

THE HARTLEPOOL HOSPICE LIMITED

England & Wales · Charity number 510824

Details

Other names	ALICE HOUSE HOSPICE, HARTLEPOOL AND DISTRICT HOSPICE
Status	Registered
Legal form	Charitable company
Company number	01525658
Registered	1980-12-19
Register	View on the Charity Commission register

Contact

Address	Alice House Hospice Alice House Wells Avenue Hartlepool TS24 9DA
Phone	01429855555
Email	enquiries@alicehousehospice.co.uk
Website	www.alicehousehospice.co.uk

Activities

Objects: TO PROMOTE THE RELIEF OF SICKNESS BY SUCH CHARITABLE MEANS AS THE ASSOCIATION SHALL FORM TIME TO TIME THINK FIT. (FOR FURTHER DETAILS SEE CLAUSE 3 OF THE MEMORANDUM.

Activities: Established in 1980 Alice House Hospice is an independent registered charity providing free specialist palliative care for adults diagnosed with severe and progressive life limiting illnesses. Registered as Hartlepool Hospice Ltd (known locally as Alice House Hospice and formerly Hartlepool & District Hospice), is a charity within England and Wales.

Classification

- **How:** Provides Services
- **What:** The Advancement Of Health Or Saving Of Lives
- **Who:** Elderly/old People, People With Disabilities, Other Defined Groups

Geography

- Durham
- Hartlepool
- Stockton-on-tees

Finances

Period end	Income	Expenditure	Assets	Employees
2025-03-31	£3,835,928	£3,604,504	£3,532,219	109
2024-03-31	£3,819,385	£3,523,241	£3,301,497	120
2023-03-31	£3,846,233	£4,067,514	£3,004,730	150
2022-03-31	£3,820,053	£3,960,355	£3,225,347	159
2021-03-31	£3,711,070	£3,419,039	£3,360,994	128

Trustees

Name	Role	Appointed
RAYMOND PRIESTMAN	Chair	
Clair Dunkerley		2024-03-26
Dr Angela Brown		2023-03-30
Dr James Druce		2021-09-23
JOANNE REGAN		
LORNA JONES		
Peter Bowes		2023-07-27
Vikki Jackson Smith		2024-03-26

THE HARTLEPOOL HOSPICE LIMITED

England & Wales - Charity number 510824

Accounts

Registered number: 01525658
Charity number: 510824

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

COUNCIL MEMBERS' REPORT AND FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2025

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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**REFERENCE AND ADMINISTRATIVE DETAILS OF THE CHARITY, ITS COUNCIL MEMBERS AND
ADVISERS
FOR THE YEAR ENDED 31 MARCH 2025**

Council Members

Mr R Priestman, Chair
Mrs L Jones, (Honorary Trustee from 25/02/2025)
Mr F M Gibbon
Mrs J Regan, Treasurer
Mr C Shotton
Mr J F Ainslie
Dr J Druce
Mr P L H Bowes, Vice Chair
Dr A L Brown
Mrs C Dunkerley
Mrs V J Smith

Company Registered Number

01525658

Charity Registered Number

510824

Registered Office

Alice House, Wells Avenue, Hartlepool, TS24 9DA

Co-Chief Executive Officers

Sandra Britten Nicola Haggan

Independent Auditors

Waltons Business Advisers Limited, Maritime House, Harbour Walk, The Marina, Hartlepool, TS24 0UX

Bankers

Lloyds TSB, 132 York Road, Hartlepool, TS26 9DD

Solicitors

Tilly Bailey & Irvine LLP, York Chambers, York Road, Hartlepool, TS26 9DP

Director of Information Governance (Chief Executive Operational)

Ms S Britten

Director of Finance

Mrs K Burrell

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**REFERENCE AND ADMINISTRATIVE DETAILS OF THE CHARITY, ITS COUNCIL MEMBERS AND
ADVISERS (CONTINUED)**
FOR THE YEAR ENDED 31 MARCH 2025

Senior Manager Clinical Services

Ms K Gibson

Senior Manager Corporate Services (Chief Executive Non-Operational)

Ms N Haggan

Senior Manager Fundraising

Ms J Hildreth

Senior Manager Retail

Ms K Witherley

Senior Manager Therapeutic Support Services

Ms J Grocott

Senior Manager Business & Communications

Mr G Hildreth

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COUNCIL MEMBERS' REPORT
FOR THE YEAR ENDED 31 MARCH 2025

The Council Members, who also serve as the Non-Executive Directors of the Charity for the purposes of the Companies Act, confirm that the Annual Report and Financial Statements have been prepared in accordance with applicable statutory requirements, the Charity's governing document and the Statement of Recommended Practice (SORP) for charities preparing their accounts in accordance with Financial Reporting Standard 102 (FRS 102), effective from 1 January 2019, as issued in the UK and Republic of Ireland.

STRUCTURE, GOVERNANCE AND MANAGEMENT

Governing document

The Charity is a company limited by guarantee and incorporated in England and Wales. It is governed by its Memorandum and Articles of Association adopted on 31 October 1980 and last amended on 26 September 2013.

Governing body

The Council is responsible for the overall governance of the Charity. Council Members are either elected or co-opted, with a minimum of three members required; there is no maximum number. The Board must include at least two Lay Council Members (i.e. those not appointed to act as professional advisers), alongside such number of professional Council Members as the Council considers appropriate. Each Council Member retires at the fourth Annual General Meeting (AGM) following their appointment, with professional members eligible for re-election by the members or the Council, as appropriate.

The Hartlepool Hospice Limited is trading as Alice House Hospice.

The Council seeks to maintain a balanced mix of skills and experience by identifying gaps and recruiting accordingly when vacancies arise. Clarity of distinction between governance and management roles, together with a strong culture of partnership, continues to underpin the Charity's effectiveness.

Council meetings are held on a quarterly basis in addition to the AGM. At these meetings, Council Members review progress against the agreed strategic plan, as well as monitoring financial performance against approved budgets. New Council Members receive an induction pack to support effective and informed decision-making. Council Members also take collective ownership of the Charity's philosophy, rolling five-year strategy and annual income and expenditure budgets.

Certain powers in relation to financial control are delegated by the Council, with robust reporting requirements in place to ensure that all decisions taken under delegated authority are subject to subsequent ratification by the full Council.

In determining pay and remuneration for staff, including the Senior Management Team, the Council Members have regard to local pay conditions and benchmarks for comparable roles in similar organisations across the North East region.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2025

STRUCTURE, GOVERNANCE AND MANAGEMENT (continued)

Chief Executive Operational & Chief Executive Non-Operational

The joint leadership roles of Chief Executive Operational and Chief Executive Non-Operational are responsible for the day to day management of the Charity's affairs and for implementing the strategy as agreed by the Council within the boundaries of the budget and various policies and procedures agreed by the Council. The Chief Executive Operational and Chief Executive Non-Operational are assisted by the Council Members.

The Chief Executive (Operational) has direct responsibility for the effective delivery of the following services and support services:

- Clinical Services
- Finance
- Facilities
- Health & Safety
- Information Governance & Technology

The Chief Executive (Non-Operational) will have direct responsibility for the effective delivery of the following services and support services:

- Human Resources
- Therapeutic Support Services
- Fundraising, Trusts & Legacies
- Retail
- Lottery
- Communications & Corporate Business Partnerships
- Catering & Housekeeping

Corporate Governance

The Charity has established processes to ensure that organisational performance is consistently measured and monitored. All employees are subject to regular performance management, including assessment against agreed competencies. Where performance falls short of expected standards, structured support is provided through tailored action plans.

The Charity's corporate governance framework is underpinned by clear reporting and accountability mechanisms, aligned to the delivery of its strategic objectives. Governance is assured through a programme of scheduled meetings and formal reporting. Internal audits are undertaken regularly and findings are reported on a quarterly basis to Council Members via the Chief Executives and the Senior Management Team.

Finance & Risk Management Sub Committee

The Finance & Risk Management Sub Committee is made up of Council Members who are independent of management and free from any relationships that, in the opinion of the Council, could compromise their independent judgement.

The Sub Committee meets four times per year, on a quarterly basis. Its responsibilities include setting and monitoring the Charity's annual income and expenditure budgets, including the review of quarterly year-end forecasts. It ensures that robust procedures are in place for the prudent management of cash resources, balancing the need to maximise income from available funds with the requirement to maintain sufficient liquidity for day-to-day operations.

The Sub Committee also advises the Council on the appropriate level of free reserves and recommends changes to the Charity's investment strategy where necessary.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2025

STRUCTURE, GOVERNANCE AND MANAGEMENT (continued)

Risk Management

The Council has established a formal risk management framework to identify, assess and mitigate risks across the Charity's operations. This process involves evaluating the principal risks faced by the Charity, assessing their likelihood and potential impact, and implementing appropriate strategies to manage and reduce exposure.

A comprehensive Risk Register is maintained and reviewed regularly to ensure it remains up to date and reflects emerging risks. As part of this process, Council Members review the adequacy and effectiveness of the Charity's internal controls, taking into account the proportionality of operating costs relative to the benefits of such controls. Clear procedures are also in place for the prompt reporting of any failings to the appropriate level of management.

The principal risks currently identified, together with the mitigating measures in place, are as follows:

- Loss of Income: Regular monitoring of financial performance; annual budgets set and reviewed; close oversight of fundraising activities.
- Disaster: Implementation of Business Continuity Policy & Procedure; regular risk management meetings.
- Staffing Crisis: Use of bank and agency staff to ensure continuity of care; ability to relocate patients to alternative providers where necessary.

The Council is satisfied that appropriate systems of risk management and internal control are in place and remain proportionate, effective and responsive to the changing environment in which the Charity operates.

OBJECTIVES AND ACTIVITIES

Public benefit

The Council consider that they have complied with their duty in Section 4 of the Charities Act 2006 to have due regard to public benefit guidance published by the Charity Commission when setting objects, strategy and objectives.

Charity Objects

In setting objectives and planning for activities, the Council Members have given due consideration to general guidance published by the Charity Commission relating to public benefit, including the guidance 'Public benefit: running a charity (PB2)'.

The Charity's Objects, as set out in the Articles of Association, are to promote the relief of sickness by such charitable means as the charity shall from time to time think fit. The Hospice was established in 1980 as a local charity (Hartlepool Hospice Ltd) delivering specialist palliative care to individuals affected by life limiting illnesses within the local communities of Hartlepool, Stockton-on-Tees and East Durham. The Hospice ensures that people affected by a life limiting illness have the care, comfort and support they need and provides services that add value to life which make a difference to patients and their families.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2025

OBJECTIVES AND ACTIVITIES (continued)

In furtherance of these Objects:

- It is the Hospice's Vision to ensure that every person, to the last moment of their life has the right to dignity, respect, support and care.
- It is the Hospice's Mission to provide services that add value to life and make a difference to patients and their families.
- The Hospice upholds the following Values:
 - o We value each person as an individual.
 - o The patient is at the heart of all of our activities.
 - o We believe in the importance of celebrating life and relationships.
 - o We will demonstrate integrity and professionalism at all times.
 - o We will be modern and progressive and seek out new opportunities to develop our services.
 - o We will strive to be the best we can and encourage staff and volunteers to actively seek opportunities for personal growth and development.
 - o We will exercise responsible financial management to ensure long term sustainability.
- The Hospice subscribes to the following Patients' Charter and will:
 - o Respect your dignity, privacy and freedom of choice.
 - o Involve you and your family when possible in the decision making of your care, adopting an open and honest approach. Supporting those decisions to fulfil your wishes wherever possible.
 - o Provide a Multi-Disciplinary Team with the appropriate skills to meet your ongoing needs.
 - o Work collaboratively with other service providers and professionals involved in your care to ensure you receive the help you need when you need it.
 - o Support you to live as well as you can for as long as you can.
 - o Provide a holistic and individual approach when delivering care and support to you and your family.
 - o Provide support not only to you but to those that are important to you as you approach the end of life and during their bereavement.
 - o Encourage your involvement in service development by making suggestions as to how we can improve on the services we provide.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2025

OBJECTIVES AND ACTIVITIES (continued)

Strategic Objectives

As hospice care continues to evolve within a complex and challenging health environment, the Hospice has developed strong and effective partnerships that promote cross-organisational integration and representation across a range of working groups. These collaborations enable the identification of pressures within the wider healthcare system and the development of innovative solutions to improve patient care.

Within this context, the Hospice has set out the following strategic goals in its Five Year Strategy (2020–2025), which is refreshed annually (most recently reviewed at the end of 2023):

- High-Quality Care - We will ensure all of our services are of a high quality and are delivered safely with compassion and dignity.
- Excellence in Governance and Management - We will ensure our organisation is governed and managed in accordance with best practice.
- Community Engagement - We will seek out opportunities to support our communities in all of their interactions with us.

While our patients, services, staff and challenges may change over time, our commitment to the communities we serve and to maintaining the highest standards of care remains constant. The Strategy is underpinned by a Patients, Trustees and Staff Charter, which sets out our shared intentions and reflects our commitment to collective responsibility and organisational cohesion.

The following departmental sub strategies have also been developed, with their objectives aligning to the strategic goals of the Hospice's Five Year Strategy 2020-2025:

- Clinical
- Therapeutic Support Services
- Information Governance & Technology
- Human Resources
- Communications
- Fundraising
- Retail
- Finance

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2025

OBJECTIVES AND ACTIVITIES (continued)

Activities

The Hospice is an independent charity dedicated to providing high-quality, holistic and non-judgemental care, free at the point of delivery. Care is available to all, irrespective of race, religion or belief, sex, sexual orientation, gender reassignment, disability, pregnancy or maternity.

Services are delivered from our purpose-built Hospice on Wells Avenue, Hartlepool, designed to respond to the needs of the local community. Day Hospice and Therapeutic Support Services are provided within the Hospice's Holistic Wellbeing Centre, located on the Hospice grounds.

Our clinical services are Consultant-led and supported by a highly skilled Multi-Disciplinary Team (MDT), which delivers personalised care aimed at promoting comfort, dignity and the best possible quality of life. The MDT includes Consultants in Palliative Medicine, Staff Grade Doctors, Foundation Year 2 Doctor, Specialist Registrar Trainee, GP Trainee, Clinical Lead, Charge Nurse, Practice Development Nurse, Nurse Practitioner, Registered Nurses, Senior Healthcare Assistants, Healthcare Assistants, Complementary Therapists, Occupational Therapist, Physiotherapist, Bereavement Counsellors, Holistic Wellbeing Therapist and a team of dedicated Volunteers.

The closure of our Long-Term Care Unit in 2023/24 was a necessary step to safeguard the Hospice's future and protect the delivery of essential services. In the aftermath of that difficult decision, the Hospice has entered a renewed period of stability. During 2024/25, we have been able to deliver the following services:

- Ten inpatient beds providing short-term specialist palliative care for symptom control and end of life care.
- Two inpatient beds providing emergency end of life care for patients from North Tees & Hartlepool NHS Foundation Trust and the local community.
- Day Hospice.
- Holistic Wellbeing Services.
- Adult Bereavement Counselling Services.
- Children's Bereavement Counselling Services.
- 24 Hour Helpline.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2025

STRATEGIC REPORT

Achievements and performance

The national funding challenges facing hospices continued throughout 2024/25, with demand for services rising and statutory income remaining under pressure. Against this backdrop, Alice House Hospice has remained focused on strengthening core services, building resilience and working in partnership to support equitable, high-quality palliative and end of life care for our local population.

Our priorities for 2024/25 were closely aligned with both national and regional quality agendas and were progressed through strong collaboration with our local healthcare partners. We are particularly grateful for the continued support of the North East & North Cumbria Integrated Care Board and North Tees & Hartlepool NHS Foundation Trust.

We have also worked actively with the Hospices North East & North Cumbria Collaborative (12 hospices) and Hospice UK's Innovation and Clinical ECHO Networks. These collaborations enabled shared learning, peer support and collective advocacy by amplifying key messages to government and commissioners on the value of hospice care and the pressing need for fairer funding. Members of Alice House's Senior Management Team chaired a number of regional sub-groups, reflecting the Hospice's recognised leadership within the sector.

A notable development during the year was the rising national media profile of hospices, driven by co-ordinated campaigns from individual providers and the national charity Hospice UK. This helped build wider public understanding of the vital role hospices play in the health and care system, alongside the complex financial and workforce challenges we face.

Locally, Alice House continued to strengthen its role in the region's business and civic community. The Hospice received two accolades at the 2024 Hartlepool Business Awards: Best Charitable Business and the Peter Olsen Award for Outstanding Contribution, awarded to Trustee Lorna Jones. Lorna, daughter of our founder Alice Bendle, was recognised for 45 years of voluntary service spanning half of her own life and the entirety of the Hospice's history. A standing ovation marked her impact and she also celebrated her 90th birthday surrounded by friends and colleagues at a special Tea Party hosted at the Hospice.

Success in income generation continued through a programme of high-profile, sold-out fundraising events, including the Alice House Party, Beer Festival and a new Charity Golf Tournament. Meanwhile, our Retail Team achieved its most profitable year on record. The Hospice was also named Charity of the Year by both the Captain of Hartlepool Golf Club and the town's Ceremonial Mayor, reflecting a continuing growth in local engagement and support.

Throughout the year, our commitment to quality and continuous improvement remained central. Following an unannounced inspection in October 2023, the Care Quality Commission awarded Alice House an overall rating of Good, providing independent assurance of the safety, effectiveness and compassion with which our services are delivered.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2025

STRATEGIC REPORT (continued)

Achievements and performance (continued)

Strategic Goals

We will ensure all of our services are of a high quality and are delivered safely with compassion and dignity.

The Hospice is registered with the Care Quality Commission to carry out the following regulated activities at Alice House, Wells Avenue, Hartlepool, TS24 9DA for adults aged 18 years and over:

- Treatment of Disease, Disorder or Injury

Alice House Hospice is registered with the following conditions:

- To accommodate up to a maximum of 18 patients overnight. Following the closure of the Long Term Care Unit in May 2023, 12 beds have remained active with 6 beds registered as inactive.
- To provide a service for people over the age of 18 years old.
- The registered provider's regulated activity is managed by a Registered Manager.
- The provider location where regulated activity can be carried out is: Alice House, Wells Avenue, Hartlepool, TS24 9DA.

There have been no formal complaints made during 2024/2025.

The Care Quality Commission has not taken any enforcement actions against Alice House Hospice during 2024/2025. There have been no special reviews or investigations carried out by the Care Quality Commission during this reporting period.

The Hospice's last inspection by the Care Quality Commission was unannounced and carried out on 3rd & 4th October 2023. Prior to this the Hospice was last inspected on 23 March 2015. The formal report and rating from the inspection was received on 01 December 2023 where the Hospice received an overall rating of Good, with each of the 5 Key Lines of Enquiry (Safe, Effective, Caring, Responsive, Well-Led) scoring Good.

The CQC report states 'Staff treated patients with compassion and kindness, respected their privacy and dignity, took account of their individual needs, and helped them understand their conditions. They provided emotional support to patients, families and carers.'

The full inspection report can be found by following the link below:

- <https://www.cqc.org.uk/location/1-114379452>

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STRATEGIC REPORT (continued)

A summary from the full inspection report is detailed below:

Domain	Rating	CQC Comments
Is the service safe?	GOOD	<ul style="list-style-type: none"> • The service had enough staff to care for patients and keep them safe. • Staff had training in key skills, understood how to protect patients from abuse, and managed safety well. • The service controlled infection risk well. • Staff assessed risks to patients, acted on them and kept good care records. • They managed medicines well. • The service managed safety incidents well and learned lessons from them.
Is the service effective?	GOOD	<ul style="list-style-type: none"> • Staff provided good care and treatment, gave patients enough to eat and drink, and gave them pain relief when they needed it. • Managers monitored the effectiveness of the service and made sure staff were competent. • Staff worked well together for the benefit of patients, supported them to make decisions about their care, and had access to good information. • Key services were available 7 days a week.
Is the service caring?	GOOD	<ul style="list-style-type: none"> • Staff treated patients with compassion and kindness, respected their privacy and dignity, took account of their individual needs, and helped them understand their conditions. • They provided emotional support to patients, families and carers.
Is the service responsive?	GOOD	<ul style="list-style-type: none"> • The service planned care to meet the needs of local people, took account of patients' individual needs, and made it easy for people to give feedback. • People could access the service when they needed it.
Is the service well-led?	GOOD	<ul style="list-style-type: none"> • Leaders ran services well using reliable information systems and supported staff to develop their skills. • Staff understood the service's vision and values, and how to apply them in their work. • Staff felt respected, supported and valued. • They were focused on the needs of patients receiving care. • Staff were clear about their roles and accountabilities. • The service engaged well with patients and the community to plan and manage services and all staff were committed to improving services continually.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2025

STRATEGIC REPORT (continued)

Achievements and performance (continued)

We will ensure our organisation is governed and managed in accordance with best practice.

The Board receive updates from all members of the Senior Management Team for each meeting to ensure transparency and service developments are always approved by the Board.

All of the Board have fulfilled their mandatory training requirements.

Each member of the Senior Management Team has been supported by an assigned Trustee for the effective monitoring of their departmental sub strategies, with periodic reporting back to the Board of Trustees on the following:

- Progress Against Strategic Objectives Within Departmental Sub Strategy.
- Operational Plans.
- Identified Risks.
- Review of Recently Updated Policies & Procedures.
- Review of Adherence to Non-Binding Rules, Codes and Standards.
- Benchmarking of Departmental Performance.
- Review of Third Party Suppliers/Services/SLAs.
- Review of Departmental Sub Strategy Against Budget.
- Feedback/Complaints.

We will seek out opportunities to support our communities in all of their interactions with us.

Alice House Hospice is an integral partner in the Hospices North East & North Cumbria Collaborative, who take a partnership approach to addressing the ever increasing demands of service provision, education, training and workforce development. This collaboration demonstrates a region wide commitment to working in partnership to improve palliative and end of life care for all patients. The Hospice is a member of the following HNENC collaborative groups:

- Chairs
- Chief Executives
- Executive Clinical Leads in Hospice & Palliative Care (ECLiPH)
- Education
- Marketing & Communications
- Human Resources
- Finance
- Income Generation
- Facilities

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2025

STRATEGIC REPORT (continued)

Achievements and performance (continued)

Alongside delivering care tailored to individual needs and preferences, we offered a number of experiences that enriched the lives of our patients and their loved ones. These were made possible with the help of volunteers and local businesses.

One such example was enabling a young father, nearing the end of his life, to attend a match in a hospitality box at Middlesbrough Football Club with his wife and children, accompanied by Hospice nursing staff to support his care needs.

Another special experience involved helping a lady fulfil her lifelong dream of seeing the Northern Lights, through a virtual reality experience of Iceland, during the final days of her life. This special moment was arranged by a volunteer with less than 24 hours' notice.

The Hospice proactively engages with our local community, businesses, schools, colleges and other charities and also key local figures including Members of Parliament and Council Leaders. Through this proactive approach we have further established ourselves as an organisation that is valued, trusted and supported.

Strong business partnerships have enabled us to access valuable services and resources free of charge, such as staff training, new curtains for patient bedrooms, design services and video production.

Service Activities

During 2024/2025, the Hospice prioritised the following three improvement domains of Patient Safety, Clinical Effectiveness and Patient Experience:

1. **Electronic Patient Record Management System (Patient Safety)**

During 2024/2025, Alice House Hospice continued the implementation of the Palliative Care Module of SystemOne, supporting safer, more consistent and person-centred care through a unified Electronic Patient Record (EPR) system. This development significantly strengthens our clinical governance, data accuracy and service responsiveness, particularly in relation to regulatory compliance, multidisciplinary working and out-of-hours care. Key developments include:

- **Death Certification Compliance:** In preparation for regulatory changes introduced by the new death certification process (effective from 9 September 2024), the Medical Team began completing the Medical Certificate of Cause of Death (MCCD) electronically via SystemOne from April 2024. This has ensured timely compliance with statutory requirements and improved the quality and legibility of documentation.
- **Infrastructure Investment:** Additional IT equipment was purchased to enable wider and more flexible access to the system across clinical areas, including on-call and out-of-hours services.
- **Training and Access Expansion:** Medical and Nursing Teams received targeted training to enable the electronic registration and admission of patients during out-of-hours periods, improving continuity of care and reducing reliance on paper records.
- **Clinical Assessment Tools Integration:** The 4AT Assessment Tool was embedded within the Medical Holistic Assessment to support the early identification of delirium and cognitive impairment. The Run-PC Triage Tool was introduced to enhance triage accuracy and prioritisation of care needs.
- **Governance and Incident Review:** The Senior Manager for Clinical Services routinely reviews patient records within SystemOne to support investigations into clinical incidents, enhancing learning and enabling more robust documentation of findings and follow-up actions.
- **Data Visibility and Quality Monitoring:** A new Screening Tools Dashboard was developed to improve real-time oversight of key clinical indicators, including:
 - o IPOS (Integrated Palliative care Outcome Scale)
 - o Phase of Illness

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2025

STRATEGIC REPORT (continued)

Achievements and performance (continued)

- o AKPS (Australia-modified Karnofsky Performance Status)
- o Mental Capacity Act (MCA) 1 and 2 assessments

The implementation of the Palliative Care Module represents a significant step forward in embedding digital maturity and improving patient safety across the organisation. It enables better data collection for audit and quality improvement, supports interdisciplinary co-ordination and helps future-proof our systems in line with NHS digital priorities.

2. Progression of Implementation of the Patient Safety incident Response Framework (PSIRF) in Collaboration with the North East Hospice Network (Clinical Effectiveness)

During 2024/2025, Alice House Hospice made significant progress in the phased implementation of the Patient Safety Incident Response Framework (PSIRF), in partnership with the Hospices North East & North Cumbria Collaborative. PSIRF is a national NHS framework designed to move away from a reactive, blame-focused approach to incident investigation, and towards one that prioritises learning, systemic improvement and a just culture. It represents a shift from traditional root cause analysis to a model that explores the wider factors contributing to safety events, fostering a more compassionate, transparent and effective response to patient safety concerns. Through regional collaboration and internal governance, Alice House Hospice is embedding PSIRF as a cornerstone of its safety culture. These developments mark a strategic shift towards learning-led responses, strengthened leadership, and a more open, supportive environment for improving patient care. Key developments include:

- Collaborative Planning and Leadership Development: A PSIRF Hospice Collaborative meeting was held in June 2024, during which hospices agreed a joint regional implementation plan, setting out shared principles, timelines and responsibilities. This marked a significant step towards consistent adoption of PSIRF across the region. Leadership training sessions took place in September/October 2024, equipping hospice managers and clinical leaders with the skills and understanding required to carry out meaningful incident reviews under the PSIRF methodology.
- Embedding PSIRF in Governance Structures: PSIRF is now a standing agenda item at the Hospice Collaborative Regional Managers' meetings, ensuring it remains a core component of quality governance, enabling regular review, discussion of safety insights and cross-organisational action planning.
- Thematic Learning and Shared Improvement: The collaborative has adopted a thematic approach to patient safety learning, reflecting PSIRF's focus on system-wide insight and reflection.

3. Pilot In-Reach Hospital Worker to Increase the Flow of Patients into Hospice Emergency End of Life Beds

In 2024/2025, North Tees & Hartlepool NHS Foundation Trust continued funding for the Rapid Response Out-of-Hours Admission Service, supporting the Hospice's transition towards 24-hour access and admission.

This initiative aims to reduce Accident & Emergency and Acute bed usage by enabling rapid transfers (generally same day) to hospice care. Initially, the service focused on patients in the Accident & Emergency Department (A&E) and Emergency Assessment Unit (EAU) who were placed on the Care for the Dying Patient (CDP) document. It was subsequently expanded to include patients on the CDP across all wards at the University Hospital of North Tees, as well as referrals from the community. The service ensures that patients can be rapidly admitted to the Hospice and cared for in an environment that prioritises dignity, comfort and family support at the end of life.

Key developments and outcomes in 2024/2025 include:

- In August 2024 the Hospice seconded a Palliative Assessment Sister (In-Reach) to work alongside the Specialist Palliative Care Team within North Tees & Hartlepool NHS Foundation Trust.
- The In-Reach Sister's presence added significant value to patient pathways and clinical decision-making.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2025

STRATEGIC REPORT (continued)

Achievements and performance (continued)

Between August 2024 and March 2025, 250 patients were assessed for potential admission to the Hospice's Emergency End-of-Life Care beds, ensuring that individuals received the right care, in the right place, at the right time.

- The role increased overall referral numbers and helped create a noticeable cultural shift within the hospital. Wards that had historically made few or no referrals, such as the Stroke Ward, began engaging more readily, leading to greater awareness and use of Hospice resources. Feedback from healthcare professionals highlighted improved patient flow, better understanding of hospice care pathways and enhanced multidisciplinary collaboration as key benefits.
- In addition to supporting Emergency End of Life Care admissions, the In-Reach Sister facilitated the identification and referral of suitable patients to Symptom Control beds, further improving patient outcomes and service efficiency.

Despite these achievements, the project will conclude on 30 June 2025 following the withdrawal of funding from North Tees & Hartlepool NHS Foundation Trust. This will formally end the provision of two dedicated Emergency End of Life Care beds and the In-Reach post. However, the knowledge, processes and collaborative practices developed through the project provide a strong foundation for future service innovation.

There has been some excellent qualitative feedback from the project through the Friends & Family survey results, including:

"Thank you for looking after xxxx and also me over the last days of her life.
It was a relief that she was transferred to Alice House.
Thank you once again from all my family."

*"The care that has been given is amazing. Absolutely unbelievable.
Put everyone at ease. Weight taken off. Cared for really well. Treat like part of the family.
Catered for as much as loved one. So, understanding I would give 2000/100."*
"Thank you for the care and attention given to my wonderful friend xxxx
She ended her days as she would have wished in lovely surroundings, surrounded
by the people she loved and given the care and attention she deserved. Thank you so much

"We'd like to thank you all in here, for the fantastic work that you do. The Hospice would just not be right, without every single one of you. xxxx family are all in awe of you, and for keeping things so calm. But most of all, from all our hearts, thanks for looking after our mam."

During 2024/2025, the Hospice delivered and achieved the following service outcomes:

- **Inpatient Unit**

"I couldn't have asked for an amazing, loving, caring team you are all brilliant, thoughtful and really good listeners when I needed you, and all the tears I have shed and there has been a lot. Without you all I would not be going home pain free and happy."

"To, all the amazing staff at Alice House. Thank you so much for the amazing care, compassion and empathy you have shown to xxxx and family during our time with you.
We wouldn't have wanted xxxx to have been anywhere else during his final days.
You will all always hold a special place in our hearts forever."

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COUNCIL MEMBERS' REPORT (CONTINUED)
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STRATEGIC REPORT (continued)

Achievements and performance (continued)

"I am writing on behalf of my family to thank everyone at Alice House for the fantastic care, support, empathy and compassion they provided to xxx and her family during the time xxx was in Alice House. The service xxx received from Alice House was exemplary. The care and support were of the highest possible standard, and Alice House made a big difference to our lives. All members of the staff team were so hardworking, dedicated, professional and caring. They treated xxx with dignity, respect and kindness at all times."

"To all the staff at Alice House Hospice, xxxx family would like to thank you all for the care and kindness you showed our mam and us. Although the stay with yourselves was short, it was filled full with the most amazing level of care, respect and love. We can never thank you or repay you for everything you did.

Thank you, thank you for being the most amazing people, you truly are angels.
We pray you continue to offer your services to other people and their families."

- The Hospice's Inpatient Unit comprises of:
- Eight single, en-suite bedrooms providing short-term specialist palliative care, including symptom control, psychological support, and end-of-life care. Funding is provided by the North East & North Cumbria Integrated Care Board (Tees Valley) for six beds and by the North East & North Cumbria Integrated Care Board (County Durham) for two beds. The following inpatient care activity took place during 2024/2025:

Inpatient Unit	2024/ 2025
Referrals	206
Admissions	103
First Admission	97
% Bed Occupancy	80,2%
Average Length of Stay (Days)	*19,6
% Deaths	66%
% Discharges	34%
% Cancer	84%
% Non-Cancer	16%

***Average Length of Stay**

The Hospice is continuing to see patients whose length of stay is exceeding 8 weeks due to complexity and high medical needs, with 50.56% of admissions above normal occupancy (i.e. ranging from 1-158 days) when measured by individual patients. Previously these patients would have been eligible for transfer to the Continuing Healthcare funded beds in the Hospice's Long Term Care Unit, which was closed at the beginning of May 2023 due to a funding deficit which could not be sustained by the Hospice. The complexity level can make it difficult to find suitable nursing home placements for patients or to discharge into the community with the appropriate level of support and results in the Hospice not being able to admit as many patients.

- During the phased re-opening of Butterwick Hospice's eight inpatient beds, Alice House Hospice received temporary funding from the North East & North Cumbria Integrated Care Board (Tees Valley) to provide two additional beds for patients from the Stockton-on-Tees area. This funding covered the period 1 April 2024 to 5 November 2024 and supported short-term specialist palliative care provision.
- In 2024/2025, the Hospice's healthcare professionals provided the following telephone support for both Tees Valley and County Durham inpatients:

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COUNCIL MEMBERS' REPORT (CONTINUED)
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STRATEGIC REPORT (continued)

Achievements and performance (continued)

Telephone Support	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Total
Advice to Patients, Carers & Family Members	490	534	660	730	2,414
Advice to Healthcare Professionals	748	742	907	832	3,229
Multi-Disciplinary Team (patients discussed)	120	91	109	129	449
Total	1,368	1,367	1,676	1,691	6,092

- **Day Hospice**

“The twelve Thursdays and the Christmas party are days I will never forget, nor will I forget the new friendships made there. My time there was during an extremely difficult period for me and I'm not quite sure how things would have worked out had it not been for those days.”

“Attending Day Hospice is my me time, I love it.”

- Day Hospice operates in the Holistic Wellbeing Centre each Thursday between 10.00 a.m. and 3.00 p.m. with a light lunch and refreshments provided. Patients still have the opportunity to visit on an appointment basis but also benefit from the opportunity to stay for peer support. Patients report that the greatest benefit from attending Day Hospice is the relief from social isolation and spending time with other people who are going through a life limiting experience. The service is designed to provide support to patients who may have issues with their health including:
 - o Management of symptoms.
 - o Providing psychological and emotional support.
 - o Administration of treatments, such as blood transfusions and intravenous fluids.
 - o Providing an introduction to Hospice services.
 - o Signposting/referring to other healthcare professionals.
 - o Supporting individual and carers' wellbeing.
 - o Providing relaxation and complementary therapies.
 - o During 2024/2025, the Hospice's healthcare professionals provided the following Day Hospice support to both Tees Valley and County Durham patients:

Day Hospice	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Total
Support to Patients, Carers & Family	65	45	66	74	250

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COUNCIL MEMBERS' REPORT (CONTINUED)
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STRATEGIC REPORT (continued)

Achievements and performance (continued)

• **Therapeutic Support Services - Counselling Support**

"I received an amazing service. My counsellor was very professional but caring. I benefitted greatly from this service and am very grateful to you all."

"It was understanding me, helped me with questions about my son passing away, helped me to cope. Very professional, thank you Alice House Angels."

"The Time, care and respect shown to me has helped greatly and I feel the experience has given me much resolution and am in a better place for this. Thank you"

"Keep doing what you are doing, this is an amazing service you provide and honestly don't know where I would be without the support from the hospice and my counsellor."

- The Counselling Team provides Bereavement Counselling Services to Hospice patients and their families who are accessing Hospice services. The service specialises in supporting adults affected by a palliative care diagnosis, focusing on managing the emotional impact of their condition and providing anticipatory grief counselling. Relatives of Inpatient Unit (IPU) patients are also offered anticipatory grief support.
- The Hospice delivers Adult Community Bereavement Counselling to adults from the local communities of Hartlepool and East Durham who have been referred through external services. This is not a commissioned service and relies entirely on securing external funding. Established in 2007, the service is well-regarded and in consistently high demand, with an average of more than 60 referrals each month. In 2024/2025, the Hospice received a grant from three Primary Care Networks to continue providing this support.
- The Hospice offers a specialist Children's Bereavement Service to support bereaved children from our local communities who are experiencing grief and loss. This service is wholly dependent on external funding. Several funding applications were submitted in 2024/2025 but unfortunately were not successful. Continuation of the service in 2025/2026 will be reviewed if further funding cannot be secured.
- The Counselling Team also provides emotional and psychological support to Hospice staff members as part of the Staff Wellbeing Service, offered alongside holistic therapies.
- For the reporting period (April 2024 to March 2025) the Counselling Team provided the following face to face sessions for adults and children:

Counselling Support	Total
Referrals Received Adult	285
Referrals Received Children	103
Adult Assessments	178
Adult Counselling	1,212
Child Assessments	73
Child Counselling	188

- During 2024/2025 the Counselling Team also engaged in telephone support calls to and from bereaved adults as detailed below:

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COUNCIL MEMBERS' REPORT (CONTINUED)
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STRATEGIC REPORT (continued)

Achievements and performance (continued)

Counselling Telephone Support	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Total
Telephone Contacts/Support Calls	708	895	827	852	3,282

- **Therapeutic Support Services - Holistic Therapies**

"So relaxed and enjoyed and feel so much at ease. I'd highly recommend these sessions as helps you feel you can move again and not restricted."

"Relaxing and helped ground me. It continues to help with stress quite a good few days after. I love that my arm has reduced making me feel better."

"A lovely session. I would recommend to anyone. Reached a level of relaxation I have never been to before. Left feeling calm, refreshed and with a quiet mind."

- In addition to offering a wide range of holistic therapies and treatments to paying members of the public, the Hospice secured funding in 2024/2025 to deliver Reflexology Lymphatic Drainage (RLD) and Prehabilitation Cancer Services.
- Sadly, due to a challenging budget for 2025/2026, the difficult decision has been made to close the Holistic Therapy Service to members of the public from the end of May 2025, resulting in 4 part-time staff redundancies. Complementary Therapies, however, will still continue to be provided for Hospice patients.
- During 2024/2025, therapeutic support activities to staff and the public have been delivered as detailed below:

Holistic Therapies	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Total
Therapeutic Support Contacts/Activities	585	579	622	588	2,374

- **24 Hour Helpline**

- We recognise that individuals living at home with a life-limiting illness—and their families—may need support at any time, day or night. The Hospice's 24-Hour Helpline ensures that help is available at the earliest opportunity, either directly from our team or by connecting callers with the most appropriate service.
- The Helpline is staffed by specialist Nurses and Doctors, based at the Hospice, who are ready to offer support and advice to individuals and their families, at any time during the day or night.
- This service is also available for Healthcare Professionals who can access this service during a 24 hour period where they will receive specialist support and advice in the management of a patient's ongoing specialist palliative care needs. The patient can be at home, in hospital or another Hospice.
- The Helpline is not funded and during 2023/2024 the Hospice's healthcare professionals provided the following telephone support via the Hospice's 24 hour Helpline for both Tees Valley and County Durham patients and healthcare professionals:

24 Hour Helpline	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Total
Helpline Calls (Patients & Healthcare Professionals)	143	164	130	135	572

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2025

STRATEGIC REPORT (continued)

FINANCIAL REVIEW

We continue to run a highly professional organisation with a stable financial position which reflects ethical fundraising and cash holding policies decided by our Council Members.

The credit rating during the reporting period has remained at level A.

Reserves policy

Free reserves available for use by the Charity are deemed to be those that are readily realisable, less funds whose uses are restricted or else designated for particular purposes.

As a matter of policy, the Charity aims to build up and hold a maximum of two months running costs as reserves. This objective is secondary to the achievement of the Charity's strategic objectives as stated in the current strategy, so that reserves will not be built or maintained at the expense of planned or current patient care.

Two months running costs would be approximately £622k. With free reserves (after removing long term liabilities) of £852k the Charity is exceeding their target. The Charity expects to continue to maintain reserves over the next year.

Aspirational objectives for reserves: The Charity aims to become financially independent of Clinical Commissioning Group contracts as a security measure against diminishing contract values and the uncertainty of the level of tariff funding arising from the End of Life & Palliative Care Review. Nevertheless, it will still seek appropriate contracts to advance patient services. The achievement of this will be through the continuation of regular monitoring of financial management.

Financial review and results for the year

The Charity has made a surplus before depreciation of £372,753 and after depreciation a surplus of £230,722 has been declared.

The detailed results are as follows:

Gross income increased by 0.4% to £3.84m, while expenditure on charitable activities increased by 4.7% to £2.8m. After taking depreciation into account total resources expended of £3.6m (2024: £3.5m) resulted in a net surplus for the year of £231k (2024: £297k surplus).

Income received in furtherance of charitable objects totalled £1.6m. Expenditure incurred on furthering charitable objects was £2.8m. The Charity supports its charitable activities with successful fundraising activities, including charity shops and a lottery.

Fundraising activities, donations and legacies generated a surplus of unrestricted income of £894k to be used to pursue charitable activities.

£279k of grants, including £61k of capital grant from the Department of Health and Social Care, were received to support the work of the Hospice.

The lottery generated a surplus of £89k (2024: £92k) and Trading Activities generated a surplus of £192k (2024: £135k).

£10.5k of unrestricted income was spent on the governance costs of the organisation.

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FOR THE YEAR ENDED 31 MARCH 2025

Total reserves stand at £3.5m (2024: £3.3m), including £411k of restricted reserves.

At 31 March 2025 there is a surplus on unrestricted free reserves of £600k. Excluding the long term bank loans, a loan which was used to purchase the freehold and develop the Wellbeing Centre and the Coronavirus Business Interruption Loan, and the pension deficit, there are free reserves of £852k.

Investment policy and performance

The Memorandum of Association authorises the Council Members to invest surplus funds as may be thought fit. The Council Members' policy is to hold any surplus cash on deposit to obtain the most attractive interest rate available. The Council Members' have directed that funds will be used in the charitable activities of the company instead.

FUNDRAISING

Our Fundraising Strategic Objectives remain unchanged and we are consistent in our commitment to these:

- Develop strong partnerships with organisations and individuals.
- Be proactive, research and implement opportunities to embrace the current climate.
- Develop sustainable corporate relationships.
- Ensure our approach to fundraising is respectful and non-aggressive and compliant with the Fundraising Regulator.
- Promote the Hospice in a positive and professional manner.

Last year's return to what is referred to as 'back to basics' fundraising has been fruitful and is ongoing – this approach includes the following fundamental qualities:

- Tried and tested fundraising practices.
- Risk averse processes, particularly with regard to financial outlay.
- Maximising stakeholder engagement, which supports longer-term donor retention and stewardship – this applies to volunteers, supporters and external organisation in both the community and corporate sectors.
- Staff engagement which promotes united fundraising efforts and sense of belonging and ownership within the organisation – this is delivered in a number of ways, including our open door policy, proactive transparency and staff recognition events.

We have recruited the support of a number of business supporters on a personal level, with staff members from EDF, Lloyds, Santander and Orangebox volunteering outside of business hours and in some cases being able to offer 'matched funding' which helps to boost fundraising totals.

Our Retail Team celebrated their most profitable year on record in 2025 and strive to supersede this again in 2026.

Alice House Hospice continues to be a subscribed member of the Fundraising Regulator and follows the Code of Fundraising Practice. Codes are reviewed on a rolling programme to ensure compliance in all areas.

Staff and Volunteers within Income Generation have access to the Code of Fundraising and the Institute of Fundraising's 'Treating Donors Fairly' policy as well as all other relevant training and operational documents.

STAFF

The Hospice completed its annual Staff Satisfaction Survey in November 2024, achieving a strong response rate of 61.2%, with 60 surveys returned out of a possible 98. The results reflect the pride and dedication of our team:

- 100% of staff agreed that if a friend or relative needed treatment, they would be happy with the standard of care provided by Alice House Hospice.

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COUNCIL MEMBERS' REPORT (CONTINUED)
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- 99% agreed that their work is meaningful to the Hospice.

Staff comments highlighted a strong sense of pride, teamwork and support:

- "I am proud to be a part of Alice House Hospice, at work we are like family."
- "Working alongside so many lovely people."
- "I enjoy my job here at Alice House and find my job very rewarding."
- "I love my job and feel very proud of the work the whole organisation does. Without each department we would not be able to have our beautiful Hospice."
- "The Hospice is an amazing place to work. I feel very proud to be part of a fantastic team."
- "Management are visible in all areas and approachable. I feel so proud to work for such a fantastic Charity."

The Hospice is committed to supporting the health, wellbeing and professional needs of all staff through provision of the following:

- Westfield Health Plan – available to all staff, providing support with routine healthcare costs such as optical, dental and a range of therapies.
- Staff Wellbeing Service – by referral, staff experiencing depression, anxiety or stress can access sessions with trained counsellors and practitioners, helping to prevent long-term sickness.
- Better Health at Work Award Scheme – Alice House has recently achieved the Silver Award and is now working towards the Gold Award, reflecting our ongoing commitment to a healthy and supportive workplace.

