u>46,596</u>	<u>46,116</u>
Total funds at 31 March 2024	15, 16, 17	<u>44,394</u>	<u>2,361</u>	<u>46,755</u>	<u>46,596</u>

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

The Statement of Financial Activities (SOFA) for 2023 has been restated to reflect the new approach adopted in respect of legacy accrual recognition outlined in Note 1.5. The effect on the 2023 legacy income reflected has been a reduction of £489k.

CONSOLIDATED BALANCE SHEET AS AT 31 MARCH 2024

		2024	2023
	Notes	£'000	restated £'000
Fixed assets			
Tangible fixed assets	9	10,294	10,104
Intangible fixed assets	9	110	120
Investments	10	25,357	19,362
		<u>35,761</u>	<u>29,586</u>
Current assets			
Debtors	11	8,538	8,185
Interest-bearing bank accounts		4,807	11,457
		<u>13,345</u>	<u>19,642</u>
Creditors			
Amounts falling due within one year	12	(2,351)	(2,632)
Net current assets		<u>10,994</u>	<u>17,010</u>
Net assets		<u>46,755</u>	<u>46,596</u>
Funds			
Restricted	15	2,361	2,731
Unrestricted			
<i>General</i>		25,780	24,030
<i>Designated</i>	16	18,606	19,827
<i>Non-charitable</i>		8	8
Total unrestricted funds		<u>44,394</u>	<u>43,865</u>
Total funds		<u>46,755</u>	<u>46,596</u>

The financial statements were approved by The Board of Trustees on 18 July 2024 and signed on its behalf by:



NEIL GOULDEN
Chair of Trustees



CATHERINE McDONALD
Trustee

**BALANCE SHEET: ST CHRISTOPHER'S HOSPICE ENTITY ONLY
AS AT 31 MARCH 2024**

		2024	2023
	Notes	£'000	restated £'000
Fixed assets			
Tangible fixed assets	9	10,085	9,864
Intangible fixed assets	9	110	120
Investments	10	25,757	19,762
		<u>35,952</u>	<u>29,746</u>
Current assets			
Debtors	11	10,418	11,653
Interest-bearing accounts		2,462	7,630
		<u>12,880</u>	<u>19,283</u>
Creditors			
Amounts falling due within one year	12	(2,086)	(2,441)
Net current assets		<u>10,794</u>	<u>16,842</u>
Net assets excluding pension scheme asset		46,746	46,588
Defined benefit pension scheme asset	19	–	–
Net assets		<u>46,746</u>	<u>46,588</u>
Funds			
Restricted	15	2,361	2,731
Unrestricted			
<i>General</i>		25,779	24,030
<i>Designated</i>	16	18,606	19,827
Total unrestricted funds		<u>44,385</u>	<u>43,857</u>
Total funds		<u>46,746</u>	<u>46,588</u>

As permitted by Section 408 of the Companies Act 2006, the Statement of Financial Activities of the parent charity is not presented as part of these financial statements. The Charity's deficit for the year before distribution from the trading subsidiary was £1,308k (2023: £1,142k).

The financial statements were approved by The Board of Trustees on 18 July 2024 and signed on its behalf by:



NEIL GOULDEN
Chair of Trustees



CATHERINE MCDONALD
Trustee

CONSOLIDATED STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 31 MARCH 2024

		2024	2023
	Notes	£'000	restated £'000
Net cash (used in)/generated by operating activities	A	(1,739)	4,570
Cash flows from investing activities			
Interest and dividends received		851	368
Purchase of tangible and intangible fixed assets		(952)	(449)
Increase in investments		(4,810)	(1,646)
Net cash used in investing activities		(4,911)	(1,727)
Change in cash and cash equivalents in the year		(6,650)	2,843
Cash at the beginning of the year		11,457	8,614
Cash at the end of the year		4,807	11,457
Reconciliation of net movement in funds to net cash inflow from operating activities			
	Notes	2024 £'000	2023 £'000
	A		
Net movement in funds		159	480
Interest and dividends receivable		(851)	(368)
Depreciation and amortisation charges		772	675
Unrealised (gain)/loss on investments		(1,185)	1,292
Profit on the disposal of fixed assets		(4)	(2)
Cash received from sale of assets		4	3
(Increase)/decrease in debtors		(353)	1,917
(Decrease)/increase in creditors		(301)	523
Increase/(decrease) in dilapidation provision		20	50
Net cash (used in)/generated by operating activities		(1,739)	4,570

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2024

1 PRINCIPAL ACCOUNTING POLICIES

1.1 Basis of accounting

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

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

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

1.2 Going concern

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

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

1.3 Basis of consolidation

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

No separate Statement of Financial Activities is presented for the Charity as permitted by Section 408 of the Companies Act 2006 and SORP (FRS102). The net deficit dealt with in the Charity's Statement of Financial Activities before the distribution from St Christopher's (Trading) Limited for the year ended 31 March 2024 was £1,308k (2023: deficit £1,142k), and the net surplus dealt with in the Charity's Statement of Financial Activities after the distribution was £159k (2023: restated surplus of £480k).

