

GARDEN HOUSE HOSPICE CARE
(A company limited by guarantee and not having a share capital)
TRUSTEES' ANNUAL REPORT AND FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023

Garden House Hospice Care
Company Limited by Guarantee No. 2040989
Registered Charity No. 295257

Registered Office:
Garden House Hospice,
Gillison Close,
Letchworth Garden City
Herts SG6 1QU

GARDEN HOUSE HOSPICE CARE
REPORT AND FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023

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**GARDEN HOUSE HOSPICE CARE
ADMINISTRATIVE INFORMATION
FOR THE YEAR ENDED 31 MARCH 2023**

PATRONS

Sir Simon Bowes Lyon KCVO
Mr Paul Cherry
Lord and Lady Fellowes
Mrs Sarah Harrison
Sir Oliver Heald QC, MP
MP for Stevenage (Steven McPartland)
MP for Hitchin and Harpenden (Bim Afolamai)
Mrs Diana Laing
The Chairman of North Herts District Council
The Mayor of Royston
The Mayor of Stevenage
The Bishop of St Albans
Mr Richard Whitmore
Mrs Boo Williams

HONORARY VICE PRESIDENTS

Dr Frances Aldridge, Mrs Sally Alford, Mr Ivor Barber, Mr Trevor Bentham, Mrs Mary Blaksley, Mrs Trudy Bunday, Mr Bernard Davies, Mr Andrew Egerton-Smith MBE, Mrs Janet Hill, Mrs Anne Houghton, Mr Anthony Isaacs, Dr Viv Lucas, Mrs Jenny Lupton, Mr Roger Manning, Mrs Janet Nevitt, Dr Catherine Offer, Mr Peter Willmott, Mrs M Guernier, Mr J Bush, Mr John Procter.

TRUSTEES

Mr Stephen Mellish^{1,2,3} (Chairman)
Dr Simon Chatfield¹
Mr Richard Dearden²
Mrs Melanie Flynn²
Mr Roger Gochin²,
Professor Shahid Khan¹ (Co-opted 30.03.22)
Mrs Gemma Manning³ (Co-opted 30.11.22)
Mrs Rhona Seviour³
Mr James Silsby²
Mrs Jennie Mattin¹ (Co-opted 07.06.22)
Dr Pauline Williams³
Sir Tim Wilson DL² (Resigned 31.12.22)

SECRETARY

Mrs Jillian Graves

TREASURER

Mr Roger Gochin

**SENIOR LEADERSHIP TEAM
(KEY MANAGEMENT PERSONNEL)**

Mrs Sue Plummer (Chief Executive Officer) (Resigned 31.10.22)
Mrs Lisa Hunt (Chief Executive Officer) (Appointed 01.01.23)
Dr Sarah Bell (Medical Director)
Mrs Elizabeth Kennedy (Director of Patient Services)
Mr Philip Mahan (Director of Finance - (Resigned 31.10.22)
Ms Edith Yembra (Interim Director of Finance - (Appointed 07.11.2022)
Mrs Carla Pilsworth (Director of Income Generation)
Mr Derek Turnbull (Director of People)

GARDEN HOUSE HOSPICE CARE

ADMINISTRATIVE INFORMATION (continued)

FOR THE YEAR ENDED 31 MARCH 2023

REGISTERED AUDITORS	Haysmacintyre LLP 10 Queen Street Place London EC4R 1AG	
BANKERS	Virgin Money 7 Gold Street Northampton Northamptonshire	Lloyds Bank Plc 1 Bancroft Hitchin Hertfordshire
	The Charities Aid Foundation Kings Hill West Malling Kent	NatWest Bank Station Place Letchworth Garden City Hertfordshire
HONORARY CHARTERED BUILDING SURVEYORS	Robert Lombardelli Partnership St Luke's House 5 Walsworth Road Hitchin Hertfordshire, SG6 1QU	
REGISTERED OFFICE	Garden House Hospice Care Gillison Close Letchworth Garden City Hertfordshire SG6 1QU	
COMPANY NUMBER	02040989	
CHARITY NUMBER	295257	
OPERATING NAME	Garden House Hospice Care	
TRADING COMPANY	Garden House Hospice Trading Limited (Company no. 02671267)	

GARDEN HOUSE HOSPICE CARE

CHAIRMAN'S REPORT

FOR THE YEAR ENDED 31 MARCH 2023

This past financial year has certainly proved, once again, challenging in more ways than one. Having navigated the two years of pandemic and the 'merger that never happened' we then faced the consequences of the worst financial crisis in years.

Implementation of our new 3-year strategy commenced in April 2022. The first year has been more challenging than was foreseen. The main area of contention was the cost-of-living crisis that has impacted everyone. For example, our daily running costs have gone up from £18k per day in 2021 to £20k in just twelve months later. As we all know, there are global events taking place that have created these unfortunate conditions. However, everyone pulled together, and it was admirable that our staff and volunteers did not allow this to in any way, shape or form impact our quality of care to our beneficiaries. Indeed, following an unannounced visit from the CQC we were proud to receive a rating of "Good". Again, testament to all of the hard work and commitment given day in, day out by everyone at Garden House Hospice Care.

We remain committed to developing and implementing a long-term strategy that will ensure we can minimise our impact on the environment, protecting our planet for future generations. To that end we spent more time this year on working towards a new strategy, which we intend to launch in 2023. We are indebted to Jo Henniker, our Advisor to the Board for sustainability, for her generous giving of her time and expertise. This is a new area for us, and we want to get it right.

The year ended with £854k over budget which, for a number of reasons, is unacceptable and unsustainable. Going into the new financial year, and under the leadership and guidance of our new Finance Director, much has been changed in how we set budgets along with how they are reported on and monitored. Although we have agreed to a 'controlled' deficit budget of £700k in the 2023/24 financial year, the plan is to be cost neutral in 3 years. It should be noted that not many hospices in the UK currently run with cost neutral budgets.

The year also saw a number of changes at senior executive and Board of Trustee level. Our CEO of more than seven years, Sue Plummer left in October 2022 as did Finance Director Philip Mahon.

In her time as CEO, Sue provided progressive and dynamic leadership by growing the organisation through expansion of our provisions of care. Her work in leading the hospice through the pandemic was another significant achievement.

With Sue's resignation we then embarked on finding a replacement. I am indebted to the Appointments Committee, led by Pauline Williams for the successful recruitment of our new CEO, Lisa Hunt. Lisa joined in January 2023 and brings with her a wealth of knowledge, skills and experience that spans many areas of the NHS as well as palliative and end of life care.

We have also made two new appointments within the Senior Leadership Team with Liz Kennedy, promoted to the position of Director of Patient Services and Edith Yembra joining the hospice as our Finance Director.

I have full confidence in Lisa and her leadership team in successfully delivering our ambitious 3-year strategy.

Sir Tim Wilson retired from the Board of Trustees at the end of 2022 after eleven years' service. Tim made a real difference to the Board and hospice over that time with his extensive knowledge, skills, and experience. We welcomed both Jennie Mattin and Gemma Manning to the Board. Jennie and Gemma bring a wealth of knowledge, skills, and experience from the worlds of clinical and people and culture respectively.

We continue to assess how and where we can improve our governance. We revised our Articles of Association to reflect how the charity now operates compared to when it was created in the late 1980's, early 1990's. We also introduced a new Board sub-committee that has full focus on our people and our culture. This is such a critical area to spend more time and effort on as it is fundamental in successfully delivering our 3-year strategy.

GARDEN HOUSE HOSPICE CARE

CHAIRMAN'S REPORT

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It is also with sadness that we were made aware of the passing of former Chair of the Board of trustees, Sheila Ball. Sheila was instrumental in the hospice being established in the first place.

And finally, I couldn't end my report without the customary but sincere thanks and appreciation to all staff and volunteers who make this organisation what it is. The people and organisations from across our community who support our work are invaluable and on behalf of the Board of Trustees I would like to thank you all once again and look forward to your continued support in the years ahead.

A handwritten signature in black ink, appearing to read 'S. Mellish', with a stylized flourish underneath.

Steve Mellish
Chairman

GARDEN HOUSE HOSPICE CARE

TRUSTEES' REPORT

FOR THE YEAR ENDED 31 MARCH 2023

Garden House Hospice Care (GHHC), being a company limited by guarantee and a registered charity, has adopted the practice that the Directors (Council Members) be called Trustees and the Board of Directors (Council of Management) be known as the Board of Trustees.

Objectives and Activities

GHHC exists to provide specialist palliative care for adults living in Stevenage, North Hertfordshire, and adjoining parts of Mid Bedfordshire with advanced cancer, motor neurone disease or other terminal illness.

GHHC also provides support and care to the families and friends of patients.

GHHC provides:

1. Inpatient Care: The eight bed In-patient Unit provides consultant led specialist palliative care (the bed numbers had temporarily dropped to six, secondary to the effects of the Covid-19 pandemic and staffing levels).
2. Home Care: Hospice at Home team of Nurses and Health Care Assistants provide care and support to patients and families at home to support wishes and preferences of those who wish to remain at home for end-of-life care support at home. The service also supports discharges from Hospital and Hospice. We also have 10 commissioned fast track Continuing Healthcare beds that the team support with up to 4 visits per day dependant on needs.
3. Hawthorne Centre: Specialist Day services, palliative rehabilitation, living well, outpatient care and drop-in services provided through a variety of face to face and virtual sessions.
4. Family Support: A range of services including psychological support, bereavement counselling, carer support, spiritual care, social work support and advice for patients' families. Children's and Young Person's Bereavement Service.
5. Education: GHHC provides an education programme including mandatory training for all staff and volunteers. It provides a range of specialist education sessions that are open to all health and social care professionals. The organisation supports placements and training for junior staff in all relevant fields. Individual staff members contribute to the training of student nurses, medical students, GP trainees, specialist registrars and other professionals undertaking training in other fields e.g., paramedics. Volunteers all complete an induction course and mandatory training appropriate to their area of work.
6. Telephone Advice: A specialist palliative care 24/7 telephone advice line.
7. Community Engagement: Volunteers support all areas of the hospice; Compassionate Neighbours - community volunteers offer friendship through 1-1 matches or via Wellbeing Hubs and schools and colleges outreach to engage with young people about palliative and end of life care and the work of the Hospice.
8. Frailty Clinical Nurse specialist support to Care homes. This is a commissioned service of 3 WTE Nurses who assess and support all residents in our locality with individualised care planning and ongoing support, working closely with the care home staff and GP for each home.
9. Garden House Hospice Care Admiral Nurse: Employed by GHHC and works with families and people living with dementia at end of life in North Hertfordshire, to ensure they have the best possible care and support. at the end of their life. This post also delivers a wide range of education provision for Dementia awareness. and support to both healthcare professionals and families and carers.
10. We have a commissioned Care Home Educator dedicated to support end of life education in our local care and nursing homes.

Our vision

Supporting all people in our community living with life-limiting conditions and their families and carers, to live as well as possible and according to their own wishes. Caring today, tomorrow and in the future.

Our mission

Garden House Hospice Care provides compassionate and holistic specialist palliative care to those in our community with life-limiting conditions, to enable them to live as well and as fully as possible. We share our knowledge and expertise to enable wider access to the best end of life care.

GHHC's objectives are to:

- Ensure that all activities are carried out within an appropriate legal, financial, ethical, and administrative framework.
- Provide appropriate resources, staff, buildings, and equipment to fulfil GHHC's mission.
- Ensure that the appropriate monetary resources are available from contracts, direct fundraising, and trading by the Trading Company to meet the care needs of GHHC's patients and their families.
- Encourage community support.
- Ensure that the resources of the organisation are managed and maintained providently.
- Maintain strategic and operational plans in accordance with GHHC's charitable status.

The principal activities of the Trading Company are as general merchants and traders. The Trading Company provides an essential revenue stream for GHHC. Their directors have set out a strategy that aims to increase the Company's contribution to GHHC year-on-year. This strategy is articulated in the Company's annual report.