In addition, we ensure staff are well supported during and after periods of absence. Back-to-work interviews are carried out to identify any support needs, with options such as a graduated return to work or light duties where appropriate.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2025

PLANS FOR THE FUTURE

The Hospice has prioritised the following three improvement domains of Patient Safety, Clinical Effectiveness and Patient Experience for 2025/2026:

- **Establishing a Culture of Shared Learning through Hospice UK's Patient Safety Project (Patient Safety)**
In alignment with the national Patient Safety Incident Response Framework (PSIRF) and recognising the value of national benchmarking and shared learning, our priority for 2025/26 is to join and actively engage with Hospice UK's Patient Safety Project and data collection. By participating, we aim to:
 - Improve the quality and consistency of how we monitor and learn from patient safety incidents.
 - Contribute to and benefit from the national hospice sector's learning community.
 - Create a strong foundation for long-term quality improvement in key areas of patient harm.This focus has been informed by internal incident reviews, audits and staff feedback highlighting the need for a more structured approach to learning and data use.
- **Improving Delirium Care through Participation in the DAMPen-Delirium II Study**
Delirium is a common and distressing symptom for patients nearing the end of life, associated with poor outcomes, increased care burden and reduced quality of life for both patients and families. Internal clinical reviews and feedback from staff highlighted challenges in recognising and managing delirium consistently. National research also indicates a lack of robust data around the prevalence, presentation and management of delirium in palliative care settings. The opportunity to participate in the DAMPen-Delirium II study aligns with our aim to deliver evidence-based, compassionate care and to contribute to the development of best practice nationally. During 2025/26 will be formally taking part in the DAMPen-Delirium II study, a national multi-site observational study co-ordinated by the University of Hull, Hull York Medical School and the Wolfson Palliative Care Research Centre.
- **Experience Improving End of Life Dementia Care Through Training and Practice Support**
Feedback from families with experience of end-of-life care provided to people with dementia has identified inconsistencies in the quality of care, with some experiences highlighting a lack of timely recognition of dying and inadequate comfort measures. These concerns are echoed in the Care Quality Commission's 'The State of Health Care and Adult Social Care in England 2023/24' report (CQC, 2024). Evidence from Hospice UK demonstrates that people with dementia are less likely to receive effective palliative care interventions compared to those with other terminal conditions, particularly in the last days of life. First-hand observations within care homes also showed that residents nearing the end of life were sometimes left distressed, with signs of pain or agitation going unnoticed or unaddressed. These findings align with national guidance, such as NICE NG97 and the Leadership Alliance for the Care of Dying People, which stress the importance of training staff to provide compassionate, person-centred care for people approaching the end of life. The priority will entail the identification and securing of appropriate funding and staffing resources in order to deliver 4 hour training sessions on end of life dementia care to care home staff.
- **Department of Health & Social Care Capital Grants Programme**
On 19 December 2024 the Government announced a £100 million capital funding boost for adult and children's hospices across England. This investment reflects the Government's commitment to ensuring that every person has access to high-quality end of life care. As part of its Plan for Change, the Government is taking immediate action to strengthen the health service, improve care standards and ensure it is fit for the future. One of the Plan's three core priorities is to shift more healthcare delivery from hospitals into community settings. Charitable hospices, whose work is predominantly community-based, are therefore integral to achieving this ambition. The £100 million will be invested to modernise facilities and deliver upgrades to hospices, with £25 million allocated in 2024/2025 and £75 million in 2025/2026. Funding is restricted to five priority areas:
 - Renovation, refurbishment and potentially replacement of buildings, equipment and accommodation

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COUNCIL MEMBERS' REPORT (CONTINUED)
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- to ensure that patients continue to receive the best care possible, e.g. refurbishing bedrooms and bathrooms for patients and providing comfortable overnight facilities for families.
- Capital schemes that generate a revenue benefit such as insulation, heating and lighting upgrades and energy efficiency.
 - Improving garden and outdoor spaces so patients and their families can spend time outdoors in greener and cleaner spaces.
 - Develop and improve outreach services to support people in their own homes when needed, for example with mobile equipment.
 - Support the Government's shift from analogue to digital, through digital upgrades including the purchase of laptops, digital equipment and the upgrading of internet access. Digital investment also encompasses improving IT systems making it easier for GPs and hospitals to share vital data on patients.

The Hospice received £60,926 in 2024/2025, which was used to replace the original (22-year-old) heating and hot water systems. These systems had become inefficient, unreliable and posed operational and business continuity risks. The replacement has delivered the following benefits:

- Improved Patient Comfort: The upgraded heating system allows consistent, well-controlled temperatures throughout the Inpatient Unit, essential for patients with frailty or complex needs. Remote electronic controls enable temperature adjustments out-of-hours to ensure ongoing comfort.
- Reduced Risk of Service Disruption: Replacing obsolete and failure-prone equipment has greatly reduced the likelihood of heating breakdowns, particularly in winter when interruptions could compromise patient safety.
- A More Peaceful Environment: Modern, efficient systems operate quietly, creating a calmer, more therapeutic atmosphere for patients and families.
- Enhanced Infection Control & Hygiene: Reliable hot water and heating are vital to maintaining high hygiene standards, supporting clinical care and preventing infections.
- Energy Savings Reinvested in Care: Greater energy efficiency is expected to generate cost savings, enabling reinvestment into frontline patient services.

This investment is more than an infrastructure upgrade, it ensures every patient in our care experiences dignity, warmth, and security in a setting that is truly fit for purpose.

The Hospice will receive £182,598 in 2025/2026. This will be used to refurbish Inpatient Unit bedrooms and en-suite bathrooms, enhance digital infrastructure and improve outdoor and garden spaces for the benefit of patients and their families.

Going concern

The Trustees maintain ongoing oversight of the Charity's financial position through regular monitoring of management accounts, cashflow forecasts and budget performance. This enables timely action to be taken to preserve the Hospice's financial stability. The Charity's Risk Register is also reviewed and updated regularly to ensure it reflects current and emerging risks, including those relating to income generation, expenditure pressures, and the wider economic environment.

After making the necessary enquiries and reviewing the Charity's financial forecasts, reserves position and funding commitments, the Trustees are satisfied that the Charity has adequate resources to continue its activities for the foreseeable future. For this reason, the going concern basis has been adopted in preparing these financial statements.

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Employees

Our employees play an active role in shaping and delivering the Charity's strategy. It is embedded in everyday work and used to guide personal objectives and appraisals, ensuring that everyone's contribution supports our shared goals.

We prioritise open communication, providing regular updates and sharing key points from Senior Management Team meetings so that all staff remain informed and engaged with the Charity's activities and direction. We also value staff feedback, recognising it as an essential part of improving our services and strengthening our organisation.

Volunteers

The survival and growth of the Charity would not be possible without the unwavering dedication of our volunteers. They play a vital role in fulfilling the Hospice's Vision, Mission and Values by complementing the work of our patient care teams, supporting fundraising activities and serving as Council Members.

Our volunteers bring a wealth of skills, knowledge, and experience, which enhances the professional profile of the Charity and extends our reach into the community. Their contribution not only supports those living with life-limiting illnesses but also creates opportunities for individuals to develop their own skills and experience. Many take these skills back into the wider community, further raising awareness of the Hospice's work and inspiring others to give their time in a voluntary capacity.

The Hospice completed a Volunteer Satisfaction Survey in October 2024, where 37 surveys were received out of a possible 70. Responses included:

- 100% agreed that they felt valued as part of the team.
- 100% agreed that supporting a local charity was one of the main reasons for volunteering.
- 97% agreed that they could approach their line manager with a confidential issue.
- "I was welcomed by everyone from the moment that I stepped through the door and even though I am a volunteer I am never treated any different by colleagues or clients, I absolutely love it here."
- "I'm always told how much my work is appreciated."
- "My opinion matters and always makes me feel respected and valued."
- "The door is always open when I have needed to speak about any concerns, nothing is ever a problem."

Council Members' liability

The Council Members guarantee to contribute an amount not exceeding £1 to the assets of the Charity in the event of winding up.

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Statement of Council Members' responsibilities

The Council Members (who are also the directors of the Charity for the purposes of company law) are responsible for preparing the Council Members' report including the Strategic report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company law requires the Council Members to prepare financial statements for each financial . Under company law, the Council Members must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the Charity and of its incoming resources and application of resources, including its income and expenditure, for that period. In preparing these financial statements, the Council Members are required to:

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles of the Charities SORP (FRS 102);
- make judgments and accounting estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards (FRS 102) have been followed, subject to any material departures disclosed and explained in the financial statements;
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the Charity will continue in business.

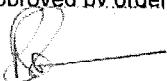
The Council Members are responsible for keeping adequate accounting records that are sufficient to show and explain the Charity's transactions and disclose with reasonable accuracy at any time the financial position of the Charity and enable them to ensure that the financial statements comply with the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

Disclosure of information to auditors

Each of the persons who are Council Members at the time when this Council Members' report is approved has confirmed that:

- so far as that Council Member is aware, there is no relevant audit information of which the charity's auditors are unaware, and
- that Council Member has taken all the steps that ought to have been taken as a Council Member in order to be aware of any relevant audit information and to establish that the charity's auditors are aware of that information.

Approved by order of the members of the board of Council Members and signed on their behalf by:



Mr R Priestman, Chair
(Chair of Trustees)
Date: 25 November 2025



Mrs J Regan
(Treasurer)

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE HARTLEPOOL HOSPICE LIMITED T/A
ALICE HOUSE HOSPICE**

UNQUALIFIED OPINION

We have audited the financial statements of The Hartlepool Hospice Limited T/A Alice House Hospice (the 'charity') for the year ended 31 March 2025 which comprise the Statement of financial activities, the Balance sheet, the Statement of cash flows and the related notes, 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 charitable company's affairs as at 31 March 2025 and of its incoming resources and application of resources, including its income and expenditure for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

BASIS FOR OPINION

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditors' responsibilities for the audit of the financial statements section of our report. We are independent of the charitable company in accordance with the ethical requirements that are relevant to our audit of the financial statements in the United Kingdom, including the Financial Reporting Council'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 Council Members' 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 charitable company's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

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

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE HARTLEPOOL HOSPICE LIMITED T/A
ALICE HOUSE HOSPICE (CONTINUED)**

OTHER INFORMATION

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

We have nothing to report in this regard.

OPINION 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 Council Members' Report including the Strategic Report for the financial year for which the financial statements are prepared is consistent with the financial statements.
- the Council Members' Report and the Strategic Report have been prepared in accordance with applicable legal requirements.

MATTERS ON WHICH WE ARE REQUIRED TO REPORT BY EXCEPTION

In the light of our knowledge and understanding of the charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the Council Members' Report including the Strategic Report.

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

- adequate accounting records have not been kept, or returns adequate for our audit have not been received from branches not visited by us; or
- the financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of Council Members' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit; or
- the Council Members were not entitled to prepare the financial statements in accordance with the small companies regime and take advantage of the small companies' exemptions in preparing the Council Members' Report.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE HARTLEPOOL HOSPICE LIMITED T/A
ALICE HOUSE HOSPICE (CONTINUED)**

RESPONSIBILITIES OF COUNCIL MEMBERS

As explained more fully in the Council Members' responsibilities statement, the Council Members (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 Council Members 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 Council Members are responsible for assessing the 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 Council Members either intend to liquidate the charitable company or to cease operations, or have no realistic alternative but to do so.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE HARTLEPOOL HOSPICE LIMITED T/A
ALICE HOUSE HOSPICE (CONTINUED)**

AUDITORS' 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 Auditors' 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:

In identifying and assessing risks of material misstatement in respect of irregularities, including fraud, the audit engagement team:

- Obtained an understanding of the nature of the sector, including the legal and regulatory framework that the charitable company operates in and how they are complying with the legal and regulatory framework
- Inquired of management and those charged with governance about their own identification and assessment of the risks of irregularities including any known, actual, suspected or alleged instances of fraud,
- Discussed matters about non-compliance with laws and regulations and how fraud might occur including assessment of how and where the financial statements might be susceptible to fraud.

As a result of these procedures we considered the most significant laws and regulations which have a direct impact on the financial statements are FRS 102, Charities SORP (FRS 102), Companies Act 2006 and the charitable company's governing document. We performed audit procedures to detect non-compliance which may have a material impact on the financial statements which included reviewing the financial statements including the council members report and remaining alert to new or unusual transactions which may not be in accordance with the governing documents.

The audit engagement team identified the risk of management override of controls and income recognition as the areas where the financial statements were most susceptible to material misstatement due to fraud. We designed audit procedures to respond to the risk, recognising that the risk of not detecting a material misstatement due to fraud is higher than the risk of not detecting one resulting from error, as fraud may involve deliberate concealment by, for example, forgery or intentional misrepresentations, or through collusion.

Audit procedures performed included, but were not limited to:

- testing manual journal entries and other adjustments
- evaluating the business rationale in relation to significant or unusual transactions and transactions entered into outside the normal course of business
- challenging judgments and estimates
- reviewing income transactions around the year end to look for potential "window dressing".

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 Auditors' Report.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE HARTLEPOOL HOSPICE LIMITED T/A
ALICE HOUSE HOSPICE (CONTINUED)**

USE OF OUR REPORT

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



Heather O'Driscoll FCA (Senior statutory auditor)

for and on behalf of

Waltons Business Advisers Limited

Chartered Accountants

Statutory Auditors

Maritime House

Harbour Walk

The Marina

Hartlepool

TS24 0UX

1 December 2025

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

STATEMENT OF FINANCIAL ACTIVITIES (INCORPORATING INCOME AND EXPENDITURE ACCOUNT)
FOR THE YEAR ENDED 31 MARCH 2025

	Note	Restricted funds 2025 £	Unrestricted funds 2025 £	Total funds 2025 £	Total funds 2024 £
INCOME FROM:					
Donations and legacies	3	106,032	1,089,905	1,195,937	1,288,089
Charitable activities	4	1,483,531	79,601	1,563,132	1,440,280
Other trading activities	5	-	1,076,859	1,076,859	1,091,016
TOTAL INCOME		1,589,563	2,246,365	3,835,928	3,819,385
EXPENDITURE ON:					
Raising funds	7	-	833,517	833,517	872,110
Charitable activities	8	1,530,756	1,240,231	2,770,987	2,651,131
TOTAL EXPENDITURE		1,530,756	2,073,748	3,604,504	3,523,241
NET INCOME		58,807	172,617	231,424	296,144
Transfers between funds	18	(69,281)	69,281	-	-
NET MOVEMENT IN FUNDS BEFORE OTHER RECOGNISED GAINS/(LOSSES)		(10,474)	241,898	231,424	296,144
OTHER RECOGNISED GAINS/(LOSSES):					
Other (losses)/gains	20	-	(702)	(702)	623
NET MOVEMENT IN FUNDS		(10,474)	241,196	230,722	296,767
RECONCILIATION OF FUNDS:					
Total funds brought forward		420,924	2,880,573	3,301,497	3,004,730
Net movement in funds		(10,474)	241,196	230,722	296,767
TOTAL FUNDS CARRIED FORWARD		410,450	3,121,769	3,532,219	3,301,497

The Statement of Financial Activities includes all gains and losses recognised in the year.

The notes on pages 36 to 62 form part of these financial statements.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)
REGISTERED NUMBER: 01525658

BALANCE SHEET
AS AT 31 MARCH 2025

	Note	2025 £	2024 £
FIXED ASSETS			
Tangible assets	13	2,927,054	2,971,542
Investments	14	100	100
		<u>2,927,154</u>	<u>2,971,642</u>
CURRENT ASSETS			
Debtors	15	151,724	262,880
Cash at bank and in hand	21	1,053,010	720,308
		<u>1,204,734</u>	<u>983,188</u>
CURRENT LIABILITIES			
Creditors: amounts falling due within one year	16	(347,246)	(279,560)
		<u>857,488</u>	<u>703,628</u>
NET CURRENT ASSETS		<u>857,488</u>	<u>703,628</u>
TOTAL ASSETS LESS CURRENT LIABILITIES		<u>3,784,642</u>	<u>3,675,270</u>
Creditors: amounts falling due after more than one year	17	(251,175)	(373,227)
NET ASSETS EXCLUDING PENSION LIABILITY		<u>3,533,467</u>	<u>3,302,043</u>
Defined benefit pension scheme liability	24	(1,248)	(546)
TOTAL NET ASSETS		<u><u>3,532,219</u></u>	<u><u>3,301,497</u></u>
CHARITY FUNDS			
Restricted funds	18	410,450	420,924
Unrestricted funds	18	3,121,769	2,880,573
TOTAL FUNDS		<u><u>3,532,219</u></u>	<u><u>3,301,497</u></u>

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE

**(A company limited by guarantee)
REGISTERED NUMBER: 01525658**

**BALANCE SHEET (CONTINUED)
AS AT 31 MARCH 2025**

The Council Members acknowledge their responsibilities for complying with the requirements of the Act with respect to accounting records and preparation of financial statements.

The financial statements have been prepared in accordance with the provisions applicable to entities subject to the small companies regime.

The financial statements were approved and authorised for issue by the Council Members on 25 November 2025 and signed on their behalf by:



Mr R Priestman, Chair
(Chair of Trustees)



Mrs J Regan
(Treasurer)

The notes on pages 36 to 62 form part of these financial statements.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED 31 MARCH 2025

	Note	2025 £	2024 £
CASH FLOWS FROM OPERATING ACTIVITIES			
Net cash used in operating activities	20	554,713	342,672
CASH FLOWS FROM INVESTING ACTIVITIES			
Proceeds from the sale of tangible fixed assets		-	700
Purchase of tangible fixed assets	13	(97,543)	(24,150)
NET CASH USED IN INVESTING ACTIVITIES		(97,543)	(23,450)
CASH FLOWS FROM FINANCING ACTIVITIES			
Repayments of borrowing		(115,366)	(111,135)
Repayments of finance leases		(9,804)	(9,804)
Gain on pension deficit		702	(623)
NET CASH USED IN FINANCING ACTIVITIES		(124,468)	(121,562)
CHANGE IN CASH AND CASH EQUIVALENTS IN THE YEAR		332,702	197,660
Cash and cash equivalents at the beginning of the year		720,308	522,648
CASH AND CASH EQUIVALENTS AT THE END OF THE YEAR	21	1,053,010	720,308

The notes on pages 36 to 62 form part of these financial statements

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

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

1. GENERAL INFORMATION

The Charity is a private company incorporated in England and Wales and limited by guarantee. The members of the company are the Council Members named on page 2. In the event of the Charity being wound up, the liability in respect of the guarantee is limited to £1 per member of the Charity.

The registered address is:

Alice House
Wells Avenue
Hartlepool
TS24 9DA

2. ACCOUNTING POLICIES

2.1 Basis of preparation of financial statements

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

The Hartlepool Hospice Limited T/A Alice House Hospice 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.

2.2 Fund accounting

General funds are unrestricted funds which are available for use at the discretion of the Council Members in furtherance of the general objectives of the Charity and which have not been designated for other purposes.

Restricted funds are funds which are to be used in accordance with specific restrictions imposed by donors or which have been raised by the Charity for particular purposes. The costs of raising and administering such funds are charged against the specific fund. The aim and use of each restricted fund is set out in the notes to the financial statements.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

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

2. ACCOUNTING POLICIES (CONTINUED)

2.3 Going concern

The Trustees have continued to monitor closely the financial position of the Charity against the backdrop of ongoing economic pressures, including the continued effects of the Cost of Living Crisis, rising operational costs and wider system challenges within health and social care. Despite these external factors, Alice House Hospice has achieved a period of stabilisation following the closure of the Long-Term Care Unit in 2023/24, which was a necessary but difficult decision that safeguarded the sustainability of core Hospice services.

Through a combination of strategic decision-making, operational efficiencies, targeted income generation and strengthened collaboration with system partners, the Charity has achieved its planned surplus for the 2024/25 financial year. The Charity's financial position is subject to continuous oversight, supported by robust governance arrangements. These include regular scrutiny of financial performance, scenario planning and proactive risk management by the Senior Management Team and Board of Trustees. The Risk Register is actively reviewed and updated to reflect both emerging and ongoing risks, with appropriate mitigation measures implemented in a timely manner.

In addition, the Charity continues to demonstrate strong system engagement, having delivered against national and regional priorities and benefiting from consistent support from commissioners and NHS partners. This strategic alignment contributes to a resilient operating model and reinforces our ability to plan for the future with confidence.

After making appropriate enquiries, the Trustees have a reasonable expectation that the Charity has adequate resources to continue in operational existence for the foreseeable future. For this reason, they continue to adopt the going concern basis in preparing the financial statements.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

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

2. ACCOUNTING POLICIES (CONTINUED)

2.4 Income

All income is recognised 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.

For legacies, entitlement is taken as the earlier of the date on which either: the Charity is aware that probate has been granted, the estate has been finalised and notification has been made by the executor(s) to the Trust that a distribution will be made, or when a distribution is received from the estate. Receipt of a legacy, in whole or in part, is only considered probable when the amount can be measured reliably and the Charity has been notified of the executor's intention to make a distribution. Where legacies have been notified to the Charity, or the Charity is aware of the granting of probate, and the criteria for income recognition have not been met, then the legacy is treated as a contingent asset and disclosed if material.

Gifts donated for resale are included as income when they are sold.

The Council Members acknowledge that they are assets of the Charity as soon as received but due to the fact that a very large number of small value items are received the time and cost of valuing donated goods at receipt would outweigh any benefit to the users of the financial statements of having them so valued.

Where goods are donated under the Gift Aid scheme the Charity is not entitled to the income until the goods are sold and the donor has confirmed that they are gifting the proceeds. In this case the income is included as a donation rather than as a sale.

Income tax recoverable in relation to donations received under Gift Aid or deeds of covenant is recognised at the time of the donation.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

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

2. ACCOUNTING POLICIES (CONTINUED)

2.5 Expenditure

Expenditure is recognised once there is a legal or constructive obligation to transfer economic benefit to a third party, it is probable that a transfer of economic benefits will be required in settlement and the amount of the obligation can be measured reliably. Expenditure is classified by activity. The costs of each activity are made up of the total of direct costs and shared costs, including support costs involved in undertaking each activity. Direct costs attributable to a single activity are allocated directly to that activity. Shared costs which contribute to more than one activity and support costs which are not attributable to a single activity are apportioned between those activities on a basis consistent with the use of resources. Central staff costs are allocated on the basis of time spent, and depreciation charges allocated on the portion of the asset's use.

Costs of generating voluntary income are those incurred in seeking voluntary contributions and do not include the costs of disseminating information in support of the charitable activities.

Fundraising costs are the direct costs of operating the charity shops and other trading activities. Support costs are those costs incurred directly in support of expenditure on the objects of the charity and include central costs. Governance costs are those incurred in connection with administration of the Charity and compliance with constitutional and statutory requirements.

2.6 Tangible fixed assets and depreciation

Tangible fixed assets costing £1,500 or more are capitalised and recognised when future economic benefits are probable and the cost or value of the asset can be measured reliably.

Tangible fixed assets are initially recognised at cost. After recognition, under the cost model, tangible fixed assets are measured at cost less accumulated depreciation and any accumulated impairment losses. All costs incurred to bring a tangible fixed asset into its intended working condition should be included in the measurement of cost.

Depreciation is charged so as to allocate the cost of tangible fixed assets less their residual value over their estimated useful lives, using the straight-line method.

Depreciation is provided on the following bases:

Freehold property	- 20/50 years straight line
Plant and machinery	- 7 years straight line
Motor vehicles	- 7 years straight line
Fixtures and fittings	- 7 years straight line
Computer equipment	- 3/5 years straight line
Other fixed assets	- 3 years straight line

2.7 Redundancy/termination payments

Redundancy and termination payments are recognised when an approved formal plan is in place and the employees which it affects have been made aware of the situation.

2.8 Investments

Investments represent the shares held in a subsidiary company which are stated at cost.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

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

2. ACCOUNTING POLICIES (CONTINUED)

2.9 Debtors

Trade and other debtors are recognised at the settlement amount after any trade discount offered. Prepayments are valued at the amount prepaid net of any trade discounts due.

2.10 Cash at bank and in hand

Cash at bank and in hand includes cash and short-term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

2.11 Liabilities

Liabilities and provisions are recognised when there is an obligation at the Balance sheet date as a result of a past event, it is probable that a transfer of economic benefit will be required in settlement, and the amount of the settlement can be estimated reliably.

Liabilities are recognised at the amount that the Charity anticipates it will pay to settle the debt or the amount it has received as advanced payments for the goods or services it must provide.

Provisions are measured at the best estimate of the amounts required to settle the obligation. Where the effect of the time value of money is material, the provision is based on the present value of those amounts, discounted at the pre-tax discount rate that reflects the risks specific to the liability. The unwinding of the discount is recognised within interest payable and similar charges.

2.12 Finance leases and hire purchase

Assets obtained under hire purchase contracts and finance leases are capitalised as tangible fixed assets. Assets acquired by finance lease are depreciated over the shorter of the lease term and their useful lives. Assets acquired by hire purchase are depreciated over their useful lives. Finance leases are those where substantially all of the benefits and risks of ownership are assumed by the Charity. Obligations under such agreements are included in creditors, net of the finance charge allocated to future periods. The finance element of the rental payment is charged to the Statement of Financial Activities so as to produce a constant periodic rate of charge on the net obligation outstanding in each period.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

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

2. ACCOUNTING POLICIES (CONTINUED)

2.13 Pensions

The Charity contributes to a defined contribution pension scheme and the pension charge represents the amounts payable by the Charity to the fund in respect of the year.

Defined benefit schemes

The Charity makes contributions to the National Health Service Pension Scheme and The Pension Scheme Trust.

The Charity is however unable to identify its share of the underlying assets and liabilities in the schemes and has accounted for contributions as if they were defined contributions schemes as follows:

The amount charged to the statement of financial activities in respect of pension costs is the contributions payable in the year. Differences between contributions payable in the year and contributions actually paid are shown as either accruals or prepayments in the balance sheet.

Amounts included in expenses are allocated between activities on the basis of staff time in line with other support costs.

The Charity has agreed to a deficit funding arrangement and recognises a liability for this obligation. The amount recognised is the net present value of the deficit reduction contributions payable under the agreement that relates to the deficit. The present value is calculated using the discount rate detailed in these disclosures. The unwinding of the discount rate is recognised as a finance cost.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

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

3. DONATIONS, LEGACIES AND SIMILAR INCOMING RESOURCES

	Restricted funds 2025 £	Unrestricted funds 2025 £	Total funds 2025 £	Total funds 2024 £
Donations	-	728,193	728,193	776,314
Legacies	-	176,538	176,538	267,206
Grants	106,032	173,148	279,180	225,858
Similar incoming resources	-	12,026	12,026	18,711
Total 2025	106,032	1,089,905	1,195,937	1,288,089
<i>Total 2024</i>	<i>212,882</i>	<i>1,075,207</i>	<i>1,288,089</i>	

Included within restricted grants above is capital funding of £60,926 received from the Department of Health and Security.

4. INCOME FROM CHARITABLE ACTIVITIES

	Restricted funds 2025 £	Unrestricted funds 2025 £	Total funds 2025 £	Total funds 2024 £
Inpatient Unit	1,429,464	1,862	1,431,326	1,194,524
Medical	54,067	-	54,067	53,745
Bereavement & Therapeutic Services	-	77,739	77,739	192,011
Total 2025	1,483,531	79,601	1,563,132	1,440,280
<i>Total 2024</i>	<i>1,272,934</i>	<i>167,346</i>	<i>1,440,280</i>	

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

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

5. FUNDRAISING INCOME

	Unrestricted funds 2025 £	Total funds 2025 £	Total funds 2024 £
Lottery	185,063	185,063	219,700
Fundraising events	183,192	183,192	208,046
Kitchen income	33,325	33,325	27,047
Shop income	663,161	663,161	624,373
Merchandising income	12,118	12,118	11,850
Total 2025	1,076,859	1,076,859	1,091,016
<i>Total 2024</i>	<i>1,091,016</i>	<i>1,091,016</i>	

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

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

6. TRADING ACTIVITIES

	Unrestricted funds 2025 £	Total funds 2025 £	<i>Total funds 2024 £</i>
Charity trading income			
Charity shop takings	663,161	663,161	624,373
Merchandising income	<u>12,118</u>	<u>12,118</u>	<u>11,850</u>
Total income	675,279	675,279	636,223
Fundraising trading expenses			
Charity shop costs	168,687	168,687	168,003
VR centre costs	1,485	1,485	41,780
Merchandising costs	4,309	4,309	3,163
Salaries	<u>315,131</u>	<u>315,131</u>	<u>287,899</u>
Total expenditure	489,612	489,612	500,845
 Net income from trading activities	 <u><u>185,667</u></u>	 <u><u>185,667</u></u>	 <u><u>135,378</u></u>
 <i>Total 2024</i>	 <u><u>135,378</u></u>	 <u><u>135,378</u></u>	

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

7. COST OF RAISING FUNDS

	Unrestricted funds 2025 £	Total funds 2025 £	Total funds 2024 £
Fundraising expenditure	55,763	55,763	62,947
Lottery costs	82,668	82,668	94,676
Support costs allocated	5,862	5,862	5,952
Wages and salaries	159,504	159,504	167,582
Depreciation	40,108	40,108	40,108
Fundraising trading expenses (note 6)	489,612	489,612	500,845
Total 2025	833,517	833,517	872,110
<i>Total 2024</i>	<i>872,110</i>	<i>872,110</i>	

8. ANALYSIS OF EXPENDITURE ON CHARITABLE ACTIVITIES

Summary by fund type

	Restricted funds 2025 £	Unrestricted funds 2025 £	Total 2025 £	Total 2024 £
Inpatient Unit	1,403,006	521,163	1,924,169	1,898,537
Medical	113,149	227,421	340,570	266,790
Multi Disciplinary Team	-	291,057	291,057	257,076
Bereavement & Therapeutic Services	14,601	200,590	215,191	228,728
Total 2025	1,530,756	1,240,231	2,770,987	2,651,131
<i>Total 2024</i>	<i>1,461,585</i>	<i>1,189,546</i>	<i>2,651,131</i>	

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2025

9. ANALYSIS OF EXPENDITURE BY ACTIVITIES

	Activities undertaken directly 2025 £	Support costs 2025 £	Total funds 2025 £	<i>Total funds 2024 £</i>
Inpatient Unit	829,051	1,095,118	1,924,169	1,898,537
Medical	319,351	21,219	340,570	266,790
Multi Disciplinary Team	272,606	18,451	291,057	257,076
Bereavement & Therapeutic Services	197,980	17,211	215,191	228,728
Total 2025	1,618,988	1,151,999	2,770,987	2,651,131
<i>Total 2024</i>	<i>1,492,756</i>	<i>1,158,375</i>	<i>2,651,131</i>	

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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**NOTES TO THE FINANCIAL STATEMENTS
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Analysis of direct costs

	In Patient Unit 2025 £	Medical 2025 £	Disciplinary Team 2025 £	Multi Bereavement & Therapeutic Services 2025 £	Total funds 2025 £	Total funds 2024 £
Staff costs	753,657	173,722	259,097	192,922	1,379,398	1,279,136
Consumables	29,880	-	-	257	30,137	27,649
Drugs	-	113,149	-	-	113,149	80,090
Equipment and maintenance	34,967	-	-	302	35,269	28,244
Medical and professional fees	9,825	32,480	13,509	3,615	59,429	72,000
Travel	298	-	-	27	325	563
Office costs and sundries	424	-	-	737	1,161	2,412
Facilities	-	-	-	120	120	2,662
Total 2025	829,051	319,351	272,606	197,980	1,618,988	1,492,756
<i>Total 2024</i>	<i>797,483</i>	<i>245,145</i>	<i>238,687</i>	<i>211,441</i>	<i>1,492,756</i>	

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2025**

Analysis of support costs

	In Patient Unit 2025 £	Medical 2025 £	Disciplinary Team 2025 £	Multi Bereavement & Therapeutic Services 2025 £	Total funds 2025 £	Total funds 2024 £
Staff costs	642,820	12,302	10,869	10,020	676,011	633,103
Depreciation	97,849	2,038	1,019	1,017	101,923	130,583
Kitchen	38,139	389	389	-	38,917	33,768
Administration	19,884	418	208	208	20,718	50,127
Human resources	31,620	329	329	329	32,607	17,319
Management costs	46,270	1,003	1,003	1,003	49,279	87,467
Facilities	134,966	2,935	2,935	2,935	143,771	110,788
IT/Communications	73,466	1,594	1,594	1,594	78,248	85,018
Governance costs	10,104	211	105	105	10,525	10,200
Total 2025	1,095,118	21,219	18,451	17,211	1,151,999	1,158,373
<i>Total 2024</i>	<i>1,101,052</i>	<i>21,645</i>	<i>18,389</i>	<i>17,287</i>	<i>1,158,373</i>	

Support costs have been allocated to activities based on the staff numbers and hours involved in the activities.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2025**

10. AUDITORS' REMUNERATION

	2025 £	2024 £
Fees payable to the Charity's auditor for the audit of the Charity's annual accounts	11,440	10,400
Fees payable to the Charity's auditor in respect of: All non-audit services not included above	100	90
	<u>11,540</u>	<u>10,490</u>

11. STAFF COSTS

	2025 £	2024 £
Wages and salaries	2,248,220	2,115,460
Social security costs	193,470	171,196
Contribution to defined contribution pension schemes	88,354	81,064
	<u>2,530,044</u>	<u>2,367,720</u>

Included in wages and salaries above is £7,036 (2024: £10,172) in respect of termination payments.

The average number of persons employed by the Charity during the year was as follows:

	2025 No.	2024 No.
Communications	2	3
Fundraising	20	22
Management & administration	13	13
In Patient Unit	45	54
Medical	3	3
Multi Disciplinary Team	6	4
Support staff	11	11
Bereavement	9	10
	<u>109</u>	<u>120</u>

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

11. STAFF COSTS (CONTINUED)

The number of employees whose employee benefits (excluding employer pension costs) exceeded £60,000 was:

	2025	2024
	No.	No.
In the band £60,001 - £70,000	-	2
In the band £70,001 - £80,000	2	-

The total remuneration paid to key management personnel (including national insurance and pension contributions) was £431,832 (2024: £419,784).

Contributions were made to defined benefit pension schemes on behalf of these employees.

The Charity also uses the services of volunteers who assist in the charity shops.

12. COUNCIL MEMBERS' REMUNERATION AND EXPENSES

During the year, no Council Members received any remuneration or other benefits (2024 - £NIL).

During the year ended 31 March 2025, no Council Member expenses have been incurred (2024 - £NIL).

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2025**

13. TANGIBLE FIXED ASSETS

	Freehold land & property £	Motor vehicles £	Fixtures and fittings £	Computer equipment £	Total £
Cost					
At 1 April 2024	3,731,290	49,020	490,859	152,896	4,424,065
Additions	5,200	-	89,223	3,120	97,543
At 31 March 2025	<u>3,736,490</u>	<u>49,020</u>	<u>580,082</u>	<u>156,016</u>	<u>4,521,608</u>
Depreciation					
At 1 April 2024	929,866	27,428	358,609	136,620	1,452,523
Charge for the year	75,728	7,003	47,374	11,926	142,031
At 31 March 2025	<u>1,005,594</u>	<u>34,431</u>	<u>405,983</u>	<u>148,546</u>	<u>1,594,554</u>
Net book value					
At 31 March 2025	<u><u>2,730,896</u></u>	<u><u>14,589</u></u>	<u><u>174,099</u></u>	<u><u>7,470</u></u>	<u><u>2,927,054</u></u>
At 31 March 2024	<u><u>2,801,424</u></u>	<u><u>21,592</u></u>	<u><u>132,250</u></u>	<u><u>16,276</u></u>	<u><u>2,971,542</u></u>

Included in freehold land & property is freehold land of £375,000 (2024: £375,000) which is not depreciated.

Included within the net book value of assets is £14,589 (2024: £21,592) relating to assets held under hire purchase agreements.

14. FIXED ASSET INVESTMENTS

	Investments in subsidiary companies £
Cost	
At 1 April 2024	100
At 31 March 2025	<u><u>100</u></u>

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2025

PRINCIPAL SUBSIDIARIES

The following was a subsidiary undertaking of the Charity:

Name	Registered office or principal place of business	Class of shares	Holding
Alice House Trading Limited (dormant) company number 07170334	Alice House, Wells Avenue, Hartlepool, Cleveland, TS24 9DA	Ordinary	100%

The financial results of the subsidiary for the year were:

Name	Net assets £
Alice House Trading Limited (dormant) company number 07170334	3,998

15. DEBTORS

	2025 £	2024 £
Trade debtors	48,227	59,562
Other debtors	16,639	18,475
Prepayments	40,396	35,118
Accrued income	46,462	149,725
	<u>151,724</u>	<u>262,880</u>

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

16. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2025	2024
	£	£
Bank loans	120,791	114,922
Pension creditor	16,783	14,167
Trade creditors	54,523	51,472
Amounts owed to group undertakings	3,998	3,998
Other taxation and social security	44,509	39,594
Obligations under finance lease and hire purchase contracts	817	9,804
Other creditors	3,910	2,218
Accruals and deferred income	101,915	43,385
	347,246	279,560
	347,246	279,560
	2025	2024
	£	£
Deferred income at 1 April 2024	29,282	27,909
Resources deferred during the year	56,910	29,282
Amounts released from previous periods	(29,282)	(27,909)
	56,910	29,282
	56,910	29,282

Deferred income relates to Lottery money and some trade debtors that have been paid in advance.

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

17. CREDITORS: AMOUNTS FALLING DUE AFTER MORE THAN ONE YEAR

	2025	2024
	£	£
Bank loans	251,175	372,410
Net obligations under finance lease and hire purchase contracts	-	817
	251,175	373,227

The bank loans are repayable in monthly instalments ending March 2028 and June 2029 respectively. Interest is charged at the Bank of England base rate plus 2% per annum.

The Coronavirus Business Interruption Loan is repayable in monthly instalments ending November 2026. Interest is charged at 6.36% per annum.

The bank loans are secured by a fixed and floating unlimited debenture and a charge over the land and buildings owned at The University Hospital of Hartlepool.

The hire purchase agreement is secured over the assets to which the agreement relates.

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

18. STATEMENT OF FUNDS

STATEMENT OF FUNDS - CURRENT YEAR

	Balance at 1 April 2024 £	Income £	Expenditure £	Transfers in/out £	Gains/ (Losses) £	Balance at 31 March 2025 £
General funds	2,880,573	2,246,365	(2,073,748)	69,281	(702)	3,121,769
Restricted funds						
Restricted appeal funds	5,274	45,106	(37,025)	(8,355)	-	5,000
Integrated Care Board	-	1,204,938	(1,204,938)	-	-	-
Pharmacy income	-	54,067	(54,067)	-	-	-
NHS End of Life Beds	-	224,526	(224,526)	-	-	-
Help the Hospices - fixed asset fund	415,650	-	(10,200)	-	-	405,450
Hospice UK	-	60,926	-	(60,926)	-	-
	<u>420,924</u>	<u>1,589,563</u>	<u>(1,530,756)</u>	<u>(69,281)</u>	<u>-</u>	<u>410,450</u>
Total of funds	<u><u>3,301,497</u></u>	<u><u>3,835,928</u></u>	<u><u>(3,604,504)</u></u>	<u><u>-</u></u>	<u><u>(702)</u></u>	<u><u>3,532,219</u></u>

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2025

18. STATEMENT OF FUNDS (CONTINUED)

STATEMENT OF FUNDS - PRIOR YEAR

	<i>Balance at 1 April 2023</i>	<i>Income</i>	<i>Expenditure</i>	<i>Transfers in/out</i>	<i>Gains/ (Losses)</i>	<i>Balance at 31 March 2024</i>
	£	£	£	£	£	£
Unrestricted funds						
General funds	2,578,880	2,351,917	(2,061,656)	10,809	623	2,880,573
Restricted funds						
Restricted appeal funds	-	212,882	(196,799)	(10,809)	-	5,274
Integrated Care Board	-	945,442	(945,442)	-	-	-
Pharmacy income	-	53,745	(53,745)	-	-	-
NHS End of Life Beds	-	226,000	(226,000)	-	-	-
Help the Hospices - fixed asset fund	425,850	-	(10,200)	-	-	415,650
Bereavement counselling	-	29,399	(29,399)	-	-	-
	<u>425,850</u>	<u>1,467,468</u>	<u>(1,461,585)</u>	<u>(10,809)</u>	<u>-</u>	<u>420,924</u>
Total of funds	<u><u>3,004,730</u></u>	<u><u>3,819,385</u></u>	<u><u>(3,523,241)</u></u>	<u><u>-</u></u>	<u><u>623</u></u>	<u><u>3,301,497</u></u>

Restricted funds

Funding received and attributed directly to charitable activities has been shown as restricted. This includes monies from Durham Dales, Easington and Sedgfield Integrated Care Boards and the Hartlepool & Stockton Integrated Care Board which totalled £1,204,938.

Pharmacy income represents income from drugs purchased and recharged of £54,067.

The fixed asset fund represents a grant of £510,000 received from the Help the Hospices Fund (NHS England) towards the capital costs of the new Wellbeing Centre. This fund is depreciated in line with the asset.

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

19. ANALYSIS OF NET ASSETS BETWEEN FUNDS

ANALYSIS OF NET ASSETS BETWEEN FUNDS - CURRENT YEAR

	Restricted funds 2025 £	Unrestricted funds 2025 £	Total funds 2025 £
Tangible fixed assets	405,450	2,521,604	2,927,054
Fixed asset investments	-	100	100
Current assets	5,000	1,199,734	1,204,734
Creditors due within one year	-	(347,246)	(347,246)
Creditors due in more than one year	-	(251,175)	(251,175)
Provisions for liabilities and charges	-	(1,248)	(1,248)
Total	410,450	3,121,769	3,532,219

ANALYSIS OF NET ASSETS BETWEEN FUNDS - PRIOR YEAR

	<i>Restricted funds 2024 £</i>	<i>Unrestricted funds 2024 £</i>	<i>Total funds 2024 £</i>
Tangible fixed assets	415,650	2,555,892	2,971,542
Fixed asset investments	-	100	100
Current assets	5,274	977,914	983,188
Creditors due within one year	-	(279,560)	(279,560)
Creditors due in more than one year	-	(373,227)	(373,227)
Provisions for liabilities and charges	-	(546)	(546)
Total	420,924	2,880,573	3,301,497

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2025

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

	2025 £	2024 £
Net income for the year (as per Statement of Financial Activities)	231,424	296,144
Adjustments for:		
Depreciation charges	142,031	170,694
Loss on the sale of fixed assets	-	9,291
Decrease/(increase) in debtors	111,156	(64,410)
Increase/(decrease) in creditors	70,804	(69,670)
Gain / loss on pension deficit	(702)	623
Net cash provided by operating activities	554,713	342,672

21. ANALYSIS OF CASH AND CASH EQUIVALENTS

	2025 £	2024 £
Cash in hand	1,053,010	720,308
Total cash and cash equivalents	1,053,010	720,308

22. ANALYSIS OF CHANGES IN NET DEBT

	At 1 April 2024 £	Cash flows £	At 31 March 2025 £
Cash at bank and in hand	720,308	332,702	1,053,010
Debt due within 1 year	(114,922)	(5,869)	(120,791)
Debt due after 1 year	(372,410)	121,235	(251,175)
Finance leases	(10,621)	9,804	(817)
	222,355	457,872	680,227

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

23. CONTINGENT LIABILITIES

Included in the 2005 financial statements was a grant of £500,000 from the Big Lottery Fund towards the capital costs of the new hospice. This grant agreement remains in force for a period of 80 years and the grant may become repayable if there is a breach of the terms and conditions in this period.

During the financial year 2013/14 and 2014/15 the Hospice received a grant totalling £510,000 from the Help the Hospices Fund (NHS England) towards the capital costs of the new Wellbeing Centre. In the event that the Hospice closes down or the building ceases to be used for the purpose of palliative care of patients, NHS England shall have the right to repayment of all monies advanced under this grant, subject to a reduction reflecting benefits from services already delivered.

24. PENSION COMMITMENTS

The pension cost charge represents contributions payable by the Charity and amounted to £88,354 (2024: £81,064). Contributions totalling £16,783 (2024: £14,167) were payable at the balance sheet date and are included in creditors.

The Charity is also making deficit payments and has included the net present value of these payments, £1,248 (2024: £546) in provisions.

The Pensions Trust

The company participates in the scheme, a multi-employer scheme which provides benefits to some 521 non-associated participating employers. The scheme is a defined benefit scheme in the UK. It is not possible for the company to obtain sufficient information to enable it to account for the scheme as a defined benefit scheme. Therefore it accounts for the scheme as a defined contribution scheme.

The scheme is subject to the funding legislation outlined in the Pensions Act 2004 which came into force on 30 December 2005. This, together with documents issued by the Pensions Regulator and Technical Actuarial Standards issued by the Financial Reporting Council, set out the framework for funding defined benefit occupational pension schemes in the UK.

The scheme is classified as a 'last-man standing arrangement'. Therefore the company is potentially liable for other participating employers' obligations if those employers are unable to meet their share of the scheme deficit following withdrawal from the scheme. Participating employers are legally required to meet their share of the scheme deficit on an annuity purchase basis on withdrawal from the scheme.

A full actuarial valuation for the scheme was carried out at 30 September 2023. This valuation showed assets of £514.9m, liabilities of £531.0m and a deficit of £16.1m. To eliminate this funding shortfall, the Trustee has asked the participating employers to pay additional contributions to the scheme as follows:

Deficit contributions

From 1 April 2025 to 31 March 2028: £2,100,000 per annum (payable monthly)

Unless a concession has been agreed with the Trustee the term to 31 March 2028 applies.

Note that the scheme's previous valuation was carried out with an effective date of 30 September 2020. This valuation showed assets of £800.3m, liabilities of £831.9m and a deficit of £31.6m. To eliminate this funding shortfall, the Trustee asked the participating employers to pay additional contributions to the scheme as follows

Deficit contributions

From 1 April 2022 to 31 January 2025: £3,312,000 per annum (payable monthly)

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2025

24. PENSION COMMITMENTS (CONTINUED)

The recovery plan contributions are allocated to each participating employer in line with their estimated share of the Series 1 and Series 2 scheme liabilities.

Where the scheme is in deficit and where the company has agreed to a deficit funding arrangement the company recognises a liability for this obligation. The amount recognised is the net present value of the deficit reduction contributions payable under the agreement that relates to the deficit. The present value is calculated using the discount rate detailed in these disclosures. The unwinding of the discount rate is recognised as a finance cost.

PRESENT VALUES OF PROVISION

31 March 2025	31 March 2024	31 March 2023
£1,248	£546	£1,169

RECONCILIATION OF OPENING AND CLOSING PROVISIONS

	Period Ending 31 March 2025	Period Ending 31 March 2024
	£	£
Provision at start of period	546	1,169
Unwinding of the discount factor (interest expense)	14	45
Deficit contribution paid	(557)	(668)
Remeasurements - impact of any change in assumptions	8	-
Remeasurements - amendments to the contribution schedule	1,237	-
Provision at end of period	1,248	546

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2025

24. PENSION COMMITMENTS (CONTINUED)

INCOME AND EXPENDITURE IMPACT

	Period Ending 31 March 2025	Period Ending 31 March 2024
	£	£
Interest expense	14	45
Remeasurements – impact of any change in assumptions	8	-
Remeasurements – amendments to the contribution schedule	1,237	-
Contributions paid in respect of future service*	*	*
Costs recognised in income and expenditure account	*	*

*includes defined contribution schemes and future service contributions (i.e. excluding any deficit reduction payments) to defined benefit schemes which are treated as defined contribution schemes. To be completed by the company.

ASSUMPTIONS

	31 March 2025	31 March 2024	31 March 2023
	% per annum	% per annum	% per annum
Rate of discount	4.84	5.31	5.52

The discount rates shown above are the equivalent single discount rates which, when used to discount the future recovery plan contributions due, would give the same results as using a full AA corporate bond yield curve to discount the same recovery plan contributions.