1.4 Fund accounting

Restricted income funds

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

Unrestricted income funds

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

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

- **Fixed assets** This reflects the net book value of unrestricted tangible and intangible fixed assets
- **Ward refurbishment** These are designated monies to fund a modest wards refurbishment at the Sydenham site
- **Strategic Ambitions Fund** This is a designated fund to focus on projects which will expand St Christopher's charitable impact and to support its long-term sustainability
- **Future Challenge Fund** This is a designated fund to allow for future years of financial challenge expected as a result of COVID-19
- **Legacies Fund** To set aside legacies income, when it has been higher than budgeted in a particular year. This money will be drawn down to support future years, when legacies income is lower than budgeted.

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

1.5 Income

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

Legacies must be recognised when the following conditions are confirmed:

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

Historically, accrued legacy income has been recognised based on the estate valuation received less a 20% contingency. However, we have completed a review using historical data, and based on that evidence we are now recognising the accrued income at the estate value with no contingency applied, as this is a more reasonable estimate of what will be received. This change in accounting policy has had the effect of increasing both the legacy debtor balance and the legacy designated fund by £1,387k (2023: £1,058K); and of increasing the 2024 legacies income by £329k (2023: a reduction of legacies income of £489k).

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

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

1.6 Expenditure

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

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

1.7 Taxation

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

1.8 Capitalisation and depreciation

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

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

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

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

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

1.9 Pension schemes

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

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

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

1.10 Operating leases

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

1.11 Estimation uncertainty and key judgements

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

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

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

The carrying amount of legacies accrued (note 11) as at 31 March 2024 was £5,857k (2023 restated: £6,630k).

2 NATIONAL HEALTH SERVICE

	2024 £'000	2023 £'000
NHS contracts	9,357	9,013
	<u>9,357</u>	<u>9,013</u>

3 EDUCATION, FEES AND OTHER INCOME

	2024 £'000	2023 £'000
Education	250	332
Fees and other income	418	346
	<u>668</u>	<u>678</u>

4 GROUP UNDERTAKINGS

Summary of results of group undertakings:

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

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

2023	St Christopher's Hospice restated £'000	St Christopher's (Trading) Ltd £'000	Group total restated £'000
Income	21,735	5,005	26,740
Expenditure	(21,937)	(3,383)	(25,320)
Surplus	(202)	1,622	1,420
Other recognised losses	(940)	–	(940)
Distributions	1,622	(1,622)	–
Net income for the year	<u>480</u>	<u>–</u>	<u>480</u>

The net assets of St Christopher's (Trading) Limited were £408k at 31 March 2023.

St Christopher's Hospice has one wholly owned subsidiary:

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

Related party transactions

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

	2024 St Christopher's (Trading) Ltd £'000	2023 St Christopher's (Trading) Ltd £'000
Re-charged to related parties		
Management charge	138	131
Salaries	2,125	1,899
Leasehold depreciation	34	36
Other costs	46	77
Total	2,343	2,143
Balance owed at 31 March	2,251	3,738

5 EXPENDITURE

	Direct costs £'000	Support costs £'000	Total 2024 £'000	Total 2023 £'000
Costs of generating funds				
Fundraising and publicity	1,535	227	1,762	1,552
Trading activities	3,828	–	3,828	3,383
	5,363	227	5,590	4,935
Charitable activities				
Inpatient care	6,901	1,698	8,599	7,819
Community care/outpatients	9,221	2,229	11,450	9,957
Bereavement services	715	176	891	687
Community action	650	221	871	708
Education, research and policy	994	133	1,127	1,214
Total cost of charitable activities	18,481	4,457	22,938	20,385
Total expenditure	23,844	4,684	28,528	25,320

Included in the costs above are governance costs of £146k (2023: £101k).

Analysis of support costs

	2024 £'000	2023 £'000
Chief Executive office and governance	287	376
Facilities	1,022	860
IT management	1,197	1,161
Finance	448	434
Workforce	1,730	1,409
	4,684	4,240

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

6 NET INCOME

	2024 £'000	2023 £'000
Net income is stated after charging/(crediting)		
Auditors' remuneration: audit fee	36	34
Auditors' remuneration: tax and tagging compliance services	6	6
Auditors' remuneration: prior year	(1)	1
Auditors' remuneration: pension	9	6
Operating lease rentals: land and buildings	797	784
Operating lease rentals: vehicles and equipment	91	69
Depreciation and amortisation	772	675
Interest receivable	(620)	(368)

7 STAFF COSTS

	2024 £'000	2023 £'000
Salaries and wages	15,348	13,845
Social security costs	1,552	1,352
Pension costs (see note 19 below)	1,229	1,156
Staff costs of the Charity	18,129	16,353
Staff costs of trading activities, which includes pension costs of £91k in 2024 (2023: £77k)	2,288	2,030
	20,417	18,383

No payments were made under a voluntary severance scheme this year (2023: £35k).