During the year, GHHC:

- Submitted its twelfth 'Quality Account' to the NHS. The Quality Account measures quality by looking at patient safety, the effectiveness of treatments that patients receive and patient feedback. It is a major piece of work and may be viewed on the Garden House Hospice Care website by going to the following address:
<https://www.ghhospicecare.org.uk/about-us/our-reports>
- Our focus remained on ensuring that people who would benefit from our care and support could access our services safely when they needed it, and, as the data in this report demonstrates, we have continued to enhance our services during the year following the expansion of our Compassionate Neighbours model and Community Hubs. We are also delighted to see many more people self-referring.
- We have increased our therapy support following bereavement and worked hard to reach our younger community through our excellent schools' project.
- Throughout the year, we remained focused on improving our clinical effectiveness, patient safety, and patient experience. We built improvements on audit and survey results whilst benchmarking with other hospices, applying scrutiny of our outcomes through a strengthened clinical governance framework aimed at continually improving all elements of patient care.
- Maintained its normal pattern of regular meetings of Trustees with members of the Senior Leadership Team, and, as part of the annual cycle of reporting, received detailed reports on all aspects of GHHC's activities covering Health & Safety; Quality; Education; Patient Services; Safeguarding; Budget; Fundraising; Accounts; Human Resources and Volunteer Services.
- Ensured that its established policy of staff development and training continued.

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FOR THE YEAR ENDED 31 MARCH 2023

- Maintained its policy of safeguarding GHHC's resources, using them as carefully and as fully as reasonably possible and ensuring that the rolling programme of maintenance, repair and replacement of GHHC's physical assets was continued.
- Continued to foster links with Clinical Commissioning Groups, Primary Care Networks, local Community and Hospital Trusts, local GPs and other health and social care providers.

Garden House Hospice Care Clinical Activity

- 2,271 unique patients, carers and community members were cared for across all services with many patients accessing more than one service.
- The Inpatient Unit supported 167 admissions.
- The Family Support Service Team made 2,467 direct contacts with patients and family members.
- The Hospice at Home team supported 115 patients in their homes making a total of 1,096 visits.
- The Continuing Health Care Service supported 87 patients in their homes making a total of 5,614 visits.
- The Frailty team conducted 3,558 reviews and support calls to patients in care homes.
- Compassionate Neighbours received 264 new referrals and had an active caseload of 381 people being supported.

The Trustees know that Garden House Hospice Care is respected both for the quality and nature of the care that it delivers and the fair and honest trading of the Trading Company through its shops. The following comments from patients' families affirms for us that we can be justly proud of the work of all involved:

***"I feel much more confident now and I am definitely getting stronger.
It really doesn't take a lot to knock your confidence when you're always ill.***

"I was able to walk to the doctors by myself recently - It's not far and it took me 20 minutes, but I would never have been able to do that if it wasn't for the help the hospice has given me."

The clinical work of GHHC, the quality of the services it delivers, and the professional competence and capability of staff are measured and monitored in several ways:

1. By the Care Quality Commission (CQC) through its system of unannounced inspections and the publication of the results of such inspections.
2. By the Clinical Commissioning Groups (CCG) with whom GHHC has contracts through the contracts system as well as periodic quality inspection.
3. Through the revalidation process for doctors and nurses and compulsory continuing professional education and training for professional staff.

GARDEN HOUSE HOSPICE CARE

TRUSTEES' REPORT

FOR THE YEAR ENDED 31 MARCH 2023

4. By the Hospice Care and Clinical Governance Committee continuing to monitor the clinical work of GHHC.
5. By undertaking clinical audits using national audit tools designed specifically for hospices by Hospice UK.
6. Through incident reporting, monitoring and shared learning.
7. By the Trustees making announced visits to service providers in GHHC, with the outcome of such visits being formally reported to the full Board.
8. By the Trustees receiving regular Patient Services Reports covering all aspects of patient care.
9. By GHHC preparing an annual Quality Account, for publication on the NHS Choices website.

NHS Hertfordshire and West Essex Integrated Care Board (HWE ICB) response to the Quality Account of Garden House Hospice Care for 2022/2023.

NHS Hertfordshire and West Essex Integrated Care Board (HWE ICB) welcomes the opportunity to provide this statement on the Garden House Hospice Care (GHHC) Quality Account for 2022/23. The ICB would like to thank the hospice for preparing this Quality Account, developing future quality assurance priorities, and acknowledging the importance of quality at a time when GHHC continues to deliver services during ongoing challenging periods. We recognise the dedication, commitment and resilience of staff and volunteers, and we would like to thank them for this.

HWE ICB is responsible for the commissioning of health services from Garden House Hospice Care. During the year the ICB has been working closely with the hospice gaining assurance on the quality of care provided to ensure it is safe, effective, and delivers a positive patient experience. In line with the NHS (Quality Accounts) Regulations 2011 and the Amended Regulations 2017, the information contained within the GHHC Quality Account has been reviewed and checked against data sources, where this is available, and confirm this to be accurate and fairly interpreted to the best of our knowledge.

When reviewing the progress highlighted against priorities that were set out for 2022/23 clear improvements are evidenced. Along with system partners, GHHC have delivered education programmes to support carers. The ICB is pleased to see the progress made with the introduction of the electronic rostering system which will support planning skill mix and capacity. It is recognised that some priorities were impacted due to a number of factors and the continued focus on these areas in the upcoming year is appreciated.

Looking forward to 2023/24, the ICB supports the hospice's quality priorities and are pleased to see the focus on increasing the reach of services and management of any identified inequalities. We encourage the effort towards potential efficiency savings, building resilience, and investment in staff. The planned transformation programme to achieve the 'From Good to Great' aspiration will further develop collaborative working with system partners.

The ICB recognises the challenges experienced by the hospice in 2022/23, and we look forward to a continued collaborative working relationship as well as building on existing successes and collectively taking forward needed improvements to deliver high-quality services for this year and thereafter.

Mary Emson
Deputy Director of Nursing & Quality, Hertfordshire, and West Essex IC
July 2023

Progress Report against the Strategic Business Plan 2022-23

For 2022/23 we set the following strategic objectives and the progress we have made is as follows.

Our community: Sit at the heart of our community and local networks.

- Representation at local, regional, and national meetings has been maintained.
- We have developed links with our new ICS.
- We have continued to work in partnership with Herts Community Trust (HCT) and Integrated Care Board (ICB) to provide the North Herts Palliative Referral Centre (NPCRC) and to support the development of the Single Point of Access (SPA) to enable referrals to be made and triaged in a timely manner.
- Self-referrals continue, with an increase of referrals to our Rehab and Wellbeing team by 45% in this past year.
- Our Family Support Services team have completed a total of 2,467 interventions including the delivery of regular supportive calls to those identified.
- In 2022, our Family support team designed, developed, and launched a new Bereavement Therapy Group 6 session model for bereaved carers.
- During 2022/2023, we continually raised awareness of our Compassionate Neighbours service, receiving 264 referrals, including 30% as self-referrals. Overall, we support a case load of 381 community members.
- 210 people accessing our Compassionate Neighbours services were signposted onwards and discharged in the last year, with 20% being supported at the end of life.
- We increased community outreach and support with a total of 8 weekly Community Wellbeing Hubs across our locality in Royston, Hitchin, Stevenage (2) and Letchworth (4)
- Across these Hubs, we held 235 sessions, with 207 community members on our case load and a total of 4,334 individual attendances.
- We trained 84 new Compassionate Neighbours and onboarded 262 new volunteers, making our current volunteer workforce a total of 843 people.
- We have worked with 38 different schools in our locality across a range of projects designed to raise awareness of hospice services and encourage conversations around death, dying, grief and loss.
- We have engaged with 184 teachers and support staff, 3,412 children and 182 parents.

Our services: Provide high quality services that meet the needs of the whole community.

- We have launched our new three-year strategy and developed an Annual Plan in line with this, so we are able to maintain, respond and adapt services to ensure that our patients and their families are at the heart of everything we do.
- We have successfully implemented the use of the Health Information Exchange (HIE) to support the delivery of our clinical care.
- We have commenced the work for the introduction of the Patient Safety Incident Reporting framework (PSIRF) in line with national requirements.
- We have strengthened our safeguarding procedure with a new Safeguarding Group. This group has a designated safeguarding Trustee, meeting regularly to review governance through terms of reference and a detailed workplan.
- Within our annual audit plan, we have identified appropriate audit standards and areas for quality improvement secondary to audit outcomes.
- We have strengthened our patient safety reviews, embedded within our weekly patient safety meetings, to review and agree actions from all reported incidents and ensure feedback is given to teams.

- Sustained compliance of staff and volunteers attending mandatory training with strengthened monitoring of compliance with our Learning and Development team
- Reviewed our Quality lead structure and responsibilities and amended this to allow for increase focus on quality and safety for 2023.
- Ongoing process for review and updating of policies across the whole organisation with updated policies communicated to staff through our internal intranet news page.
- Systems have remained in place to manage and monitor the prevention and control of infection (IP&C) in line with Covid-19 GOV.UK guidance, remaining responsive to the needs of patients, adapting services for patients and carers to ensure access to services.
- Regular reviews and updates to visitor guidance in 2022/2023 have enabled safe visiting for patients on the IPU, to our Rehab and Wellbeing services and to the Garden House Hospice Care site have identified the areas for implementation of the National Cleaning Standards with our baseline audit completed May 2023 achieving a five-star rating and an agreed ongoing audit plan in place.
- East and North Herts Trust IP&C audit conducted March 2023 with the five results as follows:
 1. Hand Hygiene observational Audit - 100%
 2. IPCT Isolation Precautions Audit - 100%
 3. Commode Spot Check Audit - 100%
 4. IPCT Safe Handling and Disposal of Sharps - 96%
 5. IPCT Environmental Improvement Audit - 92%
- We identified, reported, and safely managed covid outbreaks within our teams completing and complying with external reporting requirements, containing these. During these times we updated staff, patients of any changes practice or requirements in particular us of PPE.
- We regularly update our Living with covid plan and visitor guidance in line with Government policy and local assessed needs of our services.
- Quality Assurance visit completed by the Integrated Care Board receiving good feedback.
- Maintained high quality relationships with care home staff and primary care teams.
- Continued to support and implement individualised plan of care through advanced care planning discussions for all new residents in our allocated care homes to ensure their wishes and preferences are met, including hospital admission avoidance if appropriate.
- Embedded the use of National Early Warning System 2 (NEWS2) on the Inpatient Unit, supported by an associated ceiling of care document.
- Established the Recommended Summary Plan for Emergency Care and Treatment (ReSPECT) document for advance care planning decisions in place of the Hertfordshire Do Not Attempt Resuscitation document, as part of the ICB working group introducing the ReSPECT document
- Continued to utilise the NICE endorsed Establishment Genie tool to support review of staffing and plan for the future models of care.
- Engaged with 9 external research programmes during 2022/2023
- 5 staff members attended the Hospice UK Annual Conference with GHHC poster presentations.
- Family Support Services have improved standard & quality of external supervision to volunteer counsellors through new Supervisor Access Plan
- Face to face family therapy continues prioritising patients, their careers and any children and young people (CYP) directly affected by a patient's condition or death.
- Following patient discharge from IPU, support from spiritual care, supportive calls, or formal counselling sessions is continued as required.
- We have received 254 referrals to our Family Support Services team.
- We have provided spiritual care, supportive calls and formal counselling sessions as required.
- GHHC has continued to provide a blended model of access with remote and virtual support to patients and carers when needed.
- Complementary Therapy and support for staff was provided alongside the service for patients, families, and carers.
- We have delivered Continuing Health Care support at home / Hospice at Home in line with the agreed service model.
- Provided Medical Specialist Palliative Care support to community patients, working collaboratively with HCT SPC CNS team and the East & North Herts NHS Trust
- Continued provision of Frailty Clinical Nurse Specialist (CNS) support to our nursing and residential homes in North Hertfordshire

- During a period of parental leave for our Admiral Nurse dementia CNS, we maintained a reduced capacity service by securing cover from an alternate experienced Admiral Nurse. This has ensured an education element of the role has been maintained alongside enabling direct patient care work to continue.
- In 2022/2023, the GHHC dementia CNS received, accepted, and registered 24 referrals and provided telephone support and advice to 75 non-registered individuals who have made contact.