25. OPERATING LEASE COMMITMENTS

At 31 March 2025 the Charity had commitments to make future minimum lease payments under non-cancellable operating leases as follows:

	2025	2024
	£	£
Not later than 1 year	60,067	60,540
Later than 1 year and not later than 5 years	17,008	35,898
	<u>77,075</u>	<u>96,438</u>

26. RELATED PARTY TRANSACTIONS

During the year the charity paid £15,643 (2024: £14,167) for rent and insurance to a Council Member.

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

27. GENERAL RESERVES

At 31 March 2025 there is a surplus on unrestricted free reserves of £600,065.

THE HARTLEPOOL HOSPICE LIMITED

England & Wales - Charity number 510824

Accounts

Registered number: 01525658
Charity number: 510824

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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COUNCIL MEMBERS' REPORT AND FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2024

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

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**REFERENCE AND ADMINISTRATIVE DETAILS OF THE CHARITY, ITS COUNCIL MEMBERS AND
ADVISERS
FOR THE YEAR ENDED 31 MARCH 2024**

Council Members

Mr R Priestman, Chair
Mrs L Jones, Vice chair
Mr F M Gibbon
Mrs J Regan, Treasurer
Mr C Shotton
Mr J F Ainslie
Mrs A Barber (resigned 25 January 2024)
Mr S T Chacko (resigned 10 April 2024)
Mrs K Martin (resigned 31 July 2023)
Dr J Druce
Mr P L H Bowes (appointed 27 July 2023)
Dr A L Brown
Mrs C Dunkerley (appointed 26 March 2024)
Mrs V J Smith (appointed 26 March 2024)

Company Registered Number

01525658

Charity Registered Number

510824

Registered Office

Alice House, Wells Avenue, Hartlepool, TS24 9DA

Co-Chief Executive Officers

Sandra Britten
Nicola Haggan

Independent Auditors

Waltons Business Advisers Limited, Maritime House, Harbour Walk, The Marina, Hartlepool, TS24 0UX

Bankers

Lloyds TSB, 132 York Road, Hartlepool, TS26 9DD

Solicitors

Tilly Bailey & Irvine LLP, York Chambers, York Road, Hartlepool, TS26 9DP

Director of Information Governance (Chief Executive Operational)

Ms S Britten

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REFERENCE AND ADMINISTRATIVE DETAILS OF THE CHARITY, ITS COUNCIL MEMBERS AND
ADVISERS (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

Director of Finance

Mrs K Burrell

Senior Manager Clinical Services

Ms K Gibson

Senior Manager Corporate Services

Ms N Haggan

Senior Manager Fundraising

Ms J Hildreth

Senior Manager Retail

Ms K Witherley

Senior Manager Therapeutic Support Services

Ms J Grocott

Senior Manager Business & Communications

Mr G Hildreth

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COUNCIL MEMBERS' REPORT
FOR THE YEAR ENDED 31 MARCH 2024

The Council Members, who are also Non-Executive Directors of the Charity for the purposes of the Companies Act, submit their Annual Report together with the audited Financial Statements of The Hartlepool Hospice Limited (the charity) for the year ended 31 March 2024. The Council Members confirm that the Annual Report and Financial Statements of the Charity comply with the current statutory requirements, the requirements of the Charity and the Charity's governing document and the provisions of the Statement of Recommended Practice (SORP) applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS102) (effective 1 January 2019).

Since the Charity qualifies as small under section 382 of the Companies Act 2006, the Strategic report required of medium and large companies under the Companies Act 2006 (Strategic Report and Directors' Report) Regulations 2013 has been omitted.

Structure, governance and management

Governing document

The Charity is a company limited by guarantee and incorporated in England and Wales. It is governed by its Memorandum and Articles of Association adopted on 31 October 1980 and last amended on 26 September 2013.

Governing body

The Council is responsible for the overall governance of the Charity. Council Members are either elected or co-opted and there must be a minimum of three Council Members, there is no maximum number of Council Members. The board will be made up of not less than 2 lay Council Members (meaning not appointed to act as a professional advisor) and such number of professional Council Members as the Council Members consider appropriate. Each Council Member shall retire from office at the fourth annual general meeting following the date of his appointment. Any professional director who so retires is eligible for re-election by the members or the directors as appropriate.

The Hartlepool Hospice Limited is trading as Alice House Hospice.

The Council aim to maintain a balanced skills and experience base by identifying skills shortages when an opening exists for a new member.

Effective partnership and clarity of differentiation between governance and management roles continues to contribute significantly to our success. Apart from the AGM, Council meetings were bi-monthly. At Council meetings the Council Members review performance against agreed strategy and financial performance against agreed budgets. New Council Members receive an induction pack containing everything they need to know about the Charity and its work for effective and informed decision making. The Council Members take full ownership of the Charity's philosophy, five year rolling strategy and annual income and expenditure budgets.

The Council delegates the exercise of certain powers in connection with the financial control of the Charity as set out below. This is controlled by requiring regular reporting back to the Council, so that all decisions made under delegated powers can be ratified by the full Council in due course.

In setting the pay and remuneration of staff (including the Senior Management Team) the Council Members have regard to local pay conditions for similar roles in similar organisations in the North East region.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

Structure, governance and management (continued)

Co-Chief Executives

The leadership roles of Co-Chief Executives are responsible for the day to day management of the Charity's affairs and for implementing the strategy as agreed by the Council within the boundaries of the budget and various policies and procedures agreed by the Council. They are assisted by the Council Members.

The Co-Chief Executives have direct responsibility for the effective delivery of the following services and support services:

- Clinical Services
- Finance
- Facilities/Health & Safety
- Information Governance & Technology
- Administration
- Housekeeping
- Human Resources
- Therapeutic Support Services
- Fundraising, Trusts & Legacies
- Retail
- Lottery
- Communications & Corporate Business Partnerships
- Catering

Corporate Governance

Processes are in place to ensure that performance throughout the organisation is measured and monitored and all employees are subject to performance management and achievement of competencies. Where employees do not perform to expected standards support is provided through individual action plans.

Corporate governance is assured through a myriad of meetings and reporting mechanisms and evaluated against the Charity's strategy. Internal audits are reported on a bi-monthly basis to Council Members through the Co Chief Executive and Senior Management Team reports.

Finance & Risk Management Sub Committee

The Finance & Risk Management Sub Committee comprises Council Members who are independent of the management and free of any relationship that in the opinion of the Council would interfere with the exercise of independent judgement as members of the Sub Committee. The Sub Committee has six bi-monthly meetings per year. It is responsible for the setting of annual income and expenditure budgets and the monitoring of such, including quarterly year-end forecasts. The Sub Committee ensures proper procedures are in place to manage cash resources prudently, and to maximise income from liquid resources whilst maintaining sufficient funds to meet daily cash requirements. The Sub Committee also advises the Council on the appropriate level of free reserves and of any significant change needed in investment strategy.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

Structure, governance and management (continued)

Risk Management

The Council have a formal risk management process to assess business risks and implement risk management strategies. This involves identifying the types of risks the Charity faces, prioritising them in terms of potential impact and likelihood of occurrence, and identifying means of mitigating the risks. The Charity maintains a Risk Register, which is regularly reviewed and updated to reflect identified risks. As part of this process the Council Members review the adequacy of the Charity's current internal controls and the costs of operating particular controls relative to the benefits obtained. Procedures have been established for reporting failings immediately to appropriate levels of management.

The significant risks to which the Charity is vulnerable, and methods in which they are controlled, are:

Loss of income	Regular monitoring of financial performance and setting and reviewing budgets.
Disaster	Health, Safety & Environment Manager review; regular risk management meetings (fire/loss of power etc).
Staff crisis	Use of bank staff – relocate patients to other providers.

Objectives and activities

Public benefit

The Council consider that they have complied with their duty in Section 4 of the Charities Act 2006 to have due regard to public benefit guidance published by the Charity Commission when setting objects, strategy and objectives.

Charity Objects

In setting objectives and planning for activities, the Council Members have given due consideration to general guidance published by the Charity Commission relating to public benefit, including the guidance 'Public benefit: running a charity (PB2)'.

The Charity's Objects, as set out in the Articles of Association, are to promote the relief of sickness by such charitable means as the charity shall from time to time think fit. The Hospice was established in 1980 as a local charity (Hartlepool Hospice Ltd) delivering specialist palliative care to individuals affected by life limiting illnesses within the local communities of Hartlepool, Stockton-on-Tees and East Durham. The Hospice ensures that people affected by a life limiting illness have the care, comfort and support they need and provides services that add value to life which make a difference to patients and their families.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

Objectives and activities (continued)

In furtherance of these Objects:

- It is the Hospice's Vision to ensure that every person, to the last moment of their life has the right to dignity, respect, support and care.
- It is the Hospice's Mission to provide services that add value to life and make a difference to patients and their families.
- The Hospice upholds the following Values:
 - o We value each person as an individual.
 - o The patient is at the heart of all of our activities.
 - o We believe in the importance of celebrating life and relationships.
 - o We will demonstrate integrity and professionalism at all times.
 - o We will be modern and progressive and seek out new opportunities to develop our services.
 - o We will strive to be the best we can and encourage staff and volunteers to actively seek opportunities for personal growth and development.
 - o We will exercise responsible financial management to ensure long term sustainability.
- The Hospice subscribes to the following Patients' Charter and will:
 - o Respect your dignity, privacy and freedom of choice.
 - o Involve you and your family when possible in the decision making of your care, adopting an open and honest approach. Supporting those decisions to fulfil your wishes wherever possible.
 - o Provide a Multi-Disciplinary Team with the appropriate skills to meet your ongoing needs.
 - o Work collaboratively with other service providers and professionals involved in your care to ensure you receive the help you need when you need it.
 - o Support you to live as well as you can for as long as you can.
 - o Provide a holistic and individual approach when delivering care and support to you and your family.
 - o Provide support not only to you but to those that are important to you as you approach the end of life and during their bereavement.
 - o Encourage your involvement in service development by making suggestions as to how we can improve on the services we provide.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

Objectives and activities (continued)

Strategic Objectives

As the future of Hospice care evolves in the constantly changing health environment, we have developed positive and effective working relationships that ensure cross organisational integration and representation through different working groups, to identify pressures within the healthcare system and to generate innovative solutions to patient service problems. The Hospice has therefore identified the following strategic goals within the Five Year Strategy (2020-2025), which is refreshed annually:

- We will ensure all of our services are of a high quality and are delivered safely with compassion and dignity.
- We will ensure our organisation is governed and managed in accordance with best practice.
- We will seek out opportunities to support our communities in all of their interactions with us.

The strategy provides a Patients, Trustees and Staff Charter which confirms our intentions and provides a commitment to collective responsibility and organisational cohesion.

The following departmental sub strategies have also been developed, with their objectives aligning to the strategic goals of the Hospice's Five Year Strategy 2020-2025:

- Clinical
- Therapeutic Support Services
- Information Governance & Technology
- Human Resources
- Communications
- Fundraising
- Retail
- Finance

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

Objectives and activities (continued)

Activities

The Hospice is an independent charity that is committed to offering high quality, holistic, non-judgmental care which is free to all at the point of delivery regardless of race, religion or belief, sex, sexual orientation, gender reassignment, disability, pregnancy and maternity.

The Hospice currently offers a comprehensive range of services from our purpose-built Hospice in Wells Avenue, Hartlepool, which responds to local need. Day Hospice and Therapeutic Support Services are delivered from the Hospice's Holistic Wellbeing Centre which is set within the Hospice grounds.

The Hospice's clinical services are Consultant led and supported by a Multi-Disciplinary Team of professionals who provide patients with individualised care, whilst promoting and maintaining the best quality of life possible. Professionals within the Multi-Disciplinary Team include: Consultants in Palliative Medicine, Staff Grade Doctors, Foundation Year 2 Doctor, Specialist Registrar Trainee, GP Trainee, Clinical Lead, Charge Nurse, Practice Development Nurse, Nurse Practitioner, Registered Nurses, Senior Healthcare Assistants, Healthcare Assistants, Complementary Therapists, Occupational Therapist, Physiotherapist, Bereavement Counsellors, Holistic Wellbeing Therapist and Volunteers.

In order to protect the sustainability of the Hospice's core services on the Inpatient Unit, the difficult decision was taken towards the end of 2022/2023 to close the Long Term Care Unit at the beginning of the 2023/2024 financial year. The Hospice was receiving approximately 50% of the operating costs for these beds from Continuing Healthcare (CHC) and the deficit could not continue to be sustained from Hospice funds. Closure of these beds has directly impacted GP, A&E and hospital admissions and placed further strain and pressure on an already struggling system within the NHS as these patients spend a significant amount of time accessing NHS services due to complexity and high medical needs. The Long Term Care Unit also supported both community and hospital discharge and was part of the discharge pathway for other hospices in the Tees Valley patch. Since its closure, together with the shortage of nursing home places within the local area, the Hospice has continued to see much longer bed occupancy rates with 59% of admissions above normal occupancy (i.e. ranging from 15-110 days) when measured by individual patients, as complexity levels make it difficult to find suitable nursing home placements for patients. The Hospice continues to seek viable funding opportunities for the beds on the former Long Term Care Unit for which 6 beds remain registered with the Care Quality Commission but are currently inactive.

Since the closure of the Long Term Care Unit in May 2023, the following inpatient services have been provided:

- Ten inpatient beds providing short-term specialist palliative care for symptom control and end of life care.
- Two inpatient beds providing emergency end of life care for patients from North Tees & Hartlepool NHS Foundation Trust.
- Day Hospice.
- Holistic Wellbeing Services.
- Adult Bereavement Counselling Services
- Children's Bereavement Counselling Services
- 24 Hour Helpline

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

Achievements and performance

Main achievements of the Charity

After a troubled and uncertain start to 2023/2024, we navigated our way through what was arguably the most difficult period in the Hospice's history, arriving at a point of increased stability, calmer waters and more sustainable fundraising.

Still impacted by Brexit, the Cost of Living Crisis and other social and economic factors, we began the year with contingency meetings to identify ways of stabilising a significant deficit budget and protecting core services. This led to the closure of our Long Term Care Unit, which was a secondary non-core service, together with a number of efficiency savings and streamlined processes.

Whilst the losses of certain services, people and resources caused some unease and unfortunately impacted on individuals, there is no doubt that these changes were vital in both securing the future of the Hospice and protecting core services.

Throughout the year, proactive communication and relationship building helped ensure that stakeholders were kept updated and this led to spikes in support and for the first time since COVID, we saw our event attendances return to healthy levels. With the right processes, partnerships and support in place, we held a number of sell-out events and noted an increased presence in the local business community.

We have continued working in close collaboration with the Hospices North East & North Cumbria Collaborative (12 Hospices) and Hospice UK's Innovation and Clinical ECHO Networks to ensure not only shared learning and best practice but a united voice to politicians and commissioners regarding the shortfall in hospice funding. Alice House has established itself as a leader in several areas with the chairing of a number of collaborative sub-groups being held by members of the Hospice's Senior Management Team.

The Hospice received a number of accolades throughout the year, finishing as finalists for Best Community Business in the Hartlepool Business Awards and also in this year's LGBT Alliance Awards, in the category of 'Creating LGBT Inclusion and Accessibility in the Workplace'.

Our most notable achievement throughout the year, however, followed an unannounced inspection by the Care Quality Commission in October 2023 where the Hospice received an overall rating of Good, which could not have been achieved without the ongoing dedication, skills and hard work of all our staff and volunteers.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

Achievements and performance (continued)

Strategic Goals

We will ensure all of our services are of a high quality and are delivered safely with compassion and dignity.

The Hospice is registered with the Care Quality Commission to carry out the following regulated activities at Alice House, Wells Avenue, Hartlepool, TS24 9DA for adults aged 18 years and over:

- Treatment of Disease, Disorder or Injury

Alice House Hospice is registered with the following conditions:

- To accommodate up to a maximum of 18 patients overnight.
- To provide a service for people over the age of 18 years old.
- The registered provider's regulated activity is managed by a Registered Manager.
- The provider location where regulated activity can be carried out is: Alice House, Wells Avenue, Hartlepool, TS24 9DA.

We have held regular Provider Engagement meetings (quarterly) with our CQC Inspector through Microsoft Teams and have contacted them for advice when necessary.

There has been no formal complaints made in the previous 12 months.

The Care Quality Commission has not taken any enforcement actions against Alice House Hospice during 2023/2024. There have been no special reviews or investigations carried out by the Care Quality Commission during this reporting period.

The Hospice's last inspection by the Care Quality Commission was unannounced and carried out on 03 & 04 October 2023. Prior to this the Hospice was last inspected on 23 March 2015. The formal report and rating from the inspection was received on 01 December 2023 where the Hospice received an overall rating of Good, with each of the 5 Key Lines of Enquiry (Safe, Effective, Caring, Responsive, Well-Led) scoring Good.

The CQC report states 'Staff treated patients with compassion and kindness, respected their privacy and dignity, took account of their individual needs, and helped them understand their conditions. They provided emotional support to patients, families and carers.'

The full inspection report can be found by following the link below:

- <https://www.cqc.org.uk/location/1-114379452>

A summary from the full inspection report is detailed below:

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Domain	Rating	CQC Comments
Is the service safe?	GOOD	<ul style="list-style-type: none"> • The service had enough staff to care for patients and keep them safe. • Staff had training in key skills, understood how to protect patients from abuse, and managed safety well. • The service controlled infection risk well. • Staff assessed risks to patients, acted on them and kept good care records. • They managed medicines well. • The service managed safety incidents well and learned lessons from them.
Is the service effective?	GOOD	<ul style="list-style-type: none"> • Staff provided good care and treatment, gave patients enough to eat and drink, and gave them pain relief when they needed it. • Managers monitored the effectiveness of the service and made sure staff were competent. • Staff worked well together for the benefit of patients, supported them to make decisions about their care, and had access to good information. • Key services were available 7 days a week.
Is the service caring?	GOOD	<ul style="list-style-type: none"> • Staff treated patients with compassion and kindness, respected their privacy and dignity, took account of their individual needs, and helped them understand their conditions. • They provided emotional support to patients, families and carers.
Is the service responsive?	GOOD	<ul style="list-style-type: none"> • The service planned care to meet the needs of local people, took account of patients' individual needs, and made it easy for people to give feedback. • People could access the service when they needed it.
Is the service well-led?	GOOD	<ul style="list-style-type: none"> • Leaders ran services well using reliable information systems and supported staff to develop their skills. • Staff understood the service's vision and values, and how to apply them in their work. • Staff felt respected, supported and valued. • They were focused on the needs of patients receiving care. • Staff were clear about their roles and accountabilities. • The service engaged well with patients and the community to plan and manage services and all staff were committed to improving services continually.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

Achievements and performance (continued)

We will ensure our organisation is governed and managed in accordance with best practice.

The Board receive updates from all members of the Senior Management Team for each meeting to ensure transparency and service developments are always approved by the Board.

All of the Board have fulfilled their mandatory training requirements.

During 2022/2023 the Board completed a full review of the Hospice's governance processes to ensure that they remained 'fit for purpose' and were equipped to lead the Hospice within a framework of prudent and effective controls, enabling risk to be assessed and managed. One of the outcomes from the review was for Trustees to each individually support a member of the Senior Management Team with the review, management and performance of their departmental sub strategies. At the beginning of 2023/2024 each member of the Senior Management Team was assigned a Trustee to support them with the effective monitoring of departmental sub strategies, with periodic reporting back to the Board of Trustees on the following:

- Progress Against Strategic Objectives Within Departmental Sub Strategy.
- Operational Plans.
- Identified Risks.
- Review of Recently Updated Policies & Procedures.
- Review of Adherence to Non-Binding Rules, Codes and Standards.
- Benchmarking of Departmental Performance.
- Review of Third Party Suppliers/Services/SLAs.
- Review of Departmental Sub Strategy Against Budget.
- Feedback/Complaints.

We will seek out opportunities to support our communities in all of their interactions with us.

Alice House Hospice is an integral partner in the Hospices North East & North Cumbria Collaborative, who take a partnership approach to addressing the ever increasing demands of service provision, education, training and workforce development. This collaboration demonstrates a region wide commitment to working in partnership to improve palliative and end of life care for all patients. The Hospice is a member of the following HNENC collaborative groups:

- Chief Executives
- Executive Clinical Leads in Hospice & Palliative Care (ECLiPH)
- Education
- Marketing & Communications
- Human Resources
- Finance
- Income Generation
- Facilities

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

Achievements and performance (continued)

The Hospice proactively engages with our local community, businesses, schools, colleges and other charities and also key local figures including Members of Parliament and Council Leaders.

Through this proactive approach we have further established ourselves as an organisation that is valued, trusted and supported. We have also noted a cultural shift in terms of our position within these networks; rather than having to ask if Hospice representatives can attend prominent local events, we are usually invited, having built positive relationships with a number of partner organisations.

The work of the Hospice was also recognised in the last year when we were listed as finalists in both Hartlepool Business Awards and Hart Gables LGBTQ Awards, respectively for Community Business of the Year and LGBTQ Inclusion in the workplace.

Through all of this, we have continued to raise awareness of our work and reached people and groups who may not have otherwise known about, or how to access Hospice care; this support is reciprocal as one of our key messages and aims is to promote the fact that we are here for those who need us and that our service users remain at the heart of all we do.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

Achievements and performance (continued)

Service Activities

During 2023/2024, the Hospice prioritised the following three improvement domains of Patient Safety, Clinical Effectiveness and Patient Experience:

- **Falls Prevention (Patient Safety)**

Alice House Hospice recognise that anyone can experience a fall and palliative patients are at greater risk of injury. The Hospice accepts that patients wish to remain independent for as long as possible and are therefore unable to completely eradicate falls. However, the Hospice has worked towards reducing the incidents of falls as much as possible by educating patients, families and staff of the associated risks. The Hospice has achieved the following improvements during 2023/2024 with Falls Prevention:

 - During 2022/2023 there were 31 falls by 19 patients within the Hospice. This reduced to 18 falls by 13 patients between April 2023 and March 2024, which represents a 41.93% decrease in falls in 2023/2024 compared to 2022/2023.
 - Falls posters have been created to remind patients of the risk of falls and to call for assistance.
 - An information booklet regarding the risk and causes of falls has been produced for patients and their families.
 - Patients with walking aids were identified as at risk when using the en-suite bathrooms independently due to the location of the light switch on the opposite side to the door opening. Automated lighting has been installed in 3 en-suite bathrooms with a schedule of work for the remaining 7 to be completed in Quarter 1 of 2024/2025. This will also complement the planned work of changing the direction of opening for bathroom doors to reduce distance and improve accessibility.
 - A Physiotherapist and Occupational Therapist Service Level Agreement is in place with North Tees & Hartlepool NHS Foundation Trust to assist patients with mobility.

- **Implementation of the Patient Safety incident Response Framework (Clinical Effectiveness)**

The aim of the priority in 2023/2024 was to ensure that Alice House Hospice embedded the Patient Safety Incident Response Framework (PSIRF), which sets out the NHS's approach to developing and maintaining effective systems and processes for responding to patient safety incidents for the purpose of learning and improving patient safety. As Alice House Hospice are commissioned to provide services, PSIRF is a contractual requirement and is mandatory for providers of NHS funded care. The following progress was achieved in 2023/2024:

 - There was initially a delay in the 12 hospices who operate within the North East & North Cumbria ICB area adopting PSIRF, as it was unclear whether hospices had to fully implement PSIRF due to their low number of reportable incidents.
 - During 2023/2024, all hospices within North East and North Cumbria ICB attended three workshops, facilitated by the ICB to support hospices with the introduction of the Patient Safety Incident Response Framework (PSIRF). The workshops discussed patient safety incidents and found that all hospices share similar themes, however, each operates as an independent hospice and individually do not have the manpower or resources required to fully implement PSIRF for the low number of reportable incidences; an example of this is the specialist training to conduct investigations.
 - Following the workshops, a lighter approach has subsequently been agreed with the ICB where the collaborative of 12 hospices will jointly implement a single PSIRF Plan in 2024/2025.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

Achievements and performance (continued)

- **Rapid Response Out-of-Hours Admission Service (Patient Experience)**

North Tees & Hartlepool NHS Foundation Trust continued to provide funding in 2023/2024 (Year 2) for the provision of a Rapid Response Out-of-Hours Admission Service, with the Hospice moving towards 24 hour access and admission in order to reduce Accident & Emergency and Acute bed admissions. The service was initially directed at patients in the Accident and Emergency Department (A&E) or Emergency Assessment Unit (EAU) who are placed on the Care for the Dying Patient Document. The service enables patients to be rapidly transferred to the Hospice and cared for in an environment where patients and their families receive dignity and comfort at the end of their life. The service is regularly reviewed through multi-agency meetings, with the following actions implemented:

 - After 3 months planning, the service started on 01 October 2022, admitting emergency end of life patients on the Care for the Dying Patient (CDP) Document from the Emergency Department of the University Hospital of North Tees, Monday to Friday, 9.00 a.m. to 5.00 p.m.
 - From 04 February 2023 admissions were increased to include weekends, i.e. 7 days per week from 9.00 a.m. to 5.00 p.m.
 - From 07 March 2023 admissions were increased to include patients on the CDP Document (last 24-72 hours of life) from all wards within the University Hospital of North Tees.
 - From December 2023 the Standard Operation Procedure was revised and circulated to stakeholders to extend the service to patients meeting the criteria within the community.
 - In February 2024 an Annual Review and Audit Evaluation was completed, following which funding for the continuation of the service was confirmed for a further 15 months commencing March 2024. The Hospice will be utilising this funding for the secondment of a Palliative Care Assessment Sister (In-Reach) to work with the Specialist Palliative Care Team within North Tees Hospital to support the identification, assessment and referral pathways for patients with end of life care needs and/or specialist palliative care needs.
 - There has been some excellent qualitative feedback from the project through the Friends & Family survey results, including:

“Oh god yes, second to none. Fantastic staff honest and open. Aftercare for wife and family was beautiful.”

“Absolutely unbelievable. Put everyone at ease. Weight taken off. Cared for really well. Treat like part of the family. Catered for as much as loved one. So, understanding I would give 2000/100. Unbelievable, loved one at peace.”

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

Achievements and performance (continued)

During 2023/2024, the Hospice delivered and achieved the following service outcomes:

- **Inpatient Unit**

"To all staff, we are extremely grateful that xxxx was able to be transferred to stay with you for his final days. Your kind and thoughtful care meant he could relax and feel more settled and comfortable. It brought so much relief to know he was so well looked after. He also felt comforted by the kindness and support you showed to us every time we visited. We can't thank you enough for everything you have done for xxxx and for us as a family."

- The Hospice's Inpatient Unit comprises of:
 - 8 single en-suite bedrooms providing short-term specialist palliative care for symptom control, psychological and end of life care. Funded by North East & North Cumbria Integrated Care Board (Tees Valley) for 6 beds and North East & North Cumbria Integrated Care Board (County Durham) for 2 beds.
 - Butterwick Hospice's adult inpatient unit remained closed until August 2023, when it opened 2 end of life care beds under Care Quality Commission restrictions. Alice House Hospice received funding during 2023/2024 from North East & North Cumbria Integrated Care Board (Tees Valley) for the provision of 2 additional beds for patients from the Stockton-on-Tees area for short-term specialist palliative care for symptom control, psychological and end of life care.
- During 2023/2024, the Hospice's healthcare professionals provided the following telephone support for both Tees Valley and County Durham inpatients

Telephone Support	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Total
Advice to Patients, Carers & Family Members	634	838	867	825	3,164
Advice to Healthcare Professionals	1,198	1,128	1,183	1,147	4,656
Multi-Disciplinary Team (patients discussed)	111	125	140	146	522
Total	1,943	2,091	2,190	2,118	8,342

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

Achievements and performance (continued)

- **Day Hospice**

“Day Hospice is the highlight of my week.

When I am at home it keeps me going knowing that I will be attending again the next week.”

- Day Hospice operates in the Holistic Wellbeing Centre each Thursday between 10.00 a.m. and 3.00 p.m. with a light lunch and refreshments provided. Patients still have the opportunity to visit on an appointment basis but also benefit from the opportunity to stay for peer support. Patients report that the greatest benefit from attending Day Hospice is the relief from social isolation and spending time with other people who are going through a life limiting experience. The service is designed to provide support to patients who may have issues with their health including:
 - Management of symptoms.
 - Providing psychological and emotional support.
 - Administration of treatments, such as blood transfusions and intravenous fluids.
 - Providing an introduction to Hospice services.
 - Signposting/referring to other healthcare professionals.
 - Supporting individual and carers' wellbeing.
 - Providing relaxation and complementary therapies.
 - During 2023/2024, the Hospice's healthcare professionals provided the following Day Hospice support to both Tees Valley and County Durham patients:

Day Hospice	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Total
Support to Patients, Carers & Family	87	32	43	55	177

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

Achievements and performance (continued)

- **Therapeutic Support Services - Counselling Support**

“Thank you for seeing me and helping me, I truly did not think I could move on, with xxxx help I have done just that and I am so grateful.”

“xxxx has really responded well to her time here and the activities that have helped her to work through her difficult memories and emotions. I have noticed her becoming more ‘herself’ and less melancholy. She is more lively and happy. Thank you for all you have done and continue to do!”

- The Hospice is commissioned to provide bereavement services to patients and their families accessing Hospice services.
- The Hospice also provides community bereavement support to bereaved adults who have been referred via external services from the local communities of Hartlepool, Stockton and East Durham. This is not a commissioned service and is wholly reliant upon the ability to source external funding. The service has been strongly established since 2007 and is constantly in high demand, with the Hospice receiving on average over 60 referrals a month for this service. Fortunately, the Hospice received a grant from the Masonic Charitable Foundation to provide this service in 2023/2024 and has received confirmation of funding from another external source for 2024/2025.
- The Hospice also offers a specialist Children’s Bereavement Service to support bereaved children from our local communities who are experiencing grief and loss. The Hospice received funding from a local corporate business partner to provide this service during 2023/2024.
- The Counselling Team provide emotional and psychological support to Hospice staff members as part of the Staff Wellbeing Service, which is offered alongside holistic therapies.
- For the reporting period (April 2023 to March 2024) the Counselling Team provided the following face to face sessions for adults and children:

Counselling Support	Total
Referrals Received Adult	316
Referrals Received Children	132
Adult Assessments	121
Adult Counselling	831
Child Assessments	73
Child Counselling	271

- During 2023/2024 the Counselling Team also engaged in telephone support calls to and from bereaved adults as detailed below:

Counselling Telephone Support	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Total
Telephone Contacts/Support Calls	1,005	858	769	889	3,521

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

Achievements and performance (continued)

- **Therapeutic Support Services - Holistic Therapies**

“The ability to release stress and stop anxiety building up since my sessions have taught me excellent coping mechanisms. Personalised and relaxing experience. Felt valued and listened to and given hope for the future.”

- As well as providing a wide range of holistic therapies and treatments for paying members of the public, the Hospice received funding to deliver the following therapies in 2023/2024:
- Funding from Cancer Project Services at North Tees & Hartlepool NHS Foundation Trust to enable newly diagnosed cancer patients to access a choice of holistic therapies.
- Funding from North Tees & Hartlepool NHS Foundation Trust to provide a Staff Wellbeing Service to NHS staff, to address the increasing mental health burden and associated sickness and absence levels following COVID-19 and the challenges regarding care delivery, consumer increase and manpower (recruitment and retention).
- During 2023/2024, therapeutic support activities to staff and the public have been delivered as detailed below:

Holistic Therapies	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Total
Therapeutic Support Contacts/Activities	585	579	622	588	2,374

- **24 Hour Helpline**

- We recognise and understand the need for support when living at home with a life-limiting illness and that this need can come at any time. Our 24 Hour Helpline is designed to provide help at the earliest opportunity or to put callers in contact with others that can help.
- The Helpline is staffed by specialist Nurses and Doctors, based at the Hospice, who are ready to offer support and advice to individuals and their families, at any time during the day or night.
- This service is also available for Healthcare Professionals who can access this service during a 24 hour period where they will receive specialist support and advice in the management of a patient's ongoing specialist palliative care needs. The patient can be at home, in hospital or another Hospice.
- The Helpline is not funded and during 2023/2024 the Hospice's healthcare professionals provided the following telephone support via the Hospice's 24 hour Helpline for both Tees Valley and County Durham patients and healthcare professionals:

24 Hour Helpline	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Total
Helpline Calls (Patients & Healthcare Professionals)	147	168	173	103	591

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

Achievements and performance (continued)

Financial review

We continue to run a highly professional organisation with a stable financial position which reflects ethical fundraising and cash holding policies decided by our Council Members.

The credit rating during the reporting period has remained at level A.

Reserves policy

Free reserves available for use by the Charity are deemed to be those that are readily realisable, less funds whose uses are restricted or else designated for particular purposes.

As a matter of policy, the Charity aims to build up and hold a maximum of two months running costs as reserves. This objective is secondary to the achievement of the Charity's strategic objectives as stated in the current strategy, so that reserves will not be built or maintained at the expense of planned or current patient care.

Two months running costs would be approximately £663k. With free reserves (after removing long term liabilities) of £698k the Charity is meeting their target. The Charity expects to build the reserves over the next year to support the Charity as it recovers income streams post Covid.

Aspirational objectives for reserves: The Charity aims to become financially independent of Clinical Commissioning Group contracts as a security measure against diminishing contract values and the uncertainty of the level of tariff funding arising from the End of Life & Palliative Care Review. Nevertheless, it will still seek appropriate contracts to advance patient services. The achievement of this will be through the continuation of regular monitoring of financial management.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

Financial review and results for the year

The Charity has made a surplus before depreciation of £467,461 and after depreciation a surplus of £296,767 has been declared.

The detailed results are as follows:

Gross income decreased by 0.7% to £3.8m, while expenditure on charitable activities decreased by 14.4% to £2.7m. After taking depreciation into account total resources expended of £3.5m (2023: £4.0m) resulted in a net surplus for the year of £297k (2023: £221k deficit).

Income received in furtherance of charitable objects totalled £1.4m. Expenditure incurred on furthering charitable objects was £2.7m. The Charity supports its charitable activities with successful fundraising activities, including charity shops and a lottery.

Fundraising activities, donations and legacies generated a surplus of unrestricted income of £1,047k to be used to pursue charitable activities.

£226k of grants were received to support the work of the Hospice.

The lottery generated a surplus of £92k (2023: £104k) and Trading Activities generated a surplus of £135k (2023: £159k).

£10k of unrestricted income was spent on the governance costs of the organisation.

Total reserves stand at £3.3m (2023: £3m), including £421k of restricted reserves.

At 31 March 2024 there is a surplus on unrestricted free reserves of £325k. Excluding the long term bank loans, a loan which was used to purchase the freehold and develop the Wellbeing Centre and the Coronavirus Business Interruption Loan, and the pension deficit, there are free reserves of £698k.

Investment policy and performance

The Memorandum of Association authorises the Council Members to invest surplus funds as may be thought fit. The Council Members' policy is to hold any surplus cash on deposit to obtain the most attractive interest rate available. The Council Members' have directed that funds will be used in the charitable activities of the company instead.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

Fundraising

The Hospice's Fundraising Sub Strategy 2020-2025 has the following objectives:

- Develop strong partnerships with organisations and individuals.
- Be proactive, research and implement opportunities to embrace the current climate.
- Develop sustainable corporate relationships.
- Ensure our approach to fundraising is respectful and non-aggressive and compliant with the Fundraising Regulator.
- Promote the Hospice in a positive and professional manner.

Following organisational changes and in these times of ongoing economic and political uncertainty, a less experimental and 'back to basics' approach to Fundraising has proven effective with a consistent presence in our community and traditional, low-cost processes such as bucket collections or tombolas in local shops, at public events etc. This engaging approach has enabled us to build relationships with stakeholders at all levels. Other innovative Fundraising processes include our 2p appeal, which has seen a positive response and is inclusive, enabling most people to give.

An organisation-wide focus on Fundraising as a priority has built stronger teams within the Hospice and brought staff and volunteers together from all departments.

Most of our Fundraising staff and many of our volunteers are long-serving and able to maintain ongoing relationships with our community. Our fundraising approaches are respectful, friendly and compliant with all regulations; we receive consistently positive feedback and engagement on our social media pages, especially around our larger scale events such as the Colour Run, which has grown into a prominent annual event for Hartlepool.

Our shops continue to perform well and provide an essential community resource, whilst being a highly effective income generator for our services.

Alice House Hospice is a subscribed member of the Fundraising Regulator and as such adheres to the Code of Fundraising Practice. We review each Code on a rolling programme to ensure that we are compliant in all areas.

All Staff and Volunteers within Income Generation have access to the Code of Fundraising and the Institute of Fundraising 'Treating Donors Fairly' policy.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

Staff

The Hospice completed the annual Staff Satisfaction Survey in November 2023, which received a good response rate of 53.8%, with 50 surveys received out of a possible 93. Responses included:

- 100% agreed that if a friend or relative needed treatment they would be happy with the standard of care provided by this organisation.
- 98% agree that their work is meaningful to the Hospice.
- “I feel privileged to be part of the Hospice Team and am very proud of the work we do. I truly believe that our work really makes a difference.”
- “Alice House Hospice is an amazing place to work, it’s like one big happy family.”
- “I feel blessed to be part of an amazing team.”

The Hospice completed its first Workforce Equality Survey in December 2023 with an excellent response rate of 64.5% (60 surveys received out of a possible 93). Responses included:

- 97% of staff feel safe to speak up about harassment or discrimination at work.
- 93% of staff agreed that the organisation respects individual differences, such as cultural backgrounds.
- 89% of staff agreed that they are able to access the right learning and development opportunities when needed.
- “The Freedom to Speak-up Guardian is always available and the Management Team are very approachable.”
- “Alice House Hospice is an amazing place to work, colleagues and management are always supportive.”

Alice House Hospice offer all staff an option to join the Westfield Health Plan, which supports staff with their health and wellbeing. All staff also have access to our Holistic Wellbeing Services which offer meditation, reflexology, acupuncture, Indian head massages, complementary therapies, etc. This is highly successful for preventing staff going on sick leave for stress/anxiety etc. and also successful for staff returning back to work earlier.

Alice House Hospice is also part of the Better Health at Work Award Scheme, which helps to facilitate a healthy workplace and workforce. During 2023/2024 the Hospice has delivered different sessions for staff to attend, for example:

- Free mocktail tasting sessions (to help reduce alcohol intake).
- Lunchtime circuit training (to help with weight control).
- Speed “get to know you” sessions between colleagues (to improve healthy working relationships).

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

Plans for the Future

The Hospice has prioritised the following three improvement domains of Patient Safety, Clinical Effectiveness and Patient Experience:

- **Electronic Patient Record Management System (Patient Safety)**
The Hospice currently registers patients and records all admissions on SystmOne, with members of the Medical and Nursing Team trained to view patient information. The priority for 2024/2025 will be to complete the business mapping/change process from paper based to electronic patient care records, which will move all of the Hospice's clinical records over to the Palliative Care Module of SystmOne.
- **Progression of Implementation of the Patient Safety Incident Response Framework (PSIRF) in Collaboration with Hospices North East & North Cumbria (Clinical Effectiveness)**
Following the workshops in 2023/2024, where a lighter approach was agreed with the ICB, the collaborative of 12 hospices will meet in Quarter 1 in 2024/2024 to jointly implement a single PSIRF Plan, which will include the following:
 - Patient Safety Incident Investigation training for managers which gives PSIRF oversight, a system approach to investigating and learning from patient safety incidents and involving patients and families affected by patient safety incidents.
 - Examination of the differing systems to record incidences within the hospice network and identification of methods of collating comparable data.
- **Pilot In-Reach Hospital Worker to Increase the Flow of Patients into Hospice Emergency End of Life Beds (Patient Experience)**
The Hospice has received continuation funding in 2024/2025 (Year 3) from North Tees & Hartlepool NHS Foundation Trust for the Rapid Response Out-of-Hours Admission. During 2024/2025, the Hospice will be seconding a Palliative Care Assessment Sister (In-Reach) to work with the Specialist Palliative Care Team within the University Hospital of North Tees to support the identification, assessment and referral pathways for patients with end of life care needs and/or specialist palliative care needs.

The Hospice has also prioritised the following two strategic and operational priorities for 2024/2025:

- **Commissioning of Clinical Services**
 - It is acknowledged within the NHS Tees Valley Place Integrated Care Board's Adult Palliative and End of Life Care Strategy that there is historic disparity in the way that service providers are funded, which is reflective of the historic Clinical Commissioning Group footprints. During 2023/2024 meetings continued to take place both in Parliament and with Tees Valley MPs, the Minister of State in the Department of Health & Social Care and the Chief Executive of the North East & North Cumbria ICB to discuss the commissioning challenges in the Tees Valley region and to challenge when equitable funding for palliative and end of life care will be implemented in accordance with the Statutory Guidance for Integrated Care Boards on Palliative & End of Life Care (July 2022).
 - The Hospice has been working in collaboration with the Tees Valley Task & Finish Groups (including Contracting & Finance, Service Delivery and Education & Training) established by NHS Tees Valley Place Integrated Care Board (ICB) to make recommendations for the key themes highlighted in their Adult Palliative and End of Life Care Strategy. The aim of the strategy is to commission and deliver high quality, cost effective and resilient systems of care across Tees Valley so that patients approaching the end of life and their families have a positive, high quality and personalised experience wherever they wish to be cared for.
 - The Hospice will continue to petition regional and national MPs and to be represented on the relevant ICB groups and committees during 2024/2025, to ensure delivery of the ICB's commitment towards an investment programme of levelling up Hospice funding to the NHS national average reference cost for a bed day rate (NHS England National Cost Collection Data Publication).

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

• **Facilities**

- During 2023/2024 a risk was identified with the ageing hot water and central heating plant, which operate 24 hours a day and are in an advanced state of decline. The main risk to their functionality is the obsolescence of many internal components, which may render them unrepairable in the event of a breakdown. Trustees have therefore approved capital spend in 2024/2025 to replace the hot water, heating and boiler management system with more energy efficient plant.

Going concern

The financial position of the Charity is under constant review and closely monitored by Trustees, who will take action as needed to preserve the financial stability of the Hospice. The Risk Register is regularly reviewed and updated to reflect the exposures faced by the Charity.

After making appropriate enquiries, the Trustees have an expectation that the Charity has adequate resources to continue delivering services for the foreseeable future. For this reason they continue to adopt the going concern basis in preparing financial statements.

Employees

Employees are fully involved with the development and delivery of the strategy and it is integral to all daily activities and used to support their appraisals.

Regular staff updates and a summary of the key points from each Senior Management Team meeting are communicated to all employees to ensure that they are aware of the activities of the Charity.

Volunteers

The survival and growth of the Charity could not be achieved without the unstinting support of the volunteer workforce, who enable the fulfilment of the Hospice's Vision, Mission and Values by complimenting the work of the patient care staff, supporting fundraising efforts and serving as Council Members. The volunteers bring skill, knowledge and experience which greatly enhances the professional profile of the Charity. This in turn enables the Charity to reach further into the community, not only by caring for those with life limiting illnesses but by offering opportunities for the development of skills and expertise which individuals can take with them in their own personal development, back into the community, thus enhancing the profile of the Charity and encouraging more individuals to offer their service on a voluntary basis.

The Hospice completed a Volunteer Satisfaction Survey in November 2023, where 35 surveys were received out of a possible 70. Responses included:

- 100% agree that if a friend or relative needed treatment they would be happy with the standard of care provided by this organisation.
- 85% said that supporting a local charity was one of the main reasons for volunteering.
- Examples of personal qualities which volunteers felt were essential for their roles included patience, empathy, good communication skills, hardworking, friendly, helpful, kind, a listening ear, smiley face.
- *"I feel very much part of a team and my contribution is always acknowledged."*
- *"I feel blessed to be part of an amazing team."*

Council Members' liability

The Council Members guarantee to contribute an amount not exceeding £1 to the assets of the Charity in the event of winding up.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

Statement of Council Members' responsibilities

The Council Members (who are also the directors of the Charity for the purposes of company law) are responsible for preparing the Council Members' report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company law requires the Council Members to prepare financial statements for each financial . Under company law, the Council Members must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the Charity and of its incoming resources and application of resources, including its income and expenditure, for that period. In preparing these financial statements, the Council Members are required to:

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles of the Charities SORP (FRS 102);
- make judgments and accounting estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards (FRS 102) have been followed, subject to any material departures disclosed and explained in the financial statements;
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the Charity will continue in business.

The Council Members 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 enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the Charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

Disclosure of information to auditors

Each of the persons who are Council Members at the time when this Council Members' report is approved has confirmed that:


- so far as that Council Member is aware, there is no relevant audit information of which the charity's auditors are unaware, and
- that Council Member has taken all the steps that ought to have been taken as a Council Member in order to be aware of any relevant audit information and to establish that the charity's auditors are aware of that information.

Auditors

The auditors, Waltons Business Advisers Limited, have indicated their willingness to continue in office. The designated Council Members will propose a motion reappointing the auditors at a meeting of the Council Members.



Mr R Priestman
(Chair of Trustees)



Mrs J Regan
(Treasurer)

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE HARTLEPOOL HOSPICE LIMITED T/A
ALICE HOUSE HOSPICE**

UNQUALIFIED OPINION

We have audited the financial statements of The Hartlepool Hospice Limited T/A Alice House Hospice (the 'charity') for the year ended 31 March 2024 which comprise the Statement of financial activities, the Balance sheet, the Statement of cash flows and the related notes, 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 charitable company's affairs as at 31 March 2024 and of its incoming resources and application of resources, including its income and expenditure for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

BASIS FOR OPINION

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditors' responsibilities for the audit of the financial statements section of our report. We are independent of the charitable company in accordance with the ethical requirements that are relevant to our audit of the financial statements in the United Kingdom, including the Financial Reporting Council'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 Council Members' 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 charitable company's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

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

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**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE HARTLEPOOL HOSPICE LIMITED T/A
ALICE HOUSE HOSPICE (CONTINUED)**

OTHER INFORMATION

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

We have nothing to report in this regard.

OPINION 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 Council Members' Report for the financial year for which the financial statements are prepared is consistent with the financial statements.
- the Council Members' Report has been prepared in accordance with applicable legal requirements.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE HARTLEPOOL HOSPICE LIMITED T/A
ALICE HOUSE HOSPICE (CONTINUED)**

MATTERS ON WHICH WE ARE REQUIRED TO REPORT BY EXCEPTION

In the light of our knowledge and understanding of the charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the Council Members' Report.

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

- adequate accounting records have not been kept, or returns adequate for our audit have not been received from branches not visited by us; or
- the financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of Council Members' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit; or
- the Council Members were not entitled to prepare the financial statements in accordance with the small companies regime and take advantage of the small companies' exemptions in preparing the Council Members' Report and from the requirement to prepare a Strategic Report.