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

	Head count 2024	Head count 2023	FTEs 2024	FTEs 2023
Inpatient care	90	87	82	78
Community care/outpatients	135	114	114	93
Bereavement services	14	12	10	8
Community action	14	11	12	10
Education, research and policy	9	10	7	8
Fundraising	14	11	13	10
Other hospice (includes support staff)	128	136	102	108
Charity shops	71	61	61	54
	475	442	401	369

The number of employees whose earnings fell within the band:

	2024	2023
£60,000 to £69,999	15	4
£70,000 to £79,999	2	6
£80,000 to £89,999	4	4
£90,000 to £99,999	1	1
£100,000 to £109,999	1	1
£110,000 to £119,999	–	–
£120,000 to £129,999	1	1
£130,000 to £139,999	–	–
£140,000 to £149,999	1	–
£150,000 to £159,999	1	1

Pension contributions of £220k (2023: £158k) were paid in respect of these employees.

The Board of Trustees considers the key management personnel to be the Executive Team of 7 FTEs (2023: 5.40 FTEs) and the total benefit paid to the key management personnel was £831k (2023: £594k).

8 BOARD OF TRUSTEES

Remuneration and reimbursed expenses

No remuneration was paid to members of the Board during either year. Expenses reimbursed to Trustees totalled £420 (2023: £nil). £15k was incurred in respect of recruiting Trustees (2023: £11k).

St Christopher's Hospice paid £3,529 (2023: £3,416) for Trustee Liability Insurance for its Trustees.

St Christopher's Hospice also paid £4k (2023: £3k) for indemnity insurance for the Trustees of the St Christopher's Hospice (1985) Pension Scheme.

Donations from Trustees

The Trustees have donated a total of £14k (2023: £10k) during the year. Of this, £5k was restricted to St Christopher's CARE (2023: £9k).

9.1 TANGIBLE FIXED ASSETS

Group	Freehold land and buildings £'000	Freehold refurb- ishment £'000	Equipment and motor vehicles £'000	Leasehold land and buildings £'000	Assets under con- struction £'000	Total £'000
Cost						
At 1 April 2023	12,920	3,786	1,509	501	12	18,728
Additions	272	–	573	45	–	890
Disposals	–	–	(6)	–	–	(6)
At 31 March 2024	13,192	3,786	2,076	546	12	19,612
Depreciation						
At 1 April 2023	3,714	3,717	790	403	–	8,624
Amount provided	257	41	336	66	–	700
Disposals	–	–	(6)	–	–	(6)
At 31 March 2024	3,971	3,758	1,120	469	–	9,318
Net book values						
At 31 March 2024	9,221	28	956	77	12	10,294
At 1 April 2023	9,206	69	719	98	12	10,104
Charity						
Cost						
At 1 April 2023	12,600	3,786	1,461	441	12	18,300
Additions	272	–	573	25	–	870
Disposals	–	–	–	–	–	–
At 31 March 2024	12,872	3,786	2,034	466	12	19,170
Depreciation						
At 1 April 2023	3,589	3,717	764	366	–	8,436
Amount provided	251	41	324	33	–	649
Disposals	–	–	–	–	–	–
At 31 March 2024	3,840	3,758	1,088	399	–	9,085
Net book values						
At 31 March 2024	9,032	28	946	67	12	10,085
At 1 April 2023	9,011	69	697	75	12	9,864

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

Following review, some assets from the prior year have been re-classified into more appropriate categories and opening balances restated, however there has been no change to the total opening cost, accumulated depreciation or net book value.

9.2 INTANGIBLE FIXED ASSETS

	2024 £'000	2023 £'000
Group and charity cost		
Cost		
At 1 April 2023	656	657
Additions	62	57
Disposals	(31)	(58)
At 31 March 2024	687	656
Depreciation		
At 1 April 2023	536	478
Amount provided	72	115
Disposals	(31)	(57)
At 31 March 2024	577	536
Net book values		
At 31 March 2024	110	120
At 1 April 2023	120	179

10 INVESTMENTS

	Group 2024 £'000	Group 2023 £'000	Charity 2024 £'000	Charity 2023 £'000
At 1 April 2023	19,362	19,008	19,762	19,408
Additions	4,184	2,657	4,184	2,657
Disposals	(2,892)	(3,185)	(2,892)	(3,185)
(Decrease)/Increase in market value: realised	(39)	479	(39)	479
Increase/(Decrease) in market value: unrealised	1,185	(1,292)	1,185	(1,292)
	21,800	17,667	22,200	18,067
Movement in cash balance	3,557	1,695	3,557	1,695
At 31 March 2024	25,357	19,362	25,757	19,762
Funds managed by Cazenove Capital Management				
UK equities	1,019	1,419	1,019	1,419
International equities	9,750	6,821	9,750	6,821
Bonds	1,399	1,403	1,399	1,403
Property	714	807	714	807
Alternatives: other and commodities	1,848	1,842	1,848	1,842
Cash	1,703	767	1,703	767
	16,433	13,059	16,433	13,059
Other investments				
Bank deposits	8,924	6,303	8,924	6,303
Investment in subsidiary undertaking	–	–	400	400
	8,924	6,303	9,324	6,703
Total investments	25,357	19,362	25,757	19,762

The historical cost of the investments managed by Cazenove Capital Management is £13,575k (2023: £11,340k).