Our people: Grow a strong, capable, resilient, highly skilled, and motivated organisation.

- Active positive recruitment of staff across all clinical services resulting in key senior posts being successfully filled.
- Increased our recruitment to Student Counsellors on placement to support face to face counselling opportunities.
- Recruited successfully into positions and expanded the breadth of our Board of Trustees
- Continued regular 1:1 support for staff and new yearly appraisal completion programme underway.
- Continued to actively promote confidential access to the employee assistance programme available to all staff.
- Staff and volunteers have accessed sessions run by our Complementary Therapy service to enhance their wellbeing.
- Weekly meditation sessions are now open for volunteers to access.
- With the introduction of the 2023 Annual Plan, there is to be a significant investment in our People and Culture to make GHHC an Employer of Choice. To support these, HR is currently undergoing a recruitment drive to increase capacity and skillsets.

A forward facing, strategic approach to our People and Culture with GHHC being an 'Employer of Choice' has commenced. We will achieve this by developing, rewarding, engaging, and empowering our people.

Our funding: Secure the future of the Hospice through sustainable funding.

- Our Trading team reviewed our shops, identifying actions for those not reaching their potential. Overall, our shops exceeded their income target by £91k. We continue to look to develop our offering and have committed in growing our portfolio.
- We have outgrown our trading warehouse and have identified a new space to move into in the next financial year, this will allow us to grow and improve our services even more.
- Our Fundraising team continued to develop events and initiatives in the community and raised over £2m.
- We have developed and launched 'Connect' which supports local businesses and organisations with networking, education, and team building.
- The launch of our new website has allowed us to reach more people across digital platforms to offer a better experience for those using our website.
- We have supported our Learning and Development strategy and have introduced new apprentice roles, recruiting two apprentices into our Marketing and Communications team.
- Ensured compliance with all relevant legislation, including VAT, Gift Aid and Charity Commission
- We introduced a new accounts system (Sage 200) which has improved reporting information and timescales.
- The use of resources is limited by the funds available.
- The use of funds is monitored by the Finance department.
- Management and reporting on income and expenditure is shared bimonthly with the Finance and General Purposes Committee and ultimately the Board of Trustees on a quarterly basis. This ensures available resources are used effectively, efficiently, and innovatively.
- Professional auditors complete independent checking of the use of funds annually. This provides additional reassurance regarding the expected standards of governance.
- Robust annual budgeting and forecasting process in place.
- The income received from the NHS in 2022/2023 represents 38% of the overall running costs of Garden House Hospice Care
- The remainder of running costs are funded through voluntary income generation, donations, legacies, lottery activity, investment income, shop trading. Legacies amounted to 16% of total income and shop profit equalled 10% of income.

Ethical fundraising at Garden House Hospice Care - our promise

GHHC exists to provide specialist palliative care. Delivering our vital care to those living with cancer and other life-limiting illnesses in Stevenage, North Hertfordshire and adjoining areas of Mid Bedfordshire is only possible because of the generosity and enthusiasm of our supporters.

Our promise to our supporters is to fundraise and communicate in an honest and transparent way. We aim to ensure that everyone who chooses to offer their support to GHHC - whether by making a donation or by giving their time to take part in events, online and digital actions or to simply share our message - has a positive and rewarding experience with us and understands that their support is very much valued.

In order for us to raise the funds needed to provide vital end of life care in Stevenage, North Hertfordshire and adjoining areas of Mid Bedfordshire fundraising is carried out by our staff, volunteers and third-party supporters. In the case of the lottery only, we use a company "Local Hospice Lottery" to generate additional income through lottery sales.

We do not solicit donations by 'cold calling' by telephone or door-to-door collections, and we do not share personal information with any third-party organisations. We do not pressure supporters to make donations and we will always take care to avoid contacting and asking vulnerable people for donations.

We will not solicit or accept donations from companies or individuals who participate in activities which could cause detriment to the charity's reputation or work.

In any case where we may have contractual arrangements in place with agents, we take care to set the standards and obligations that must be met when fundraising on behalf of GHHC. We work closely with these partners to maintain the high standards that we, and the public, expect. This means ensuring that practices and policies are in place and closely adhered to.

GHHC is a member of the Institute of Fundraising and complies with the Fundraising Regulator. Alongside our high standards, we follow their and our own codes of practice to ensure that our fundraising meets the highest standards and supporters have the best possible experience. GHHC complies with the Data Protection Act and the Information Commissioners' guides and codes. Last year (as in the previous year), we did not receive any complaints with regards to fundraising.

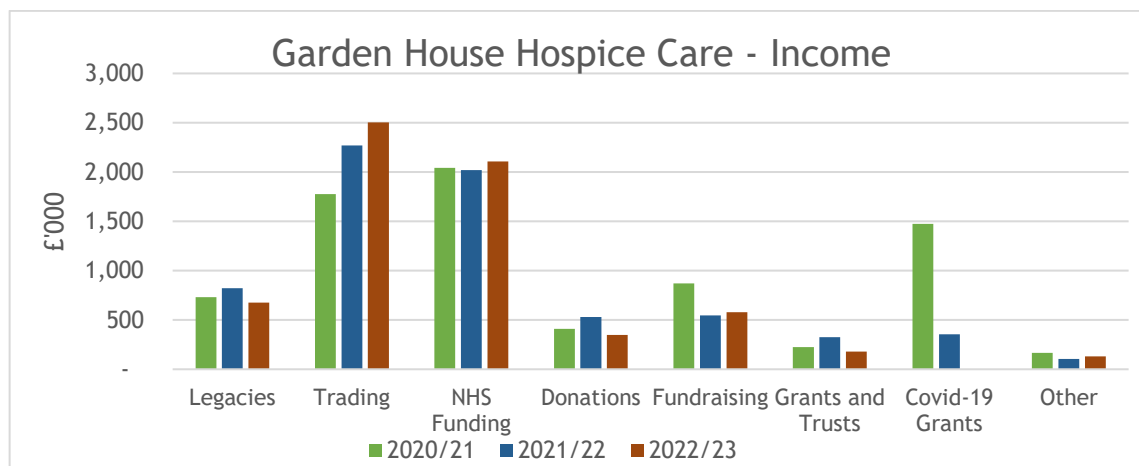
GARDEN HOUSE HOSPICE CARE

TRUSTEES' REPORT

FOR THE YEAR ENDED 31 MARCH 2023

Financial Review

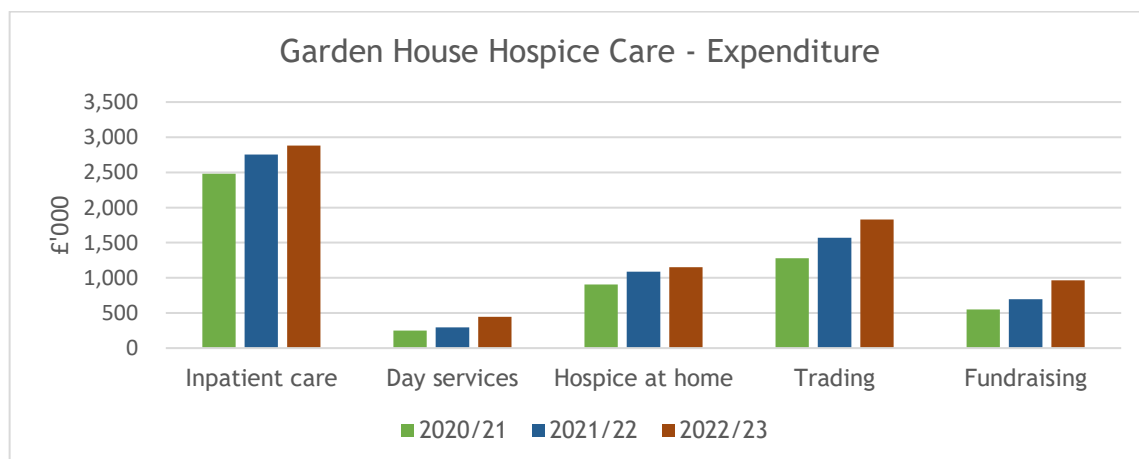
Income was received from the following sources:



For the year ended 31 March 2023, total income decreased by 6% to £6.52 million. Total Income from NHS funding was similar to 2021/22 at £2.11 million.

Despite the continuing financial challenges faced by the public their generous support continued, through legacies, donations, and sales in the trading company's shops, resulting in increased giving. NHS East & North Hertfordshire and NHS Bedfordshire, Luton & Milton Keynes provided 32% of the funding required by GHHC. Legacy income was lower than in the previous year at £0.68 million.

Expenditure shown analysed by activity comprises:



Total expenditure decreased by 14% to £7.27m this year: spending on charitable activities increased by 8% and spending on income generation increased by 40%.

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FOR THE YEAR ENDED 31 MARCH 2023

The net result for the year was a deficit of £853,673, compared to a surplus of £610,510 in the previous year. GHHC continues to need the help of our supporters to provide services in the medium to long-term otherwise the charity will have insufficient income to cover its ongoing costs.

GHHC does not have medium or long-term pension liabilities arising from obligations to a defined benefit pension scheme.

Reserves Policy

All charities are required to consider their level of reserves to ensure sustainability. Garden House Hospice Care provides a range of critical health services upon which our local community depends. These services are funded by fluctuating income streams; the existence of reserves ensures that services can be delivered continuously in the event of a short-term reduction in income.

During the financial year, the charity Trustees adjusted its reserves policy considering the volatility of fundraising income, continuing uncertainty about the economy following the Covid-19 pandemic and global world economy. GHHC's reserves policy requires that free reserves should not be less than 6 months' operating costs, excluding costs relating to retail activities. As of 31 March 2023, 6 months' operating costs, excluding trading costs, represented £2,719,125. The free reserves comprise of the aggregate of the Operating, Legacy Equalisation / Risk Management, Asset Management, Designated Fixed Asset and Strategic Development Reserves, as this assures the charity of considerable financial stability.

The Charity Commission does not make a specific recommendation on the level of reserves to be held by an individual charity but require, as minimum good practice, that Trustees:

- Keep the Reserves Policy under review.
- Monitor the level of reserves held throughout the year.
- Consider any action that may be needed to replenish or spend reserves.
- Implement a process of ongoing review of the reserves level, target, and policy.

In line with recommendations from the Charity Commission, the Board of Trustees have agreed that the Hospice should provide reliable and consistent services to its beneficiaries beyond the immediate future. The Hospice needs to be able to meet unexpected expenses, absorb setbacks and take advantage of change and opportunities for development when they arise. Taking all these factors into consideration, the Trustees approved a new Reserves Policy at its Board meeting on 26 July 2023 as details below.

Operating reserves

The key risk Garden House Hospice Care faces is the challenge of financial sustainability because of a temporary or longer-term fall in its resources, granted or earned income. Approximately 59% of the charity's income comes from public funding, Fundraising, Trusts and Grants, Lottery, Trading Profits, with a heavy dependence upon general donations and legacy income, which can be unpredictable within a defined period. The Trustees consider it prudent and desirable to ensure that the risks and challenges to income in the short and medium term can be met without significant disruption to services. The Trustees consider that an operating reserve of 6 months of full running costs is appropriate to mitigate this risk, with an aim to keep the reserve at the top end of this range.

Legacy Equalisation / Risk Management Reserve

This reserve will be to smooth out any year-on-year fluctuations against perceived risks to fundraising and legacy income. Legacies are an important income stream for the hospice, generally comprising around a 17% of total income, but volatile. The charity therefore needs to include legacy income in its cost budgeting, so this reserve is an added contingency to avoid any disruption to day-to-day activity in the event of low legacy receipts in a given year. Funds would be taken from the reserve to make good any shortfall in legacies against the annual budget, unless compensated for by other income streams.

GARDEN HOUSE HOSPICE CARE

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Asset Management Reserve

An asset management survey has been planned, which would identify potential upgrading and repair work which will be required going forward to the hospice and Ernest Gardiner buildings and plant. The Trustees have agreed therefore to set aside a minimum of 5% of surplus funds in any given year for future work.