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**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE HARTLEPOOL HOSPICE LIMITED T/A
ALICE HOUSE HOSPICE (CONTINUED)**

RESPONSIBILITIES OF COUNCIL MEMBERS

As explained more fully in the Council Members' responsibilities statement, the Council Members (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 Council Members 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 Council Members are responsible for assessing the 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 Council Members either intend to liquidate the charitable company or to cease operations, or have no realistic alternative but to do so.

AUDITORS' 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 Auditors' 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:

In identifying and assessing risks of material misstatement in respect of irregularities, including fraud, the audit engagement team:

- Obtained an understanding of the nature of the sector, including the legal and regularity framework that the charitable company operates in and how they are complying with the legal and regularity framework
- Inquired of management and those charged with governance about their own identification and assessment of the risks of irregularities including any known, actual, suspected or alleged instances of fraud,
- Discussed matters about non-compliance with laws and regulations and how fraud might occur including assessment of how and where the financial statements might be susceptible to fraud.

As a result of these procedures we considered the most significant laws and regulations which have a direct impact on the financial statements are FRS 102, Charities SORP (FRS 102), Companies Act 2006 and the charitable company's governing document. We performed audit procedures to detect non-compliance which may have a material impact on the financial statements which included reviewing the financial statements including the council members report and remaining alert to new or unusual transactions which may not be in accordance with the governing documents.

The audit engagement team identified the risk of management override of controls and income recognition as the areas where the financial statements were most susceptible to material misstatement due to fraud. We designed audit procedures to respond to the risk, recognising that the risk of not detecting a material misstatement due to fraud is higher than the risk of not detecting one resulting from error, as fraud may involve deliberate concealment by, for example, forgery or intentional misrepresentations, or through collusion.

Audit procedures performed included, but were not limited to:

- testing manual journal entries and other adjustments

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE HARTLEPOOL HOSPICE LIMITED T/A
ALICE HOUSE HOSPICE (CONTINUED)**

- evaluating the business rationale in relation to significant or unusual transactions and transactions entered into outside the normal course of business
- challenging judgments and estimates
- reviewing income transactions around the year end to look for potential "window dressing".

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 Auditors' 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 Auditors' Report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and its members, as a body, for our audit work, for this report, or for the opinions we have formed.



Heather O'Driscoll FCA (Senior statutory auditor)

for and on behalf of

Waltons Business Advisers Limited

Chartered Accountants

Statutory Auditors

Maritime House

Harbour Walk

The Marina

Hartlepool

TS24 0UX

10 December 2024

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

STATEMENT OF FINANCIAL ACTIVITIES (INCORPORATING INCOME AND EXPENDITURE ACCOUNT)
FOR THE YEAR ENDED 31 MARCH 2024

	Note	Restricted funds 2024 £	Unrestricted funds 2024 £	Total funds 2024 £	Total funds 2023 £
INCOME FROM:					
Donations and legacies	3	212,882	1,075,207	1,288,089	1,034,317
Charitable activities	4	1,272,934	167,346	1,440,280	1,707,112
Other trading activities	5	-	1,091,016	1,091,016	1,104,804
TOTAL INCOME		1,485,816	2,333,569	3,819,385	3,846,233
EXPENDITURE ON:					
Raising funds	7	-	872,110	872,110	972,190
Charitable activities	8	1,461,585	1,189,546	2,651,131	3,095,324
TOTAL EXPENDITURE		1,461,585	2,061,656	3,523,241	4,067,514
NET INCOME/(EXPENDITURE)		24,231	271,913	296,144	(221,281)
Transfers between funds	18	(10,809)	10,809	-	-
NET MOVEMENT IN FUNDS BEFORE OTHER RECOGNISED GAINS/(LOSSES)		13,422	282,722	296,144	(221,281)
OTHER RECOGNISED GAINS/(LOSSES):					
Other gains	24	-	623	623	664
NET MOVEMENT IN FUNDS		13,422	283,345	296,767	(220,617)
RECONCILIATION OF FUNDS:					
Total funds brought forward		425,850	2,578,880	3,004,730	3,225,347
Net movement in funds		13,422	283,345	296,767	(220,617)
TOTAL FUNDS CARRIED FORWARD		439,272	2,862,225	3,301,497	3,004,730

The Statement of Financial Activities includes all gains and losses recognised in the year.

The notes on pages 36 to 61 form part of these financial statements.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)
REGISTERED NUMBER: 01525658

BALANCE SHEET
AS AT 31 MARCH 2024

	Note	2024 £	2023 £
FIXED ASSETS			
Tangible assets	13	2,971,542	3,128,077
Investments	14	100	100
		<u>2,971,642</u>	<u>3,128,177</u>
CURRENT ASSETS			
Debtors	15	262,880	198,470
Cash at bank and in hand	21	720,308	522,648
		<u>983,188</u>	<u>721,118</u>
Creditors: amounts falling due within one year	16	(279,560)	(345,096)
		<u>703,628</u>	<u>376,022</u>
NET CURRENT ASSETS		703,628	376,022
TOTAL ASSETS LESS CURRENT LIABILITIES		3,675,270	3,504,199
Creditors: amounts falling due after more than one year	17	(373,227)	(498,300)
NET ASSETS EXCLUDING PENSION LIABILITY		3,302,043	3,005,899
Defined benefit pension scheme liability	24	(546)	(1,169)
TOTAL NET ASSETS		3,301,497	3,004,730
CHARITY FUNDS			
Restricted funds	18	420,924	425,850
Unrestricted funds	18	2,880,573	2,578,880
TOTAL FUNDS		3,301,497	3,004,730

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)
REGISTERED NUMBER: 01525658

BALANCE SHEET (CONTINUED)
AS AT 31 MARCH 2024

The Council Members acknowledge their responsibilities for complying with the requirements of the Act with respect to accounting records and preparation of financial statements.

The financial statements have been prepared in accordance with the provisions applicable to entities subject to the small companies regime.

The financial statements were approved and authorised for issue by the Council Members on 03 December 2024 and signed on their behalf by:



Mr R Priestman
(Chair of Trustees)



Mrs J Regan
(Treasurer)

The notes on pages 36 to 61 form part of these financial statements.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED 31 MARCH 2024

	Note	2024 £	2023 £
CASH FLOWS FROM OPERATING ACTIVITIES			
Net cash used in operating activities	20	342,672	176,350
CASH FLOWS FROM INVESTING ACTIVITIES			
Proceeds from the sale of tangible fixed assets		700	25,353
Purchase of tangible fixed assets	13	(24,150)	(48,679)
NET CASH USED IN INVESTING ACTIVITIES		(23,450)	(23,326)
CASH FLOWS FROM FINANCING ACTIVITIES			
Repayments of borrowing		(111,135)	(113,287)
Repayments of finance leases		(9,804)	(9,804)
Gain on pension deficit		(623)	(664)
NET CASH USED IN FINANCING ACTIVITIES		(121,562)	(123,755)
CHANGE IN CASH AND CASH EQUIVALENTS IN THE YEAR			
Cash and cash equivalents at the beginning of the year		522,648	493,379
CASH AND CASH EQUIVALENTS AT THE END OF THE YEAR	21	720,308	522,648

The notes on pages 36 to 61 form part of these financial statements

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

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

1. GENERAL INFORMATION

The Charity is a private company incorporated in England and Wales and limited by guarantee. The members of the company are the Council Members named on page 2. In the event of the Charity being wound up, the liability in respect of the guarantee is limited to £1 per member of the Charity.

The registered address is:

Alice House
Wells Avenue
Hartlepool
TS24 9DA

2. ACCOUNTING POLICIES

2.1 Basis of preparation of financial statements

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

The Hartlepool Hospice Limited T/A Alice House Hospice 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.

2.2 Fund accounting

General funds are unrestricted funds which are available for use at the discretion of the Council Members in furtherance of the general objectives of the Charity and which have not been designated for other purposes.

Restricted funds are funds which are to be used in accordance with specific restrictions imposed by donors or which have been raised by the Charity for particular purposes. The costs of raising and administering such funds are charged against the specific fund. The aim and use of each restricted fund is set out in the notes to the financial statements.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

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

2. ACCOUNTING POLICIES (CONTINUED)

2.3 Going concern

With the continuing impact of Brexit, the Cost of Living Crisis and other social and economic factors, the Charity started the year with a significant deficit budget which required some difficult decisions in order to stabilise the financial position and protect core services, including the closure of the Long Term Care Unit which was a secondary non-core funded service. This, together with efficiency savings, streamlined processes and a return to pre-COVID support and fundraising levels, has resulted in turning a deficit budget into a surplus budget for the year.

At all times, the financial position of the Charity is under constant review and closely monitored by the Senior Management Team and Council Members, who take immediate action as required to preserve the financial stability of the Charity. The Risk Register is regularly reviewed and updated to reflect the exposures faced by the Charity.

After making appropriate enquiries, the Council Members have an expectation that the Charity has adequate resources to continue delivering services for the foreseeable future. For this reason they continue to adopt the going concern basis in preparing financial statements

2.4 Income

All income is recognised 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.

For legacies, entitlement is taken as the earlier of the date on which either: the Charity is aware that probate has been granted, the estate has been finalised and notification has been made by the executor(s) to the Trust that a distribution will be made, or when a distribution is received from the estate. Receipt of a legacy, in whole or in part, is only considered probable when the amount can be measured reliably and the Charity has been notified of the executor's intention to make a distribution. Where legacies have been notified to the Charity, or the Charity is aware of the granting of probate, and the criteria for income recognition have not been met, then the legacy is treated as a contingent asset and disclosed if material.

Gifts donated for resale are included as income when they are sold.

The Council Members acknowledge that they are assets of the Charity as soon as received but due to the fact that a very large number of small value items are received the time and cost of valuing donated goods at receipt would outweigh any benefit to the users of the financial statements of having them so valued.

Where goods are donated under the Gift Aid scheme the Charity is not entitled to the income until the goods are sold and the donor has confirmed that they are gifting the proceeds. In this case the income is included as a donation rather than as a sale.

Income tax recoverable in relation to donations received under Gift Aid or deeds of covenant is recognised at the time of the donation.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

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

2. ACCOUNTING POLICIES (CONTINUED)

2.5 Expenditure

Expenditure is recognised once there is a legal or constructive obligation to transfer economic benefit to a third party, it is probable that a transfer of economic benefits will be required in settlement and the amount of the obligation can be measured reliably. Expenditure is classified by activity. The costs of each activity are made up of the total of direct costs and shared costs, including support costs involved in undertaking each activity. Direct costs attributable to a single activity are allocated directly to that activity. Shared costs which contribute to more than one activity and support costs which are not attributable to a single activity are apportioned between those activities on a basis consistent with the use of resources. Central staff costs are allocated on the basis of time spent, and depreciation charges allocated on the portion of the asset's use.

Costs of generating voluntary income are those incurred in seeking voluntary contributions and do not include the costs of disseminating information in support of the charitable activities.

Fundraising costs are the direct costs of operating the charity shops and other trading activities. Support costs are those costs incurred directly in support of expenditure on the objects of the charity and include central costs. Governance costs are those incurred in connection with administration of the Charity and compliance with constitutional and statutory requirements.

2.6 Tangible fixed assets and depreciation

Tangible fixed assets costing £1,500 or more are capitalised and recognised when future economic benefits are probable and the cost or value of the asset can be measured reliably.

Tangible fixed assets are initially recognised at cost. After recognition, under the cost model, tangible fixed assets are measured at cost less accumulated depreciation and any accumulated impairment losses. All costs incurred to bring a tangible fixed asset into its intended working condition should be included in the measurement of cost.

Depreciation is charged so as to allocate the cost of tangible fixed assets less their residual value over their estimated useful lives, using the straight-line method.

Depreciation is provided on the following bases:

Freehold property	- 20/50 years straight line
Plant and machinery	- 7 years straight line
Motor vehicles	- 7 years straight line
Fixtures and fittings	- 7 years straight line
Computer equipment	- 3/5 years straight line
Other fixed assets	- 3 years straight line

2.7 Redundancy/termination payments

Redundancy and termination payments are recognised when an approved formal plan is in place and the employees which it affects have been made aware of the situation.

2.8 Investments

Investments represent the shares held in a subsidiary company which are stated at cost.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

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

2. ACCOUNTING POLICIES (CONTINUED)

2.9 Debtors

Trade and other debtors are recognised at the settlement amount after any trade discount offered. Prepayments are valued at the amount prepaid net of any trade discounts due.

2.10 Cash at bank and in hand

Cash at bank and in hand includes cash and short-term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

2.11 Liabilities

Liabilities and provisions are recognised when there is an obligation at the Balance sheet date as a result of a past event, it is probable that a transfer of economic benefit will be required in settlement, and the amount of the settlement can be estimated reliably.

Liabilities are recognised at the amount that the Charity anticipates it will pay to settle the debt or the amount it has received as advanced payments for the goods or services it must provide.

Provisions are measured at the best estimate of the amounts required to settle the obligation. Where the effect of the time value of money is material, the provision is based on the present value of those amounts, discounted at the pre-tax discount rate that reflects the risks specific to the liability. The unwinding of the discount is recognised within interest payable and similar charges.

2.12 Finance leases and hire purchase

Assets obtained under hire purchase contracts and finance leases are capitalised as tangible fixed assets. Assets acquired by finance lease are depreciated over the shorter of the lease term and their useful lives. Assets acquired by hire purchase are depreciated over their useful lives. Finance leases are those where substantially all of the benefits and risks of ownership are assumed by the Charity. Obligations under such agreements are included in creditors, net of the finance charge allocated to future periods. The finance element of the rental payment is charged to the Statement of Financial Activities so as to produce a constant periodic rate of charge on the net obligation outstanding in each period.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

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

2. ACCOUNTING POLICIES (CONTINUED)

2.13 Pensions

The Charity contributes to a defined contribution pension scheme and the pension charge represents the amounts payable by the Charity to the fund in respect of the year.

Defined benefit schemes

The Charity makes contributions to the National Health Service Pension Scheme and The Pension Scheme Trust.

The Charity is however unable to identify its share of the underlying assets and liabilities in the schemes and has accounted for contributions as if they were defined contributions schemes as follows:

The amount charged to the statement of financial activities in respect of pension costs is the contributions payable in the year. Differences between contributions payable in the year and contributions actually paid are shown as either accruals or prepayments in the balance sheet.

Amounts included in expenses are allocated between activities on the basis of staff time in line with other support costs.

The Charity has agreed to a deficit funding arrangement and recognises a liability for this obligation. The amount recognised is the net present value of the deficit reduction contributions payable under the agreement that relates to the deficit. The present value is calculated using the discount rate detailed in these disclosures. The unwinding of the discount rate is recognised as a finance cost.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

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

3. DONATIONS, LEGACIES AND SIMILAR INCOMING RESOURCES

	Restricted funds 2024 £	Unrestricted funds 2024 £	Total funds 2024 £	<i>Total funds 2023 £</i>
Donations	-	776,314	776,314	643,082
Legacies	-	267,206	267,206	62,396
Grants	212,882	12,976	225,858	322,451
Similar incoming resources	-	18,711	18,711	6,388
Total 2024	212,882	1,075,207	1,288,089	1,034,317
<i>Total 2023</i>	<i>297,394</i>	<i>736,923</i>	<i>1,034,317</i>	

In 2024 there is £Nil (2023: £157,944) included in grant income which was received from the Kickstart scheme.

4. INCOME FROM CHARITABLE ACTIVITIES

	Restricted funds 2024 £	Unrestricted funds 2024 £	Total funds 2024 £	<i>Total funds 2023 £</i>
In Patient Unit	1,189,790	4,734	1,194,524	1,433,038
Medical	53,745	-	53,745	52,947
Bereavement & Therapeutic Services	29,399	162,612	192,011	40,153
Insurance income	-	-	-	180,974
Total 2024	1,272,934	167,346	1,440,280	1,707,112
<i>Total 2023</i>	<i>977,489</i>	<i>729,623</i>	<i>1,707,112</i>	

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

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

5. FUNDRAISING INCOME

	Unrestricted funds 2024 £	Total funds 2024 £	<i>Total funds 2023 £</i>
Lottery	219,700	219,700	226,847
Fundraising events	208,046	208,046	147,527
Kitchen income	27,047	27,047	22,879
Shop income	624,373	624,373	672,654
Catering and merchandising income	11,850	11,850	13,471
VR centre	-	-	21,426
Total 2024	1,091,016	1,091,016	1,104,804
<i>Total 2023</i>	<i>1,104,804</i>	<i>1,104,804</i>	

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

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

6. TRADING ACTIVITIES

	Unrestricted funds 2024 £	Total funds 2024 £	<i>Total funds 2023 £</i>
Charity trading income			
Charity shop takings	624,373	624,373	672,654
Catering and merchandising income	11,850	11,850	13,471
VR centre	<u>-</u>	<u>-</u>	<u>21,426</u>
Sub total trading income	636,223	636,223	707,551
Grant income (included in note 3)	<u>-</u>	<u>-</u>	<u>100,999</u>
Total income	636,223	636,223	808,550
Fundraising trading expenses			
Charity shop costs	168,003	168,003	138,675
VR centre costs	41,780	41,780	57,619
Catering and merchandising costs	3,163	3,163	3,166
Salaries	287,899	287,899	449,805
Total expenditure	500,845	500,845	649,265
Net income from trading activities	<u>135,378</u>	<u>135,378</u>	<u>159,285</u>
Total 2023	<u>159,285</u>	<u>159,285</u>	

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2024**

7. COST OF RAISING FUNDS

	Unrestricted funds 2024 £	Restricted funds 2024 £	Total funds 2024 £	<i>Total funds 2023 £</i>
Fundraising expenditure	62,947	-	62,947	48,486
Lottery costs	94,676	-	94,676	91,835
Support costs allocated	5,952	-	5,952	5,974
Wages and salaries	167,582	-	167,582	136,522
Depreciation	40,108	-	40,108	40,108
Fundraising trading expenses (note 6)	500,845	-	500,845	649,265
Total 2024	872,110	-	872,110	972,190
<i>Total 2023</i>	<i>871,191</i>	<i>100,999</i>	<i>972,190</i>	

8. ANALYSIS OF EXPENDITURE ON CHARITABLE ACTIVITIES

Summary by fund type

	Restricted funds 2024 £	Unrestricted funds 2024 £	Total 2024 £	<i>Total 2023 £</i>
In Patient Unit	1,402,840	495,697	1,898,537	2,342,890
Medical	53,745	213,045	266,790	281,623
Multi Disciplinary Team	-	257,076	257,076	237,381
Bereavement & Therapeutic Services	5,000	223,728	228,728	233,430
Total 2024	1,461,585	1,189,546	2,651,131	3,095,324
<i>Total 2023</i>	<i>1,187,468</i>	<i>1,907,856</i>	<i>3,095,324</i>	

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

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

9. ANALYSIS OF EXPENDITURE BY ACTIVITIES

	Activities undertaken directly 2024 £	Support costs 2024 £	Total funds 2024 £	<i>Total funds 2023 £</i>
In Patient Unit	797,483	1,101,054	1,898,537	2,342,890
Medical	245,145	21,645	266,790	281,623
Multi Disciplinary Team	238,687	18,389	257,076	237,381
Bereavement & Therapeutic Services	211,441	17,287	228,728	233,430
Total 2024	1,492,756	1,158,375	2,651,131	3,095,324
<i>Total 2023</i>	<i>1,875,631</i>	<i>1,219,693</i>	<i>3,095,324</i>	

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

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

Analysis of direct costs

	In Patient Unit 2024 £	Medical 2024 £	Disciplinary Team 2024 £	Multi Bereavement & Therapeutic Services 2024 £	Total funds 2024 £	Total funds 2023 £
Staff costs	722,202	130,242	225,582	201,110	1,279,136	1,648,588
Consumables	26,928	-	-	721	27,649	32,160
Drugs	-	80,090	-	-	80,090	85,105
Equipment and maintenance	28,244	-	-	-	28,244	24,404
Medical and professional fees	19,166	34,813	13,105	4,916	72,000	79,247
Travel	281	-	-	282	563	1,258
Office costs and sundries	662	-	-	1,750	2,412	1,424
Facilities	-	-	-	2,662	2,662	3,445
Total 2024	797,483	245,145	238,687	211,441	1,492,756	1,875,631
<i>Total 2023</i>	<i>1,185,093</i>	<i>258,350</i>	<i>217,370</i>	<i>214,818</i>	<i>1,875,631</i>	

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

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

Analysis of Support costs

	In Patient Unit 2024 £	Medical 2024 £	Disciplinary Team 2024 £	Multi Therapeutic Services 2024 £	Bereavement & Therapeutic Services 2024 £	Total funds 2024 £	Total funds 2023 £
Staff costs	601,953	11,540	10,186	9,424	9,424	633,103	764,571
Depreciation	125,361	2,612	1,305	1,305	1,305	130,583	157,593
Kitchen	33,094	337	337	-	-	33,768	41,396
Administration	48,114	1,002	506	505	505	50,127	10,419
Human resources	16,796	175	174	174	174	17,319	4,424
Management costs	82,123	1,781	1,782	1,781	1,781	87,467	5,212
Facilities	104,005	2,261	2,261	2,261	2,261	110,788	123,734
IT/Communications	79,815	1,734	1,734	1,734	1,735	85,018	102,048
Governance costs	9,791	203	104	102	102	10,200	10,296
Total 2024	1,101,052	21,645	18,389	17,287	17,287	1,158,373	1,219,693
<i>Total 2023</i>	<i>1,157,797</i>	<i>23,273</i>	<i>20,011</i>	<i>18,612</i>	<i>18,612</i>	<i>1,219,693</i>	

Support costs have been allocated to activities based on the staff numbers and hours involved in the activities.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2024**

10. AUDITORS' REMUNERATION

	2024	2023
	£	£
Fees payable to the Charity's auditor for the audit of the Charity's annual accounts	10,400	9,900
Fees payable to the Charity's auditor in respect of: All non-audit services not included above	90	90
	<u><u>10,490</u></u>	<u><u>10,080</u></u>

11. STAFF COSTS

	2024	2023
	£	£
Wages and salaries	2,115,460	2,691,913
Social security costs	171,196	214,275
Contribution to defined contribution pension schemes	81,064	93,298
	<u><u>2,367,720</u></u>	<u><u>2,999,486</u></u>

Included in wages and salaries above is £10,172 (2023: £32,713) in respect of termination payments.

The average number of persons employed by the Charity during the year was as follows:

	2024	2023
	No.	No.
Communications	3	3
Fundraising	22	15
Management & administration	13	10
In Patient Unit	54	61
Medical	3	3
Multi Disciplinary Team	4	5
Support staff	11	16
Bereavement	10	13
Kickstart	-	24
	<u><u>120</u></u>	<u><u>150</u></u>

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

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

11. STAFF COSTS (CONTINUED)

The number of employees whose employee benefits (excluding employer pension costs) exceeded £60,000 was:

	2024	2023
	No.	No.
In the band £60,001 - £70,000	2	-
In the band £90,001 - £100,000	-	1

The total remuneration paid to key management personnel (including national insurance and pension contributions) was £419,784 (2023: £505,380).

Contributions were made to defined benefit pension schemes on behalf of higher paid employees.

The Charity also uses the services of volunteers who assist in the charity shops.

12. COUNCIL MEMBERS' REMUNERATION AND EXPENSES

During the year, no Council Members received any remuneration or other benefits (2023 - £NIL).

During the year ended 31 March 2024, no Council Member expenses have been incurred (2023 - £NIL).

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2024**

13. TANGIBLE FIXED ASSETS

	Freehold land & property £	Motor vehicles £	Fixtures and fittings £	Computer equipment £	Total £
Cost					
At 1 April 2023	3,731,290	49,020	474,149	233,300	4,487,759
Additions	-	-	16,710	7,440	24,150
Disposals	-	-	-	(87,844)	(87,844)
At 31 March 2024	<u>3,731,290</u>	<u>49,020</u>	<u>490,859</u>	<u>152,896</u>	<u>4,424,065</u>
Depreciation					
At 1 April 2023	854,159	20,425	313,344	171,754	1,359,682
Charge for the year	75,707	7,003	45,265	42,719	170,694
On disposals	-	-	-	(77,853)	(77,853)
At 31 March 2024	<u>929,866</u>	<u>27,428</u>	<u>358,609</u>	<u>136,620</u>	<u>1,452,523</u>
Net book value					
At 31 March 2024	<u><u>2,801,424</u></u>	<u><u>21,592</u></u>	<u><u>132,250</u></u>	<u><u>16,276</u></u>	<u><u>2,971,542</u></u>
At 31 March 2023	<u><u>2,877,131</u></u>	<u><u>28,595</u></u>	<u><u>160,805</u></u>	<u><u>61,546</u></u>	<u><u>3,128,077</u></u>

Included in freehold land & property is freehold land of £375,000 (2023: £375,000) which is not depreciated.

Included within the net book value of assets is £21,592 (2023: £28,595) relating to assets held under hire purchase agreements.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

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

14. FIXED ASSET INVESTMENTS

	Investments in subsidiary companies £
Cost	
At 1 April 2023	100
At 31 March 2024	<u>100</u>

PRINCIPAL SUBSIDIARIES

The following was a subsidiary undertaking of the Charity:

Name	Registered office or principal place of business	Class of shares	Holding
Alice House Trading Limited (dormant) company number 07170334	Alice House, Wells Avenue, Hartlepool, Cleveland, TS24 9DA	Ordinary	100%

The financial results of the subsidiary for the year were:

Name	Net assets £
Alice House Trading Limited (dormant) company number 07170334	3,998

15. DEBTORS

	2024 £	2023 £
Trade debtors	59,562	46,749
Other debtors	18,475	16,047
Prepayments	35,118	52,982
Accrued income	149,725	82,692
	<u>262,880</u>	<u>198,470</u>

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

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

16. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2024	2023
	£	£
Bank loans	114,922	<i>110,787</i>
Pension creditor	14,167	<i>15,412</i>
Trade creditors	51,472	<i>79,918</i>
Amounts owed to group undertakings	3,998	<i>3,998</i>
Other taxation and social security	39,594	<i>39,645</i>
Obligations under finance lease and hire purchase contracts	9,804	<i>9,805</i>
Other creditors	2,218	<i>10,182</i>
Accruals and deferred income	43,385	<i>75,349</i>
	279,560	<i>345,096</i>
	279,560	<i>345,096</i>
	2024	2023
	£	£
Deferred income at 1 April 2023	27,909	<i>24,716</i>
Resources deferred during the year	29,282	<i>27,909</i>
Amounts released from previous periods	(27,909)	<i>(24,716)</i>
	29,282	<i>27,909</i>
	29,282	<i>27,909</i>

Deferred income relates to Lottery money paid in advance.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2024

17. CREDITORS: AMOUNTS FALLING DUE AFTER MORE THAN ONE YEAR

	2024	2023
	£	£
Bank loans	372,410	<i>487,680</i>
Net obligations under finance lease and hire purchase contracts	817	<i>10,620</i>
	<u>373,227</u>	<u><i>498,300</i></u>

The bank loans are repayable in monthly instalments ending March 2028 and June 2029 respectively. Interest is charged at the Bank of England base rate plus 2% per annum.

The Coronavirus Business Interruption Loan is repayable in monthly instalments ending November 2026. Interest is charged at 6.36% per annum.

The bank loans are secured by a fixed and floating unlimited debenture and a charge over the land and buildings owned at The University Hospital of Hartlepool.

The hire purchase agreement is secured over the assets to which the agreement relates.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

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

18. STATEMENT OF FUNDS

STATEMENT OF FUNDS - CURRENT YEAR

	Balance at 1 April 2023 £	Income £	Expenditure £	Transfers in/out £	Gains/ (Losses) £	Balance at 31 March 2024 £
General funds	2,578,880	2,351,917	(2,061,656)	10,809	623	2,880,573
Restricted funds						
Restricted appeal funds	-	212,882	(196,799)	(10,809)	-	5,274
Integrated Care Board	-	945,442	(945,442)	-	-	-
Pharmacy income	-	53,745	(53,745)	-	-	-
NHS End of Life Beds	-	226,000	(226,000)	-	-	-
Help the Hospices - fixed asset fund	425,850	-	(10,200)	-	-	415,650
Bereavement counselling	-	29,399	(29,399)	-	-	-
	<u>425,850</u>	<u>1,467,468</u>	<u>(1,461,585)</u>	<u>(10,809)</u>	<u>-</u>	<u>420,924</u>
Total of funds	<u><u>3,004,730</u></u>	<u><u>3,819,385</u></u>	<u><u>(3,523,241)</u></u>	<u><u>-</u></u>	<u><u>623</u></u>	<u><u>3,301,497</u></u>

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2024

18. STATEMENT OF FUNDS (CONTINUED)

STATEMENT OF FUNDS - PRIOR YEAR

	<i>Balance at 1 April 2022</i>	<i>Income</i>	<i>Expenditure</i>	<i>Gains/ (Losses)</i>	<i>Balance at 31 March 2023</i>
	£	£	£	£	£
Unrestricted funds					
General funds	2,785,913	2,571,350	(2,779,047)	664	2,578,880
Restricted funds					
Restricted appeal funds	3,384	139,450	(142,834)	-	-
Integrated Care Board	-	924,542	(924,542)	-	-
Pharmacy income	-	52,947	(52,947)	-	-
Help the Hospices - fixed asset fund	436,050	-	(10,200)	-	425,850
Kickstart funding	-	157,944	(157,944)	-	-
	<u>439,434</u>	<u>1,274,883</u>	<u>(1,288,467)</u>	<u>-</u>	<u>425,850</u>
Total of funds	<u><u>3,225,347</u></u>	<u><u>3,846,233</u></u>	<u><u>(4,067,514)</u></u>	<u><u>664</u></u>	<u><u>3,004,730</u></u>

Restricted funds

Funding received and attributed directly to charitable activities has been shown as restricted. This includes monies from Durham Dales, Easington and Sedgfield Integrated Care Boards and the Hartlepool & Stockton Integrated Care Board which totalled £1,171,442.

Pharmacy income represents income from drugs purchased and recharged of £53,745.

The fixed asset fund represents a grant of £510,000 received from the Help the Hospices Fund (NHS England) towards the capital costs of the new Wellbeing Centre. This fund is depreciated in line with the asset.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

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

19. ANALYSIS OF NET ASSETS BETWEEN FUNDS

ANALYSIS OF NET ASSETS BETWEEN FUNDS - CURRENT PERIOD

	Restricted funds 2024 £	Unrestricted funds 2024 £	Total funds 2024 £
Tangible fixed assets	415,650	2,555,892	2,971,542
Fixed asset investments	-	100	100
Current assets	5,274	977,914	983,188
Creditors due within one year	-	(279,560)	(279,560)
Creditors due in more than one year	-	(373,227)	(373,227)
Provisions for liabilities and charges	-	(546)	(546)
Total	420,924	2,880,573	3,301,497

ANALYSIS OF NET ASSETS BETWEEN FUNDS - PRIOR PERIOD

	<i>Restricted funds 2023 £</i>	<i>Unrestricted funds 2023 £</i>	<i>Total funds 2023 £</i>
Tangible fixed assets	425,850	2,702,227	3,128,077
Fixed asset investments	-	100	100
Current assets	-	721,118	721,118
Creditors due within one year	-	(345,096)	(345,096)
Creditors due in more than one year	-	(498,300)	(498,300)
Provisions for liabilities and charges	-	(1,169)	(1,169)
Total	425,850	2,578,880	3,004,730

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2024

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

	2024 £	2023 £
Net income/expenditure for the period (as per Statement of Financial Activities)	296,144	(221,281)
Adjustments for:		
Depreciation charges	170,694	197,701
Loss on the sale of fixed assets	9,291	6,641
Decrease/(increase) in debtors	(64,410)	302,067
Decrease in creditors	(69,670)	(109,442)
Gain on pension deficit	623	664
Net cash provided by operating activities	342,672	176,350

21. ANALYSIS OF CASH AND CASH EQUIVALENTS

	2024 £	2023 £
Cash in hand	720,308	522,648
Total cash and cash equivalents	720,308	522,648

22. ANALYSIS OF CHANGES IN NET DEBT

	At 1 April 2023 £	Cash flows £	Other non- cash changes £	At 31 March 2024 £
Cash at bank and in hand	522,648	197,660	-	720,308
Debt due within 1 year	(110,787)	111,135	(115,270)	(114,922)
Debt due after 1 year	(487,680)	-	115,270	(372,410)
Finance leases	(20,425)	9,804	-	(10,621)
	(96,244)	318,599	-	222,355

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2024

23. CONTINGENT LIABILITIES

Included in the 2005 financial statements was a grant of £500,000 from the Big Lottery Fund towards the capital costs of the new hospice. This grant agreement remains in force for a period of 80 years and the grant may become repayable if there is a breach of the terms and conditions in this period.

During the financial year 2013/14 and 2014/15 the Hospice received a grant totalling £510,000 from the Help the Hospices Fund (NHS England) towards the capital costs of the new Wellbeing Centre. In the event that the Hospice closes down or the building ceases to be used for the purpose of palliative care of patients, NHS England shall have the right to repayment of all monies advanced under this grant, subject to a reduction reflecting benefits from services already delivered.

24. PENSION COMMITMENTS

The pension cost charge represents contributions payable by the Charity and amounted to £81,064 (2023: £93,298). Contributions totalling £14,167 (2023: £15,412) were payable at the balance sheet date and are included in creditors.

The Charity is also making deficit payments and has included the net present value of these payments, £546 (2023: £1,169) in provisions.

The Pensions Trust

The company participates in the scheme, a multi-employer scheme which provides benefits to some 638 non-associated participating employers. The scheme is a defined benefit scheme in the UK. It is not possible for the company to obtain sufficient information to enable it to account for the scheme as a defined benefit scheme. Therefore it accounts for the scheme as a defined contribution scheme.

The scheme is subject to the funding legislation outlined in the Pensions Act 2004 which came into force on 30 December 2005. This, together with documents issued by the Pensions Regulator and Technical Actuarial Standards issued by the Financial Reporting Council, set out the framework for funding defined benefit occupational pension schemes in the UK.

The scheme is classified as a 'last-man standing arrangement'. Therefore the company is potentially liable for other participating employers' obligations if those employers are unable to meet their share of the scheme deficit following withdrawal from the scheme. Participating employers are legally required to meet their share of the scheme deficit on an annuity purchase basis on withdrawal from the scheme.

A full actuarial valuation for the scheme was carried out at 30 September 2020. This valuation showed assets of £800.3m, liabilities of £831.9m and a deficit of £31.6m. To eliminate this funding shortfall, the Trustee has asked the participating employers to pay additional contributions to the scheme as follows:

Deficit contributions

From 1 April 2022 to 31 January 2025: £3,312,000 per annum (payable monthly)

Unless a concession has been agreed with the Trustee the term to 31 January 2025 applies.

Note that the scheme's previous valuation was carried out with an effective date of 30 September 2017. This valuation showed assets of £794.9m, liabilities of £926.4m and a deficit of £131.5m. To eliminate this funding shortfall, the Trustee asked the participating employers to pay additional contributions to the scheme as follows:

Deficit contributions

From 1 April 2019 to 30 September 2025: £11,243,000 per annum (payable monthly and increasing by 3% each on 1st April)

The recovery plan contributions are allocated to each participating employer in line with their estimated share of the Series 1 and Series 2 scheme liabilities.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2024

24. PENSION COMMITMENTS (CONTINUED)

Where the scheme is in deficit and where the company has agreed to a deficit funding arrangement the company recognises a liability for this obligation. The amount recognised is the net present value of the deficit reduction contributions payable under the agreement that relates to the deficit. The present value is calculated using the discount rate detailed in these disclosures. The unwinding of the discount rate is recognised as a finance cost

PRESENT VALUES OF PROVISION

31 March 2024	31 March 2023	31 March 2022
546	1,169	1,833

RECONCILIATION OF OPENING AND CLOSING PROVISIONS

	Period Ending 31 March 2024	Period Ending 31 March 2023
	£	£
Provision at start of period	1,169	1,833
Unwinding of the discount factor (interest expense)	45	35
Deficit contribution paid	(668)	(668)
Remeasurements - impact of any change in assumptions	-	(31)
Remeasurements - amendments to the contribution schedule	-	-
Provision at end of period	546	1,169

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2024

24. PENSION COMMITMENTS (CONTINUED)

INCOME AND EXPENDITURE IMPACT

	Period Ending 31 March 2024	Period Ending 31 March 2023
	£	£
Interest expense	45	35
Remeasurements – impact of any change in assumptions	-	(31)
Remeasurements – amendments to the contribution schedule	-	-
Contributions paid in respect of future service*	*	*
Costs recognised in income and expenditure account	*	*

*includes defined contribution schemes and future service contributions (i.e. excluding any deficit reduction payments) to defined benefit schemes which are treated as defined contribution schemes. To be completed by the company.

ASSUMPTIONS

	31 March 2024	31 March 2023	31 March 2022
	% per annum	% per annum	% per annum
Rate of discount	5.31	5.52	2.35

The discount rates shown above are the equivalent single discount rates which, when used to discount the future recovery plan contributions due, would give the same results as using a full AA corporate bond yield curve to discount the same recovery plan contributions.

25. OPERATING LEASE COMMITMENTS

At 31 March 2024 the Charity had commitments to make future minimum lease payments under non-cancellable operating leases as follows:

	2024	2023
	£	£
Not later than 1 year	60,540	85,192
Later than 1 year and not later than 5 years	35,898	49,292
	96,438	134,484

26. RELATED PARTY TRANSACTIONS

During the year the charity paid £14,167 (2023: £13,543) for rent and insurance to a Council Member.

During the year the charity received income of £nil (2023: £167) from a company in which a Council Member is also a director.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2024

27. GENERAL RESERVES

At 31 March 2024 there is a surplus on unrestricted free reserves of £324,581. Excluding the long term bank loans and the pension deficit, there is a surplus of £698,354.

THE HARTLEPOOL HOSPICE LIMITED

England & Wales - Charity number 510824

Accounts

Registered number: 01525658
Charity number: 510824

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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COUNCIL MEMBERS' REPORT AND FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2023

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

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THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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**REFERENCE AND ADMINISTRATIVE DETAILS OF THE CHARITY, ITS COUNCIL MEMBERS AND
ADVISERS
FOR THE YEAR ENDED 31 MARCH 2023**

Council Members

Mr R Priestman, Chair
Mrs L Jones, Vice chair
Mr F M Gibbon
Mrs J Regan, Treasurer
Mr C Shotton
Mr J F Ainslie
Mrs A Barber
Mr S T Chacko
Mrs K Martin (resigned 31 July 2023)
Mr P Jones-King (resigned 29 September 2022)
Dr J Druce
Mr P L H Bowes (appointed 27 July 2023)
Dr A L Brown (appointed 30 March 2023)

Company Registered Number

01525658

Charity Registered Number

510824

Registered Office

Alice House, Wells Avenue, Hartlepool, TS24 9DA

Chief Executive Officer

Ms T Woodall retired September 2022

Co- chief executive officers (appointed September 2022):

Sandra Britten Chief Executive (Operational)

Nicola Haggan Chief Executive (Non Operational)

Independent Auditors

Waltons Business Advisers Limited, Maritime House, Harbour Walk, The Marina, Hartlepool, TS24 0UX

Bankers

Lloyds TSB, 132 York Road, Hartlepool, TS26 9DD

Solicitors

Tilly Bailey & Irvine LLP, York Chambers, York Road, Hartlepool, TS26 9DP

Director of Information Governance (Chief Executive Operational)

Ms S Britten

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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**REFERENCE AND ADMINISTRATIVE DETAILS OF THE CHARITY, ITS COUNCIL MEMBERS AND
ADVISERS (CONTINUED)**
FOR THE YEAR ENDED 31 MARCH 2023

Director of Finance

Mrs K Burrell

Senior Manager Clinical Services

Ms K Gibson

Senior Manager Corporate Services (Chief Executive Non Operational)

Ms N Haggan

Senior Manager Fundraising

Ms J Hildreth

Senior Manager Retail

Ms K Witherley

Senior Manager Therapeutic Support Services

Ms J Grocott

Senior Manager Business & Communications

Mr G Hildreth

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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COUNCIL MEMBERS' REPORT
FOR THE YEAR ENDED 31 MARCH 2023

The Council Members, who are also Non-Executive Directors of the Charity for the purposes of the Companies Act, submit their Annual Report together with the audited Financial Statements of The Hartlepool Hospice Limited (the charity) for the year ended 31 March 2023. The Council Members confirm that the Annual Report and Financial Statements of the Charity comply with the current statutory requirements, the requirements of the Charity and the Charity's governing document and the provisions of the Statement of Recommended Practice (SORP) applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS102) (effective 1 January 2019).

Since the Charity qualifies as small under section 382 of the Companies Act 2006, the Strategic report required of medium and large companies under the Companies Act 2006 (Strategic Report and Directors' Report) Regulations 2013 has been omitted.

Structure, governance and management

Governing document

The Charity is a company limited by guarantee and incorporated in England and Wales. It is governed by its Memorandum and Articles of Association adopted on 31 October 1980 and last amended on 26 September 2013.

Governing body

The Council is responsible for the overall governance of the Charity. Council Members are either elected or co-opted and there must be a minimum of three Council Members, there is no maximum number of Council Members. The board will be made up of not less than 2 lay Council Members (meaning not appointed to act as a professional advisor) and such number of professional Council Members as the Council Members consider appropriate. Each Council Member shall retire from office at the fourth annual general meeting following the date of his appointment. Any professional director who so retires is eligible for re-election by the members or the directors as appropriate.

The Hartlepool Hospice Limited is trading as Alice House Hospice.

The Council aim to maintain a balanced skills and experience base by identifying skills shortages when an opening exists for a new member.

Effective partnership and clarity of differentiation between governance and management roles continues to contribute significantly to our success. Apart from the AGM, Council meetings were bi-monthly. At Council meetings the Council Members review performance against agreed strategy and financial performance against agreed budgets. New Council Members receive an induction pack containing everything they need to know about the Charity and its work for effective and informed decision making. The Council Members take full ownership of the Charity's philosophy, five year rolling strategy and annual income and expenditure budgets.

The Council delegates the exercise of certain powers in connection with the financial control of the Charity as set out below. This is controlled by requiring regular reporting back to the Council, so that all decisions made under delegated powers can be ratified by the full Council in due course.

In setting the pay and remuneration of staff (including the Senior Management Team) the Council Members have regard to local pay conditions for similar roles in similar organisations in the North East region.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2023

Structure, governance and management (continued)

Chief Executive Operational & Chief Executive Non-Operational

The joint leadership roles of Chief Executive Operational and Chief Executive Non-Operational are responsible for the day to day management of the Charity's affairs and for implementing the strategy as agreed by the Council within the boundaries of the budget and various policies and procedures agreed by the Council. The Chief Executive Operational and Chief Executive Non-Operational are assisted by the Council Members.

Corporate Governance

Processes are in place to ensure that performance throughout the organisation is measured and monitored and all employees are subject to performance management and achievement of competencies. Where employees do not perform to expected standards support is provided through individual action plans.

Corporate governance is assured through a myriad of meetings and reporting mechanisms and evaluated against the Charity's strategy. Internal audits are reported on a bi-monthly basis to Council Members through the Chief Executive and Senior Management Team reports.

Finance & Risk Management Sub Committee

The Finance & Risk Management Sub Committee comprises Council Members who are independent of the management and free of any relationship that in the opinion of the Council would interfere with the exercise of independent judgement as members of the Sub Committee. The Sub Committee has six bi-monthly meetings per year. It is responsible for the setting of annual income and expenditure budgets and the monitoring of such, including quarterly year-end forecasts. The Sub Committee ensures proper procedures are in place to manage cash resources prudently, and to maximise income from liquid resources whilst maintaining sufficient funds to meet daily cash requirements. The Sub Committee also advises the Council on the appropriate level of free reserves and of any significant change needed in investment strategy.

Risk Management

The Council have a formal risk management process to assess business risks and implement risk management strategies. This involves identifying the types of risks the Charity faces, prioritising them in terms of potential impact and likelihood of occurrence, and identifying means of mitigating the risks. The Charity maintains a Risk Register, which is regularly reviewed and updated to reflect identified risks. As part of this process the Council Members review the adequacy of the Charity's current internal controls and the costs of operating particular controls relative to the benefits obtained. Procedures have been established for reporting failings immediately to appropriate levels of management.

The significant risks to which the Charity is vulnerable, and methods in which they are controlled, are:

Loss of income	Regular monitoring of financial performance and setting and reviewing budgets.
Disaster	Health, Safety & Environment Manager review; regular risk management meetings (fire/loss of power etc).
Staff crisis	Use of bank staff – relocate patients to other providers.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2023

Objectives and activities

Charity Objects

In setting objectives and planning for activities, the Council Members have given due consideration to general guidance published by the Charity Commission relating to public benefit, including the guidance 'Public benefit: running a charity (PB2)'.

The Charity's Objects, as set out in the Articles of Association, are to promote the relief of sickness by such charitable means as the charity shall from time to time think fit. The Hospice was established in 1980 as a local charity (Hartlepool Hospice Ltd) delivering specialist palliative care to individuals affected by life limiting illnesses within the local communities of Hartlepool, Stockton-on-Tees and East Durham. The Hospice ensures that people affected by a life limiting illness have the care, comfort and support they need and provides services that add value to life which make a difference to patients and their families.

In furtherance of these Objects:

- It is the Hospice's Vision to ensure that every person, to the last moment of their life has the right to dignity, respect, support and care.
- It is the Hospice's Mission to provide services that add value to life and make a difference to patients and their families.
- The Hospice upholds the following Values:
 - We value each person as an individual.
 - The patient is at the heart of all of our activities.
 - We believe in the importance of celebrating life and relationships.
 - We will demonstrate integrity and professionalism at all times.
 - We will be modern and progressive and seek out new opportunities to develop our services.
 - We will strive to be the best we can and encourage staff and volunteers to actively seek opportunities for personal growth and development.
 - We will exercise responsible financial management to ensure long term sustainability.
- The Hospice subscribes to the following Patients' Charter and will:
 - Respect your dignity, privacy and freedom of choice.
 - Involve you and your family when possible in the decision making of your care, adopting an open and honest approach. Supporting those decisions to fulfil your wishes wherever possible.
 - Provide a Multi-Disciplinary Team with the appropriate skills to meet your ongoing needs.
 - Work collaboratively with other service providers and professionals involved in your care to ensure you receive the help you need when you need it.
 - Support you to live as well as you can for as long as you can.
 - Provide a holistic and individual approach when delivering care and support to you and your family.
 - Provide support not only to you but to those that are important to you as you approach the end of life and during their bereavement.
 - Encourage your involvement in service development by making suggestions as to how we can improve on the services we provide.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2023

Objectives and activities (continued)

Strategic Objectives

As the future of Hospice care evolves in the constantly changing health environment, we have developed positive and effective working relationships that ensure cross organisational integration and representation through different working groups, to identify pressures within the healthcare system and to generate innovative solutions to patient service problems. The Hospice has therefore identified the following strategic goals within the Five Year Strategy (2020-2025), which is refreshed annually:

- We will ensure all of our services are of a high quality and are delivered safely with compassion and dignity.
- We will ensure our organisation is governed and managed in accordance with best practice.
- We will seek out opportunities to support our communities in all of their interactions with us.