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

11 DEBTORS

	Group 2024 £'000	Group 2023 restated £'000	Charity 2024 £'000	Charity 2023 restated £'000
Trade debtors	924	341	923	341
Legacies receivable	5,857	6,630	5,857	6,630
Sundry debtors, prepayments and accrued income	1,757	1,214	1,387	944
Amount due from St Christopher's (Trading) Limited	–	–	2,251	3,738
	<u>8,538</u>	<u>8,185</u>	<u>10,418</u>	<u>11,653</u>

12 CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	Group 2024 £'000	Group 2023 £'000	Charity 2024 £'000	Charity 2023 £'000
Trade creditors	449	344	408	322
Payroll taxes and social security	634	558	633	558
Other creditors and accruals	1,148	904	925	735
Income received in advance	120	826	120	826
	<u>2,351</u>	<u>2,632</u>	<u>2,086</u>	<u>2,441</u>

13 LEASE COMMITMENTS

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

	Land and buildings 2024 £'000	Land and buildings 2023 £'000	Motor vehicles and office equipment 2024 £'000	Motor vehicles and office equipment 2023 £'000
Operating leases payments to be made				
Within one year	632	681	45	27
In two to five years	1,044	1,010	83	–
Over five years	–	47	–	–
	<u>1,676</u>	<u>1,738</u>	<u>128</u>	<u>27</u>

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

14 FINANCIAL COMMITMENTS

As at 31 March 2024, the following approved commitments were authorised by the Board of Trustees:

- Up to £2 million in respect of ward refurbishments. This will be funded through restricted and designated funds.

15 RESTRICTED FUNDS

	Balance 1 April 2023 £'000	Income £'000	Expenditure £'000	Transfers £'000	Balance 31 March 2024 £'000
3 IS Project	49	–	38	–	11
Bromley Homelessness Project	9	26	18	–	17
Candle	–	172	70	–	102
Carers	37	–	20	–	17
Caritas House Building Fund	1,062	–	27	–	1,035
Celebrating Nursing	10	25	8	–	27
Connected in Loss	53	–	50	–	3
Community Action	56	55	71	(40)	–
Community of Nursing	19	13	4	–	28
Dementia-focused training and education	45	–	5	–	40
Developing the practice of palliative nursing	26	–	19	–	7
Education (bursaries)	21	15	15	–	21
Inpatient equipment	13	17	29	–	1
Lavender Room	30	2	4	–	28
Leadership development training	–	24	–	6	30
Nightingale Fellowship hardship bursaries	64	–	4	–	60
Patient equipment/premises extension	161	–	–	–	161
Research: Stern Legacy	229	–	30	–	199
Support for St Christopher's CARE	627	–	237	–	390
Ward refurbishment project	77	–	7	–	70
Women in Fellowship Fund	31	3	–	(6)	28
Other funds	112	63	46	(43)	86
Total restricted funds	<u>2,731</u>	<u>415</u>	<u>702</u>	<u>(83)</u>	<u>2,361</u>

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

Connected in Loss (formerly Coach4Care): supporting carers through end of life and bereavement experiences.

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

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

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

Patient equipment/premises extension: an amount left in a Will with a specific request for expenditure to be spent on either patient equipment or a premises extension.

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

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

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

16 DESIGNATED FUNDS

	Balance at 1 April 2023 £'000	New design- ations and transfers £'000	Balance at 31 March 2024 £'000
Fixed assets	9,162	207	9,369
Strategic Ambitions Fund	5,521	(2,361)	3,160
Wards refurbishment	750	940	1,690
Future Challenge Fund	336	(336)	–
Legacies Fund	4,058	329	4,387
	<u>19,827</u>	<u>(1,221)</u>	<u>18,606</u>

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

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

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

Future Challenge Fund: this was a designated fund to allow for future years of financial challenge expected as a result of COVID-19.

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

17 ANALYSIS OF GROUP NET ASSETS BETWEEN FUNDS

	Fixed assets £'000	Current assets £'000	Creditors £'000	Total £'000
Restricted income	1,035	1,326	–	2,361
Unrestricted income				
<i>Designated</i>	9,369	9,237	–	18,606
<i>General</i>	25,357	2,782	(2,351)	25,788
	<u>35,761</u>	<u>13,345</u>	<u>(2,351)</u>	<u>46,755</u>