Strategic Development Reserve

The Trustees recognise their responsibility to ensure that monies given to the charity are used to further the charity's objects and meet the needs of its beneficiaries. Any funds surplus to those required for the other designated reserve funds are held in a strategic development reserve. The strategic development reserve is earmarked to contribute to the funding of the charity's strategic aims, whether for revenue or capital expenditure. Some of this reserve was drawn on last year to support the exceptional item of expenditure. Part of the strategic development reserve is held in investment with Evelyn Partners yielding an income.

Restricted Reserve

Some funds are given to the charity to use for specific purposes and where this is the case they are held on trust in a restricted reserve and drawn on as the funds are required for the purposes for which they were given. Where a capital asset is bought with the funds, the reserve is drawn down in line with the depreciation of the asset rather than in totality at the time of purchase.

Designated Fixed Asset Reserve

This represents the net book value of the hospice's amount of the total reserves that are tied up in tangible fixed assets that cannot be realised easily, mainly the hospice buildings, plant and equipment, and Furniture and Fittings. It has been setup to assist in identifying funds which are not free funds, as Garden House Hospice Care are not able to draw down on this reserve, which represents the value of its fixed assets as shown on the balance sheet.

As of 31 March 2023, the charity had a total reserve of £10.98m (2021-2022: £11.79m), represented as follows:

Funds	2023 £	2022 £	Description
Designated Reserves	6,281,403	6,221,984	The designated fixed asset fund represents the net book value of Garden House Hospice Care. These are tangible fixed assets which are not free funds.

Reserves excluding fixed asset funds.

Restricted Reserves	31,667	200,693	These are restricted for specific projects.
Strategic Development and Asset Management Reserves	2,751,135	1,821,741	This covers our planned and preventative maintenance programme.
Risk Management Reserves	1,874,397	3,547,857	General purposes - this is against perceived risks to income.
Total	10,938,602	11,792,275	

GARDEN HOUSE HOSPICE CARE

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Investment policy

GHHC invests the funds held in its free and restricted reserves accounts to gain a financial return. GHHC appointed an investment manager, Evelyn Partners with the aim of generating an absolute return above the consumer price index.

The investment policy differentiates between:

- short term reserves, to be held in bank accounts, to provide financial security against fluctuating income streams and expenditure patterns; and
- medium and long-term reserves to be held in a portfolio based on a strategic asset allocation. Investments will be substantially held in index tracker funds.

The allocation of assets for investment is determined in relation to the Hospice's cash flow projections.

During the year, the charity made losses on its investments of £108,212 (2022: gains of £41,652).

Principal Risks and Uncertainties

GHHC has a formal risk management process through which the Senior Leadership Team identifies the major risks to which the organisation may be exposed and has ranked these by likelihood and impact, culminating in risk control documents which are updated on a regular basis.

All significant risks, together with current mitigation actions, are reviewed regularly throughout the year by the Board of Trustees and committees of the Board. The Trustees are satisfied that systems have been developed and are in place to mitigate identified risks to an acceptable level.

All staff and volunteers are required to train to ensure that they are familiar with the operating systems of the Hospice and the risks of the activities in which they are involved.

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The principal risks and uncertainties identified by the charity are as follows:

Risk identified	Action taken to mitigate the risk.
A significant fall in voluntary income	Income is monitored closely. Comprehensive management accounts are presented to the Finance and General Purposes Committee six times a year and then to each meeting of the Board of Trustees (at least 6 meetings per calendar year) with monthly and year-to-date figures. Similar considerations apply in the case of the Trading Company where management accounts are offered to each meeting of the Board of the Trading Company (also at least 6 meetings per year). The progress of key fundraising events is reported by the Director of Income Generation to Trustees on a regular basis. Close control of expenditure in both GHHC and the Trading Company is the other side of the equation. The importance of an adequate level of reserves is crucial and the reserves policy is noted elsewhere.
Unsafe or poor clinical practice	There are policies in place to ensure the recording and investigation of incidents in clinical areas. All clinical incidents are reviewed at the Health & Safety Meeting with monthly reporting and review of quality metrics at the Clinical Team Leaders meeting. Incidents which require a change of practice are presented at the Hospice Clinical Governance Committee. This is supplemented by having an education and learning programme in place.
Adequate clinical staff to ensure safe clinical practice	Close monitoring of patient dependency and staff skills mix, and regular review of the Hospice case load are in place. There is flexibility with bank staff who cover during periods of holiday or sickness.

GARDEN HOUSE HOSPICE CARE

TRUSTEES' REPORT

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Governing Document

Garden House Hospice Care is a company limited by guarantee incorporated on 25th July 1986 (Company Number 02040989, Registered Office Gillison Close, Letchworth Garden City, Herts SG6 1QU) and registered as a charity on 23rd September 1986 (Charity Number 295257). Its Memorandum and Articles of Association govern GHHC. In the event of GHHC being wound up, the members are required to contribute an amount of £1 each.

The Trustees comply with the objects of, and work within the scope of the powers set out in, the Memorandum of Association. The Trustees follow the seven principles of good governance as set out in the 2017 Good Governance Code for larger charities.

Public Benefit

The Trustees have paid due regard to the Charity Commission's Public Benefit Guidance and complied with section 17 of the Charities Act 2011 in exercising their powers and duties.

They note that were it not for GHHC and its work, adult hospice care would not be available in Stevenage and North Hertfordshire.

At the time GHHC was established in 1986, its two founding principles were that all treatment and care would be offered to the public without discrimination - that is without regard for age, race, colour, religion, gender, sexual orientation, or financial means of the patient - and that all treatment and care would be supplied free of charge.

The Trustees are proud to confirm that GHHC has not deviated from those principles.

Recruitment and Appointment of Trustees

Trustees are recruited by a professional interview process. The Board considers candidates for appointment as Trustees after being duly proposed usually by existing Trustees, associated professionals, or staff; or following advertisement. Trustees must be members of GHHC. The Trustees seek to ensure that all proposed Trustees enhance the existing committed and diverse body of Trustees, come from a variety of backgrounds with experience relevant to the work and management of GHHC, and can provide the necessary commitment before being elected.

New Trustees may be appointed (co-opted) by the existing Trustees, but this must be approved by GHHC membership at the first Annual General Meeting (AGM) following their initial appointment. Trustees seeking election at an AGM must be formally proposed and seconded by Members of GHHC.

The Articles of Association stipulate that one third of the Trustees must retire annually by rotation beginning with those Trustees who have been longest in office. Trustees retiring by rotation may offer themselves for re-election at the AGM.

Trustees' Induction and Training

All potential Trustees undergo a period of induction during which they are shown all aspects of GHHC's work, attend relevant meetings and identify with their area of particular interest or expertise.

Trustees must prove their eligibility for trusteeship (Fit and Proper Person Test), sign a formal declaration to that effect, and have a Disclosure and Barring Service check.

All existing and potential Trustees are expected to familiarise themselves with the Charity Commission Guidance CC3 "The Essential Trustee" and Companies House's document "Life of a Company part 1; Annual requirements". They have access to national training opportunities specifically for Trustees. Links with

GARDEN HOUSE HOSPICE CARE

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FOR THE YEAR ENDED 31 MARCH 2023

Trustees from other hospices are fostered and opportunities for training within the wider hospice movement can be accessed as appropriate. All Trustees have easy access to all policy and report documents relating to the GHHC's activities. Personal copies of key documents such as the Memorandum and Articles of Association are provided.

Organisational Structure

The Trustees meet for Board meetings at least six times throughout the year. There are also a similar number of meetings of two committees: Finance and General Purposes, Hospice Care and Clinical Governance; a sub-committee: Investment; and the Trading Board. The CEO and members of the Senior Leadership Team attend and provide reports for all meetings. Additional meetings are scheduled if/when necessary. Minutes of the previous meeting together with the agenda and relevant papers for the forthcoming meeting are circulated in advance. The Trustees individually represent the Board on several internal forums and are, increasingly linked to specific areas of the Hospice's work. Three of the Trustees are also Directors of the Trading Company, Garden House Hospice Trading Limited.

A programme of announced visits by two Trustees to a particular area of GHHC's work results in improved communication between the Board of Trustees and volunteers and staff. Each visit gives rise to an action plan which is discussed and monitored by the Board.

The Trustees establish the strategic plan and approve relevant policies. A scheme of delegation is in place whereby senior managers are responsible for the overall day-to-day management of the organisation and for ensuring that policies are adhered to, and plans brought to fruition.

The Chief Executive is Lisa Hunt. The Senior Leadership Team members at 31 March 2023 were:

Medical Director:	Dr Sarah Bell
Director of Patient Services:	Elizabeth Kennedy
Director of Income Generation:	Carla Pilsworth
Director of Finance: (Interim)	Edith Yembra
Director of People:	Derek Turnbull

The members of the Senior Leadership Team attend the Trustees' meetings but do not have voting rights. From time-to-time other members of staff, independent advisers, or experts in various fields are invited to attend meetings for specific purposes to support or facilitate the Trustees' decisions.

The Senior Leadership team support 223 staff and up to 750 volunteers whose contribution is crucial to the success of the charitable work and fundraising. Donated services, in the form of voluntary help, are not reflected in the Statement of Financial Activities.

Volunteers support the work of GHHC by providing assistance as receptionists, serving light refreshments to patients and visitors, flower arranging, undertaking administrative tasks, working as Compassionate Neighbours, working within the Day Services and In-patient Unit, gardening, and providing transport for patients and fundraising. Volunteers also make a considerable contribution towards the work of the Trading Company as shop assistants and helping with the sorting and delivering of donations from the Distribution Centre.

GHHC is an equal opportunities employer.

GHHC is a member of Hospice UK which is an umbrella organisation. However, it does not impact on the operating policies of GHHC.

GARDEN HOUSE HOSPICE CARE

TRUSTEES' REPORT

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Pay Policy for senior staff.

The Trustees consider that the Board of Trustees and the Senior Leadership Team comprise the key management personnel of the charity in charge of directing and controlling, running, and operating the Charity on a day-to-day basis. All Trustees give of their time freely and no Trustee received remuneration in the year.

Details of Trustees' expenses and related transactions and Senior Leadership Team salaries are disclosed in note 6 to the accounts. The pay of the Chief Executive and members of the Senior Leadership Team and all staff are reviewed annually and normally increased in accordance with average earnings to reflect a cost-of-living adjustment. In view of the nature of the charity, the Trustees benchmark remuneration against pay levels in other charities. The remuneration benchmark is the mid-point of the range paid for similar roles in similar charities of similar size.

Trustees

The Trustees who served during the year were:

Mr Stephen Mellish^{1,2,3} (Chairman)
Dr Simon Chatfield¹
Mr Richard Dearden²
Mrs Melanie Flynn²
Mr Roger Gochin²,
Professor Shahid Khan¹ (Co-opted 30.03.22)
Mrs Gemma Manning³ (Co-opted 30.11.22)
Mrs Rhona Seviour³
Mr James Silsby²
Mrs Jennie Mattin¹ (Co-opted 07.06.22)
Dr Pauline Williams³
Sir Tim Wilson DL² (Resigned 31.12.22)

Committees

1. Clinical Governance.
2. Finance and General-Purpose.
3. People and Culture.

In accordance with Article 39 of the Hospice Articles of Association there are no Trustees retiring by rotation at the Annual General Meeting:

Mr R Gochin is expected to retire at the Annual General Meeting.

Trustees' Interest in the Shares of the Hospice

GHHC is a company limited by guarantee and not having a share capital, therefore the Trustees have no financial interest other than the extent of the limited guarantee as denoted in the Memorandum of Association of the Hospice.

Trustees' Responsibilities

The Trustees (who are also the directors of GHHC for the purposes of company law) are responsible for preparing the Trustees' Annual Report and Accounts in accordance with applicable law and regulations. Company law requires the Trustees to prepare accounts for each financial year. Under that law the Trustees have elected to prepare the accounts in accordance with United Kingdom Generally Accepted Accounting Practice (United Kingdom Accounting Standards and applicable law).

GARDEN HOUSE HOSPICE CARE

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FOR THE YEAR ENDED 31 MARCH 2023

Under company law, the Trustees must not approve the accounts unless satisfied that they give a true and fair view of the state of affairs of the charity and of the group and the incoming resources and application of resources, including the net income or expenditure of the group for the year.