The strategy provides a Patients, Trustees and Staff Charter which confirms our intentions and provides a commitment to collective responsibility and organisational cohesion.

The following departmental sub strategies have also been developed, with their objectives aligning to the strategic goals of the Hospice's Five Year Strategy 2020-2025:

- Clinical
- Therapeutic Support Services
- Information Governance & Technology
- Human Resources
- Communications
- Fundraising
- Retail
- Finance

Activities

The Hospice is an independent charity that is committed to offering high quality, holistic, non-judgmental care which is free to all at the point of delivery regardless of race, religion or belief, sex, sexual orientation, gender reassignment, disability, pregnancy and maternity. The Hospice currently offers a comprehensive range of services from our purpose-built Hospice in Wells Avenue, Hartlepool, which responds to local need. The Hospice provides an 18 bedded unit for Inpatient Services. Day Hospice and Therapeutic Support Services are delivered from the Hospice's Holistic Wellbeing Centre which is set within the Hospice grounds. The Hospice's clinical services are Consultant led and supported by a Multi-Disciplinary Team of professionals who provide patients with holistic and individualised care.

The Hospice delivered the following specialist palliative care services during 2022/2023:

- Ten inpatient beds providing short-term specialist palliative care for symptom control and end of life care.
- Six residential beds providing long-term nursing care for palliative patients.
- Two inpatient beds providing emergency end of life care for patients from North Tees & Hartlepool NHS Foundation Trust.
- Day Hospice.
- Holistic Wellbeing Services.
- Adult Bereavement Counselling Services
- Children's Bereavement Counselling Services
- 24 Hour Helpline

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2023

Achievements and performance

Main achievements of the Charity

It has been a challenging few years with the impact of Brexit, the Coronavirus Pandemic and the Russia-Ukraine war continuing to affect the UK's economy. Whereas the Coronavirus Pandemic brought with it new challenges in the way that the Hospice adapted and continued to deliver its services safely, which required a responsive and innovative approach at a time of rapidly changing guidance and legislation, 2022/2023 has presented significant financial challenges as rising inflation and the cost of living crisis has resulted in increased operating costs.

Yet through these difficult times the warmth, generosity and dedication of our supporters, staff and volunteers has ensured that we have continued to provide care and support to the communities of Hartlepool, Tees Valley and East Durham. As we learn to live with Covid-19, in 2022/2023 we were delighted to see an increase in the number of supporters attending our fundraising events and visiting our charity shops.

Strategic Goals

We will ensure all of our services are of a high quality and are delivered safely with compassion and dignity. The Hospice is registered with the Care Quality Commission to carry out the following regulated activities at Alice House, Wells Avenue, Hartlepool, TS24 9DA for adults aged 18 years and over:

- Treatment of Disease, Disorder or Injury

Alice House Hospice is registered with the following conditions:

- To accommodate up to a maximum of 18 patients overnight.
- To provide a service for people over the age of 18 years old.
- The registered provider's regulated activity is managed by a Registered Manager.
- The provider location where regulated activity can be carried out is: Alice House, Wells Avenue, Hartlepool, TS24 9DA.

We have held regular Provider Engagement meetings (quarterly) with our CQC Inspector through Microsoft Teams and have contacted them for advice when necessary.

There have been no formal complaints made in the previous 12 months.

The Care Quality Commission has not taken any enforcement actions against Alice House Hospice during 2022/2023. There have been no special reviews or investigations carried out by the Care Quality Commission during this reporting period.

The Hospice's last inspection by the Care Quality Commission was unannounced and carried out on 23 March 2015. The formal report and rating from the inspection was received on 20 August 2015 and the Hospice received an overall rating of Good.

The Hospice participated in a virtual interview with the Care Quality Commission on 27 June 2022 as part of their monitoring approach, with a focus on safety, access and leadership. The Hospice received notification via the Monitoring Summary Record that the Care Quality Commission had reviewed the information and data made available to them and no further regulatory activity was indicated at the time.

We have continued working in close collaboration with the Hospices North East & North Cumbria Collaborative and Hospice UK's Innovation and Clinical ECHO Networks to ensure shared learning and best practice.

We will ensure our organisation is governed and managed in accordance with best practice.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2023

Achievements and performance (continued)

The Board receive updates from all members of the Senior Management Team for each meeting to ensure transparency and service developments are always approved by the Board.

All of the Board have fulfilled their mandatory training requirements.

During 2022/2023 the Board completed a full review of the Hospice's governance processes to ensure that they remained 'fit for purpose' and were equipped to lead the Hospice within a framework of prudent and effective controls, enabling risk to be assessed and managed. Trustees adopted the Charity Governance Code for Larger Charities (Charity Governance Code Steering Group, refreshed Code published December 2020) as the audit tool. One of the outcomes from the review was for Trustees to each individually support a member of the Senior Management Team with the review, management and performance of their departmental sub strategies.

We will seek out opportunities to support our communities in all of their interactions with us.

Collaboration has been high on our agenda and we have continued to work with the North Tees & Hartlepool Education Alliance on educating care homes on palliative and end of life care in order to reduce hospital admissions and to help more patients to achieve their preferred place of care.

The Hospice also continues to be an integral partner of the Hospices North East & North Cumbria Collaborative, who take a partnership approach to improving palliative and end of life care for all patients, regardless of demography or diagnosis.

The Hospice is a member of Hartlepool Economic & Business Forum and as members and regular attendees of the Forum, we engage with our local authority, business community and other key stakeholders, to share information and identify opportunities for collaboration and partnership working.

Post-COVID, we strived to re-establish ourselves in the region's flourishing business community and this has borne fruit, with the recruitment of two new Hospice Patrons this year and a notable upturn in networking opportunities, corporate engagement and business referrals.

Activities

During 2022/2023, the Hospice prioritised the following three domains of Patient Safety, Clinical Effectiveness and Patient Experience:

- **Implementing an Electronic Recording System for Clinical Incidents (Patient Safety)**
Patient safety audits in the previous year identified that the manual reporting system for clinical incidents was cumbersome and slow, with duplication of effort and cross checks required to ensure accuracy of information being recorded for multiple reporting requirements. A subsequent process mapping exercise improved the timing for the completion of the clinical incident reporting forms, however it remained a manual process for recording of clinical incidents. During 2022/2023 a clinical incident database has been designed, developed and implemented, which has greatly improved both efficiency and accuracy with all information being recorded centrally for reporting purposes.
- **SystmOne Hospital Palliative Care Module (Clinical Effectiveness)**
The Hospice gained remote access to the Hospital Palliative Care Module of SystmOne in 2018 and in 2021 gained access to the Integrated Clinical Environment (ICE). All Hospice referrals and admissions are entered into SystmOne, with a limited number of trained clinicians trained to view patient information. In order to move towards fully utilising SystmOne as the Hospice's electronic patient record system, during 2022/2023 all clinical staff completed training on the Hospital Palliative Care Module with the aim of fully transferring to electronic records during 2023/2024.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2023

Achievements and performance (continued)

- **Rapid Response (Patient Experience)**
The Hospice received funding from North Tees & Hartlepool NHS Foundation Trust in 2022/2023 to develop a pilot Rapid Response Out-of-Hours Admission Service for patients on the Care for the Dying Patient Document, with the Hospice gradually moving towards 24 hour access and admission in order to reduce Accident & Emergency and Acute bed admissions. The pilot started on 01 October 2022 and has been extended to include patients on the Care for the Dying Patient Document from all wards within the University Hospital of North Tees. The service will be extended to include emergency admissions from the community in late 2023. The Hospice has extended admissions from Monday-Friday to 7 days per week and will be increasing the admission times during 2023/2024 from 09:00-17:00 to 08:00-20:00.

As a result of the economic climate and cost of living crisis in 2022/2023, the Hospice had to make the difficult decision to close the following enhanced services in order to maintain essential core services:

- **Community Bereavement Services**
The Hospice provides bereavement services to patients and their families accessing Hospice services. Up until December 2022, the Hospice also provided bereavement support to bereaved adults who had been referred via external services from the local communities of Hartlepool, Stockton and East Durham. This was a strongly established service since 2007 and was in high demand, with the Hospice receiving on average over 60 referrals a month for this free service. Without funding the Hospice had to make the difficult decision to close the community bereavement service from December 2022. The Hospice continues to provide children's bereavement services to external referrals but we are only able to do this through two year funding from a local business for 2022/2023 and 2023/2024.
- **Long Term Care Unit**
Due to an increasing funding deficit, the Hospice made the difficult decision to close its 6 Continuing Healthcare funded beds on the Long Term Care Unit in March 2023. The Hospice was receiving approximately £275,000 per year from Continuing Healthcare (CHC) but with operating costs of just over £500,000 the deficit could not be sustained from Hospice funds. Closure of these beds will have directly impacted GP, A&E and hospital admissions and placed further strain and pressure on an already struggling system within the NHS. It is anticipated that future patients who would have accessed these beds will now be placed in nursing homes but will spend a significant amount of time accessing NHS services due to complexity and high medical needs. The Long Term Care Unit supported both community and hospital discharge and was part of the discharge pathway for other hospices in the Tees Valley patch, who will also be impacted by the closure potentially causing patients to remain in hospice beds for longer periods until suitable nursing home beds can be identified.
- **Virtual Reality Studio**
In August 2022 the Hospice's Board of Trustees made the decision to close NEVRlabs, which was set-up by the Hospice as a fundraising initiative. The project was a response to traditional fundraising methods which were severely compromised during the COVID-19 lockdown periods and was intended as a new and sustainable way of creating revenue, whilst introducing a new audience to the Hospice. However, despite regular custom and a number of successful partnerships with schools and businesses, NEVRlabs was unable to attract the level of income needed to support the Hospice. The ongoing impact of COVID-19, cost of living crisis and the end of the Government's Kickstart Scheme in September 2022, which provided funding for many of NEVRlabs staff, resulted in the closure of NEVRlabs on 14 August 2022. Like many organisations in Hartlepool and beyond, the Hospice must invest carefully and focus on its priorities. As the economy continued to head towards further uncertainty, Trustees reviewed their commitments and felt that it was the most financially responsible thing to do in order to help protect the future of the Hospice. The difficult decision was therefore made to close NEVRlabs and move all virtual reality services back to the Hospice, thereby returning the project to its original focus of offering entertainment and wellbeing support to Hospice patients. Equipment from NEVRlabs which could not be used within the Hospice was sold, with all funds being directed towards patient care.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2023

Achievements and performance (continued)

Factors relevant to achieve objectives

It is acknowledged within the NHS Tees Valley Place Integrated Care Board's Adult Palliative and End of Life Care Strategy that there is historic disparity in the way that service providers are funded, which is reflective of the historic Clinical Commissioning Group footprints. During 2022/2023 meetings have taken place both in Parliament and with Tees Valley MPs, the Minister of State in the Department of Health & Social Care and the Chief Executive of the North East & North Cumbria ICB to discuss the commissioning challenges in the Tees Valley region and to challenge when equitable funding for palliative and end of life care will be implemented in accordance with the Statutory Guidance for Integrated Care Boards on Palliative & End of Life Care (July 2022).

Alice House Hospice has experienced significant pressure over the last 3 years due to the inability of another local hospice to provide care and the consequential demand on our beds. Through the partnership working of Tees Valley Hospices, we have been able to secure additional temporary funding for increasing our specialist beds to meet demand. We will continue to monitor capacity and demand for future commissioning discussions.

The Hospice has been working in collaboration with the Tees Valley Task & Finish Groups (including Contracting & Finance, Service Delivery and Education & Training) established by NHS Tees Valley Place Integrated Care Board (ICB) to make recommendations for the key themes highlighted in their Developing an Adult Palliative & End of Life Care Strategy. The aim of the strategy is to commission and deliver high quality, cost effective and resilient systems of care across Tees Valley so that patients approaching the end of life and their families have a positive, high quality and personalised experience wherever they wish to be cared for.

Tracy Woodall had been in post as Chief Executive since 17 November 2008 and due to ill health made the difficult decision to retire in September 2022. Trustees appointed a joint leadership role, with Sandra Britten as Chief Executive Operational and Nicola Haggan as Chief Executive Non-Operational. Both incumbents have a long-term knowledge of the Hospice (since September 2000 and April 2002 respectively), its workings, its threats and failures, but also a realistic approach to solutions and opportunities. Trustees felt that they were also familiar trusted faces to restore and maintain employee morale and bring stability at a time of economic uncertainty. The joint Chief Executive roles have brought a more stable leadership structure and long-term cost savings as both also continue to carry out the duties of their original substantive posts (Deputy Chief Executive/Director of Information Governance and Deputy Chief Executive/Senior Manager Corporate Services), removing the need for the post of Deputy Chief Executive.

The Chief Executive (Operational) has direct responsibility for the effective delivery of the following services and support services:

- Clinical Services
- Finance
- Facilities/Health & Safety
- Information Governance
- Administration
- Housekeeping

The Chief Executive (Non-Operational) will have direct responsibility for the effective delivery of the following services and support services:

- Human Resources
- Therapeutic Support Services
- Fundraising, Trusts & Legacies
- Retail
- Lottery
- Communications & Corporate Business Partnerships
- Catering

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2023

Achievements and performance (continued)

Financial review

We continue to run a highly professional organisation with a stable financial position which reflects ethical fundraising and cash holding policies decided by our Council Members.

The credit rating during the reporting period has remained at level A.

Reserves policy

Free reserves available for use by the Charity are deemed to be those that are readily realisable, less funds whose uses are restricted or else designated for particular purposes.

As a matter of policy, the Charity aims to build up and hold a maximum of two months running costs as reserves. This objective is secondary to the achievement of the Charity's strategic objectives as stated in the current strategy, so that reserves will not be built or maintained at the expense of planned or current patient care.

Two months running costs would be approximately £588k. With free reserves (after removing long term liabilities) of £376k the Charity is behind target. The Charity expects to build the reserves over the next year to support the Charity as it recovers income streams post Covid.

Aspirational objectives for reserves: The Charity aims to become financially independent of Clinical Commissioning Group contracts as a security measure against diminishing contract values and the uncertainty of the level of tariff funding arising from the End of Life & Palliative Care Review. Nevertheless, it will still seek appropriate contracts to advance patient services. The achievement of this will be through the continuation of regular monitoring of financial management.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2023

Financial review and results for the year

The Charity has made a deficit before depreciation of £22,916 but after depreciation a deficit of £220,617 has been declared. The impact of the Covid-19 pandemic has still been significant along with the rising cost of inflation. Donations income increased by £69k but the Charity received support in the form of additional Hospice funding (£191k) last year that ensured the Hospice was able to continue to provide its services throughout the pandemic, this has now ended.

The detailed results are as follows:

Gross income increased marginally by 0.7% to £3.8m, while expenditure on charitable activities increased by 8% to £3.09m. After taking depreciation into account total resources expended of £4.07m (2022: £3.96m) resulted in a net deficit for the year of £221k (2022: £140k).

Income received in furtherance of charitable objects totalled £1.7m. Expenditure incurred on furthering charitable objects was £3.09m. The Charity supports its charitable activities with successful fundraising activities, including charity shops and a lottery.

Fundraising activities, donations, legacies and Kickstart funding generated a surplus of unrestricted income of £962k to be used to pursue charitable activities.

£322k of grants were received to support the work of the Hospice, this included £158k of Kickstart monies.

The lottery generated a surplus of £135k (2022: £155k) and Trading Activities generated a surplus of £159k (2022: £73k).

£10k of unrestricted income was spent on the governance costs of the organisation.

Total reserves stand at £3m (2022: £3.2m), including £426k of restricted reserves.

At 31 March 2023 there is a deficit on unrestricted free reserves of £123k. Excluding the long term bank loans, a loan which was used to purchase the freehold and develop the Wellbeing Centre and the Coronavirus Business Interruption Loan, and the pension deficit, there is a surplus of £376k.

Investment policy and performance

The Memorandum of Association authorises the Council Members to invest surplus funds as may be thought fit. The Council Members' policy is to hold any surplus cash on deposit to obtain the most attractive interest rate available. The Council Members' have directed that funds will be used in the charitable activities of the company instead.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2023

Fundraising

The Hospice's Fundraising Sub Strategy 2020-2025 has the following objectives:

- Develop strong partnerships with organisations and individuals.
- Be proactive, research and implement opportunities to embrace the current climate.
- Develop sustainable corporate relationships.
- Ensure our approach to fundraising is respectful and non-aggressive and compliant with the Fundraising Regulator.
- Promote the Hospice in a positive and professional manner.

Our shops remain very busy and continue to perform well against budget. However, the loss of many volunteers following COVID-19 continues to be a challenge in keeping our shops open six days a week. The cost of living crisis has impacted the communities which we serve but this has resulted in increased demand for our charity shops. The current economic climate also affects our general Fundraising, with the emergence of more local charities to meet the growing needs of the community, who are all chasing what is understood to be a smaller pool of available donations.

We have successfully responded to the public's post-COVID appetite for leisure and socialising, having hosted the most successful and well attended versions of a number of established events, which are forecast to continue this in upward trend. A proactive post-Lockdown approach to community engagement has led to a number of fruitful new contacts and income generating opportunities. Our essential focus on reducing expenditure has also led to a leaner Fundraising outlay, meaning that the majority of events are staged at little to no financial risk, which in turn has seen a return to 'no-frills' or traditional fundraising methods, to which the public have responded positively. This is evident in our supermarket tombola stalls, bucket collections and presence at the recent Tall Ships Festival.

Our increased catchment area has enabled us to 'broaden the net' and provided additional opportunities for our Fundraisers to reach donors who were previously beyond our perceived boundaries.

Alice House Hospice is a subscribed member of the Fundraising Regulator and as such adheres to the Code of Fundraising Practice. We review each Code on a rolling programme to ensure that we are compliant in all areas. An action plan is in progress for any areas where improvements are to be made to ensure full compliance with the Code and is managed by the Senior Manager Fundraising.

All Staff and Volunteers within Income Generation have access to the Code of Fundraising and the Institute of Fundraising 'Treating Donors Fairly' policy.

Plans for the Future

Alice House has worked closely with North Tees & Hartlepool NHS Foundation Trust and has been commissioned for a second year in 2023/2024 to provide the following services:

- Rapid Response Out-of-Hours Admissions Service, with the Hospice moving towards 24 hour access and admission in order to reduce Accident & Emergency and Acute bed admissions. The service will be extended to include emergency admissions from the community in late 2023.
- NHS Staff Wellbeing Services, with referrals from the NHS Trust's Occupational Health to the Hospice's Holistic Wellbeing Support, including holistic therapies, restorative sessions, pain management and menopause support.

The Hospice has prioritised the following three domains of Patient Safety, Clinical Effectiveness and Patient Experience:

- Falls Prevention (Patient Safety)
Palliative patients are at greater risk of injury when they fall in comparison to older people who do not

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2023

have a palliative condition, as they can have falls risks specific to palliative care such as symptomatic decline, opioid use and brain metastases. From April 2022 to March 2023, Alice House Hospice recorded 31 falls by 19 patients. Patients currently receive a falls assessment within 6 hours of admission and for those identified as being at risk of falling, all receive a care plan/prescription of care within 24 hours of admission. If a patient has a history of falls prior to admission preventative measures are put in place to ensure their safety. In the event of a fall, a falls analysis is conducted, care plans are updated, risk assessments are conducted if required and a medical assessment is carried out. Other professionals are involved as appropriate, i.e. Physiotherapist and Occupational Therapist. Patients are also encouraged to use the nurse call system for assistance and regular staff checks are conducted. Alice House Hospice respect that many patients like to remain independent and to maintain their dignity, for example attempting to go to the toilet by themselves or do not appreciate/accept that their physical condition has deteriorated as much as it has and may psychologically still perceive themselves as before their illness, (sudden onset of symptoms). Although we recognise that falls among older people are common, we also recognise that some are avoidable and we aim to lessen the risk where possible through a range of measures including additional training for staff in falls prevention, use of FallSafe care bundle, visual aids, identification of medications which contribute to falls.

- **Implementation of the Patient Safety Incident Response Framework (Clinical Effectiveness)**
The Patient Safety Incident Response Framework (PSIRF) sets out the NHS's approach to developing and maintaining effective systems and processes for responding to patient safety incidents for the purpose of learning and improving patient safety. As Alice House Hospice are commissioned to provide services, PSIRF is a contractual requirement and is mandatory for providers of NHS funded care. The Hospice will be implementing the Patient Safety Incident Response Framework when it is introduced in Autumn 2023.
- **Increasing Inpatient Volunteers to Support Agitated Patients at Night (Patient Experience)**
Many of our inpatients can feel anxious or frightened, especially at night and fear going to sleep as they do not feel ready not to wake up again. We have found that some of our patients will stay in their chair overnight due to fear of never getting out of bed again. Anxiety can be heightened when the patient is alone and their visitors have left for the day. Visitors can spend the night at Alice House Hospice but many have other commitments such as other family members and work commitments or even just find it difficult. Although the Inpatient Unit is well staffed, there are still many duties to be carried out and patients' needs to be met, which can restrict staff from spending long periods of time giving an individual patient reassurance and comfort. Patients with conditions such as dementia can often be more confused in the evening and during the night and may experience sundowning, which is a set of symptoms or behaviours that include difficulty sleeping, anxiety, agitation, hallucinations, pacing and disorientation. We have identified that we may not require more qualified members of staff to give people that one to one support. We will recruit and train volunteers to evolve the services offered to our patients and transform and enrich the current offer of support by offering reassurance that everything is alright and that someone is with them. This may just be to sit quietly with the person or to find out if they need anything, such as a drink. It may be to walk with a person so they do not feel trapped and are better able to orientate to their surroundings. Some patients are unable or reluctant to use the nurse call system, volunteers will not be required to give medication but will be able to use the nurse call system for patients who are unable or reluctant to do so.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2023

Going concern

The financial position of the Charity is under constant review and closely monitored by Trustees, who will take action as needed to preserve the financial stability of the Hospice. The Risk Register is regularly reviewed and updated to reflect the exposures faced by the Charity.

After making appropriate enquiries, the Trustees have an expectation that the Charity has adequate resources to continue delivering services for the foreseeable future. For this reason they continue to adopt the going concern basis in preparing financial statements.

Employees

Employees are fully involved with the development and delivery of the strategy and it is integral to all daily activities and used to support their appraisals.

Regular staff updates and a summary of the key points from each Senior Management Team meeting are communicated to all employees to ensure that they are aware of the activities of the Charity.

Volunteers

The survival and growth of the Charity could not be achieved without the unstinting support of the volunteer workforce, who enable the fulfilment of the Hospice's Vision by complimenting the work of the patient care staff, supporting fundraising efforts and serving as Council Members. The volunteers bring skills, knowledge and experience which greatly enhances the professional profile of the Charity. This in turn enables the Charity to reach further into the community, not only by caring for those with life limiting illnesses but by offering opportunities for the development of skills and expertise which individuals can take with them in their own personal development, back into the community, thus enhancing the profile of the Charity and encouraging more individuals to offer their service on a voluntary basis.

Council Members' liability

The Council Members guarantee to contribute an amount not exceeding £1 to the assets of the Charity in the event of winding up.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2023

Statement of Council Members' responsibilities

The Council Members (who are also the directors of the Charity for the purposes of company law) are responsible for preparing the Council Members' report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company law requires the Council Members to prepare financial statements for each financial year. Under company law, the Council Members must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the Charity and of its incoming resources and application of resources, including its income and expenditure, for that period. In preparing these financial statements, the Council Members are required to:

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles of the Charities SORP (FRS 102);
- make judgments and accounting estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards (FRS 102) have been followed, subject to any material departures disclosed and explained in the financial statements;
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the Charity will continue in business.

The Council Members 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 enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the Charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

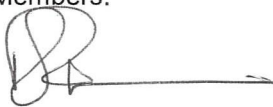
Disclosure of information to auditors

Each of the persons who are Council Members at the time when this Council Members' report is approved has confirmed that:

- so far as that Council Member is aware, there is no relevant audit information of which the charity's auditors are unaware, and
- that Council Member has taken all the steps that ought to have been taken as a Council Member in order to be aware of any relevant audit information and to establish that the charity's auditors are aware of that information.

Auditors

The auditors, Waltons Business Advisers Limited, have indicated their willingness to continue in office. The designated Council Members will propose a motion reappointing the auditors at a meeting of the Council Members.



Mr R Priestman
(Chair of Trustees)



Mrs J Regan
(Treasurer)

23 November 2023

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE HARTLEPOOL HOSPICE LIMITED T/A
ALICE HOUSE HOSPICE**

UNQUALIFIED OPINION

We have audited the financial statements of The Hartlepool Hospice Limited T/A Alice House Hospice (the 'charity') for the year ended 31 March 2023 which comprise the Statement of financial activities, the Balance sheet, the Statement of cash flows and the related notes, 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 charitable company's affairs as at 31 March 2023 and of its incoming resources and application of resources, including its income and expenditure for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

BASIS FOR OPINION

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditors' responsibilities for the audit of the financial statements section of our report. We are independent of the charitable company in accordance with the ethical requirements that are relevant to our audit of the financial statements in the United Kingdom, including the Financial Reporting Council'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 Council Members' 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 charitable company's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

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

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE HARTLEPOOL HOSPICE LIMITED T/A
ALICE HOUSE HOSPICE (CONTINUED)**

OTHER INFORMATION

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

We have nothing to report in this regard.

OPINION 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 Council Members' Report for the financial year for which the financial statements are prepared is consistent with the financial statements.
- the Council Members' Report has been prepared in accordance with applicable legal requirements.

MATTERS ON WHICH WE ARE REQUIRED TO REPORT BY EXCEPTION

In the light of our knowledge and understanding of the charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the Council Members' Report.

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

- adequate accounting records have not been kept, or returns adequate for our audit have not been received from branches not visited by us; or
- the financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of Council Members' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit; or
- the Council Members were not entitled to prepare the financial statements in accordance with the small companies regime and take advantage of the small companies' exemptions in preparing the Council Members' Report and from the requirement to prepare a Strategic Report.

RESPONSIBILITIES OF COUNCIL MEMBERS

As explained more fully in the Council Members' responsibilities statement, the Council Members (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 Council Members 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 Council Members are responsible for assessing the charitable company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE HARTLEPOOL HOSPICE LIMITED T/A
ALICE HOUSE HOSPICE (CONTINUED)**

and using the going concern basis of accounting unless the Council Members either intend to liquidate the charitable company or to cease operations, or have no realistic alternative but to do so.

AUDITORS' 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 Auditors' 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:

In identifying and assessing risks of material misstatement in respect of irregularities, including fraud, the audit engagement team:

- Obtained an understanding of the nature of the sector, including the legal and regularity framework that the charitable company operates in and how they are complying with the legal and regularity framework
- Inquired of management and those charged with governance about their own identification and assessment of the risks of irregularities including any known, actual, suspected or alleged instances of fraud,
- Discussed matters about non-compliance with laws and regulations and how fraud might occur including assessment of how and where the financial statements might be susceptible to fraud.

As a result of these procedures we considered the most significant laws and regulations which have a direct impact on the financial statements are FRS 102, Charities SORP (FRS 102), Companies Act 2006 and the charitable company's governing document. We performed audit procedures to detect non-compliance which may have a material impact on the financial statements which included reviewing the financial statements including the council members report and remaining alert to new or unusual transactions which may not be in accordance with the governing documents.

The audit engagement team identified the risk of management override of controls and income recognition as the areas where the financial statements were most susceptible to material misstatement due to fraud. We designed audit procedures to respond to the risk, recognising that the risk of not detecting a material misstatement due to fraud is higher than the risk of not detecting one resulting from error, as fraud may involve deliberate concealment by, for example, forgery or intentional misrepresentations, or through collusion.

Audit procedures performed included, but were not limited to:

- testing manual journal entries and other adjustments
- evaluating the business rationale in relation to significant or unusual transactions and transactions entered into outside the normal course of business
- challenging judgments and estimates
- reviewing income transactions around the year end to look for potential "window dressing".

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 Auditors' Report.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE HARTLEPOOL HOSPICE LIMITED T/A
ALICE HOUSE HOSPICE (CONTINUED)**

USE OF OUR REPORT

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



Heather O'Driscoll FCA (Senior statutory auditor)

for and on behalf of

Waltons Business Advisers Limited

Chartered Accountants

Statutory Auditors

Maritime House

Harbour Walk

The Marina

Hartlepool

TS24 0UX

Date: 28 November 2023

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

**STATEMENT OF FINANCIAL ACTIVITIES (INCORPORATING INCOME AND EXPENDITURE ACCOUNT)
FOR THE YEAR ENDED 31 MARCH 2023**

	Note	Restricted funds 2023 £	Unrestricted funds 2023 £	Total funds 2023 £	Total funds 2022 £
INCOME FROM:					
Donations and legacies	4	297,394	736,923	1,034,317	1,402,823
Charitable activities	5	977,489	729,623	1,707,112	1,438,504
Other trading activities	6	-	1,104,804	1,104,804	978,726
TOTAL INCOME		1,274,883	2,571,350	3,846,233	3,820,053
EXPENDITURE ON:					
Raising funds	8	100,999	871,191	972,190	1,095,397
Charitable activities	9	1,187,468	1,907,856	3,095,324	2,864,958
TOTAL EXPENDITURE		1,288,467	2,779,047	4,067,514	3,960,355
NET MOVEMENT IN FUNDS BEFORE OTHER RECOGNISED GAINS/(LOSSES)					
		(13,584)	(207,697)	(221,281)	(140,302)
OTHER RECOGNISED GAINS/(LOSSES):					
Other gains	25	-	664	664	4,655
NET MOVEMENT IN FUNDS		(13,584)	(207,033)	(220,617)	(135,647)
RECONCILIATION OF FUNDS:					
Total funds brought forward		439,434	2,785,913	3,225,347	3,360,994
Net movement in funds		(13,584)	(207,033)	(220,617)	(135,647)
TOTAL FUNDS CARRIED FORWARD		425,850	2,578,880	3,004,730	3,225,347

The Statement of Financial Activities includes all gains and losses recognised in the year.

The notes on pages 25 to 50 form part of these financial statements.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)
REGISTERED NUMBER: 01525658

BALANCE SHEET
AS AT 31 MARCH 2023

	Note	2023 £	2022 £
FIXED ASSETS			
Tangible assets	14	3,128,077	3,309,093
Investments	15	100	100
		3,128,177	3,309,193
CURRENT ASSETS			
Debtors	16	198,470	500,537
Cash at bank and in hand	22	522,648	493,379
		721,118	993,916
Creditors: amounts falling due within one year	17	(345,096)	(458,344)
		376,022	535,572
NET CURRENT ASSETS			
TOTAL ASSETS LESS CURRENT LIABILITIES		3,504,199	3,844,765
Creditors: amounts falling due after more than one year	18	(498,300)	(617,585)
NET ASSETS EXCLUDING PENSION LIABILITY		3,005,899	3,227,180
Defined benefit pension scheme liability	25	(1,169)	(1,833)
TOTAL NET ASSETS		3,004,730	3,225,347
CHARITY FUNDS			
Restricted funds	19	425,850	439,434
Unrestricted funds	19	2,578,880	2,785,913
TOTAL FUNDS		3,004,730	3,225,347

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)
REGISTERED NUMBER: 01525658

BALANCE SHEET (CONTINUED)
AS AT 31 MARCH 2023

The Council Members acknowledge their responsibilities for complying with the requirements of the Act with respect to accounting records and preparation of financial statements.

The financial statements have been prepared in accordance with the provisions applicable to entities subject to the small companies regime.

The financial statements were approved and authorised for issue by the Council Members on
23 November 2023 and signed on their behalf by:



Mr R Priestman
(Chair of Trustees)



Mrs J Regan
(Treasurer)

The notes on pages 25 to 50 form part of these financial statements.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED 31 MARCH 2023

	Note	2023 £	2022 £
CASH FLOWS FROM OPERATING ACTIVITIES			
Net cash used in operating activities	21	176,350	66,897
CASH FLOWS FROM INVESTING ACTIVITIES			
Proceeds from the sale of tangible fixed assets		25,353	-
Purchase of tangible fixed assets	14	(48,679)	(125,795)
NET CASH USED IN INVESTING ACTIVITIES		(23,326)	(125,795)
CASH FLOWS FROM FINANCING ACTIVITIES			
Repayments of borrowing		(113,287)	(81,922)
Repayments of finance leases		(9,804)	(9,803)
Gain on pension deficit		(664)	-
NET CASH USED IN FINANCING ACTIVITIES		(123,755)	(91,725)
CHANGE IN CASH AND CASH EQUIVALENTS IN THE YEAR		29,269	(150,623)
Cash and cash equivalents at the beginning of the year		493,379	644,002
CASH AND CASH EQUIVALENTS AT THE END OF THE YEAR	22	522,648	493,379

The notes on pages 25 to 50 form part of these financial statements

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023

1. GENERAL INFORMATION

The Charity is a private company incorporated in England and Wales and limited by guarantee. The members of the company are the Council Members named on page 2. In the event of the Charity being wound up, the liability in respect of the guarantee is limited to £1 per member of the Charity.

The registered address is:

Alice House
Wells Avenue
Hartlepool
TS24 9DA

2. ACCOUNTING POLICIES

2.1 Basis of preparation of financial statements

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

The Hartlepool Hospice Limited T/A Alice House Hospice 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.

2.2 Fund accounting

General funds are unrestricted funds which are available for use at the discretion of the Council Members in furtherance of the general objectives of the Charity and which have not been designated for other purposes.

Restricted funds are funds which are to be used in accordance with specific restrictions imposed by donors or which have been raised by the Charity for particular purposes. The costs of raising and administering such funds are charged against the specific fund. The aim and use of each restricted fund is set out in the notes to the financial statements.

2.3 Going concern

The financial position of the Charity is under constant review and closely monitored by Trustees, who will take action as needed to preserve the financial stability of the Hospice. The Risk Register is regularly reviewed and updated to reflect the exposures faced by the Charity.

After making appropriate enquiries, the Trustees have an expectation that the Charity has adequate resources to continue delivering services for the foreseeable future. For this reason they continue to adopt the going concern basis in preparing financial statements

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023

2. ACCOUNTING POLICIES (CONTINUED)

2.4 Income

All income is recognised 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.

For legacies, entitlement is taken as the earlier of the date on which either: the Charity is aware that probate has been granted, the estate has been finalised and notification has been made by the executor(s) to the Trust that a distribution will be made, or when a distribution is received from the estate. Receipt of a legacy, in whole or in part, is only considered probable when the amount can be measured reliably and the Charity has been notified of the executor's intention to make a distribution. Where legacies have been notified to the Charity, or the Charity is aware of the granting of probate, and the criteria for income recognition have not been met, then the legacy is treated as a contingent asset and disclosed if material.

Gifts donated for resale are included as income when they are sold.

The Council Members acknowledge that they are assets of the Charity as soon as received but due to the fact that a very large number of small value items are received the time and cost of valuing donated goods at receipt would outweigh any benefit to the users of the financial statements of having them so valued.

Where goods are donated under the Gift Aid scheme the Charity is not entitled to the income until the goods are sold and the donor has confirmed that they are gifting the proceeds. In this case the income is included as a donation rather than as a sale.

Income tax recoverable in relation to donations received under Gift Aid or deeds of covenant is recognised at the time of the donation.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023

2. ACCOUNTING POLICIES (CONTINUED)

2.5 Expenditure

Expenditure is recognised once there is a legal or constructive obligation to transfer economic benefit to a third party, it is probable that a transfer of economic benefits will be required in settlement and the amount of the obligation can be measured reliably. Expenditure is classified by activity. The costs of each activity are made up of the total of direct costs and shared costs, including support costs involved in undertaking each activity. Direct costs attributable to a single activity are allocated directly to that activity. Shared costs which contribute to more than one activity and support costs which are not attributable to a single activity are apportioned between those activities on a basis consistent with the use of resources. Central staff costs are allocated on the basis of time spent, and depreciation charges allocated on the portion of the asset's use.

Costs of generating voluntary income are those incurred in seeking voluntary contributions and do not include the costs of disseminating information in support of the charitable activities.

Fundraising costs are the direct costs of operating the charity shops and other trading activities. Support costs are those costs incurred directly in support of expenditure on the objects of the charity and include central costs. Governance costs are those incurred in connection with administration of the Charity and compliance with constitutional and statutory requirements.

2.6 Tangible fixed assets and depreciation

Tangible fixed assets costing £1,500 or more are capitalised and recognised when future economic benefits are probable and the cost or value of the asset can be measured reliably.

Tangible fixed assets are initially recognised at cost. After recognition, under the cost model, tangible fixed assets are measured at cost less accumulated depreciation and any accumulated impairment losses. All costs incurred to bring a tangible fixed asset into its intended working condition should be included in the measurement of cost.

Depreciation is charged so as to allocate the cost of tangible fixed assets less their residual value over their estimated useful lives, using the straight-line method.

Depreciation is provided on the following bases:

Freehold property	- 20/50 years straight line
Plant and machinery	- 7 years straight line
Motor vehicles	- 7 years straight line
Fixtures and fittings	- 7 years straight line
Computer equipment	- 3/5 years straight line
Other fixed assets	- 3 years straight line

2.7 Redundancy/termination payments

Redundancy and termination payments are recognised when an approved formal plan is in place and the employees which it affects have been made aware of the situation.

2.8 Investments

Investments represent the shares held in a subsidiary company which are stated at cost.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023

2. ACCOUNTING POLICIES (CONTINUED)

2.9 Debtors

Trade and other debtors are recognised at the settlement amount after any trade discount offered. Prepayments are valued at the amount prepaid net of any trade discounts due.

2.10 Cash at bank and in hand

Cash at bank and in hand includes cash and short-term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

2.11 Liabilities

Liabilities and provisions are recognised when there is an obligation at the Balance sheet date as a result of a past event, it is probable that a transfer of economic benefit will be required in settlement, and the amount of the settlement can be estimated reliably.

Liabilities are recognised at the amount that the Charity anticipates it will pay to settle the debt or the amount it has received as advanced payments for the goods or services it must provide.

Provisions are measured at the best estimate of the amounts required to settle the obligation. Where the effect of the time value of money is material, the provision is based on the present value of those amounts, discounted at the pre-tax discount rate that reflects the risks specific to the liability. The unwinding of the discount is recognised within interest payable and similar charges.

2.12 Finance leases and hire purchase

Assets obtained under hire purchase contracts and finance leases are capitalised as tangible fixed assets. Assets acquired by finance lease are depreciated over the shorter of the lease term and their useful lives. Assets acquired by hire purchase are depreciated over their useful lives. Finance leases are those where substantially all of the benefits and risks of ownership are assumed by the Charity. Obligations under such agreements are included in creditors, net of the finance charge allocated to future periods. The finance element of the rental payment is charged to the Statement of Financial Activities so as to produce a constant periodic rate of charge on the net obligation outstanding in each period.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023

2. ACCOUNTING POLICIES (CONTINUED)

2.13 Pensions

The Charity contributes to a defined contribution pension scheme and the pension charge represents the amounts payable by the Charity to the fund in respect of the year.

Defined benefit schemes

The Charity makes contributions to the National Health Service Pension Scheme and The Pension Scheme Trust.

The Charity is however unable to identify its share of the underlying assets and liabilities in the schemes and has accounted for contributions as if they were defined contributions schemes as follows:

The amount charged to the statement of financial activities in respect of pension costs is the contributions payable in the year. Differences between contributions payable in the year and contributions actually paid are shown as either accruals or prepayments in the balance sheet.

Amounts included in expenses are allocated between activities on the basis of staff time in line with other support costs.

The Charity has agreed to a deficit funding arrangement and recognises a liability for this obligation. The amount recognised is the net present value of the deficit reduction contributions payable under the agreement that relates to the deficit. The present value is calculated using the discount rate detailed in these disclosures. The unwinding of the discount rate is recognised as a finance cost.

3. CRITICAL ACCOUNTING ESTIMATES AND AREAS OF JUDGMENT

During the year an exercise has been conducted to review the debtors ledger which has historically contained a number of old balances.

These were reviewed and the NHS (as the relevant party) contacted about these debts in order to repay money if necessary. The NHS has replied that the ledgers for these patients are closed and no balance remains.

The Council Members have therefore taken the decision to write off these old balances. In total this has resulted in an increase to debtors of £118,455.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023

4. DONATIONS, LEGACIES AND SIMILAR INCOMING RESOURCES

	Restricted funds 2023 £	Unrestricted funds 2023 £	Total funds 2023 £	Total funds 2022 £
Coronavirus job retention scheme funding	-	-	-	33,293
Donations	-	643,082	643,082	573,841
Legacies	-	62,396	62,396	166,508
Grants	297,394	25,057	322,451	600,031
Other Covid-19 income	-	-	-	23,850
Similar incoming resources	-	6,388	6,388	5,300
Total 2023	297,394	736,923	1,034,317	1,402,823
<i>Total 2022</i>	<i>516,709</i>	<i>886,114</i>	<i>1,402,823</i>	

In 2023 there is £157,944 (2022: £442,659) included in grant income which was received from the Kickstart scheme.

5. INCOME FROM CHARITABLE ACTIVITIES

	Restricted funds 2023 £	Unrestricted funds 2023 £	Total funds 2023 £	Total funds 2022 £
In Patient Unit	924,542	508,496	1,433,038	922,648
Medical	52,947	-	52,947	86,762
Multi Disciplinary Team	-	-	-	34,482
Bereavement	-	40,153	40,153	142,329
National Health Service England	-	-	-	191,141
Insurance income	-	180,974	180,974	61,142
Total 2023	977,489	729,623	1,707,112	1,438,504
<i>Total 2022</i>	<i>933,064</i>	<i>505,440</i>	<i>1,438,504</i>	

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023**

6. FUNDRAISING INCOME

	Unrestricted funds 2023 £	Total funds 2023 £	<i>Total funds 2022 £</i>
Lottery	226,847	226,847	243,567
Fundraising events	147,527	147,527	119,026
Kitchen income	22,879	22,879	21,010
Shop income	672,654	672,654	569,537
Catering and merchandising income	13,471	13,471	12,086
VR centre	21,426	21,426	13,500
Total 2023	1,104,804	1,104,804	978,726
<i>Total 2022</i>	<i>978,726</i>	<i>978,726</i>	

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023

7. TRADING ACTIVITIES

	Restricted funds 2023 £	Unrestricted funds 2023 £	Total funds 2023 £	<i>Total funds 2022 £</i>
Charity trading income				
Charity shop takings	-	672,654	672,654	569,537
Catering and merchandising income	-	13,471	13,471	12,086
VR centre	-	21,426	21,426	13,500
Sub total trading income	-	707,551	707,551	595,123
Grant income (included in note 4)	100,999	-	100,999	291,269
Total income	100,999	707,551	808,550	886,392
Fundraising trading expenses				
Charity shop costs	-	138,675	138,675	133,905
VR centre costs	-	57,619	57,619	77,605
Catering and merchandising costs	-	3,166	3,166	4,106
Salaries	100,999	348,806	449,805	597,491
Total expenditure	100,999	548,266	649,265	813,107
Net income from trading activities	-	159,285	159,285	73,285
Total 2022	-	73,285	73,285	

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023**

8. COST OF RAISING FUNDS

	Unrestricted funds 2023 £	Restricted funds 2023 £	Total funds 2023 £	Total funds 2022 £
Fundraising expenditure	48,486	-	48,486	36,473
Lottery costs	91,835	-	91,835	89,010
Support costs allocated	5,974	-	5,974	8,187
Wages and salaries	136,522	-	136,522	108,512
Depreciation	40,108	-	40,108	40,108
Fundraising trading expenses (note 7)	548,266	100,999	649,265	813,107
Total 2023	871,191	100,999	972,190	1,095,397
<i>Total 2022</i>	<i>804,128</i>	<i>291,269</i>	<i>1,095,397</i>	

9. ANALYSIS OF EXPENDITURE ON CHARITABLE ACTIVITIES

Summary by fund type

	Restricted funds 2023 £	Unrestricted funds 2023 £	Total 2023 £	Total 2022 £
In Patient Unit	1,134,521	1,208,369	2,342,890	2,115,334
Medical	52,947	228,676	281,623	249,828
Multi Disciplinary Team	-	237,381	237,381	271,448
Bereavement & Therapeutic Services	-	233,430	233,430	228,348
Total 2023	1,187,468	1,907,856	3,095,324	2,864,958
<i>Total 2022</i>	<i>1,153,366</i>	<i>1,711,592</i>	<i>2,864,958</i>	

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023

10. ANALYSIS OF EXPENDITURE BY ACTIVITIES

	Activities undertaken directly 2023 £	Support costs 2023 £	Total funds 2023 £	<i>Total funds 2022 £</i>
In Patient Unit	1,185,093	1,157,797	2,342,890	2,115,334
Medical	258,350	23,273	281,623	249,828
Multi Disciplinary Team	217,370	20,011	237,381	271,448
Bereavement & Therapeutic Services	214,818	18,612	233,430	228,348
Total 2023	1,875,631	1,219,693	3,095,324	2,864,958
<i>Total 2022</i>	<i>1,688,615</i>	<i>1,176,343</i>	<i>2,864,958</i>	

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023**

	In Patient Unit 2023 £	Medical 2023 £	Multi Disciplinary Team 2023 £	Bereavement & Therapeutic Services 2023 £	Total funds 2023 £	Total funds 2022 £
Staff costs	1,111,264	131,056	205,186	201,082	1,648,588	1,504,803
Consumables	30,733	-	-	1,427	32,160	22,631
Drugs	-	85,105	-	-	85,105	63,140
Equipment and maintenance	24,404	-	-	-	24,404	21,749
Medical and professional fees	17,523	42,189	12,184	7,351	79,247	66,902
Travel	400	-	-	858	1,258	694
Office costs and sundries	769	-	-	655	1,424	5,762
Facilities	-	-	-	3,445	3,445	2,934
Total 2023	1,185,093	258,350	217,370	214,818	1,875,631	1,688,615
<i>Total 2022</i>	<i>999,549</i>	<i>227,997</i>	<i>251,398</i>	<i>209,671</i>	<i>1,688,615</i>	

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023

	Analysis of Support costs				Total funds 2023	Total funds 2022
	In Patient Unit 2023	Medical 2023	Multi Disciplinary Team 2023	Bereavement & Therapeutic Services 2023		
	£	£	£	£	£	£
Staff costs	726,016	14,500	12,519	11,536	764,571	698,040
Depreciation	151,299	3,148	1,573	1,573	157,593	148,332
Kitchen	40,566	416	414	-	41,396	40,957
Administration	10,841	222	(665)	21	10,419	22,450
Human resources	4,153	79	96	96	4,424	8,884
Management costs	2,817	119	1,478	798	5,212	42,642
Facilities	116,153	2,525	2,525	2,531	123,734	112,521
IT/Communications	96,068	2,058	1,968	1,954	102,048	93,216
Governance costs	9,884	206	103	103	10,296	9,301
Total 2023	1,157,797	23,273	20,011	18,612	1,219,693	1,176,343
Total 2022	1,115,785	21,831	20,050	18,677	1,176,343	

Support costs have been allocated to activities based on the staff numbers and hours involved in the activities.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023**

11. AUDITORS' REMUNERATION

	2023	2022
	£	£
Fees payable to the Charity's auditor for the audit of the Charity's annual accounts	9,900	8,580
Fees payable to the Charity's auditor in respect of: All non-audit services not included above	90	55
	<u>9,990</u>	<u>8,635</u>

12. STAFF COSTS

	2023	2022
	£	£
Wages and salaries	2,691,913	2,634,522
Social security costs	214,275	190,384
Contribution to defined contribution pension schemes	93,298	83,940
	<u>2,999,486</u>	<u>2,908,846</u>

Included in wages and salaries above is £32,713 in respect of termination payments to 15 employees

The average number of persons employed by the Charity during the year was as follows:

	2023	2022
	No.	No.
Communications	3	3
Fundraising	15	24
Management & administration	10	10
In Patient Unit	61	55
Medical	3	2
Multi Disciplinary Team	5	5
Support staff	16	18
Bereavement	13	10
Kickstart	24	32
	<u>150</u>	<u>159</u>

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023

12. STAFF COSTS (CONTINUED)

The number of employees whose employee benefits (excluding employer pension costs) exceeded £60,000 was:

	2023	<i>2022</i>
	No.	<i>No.</i>
In the band £60,001 - £70,000	-	1
In the band £70,001 - £80,000	-	1
In the band £90,001 - £100,000	1	-

The total remuneration paid to key management personnel (including national insurance and pension contributions) was £505,380 (2022: £456,864).