18 CONSOLIDATED STATEMENT OF FINANCIAL ACTIVITIES FOR THE YEAR ENDED 31 MARCH 2023

	Unrestricted funds restated Total £'000	Restricted funds Total £'000	2023 restated Total £'000	2022 restated Total £'000
Income from				
Donations and gifts	3,966	542	4,508	4,037
Legacies	7,168	–	7,168	11,504
Charitable activities				
<i>NHS funding for patient care</i>	9,013	–	9,013	10,036
<i>Education, fees and other income</i>	678	–	678	867
Other trading activities				
<i>Income of trading companies</i>	5,005	–	5,005	4,436
<i>Investment income</i>	368	–	368	153
Total income	<u>26,198</u>	<u>542</u>	<u>26,740</u>	<u>31,033</u>
Expenditure on				
Raising voluntary income	1,552	–	1,552	1,508
Trading companies	3,383	–	3,383	3,125
	<u>4,935</u>	<u>–</u>	<u>4,935</u>	<u>4,633</u>
Charitable activities				
<i>Inpatient care</i>	7,789	30	7,819	6,861
<i>Community care/outpatients</i>	9,809	148	9,957	8,847
<i>Bereavement services</i>	614	73	687	701
<i>Community action</i>	638	70	708	444
<i>Education, research and policy</i>	866	348	1,214	1,066
	<u>19,716</u>	<u>669</u>	<u>20,385</u>	<u>17,919</u>
Total expenditure	<u>24,651</u>	<u>669</u>	<u>25,320</u>	<u>22,552</u>
Net income/(expenditure) before transfers	<u>1,547</u>	<u>(127)</u>	<u>1,420</u>	<u>8,481</u>
Transfer between funds (relates to capital programmes)	97	(97)	–	–
Net income/(expenditure) before other recognised gains and losses	<u>1,644</u>	<u>(224)</u>	<u>1,420</u>	<u>8,481</u>
Other recognised gains/(losses)				
Actuarial (losses) on defined benefit pension scheme	(127)	–	(127)	(303)
Gains on investments: realised	479	–	479	198
(Losses)/gains on investments: unrealised	(1,292)	–	(1,292)	352
Net movement in funds before transfer	<u>704</u>	<u>(224)</u>	<u>480</u>	<u>8,728</u>
Net movement in funds	<u>704</u>	<u>(224)</u>	<u>480</u>	<u>8,728</u>
Total funds at 1 April 2022	<u>43,161</u>	<u>2,955</u>	<u>46,116</u>	<u>37,388</u>
Total funds at 31 March 2023	<u>43,865</u>	<u>2,731</u>	<u>46,596</u>	<u>46,116</u>

19 PENSION SCHEMES

a St Christopher's Hospice (1985) scheme

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

Contributions are charged to the Statement of Financial Activities so as to spread the cost of pensions over employees' working lives. The pension charge for the year was £Nil (2023: £127k).

Triennial valuation

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

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

FRS (Financial Reporting Standard) 102: Disclosure Report

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

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

	Period ended 31 March 2024 £'000	Period ended 31 March 2023 £'000	Period ended 31 March 2022 £'000
Fair value of plan assets	8,280	8,612	12,279
Present value of defined benefit obligation	(7,406)	(7,597)	(10,434)
Unrecognised surplus	(874)	(1,015)	(1,845)
Defined benefit asset to be recognised	—	—	—

Reconciliation of opening and closing balances of the defined benefit obligation

	Period ended 31 March 2024 £'000	Period ended 31 March 2023 £'000
Net defined benefit obligation at start of period	7,597	10,434
Interest expense	360	283
Actuarial losses	(195)	(2,793)
Benefits paid	(356)	(327)
Defined benefit obligation at end of year	7,406	7,597

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

	Period ended 31 March 2024 £'000	Period ended 31 March 2023 £'000
Fair value of plan assets at start of period	8,612	12,279
Interest income	409	336
Actuarial losses	(385)	(3,801)
Contributions by the Charity	–	125
Benefits paid	(356)	(327)
Fair value of plan assets at end of period	<u>8,280</u>	<u>8,612</u>

The actual gain on the plan assets over the period ended 31 March 2024 was £24k (2023: a loss of £3,465k).

Defined benefit costs recognised in net (expenditure)/income

	Period ended 31 March 2024 £'000	Period ended 31 March 2023 £'000
Net interest cost	–	(2)

Defined benefit costs recognised in other gains and losses

	Period ended 31 March 2024 £'000	Period ended 31 March 2023 £'000
Return on plan assets (excluding amounts included in net interest cost): (loss)/gain	(385)	(3,801)
Experience gains and losses arising on the plan liabilities: (loss)	(17)	(704)
Effects of changes in the demographic and financial assumptions underlying the present value of the plan liabilities: gain	212	3,497
Effects of changes in the amount of surplus that is not recoverable (excluding amounts included in net interest cost): gain/(loss)	190	881
Total amount recognised in other gains and losses	<u>–</u>	<u>(127)</u>

Assets

	Period ended 31 March 2024 £'000	Period ended 31 March 2023 £'000	Period ended 31 March 2022 £'000
Diversified growth assets	4,082	5,225	9,071
Debt instruments	2,104	–	–
Liability-driven investments	1,900	2,913	3,025
Cash and cash equivalents	194	474	183
Total assets	<u>8,280</u>	<u>8,612</u>	<u>12,279</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 2024 %pa	Period ended 31 March 2023 %pa	Period ended 31 March 2022 %pa
Discount rate	4.90	4.85	2.75
Inflation (RPI)	3.40	3.50	4.00
Allowance for revaluation of deferred pensions of RPI or 5% p.a. if less	3.40	3.50	4.00
Allowance for pension in payment increases of RPI or 5% p.a. if less	3.20	3.20	4.00
Allowance for commutation of pension for cash at retirement	0.75	0.75	0.75