In preparing those accounts, the Trustees are required to:

- Select suitable accounting policies and then apply them consistently.
- Observe the methods and principles in the Charities SORP.
- Make judgments and estimates that are reasonable and prudent.
- State whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the accounts.
- Prepare the accounts on a going concern basis unless it is inappropriate. to presume that the charity will continue in operation.

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

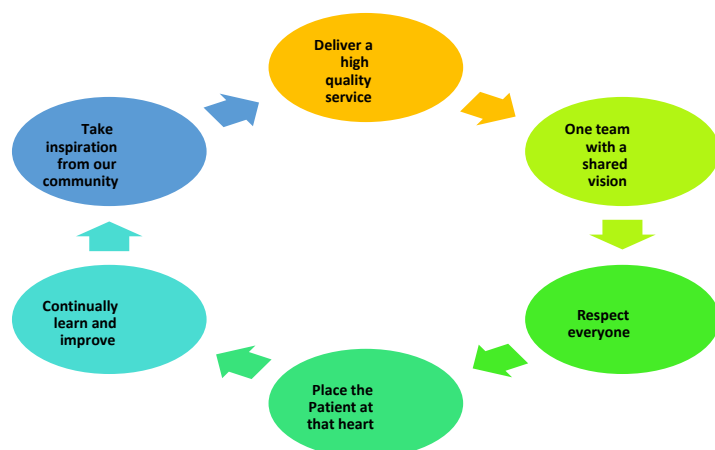
In so far as the Trustees are aware:

- there is no relevant audit information of which GHHC's auditor is unaware; and
- the Trustees have taken all steps that they ought to have taken to make themselves aware of any relevant audit information and to establish that the auditor is aware of that information.

Strategic Objectives for 2023-2024

The Board of Trustees have agreed the following strategic objectives for 2023-24

Delivering Outstanding Care delivered through a values-based Culture Our Values



GARDEN HOUSE HOSPICE CARE

TRUSTEES' REPORT

FOR THE YEAR ENDED 31 MARCH 2023

At Garden House Hospice Care we are proud of what we have already achieved and everyone at the hospice plays their part in enabling our specialist care to continue - whether that is directly providing care and support for patients, raising or processing funds needed, shouting about what we do, or ensuring our buildings, systems and processes remain fit for purpose.

What we stand for, how we behave and how we deliver our care is incredibly important. We can only be there now and in the future by ensuring our hospice values and the associated behaviours remain at the heart of everything we do. They underpin our culture and are central to our work.

We are proud of our heritage, created by our community for the community and are privileged to have the support of our local community. We are proud to be part of the Integrated Care System locally as an independent charity, able to determine our own future and make our own decisions. Our patients and those closest to them are at the heart of everything we do. Our hardworking and loyal employees and volunteers enable us to continue our work and we recognise our reputation is key to our continued success.

As a local charity, supporting local people these values and behaviours are important to all of us and should be practiced by everyone in the organisation, whatever their role and whoever they are. This is pivotal to our future success and ability to achieve our strategic aims.

Our annual plan for 2023/2024 will enable us to improve access to our services, and to explore opportunities so everyone has an equal right to care and support when they need it most. Our aspiration to be a leading provider of outstanding evidence-based care can only be achieved as we work together as one team.

By doing so Garden House Hospice Care will remain an organisation of choice for all, a great place to work and somewhere that provides outstanding care to those who need it at a difficult time in their lives.

Strategic roadmap

This year we have mapped our journey from where we are now through to the end of our current Strategy. With our staff groups we have built a roadmap that outlines a multiyear plan to achieve our vision and the deliverables that will make progress towards an expansion of our clinical model.

We recognise the economic challenges that lay ahead, the risks to future funding and the importance of positioning ourselves strategically at the heart of our community- building our services around our population and supporting the ICS in achieving equality across the neighbourhoods.

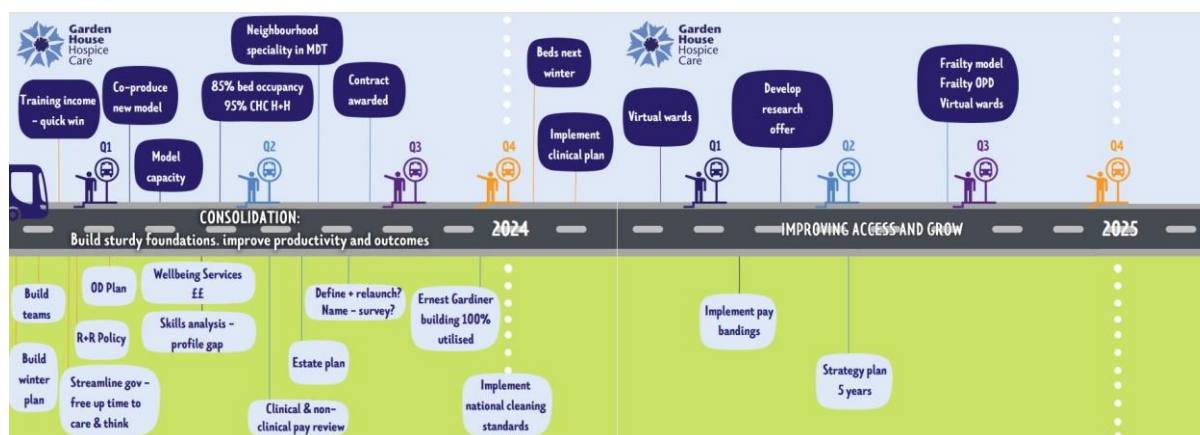
Our focus therefore over the next two years will be: -

- **2023- 2024** - A year of Consolidation and Improvement - building the foundations for the future.
- **2024-2025** - Implement the new models of care- resulting in greater reach and growth, continued improvement on outcomes and greater financial stability.

GARDEN HOUSE HOSPICE CARE

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It should be noted that the strategic roadmap is a live document and is subject to change. Most notably service reconfigurations are subject to major service change guidance and consultation.

Our annual priorities 2023/2024

The four annual priorities for 2023/24 are to:

1. Increase the reach of all our services into our local neighbourhoods and grow by developing innovative models of care for the moderate to severely frail who would benefit from Palliative and End of life care

It is important that we keep pace with the changes in health needs so that we continue to provide the highest quality care to our patients. This can be by growing our services, providing new services, or changing the way in which we provide existing services. It is of particular importance that, following the development of the Hertfordshire and West Essex ICS we take a proactive role within our Place.

2. Working within our budget allocation, make Every Penny Count and where opportunities exist, increase our NHS contract potential, and reduce the risk of funding care and future service developments. The organisation continues to face a financial challenge in 2023/24, with underlying pressures carried forward from 2022/23 along with in-year inflation and funding challenges.

We have set ourselves the Control Total for 2023/2024 at a £700k deficit budget.

To achieve this financial position, we need:

- To make in-year return on investment of 25%.
- To deliver continued reduction in run rate overspends, delivering new activity with minimal extra cost.
- To look for potential efficiencies through procurement and clinical productivity gains together with generating further efficiencies from our Transformation programme.

All plans will undergo a robust Quality Impact Assessment process to ensure that they do not have any detrimental impact on quality of care, and financial performance, and achievement of these delivery programmes will be monitored on a regular basis at executive level, through the Accountability & Oversight Framework and at the Board subcommittees which oversees and scrutinises the achievement of the overall Financial Plan.

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The organisation plans to spend c£55k on capital expenditure in 2023/24, which includes schemes across Estates, IM&T and clinical equipment. The programme is largely funded from £2.4m charity contributions, £670k trading income. We have assumed a contract value for the NHS income based on outturn plus a 3.8% uplift on 2022/2023 contract value. Plans to commence charging for external training and the commissioning of winter frailty step down beds for the medium to severely frail are also accounted for and included in our financial plan.

3. Invest in our staff and strengthen our resilience, to enable our organisation to become more agile and responsive to future opportunities

With almost 203 paid staff and >700 volunteers, our workforce is the driving force behind what we deliver as an organisation, our patients, and our community. It is vital that we develop our relationships and support our people in becoming the best at what they do. When our staff perform at their best, we deliver the highest quality of care and patient experience, and this makes staff proud to work for our organisation and act as positive advocates for us as a provider of palliative and end of life care and an employer of choice.

People performing at their best requires sustained effort and contribution on their part, together with a working environment that encourages and supports excellence all of the time. Our planned actions detailed in our annual plan are reflective of these goals. In addition, whilst building our workforce plan for next year we have stress tested our resilience and capacity to deliver on this strategy - addressing any gaps or risks of failure.

4. Ensure that Garden House Hospice Care recognised as an efficient and thriving organisation worthy of future investment and known as 'Great' at what it does.

Patient experience, patient safety and clinical effectiveness are the three aspects of quality in health care provision, and a high-quality service exhibits all three. We know we are known to be a 'Good' provider of palliative and end of life services, but we aim to be great. To achieve this, we need to benchmark in the upper quartile across all aspects of the business if we are to provide every patient who needs our services with a high quality, personalised experience, at every contact - every time.

Transformation programme 2023/2025 - 'From Good to Great'

We will develop our transformation programme - 'From Good to Great' - evaluating our services, our support functions, and our internal governance against the best, then develop the improvement programmes that will deliver on our aspirations and the governance framework to safeguard delivery.

Our Approach

By embarking on our Transformation Programme during 2023/2024, Garden House Hospice Care is at the beginning of its journey to Continuous Quality Improvement. We will train our staff in QI and LEAN methodology to support the creation of our projects and apply a robust programme management approach to delivery.

We want to support all our leaders to be part of this Quality Improvement Programme and actively encourage our staff to bring their improvement ideas to life, which align to our vision, ambitions, and priorities.

This will be supported by and led by the CEO and a newly created programme team using change management methodologies and a range of QI tools.

This improvement approach will support the design and delivery of the new care models detailed within our Annual Delivery Plan and will increase our learning and experience of delivering an improvement, working as 'one team' across departments and organisational boundaries.

GARDEN HOUSE HOSPICE CARE

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The proof will be demonstrated through positive staff and patient experience feedback and improved outcomes.

How this links to our Annual Delivery Plan

- We will improve our productivity and maximise the use of all our resources so we can support more with what we have.
- We will reach into our partner provider organisations and evaluate the need, to understand what is required to prevent delays in accessing our care, developing responsive care models that prevent patients dying in hospitals.
- We will design efficient pathways across the community and offer alternative care models in the patients' home, developing a directory of services that bridges across providers.
- We will increase our inpatient capacity to treat more Moderate to Severely frail patients, discharging them to our own reablement services in the community to maintain flow through our beds.
- We will develop service specifications for all our clinical services, building in flexibility to enable timely care.
- The approach to quality improvement will also support our OD Strategy and development of our Leadership Programme with many financial benefits to be realised through the application of QI, which will generate more efficient and effective ways of working and eliminate waste.

In approving this Trustees' Report, the Trustees are also approving the Strategic Report of the company, in their capacity as company directors.

Approved by the Trustees on 30th October 2023 and signed on their behalf by:



Mr Stephen Mellish
Chairman of Trustees

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF GARDEN HOUSE HOSPICE CARE

Opinion

We have audited the financial statements of Garden House Hospice Care for the year ended 31 March 2023 which comprise the Consolidated Statement of Financial Activities, the Consolidated and Charity Balance Sheets, the Consolidated Statement of Cash Flows and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including 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 of the parent charitable company's affairs as at 31 March 2023 and of the group's and parent charitable company's net movement in funds, including the 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 group 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 ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

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

Other information

The trustees are responsible for the other information. The other information comprises the information included in the Chairman's Report and in the Trustees' 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.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements, or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF GARDEN HOUSE HOSPICE CARE

Opinions on other matters prescribed by the Companies Act 2006

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

- the information given in the Trustees' Report (which includes the strategic report and the directors' report prepared for the purposes of company law) for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the strategic report and the directors' report included within the Trustees' Report 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 the parent charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the Trustees' Report (which incorporates the strategic report and the directors' report).