Contributions were made to defined benefit pension schemes on behalf of higher paid employees.

The Charity also uses the services of volunteers who assist in the charity shops.

13. COUNCIL MEMBERS' REMUNERATION AND EXPENSES

During the year, no Council Members received any remuneration or other benefits (2022 - £NIL).

During the year ended 31 March 2023, no Council Member expenses have been incurred (2022 - £NIL).

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023**

14. TANGIBLE FIXED ASSETS

	Freehold land & property £	Motor vehicles £	Fixtures and fittings £	Computer equipment £	Total £
Cost					
At 1 April 2022	3,731,290	88,728	443,508	347,439	4,610,965
Additions	-	-	35,123	13,556	48,679
Disposals	-	(39,708)	(4,482)	(127,695)	(171,885)
At 31 March 2023	<u>3,731,290</u>	<u>49,020</u>	<u>474,149</u>	<u>233,300</u>	<u>4,487,759</u>
Depreciation					
At 1 April 2022	778,453	53,130	273,054	197,235	1,301,872
Charge for the year	75,706	7,004	44,145	70,846	197,701
On disposals	-	(39,709)	(3,855)	(96,327)	(139,891)
At 31 March 2023	<u>854,159</u>	<u>20,425</u>	<u>313,344</u>	<u>171,754</u>	<u>1,359,682</u>
Net book value					
At 31 March 2023	<u><u>2,877,131</u></u>	<u><u>28,595</u></u>	<u><u>160,805</u></u>	<u><u>61,546</u></u>	<u><u>3,128,077</u></u>
At 31 March 2022	<u><u>2,952,837</u></u>	<u><u>35,598</u></u>	<u><u>170,454</u></u>	<u><u>150,204</u></u>	<u><u>3,309,093</u></u>

Included in freehold land & property is freehold land of £375,000 (2022: £375,000) which is not depreciated.

Included within the net book value of assets is £28,595 (2022 – £35,598) relating to assets held under hire purchase agreements.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023

15. FIXED ASSET INVESTMENTS

	Investments in subsidiary companies £
Cost	
At 1 April 2022	100
	100
At 31 March 2023	100

PRINCIPAL SUBSIDIARIES

The following was a subsidiary undertaking of the Charity:

Name	Registered office or principal place of business	Class of shares	Holding
Alice House Trading Limited (dormant) company number 07170334	Alice House, Wells Avenue, Hartlepool, Cleveland, TS24 9DA	Ordinary	100%

The financial results of the subsidiary for the year were:

Name	Net assets £
Alice House Trading Limited (dormant) company number 07170334	3,998

16. DEBTORS

	2023 £	2022 £
Trade debtors	46,749	106,553
Other debtors	16,047	3,227
Prepayments	52,982	56,483
Accrued income	82,692	334,274
	198,470	500,537

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023

17. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2023	2022
	£	£
Bank loans	110,787	114,594
Pension creditor	15,412	18,275
Trade creditors	79,918	63,625
Amounts owed to group undertakings	3,998	3,998
Other taxation and social security	39,645	53,166
Obligations under finance lease and hire purchase contracts	9,805	9,804
Other creditors	10,182	157,940
Accruals and deferred income	75,349	36,942
	345,096	458,344
	345,096	458,344
	2023	2022
	£	£
Deferred income at 1 April 2022	24,716	23,012
Resources deferred during the year	27,909	24,716
Amounts released from previous periods	(24,716)	(23,012)
	27,909	24,716
	27,909	24,716

Deferred income relates to Lottery money paid in advance.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023

18. CREDITORS: AMOUNTS FALLING DUE AFTER MORE THAN ONE YEAR

	2023	2022
	£	£
Bank loans	487,680	<i>597,160</i>
Net obligations under finance lease and hire purchase contracts	10,620	<i>20,425</i>
	<u>498,300</u>	<u><i>617,585</i></u>

The aggregate amount of liabilities payable or repayable wholly or in part more than five years after the reporting date is:

	2023	2022
	£	£
Payable or repayable by instalments	56,183	<i>130,298</i>
	<u>56,183</u>	<u><i>130,298</i></u>

The bank loans are repayable in monthly instalments ending March 2028 and June 2029 respectively. Interest is charged at the Bank of England base rate plus 2% per annum.

The Coronavirus Business Interruption Loan is repayable in monthly instalments ending November 2026. Interest is charged at 6.36% per annum.

The bank loans are secured by a fixed and floating unlimited debenture and a charge over the land and buildings owned at The University Hospital of Hartlepool.

The hire purchase agreement is secured over the assets to which the agreement relates.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023

19. STATEMENT OF FUNDS

STATEMENT OF FUNDS - CURRENT YEAR

	Balance at 1 April 2022 £	Income £	Expenditure £	Gains/ (Losses) £	Balance at 31 March 2023 £
General funds	2,785,913	2,571,350	(2,779,047)	664	2,578,880
Restricted funds					
Restricted appeal funds	3,384	139,450	(142,834)	-	-
Primary Care Trust	-	924,542	(924,542)	-	-
Pharmacy income	-	52,947	(52,947)	-	-
Help the Hospices - fixed asset fund	436,050	-	(10,200)	-	425,850
Kickstart funding	-	157,944	(157,944)	-	-
	<u>439,434</u>	<u>1,274,883</u>	<u>(1,288,467)</u>	<u>-</u>	<u>425,850</u>
Total of funds	<u><u>3,225,347</u></u>	<u><u>3,846,233</u></u>	<u><u>(4,067,514)</u></u>	<u><u>664</u></u>	<u><u>3,004,730</u></u>

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023

19. STATEMENT OF FUNDS (CONTINUED)

STATEMENT OF FUNDS - PRIOR YEAR

	<i>Balance at 1 April 2021</i>	<i>Income</i>	<i>Expenditure</i>	<i>Transfers in/out</i>	<i>Gains/ (Losses)</i>	<i>Balance at 31 March 2022</i>
	£	£	£	£	£	£
Unrestricted funds						
General funds	2,914,744	2,370,280	(2,515,720)	11,954	4,655	2,785,913
Restricted funds						
Restricted appeal funds	-	62,096	(58,712)	-	-	3,384
Primary Care Trust	-	689,643	(689,643)	-	-	-
Pharmacy income	-	52,280	(52,280)	-	-	-
Capital fund	-	11,954	-	(11,954)	-	-
Help the Hospices - fixed asset fund	446,250	-	(10,200)	-	-	436,050
National Health Service England	-	191,141	(191,141)	-	-	-
Kickstart funding	-	442,659	(442,659)	-	-	-
	<u>446,250</u>	<u>1,449,773</u>	<u>(1,444,635)</u>	<u>(11,954)</u>	<u>-</u>	<u>439,434</u>
Total of funds	<u><u>3,360,994</u></u>	<u><u>3,820,053</u></u>	<u><u>(3,960,355)</u></u>	<u><u>-</u></u>	<u><u>4,655</u></u>	<u><u>3,225,347</u></u>

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023

STATEMENT OF FUNDS - (CONTINUED)

Restricted funds

Funding received and attributed directly to charitable activities has been shown as restricted. This includes monies from Durham Dales, Easington and Sedgefield Integrated Care Boards and the Hartlepool & Stockton Integrated Care Board which totalled £924,542.

Pharmacy income represents income from drugs purchased and recharged of £52,947.

The fixed asset fund represents a grant of £510,000 received from the Help the Hospices Fund (NHS England) towards the capital costs of the new Wellbeing Centre. This fund is depreciated in line with the asset.

Funding to support unemployment people gain employment placements through the Government Kickstart scheme. This has been administered to other organisations to provide employment opportunities in accordance with the scheme.

20. ANALYSIS OF NET ASSETS BETWEEN FUNDS

ANALYSIS OF NET ASSETS BETWEEN FUNDS - CURRENT YEAR

	Restricted funds 2023 £	Unrestricted funds 2023 £	Total funds 2023 £
Tangible fixed assets	425,850	2,702,227	3,128,077
Fixed asset investments	-	100	100
Current assets	-	721,118	721,118
Creditors due within one year	-	(345,096)	(345,096)
Creditors due in more than one year	-	(498,300)	(498,300)
Provisions for liabilities and charges	-	(1,169)	(1,169)
Total	425,850	2,578,880	3,004,730

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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023

20. ANALYSIS OF NET ASSETS BETWEEN FUNDS (CONTINUED)

ANALYSIS OF NET ASSETS BETWEEN FUNDS - PRIOR YEAR

	<i>Restricted funds 2022 £</i>	<i>Unrestricted funds 2022 £</i>	<i>Total funds 2022 £</i>
Tangible fixed assets	436,050	2,873,043	3,309,093
Fixed asset investments	-	100	100
Current assets	3,384	990,532	993,916
Creditors due within one year	-	(458,344)	(458,344)
Creditors due in more than one year	-	(617,585)	(617,585)
Provisions for liabilities and charges	-	(1,833)	(1,833)
Total	<u>439,434</u>	<u>2,785,913</u>	<u>3,225,347</u>

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

	2023 £	2022 £
Net expenditure for the year (as per Statement of Financial Activities)	<u>(221,281)</u>	<u>(140,302)</u>
Adjustments for:		
Depreciation charges	197,701	191,468
Loss on the sale of fixed assets	6,641	8,669
Decrease/(increase) in debtors	302,067	(101,270)
Increase/(decrease) in creditors	(109,442)	103,677
Gain on pension deficit	664	4,655
Net cash provided by operating activities	<u>176,350</u>	<u>66,897</u>

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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023

22. ANALYSIS OF CASH AND CASH EQUIVALENTS

	2023 £	2022 £
Cash in hand	522,648	493,379
Total cash and cash equivalents	522,648	493,379

23. ANALYSIS OF CHANGES IN NET DEBT

	At 1 April 2022 £	Cash flows £	At 31 March 2023 £
Cash at bank and in hand	493,379	29,269	522,648
Debt due within 1 year	(114,594)	3,807	(110,787)
Debt due after 1 year	(597,160)	109,480	(487,680)
Finance leases	(30,229)	9,804	(20,425)
	(248,604)	152,360	(96,244)

24. CONTINGENT LIABILITIES

Included in the 2005 financial statements was a grant of £500,000 from the Big Lottery Fund towards the capital costs of the new hospice. This grant agreement remains in force for a period of 80 years and the grant may become repayable if there is a breach of the terms and conditions in this period.

During the financial year 2013/14 and 2014/15 the Hospice received a grant totalling £510,000 from the Help the Hospices Fund (NHS England) towards the capital costs of the new Wellbeing Centre. In the event that the Hospice closes down or the building ceases to be used for the purpose of palliative care of patients, NHS England shall have the right to repayment of all monies advanced under this grant, subject to a reduction reflecting benefits from services already delivered.

25. PENSION COMMITMENTS

The pension cost charge represents contributions payable by the Charity and amounted to £93,298 (2022: £83,940). Contributions totalling £15,412 (2022: £18,275) were payable at the balance sheet date and are included in creditors.

The Charity is also making deficit payments and has included the net present value of these payments, £1,169 (2022: £1,833) in provisions.

The Pensions Trust

The company participates in the scheme, a multi-employer scheme which provides benefits to some 638 non-associated participating employers. The scheme is a defined benefit scheme in the UK. It is not possible for the company to obtain sufficient information to enable it to account for the scheme as a

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023

25. PENSION COMMITMENTS (CONTINUED)

defined benefit scheme. Therefore it accounts for the scheme as a defined contribution scheme.

The scheme is subject to the funding legislation outlined in the Pensions Act 2004 which came into force on 30 December 2005. This, together with documents issued by the Pensions Regulator and Technical Actuarial Standards issued by the Financial Reporting Council, set out the framework for funding defined benefit occupational pension schemes in the UK.

The scheme is classified as a 'last-man standing arrangement'. Therefore the company is potentially liable for other participating employers' obligations if those employers are unable to meet their share of the scheme deficit following withdrawal from the scheme. Participating employers are legally required to meet their share of the scheme deficit on an annuity purchase basis on withdrawal from the scheme.

A full actuarial valuation for the scheme was carried out at 30 September 2020. This valuation showed assets of £800.3m, liabilities of £831.9m and a deficit of £31.6m. To eliminate this funding shortfall, the Trustee has asked the participating employers to pay additional contributions to the scheme as follows:

Deficit contributions

From 1 April 2022 to 31 January 2025: £3,312,000 per annum (payable monthly)

Unless a concession has been agreed with the Trustee the term to 31 January 2025 applies.

Note that the scheme's previous valuation was carried out with an effective date of 30 September 2017. This valuation showed assets of £794.9m, liabilities of £926.4m and a deficit of £131.5m. To eliminate this funding shortfall, the Trustee asked the participating employers to pay additional contributions to the scheme as follows:

Deficit contributions

From 1 April 2019 to 30 September 2025: £11,243,000 per annum (payable monthly and increasing by 3% each on 1st April)

The recovery plan contributions are allocated to each participating employer in line with their estimated share of the Series 1 and Series 2 scheme liabilities.

Where the scheme is in deficit and where the company has agreed to a deficit funding arrangement the company recognises a liability for this obligation. The amount recognised is the net present value of the deficit reduction contributions payable under the agreement that relates to the deficit. The present value is calculated using the discount rate detailed in these disclosures. The unwinding of the discount rate is recognised as a finance cost

PRESENT VALUES OF PROVISION

31 March 2023	31 March 2022	31 March 2021
1,169	1,833	6,488

RECONCILIATION OF OPENING AND CLOSING PROVISIONS

	Period Ending 31 March 2023 £	Period Ending 31 March 2022 £
Provision at start of period	1,833	6,488
Unwinding of the discount factor (interest expense)	35	37
Deficit contribution paid	(668)	(1,642)
Remeasurements - impact of any change in assumptions	(31)	(42)
Remeasurements - amendments to the contribution schedule	-	(3,008)
Provision at end of period	1,169	1,833

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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023

25. PENSION COMMITMENTS (CONTINUED)

INCOME AND EXPENDITURE IMPACT

	Period Ending 31 March 2023	Period Ending 31 March 2022
	£	£
Interest expense	35	37
Remeasurements – impact of any change in assumptions	(31)	(42)
Remeasurements – amendments to the contribution schedule	-	(3,008)
Contributions paid in respect of future service*	*	*
Costs recognised in income and expenditure account	*	*

*includes defined contribution schemes and future service contributions (i.e. excluding any deficit reduction payments) to defined benefit schemes which are treated as defined contribution schemes. To be completed by the company.

ASSUMPTIONS

	31 March 2023	31 March 2022	31 March 2022
	% per annum	% per annum	% per annum
Rate of discount	5.52	2.35	0.66

The discount rates shown above are the equivalent single discount rates which, when used to discount the future recovery plan contributions due, would give the same results as using a full AA corporate bond yield curve to discount the same recovery plan contributions.

26. OPERATING LEASE COMMITMENTS

At 31 March 2023 the Charity had commitments to make future minimum lease payments under non-cancellable operating leases as follows:

	2023	2022
	£	£
Not later than 1 year	85,192	93,430
Later than 1 year and not later than 5 years	49,292	31,595
Later than 5 years	-	824
	134,484	125,849

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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023

27. RELATED PARTY TRANSACTIONS

During the year the charity paid £13,543 for rent and insurance to a Council Member.

During the year the charity received income of £167 from a company in which a Council Member is also a director.

28. GENERAL RESERVES

At 31 March 2023 there is a deficit on unrestricted free reserves of £123,447. Excluding the long term bank loans and the pension deficit, there is a surplus of £376,022.

THE HARTLEPOOL HOSPICE LIMITED

England & Wales - Charity number 510824

Accounts

Registered number: 01525658
Charity number: 510824

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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COUNCIL MEMBERS' REPORT AND FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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**REFERENCE AND ADMINISTRATIVE DETAILS OF THE CHARITY, ITS COUNCIL MEMBERS AND
ADVISERS
FOR THE YEAR ENDED 31 MARCH 2022**

Council Members

Mr R Priestman, Chair
Mrs L Jones, Vice chair
Mr F M Gibbon
Mrs J Regan, Treasurer
Mr C Shotton
Dr R Armstrong (resigned 29 July 2021)
Mr J F Ainslie
Mrs A Barber
Mr S T Chacko
Mrs K Martin
Mr P Jones-King
Dr J Druce (appointed 23 September 2021)

Company Registered Number

01525658

Charity Registered Number

510824

Registered Office

Alice House, Wells Avenue, Hartlepool, TS24 9DA

Chief Executive Officer

Ms T Woodall retired September 2022

Co- chief executive officers (appointed September 2022):

Sandra Britten
Nicola Haggan

Independent Auditors

Waltons Business Advisers Limited, Maritime House, Harbour Walk, The Marina, Hartlepool, TS24 0UX

Bankers

Lloyds TSB, 132 York Road, Hartlepool, TS26 9DD

Solicitors

Tilly Bailey & Irvine LLP, York Chambers, York Road, Hartlepool, TS26 9DP

Director of Information Governance (Deputy Chief Executive)

Ms S Britten

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REFERENCE AND ADMINISTRATIVE DETAILS OF THE CHARITY, ITS COUNCIL MEMBERS AND
ADVISERS (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2022

Senior Manager Finance

Mrs K Burrell

Senior Manager Clinical Services

Ms K Gibson

Senior Manager Corporate Services (Deputy Chief Executive)

Ms N Haggan

Senior Manager Fundraising

Ms J Hildreth

Senior Manager Retail

Ms K Witherley

Senior Manager Therapeutic Support Services

Ms J Grocott

Senior Manager Communications

Mr G Hildreth

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

COUNCIL MEMBERS' REPORT
FOR THE YEAR ENDED 31 MARCH 2022

The Council Members, who are also Non-Executive Directors of the Charity for the purposes of the Companies Act, submit their Annual Report together with the audited Financial Statements of The Hartlepool Hospice Limited (the charity) for the year ended 31 March 2022. The Council Members confirm that the Annual Report and Financial Statements of the Charity comply with the current statutory requirements, the requirements of the Charity and the Charity's governing document and the provisions of the Statement of Recommended Practice (SORP) applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS102) (effective 1 January 2019).

Structure, Governance and Management

The Charity is a company limited by guarantee and incorporated in England and Wales. It is governed by its Memorandum and Articles of Association adopted on 31 October 1980 and last amended on 26 September 2013.

The Council is responsible for the overall governance of the Charity. Council Members are either elected or co-opted and there must be a minimum of three Council Members, there is no maximum number of Council Members. The board will be made up of not less than two lay Council Members (meaning not appointed to act as a professional advisor) and such number of professional Council Members as the Council Members consider appropriate. Each Council Member shall retire from office at the fourth annual general meeting following the date of his appointment. Any professional director who so retires is eligible for re-election by the members or the directors as appropriate.

The Hartlepool Hospice Limited is trading as Alice House Hospice.

The Council aim to maintain a balanced skills and experience base by identifying skills shortages when an opening exists for a new member.

Effective partnership and clarity of differentiation between governance and management roles continues to contribute significantly to our success. Apart from the AGM, Council meetings were bi monthly. At Council meetings the Council Members review performance against agreed strategy and financial performance against agreed budgets. New Council Members receive an induction pack containing everything they need to know about the Charity and its work for effective and informed decision making. The Council Members take full ownership of the Charity's philosophy, five year rolling strategy and annual income and expenditure budgets.

The Council delegates the exercise of certain powers in connection with the financial control of the Charity as set out below. This is controlled by requiring regular reporting back to the Council, so that all decisions made under delegated powers can be ratified by the full Council in due course.

In setting the pay and remuneration of staff (including the senior management team) the Council Members have regard to local pay conditions for similar roles in similar organisations in the North East region.

Chief Executive

The Chief Executive is responsible for the day to day management of the Charity's affairs and for implementing the strategy as agreed by the Council within the boundaries of the budget and various policies and procedures agreed by the Council. The Chief Executive is assisted by the Council Members.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2022

Corporate Governance

Processes are in place to ensure that performance throughout the organisation is measured and monitored and all employees are subject to performance management and achievement of competencies. Where employees do not perform to expected standards support is provided through individual action plans.

Corporate governance is assured through a myriad of meetings and reporting mechanisms and evaluated against the Charity's strategy. Internal audits reflect the Charity's five areas of organisational excellence and are reported on a bi monthly basis to Council Members through the Chief Executive and Senior Management Team reports.

Finance Sub Group

The Finance Sub Group comprises Council Members who are independent of the management and free of any relationship that in the opinion of the Council would interfere with the exercise of independent judgement as members of the Group. The Group has six bi monthly meetings per year. It is responsible for the setting of annual income and expenditure budgets and the monitoring of such, including quarterly year end forecasts. The Group ensures proper procedures are in place to manage cash resources prudently, and to maximise income from liquid resources whilst maintaining sufficient funds to meet daily cash requirements. The Group also advises the Council on the appropriate level of free reserves and of any significant change needed in investment strategy.

Risk Management

The Council have a formal risk management process to assess business risks and implement risk management strategies. This involves identifying the types of risks the Charity faces, prioritising them in terms of potential impact and likelihood of occurrence, and identifying means of mitigating the risks. As part of this process the Council Members review the adequacy of the Charity's current internal controls and the costs of operating particular controls relative to the benefits obtained. Procedures have been established for reporting failings immediately to appropriate levels of management.

The significant risks to which the Charity is vulnerable, and methods in which they are controlled, are:

Loss of income	Regular monitoring of financial performance and setting and reviewing budgets
Disaster	Health and Safety officer review; regular risk management meetings (fire/loss of power etc)
Staff crisis	Use of bank staff – relocate patients to other providers

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2022

Objectives and Activities

Objects, objectives and principal activities of the Charity

The purpose of any Hospice is to provide good end of life and palliative care in line with contractual agreements with our commissioners. Other elements of the organisation such as fundraising and retail exist to cover the shortfall of government funding, which in the case of Alice House equates to around 80%. New Statutory Guidance around the commissioning of Hospices and specialist palliative care provision has been published on 20 July 2022 however, to date, this has not been fully embraced by the newly formed Integrated Care Systems, which replaced the previous Clinical Commissioning Groups on 1 July 2022. The Health & Care Act 2022 states that it is a legal duty for Integrated Care Boards to commission palliative care services under S3(1) NHS Act 2006 (as amended):

- (1) An Integrated Care Board must arrange for the provision of the following to such extent as it considers necessary to meet the reasonable requirements of the people for whom it has responsibility:
 - (h) Such other services or facilities for palliative care as the board considers are appropriate as part of the health service.

The duty is intended to ensure that the palliative and end of life care needs of people of all ages, with progressive illness or those nearing the end of their lives, and their loved ones and carers, receive the care and support they need to live and to die well.

Alice House Hospice has experienced significant pressure over the last 2 years due to the inability of another local hospice to provide care and the consequential demand on our beds. Through the partnership working of Tees Valley Hospices, we have been able to secure additional temporary funding for increasing our specialist beds to meet demand. Additionally, we have inputted into and influenced the work of NHS Tees Valley Clinical Commissioning Group's End of Life & Palliative Care Review, which to date has not been published. We will continue to monitor capacity and demand for future commissioning discussions.

Alice House has worked closely with North Tees & Hartlepool NHS Foundation Trust and has been commissioned to provide a 2 hour rapid response/24 hour admissions service, 7 days per week (initially from 08:00-20:00) and staff wellbeing services to help NHS staff cope with the stresses and strains of work and life through holistic therapies. The funding for the out-of-hours admission service was received in May 2022 and it is anticipated that the Hospice will start delivering this service from October 2022, subject to recruiting additional medical and nursing staff. The NHS staff wellbeing services will start to be delivered from September 2022 following agreement of the referral pathway and services to be provided on a group and individual basis.

In December 2021 the Government announced additional funding in response to the Omicron Variant of Covid-19, covering the period 13 December 2021 to 31 March 2022, in return for full utilisation of palliative and end of life care capacity within hospices and community providers. The funding was managed by Hospice UK through NHS England, from which the Hospice received £191,141.

These additional income streams have started and will continue to bridge the gap in the deficit in fundraising income, which is a direct correlation to the squeezes being placed on society and in particular the poorer areas with much less disposable income. We are still experiencing the impact of the Coronavirus Pandemic on our organisation in many ways, from manpower availability to donations. The upside to the increased deprivation in our areas is that our retail sector is thriving with people looking for a bargain.

All good organisations use checks and balances aligned with expanding opportunities to be successful and Alice House Hospice does this very well.

The Charity's primary objective is to provide care for individuals who are suffering from any illness, disability, disease or other infirmity whether physical or mental.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2022

Our Vision

Every person, to the last moment of their life has the right to dignity, respect, support and care.

Our Mission

To provide services that add value to life and make a difference to patients and their families.

To achieve the Mission, the Charity has diversified its activities whilst still remaining true to the primary purposes of the Charity. Service delivery has evolved into a more structured response to the specialist needs of palliative patients with a range of clinical needs and this structured approach also encompasses the wider health economy needs.

Our Values

- We value each person as an individual
- The patient is at the heart of all of our activities
- We believe in the importance of celebrating life and relationships
- We will demonstrate integrity and professionalism at all times
- We will be modern and progressive and seek out new opportunities to develop our services
- We will strive to be the best we can and encourage staff and volunteers to actively seek opportunities for personal growth and development
- We will exercise responsible financial management to ensure long term sustainability.

Strategies for Achieving Objectives

As the future of Hospice care evolves in the constantly changing health environment, we have developed positive and effective working relationships that ensure cross organisational integration and representation through different working groups, to identify pressures and inadequacies in the healthcare system and to generate innovative solutions to patient service problems.

The Hospice's Five Year Strategy 2020-2025 recognises that while our services need to be varied and transformative, they also need to be responsive and support the overall health economy. The Hospice has therefore identified the following strategic goals:

- We will ensure all of our services are of a high quality and are delivered safely with compassion and dignity.
- We will ensure our organisation is governed and managed in accordance with best practice.
- We will seek out opportunities to support our communities in all of their interactions with us.

The strategy provides a Patient's, Trustee's and Staff Charter which confirms our intentions and provides a commitment to collective responsibility and organisational cohesion.

The following departmental sub strategies have also been developed, with their objectives aligning to the strategic goals of the Hospice's Five Year Strategy 2020-2025:

- Clinical
- Therapeutic Support Services
- Information Governance & Technology
- Human Resources
- Communications
- Fundraising
- Retail
- Finance

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2022

Activities for Achieving Objectives

Prior to Covid-19 the Hospice was functioning well and had a full year of fundraising activities planned which we were confident should have hit the identified budget. Additionally, after some difficult times, the Community Services had increased significantly through improved integrated working with Primary Care partners and was achieving budget. The Holistic Centre activities were starting to increase and this was a new service which needed time to build up. Our retail sector performed very well and beats its target year on year. The Hospice continually scrutinises the organisation for areas of cost savings and waste reduction alongside areas for income generation. We will be focusing on reducing utility bills through the exploration of green energy this year but it will take time to understand our carbon footprint and options for renewable energy.

The Council consider that they have complied with their duty in section 4 of the Charities Act 2006 to have due regard to public benefit guidance published by the Charity Commission when setting objects, strategy and objectives.

Achievements and Performance

We continue to run a highly professional organisation with a stable financial position which reflects ethical fundraising and cash holding policies decided by our Council Members.

The credit rating during the reporting period has remained at level A.

Strategic Objectives

We will manage our Charity as effectively, efficiently and responsibly as possible.

The Board have had regular updates and our risk register has been updated regularly to enable effective management of issues arising.

We will ensure all of our services are of a high quality and are delivered safely with compassion and dignity.

We have held regular engagement meetings with our CQC Engagement Officer through Microsoft Teams and have contacted them for advice when necessary.

There has been no formal complaints made in the previous 12 months.

We will ensure our organisation is governed and managed in accordance with best practice.

The Board receive updates from all of our Senior Management Team for each meeting to ensure transparency and service developments are always approved by the Board.

All of the Board have fulfilled their mandatory training requirements.

The Board have identified and will be commencing a review of the Hospice's governance processes to ensure that they remain 'fit for purpose' and are equipped to lead the Hospice within a framework of prudent and effective controls, enabling risk to be assessed and managed. Trustees will be using the Charity Governance Code for Larger Charities (Charity Governance Code Steering Group, refreshed Code published December 2020) as the audit tool, which will be completed during 2022/2023.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2022

We will seek out opportunities to support our communities in all of their interactions with us.

Collaboration has been high on our agenda and we have continued to work with the NHS Tees Valley Clinical Commissioning Group on educating care homes.

The Hospice also continues to be an integral partner of Hospices North East & North Cumbria, who take a partnership approach to improving palliative and end of life care for all patients, regardless of demography or diagnosis.

The Government's Kickstart Scheme has enabled the Hospice to provide 93 young people with placements ranging from retail, facilities, holistic therapies, virtual reality, catering and digital communications. This has provided meaningful positive work experience for young people who have struggled to find employment and has equipped them with valuable training and qualifications.

Financial Review

Reserves Policy

Free reserves available for use by the Charity are deemed to be those that are readily realisable, less funds whose uses are restricted or else designated for particular purposes.

As a matter of policy the Charity aims to build up and hold a maximum of two months running costs as reserves. This objective is secondary to the achievement of the Charity's strategic objectives as stated in the current strategy, so that reserves will not be built or maintained at the expense of planned or current patient care.

Two months running costs would be approximately £663k. With free reserves (after removing long term liabilities) of £512k the Charity is behind target. The Charity expects to build the reserves over the next year to support the Charity as it recovers income streams post Covid-19.

Aspirational objectives for reserves: The Charity aims to become financially independent of Clinical Commissioning Group contracts as a security measure against diminishing contract values and the uncertainty of the level of tariff funding arising from the End of Life & Palliative Care Review. Nevertheless it will still seek appropriate contracts to advance patient services. The achievement of this will be through the continuation of regular monitoring of financial management.

Financial Review and Results for the Year

The Charity has made a surplus before depreciation of £55,821 but after depreciation a deficit of £135,647 has been declared. The impact of the Covid-19 pandemic has still been significant along with the rising cost of inflation with donations income (fallen by £89k) and Events Income (compared to pre-Covid a fall of £40k) due to government restrictions. However, the Charity has received support in the form of additional Hospice funding (£191k) that have ensured the Hospice has been able to continue to provide its services throughout the pandemic.

The detailed results are as follows:

Gross income increased by 2.9% to £3.8m, while expenditure on charitable activities increased by 1.77% to £2.865m. After taking depreciation into account total resources expended of £4.0m (2021: £3.4m) resulted in a net deficit for the year of £136k (2021: £292k surplus).

Income received in furtherance of charitable objects totalled £1.4m. Expenditure incurred on furthering charitable objects was £2.9m. The Charity supports its charitable activities with successful fundraising activities, including charity shops and a lottery.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2022

Fundraising activities, donations and legacies generated a surplus of unrestricted income of £867k to be used to pursue charitable activities.

£657k of grants were received to support the work of the Hospice, this included £443k of Kickstart monies.

The lottery generated a surplus of £155k (2021: £145k) and Trading Activities generated a surplus of £73k (2021: £14k).

£9k of unrestricted income was spent on the governance costs of the organisation.

Total reserves stand at £3.2m (2021: £3.3m), including £439k of restricted reserves.

At 31 March 2022 there is a deficit on unrestricted free reserves of £87k. Excluding the long term bank loans, a loan which was used to purchase the freehold and develop the Wellbeing Centre and the Coronavirus Business Interruption Loan, and the pension deficit, there is a surplus of £512k.

Investment Policy and Performance

The Memorandum of Association authorises the Council Members to invest surplus funds as may be thought fit. The Council Members' policy is to hold any surplus cash on deposit to obtain the most attractive interest rate available. The Council Members' have directed that funds will be used in the charitable activities of the company instead.

Fundraising

The Hospice's Fundraising Sub Strategy 2020-2025 has the following objectives:

- Develop strong partnerships with organisations and individuals.
- Be proactive, research and implement opportunities to embrace the current climate.
- Develop sustainable corporate relationships.
- Ensure our approach to fundraising is respectful and non-aggressive and compliant with the Fundraising Regulator.
- Promote the Hospice in a positive and professional manner

Fundraising is starting to recover from the Coronavirus Pandemic and has been welcomed back into schools, colleges and businesses. A full calendar of events has started to show a steady increase in participants as the year has progressed, although attendance is not yet back to pre-pandemic levels.

Alice House Hospice is a subscribed member of the Fundraising Regulator and as such adheres to the Code of Fundraising Practice. We review each Code on a rolling programme to ensure that we are compliant in all areas. An action plan is in progress for any areas where improvements are to be made to ensure full compliance with the Code and is managed by the Senior Manager Fundraising.

All Staff and Volunteers within Income Generation have access to the Code of Fundraising and the Institute of Fundraising 'Treating Donors Fairly' policy.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2022

Plans for the Future

The Hospice has prioritised the following three domains of Patient Safety, Clinical Effectiveness and Patient Experience:

- **Implementation of an Electronic Recording System for Clinical Incidents (Patient Safety)**
Following a process mapping exercise in December 2021, it was identified that the implementation of an electronic accident and incident recording system would prove a more efficient and safe way of managing accidents and incidents. An internal clinical incident database will be developed and rolled out during 2022/2023.
- **SystemOne Hospital Palliative Care Module (Clinical Effectiveness)**
The Hospice currently enters all referrals and admissions in to the Hospital Palliative Care Module of SystemOne, with a limited number of trained clinicians able to view patient information. Staff training will be completed during 2022/2023 to enable all relevant clinical staff to be able to access SystemOne. It will be a longer term objective (18-24 months) to complete the business mapping/change process which will move all of the Hospice's clinical records over to the Hospital Palliative Care Module of SystemOne.
- **Rapid Response/24 Hour Admissions (Patient Experience)**
The introduction of a 2 hour rapid response/24 hour admission procedure will enable the Hospice to support national and system commitments within the NHS England and NHS Improvement 'Urgent & Emergency Care Recovery 10 Point Action Plan – Implementation Guide (Working Together to Ensure Urgent and Emergency Care Recovery)', namely:
 - Point 2 - Supporting primary care and community health services to help manage the demand for UEC services.
 - The national commitment will continue to support systems and providers with the roll out of two-hour crises response (UCR) services at scale, ensuring provision is 7 days a week and a minimum of 8.00a.m. to 8.00p.m., along with enabling the diversifying referral routes into two-hour services from 111, 999 and other services to support admission avoidance and care in the right place.
 - Alice House has worked closely with North Tees & Hartlepool NHS Foundation Trust and has been commissioned during 2022/2023 to provide out-of-hours admissions, 7 days per week (initially from 08:00-20:00). The Hospice will initially provide 2 beds for out-of-hours patients who are at the end of life and it is hoped that all pathways will be in place to commence the service from October 2022. More longer term plans will include moving towards admitting patients 24 hours of the day, for which ongoing funding will need to be secured.
 - Point 6 - Improving in-hospital flow and discharge.
 - The national commitment seeks to reduce the demand of palliative and end of life patients attending A&E and subsequent admission to an Acute bed.
 - Alice House Hospice will move towards accepting 24 hour referrals from relevant sources during 2022/2023.

Attended Day Hospice services have been closed since the start of the Coronavirus Pandemic in March 2020, with patients receiving regular telephone support from the Nurse Practitioner. Following a consultation on the redesign of Day Hospice in 2021, an outpatient pilot was implemented, however, feedback from service users indicated that they would prefer an attended in-house service where they could have social interaction with other Day Hospice patients. Day Hospice will therefore be returning to the previous in-house attended model in September 2022.

The Hospice will continue to develop and grow Hartlepool Holistic Wellbeing Centre to provide an income stream into the Hospice through the provision of Holistic Therapies to improve and enhance physical, emotional and psychological health and wellbeing of people in our local communities. Through funding received from NHS North Tees & Hartlepool NHS Foundation Trust, the Hospice's Therapeutic Support Team will deliver staff wellbeing services to help NHS staff cope with the stresses and strains of work and life through holistic therapies.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2022

Post year end events

It was with great sadness that in August 2022 the Hospice's Board of Trustees made the decision to close NEVRlabs, which was set-up by the Hospice as a fundraising initiative. The project was a response to traditional fundraising methods which were severely compromised during the Covid-19 lockdown periods and was intended as a new and sustainable way of creating revenue, whilst introducing a new audience to the Hospice. However, despite regular custom and a number of successful partnerships with schools and businesses, NEVRlabs was unable to attract the level of income needed to support the Hospice. The ongoing impact of Covid-19, cost of living crisis and the end of the Government's Kickstart Scheme in September 2022, which provided funding for many of NEVRlabs staff, resulted in the closure of NEVRlabs on 14 August 2022. Like many organisations in Hartlepool and beyond, the Hospice must invest carefully and focus on its priorities. As the economy continues to head towards further uncertainty, Trustees reviewed their commitments and felt that it was the most financially responsible thing to do in order to help protect the future of the Hospice. The difficult decision was therefore made to close NEVRlabs and move all virtual reality services back to the Hospice, thereby returning the project to its original focus of offering entertainment and wellbeing support to Hospice patients. Any equipment from NEVRlabs that will not be used within the Hospice will be sold, with all funds being directed towards patient care.

Tracy Woodall has been in post as Chief Executive since 17 November 2008 and due to ill health made the difficult decision to retire in September 2022. Trustees have appointed a joint leadership role, with Sandra Britten as Chief Executive Operational and Nicola Haggan as Chief Executive Non-Operational. Both incumbents have long-term knowledge of the Hospice (since September 2000 and April 2002 respectively), its workings, its threats and failures, but also a realistic approach to solutions and opportunities. They are also familiar trusted faces to restore and maintain employee morale and bring stability at a time of economic uncertainty. The joint Chief Executive roles will also bring a more stable leadership structure and long-term cost savings as both will continue to carry out the duties of their original substantive posts (Deputy Chief Executive/Director of Information Governance and Deputy Chief Executive/Senior Manager Corporate Services), removing the need for the post of Deputy Chief Executive. As the UK continues to emerge from the impact of the Coronavirus Pandemic and begins to feel the deepening weight of the cost of living crisis, the priority for the Chief Executive Operational and Chief Executive Non-Operational will be a more risk adverse approach to ensure that the Hospice's foundations are solid and can withstand the perfect storm affecting the economy before exploring future potential development opportunities.

Employees

Employees are fully involved with the development and delivery of the strategy and it is integral to all daily activities and used to support their appraisals.

Regular communications' meetings are held to ensure that all employees are aware of the activities of the Charity; these meetings are Director led.

Volunteers

The survival and growth of the Charity could not be achieved without the unstinting support of the volunteer workforce, who enable the fulfilment of the Hospice's Vision by complimenting the work of the patient care staff, supporting fundraising efforts and serving as Council Members. The volunteers bring skill, knowledge and experience which greatly enhances the professional profile of the Charity. This in turn enables the Charity to reach further into the community, not only by caring for those with life limiting illnesses but by offering opportunities for the development of skills and expertise which individuals can take with them in their own personal development, back into the community, thus enhancing the profile of the Charity and encouraging more individuals to offer their service on a voluntary basis.

Council Members' Liability

The Council Members guarantee to contribute an amount not exceeding £1 to the assets of the Charity in the event of winding up.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2022

Council Members' Responsibilities Statement

The Council Members (who are also directors of Hartlepool Hospice Limited for the purposes of company law) are responsible for preparing the Council Members' report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company and charity law requires the Council Members to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of resources, including the income and expenditure, of the charitable company for that period. In preparing these financial statements, the Council Members 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;
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in operation.

The Council Members are responsible for keeping adequate accounting records that disclose with reasonable accuracy at any time the financial position of the charitable company and enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

Provision of Information to auditors

Each of the persons who are Council Members at the time when this Council Members' report is approved has confirmed that:

- so far as that Council Member is aware, there is no relevant audit information of which the charitable company's auditors are unaware, and
- that Council Member has taken all the steps that ought to have been taken as a Council Member in order to be aware of any information needed by the charitable company's auditors in connection with preparing their report and to establish that the charitable company's auditors are aware of that information.

Auditors

As a result of a change in auditors' name, from 1 March 2022 Waltons Clark Whitehill Limited became Waltons Business Advisers Limited.

The auditors, Waltons Business Advisers Limited, will be proposed for reappointment in accordance with section 485 of the Companies Act 2006.

In preparing this report, the Council Members have taken advantage of the small companies exemptions provided by section 415A of the Companies Act 2006.

This report was approved by the Council Members on 24 / 11 / 2022 and signed on their behalf, by:


Mr R Priestman
(Chair of Trustees)


Mrs J Regan
(Treasurer)

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE HARTLEPOOL HOSPICE LIMITED T/A
ALICE HOUSE HOSPICE**

UNQUALIFIED OPINION

We have audited the financial statements of The Hartlepool Hospice Limited T/A Alice House Hospice (the 'charity') for the year ended 31 March 2022 which comprise the Statement of financial activities, the Balance sheet, the Statement of cash flows and the related notes, 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 charitable company's affairs as at 31 March 2022 and of its incoming resources and application of resources, including its income and expenditure for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

BASIS FOR OPINION

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditors' responsibilities for the audit of the financial statements section of our report. We are independent of the charitable company in accordance with the ethical requirements that are relevant to our audit of the financial statements in the United Kingdom, including the Financial Reporting Council'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 Council Members' 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 charitable company's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

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

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**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE HARTLEPOOL HOSPICE LIMITED T/A
ALICE HOUSE HOSPICE (CONTINUED)**

OTHER INFORMATION

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

We have nothing to report in this regard.

OPINION 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 Council Members' Report for the financial year for which the financial statements are prepared is consistent with the financial statements.
- the Council Members' Report has been prepared in accordance with applicable legal requirements.

MATTERS ON WHICH WE ARE REQUIRED TO REPORT BY EXCEPTION

In the light of our knowledge and understanding of the charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the Council Members' Report.

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

- adequate accounting records have not been kept, or returns adequate for our audit have not been received from branches not visited by us; or
- the financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of Council Members' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit; or
- the Council Members were not entitled to prepare the financial statements in accordance with the small companies regime and take advantage of the small companies' exemptions in preparing the Council Members' Report and from the requirement to prepare a Strategic Report.

RESPONSIBILITIES OF COUNCIL MEMBERS

As explained more fully in the Council Members' responsibilities statement, the Council Members (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 Council Members 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 Council Members are responsible for assessing the charitable company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE HARTLEPOOL HOSPICE LIMITED T/A
ALICE HOUSE HOSPICE (CONTINUED)**

and using the going concern basis of accounting unless the Council Members either intend to liquidate the charitable company or to cease operations, or have no realistic alternative but to do so.

AUDITORS' 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 Auditors' 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:

In identifying and assessing risks of material misstatement in respect of irregularities, including fraud, the audit engagement team:

- Obtained an understanding of the nature of the sector, including the legal and regulatory framework that the charitable company operates in and how they are complying with the legal and regulatory framework
- Inquired of management and those charged with governance about their own identification and assessment of the risks of irregularities including any known, actual, suspected or alleged instances of fraud,
- Discussed matters about non-compliance with laws and regulations and how fraud might occur including assessment of how and where the financial statements might be susceptible to fraud.

As a result of these procedures we considered the most significant laws and regulations which have a direct impact on the financial statements are FRS 102, Charities SORP (FRS 102), Companies Act 2006 and the charitable company's governing document. We performed audit procedures to detect non-compliance which may have a material impact on the financial statements which included reviewing the financial statements including the council members report and remaining alert to new or unusual transactions which may not be in accordance with the governing documents.

The audit engagement team identified the risk of management override of controls and income recognition as the areas where the financial statements were most susceptible to material misstatement due to fraud. We designed audit procedures to respond to the risk, recognising that the risk of not detecting a material misstatement due to fraud is higher than the risk of not detecting one resulting from error, as fraud may involve deliberate concealment by, for example, forgery or intentional misrepresentations, or through collusion.

Audit procedures performed included, but were not limited to:

- testing manual journal entries and other adjustments
- evaluating the business rationale in relation to significant or unusual transactions and transactions entered into outside the normal course of business
- challenging judgments and estimates
- reviewing income transactions around the year end to look for potential "window dressing".