The mortality assumptions adopted at 31 March 2024 imply the following life expectancies at age 65 years:

Male retiring in 2024:	21
Female retiring in 2024:	23
Male retiring in 2044:	22
Female retiring in 2044:	25

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

Calculation of pension scheme asset

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

b St Christopher's defined contribution scheme

The St Christopher's defined contribution scheme was set up in September 2001. In April 2010 the St Christopher's Personal Pension (2010) defined contribution scheme was established and members of the existing defined contribution scheme transferred to this new scheme with effect from January 2011. The contribution of the hospice was on average 21% for former members of the St Christopher's (1985) scheme and 5% for all other members, which represented a total charge for the year of £622k (2023: £483k) to the St Christopher's GPP (2010) defined contribution scheme.

c NHS Pension Scheme

Details of the scheme are provided in note 1.9. The contribution of the hospice was 14.38%, which was offset by a 29% subsidy on the contribution. This represented a net charge for the year of £698k (2023: £571k).

LOOKING TO THE FUTURE

In St Christopher's last Annual Report and Accounts, we introduced our new strategy for the next three years. One year in, we're already making great strides – as you'll have seen from the report on our progress from pages 9 to 27.

One key area of focus for us remains tackling inequalities to ensure that everyone has equitable access to care and support at the end of life whoever and wherever they are. Our recently formed Inequalities Working Group will be focussing on specifically tackling three key areas of inequality including: ethnic minority communities, socio-economically disadvantaged and people aged over 75.

Through our public perceptions research last year, we gained greater insights into why people, specifically from ethnic minority and socio-disadvantaged communities, may not choose to access St Christopher's care and support. This ranged from not realising our services are free to the belief that we would not be able to meet their cultural or spiritual needs. We have and will continue to tackle this.

Most people told us how important it was for them to be able to play a caring role in supporting their loved one, ideally at home, and so did not want an admission to the hospice wards. In fact, only 47% of the public surveyed were aware that hospice care could be provided at home. Surprisingly for many, that is where the majority of our care and support is provided. In the last year, our teams completed 15,208 visits to support people in their own homes – a 10% increase on the number of visits completed the year previous – and we expect this to continue to rise.

We're also not afraid to work in new and innovative ways to tackle these inequalities and meet the growing demands for our care and support. At last year's Hospice UK conference Professor Chris Whitty outlined how our ageing population will significantly increase demand for palliative and end of life care. One way we are looking to address this is by working side-by-side with care homes, helping them to be ready to support end of life care in the future.

I have first-hand experience of seeing a nursing care home make the journey from providing good palliative care, with around 75% of its residents dying in the care home, with support from its local hospice, to a place where it is providing outstanding palliative care, with over 95% of its residents dying in the care home, independent of the local hospice.

I believe the main change needed in the hospice sector is an acknowledgement of the expertise of the best care homes and close partnership working with them to co-produce and co-deliver education, support and advice to local care homes open to making that same journey.

We should be seeking to lay the foundations for hospices retreating from supporting care home residents in all but the most complex cases requiring our highly specialist palliative care, so that hospices can focus on expanding community services to those in their own homes and providing support on the wards.

Later this year, St Christopher's will be co-delivering a reflective two-day conference for both leaders in care homes and leaders in hospices together, partnering with Nightingale Hammerson – an outstanding care home provider in south London – to bring some of these concepts to reality. This is one of the many cutting-edge learning events we will be hosting through St Christopher's Centre for Awareness and Response to End of life (also known as CARE) throughout the year.

Through St Christopher's CARE, we also continue to influence and improve end of life care globally and, in the last year, reached 92 countries (up from 56 in the year previous). We continue to work in partnership with the Institute of Palliative Medicine, India, the Sanjeevan Palliative Care Project, Pondicherry, in India, and Bangabandhu Sheikh Mujib Medical University, Bangladesh, to deliver the Global Fellowship Programme. Each year this transformative programme spans countries, time zones and professions and has become a hugely valued and sustainable partnership model which influences palliative care globally. The Professional Learning team also continue to develop our online offer, host international visits and form networks for professionals to support their continued development.

Over the coming year we will also embark on large-scale projects to improve our facilities and their accessibility. One of these is our ward refurbishment programme due to start in autumn 2024. These works will improve our wards so they feel welcoming and homely for the people staying with us. They will also focus on creating a dementia-friendly environment throughout these spaces so that people with dementia feel safe, supported, and understood.

“I hope you are inspired by our plans and that we can rely on your support to make these aspirations a reality. Working together, we can and will improve end of life care across south east London and beyond.”