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

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

Responsibilities of trustees for the financial statements

As explained more fully in the trustees' responsibilities statement set out on pages 20 and 21, 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 groups and the 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 the parent charitable company or to cease operations, or have no realistic alternative but to do so.

Auditor's responsibilities for the audit of the financial statements

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

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:

Based on our understanding of the group and the environment in which it operates, we identified that the principal risks of non-compliance with laws and regulations related to health and social care and charity and company law applicable in England and Wales, and we considered the extent to which non-compliance might have a material effect on the financial statements. We also considered those laws and regulations that have

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF GARDEN HOUSE HOSPICE CARE

a direct impact on the preparation of the financial statements such as the Companies Act 2006 and the Charities Act 2011 and consider other factors such as sales tax and payroll tax.

We evaluated management's incentives and opportunities for fraudulent manipulation of the financial statements (including the risk of override of controls) and determined that the principal risks were related to the improper recognition of revenue and management bias in accounting estimates. Audit procedures performed by the engagement team included:

- Inspecting correspondence with regulators and tax authorities;
- Discussions with management including consideration of known or suspected instances of non-compliance with laws and regulation and fraud;
- Evaluating management's controls designed to prevent and detect irregularities;
- Identifying and testing journals;
- Reviewing the cut-off of income recognised to consider whether income had been recognised in the correct accounting period; and
- Challenging assumptions and judgements made by management in their critical accounting estimates.

Because of the inherent limitations of an audit, there is a risk that we will not detect all irregularities, including those leading to a material misstatement in the financial statements or non-compliance with regulation. This risk increases the more that compliance with a law or regulation is removed from the events and transactions reflected in the financial statements, as we will be less likely to become aware of instances of non-compliance. The risk is also greater regarding irregularities occurring due to fraud rather than error, as fraud involves intentional concealment, forgery, collusion, omission or misrepresentation.

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

Use of our report

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



Lee Stokes (Senior Statutory Auditor)
For and on behalf of Haysmacintyre LLP,
Statutory Auditors

10 Queen Street Place
London
EC4R 1AG

Date: 31 October 2023

GARDEN HOUSE HOSPICE CARE

CONSOLIDATED STATEMENT OF FINANCIAL ACTIVITIES
(Incorporating an income and expenditure account)

FOR THE YEAR ENDED 31 MARCH 2023

	Note	Unrestricted Funds £	Restricted Funds £	Total 2023 £	Total 2022 £
Income from:					
Donations and legacies					
Donations, legacies, and grants	2	1,109,596	93,252	1,202,848	1,676,676
Charitable activities					
NHS funding	3	2,107,627	-	2,107,627	2,019,538
Other trading activities					
Shop income and fundraising	7	2,502,662	-	2,502,662	2,268,863
Fundraising events		579,732	-	579,732	547,574
Investments	4	63,184	-	63,184	45,464
Other income		68,030	170	68,200	412,194
Total income		<u>6,430,831</u>	<u>93,422</u>	<u>6,524,253</u>	<u>6,970,309</u>
Expenditure on:					
Raising funds					
Trading activities	5	1,831,465	-	1,831,465	1,570,139
Donations and grants	5	248,069	-	248,069	184,530
Fundraising	5	714,778	-	714,778	509,050
Charitable activities	5	4,212,954	262,448	4,475,402	4,137,732
Total expenditure		<u>7,007,266</u>	<u>262,448</u>	<u>7,269,714</u>	<u>6,401,451</u>
Net operating surplus/(loss)		(576,435)	(169,026)	(745,461)	568,858
Net (losses)/gains on investments		(108,212)	-	(108,212)	41,652
Net (expenditure) / income		(684,647)	(169,026)	(853,673)	610,510
Transfers between funds		-	-	-	-
Net movement in funds		(684,647)	(169,026)	(853,673)	610,510
Total funds brought forward		<u>11,591,582</u>	<u>200,693</u>	<u>11,792,275</u>	<u>11,181,765</u>
Total funds carried forward	20	<u><u>10,906,935</u></u>	<u><u>31,667</u></u>	<u><u>10,938,602</u></u>	<u><u>11,792,275</u></u>

The notes on pages 32 to 48 form part of these financial statements.

The Statement of Financial Activities includes all gains and losses in the year. All income and expenditure derive from continuing activities.

Full comparative figures for the year ended 31 March 2022 are shown in note 23.

CHARITY AND CONSOLIDATED BALANCE SHEETS

AS AT 31 MARCH 2023

		2023	Group	2022	Charity	2022
	Note	£		£	£	£
FIXED ASSETS						
Tangible assets	9	6,281,403		6,221,984	6,098,448	6,060,816
Investments	10	2,751,135		1,821,741	2,751,235	1,821,841
		<u>9,032,538</u>		<u>8,043,725</u>	<u>8,849,683</u>	<u>7,882,657</u>
CURRENT ASSETS						
Stock	11	3,769		2,843	-	-
Debtors	12	756,902		1,465,322	1,130,474	1,852,968
Cash at bank and in hand		1,781,748		2,847,952	1,381,824	2,436,495
		<u>2,542,419</u>		<u>4,316,117</u>	<u>2,512,298</u>	<u>4,289,463</u>
CREDITORS: amounts falling due within one year	13	<u>(636,355)</u>		<u>(567,567)</u>	<u>(423,379)</u>	<u>(379,845)</u>
NET CURRENT ASSETS		<u>1,906,064</u>		<u>3,748,550</u>	<u>2,088,919</u>	<u>3,909,618</u>
NET ASSETS	22	<u>10,938,602</u>		<u>11,792,275</u>	<u>10,938,602</u>	<u>11,792,275</u>
FUNDS OF THE CHARITY						
Unrestricted funds						
General		4,625,532		5,369,598	4,808,487	5,530,764
Designated		6,281,403		6,221,984	6,098,448	6,060,818
		<u>10,906,935</u>		<u>11,591,582</u>	<u>10,906,935</u>	<u>11,591,582</u>
Restricted funds		31,667		200,693	31,667	200,693
	20	<u>10,938,602</u>		<u>11,792,275</u>	<u>10,938,602</u>	<u>11,792,275</u>

The unconsolidated deficit of GHHC was £853,673 (2022: surplus £610,510).

The financial statements were approved and authorised for issue by the Board of Trustees on 30th October 2023 and were signed below on its behalf by:



Mr. Stephen Mellish
Chairman of Trustees

The notes on pages 32 to 48 form part of these financial statements.

CONSOLIDATED STATEMENT OF CASH FLOWS

	Note	2023 £	2022 £
CASH PROVIDED BY / (USED IN) OPERATING ACTIVITIES	17	150,756	310,262
CASH FLOWS FROM INVESTING ACTIVITIES:			
Dividends, interest, and rents from investments		12,550	229
Investment Additions		(1,363,108)	-
Investment Disposals		587,547	-
Movement in investment cash		(262,045)	
Purchase of property, plant, and equipment		(191,904)	(155,566)
CASH PROVIDED BY / (USED IN) INVESTING ACTIVITIES		(1,216,960)	(155,337)
(DECREASE) / INCREASE IN CASH AND CASH EQUIVALENTS		(1,066,204)	154,925
Cash and cash equivalents at the beginning of the year		2,847,952	2,693,027
Cash and cash equivalents at the end of the year	18	1,781,748	2,847,952

1. ACCOUNTING POLICIES

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

Basis of preparation

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (Second Edition, effective 1 January 2019) - (Charities SORP (FRS 102)), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Companies Act 2006.

Garden House Hospice Care meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy note(s).

Preparation of accounts on a going concern basis

The trustees consider there are no material uncertainties about the Charity's ability to continue as a going concern. The global economic uncertainty may have an impact on future revenue and costs but continual review of our financial position, reserves levels and future plans gives Trustees confidence the charity remains a going concern for the foreseeable future (being a period of at least twelve months from the date of approving these financial statements).

Critical accounting judgements and estimates

In preparing these financial statements, management has made judgements, estimates and assumptions that affect the application of the charities accounting policies and the reported assets, liabilities, income and expenditure and the disclosures made in the financial statements. Estimates and judgements are continually evaluated and are based on historical experience and other factors, including expectations of future events that are believed to be reasonable under the circumstances. Specific judgements taken are included elsewhere within this note, including those over the depreciation rates utilised and the non-depreciation of the Garden House Hospice premises.

Group financial statements

The financial statements consolidate the results of the charity and its wholly owned subsidiary Garden House Hospice Trading on a line-by-line basis. A separate Statement of Financial Activities and Income and Expenditure Account for the charity has not been presented because the charity has taken advantage of the exemption afforded by section 408 of the Companies Act 2006.

Income recognition

All income is recognised in the financial statements once the charity has entitlement to the income, it is probable that the income will be received, and the amount of income receivable can be measured reliably.

Donations and legacies

Receipt of a legacy must be recognised when it is probable that it will be received. Receipt is normally probable when:

There has been grant of probate, the executors have established that there are sufficient assets in the estate, after settling any liabilities, to pay the legacy, and any conditions attached to the legacy are either within the control of the charity or have been met.

Grants

Clinical commission groups' grants are credited to the Statement of Financial Activities in the year in which they are receivable. Grants related to specific deliverables are included once the performance has been considered completed. Where income is received in advance of performance its recognition is deferred and included in creditors. Where entitlement occurs before income is received the income is accrued.

Shop income, fund-raising sales and lottery income

Income from the commercial activities of operating shops (mainly selling donated goods), fund-raising sales and lottery are included in the year in which the group is entitled to receipt.

Investment income and rental income

Income from investments and from rental is included in the Statement of Financial Activities in the year in which it is receivable.

Fundraising

Income from fundraising events is included in the year during which the event took place.

Expenditure recognition

Expenditure, including any irrecoverable VAT, is included in the financial statements on an accruals basis and is recognised when there is a legal or constructive obligation to make payment to a third party.

Expenditure is allocated to the particular activity where the cost relates directly to that activity. Other costs are apportioned to areas of activity based on the staff time or usage attributable to each area.

Fixed assets

Fixed assets are stated at cost less accumulated depreciation and impairment losses. Depreciation is calculated to write off costs on a straight-line basis as follows:

Furniture and fittings	- Over five or ten years
Office equipment	- Over five years
Motor vehicle	- Over five years

The buildings are maintained as a matter of policy, by a programme of repair such that the residual values of the buildings taken as a whole are at least equal to the book value. This policy is regularly reviewed by the trustees who are satisfied it remains appropriate given the rebuild costs which would be required and taking into account the service potential of the building (i.e., it continues to be used for charitable activities and therefore brings significant benefit). Having regard to this it is the opinion of the Trustees that depreciation of any such property as required by the Companies Act 2006 and the accounting standards would be immaterial to the financial statements especially as there is a very long lease in place. Any permanent diminution in value of such buildings would be charged to the Statement of Financial Activities as appropriate.

Financial instruments

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

Investments

Investment in subsidiary

The investment in the subsidiary is stated at cost, less any provision for any permanent diminution in value.

Other investments

Investments are shown in the financial statements at market value, taken to be the bid price ruling at the balance sheet date. Gains and losses arising on disposals of investments are recognised in the Statement of Financial Activities. Unrealised gains and losses, upon restating investments to market values at the balance sheet date, are recognised in the Statement of Financial Activities.

Creditors and provisions

Creditors and provisions are recognised where the charity has a present obligation resulting from a past event that will probably result in the transfer of funds to a third party and the amount due to settle the obligation can be measured or estimated reliably. Creditors and provisions are normally recognised at their settlement amount after allowing for any trade discounts due.

Stock

Stock is stated at the lower of cost and net realisable value. Items donated for resale are included in the financial statements when they are sold. The Trustees consider that the time and cost involved in valuing the donated goods at the time of donation and including them as stock at the year end, outweigh the benefit to the user of the accounts.

Pensions

The Charity operates and contributes to the following pension schemes:

- National Health Service Superannuation Pension Scheme (a multi-employer defined benefit scheme accounted for as a defined contribution scheme); and
- A Group Personal Pension Plan scheme managed by Standard Life (a defined contribution scheme)

Employees entitled to join the National Health Service Superannuation Pension Scheme are required to contribute a percentage of salary according to the scheme's rules. Employees who join the Standard Life Pension Scheme are required to contribute a minimum of 3% of salary.