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 Auditors' Report.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE HARTLEPOOL HOSPICE LIMITED T/A
ALICE HOUSE HOSPICE (CONTINUED)**

USE OF OUR REPORT

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



Heather O'Driscoll FCA (Senior statutory auditor)

for and on behalf of

Waltons Business Advisers Limited

Chartered Accountants

Statutory Auditors

Maritime House

Harbour Walk

The Marina

Hartlepool

TS24 0UX

Date: 28 November 2022

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

**STATEMENT OF FINANCIAL ACTIVITIES (INCORPORATING INCOME AND EXPENDITURE ACCOUNT)
FOR THE YEAR ENDED 31 MARCH 2022**

	Note	Restricted funds 2022 £	Unrestricted funds 2022 £	Total funds 2022 £	Total funds 2021 £
INCOME FROM:					
Donations and legacies	4	516,709	886,114	1,402,823	1,284,768
Charitable activities	5	933,064	505,440	1,438,504	1,759,772
Other trading activities	6	-	978,726	978,726	666,530
TOTAL INCOME		1,449,773	2,370,280	3,820,053	3,711,070
EXPENDITURE ON:					
Raising funds	8	291,269	804,128	1,095,397	603,893
Charitable activities	9	1,153,366	1,711,592	2,864,958	2,815,146
TOTAL EXPENDITURE		1,444,635	2,515,720	3,960,355	3,419,039
NET INCOME/(EXPENDITURE)		5,138	(145,440)	(140,302)	292,031
Transfers between funds	19	(11,954)	11,954	-	-
NET MOVEMENT IN FUNDS BEFORE OTHER RECOGNISED GAINS		(6,816)	(133,486)	(140,302)	292,031
OTHER RECOGNISED GAINS:					
Other gains	26	-	4,655	4,655	-
NET MOVEMENT IN FUNDS		(6,816)	(128,831)	(135,647)	292,031
RECONCILIATION OF FUNDS:					
Total funds brought forward		446,250	2,914,744	3,360,994	3,068,963
Net movement in funds		(6,816)	(128,831)	(135,647)	292,031
TOTAL FUNDS CARRIED FORWARD		439,434	2,785,913	3,225,347	3,360,994

The Statement of Financial Activities includes all gains and losses recognised in the year.

The notes on pages 21 to 46 form part of these financial statements.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)
REGISTERED NUMBER: 01525658

BALANCE SHEET
AS AT 31 MARCH 2022

	Note	2022 £	2021 £
FIXED ASSETS			
Tangible assets	14	3,309,093	3,383,435
Investments	15	100	100
		<u>3,309,193</u>	<u>3,383,535</u>
CURRENT ASSETS			
Debtors	16	500,537	399,267
Cash at bank and in hand	22	493,379	644,002
		<u>993,916</u>	<u>1,043,269</u>
Creditors: amounts falling due within one year	17	(458,344)	(316,043)
		<u>535,572</u>	<u>727,226</u>
NET CURRENT ASSETS		535,572	727,226
TOTAL ASSETS LESS CURRENT LIABILITIES		3,844,765	4,110,761
Creditors: amounts falling due after more than one year	18	(617,585)	(743,279)
NET ASSETS EXCLUDING PENSION LIABILITY		3,227,180	3,367,482
Defined benefit pension scheme liability	26	(1,833)	(6,488)
TOTAL NET ASSETS		3,225,347	3,360,994
CHARITY FUNDS			
Restricted funds	19	439,434	446,250
Unrestricted funds	19	2,785,913	2,914,744
TOTAL FUNDS		3,225,347	3,360,994


THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)
REGISTERED NUMBER: 01525658

BALANCE SHEET (CONTINUED)
AS AT 31 MARCH 2022

The Council Members acknowledge their responsibilities for complying with the requirements of the Act with respect to accounting records and preparation of financial statements.

The financial statements have been prepared in accordance with the provisions applicable to entities subject to the small companies regime.

The financial statements were approved and authorised for issue by the Council Members and signed on their behalf by:



Mr R Priestman
Chair of Trustees
Date: 24/11/2022



Mrs J Regan
Treasurer

The notes on pages 21 to 46 form part of these financial statements.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED 31 MARCH 2022

	Note	2022 £	2021 £
CASH FLOWS FROM OPERATING ACTIVITIES			
Net cash used in operating activities	21	66,897	606,550
CASH FLOWS FROM INVESTING ACTIVITIES			
Purchase of tangible fixed assets	14	(125,795)	(251,449)
NET CASH USED IN INVESTING ACTIVITIES			
		(125,795)	(251,449)
CASH FLOWS FROM FINANCING ACTIVITIES			
Cash inflows from new borrowing		-	250,000
Repayments of borrowing		(81,922)	(61,869)
New finance leases		-	49,020
Repayments of finance leases		(9,803)	(8,988)
NET CASH (USED IN)/PROVIDED BY FINANCING ACTIVITIES			
		(91,725)	228,163
CHANGE IN CASH AND CASH EQUIVALENTS IN THE YEAR			
Cash and cash equivalents at the beginning of the year		644,002	60,738
CASH AND CASH EQUIVALENTS AT THE END OF THE YEAR			
	22	493,379	644,002

The notes on pages 21 to 46 form part of these financial statements

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022

1. GENERAL INFORMATION

The Charity is a company incorporated in England and Wales and limited by guarantee. The members of the company are the Council Members named on page 2. In the event of the Charity being wound up, the liability in respect of the guarantee is limited to £1 per member of the Charity.

The registered address is:

Alice House
Wells Avenue
Hartlepool
TS24 9DA

2. ACCOUNTING POLICIES

2.1 Basis of preparation of financial statements

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

The Hartlepool Hospice Limited T/A Alice House Hospice 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.

2.2 Fund accounting

General funds are unrestricted funds which are available for use at the discretion of the Council Members in furtherance of the general objectives of the Charity and which have not been designated for other purposes.

Restricted funds are funds which are to be used in accordance with specific restrictions imposed by donors or which have been raised by the Charity for particular purposes. The costs of raising and administering such funds are charged against the specific fund. The aim and use of each restricted fund is set out in the notes to the financial statements.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022

2. ACCOUNTING POLICIES (CONTINUED)

2.3 Going concern

The Charity had some highly ambitious plans and commitments promised in this year which have not come to fruition. Despite this, the careful management of the organisation's finances and the work of the Senior Management Team and the Board have enabled the Hospice to maintain its solid financial position.

Management prepare and monitor budgets and cashflow forecasts and take action as necessary.

The Council Members note the challenge that has presented itself in terms of rising utilities costs. Management have identified this and will adjust expenditure elsewhere accordingly.

The Hospice works tirelessly to ensure its services reflect local need and that it influences the local palliative care agenda through partnership working and high quality services, including temporary expansion of the specialist bed base.

The Council Members have confidence in the ability of the charity to remain a going concern.

2.4 Income

All income is recognised 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.

For legacies, entitlement is taken as the earlier of the date on which either: the Charity is aware that probate has been granted, the estate has been finalised and notification has been made by the executor(s) to the Trust that a distribution will be made, or when a distribution is received from the estate. Receipt of a legacy, in whole or in part, is only considered probable when the amount can be measured reliably and the Charity has been notified of the executor's intention to make a distribution. Where legacies have been notified to the Charity, or the Charity is aware of the granting of probate, and the criteria for income recognition have not been met, then the legacy is treated as a contingent asset and disclosed if material.

Gifts donated for resale are included as income when they are sold.

The Council Members acknowledge that they are assets of the Charity as soon as received but due to the fact that a very large number of small value items are received the time and cost of valuing donated goods at receipt would outweigh any benefit to the users of the financial statements of having them so valued.

Where goods are donated under the Gift Aid scheme the Charity is not entitled to the income until the goods are sold and the donor has confirmed that they are gifting the proceeds. In this case the income is included as a donation rather than as a sale.

Income tax recoverable in relation to donations received under Gift Aid or deeds of covenant is recognised at the time of the donation.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022

2. ACCOUNTING POLICIES (CONTINUED)

2.5 Expenditure

Expenditure is recognised once there is a legal or constructive obligation to transfer economic benefit to a third party, it is probable that a transfer of economic benefits will be required in settlement and the amount of the obligation can be measured reliably. Expenditure is classified by activity. The costs of each activity are made up of the total of direct costs and shared costs, including support costs involved in undertaking each activity. Direct costs attributable to a single activity are allocated directly to that activity. Shared costs which contribute to more than one activity and support costs which are not attributable to a single activity are apportioned between those activities on a basis consistent with the use of resources. Central staff costs are allocated on the basis of time spent, and depreciation charges allocated on the portion of the asset's use.

Costs of generating voluntary income are those incurred in seeking voluntary contributions and do not include the costs of disseminating information in support of the charitable activities.

Fundraising costs are the direct costs of operating the charity shops and other trading activities. Support costs are those costs incurred directly in support of expenditure on the objects of the charity and include central costs. Governance costs are those incurred in connection with administration of the Charity and compliance with constitutional and statutory requirements.

2.6 Tangible fixed assets and depreciation

Tangible fixed assets costing £250 or more are capitalised and recognised when future economic benefits are probable and the cost or value of the asset can be measured reliably.

Tangible fixed assets are initially recognised at cost. After recognition, under the cost model, tangible fixed assets are measured at cost less accumulated depreciation and any accumulated impairment losses. All costs incurred to bring a tangible fixed asset into its intended working condition should be included in the measurement of cost.

Depreciation is charged so as to allocate the cost of tangible fixed assets less their residual value over their estimated useful lives, using the straight-line method.

Depreciation is provided on the following bases:

Freehold property	- 20/50 years straight line
Plant and machinery	- 7 years straight line
Motor vehicles	- 7 years straight line
Fixtures and fittings	- 7 years straight line
Computer equipment	- 3/5 years straight line
Other fixed assets	- 3 years straight line

2.7 Investments

Investments represent the shares held in a subsidiary company which are stated at cost.

2.8 Debtors

Trade and other debtors are recognised at the settlement amount after any trade discount offered. Prepayments are valued at the amount prepaid net of any trade discounts due.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022

2. ACCOUNTING POLICIES (CONTINUED)

2.9 Cash at bank and in hand

Cash at bank and in hand includes cash and short-term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

2.10 Liabilities

Liabilities and provisions are recognised when there is an obligation at the Balance sheet date as a result of a past event, it is probable that a transfer of economic benefit will be required in settlement, and the amount of the settlement can be estimated reliably.

Liabilities are recognised at the amount that the Charity anticipates it will pay to settle the debt or the amount it has received as advanced payments for the goods or services it must provide.

Provisions are measured at the best estimate of the amounts required to settle the obligation. Where the effect of the time value of money is material, the provision is based on the present value of those amounts, discounted at the pre-tax discount rate that reflects the risks specific to the liability. The unwinding of the discount is recognised within interest payable and similar charges.

2.11 Finance leases and hire purchase

Assets obtained under hire purchase contracts and finance leases are capitalised as tangible fixed assets. Assets acquired by finance lease are depreciated over the shorter of the lease term and their useful lives. Assets acquired by hire purchase are depreciated over their useful lives. Finance leases are those where substantially all of the benefits and risks of ownership are assumed by the Charity. Obligations under such agreements are included in creditors, net of the finance charge allocated to future periods. The finance element of the rental payment is charged to the Statement of Financial Activities so as to produce a constant periodic rate of charge on the net obligation outstanding in each period.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022

2. ACCOUNTING POLICIES (CONTINUED)

2.12 Pensions

The Charity contributes to a defined contribution pension scheme and the pension charge represents the amounts payable by the Charity to the fund in respect of the year.

Defined benefit schemes

The Charity makes contributions to the National Health Service Pension Scheme and The Pension Scheme Trust.

The Charity is however unable to identify its share of the underlying assets and liabilities in the schemes and has accounted for contributions as if they were defined contributions schemes as follows:

The amount charged to the statement of financial activities in respect of pension costs is the contributions payable in the year. Differences between contributions payable in the year and contributions actually paid are shown as either accruals or prepayments in the balance sheet.

Amounts included in expenses are allocated between activities on the basis of staff time in line with other support costs.

The Charity has agreed to a deficit funding arrangement and recognises a liability for this obligation. The amount recognised is the net present value of the deficit reduction contributions payable under the agreement that relates to the deficit. The present value is calculated using the discount rate detailed in these disclosures. The unwinding of the discount rate is recognised as a finance cost.

3. Critical accounting estimates and areas of judgment

The Hospice received funding in the year through the Kickstart Scheme. Hartlepool Hospice acted as a lead organisation for this funding receiving income to pass on to other Hospices in the area.

It is the view of the Trustees that it is misleading to include these amounts within income and expenditure as they would distort the figures and not present a true and fair view.

They have therefore only included as income that funding received directly for employees taken on in the Hospice and the administration of the scheme.

Had all of the income received been included total income would increase by £58,162 and expenditure would also increase by £58,162. There would be no overall impact on the deficit for the year or the total closing reserves.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022

4. DONATIONS, LEGACIES AND SIMILAR INCOMING RESOURCES

	Restricted funds 2022 £	Unrestricted funds 2022 £	Total funds 2022 £	Total funds 2021 £
Coronavirus job retention scheme funding	-	33,293	33,293	160,950
Donations	-	573,841	573,841	662,590
Legacies	-	166,508	166,508	108,196
Grants	516,709	83,322	600,031	198,216
Other Covid-19 grants	-	23,850	23,850	116,962
Similar incoming resources	-	5,300	5,300	37,854
Total 2022	516,709	886,114	1,402,823	1,284,768
<i>Total 2021</i>	<i>44,941</i>	<i>1,239,827</i>	<i>1,284,768</i>	

In 2022 there is £442,659 included in grant income which was received from the Kickstart scheme.

5. INCOME FROM CHARITABLE ACTIVITIES

	Restricted funds 2022 £	Unrestricted funds 2022 £	Total funds 2022 £	Total funds 2021 £
In Patient Unit	620,679	301,969	922,648	938,226
Out Patient Unit	-	-	-	48,817
Medical	86,762	-	86,762	91,169
Multi Disciplinary Team	34,482	-	34,482	38,891
Bereavement	-	142,329	142,329	11,577
National Health Service England	191,141	-	191,141	631,092
Insurance income	-	61,142	61,142	-
Total 2022	933,064	505,440	1,438,504	1,759,772
<i>Total 2021</i>	<i>1,461,192</i>	<i>298,580</i>	<i>1,759,772</i>	

NHS England (NHSE) awarded funding towards the hospice providing patient care to support the NHS Covid-19 response from December 2021 to March 2022 to provide support to people with complex needs in the context of the Covid-19 situation and to provide bed capacity and community support.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022

6. FUNDRAISING INCOME

	Unrestricted funds 2022 £	Total funds 2022 £	Total funds 2021 £
Lottery	243,567	243,567	238,663
Fundraising events	119,026	119,026	69,292
Kitchen income	21,010	21,010	11,750
Charity shop takings	569,537	569,537	339,562
Catering and merchandising income	12,086	12,086	7,263
VR centre	13,500	13,500	-
Total 2022	978,726	978,726	666,530
<i>Total 2021</i>	<i>666,530</i>	<i>666,530</i>	

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022**

7. TRADING ACTIVITIES

	Restricted funds 2022 £	Unrestricted funds 2022 £	Total funds 2022 £	<i>Total funds 2021 £</i>
Charity trading income				
Charity shop takings	-	569,537	569,537	339,562
Catering and merchandising income	-	12,086	12,086	7,263
VR centre	-	13,500	13,500	-
Sub total trading income	-	595,123	595,123	346,825
Grant income included in note 2	291,269	-	291,269	-
Total income	291,269	595,123	886,392	346,825
Fundraising trading expenses				
Charity shop costs	-	133,905	133,905	101,746
VR centre costs	-	77,605	77,605	6,856
Catering and merchandising costs	-	4,106	4,106	4,055
Salaries	291,269	306,222	597,491	220,209
Total expenditure	291,269	521,838	813,107	332,866
Net income from trading activities	-	73,285	73,285	13,959
Total 2021	-	13,959	13,959	

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022**

8. COST OF RAISING FUNDS

	Unrestricted funds 2022 £	Restricted funds 2022 £	Total funds 2022 £	Total funds 2021 £
Fundraising expenditure	36,473	-	36,473	17,573
Lottery costs	89,010	-	89,010	93,856
Support costs allocated	8,187	-	8,187	6,094
Wages and salaries	108,512	-	108,512	113,396
Depreciation	40,108	-	40,108	40,108
Fundraising trading expenses (note 7)	521,838	291,269	813,107	332,866
Total 2022	804,128	291,269	1,095,397	603,893
<i>Total 2021</i>	<i>603,893</i>	<i>-</i>	<i>603,893</i>	

9. ANALYSIS OF EXPENDITURE ON CHARITABLE ACTIVITIES

Summary by fund type

	Restricted funds 2022 £	Unrestricted funds 2022 £	Total 2022 £	Total 2021 £
In Patient Unit	989,199	1,126,135	2,115,334	2,110,365
Out Patient Unit	-	-	-	11,985
Medical	96,319	153,509	249,828	237,228
Multi Disciplinary Team	45,039	226,409	271,448	283,166
Bereavement & Therapeutic Services	22,809	205,539	228,348	172,402
Total 2022	1,153,366	1,711,592	2,864,958	2,815,146
<i>Total 2021</i>	<i>1,508,831</i>	<i>1,306,315</i>	<i>2,815,146</i>	

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022

10. ANALYSIS OF EXPENDITURE BY ACTIVITIES

	Activities undertaken directly 2022 £	Support costs 2022 £	Total funds 2022 £	Total funds 2021 £
In Patient Unit	999,549	1,115,785	2,115,334	2,110,365
Out Patient Unit	-	-	-	11,985
Medical	227,997	21,831	249,828	237,228
Multi Disciplinary Team	251,398	20,050	271,448	283,166
Bereavement & Therapeutic Services	209,671	18,677	228,348	172,402
Total 2022	1,688,615	1,176,343	2,864,958	2,815,146
<i>Total 2021</i>	<i>1,718,797</i>	<i>1,096,349</i>	<i>2,815,146</i>	

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE

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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022

Analysis of direct costs	In Patient Unit		Out Patient Unit		Medical		Disciplinary Team		Multi		Bereavement & Therapeutic Services		Total funds			
	2022	£	2022	£	2022	£	2022	£	2022	£	2022	£	2022	£	2021	£
Staff costs	933,457		-		133,905		239,764		197,677		1,504,803		1,547,435			
Consumables	21,651		-		-		-		980		22,631		36,439			
Drugs	-		-		63,140		-		-		63,140		61,943			
Equipment and maintenance	21,494		-		-		-		255		21,749		23,948			
Medical and professional fees	18,295		-		30,952		11,634		6,021		66,902		46,765			
Travel	154		-		-		-		540		694		821			
Office costs and sundries	4,498		-		-		-		1,264		5,762		1,446			
Facilities	-		-		-		-		2,934		2,934		-			
Total 2022	999,549		-		227,997		251,398		209,671		1,688,615		1,718,797			
Total 2021	1,073,198		3,531		218,622		266,526		156,920		1,718,797					

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022**

Analysis of Support costs

	In Patient Unit 2022 £	Out Patient Unit 2022 £	Medical 2022 £	Disciplinary Team 2022 £	Multi Bereavement & Therapeutic Services 2022 £	Total funds 2022 £	Total funds 2021 £
Staff costs	664,136	-	12,598	11,134	10,172	698,040	682,953
Depreciation	139,248	-	3,028	3,028	3,028	148,332	123,120
Kitchen	40,135	-	411	411	-	40,957	29,660
Administration	21,553	-	449	224	224	22,450	21,736
Human resources	8,614	-	90	90	90	8,884	8,309
Management costs	40,035	-	869	869	869	42,642	40,058
Facilities	105,630	-	2,297	2,297	2,297	112,521	99,917
IT/Communications	87,507	-	1,903	1,903	1,903	93,216	81,996
Governance costs	8,927	-	186	94	94	9,301	8,600
Total 2022	1,115,785	-	21,831	20,050	18,677	1,176,343	1,096,349
<i>Total 2021</i>	<i>1,037,167</i>	<i>8,454</i>	<i>18,606</i>	<i>16,640</i>	<i>15,482</i>	<i>1,096,349</i>	

Support costs have been allocated to activities based on the staff numbers and hours involved in the activities.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022**

11. AUDITORS' REMUNERATION

	2022 £	2021 £
Fees payable to the Charity's auditor for the audit of the Charity's annual accounts	8,580	8,180
Fees payable to the Charity's auditor in respect of: All non-audit services not included above	55	50
	8,635	8,230

12. STAFF COSTS

	2022 £	2021 £
Wages and salaries	2,634,522	2,304,336
Social security costs	190,384	173,560
Contribution to defined contribution pension schemes	83,940	86,097
	2,908,846	2,563,993

The average number of persons employed by the Charity during the year was as follows:

	2022 No.	2021 No.
Communications	3	4
Fundraising	24	20
Management & administration	10	9
In Patient Unit	55	57
Out Patient Unit	-	1
Medical	2	2
Multi Disciplinary Team	5	6
Support staff	18	20
Bereavement	10	9
Kickstart	32	-
	159	128

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022

12. STAFF COSTS (CONTINUED)

The number of employees whose employee benefits (excluding employer pension costs) exceeded £60,000 was:

	2022	<i>2021</i>
	No.	<i>No.</i>
In the band £60,001 - £70,000	1	<i>-</i>
In the band £70,001 - £80,000	1	<i>1</i>

The total remuneration paid to key management personnel (including national insurance and pension contributions) was £456,864 (2021: £452,296).

Contributions were made to defined benefit pension schemes on behalf of higher paid employees.

The Charity also uses the services of volunteers who assist in the charity shops.

13. COUNCIL MEMBERS' REMUNERATION AND EXPENSES

During the year, no Council Members received any remuneration or other benefits (2021 - *£NIL*).

During the year ended 31 March 2022, no Council Member expenses have been incurred (2021 - *£NIL*).

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022**

14. TANGIBLE FIXED ASSETS

	Freehold land & property £	Motor vehicles £	Fixtures and fittings £	Computer equipment £	Total £
Cost					
At 1 April 2021	3,731,290	88,728	409,393	266,162	4,495,573
Additions	-	-	34,115	91,680	125,795
Disposals	-	-	-	(10,403)	(10,403)
At 31 March 2022	<u>3,731,290</u>	<u>88,728</u>	<u>443,508</u>	<u>347,439</u>	<u>4,610,965</u>
Depreciation					
At 1 April 2021	702,747	46,127	227,747	135,517	1,112,138
Charge for the year	75,706	7,003	45,307	63,452	191,468
On disposals	-	-	-	(1,734)	(1,734)
At 31 March 2022	<u>778,453</u>	<u>53,130</u>	<u>273,054</u>	<u>197,235</u>	<u>1,301,872</u>
Net book value					
At 31 March 2022	<u>2,952,837</u>	<u>35,598</u>	<u>170,454</u>	<u>150,204</u>	<u>3,309,093</u>
At 31 March 2021	<u>3,028,543</u>	<u>42,601</u>	<u>181,646</u>	<u>130,645</u>	<u>3,383,435</u>

Included in freehold land & property is freehold land of £375,000 (2021: £375,000) which is not depreciated.

Included within the net book value of assets is £35,598 (2021 – £42,601) relating to assets held under hire purchase agreements.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022

15. FIXED ASSET INVESTMENTS

	Investments in subsidiary companies £
Cost or valuation	
At 1 April 2021	100
At 31 March 2022	100
Net book value	
At 31 March 2022	100
At 31 March 2021	100

PRINCIPAL SUBSIDIARIES

The following was a subsidiary undertaking of the Charity:

Name	Registered office or principal place of business	Class of shares	Holding
Alice House Trading Limited (dormant) company number 07170334	Alice House, Wells Avenue, Hartlepool, Cleveland, TS24 9DA	Ordinary	100%

The financial results of the subsidiary for the year were:

Name	Net assets £
Alice House Trading Limited (dormant) company number 07170334	3,998

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022**

16. DEBTORS

	2022 £	2021 £
Trade debtors	106,553	56,967
Other debtors	3,227	31,636
Prepayments	56,483	35,254
Accrued income	334,274	275,410
	500,537	399,267

17. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2022 £	2021 £
Bank loans	114,594	80,625
Trade creditors	63,625	123,953
Pension creditor	18,275	16,129
Amounts owed to group undertakings	3,998	3,998
Other taxation and social security	53,166	41,055
Obligations under finance lease and hire purchase contracts	9,804	9,804
Other creditors	157,940	2,381
Deferred income	24,716	23,012
Accruals	12,226	15,086
	458,344	316,043

	2022 £	2021 £
Deferred income at 1 April 2021	23,012	24,930
Resources deferred during the year	24,716	23,012
Amounts released from previous periods	(23,012)	(24,930)
	24,716	23,012

Deferred income relates to Lottery money paid in advance.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022

18. CREDITORS: AMOUNTS FALLING DUE AFTER MORE THAN ONE YEAR

	2022	<i>2021</i>
	£	£
Bank loans	597,160	<i>713,051</i>
Net obligations under finance lease and hire purchase contracts	20,425	<i>30,228</i>
	<u>617,585</u>	<i><u>743,279</u></i>

The aggregate amount of liabilities payable or repayable wholly or in part more than five years after the reporting date is:

	2022	<i>2021</i>
	£	£
Payable or repayable by instalments	130,298	<i>239,539</i>
	<u>130,298</u>	<i><u>239,539</u></i>

The bank loans are repayable in monthly instalments ending March 2028 and June 2029 respectively. Interest is charged at the Bank of England base rate plus 2% per annum.

The Coronavirus Business Interruption Loan is repayable in monthly instalments ending November 2026. Interest is charged at 2% above the base rate per annum.

The bank loans are secured by a fixed and floating unlimited debenture and a charge over the land and buildings owned at The University Hospital of Hartlepool.

The hire purchase agreement is secured over the assets to which the agreement relates.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022**

19. STATEMENT OF FUNDS

STATEMENT OF FUNDS - CURRENT YEAR

	Balance at 1 April 2021 £	Income £	Expenditure £	Transfers in/out £	Gains/ (Losses) £	Balance at 31 March 2022 £
General funds	2,914,744	2,370,280	(2,515,720)	11,954	4,655	2,785,913
Restricted funds						
Restricted appeal funds	-	62,096	(58,712)	-	-	3,384
Primary Care Trust	-	689,643	(689,643)	-	-	-
Pharmacy income	-	52,280	(52,280)	-	-	-
Capital fund	-	11,954	-	(11,954)	-	-
Help the Hospices - fixed asset fund	446,250	-	(10,200)	-	-	436,050
National Health Service England	-	191,141	(191,141)	-	-	-
Kickstart funding	-	442,659	(442,659)	-	-	-
	<u>446,250</u>	<u>1,449,773</u>	<u>(1,444,635)</u>	<u>(11,954)</u>	<u>-</u>	<u>439,434</u>
Total of funds	<u><u>3,360,994</u></u>	<u><u>3,820,053</u></u>	<u><u>(3,960,355)</u></u>	<u><u>-</u></u>	<u><u>4,655</u></u>	<u><u>3,225,347</u></u>

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022

19. STATEMENT OF FUNDS (CONTINUED)

STATEMENT OF FUNDS - PRIOR YEAR

	<i>Balance at 1 April 2020</i> £	<i>Income</i> £	<i>Expenditure</i> £	<i>Transfers in/out</i> £	<i>Balance at 31 March 2021</i> £
Unrestricted funds					
Designated funds					
Covid retail grants	150,000	-	(150,000)	-	-
General funds					
General funds	2,452,852	2,204,937	(1,760,208)	17,163	2,914,744
Total Unrestricted funds	2,602,852	2,204,937	(1,910,208)	17,163	2,914,744
Restricted funds					
Restricted appeal funds	3,961	33,150	(37,111)	-	-
Primary Care Trust	-	777,822	(777,822)	-	-
Pharmacy income	-	52,278	(52,278)	-	-
Capital fund	5,700	11,791	(328)	(17,163)	-
Help the Hospices - fixed asset fund	456,450	-	(10,200)	-	446,250
National Health Service England	-	631,092	(631,092)	-	-
	466,111	1,506,133	(1,508,831)	(17,163)	446,250
Total of funds	3,068,963	3,711,070	(3,419,039)	-	3,360,994

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022

STATEMENT OF FUNDS - (CONTINUED)

Restricted funds

Restricted appeal funds in the year includes small grants received subject to restrictions. A balance of £3,384 received from the Odin Charitable Trust towards oxygen therapy remains to be spent in the new year.

Funding received and attributed directly to charitable activities has been shown as restricted. This includes monies from Durham Dales, Easington and Sedgfield Clinical Commissioning Group, and the Hartlepool & Stockton Clinical Commissioning Group which totalled £689,643

The capital fund represents grants received for the purchase of fixed assets. Funds received towards new mattresses and recliner chairs were fully spent the year.

Pharmacy income represents income from drugs purchased and recharged of £52,280.

The fixed asset fund represents a grant of £510,000 received from the Help the Hospices Fund (NHS England) towards the capital costs of the new Wellbeing Centre. This fund is depreciated in line with the asset.

NHS England (NHSE) awarded funding towards the hospice providing patient care to support the NHS COVID-19 response from December 2021 to March 2022 to provide support to people with complex needs in the context of the Covid-19 situation and to provide bed capacity and community support.

Funding to support unemployment people gain employment placements through the Government Kickstart scheme. This has been administered to other organisations to provide employment opportunities in accordance with the scheme.

20. ANALYSIS OF NET ASSETS BETWEEN FUNDS

ANALYSIS OF NET ASSETS BETWEEN FUNDS - CURRENT YEAR

	Restricted funds 2022 £	Unrestricted funds 2022 £	Total funds 2022 £
Tangible fixed assets	436,050	2,873,043	3,309,093
Fixed asset investments	-	100	100
Current assets	3,384	990,532	993,916
Creditors due within one year	-	(458,344)	(458,344)
Creditors due in more than one year	-	(617,585)	(617,585)
Provisions for liabilities and charges	-	(1,833)	(1,833)
Total	439,434	2,785,913	3,225,347

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022**

20. ANALYSIS OF NET ASSETS BETWEEN FUNDS (CONTINUED)

ANALYSIS OF NET ASSETS BETWEEN FUNDS - PRIOR YEAR

	<i>Restricted funds 2021 £</i>	<i>Unrestricted funds 2021 £</i>	<i>Total funds 2021 £</i>
Tangible fixed assets	446,250	2,937,185	3,383,435
Fixed asset investments	-	100	100
Current assets	-	1,043,269	1,043,269
Creditors due within one year	-	(316,043)	(316,043)
Creditors due in more than one year	-	(743,279)	(743,279)
Provisions for liabilities and charges	-	(6,488)	(6,488)
Total	<u>446,250</u>	<u>2,914,744</u>	<u>3,360,994</u>

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

	2022 £	2021 £
Net income/expenditure for the year (as per Statement of Financial Activities)	<u>(140,302)</u>	<u>292,031</u>
Adjustments for:		
Depreciation charges	191,468	165,740
Loss on the sale of fixed assets	8,669	-
Decrease/(increase) in debtors	(101,270)	134,871
Increase in creditors	103,677	13,908
Gain on pension deficit	4,655	-
Net cash provided by operating activities	<u>66,897</u>	<u>606,550</u>

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022

22. ANALYSIS OF CASH AND CASH EQUIVALENTS

	2022 £	2021 £
Cash in hand	493,379	644,002
Total cash and cash equivalents	493,379	644,002

23. ANALYSIS OF CHANGES IN NET DEBT

	At 1 April 2021 £	Cash flows £	At 31 March 2022 £
Cash at bank and in hand	644,002	(150,623)	493,379
Debt due within 1 year	(80,625)	(33,969)	(114,594)
Debt due after 1 year	(713,051)	115,891	(597,160)
Finance leases	(40,032)	9,803	(30,229)
	(189,706)	(58,898)	(248,604)

24. CONTINGENT LIABILITIES

Included in the 2005 financial statements was a grant of £500,000 from the Big Lottery Fund towards the capital costs of the new hospice. This grant agreement remains in force for a period of 80 years and the grant may become repayable if there is a breach of the terms and conditions in this period.

During the financial year 2013/14 and 2014/15 the Hospice received a grant totalling £510,000 from the Help the Hospices Fund (NHS England) towards the capital costs of the new Wellbeing Centre. In the event that the Hospice closes down or the building ceases to be used for the purpose of palliative care of patients, NHS England shall have the right to repayment of all monies advanced under this grant, subject to a reduction reflecting benefits from services already delivered.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022

25. CAPITAL COMMITMENTS

At 31 March 2022 the Charity had capital commitments as follows:

	2022 £	2021 £
Contracted for but not provided in these financial statements	-	4,439

26. PENSION COMMITMENTS

The pension cost charge represents contributions payable by the Charity and amounted to £83,940 (2021: £86,097). Contributions totalling £18,275 (2021: £16,129) were payable at the balance sheet date and are included in creditors.

The Charity is also making deficit payments and has included the net present value of these payments, £1,833 (2021: £6,488) in provisions.

The Pensions Trust

The Charity participates in the scheme, a multi-employer scheme which provides benefits to some 638 non-associated participating employers. The scheme is a defined benefit scheme in the UK. It is not possible for the Charity to obtain sufficient information to enable it to account for the scheme as a defined benefit scheme. Therefore it accounts for the scheme as a defined contribution scheme.

The scheme is subject to the funding legislation outlined in the Pensions Act 2004 which came into force on 30 December 2005. This, together with documents issued by the Pensions Regulator and Technical Actuarial Standards issued by the Financial Reporting Council, set out the framework for funding defined benefit occupational pension schemes in the UK.

The scheme is classified as a 'last-man standing arrangement'. Therefore the Charity is potentially liable for other participating employers' obligations if those employers are unable to meet their share of the scheme deficit following withdrawal from the scheme. Participating employers are legally required to meet their share of the scheme deficit on an annuity purchase basis on withdrawal from the scheme.

A full actuarial valuation for the scheme was carried out at 30 September 2020. This valuation showed assets of £800.3m, liabilities of £831.9m and a deficit of £31.6m. To eliminate this funding shortfall, the Trustee has asked the participating employers to pay additional contributions to the scheme as follows:

Deficit contributions
From 1 April 2022 to 31 January 2025: £3,312,000 per annum (payable monthly)

Unless a concession has been agreed with the Trustee the term to 31 January 2025 applies.

Note that the scheme's previous valuation was carried out with an effective date of 30 September 2017. This valuation showed assets of £794.9m, liabilities of £926.4m and a deficit of £131.5m. To eliminate this funding shortfall, the Trustee asked the participating employers to pay additional contributions to the scheme as follows:

Deficit contributions
From 1 April 2019 to 30 September 2025: £11,243,000 per annum
(payable monthly and increasing by 3% each on 1st April)

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022**

26. PENSION COMMITMENTS (CONTINUED)

The recovery plan contributions are allocated to each participating employer in line with their estimated share of the Series 1 and Series 2 scheme liabilities.

Where the scheme is in deficit and where the Charity has agreed to a deficit funding arrangement the Charity recognises a liability for this obligation. The amount recognised is the net present value of the deficit reduction contributions payable under the agreement that relates to the deficit. The present value is calculated using the discount rate detailed in these disclosures. The unwinding of the discount rate is recognised as a finance cost.

	31 March 2022	31 March 2021	31 March 2020
	(£)	(£)	(£)
Present value of provision	1,833	6,488	7,688

RECONCILIATION OF OPENING AND CLOSING PROVISIONS

	Year Ending 31 March 2022	Year Ending 31 March 2021
	(£)	(£)
Provision at start of period	6,488	7,688
Unwinding of the discount factor (interest expense)	37	172
Deficit contribution paid	(1,642)	(1,594)
Remeasurements - impact of any change in assumptions	(42)	222
Remeasurements - amendments to the contribution schedule	(3,008)	-
Provision at end of period	1,833	6,488

INCOME AND EXPENDITURE IMPACT

	Year Ending 31 March 2022	Year Ending 31 March 2021
	(£)	(£)
Interest expense	37	172
Remeasurements – impact of any change in assumptions	(42)	222
Remeasurements – amendments to the contribution schedule	(3,008)	-

ASSUMPTIONS

	31 March 2022	31 March 2021	31 March 2020
	% per annum	% per annum	% per annum
Rate of discount	2.35	0.66	2.53

The discount rates shown above are the equivalent single discount rates which, when used to discount the future recovery plan contributions due, would give the same results as using a full AA corporate bond yield curve to discount the same recovery plan contributions.

The charity also makes contributions to the National Health Service Pension Scheme but is not required to make deficit contributions.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022

27. OPERATING LEASE COMMITMENTS

At 31 March 2022 the Charity had commitments to make future minimum lease payments under non-cancellable operating leases as follows:

	2022	2021
	£	£
Not later than 1 year	93,430	58,031
Later than 1 year and not later than 5 years	31,595	3,480
Later than 5 years	824	-
	<hr/> 125,849 <hr/>	<hr/> 61,511 <hr/>

28. RELATED PARTY TRANSACTIONS

During the year the charity paid £13,427 for rent and insurance (2021: £13,432) to a Council Member.

29. GENERAL RESERVES

At 31 March 2022 there is a deficit on unrestricted free reserves of £87,230. Excluding the long term bank loans and the pension deficit, there is a surplus of £511,763.

THE HARTLEPOOL HOSPICE LIMITED

England & Wales - Charity number 510824

Accounts

Registered number: 01525658
Charity number: 510824

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

COUNCIL MEMBERS' REPORT AND FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2021

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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**REFERENCE AND ADMINISTRATIVE DETAILS OF THE CHARITY, ITS COUNCIL MEMBERS AND
ADVISERS
FOR THE YEAR ENDED 31 MARCH 2021**

Council Members

Mr R Priestman, Chair
Mrs L Jones, Vice chair
Mr F M Gibbon
Mrs J Regan, Treasurer
Mr Clive Shotton
Dr R Armstrong (resigned 29 July 2021)
Mr J F Ainslie
Mrs A Barber
Mrs R Marshall (resigned 7 May 2020)
Mr S T Chacko
Mrs K Martin
Mr P Jones-King
Dr J Druce (appointed 23 September 2021)

Company registered number

01525658

Charity registered number

510824

Registered office

Alice House, Wells Avenue, Hartlepool, TS24 9DA

Chief executive officer

Ms T Woodall

Independent auditors

Waltons Clark Whitehill Limited, Maritime House, Harbour Walk, The Marina, Hartlepool, TS24 0UX

Bankers

Lloyds TSB, 132 York Road, Hartlepool, TS26 9DD

Solicitors

Tilly Bailey & Irvine LLP, York Chambers, York Road, Hartlepool, TS26 9DP

Director of Information Governance (Deputy Chief Executive)

Ms S Britten

Senior Manager Finance

Mrs K Burrell

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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REFERENCE AND ADMINISTRATIVE DETAILS OF THE CHARITY, ITS COUNCIL MEMBERS AND
ADVISERS (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2021

Senior Manager Clinical Services

Ms K Gibson

Senior Manager Corporate Services (Deputy Chief Executive)

Ms N Haggan

Senior Manager Fundraising

Ms J Hildreth

Senior Manager Retail

Ms K Witherley

Senior Manager Therapeutic Support Services

Ms J Grocott

Senior Manager Communications

Mr G Hildreth

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

COUNCIL MEMBERS' REPORT
FOR THE YEAR ENDED 31 MARCH 2021

The Council Members, who are also Non-Executive Directors of the Charity for the purposes of the Companies Act, submit their annual report together with the audited financial statements of The Hartlepool Hospice Limited (the charity) for the year ended 31 March 2021. The Council Members confirm that the Annual report and financial statements of the Charity comply with the current statutory requirements, the requirements of the Charity and the Charity's governing document and the provisions of the Statement of Recommended Practice (SORP) applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS102) (effective 1 January 2019).

Structure, governance and management

The Charity is a company limited by guarantee and incorporated in England and Wales. It is governed by its Memorandum and Articles of Association adopted on 31 October 1980 and last amended on 26 September 2013.

The Council is responsible for the overall governance of the Charity. Council Members are either elected or co-opted and there must be a minimum of three Council Members, there is no maximum number of Council Members. The board will be made up of not less than 2 lay Council Members (meaning not appointed to act as a professional advisor) and such number of professional Council Members as the Council Members consider appropriate. Each Council Member shall retire from office at the fourth annual general meeting following the date of his appointment. Any professional director who so retires is eligible for re-election by the members or the directors as appropriate.

We would like to say a huge thank you to Robin Armstrong who has been a long standing board member but has now retired, we wish him well in his retirement.

The Hartlepool Hospice Limited is trading as Alice House Hospice.

The Council aim to maintain a balanced skills and experience base by identifying skills shortages when an opening exists for a new member.

Effective partnership and clarity of differentiation between governance and management roles continues to contribute significantly to our success. Apart from the AGM, Council meetings were bi monthly. At Council meetings the Council Members review performance against agreed strategy and financial performance against agreed budgets. New Council Members receive an induction pack containing everything they need to know about the Charity and its work for effective and Informed decision making. The Council Members take full ownership of the Charity's philosophy, five year rolling strategy and annual income and expenditure budgets.

The Council delegates the exercise of certain powers in connection with the financial control of the Charity as set out below. This is controlled by requiring regular reporting back to the Council, so that all decisions made under delegated powers can be ratified by the full Council in due course.

In setting the pay and remuneration of staff (including the senior management team) the Council Members have regard to local pay conditions for similar roles in similar organisations in the North East region.

Chief Executive

The Chief Executive is responsible for the day to day management of the Charity's affairs and for implementing the strategy as agreed by the Council within the boundaries of the budget and various policies and procedures agreed by the Council. The Chief Executive is assisted by the Council Members.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2021

Corporate governance

Processes are in place to ensure that performance throughout the organisation is measured and monitored and all employees are subject to performance management and achievement of competencies. Where employees do not perform to expected standards support is provided through individual action plans.

Corporate governance is assured through a myriad of meetings and reporting mechanisms and evaluated against the Charity's strategy. Internal audits reflect the Charity's five areas of organisational excellence and are reported on a bi monthly basis to Council Members through the Chief Executive and Directors' reports.

Finance sub group

The Finance Sub Group comprises Council Members who are independent of the management and free of any relationship that in the opinion of the Council would interfere with the exercise of independent judgement as members of the Group. The Group has six bi monthly meetings per year. It is responsible for the setting of annual income and expenditure budgets and the monitoring of such, including quarterly year end forecasts. The Group ensures proper procedures are in place to manage cash resources prudently, and to maximise income from liquid resources whilst maintaining sufficient funds to meet daily cash requirements. The Group also advises the Council on the appropriate level of free reserves and of any significant change needed in investment strategy.

Risk management

The Council have a formal risk management process to assess business risks and implement risk management strategies. This involves identifying the types of risks the Charity faces, prioritising them in terms of potential impact and likelihood of occurrence, and identifying means of mitigating the risks. As part of this process the Council Members review the adequacy of the Charity's current internal controls and the costs of operating particular controls relative to the benefits obtained. Procedures have been established for reporting failings immediately to appropriate levels of management.

The significant risks to which the Charity is vulnerable, and methods in which they are controlled, are:

Loss of income	Regular monitoring of financial performance and setting and reviewing budgets
Disaster	Health and Safety officer review; regular risk management meetings (fire/loss of power etc)
Staff crisis	Use of bank staff – relocate patients to other providers

Objectives and activities

Objects, objectives and principal activities of the Charity

During this period a new refreshed organisational strategy was developed and disseminated, however due to Covid, some elements will need a review to align with the impact of Covid on our services, this will be performed once we are over the pandemic and understand the full impact.

Hospice UK forecast that during this pandemic around 30% of Hospices could close due to lack of funding, nevertheless the Government interventions have helped sustain our finances.

It has been difficult to set a new budget but we have managed to create a surplus and Council Members are confident that the Charity will achieve this budget. We have new income streams coming on board which once the Covid restrictions are lifted will generate income from entirely new sources and more importantly will provide us with a younger generation of supporters.

The Charity's primary objective is to provide care for individuals who are suffering from any illness, disability, disease or other infirmity whether physical or mental.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2021

Our Vision

Every person, to the last moment of their life has the right to dignity, respect, support and care.

Our Mission

To provide services that add value to life and make a difference to patients and their families.

To achieve the Mission, the Charity has diversified its activities whilst still remaining true to the primary purposes of the Charity. Service delivery has evolved into a more structured response to the specialist needs of palliative patients with a range of clinical needs and this structured approach also encompasses the wider health economy needs.

Our Values

- We value each person as an individual
- The patient is at the heart of all of our activities
- We believe in the importance of celebrating life and relationships
- We will demonstrate integrity and professionalism at all times
- We will be modern and progressive and seek out new opportunities to develop our services
- We will strive to be the best we can and encourage staff and volunteers to actively seek opportunities for personal growth and development
- We will exercise responsible financial management to ensure long term sustainability.

Strategies for achieving objectives

Our new strategy sets 3 strategic goals:

- We will ensure all of our services are of a high quality and are delivered safely with compassion and dignity.
- We will ensure our organisation is governed and managed in accordance with best practice.
- We will seek out opportunities to support our communities in all of their interactions with us.

The strategy provides a Patient's, Trustee's and Staff Charter which confirms our intentions and provides a commitment to collective responsibility and organisational cohesion.

Activities for achieving objectives

Prior to Covid the Hospice was functioning well and had a full year of fundraising activities planned which we were confident should have hit the identified budget. Additionally, after some difficult times, the Community Services had increased significantly through improved integrated working with Primary Care partners and was achieving budget. The Holistic Centre activities were starting to increase and this was a new service which needed time to build up. Our retail sector performed very well and beats its target year on year. The Hospice continually scrutinises the organisation for areas of cost savings and waste reduction alongside areas for income generation. We will be focusing on reducing utility bills through the exploration of green energy this year but it will take time to understand our carbon footprint and options for renewable energy.

The Council consider that they have complied with their duty in section 4 of the Charities Act 2006 to have due regard to public benefit guidance published by the Charity Commission when setting objects, strategy and objectives.

Achievements and performance

We continue to run a highly professional organisation with a stable financial position which reflects ethical fundraising and cash holding policies decided by our Council Members.

The credit rating during the reporting period has remained at level A.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2021

Strategic objectives

We will manage our Charity as effectively, efficiently and responsibly as possible.

The Board have had regular updates and our risk register has been updated regularly to enable effective management of issues arising.

We will ensure all of our services are of a high quality and are delivered safely with compassion and dignity.

We have held regular engagement meetings with our CQC officer through zoom and have contacted them for advice when necessary.