We want everyone who stays with us to feel welcome and at home

You will have read about our courageous approach to the ethical challenge of assisted dying and its potential legalisation in the UK (on page 26). We've been working with the communities we serve to develop recommendations for policy makers and the wider sector to consider and, over the coming year, our focus will be on ensuring these are shared. We've heard very different perspectives from the community on this complex issue to those being portrayed in the media. Our view is that it is important to hear unheard voices on this important topic – especially those whose current healthcare experience is poor due to structural inequalities. We are also committed to sharing our learnings with other hospices across the UK so that, together, we can be prepared for any potential change in the law. The openness, willingness to engage and understanding shown of differing views throughout our workshops has been humbling to see.

This is just a taster of our ambitions for the future and we look forward to sharing our impact with you in next year's Annual Report and Accounts. I hope you are inspired by our plans and that we can rely on your support to make these aspirations a reality. Working together, we can and

will improve end of life care across south east London and beyond.

I must end by thanking the 1,200+ volunteers who so generously share their time, expertise and goodwill with us each and every day. These individuals keep our shops open, provide valuable insights on various committees and provide invaluable support to people nearing the end of their lives or living through bereavement.

Thank you also to St Christopher's staff for their continued hard work to reach the growing numbers of people who need us in our community with such care, dedication and determination. Without these key teams and the generosity of our supporters, vital end of life care and support would not be available for people when they need it most. Thank you for being part of this transformative community.

HELEN SIMMONS
Chief Executive

THANK YOU TO ALL OUR SUPPORTERS

We are hugely grateful to the individuals, corporate sponsors and trusts who continue to support us at St Christopher's. Thanks to you we've been able to provide care and support for almost 6,500 people in the last year. Thank you for making this possible.

- 5 Stone Buildings
- 5th Beckenham South Scouts
- Addington Court Golf Club
- Addington Palace Golf Club
- Ambulance Wish Foundation
- AMETEK Airtechnology Group Ltd
- Amphlett Lissimore
- Anthony Gold Solicitors LLP
- APSCo
- Aquarius Golf Club
- B&Q Foundation
- Baltic Exchange
- BBC Children in Need
- BDB Pitmans LLP
- Beauty with a Purpose
- Birketts LLP
- Bluecoat Engineering Ltd
- Blythe Hill Tavern
- BNY Mellon
- Boodle Hatfield LLP
- Brilliant Solutions
- Bromley Football Club
- Bromley Well Innovation Fund
- C Brewer & Sons Ltd Trust
- Capital Generation Partners
- Charles Russell Speechlys
- Collyer Bristow LLP
- Connor Norris
- COOK
- Cosmetics for Charities
- CRASH Charity
- Currey & Co LLP
- Diane and John Brazil and family
- Direct Line Group
- Dixon Wilson
- Dr Friedrich Stock Memorial Trust
- Dulwich Champagne Reception Committee
- Dulwich Friends of St Christopher's
- EG Foundation
- Elliot Dallen Trust
- Ernst & Young Foundation
- Evelyn Partners
- Eventim Apollo
- Ewings & Co Solicitors
- Farrer & Co LLP
- Fb Coales No 4 (Family) Trust
- Forsters LLP
- General Napier Public House
- George and Dragon Pub
- Grant Saw Solicitors
- Harapan Trust
- Heidi Newnham and family
- IdentityE2E
- ING Bank
- Irwin Mitchell
- Jackie Gray and Queenie
- Jet's Charitable Trust
- Jodie and the Cowden family
- John Lamb Hill Oldridge
- K&T Heating Ltd
- Laura's Light
- Lilley Plummer Risks Ltd
- London Catalyst
- Marquee Magic
- Maurice Turnor Gardner LLP
- Meerali Beedle
- Metropolitan Public Gardens Association
- Michelmores LLP
- Mike Twomey
- Milton-Lloyd Limited
- Mishcon De Reya LLP
- MM! The Party Limited
- Panagua Bikes
- Payne Hicks Beach LLP
- Penguins Against Cancer
- Poppy Younger
- Rawlinson & Hunter
- Ray Jones Roofing Ltd
- RJ and AH Daniels Charitable Trust
- Rockcliffe Charitable Trust
- Ros Harding Trust
- Rosie Pound
- Rothschild & Co
- Sainsbury's – Locksbottom
- Sarah Campbell
- Schroder Investment Management Ltd
- ShareGift
- Shortlands Tavern (Shaun Romeril)
- Sinclair Gibson LLP
- Sotheby's
- South London Jazz Orchestra
- St David's College
- St George's German Lutheran Church – Imke Siegerist, Immo Huneke, Peter Croucher (church treasurer)
- STEP - Society of Trust & Estate Practitioners
- Stonehage Fleming Family and Partners