Other employee benefits

Short term benefits

Short term benefits including holiday pay are recognised as an expense in the period in which the service is received.

Employee termination benefits

Termination benefits are accounted for on an accrual basis and in line with FRS 102.

Leasing commitments

Rentals paid under operating leases are charged to income on a straight-line basis over the lease term.

Gifts in Kind

The Hospice receives donated services in the form of voluntary help. In line with section 6 of the Charities SORP (FRS 102) this is not reflected in the Statement of Financial Activities as the financial value of the contribution of volunteers is not quantifiable.

Fund accounting

Funds held by the Charity are:

Unrestricted general funds

These are funds which can be used in accordance with the charitable objects at the discretion of the Trustees.

Designated funds

These are funds set aside by the Trustees out of unrestricted general funds for specific future purposes or projects together with funds transferred from restricted funds when no restrictions are considered to remain.

Restricted funds

These are funds that can only be used for particular restricted purposes within the objects of GHHC. Restrictions arise when specified by the donor or when funds are raised for particular restricted purposes.

Further explanations of the nature and purpose of each fund is included in Note 19.

GARDEN HOUSE HOSPICE CARE

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2023

2. DONATIONS AND LEGACIES

	2023 £	2022 £
Donations	349,499	528,919
Legacies	674,699	821,214
Charitable foundations	178,650	326,543
	<u>1,202,848</u>	<u>1,676,676</u>

3. INCOME FROM CHARITABLE ACTIVITIES

	2023 £	2022 £
NHS East and North Hertfordshire	2,029,871	1,954,691
NHS Beds, Luton & Milton Keynes	77,756	55,822
NHS	-	9,025
	<u>2,107,627</u>	<u>2,019,538</u>

4. INVESTMENT INCOME

	2023 £	2022 £
Bank interest received	12,550	3,772
Investment income	50,634	41,692
	<u>63,184</u>	<u>45,464</u>

GARDEN HOUSE HOSPICE CARE

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2023

5. TOTAL EXPENDITURE 2023	Hospice Charitable Activities						Total
	Commercial activities	Donations & Grants	Fundraising	Inpatient Care	Day Services	Hospice at Home	
Costs directly allocated to activities:							
Staff costs	1,013,898	211,057	479,896	2,311,880	382,221	1,022,405	5,421,357
Cost of sales & services	189,477	9,868	155,551	232,113	9,008	1,010	597,027
Travel	16,827	-	1,122	21,959	3,828	1,285	45,021
Audit & accountancy	2,245	315	907	3,658	563	1,460	9,148
Support costs allocated to activities:							
Hire of land, buildings & equipment	312,805	1,375	3,964	15,980	2,460	6,381	342,965
Premises costs	141,217	18,168	52,349	211,015	32,488	84,268	539,505
Communication	29,329	2,828	8,150	32,852	5,058	13,119	91,336
Legal & professional fees	23,233	2,684	7,732	31,169	4,799	12,447	82,064
Audit & accountancy	2,245	315	907	3,657	563	1,460	9,147
Depreciation	74,183	2,665	7,678	30,948	4,765	12,359	132,598
Bank charges	26,006	273	786	3,167	488	1,265	31,985
Other	-	(1,479)	(4,263)	(17,189)	(2,645)	(6,863)	(32,439)
	1,831,465	248,069	714,779	2,881,209	443,596	1,150,596	7,269,714
TOTAL EXPENDITURE 2022							
Costs directly allocated to activities:							
Staff costs	878,083	149,093	381,632	2,255,901	231,226	909,962	4,805,897
Cost of sales & services	81,246	9,865	55,798	116,095	19,652	97	282,753
Travel	23,729	-	1,076	1,531	4,200	25,667	56,203
Audit & accountancy	1,420	236	651	3,522	378	1,388	7,595
Support costs allocated to activities:							
Hire of land, buildings & equipment	331,957	1,701	4,694	25,406	2,730	10,016	376,504
Premises costs	134,779	14,124	38,962	210,895	22,664	83,142	504,566
Communication	29,706	2,095	5,778	31,275	3,361	12,330	84,545
Legal & professional fees	11,312	3,511	9,687	52,433	5,635	20,671	103,249
Audit & accountancy	1,420	236	651	3,522	378	1,388	7,595
Depreciation	56,217	2,246	6,195	33,530	3,603	13,219	115,010
Bank charges	20,270	163	449	2,432	261	959	24,534
Other	-	1,260	3,477	18,820	2,023	7,420	33,000
	1,570,139	184,530	509,050	2,755,362	296,111	1,086,259	6,401,451

Support costs include governance costs of £18,290 (2022: £15,066)

5. TOTAL EXPENDITURE (continued)	2023 £	2022 £
Included in total expenditure:		
Depreciation - owned assets	132,485	116,036
Auditor's remuneration:		
Audit fees	13,800	12,350
Operating lease charges:		
Hire of equipment	30,161	44,547
Hire of land and buildings	312,805	331,957
	<u>312,805</u>	<u>331,957</u>
6. STAFF COSTS AND NUMBERS.		
	2023 £	2022 £
Salaries and wages	4,825,566	4,196,737
Social security costs	336,312	333,657
Pension costs	259,479	275,503
	<u>5,421,357</u>	<u>4,805,897</u>

Included in the above are termination/ex-gratia payment of £23,500 (2022: £10,000).

	Number	Number
Charity and group:		
The average number of employees analysed by function:		
Income generation	14	15
Retail	68	60
Clinical	88	80
Administration and other activities	53	48
	<u>223</u>	<u>203</u>
The number of employees whose emoluments as defined for taxation purposes amounted to over £60,000 in the year were as follows:		
£60,001 - £70,000	-	1
£70,001 - £80,000	-	2
£80,001 - £90,000	2	-
£90,001 - £100,000	1	1
£100,001 - £110,000	-	1
	<u>3</u>	<u>5</u>

The key management personnel of the group are considered to be the Senior Leadership Team listed on page 1. The total employee benefits of the key management personnel of the Group were £535,927 (2022: £580,925).

The Trustees provide their services voluntarily and are not included in the above analysis. During the year, one trustee received travel expenses of £89 (2022: £96). The directors of the subsidiary undertaking provide their services voluntarily and are not included in the above analysis. The directors of the subsidiary undertaking had no expenses paid to them throughout the current or previous year.

7. SHOP INCOME, FUNDRAISING SALES, LOTTERY INCOME AND RELATED EXPENDITURE

	GHHC	Charitable	Total	GHHC	Charitable	Total
	£	Trading	2023	£	Trading	2022
		£	£		£	£
Shops and fundraising sales						
Turnover from donated goods	-	2,238,852	2,238,852	-	2,028,145	2,028,145
Retail gift aid	-	62,518	62,518	-	57,293	57,293
Turnover from purchased goods	-	30,169	30,169	-	25,413	25,413
Shop and fundraising sales income	-	2,331,539	2,331,539	-	2,110,851	2,110,851
 Cost of sales	-	189,478	189,478	-	81,246	81,246
Management and admin expenses	-	1,641,987	1,641,987	-	1,488,893	1,488,893
Shop expenditure	-	1,831,465	1,831,465	-	1,570,139	1,570,139
 Lottery						
Income from lottery	171,123	-	171,123	158,012	-	158,012
 Operating expenses						
Management and admin expenses	-	-	-	-	-	-
Lottery expenditure	-	-	-	-	-	-
 Net income from shops and fundraising sales	-	500,074	500,074	-	540,712	540,712
Net income from lottery	171,123	-	171,123	158,012	-	158,012
Net income from trading	171,123	500,074	671,197	158,012	540,712	698,724

The charitable income from the sale of donated and purchased goods is through shops at various town locations throughout North Hertfordshire. The charitable income from the lottery was generated through a weekly lottery operated by Local Hospice Lottery Ltd.

8. RELATED PARTY TRANSACTIONS

Transactions between the parent charity and its subsidiary comprised:

- Interest charged by the charity on the loan agreement in place of £5,873 (2022: £3,595)
- Donations collected by the subsidiary on behalf of the charity were £1,023 (2022: £9,553)
- Salary and other costs recharged by the charity to the trading subsidiary of £1,013,530 (2022: £937,770)

Donations received from Trustees during the year were £2,875 (2022: £4,442).
As set out in note 6, no Trustee received remuneration.

GARDEN HOUSE HOSPICE CARE

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2023

9. TANGIBLE FIXED ASSETS		Land & buildings	Furniture, Fixtures & Fittings	Equipment	Motor Vehicles	Total
Group		Long Leasehold £	£	£	£	£
Cost						
At 31 March 2022		5,908,437	524,934	142,840	39,000	6,615,211
Additions		-	74,074	117,830	-	191,904
At 31 March 2023		5,908,437	599,008	260,670	39,000	6,807,115
Depreciation						
At 31 March 2022		-	314,927	62,258	16,042	393,227
Provided during the year		-	91,218	34,184	7,083	132,485
At 31 March 2023		-	406,145	96,442	23,125	525,712
Net Book Value						
At 31 March 2023		5,908,437	192,863	164,228	15,875	6,281,403
At 31 March 2022		5,908,437	210,007	80,582	22,958	6,221,984
Charity						
Cost						
At 31 March 2022		5,908,436	282,679	106,863	-	6,297,978
Additions		-	18,586	77,460	-	96,046
At 31 March 2023		5,908,436	301,265	184,323	-	6,394,024
Depreciation						
At 31 March 2022		-	200,113	37,049	-	237,162
Provided during the year		-	29,773	28,641	-	58,414
At 31 March 2023		-	229,886	65,690	-	295,576
Net Book Value						
At 31 March 2023		5,908,436	71,379	118,633	-	6,098,448
At 31 March 2022		5,908,436	82,566	69,814	-	6,060,816

The long leasehold buildings represent the capitalised costs of converting the Letchworth Hospital into the Garden House Hospice, together with extensions and improvements carried out in later years.

GARDEN HOUSE HOSPICE CARE

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2023

10. FIXED ASSET INVESTMENTS	Group		Charity	
	2023 £	2022 £	2023 £	2022 £
Investment in subsidiary undertaking	-	-	100	100
Equities and pooled funds	2,751,135	1,821,741	2,751,135	1,821,741
	<u>2,751,135</u>	<u>1,821,741</u>	<u>2,751,235</u>	<u>1,821,841</u>

The wholly owned trading subsidiary, Garden House Hospice Trading Limited, which is incorporated in the United Kingdom, pays all its profits to the charity annually by gift aid.

The principal activities of Garden House Hospice Trading Limited are general merchants and traders.

The charity owns the entire issued share capital of 100 Ordinary Shares of £1 each.

	2023 £	2022 £
Summary of investment		
Shares at cost	<u>100</u>	<u>100</u>
Extracts from the accounts of the subsidiary undertaking		
Summary profit and loss account		
Turnover	2,331,539	2,110,851
Cost of sales and administrative expenses	(1,831,465)	(1,570,139)
Interest receivable less interest payable	(4,284)	(3,558)
Profit on ordinary activities before taxation	<u>495,790</u>	<u>537,154</u>
Tax on profit of ordinary activities	-	-
Profit for the financial year	<u>495,790</u>	<u>537,154</u>
Amount covenanted to the Charity	<u>495,790</u>	<u>537,154</u>
The assets and liabilities of the subsidiary undertaking were as follows:		
Fixed assets	<u>182,956</u>	<u>161,168</u>
Current assets	633,584	663,226
Creditors amounts falling due within one year	(816,439)	(824,294)
Net current assets / (liabilities)	<u>(182,855)</u>	<u>(161,068)</u>
Creditors amounts falling due after one year	-	-
Net assets	<u>100</u>	<u>100</u>
Aggregate share capital and reserves	<u>100</u>	<u>100</u>

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2023

10. FIXED ASSET INVESTMENTS (continued)	2023 £	2022 £
Investments		
Market Value 1 April	1,821,741	1,751,593
Additions during the year	1,363,108	-
Disposals	(587,547)	28,496
Unrealised investment (losses) / gains	(108,212)	41,652
Movement in cash investment	262,045	-
Market Value at 31 March 2023	<u>2,751,135</u>	<u>1,821,741</u>
Historic cost 31 March 2023	<u>2,254,434</u>	<u>1,538,969</u>

The investments comprise a portfolio held with Evelyn Partners consisting of a mix of investment types.