There has been one formal complaint made in the previous 12 months which has been resolved without issue.

We will ensure our organisation is governed and managed in accordance with best practice.

The Board receive updates from all of our Senior Management Team for each meeting to ensure transparency and service developments are always approved by the Board.

All of the Board have fulfilled their mandatory training requirements.

We will seek out opportunities to support our communities in all of their interactions with us.

Collaboration has been high on our agenda and we have worked in partnership with the local authority to provide mental health support through our 'place for space' programme in the Holistic centre. We have continued to work with the CCG on educating care homes, and the community housing group has cemented many relationships.

Mental health recovery following Covid will be a substantial focus for us over the next year.

Financial review

Reserves policy

Free reserves available for use by the Charity are deemed to be those that are readily realisable, less funds whose uses are restricted or else designated for particular purposes.

As a matter of policy the Charity aims to build up and hold a maximum of two months running costs as reserves. This objective is secondary to the achievement of the Charity's strategic objectives as stated in the current strategy, so that reserves will not be built or maintained at the expense of planned or current patient care.

Two months running costs would be approximately £570k. With free reserves (after removing long term liabilities) of £697k the Charity is ahead of target. The Charity expects to utilise the extra reserves over the next year to support the Charity as it recovers income streams post Covid.

Aspirational objectives for reserves: the Charity aims to become financially independent of Primary Care Trust contracts as a security measure against diminishing contract values and the uncertainty of the level of tariff funding arising from the Palliative Care Funding Review. Nevertheless it will still seek appropriate contracts to advance patient services. The achievement of this will be through the new VR studio and other business opportunities as the care agency has closed down.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2021

Financial review and results for the year

The Charity has made a surplus of £292,031. The impact of the Covid-19 pandemic has been significant with fundraising income through events (fallen £90k) and charity shops (fallen £140k) impacted severely due to government restrictions. However the Charity has received support in the form of additional Hospice funding (£631k) and retail grants (£106k) that have ensured the Hospice has been able to continue to provide its services throughout the pandemic.

The detailed results are as follows:

Gross income increased by 3% to £3.7m, while expenditure on charitable activities decreased by 3% to £2.8m. After taking depreciation into account total resources expended of £3.4m (2020: £3.6m) resulted in a net surplus for the year of £292k (2020: £12k).

Income received in furtherance of charitable objects totalled £1.8m. Expenditure incurred on furthering charitable objects was £2.8m. The Charity supports its charitable activities with successful fundraising activities, including charity shops and a lottery.

Fundraising activities, donations and legacies generated a surplus of unrestricted income of £871k to be used to pursue charitable activities.

£476k of grants were received to support the work of the Hospice.

The lottery generated a surplus of £145k (2020: £169k) and charity shops & Ebay generated a surplus of £12k (2020: £165k).

£9k of unrestricted income was spent on the governance costs of the organisation.

Total reserves stand at £3.3m (2020: £3.1m), including £446k of restricted reserves.

At 31 March 2021 there is a deficit on unrestricted free reserves of £23k. Excluding the long term bank loans, a loan which was used to purchase the freehold and develop the Wellbeing Centre and the Coronavirus Business Interruption Loan, and the pension deficit, there is a surplus of £697k.

Investment policy and performance

The Memorandum of Association authorises the Council Members to invest surplus funds as may be thought fit. The Council Members' policy is to hold any surplus cash on deposit to obtain the most attractive interest rate available. The Council Members' have directed that funds will be used in the charitable activities of the company instead.

Fundraising

Alice House Hospice has a 5 Year Income Generation Strategy (2017 – 2021) which ensures supporter relationships and effective governance are at the heart of its income generation. The strategy encompasses 5 objectives in order to execute the Strategic Aspiration – 'support the community to have a positive relationship with Alice House Hospice, to create sustainable income.'

Fundraising is starting to recover and in this year we have secured a three year partnership fundraising project working with the North East Air Ambulance and the Middlesbrough Sports Foundation as the designated charities of the Tees Valley Mayor and Teesside International Airport.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2021

Alice House Hospice is a subscribed member of the Fundraising Regulator and as such adheres to the Code of Fundraising Practice. We review each Code on a rolling programme to ensure that we are compliant in all areas. An action plan is in progress for any areas where improvements are to be made to ensure full compliance with the Code and is managed by the Senior Manager Fundraising.

All Staff and Volunteers within Income Generation have access to the Code of Fundraising and the Institute of Fundraising 'Treating Donors Fairly' policy.

Plans for the future

Our Holistic Centre continues to grow and thrive and we are responding to the increase in mental health referrals through the centre. We have recruited male volunteers to support mental health activities for men.

Future developments

Our aim is to provide a 24hr admission service through developing an integrated palliative care pathway with either a local hospice or the Acute Trust. The CCG is performing a review of palliative care services and we are supporting this process.

Employees

Employees are fully involved with the development and delivery of the strategy and it is integral to all daily activities and used to support their appraisals.

Regular communications' meetings are held to ensure that all employees are aware of the activities of the Charity; these meetings are Director led.

Volunteers

The survival and growth of the Charity could not be achieved without the unstinting support of the volunteer workforce, who enable the fulfilment of the Hospice's Vision by complimenting the work of the patient care staff, supporting fundraising efforts and serving as Council Members. The volunteers bring skill, knowledge and experience which greatly enhances the professional profile of the Charity. This in turn enables the Charity to reach further into the community, not only by caring for those with life limiting illnesses but by offering opportunities for the development of skills and expertise which individuals can take with them in their own personal development, back into the community, thus enhancing the profile of the Charity and encouraging more individuals to offer their service on a voluntary basis.

Council Members' liability

The Council Members guarantee to contribute an amount not exceeding £1 to the assets of the Charity in the event of winding up.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2021

Council Member's responsibilities statement

The Council Members (who are also directors of Hartlepool Hospice Limited for the purposes of company law) are responsible for preparing the Council Members' report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company and charity law requires the Council Members to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of resources, including the income and expenditure, of the charitable company for that period. In preparing these financial statements, the Council Members 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;
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in operation.

The Council Members are responsible for keeping adequate accounting records that disclose with reasonable accuracy at any time the financial position of the charitable company and enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

Provision of information to auditors

Each of the persons who are Council Members at the time when this Council Members' report is approved has confirmed that:

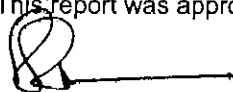
- so far as that Council Member is aware, there is no relevant audit information of which the charitable company's auditors are unaware, and
- that Council Member has taken all the steps that ought to have been taken as a Council Member in order to be aware of any information needed by the charitable company's auditors in connection with preparing their report and to establish that the charitable company's auditors are aware of that information.

Auditors

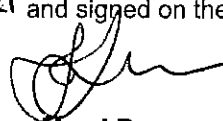
The auditors, Waltons Clark Whitehill Limited, will be proposed for reappointment in accordance with section 485 of the Companies Act 2006.

In preparing this report, the Council Members have taken advantage of the small companies exemptions provided by section 415A of the Companies Act 2006.

This report was approved by the Council Members on 18/11/2021 and signed on their behalf, by:



Mr R Priestman
(Chair of Trustees)



Mrs J Regan
(Treasurer)

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE HARTLEPOOL HOSPICE LIMITED T/A
ALICE HOUSE HOSPICE**

UNQUALIFIED OPINION

We have audited the financial statements of The Hartlepool Hospice Limited T/A Alice House Hospice (the 'charity') for the year ended 31 March 2021 which comprise the Statement of Financial Activities, the Balance sheet, the Statement of cash flows and the related notes, 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 charitable company's affairs as at 31 March 2021 and of its incoming resources and application of resources, including its income and expenditure for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

BASIS FOR OPINION

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditors' responsibilities for the audit of the financial statements section of our report. We are independent of the charitable company in accordance with the ethical requirements that are relevant to our audit of the financial statements in the United Kingdom, including the Financial Reporting Council'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 Council Members' 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 charitable company's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

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

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE HARTLEPOOL HOSPICE LIMITED T/A
ALICE HOUSE HOSPICE (CONTINUED)**

OTHER INFORMATION

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

We have nothing to report in this regard.

OPINION 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 Council Members' Report for the financial year for which the financial statements are prepared is consistent with the financial statements.
- the Council Members' Report has been prepared in accordance with applicable legal requirements.

MATTERS ON WHICH WE ARE REQUIRED TO REPORT BY EXCEPTION

In the light of our knowledge and understanding of the charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the Council Members' Report.

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

- adequate accounting records have not been kept, or returns adequate for our audit have not been received from branches not visited by us; or
- the financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of Council Members' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit; or
- the Council Members were not entitled to prepare the financial statements in accordance with the small companies regime and take advantage of the small companies' exemptions in preparing the Council Members' Report and from the requirement to prepare a Strategic Report.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE HARTLEPOOL HOSPICE LIMITED T/A
ALICE HOUSE HOSPICE (CONTINUED)**

RESPONSIBILITIES OF TRUSTEES

As explained more fully in the Council Members' responsibilities statement, the Council Members (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 Council Members 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 Council Members are responsible for assessing the 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 Council Members either intend to liquidate the charitable company or to cease operations, or have no realistic alternative but to do so.

AUDITORS' 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 Auditors' 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:

In identifying and assessing risks of material misstatement in respect of irregularities, including fraud, the audit engagement team:

- Obtained an understanding of the nature of the sector, including the legal and regulatory framework that the charitable company operates in and how they are complying with the legal and regulatory framework
- Inquired of management and those charged with governance about their own identification and assessment of the risks of irregularities including any known, actual, suspected or alleged instances of fraud,
- Discussed matters about non-compliance with laws and regulations and how fraud might occur including assessment of how and where the financial statements might be susceptible to fraud.

As a result of these procedures we considered the most significant laws and regulations which have a direct impact on the financial statements are FRS 102, Charities SORP (FRS 102), Companies Act 2006 and the charitable company's governing document. We performed audit procedures to detect non-compliance which may have a material impact on the financial statements which included reviewing the financial statements including the council members report and remaining alert to new or unusual transactions which may not be in accordance with the governing documents.

The audit engagement team identified the risk of management override of controls and Income recognition as the areas where the financial statements were most susceptible to material misstatement due to fraud. We designed audit procedures to respond to the risk, recognising that the risk of not detecting a material misstatement due to fraud is higher than the risk of not detecting one resulting from error, as fraud may involve deliberate concealment by, for example, forgery or intentional misrepresentations, or through collusion.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE HARTLEPOOL HOSPICE LIMITED T/A
ALICE HOUSE HOSPICE (CONTINUED)**


Audit procedures performed included, but were not limited to:

- testing manual journal entries and other adjustments
- evaluating the business rationale in relation to significant or unusual transactions and transactions entered into outside the normal course of business
- challenging judgments and estimates
- reviewing income transactions around the year end to look for potential "window dressing".

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 Auditors' 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 Auditors' report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and its members, as a body, for our audit work, for this report, or for the opinions we have formed.



Heather O'Driscoll FCA (Senior statutory auditor)

for and on behalf of

Waltons Clark Whitehill Limited

Chartered Accountants

Statutory Auditors

Maritime House

Harbour Walk

The Marina

Hartlepool

TS24 0UX

Date: 30 November 2021

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

**STATEMENT OF FINANCIAL ACTIVITIES (INCORPORATING INCOME AND EXPENDITURE ACCOUNT)
FOR THE YEAR ENDED 31 MARCH 2021**

	Note	Restricted funds 2021 £	Unrestricted funds 2021 £	Total funds 2021 £	Total funds 2020 £
INCOME FROM:					
Donations and legacies	3	44,941	1,239,827	1,284,768	1,265,615
Charitable activities	4	1,461,192	298,580	1,759,772	1,358,927
Other trading activities	5	-	666,530	666,530	974,889
TOTAL INCOME		1,506,133	2,204,937	3,711,070	3,599,431
EXPENDITURE ON:					
Raising funds	7	-	603,893	603,893	693,425
Charitable activities	8	1,508,831	1,306,315	2,815,146	2,894,208
TOTAL EXPENDITURE		1,508,831	1,910,208	3,419,039	3,587,633
NET (EXPENDITURE)/INCOME		(2,698)	294,729	292,031	11,798
Transfers between funds	18	(17,163)	17,163	-	-
NET MOVEMENT IN FUNDS		(19,861)	311,892	292,031	11,798
RECONCILIATION OF FUNDS:					
Total funds brought forward		466,111	2,602,852	3,068,963	3,057,165
Net movement in funds		(19,861)	311,892	292,031	11,798
TOTAL FUNDS CARRIED FORWARD		446,250	2,914,744	3,360,994	3,068,963

The Statement of Financial Activities includes all gains and losses recognised in the year.

The notes on pages 18 to 40 form part of these financial statements.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)
REGISTERED NUMBER: 01525658

BALANCE SHEET
AS AT 31 MARCH 2021

	Note	2021 £	2020 £
FIXED ASSETS			
Tangible assets	13	3,383,435	3,297,726
Investments	14	100	100
		<u>3,383,535</u>	<u>3,297,826</u>
CURRENT ASSETS			
Debtors	15	399,267	534,138
Cash at bank and in hand		644,002	60,738
		<u>1,043,269</u>	<u>594,876</u>
Creditors: amounts falling due within one year	16	(316,043)	(271,830)
		<u>727,226</u>	<u>323,046</u>
NET CURRENT ASSETS		<u>727,226</u>	<u>323,046</u>
TOTAL ASSETS LESS CURRENT LIABILITIES		<u>4,110,761</u>	<u>3,620,872</u>
Creditors: amounts falling due after more than one year	17	(743,279)	(544,221)
NET ASSETS EXCLUDING PENSION LIABILITY		<u>3,367,482</u>	<u>3,076,651</u>
Defined benefit pension scheme liability	25	(6,488)	(7,688)
TOTAL NET ASSETS		<u><u>3,360,994</u></u>	<u><u>3,068,963</u></u>
CHARITY FUNDS			
Restricted funds	18	446,250	466,111
Unrestricted funds	18	2,914,744	2,602,852
TOTAL FUNDS		<u><u>3,360,994</u></u>	<u><u>3,068,963</u></u>

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)
REGISTERED NUMBER: 01525658

BALANCE SHEET (CONTINUED)
AS AT 31 MARCH 2021

The Council Members acknowledge their responsibilities for complying with the requirements of the Act with respect to accounting records and preparation of financial statements.

The financial statements have been prepared in accordance with the provisions applicable to entities subject to the small companies regime.

The financial statements were approved and authorised for issue by the Council Members and signed on their behalf by:



Mr R Priestman
Chair of Trustees
Date: 18/11/2021



Mrs J Regan
Treasurer

The notes on pages 18 to 40 form part of these financial statements.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED 31 MARCH 2021

	Note	2021 £	2020 £
CASH FLOWS FROM OPERATING ACTIVITIES			
Net cash used in operating activities	20	606,550	33,901
CASH FLOWS FROM INVESTING ACTIVITIES			
Purchase of tangible fixed assets		(251,449)	(76,237)
NET CASH USED IN INVESTING ACTIVITIES		(251,449)	(76,237)
CASH FLOWS FROM FINANCING ACTIVITIES			
Cash inflows from new borrowing		250,000	-
Repayments of borrowing		(61,869)	(60,772)
New finance leases		49,020	-
Repayments of finance leases		(8,988)	-
NET CASH PROVIDED BY/(USED IN) FINANCING ACTIVITIES		228,163	(60,772)
CHANGE IN CASH AND CASH EQUIVALENTS IN THE YEAR		583,264	(103,108)
Cash and cash equivalents at the beginning of the year		60,738	163,846
CASH AND CASH EQUIVALENTS AT THE END OF THE YEAR	21	644,002	60,738

The notes on pages 18 to 40 form part of these financial statements

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
(A company limited by guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2021

1. GENERAL INFORMATION

The Charity is a company incorporated in England and Wales and limited by guarantee. The members of the company are the Council Members named on page 2. In the event of the Charity being wound up, the liability in respect of the guarantee is limited to £1 per member of the Charity.

The registered address is:

Alice House
Wells Avenue
Hartlepool
TS24 9DA

2. ACCOUNTING POLICIES

2.1 Basis of preparation of financial statements

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

The Hartlepool Hospice Limited T/A Alice House Hospice 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.

2.2 Fund accounting

General funds are unrestricted funds which are available for use at the discretion of the Council Members in furtherance of the general objectives of the Charity and which have not been designated for other purposes.

Designated funds comprise unrestricted funds that have been set aside by the Council Members for particular purposes. The aim and use of each designated fund is set out in the notes to the financial statements.

Restricted funds are funds which are to be used in accordance with specific restrictions imposed by donors or which have been raised by the Charity for particular purposes. The costs of raising and administering such funds are charged against the specific fund. The aim and use of each restricted fund is set out in the notes to the financial statements.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2021**

2. ACCOUNTING POLICIES (CONTINUED)

2.3 Going concern

Despite a challenging year due to the Covid-19 pandemic the Charity has made a surplus of £292,031.

Despite this uncertainties as identified by the Council Members remain. Costs continue to increase and these are not covered by the income from charitable activities. The Charity is reliant upon the continued support of the public in the form of donations and legacies.

Council Members are always looking for new fundraising opportunities and have invested in a virtual reality project which it is hoped will raise money and introduce potential new supporters to the Charity. The project has made an encouraging start in the new year and other fundraising events and shop income have recovered significantly in the 2021/22 year after postponements, cancellations and closures brought about by the pandemic.

The Council Members have great confidence in the Charity's ability to hit budgets and stay viable. The financial statements therefore continue to be prepared on the going concern basis.

2.4 Income

All income is recognised 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.

For legacies, entitlement is taken as the earlier of the date on which either: the Charity is aware that probate has been granted, the estate has been finalised and notification has been made by the executor(s) to the Trust that a distribution will be made, or when a distribution is received from the estate. Receipt of a legacy, in whole or in part, is only considered probable when the amount can be measured reliably and the Charity has been notified of the executor's intention to make a distribution. Where legacies have been notified to the Charity, or the Charity is aware of the granting of probate, and the criteria for income recognition have not been met, then the legacy is treated as a contingent asset and disclosed if material.

Gifts donated for resale are included as income when they are sold.

The Council Members acknowledge that they are assets of the Charity as soon as received but due to the fact that a very large number of small value items are received the time and cost of valuing donated goods at receipt would outweigh any benefit to the users of the financial statements of having them so valued.

Where goods are donated under the Gift Aid scheme the Charity is not entitled to the income until the goods are sold and the donor has confirmed that they are gifting the proceeds. In this case the income is included as a donation rather than as a sale.

Income tax recoverable in relation to donations received under Gift Aid or deeds of covenant is recognised at the time of the donation.

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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2021

2. ACCOUNTING POLICIES (CONTINUED)

2.5 Expenditure

Expenditure is recognised once there is a legal or constructive obligation to transfer economic benefit to a third party, it is probable that a transfer of economic benefits will be required in settlement and the amount of the obligation can be measured reliably. Expenditure is classified by activity. The costs of each activity are made up of the total of direct costs and shared costs, including support costs involved in undertaking each activity. Direct costs attributable to a single activity are allocated directly to that activity. Shared costs which contribute to more than one activity and support costs which are not attributable to a single activity are apportioned between those activities on a basis consistent with the use of resources. Central staff costs are allocated on the basis of time spent, and depreciation charges allocated on the portion of the asset's use.

Costs of generating voluntary income are those incurred in seeking voluntary contributions and do not include the costs of disseminating information in support of the charitable activities.

Fundraising costs are the direct costs of operating the charity shops and other trading activities. Support costs are those costs incurred directly in support of expenditure on the objects of the charity and include central costs. Governance costs are those incurred in connection with administration of the Charity and compliance with constitutional and statutory requirements.

2.6 Tangible fixed assets and depreciation

Tangible fixed assets costing £250 or more are capitalised and recognised when future economic benefits are probable and the cost or value of the asset can be measured reliably.

Tangible fixed assets are initially recognised at cost. After recognition, under the cost model, tangible fixed assets are measured at cost less accumulated depreciation and any accumulated impairment losses. All costs incurred to bring a tangible fixed asset into its intended working condition should be included in the measurement of cost.

Depreciation is charged so as to allocate the cost of tangible fixed assets less their residual value over their estimated useful lives, using the straight-line method.

Depreciation is provided on the following bases:

Freehold property	- 20/50 years straight line
Plant and machinery	- 7 years straight line
Motor vehicles	- 7 years straight line
Fixtures and fittings	- 7 years straight line
Computer equipment	- 3/5 years straight line
Other fixed assets	- 3 years straight line

The assets useful lives and depreciation rates have been reviewed and adjusted since the last reporting period.

2.7 Investments

Investments represent the shares held in a subsidiary company which are stated at cost.

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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2021

2. ACCOUNTING POLICIES (CONTINUED)

2.8 Debtors

Trade and other debtors are recognised at the settlement amount after any trade discount offered. Prepayments are valued at the amount prepaid net of any trade discounts due.

2.9 Cash at bank and In hand

Cash at bank and In hand includes cash and short-term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

2.10 Liabilities

Liabilities and provisions are recognised when there is an obligation at the Balance sheet date as a result of a past event, it is probable that a transfer of economic benefit will be required in settlement, and the amount of the settlement can be estimated reliably.

Liabilities are recognised at the amount that the Charity anticipates it will pay to settle the debt or the amount it has received as advanced payments for the goods or services it must provide.

Provisions are measured at the best estimate of the amounts required to settle the obligation. Where the effect of the time value of money is material, the provision is based on the present value of those amounts, discounted at the pre-tax discount rate that reflects the risks specific to the liability. The unwinding of the discount is recognised within interest payable and similar charges.

2.11 Finance leases and hire purchase

Assets obtained under hire purchase contracts and finance leases are capitalised as tangible fixed assets. Assets acquired by finance lease are depreciated over the shorter of the lease term and their useful lives. Assets acquired by hire purchase are depreciated over their useful lives. Finance leases are those where substantially all of the benefits and risks of ownership are assumed by the Charity. Obligations under such agreements are included in creditors, net of the finance charge allocated to future periods. The finance element of the rental payment is charged to the Statement of financial activities so as to produce a constant periodic rate of charge on the net obligation outstanding in each period.

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2021**

2. ACCOUNTING POLICIES (CONTINUED)

2.12 Pensions

The Charity contributes to a defined contribution pension scheme and the pension charge represents the amounts payable by the Charity to the fund in respect of the year.

Defined benefit schemes

The Charity makes contributions to the National Health Service Pension Scheme and The Pension Scheme Trust.

The Charity is however unable to identify its share of the underlying assets and liabilities in the schemes and has accounted for contributions as if they were defined contributions schemes as follows:

The amount charged to the statement of financial activities in respect of pension costs is the contributions payable in the year. Differences between contributions payable in the year and contributions actually paid are shown as either accruals or prepayments in the balance sheet.

Amounts included in expenses are allocated between activities on the basis of staff time in line with other support costs.

The Charity has agreed to a deficit funding arrangement and recognises a liability for this obligation. The amount recognised is the net present value of the deficit reduction contributions payable under the agreement that relates to the deficit. The present value is calculated using the discount rate detailed in these disclosures. The unwinding of the discount rate is recognised as a finance cost.

3. DONATIONS, LEGACIES AND SIMILAR INCOMING RESOURCES

	Restricted funds 2021 £	Unrestricted funds 2021 £	Total funds 2021 £	<i>Total funds 2020 £</i>
Coronavirus job retention scheme funding	-	160,950	160,950	-
Donations	-	662,590	662,590	702,775
Legacies	-	108,196	108,196	274,758
Grants	44,941	153,275	198,216	279,246
Other Covid-19 grants	-	116,962	116,962	-
Similar incoming resources	-	37,854	37,854	8,836
Total 2021	44,941	1,239,827	1,284,768	1,265,615
<i>Total 2020</i>	<i>51,461</i>	<i>1,214,154</i>	<i>1,265,615</i>	

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2021

4. INCOME FROM CHARITABLE ACTIVITIES

	Restricted funds 2021 £	Unrestricted funds 2021 £	Total funds 2021 £	Total funds 2020 £
In Patient Unit	700,040	238,186	938,226	936,816
Out Patient Unit	-	48,817	48,817	293,519
Medical	91,169	-	91,169	87,347
Multi Disciplinary Team	38,891	-	38,891	35,067
Bereavement	-	11,577	11,577	6,178
National Health Service England	631,092	-	631,092	-
Total 2021	1,461,192	298,580	1,759,772	1,358,927
<i>Total 2020</i>	<i>770,312</i>	<i>588,615</i>	<i>1,358,927</i>	

NHS England (NHSE) awarded funding to allow the hospice to make available bed capacity and community support from April 2020 to July 2020 to provide support to people with complex needs in the context of the Covid-19 situation and to provide bed capacity and community support from November 2020 to March 2021 for the same purpose.

5. FUNDRAISING INCOME

	Unrestricted funds 2021 £	Total funds 2021 £	Total funds 2020 £
Lottery	238,663	238,663	277,921
Fundraising events	69,292	69,292	159,081
Kitchen income	11,750	11,750	45,410
Charity shop takings	339,562	339,562	480,492
Catering and merchandising income	7,263	7,263	11,985
Total 2021	666,530	666,530	974,889
<i>Total 2020</i>	<i>974,889</i>	<i>974,889</i>	

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2021

6. TRADING ACTIVITIES

	Unrestricted funds 2021 £	Total funds 2021 £	Total funds 2020 £
Charity trading income			
Charity shop takings	339,562	339,562	480,492
Catering and merchandising income	7,263	7,263	11,985
	<u>346,825</u>	<u>346,825</u>	<u>492,477</u>
Fundraising trading expenses			
Charity shop costs	108,602	108,602	133,830
Catering and merchandising costs	4,055	4,055	7,649
Salaries	220,209	220,209	185,767
	<u>332,866</u>	<u>332,866</u>	<u>327,246</u>
	<u>13,959</u>	<u>13,959</u>	<u>165,231</u>
Net income from trading activities	<u>165,231</u>	<u>165,231</u>	<u>165,231</u>
Total 2020	<u>165,231</u>	<u>165,231</u>	

7. COST OF RAISING FUNDS

	Unrestricted funds 2021 £	Total funds 2021 £	Total funds 2020 £
Fundraising expenditure	17,573	17,573	44,659
Lottery costs	93,856	93,856	108,975
Support costs allocated	6,094	6,094	4,028
Wages and salaries	113,396	113,396	168,409
Depreciation	40,108	40,108	40,108
Fundraising trading expenses (note 6)	332,866	332,866	327,246
Total 2021	<u>603,893</u>	<u>603,893</u>	<u>693,425</u>
<i>Total 2020</i>	<u>693,425</u>	<u>693,425</u>	

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**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2021**

8. ANALYSIS OF EXPENDITURE ON CHARITABLE ACTIVITIES

Summary by fund type

	Restricted funds 2021 £	Unrestricted funds 2021 £	Total funds 2021 £	Total funds 2020 £
In Patient Unit	1,315,661	794,704	2,110,365	2,121,623
Out Patient Unit	-	11,985	11,985	201,969
Medical	122,724	114,504	237,228	204,315
Multi Disciplinary Team	70,446	212,720	283,166	269,155
Bereavement & Therapeutic Services	-	172,402	172,402	97,146
Total 2021	1,508,831	1,306,315	2,815,146	2,894,208
<i>Total 2020</i>	<i>821,962</i>	<i>2,072,246</i>	<i>2,894,208</i>	

9. ANALYSIS OF EXPENDITURE BY ACTIVITIES

	Activities undertaken directly 2021 £	Support costs 2021 £	Total funds 2021 £	Total funds 2020 £
In Patient Unit	1,073,198	1,037,167	2,110,365	2,121,623
Out Patient Unit	3,531	8,454	11,985	201,969
Medical	218,622	18,606	237,228	204,315
Multi Disciplinary Team	266,526	16,640	283,166	269,155
Bereavement & Therapeutic Services	156,920	15,482	172,402	97,146
	1,718,797	1,096,349	2,815,146	2,894,208
<i>Total 2020</i>	<i>1,701,649</i>	<i>1,192,559</i>	<i>2,894,208</i>	

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**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2021**

Analysis of direct costs

	In Patient Unit 2021 £	Out Patient Unit 2021 £	Medical 2021 £	Disciplinary Team 2021 £	Bereavement 2021 £	Total funds 2021 £	Total funds 2020 £
Staff costs	1,007,913	3,531	125,375	257,791	152,825	1,547,435	1,505,409
Consumables	36,085	-	-	-	354	36,439	45,712
Drugs	-	-	61,943	-	-	61,943	59,523
Equipment and maintenance	23,946	-	-	-	2	23,948	10,906
Medical and professional fees	3,700	-	31,304	8,735	3,026	46,765	73,947
Travel	821	-	-	-	-	821	5,543
Office costs and sundries	733	-	-	-	713	1,446	609
Total 2021	1,073,198	3,531	218,622	266,526	156,920	1,718,797	1,701,649
Total 2020	1,052,080	128,304	185,231	252,962	83,072	1,701,649	

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2021**

Analysis of Support costs

	In Patient Unit 2021 £	Out Patient Unit 2021 £	Medical 2021 £	Disciplinary Team 2021 £	Bereaveme nt 2021 £	Total funds 2021 £	Total funds 2020 £
Staff costs	648,552	3,764	11,608	9,945	9,084	682,953	684,293
Depreciation	114,327	1,257	2,512	2,512	2,512	123,120	151,859
Kitchen	29,066	-	297	297	-	29,660	64,682
Administration	20,865	-	435	219	217	21,736	29,351
Human resources	8,062	-	83	81	83	8,309	17,185
Management costs	37,194	407	819	819	819	40,058	66,665
Facilities	93,867	3,026	1,008	1,008	1,008	99,917	92,021
IT/Communications	76,980	-	1,672	1,672	1,672	81,996	78,128
Governance costs	8,254	-	172	87	87	8,600	8,375
Total 2021	1,037,167	8,454	18,606	16,640	15,482	1,096,349	1,192,559
Total 2020	1,069,543	73,665	19,084	16,193	14,074	1,192,559	

Support costs have been allocated to activities based on the staff numbers and hours involved in the activities.

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**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2021**

10. AUDITORS' REMUNERATION

	2021 £	2020 £
Fees payable to the Charity's auditor for the audit of the Charity's annual accounts	8,180	7,870
Fees payable to the Charity's auditor in respect of: All non-audit services not included above	50	135
	8,230	8,005

11. STAFF COSTS

	2021 £	2020 £
Wages and salaries	2,304,336	2,293,177
Social security costs	173,560	169,482
Contribution to defined contribution pension schemes	86,097	81,219
	2,563,993	2,543,878

The average number of persons employed by the Charity during the year was as follows:

	2021 No.	2020 No.
Communications	4	3
Fundraising	20	21
Management & administration	9	11
In Patient Unit	57	58
Out Patient Unit	1	4
Medical	2	2
Multi Disciplinary Team	6	6
Support staff	20	21
Bereavement	9	4
	128	130

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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2021

11. STAFF COSTS (CONTINUED)

The number of employees whose employee benefits (excluding employer pension costs) exceeded £60,000 was:

	2021 No.	2020 No.
In the band £70,001 - £80,000	1	1

The total remuneration paid to key management personnel (including national insurance and pension contributions) was £452,296 (2020: £394,046).

Contributions were made to defined benefit pension schemes on behalf of higher paid employees.

The Charity also uses the services of volunteers who assist in the charity shops.

12. COUNCIL MEMBERS' REMUNERATION AND EXPENSES

During the year, no Council Members received any remuneration or other benefits (2020 - *£NIL*).

During the year ended 31 March 2021, no Council Member expenses have been incurred (2020 - *£NIL*).

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**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2021**

13. TANGIBLE FIXED ASSETS

	Freehold land & property £	Motor vehicles £	Fixtures and fittings £	Computer equipment £	Other fixed assets £	Total £
Cost						
At 1 April 2020	3,729,234	39,708	337,452	137,730	-	4,244,124
Additions	2,056	49,020	71,941	25,464	102,968	251,449
At 31 March 2021	<u>3,731,290</u>	<u>88,728</u>	<u>409,393</u>	<u>163,194</u>	<u>102,968</u>	<u>4,495,573</u>
Depreciation						
At 1 April 2020	627,057	35,926	176,539	106,876	-	946,398
Charge for the year	75,690	10,201	51,208	21,372	7,269	165,740
At 31 March 2021	<u>702,747</u>	<u>46,127</u>	<u>227,747</u>	<u>128,248</u>	<u>7,269</u>	<u>1,112,138</u>
Net book value						
At 31 March 2021	<u>3,028,543</u>	<u>42,601</u>	<u>181,646</u>	<u>34,946</u>	<u>95,699</u>	<u>3,383,435</u>
At 31 March 2020	<u>3,102,177</u>	<u>3,782</u>	<u>160,913</u>	<u>30,854</u>	<u>-</u>	<u>3,297,726</u>

Included in freehold land & property is freehold land of £375,000 (2020: £375,000) which is not depreciated.

Included within the net book value of assets is £42,601 (2020 – £nil) relating to assets held under hire purchase agreements.

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**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2021**

14. FIXED ASSET INVESTMENTS

	Investments in subsidiary companies £
Cost	
At 1 April 2020	100
At 31 March 2021	100
Net book value	
At 31 March 2021	100
At 31 March 2020	100

PRINCIPAL SUBSIDIARIES

The following was a subsidiary undertaking of the Charity:

Name	Registered office or principal place of business	Class of shares	Holding
Alice House Trading Limited (dormant) company number 07170334	Alice House, Wells Avenue, Hartlepool, Cleveland, TS24 9DA	Ordinary	100%

The financial results of the subsidiary for the year were:

Name	Net assets £
Alice House Trading Limited (dormant) company number 07170334	3,998

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**NOTES TO THE FINANCIAL STATEMENTS
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15. DEBTORS

	2021 £	2020 £
Trade debtors	56,967	129,182
Other debtors	31,636	50,395
Prepayments	35,254	63,548
Accrued income	275,410	291,013
	399,267	534,138

16. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2021 £	2020 £
Bank loans	80,625	61,324
Trade creditors	123,953	104,485
Pension creditor	16,129	15,916
Amounts owed to group undertakings	3,998	3,998
Other taxation and social security	41,055	42,926
Obligations under finance lease and hire purchase contracts	9,804	-
Other creditors	2,381	7,106
Deferred income	23,012	24,930
Accruals	15,086	11,145
	316,043	271,830

	2021 £	2020 £
Deferred income at 1 April 2020	24,930	33,497
Resources deferred during the year	23,012	24,930
Amounts released from previous periods	(24,930)	(33,497)
	23,012	24,930

Deferred income relates to Lottery money paid in advance.

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**NOTES TO THE FINANCIAL STATEMENTS
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17. CREDITORS: AMOUNTS FALLING DUE AFTER MORE THAN ONE YEAR

	2021 £	2020 £
Bank loans	713,051	544,221
Net obligations under finance lease and hire purchase contracts	30,228	-
	<u>743,279</u>	<u>544,221</u>

The aggregate amount of liabilities payable or repayable wholly or in part more than five years after the reporting date is:

	2021 £	2020 £
Payable or repayable by Instalments	239,539	278,297
	<u>239,539</u>	<u>278,297</u>

The bank loan is repayable in monthly instalments ending February 2028. Interest is charged at 3.365% per annum.

The Coronavirus Business Interruption Loan is repayable in monthly instalments ending November 2026. Interest is charged at 2% above the base rate per annum.

The bank loans are secured by a fixed and floating unlimited debenture and a charge over the land and buildings owned at The University Hospital of Hartlepool.

The hire purchase agreement is secured over the assets to which the agreement relates.

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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2021

18. STATEMENT OF FUNDS

STATEMENT OF FUNDS - CURRENT YEAR

	Balance at 1 April 2020 £	Income £	Expenditure £	Transfers In/out £	Balance at 31 March 2021 £
Designated funds					
Covid retail grants	150,000	-	(150,000)	-	-
General funds					
General funds	2,452,852	2,204,937	(1,760,208)	17,163	2,914,744
Total unrestricted funds	2,602,852	2,204,937	(1,910,208)	17,163	2,914,744
Restricted funds					
Restricted appeal funds	3,961	33,150	(37,111)	-	-
Primary Care Trust	-	777,822	(777,822)	-	-
Pharmacy income	-	52,278	(52,278)	-	-
Capital fund	5,700	11,791	(328)	(17,163)	-
Help the Hospices - fixed asset fund	456,450	-	(10,200)	-	446,250
National Health Service England	-	631,092	(631,092)	-	-
	466,111	1,506,133	(1,508,831)	(17,163)	446,250
Total of funds	3,068,963	3,711,070	(3,419,039)	-	3,360,994

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**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2021**

18. STATEMENT OF FUNDS (CONTINUED)

STATEMENT OF FUNDS - PRIOR YEAR

	<i>Balance at 1 April 2019 £</i>	<i>Income £</i>	<i>Expenditure £</i>	<i>Transfers In/out £</i>	<i>Balance at 31 March 2020 £</i>
Unrestricted funds					
Designated funds					
Covid retail grants	-	150,000	-	-	150,000
General funds					
General funds	2,583,065	2,627,658	(2,765,671)	7,800	2,452,852
Total Unrestricted funds	<u>2,583,065</u>	<u>2,777,658</u>	<u>(2,765,671)</u>	<u>7,800</u>	<u>2,602,852</u>
Restricted funds					
Restricted appeal funds	6,000	41,961	(44,000)	-	3,961
Primary Care Trust	-	718,032	(718,032)	-	-
Pharmacy income	-	52,280	(52,280)	-	-
Capital fund	4,000	9,500	-	(7,800)	5,700
Help the Hospices - fixed asset fund	464,100	-	(7,650)	-	456,450
	<u>474,100</u>	<u>821,773</u>	<u>(821,962)</u>	<u>(7,800)</u>	<u>466,111</u>
Total of funds	<u><u>3,057,165</u></u>	<u><u>3,599,431</u></u>	<u><u>(3,587,633)</u></u>	<u><u>-</u></u>	<u><u>3,068,963</u></u>

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**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2021**

STATEMENT OF FUNDS - (CONTINUED)

Designated funds

Income received in respect of Covid retail grants was fully spent in the year on the costs of maintaining the shops throughout the national lockdowns.

Restricted funds

Restricted appeal funds in the year includes small grants received subject to restrictions. The amounts received were fully spent in the year.

Funding received and attributed directly to charitable activities has been shown as restricted. This includes monies from Durham Dales, Easington and Sedgefield Clinical Commissioning Group, the Hartlepool & Stockton Clinical Commissioning Group, and the Tees Valley CCG which totalled £777,822. The capital fund represents income received for the purchase of fixed assets. Funds received towards new mattresses and IT equipment were fully spent the year.

Pharmacy income represents income from drugs purchased and recharged of £52,278.

The fixed asset fund represents a grant of £510,000 received from the Help the Hospices Fund (NHS England) towards the capital costs of the new Wellbeing Centre. This fund is depreciated in line with the asset.

The NHSE awarded funding to allow the hospice to make available bed capacity and community support from April 2020 to July 2020 to provide support to people with complex needs in the context of the Covid-19 situation and to provide bed capacity and community support from November 2020 to March 2021 for the same purpose.

19. ANALYSIS OF NET ASSETS BETWEEN FUNDS

ANALYSIS OF NET ASSETS BETWEEN FUNDS - CURRENT YEAR

	Restricted funds 2021 £	Unrestricted funds 2021 £	Total funds 2021 £
Tangible fixed assets	446,250	2,937,185	3,383,435
Fixed asset investments	-	100	100
Current assets	-	1,043,269	1,043,269
Creditors due within one year	-	(316,043)	(316,043)
Creditors due in more than one year	-	(743,279)	(743,279)
Provisions for liabilities and charges	-	(6,488)	(6,488)
Total	446,250	2,914,744	3,360,994

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**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2021**

19. ANALYSIS OF NET ASSETS BETWEEN FUNDS (CONTINUED)

ANALYSIS OF NET ASSETS BETWEEN FUNDS - PRIOR YEAR

	<i>Restricted funds 2020 £</i>	<i>Unrestricted funds 2020 £</i>	<i>Total funds 2020 £</i>
Tangible fixed assets	456,450	2,841,276	3,297,726
Fixed asset investments	-	100	100
Current assets	9,661	585,215	594,876
Creditors due within one year	-	(271,830)	(271,830)
Creditors due in more than one year	-	(544,221)	(544,221)
Provisions for liabilities and charges	-	(7,688)	(7,688)
Total	466,111	2,602,852	3,068,963

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

	2021 £	2020 £
Net income for the year (as per Statement of Financial Activities)	292,031	11,798
Adjustments for:		
Depreciation charges	165,740	191,967
Decrease/(increase) in debtors	134,871	(242,163)
Increase in creditors	13,908	72,299
Net cash provided by operating activities	606,550	33,901

21. ANALYSIS OF CASH AND CASH EQUIVALENTS

	2021 £	2020 £
Cash in hand	644,002	60,738
Total cash and cash equivalents	644,002	60,738

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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2021

22. ANALYSIS OF CHANGES IN NET DEBT

	At 1 April 2020	Cash flows	New finance leases	At 31 March 2021
	£	£	£	£
Cash at bank and in hand	60,738	583,264	-	644,002
Debt due within 1 year	(61,324)	(19,301)	-	(80,625)
Debt due after 1 year	(544,221)	(168,830)	-	(713,051)
Finance leases	-	-	(40,032)	(40,032)
	<u>(544,807)</u>	<u>395,133</u>	<u>(40,032)</u>	<u>(189,706)</u>

23. CONTINGENT LIABILITIES

Included in the 2005 financial statements was a grant of £500,000 from the Big Lottery Fund towards the capital costs of the new hospice. This grant agreement remains in force for a period of 80 years and the grant may become repayable if there is a breach of the terms and conditions in this period.

During the financial year 2013/14 and 2014/15 the Hospice received a grant totalling £510,000 from the Help the Hospices Fund (NHS England) towards the capital costs of the new Wellbeing Centre. In the event that the Hospice closes down or the building ceases to be used for the purpose of palliative care of patients, NHS England shall have the right to repayment of all monies advanced under this grant, subject to a reduction reflecting benefits from services already delivered.

24. CAPITAL COMMITMENTS

At 31 March 2021 the Charity had capital commitments as follows:

	2021	2020
	£	£
Contracted for but not provided in these financial statements	<u>4,439</u>	<u>-</u>

25. PENSION COMMITMENTS

The pension cost charge represents contributions payable by the group and amounted to £86,097 (2020: £81,219). Contributions totalling £16,129 (2020: £15,916) were payable at the balance sheet date and are included in creditors.

The group is also making deficit payments and has included the net present value of these payments, £6,488 (2020: £7,688) in provisions.

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**NOTES TO THE FINANCIAL STATEMENTS
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25. PENSION COMMITMENTS (CONTINUED)

The Pensions Trust

The company participates in the scheme, a multi-employer scheme which provides benefits to some 950 non-associated participating employers. The scheme is a defined benefit scheme in the UK. It is not possible for the company to obtain sufficient information to enable it to account for the scheme as a defined benefit scheme. Therefore it accounts for the scheme as a defined contribution scheme.

The scheme is subject to the funding legislation outlined in the Pensions Act 2004 which came into force on 30 December 2005. This, together with documents issued by the Pensions Regulator and Technical Actuarial Standards issued by the Financial Reporting Council, set out the framework for funding defined benefit occupational pension schemes in the UK.

The scheme is classified as a 'last-man standing arrangement'. Therefore the company is potentially liable for other participating employers' obligations if those employers are unable to meet their share of the scheme deficit following withdrawal from the scheme. Participating employers are legally required to meet their share of the scheme deficit on an annuity purchase basis on withdrawal from the scheme.

A full actuarial valuation for the scheme was carried out at 30 September 2017. This valuation showed assets of £794.9m, liabilities of £926.4m and a deficit of £131.5m. To eliminate this funding shortfall, the Trustee has asked the participating employers to pay additional contributions to the scheme as follows:

Deficit contributions

From 1 April 2019 to 31 January 2025: £11,243,000 per annum
(payable monthly and increasing by 3% each on 1st April)

Unless a concession has been agreed with the Trustee the term to 31 January 2025 applies.

The recovery plan contributions are allocated to each participating employer in line with their estimated share of the Series 1 and Series 2 scheme liabilities.

Where the scheme is in deficit and where the Charity has agreed to a deficit funding arrangement the Charity recognises a liability for this obligation. The amount recognised is the net present value of the deficit reduction contributions payable under the agreement that relates to the deficit. The present value is calculated using the discount rate detailed in these disclosures. The unwinding of the discount rate is recognised as a finance cost.

	31 March 2021	31 March 2020	31 March 2019
	(£)	(£)	(£)
Present value of provision	6,488	7,688	9,326

RECONCILIATION OF OPENING AND CLOSING PROVISIONS

	Year Ending 31 March 2021	Year Ending 31 March 2020
	(£)	(£)
Provision at start of period	7,688	9,326
Unwinding of the discount factor (interest expense)	172	118
Deficit contribution paid	(1,594)	(1,548)
Remeasurements - impact of any change in assumptions	222	(208)
Remeasurements - amendments to the contribution schedule	-	-
Provision at end of period	6,488	7,688

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**NOTES TO THE FINANCIAL STATEMENTS
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25. PENSION COMMITMENTS (CONTINUED)

INCOME AND EXPENDITURE IMPACT

	Year Ending 31 March 2021 (£)	Year Ending 31 March 2020 (£)
Interest expense	172	118
Remeasurements – Impact of any change in assumptions	222	(208)
Remeasurements – amendments to the contribution schedule	-	-

ASSUMPTIONS

	31 March 2021 % per annum	31 March 2020 % per annum	31 March 2019 % per annum
Rate of discount	0.66	2.53	1.39

The discount rates shown above are the equivalent single discount rates which, when used to discount the future recovery plan contributions due, would give the same results as using a full AA corporate bond yield curve to discount the same recovery plan contributions.

The charity also makes contributions to the National Health Service Pension Scheme but is not required to make deficit contributions.

26. OPERATING LEASE COMMITMENTS

At 31 March 2021 the Charity had commitments to make future minimum lease payments under non-cancellable operating leases as follows:

	2021 £	2020 £
Not later than 1 year	58,031	72,515
Later than 1 year and not later than 5 years	3,480	8,210
	<u>61,511</u>	<u>80,725</u>

27. RELATED PARTY TRANSACTIONS

During the year the charity paid £13,432 for rent and insurance (2020: £13,385) to a Council Member.

28. GENERAL RESERVES

At 31 March 2021 there is a deficit on unrestricted free reserves of £22,541. Excluding the long term bank loans and the pension deficit, there is a surplus of £696,998.