- Taylor Wessing
- The Albert Hunt Trust
- The Anthony Hart Charity Trust
- The Ardwick Trust
- The B & P Glasser Charitable Trust
- The Balcombe Charitable Trust
- The Barleycorn Trust
- The Blyth Watson Charitable Trust
- The Bothwell Charitable Trust
- The Bricklayers Arms
- The Cazenove Charitable Trust
- The Cecil Rosen Foundation
- The City Bridge Trust
- The Daisy Foundation
- The Douglas-Morris Charitable Trust
- The Dyers' Company Charitable Trust
- The Elizabeth & Prince Zaiger Trust
- The Elizabeth Frankland Moore and Star Foundation
- The February Foundation
- The Freddie Green and Family Charitable Foundation
- The Goldsmiths' Company
- The Hayes (Kent) Trust
- The Health Foundation
- The Horner Family Charitable Fund
- The James Wise Charitable Trust
- The JC and KC Foundation
- The Jimmy Knapp Cancer Fund
- The John Horseman Trust
- The Magen Trust
- The Margaret and David Walker Trust
- The Michael and Anna Wix Charitable Trust
- The P M Charitable Trust
- The Rest-Harrow Trust
- The Robert Holman Memorial Trust
- The Thomas J. Horne Memorial Trust
- The Timothy Franey Charitable Foundation
- The Veale Wasbrough Charitable Trust
- The Woodroffe Benton Foundation
- Tom Allen
- Universal Music Operations Limited
- Walder Wyss Ltd
- Whitehill Chase Foundation Trust
- Wilsons Solicitors LLP
- Withers Worldwide
- Women in Fellowship.

A SPECIAL THANK YOU

Over the last year two individuals, who both dedicated their time and expertise to the hospice for many years, sadly died. We'd like to remember them and acknowledge their significant contribution.

David White was our Director of Commercial Projects and, for many years, successfully led our Retail team. David's vision brought with it huge growth to our network of shops bringing in record profits for the organisation. David is very much missed but his legacy lives on as his team continues to go from strength to strength.

Dr Sam Klagsbrun was an important figure in the history of St Christopher's and the modern hospice movement and was one of our Vice Presidents. He worked alongside Dame Cicely Saunders on the psychosocial elements of the care of people dying or grieving. His regular visits to the hospice, right up until the recent pandemic, and his guidance to the organisation and its leadership were always extremely supportive. They are part of a significant legacy he leaves to the organisation, which we will continue to reflect on and honour in our work moving forward.

We feel lucky to have worked with both David and Sam and will remember them and the work of other similar leaders who have shaped our history and our future.

MEET THE TEAM

EXECUTIVE TEAM



HELEN SIMMONS
Chief Executive



TOM ABBOTT*
Director of Income
Generation and
Communications



AMANDA MAYO
Care Director



JAN NOBLE
Director of Quality
and Innovation



DAVID TULLETT
Director of People and
Organisational Development



DR JOY ROSS
Lead Consultant in
Palliative Care



JOHN VICKERS
Director of Finance
and Corporate Services

*Appointed 16 October 2023

**Appointed 1 July 2023

TRUSTEES



NEIL GOULDEN
Chair



ELEANOR BROWN
Vice Chair



VIVIAN BAZALGETTE
Trustee



GLEND A BONDE**
Trustee



NICK DIAMOND
Trustee



TONY HUNTER
Trustee



IAN JUDSON
Trustee



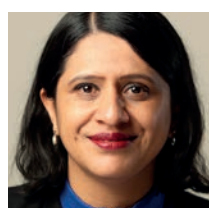
DANIEL KELLY OBE
Trustee



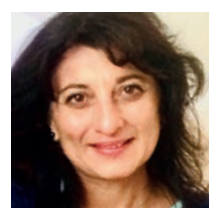
JOHN KING
Trustee



CATHERINE MCDONALD
Trustee



SATVINDER REYATT**
Trustee



DEEPTI TOWNSEND
Trustee

PATRON

HRH PRINCESS ALEXANDRA

AMBASSADOR

TOM ALLEN

PRESIDENT

LORD IAN MCCOLL

VICE PRESIDENTS

MORGAN JONES MBE

Appointed 1 September 2023

RODNEY BENNION OBE

DR CATHERINE DENT

DR TYRRELL EVANS

DR GILLIAN FORD CB

DAME SHEILA HANCOCK OBE

DAME PAULINE HARRIS DBE DL

DR SAM KLAGSBRUN

Deceased September 2023

JOHN RHODES

BARBARA RICHARDSON

COLIN RUSSELL

RUTH SAUNDERS

COMPANY SECRETARY

JOHN VICKERS

REGISTERED OFFICE

51-59 Lawrie Park Road
Sydenham
London SE26 6DZ

BANKERS

HSBC Bank plc
165 Fleet Street
London EC4A 2DY

INDEPENDENT AUDITOR

Moore Kingston Smith LLP,
9 Appold Street
London EC2A 2AP

REGISTRATION NUMBERS

Registered charity
number 210667

Registered company
number 00681880

VAT registration
number 523613961



END OF LIFE CARE THAT'S ALL ABOUT YOU

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Sydenham, London SE26 6DZ

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Email **info@stchristophers.org.uk**

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[stchristophers.org.uk](https://www.stchristophers.org.uk)

Registered charity 210667

registered with the Fundraising Regulator

Registered company number 00681880

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