11. STOCK	Group		Charity	
	2023 £	2022 £	2023 £	2022 £
Goods for resale	<u>3,769</u>	<u>2,843</u>	<u>-</u>	<u>-</u>

12. DEBTORS	Group		Charity	
	2023 £	2022 £	2023 £	2022 £
Trade debtors	459,474	302,713	424,943	266,741
Profit due from subsidiary under Gift Aid	-	-	442,976	537,154
Other amounts due from subsidiary	-	-	80,000	99,419
Other debtors	14,527	90,581	-	1,136
Prepayments and accrued income	207,592	1,000,477	136,387	904,220
VAT recoverable	75,309	71,551	46,168	44,298
	<u>756,902</u>	<u>1,465,322</u>	<u>1,130,474</u>	<u>1,852,968</u>

The amounts owed by the subsidiary undertaking include loans of £80,000 (2022: £80,000) which are unsecured and repayable on demand. Interest was charged on the amount at 5% above Base Rate.

Subsidiary profits are payable under Gift Aid. A deed of covenant is in place which requires the payment to be made.

13. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR	Group		Charity	
	2023 £	2022 £	2023 £	2022 £
Trade creditors	445,446	311,658	182,762	148,971
Accruals and deferred income	71,160	63,249	40,380	38,214
Other creditors	119,749	192,660	200,237	192,660
	<u>636,355</u>	<u>567,567</u>	<u>423,379</u>	<u>379,845</u>

14. CAPITAL COMMITMENTS

The Trustees maintain a policy of continually enhancing the facilities offered to patients, families, and their guests.

At 31 March 2023 capital commitments comprised:

Contracted £Nil (2022: £Nil)

Authorised but not committed £Nil (2022: £Nil)

15. PENSION COMMITMENTS

Garden House Hospice Care

GHHC operates and contributes to the following Pension Schemes:

- To the National Health Service Superannuation Pension Scheme on behalf of those employees who are members of the Scheme.
- To a defined contribution Scheme managed by Standard Life in respect of those employees who are not entitled to be members of the National Health Superannuation Pension Scheme.

The assets of the schemes are held separately from those of GHHC in independently administered funds.

Employees entitled to join the National Health Service Superannuation Pension Scheme are required to contribute as specified by the scheme rules. The annual commitment by GHHC under this scheme is for contributions of 14.3% of gross salary of those employees who are members of this scheme.

All other employees join the Standard Life Pension Scheme and contribute a minimum of 3% of salary. The annual commitment by GHHC under this scheme is for contributions of 5% of gross salary.

Subsidiary

The subsidiary undertaking operates and contributes to a defined contribution pension scheme for those employees who wish to participate. The assets of the scheme are held separately from those of the Company in an independently administered fund. All employees join the scheme and contribute a minimum of 3% of salary.

The estimated GHHC and Subsidiary commitment for contributions to both pension schemes in 2023/2024 is £293,650 (2022/2023: £290,000).

16. OTHER FINANCIAL COMMITMENTS

At 31 March GHHC and its subsidiary undertaking had minimum total commitments under non-cancellable operating leases as set out below:

	GHHC		Subsidiary Undertaking	
	2023	2022	2023	2022
	£	£	£	£
Operating leases which expire:				
Within one year	16,066	16,602	820,695	179,790
Within two to five years	38,508	54,793	444,795	134,526
After more than five years	-	-	-	-
	<u>54,574</u>	<u>71,395</u>	<u>1,265,490</u>	<u>314,316</u>

The Garden House Hospice Care premises are provided at a peppercorn rent. The lease on the premises expires in 2138.

17. RECONCILIATION OF NET MOVEMENT IN FUNDS TO NET CASH FROM OPERATING ACTIVITIES

	2023	2022
	£	£
Net movement in funds for the year	(853,673)	610,510
Depreciation	132,485	116,036
Net losses/(gains) on investments	108,212	(41,652)
Interest and dividends receivable	(12,550)	(229)
(Increase)/decrease in stock	(926)	329
Decrease/(increase) in debtors	708,420	(483,500)
(Decrease)/increase in creditors	68,788	137,263
Net cash from operating activities	<u>150,756</u>	<u>310,262</u>

18. ANALYSIS OF THE BALANCES OF CASH AND CASH EQUIVALENTS AS SHOWN IN THE BALANCE SHEET

	2023	2022
	£	£
Cash at bank and in hand	<u>1,781,748</u>	<u>2,847,952</u>

19. FUNDS**UNRESTRICTED FUNDS****General**

General unrestricted funds comprise the accumulated surpluses arising from the objectives of GHHC which may be used for its charitable purpose at the discretion of the Trustees.

Designated

Designated funds comprise accumulated surpluses where the GHHC trustees have decided to reserve funds for specific purposes. These sums are for fixed assets which benefit the charity.

19. FUNDS (CONTINUED)**RESTRICTED FUNDS**

Restricted funds comprise the value of donations where the donor has requested a specific use for their donation, and where at the date of reporting, the sums have not yet been expended.

At 31 March 2023, restricted funds comprise sums restricted to pay for:

	2023 £	2022 £
Assets for Patients' use	-	4,441
Patient Services	22,017	48,441
The Hospice befriending project	-	94,596
Education	3,139	31,360
Other	6,511	21,855
Hospice UK Covid-19 Government Grant	-	-
	<u>31,667</u>	<u>200,693</u>

20. ANALYSIS OF MOVEMENT IN GROUP FUNDS

	Balance 1 April 2022 £	Movement in Resources			Unrealised Investment Gains £	Balance 31 March 20223 £
		Income £	Expenditure £	Transfer £		
Unrestricted funds						
General	5,369,598	6,430,831	(7,007,266)	(59,419)	(108,212)	4,625,532
Designated	6,221,984	-	-	59,419	-	6,281,403
	<u>11,591,582</u>	<u>6,430,831</u>	<u>(7,007,266)</u>	<u>-</u>	<u>(108,212)</u>	<u>10,906,935</u>
Restricted funds						
Fixed assets	4,441	-	(4,441)	-	-	-
Patient services	48,441	75,078	(101,502)	-	-	22,017
Befriending	94,596	18,256	(112,852)	-	-	-
Education	31,360	-	(28,221)	-	-	3,139
Other	21,855	88	(15,432)	-	-	6,511
Hospice UK Covid-19 Government Grant	-	-	-	-	-	-
	<u>200,693</u>	<u>93,422</u>	<u>(262,448)</u>	<u>-</u>	<u>-</u>	<u>31,667</u>
Total	<u>11,792,275</u>	<u>6,524,253</u>	<u>(7,269,714)</u>	<u>-</u>	<u>(108,212)</u>	<u>10,938,602</u>

Transfers between funds reflect additional spend over that available in designated funds.

21. ANALYSIS OF MOVEMENT IN GROUP FUNDS - YEAR ENDED 31 MARCH 2022

	Balance 1 April 2021 £	Movement in Resources			Unrealised Investment Gains £	Balance 31 March 2022 £
		Income £	Expenditure £	Transfer £		
Unrestricted funds						
General	4,825,698	6,386,073	(5,844,296)	(39,529)	41,652	5,369,598
Designated	6,182,455	-	-	39,529	-	6,221,984
	<u>11,008,153</u>	<u>6,386,073</u>	<u>(5,844,296)</u>	<u>-</u>	<u>41,652</u>	<u>11,591,582</u>
Restricted funds						
Fixed assets	4,441	-	-	-	-	4,441
Patient services	31,859	83,956	(67,374)	-	-	48,441
Befriending	86,285	122,997	(114,686)	-	-	94,596
Education	27,780	5,640	(2,060)	-	-	31,360
Other	6,521	18,361	(3,027)	-	-	21,855
Hospice UK Covid-19 Government Grant	16,726	353,282	(370,008)	-	-	-
	<u>173,612</u>	<u>584,236</u>	<u>(557,155)</u>	<u>-</u>	<u>-</u>	<u>200,693</u>
Total	<u>11,181,765</u>	<u>6,970,309</u>	<u>(6,401,451)</u>	<u>-</u>	<u>41,652</u>	<u>11,792,275</u>

GARDEN HOUSE HOSPICE CARE

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2023

22. NET ASSETS BETWEEN FUNDS	Unrestricted Funds £	Designated Funds £	Restricted Funds £	Total 2023 £	Unrestricted Funds £	Designated Funds £	Restricted Funds £	Total 2022 £
FIXED ASSETS								
Long leasehold land and buildings	-	5,908,437	-	5,908,437	-	5,908,436	-	5,908,436
Furniture, fixtures and fittings	-	192,863	-	192,863	-	210,007	-	210,007
Equipment	-	164,228	-	164,228	-	80,583	-	80,583
Motor vehicles	-	15,875	-	15,875	-	22,958	-	22,958
Investments	2,751,135	-	-	2,751,135	1,821,741	-	-	1,821,741
	<u>2,751,135</u>	<u>6,281,403</u>	<u>-</u>	<u>9,032,538</u>	<u>1,821,741</u>	<u>6,221,984</u>	<u>-</u>	<u>8,043,725</u>
CURRENT ASSETS								
Stocks	3,769	-	-	3,769	2,843	-	-	2,843
Debtors	756,902	-	-	756,902	1,465,322	-	-	1,465,322
Cash at bank and in hand	1,750,081	-	31,667	1,781,748	2,647,259	-	200,693	2,847,952
	<u>2,510,752</u>	<u>-</u>	<u>31,667</u>	<u>2,542,419</u>	<u>4,115,424</u>	<u>-</u>	<u>200,693</u>	<u>4,316,117</u>
CREDITORS								
Amounts falling due within one year	(636,355)	-	-	(636,355)	(567,567)	-	-	(567,567)
NET CURRENT ASSETS	<u>1,874,397</u>	<u>-</u>	<u>31,667</u>	<u>1,906,064</u>	<u>3,547,857</u>	<u>-</u>	<u>200,693</u>	<u>3,748,550</u>
TOTAL ASSETS LESS CURRENT LIABILITIES AT 31 MARCH	<u>4,625,532</u>	<u>6,281,403</u>	<u>31,667</u>	<u>10,938,602</u>	<u>5,369,598</u>	<u>6,221,984</u>	<u>200,693</u>	<u>11,792,275</u>

23. COMPARATIVE GROUP STATEMENT OF FINANCIAL ACTIVITIES - 31 MARCH 2022

	Note	Unrestricted Funds £	Restricted Funds £	Total 2022 £
Income from:				
Donations and legacies				
Donations, legacies, and grants	2	1,445,722	230,954	1,676,676
Charitable activities				
NHS funding	3	2,019,538	-	2,019,538
Other trading activities				
Shop income and fundraising	7	2,268,863	-	2,268,863
Fundraising events		547,574	-	547,574
Investments	4	45,464	-	45,464
Other income		58,912	353,282	412,194
Total income		<u>6,386,073</u>	<u>584,236</u>	<u>6,970,309</u>
Expenditure on:				
Raising funds				
Trading activities	5	1,570,139	-	1,570,139
Donations and grants	5	184,530	-	184,530
Fundraising	5	509,050	-	509,050
Charitable activities	5	3,580,577	557,155	4,137,732
Total expenditure		<u>5,844,296</u>	<u>557,155</u>	<u>6,401,451</u>
Net operating surplus/(loss)		541,777	27,081	568,858
Net gains / (losses) on investments		41,652	-	41,652
Net income / (expenditure)		<u>583,429</u>	<u>27,081</u>	<u>610,510</u>
Transfers between funds		-	-	-
Net movement in funds		<u>583,429</u>	<u>27,081</u>	<u>610,510</u>
Total funds brought forward		<u>11,008,153</u>	<u>173,612</u>	<u>11,181,765</u>
Total funds carried forward	20	<u><u>11,591,582</u></u>	<u><u>200,693</u></u>	<u><u>11,792,275</u></u>